

the newsletter of the australasian sonographers association

soundeffects news



Managing the increasing BMI
of the Australasian population

Obstetric and gynaecological,
abdominal, musculoskeletal
and vascular sonography

SIG SYDNEY

2015

19–20 September 2015
Novotel Brighton-Le-Sands

The 11th Annual Special Interest Group Symposium
of the Australasian Sonographers Association

from the editor

Welcome to the second issue of *soundeffects news* for 2015. ASA2015 Perth was held on the 29–31 May, which is late in our production schedule, so we will bring you the full conference round up in our September issue. The ASA Annual Conference is always a great time to improve my clinical skill, meet up with old friends and see the latest technology, all in one place.

There are two *feature* articles included in this issue which address the important area of sonographer wellbeing. The *feature* article by cardiac sonographer Richard Allwood on 'Appropriate footwear' should remind you of what is and isn't appropriate to wear in the ultrasound department. It's not just about protecting your feet from a dropped object or trolley wheel; standing and walking can have a big impact if you are not wearing the correct footwear.

Doug Wuebben and Mark (Coach Rozy) Roozen from the USA return to provide us

with part 3 of their 'Live pain free' *feature*. You should now be able to use some of their exercises and tips to change how you move and hopefully start living a pain-free life. These guys have presented extensively across the USA and have more articles available online. I hope to one day attend one of their live sessions and Doug's webinar is available via the *asawebinar* library on our website for those who missed it in March.

There are lots of winners in this issue. Our Awards of Excellence, Student, Rural and Remote Scholarship winners are all recognised. Well done to all.

soundeffects news is the ASA's quarterly news and events publication. We welcome contributions on sonographer and related issues and I encourage you to share your interesting cases as part of the *reader competition* or *images* page.

Glenda McLean
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**soundeffects
news**

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from the editor	1
in this issue	2
president's message	3
ceo's report	4
advocacy alert	5
asa strategic intent 2015–2020	6
awards of excellence 2015	10
feature article	12
Live pain free – Part 3 of a 3-part series	
feature article	16
Appropriate footwear	
person profile	18
Tony Forshaw	
images	20
2015 asa award winners	22
rural and remote sonographer scholarship 2016	23
reader competition	24
Aon Insurance advertorial	26
cpd wrap up january – march 2015	28
pd-asa report	30
branch reports	32
committee members	34
corporate members	36

president's message

This report follows another Annual Conference, ASA2015 Perth – *Celebrating the Sonographer*, which was held in the lovely city of Perth. It's an achievement to draw such an exceptionally high standard of international and local keynote speakers. I would like to thank ISUOG for their participation and contribution, partnering with the ASA for the combined advanced obstetrics and gynaecology education session.

I would also like to thank the Perth Program Convening Committee for their work. The committee included Richard Allwood, Rayya B-Cliffe, David Burton, Nicole Cammack, Natalie Colley, Gail Crawford (convener), Louise Deshon, Anna Graves (convener), Janet Mulholland, Afroz Najafzadeh, Sandra O'Hara, Michelle Pedretti, Daniel Rae, Kylie Rae, Saba Salman, Carol Thornley and Caterina Watson. I would also like to extend a huge thank you to the keynote speakers, all the presenters, the volunteers, ASA Events Coordinator, Ariane Dwyer, and all the ASA staff for their contribution. Once again, this conference could not happen without the contribution of all the sponsors and trade exhibitors.

The winners of the Awards of Excellence are outlined on page 10. Congratulations to all our winners – it is a privilege and an honour to be nominated and chosen for an award by your peers.

One of the highlights of the conference this year includes the launch of the *ASA Strategic Intent 2015–2020*. The strategic plan was the culmination of many brainstorming sessions that included ASA members and staff. It is very exciting to be able to launch this important document that will set our priorities and focus our work for the next five years.

Another big initiative of the ASA is the launch of the *Enhanced Member Value Package*. This package means all branch education meetings, live **asawebinars**, Masterclasses and Travelling Workshops will now be free to ASA members. There will also be a 10 per cent reduction in insurance fees and no increase to membership fees for 2015/16. This will increase the value of your ASA membership substantially.

The ASA Board of Directors is pleased to announce the appointment of Silvano Palladino as an external Director. Since qualifying as a medical scientist Silvano has held senior laboratory management positions, is the Chair of the Australian Society of Microbiology Workforce Standing Committee and a Foundation Fellow of the Royal College of Pathologists of Australasia's Faculty of Science. He currently holds an adjunct position as Associate Professor at the University of Western Australia's School of Pathology and Laboratory Medicine.

On behalf of the ASA Board, the ASA members and the ASA staff, I would like to congratulate Dr Stephen Duns on achieving 12 months as CEO of the ASA. Stephen is always a pleasure to work with.

Planning for the forthcoming SIG symposium, to be held at the Novotel Sydney Brighton Beach on the beachfront at Brighton-le-Sands on Saturday 19 September and Sunday 20 September, is well underway. The two-day program will focus on managing the increasing BMI of the Australasian population across four specialty areas, including: abdominal, obstetrics and gynaecology, vascular and MSK. Many great speakers have already been confirmed and it is sure to be a successful event. The venue is also perfect for an early morning walk along the beach and there are great cafes



and restaurants nearby. Novotel Sydney Brighton Beach is a short distance from Sydney airport.

I am always impressed by the quality of the ASA publications, *soundeffects news* and the peer reviewed international journal *Sonography*. I very much enjoy reading the person profiles, the branch and committee member reports and the feature articles in *soundeffects news*. I often speak to other sonographers about how to start a career in research. Research is important because it benefits society by improving practice, bringing about change, increasing knowledge and advancing our profession to ensure the community has access to quality sonographic services. I hope as the research output of sonographers increases, they will support *Sonography* by publishing their research and increase the profile of sonographers as esteemed researchers. I encourage all members to keep up to date with what is happening at the ASA by reading and sharing your publications and following us on Facebook and LinkedIn.

In closing, I was deeply saddened to learn of the tragic loss of Michael and Amanda Dadd in a house fire on Sunday 3 May. A former CSIRO scientist, Michael helped pioneer ultrasound technology in the 1960s. The ASA will be forever grateful for Michael's contribution to the profession. On behalf of the Board of Directors and the ASA staff, I would like to extend my condolences to the family.

Dr Ann Quinton, President
president@a-s-a.com.au

It was great to have the opportunity to talk with many people at ASA2015 Perth. This year's theme, *Celebrating the Sonographer*, was truly reflected in the calibre of speakers, presentations and discussions between the presenters and delegates. I continue to be inspired by the commitment shown by the profession.

It is a privilege to work with a profession with a reputation for being the very best in the world, as sonography is in Australia. In acknowledgment, it is only appropriate, and my intention, to establish the ASA's Annual Conference as the leading international conference for sonography in the world.

On the opening morning of the conference I was delighted to release the ASA's new *Strategic Intent 2015–2020*. It is the ASA's response to our members' feedback and what they value most about the association, as well as the current opportunities and challenges for sonographers in Australia and New Zealand. It also allows us to describe our focus in offering high quality systems of support for the profession. With a fresh perspective on our mission, building on what we have done well, and the environment in which we operate, the next five years will be a time of growing what the ASA provides our members and expanding our support of the profession of sonography.

I was also pleased to announce the first tangible benefit of the new strategy – the Enhanced Member Value Package – that includes a free program of continuous professional development (CPD) education opportunities, no increase to membership fees for 2015/16, and a 10% reduction in insurance fees with

an improved policy. The Enhanced Member Value Package is just one of many ways the ASA can demonstrate its appreciation for your commitment to the profession and how we can support you in delivering the best possible sonography services to our communities. For more information on the free CPD education offered to all ASA members, and the many other benefits we continue to deliver, I encourage you to visit our website or contact our office.

The ASA continues to work with its key stakeholders and is active on the Allied Health Professions Australia Board and is the Chair of the National Alliance of Self-Regulating Health Professions (NASRHP). The ASA continues to actively lobby for registration of the profession. NASRHP has developed a set of draft accreditation standards that is currently out for consultation, which could be used to accredit peak bodies of self-regulating professions to regulate their respective profession. This, and other work of the ASA, positions the profession to respond to the outcomes of the review of the National Registration Accreditation Scheme, due later this year, with a robust regulatory regime option for the formal registration of sonography in Australia.

The ASA is also currently working with a number of industry bodies, including RANZCR, RANZCOG, AIR and ADIA, on an agreed joint definition of diagnostic ultrasound under Medicare. The purpose of the definition is to clarify the distinction between a full ultrasound scan and point-of-care scans.

Another area of our advocacy work currently undertaken is on the NSW award for sonographers employed in public health services. Looking at the letter of



the award, it appears an unintended consequence is occurring – with some NSW public health services requiring sonographers to hold registration with the Medical Radiation Practitioner Board (MRPB) of Australia to be paid at the higher level. The ASA considers this is not consistent with the intent of the 2013 award change, particularly if the role being recruited for does not require the employee to undertake radiography as well as sonography duties. We also understand this requirement (MRPB registration) is being applied inconsistently. The ASA is currently undertaking work in partnership with ASUM and the NSW Health Services Union with the aim to find a resolution for sonographers in NSW public health facilities.

Finally, in the coming months, the ASA will be launching a new-look website and member portal. The product of significant investment and work by the office, this new website and member portal will enable members to access the many resources available to them with ease, increasing overall accessibility and usefulness of these online resources supporting our members, the sonography profession and our industry partners.

I look forward to meeting many members at various Branch Education Meetings over the coming months and at the upcoming SIG2015 Sydney Symposium being held in September later this year.

Dr Stephen Duns
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advocacy alert

The release of the new *ASA Strategic Intent 2015–2020* ushers in a new and exciting period of growth.

The ASA was founded on sonographers representing sonographers' interests, so it is no surprise that we look to our membership to guide the work of the ASA. Thank you to everyone who contributed to the development of this important document through surveys, branch meetings, forums and general feedback on what you value most about the activities and services provided by the ASA.

From this feedback the ASA heard loudly and clearly that improved professional regulation, research, enhancement of clinical training and professional standards and guidelines are four areas that are of particular importance to you. So what is the ASA doing about these?

Regulation

At the April 2015 COAG Health Council meeting, Australian Health Ministers accepted the *National Code of Conduct for health care workers – final report* and agreed that jurisdictions would now examine the implementation of the National Code and the associated regulation regime.

Additionally, the preliminary findings of the National Regulation and Accreditation Scheme (NRAS) review were presented with Australian Health Ministers agreeing to consider each of these recommendations toward discussions to be held at their August 2015 meeting.

As reported in *soundeffects news* Issue 4, December 2014, both of these processes have the potential to impact the regulation of sonographers in Australia. The ASA is continuing to work with and lobby governments to seek an equitable

solution to improve the regulation of sonography, to guarantee patient safety whilst ensuring any change is not overly burdensome or costly for the profession.

Concurrently the National Alliance for Self-Regulating Health Professions (NASRHP), chaired by the ASA, has developed a set of draft accreditation standards that could be used to accredit the peak bodies of self-regulating health professions, such as the ASA, to regulate their respective practitioners. Currently being considered by the Boards of the NASRHP professional peak bodies, this model is proposed as a cost-effective and robust solution to nationally consistent regulation in Australia.

Research

To enhance sonography research in Australia and New Zealand and build a professional community of practice, the ASA has established a Sonographer Research Discussion Forum for sonographers involved in, or interested in, undertaking research. This ASA member forum, informed by the members of the Research SIG, will be an open community that supports each other, identifies potential collaborations and shares experiences in building an Australasian sonography body of knowledge for innovation and best practice.

If you are looking to network with research peers, for support in developing or undertaking a research project, or just to learn more about research, we encourage you to register through your member profile to receive the notifications and participate in the discussions of the Sonographer Research Discussion Forum.

Clinical supervision and professional guidelines

The ASA Clinical Supervision Training project concluded in March 2015. This

James Brooks-Dowsett
ASA Policy and Advocacy

project, achieved through the support of the Victorian Department of Health, provided multiple education and training support opportunities for over 120 trainee sonographers in Victoria. It also provided clinical supervision training for more than 100 supervising sonographers in regional and metropolitan Victoria.

The ASA would like to express its gratitude to the Victorian Department of Health whose support was pivotal in developing and providing these events. Following the conclusion of this education and training, and considering the overwhelmingly positive feedback on both the trainee and supervisor events, the ASA is investigating options to sustain these activities in Victoria and potentially provide them to other Australian and New Zealand jurisdictions.

Also, under this project, the ASA has developed a *Sonographers Guide to Clinical Supervision* – a comprehensive resource that will support supervising sonographers in their role to train the next generation of our profession.

Complementing this new guideline, and responding to the commitment of the new *ASA Strategic Intent 2015–2020*, the ASA will be working hard to review and update our existing professional guidelines. We will continue to produce new guidelines that provide sonographers with contemporary and responsive professional information to support your practice.

As we update and provide new guidelines, we will notify you of their availability through our regular alerts. We encourage you to refer to our website to keep abreast of the latest ASA resources available to you.

Introduction

The Board of Directors has approved a new strategic intent to provide the ASA a five-year road map that describes our services, supports and organisation development.

The *ASA Strategic Intent 2015-2020* was developed with broad input from our membership and stakeholders, and guidance from the Board, ASA's committees and staff, informed by the *Theory U* and *Chaordic Stepping Stones* frameworks. Supported by the ASA Sonographer Advancement Working Party (SAWP), and under the authority of the Board, the ASA Office undertook multiple consultation processes with the membership and industry stakeholders, and a meta-analysis of aggregated data collected.

I would like to offer my heartfelt thanks to all who contributed to make this document exciting and relevant.

Responding to emerging issues

The ASA needs to respond to emerging issues that might become important in the future, as well as working on the priorities of today. By setting clear direction and intent, rather than a prescriptive and detailed plan, we will be positioned to respond to opportunities as they arise over the next five years. Each year the Board will endorse a more detailed operational plan to support achieving the strategic goals.

The priorities that emerged from this extensive consultation program highlighted the following as the most important issues. (The first two were clear standout priorities.):

- Education and training
- Professional regulation and/or registration
- Professional standards and guidelines
- Sonographer advanced and extended scope of practice

- Raising public awareness and promotion of the profession
- Injury prevention and workplace health and safety
- Enhancement of clinical training
- Insurance
- Research and further education for sonographers
- Industrial awards.

The strategic intent and goals included in this document are the ASA's responses to these priorities.

With a fresh perspective on its purpose and mission, understanding what it does well, and the environment in which it operates, the ASA will pursue this strategic direction while reflecting and consolidating the significant successes of our past. With our gaze fixed on our evolving professional identity, and opportunities to support the advancement of the profession, we will contribute to ensuring the delivery of quality sonography to the community.

Our purpose

The peak body and leading voice for sonographers in Australia and New Zealand, the ASA is a not-for-profit and charitable professional association. We deliver a range of initiatives, products and services to support the profession and our members, to ensure the community has access to quality sonographic services.

The ASA promotes best practice in medical sonography, supporting research and clinical education and advocating for the role of sonographers in a value for money, efficient and patient-focused healthcare system.

Our overall purpose is:

to lead our profession in delivering excellence in sonography for the community.

Dr Stephen Duns CEO

Our goals

Over the next five years the following goals are the ASA's response to the important issues identified in the strategic planning process. These goals are underpinned by the key results areas and their associated measures that complete the ASA's road map to fulfilling our strategic direction and intention. A summary of the strategic intent is provided in the diagram on page 9.

To be a world leader in providing sonographer education and research

The ASA is committed to providing and influencing quality academic and clinical education and access to highly recognised continuing professional development opportunities for sonographers in Australia and New Zealand through the development of guidelines, resources and quality education and training programs for sonographers.

The ASA will continue to deliver these innovative resources and opportunities to foster quality practice, enhance the professional success of our members and introduce new benefits that build on past successes to support professional practice and advance the profession.

In the next five years the ASA will heighten its support to trainees, clinical supervisors and employers in the delivery of clinical training and pursuing innovative opportunities to enhance the delivery of entry-level education and clinical training.

The ASA will also increase our production and delivery of quality benchmarked educational programs for experienced sonographers in the support of sonographer speciality and advanced practice.

Enhance the role of the profession as the registered experts in medical sonography

The ASA will continue to identify, inform, collaborate with and influence a wide range of stakeholders to gain broad recognition of the role of sonographers as experts in medical sonography.

The ASA will continue to vigorously advocate for legislated professional registration, as well as drive opportunities with other industry professions, to seek alternative possibilities in order to achieve registration and consistent regulation of sonography.

In the next five years the ASA will review and enhance existing standards for sonographers and ensure the sector has access to detailed career frameworks.

Promote and advocate the highest possible professional standards

The ASA will continue to focus on promoting and advocating for best practice in medical sonography. We will consolidate the work towards securing the transition of the profession to a robust regulatory regime and seek to realise change towards this in Australia.

Through policy leadership, informed by professional experts, we will continue to ensure members are represented at all levels of government to promote member interests and issues, including the development of standards for and on behalf of the profession.

In the next five years the ASA will continue to invest in new and collaborative professional research opportunities.

We continue to be committed to ensuring all sonographers have the capacity and commitment to deliver high quality sonographic services to our communities, by advocating for quality accreditation of practices in Australia and New Zealand, and ensuring supportive and responsive complaints processes are in place for the public and our members.

Provide exceptional member value

Ensuring our members have access to value for money opportunities and products that support the professionalism and continued development of sonographers is one of the ASA's founding principles.

In the next five years we will consolidate and grow the services that make life easier for our trainee and practising members, including access to competitive professional insurance and PD-asa.

Our corporate and supporting members are essential to the sustainability and growth of the profession. We are excited by the many new and innovative ways already being progressed to provide our corporate partners the opportunity to demonstrate their support and commitment to the profession.

Through all this work the ASA will apply new and creative ways to provide effective communication to inform our members, build a sense of community within the profession, and award excellence in all areas of the industry.

In support of our commitment to providing member value, we are offering an enhanced member package that includes:

- no increase in membership fees
- 10% reduction in professional insurance fees, with an improved policy
- free CPD for branch education meetings, live **asawebinars**, masterclasses, and travelling workshops.

Organisational excellence as a professional association

Over the next five years the ASA will ensure that all administrative services are delivered in accordance with the highest

standards of quality, efficiency and transparency.

The ASA will promote excellence and learning at all levels. With our office of experienced professionals, we commit to further developing our staff's talents. Member and employee satisfaction will be guiding indicators of our success in delivering the best possible services to members.

We will continue to support the Board, composed of industry leaders, to be more reflective about the organisation's actions and activities. The ASA will support the Board to take a longer-term strategic focus in leading the achievement of our purpose and strategic intent. These systems and processes will empower the Board to effectively understand and manage the performance of the organisation and the chief executive.

One profession. One voice. One membership – Our values

The ASA has produced a new set of values that articulate the culture and ideals to which our membership, the office and organisation hold ourselves accountable in order to lead our profession in delivering excellence in sonography services for the community.

The six ASA values are the foundation upon which our activities shall be built, and act as the moral compass which guides performance and conduct, as well as occupational and interpersonal relations within the ASA, with our members and as a profession.

These values will create and foster bonds between the membership, the organisation and its staff and are a driving force for the creation of a unified professional culture that channels human potential towards achieving the strategy's targeted outcomes.

ASA's values

INNOVATION

We are inspired by knowledge, ideas and learning to continuously improve

MASTERY

We take pride in achieving our standards of excellence

SERVICE

We care about our people, sonography and the community

AUTONOMY

We are accountable for our decisions and actions

DIVERSITY

We have the courage to embrace our differences because it unites us to better achieve our purpose

BALANCE

We are passionate about our work and enjoy a balanced life

Some challenges for our profession

There are some key challenges for the profession that need to be addressed as we pursue our strategic intent.

Medicare rebate driving volumes

Medicare rebates for many ultrasound services have been frozen since 1998. The result is a steadily increasing gap between the Medicare rebate and the actual cost of service delivery, and so rising patient fees. To cover growing costs associated with diagnostic scanning, associated with increased costs and reduced government contribution, some clinics may implement a pay per scan, to address rising service costs, at the risk to quality.

Workforce and clinical training

Shortages of sonographers have persisted for more than a decade as the needs of a growing and ageing population drive demand for ultrasound examinations. Vacancies for sonographers cannot be met solely

through measures to train, skill and reskill professionals. Immigration provides part of the solution but the pool of internationally trained sonographers is relatively small because Australian and New Zealand sonographers are at a higher standard by comparison. The main barrier to building local capacity is the availability of clinical training placements, as the responsibility for supplying significant resources and covering the costs of clinical training can be prohibitive. In the next five years the ASA will look to improving and implementing arrangements that support trainee sonographers and the migration of appropriately trained and experienced international professionals.

Professional registration/regulation

In Australia sonographers are self-regulating health professionals. As part of our commitment to influence the transition of the profession to a robust regulatory regime, the ASA will continue to maintain the conversation with Australian governments to achieve a simplified and coordinated system of regulation for Australian sonographers.

Changing professional environment

The ASA recognises that reform is essential to maintaining health services that are amongst the world's best. The ASA is keen to initiate and take part in discussion about the role of sonographers and their contribution to healthcare delivery that is flexible, responsive, value for money and safe.

The ASA office is excited to continue the good work of the past and forge ahead on some key elements to continue to advance the profession. It is our privilege and pleasure to work with a profession that has such commitment to quality and service. Together we will make a real difference to the profession and to the service of our communities over the next five years.

STRATEGIC INTENT 2015–2020

TO BE A WORLD LEADER IN PROVIDING SONOGRAPHER EDUCATION AND RESEARCH

KEY RESULT AREAS MEASURES

Provide a broad range of continuing professional development opportunities tailored to individual needs

Participation of members from all locations, disciplines, experience and circumstance

Support and promote opportunities for further education in advanced and specialised practice

The number of course applications and the accredited opportunities offered

Influence the quality and availability of entry-to-profession education and support the delivery of clinical training

Increased access to clinical training placements

Establish a 'sonographer practitioner' professional stream

'Sonographer practitioners' are an accepted professional stream within the healthcare system

Provide internationally recognised conferences and educational events

The number of attendees, high quality presenters and proffered papers submitted

PROMOTE AND ADVOCATE THE HIGHEST POSSIBLE PROFESSIONAL STANDARDS

KEY RESULT AREAS MEASURES

Ensure access to effective complaints processes

Complaints are resolved in a timely and respectful manner for both practitioners and complainants

Advocate and influence the transition of the profession to a robust regulatory regime

Sonographer regulation is enforceable across the entire profession and meets patients' expectations

Offer accreditation of practices to ensure the highest quality in patient care

The number of sonography practices that have implemented credible accreditation systems

Produce standards and guidelines for quality practice

Information is evidence based, responds to identified needs and reviewed within agreed time frames

Ensure research is undertaken to provide an evidence base that supports the development of the profession

The number of peer reviewed publications produced

Engage members with specialist expertise to provide advice that supports excellence in sonography

The quality of activity and output of our committees

ENHANCE THE ROLE OF THE PROFESSION AS THE REGISTERED EXPERTS IN MEDICAL SONOGRAPHY

KEY RESULT AREAS MEASURES

Define the standards for core, advanced, enhanced scope and point-of-care ultrasound

Industry accepted career framework(s) for sonographers are in place

Provide independent, articulate and highly visible advocacy on policy issues for the profession

Regular and timely statements, representative of the profession, that respond to identified issues

Actively engage with relevant industry partners, governments and stakeholders in support of the profession

Participation on key industry groups and work is undertaken with broad consultation

Recognise sonographers as the principal registered providers of diagnostic sonography

Legislated registration and inter-professional recognition of sonographers as experts in their field

Expand the role of the ASA as the peak body and leading voice for sonographers and the profession

Direct and frequent contact by media, industry, community and governments

ASA'S PURPOSE

To lead our profession in delivering excellence in sonography for the community

ORGANISATIONAL EXCELLENCE AS A PROFESSIONAL ASSOCIATION

KEY RESULT AREAS MEASURES

Sustain a superior performance culture that exceeds the expectations of stakeholders

The awareness of the broader activities of the organisation and level of volunteer engagement

Employ people with the right skills and implement systems and processes to achieve the organisation's purpose

A recognised employer of choice, where individual and organisational work plans are achieved

Demonstrate excellence in fulfilling our governance obligations

A Board that leads the development and achievement of our purpose and strategy, with a risk and compliance program that is monitored and reported on

Stewardship of member funds and financial sustainability

Sound financial management that generates a surplus to be reinvested in membership

PROVIDE EXCEPTIONAL MEMBER VALUE

KEY RESULT AREAS MEASURES

Timely and effective communication through a variety of media

Level of member engagement and satisfaction

Recognise and reward outstanding achievement in sonography

The quality and number of award nominees

Seek new and innovative benefits to maximise member value

The level of member satisfaction and retention rates

Increase the member base to strengthen our position as the peak body

Membership of 95% of sonographers in Australia and New Zealand, and increased international membership

Support members in achieving CPD requirements

Increased participation in PD-asa with a target of 65% of ordinary members

Provide comprehensive professional insurance at a competitive rate

Take-up of ASA insurance product(s)

Recognise advanced professional development

Number of members participating in the ASA advanced CPD and professional recognition programs



The ASA Awards of Excellence presentations were held at the ASA2015 Perth Awards of Excellence Breakfast and ASA2015 Perth Gala Dinner on Saturday 30 May 2015.

As the peak body and leading voice for sonographers, the ASA is committed to recognising excellence and best practice within sonography. The ASA Awards of Excellence program honours exceptional contributions to the profession and offers a unique opportunity to celebrate our most outstanding sonographers.

The ASA would like to congratulate all of the ASA Awards of Excellence recipients and thank the nominators and adjudication committee for their efforts and support to ensure the ongoing success of the Awards of Excellence program.

2015 Sonographer of the Year – The Pru Pratten Memorial Award



Awarded to Cain Brockley

The Pru Pratten Memorial Award recognises excellence and outstanding achievement in sonography. There is no nomination process for this category as all of the awards (other than *Workplace of the Year*) are automatically considered for this award. The Pru Pratten Memorial Award is the highest accolade bestowed by the profession.

Sonographer of the Year

The Sonographer of the Year award recognises accredited sonographers per geographical area who, by their personal efforts and desire for excellence, advance the profession of sonography.

Sonographer of the Year (Vic)

Awarded to Cain Brockley

Cain Brockley is the Chief Sonographer at the Royal Children's Hospital in Melbourne

where he has been employed for 15 years. Cain has been involved in a number of research and academic projects, including co-writing paediatric subject matter for the Monash University ultrasound course. He regularly presents at a range of educational events, as well as local and national conferences. Cain was on the Board of Directors of the ASA for six years and was president from May 2012 to July 2014. Cain is currently the Chairperson of the Paediatric SIG Committee.

Sonographer of the Year (Qld)



Awarded to Anne-Maree Grant

Anne-Maree graduated as a radiographer from RMIT in 1978. She commenced her ultrasound training with the meritorious Janet Radford, at the Austin Hospital, undertaking the DMU.

Anne-Maree has always been involved in education, providing many tutorials and workshops for students. She has worked as a course and subject coordinator for RMIT's postgraduate ultrasound program since 1995. Her expertise has been engaged as an examiner for both the Master of Medical Ultrasound – Monash University program and University of SA program. Anne-Maree was awarded the Fellowship of the Australian Institute of Radiography in 2000.

Anne-Maree has been involved in convening or presenting many educational programs both in Australia and in Japan, with a number of publications to her credit. She is currently employed by Queensland Health in the Sunshine Coast Health Service district. Through her involvement in the Senior Sonographers Reference Group, she is involved in establishing guidelines and protocols for ultrasound examinations, along with providing advice on pathways for ultrasound education.

Sonographer of the Year (NZ)



Awarded to Haidee Janetzki

Haidee took up sonography on recommendation by her mother-in-law after missing entry to medical school. She completed her training in Adelaide in two years, which was followed closely by a six-week locum and a move to New Zealand. She now works part time in a private practice in the sunny Nelson region. Having published her first paper in April 2012, she now aspires to publish another, and is currently enrolled in a Master of Medical Sonography, specialising in musculoskeletal imaging. Haidee hopes to complete a PhD in the future.

No nominations were received for *Sonographer of the Year* ACT, NSW, NT, SA, Tas and WA.

Educator of the Year

This award recognises an accredited sonographer who consistently shows professionalism and commitment to teaching, learning and professional development opportunities.



Awarded to Sue Lundy

Sue completed her General DMU in 1998 while working at one of the public hospitals in Perth. Since moving to Perth Radiological Clinic (PRC) in early 2002, she has been involved in tutoring and mentoring student sonographers. She has been the Sonography Training Coordinator at PRC since early 2007. Sue is responsible for the ongoing development of the training program, coordinating the training of students within PRC, and the tutoring of students and mentoring of fellow tutors.

Sue was actively involved in the WA Branch of the ASA for seven years and has also been a part of the WA Branch of ASUM. She was on the organising committee for the 2001 ASA National Conference in Perth.

Sue has presented for PRC, ASA and ASUM and was a workshop presenter at ASA2008 Perth. She has previously been a practical examiner for the University of South Australia, an ASUM DMU exam invigilator, and is currently a practical examiner for the Master of Medical Sonography course at Curtin University of Technology.

Mentor of the Year

This award recognises an accredited sonographer whose dedication, skills and commitment guide and advise those entering, establishing or advancing themselves in the sonography profession.



Awarded to Quanson Sirllyn

Of Cambodian descent, Quanson lived through the Khmer Rouge regime and moved to Australia at the age of 18 without ever having gone to school. He first started schooling in Melbourne from Year 9 onwards, eventually completing Year 12 at the age of 21. Despite being awarded the 'High Achiever of the Year' award, his love for learning did not end here.

Shortly after completing his radiography degree, Quanson undertook a postgraduate diploma in medical ultrasound at Monash University and has been qualified for twelve years. After five years in the public sector at Box Hill Hospital, where he refined his obstetric and vascular skills, Quanson progressed into a mentor role.

Seven years ago Quanson returned to private practice working for Capital Radiology. During this time he completed

a Master of Medical Ultrasound through the University of South Australia. Currently he holds the position as head tutor of the south-eastern region and chief sonographer at Vermont Capital Radiology.

He is passionate about sharing knowledge and education, having had such a complex but positive educational journey. His desire to give back to the educational realm has influenced his professionalism on a daily basis. Quanson has volunteered and conducted many presentations with live-scan workshops for all staff. He enjoys sharing his knowledge and developing new sonographer skills while contributing to the ultrasound community. His most recent submission was published in *Sonography* and he is presently working on his second and third journal submissions.

Quanson is a happily married father to three teenage children, one of who is currently completing the VCE. His personal and professional achievements have only been possible with the support of his wife of 17 years, Yenna.

Researcher of the Year

This award recognises an accredited sonographer who has contributed significantly to research by adding to new knowledge and/or innovation and/or clinical care improvements within sonography.



Awarded to Afroz Najafzadeh

Afroz is a senior sonographer at Global Diagnostics Australia. She is also a tutor at the University of Western Australia at the School of Population Health. Afroz has recently completed her PhD in medicine at the same university. The topic of her thesis was on the impact of maternal anxiety and depression in mid-pregnancy on the fetoplacental circulation. Afroz has been involved in research throughout

her career. In 1995 she was amongst the first group of sonographers in the UK to obtain a master's degree by research in medical sonography. Afroz has been an active ASA member and has presented her research at local and national conferences. She has been published in *soundeffects news* and other peer reviewed journals. She has also been the recipient of many awards, including the ASUM 2014 award for 'Best Research Presentation' for her paper on the growth pattern of the umbilical vein in the human fetus. Afroz is a reviewer for *Sonography*, an active member of the SIG Research Committee, and a member of the organising committee for ASA2015 Perth Conference.

Workplace of the Year

This award recognises the commitment a workplace demonstrates in supporting sonography, implementing career development initiatives and advancement of the workplace.

Awarded to Christchurch Radiology Group

Christchurch Radiology Group (CRG) is the largest subsidiary of the Pacific Radiology Group and was the founding member. It has been an established radiology practice in Christchurch for the past 61 years.

The practice comprises nine branches (housing 22 of the latest ultrasound units) in Christchurch New Zealand, a clinic in Timaru and an MSK clinic in Greymouth. It also provides qualified sonographers to hospitals in Timaru, Greymouth and Ashburton to service the community needs in the public sector of these towns.

The ultrasound service has a staff of 53 qualified sonographers (47 FTE) and six students. Staffing is structured around a charge and deputy and a seniors' group of seven who are responsible for the sub-management of outlying branches, student training, vascular, obstetric and MSK services.

Live pain free – Part 3 of a 3-part series

Doug Wuebben and Mark (Coach Rozy) Roozen

This is the final part of our three-part series on living pain free. In Part 2 we finished up by talking about how many times we compensate for one problem by taking stress and strain and putting it onto another area. We hinder mobility – because if we move one of the body blocks that we spoke about, the whole thing can come tumbling down. We also said that if we lose stability, then over time this could cause the blocks to tear down, resulting in injury. A hurt ankle can affect our lower back. Our lower back, in turn, affects our hips. We don't take care of our hip problem and it leads to neck and shoulder problems. It's a continual circle of aches and pains.

As we said when we wrapped up last time – the good news is that we can change our path. By understanding how we move, how to correct these movements and how to maintain correct movement patterns, we can live a pain-free life. In this final article, we will show you some basic moves you can include in your weekly routine that will help you live pain free.

We can almost already hear some groans and moans. Trying to find time to add working out 4–5 hours a week is not something we want to do, have the time to do or in some cases, even know how to do. Ready for some good news? You don't have to train for hours. What we will show you can be done within 15–20 minutes, just a few times a week. Can you do it more often? Sure. Can you do it less often? Maybe. A lot depends on your own circumstances (how many of those blocks are set wrong) and how long you have had these specific problems. What follows are a few simple exercises you can do at home, in the office, or at the gym. For more exercises, go to www.coachrozy.com and refer to our blog posts. Let's get to work.

The following exercises are great to help strengthen the core – which includes the back, abs, glutes and hamstrings.

Weighted bridge

Exercise #1

Lie on the ground, on your back, and hold some type of resistance or a weight: a bottle of milk, a dumbbell, kettle bell, medicine ball, or even a small weight plate, at your belt line.



Fig 1. Weighted bridge – exercise 1

Have your knees bent at 90 degrees and your heels into the ground with your toes up (pull them towards your shins), and start to do bridges.

Lift the hip and butt off the ground. While doing this, think 'lift and long'. As the hips come up, push the shoulders back and the knees away. You'll feel a great stretch through the back. While doing this, also squeeze your butt together (sorry for the visual – but think of holding a piece of paper in your backside!). This activates the glutes and hamstring while engaging the core muscles.

Beginners should do 10–15 reps for one set. As you advance, add more sets or increase the number of reps. You can also increase the weight that is used – after you can complete 3 sets of 15 reps.

Cross-leg weighted bridge

Exercise #2

This one is just like the weighted bridge, but instead of two feet on the ground, lift one leg up and cross it over the other.

You still want to make sure your heel, on the down support leg, is on the ground and your toe is pulled back towards your shin.



Fig 2. Cross-legged weighted bridge – exercise 2

Push the hips up and keep the body long. Squeeze the glutes and make sure you are activating your core.

Do one set of 10–15 reps and then repeat with the other leg. Build up to three sets of 10–15 reps, and then you can increase the weight you use. Do two sets of eight on each side.

As we look at how our body 'stacks up', we want to make sure we stay stable in the areas that should be stable, such as the foot, knee and lumbar spine. Some areas we do want to keep mobile and flexible include the ankles, hips, shoulders and thoracic spine. The following stretches are great at keeping these areas mobile.

The clam

Exercise #3

Lay on the ground, on your side, with your arms extended straight out at chest level and your knees pulled up towards your chest. The hips should be at 90 degrees, knees at 90 degrees and work to have the ankles at 90 degrees. You can be on a mat for support. You might also want to put your head on a pillow or a rolled-up mat for support.

To start the exercise, keep the knees together (if this is difficult, place a rolled-up towel or small ball between the knees). Take the top arm and open up, taking the arm over the body towards the floor on the opposite side. The goal here is to get the arm

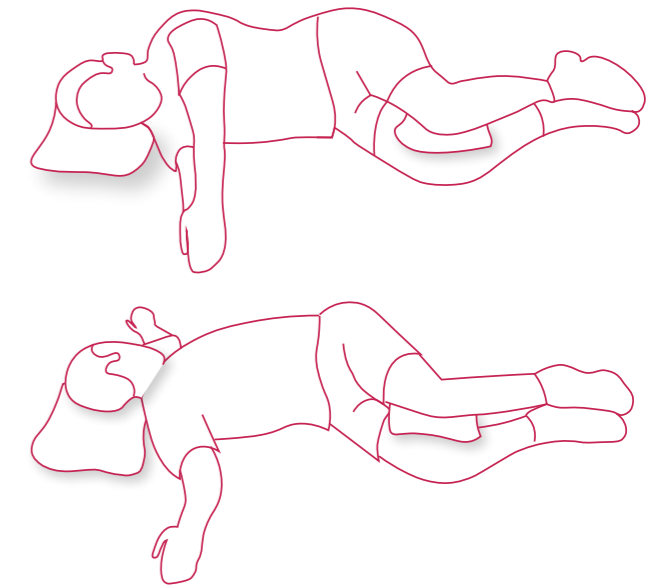


Fig 3. The Clam – exercise 3

and the shoulder blade of the back arm on the ground. Do not just put the hand on the ground.

Do two sets of eight reps on each side.

Movement needs to come through the thoracic spine, not just the shoulder area.

Roll to the other side and repeat in the other direction.

Knelling elbow rotation

Exercise #4

This one is a little bit more advanced in that you have to have more control over your posture, your movement and how you stabilise your hips.

Start in a six-point (some call it a four-point) position on your hands and knees. Take one hand and place it on the base of the skull behind your head. Work to keep weight evenly distributed on the legs and the other arm.

Keeping the arm locked in position, take the elbow and point to the ground. Keep in mind the movement should come through the spine – and not just the shoulder. Rotate the torso outwards, through the spine, so that the elbow is pointed up towards the ceiling – again, making sure that movement is from the thoracic spine and not just from the shoulder or hips.

Do two sets of eight reps on each side.

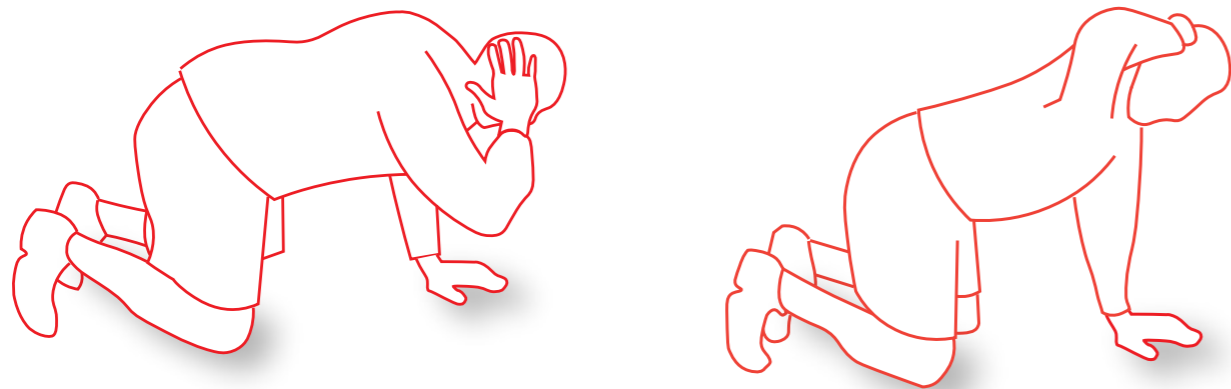


Fig 4. Kneeling elbow rotation – exercise 4

Conclusion

By starting with just these four exercises, you will feel some relief in your shoulders, hips and back. You can pick one or two exercises to do a few days a week and change it up the next day. Within minutes you will be able to complete the exercises and should start to feel the pain subsiding. Once you feel comfortable with these movements, go to www.coachrozy.com and see some additional movements to add to your program.

As a practising sonographer that suffered from the stress of debilitating pain and injury, as a consequence of doing my job, I knew I either needed to find a solution quickly or find another career. A different career was not an option for my family and I at that time in my life, so a solution was put in place. The education that we are offering will take some effort on your part; however, the results can be enormous. You get to decide details on some of the most important aspects of your working life; you get to decide what direction your career path takes, not your body. I still do my workout routine that keeps me pain free at my job. What are you willing to do to take control of your body

and your life? I was lucky enough to have access to one of the top strength and conditioning specialists in the United States. I was smart because I listened to him and took his advice. Now, what are you going to do?

Mark (Coach Rozy) Roozen, MEd CSCS,*D, NSCA-CPT, FNCSA and Doug Wuebben BA, AS, RDCS (Adult and Pediatric) are published and truly enjoy presenting on the subject of corrective exercise and stretching and the proper use of equipment, exercise and ergonomics to help sonographers and others become and remain pain free. They can be reached at www.livepainfree4u@gmail.com.

Access to the recorded **asawebinar** ‘Stretching technique for alleviating and preventing sonographer injury’ by Doug Wuebben is now available. Access will be open for 12 months from when the **asawebinar** was hosted (5 March 2015). **asawebinar** library allows you to catch up on any live **asawebinars** that you missed, at anytime that is convenient for you. Register now at www.a-s-a.com.au.

soundbite

Q. I would like to get involved in peer reviewing for the ASA journal *Sonography*. How do I register to become a reviewer? Is there any training available in how to review?

A. We encourage sonographers who would like to become peer reviewers to apply to be a part of the peer review panel. Please email Glenda McLean for an expression of interest document. We can provide you with some resources to guide you in reviewing articles for publication. Peer review is now eligible for CPD points under the ASAR and PD-**asa** CPD programs. Glenda McLean can be contacted on editor@a-s-a.com.au.

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Appropriate footwear

Safe shoes

Footwear plays an important role in reducing the risk of injuries, such as slips, trips and falls in the workplace. Injuries in the healthcare industry may result from slipping, contact with falling objects or penetration injuries.

Your employer, with reference to current legislation and standards, will determine what appropriate footwear is to be worn in the presence or absence of hazards e.g. protective, general or occupational footwear. They will usually conduct a risk assessment to help determine if the footwear is appropriate for the work environment and tasks performed.

Consideration may be given to:

- level of toe protection required
- metatarsal impact protection
- sole puncture and penetration risk
- electric shock or hazardous substance risk
- slip resistance or grip required.

If you are not normally exposed to hazards, but occasionally are required to enter areas where hazards exist (e.g. theatre), appropriate footwear should be worn. For sonographers, practical footwear should be considered that usually meets general or occupational requirements.

Selection of footwear



The type of footwear is usually classified by the duties performed by the sonographer and their work environment. All risks associated with the job should be assessed. Safe footwear will provide adequate protection from injury, but should also be comfortable. Most sonographers, including those

working in hospital sites, will usually wear supportive, enclosed, flat footwear.

**Richard Allwood,
SIG Cardiac Committee**



Fig 1. Example of footwear worn by sonographers in hospital environments

A sonographer should consider several criteria when selecting shoes to wear while on the job. When considering footwear for work, they must be:

- suitable for the type of work and work environment
- comfortable, with an adequate non-slip sole and appropriate tread pattern
- checked regularly to ensure treads are not worn away or clogged with contaminants.

Wearing inappropriate shoes can affect the way you walk, the shape and feeling of your feet, and your balance. Wearing appropriate and supportive shoes that match your feet and environment is an easy way to reduce your risk of injuries. This can help maintain a safe walking pattern and proper balance.

What is a safe shoe?

Footwear should be well made, have a low heel, and be fully enclosed to protect the feet and limit slipping. The upper footwear should be made from synthetic, leather, canvas or combination, to achieve the desired protection from the work undertaken (Figure 2).

Appropriate footwear will usually have:

- a non-slip tread sole (flexible with shock absorption to cushion)
- a broad, low square heel less than 2.5 cm
- an enclosed heel

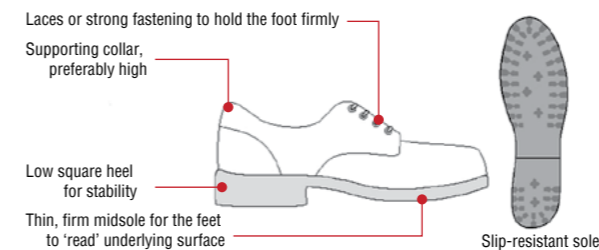


Fig 2. Theoretical optimal safe shoe (above) and unsafe shoe (right)

- an enclosed forefoot or toes, with sufficient depth and width at the toes to prevent pressure and allow freedom of movement of the toes
- a firm and comfortable fit with a supporting collar and little distortion when twisting the shoe.

It is important that your shoes are firm over your heels and do not slip when walking. The shoes should have a non-slip sole and be appropriate for the environment you are working in. Shoes that have a smooth sole, are heavy or poorly fitting can be a hazard when working in a clinical environment (Figure 3). It is also important that your shoes be kept clean and stored in a cool, dry area away from sunlight.

This information should be considered a general guide only. Specialist advice from a podiatrist for prescription of appropriate footwear may be required.

Acceptable footwear



Unacceptable footwear



Fig 3. Examples of appropriate and inappropriate shoes for healthcare workers. Sandals, soft shoes, open-toe shoes, open-weave shoes or high heel shoes are usually unsuitable in most clinical environments and should not be worn unless appropriate



Fitting of footwear – What should you know when buying footwear for work?

When purchasing new footwear for work ensure:

- you measure both feet for the correct size, as they may differ in size
- you buy footwear to fit the bigger foot. Fit shoes while standing and towards the end of the day when your feet are likely to be swollen to their maximum size
- you wear appropriate socks or stockings, not too tight or loose, as this can result in poorly fitted footwear
- you take time to test them out, and walk around to ensure maximum comfort
- you do not expect footwear that is too tight to stretch with wear
- you measure your feet periodically as they get larger as you get older.

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person profile

Tony Forshaw

A short bio

I am the course coordinator for the Graduate Diploma in Cardiac Ultrasound at Queensland University of Technology. I have been a strong advocate for improved standards in sonography and provide education and training to sonographers throughout Australia and New Zealand. I completed my Master's project, looking at the assessment of diastolic function using VVI, and continue to heavily participate in clinical research activities. I maintain a clinical role as a cardiac sonographer working in private practice at Hearts 1st Cardiology in Brisbane.

I proudly volunteer at the ASA. I am a regular invited speaker at conferences and workshops and enjoy teaching opportunities in a variety of forums.

My background is as an exercise scientist and I worked my way through university as an earthmover. If you gave me a giant Tonka truck with the tray filled with Lego blocks, you might not see me for a whole month!

Why is being on the ASA Board important to you?

Being a Board Director lets me have a role in shaping the profession I care so much about. Echocardiography has come a long way in the last 20 years, but is still a long way behind general ultrasound in many aspects. Serving as a Board Director lets me raise these issues.

What are you passionate about?

I am passionate about improving the standards of our profession. I strongly believe that sonographers need to take more responsibility for our actions. Too often I hear of people hiding behind the decisions of the practice managers or physicians they work for. At the end of the day, we are the sonographers. We are

the professionals who have the training in how to scan properly, so it is imperative that we are treated as a valued allied health professional – but this means that we need to act accordingly.

What about life outside work?

I am a very passionate Queenslander! I love watching the rugby and going to the beach. I have an old motorcycle that I am restoring – it will probably never get back on the road again, but I enjoy tinkering with it. I am expecting my first child very soon, so I am frantically preparing the house for his arrival.

What does your current job involve?

I am fortunate to divide my time within clinical practice, spending most of my time performing contrast stress echoes. I am the course coordinator for the Graduate Diploma of Cardiac Ultrasound. I also run an echo website (Echo.Guru), which lets me work on different approaches to cardiac education.

What aspect of sonography has been most rewarding?

By far the most rewarding is when I am able to teach a challenging concept and I can see the light bulb flash on the student's face. The 'aha' moment makes it all worthwhile. Training new sonographers is by far the best aspect of my job.

Who are three people you would like to have dinner with?

If I had a time machine, it would be Steve McQueen, Audrey Hepburn and Hunter S Thompson. Otherwise I would pick Tim Ferris, Bill Murray and Bear Grylls.

Favourite movie?

Pulp Fiction

Currently reading? Favourite authors?

I'm currently reading *Every second counts* by Donald McRae. It is the true



story about the race to be the first team to perform a heart transplant. I visited the heart transplant museum at Groote Schuur Hospital in Cape Town and was fascinated by the story.

Last meal you cooked?

I am in a phase of slow cooking at the moment. Roast lamb with rosemary potatoes was the last meal I cooked.

Favourite pastimes outside work?

I enjoy surfing, adventure racing and spending time on my motorbike. I'm normally up for anything that gets me out of a dark room for a bit.

Favourite place you have travelled to?

That's a little tricky to narrow down, but I would say Biarritz, France, anywhere in South Africa, North Shore, Oahu and Birdsville, Queensland.

Place you would like to travel to?

This list seems to grow every day! At the top of the must-see list is Cuba. Also high on the list is Lake Superior in Canada (for freshwater surfing), North Western Australia and Isle of Mann.

What do you do to relax?

I like to put my feet up and listen to vinyl records with a good whiskey. For more serious relaxation, I need to spend time in the ocean periodically to really unwind and get some salt therapy.

What is your favourite holiday spot?

Byron Bay

What talent do you wish you had?

I wish I could surf better. I kind of flounder around – it looks awkward but I have a lot of fun.

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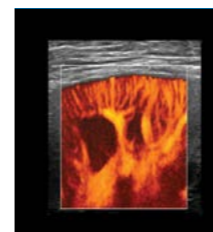
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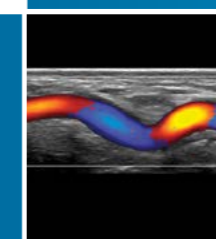
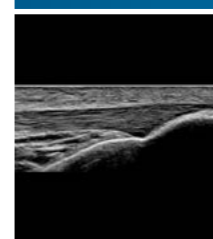
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Background

This echocardiogram was performed in Xuanwei County, Yunnan Province, China, as part of China California Heart Watch screening program for congenital heart disease. The organisation successfully screens and provides financial assistance to pay for necessary surgeries and procedures for children with congenital heart disease in China's undeveloped countryside.

The majority of people find themselves without access to basic medical services and are plagued by massive poverty.

Clinical presentation

An 8-year-old male presented with a 2/6 ejection systolic murmur over the left sternal border. On examination the patient's cardiac apex was directed to

the left, a prominent right ventricular impulse was noted, and there were signs of cyanosis and digital clubbing. His oxygen saturation was recorded at 76% on room air.

Imaging findings

From the subcostal imaging it could be seen that the inferior vena cava (IVC) and the abdominal aorta were on the left side of the spine, with the IVC slightly anterior to the aorta. The liver was predominantly over the left side of the body and the spleen could not be visualised. The connections of the hepatic veins to the IVC were visualised and the IVC connected to the right-sided atrium. These vessels appeared patent. The IVC appeared intact and not interrupted.

An apical 4-chamber view was obtained from the left lateral decubitus position.

Richard Allwood, SIG Cardiac Committee, St Vincent's Hospital Melbourne

There was absent left atrioventricular (AV) connection. One set of AV valves committed to a dominant right-sided ventricle. There was mild regurgitation present. A primum atrial septal defect was identified, with the interatrial septum being represented by a single strand. A dominant morphological right ventricle and hypoplastic left ventricle were identified. Ventriculoarterial connection demonstrated a double outlet right ventricle. The aorta and pulmonary artery arose from the right ventricle, with the aorta anterior to the pulmonary valve.

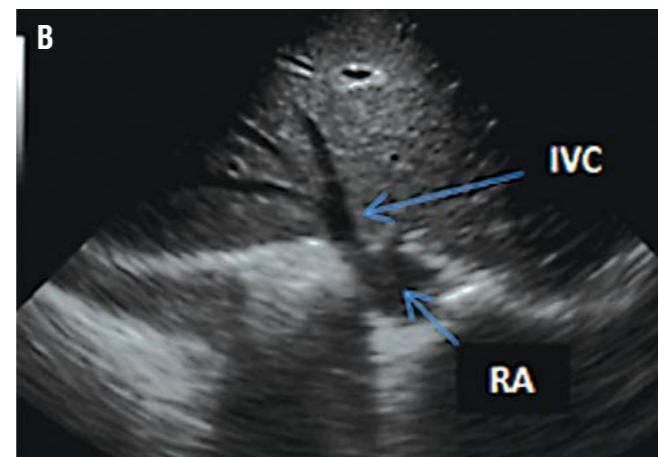
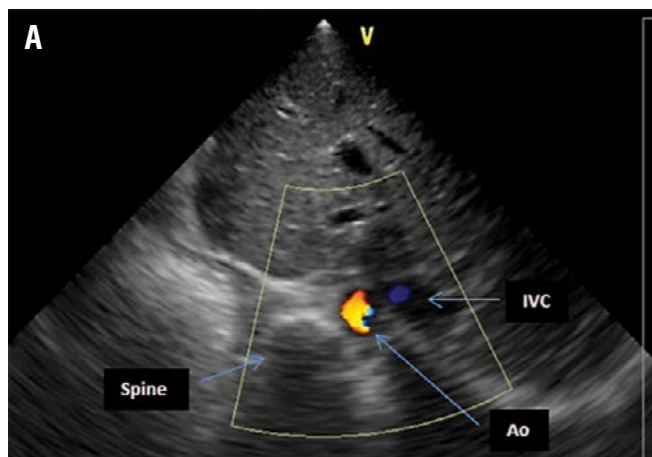
There was severe pulmonary stenosis and bilateral superior vena cava.

Summary and conclusion

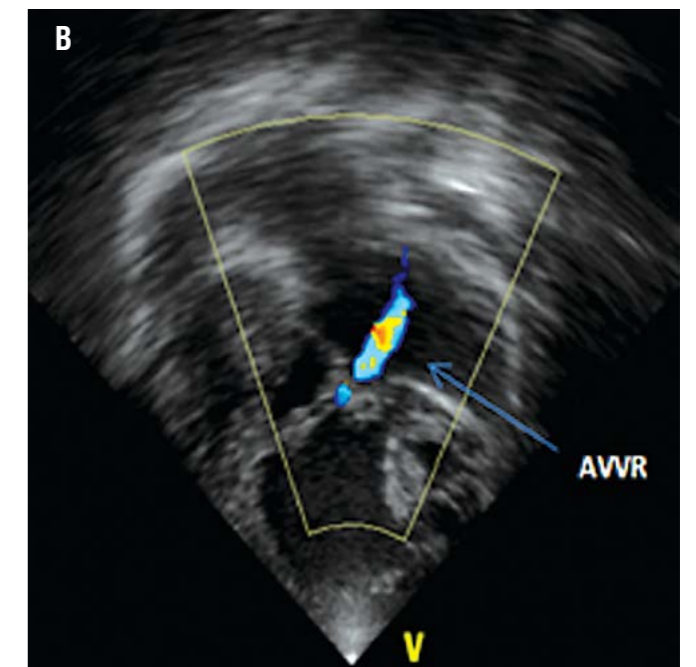
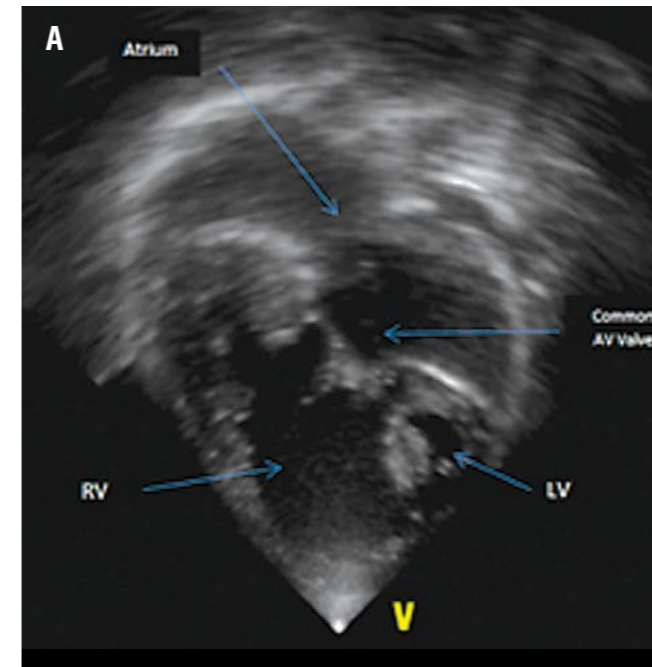
Based on the complex echocardiographic findings, including



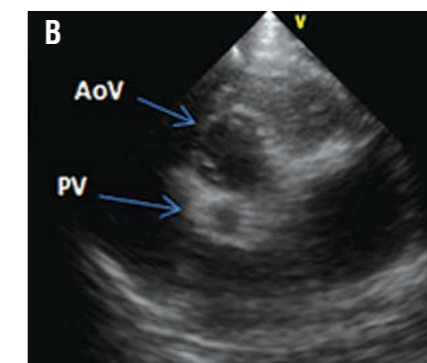
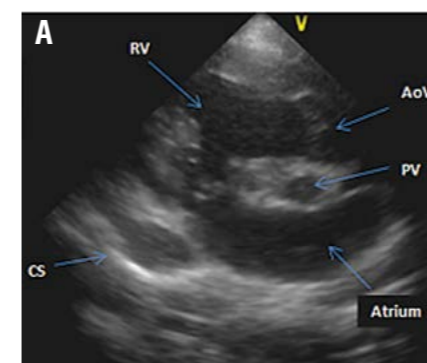
Figs 1a–1c. Heart screening clinics in rural China



Figs 2a and 2b. Subcostal imaging of the IVC and abdominal aorta (Ao) and right atrium (RA)



Figs 3a and 3b. Apical 4-chamber (image inverted and displayed anatomically correct) demonstrating mild AV valvular regurgitation (AVVR)



Figs 4a and 4b. Parasternal long axis of the left ventricle (LV) and parasternal short axis at the aortic valve level (CS – coronary sinus, PV – pulmonary valve, AoV – aortic valve)

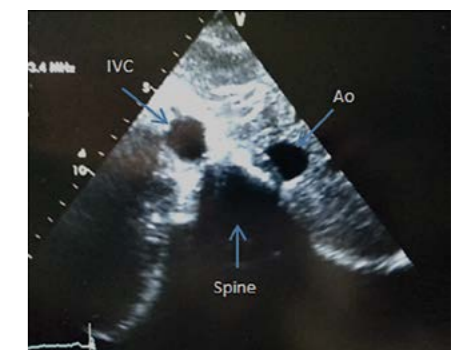


Fig 5. Normal arrangement, abdominal situs solitus follows atrial situs in about 70–80% of cases (aorta to the left and IVC to the right of the spine)

a predominant left liver and absent spleen, there was a strong suspicion that this patient had a form of heterotaxy known as right atrial isomerism (RAI). It involves duplication of structures normally found on the right side of the body (mirror image). Bilateral right atria are often present with broad triangular right atrial-type appendages. In addition to cardiovascular anomalies, patients with RAI commonly have abnormalities of visceral situs. The liver tends to be centrally located, spleen absent (asplenia), two lobar bronchi, and bilaterally trilobed lungs. The descending aorta and IVC are located on the same side of the spine.

In RAI, cardiac anomalies tend to be severe and complex. The atrial septum is absent in up to 80% of patients; 82% have double outlet right ventricle, 88–96% have subvalvular or valvular pulmonary stenosis. The IVC is normal, but 65% have bilateral superior vena cava. Univentricular AV connection is common, with a common AV valve the most common mode in 69%.

RAI is associated with a shorter survival, its constellation of associated malformations frequently are more complex and severe and less amenable to corrective surgery.

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2015 asa award winners

Student awards

As part of our commitment to sonographer education, the ASA sponsors university student awards across Australia. Winners receive a free full registration to the ASA Annual Conference:

This year's awards went to:

- Ashlea Devins – QUT Cardiac
- Kathryn Lanham – QUT General
- Thanh Nguyen – CSU
- Isla Lucas – UniSA
- Christy Loiacono – Monash
- Karen Leigh Tomkinson – CQU

We look forward to the Student Award winner's conference experiences that will be published in the September issue of *soundeffects news*.

Rural and Remote Sonographer Scholarship

The ASA is committed to supporting sonographers living and working in rural and remote areas. The *Rural and Remote Sonographers Scholarship* provides support with registration to attend the ASA Annual Conference, an opportunity to publish research in *Sonography* and to present this research at the ASA Annual Conference.

Thanks to Global Diagnostics for sponsoring this scholarship.

The three scholarships are presented this year to:

- Margaretha Breytenbach
- Kathryn Deed
- Jill Muirhead

Margaretha Breytenbach

Margaretha has worked in a number of regional and remote communities in Namibia, South Africa and Australia. Originally trained as an occupational

therapist she is now a sonographer on Thursday Island in the Torres Strait. She is committed to providing an excellent ultrasound service to her community and keen to develop her skills attending the ASA conference.

Kathryn Deed

Kath is the Chief Sonographer at North Queensland X-ray Services in Cairns, Queensland. She has education, supervisory and tutoring responsibilities in her role and feels it's important she keeps abreast of new ultrasound techniques and changing policies by attending the ASA Annual Conference.

Jill Muirhead

Jill has over 30 years' experience as a sonographer, including extensive teaching, examining and research roles. She is the Director of Ultrasound Imaging and Education Ltd, Dunedin, New Zealand. She presented on 'Clinician performed ultrasound in the rural setting in New Zealand' at ASA2015 Perth.



ruralandremote sonographer scholarship 2016

applications close
Friday 9 October 2015

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. As such, the ASA offers three (3) Rural and Remote Scholarships annually – worth up to \$1,000 each in assistance towards attendance at the ASA Annual Conference.

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 ordinary or student 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 attending ASA2016 Melbourne
- provide your current CV
- provide the abstract to support your presentation or poster (if applicable).

Applications close Friday 9 October 2015. Visit www.a-s-a.com.au or contact the ASA Office on 9552 0000 for more information.

What the 2016 ASA Rural and Remote Scholarship covers

Up to three (3) scholarships are offered and provide financial support for attendance at the 2016 Annual Conference, which will be held in Melbourne. 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

Apply now – Applications close Friday 9 October 2015
Visit www.a-s-a.com.au or contact the ASA Office for more information.

Previous scholarship recipients

- 2015 Margaretha Breytenbach, Kathryn Deed and Jill Muirhead
- 2014 Tamara Allcorn, Jane Bennet and Kim Kuhnemann
- 2013 James Hilton, Tristan Hunt and Marnie Leighton
- 2012 Rayshelle Finch
- 2011 Natalie Clements
- 2010 not awarded
- 2009 Sian Jacobs
- 2008 Jessie Childs
- 2007 Michelle Pedretti
- 2006 Kerry Harvey
- 2005 Michelle Williamson and Brian Gilling
- 2004 Julie Thwaites
- 2003 Sonja Brennan

Contribute to the newsletter of the Australasian Sonographers Association

soundeffects news

- *soundeffects news* – a quarterly news and information newsletter circulated to ASA members
- Contribute by sharing any information that may be of interest to members
- Share a story about a day in the life of your sonography practice or simply let us know more about someone from the sonography community
- Have any non-clinical information that you would like to share? We are interested in articles that think outside the box as well
- Implemented a new protocol recently or feel like refreshing memories about basic procedures? We are interested in it all!

For further information, please contact the editor at editor@a-s-a.com.au or refer to the author guidelines at the ASA website www.a-s-a.com.au



reader competition

Last issue's case

The case featured in the reader competition last issue was from an obstetric morphology scan.

The condition was confirmed as Tetralogy of Fallot.

Correct answers were received from the following members:

Rachael Baker
Kylie Fryer
Jeanette Porter



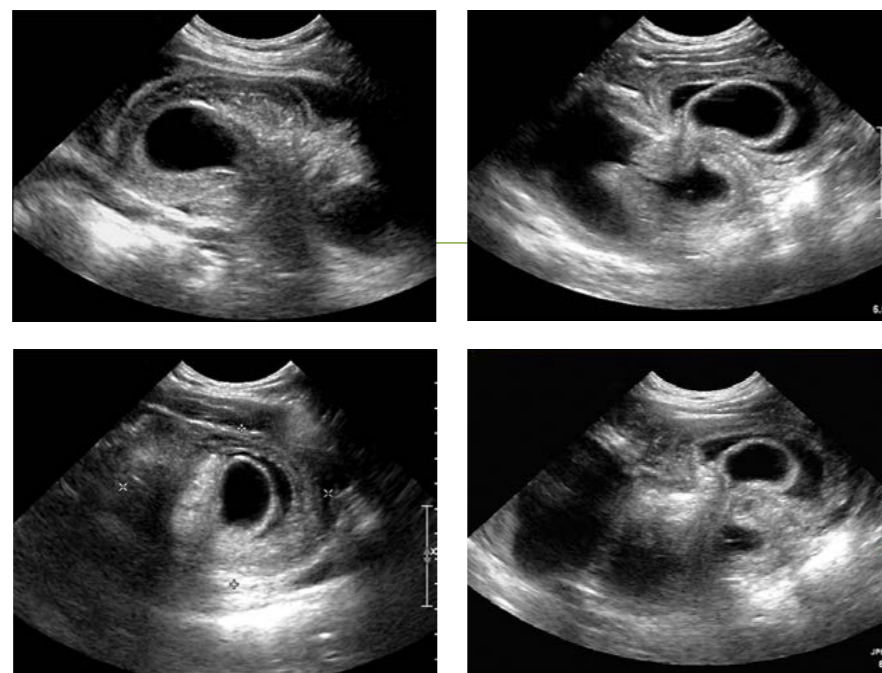
This issue's case

This issue's case is from a scan submitted by Beth Cheung.

The patient was a 2-year-old male from a rural centre. He had a 12-hour history

of intermittent, varying abdominal pain, vomiting, lethargy and a white cell count of 15. An abdominal X-ray was nonspecific.

What pathology is demonstrated in these images of the child's abdomen?



Views of the right lower quadrant

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We understand the importance of providing ongoing education and training for our employees, particularly given our regional location, why we are the proud sponsor of the **2015 ASA Rural & Remote Scholarship**.

For further information please contact
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www.globaldiagnostics.com.au



Aon Insurance

Accidents happen. How would your business respond?

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Public Liability Insurance ensures that should a situation like this arise in your business, or the business in which you work, you are protected. It offers peace of mind and protection from claims of negligence arising from injury or property damage to your clients and the general public.

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The first three months of 2015 saw the ASA hold various CPD educational activities in locations throughout Australia and New Zealand. 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

14 February

ACT Branch Education Meeting, ANU Medical School, Garran, *Update in Men's Health*, presented by Faye Temple, Dr Rohit Tamhane and Amanda Engel. Sponsored by Siemens

21 March

Canberra Travelling Workshop, Calvary Hospital, Bruce, *Fetal heart sonography*, presented by Ann Quinton

Northern Territory

17 February

Northern Territory Branch Education Meeting, Darwin Medical Imaging, Milner, *Identify the at-risk fetus in third trimester*, presented by Peter Coombs

19 March

Northern Territory Branch Education Meeting, Darwin Medical Imaging, Milner, *Sonographic pelvic floor assessment*, presented by Prof. Peter Deitz, and followed by group discussion

28 March

Darwin Travelling Workshop, Royal Darwin Hospital, Rocklands Drive, *Paediatric ultrasound – the classics*, presented by Allison Holley

Queensland

10 February

Moreton Bay Branch Education Meeting, Redcliffe Hospital, Redcliffe,

asawebinar on *Prediction and prevention of pre-eclampsia at the first trimester scan*, presented by Prof. Jon Hyett, and followed by a group discussion

10 February

Toowoomba/Darling Down Branch Education Meeting, Toowoomba Base Hospital, South Toowoomba, asawebinar on *Prediction and prevention of pre-eclampsia at the first trimester scan*, presented by Prof. Jon Hyett, and followed by a group discussion

4 March

Queensland Branch Education Meeting, The Prince Charles Hospital, Chermide, *Physiotherapists and sonographers interdisciplinary musculoskeletal seminar*, presented by Dr Navid Adib, Lisa Hackett and Graeme Milne. Sponsored by GE Healthcare, Philips Healthcare, Siemens and Toshiba

14 March

Mackay Travelling Workshop, The Mackay Mater, North Mackay, *Obstetric and gynaecological sonography*, presented by Catherine Robinson

19 March

Mackay Branch Education Meeting, Mackay Base Hospital West Mackay, *Sonographic pelvic floor assessment*, presented by Prof. Peter Deitz, and followed by group discussion

21 March

Toowoomba Travelling Workshop, Unara Conference Centre, Toowoomba, *Advanced upper limb MSK*, presented by Marguerite Leber

25 March

Gold Coast Branch Education Meeting, Australian Institute of Ultrasound, Broadbeach Waters, *Stemlife cord blood bank*, presented by Dr Andrew Davidson

Victoria

7 February

Gippsland Branch Education Meeting, Latrobe Regional Hospital, Traralgon, *Musculoskeletal workshop with live scanning*, presented by Stephen Bird. Sponsored by Toshiba Australia

10 February

Victoria Branch Education Meeting, St Vincent's Hospital, Fitzroy, *Wrist ultrasound for sports injuries*, presented by Nick Burke; *Platelet-rich plasma (PRP) injections*, presented by Andrew Grant; *A clinical perspective of ultrasound in a sports injury setting*, presented by Dr Dean Federman. Sponsored by Toshiba Australia

12 February

Clinical Supervision Workshop, Monash University, Clayton, *How to organise effective teaching and learning experiences in the workplace environment*, presented by A/Prof. Elizabeth Molloy

14 March

Clinical Supervision Workshop, Monash University, Clayton, *How to organise effective teaching and learning experiences in the workplace environment*, presented by A/Prof. Elizabeth Molloy

14 March

Gippsland Branch Education Meeting, Latrobe Regional Hospital, Traralgon, *All things third trimester*, presented by Dr Alice Robinson and Peter Coombs. Sponsored by Philips Healthcare

18 March

Victoria Branch Education Meeting, St Vincent's Hospital, Fitzroy, *Paediatric renal*, presented by Dr Nathalie Webb, Cain Brockley. Sponsored by Siemens

3 March

Illawarra Branch Education Meeting, Wollongong Hospital, Wollongong, Presentations by local trainees

New Zealand

Auckland

24 February

Auckland-Waikato Branch Education Meeting, Horizon Radiology Head Office, Parnell, Auckland, *Blood is thicker than water*, presented by Dr Stephen Merrilees, Martyn James and Scott Allen

Wellington

25 March

Wellington Branch Education Meeting, Pacific Radiology, Wellington, *Obstetric sonography*, presented by Dr Jay Marlow

Online

10 February

asawebinar – *Prediction and prevention of pre-eclampsia at the first trimester scan*, presented by Jon Hyett

5 March

asawebinar – *Corrective exercises/stretching techniques for alleviating and preventing sonographer pain and injury*, presented by Doug Wuebben and Mark Roozen

19 March

asawebinar – *Sonographic pelvic floor assessment*, presented by Prof. Peter Deitz

South Australia

17 February

South Australia Branch Education Meeting, *Virtual Classroom*, Adelaide; *Plantar plates and foot pathology*, presented by Jessie Childs

New South Wales

11 February

New South Wales Branch Education Meeting, St Vincent's Clinic, Darlinghurst, *Uterine malformations*, presented by Delwyn Nichols; *Early pregnancy care*, presented by Marilena Pelosi

21 February

Wollongong Travelling Workshop, Illawarra Shoalhaven Health Education Centre, Wollongong, *Basic, better, best – how to assess the normal fetal heart, recognise and assess the abnormal heart*, presented by Ann Quinton



Announcing changes to ASA's CPD program PD-asa

As part of the ASA's commitment to making life easier and improving the services offered, we are pleased to advise we will be upgrading the PD-asa continuing professional development (CPD) system later in the year.

Due to the upgrade, from 1 July 2015 the Endeavour pathway will no longer be available and the Extension pathway will change from 40 CPD points per yearly cycle to 120 CPD points per triennium.

Unless you advise otherwise, all Endeavour pathway participants will be moved over to the Essentials pathway of 40 CPD points per triennium. Participants can still accrue 15 CPD points per yearly cycle and only 10% will be audited per triennium. During the transition to the Essentials pathway, your CPD points will not be altered and your activities will remain as logged. Once your PD-asa record has been moved to the Essentials pathway, it will stay the same, and your CPD points will be calculated over a three year period. To view the rules for the Essentials pathway, visit www.a-s-a.com.au.

Table 1. Proposed changes to PD-asa pathways

PD-asa pathway	Current rules	New rules
Essentials Pathway	<ul style="list-style-type: none"> 40 CPD points per triennium 10% of participants ending their triennium audited per triennium 	No change
Endeavour Pathway	<ul style="list-style-type: none"> 15 CPD points per yearly cycle 10% of participants audited per yearly cycle 	No longer available from 1 July 2015
Extension Pathway	<ul style="list-style-type: none"> 40 CPD points per yearly cycle and must display a breadth of activities by earning points from at least four (4) categories per yearly cycle, one of which must be category 6 and/or 6A 10% of participants audited per yearly cycle 	<ul style="list-style-type: none"> 120 CPD points per triennium, must display a breadth of activities by earning points from at least four (4) categories per triennium, one of which must be category 6 and/or 6A 10% of participants audited per triennium

There are no proposed changes to the Essentials pathway; it will remain as 40 CPD points per triennium, the minimum required to practise.

Table 1 provides a summary of the proposed changes to PD-asa.

PD-asa will continue to offer two pathways of participation to cater for all sonographers – from those wanting the flexibility to manage their mandatory CPD requirements to those seeking additional professional development opportunities within the profession over a triennium.

We will provide more information about the new CPD system closer to the time it is ready to be launched.

If you would like to change your pathway, or have any further questions, please email Vanessa Mumford at cpd@a-s-a.com.au.

PD-asa audit

At the ASA, audits are a vital part of a sonographer's continuing professional development, compliance and accreditation. The ASA randomly select 10% of PD-asa participants at the end of their triennium for audit.

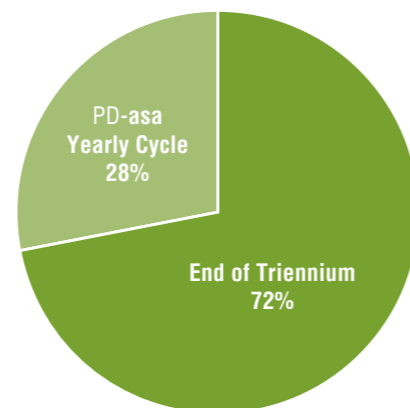


Fig 1. PD-asa participants audit type completed in 2014

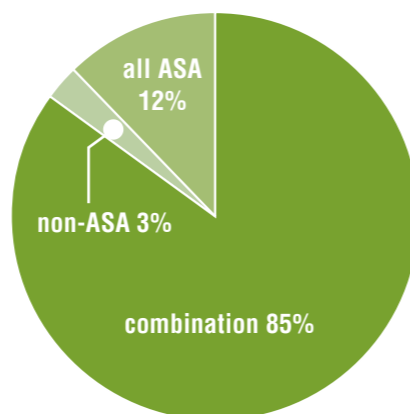


Fig 2. End of triennium 2014 PD-asa participants – ASA and non-ASA activities logged

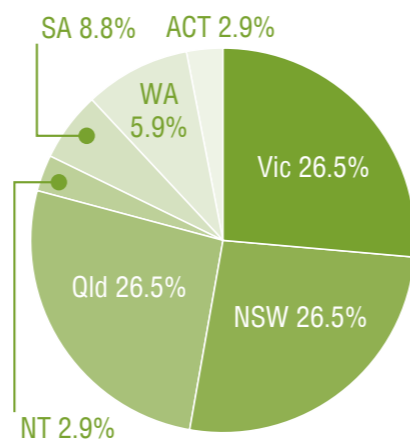


Fig 3. End of triennium 2014 participant location (NZ 0% and Tas 0%)

If you are randomly selected for the PD-asa audit, you will be advised within 20 working days of the end of the year via email and post. Vanessa Mumford, your PD-asa Program Coordinator, will work with you to facilitate the process in accordance with your triennium or PD-asa pathway of participation. You will be required to provide evidence of your non-ASA activities logged within your triennium period and any other documents as requested.

Vanessa will also provide support and guidance throughout the process by:

- acknowledging all correspondence from audit participants
- evidencing all ASA activities as logged in participants' PD-asa records
- submitting evidence to the appropriate committee for review
- notifying participants of their audit outcome.

2014 PD-asa audit results

A total of 51 PD-asa participants were selected for end of triennium and end of yearly cycle 2014 audit. Congratulations to all participants audited who received 100% compliance.

If you are an ASA member who has joined the PD-asa program, Vanessa will be there to guide you should you be randomly selected for audit at the end of the year.

If you are not yet a member of PD-asa but would like further information about our CPD program, please visit the ASA website at www.a-s-a.com.au and find out how you can join today.

For further information about the PD-asa program or the audit process, please contact Vanessa at cpd@a-s-a.com.au

Making life easier

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 on cpd@a-s-a.com.au

PD-asa
australasian sonographers association
Professional Development

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Far North Queensland

On 21 November 2014 FNQ Branch held our annual case study evening at the Rydges Esplanade Resort in Cairns.

Several interesting, thought-provoking and informative cases were presented, thanks to all of the presenters and attendees.

Cases presented:

Paediatric intussusception – Isla Lucas
 Urethral foreign body – Neil Thomas
 Myelomeningocele – Lee Williams
 Ultrasound without CT – James Hilton
 Biliary atresia – Sharlyn Ellis
 Perforated Mirena and an appendicitis in a 20/40 pregnant female – Kath Deed

Our first meeting for 2015 on 1 April was a presentation by Frank Grainer, a renal access nurse specialist at Cairns Hospital, titled 'Use of ultrasound in arteriovenous fistulas'.

Frank informed us on how point-of-care ultrasound in the past five years has come to play a major role in the planning and management of the end stage renal failure vascular access.

He and the renal team use point-of-care ultrasound on a daily basis: from cannulation of difficult access through to bedside vein mapping and diagnosis of simple AVF stenosis and AVF flow monitoring for AVF maturation assessment. Frank gave us details on what information sonographers can provide when performing a formal AVF ultrasound that is most important to the service.

It was especially interesting to see how point-of-care ultrasound can be applied to give quick, reliable information prior to possible angiography procedures by the managing clinician at the time of clinical assessment. Patients who are poor at



FNQ case study evening presenting for appointments and who otherwise may be lost to the system can therefore be better managed. An ongoing relationship has been forged between the Renal Unit and FNQ sonographers. Thank you, Frank, and well done on the service you coordinate and provide to the Cairns, Cape York and Torres Strait regions.

Kath Deed
 FNQ Branch Committee

Gippsland

The Gippsland Branch has had a busy and exciting start to the year with an informative and entertaining MSK workshop in early February that was presented by Steve Bird. Steve discussed shoulders, hips and ankles with a keen audience and great patient models. This meeting was very well attended and received. Due to the restricted numbers, though, quite a few people missed out. We hope to do a similar event next year that will again have restricted numbers, so please keep an eye out and register early to avoid disappointment.

We have also been lucky enough to entice Peter Coombs and Dr Alice Robinson to visit Gippsland. Peter and Alice presented on 'All things



Gippsland workshop with Steven Bird third trimester' with an emphasis on trying to diagnose IUGR. An objective of the morning was to try to get all sonographers in the Gippsland region to use the same charts and to ensure our reporting of growth discrepancies is consistent. The charts used by Monash Health, their origins and the reason for their choices were discussed, as well as Intergrowth charts and the possibility of a change to these later in the year.

There was a last minute change of room to Conference Room 1, but our Saturday morning went well with good attendance. A note to attendees of future education meetings – the conference room is still within the Monash building at Latrobe Regional Hospital, but just behind the Monash office. This may be used as well as the auditorium for future meetings, but we shall make sure it is well advertised and signed on the day.

On another note, we farewell Kim Wittmann from the committee, and thank her for her contribution over the past few years. Kim has decided to move on to sunnier pastures to be closer to her family in Queensland and we wish her well in her new endeavours.

Nerrida Robinson and Julie Rosato
 Gippsland Branch Committee

Gold Coast

It seems like a very long time since we presented the last Gold Coast Branch report. Our education meeting in December 2014 was held at an Italian restaurant, Riviera at Sorrento, and was well attended. It was a mixture of Christmas social interaction (always important) and continuing professional development with Rebecca Toumin's presentation on ectopic pregnancies and Kristy Sanderson's trivia and medical terminology questions. Did you know an ectopic pregnancy could even occur within the liver? And you can still have an ectopic pregnancy even if you have had a hysterectomy! I have to say we all walked away learning a thing or two.

A lot has happened on the Gold Coast, and from the response from previous meetings in 2014, it has become apparent that bigger meeting rooms and broader subjects are necessary for 2015. We are happy to announce our meetings will now be held in conference rooms at the Australian Institute of Ultrasound (AIU) at Broadbeach, and the new rooms at Paradise Ultrasound (Benowa), providing ample room for the growing numbers of attendees.

Our meeting held 10 March at the Australian Institute of Ultrasound was the first of many interesting meetings to be held this year. Stemlife director, Dr Andrew Davidson, gave us an informative

talk on cord blood and cord tissue storage: how it is collected, the cost and its uses. This meeting had only eight attendees, but all who came said that this was not just an informative meeting but actually changed their views on stem cell collections. There is a need for more of this information to be disseminated to our obstetrics patients so they can make informed decisions about their child's future welfare.

The Gold Coast Branch Committee looks forward to seeing everyone at the 2015 education meetings.

Anna Galea
 Gold Coast Branch Committee

call for papers

SONOGRAPHY

THE JOURNAL OF THE AUSTRALASIAN SONOGRAPHERS ASSOCIATION

Aims and scope

Sonography is an international peer reviewed journal and accepts manuscripts on all aspects of sonography and medical ultrasound. It is the official journal of the Australasian Sonographers Association (ASA) and accepts manuscripts from authors around the world. Manuscripts may take the form of original articles, review articles, case report and series, resource reviews, editorial, letters to the editor, commentary and education articles outlining new techniques and equipment.

Sonography is published quarterly in March, June, September and December.

What to publish?

Sonography invites the submissions of articles relating to the profession of sonography from the disciplines of: abdomen, breast, cardiac, musculoskeletal, obstetric, gynaecologic, paediatric, small parts and vascular sonography.

Getting started ...

Visit the ASA website at www.a-s-a.com.au to view the new author guidelines for *Sonography*. These guidelines will assist you to prepare your manuscript to the quality and standard required.

All new manuscripts are to be submitted and processed online. To submit your manuscript to *Sonography* you will need to create an account on the ScholarOne manuscript website <http://mc.manuscriptcentral.com/sono> and follow the instructions to upload your manuscript and images.

Further information can be obtained from:

Glenda McLean – Editor
 E: editor@a-s-a.com.au
 P: +61 3 9552 0000

For author guidelines on writing and referencing visit www.a-s-a.com.au



WILEY

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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.

To contact the following committees, please email admin@a-s-a.com.au

Special Interest Group Committees

SIG Musculoskeletal

Michelle Fenech, Sharmaine McKiernan, Ian Stewart

SIG Obstetric and Gynaecological

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As the peak body and leading voice for sonographers, the ASA guides the advancement of our profession to ensure the community has access to quality sonographic services.

Our core objectives are to:

- promote and advocate best practice in medical sonography
- support and disseminate research that contributes to the profession's body of knowledge
- position the profession as the experts in medical sonography
- provide and influence quality academic and clinical education
- deliver innovative resources and opportunities to foster quality practice and enhance the professional success of our members.

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