To optimize its resources and strengthen its other offered services, Stony Brook Eastern Long Island Hospital has decided to decommission its nuclear medicine department.

At a public hearing held Jan. 8, Paul Connor, the hospital’s chief administrative officer, and other medical professionals told concerned attendees that nuclear medicine program is no longer sustainable due to lack of use.

“We’re getting less and less referrals, and that number is dropping,” said Dr. Anthony Mitarotondo, director of Stony Brook Radiology.

In simple terms, nuclear medicine is a diagnostic test that uses small doses of radiopharmaceuticals to detect and treat certain illnesses, such as specific cancers and hyperthyroidism.

Mr. Connor said the average number of visits to a “good” nuclear medicine department should range between 400 or 500 annually. In 2022, the Greenport hospital recorded just 58 such visits.
“Let’s say because we’re small we have maybe 250 or 300 visits; we could live with that, but it’s not going to happen,” Mr. Connor said, adding, “The equipment is reaching the end of life.”

Technological advances have made nuclear medicine tests somewhat obsolete. Anne McDonald-Horan, the hospital’s director of radiology, said PET scans — an imaging test that checks for signs of cancer or other illnesses — have instead become “the golden standard.”

Additionally, maintaining equipment for the nuclear medicine department has already cost the hospital roughly $400,000 to $600,000 in the last couple of years. Continuing to do that — or replacing the equipment — would just be “fiscally irresponsible,” Mr. Connor said.

“We have a full-service imaging department — MRI, CT, sonography, bone density — the imaging suite is in good shape and all our stuff is very current,” Mr. Connor told the audience. “This is the first time since I’ve been here in 24 years that we’ve done this, but we’ve added services.”

These added services include the hospital’s Wound Care Center, which expanded outpatient services to the North Fork and Shelter Island. Mr. Connor also mentioned raising money to expand SBELIH’s emergency room in 2025.

The public hearing was required by the state health department and the decision to terminate nuclear medicine at SBELIH will not be subject to a vote. Once the hospital has submitted the proper documents to the state, it will be notified when it can officially decommission the service.

After the official state approval, the equipment will be removed. The nuclear liquid used for the tests must be disposed of as well.

“There’s no seepage, no issues or cross-contamination,” Ms. McDonald-Horan said of that process.

Mr. Connor said the hospital plans to repurpose the space to expand its sonography services in the next 18 months.

He also said the shutdown of the nuclear medicine department will not affect staff employment. Those who needs to make an appointment for a nuclear medicine test will now be referred to Stony Brook Southampton or Stony Brook University Hospital.