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ISSUE 1, MARCH 2019

# the magazine of the australasian sonographers association sound





# EARLY BIRD REGISTRATION CLOSING SOON



THE 26TH ANNUAL CONFERENCE OF THE AUSTRALASIAN SONOGRAPHERS ASSOCIATION Brisbane Convention & Exhibition Centre, 21–23 June 2019

# from the editor

Welcome to the March issue of your member magazine.

In this issue we provide an outline of the program for ASA2019 Brisbane and a timely reminder to register early to get your early bird discount rate and preferential workshop selection.

Our feature article is by sonographer Trung Nguyen who temporarily traded life in the big smoke and moved away from his family in Sydney. Trung accepted a sonographer-in-training placement in Katherine and tells us how training in a rural region was a great experience.

We announce and congratulate further inductees into the ASA Fellowship Program. For those who are curious about the pathway to ASA Fellowship, we put the process under the microscope and provide details of what is needed for you to start the journey.

The third pillar of the ASA Strategic Intent 2018-2020 is reviewed in this issue, and in our third 'meet the team' feature, we introduce the Sonographer Policy and Advisory Committee.

Our advocacy feature looks at the federal budget and its implications for the sonography profession as well as our ongoing advocacy work through various government consultations.

In our person profile the spotlight is on ASA Board member Anthony Wald, who talks about his commitment to volunteering and shares his passion for sonography.

Our branch reports for this issue are from your colleagues in metropolitan areas. As always, a big shout out and thank you to all our branches and members who continuously support the ASA by volunteering their time to plan, organise and present at ASA educational activities each month, as well as those of you who attend these events.

wh&s matters features a guest contributor for this issue: Coach Rozv presented at ASA2018 Sydney and recently hosted an asawebinar in a further follow-up on how sonographers can stabilise and mobilise their bodies and the functionality of the psoas muscle.

research matters explores Looking beyond clinical research: Social science research in sonography.

Don't forget we would love to hear from you to share your story. We're always interested in the journeys or pathways that sonography takes our members.

Happy scanning and reading!

Carol De La Haye, Editor communications@sonographers.org









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# president's **message**

2019 is well underway and there is much for ASA Members to be excited about!

Towards the end of 2018, the ASA Research Grant was again offered and bestowed on two recipients. The first project is fully funded from The University of Canberra. They will be researching the challenges of clinical placements and sonographer training positions in an effort to provide a sustainable sonographer workforce. The other successful group from Monash Health and the Baker Heart and Diabetes Institute received partial funding of their project, researching the cardiovascular toll of preeclampsia and the impact on maternal, fetal and placental vasculature.

The ASA Board met in February to review the Strategic Intent and direction for the coming year. The priorities have not changed as the ASA continues on a path of growth, advocacy and development.

The Member Survey clearly outlined 'what the ASA members want' from the ASA. These include access to professional development and CPD events, access to resources and support, and the ability to network within a professional community.

Branch meetings are a great way to network with your local colleagues close

to home and earn CPD points. There are 21 ASA branches in Australia and 3 in New Zealand. Check out *cross section* or the ASA website for the next branch meeting local to you and register to attend. Presenting at your local branch, especially on interesting case nights and presenting a case study can earn extra CPD points while sharing what you have learnt with your fellow sonographers.

The Member Survey also highlighted advocacy and keeping up to date with industry change. Jodie Long and the ASA Policy Advisor, James Brooks-Dowsett, have been meeting with government advisors and politicians to further the strategic goals of the ASA. With the looming federal election there are many people to meet and discuss sonographer registration, workforce shortage and the Medicare freeze.

As you have hopefully read in *cross* section, the Pru Pratten Memorial, Sonographer of the Year Award, has been revised to recognise lifetime achievement in sonography. There are three categories: Service to the ASA, Mentoring and Training, and Service to Humanity and Innovation. We hope that the Pru Pratten Memorial Lifetime Achievement Award (PPMLA) will continue to inspire us all to achieve, contribute and share our knowledge and

#### Vale – Nancy Cappello

The ASA was saddened to learn of the passing of Nancy Cappello PhD. Nancy was instrumental in having the first US breast density notification state law passed, and in raising awareness of the relationship between breast tissue density and cancer risk. Nancy was awaiting a bone marrow transplant to treat myelodysplastic syndrome, a type of cancer thought to be related to the aggressive chemotherapy she had received years earlier for her original breast cancer. Our thoughts are with the Cappello family and Nancy's colleagues.

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skill. The Pru Pratten Memorial Lifetime Achievement Award, along with the Fellowship Awards, will be presented at the ASA2019 Gala Dinner.

In November 2018, I was most honoured to be re-elected as ASA President. I would like to thank the ASA Board of Directors for their support. It is also a privilege to be serving the ASA Members for another year.

Unfortunately Erika Cavanagh stepped down from the position as ASA Vice President to pursue further study. Erika's contributions as ASA Vice President have been invaluable and I thank her for her dedication and passion that she brought to the role. I am excited to be joined by lan Schroen, the new ASA Vice President. Ian and I will work together over the coming year, strategically guiding the ASA to further stability and prosperity as the peak body and leading voice for sonographers.

Jennifer Alphonse ASA President

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# update from the ceo



It is hard to believe that we are in the third month of 2019 already!

In our member survey last year, quality education was one of the top priorities that you, our members, valued as part of your ASA membership. As such, this year we are planning to increase the number of Travelling Workshops to at least 20 around Australia and New Zealand, to increase access to professional development and assist you in accumulating your CPD points. The Education and Advisory Committee is also developing a comprehensive asawebinar series for this year and we will be adding to our online learning options throughout the year. Make sure you check cross section for new CPD initiatives or visit the Events Calendar on the ASA website. A special thank you to our 2019 platinum partners GE Healthcare and Philips Healthcare for supporting the ASA to provide a range of professional development opportunities throughout the year.

The annual conference is our key educational event on the ASA calendar, catering for varying ability levels and all streams, including non-clinical, across three days. As a reminder, this year we have introduced dedicated student and clinical supervisor streams on the Friday; we have also provided you with substantially more workshops across the three days. We are incredibly proud to continue with the tradition of the original ASA Conference Committee who created 'The conference for sonographers, by sonographers.' In keeping with tradition, the Program Committee is comprised of sonographers wanting to create an inspirational program for their peers. Early Bird registrations close 15 April, so make sure you register before then to be in the first wave of workshop allocations, as well as receiving the significant registration discount.

It is time to renew with ASAR and I would encourage you all to select PD-**asa** and let the ASA do the hard work for you. We can manage your points so you don't have to, and keep you updated on your progress throughout your triennium. We can also help you find ways to obtain your 60 CPD points.

Volunteering is at the heart of the ASA. I'd like to thank all of you who have put your hands up again this year to assist us in creating professional development and networking events, as well as serving on our Special Interest Groups and committees. Being part of a committee or group is a rewarding experience; for anyone who would like to volunteer, there is a link on the ASA website. The opportunity to start volunteering is open all year round. No matter what your level of involvement, your contribution is very much valued by the ASA and its members.

It was great to hear your positive feedback regarding the new initiative, *Making Waves in Sonography Research*. This is a valuable resource for many of you who are time poor; it will keep you up to date on the latest research and its clinical impact. The publication is thanks to the hard work of our Special Interest Group members who worked tirelessly reading and analysing the latest research articles relating to sonography. The next edition will arrive in your inbox in July.

Our sonographer advocacy efforts have continued where they left off at the end of last year, building on the networks and relationships that we developed in 2018. I encourage you to read the advocacy feature which outlines advocacy initiatives the ASA has been undertaking on behalf of the profession, with a focus on sonographer regulation and our workforce shortage, including submitting the ASA's first governmental pre-budget submission.

Be on the lookout in *cross section* and our website news feed as we continue to work towards raising the profile of sonography and ensuring that 'a sonographer is known as the expert in ultrasound across the community'.

Jodie Long CEO@sonographers.org



# Empowering Concise Workflow LOGIQ™ E10 Ultrasound Photo Assistant

The LOGIQ E10<sup>™</sup> applications help improve efficiency with concise workflow solutions for patients in a wide range of clinical scenarios.

Our new application for smart devices enables clinicians to photograph relevant anatomy – such as ulcerations, redness, or swelling – during a study. This visual can be included with the clinical images in the patient study to provide valuable context for diagnostic and treatment decisions.

### gehealthcare.com.au





# advocacy feature

## Advocacy work of the ASA on your behalf

The ASA is the voice of over 5.800 sonographers across Australasia and we have been speaking on your behalf to many politicians and health departments to create awareness of the profession and to seek action for change on the issues facing sonographers.

#### Work to date

In September last year the ASA enlisted a government engagement agency to help the ASA to connect with the governments of Australia. Building and maintaining relationships with Australian and New Zealand politicians and other government representatives is important for us to achieve:

- regulation for Australian sonographers under the National Registration and Accreditation Scheme
- increasing clinical training placements for more student sonographers to address the critical sonographer workforce shortage across Australia and New Zealand.

During this time the political landscape has been quite turbulent, with multiple state and federal elections and political infighting which does provide some opportunity; however, it mostly creates a lot of barriers and distractions affecting the ease with which meetings can be secured. Despite this our agency has facilitated many meetings with state and federal politicians and other government representatives across the last few months.

In addition the agency provides strategic advice on how best to engage the

individual politicians and their advisors to maximise the impact of these meetings and has assisted in developing a onepage brief to provide the politicians with other resources, such as the ASA 2019–20 Federal Budget pre-budget submission, which is the first time the ASA has made a pre-budget submission to the Australian Federal Government.

#### What has been the response to sonographer regulation in Australia?

Most state and federal representatives that we have met with so far are genuinely shocked and surprised that sonographers are not nationally regulated in Australia. Usually, they have experienced a sonographer-administered comprehensive medical diagnostic ultrasound examination and assumed the sonographer was regulated and most likely under the National Registration and Accreditation Scheme (NRAS).

It is encouraging to hear that there is general support from across governments for sonographers to be nationally regulated. However, both politicians and the ASA recognise that adding a new profession to the NRAS is a lengthy and difficult process because it involves getting the agreement of all Australian governments to change their respective state, territory or federal law to make this happen.

#### What has been the response to the sonographer workforce shortage in Australia?

There has also been a positive interest in discussing options to provide more

#### **James Brooks-Dowsett** ASA Policy and Advocacy Advisor

clinical training placements for student sonographers to address the critical sonographer workforce. Unfortunately there is no silver bullet to this issue and the ASA will continue to work with employers, educators and governments to identify and trial options to begin chipping away at this complex issue.

#### Sonographer education and workforce shortage in New Zealand

With the demise of the DMU in New Zealand and a significant workforce shortage across the country, the ASA has been actively meeting with key New Zealand stakeholders to work on solutions. With the New Zealand government currently assessing where to invest in health workforce solutions over the next few years, now is the time to be advocating their support of the sonography profession. We are continuing this work throughout March, next meeting with the National Radiology Advisory Group and the workforce area of the Ministry of Health.

This year will be a big year, setting many new precedents. These activities are great steps forward for the ASA as the peak body and leading voice for sonographers. They will enhance the recognition of the ASA as a significant peak body and considerably increase awareness of the profession. Keep an eye on our website news and weekly cross section newsletter for updates on recent advocacy activities and submissions.

## A picture is worth a thousand words

As a sonographer you specialise in seeing risk before it becomes a problem. So, when a claim catches you off guard, you need an insurer with the experience to see the bigger picture.

As the endorsed insurer for the ASA, we are working together to develop insurance products that keep pace with the changing needs of the sonography profession.

#### 1800 810 213 guildinsurance.com.au

Association ongoing projects, lobbying and research through payment of referral fees. Please refer to the policy wording and policy schedule for details. For more information call 1800 810 213. SON25755

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#### Welcome to ASA2019 Brisbane – the only conference founded as 'for sonographers by sonographers'

On behalf of the ASA2019 Brisbane Program Committee, we welcome you to join us for the ASA's 26th Annual Conference from 21 to 23 June 2019. Our conference is the largest educational event 'for sonographers by sonographers', covering all disciplines across all skill levels in Australia and New Zealand.

DAY ONE | FRIDAY 21 JUNE 2019 REGISTRATION | 8.30 AM OPENING PLENARY | SESSION ONE

Welcome to country

00 PM

International keynote speakers Jennie Durant (general - USA), Dr Mark Cresswell (MSK - Canada), Tim Hartshorne (vascular - UK) and Dr Ligita Jokubkiene (O&G – Sweden) will be joined by national keynote speakers Cain Brockley (paediatrics), Professor Sailesh Kumar (O&G), Greg Lammers (MSK), Dr Martin Necas (vascular), Dr Sofie Piessens

(O&G), Dr Bo Remenyi (cardiologist paediatric) and Marilyn Zelesco (general).

This year we have introduced two new streams on the Friday, specifically tailored for clinical supervisors and students. There are also six concurrent workshop streams on Saturday and five on Sunday, so there will always be something of interest for you to attend.

I FCTURE BOOM 3

#### 📸 Abdominal 📗 Breast 📓 Cardiac 🛛 MSK 🔄 Non-clinical 🐱 O&G 😤 Paediatric 📑 Small parts 🔄 Student 📗 Vascular

The Future Directions Forum will take place on day two of the conference and we invite all members to join our panel in planning for the future by addressing issues facing our profession.

The ASA Welcome Reception on Friday evening and the Gala Dinner on Saturday night will give you a chance to relax and

have a fantastic time with old colleagues as well as make some new connections.

Below is an outline of the education program taking place at the Brisbane Convention and Exhibition Centre.

Looking forward to seeing you there!

	CH   12.00-1.00 PM					
			WORKSHO	DPS		
	SCANNING RM 1 🛞	SCANNING RM 2 👺	SCANNING RM 3	SCANNING RM 4 Control of the Activity	SCANNING RM 5	SCANNING RM
0 PM	2A   SMALL PARTS	2B   BREAST	2C   PAEDIATRIC	2D   ABDOMINAL	2E   CLINICAL SUPERVISORS	2F   STUDENTS
1.00–1.40 PM	Ti-RAD classifications	Ultrasound of breast implants Frauke Lever	Cranial ultrasound Sara Kernick	in development	Stress management Training in obstetrics Paula Kinnane	Delivering bad news lan Schroen Communication strat the ultrasound exami Suean Pascoe
1.50-2.30 PM	2G   SPONSORED WORKSHOP	2H   SMALL PARTS	21   ABDOMINAL	2J   PAEDIATRIC	2K   CLINICAL SUPERVISORS	2L   STUDENTS
	in development	in development	F.A.S.T. scanning techniques Philip Miller	Neonatal spine workshop Allison Holley	Teaching in the private environment Deb Moir & Michelle Wilson Approach to teaching Sandra O'Hara	Basic report writing f students and new gra <i>Craig Collins</i> Answering the clinical o <i>Suean Pascoe</i>
AFTE	ERNOON TEA   2.30–3.00 PM					
	3A   MSK	3B   SPONSORED WORKSHOP	3C   VASCULAR	3D   OBSTETRIC	3E   CLINICAL SUPERVISORS	3F   STUDENT
3.00–3.40 PM	Getting to know your pecs		Peripheral arteries	Termination in Queensland (new legislation and	Time management	Basics of research. H get started
3.00	Paula Gillam	in development	Martin Necas	scanning pretermination) Dr Carol Portman	Topic TBC Alison White	Open Q&A with panel anything and everyth
	3G   PAEDIATRIC	3H   GYNAECOLOGY	3I   SPONSORED WORKSHOP	3J   MSK	3K   CLINICAL SUPERVISORS	3L   STUDENT
3.50–4.30 PM	Carotids, thoracic outlet syndrome and arm arteries <i>Tim Harshorne</i>	Advanced gynaecological workshop Tammy Tran	in development	Ultrasound of the hands and fingers Greg Lammers	Dealing with the underperforming student <i>Suean Pascoe</i> How to have the difficult conversation <i>Suean Pascoe</i> Tools of assessment	Student presentation 5 slides, in 5 minutes

F-12	Welcome from convenors	
1   10.00 AM-12	Welcome from the ASA President	
1 10	Guest speaker presentations	
LUN	CH   12.00–1.00 PM	
		ORAL PR
	LECTURE ROOM 1	LECTU
	VASCULAR	MUSCU
M	Arm arteries – including thoracic outlet syndrome <i>Tim Hartsthorne</i>	Brachial plexus: Injuries and Dr Mark Cresswell
Δ.		

2   1.00-2.30 PM	VASCULAR	MUSCULOSKELETAL	OBSTETRIC
	Arm arteries – including thoracic outlet syndrome <i>Tim Hartsthorne</i>	Brachial plexus: Injuries and assessment. What can we see? Dr Mark Cresswell	Topic TBC Dr Ligita Jokubkiene
	Peripheral arterial duplex ultrasound <i>Martin Necas</i>	Proffered paper	Proffered paper
	Proffered paper	Ultrasound of the carpometacarpal joint of the thumb Greg Lammers	Proffered paper
	Live debate/Open mike session	Snap, crackles and pops ultrasound for MSK pathologies <i>Dr Colin Chong</i>	Topic TBC Dr Sofie Piessens
	Live debate/Open mike session	Q&A	Proffered paper Q&A

ESENTATIONS

AFTERNOON TEA | 2.30–3.00 PM

	GENERAL / SMALL PARTS	PAEDIATRIC	BREAST
3.00-5.00 PM	Ultrasound of the bowel Carolynne Cormack	Paediatric MSK Cain Brockley	Phyllodes tumours: what's the story? Jenny Parkes
	Abnormal lymph nodes: size doesn't matter Martin Necas	Ultrasound of superficial pathology in/around head in children Dr Gillian Long	Proffered paper
	Proffered paper	Spinal pathologies Dr Jane McEniery	in development
	What you see is what you get: Ophthalmic sonography Jennie Durant	Cranial ultrasound Glenda McLean	Proffered paper
- 		The teenage abdomen Dr Mark Phillips	in development
	Sonography of the acute scrotum Marilyn Zelesco	Proffered paper	in development
			in development

ASA WELCOME RECEPTION 5.00-7.00 PM

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Please note that this program is correct at the time of printing and is subject to change. For the most up-to-date program please visit the website www.sonographersconference.com





#### DAY TWO | SATURDAY 22 JUNE 2019

REGISTRATION | 7.30 AM

#### AWARDS OF EXCELLENCE BREAKFAST

	ORAL PRESENTATIONS								
	LECTURE ROOM 1	LECTURE ROOM 2	LECTURE ROOM 3	LECTURE ROOM 4					
	CARDIAC	MSK	0&G	GENERAL / SMALL PARTS					
4   9.00-10.30 AM	Acute rheumatic fever Dr Bo Remenyi	Difficulty of shoulder ultrasound. Beyond the normal scan Dr Mark Cresswell	Uterine fibroid embolisation Dr Luke Danaher	CEUS in the abdomen – an overview of applications					
	in development	Proffered paper	Deep infiltrating endometriosis Dr Sofie Piessens	Marilyn Zelesco					
	heumatic heart disease – an urban xperience <i>(ristin Rhodes</i>		Pelvic floor – a physio perspective Sue Colt	Understanding the pancreas Jennie Durant					
		Proffered paper							
	Rheumatic heart disease (incl. live scanning) Dr Bo Remenyi	Hamstrings Michael Foster-Greenwood	Gynaecology Dr Ligita Jokubkiene	Proffered paper					
		Q&A	Di Ligita voltabriono						

#### MORNING TEA | 10.30–11.00 AM

	CARDIAC	MSK	0&G	VASCULAR
2   11.00 AM -1.00 PM	Affective reflection for building resilience Allison White	Ultrasound of nerve entrapments Greg Lammers	Carrier screening Matthew Burgess	Varicose veins Deb Coghlan
	Proffered paper	Ultrasound in groin and athletic pubalgia Michael Foster-Greenwood	Breaking bad news Dr Carol Portmann	Chronic DVT, a frequently missed entity <i>Martin Necas</i>
	Training sonographers not picture takers Kate Marriott	Ultrasound of the anterior thigh Greg Lammers	NIPT Dr Jackie Chua	Morphology within the small saphernous veir Isabelle Concepcion
	Proffered paper	UCL and Stener lesions of the thumb Aaron Fleming	Advanced first trimester ultrasound Dr Rob Cincotta	Sonographic appearances following cyanoacrylate/thermal ablation <i>Dr Rebecca Magee</i>
	Proffered paper	Ultrasound assessment of the elbow Mehrnaz Clifford	Fetal cardiac Dr Alex Gooi	Abdominal venous obstructions and venous stenting James Maunder
	Beyond ejection fraction (incl. live scanning) Dr Adrian Chong	Shoulder bursitis/impingement and other causes of shoulder pain <i>Craig Winnett</i>	MFM Dr Sailesh Kumar	Proffered paper
		Q&A	Q&A	Q&A

LUNCH | 1.00-2.00 PM

I	CARDIAC		BREAST	VASCULAR			
	Amyloid and the heart Dr Peter Mollee	Ultrasound assessment of the hip joint Dr Mark Cresswell	in development	Pitfalls of the unwary sonographer <i>Tim Hartsthorne</i>			
.30 PM	Proffered paper	Proffered paper	in development	Proffered paper			
6   2.00–3.3	The unexpected congenital heart disease (incl. live scanning) <i>Justin Gordon</i>	Advanced Achilles Greg Lammers	in development	Carotid duplex ultrasound: caveats and complexities <i>Martin Necas</i>			
	Correlation between ejection fraction/stroke	Proffered paper	in development	Proffered paper			
	volume (incl. live scanning) Dr Arnold Ng	Common MSK injuries and assessment from Emergency Dr Madeline Martin	in development	A more holistic approach to improve AVF scan quality Donna Oomens			

	IDS OF EXCELLENCE BREAKFAST		WORKSHO	PS		
	SCANNING RM 1 🛞	SCANNING RM 2 🥁	SCANNING RM 3	SCANNING RM 4 Section activities	SCANNING RM 5 🛞	SCANNING RM 6
M	4A   NON CLINICAL	4B   MSK	4C   BREAST	4D   VASCULAR	4E   PAEDIATRIC	4F   SPONSORED WORKS
9.00-9.40 AM	Topic TBA Catherine Robinson	Fundamentals of the foot Lance Gellweier	Ultrasound of the axilla Subodha Bassett	Varicose veins Deb Coghlan	Paediatric hip ultrasound Cain Brockley	in development
	4G   ABDOMINAL	4H   OBSTETRIC	41   VASCULAR	4J   OBSTETRIC	4K   MSK	4L   PAEDIATRIC
9.50-10.30 AM	Ultrasound of the acute appendix <i>Celeysce Chan</i>	Fetal cardiac Alison Lee-Tannock	Fistula workshop Donna Oomens	Topic TBA Dr Alex Gooi	Basic tips on the assessment and scanning of MSK injuries from Emergency <i>Chris Lewis</i>	Paediatric abdomen Jennifer Dopheide
NORN	NING TEA   10.30–11.00 AM					
AM	5A   PAEDIATRIC	5B   SPONSORED WORKSHOP	5C   GYNAECOLOGY	5D   NON CLINICAL	5E   MSK	5F   GENERAL/SMALL PA
11.00-11.50 /	Paediatric bowel pathology Cain Brockley	in development	in development	Perinatal mood disorders Gaye Foster	Hamstrings Michael Foster-Greenwood	Ultrasound of the eye Brian Gilling
	5G   MSK	5H   PAEDIATRIC	5I   SPONSORED WORKSHOP	5J   ABDOMINAL	5K   NON CLINICAL	5L   GYNAECOLOGY
12.00–12.50 PM	Dynamic assessement of the upper limb <i>Dr Mark Cresswell</i>	Paediatric chest Michael Woolgar	Topic TBC Lisa Hackett proudly sponsored by Siemens Healthineers	Shear wave elastography of the liver – technique Sandra O'Hara	NDIS Geraldine McKinnon	Gynaecology workshop Dr Sofie Piessens
UNC	H   1.00-2.00 PM					
Σ	6A   SPONSORED WORKSHOP	6B   GENERAL/SMALL PARTS	6C   NON CLINICAL	6D   PAEDIATRIC	6E   ABDOMINAL	
2.00–2.40 PM	in development	Ultrasound of the bowel Carolynne Cormack	Topic TBC Bernie Mason	Paediatric hip ultrasound Cain Brockley	Targeted ultrasound of the liver – including segments Marilyn Zelesco	Knee/lateral ligaments a beyond <i>Michelle Fenech</i>
	6G   NON CLINICAL		61   OBSTETRIC	6J   SPONSORED WORKSHOP	6K   GENERAL/SMALL PARTS	6L   NON CLINICAL
2.50-3.30 PM	Peer review workshop Glenda McLean	Ultrasound assessment of the elbow Mehrnaz Clifford	Fetal workshop Teresa Clapham	in development	Interactive abdominal anatomy session Dr Craig Hacking	in development

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AFTERNOON TEA | 3.30–4.00 PM

SESSION 7 – FUTURE DIRECTIONS FORUM (ALL DELEGATES) | 4.00–5.30 PM

ASA GALA DINNER + PRU PRATTEN MEMORIAL LIFETIME ACHIEVEMENT AWARD 2019 PRESENTATION & NEW FELLOWS OF THE ASA | 7.00 PM-12.00 AM

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#### DAY THREE | SUNDAY 23 JUNE 2019

ORAL PRESENTATIONS							
LECTURE ROOM 1	LECTURE ROOM 2	LECTURE ROOM 3					
GENERAL/SMALL PARTS	PAEDIATRIC	0&G					
Sound advice: Interesting case studies	Paediatric abdominal masses Cain Brockley	Topic TBC Dr Sailesh Kumar					
Jennie Durant	Paediatric chest pathology Dr Umesh Shetty	Topic TBC Dr Sailesh Kumar					
Ultrasound and liver disease – HCC surveillance and beyond Dr Richard Skoien	Paediatric gynaecology Michael Woolgar	Topic TBC Nicole Robertson					
Shear wave elastography basics and liver applications Sandra O'Hara	Biliary atresia Claire Morrissey	Fetal cardiac Alison Lee-Tannock					
The role of ultrasound in the diagnosis of penile fracture	Haemangiomas Dr David Lisle	Topic TBC Erika Cavanagh					
Donna Napier	in development	Fetal brain <i>Larissa Bligh</i>					
INCH   11.00–12.00 AM							
VASCULAR MUSCULOSKELETAL GENERAL/SMALL PARTS							

Lateral foot and ankle: Lateral ligaments beyond the lateral

Approach to muscle tears. Why and how to predict muscle

REGI	REGISTRATION 8.00 AM							
	WORKSHOPS							
5 AM	SCANNING RM 1 🛞	SCANNING RM 2 👺	SCANNING RM 3 Breithingers	SCANNING RM 4 CANON MEDICAL SYSTEMS AND PTY LIMITED	SCANNING RM 5 👺			
<b>⊢9.3</b> 5	8A   VASCULAR	8B   GENERAL/SMALL PARTS	8C   MSK	8D   GYNAECOLOGY	8E ABDOMINAL			
9.00-	Renal arteries Rhyan Priestley	in development	Advanced Achilles Greg Lammers	Imaging of the cervix in pregnancy Sandra O'Hara	in development			
5 AM	8F BREAST	8G VASCULAR	8H ABDOMINAL	81   MSK	8J   0&G			
9.40–10.15	in development	Popliteal artery entrapment syndrome <i>Tim Hartshorne</i>	in development	Dynamic assessment of the lower limb <i>Dr Mark Cresswell</i>	in development			
0 AM	8K   ABDOMINAL	8L   BREAST	8M   0&G	8N   MSK	80   VASCULAR			
10.20-11.00	Visualisation of upper abdominal anatomy Dr Julie Archbold	in development	in development	Nerves of the tarsal tunnel Dr Colin Chong	Aorto-iliacs Bridget Taylor			



CLOSING PLENARY | 1.30-2.00 PM | SCIENTIFIC QUIZ PRIZE DRAWS, PASSPORT PRIZE DRAW, AWARD PRESENTATIONS, ASA2020 LAUNCH, CONFERENCE CLOSE

ligament

tears

0&A

Michelle Fenech

in development

Dr Mark Cresswel

#### What's new at ASA2019 Brisbane International keynote speakers enhanced student stream

AAA assessment from a surgeon's point of view



AAA screening

Tim Hartshorne

Dr Toby Cohen

Jacqui Robinson

Rebecca Hetherington

Coeliac and mesenteric arteries

EVAR leaks

0&A

12.

This year the program features a tailored stream focusing on issues that

face new sonography graduates, but may not be addressed through the university curriculum. Selected by Program Committee sonographers who understand the challenges facing new sonographers, sessions will include: delivering bad news to the patient, how to effectively describe sonographic findings to clinicians, and interaction and communication in awkward clinical situations. These interactive sessions will provide critical skills that prepare participants for practice upon graduation. The perfect opportunity to interact with potential future employers in a relaxed environment, whilst gaining industry insight.



### Dr Mark Cresswell

is a musculoskeletal radiologist at St Paul's Hospital, Vancouver, with a sub-special

interest in sports injuries. Mark did his undergraduate training in anthropology and medicine in South Africa. He initially specialised in anaesthesia including pain management before moving to a radiology residency at St Mary's Hospital in London and being awarded a musculoskeletal fellowship in Oxford. He moved to Vancouver in 2007 and comanaged imaging at the 2010 Vancouver Olympic and Paralympic Games. He has been actively involved with Medecins Sans Frontieres for the past 15 years, and works on field for the Vancouver Rugby Sevens and Whistler Ski Patrol.

#### Jennie Durant

Sonography in portal hypertension

Marilyn Zelesco

Dr Don McLeod

Gallbladder ultrasound

Thyroid

0&A

is a multi-credentialed sonographer with over 30 years' of clinical and educational experience. She is the CEO of

STARSS, travelling to educate physicians and sonographers in advanced sonography techniques. She has worked in vascular surgery, neurology, urology, ophthalmology, perinatology, paediatric radiology and paediatric cardiology. Jennie has been a Program Director and Clinical Coordinator of two sonography programs and served on national and local sonography boards and committees. She has authored two fetal echo books, developed a vascular review app and a first-of-its-kind Situs wheel for use in obstetric sonography. Jennie Durant's passion IS sonography! She enjoys educating and inspiring others to reach for the STARSS, and to have fun doing so.



Tim Hartshorne is the Chief Clinical Vascular Scientist for the Leicester Vascular Institute based at the Glenfield Hospital.

East Midlands UK. Tim has 34 years' experience working as a vascular scientist and has maintained a significant clinical commitment throughout this period. He has been involved in a number of initiatives including one-stop clinics, vascular limb salvage service, rapid access transient ischaemic attack clinics and ultrasound-based endovascular aneurysm repair surveillance. He was involved with the National Abdominal Aortic Aneurysm Screening Program and acts as quality assurance lead for the local Leicestershire Program. He has been involved in studies including the accuracy of aortic diameter measurement using ultrasound and also co-authored a book on vascular ultrasound. He will be sharing his experience of vascular scanning and the future role of ultrasound in the management of vascular disorders.

> Dr Ligita Jokubkiene is a consultant at the Deparment of Obstetrics and Gynaecology, Skane University Hospital (SUH) in

Malmö, Sweden. Alongside her work in the Obstetrical Unit, Ligita performs ultrasound diagnosis of endometriosis, ovarian and endometrial pathology and pelvic floor injuries along with ultrasound examinations for fetal malformations. Ligita trained at Kaunas University in Lithuania, then moved to Sweden to SUH, ioining the ultrasound unit in 2008. She started research on diagnosis of ovarian

and endometrial pathology at Lund University, completing her PhD with a thesis titled Three-dimensional ultrasound studies of normal and abnormal ovaries. Ligita also served as Editor for the Journal of Ultrasound in Obstetrics and Gynaecology and is now the Head of the Obstetrics and Gynaecology course in Malmö. Ligita participates in multicentre IOTA. IETA and IDEA studies and runs several departmental research projects, supervising PhD and medical students and is clinical supervisor for residents. She is a published author of research papers in international journals and teaches advanced courses in gynaecological ultrasound.

Please note that this program was correct at time of printing and is subject to change. For the most up-to-date program please visit www.sonographersconference.com

# asa employer **aWards**

#### National keynote speakers



Cain Brocklev is the Chief Sonographer at the Royal Children's Hospital in Melbourne, where he has been employed for 19 years.

Cain has been involved in a number of research and academic projects and regularly presents at a range of educational events as well as local and national conferences.

Cain served on the Board of Directors of the ASA for six years and was President from May 2012 to July 2014.



#### Prof. Sailesh Kumar

is Head of Discipline for Obstetrics and Gynaecology at the University of Queensland's School

of Medicine and Senior Staff Specialist in maternal and fetal medicine/O&G at the Mater Mothers' Hospital in Brisbane. Australia. He is also co-head of the Mothers. Babies and Women's Health research theme at the Mater Research Institute - University of Queensland. He trained in O&G in Singapore, UK and Australia and has a Doctor of Philosophy from the University of Oxford. His area of research interest is in fetal therapy/ imaging and placental biomarkers.

#### Greg Lammers



has been scanning since 1989 with time spent working in London from 1990-94. He has held several positions as a chief

sonographer, tutor, university lecturer and DMU examiner. Greg regularly presents at local, state, national and international meetings, including charity work in Myanmar (Burma) in 2014. His

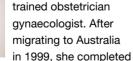
(14) **sound**effects news

last 20 years has seen him specialise in musculoskeletal ultrasound, its science but also its craft and looking for good patient outcomes. In over 25 years of scanning, Greg's passion has not waned and he still finds this an amazing and privileged career. He is very much looking forward to being part of an exciting MSK program at ASA2019.



completed training in general and vascular ultrasound in Seattle, USA in 1996 and subsequently attained a Master's Degree in Sonography at the University of South Australia in 2007. Martin has practised diagnostic ultrasound in USA, New Zealand and Australia in a wide variety of clinical settings ranging from private centres to tertiary teaching hospitals. Martin is an ultrasound enthusiast, keen clinical instructor, lecturer, author of several landmark scientific papers and a prolific conference speaker. He is an author of a range of journal articles as well as a book titled Artifacts in Diagnostic Medical Ultrasound.



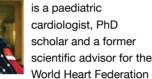


O&G ultrasound subspecialty training (COGU) at Monash Medical Centre and the Royal Women's Hospital in Melbourne. She is a consultant at the imaging department at Monash Health in Melbourne and works in three private practices in Melbourne that specialise in women's ultrasound. Her special interest is gynaecological ultrasound, particularly the non-invasive diagnosis

of deep infiltrating endometriosis. She is passionate about raising awareness and improving the diagnosis of deep infiltrating endometriosis among the wider imaging community through national and international conferences, hands-on workshops and online tutorials.

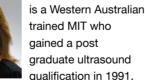


#### Dr Bo Remenvi



on rheumatic fever and rheumatic heart disease. She is the 2018 Australian of the Year for the Northern Territory. Bo received her medical degree from the University of Queensland and currently works as a paediatric cardiologist at the Royal Darwin Hospital and services many remote indigenous communities. She also undertakes humanitarian work with Rotary in resource-poor countries in our region. Both as a clinician and as a researcher, Bo's interests lie in prevention and early detection of rheumatic heart disease.

#### Marilyn Zelesco



completing her Master's in Ultrasound through the RMIT in 2007. Marilyn has received professional awards from the Australian Institute of Radiography, the Australasian Sonographers Association and the Australian Society for Ultrasound in Medicine. Marilyn is the Lead Sonographer at the Fiona Stanley Hospital in Perth. She has interests in hepatic, bowel and male reproductive tract ultrasound, elastography, CEUS, renal transplants, research, education and sonography in indigenous healthcare.

#### Best presentation ASA **Employer Award**

The ASA Employer Award aims to:

- improve sonography clinical practice through encouraging review of clinical cases and processes in order to find better ways of doing things
- expand learning across the profession by sharing employers' improved clinical practice and processes.

Employers put forward their best presentation, either a case study or evidence-based research relating to a process or practice review and improvement. The prize is full conference registration to ASA2019 Brisbane. The presentation is submitted as a proffered paper, and if selected, presented at the conference and published in the Sonography journal.

The ASA provides mentoring support to the award recipient in the form of assistance with proffering a presentation at an ASA annual conference and preparing their work for publication.









#### **Queensland X-Ray**

ASA Best Presentation Award at Queensland X-Ray was won by Kerryn Dodd, awarded for her presentation Carpal tunnel syndrome: The role

#### **Pacific Radiology**

of ultrasound.

UniSA

ASA Best Presentation Award at Pacific Radiology was won by Airlie Chamberlain, awarded for her presentation Prenatal ultrasound identification of an occipital encephalocele with an underlying duplication of chromosome 7q36.3 including the sonic hedgehog gene.

#### **Healthcare Imaging Services**

ASA Best Presentation Award at Healthcare Imaging Services was won by Roger Lee, awarded for his presentation Snappy hips - A new look to an old theory.

ASA Best Presentation Award at UniSA was won by Jessica Sinclair. Awarded for her narrative review titled Sonography



of the shoulder – current guidelines on best practice and recommendations for the development of an evidence-based scanning protocol for routine clinical practice: A narrative review.

#### **Perth Radiology Clinic**

ASA Best Presentation Award at Perth Radiology Clinic was won by Charissa Bright, awarded for her presentation Cervical ectopic pregnancy.

#### **Queensland University** of Technology

ASA Best Presentation Award at Queensland University of Technology was won by Benjamin Seery, awarded for his presentation Weak at the knees with infrapatellar bursitis.

#### Western Sydney University

ASA Best Presentation Award at Western Svdnev University was won by Kylie Thornton, awarded for her presentation A case report on familial LVNC with associated Ebstein's anomaly.



Left top: Kerryn Dodd, award recipient, Queensland X-Ray; Left bottom: Shirley Curgenven (left) with Airlie Chamberlain (right). award recipient, Pacific Radiology; Middle top: Sue Lundy (left) with Charissa Bright (right), award recipient, Perth Radiology Clinic; Middle bottom: Award judges with Roger Lee (right). recipient from Healthcare Imaging Services: Above: Jessica Sinclair, recipient from UniSA

ISSUE 1 2019 (15)

# strategic intent 2018–2020

### Strategic Intent goal – Provide and support the highest quality professional development and research

Jodie Long, CEO

Professional development is critical for your continual learning and ensuring you are up to date with the latest developments throughout your career. We strive to offer a broad range of continuing professional development opportunities for you so you can deliver excellence in ultrasound for the community.

It is important that we assist all members across all locations, clinical streams and levels of experience to achieve their 60 hours of CPD within their triennium. We are continually looking for ways to offer more opportunities for you to obtain these points. This year we are looking to offer more travelling and branch workshops across Australia and New Zealand, as well as providing you with increased access to webinars and online learning options. In addition, we are always looking to inform you of the latest developments and technological updates in cross section and soundeffects news.

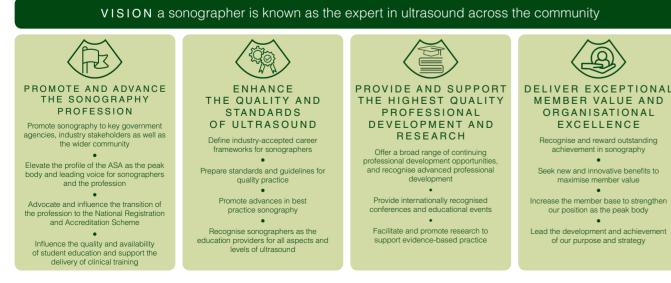
The ASA conference is one of the largest sonography conferences in the world and we continue to look to innovate in this space and at ways we can improve the experience for all. As the conference builds in size, we are attracting more overseas speakers and attendees. Our aim is to ensure the conference is more globally recognised and to therefore attract more attendees and speakers. As members, you are the biggest contributor to the conference, as attendees as well as

presenters, and with your continual support the conference will become bigger and better every year.

Evidence-based practice and research is so important for the standing of our profession within the healthcare community. We are committed to facilitating and promoting research as well as evidence-based work by supporting those who contribute in these areas. I encourage all of you to consider presenting at a branch meeting, writing for our journal Sonography, as well as submitting abstracts and presenting at the annual conference. This year we introduced conference discounts to those who won their respective branch case study nights and we continue to work with our corporate employer partners to get more members submitting peer reviewed articles for Sonography as well as presenting at the annual conference.

For the last two years we have offered \$15,000 in grant funding for sonography research. This money helps support those sonographers who are striving to make improvements and develop new applications for the sonography profession. We will continue to provide support for sonography research.

It is important, as the sonography community, that we continue to develop ourselves professionally so that we deliver the highest level of care to our patients.



### **Diagnostic and Medical Equipment**

#### Listening to sonographers led to new product development to improve workplace practices

a day in the life

Diagnostic & Medical Pty Ltd (DiagMed) is a family-owned and operated business, with customer service and distribution centres in New South Wales and Queensland.

The DiagMed ultrasound product range is extensive and

day-to-day deliveries can range from supplying an electronic examination couch for a sonographer in Perth to a 250 ml bottle of Aquasonic transmission gel and disposable bed sheet rolls to an ultrasound clinic in Cairns. Whilst in the background, on any given day, time is invested into analysing the practical needs of sonographers to deliver continual product improvements.

" ... listening to instrumental in

Working closely with the teams at diagnostic imaging centres, DiagMed has been instrumental in sourcing and developing new products to improve workplace practices, sonographer wellbeing and patient care.

Listening to sonographers drives our research and product development. A few years ago, day-to-day feedback from sonographers across the country suggested affordable ergonomic stools and a more 'tailored' examination couch for patient comfort and care were needed.



(16) sound effects news



#### Pav Kudhail, **Diagnostic and Medical PL. NSW**

Recognising this gap in the market, the search began for a company that could design and manufacture a sonographers' stool to meet the criteria, to provide great ergonomic design maintaining upright posture and relieving stress from shoulders, neck, knees and hips, while allowing free movement of the arms (particularly at a price point that would enable good uptake into clinical practices and ultimately increase access to

## sonographers was achieving this ... ??

quality ergonomic stools for sonographers every day). In collaboration with the Winbex Corporation, the specifically designed 'Ascot' saddle stool was born: listening to sonographers was instrumental in achieving this.

A similar R&D journey was undertaken when sonographer feedback suggested the need for an examination couch that would make it easier for patients to get on and off and improve the level of patient comfort: a couch with a remote control that enabled sonographers to raise and lower the height and to adjust the shape to multiple positions to suit all ultrasound imaging tests. Through collaboration with Forme Medical Beds in Melbourne, it was possible to design and manufacture a three- and two-section motorised, remote controlled hi-lo couch to meet every ultrasound position requirement a sonographer needs.

# feature **article**

### The road to Katherine

#### Introduction

The Katherine Times recently featured Trung Nguyen in an 'In the Spotlight' series that highlights local unsung heroes in the community who might otherwise go unseen in the course of everyday life.

Trung is a sonographer-in-training at Katherine Hospital and has taken a leap of faith and extended his original three-month placement. The 23-year-old from Sydney was born in Vietnam and moved to Australia at the age of six with his parents. The emphasis placed on patient care was a significant factor in Trung's choice to stay in Katherine. 'Being a smaller hospital in a rural location, the doctors want to spend more time with the patients and I am encouraged to take my time. Sometimes when you go to a placement you're expected to sit back and watch, but here I am getting hands-on experience.' Trung said it was pretty hard to get training in sonography and he was very grateful they sent him to Katherine. Following on from the Katherine Times article, Trung was invited to share his story with soundeffects news readers:

#### The road to Katherine

When I was told my first sonography placement was going to be in Katherine, the first thing I did was go onto Google

#### **Trung Nguyen, NSW**

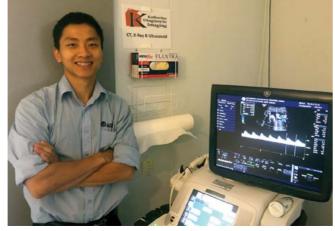
Maps and search exactly where Katherine was. So Katherine was 320 km south of Darwin and 2878 km away from my hometown of Sydney. As I made my way to the airport, I felt ambivalent about the future. I was given an opportunity to train in ultrasound but had to be away from family and friends for 10 weeks.

It turned out to be an adventure that lasted a total of 22 weeks after I decided to extend my placement by another 12 weeks. During my initial 10 weeks I was working at Katherine Hospital and later moved on to train at Katherine Diagnostic Imaging. The transition to living in a rural location went smoothly, exceeding my expectations. The hospital staff and my supervisors were very welcoming and I felt like I was at home in no time. I was given a casual radiographer position where I could utilise my radiography degree while training in ultrasound. which was a great financial help. In addition, I was invited to join in local sport events such as social tennis and frisbee, where I made new friends and felt like I was part of the community. My supervisors even took me out sightseeing where I visited waterfalls, hot springs and even wild buffalo!

Being in a rural location, at both sites there was no radiologist on hand and reports were completed externally. My supervisors therefore encouraged me to take my time, focus on patient care and complete the exam thoroughly. It was of particular



**Cooling off at Bitter Springs** 



In training at Katherine Diagnostic Imaging

importance to note all abnormal findings and best describe them for the radiologist to report on. From this experience I have gained tremendous respect for my supervisors and other rural sonographers who have extra responsibility, but also the confidence and skillset to scan patients independently without a radiologist to depend on. The variety of pathologies/ abnormalities I observed at Katherine was astounding. When

I read the sonography textbook I often ask myself, when would I ever see that? Well, in Katherine I was able to observe rare pathologies such as: splenic Desmoid tumour, pediatric stag horn calculi and Budd-Chiari syndrome.

Katherine is responsible for health services to surrounding remote communities that include Borroloola, Ngukurr, Kalkarindji and many others. Therefore some of the

(

patients who come in may have advanced stage diseases or have not had checkups for years. It was therefore essential to scan these patients thoroughly in order for them to be treated at Katherine or be transported to Darwin for specialist care. This created extra pressure and made me anxious about missing pathology in patients. And, like any sonography student, I missed my fair share of pathology (even when it was obvious).

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Access thousands of journals and evidence-based content for free with your ASA membership

#### The road to Katherine

feature article

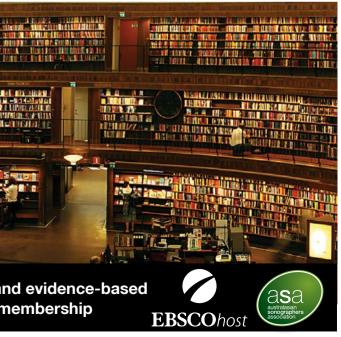
My supervisors were patient and supported me through those experiences, enabling me to learn from my mistakes. Throughout my placement my supervisors encouraged me to 'have a go'. I was given plenty of opportunities to have handson experience, communicate with the patient and write the ultrasound worksheets. These opportunities were critical to my development and were a major consideration in my decision

**6** ... I have gained tremendous respect for my supervisors and other rural sonographers who have extra " responsibility...

to extend my placement.

To summarise my placement in Katherine: it was a great overall experience. I was able to learn and develop my skills in ultrasound under the guidance of my supervisors. I would like to give a special thanks to my supervisors: Chiharu and Dimitru Lupuleasa and Philip Jazyschyn for putting up with me. Furthermore my placement in Katherine has provided me with life experiences

and added some of the outback traits into my character. My supervisor lent me his car where I learnt to drive a manual after stalling constantly! Luckily in Katherine there is not much traffic. After enjoying my placement so much in Katherine and meeting so many new people it was a no-brainer decision to extend my placement in Katherine in 2019 when I was given the opportunity.



## meet the committee S.p.a.c.

The Sonographer Policy and Advisory Committee (SPAC) plays a key role in the work of the association, primarily in policy development, industry changes, along with submissions to government. Advocacy for sonographers and the profession is central in every aspect of the group's work to identify, validate and promote the work of all sonographers. SPAC is well supported within the office by James Brooks-Dowsett, the ASA policy officer, and in addition, Jodie Long.

Towards the end of 2018, SPAC welcomed new members. Kate Lamb and Luke Platt, who bring additional skills and experience. The year 2019 looks to be another busy one, with a number of government submissions underway on topics of Medicare schedule changes and clinical practice guidelines. In addition, numerous individual projects by SPAC members continue in the background as works in progress on topics such as examination workload, sonographer communication, and photography during an examination.



lan Schroen Mv first volunteer role with ASA was originally part of the then Sonographers Advancement Working

Party (SAWP), now progressed into SPAC. I really enjoy working within a group of expert sonographers, sharing ideas and challenging current practices.

Across the range of guidelines, issues and policies we have worked on, I gain so much from the group's experiences and views and hopefully I add to the work of the committee in the process.



Vicki Ashfield-Smith Participation in an ASA committee allows me to help quide the development of ultrasound in the field of medicine. We consult on a wide

variety of topics and can give guidance to government and other professional bodies on the role of sonographers. I'm so pleased to be able to have the opportunity to serve on SPAC and use my clinical expertise to give back to a profession that I really enjoy.

#### Erika Cavanagh

I first joined the SAWP (as it was then known) in November 2012. I was really keen to contribute to the advancement of

the sonography profession, particularly through education and registration. It has been a great privilege to see how far our profession and the ASA have come in that time. Over the years I have greatly enjoyed working with the ASA's fantastic policy and advocacy team, who do so much behind the scenes to raise our profile and work towards regulation of the sonography profession. I also find working with other members of the SPAC from other locations and clinical settings incredibly rewarding.



Michele Dowling Being involved with SPAC allows me to use my experience in a forum of my peers

to offer advice to the ASA office. We advocate for best practice policies and protocols in our profession, rather than what might be common practice in the workplace. Our aim is to improve the position of the

sonographer with general advice in their day-to-day work, and to advocate in the public space for necessary changes at government level. I try to use my voice to push for changes that will benefit sonographers, our wonderful profession, and so ultimately the patients who are the focus of our working day.



Emma Jardine I joined the SPAC to become more involved in our profession and to see what goes on behind the scenes.

Being involved in the committee has enhanced my professional interest in ultrasound beyond the boundaries of my workplace and gives me professional satisfaction. It is good to contribute to changes and processes that are continually taking place in the ASA to benefit members.



Sandhya Maranna My main motivation to be on the SPAC team is the ability to voice concerns and develop strategies for

helping address these concerns and working towards broader advocacy for sonographers across the country. So far I have learnt immensely about policy matters with rich stimulating communication with other peer SPAC members, the ASA office and the Board.



Tony Parmiter In recent decades it has been my passion to lift the profile of the profession of sonography. The profile

starts with high standards of education

and professional conduct, but that is the path and not the end result.

What I attempt to do in the SPAC is to propose advice and guidelines that empower sonographers to contribute to the best of their ability for better patient management.

Empowering sonographers to use ASA guidelines to negotiate on work levels, communication with patients and a more balanced relationship with radiologists and referring doctors would be an achievement of which I would be proud.



Having recently ioined the SPAC. I was motivated to join because I believe that every patient in Australia should be scanned by personnel who are appropriately trained and are skilled and professional. I recognise that the ASA plays an important role in advancing the professional status of our profession. I saw the SPAC as a vital secondary support that furthers the work done by the Board, CEO and staff at the ASA. I want to contribute my extensive professional experience to assist those who are working hard on our behalf.



## meet the committee S.p.a.c.

#### Kate Lamb



#### Luke Platt

I have previously served on the ASA Board and the then known SAWP committee. Serving at this level and now

currently on the SPAC is incredibly rewarding and allows me to work at the coalface of developing, advising and assisting in the policies that affect working sonographers. It is an opportunity to be at the forefront of Australian state and federal legislation that affects sonographers and have a chance to listen and provide a voice for all sonographers in the development and improvement of the sonography profession.

# fellowships



#### **Fellowship announcements**

The ASA congratulates the following candidates who were recently awarded Fellowship. Their generous contribution of time, knowledge and experience is vital to the success of our association.

It is clear from the description of their recent achievements that the ASA has a solid foundation of members dedicated to the profession of sonography.



Tony Parmiter Tony currently serves on the SPAC and the FASA Committee Panel

and is an Advisory Committee member

for the Diagnostic Imaging Accreditation Scheme, as well as having served as an ASA Board member for four years and an ASA representative on DIAC. Tony provided two presentations at ASA2017 Brisbane on Ultrasound assessment of the aorta and agenesis of the corpus callosum; A review of routine views.



#### Lino Piotto

Lino is currently vicechair of the South Australia Branch and contributes to the **Editorial Peer Review** 

Panel for Sonography. He also served on the committee for SIGS2017. Lino provided presentations at ASA2017 and SIGS2017, including Ultrasound of ingested foreign bodies, Paediatric hip pain, Paediatric head and Ultrasound diagnosis of splenic infarction. Lino presented the asawebinar Paediatric eye ultrasound and co-presented It's not a mass it's a urachal remnant at ASA2018, as well as co-authoring three publications during 2017-2018. Lino was awarded 2017 Sonographer of the Year - South Australia in the ASA Awards of Excellence.

#### What exactly does fellowship mean?

Last year the ASA inducted the inaugural Fellows of the ASA who can now add 'FASA' to their professional signatures. Four letters after a sonographer's name may not do it justice, so here is a snapshot of what our ASA Fellows have achieved, at a minimum, to earn 'FASA'.

Fellowship is the highest grade of membership for professional associations. Fellowship status recognises a member who has contributed above and beyond and is operating at the peak of a profession.

#### What is the pathway to ASA Fellowship?

The first step in the fellowship pathway is applying for, and being awarded, an ASA Associate Fellowship (AFASA).

An Associate Fellowship is granted to members who have contributed to the profession, as sonographers, to advance the profession. To be eligible for AFASA, applicants need to accrue at least 40 'fellowship points' in different areas of contribution, within three years of their AFASA application.

Examples include:

- having a case study published in Sonography (20 points)
- presenting educational content for part of an ASA branch meeting (5 points)
- being on the ASA Annual Conference Program Committee (10 points)
- completing a higher degree qualification relevant to the sonography profession (10 points for a Master's, 20 for a Doctorate).

A panel of accomplished members then review the AFASA application and agree on whether the sonographer can be granted AFASA status.

#### The Fellowship Program (FASA)

The award of AFASA is a prerequisite to be eligible for entry into the Fellowship Program. To be eligible to apply for FASA, a member needs to accrue a minimum 120 fellowship points within three years of their application, but after they have been awarded AFASA. This means that the 40 points used for an AFASA application cannot be used towards FASA. Again, points can be earned predominantly within the ASA for voluntary committee involvement, publication of research papers in Sonography and presentation at educational events.

#### How to earn fellowship points

Points are allocated depending on the contribution to the sonography profession. Following are some examples.

#### ASA service

- ASA Board or SPAC (formerly SAWP) (10 points)
- ASA Committee Chairperson (10 points per year)
- ASA Committee non-chair (5 points per year)
- ASA Conference Committee (10 points per conference)
- Sonography Editorial Board (10 points per year)
- Sonography Editorial Review Panel (5 points per article reviewed maximum of 30 points)
- Service on behalf of the committee will also be considered on a 1 point per hour basis (e.g. Best practice guidelines, poster design, soundeffects

news articles - maximum 10 points per publication).

#### Education

- Completed higher degree qualification relevant to the sonography profession -(10 points for Master's degree or 20 points for Doctorate)
- Currently enrolled in higher education degree relevant to the sonography profession (5 points per year for Master's degree, maximum 10 points or 10 points/year for Doctorate, maximum 20 points).

#### Publications

- Article(s) published in ASA peer reviewed journal Sonography (25 points per publication)
- Article(s) published in other international peer reviewed journal (10 points per publication, maximum 30 points)
- Author of a sonography-related textbook (25 points per publication)
- Editorials or significant contribution to a non peer reviewed publication or book chapter (10 points per publication, maximum 30 points)
- Research project published by the ASA as a 'Best practice guideline' (10 points per publication)
- Case study published in Sonography (20 points per publication)
- Published in web-based publications (5 points per publication, maximum 15 points).

#### Presentations

- Presentation at the ASA Annual Conference, SIG Symposium, Travelling Workshop or an asawebinar (20 points per presentation)
- Presentation at national/international conferences other than the ASA

(10 points per presentation, maximum 30 points)

- Presentation at an ASA branch education meeting (10 points full meeting, 5 points part meeting)
- Presentation of non-ASA webinar 30 points).

#### ASA Awards

- (5 points)
- Best presentation at the ASA Annual Conference (10 points, including presentation)
- Best overall presentation at the ASA
- Received the Pru Pratten Lifetime Achievement Memorial Award (15 points).

#### Leadership

- Serving on a board, council or other committee for sonography-related (5 points per year)
- Serving on an editorial board for an ultrasound journal other than ASA publications (5 points per year)
- Outstanding contributions to the sonography profession and/or wider

#### Who are currently the Fellows of the ASA?

Bonita Anderson Jessie Childs Peter Coombs Carolynne Cormack Lisa Hackett Allison Holley Greg Lammers Frauke Lever Sandhya Maranna



(10 points per presentation, maximum

Received an ASA Award of Excellence

ePoster, case study, research or clinical

Annual Conference (10 additional points)

entities other than the ASA (e.g. ASAR)

community (5 points per activity per year).

Glenda McLean Sandra O'Hara Nayana Parange Jenny Parkes **Tony Parmiter** Rebecca Perry Lino Piotto Tristan Reddan

Tracey Taylor

A list of Associate Fellows who have started their journey to FASA can be found at www.sonographers.org/ membership/fellowship-program/

Fellowship is by no means an easy status to achieve (nor should it be). Bonita, Sandy and Glenda have shared their thoughts on the significance of becoming a Fellow of the ASA.

'Besides adding extra letters after my name, I believe that FASA immediately identifies me as a sonographer who has demonstrated an extraordinary dedication and commitment to the profession as well as to the ASA. Receiving FASA was like getting an award silently saying, "Thank you, all of your contributions have not gone unnoticed".'

- Bonita Anderson

'Being awarded FASA is a recognition of professional excellence and is an achievement in itself. On a personal level, for me it has inspired and motivated me to strive further in the field of sonography. It's also great when students come up to you and say that you are their role model!' - Sandhya Maranna

'I am proud of the work we do as sonographers and the contribution of the ASA to our profession. Being a FASA member recognises my contribution and hopefully I inspire others to get involved and strive for professional excellence and service to the association. It's not the reason I do what I do but I am pleased to be recognised in this way and join a group of people who I also admire.'

- Glenda McLean

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#### Be still my beating heart: sonographic stressors, potential issues and how to overcome them

# wh&s matters

### Stability or mobility – which is more important?

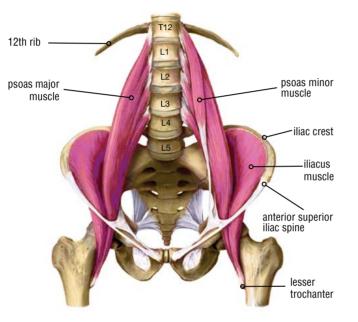
We've all done it at one time or another. We have some type of soreness, injury or movement at work where it causes pain or some type of discomfort. What do we do? We work out, stretch, get a massage, do things that might make us even tighter, stiffer and even increase our soreness - or all of the above. So we try stretching, mobilising, foam rolling, rolling with a tennis ball or lacrosse ball, get our hands on 'self-torture devices' that move us around in odd shapes, do body work, manipulation, contortion, voodoo, anything that might help give us relief. What happens when we're not getting the results we desire? Maybe it's time to try something else.

Not all limited range of motion, pain, or musculoskeletal tension means a structure needs to be released or stretched. Sometimes it means the structure needs to be given some strength and stability back. Only when we have the ability to stabilise an area will we also have the ability and give the muscle permission to relax and gain mobility.

Take the psoas muscle, for example. The psoas attaches from the body and transverse processes of T12-L5 vertebrae to the lesser trochanter of the femur. WHAT, YOU SAY! It's the muscle that attaches to your back and hooks to the leg bone. It contributes to flexion and external rotation of the hip (hip movement), as well as stability of the lumbar spine (middle of the back, keeping it strong and firm), flexion of the trunk towards the thigh (bending over forwards), and can laterally flex the lumbar spine (do side bends). It crosses many joints and is capable of doing lots of jobs, so it needs to be strong and flexible.

It is common that people with low back pain, lumbar lordosis, anterior pelvic tilt, tight hip flexors, 'clicking' or 'snapping' at the hip, leg length issues or limited hip extension stretch the crap out of the hip complex and the psoas muscle. Yes, in some cases this muscle needs stretching (given that it is functional first), but you would be quite surprised that if you test this muscle's functional capacity, communication from the brain to the muscle might not be there, or be very limited. In other words the wiring is bad. Think of it like wiring going from a light switch to a bulb. You can replace the bulb, put in a new switch on the wall - but if the problem is in the wiring then getting electricity through

Mark 'Coach Rozy' Roozen, MEd, CXCX\*D, NSCA-CPT, FNSCA, USA



Muscle and bone anatomy of the pelvis and hip

the whole system, new bulbs and switches won't do much. When a muscle crosses many joints, has many jobs to do, and isn't capable of communicating with the brain to do those jobs effectively, the muscle might just stiffen up, or get tight, as a strategy for keeping you from injury and your body stable.

Think of it this way. You're hanging from a tree branch and don't want to fall to the ground, but feel vulnerable like you're about to slip. What do you do? You would do your best to grip tighter and hold on for dear life.

If your brain can't communicate with your psoas or other body parts - you have bad wiring. The psoas is doing its best job to stabilise your spine; it's trying to hold on and tighten up. Being tight, you stretch it even more. What do you think it might do? Hold on tighter?

In this case you could stretch the muscle until the cows come home. You can dig in deep and massage that psoas all you like. You might get some short relief; it would be like someone giving you a lift to re-grab the branch a little better. But if you hang there again for a long period of time, the tension comes back. If the poor little muscle is hanging on for dear life, and here you are tickling the armpit, prodding, poking, and stretching it - while it's still trying to hold on for dear life - it goes back to getting tighter.

If the psoas muscle can't be engaged, find out what it is compensating for. It is possible that compensation is occurring, which means other body parts are working harder to help out. Compensation can include synergists (muscles that help with movement - but aren't main movers), functional opposites (think of the bicep on the front of your arm and the tricep on the back of your arm), joints, ligaments, breath holding, pelvic floor bracing, jaw clenching, scar tissue, tattoos, it's all possible. Find out what is limiting the functional capacity of a muscle and give function back. Give it permission to engage. Give it permission to relax. Give it permission to not have to hang on for dear life. Spend some time learning functionality of those muscles and mobility will improve.





If you keep running into mobility issues, and stretching isn't working, work with someone who can properly assess the situation. You may have a stability issue and not a mobility issue.

wh&s

matters

Would you like more information on what you can do to help stablise AND mobilise the different parts of the body? Coach Rozy's recently presented asawebinar on Stretching is available for on-demand viewing at www.sonographers.org/cpd/onlinelearning/asawebinars

Mark 'Coach Rozy' Roozen is a Certified Strength and Conditioning Coach with Distinction (CSCS\*D), a Certified Personal Trainer with the National Strength and Conditioning Ass., (NSCA-CPT) and a Fellow of the National Strength and Conditioning Ass. (FNSCA). For questions, information or performance needs, contact Coach Rozy via email at rozyroozen@gmail.com or check out his website at www.coachrozy.com

# research **matters**

## Looking beyond clinical research: Social science research in sonography (part 1)

There has been growing awareness around encouraging sonographers to be further engaged in research. Previously in 'Research matters', Reddan and Thoirs 1 described the steps in translating a research question into a research project by finding a supportive supervisory team, ethics application and research methodology. As you are currently reading the 'Research matters' section, you are either a researcher yourself or on your journey to become a researcher. I hope to share my experiences upon embarking my research journey in the social sciences as applicable to sonography, and to encourage all of you that no research idea is too big or small.

Often, when we discuss research in sonography, we focus on clinical research. Clinical research is important as it serves to educate us in improving our scanning accuracy and ability to contribute to a more precise diagnosis, such as liver length measurement to assess hepatomegalv.<sup>2</sup> prediction of small for gestational age using the head circumference and abdominal circumference ratio,<sup>3</sup> intracranial translucency assessment in first trimester,<sup>4</sup> universal cervical length screening for asymptomatic women in singleton pregnancy,<sup>5</sup> and more. These types of research are conducted in clinical settings and are predominantly quantitative research, such as randomised controlled trials. For quantitative research we use statistics to analyse the collected data and report the results of the findings based upon

statistical significance. The importance of statistical significance has since been covered in previous 'Research matters' articles, including explanations on p-values<sup>6</sup> and confidence intervals.<sup>7</sup>

As sonographers, we are not limited to focusing on clinical research and can broaden our horizons towards other fields of research, such as the social sciences. We are healthcare professionals working in a complex clinical environment involving multiple stakeholders such as administrators, doctors, nursing staff, and patients, to name a few. Thus in our day-to-day practices we are practising in areas of health communication and professionalism, patient safety and communication, organisational psychology, healthcare management and leadership, education and training, and occupational health and safety. Suffice to say that we face many challenges (not just clinical) in our roles as sonographers, and engaging in research can help us find potential solutions to these issues.

The area of research that I am pursuing is based upon both my experiences as a clinical educator for the Queensland rural and regional ultrasound training program and challenges that I observed as a sonographer at the Royal Brisbane Women's Hospital. As a clinical educator, I have always been interested in the education and training of the next generation of sonographers and found that there are many research pathways in the area of pedagogical research, such as the optimal design of the training

#### Ling Lee, ASA Research Special Interest Group

curriculum, using simulation training, problem-based learning, etc. As a member of allied health professions, one of the critical issues working in a large healthcare organisation is communication. Ineffective communication within a team often leads to suboptimal decision-making and poorer health outcomes for patients.8

Health communication research has been a growing field since the 21st century.9 There has been extensive research conducted regarding the communication between healthcare professionals and patients and communication among the healthcare professionals in the highly complex and hierarchical setting of the medical working environment (e.g. hospitals). Change within healthcare professions, such as norm and scope of practice, have led to conflict in the healthcare workforce as conflict arises from perceived social status differentials and associated poor communication.<sup>10</sup> Similar situations are faced by other health professionals, including the field of endoscopy<sup>11</sup> and midwifery.<sup>12</sup>

For example, nurse practitioners have been trained to perform endoscopy due to the increasing patient demand. Traditionally endoscopy is performed by a gastroenterologist; however, with the introduction of the nurse practitioner practising endoscopy, research has been performed to examine the reception of this model among gastroenterologists. The outcome of the research called for the need for improved and

accommodative health communication in order to achieve a harmonious working environment and maintain patient safety.<sup>13</sup>

By blending both my passions in clinical education and ultrasound, the research topic that I decided to pursue was the organisational framework and health communication between a supervisor and a supervisee. Specifically my research focuses on the communication between the clinical educators and the students in sonography. The students are studying to become sonographers via the direct entry 3+1 postgraduate pathway offered in Australia. I investigate the communication between the supervisors and the new cohort of students from the new educational pathway and propose

that the different educational pathways undertaken by sonographers have led to an intergroup environment within our profession. I explore the dynamic between these two groups of sonographers and unpack their language use to explore how this reflects their attitudes and values. I will apply social identity theory (SIT) as the social psychological framework for understanding the relations between these two groups and utilise communication accommodation theory (CAT) to examine the interactive communication between these two groups.

Figure 1 shows the CAT model framework. CAT goes beyond the focus on intergroup communication to predict and explain the motivations that

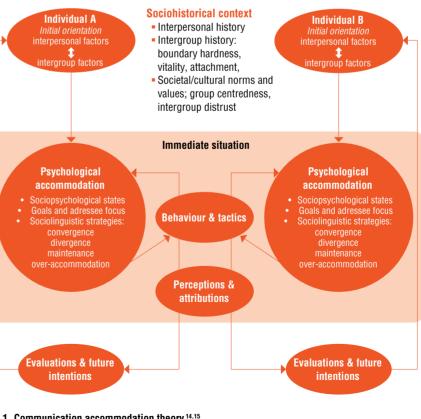


Fig 1. Communication accommodation theory 14,15

### research matters

drive professional and social groups to communicate and the strategies to achieve communication across social groups.

CAT explains that motivations and goals are influenced by SIT (i.e. sociohistorical context) and is evidenced by the communication strategy.

I hope this article is an interesting introduction to research opportunities beyond clinical research. Research ideas are born when one finds an area of interest, with a question that one would like to investigate further to attain a deeper understanding. Stay tuned for further updates regarding my endeavours in organisational and health communication research in sonography.

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#### Looking beyond clinical research: Social science research in sonography (part 1)

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## call for papers: Safety and wellbeing for sonographers

#### We are now seeking papers on safety and wellbeing for a special issue of the Sonography journal

As medical imaging professionals, we work in an environment that is physically and mentally challenging. MSK injury has been an alarming feature for sonographers for many years, and pressure of increasing workloads adds to not only the physical demands, but also puts mental health stresses upon us.

Articles can address (but not be restricted to):

- original research articles to determine causes for sonographer injury
- workplace initiatives to improve sonographer health
- review articles on health professionals mental and physical health

(28) sound effects news

- case reports where sonographer health and wellbeing were a feature protocols which include specific criteria
- addressing sonographer health and wellbeing the impact of new technology on sonographer
- health and wellbeing (e.g. imaging software, equipment features). This special issue will assist all sonographers

in staying healthy and productive for hopefully long careers in the profession. Don't miss the opportunity to publish your research and experiences in an edition focused on this important subject.

Submissions should be made following the author guidelines and submitted via the ScholarOne online manuscript submission system by 4 June 2019. Any gueries can be directed to the Editor-in-Chief at editor@sonographers.org

The ASA publishes the Sonography journal as part of our commitment to ensure research is undertaken to provide an evidence base that supports the development of the profession. It is an international peer reviewed journal that publishes articles on all aspects of sonography and medical ultrasound from authors around the world. Author guidelines are available on the Wiley Online Library



Further information can be obtained from Glenda McLean - Editor-in-Chief E: editor@sonographers.org P: +61 3 9552 0000 For author guidelines on writing and referencing visit www.sonographers.org



# re-search<sup>1</sup>/rı's3:tJ, [plural] 1 serious st /n[U] ala discover new facts lew idea ncer | rese **ASA Research Grants** a**s**a,

#### Introduction

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In 2017 the ASA launched the inaugural funding round of the ASA Research Grant Scheme, which will provide an annual funding pool of AUD \$15,000 to support and facilitate new ultrasound research by ASA members.

The ASA is delighted to announce the next round of funding will support the following members' research in 2019:

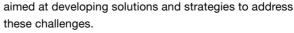
#### Providing a sustainable sonographer workforce in Australia: clinical training solutions

#### Research team – Assistant Professor Rod McGregor, Assistant Professor Karen Pollard

The medical ultrasound team in the discipline of Medical Radiation Sciences at the University of Canberra is pleased to be awarded an ASA research grant to undertake research regarding sonographer training.

Our research aims to provide a solution set to address sonographer clinical training placement challenges by asking employers and managers what sonographer training strategies would be supported to provide a sustainable sonographer workforce in Australia.

The project will use the Delphi technique to survey sonographer employers and managers about their opinions regarding barriers to ultrasound clinical training, and from these initial surveys, will then seek to develop consensus solutions to the sonographer workforce shortage. This will be achieved through further surveys



The outcomes will add to the body of evidence regarding sonographer workforce shortages and assist the ASA to provide advocacy on this essential area







Prof. Rod McGreaor Assistant Prof.Karen Pollard Assoc. Prof. Andre La Gerche and Dr Leah Wright (Baker Heart and Diabetes Institute); Dr Maya Reddy (PhD student)



In addition, development of real-world solutions and strategies may encourage their adoption by prospective employers, resulting in better patient outcomes through timely provision of services and a healthier work environment.



#### **PREACH** (PRe-Eclampsia and Cardiovascular Health) study.

The cardiovascular toll of pre-eclampsia: determining impacts on the maternal, fetal and placental vasculature







From top: Assistant

Pre-eclampsia is common in Australia with about 1 in 20 women affected. Women do not undergo monitoring of blood pressure and cardiovascular health postnatally as the condition is regarded as cured upon delivery of the fetus. It is well known that women who develop pre-eclampsia have a 2-4 fold increase in the risk of heart failure and cardiovascular disease-related death. We aim to study cardiovascular function in women with a history of early onset preeclampsia and late-onset pre-eclampsia.

The postpartum arm of the PREACH study involves recruiting women 6-36 months postpartum with a history of pre-eclampsia, with a control arm of women in the same postpartum phase. Participants will undergo echocardiography studies with a strong focus on prediction of stage B heart failure signs. A functional assessment of fitness will be performed with a cardiopulmonary exercise test with blood markers of endothelium

dysfunction also stored for analysis.

The results will help to guide both the obstetrics and cardiology fields on best clinical practice methods to reduce the cardiovascular burden of pre-eclampsia.

# person **profile**

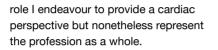
### **Anthony Wald**

#### Short bio

I trained as a cardiac technologist and sonographer at Baragwaneth Hospital. Soweto. South Africa. In early 2000, I relocated to Europe to work as an applications specialist before moving to Melbourne. In 2004, I took up the chief technologist's position at MonashHeart, Monash Health. In this position. I oversaw the expansion of the non-invasive imaging service to three campuses, performing over 16,000 echoes per annum, making it one of the busiest public echo services in Australia. During that time, the education of sonographers was also expanded with at least two staff members per annum under supervision by an appointed educator and other senior sonographers, for either DMU or the QUT cardiac sonography gualifications.

#### Why is being a volunteer at the ASA important to you?

The sonography profession must be protected from external threats and this can be achieved through regulation and registration. Tony Forshaw's tenure as ASA president made me realise that cardiac sonographers don't really take as active a role as they should within the ASA, taking into account we are approximately 25% of the sonography workforce. The ASA is the organisation that represents all sonographers; in my



#### What are your current roles?

Educator in Point of Care Cardiac Ultrasound at MonashHeart: the role entails the theoretical and practical training of ICU and ED physicians in point-of-care ultrasound. I remain active in assisting with the cardiac sonography education for MonashHeart. I also run education for the MonashHeart registrars in the practical and theoretical application of echocardiography. I also serve on the Board of the ASA.

#### What aspect of cardiac sonography has been most rewarding?

The ability to impact patient care and deliver improved outcomes, from the early days in South Africa's largest hospital, where it was sometimes necessary to carry a patient from the ward for an urgent ultrasound, to the current day involving educating ICU and ED physicians in high guality image techniques that enhance patient care.

#### Have you been involved with any other volunteer work?

Yes, my most recent was an outreach program in Tonga where I was part of the team that delivered a screening program for paediatric rheumatic heart disease.



#### What do you enjoy doing outside of work?

I love being dad to a tweenie and a 10-year-old. I also enjoy cycling for fitness, although my wife laments the fact that I'm a 'MAMIL' (Middle Aged Man in Lycra).

#### Who do you admire and why?

That would be my wife Rachael who juggles being a working mum with raising two children and providing stability in a busy household.

#### What is the last meal you cooked? It was peri peri chicken livers.

#### Who would you like to have dinner with?

My late grandfathers who passed before I was born. From the stories shared by my brothers and our family, it would be great to get to know them personally.

What place you would like to travel to? Anywhere exotic!

#### What is your favourite movie?

Anything 'Marvel'! I am a 'Marvel' tragic and have a large collection of DVDs and encyclopaedias.





### Pru Pratten Memorial Lifetime Achievement Award

**Nominations** 

categories:

#### ASA announces award for lifetime achievement

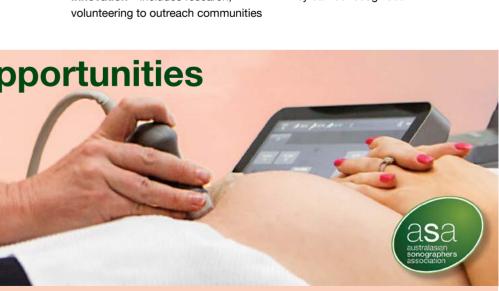
Commencing 2019, the Pru Pratten Memorial Award will now be known and recognised as the Pru Pratten Memorial Lifetime Achievement Award.

This Lifetime Achievement Award will recognise a member's all round contributions over a whole career, rather than recent achievements which are acknowledged by the Awards of Excellence.

#### Eligibility

The Pru Pratten Memorial Lifetime Achievement Award will have a different set of criteria to Sonographer of the Year. To be eligible for nomination:

The nominee must be a financial and continuous member of the ASA for a minimum of 15 years.





Visit www.sonographers.org/our-profession/employment-listings/positions-available/



Awarded to sonographers who, during their lifetimes, have made contributions of outstanding significance to the field of sonography

 Nominees cannot have previously received the ASA Sonographer of the Year, Pru Pratten Memorial.

 Nominees may also be nominated for other awards in the same year, however separate applications will need to be submitted.

The nomination criteria includes three

Service to the ASA – includes presenting at ASA events, writing for the Sonography journal and being active on ASA committees/branches

 Mentoring and training – includes being actively involved in the training of others to more formal positions of clinical supervisors or educators.

 Service to Humanity and Innovation - includes research, or the creation of new ways of educating and training sonographers

To nominate someone you feel worthy, please submit 500 words or less via the nomination form on the ASA website, outlining the contribution the nominee has made to the sonography profession and how it meets the criteria.

There will no longer be an overarching Sonographer of the Year award; however, all the other awards will be available including Sonographer of the Year for the individual states, territories and New Zealand, which will continue to be celebrated at the Awards of Excellence Breakfast at the annual conference.

The Pru Pratten Memorial Lifetime Achievement Award winner will be announced at the annual conference gala dinner.

Be sure to mominate someone so that they can be recognised!

# branch reports

#### **Australian Capital Territory**

The second half of 2018 was a little quieter following on from our earlier line-up of events. We held our annual student case evening on Monday 26 November at Canon Medical offices in Fvshwick. This event is one we all look forward to in the calendar as it is an opportunity for the local ultrasound community to gather and engage in some festive cheer while supporting ACT's current class of trainee sonographers. Once again we had a fantastic turnout and were delighted by the varied topics and informative presenters. The topics covered by the trainee group included thyroid cases, appendicitis, buttocks lumps, gynecomastia, gastroschisis and application of ultrasound for prostate radiation therapy. This year presenters were competing for the covetable prize of 25% off ASA conference registration, generously sponsored by the ASA. This was won by Angelina Seeto of Canberra Imaging Group. Runners-up prize vouchers,



ACT student presenters Bronte Doyle, Anne Duquette, Wilfred Ong, Nonty Joel, Elise Stewart and Gavin Atherton with ASA ACT rep Jess Daniel

kindly donated by Canon Medical, were presented to Bronte Doyle and Elise Stewart for their presentations.

Many thanks to all the presenters and sponsors who have been involved in all our local events in 2018. We also want to thank those who regularly attend the educational events and meetings we plan throughout the year. We look forward to sharing what 2019 has in store for us with the wider ASA network. There are great plans in motion for CPD events as well as planning for SIG2019 to be held in Canberra in September.

Stephanie Konza ACT Branch Committee



#### **New South Wales**

The NSW Branch has had an amazing end to 2018. In September. St Vincent's Hospital hosted a vascular meeting. Dr Tony Sammel (rheumatologist) presented Giant cell arteritis in cranial vessels whilst Liz Pluis discussed the ultrasound scanning side of this topic. Lee Brown presented Ultrasound in fibromuscular dysplasia and Deb Hamilton presented Endofibrosis. A huge thanks to Liz Pluis and the vascular team at St Vincent's clinic for their assistance with organising, chairing and speaking at this meeting. It was an extremely informative evening.

In November, Canon sponsored and hosted the branch meeting at their Macquarie Park offices. Dr Ken Liu spoke on liver disease, Dr Lucian Roseverne spoke about TIPPS and Dr Ritu Mogru presented Shear wave of the cervix. A huge thanks to Catherine Robinson for all her help with organising this meeting.

Our first meeting for 2019 will be our annual interesting case study night at AIHE, which always provides a varied range of topics and is an interesting evening.

On behalf of the committee, I would like to thank all the members, sonographers, presenters and sponsors for hosting, attending and presenting at our branch meetings. Your support is greatly appreciated. A huge thanks to the committee for all the time and effort put into organising the meetings. We look forward to expanding our committee next year with new members and providing another year of interesting educational events in 2019.

Sarah Skillen **NSW Branch Committee** 

#### Northern Territory

After a mid-vear hiatus due to a changeover in branch committee members, the Northern Territory Branch finished the year with a Trivia Night on 4 December. It was a fun night had by all and a lot was learned by those who attended. There were several interesting cases presented as questions, including Torsion of an immature teratoma and a Placenta accreta case. Overall the winner was Maren Shepherd who won a gift basket kindly donated by the ASA.

As mentioned above, we have some new committee members. We welcome Emily Lovell and myself, Chloe Lipp, to the role of co-chairs. We also welcome Aly Ponder, who joins Sadie Atkins and Helena Lassemillante, as committee members. The team are looking forward to 2019 and are hoping to provide more fun and educational events throughout the year for our branch members.

Chloe Lipp Northern Territory Branch Committee

#### Queensland

On Friday 27 July, the Queensland Branch held its annual Test your ultrasound knowledge evening at The Ship Inn, South Brisbane. Participants gathered into teams to take part in some friendly competition and earn CPD points while enjoying the relaxed, social atmosphere. The venue opened its doors early and welcomed delegates to make themselves comfortable either in the dining area or on the adjoining deck where a private bar was available for purchasing drinks. Once teams were seated, they selected a single device (phone, iPad or tablet) to use per table and round one of the evening began. This was followed by a delicious buffet dinner, another

round of questions, a buffet dessert and the final round of questions.

A variety of topics were covered, including abdominal, gynae, musculoskeletal, paediatrics, obstetrics, breast, cardiac, small parts and vascular. There were a few technical glitches; however, feedback from the event was overwhelmingly positive. Well done to all the participants and congratulations to the winning teams. Our appreciation to Philips for once again sponsoring this event. Thank you also to everyone who filled out their feedback forms - we are looking into your suggestions on how we can make this event even better in 2019!

The final event of 2018 was a half-day pre- and post-natal educational event with a focus on cardiac anomalies. This was held at LCCH (Lady Cilento Children's Hospital), South Brisbane on Saturday 18 August and was kindly sponsored by GE Healthcare.

Dr Jennifer Powell (LCCH/QScan) was the first speaker of the day, giving an interesting presentation on congenital cardiac abnormalities with a focus on impact. She started off with a brief reference to embryological development and went on to describe a number of specific anomalies, their treatment and common complications. Alison Lee-Tannock followed with a detailed discussion of Tetralogy of Fallot, including its variations and associations. Alison's talk was filled with tips for optimising the study and emphasised the importance of looking for variations in other anatomy when assessing a fetus with Tetralogy of Fallot.

The next speaker was Justin O'Leary, a paediatric and adult cardiac scientist. He described why understanding the involved anatomy, surgical correction and potential complications of various cardiac anomalies is essential in order to obtain the best images possible. He also highlighted the importance of



providing accurate and reproducible information by looking at the heart in a systematic fashion. Justin Gordon, the **Director of Paediatric Cardiac Sciences** at LCCH, spoke next delivering an engaging talk entitled What becomes of the simple shunts? He covered the significance and outcome of small and large atrial septal defects, patent foramen ovale, ventricular septal defects and patent ductus arteriosis.

The final speaker of the day was Dr Umesh Shetty, a consultant radiologist at LCCH and iMed. Dr Shetty mixed things up a bit by presenting a series of interactive cases involving the thorax. He featured multiple modalities in his discussion, including chest X-rays, ultrasound and CT. He led the delegates to a diagnosis by first providing an image and then talking through the differentials. He also gave tips on image interpretation and explained the appropriate treatment and follow-up for each example.

One of the best things about this event was the integration of ultrasound appearances with diagnosis, prognosis, treatment and outcomes. All of the presenters featured real cases and many included cine loops and videos that helped in visualising the pathology in three dimensions. It was beneficial to get the point of view of so many knowledgeable presenters from different fields and have the opportunity to ask them specific questions. A very interesting and informative day!

Heather Allen **Queensland Branch Committee** 

#### **South Australia**

We had a very engaging format in 2018 with a combination of face-to-face meetings and online webinars. We ended the year with a case night evening on 23 November, proudly sponsored by Philips.

Many thanks to Daniel Walkley, Loan Ho, Sean Coveney, Casey Smedley,

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## branch reports









From top: Michelle Perkovic, Lino Piotto and Sean setting up; Roger Gent and Casey Smedley; Mike Barker – winner of the ASA case night; SA Branch Committee attendees

Mike Barker and Jaenelle Farmillo for presenting their cases on the evening. It was the first time for most of us to see the 'calf implants' in one of the cases presented by Daniel!

We jumped on board the ASA-led initiative to encourage speakers to

present their cases at the national conference. Mikael Barker won the ASA Best Case Presentation with 25% reduction towards the 2019 National Conference registration.

Special thanks to Lino Piotto for organising the speakers and the overall presentation logistics for the evening. It was wonderful to have Roger Gent attend and present. It was very gracious of him to sponsor the coveted wine bottle as 'People's Choice Award'. Casey Smedley won this award for her presentation on intracranial translucency.

Special thanks to Michelle Perkovic and the Philips team for having sponsored the lovely meeting venue at the Lion Hotel, enabling a central catch-up location for all.

It was nice of Titian to fly to SA as an ASA Office representative and network with members.

Sandhya Maranna South Australia Branch Committee

#### Victoria

2018 was a hugely exciting year for the Vic Branch Committee.

We started the educational year with a March meeting covering *What not to miss in obstetrics* by Margaret Condon, then *What Doppler when* by Silvana Mandarano and Janessa Baddeley, and finishing with Braidy Davies' experience with vasa praevia.

July saw a fantastic Saturday workshop on MSK, with Lisa Hackett introducing us to *The biomechanics of the lower limb in MSK imaging* with the expert knowledge of Jeremy Lefort providing a podiatry perspective for foot/ankle sonography. Workshop presenters provided plenty of hands-on scanning opportunities. Greg Lammers covered the knee, Steven Zakic the forefoot, hamstrings were aptly described by Andrew Grant, and Quanson Sirlyn demystified the anterior and lateral hip. Jenny Parkes was instrumental in putting this program together.

Our October meeting covered *Taking the abdominal scan further*, where we were updated on the current trends for portal hypertension and shearwave/ elastography by Jane Keating. Dr Alain Lavoipierre spoke to us on the benefits of renal contrast. Carolynne Cormack amazed us with her knowledge of bowel ultrasound and other types of acute abdominal pathologies.

Our year culminated in November with our greatly anticipated case study evening, where we had a plethora of fabulous cases. Joyce Chen won best overall presentation, which was sponsored by ASA, with a paediatric case called *Blues clues*; Patrick Nowlan won with a best first-time presentation entitled *Raiders of the lost testis*, sponsored by Canon; and Susan Diep won the encouragement award sponsored by Philips for her MSK case of *Hmmm ... can't quite put my finger on it.* 

Our committee has had some changes and we thank Jenny Parkes for her invaluable assistance this year, but she has stepped down from her duties. Ramya Gunjur is taking a well earned break and we welcome new members this year.

Many thanks to our presenters, sponsors, volunteers and ASA members, as successful educational opportunities would not be possible without you.

We look forward to another successful year of learning opportunities with the Vic Branch, with a great line-up for 2019.

Lynne Johnson Victoria Branch Committee







From top: Victoria Branch members; Victoria case study night; MSK workshop presenters

#### Western Australia

The Western Australia Branch wrapped up another busy year of branch meetings with our annual interesting case night held at Fiona Stanley Hospital on December 11. This event was kindly sponsored by GE and we would like to thank John Forbes-Keith for their support not only for this event but throughout 2018.

We had a total of 10 cases presented by sonographers from both private and public hospitals across Perth, all at varying levels in their careers. The brief was '6 slides in 6 minutes' and included a range of topics, including: renal cell carcinoma, perforated gallbladder, cervical ectopic, breast lumps, recurrent juvenile parotitis, Hirschsprung's disease, intravascular theatre case, paediatric and personal obstetrics experience cases. Best presentation of the night was awarded to Amber Boehm from Perth Radiological Clinic for her case of *Paraganglioma*. ASA has kindly offered Amber 25% discount on registration to an ASA conference of her choice within the next two years.

The night was well attended with around 70 delegates, and as always, offered a great opportunity for us to learn from each other's clinical experience. We would like to thank each of the speakers for their efforts in preparation and giving their time to present: Hannah Zubrowski, Kim Pham, Amber Boehm, Charissa Bright, Mona Savani, Ashlee Bradshaw, Vanessa Zomer, Kirstin MacLennan, Goran Obradovic and Christina White.

Our 2019 program is beginning to take shape with tentative dates booked for travelling workshops in May and November. We look forward to another busy year of successful CPD events!

We would like to give a special mention to all our dedicated committee members and their continued hard work in organising the fantastic events we held in 2018. Here's to another great year!

Kirstin MacLennan Western Australia Branch Committee

#### Wellington

Welcome from Wellington where we can't decide if we are going to swelter in the heat or be blown away by gale force winds this summer!

We once again had a very informative obstetric meeting in September with Dr Jay Marlow, Head of the Fetal Medicine Department of Wellington.

Dr Marlow increased our knowledge of placental management, and walked us through the unit's protocols for MCMA twin pregnancies. As usual, we spent extra time with lots of questions. Jay is always very accommodating and we really appreciate the time she takes



to come and be a guest speaker. On this particular evening she was ending a 36-hour stretch of no sleep, so her dedication to our cause was truly evident.

November was the time for new graduates, students and first-timers to have a go at presenting. And, with the added bonus from ASA of an award for the best presentation, we had a great response. Presentations ranged from *The life of a new graduate*, through to gynaecology cases, an unusual hernia and to Sarah Srayko's winning case of *Situs inversus totalis*.

Well done to all presenters and I hope this inspires them to go on and present more often and perhaps at a conference as well.

I would like to take the time to thank Jodie Long and Loreena Bloomfield who travelled around New Zealand meeting their branch committees, major employers and the MRTB. It is always encouraging to be able to speak freely and face to face with our executive; they listened to our concerns and opinions. The support is immensely appreciated.

Our small committee is looking forward to this year and being able to bring some different events onto our calendar to further educate and inspire the sonographers in the greater Wellington area.

Wishing all members a happy and educationally inspiring New Year.

Lynn McSweeney Wellington Branch Committee

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# interesting Cases

#### **Presentation**

A 23-year-old female presented with a lump in the left supraclavicular region that was clinically suspicious for a lymph node.

The patient had noticed the lump for two weeks with no change in size over this time. It was painless, cherry-sized and hard. There was no skin redness or secretion from the skin in the region and there was no history of trauma.

#### **Findings**

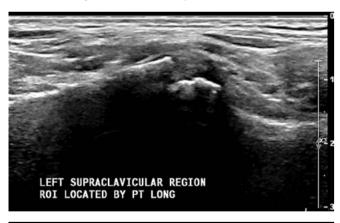
Targeted ultrasound of the left supraclavicular region identified a wellcircumscribed non-mobile osseous structure arising from the cervical spine. The patient was referred for a chest X-ray that confirmed the presence of a small left-sided cervical rib.

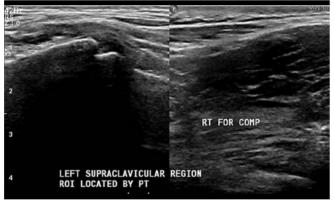
Send Interesting Cases to editor@sonographers.org. If you would like to write up a case report for publication in the *Sonography* journal the guidelines are as follows:

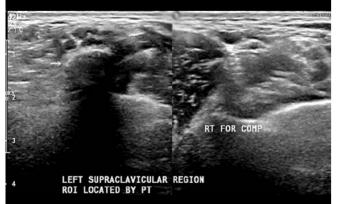
A case report of a single case may be an unusual presentation of a common condition or a rarely seen condition. The report should have an educational outcome for the reader. The case report should be structured into headed sections as follows: Introduction, Case description, Discussion and Conclusion. The report requires five elements: a statement of why the case is worth reading about; an account of the case, with all relevant data; discussion of evidence that the case is unique or unexpected; possible alternative explanations for case features; conclusions with implications. The report should be 1000–2000 words and include 6–10 figures and up to 30 references.

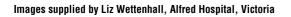
A case series describes a number of cases where, retrospectively, an observation is made and commented on.

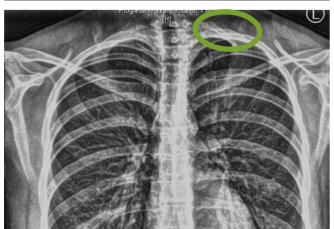
Please also check the submission instructions on the *Sonography* webpage, www.onlinelibrary.wiley.com/page/journal /20546750/homepage/forauthors.html.











## Making life easier PD asa



Member benefit - we manage your CPD points for you

### Don't forget to select PD-asa for your 2019 ASAR renewal

Take advantage of your member benefit; make sure you select PD-**asa** as your default CPD program in 2019 when completing your Australian Sonographer Accreditation Registry renewal. The renewal period for sonographers closes on 31 March 2019.

### NZMRTB practitioners

To take advantage of your member benefit, contact the ASA member services team to request your CPD record be activated.

Remember to log your non-ASA CPD activities to make sure your record is up to date.

For more information about the PD-asa CPD program, email memberservices@sonographers.org

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Joining an ASA Special Interest Group (SIG) Committee is a great way to advance your professional development and share your expertise and experience. It is also an excellent way to expand

your skills and knowledge and exchange ideas with other highly experienced sonographers from diverse backgrounds who are working in the same discipline or who have the same special interest.

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