

# Code of Conduct for Sonographers

July 2025



**ASAR**

Australian Sonographer  
Accreditation Registry

---

*The Code of Conduct for Sonographers has been developed by the Australasian Sonographers Association (ASA) jointly with the Australian Sonographers Accreditation Registry (ASAR). It sets out the required standards of professional conduct and ethics, and other principles for safe and effective practice by sonographers in Australia and New Zealand. It is intended to complement other requirements, including relevant laws and codes governing the practice of sonography issued by statutory authorities and / or required by employers.*

*We would like to thank and acknowledge the contribution of the Code of Conduct Working Group consisting of Dr Narelle Kennedy AFASA, Dr Brooke Osborne FASA, Sarah Stevens-Gieseg, Paula Kinnane FASA, Dr Tony Coles, and Lyndal MacPherson.*

*The ASA would also like to thank Dr Sandra South from Perspicacious Research, who facilitated this project.*

# Standards

## Definitions

---

<b>Standard 1</b>	Sonographers must provide services in a safe and ethical manner
<b>Standard 2</b>	Sonographers must provide services in a respectful manner and not discriminate against anyone
<b>Standard 3</b>	Sonographers must communicate professionally and ethically when interacting in a professional capacity
<b>Standard 4</b>	Sonographers must only make claims in advertising about their services that are supported by acceptable evidence
<b>Standard 5</b>	Sonographers must disclose and manage any perceived or actual conflicts of interest
<b>Standard 6</b>	Sonographers must obtain consent prior to delivering a service
<b>Standard 7</b>	Sonographers must promote and respect patients right to make informed choices
<b>Standard 8</b>	Sonographers must report concerns about the conduct of other healthcare workers
<b>Standard 9</b>	Sonographers must take appropriate action in response to harm following an adverse event
<b>Standard 10</b>	Sonographers must adopt standard precautions for infection control
<b>Standard 11</b>	Sonographers must take appropriate action to prevent any risk of harm to patients if diagnosed with an infectious medical condition
<b>Standard 12</b>	Sonographers must ensure their service provision is not compromised by the use of alcohol or drugs
<b>Standard 13</b>	Sonographers must not provide services if they suffer from a physical or mental impairment that is likely to place patients at risk of harm
<b>Standard 14</b>	Sonographers must not financially exploit patients
<b>Standard 15</b>	Sonographers must not engage in a close personal relationship or inappropriate intimate behaviour
<b>Standard 16</b>	Sonographers must comply with all relevant laws and regulations
<b>Standard 17</b>	Sonographers must adhere to appropriate documentation standards
<b>Standard 18</b>	Sonographers must be covered by appropriate indemnity insurance
<b>Standard 19</b>	Sonographers must promote safety at their workplace
<b>Standard 20</b>	Sonographers must take full responsibility for people under their supervision
<b>Standard 21</b>	Sonographers must take full responsibility for their own actions

# Definitions

## Acceptable evidence:

In this Code of Conduct, only acceptable evidence as defined here is able to be used in the context of advertising services provided by sonographers. The Australian Health Practitioner Regulation Agency (AHPRA) definition of acceptable evidence is adopted in this Code of Conduct. It involves assessing the source, relevance, studies considered, design of the study, quality of the study and strength of the outcomes of the studies. This is similar to the approach that would be taken in a Cochrane Systematic Review.

### **Examples of unacceptable evidence include:**

- studies involving no human subjects
- descriptions of single cases that are not published in a peer-reviewed journal
- opinion pieces
- anecdotal evidence based on observations in practice
- consensus statements where the research method used to develop the statement is not clearly defined and/or where the people who developed the statement are not clinicians with relevant expertise
- studies reporting results based on patient self-assessments, unless these studies use self-assessment tools that have been developed scientifically to establish their validity, reliability and utility
- outcome studies or audits, unless bias or other factors that may influence the results are carefully controlled, and/or
- studies that are not applicable to the target population.

This definition of acceptable evidence does not apply to the context of clinical decision-making or discussions of service options with patients. This is because there is the opportunity in a discussion to explain the best available evidence, any limitations of that evidence (e.g. due to the methods used), and all other considerations that contributed to a clinical recommendation. As stated in the Australian Health Practitioner Regulation Agency (AHPRA) guidance; “There is an important difference between acceptable evidence for claims made in advertising and the evidence used for clinical decisions about patient care. When treating patients, practitioners must obtain informed consent for the care provided and are expected to discuss the evidence for different treatment options. In advertising, the claims are generic, and practitioners are not available to clarify whether a treatment is appropriate for an individual patient.”<sup>1</sup>

## Adverse event:

As defined by the Te Kaunihera Rata o Aotearoa/Medical Council of New Zealand: “An incident or situation where the patient experienced an adverse outcome that was unplanned, unexpected or unintended.”<sup>2</sup>

## ALARA – As Low As Reasonably Achievable:

As described by Abramowicz 2015, “the ALARA (As Low As Reasonably Achievable) principle is what should guide the end-user in his/her daily practice. Ultrasound is a form of energy that will cause effects in every tissue it traverses (bioeffects), most likely via two mechanisms: thermal and non-thermal. These effects are not necessarily harmful if certain rules, such as ALARA, are followed. ALARA is based on two very different approaches: some risk/benefit analysis of how much acoustic energy is tolerable to obtain diagnostic information and the precautionary principle which states that benefit must be proven before certain actions are executed.”<sup>3</sup>

1. Australian Health Practitioner Regulation Agency (AHPRA), 2019. Acceptable evidence in health advertising. Available online at: <https://www.ahpra.gov.au/Resources/Advertising-hub/Advertising-guidelines-and-other-guidance/Acceptable-evidence-in-health-advertising.aspx>, last accessed 22 December 2024.

2. Te Kaunihera Rata o Aotearoa/Medical Council of New Zealand, 2024. Statement on disclosure of harm following an adverse event. Available online at: <https://www.mcnz.org.nz/our-standards/current-standards/disclosure-of-harm/>, last accessed 22 December 2024.

3. Abramowicz, J., 2015. ALARA: The Clinical View. *Ultrasound in Medicine and Biology*, 41(4):s102.

# Definitions

---

**Conflict of interest:**

Conflicts of interest are anything that could reasonably be expected to impair the independence or objectivity of your clinical judgement and your provision of services to a patient. Conflicts of interest may relate to personal, corporate and/or financial interests and do not need to be directly related to you. For example, conflicts of interest may arise through friendships, family connections, business relationships and future career opportunities.

**Cultural safety:**

In this Code of Conduct, the Te Kaunihera Rata o Aotearoa/Medical Council of New Zealand definition of cultural safety<sup>4</sup> is adopted, which includes:

- The need for sonographers to examine themselves and the potential impact of their own culture on clinical interactions and healthcare service delivery.
- The commitment by individual sonographers to acknowledge and address any of their own biases, attitudes, assumptions, stereotypes, prejudices, structures and characteristics that may affect the quality of services provided.
- The awareness that cultural safety encompasses a critical consciousness where healthcare professionals and healthcare organisations engage in ongoing self-reflection and self-awareness and hold themselves accountable for providing culturally safe care, as defined by the patient and their communities.

It is noted that this definition of cultural safety aligns with that of the Australian Health Practitioner Regulation Agency (Ahpra) under the Aboriginal and Torres Strait Islander Health Strategy.<sup>5</sup>

**Evidence-informed:**

Evidence-informed decision-making and services are based on a consideration of the patient's needs and wishes, the best available research evidence (see definition of 'acceptable evidence'), professional judgement, and any other relevant factors (e.g. the policy setting as relates to funding and the patient's financial circumstances).

**Harm:**

As defined by the Te Kaunihera Rata o Aotearoa/Medical Council of New Zealand: "An outcome that negatively affects a patient's health or quality of life. Sometimes, it could result in death. Harm may or may not relate to the risks discussed during the informed consent process."<sup>6</sup>

---

4. Te Kaunihera Rata o Aotearoa/Medical Council of New Zealand, 2019. Statement of cultural safety. Available online at: <https://www.mcnz.org.nz/our-standards/current-standards/cultural-safety/>, last accessed 22 December 2024.

5. Australian Health Practitioner Regulation Agency, 2025. Aboriginal and Torres Strait Islander Health Strategy - Definition of cultural safety for the National Scheme. Available online at: <https://www.ahpra.gov.au/About-Ahpra/Aboriginal-and-Torres-Strait-Islander-Health-Strategy.aspx>, last accessed 13 February 2025.

"Cultural safety is determined by Aboriginal and Torres Strait Islander individuals, families and communities.

Culturally safe practise is the ongoing critical reflection of health practitioner knowledge, skills, attitudes, practising behaviours and power differentials in delivering safe, accessible and responsive healthcare free of racism."

6. Te Kaunihera Rata o Aotearoa/Medical Council of New Zealand, 2024. Statement on disclosure of harm following an adverse event. Available online at: <https://www.mcnz.org.nz/our-standards/current-standards/disclosure-of-harm/>, last accessed 22 December 2024.

## Standard 1

### Sonographers must provide services in a safe and ethical manner

---

#### Requirements:

**1.1** Sonographers must provide health services in a safe and ethical manner, which involves:

- a.** Providing evidence-informed services (see Definitions) that respect patient dignity, needs and other human rights,
- b.** Protecting patient safety to limit harm to the patient,
- c.** Maintaining the same high standards of services for all patients, and
- d.** Being alert to, and appropriately addressing, exploitation and harm of patients by others.

**1.2** Without limiting requirement 1.1, sonographers must:

- a.** Obtain and maintain the competencies and any accreditation(s) they require to deliver the services they offer. This includes through documented training, qualifications, and ongoing professional development in line with professional and/or registration body guidelines and requirements.
- b.** Engage in professional reflection on all aspects of their practice, including clinical services, cultural safety, and communication approaches; engaging with peers where relevant to further their professional development.
- c.** Be aware of, and only provide, services that are within their training, scope of practice and competencies.
- d.** Only provide evidence-informed services (see Definitions) and be able to provide clinical justification for these services, including a consideration of the principles of ALARA (see Definitions).

**e.** Recognise the limitations of the services they can provide and provide information to patients about other health service providers in appropriate circumstances.

**f.** Promptly communicate any unexpected or urgent to the appropriate medical practitioner, and patient directly if within the sonographer's individual scope of practice.

**g.** Recommend to the referring medical practitioner that additional opinions and services be sought, where appropriate.

**h.** Encourage patients to inform their treating medical practitioner of the services being provided by the sonographer.

**i.** Have a sound understanding of any possible adverse interactions between the services being provided and any other medications or treatments, whether prescribed or not, that they are, or should be, aware that a patient is taking or receiving, and advise the patient of these interactions.

**j.** Report faults or limitations of equipment used in the provision of services to employer/manager immediately and document in the patient records and reports if imaging is considered suboptimal due to the equipment used. The testing, location, equipment and all its calibration must conform to the relevant Australian or Aotearoa New Zealand Standards.

**k.** Ensure that the facilities where they provide services are appropriate to promote the dignity, health and wellbeing of the patient including privacy and security.

## Standard 2

### Sonographers must provide services in a respectful manner and not discriminate against anyone

---

#### Requirements:

**2.1** Sonographers must provide services in a respectful manner and not discriminate against patients and their family/whānau/kin, employees, colleagues, professional and/or registration body employees or other healthcare workers. Discrimination may include discriminating on the basis of age, sex, sexuality, race, religion or disability, but is not limited to those attributes.

**2.2** Sonographers must not deny a patient access to a service, either health or otherwise, based on the moral or religious views of the sonographer.

**2.3** Sonographers must respect the dignity of the patient in a responsive manner that is in line with cultural safety (see Definitions).

## Standard 3

### Sonographers must communicate professionally and ethically when interacting in a professional capacity

#### Requirements:

**3.1** Sonographers must communicate professionally, respectfully and effectively with patients and their family/whānau/kin, employees, colleagues, professional and/or registration body employees, other sonographers and other healthcare workers. This includes being aware of the characteristics and consequences of verbal and nonverbal communication and how the interpretation of these can vary depending on factors such as age, culture, ethnicity, gender, socioeconomic status, and spiritual or religious beliefs.

**3.2** Sonographers must protect the autonomy, dignity, and privacy of patients during all communication.

**3.3** Sonographers must communicate professionally and ethically when interacting in a professional capacity and when making public statements, for example posts on social media. This includes, but is not limited to:

- a.** Not bullying, defaming, disparaging or harassing patients, employees, colleagues, professional and/or registration body employees, or other healthcare workers.
- b.** Not making comments or behaving in a manner that is likely to detrimentally affect the reputation of the sonography profession, their professional and/or registration body, other individual sonographers, or other health care workers. This requirement does not preclude Sonographers from making complaints or providing feedback on other individuals' and bodies' conduct via appropriate

channels (e.g. via direct and confidential communications and official complaints to their professional and/or registration body, other health complaints entities, and in response to government inquiries).

**3.4** Sonographers must communicate professionally to promote inter-professional respect and collaboration with other sonographers and other healthcare workers to promote and respect the human rights, needs and preferences of patients.

**3.5** Sonographers must not misrepresent their qualifications, industry experience, training and professional affiliations in their interaction with patients and their family/whānau/kin, the public, other professionals, and agencies. This includes:

- a.** Only using titles, professional affiliations, and postnominals/acronyms that honestly and accurately represent their credentials.
- b.** Providing truthful information about their scope of practice and how it relates to their qualifications, industry experience, training, professional affiliations, and current clinical competence.

**3.6** Sonographers must not make any false, misleading or deceptive claims in communications with the public. All statements relating to services must be evidence-informed (see Definitions).

## Standard 4

### Sonographers must only make claims in advertising about their services that are supported by acceptable evidence

#### Requirements:

**4.1** Sonographers must adhere to the relevant state, territory and national legislative requirements regarding advertising materials.

**4.2** Sonographers must advertise their services in a way that allows the public to make informed choices about their healthcare based on acceptable evidence (see Definitions). This includes, but is not limited to:

- a.** Not making claims to patients, either directly or indirectly via advertising or promotional materials about the efficacy of services they provide if those claims cannot be substantiated by acceptable evidence.
- b.** Not making any false, misleading or deceptive claims in advertising materials.

**c.** Not using testimonials or purported testimonials in advertising materials and public domains developed or controlled by the sonographer (e.g. their business website, their service signage) about the clinical aspects of their services.

**d.** Not editing or selectively choosing reviews providing feedback on non-clinical aspects of care, or creating fictional reviews on non-clinical aspects of care.

## Standard 5

### Sonographers must disclose and manage any perceived or actual conflicts of interest

---

#### Requirements:

**5.1** Sonographers must disclose to their patients any matters that they are aware of that could reasonably be expected to impair the independence or objectivity of their clinical judgement and their provision of services to patients (i.e. represent a conflict of interest – see

Definitions).

**5.2** Sonographers must manage conflicts of interest to ensure their duty of care is not compromised.

## Standard 6

### Sonographers must obtain consent prior to delivering a service

---

#### Requirements:

**6.1** Prior to delivering a service, sonographers must ensure that consent appropriate to that treatment or service has been obtained and complies with the laws of the jurisdiction.

**6.2** Consent should only be sought after promoting and respecting the patient's right to make informed choices in relation to their healthcare, as required under Standard 7.

## Standard 7

### Sonographers must promote and respect patients right to make informed choices

---

#### Requirements:

**7.1** Sonographers must promote the right of their patients to make informed choices in relation to their healthcare and support them to do so, which includes but is not limited to:

- a.** Providing sufficient, accurate and up-to-date information in terms and a format which the patient can understand.
- b.** Communicating the process for reaching the evidence-informed decisions (see Definitions) as to which service(s) to recommend or provide to the patient.
- c.** When more than one service option may meet the patient's needs, providing information to the patient which clearly outlines the differences in approaches, benefits, risks and expected outcomes.
- d.** Providing patients with information regarding the likely cost of the services before providing these services.
- e.** Having an understanding of, and providing the patient with information regarding, the national health system and available service options that may meet their needs and preferences, including options for private or public funding for services.

**7.2** Sonographers must advise the patient when it will be necessary to disclose information to others in the healthcare team and obtain consent required to do so in line with the laws of the jurisdiction.

**7.3** Sonographers must respect a patient's right to refuse a service, seek a second opinion and/or to terminate a service, without prejudice.

**7.4** Sonographers must not attempt to dissuade a patient from seeking or continuing medical treatment.



## Standard 8

### Sonographers must report concerns about the conduct of other healthcare workers

---

#### Requirements:

**8.1** Sonographers who, in the course of providing services, form the reasonable belief that another healthcare worker has placed or is placing patients at serious risk of harm must promptly refer the matter to the relevant Australian state or territory complaints entity, or Australian or Aotearoa New Zealand national professional board, professional, or registration body.

**8.2** Without limiting requirement 8.1, sonographers who form the reasonable belief that another sonographer is in breach of this Code of Conduct must notify their

professional and/or registration body, if they handle complaints, and maintain confidentiality at all times.

**8.3** Sonographers must remain neutral and professional if a patient has divulged details that the sonographer thinks are/may be a case of unethical or unprofessional conduct by the other healthcare worker. This includes not commenting on the other health care worker's conduct to the patient.

## Standard 9

### Sonographers must take appropriate action in response to harm following an adverse event

---

#### Requirements:

**9.1** Sonographers must take appropriate and timely measures to minimise harm to patients when an adverse event (see Definitions) occurs in the course of providing services.

**9.2** Without limiting requirement 9.1, sonographers must:

- a.** ensure that appropriate first aid is available to deal with any adverse event,
- b.** obtain appropriate emergency assistance in the event of any serious adverse event,
- c.** promptly disclose the adverse event to the patient in a responsive manner that is in line with cultural

safety (see Definitions),

**d.** take appropriate remedial steps to reduce the risk of recurrence,

**e.** document the adverse event,

**f.** comply with any relevant policies, procedures, reporting requirements, and relevant legislation and seek advice from an employer or professional indemnity insurer if you are unsure about your obligations, and

**g.** report the adverse event to the relevant authority, where appropriate.

## Standard 10

### Sonographers must adopt standard precautions for infection control

---

#### Requirements:

**10.1** Sonographers must adopt standard precautions for the control of infection in the course of providing services.

**10.2** Without limiting requirement 10.1, sonographers who

carry out skin penetration or other invasive procedures must comply with the relevant national, state or territory law under which such procedures are regulated.

## Standard 11

### Sonographers must take appropriate action to prevent any risk of harm to patients if diagnosed with an infectious medical condition

---

#### Requirements:

**11.1** Sonographers who have been diagnosed with a medical condition that can be passed on to patients must ensure that they practice in a manner that does not put patients at risk.

**11.2** Without limiting requirement 11.1, sonographers who have been diagnosed with a medical condition that can be passed on to patients must take and follow advice

from a suitably qualified and clinically certified/registered healthcare worker on the necessary steps to be taken to modify his or her practice to avoid the possibility of transmitting that condition to patients.

## Standard 12

### Sonographers must ensure their service provision is not compromised by the use of alcohol or drugs

---

#### Requirements:

**12.1** Sonographers must not provide treatment or care to patients while under the influence of alcohol or unlawful substances.

**12.2** Sonographers who are taking prescribed medication must obtain advice from the prescribing healthcare

worker or dispensing pharmacist on the impact of the medication on their capacity to provide services and must refrain from providing services to patients in circumstances where their capacity may be impaired.

## Standard 13

### Sonographers must not provide services if they suffer from a physical or mental impairment that is likely to place patients at risk of harm

---

#### Requirements:

**13.1** Sonographers must not provide services to patients while suffering from a physical or mental impairment, disability, condition or disorder (including an addiction to alcohol or a drug, whether or not prescribed) that places, or is likely to place, patients at risk of harm.

**13.2** Without limiting requirement 13.1, if sonographers

have a mental or physical impairment that could place patients at risk, they must seek advice from a suitably qualified and clinically certified/registered healthcare worker to determine whether, and in what ways, they should modify their practice, including stopping practice if necessary.

## Standard 14

### Sonographers must not financially exploit patients

---

#### Requirements:

**14.1** Sonographers must not financially exploit their patients.

**14.2** Without limiting requirement 14.1, sonographers must:

- a.** Only provide evidence-based services and not make decisions as to which services to provide based on financial gain of the sonographer.
- b.** Not accept or offer financial inducements or gifts as a part of patient referral arrangements with other healthcare workers or any other individual or entity.
- c.** Not ask patients to give, lend or bequeath money or gifts that will benefit the sonographer directly or indirectly.
- d.** Not enter into a business arrangement with a patient that may result in a personal benefit to the sonographer.

**e.** Not offer a gift or other inducement to attract a person to use the service or the business, unless the advertisement also states the terms and conditions of the offer.

## Standard 15

### Sonographers must not engage in a close personal relationship or inappropriate intimate behaviour

#### Requirements:

**15.1** Sonographers must be aware of and carefully consider the appropriateness of providing services to people they have a personal relationship with (e.g. friends, work colleagues or family/whānau/kin) as this may result in a lack of objectivity, possible discontinuity of care, and other risks to the patient and sonographer. This involves, but is not limited to:

- a.** Not engaging in behaviour of a sexual nature with a patient.
- b.** Not engaging in other close personal, physical or emotional relationships with a patient.

**c.** Ensuring that a reasonable period of time has elapsed since the conclusion of the therapeutic relationship before engaging in a sexual relationship with a patient.

**15.2** Sonographers must not engage in inappropriate sexual behaviour towards anyone including, but not limited to, employees, colleagues, another sonographer, professional and/or registration body employees, or patients and their family, whānau, or kin.

## Standard 16

### Sonographers must comply with all relevant laws and regulations

#### Requirements:

**16.1** Sonographers must comply with all relevant Australian state or territory, or Australian or Aotearoa New Zealand federal/national laws and regulations, as applicable.

**16.2** Without limiting requirement 16.1, sonographers must comply with:

- a.** all relevant Australian state or territory, or Australian or Aotearoa New Zealand federal/national laws regarding consumer protections, privacy, human research, and the conduct of healthcare

workers.

- b.** contracts with, and related policies of, government funding agencies.

## Standard 17

### Sonographers must adhere to appropriate documentation standards

#### Requirements:

**17.1** Sonographers must ensure that accurate, legible, complete and up-to-date clinical records are maintained for each patient consultation.

**17.2** Reports or documents signed or published by sonographers in their professional capacity must be accurate in all details. Fact and opinion must be clearly differentiated.

**17.3** Sonographers must ensure that patient documentation shows respect for patients and does not include demeaning, derogatory or discriminatory remarks.

**17.4** Sonographers must ensure that records, including recorded ultrasound images and videos, are sufficient to support a diagnosis and facilitate continuity of care.

**17.5** Sonographers must ensure that all documentation regarding patients are held securely and not subject to unauthorised access.

**17.6** Sonographers must retain patient records, including recorded ultrasound images and videos, for a period of time as determined by relevant legal and legislative requirements.

**17.7** Sonographers must take necessary steps to facilitate patients' access to information contained in their patient records if requested.

**17.8** Sonographers must facilitate the secure and confidential transfer of a patient's clinical record in a timely manner when requested to do so by the patient or their legal representative.

## Standard 18

### Sonographers must be covered by appropriate indemnity insurance

---

#### Requirements:

**18.1** Sonographers must ensure that appropriate indemnity insurance arrangements are in place in relation to the services they provide.

## Standard 19

### Sonographers must promote safety at their workplace

---

#### Requirements:

**19.1** Sonographers must ensure the safety of patients and colleagues through incorporating safety and risk management strategies into their everyday practice.

**19.2** Sonographers must respect, encourage, support

and provide fair treatment and working conditions to students, interns, co-workers and employees.

## Standard 20

### Sonographers must take full responsibility for people under their supervision

---

#### Requirements:

**20.1** Sonographers shall prohibit anyone under their supervision from engaging in any practice that violates this Code of Conduct. This includes ensuring that this Code of Conduct is not violated during remote supervision.

**20.2** Sonographers may employ staff to conduct a certain test or procedure provided they are competent to carry out those duties and are under the immediate and personal supervision of the sonographer. Under these circumstances the sonographer is responsible under this Code of Conduct for the patient's welfare and the conduct of the staff.

**20.3** Sonographers must avoid any potential conflict of interest (see Definitions) in a supervisory relationship, for example: by supervising someone who is a close relative or friend, or where there is another potential conflict of interest that could impede objectivity and/or interfere with the supervised person's achievement of learning outcomes or relevant experience.

**20.4** Supervising sonographers must ensure that patient consent for trainee involvement is obtained.

**20.5** Sonographers who provide clinical supervision to students trainees, and other health care professionals

shall provide appropriate supervision, including in accordance with any applicable standards, guidelines and protocols.

## Standard 21

### Sonographers must take full responsibility for their own actions

---

#### Requirements:

**21.1** Sonographers must ensure that they have a full understanding of, and adhere to, this Code of Conduct.

**21.2** Sonographers must ensure that they have a full understanding of, and adhere to, the requirements under the relevant Australian state or territory legislation relating to the conduct of healthcare workers, or in the case of New Zealand Practitioners, the Code of Ethical Conduct for Medical Imaging and Radiation Therapy Practitioners in Aotearoa New Zealand.

**21.3** Sonographers must cooperate fully with any review of their conduct by their professional and/or registration body or another regulatory authority. This includes providing any information requested, engaging in mature and professional reflection on their actions, and communicating in a professional, honest and respectful manner with any reviewing body and other parties.

**21.4** Sonographers must promote and respect patients' rights to make a complaint, including, but not limited to:

- a.** Interacting with patients and their families/whānau/kin with respect and honesty when facing matters of complaint or criticism.
- b.** Not attempting to dissuade patients from making a complaint, or allowing staff or other people under their supervision to attempt to dissuade patients from making a complaint.
- c.** Displaying, or otherwise providing patients with, a copy of the summary of the Code of Conduct at all

premises where they deliver services.

**d.** Providing information regarding how patients can make a complaint to their professional body and the relevant state or territory complaints entity.

**e.** If further information on this Code of Conduct is requested by patients, Sonographers must provide the full version of the Code of Conduct and/or refer the patient to their professional and/or registration body.

**21.5** Sonographers must report any limitations on their practice following a sanction by their professional and/or registration body, or another regulatory authority to their employer.