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from the editor



Welcome to the September issue of soundeffects news.

You'll likely be reading this as our Special Interest Group symposium gets underway in Queenstown, the adventure heartland of New Zealand. We've got a stellar line-up of distinguished Australian and New Zealand speakers who will be sharing their experiences and knowledge about the popular and ever-evolving fields of musculoskeletal and O&G imaging. We'll be sure to share the event highlights with you in the next issue.

In this issue we bring you a full wrap-up of the annual international conference. With more than 1,300 delegates. ASA2016 Melbourne was a huge success, delivering on its promise of excellence. As you'll see from the photo gallery on pages 7 and 9, the conference was a great mix of professional education, networking and fun. Our Student Award winners and Rural & Remote Sonographer Scholarship recipients share their personal experiences of the conference on page 18.

We are delighted to profile South Australian sonographer Assoc. Prof. Kerry Thoirs, who earlier this year was awarded the ASA's highest award, Sonographer of the Year - The Pru Pratten Memorial Award, as well as Researcher of the Year (see page 20).

On page 12 you can read about Dr Gillian Whallev's remote tropical adventure in the Cook Islands, where she screened hundreds of children for rheumatic valve disease. The scanning was fast and furious, but it was also efficacious and efficient and incredibly rewarding.

This issue also features recently published research from members (page 10). This will be a regular section of soundeffects news, so if you've published something recently, please let us know!

As you'll see on page 32, there has been a diverse range of branch education meetings and CPD activities during the last few months. A big thank you to our members who continuously support the ASA by volunteering their time to plan, organise and present at our educational activities every month, as well as those of you who attend these events.

As always, our reader competition (page 30) offers a tricky case to diagnose and our Advocacy Alert (page 4) brings you up to date with what we've been doing behind the scenes to raise the profile of sonographers and advance the profession.

Happy reading and scanning!

Samantha McCrow Editor communications@a-s-a.com.au



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president's message

Conferences are great! I love the chance to catch up with other sonographers who I only get to see at this time of year. The ASA's annual international conference in Melbourne was particularly special. The program was packed full of quality speakers; the social events were spectacular; and I met many ASA members who gave me insight into subspecialties outside my usual cardiac niche. It was great to learn more about the differences among the specialties, and it was reassuring to see that we have many common struggles. This was particularly clear when the representatives of the Future Directions Forum met for lunch and talked about some of the challenges facing us.

A light bulb moment happened on the Saturday morning when I was chatting with a very experienced sonographer just before the ASA Awards of Excellence breakfast. He told me how excited he was and how much he looked forward to the event each year. He was genuinely excited about the upcoming presentations. I was reminded that this is the whole point - that every year we come together at the ASA's conference to celebrate excellence. This year's theme was in fact 'Excellence', and it captures perfectly the essence of what we do. The award nominees, invited guests and our guest speaker Adam Elliot all embodied excellence. It was a real honour to present the ASA awards because all recipients were very worthy exemplars of excellence in sonography.

I viewed the remainder of the conference in a very different light. Excellence was all around me: the presenters, the delegates, the representatives of the Future Directions Forum, our sponsors and exhibitors - all striving to make our

profession better and improving the standard of sonography for our patients. The realisation was humbling.

Continuing with the theme of 'Excellence', the quality of nominations for the first round of the ASA's new Fellowship Program was outstanding. I was overwhelmed by both the support for this initiative and the incredible contribution to the ASA and the profession that so many of you have made. It is clear that this kind of recognition is long overdue. The process has generated some fantastic discussion that will further shape the future of this valuable program.

Following the departure in July of Dr Stephen Duns as CEO, the ASA Board and staff have continued to work hard and enthusiastically. The Board is committed to delivering on the goals of our Strategic Intent 2015-2020. There is currently a lot happening in sonography and I am confident that the team we have in place will achieve strong and lasting results. I expect to see significant strengthening within the ASA over the coming months.

The next major ASA educational event is our Special Interest Group symposium in stunning Queenstown, New Zealand, which is likely well underway as you read this issue of soundeffects news. I am excited about attending this event and look forward to sharing the program highlights with you in due course.

Thanks to the ASA members who introduced themselves during the Melbourne conference or who have recently emailed me. I appreciate the time you have taken to share your suggestions and concerns. Your input



is invaluable and your words of support and encouragement help keep me and the Board striving for success. The future growth of the ASA depends on input from members, so I look forward to continuing these conversations with all of you.

Tony Forshaw, President president@a-s-a.com.au

soundbite

Did you know?

The ASA was initiated by the Victorian Ultrasonographers Group and registered as a not-for-profit incorporated association in 1992. Over the past 25 years the ASA has experienced significant change and growth. Today the ASA continues to evolve to be a contemporary professional body representing the profession and its members.

advocacy

James Brooks-Dowsett & Karen Farrar ASA Policy and Advocacy

Sonographer workforce

The ASA collaborates with industry partners and regulators to address the sonographer workforce shortages in Australia and New Zealand.

Throughout 2015 the ASA partnered with the Victorian Government in the establishment and running of a cross-sector Sonographer Working Group that considered the current challenges to education, distribution and retention of sonographers across Victoria and to provide guidance to an allied health workforce research activity being led by Southern Cross University.

This working group concluded earlier this year and produced a range of options and suggestions for future policy processes and standards to assist the education, distribution and retention of sonographers across Victoria. These are currently being considered by the Victorian Government.

The ASA is also working with the Australian Government's Department of Health to progress work, drawing on all available data on the sonography profession, to develop a national workforce profile that can be used to inform future initiatives, such as those that support clinical training of student sonographers and other activities which respond to the workforce shortage.

In the interim, for information on the workforce in Australia, the Australian Government Department of Employment has produced labour market studies which can be accessed on their website under 'Occupational skill shortages information': www.employment.gov.au /occupational-skill-shortages-information

The ASA also makes available to members information on sonographer

employment conditions and other workforce information through the ASA Employment and Salary Survey. Members can access the results of these surveys through the ASA website (www.a-s-a.com.au) under 'Quality practice'.

ASA Special Interest Groups

The ASA is proud of our extensive network of branches and the dedication of committee members who volunteer their time and expertise to provide advice and quality education to meet the needs of their local sonographer communities.

Members who volunteer are an essential part of the ASA. By sharing their expertise and time they help us to provide the sonographer community with a range of extensive member benefits and ensure that we are able to achieve our goals.

In 2016 the ASA has reviewed its growing network of Special Interest Groups (SIGs) that provide advice and guidance on issues relating to either particular discipline areas of sonography or topics of significance to the profession.

Currently there are eight SIGs:

- Breast
- Cardiac
- Musculoskeletal
- Obstetric and gynaecological
- Paediatric
- Research
- Sonographer health and wellbeing
- Vascular.

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.

In the coming months the ASA will be calling for expressions of interest from members who are interested in joining a SIG. In the interim, do not hesitate to contact the office if you would like further information on SIGs or other volunteer opportunities.

Practice guidelines

Following the release of new practice guidelines in 2015, the ASA is undertaking a process to review the existing practice guidelines and update where necessary. The development of all ASA guidelines follows a thorough research and rigorous consultation process.

This year the ASA has implemented a new framework for reviewing ASA practice guidelines modelled on the National Health and Medical Research Council's A guide to the development, evaluation and implementation of clinical practice guidelines. This ensures a robust evidence-based approach is used to produce these quality resources that support sonographers in professional best practice. Reviews of existing ASA practice guidelines are being supported by ASA Special Interest Groups and informed by the latest evidence and literature.

Please refer to the ASA website (www.a-s-a.com.au) under 'Quality practice' to access the latest ASA practice guidelines and protocols. As always, we will notify members through our regular alerts as new and updated resources become available.



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ASA2016 Melbourne wrap up

ASA2016 Melbourne – our 23rd annual international conference – attracted 1,300 delegates and provided an exceptional educational program.



Every year our international conference gives sonographers the unique opportunity to find out the latest developments in sonography and to interact with colleagues from across Australia and New Zealand. It is the largest educational event tailored specifically for sonographers across all streams and at all levels within Australasia.

With a diverse and talented line-up of speakers and an exciting and comprehensive program of plenary presentations and workshops – including a 2-day cardiac symposium – this year's event was a huge success.

The many highlights included:

- Professor Anil Ahuja, Dr Ben Stenberg and Cathy West – our esteemed international guest speakers
- a broad range of presentations aimed at all levels of sonographers
- a record number of proffered papers and ePosters included in the program
- the inclusion of non-clinical sessions, which widened the scope of the conference
- cardiac symposium, featuring some of the leading lights in the field

- ASA Awards of Excellence, including Kerry Thoirs winning Sonographer of the Year – The Pru Pratten Memorial Award
- opening plenary guest speakers
 Karen Carey and Jerry Grayson
- guest speakers Adam Elliot (ASA Awards of Excellence Breakfast) and Waleed Aly (closing plenary).

The ASA Welcome Reception (sponsored by GE Healthcare), the ASA Gala Dinner (sponsored by Siemens) and the ASA Breakfast (sponsored by Toshiba) provided a great networking opportunity and a chance for everyone to catch up.

The 2016 ASA Awards of Excellence were presented at the Awards of Excellence Breakfast, sponsored by Philips. We congratulate Kerry Thoirs, who was awarded the 2016 Pru Pratten Memorial Award (Sonographer of the Year).

Such a large event relies on the collaboration and cooperation of many people. Thank you to everyone who contributed to ASA2016 Melbourne, including:

- Faye Temple (Program Convenor) and Margaret Condon (Scientific Coordinator) and the ASA2016 Melbourne Convening Committee for all their hard work planning a great program
- the talented faculty of presenters who gave their knowledge and time to ensure a diverse and relevant program that included international presenters Professor Anil Ahuja, Dr Ben Stenberg and Cathy West
- the event sponsors, whose support demonstrates commitment to the medical sonography community and the positive progression of diagnostic medical imaging, particularly our

ASA2016 Melbourne prizewinners

The ASA congratulates the following presenters:

Best clinical presentation – sponsored by CQ University

Presenter: Stephen Bird

Title of presentation: Fetal hearts simplified with an emphasis on the aorta and trachea

Best research presentation – sponsored by Capital Radiology

Presenter: lan Schroen

Title of presentation: The impact of maternal obesity on second trimester ultrasound examination times

Best poster – sponsored by Aon Presenter: Tristan Reddan

Title of presentation: The grumpy stump – ultrasound and stump appendicitis

Best first time/student presentation – sponsored by Aon

Presenter: Melati Ali

Title of presentation: Sonazoid – our initial experience in National University Hospital, Singapore

Best overall presentation

Presenter: Tina Cullen

Title of presentation: Lung and pleural ultrasound in the emergency department

Scientific quiz winner - Nikki Etheridge

Passport prize winner- Michelle Tsai

Cardiac quiz winner - Shona Evans

Platinum sponsors GE Healthcare, Philips, Siemens and Toshiba for providing the equipment and application specialists for the scanning workshops

 the delegates! Your ongoing passion for knowledge and learning makes it a pleasure to provide such a valued conference each year.







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Sponsorship

The ASA is grateful to the following companies for their support and contribution to the conference.



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Platinum sponsor ASA Awards of Excellence sponsor Cardiac Symposium sponsor

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Platinum sponsor ASA Breakfast sponsor

ASA2017 Brisbane

We are in the process of designing a world-class program for next year's ASA annual international conference at the Brisbane Convention and Exhibition Centre (2-4 June 2017).

ASA2017 Brisbane is not to be missed. Keep an eye out for updates!



Best poster/Case report sponsor Best first time/Student presentation sponsor



Gold sponsor Best research presentation sponsor





Quantum



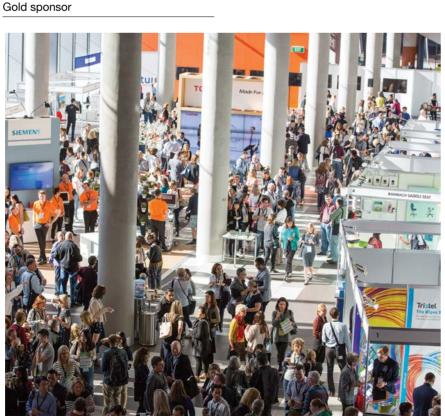
ePoster and Coffee cart sponsor Best clinical presentation sponsor



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Rural and Remote Sonographer Scholarships sponsor





members' research

A brief review of research recently published by ASA sonographer members



Dr Gillian Whalley

This new section in *soundeffects news* will feature research published by our member sonographers. In addition, there will be a section on the ASA's new website (coming soon) that will feature research by our members and we will share a link to your publication under the ASA's Twitter profile (@asasonography). This will apply to papers published in the ASA's journal, *Sonography*, but also to members' papers that are published elsewhere. So please send us your research news with a link (or pdf) to your journal paper to gillian.whalley@a-s-a.com.au

For sonographic techniques to be high quality and have a positive impact clinically, they should have:

- validity: accuracy in diagnosing a condition i.e. a high sensitivity and specificity, and a high correlation with results from other tests
- reliability: the ability to provide the same results when performed on different days by the same sonographer and by different sonographers.

So, for our first research update, we have focused on these aspects of quality in sonography. Recently there has been increased interest in validating and documenting the reliability of ultrasound measurements. Since sonographers are the ones making these measurements, it is perhaps not surprising that sonographers are leading some of the research in this area. The following papers, authored by members, highlight recent advances in this area.

Jessie Childs and Kerry Thoirs (SA) recently published reliability data for a simpler approach to liver volume assessment by ultrasound and has provided reference ranges derived from a sample of 126 healthy controls. These may prove useful for identifying liver enlargement of pathological origin in the future.

Childs JT, Esterman AJ, Thoirs KA, Turner RC. Ultrasound in the assessment of hepatomegaly: A simple technique to determine an enlarged liver using reliable and valid measurements. *Sonography*. 2016;3(2):47–52

http://onlinelibrary.wilev.com/doi/10.1002/sono.12051/epdf

Ilona Lavender, Peter Coombs and Keith Van Haltren

(VIC) reported their retrospective cohort study that evaluated the impact of training upon routine visualisation of, and thus screening of, the corpus callosum in second-trimester scans. They also reported the feasibility of obtaining sagittal views of the corpus callosum in routine scanning.

Lavender I, Coombs PR, Van Haltren K, Robinson AJ. Routine screening for callosal dysgenesis in the second trimester is achievable with intensive training. *JUM*. 2016;35(4):717–22. http://www.jultrasoundmed.org/content/35/4/717.short

Scott Allen (NZ) was part of a team that reported the impact of active and passive wrist movements on reliability of ultrasound to examine radial nerve excursion.

Kasehagen B, Ellis R, Mawston G, Allen S, Hing W. Assessing the reliability of ultrasound imaging to examine radial nerve excursion. *Ultrasound Med Biol* 2016;42:1651–9.

http://www.sciencedirect.com/science/article/pii/S030156291600106X

Gillian Whalley (NZ) led a team that conducted a meta-analysis to compare measurements made of the heart's left ventricular volumes by multimodality imaging (CT, MRI and ultrasound) and found that although left ventricular volumes were significantly underestimated by ultrasound, ejection fraction (functional measure) was not impacted.

Rigolli M, Andandabaskaren, Christiansen J, Whalley GA. Bias associated with left ventricular quantification by multimodality imaging: a systematic review and meta-analysis. *Open Heart*. 2016;3:e000388. http://openheart.bmj.com/content/3/1/e000388.full.pdf+html

Lisa Hackett (NSW) and colleagues published the first evidence that there is a significant increase in neovascularization and neoinnervation in patients with calcific tendinitis of the shoulder. This calcific material induces an inflammatory response within the tendon and the study therefore helps to explain why calcific tendinitis is associated with substantial pain.

Hackett L, Millar NL, Lam P, Murrell GA. Are the Symptoms of Calcific Tendinitis Due to Neoinnervation and/or Neovascularization? *J Bone Joint Surg Am.* 2016:98(3):186–92. doi: 10.2106/JBJS.O.00417. http://jbjs.org/content/98/3/186.long

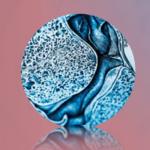
MSK New Zealand

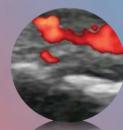
5 November 2016 NZICA Auckland Conference Centre Carlaw Park

MSK New Zealand is a meeting designed to provide a platform for both basic and advanced education to all MSK imaging specialists.

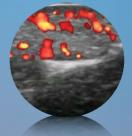
The focus of the program is the application of established and innovative MSK imaging and procedures in the upper and lower limb.

Registrations are now open: gehealthcare.co.nz/MSKNZ









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the life

A week in paradise screening for rheumatic heart disease

Dr Gillian Whalley

When you get an unsolicited phone call asking if you would like to go to a tropical island to scan for a couple of weeks the immediate response is, 'Of course, YES!' When the details emerge, the reality starts to kick in. The Ministry of Health of the Cook Islands had decided to screen all 2,300 schoolaged children that live on the island of Rarotonga over a two-week period. The challenges are not small - no cardiac sonographers reside permanently anywhere in the Cooks; there is one old SonoSite portable machine; and there is only one adult physician on the island to help, and he is currently the chief medical officer at the local hospital. My biggest personal challenge was that my husband was having a significant '0' birthday in the middle of the time period that was chosen and already fixed. Fortunately he's an underwater photographer so it wasn't the worst option to come with me. This was our week. And what a wonderful week it was.

So. let's start at the beginning. The Cook Islands constitute a group of 15 islands that, although a free and independent country, are linked to New Zealand, and importantly for this story, are linked to the New Zealand public health system. The islands lie northeast of New Zealand, between French Polynesia and Samoa. The entire population is around 15,000, and of those, two-thirds live on the main island of Rarotonga. The Cooks (as they are colloquially known) are situated in tropical waters, fringed with coral reefs and rely on the many tourists that flock there each year. The weather is warm and stable - the maximum temperature varies between 25 and 29 degrees. Lovely.

The economy of the Cooks relies on tourism and it is fair to say, by Australasian standards, nobody is rich. Rich in family, culture and lifestyle: but not rich in material objects or cash. One of the Islands' gems is an amazing public health program for children that is run by the team of public health nurses who work out of each school. They offer all kinds of services, such as vaccinations, at the schools, and in this case rheumatic heart disease screening.

Screening for rheumatic heart disease using echocardiography has become the method of choice throughout the world where rheumatic heart disease is prevalent. There is a very compelling argument to be made for it - screening identifies children who are likely to have been exposed to the group A streptococcal infection that leads to a strep throat, then to rheumatic fever and subsequently valve infections. Many of these children are symptom-free; some may have had a very sore throat in the past; and some were previously diagnosed with potential rheumatic fever.

I had been involved with echo screening for rheumatic valve disease in New Zealand, so I knew what I was getting into. Rheumatic fever and valve disease are linked to poverty, overcrowding, poor housing and poor nutrition. In the developed world, rates of rheumatic fever are in decline. In Rarotonga, children are still exposed in too high numbers.

So what are we looking for? Well, very subtle changes to the valve leaflet thickness and motion (mostly mitral, but also aortic) and a small but persistent jet of regurgitation using colour Doppler. It's far from the usual diagnostic criteria we use to identify clinical valve disease by echocardiography, but we are looking for subtle changes that could identify at-risk children because it is not usually the first time you get rheumatic fever that the valve is irreversibly damaged. It is usually the recurrences of rheumatic fever that cause the worst damage. Early identification means monthly penicillin injections until an adult age (typically 21), but hopefully this avoids early valve surgery. It is not uncommon for an 18-year-old to need a valve replacement, which starts a complicated medical pathway that always ends in premature death.

Each day started with a tropical breakfast in the beachside restaurant where we were staying, then a brief car trip to a local school where we 'made do' with our assorted machines. We borrowed machines from GE in Australia and NZ, and from Fuji SonoSite in NZ. Our rooms were makeshift and of varying lighting (but always too bright) and our beds were fixed height massage tables, the chairs typical plastic outdoor chairs.

And did we scan fast! There was literally a convever belt approach - a nurse would undress the child on the other side of the bed (the sonographer fixed in her/his chair) and with no details in the machine, we started scanning. No ECG









Clockwise from top left: Children checking in and being weighed before screening; Rheumatic aortic regurgitation; Checking out the underwater landscape (photo by darryltorckler.co.nz); Gillian at her left-handed station

either. Following a carefully designed protocol, we scanned all four chambers and the four valves and only if we suspected any pathology did we extend the study. Using covert communication we would indicate to the nurse that we needed ECG electrodes and while they put those on, the sonographer entered the child's details into the machine. One day, between four of us, we scanned 385 kids. And yes, we were exhausted, but somehow we got through. It was fast and furious, but it was also efficacious and efficient. All in all we identified about 35 definite cases of rheumatic valve involvement; another 35 to 40 possible cases; and a similar number of congenital defects. such as ventricular septal defects, Ebstein's anomaly, atrial septal defects and patent ductus arteriosus.

I have discussed on Facebook the health and safety challenges of working like this. And I would never advocate that any sonographer work at this pace permanently. But, when the cause is as good as this, and you have a target to reach, somehow you push on. We did have the opportunity to adjust

the heights of the beds; there were pillows to support arms and to sit on for additional height; and we could get up and move or rest whenever we wanted. Food and water was plentiful, as was the laughter (and the collegiality more so). My muscles ached for certain. But most days I managed to get into the sea for a long snorkel (something I love doing as much as I love echocardiography) and the aches melted away. If you have ever considered going on a remote trip like this, I would certainly encourage you. It is truly amazing to me how often I find commonalities amongst people of different backgrounds professionally and culturally - and how much we laugh together. There is nothing like a great cause to bring out the best in everyone. And when that cause is located in a tropical island paradise, who can complain?

Dr Gillian Whalley is the ASA's General Manager -Education and Practice Development, and Executive Director of the Institute of Diagnostic Ultrasound.





Obstetric scanning is an especially challenging ultrasound specialty, introducing an additional range of social and emotional factors to the usual technical and anatomical considerations faced by sonographers. An interesting question for sonographers performing obstetric morphology scans is 'What is the most important focus in our scans?'

feature article

When faced with this question, some answer that the fetal heart is an important area, whereas others may identify areas of the maternal anatomy as important, such as cervix and uterus. Some may identify the brain as an area of high importance. All would be correct, but sonographers also have a responsibility in holistic patient care, as well as the technical aspects of our work. The widening of the sonographer's focus in the obstetric scan is a result of the evolution of the sonographer's role in this ultrasound specialty.

The development of the sonographer's role in obstetric ultrasound

Traditionally obstetric information was held by the senior women in family groups who had 'been there, done that'.1 As the discipline of obstetrics evolved through the ages, the emphasis moved away from this traditional family setting. Relevant information initially passed to midwives and doctors, but in modern medicine's highly technological practice of obstetrics, a large number of specialised professionals are employed specifically to manage different aspects

of pregnancy. Sonographers are among those specialists.

With the development of ultrasound and specialised ultrasound training, the assessment of fetal anatomy and physiology has become the domain of the sonographer. Sonographers are not only masters of ultrasound technique. They must also be able to tailor the examination to the needs of each patient, based on their knowledge of anatomy and pathology, and provide diagnostic images and notes to reporting doctors who often don't have direct contact with the patient.

The amount of time sonographers spend in direct contact with patients also brings an opportunity to add a holistic patient care approach to their technical and clinical responsibilities. Patient communication is part of the sonographer's expertise, with carefully guided conversation frequently providing additional details not recorded on requests. This can inform technical aspects of the examination and contribute greatly to the diagnostic outcome when included in the sonographer's report. Sonographers can also use this one-on-one time as an opportunity to reduce maternal anxiety about the ultrasound examination.

The sonographer's role in reducing maternal anxiety in obstetric scans

A mother undergoing an obstetric scan is not typically a patient, but someone going through a normal life stage.



Tony Parmiter

In addition, the majority of obstetric outcomes are normal. So why does obstetric scanning create such anxiety? The routine application of ultrasound scanning to obstetrics, combined with mothers' greater awareness of possible complications and abnormalities, may explain the increased maternal anxiety levels that are often associated with pregnancy and heightened further during obstetric ultrasound scanning.

The increasing trend to use the internet and social media to access information on pregnancy and obstetrics can often be a source of unwarranted anxiety. Trustworthy sources can be difficult to find and laypeople can lack both access to medical literature and the background knowledge required to interpret available information. Searches of internet articles and forums can suggest a much higher rate of pregnancy complications and adverse outcomes than peer reviewed literature.

What can the sonographer do about the levels of anxiety experienced by mothers during an obstetric scan? Patients place their confidence in the sonographer to assess and confirm the health of the fetus using ultrasound. The length and nature of the patient contact puts the sonographer in the unique position of being able to have productive dialogue with the patient, the depth of which can be based on the level of anxiety of the mother and amount of detail sought. The mother and any family members that may be present can be involved, and with a simple description of fetal structure, anxiety can be allayed while also reinforcing the expert role

of the sonographer. Dealing with this subtle component of the examination is challenging to teach and is often mastered only after a number of years of experience.

Sustained stress during pregnancy i.e. beyond any immediate anxiety related to the obstetric scan, affects not only the mother but the fetus too. Maternal stress, depression and anxiety have a wide range of effects on fetal development.2 Primary in these abnormal outcomes is neurobehavioural abnormality. Maternal anxiety during pregnancy has been linked to premature delivery, small fetus at delivery and neurological childhood disabilities such as attention deficit hyperactivity disorder (ADHD).3 The current issue of Sonography contains an article by Dr Afrooz Naiafzadeh on maternal vascular changes that may also suggest a mechanism for anxiety-related preterm delivery and small birth weights: 'Stress and preterm birth: Biological and vascular mechanisms affecting feto-placental circulation and the length of gestation'.

The sonographer's role in breaking bad news in obstetric ultrasound

In the close setting of the ultrasound examination, patients are keenly aware of any facial expressions or manner from the sonographer that may indicate an abnormal finding. In the case of an abnormality being detected by the sonographer, a medical opinion is sought by the consultant radiologist, who provides guidance to the referring doctor regarding medical management. However many sonographers are tasked with the responsibility of providing a verbal report to the patient.

There is no perfect way to convey results of an abnormal morphology scan. Dealing with fetal death in particular is one of the hardest situations a sonographer will have to face. The sonographer has a great responsibility to impart this most difficult finding with compassion. Most sonographers learn from imperfect attempts and less than successful patient interactions. Unfortunately some of the most derogatory references about the conduct of sonographers involve the inability to appropriately communicate adverse findings.

In accordance with the ASA's Standards of Practice, sonographers should follow workplace policies and protocols when giving verbal results directly to patients. In particular sonographers are referred to sections '7.7 Communication' and '7.13 Reporting technique and protocol'. Additionally, discussion of any findings should not include a discussion of management options.

Conclusion

As ultrasound specialists, sonographers have a high level of technical, anatomical, physiological and pathological expertise. They are responsible not only for technical aspects of the obstetric morphology scan but also the acquisition and documentation of additional information that may be useful to the radiologist or obstetrician in the management of the patient. The level of patient care by sonographers also extends beyond monitoring physical signs to include a level of reassurance and psychological support during the examination.

Obstetric sonographers are uniquely placed to describe and interpret morphology scans, helping families to understand how complex the modern obstetric scan has become. In most cases they can also transform a comprehensive examination into a

positive and fulfilling experience for the mother and other family members in attendance.

Returning to the original question of: What is the most important focus of an obstetric ultrasound examination? The most important focus is the information obtained during the examination and also how that is conveyed.

As a result of this the mother and family can be reassured that a thorough examination has been performed by a competent and compassionate professional. In the case of a normal examination, this provides a positive bonding experience as well as allaying fears relating to the pregnancy. In an abnormal examination, or the unfortunate situation of fetal death, the professionalism and compassion of the sonographer can also be a profound component in the grief process, and reduce the impact, and that compassion will remain with the patient and family.

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(14) soundeffects news

SONOGRAPHY

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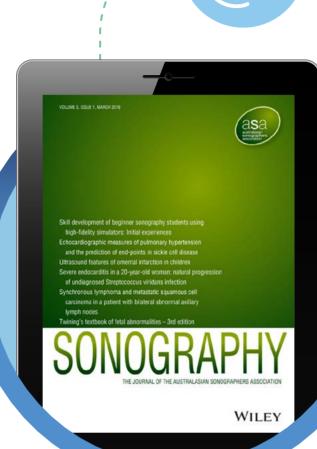
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asa award winners

Rural and Remote Sonographer Scholarships

The ASA is committed to supporting sonographers who live and work in rural and remote areas. Every vear we offer Rural and Remote Sonographer Scholarships to provide financial assistance for up to three ASA members to attend our annual international conference. Recipients also have the opportunity to publish research in the ASA's peer reviewed journal Sonography and to present this research at the conference.

The 2016 scholarships, proudly sponsored by Lake Imaging, were awarded to Sonya Harland, Simon O'Brien and Brian Richards. Here's what they had to say about attending ASA2016 Melbourne earlier this year.



Sonya Harland would like to express my sincere gratitude to the ASA and all the sponsors who facilitated my attendance

at ASA2016 Melbourne. As a regional sonographer attending an international conference, it provided a holistic learning experience. The program boasted three action-packed days, offering something for everyone. I appreciated the musculoskeletal workshops, along with the plenary sessions for both MSK and obstetrics. I enjoyed participating in peer discussions with colleagues both old and new from varied backgrounds. My time perusing the trade exhibits allowed a great appreciation for new technologies and the potential positive impacts upon future scanning. Since returning home

I have started to put into practice some of the new information and scanning tips from my Melbourne experience. My goal is to improve services locally in an effort to prevent excess travel and associated costs for my regional clients.



Simon O'Brien I'm a relatively new member of the ultrasound community and have never attended a conference, so I

expected to spend ASA2016 Melbourne completely overwhelmed, listening to speakers with much broader experience and infinitely better skills and knowledge. While certain talks and workshops left my head spinning, the conference as a whole sparked a new level of enthusiasm. It was reassuring to be told 'This is best practice' and to think 'Excellent, that's how I've been doing it', and to be shown new scanning methods ... I'm looking forward to trying out some new tricks! Many thanks to the ASA for an excellent conference and providing support to get me there.



Brian Richards The ASA's international conference in Melbourne was rewarding and inspiring. The range

of topics covered in the plenary sessions and workshops gave me the opportunity to extend my ultrasound knowledge, particularly in regard to current workplace practice and standards of excellence. I am a fan of Stephen Bird, so attending all his presentations was one of my priorities. I was not

disappointed! In the extensive exhibition area I found out about the latest advances in ultrasound technology, and I caught up with some old friends, as well as meeting new ones. Without a doubt the highlight was presenting immediately before Waleed Aly in the closing plenary. I overcame nerves to deliver a smooth talk on 'Ultrasound - It's a dark art?' and was thrilled to receive lots of positive feedback. I look forward to covering other topics at future conferences. As I mentioned in my talk, 'Action comes before motivation'. It truly does! Thank you for the wonderful opportunity and well-organised conference.

Student Award winners



Glen Andrews-**QUT Cardiac** I thoroughly enjoyed attending ASA2016 Melbourne. Being a cardiac

sonographer. I found the cardiac sessions really interesting. It was great that the majority of presentations were made by sonographers, so the content was extremely relevant and easy to understand. It was great to listen to the UK's Cathy West talk about different accreditation processes and quality assurance activities. After attending the conference I was able to take back some of these ideas to my own lab to help improve quality assurance activities in my workplace. It was also interesting to listen to the talks about adult congenital heart disease as it is an area that I haven't had much experience in. I learnt a lot of tips that I can use to improve my own adult congenital scans. Having only recently completed my postgraduate study, it was nice to meet other young professionals

asa award winners

working in the same field. I enjoyed my time at the conference and look forward to attending another one soon.



David Love - QUT General Ultrasound training can be a daunting and at times intimidating experience. The

sheer scope of the profession is a constant reminder of how much there is to learn. I admit to being somewhat overwhelmed by the old student nerves in the lead up to ASA2016 Melbourne. However, I enjoyed every minute of it. Far from feeling intimidated, I found myself very inspired by both the breadth of the profession and the obvious passion of every speaker. From the international experts to the local sonographers, the quality of presentation was world-class. The only downside was choosing between some very interesting topics. While the high-end talks were engrossing, at this stage nothing quite beats hearing how to deal with difficult abdominal scans, if for no other reason than to be reminded that it's not just me who struggles with these patients.



Vivien Na - CQU I am a newly qualified general sonographer working in Sydney. This year I attended my first

ASA sonography conference held in Melbourne. I was both an attendee and presenter of an e-Poster. I focused on obstetrics and found the presentations on both fetal neurosonography and the heart particularly practical and helpful, especially for a developing sonographer like myself. Many thanks to the ASA for the student award and for your continual support in the investment of my learning.



Ian Schroen -Monash University Thanks to the ASA for the Student Award prize to

attend ASA2016 Melbourne. Overall this was a terrific meeting with a range of learning and personal highlights. I enjoyed the wide range of clinical and non-clinical themes. Several outstanding sessions provided me with knowledge

that I will use daily within my work. In particular, two sessions stood out. First, the fetal cardiac session that included presentations by cardiologists, obstetricians and sonographers. In this session the presenters detailed the significant changes seen in a range of fetal cardiac abnormalities alongside presentations on a very specific genetic anomaly 22q deletion. Second, the Sunday gynaecology session, where the sonographer presenters gave outstanding clinical presentations on endometrium imaging throughout changes in female age, pathological conditions and contraceptive methods. The Saturday morning Awards breakfast was a non-clinical highlight that celebrated the great achievements of outstanding sonographers. Thanks again for this great opportunity.

soundbite

Q. How can I top up my CPD points?

A. You can complete CPD tests online by logging into www.a-s-a.com .au/Members/CPDtest/. A CPD certificate will automatically be sent upon successful completion of the test. Good luck!



(18) soundeffects news

Associate Professor Kerry Thoirs

South Australian sonographer Assoc. Prof. Kerry Thoirs has been an ASA member for 23 years. Earlier this year Kerry was awarded the ASA's highest award, Sonographer of the Year - The Pru Pratten Memorial Award, as well as Researcher of the Year.

Short bio

I qualified as a sonographer in 1988 after completing a Diploma in Medical Sonography through ASUM. Other qualifications: Associate Diploma Radiologic Technology (Diagnostic Radiographer), Master of Applied Science, PhD. My clinical work has been in the private sector, working as a general sonographer. I am currently working full time at the University of South Australia teaching Medical Sonography. I am also Associate Head of School in the School of Health Sciences

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

It is a great way to connect with sonographers outside of the work environment.



re in danger or and lent him the mo re-search1 /ri's3:tf, [plural] 1 seriouss discover new facts research into



Teaching (mainly online), supervising research projects, and curriculum development and review.

What aspect of sonography has been most rewarding?

I really enjoy supervising student research projects.

Who are your favourite authors?

I discover authors but then abandon them after overdosing on their books. Examples are Matthew Reilly, James Pattison, George Martin, JK Rowling.

What is the last meal you cooked?

Chicken curry. I am not the head cook in my household, so when I do cook, it is something I want to do, rather than have to do.

Favourite place you have travelled to?

White Island, off the eastern coast of New Zealand's North Island. It has an active volcano and it was fascinating walking among the fumaroles and standing on the edge of a massive, steaming crater.

Pompeii. I am curious about past civilisations and how people lived.

Place you would like to travel to?

Who do you admire and why?

I am jealous of people who can speak more than one language; more than two is really impressive!

What do you consider the perfect

Relaxing, reading, walking, sleep-ins, and catching up with family and friends.

What is your favourite holiday spot?

Anywhere where the temperature is warm and there is a white sandy beach close by.

What talent do you wish you had?

I wished I had a good singing voice.

Do you have any musical talents?

Sadly, no. I learned the piano as a child, but today I don't recognise anything at all on a music sheet.

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An Exclusive Invitation

MELBOURNE FETAL CARDIAC SYMPOSIUM

Join Dr Simon Meagher and his team at Monash Ultrasound for Women for a 2-day dynamic and interactive workshop in Obstetric ultrasound. Over 1,000 video clip sequences of fetal cardiac malformation will address the basic and advanced approaches to the diagnosis of cardiac anomalies across the first, second and third trimesters.

VENUE: Michael Chamberlin Lecture Theatre.

St. Vincent's Hospital, 41 Victoria Parade,

Fitzroy Melbourne

DATE: Saturday 12 and Sunday 13 November 2016





COST: A\$850 for two days, A\$450 for one day.

Symposium details can be found at ultrasound.com.au

FACULTY:



Dr. Simon Meagher BSc (Hons), MB BCh BAO(Hons), FRCPI, FRCOG, FRANZCOG, DDU, COGU

Consultant Obstetrician/Gynaecologist Sonologist Monash Ultrasound For Women Honorary Lecturer Monash University

Dr Paul Brooks Consultant Fetal and Paediatric Cardiologist Melbourne Paediatric Cardiology

Associate Professor Fabricio Costa Medical Director, Monash Ultrasound for Women Consultant Obstetrician/Gynaecologist Sonologist Monash Medical Centre

Maria Maxfield Senior Sonographer / Sonographer Educator Monash Ultrasound for Women

Nikki White Senior Sonographer Monash Ultrasound for Women







PD-asa report





All sonographers are responsible for managing, maintaining and updating their skills and knowledge regularly. PD-asa, the ASA's CPD program for sonographers, was developed to simplify this process.

If your triennium is ending this year, and you still need to accrue the required 40 CPD points to meet your ASAR/NZMRTB requirements, it's easier than you think.

Sonographers can gain CPD points through the ASA's diverse range of high quality CPD activities as shown in the figure below.

Check out the ASA website calendar of events to find out about CPD opportunities relevant to you.

Planning, developing, recording and reflecting on your CPD

Planning your CPD will ensure you get results that are relevant to your practice and career goals. Developing a plan will help you participate in a range of formal and informal activities.

Formal activities include conferences and workshops. Informal activities involve self-directed learning through reading sonography articles or ASA online reference collection and volunteering on committees. Once you have planned and developed your CPD, the ASA will record your ASA CPD activities, meaning that your career prospects and achievements are highlighted in your record.

By engaging in reflective assessment and learning you will define your strengths and areas of self-development. Reflecting and putting into practice what you have learnt completes the stages of your CPD.

PD-asa is free to student and ordinary members of the ASA. Visit the ASA website to access the templates and FAQs, or contact your dedicated PD-asa Program Coordinator at cpd@a-s-a.com.au to discuss your end of triennium or CPD plan.



Fig 1. CPD points can be earned through various ASA CPD activities



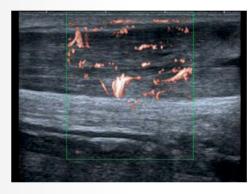
Make PD-asa your default CPD program in 2016 and enjoy the benefits.

To find out how PD-asa can make your life easier, visit www.a-s-a.com.au or email the PD-asa Program Coordinator at cpd@a-s-a.com.au

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ASA2016 Melbourne Safety Island

Catherine Robinson ASA Sonographer Health and Wellbeing Committee

'Excellence in Sonography' was certainly delivered at the ASA's annual international conference in Melbourne in May this year. The exceptional program, delivered by the Program Committee, and the glorious weather, made Melbourne a perfect host city for a wonderful educational experience for delegates, speakers and trade representatives.

The representing members of the ASA Sonographer Health and Wellbeing (SHW) Committee this year were Bernadette (Bernie) Mason, Elizabeth Naseby and Catherine Robinson, The team manned the Safety Island in the trade centre over the weekend, and hosted a workshop on Friday afternoon ably led by Bernie entitled 'The modern sonographer is still facing injury. What can we do?'

Each year the subject of health and safety always inspires enthusiastic debate among sonographers, probably due to the high rate of injury suffered by members of our profession in Australia and across the world. 1,2 This year was no different, with visitors to the Safety Island and attendees at the workshop eager to discuss workplace health and safety (WHS) concerns and personal wellbeing. It is apparent that there are still varying degrees of adherence to WHS legislation, although at every level sonographers desire improved compliance.

At the Safety Island, delegates related similar issues to those we encountered during our recent SHW webinar in March,

which focused on the challenges of modern scanning. Delegate enquiries included the scheduling of patients and times allocated for different examination types, tips for scanning to prevent injury in difficult scenarios (such as scanning the obese patient) and consultation and collaboration with managers and employers. We noticed a rising number of comments about mental health concerns due to some sonographers working in isolated settings or in workplaces where the increasing use of technology meant losing face-to-face contact hours with colleagues.

The open forum workshop saw sonographers engaging in heartfelt dialogue about their experience of WHS practices established in their workplaces. The importance of ergonomically friendly equipment and correct posture and scanning technique were addressed in Bernie's scanning demonstration. A growing number of sonographers reported scanning in tandem as a method for alleviating muscle fatigue in difficult and lengthy examinations, such as while scanning multiple pregnancies or obese patients.

At the Safety Island we received expressions of interest from a number of members about the committee. ASA members who are passionate about WHS and sonographer wellbeing, and interested in contributing to the Sonographer Health and Wellbeing Committee, please contact Karen Farrar at the ASA office at karen.farrar@a-s-a.com.au





Massage at the Sonographer Health & Wellbeing Safety Island at ASA2016 Melbourne



Any other comments or suggestions from ASA members are always welcome. They can be shared through the 'OH&S and workplace issues' category of the Members' Discussion Forum the ASA website www.a-s-a.com.au. We look forward to hearing from you!

In the meantime, scan safely and remember to look after your personal health to ensure a long and rewarding career.

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Introducing the new Associate Fellows of the **Australasian Sonographers Association**

We are proud to announce that 30 ASA members have become Associate Fellows of the Australasian Sonographers Association (AFASA).

Awarded in recognition of professional excellence, an Associate Fellowship is held for the duration of membership. AFASA also forms the foundation requirement for future candidature as a Fellow of the ASA (FASA).

The quality of nominations for the first round of this new Fellowship Program was outstanding. It demonstrates the incredible contribution to the ASA and the profession that so many members have made.

Applications for the Fellowship Program are accepted twice yearly. The next round of applications will be accepted from December 2016 to February 2017. More information is available on the ASA website.

The ASA congratulates the following ASA Members and thanks the Fellowship Panel for their hard work.

Bonita Anderson* Christopher Jansen Jenny Parkes Cain Brockley Lynne Johnson Tony Parmiter' Jessie Childs' **Greg Lammers** Rebecca Perry Peter Coombs Frauke Lever Luke Platt Carolynne Cormack Sandhya Maranna Tristan Reddan Glenda McLean Catherine Robinson Louise Deshon Jill Muirhead Tony Forshaw* Tracey Taylor' Le-Anne Grimshaw Jan Mulholland Louise Worley Lisa Hackett Afrooz Najafzadeh *Member of ASA Sandra O'Hara Allison Holley Fellowship Panel Di Jackson Nayana Parange



reports



Australian Capital Territory

This year saw a changing of the guard for the ACT committee and early on time was spent planning another year of interesting educational events.

On Saturday 19 March there was an excellent endometriosis seminar at the ANU Medical School at The Canberra Hospital, featuring two specialists in this field: Associate Professor George Condous and Dr Bassem Gerges.

Assoc. Prof. Condous is a consultant gynaecologist at Nepean Hospital and Director of OMNI Gynaecological Care at the Centre for Women's Ultrasound. He is also an Associate Professor of Obstetrics and Gynaecology at Sydney Medical School, Nepean, University of Sydney and a specialist in gynaecological ultrasound and advanced endosurgery.

He gave several presentations outlining scanning protocols and optimal scan techniques for investigating endometriosis. In particular, a complete transvaginal examination as well as assessment of the cervix and vagina, ureters and bowel should be included, looking for any nodules. Assessment of the bowel is particularly crucial as it influences patient management during surgery and has proven better results for patients post-surgery. The importance



Associate Professor George Condous and Dr Bassem Gerges, with Deb Paoletti

of a dynamic assessment was also discussed, and we were shown multiple examples of scanning with balloting of the uterus to elicit the sliding sign.

A clear message from his presentations was that there must be consensus on the investigation and diagnosis of endometriosis. This includes our scan technique, ultrasound findings and reporting. Assoc. Prof. Condous is a strong advocate for developing a qualification for sonographers performing endometriosis scanning.

Dr Bassem Gerges is a consultant gynaecologist at the Nepean Hospital in Sydney and an honorary associate clinical lecturer at the University of Sydney in obstetrics and gynaecology. He is a specialist in gynaecological ultrasound and minimally invasive gynaecological surgery and has published in the field of ultrasound diagnosis for endometriosis.

Dr Gerges is currently completing his fellowship and spoke at length about his learning process. He emphasised that for many patients there is a long time between the initial presentation and diagnosis, on average up to 10 years, and that many unsuccessful surgeries can often further complicate cases. Expert documentation of nodule position and degree of invasion can remarkably improve patient treatment and outcomes. The typical symptoms of endometriosis (including dysmenorrhea, pelvic pain, dyspareunia, pain passing urine and even infertility) were outlined.

All registrants agreed that the seminar was extremely worthwhile. Thanks to Assoc. Prof. Condous and Dr Gerges for their time and contribution to an

outstanding educational event in the ACT. Thanks also to Deb Paoletti and Jo Weir at The Canberra Hospital, and the local committee for organising another successful day.

Lisa Hicks **ACT Branch Committee**

Auckland-Waikato Branch

Our initial 2016 meeting was held in March with two excellent speakers. It was very exciting to see it booked out well before the event.

Our opening speaker, Philippa Maurer, had the audience hooked from the start. Philippa, a senior sonographer from Starship Hospital, intrigued us with her specialist subject of 'Ultrasound of the paediatric spine'. Her presentation on 'The simple sacral dimple: diagnostic yield in neonates' directed us on how to approach this examination, normal protocol and expected anatomy to be visualised. The take home messages were: Don't assume five lumbar vertebrae; and if the shape of the conus is abnormal, no matter at what level it ends, or if the filum is thickened, then referral to a neurosurgeon is required.

'Carotid ultrasound - what you need to know' was presented by Vishwant Sandeep, senior sonographer from Auckland Hospital and Mercy Radiology. We were educated about what the vascular surgeons need to know and why. Vishwant gave step-by-step details, hints and guidelines of what he described as an art. Importantly, the carotid scan must be systematic, personalised and consistent, without spending time on things that don't matter. His scanning protocol was explained and outlined,

with all present gaining from his depth of experience.

Thanks to both presenters for extending our knowledge, and to Starship Hospital Radiology Department for providing the venue, and Toshiba for supplying the refreshments. We are very grateful for Toshiba's ongoing support of our branch, helping us to provide educational events for our sonographers.

We look forward to providing further enriching meetings during 2016. To enable easier access for sonographers from the Waikato and Auckland regions, meetings will be held on Saturdays.

Our meetings are proving very popular, so remember to register early and to let us know if you can no longer attend.

Julie Heaney Auckland-Waikato Branch Committee

New South Wales

We have had a busy start to 2016 in Sydney. In February we hosted an obstetric evening sponsored by Samsung with fantastic presentations including: 'Non-invasive prenatal testing (NIPT) in first trimester screening and the 12-week structural scan' presented by Dr Joanne Ludlow: 'Cervical length: what you need to know during pregnancy' presented by Olivia Jeffries; and 'New criteria on uterine anomalies' presented by Dr Philippa Ramsay.

This meeting was held in Homebush, and with more than 110 participants from all over Sydney, we are on the hunt for a venue in a similar location to host future meetings.

In May many members headed to ASA2016 Melbourne, which had fantastic speakers, amazing workshops, great

food and coffee, and many social opportunities to catch up with past and present colleagues. A huge thanks to the ASA Melbourne organising committee for planning a great educational event.

In June we held our MSK meeting with live scanning sponsored by Siemens. Presentations included: 'Interesting cases and scanning the foot' presented by Lorraine Layton: 'Hand' presented by Lisa Hackett; and 'Shoulders' presented by Patrick Nielsen. Live scanning was performed to apply theory to practice and showcase the latest Siemens technology.

Thanks to all our presenters, sponsors and volunteers. Without you our education events wouldn't be possible Thanks also to Barbara Haseloff for all her help with the NSW committee. We wish her well in the future.

We are excited about what we have planned for the second half of the year and look forward to seeing you all soon.

Sarah Skillen **NSW Branch Committee**

Northern Territory

Our educational events for this year included a sonography trivia night in March, presented by Carol Brotherton, sonographer at the Royal Darwin Hospital. It was filled with interesting, challenging and fun ultrasound cases, followed by a discussion. We thank Toshiba for their generous sponsorship of this event.

In June Dr Thanh Duong, radiology registrar consultant at the Royal Darwin Hospital, provided a presentation on 'Diverse appearances of collections seen with ultrasound' and Karolynn Maurice, renal access clinical nurse consultant, also from the Royal Darwin Hospital, spoke about 'A renal nurse's perspective of arteriovenous fistulas'.

We thank all our presenters who have dedicated their time to help update and inform the ASA's NT members this year.

Our education meetings have been generously supported by the Royal Darwin Hospital that provides the venue and equipment.

We welcome our newest committee member, Louise Hudson, sonographer at the Royal Darwin Hospital.

Sheree White & Barbara Vanini NT Branch Committee

Queensland

The Queensland Branch educational calendar for 2016 began on 16 February with a case study night at the Prince Charles Hospital Education Centre. The evening was well attended and packed with information on a range of unique cases. Case study nights tend to be filled with 'take home facts' and this one was no exception. A big thank you to all the presenters for sharing their experience, images and expertise.

The second event of the year, 'Breast imaging - All you need to know', was sponsored by Siemens and held at the Prince Charles Hospital Education Centre on 3 May. A panel of three clinical speakers presented to 61 delegates, providing an overview of modern breast imaging. Elizabeth Phillips, an advanced radiographer/sonographer from BreastScreen Queensland, covered both basic and advanced breast ultrasound techniques. Elizabeth also presented a live scanning session, putting theory into practice in real time.

Joanne Walker, a radiographer with a wealth of experience in mammography, presented on tomosynthesis - an innovative new technology that allows breast tissue to be viewed in a 3D format. The third topic covered was breast MRI.







Top. Elizabeth Phillips from BreastScreen. Bottom. Joanne Walker, Lara Janson, Paul Lyons (Siemens apps), Elizabeth Phillips. Noel McPhail (Siemens) and Nicola Keelev (Siemens)

Lara Hansen, a Siemens breast MRI product specialist, presented an overview of breast MRI, advances in technology, and how breast MRI can be used in conjunction with other modalities to form a more complete clinical picture.

On Friday 3 June our third annual interactive case study night was held in Southbank at the Ship Inn, providing a great opportunity to learn and socialise. A number of cases were presented, followed by questions on each case. The evening concluded with a presentation of informative slides on each case/ pathology, as well as a 'quick round' of questions covering a range of ultrasound topics. Thank you to Philips for once again sponsoring this popular event.

On Saturday 18 June a half-day event on liver fibrosis quantification was made possible by Siemens and held at the Russell Strong Auditorium at the Princess Alexandra Hospital. This event featured two speakers and was well attended with 42 delegates. Craig Williams, sonographer and Siemens ultrasound product manager, presented on the physics of ARFI and its application for the liver.

Jane Keating, a senior sonographer at Royal Melbourne Hospital, spoke about ultrasound of chronic liver disease, portal hypertension and ARFI assessment of the liver, including reporting findings. Jane also gave a practical demonstration of ARFI and liver assessment. This event provided valuable information for attendees to better understand and apply this relatively new and promising diagnostic technique.

Much appreciation goes out to the speakers for their time and effort in sharing their knowledge and enthusiasm.

Queensland Branch Committee

South Australia

Wonderful things have been happening in South Australia!

On 21 April, 35 members attended an evening presentation on renal transplants. Ms Toni East (one of South Australia's pioneering transplant nurses) talked about what life is like for patients living with renal failure. Most sonographers found it eye-opening and sobering, and they took away a few useful reminders, like not getting end-stage renal patients to try and drink all their daily fluid allowance in one go to fill a bladder for an ultrasound as it's not going to happen anyway!

We also had a fascinating presentation from one of South Australia's renal transplant surgeons, Dr Christine Russell, about how a renal transplant is actually done.

We concluded the evening with a rundown of the role ultrasound and nuclear medicine play in imaging the transplanted kidney by our own Melissa Farnham.

A big thank you to Toshiba for sponsorship of the evening and Alison Deslandes for organisation and reporting.

On 9 June a packed house was treated to an amazing talk by radiologist Dr Jill Robinson, head of breast imaging at Bensons Radiology. 'It's all about breast density ... Imaging the dense breast -Where is the MOUSE? Or is it a RAT?' Attendees were treated to an invaluable and informative presentation. Thank you to Philips Healthcare for sponsoring the evening.

It's great to see the South Australia Branch back in action, and even better to see how many sonographers are venturing out to attend and support the presentations.

Jess Childs South Australia Branch Committee

Victoria Branch

We have had an exciting 2016 so far. The year kicked off with a fascinating breast education meeting in February. Dr Darren Lockie (chief radiologist of Maroondah BreastScreen and consultant specialist at Monash Breastscreen), Jenny Parkes (senior sonographer and sonographer educator) and Jane O'Brien (breast and oncoplastic surgeon) gave us an insightful look at how new technologies improve breast imaging and cancer diagnosis, as well as affecting how breast cancer is managed.

The Victoria Branch committee was also busy and excited to be involved with ASA2016 Melbourne, which was a roaring success. There were a variety of clinical and non-clinical presentations and workshops by an impressive array of national and international speakers. ASA2016 Melbourne included a

successful full day of breast topics and a fantastic 2-day cardiac symposium. A big thank you to conveners Faye Temple and Margaret Condon for putting together an inspiring conference.

The second half of 2016 will be packed with Tuesday night education meetings and Saturday workshops, providing plenty of learning opportunities in paediatrics, obstetrics, musculoskeletal and more.

Thanks to our corporate sponsors for their support and all the speakers for their hard work. We look forward to the remainder of 2016!

Ramya Gunjur Victoria Branch Committee

Wellington Branch

Greetings from Wellington! We started our year with a travelling workshop in early April. Vacancies filled very quickly as usual and sonographers came from as far away as Auckland and Christchurch, making for quite a diverse full house.

Once again Lisa Hackett set off at a cracking pace challenging us to think more about the clinical testing and our observations before we put a hand on the probe. We are ever appreciative of all the hard work and the energy Lisa brings to her workshops. We go away inspired to change our practice, even if it is in a small way. And for me, personally, her talks always give me better job satisfaction. Thank you, Lisa.

Our first branch education meeting of the year was held in May, with leading New Zealand fertility specialist, Dr Simon McDowell, speaking on ultrasound's role in fertility assessment. We had a small group in attendance and an engaging

chatty speaker who gave us more of his time by far than we expected. We left with some very sobering statistics on conception past the age of 35 and a clearer understanding of our role for the specialists.

Special thanks to committee member Sarah Owen who is always there when I need help, especially of the IT variety. Sarah is always able to sort the issues for me. Many thanks, Sarah.

So that's it for us here in the mildest winter I remember. Best wishes to all for a successful educational year.

Lynn McSweeney Wellington Branch Committee

Western Australia Branch

The WA Branch had a busy start to the year with some new faces on the committee and Nicole Cammack succeeding to the role of chairperson.

SKG's Wembley branch hosted the Philips-sponsored 'Breast lesions are not always what they are cut out to be" by Dr Helena Hamilton-Wright, a popular radiologist with a particular interest in breast work. Her presentation on breast lesions highlighted the need for close attention to calliper placement as small adjustments may lead to altering

the grading classification at the time

Dr Hamilton-Wright urged us to employ all our skills of interrogation with ultrasound, to examine each breast as thoroughly as possible. The use of vocal fremitus and the new software upgrades on machines have lent further assistance to the investigative aspect of breast ultrasound.

Dr Hamilton-Wright also touched on the need to be aware of diabetic mastopathy. which seems to be of increasing clinical significance due to the rising rates of long-standing type two, insulin dependent diabetic patients.

Our July meeting was on 'Placenta accreta: identify, image, manage', which aimed to assist in the identification of placenta accreta or morbidly adherent placenta by discussing its increasing prevalence, ultrasound appearances, current management protocols and the eventual outcome for patients.

We anticipate a paediatric talk in August, a counselling talk in October and our annual interesting cases end-of-year get together in December. Keep an eye on the weekly upcoming branch meetings email from the ASA for more details!

Ariana Sorensen Western Australia Branch Committee



What's in Volume 3, Issue 3?

Original articles: Detection of the growth-restricted fetus: which centile chart? • Sonographic diagnosis of acute appendicitis in children: a three-year retrospective. Case series: Sonographic diagnosis of intraosseous epidermoid cysts of the calvarium. Case report: Ductal carcinoma in situ in breastfeeding breasts - Role of sonography. Commentary: Review of article on ischaemic stroke patients and carotid and vertebral ultrasound examinations. Review: Stress and preterm birth: Biological and vascular mechanisms affecting feto-placental circulation and the length of gestation. Resource reviews: Musculoskeletal Ultrasound. 3rd edition. CPD test: From article Detection of the growth-restricted fetus: which centile chart? www.onlinelibrary.wiley.com/journal/sono

reader competition

This issue's cases

Case 1

This patient presented for a routine morphology scan. Name the two abnormalities that were found.





Case 2

This obstetric case demonstrated an anterior placenta. How did colour Doppler contribute to the diagnosis?



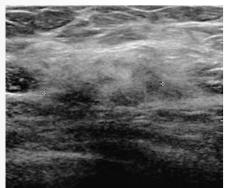
Case 2 image supplied by Rowena Findlay

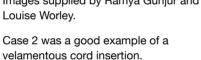
Case 1 images supplied by Ling Lee

Last issue's cases

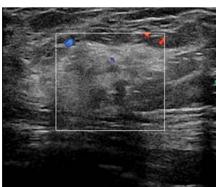
In the last issue there were two cases for readers to consider.

Case 1 was a case of invasive diffuse breast cancer. A reminder that not all breast cancers are hypoechoic, some may appear echoic





Correct answers were received from the following members: Tracey Taylor and Zea Wyatt.



Case 1 images supplied by Ramya Gunjur and Louise Worley

Images supplied by Ramya Gunjur and Image supplied by May Lee Yuen.

> Please email your answers to the Reader Competition to Samantha McCrow: communications@a-s-a.com.au



Case 2 image supplied by May Lee Yuen

soundbite

- Q. Are your ASA Member details up to date?
- A. You can update your details by logging into your membership profile on the ASA website at www.a-s-a.com.au.



ruraland remote sonographer scholarships 2017

Supporting ASA members to attend the ASA's annual international conference in Brisbane, 2-4 June 2017

applications now open - visit www.a-s-a.com.au

Supporting sonographers in rural and remote areas

The ASA recognises the challenges associated with living and working in rural and remote areas, such as limited access to conferences and educational events. Every year, the ASA offers up to three grants of \$1,000 to assist sonographers to attend the ASA's annual international conference.

2017 scholarships

Up to three scholarships are offered for attendance at ASA2017 Brisbane. Recipients will be required to write a short article for publication in soundeffects news on the benefits gained from attending the conference.

Recipients of the scholarship are encouraged to maximise the benefits from attending the conference by submitting a presentation or poster for the conference. Alternatively, recipients are encouraged to write an article for publication in Sonography.

Who should apply?

Applicants must be financial members of the ASA and live more than 100 km from a major capital city in Australia or New Zealand.

To apply, you will need to:

- complete the application form
- submit a letter stating how you and your workplace would benefit from you attending ASA2017 Brisbane
- provide your current CV
- provide the abstract to support your presentation or poster (if applicable).

Applications close Friday 2 December 2016. Visit www.a-s-a.com.au or contact the ASA Office on +61 3 9552 0000 for more information.

Apply now – Applications close Friday 2 December 2016

Visit www.a-s-a.com.au or contact the ASA Office for more information

Previous recipients

2016	Sonya Harland, Simon
	O'Brien and Brian Richard

2015	Margaretha Breytenbach
	Kathryn Deed and
	Jill Muirhead

Tamara Allcorn. Jane Bennet and

Kim Kuhnemann 2013 James Hilton, Tristan Hunt and Marnie Leighton

Rayshelle Finch

Natalie Clements

not awarded

2009 Sian Jacobs

Jessie Childs

2007 Michelle Pedretti

Kerry Harvey

Michelle Williamson and

Julie Thwaites

Brian Gilling

Sonia Brennan

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The ASA is committed to providing quality academic and clinical education. Delivering continuing professional development (CPD) opportunities is vital to support the professional success of sonographers, enhancing the community's access to quality sonographic services.

From April to June 2016 the ASA held a diverse range of CPD educational activities throughout Australia and New Zealand, including ASA2016 Melbourne, our annual international conference. Thank you to our members who continuously support the ASA by volunteering their time to plan, organise and present at our educational activities every month.

Australia

Australian Capital Territory

12 May

Cardiac Branch education meeting, Canberra Hospital, Echo teaching cases evening, sponsored by Siemens

25 June

Canberra Travelling Workshop Calvary Hospital, New approaches to venous imaging presented by Deb Coghlan, sponsored by Siemens

New South Wales

28 May

Newcastle Branch education meeting, John Hunter Hospital, Paediatric hips and pyloric stenosis with live scanning presented by Greg O'Connor, MSK injection update presented by Danny Pavan, with a presentation by Ryan Kennedy, physiotherapist, sponsored by Philips Healthcare

31 May

Riverina Branch education meeting, Imaging Associates, Wagga Wagga, Case study presentation and ASA2016 Melbourne roundup

14 June

New South Wales Branch education meeting, St Vincent's Clinic, Darlinghurst, Musculoskeletal sonography with live scanning presented by Lisa Hackett, Patrick Nielson and Lorraine Layton, sponsored by Siemens

Northern Territory

Northern Territory Branch education meeting, Royal Darwin Hospital, Arteriovenous fistulas presented by Karolynn Maurice, *Diverse appearances* of collections seen with ultrasound presented by Dr Thanh Duong

Queensland

Gold Coast Branch education meeting, Paradise Ultrasound Specialists, Benowa The value of imaging in prenatal mortality presented by Dr Jacques Olivier

28 April

Toowoomba/Darling Downs Branch education meeting, Toowoomba Base Hospital, What are the risks for sonographers in our modern age? presented by Bernie Mason, sponsored by Philips Healthcare

Queensland Branch education meeting, The Prince Charles Hospital, Chermside, Breast imaging - all you need to know presented by Elizabeth Phillips, Joanne Walker and Lara Hanson, sponsored by Siemens

1 June

Mackay Branch education meeting, Mackay Base Hospital, Interesting case studies, sponsored by Philips Healthcare

3 June

Queensland Branch education meeting. The Ship Inn Function Room, Southbank, Interactive case study night, sponsored by Philips Healthcare

Gold Coast Branch education meeting. Paradise Ultrasound Specialists, Benowa. Ultrasound of the foot and ankle presented by Daniel White, sponsored by Philips Healthcare

14 June

Townsville/North Queensland Branch education meeting, Queensland X-Ray, Pimlico, Antenatally detected renal tract abnormalities presented by Dan Carroll

18 June

Queensland Branch education meeting, Russell Strong Auditorium, Woolloongabba, Physics of liver fibrosis quantification presented by Craig Williams, Sonography for liver fibrosis quantification including live scanning presented by Jane Keating, sponsored by Siemens

Toowoomba/Darling Downs Branch education meeting, Toowoomba Base Hospital, The advanced Achilles scan presented by Greg Lammers

Far North Queensland Branch education meeting, Cairns Hospital, Musculoskeletal workshop with live scanning presented by Kath Deed and Lisa Wellby

South Australia

21 April

South Australia Branch education meeting, The Dan Hotel, North Adelaide, Life with renal failure: the work up, education and life after the transplant presented by Toni East, Renal transplant surgery presented by Dr Christine Russell, Imaging the transplant: a multimodality approach presented by Melissa Farnham, sponsored by Toshiba

9 June

South Australia Branch education meeting, University of South Australia, Breast Imaging presented by Dr Jill Robinson, sponsored by Philips Healthcare

Victoria

13-15 May

ASA2016 Melbourne annual international conference, Melbourne Convention & Exhibition Centre, Excellence in Sonography, sponsored by GE Healthcare, Philips, Siemens, Toshiba, Aon, Capital Radiology, Healthcare Imaging Services, Quantum Health Group, CQUniversity, ACM Healthcare and Lake Imaging.

Western Australia

4 June

Bunbury Travelling Workshop, St John of God. Fetal heart sonography presented by Ann Quinton, sponsored by Siemens

New Zealand

MidCentral New Zealand

6 April

MidCentral NZ Branch education meeting, Pacific Radiology, Palmerston North, Pelvic congestion presented by Dr Steven Grant and Dr Patrizio Capasso, sponsored by Toshiba

22 June

MidCentral NZ Branch education meeting, Pacific Radiology, Wellington, Pregnancy of unknown location and intrauterine pregnancy of uncertain viability presented by Dr Joanne Ludlow

Wellington

2 April

Wellington Travelling Workshop, Wakefield Education Centre, Understanding the biomechanics of the

lower limb in MSK imaging presented by Lisa Hackett, sponsored by Siemens

3 April

Wellington Travelling Workshop, Understanding the biomechanics of the upper limb in MSK imaging presented by Lisa Hackett, sponsored by Siemens

18 May

Wellington Branch education meeting, Pacific Radiology, Wellington, Why am I not pregnant? The role of the sonographer presented by Dr Simon McDowell

asawebinars

28 April

What are the risks for sonographers in our modern age? presented by Bernie Mason, sponsored by Philips Healthcare

21 June

The advanced Achilles scan presented by Greg Lammers, sponsored by Philips Healthcare



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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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SIG Paediatric

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SIG Research

Anna Graves, Ling Lee, Afrooz Najafzadeh, Kerry Thoirs, Caterina Watson

SIG Vascular

Tony Lightfoot, Anne Pacey, Jacqui Robinson

SIG Sonographer Health and Wellbeing

Samantha Brinsmead, Sandv Chamberlain, Lynette Hassall, Bernadette Mason, Liz Naseby, Catherine Robinson

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To contact any of the ASA committees, please email admin@a-s-a.com.au

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As the peak body and leading voice for sonographers, the ASA leads our profession in delivering excellence in

sonography for the community.

Our goals are to:

- be a world leader in providing sonographer education and research
- promote and advocate the highest possible professional standards
- enhance the role of the profession as the registered experts in medical sonography
- provide exceptional member value
- deliver organisational excellence as a professional association.

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