

asa

the magazine of the australasian sonographers association

soundeffects news

Begin reading current issue of **soundeffects news** by clicking on the arrows or turning the pages





PHOTO BY JON WESTRA - FLOKKE

MUSCULOSKELETAL | PAEDIATRIC | VASCULAR



SIGS2017 ADELAIDE

THE 13TH ANNUAL SPECIAL INTEREST GROUP SYMPOSIUM
OF THE AUSTRALASIAN SONOGRAPHERS ASSOCIATION
16–17 September 2017, Mercure Grosvenor Hotel, Adelaide

from the editor

Welcome to the September issue of your member magazine. This issue features a wrap up of the annual conference ASA2017 Brisbane in June. Check out our centre spread with lots of happy snaps from the event, along with reports and feedback from delegates. The ASA Future Directions Forum was held on the Sunday morning of the conference. Tony Forshaw chaired this forum and you can read his summary of the directions and focus that came from this initiative.

Our *feature article* details the journey of an Australian team of volunteer sonographers. Learn how these ASA members travelled to Tanna Island in Vanuatu to deliver healthcare, along with donated medical supplies and equipment. The local hospital was able to replace a small laptop-style single-probe machine not capable of Doppler with a Toshiba Xario ultrasound machine that the locals now call 'the eyes of medicine'.

Here at the ASA we're always interested in the journeys or pathways that sonography takes our members. Have you volunteered on local or community programs, or are you using your sonography skills and knowledge in a non-scanning context? Maybe, like the orangutans featured in the March and June issues of *soundeffects news*, your patients aren't even human. We would love to hear from you and share your story. Send your story to communications@sonographers.org

In our *person profile*, the spotlight is on Ilona Lavender and her passion for teaching, educating and continual professional development. Ilona's work was recently recognised when she was jointly awarded the 2017 ASA Pru Pratten Memorial Award for Sonographer of the Year, as well as the ASA Educator of the Year Award.

Our *branch reports* for this issue are from the state and territory branches around Australia as well as our NZ branches. A big thank you to all our branches and members who continuously support the ASA by volunteering their time to plan, organise and present at our educational activities each month, as well as those of you who attend these events.

wh&s matters looks at workplace violence and safety, a topic that has been highlighted recently in the media and continues to affect healthcare workers in the course of their day-to-day work. What measures does your workplace have in place to protect you against violence?

advocacy alert brings you up to date with what the ASA has been doing behind the scenes to raise the profile of sonographers and advance the profession. Finally, for a bit of a challenge, our *reader competition* offers a tricky case to diagnose.

Happy scanning and reading!

Carol De La Haye
Editor
communications@sonographers.org



the magazine of the australasian sonographers association

soundeffects news

soundeffects news is the quarterly magazine of the Australasian Sonographers Association (ASA) Ltd.

The views expressed in *soundeffects news* are not necessarily those of the ASA or of the editorial committee. The acceptance of an advertisement to appear in *soundeffects news* does not constitute a guarantee or endorsement by the ASA of the quality or value of the advertised products or services or of the claims made for them by their advertisers.

Editor

Carol De La Haye
E: communications@sonographers.org
T: +61 3 9552 0000

Editorial Committee

Karen Farrar, Julie Stafford and
Tamsin Wilson

All submissions to the Editor by email
communications@sonographers.org

Advertising inquiries to

Tamsin Wilson:
publications@sonographers.org or
Emma Fitzsimons: efitzsimons@wiley.com

ASA Office

PO Box 356, Dingley Village,
Victoria 3172, Australia
T: +61 3 9552 0000 F: +61 3 9558 1399

Copyright

soundeffects news is a registered publication of the ASA Ltd. Acceptance of a manuscript enables the ASA to publish the material in any medium in association with *soundeffects news* for non-profit purposes. The author/s will be advised of any proposed uses. The author retains ownership of the manuscript. The author is thus able to use the material elsewhere provided *soundeffects news* is cited. Requests for reprints by other sources will be referred to the author.

ISSN: 1447-4301

from the editor	1
president's message	3
letters to the editor	4
advocacy alert	6
feature article Team Tanna May 2017	8
sig2017 adelaide	14
sonography report	16
pd-asa report	18
asa2017 brisbane wrap up	19
reader competition	23
asa award winners	24
future directions forum 2017 report	26
wh&s matters Workplace violence and aggression	28
person profile Ilona Lavender	30
branch reports	32
committee members	38
corporate members	40

president's message



As I write my second president's message, the ASA's Brisbane 2017 Conference is still clear in my mind. The organising committee opened the conference with a bang and a sprinkling of tears; I experienced a mixture of emotions that I will remember for many years. Rachel Callander reminded me that my role as a sonographer, in the journey of so many parents, is so very important. Yet the language I use when I communicate with my patients is just as important as the images I take every day. Rachel's words are now in the back of my mind every time I scan.

Although I saw the ABC program *Australian Story* about the fetal surgical repair of an open spina bifida, Dr Glen Gardener's telling of the surgical intervention, and his team's journey leading up to the procedure, was spellbinding. The advances in fetal surgery that have been achieved and described by Glen inspire me to be a better sonographer in the hope more patients can be helped with these emerging techniques.

Professor George Murrell reminded me of the impact sonography has on the diagnosis and treatment of shoulder injuries. George showed me how sonographers are an integral part of

the patient's journey both before and after surgery.

All three speakers made me want to be a better sonographer and I am sure many sonographers felt similarly that Friday morning. The remainder of the conference program did not disappoint. Overall, it was both a moving and inspirational educational event.

Dr Gillian Whalley will be continuing in the role of Acting CEO of the ASA into next year. Gillian and the ASA staff are a finely oiled machine that has turned the ASA into *THE* member association for Australian and New Zealand sonographers. As the ASA continues to grow, ASA members will benefit. Later in the year we will begin the recruitment process for a substantive CEO.

It is with great sadness that I announce that Tony Parmiter is stepping down from the ASA Board at the end of his term this month. Tony has been a member of the Board for four years, and also served as ASA Vice President during that time. In his capacity as a Board member he has been a member of ASA Board sub-committees and represented the ASA at meetings of external stakeholders, such as the Diagnostic Imaging Advisory Committee, Diagnostic Imaging

Advisory Scheme and Peak Imaging Coalition. Tony has a genuine passion for sonography and the advancement of sonographers. He will be sorely missed by the Board and we wish him well in his future endeavours.

The Special Interest Group Symposium in Adelaide is fast approaching and possibly even underway by the time you read this. It looks like this event will even be fully subscribed. The organising committee, along with ASA staff, has worked hard to put together another great educational event for the ASA members, showcasing the specialties of musculoskeletal, vascular and paediatric ultrasound. For sonographers in these scanning specialties, the Adelaide Mercure Grosvenor Hotel is the place to be this month.

Dr Jennifer Alphonse, President
president@sonographers.org

soundbite

Q: Are you getting your weekly member e-newsletter *cross section*?

A: Members who use their work email for ASA membership may not be receiving *cross section*, or other ASA communications, due to filters on workplace servers. Increase your chance of receiving ASA communications by adding or selecting your personal email address as the primary email address in your member profile. You should also check that you've included communications@sonographers.org and members@sonographers.org in your email contact list.

letters to the editor

Dear Ed

I have enjoyed being an ASA member during my career as a sonographer. The communication I have had with ASA administrative staff over the years has always been considerate and helpful, and I have felt like a valued member of the association, not simply a 'number'.

I appreciate particularly the CPD opportunities that have been available via PD-asa, especially the CPD tests and the **asawebinars**. I have also enjoyed the online discussion forum which provides lots of information and varying opinions.

As I retire I would like to say many thanks to ASA for the benefits of membership!

Cheers
Annette Hausler

Thank you for your feedback, Annette and for being a loyal ASA member from 2001 to 2017.

Dear Ed

After 38 years of ultrasound, I have definitely decided to retire this year and therefore will not be renewing my membership. I have held the ASA in very high regard and found it extremely helpful over the years.

The conferences have been just great and the webinars superb. Very many thanks to you all.

Kind regards
Ruth Tuck

Thank you, Ruth, for being a valued ASA member from 2004 to 2017. Always great to have positive feedback! We hope both Ruth and Annette enjoy their retirement!

Thank you ASA for this lovely tribute to my amazing mum. She really did have such a passion for sonography and it's heartwarming to know she had such a positive influence on other sonographers.
– Ella Caitcheon

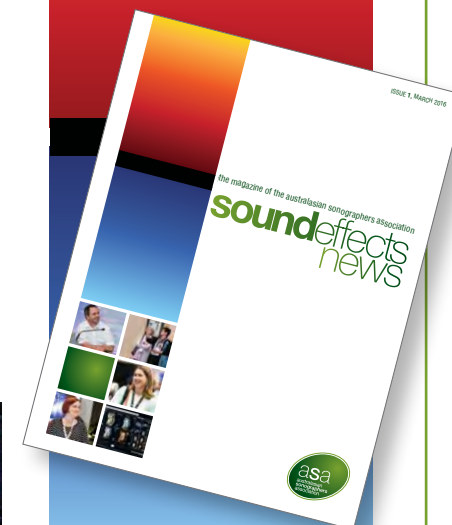
After the June issue of soundeffects news went to press, the ASA was saddened to hear of the passing of active member Sue Caitcheon. The above comment was posted by Sue's daughter Ella, on the ASA's Facebook tribute to Sue on 18 May.

Contributions to Letters to the Editor should be no more than 200 words. Thank you.

Contribute to the magazine of the Australian sonographers association

soundeffects news

- *soundeffects news* – a quarterly magazine 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 **communications@sonographers.org** or refer to the author guidelines at the ASA website **www.sonographers.org**



letters to the editor



Keep your letters coming ...

soundeffects news now has a direct line of communication with our readers and this is a great space for sonographers to contribute and be heard.

Share your thoughts on *soundeffects news* stories or tell us about what is happening out there in your sonography space:

- Feedback
- Questions
- Suggestions
- Achievements
- Volunteering
- Workplace awards
- Milestones
- Initiatives



Email communications@sonographers.org | Let's get the conversation started now!

Catrina Panuccio, Graduate Diploma of Medical Sonography graduate and Managing Director at Specialist Imaging Partners.



STUDY POSTGRADUATE MEDICAL SONOGRAPHY.

Apply now to study in 2018.

You will learn online part-time, from our award-winning teachers, and undertake optional workshops in our state-of-the-art facilities on campus.

Our fully-accredited qualifications are informed by industry, and designed for medical radiation and other allied health professionals. You'll receive flexibility and dedicated support every step of the way.

Join Australia's University of Enterprise.
unisa.edu.au/postgrad/sonography



University of South Australia

On Campus. Online.

8098780_CRICOS PROVIDER NO 001218

New international partnership for cardiac ultrasound

The ASA is proud to announce that the American Society of Echocardiography (ASE) has formally accepted the ASA as an International Alliance Partner. This is an exciting opportunity to collaborate with the ASE and other international industry organisations. Together we will share knowledge, expand thought leadership, and enhance standards and practices in cardiovascular ultrasound for the best patient outcomes.

The ASE is the world's largest professional community for echocardiography and includes both doctor and sonographer members. The ASA is the first sonographer-only organisation in the world to be recognised by the ASE in this way. You can find out more about the ASE's International Alliance Partners on its website at www.asecho.org/alliance

This alliance builds on the international relationships we maintain in support of other disciplines in sonography, such as our ongoing relationship with the International Society of Ultrasound in Obstetrics and Gynecology (ISUOG) in support of O&G sonographers and their patients. These partnerships enhance the ASA's provision of contemporary professional advice and support the educational activities available to members.

For further information on our other industry relationships, visit the 'ASA Activities' page under 'Advocacy' on our website and click on 'Representation'.

Sonographers in point of care ultrasound

In June the ASA released the *ASA response paper: Definition of Point of Care Ultrasound*. Point of care ultrasound (POCUS) is a rapidly growing area of medicine, with ultrasound being used

by an increasing number of health and medical professionals. Recognising this the diagnostic imaging industry, both here and overseas, is working to establish consistency in how POCUS is used and described.

The ASA's paper contributes to this important discussion by examining proposed terminology relating to POCUS. It also acknowledges the role of sonographers as the experts in the performance of comprehensive medical ultrasound, and the application of their expertise across the ultrasound continuum.

We encourage you to read this paper and reflect on what POCUS might mean for your practice into the future. You can read the *ASA response paper: Definition of Point of Care Ultrasound* and other ASA statements by visiting the 'Advocacy Activities' page under 'Advocacy' on our website, and clicking on 'Position Statements'.

Supporting sonography clinical supervisors in NZ

The ASA has begun collaboration with the New Zealand national Sonographer Workforce Development Programme (SWDP), with an initial focus on supporting quality clinical supervision for trainee sonographers.

The SWDP was established in 2015 by the 20 New Zealand District Health Boards (DHBs). Its focus is developing a sustainable and stable sonographer workforce which is able to meet New Zealand's present needs and future demand. Previous work by the SWDP identified the need to increase support for clinical supervisors in sonography.

As a first step, the ASA has provided the DHBs with copies of the ASA's guideline *A Sonographer's Guide to Clinical Supervision*. The ASA looks forward to

James Brooks-Dowsett ASA Policy and Advocacy

working with the SWDP and identifying further opportunities that build on their work to date.

A Sonographer's Guide to Clinical Supervision can be accessed from the 'Guidelines' page on our website under 'Resources'.

Preventing sonographer injury

In August the Society of Diagnostic Medical Sonography (SDMS) published an updated edition of its *Industry Standards for the Prevention of Work-Related Musculoskeletal Disorders in Sonography*.

The ASA has endorsed the contents of these industry standards, noting that they do not replace the need for sonographers to adhere to Australian and New Zealand national, state and workplace health and safety laws, regulations or requirements. We encourage all members to be familiar with these standards. They support good ergonomics and practices in the workplace that can help prevent or manage the progression of injuries associated with sonography.

To access the updated *Industry Standards for the Prevention of Work-Related Musculoskeletal Disorders in Sonography* and other ASA-endorsed professional information, visit the 'Guidelines' page under 'Resources' on our website.

Presenting the sonography perspective

The ASA has been busy in the last quarter responding to a number of consultations from governments and industry. This important work ensures that sonographers are appropriately recognised in cross-industry standards and considered in governments' decisions about changes to the health system.

Recently the ASA has responded to the following consultations from the Medicare Benefits Schedule Review Taskforce were relevant to sonographers:

- Diagnostic Imaging – knee imaging
- Diagnostic Imaging – pulmonary embolism and deep vein thrombosis.

Another key piece of work was responding to the Australian National Health and Medical Research Council (NHMRC) *Antenatal care guidelines review public consultation draft*. This submission was important to ensure that the use of ultrasound and the critical role of the sonographer in antenatal care are appropriately recognised in developing this industry standard.

In responding to such consultations, the ASA appreciates the knowledge and support provided by our Special

Interest Groups and the Sonographer Advancement Working Party. These groups contribute keen clinical and technical expertise that is essential to the ASA's responses.

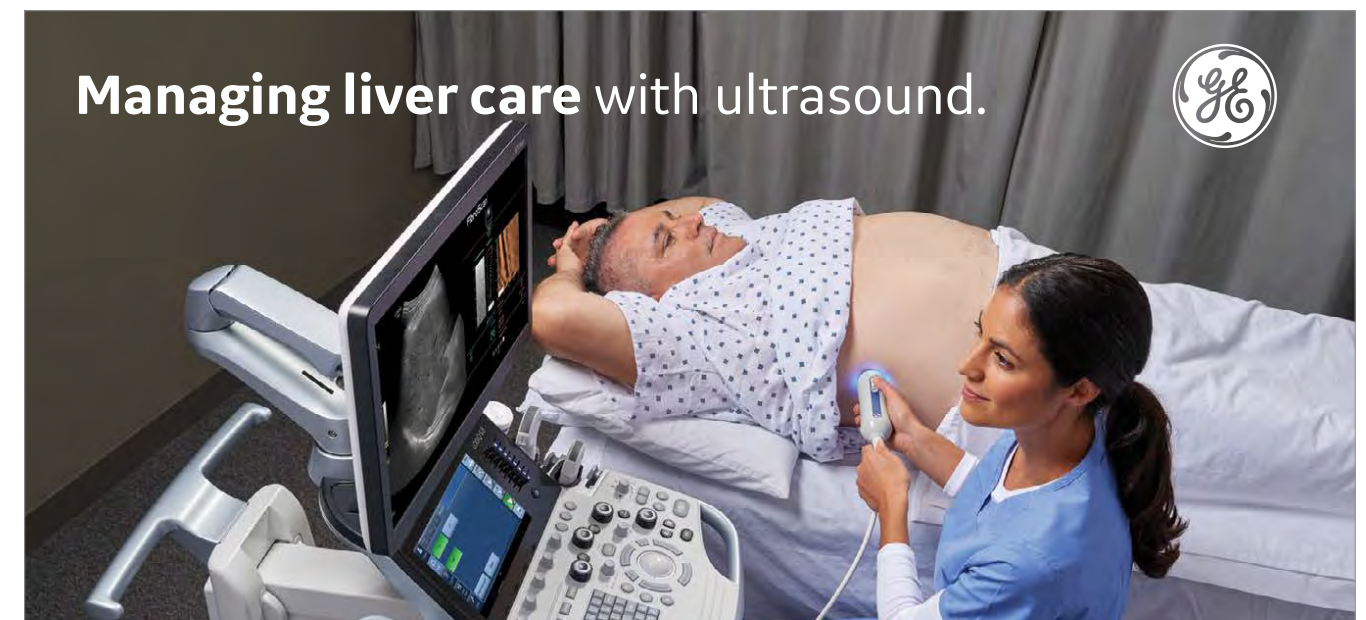
Occasionally with these consultations there is the opportunity for individuals to provide their own response from a clinical or professional perspective. Where this occurs, we will let you know through our weekly e-newsletter *cross section*, which is emailed to members every Wednesday. Make sure you read *cross section* so you don't miss out on these and other opportunities.

The ASA Employment and Salary Survey is back!

The results of the *ASA Employment and Salary Survey* are highly valued by our membership as they provide

an indication of average earnings and employment conditions for sonographers across Australia and New Zealand. This information provides a benchmark of what members can reasonably expect when negotiating their wages and other employment benefits.

The 2017 survey will build on previous years' reports, with the last survey undertaken in 2014. This year the survey will be held from mid to late October and will be announced in *cross section*. Make sure you keep an eye out for and participate in the 2017 *ASA Employment and Salary Survey*. The more members who respond to the survey, the more detailed and useful the information will be for you.



Managing liver care with ultrasound.

The LOGIQ S8 XDclear 2.0 with Fibroscan Technology from Echosens.

The LOGIQ S8 XDclear 2.0 system offers a range of capabilities that make it well suited to managing patients with liver disease, particularly obese patients who may be difficult to assess with conventional ultrasound systems.

To learn more, contact GE Healthcare's General Imaging Ultrasound Segement Leader, Simon Williams on +61 407 014 181 or at SimonWilliams@ge.com.

gehealthcare.com.au

© 2017 General Electric Company. GE Monogram is a trademark of General Electric Company. JB50598AU



Jody Ferguson, Sonographer, Queensland

Team Tanna May 2017

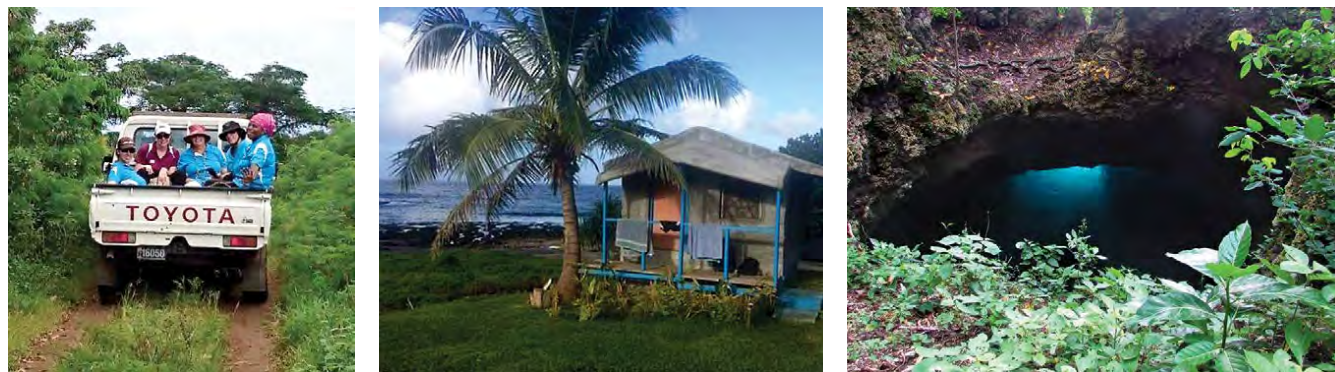
Adventure, personal fulfilment, benevolence or family history are reasons why four sonographers united with Bridging Health Inc. to deliver healthcare and supplies to Tanna Island in Vanuatu.

Tanna Island is one of the most southern and remote of the 83 islands that make up Vanuatu. It was ravaged by Cyclone Pam in 2015 and still struggles to recover.

Ricco Yasso, a descendent of the island from the era of 'blackbirding', established Bridging Health Inc. in 2012 after witnessing the untreated wounds of village children and uncovered a deep need for primary healthcare. Since then teams of medical professional and non-medical support volunteers have brought free healthcare clinics to the island communities several times a year.

Sonographer Naomi Clarke said, 'I returned from a holiday in Vanuatu where I saw so many people in need that I started looking for volunteer opportunities. I came across Bridging Health in my hometown, Rockhampton, and joined as part of the May 2017 team'. Work colleague and friend, Lauren Geddes, also signed up. Deb Fox and I (Jody Ferguson) became part of the team after seeing a thread that Naomi had posted on the ASA discussion forum. A final team of ten was formed.

Two ultrasound machines were generously donated and a huge thank you to Andrea Whitaker, owner/operator of Sound Imaging, Victoria and Trevor Heaft. Naomi was pivotal in the successful funding and acquisition of a shipping container to transport the ultrasound machine to Tanna with a generous donation from her employer, Central Queensland Radiology. The entire team contributed by raising funds and collecting



Clockwise from top left: Main form of transportation for medical volunteers on Vanuatu; The team's shared accommodation; Beautiful Blue Cave; Supplies shipment arrives; The Tanna May Team at Lenakel Hospital



Clockwise from top left: Head of Maternity, Betty; The paediatric ward; Our container arrives; The delivery room (middle top and bottom); Naomi with patients from Lavis Aid Post

donations of much needed medical supplies and everyday items. The container left port weeks before we departed from Brisbane airport.

Arriving in the capital, Port Vila, we met officials from the Ministry of Health that governs the healthcare of the country. Before a short flight to Tanna Island, we got the chance to tour the Vanuatu School of Nursing, learning about their course structure and facilities. A donation of textbooks from Australia was accepted with wide smiles of appreciation. The existing library has books up to 30 years old and many are in French. English is now more common since the country achieved independence in 1980.

At Tanna airport we were met by Chief Jeffrey, hospital administrators and locals who would host us for the duration of our stay, including local midwife Enneth. So began the custom of handshakes, warm hugs and the presentation of a hand woven bag and a lei to each of us.

Our method of travel while on the island was on the back of an open tray truck/utility along dirt roads or tracks. We were taken to our village destination, Bethel Community, perched on the edge of the west coast just south of Lenakel airport and home for the next 9 days.

After being assigned our huts and 'hut mates', we were ceremoniously welcomed by the chief and all the villagers. Bethel is known as 'the singing village' and we were treated to several performances by talented groups with naturally harmonising voices.

Our first night of sleep was brief as the rooster outside our hut raised the sunrise alarm. This gave us the chance to appreciate the incredible location. Our hut overlooked a beach of volcanic rock where a freshwater stream meets the ocean.

We toured the island's only hospital; Lenakel Hospital is a bland concrete building of just 30 patient beds servicing the Tafea

Province. This includes Tanna and surrounding islands, with a combined population of 40,000. There is just one doctor on staff.

There is no operating facility, the birthing suite is antiquated and only one humidicrib exists in the maternity ward. Tafea Province has the highest rate of maternal-related deaths in all of Vanuatu. 'Post-partum haemorrhage is the biggest problem', according to Betty, head of maternity.

The hospital has an ultrasound room with a small, dated, laptop-style single probe machine not capable of Doppler. The X-ray room has a mobile unit parked alongside an old disconnected X-ray table with a non-functioning under-table grid and bucky. A small chemical processor sits on the bench in the unventilated darkroom; a corroded old sink in the corner with boxes of film and book-style cassettes are propped against the wall. The air is thick with developer fumes and cleanliness is just not the norm.

We met Shamina, the radiographer, who although from Vanuatu, achieved a Diploma of Medical Imaging in Fiji. There is no radiography or ultrasound qualification available in Vanuatu. Shamina does the best she can and is motivated to better her limited ultrasound skills. She offers focused abdominal, pelvic and obstetric exams. I spent time with Shamina, watching her

scan on this tiny machine, guiding her technique and answering her many questions to the best of my ability. I am grateful for my radiography background in an era that matches the equipment here as I am able to solve some of the problems in the X-ray room. However, Agfa cassettes, new grids and an ID printer are put on the urgently needed list.

Our non-medical volunteers Luke, Juanita and Michelle set about cleaning, organising and helping in the kitchen and laundry and then worked on the triage desk of the outpatient department. The corridors are lined with patients and family waiting to be seen. Lauren and our nurse extraordinaire Robyn (Lauren's mum) worked with the nurse practitioner to diagnose, treat or refer on as many patients as possible. Recently qualified local doctor, Harvard, joined our team.

In the stifling heat of a small room across the hall, Deb and Naomi scanned patients and documented results. Abdominal pain, period problems, obstetric review, breast infections, trauma and abscess formation were common presentations.

Over several clinics our team assisted with more patients than usually possible. Patients came from long distances once they learned we were there to help. The X-ray and ultrasound rooms received a makeover resulting in a department that greatly pleased the director of the hospital.



The smoking summit of the island's volcano Mt Yasur



Top row from left: The X-ray room; the X-ray room revamped; Middle row from left; Jody working at Bethel Health Clinic; Deb scanning on GE portable machine at Lenakel Hospital; Bottom row: Shamina scanning in the new ultrasound suite; the team with the new ultrasound machine

The arrival of the Toshiba Xario ultrasound machine, along with our mozzie nets and all the donations, was delayed due to logistical problems and local company corruption. We were promised they would arrive in a few days but were lucky to have enough supplies for the next leg of our tour, a remote aid post some two hours north.

Lavis Aid Post is a tiny red and white concrete building in the rainforest-covered hills of the Lavis community, providing healthcare to 12 surrounding villages. The journey to Lavis proved to be challenging. Obtaining a vehicle capable of holding all of us and negotiating the steep, wet forest tracks was the

first delay. Then, just over halfway, the ute became bogged deep in slippery mud. Together we worked to escape and eventually arrived safely, although late, wet and uncomfortable.

The welcome we received made up for it all. So many people sat in groups under the shade of trees with children playing and with, it seemed, unowned dogs wandering amongst them. These patients had been waiting for hours but there was not a single complaint.

Each patient was interviewed and given a numbered form stating their presenting complaint. Other statistics were

recorded, including age if known (birthdates are not commonly known), heart rate, temperature and blood sugar levels, thanks to the donation of glucometers and test strips we acquired. Diabetes is becoming an increasing problem on the island.

Sometimes an interpreter was required. The local language, Bislama, is like Pidgin English. A bit of practice before this trip helped me to understand some words and usually I managed to convey simple instructions. For example, before an obstetric scan I explained that I would 'look basket blong pikinini' (quite logically, this means looking in the uterus containing the child). I must admit there were some very funny moments due to my attempts.

The aid post had just two small rooms: one with a low, timber, single bed serving as a patient examination bed. A single solar panel and inverter system powered the portable ultrasound machine that Deb had so generously been given by GE for this trip. What an incredible unit and, as it turned out, so vital for our cause.

Several patients were urgently referred to Vanuatu Central Hospital in Port Vila, including a young mother presenting at 14 weeks' gestation with an additional palpable abdominal

mass. On ultrasound this appeared as a 15 cm right iliac fossa complex septated mass with flow on colour Doppler separate to a normal appearing uterus and fetus. The cost to reach the hospital is a limiting factor for many.

Together, in one clinic day, we saw over 110 patients. Many children presented with tropical skin infections known locally as 'cauliflower' sores. Medications, although limited, are available through the hospital system but it takes visiting healthcare workers or a group like ours to dispense them appropriately at remote sites. Transportation to the hospital is difficult for remote villagers and many cannot access the care they need. Robyn and Enneth see to it that the community health worker at Lavis follows up on the treatment regime put in place for each patient during our clinic.

The ship with our container on board finally arrived and docked against the rocks just below Bethel community. Hundreds of people were there to meet the unloaded provisions. We set about unpacking, sorting and distributing all of the valuable contents. The ultrasound machine was safely delivered to the hospital. What an incredible moment to be part of. The gratitude of the people was priceless.

With the hard work done, there was some downtime to experience Tanna's famous tourist destinations. Standing on



Clockwise from top left: Patient receiving treatment at the clinic; Petrol station in a shipping container; Patients waiting for treatment at the clinic; Midwife Enneth sorting through the donations; The team at the Lavis aid post.



School supplies delivered!

the edge of Mount Yasur, a gently erupting volcano (well, that's how I would describe it), certainly was a rare and exhilarating experience. The incredibly turquoise blue water of Blue Cave is captivating although the journey to get there is not for the faint-hearted.

In summary, during our time on Tanna, the following was achieved:

- Over 300 patients were seen in Bridging Health clinics.
- Over 180 ultrasound examinations were performed and documented.
- The shipping container arrived full of donations from Australia, which were unpacked and sorted.
- A Toshiba Xario ultrasound machine was installed in the hospital.
- Three days of ultrasound training were provided to local staff.
- The hospital received patient trolleys, wheelchairs, first aid supplies, and much more.
- Two health and hygiene education workshops were conducted for young community members.
- Eleven communities received donated supplies.
- Two remote schools received complete solar systems to provide lighting.

- Four schools received education supplies.
- All patient data was provided to the Ministry of Health to be used to assess the needs of the people for allocation of hospital funding, equipment and supplies.

Shamina continues to provide a basic ultrasound service using her new machine that locals are calling 'the eyes of medicine'. She says, 'It is a breakthrough for the Province and will help clinicians to diagnose'. She will strive to correctly document fetal biometry, placental position and height and cervical length. The revamped department is equipped with ultrasound guidelines, protocols, worksheets, charts and textbooks. An internet facility has been granted for staff to access online resources and communicate freely with us. Shamina hopes to one day achieve an ultrasound qualification. For now, Bridging Health will continue its work and hopefully sonographers will always be a part of each team.

Lauren will never forget the night an over-friendly rat paid her a visit and I will be wary of light-grey coloured meat, but all in all it was an incredibly rewarding experience and for many of us, probably won't be the last time we visit Tanna Island. Thank you to all who supported us and the people of Tanna Island.

If you have ever thought of being a volunteer abroad, or would like to learn more, please visit the Facebook page Bridging Health Inc. or website <https://bridginghealth.org>



MUSCULOSKELETAL | PAEDIATRIC | VASCULAR

It is likely you will be reading this as the ASA's 13th Annual Special Interest Group Symposium (SIGS2017) gets underway at the Mercure Grosvenor Hotel in Adelaide.

SIGS2017 is a boutique event, with expert presenters providing a comprehensive approach on select ultrasound streams to small audiences. This caters to experienced sonographers

with specialist scanning interests and also those entering specific ultrasound streams. The symposium program was developed by a committee of specialist sonographers committed to providing a high quality program within their discipline.

The program includes lectures and live scanning workshops on musculoskeletal (MSK), paediatric and vascular

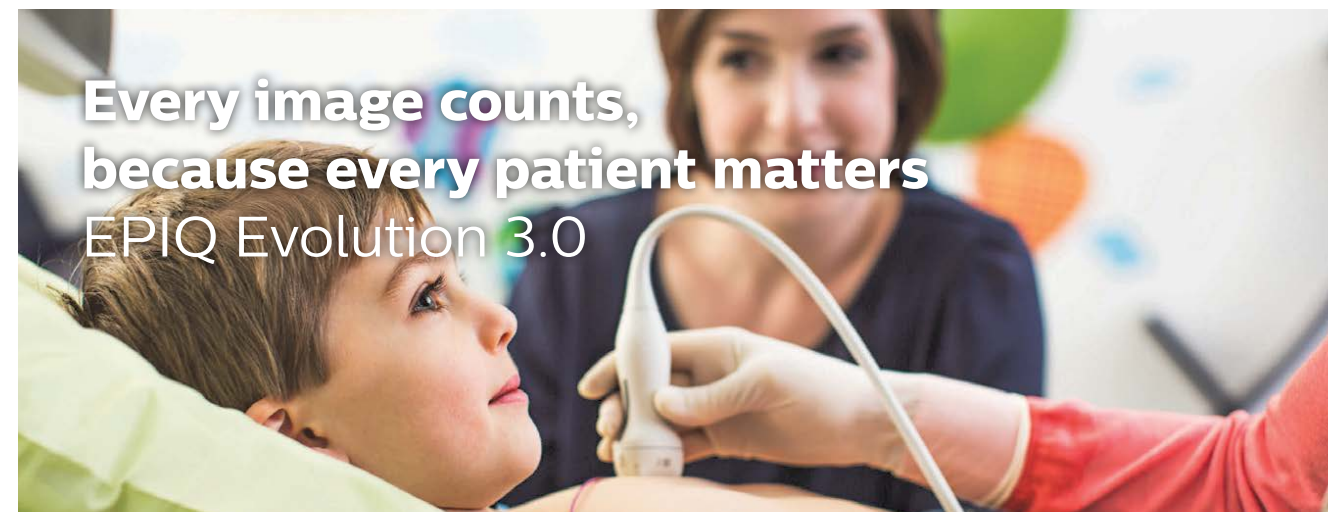
ultrasound and will showcase the latest technology and scientific advancements in sonography.

The ASA annual general meeting will be held at the close of presentations on Saturday. This is to be followed by an ASA Networking Reception.

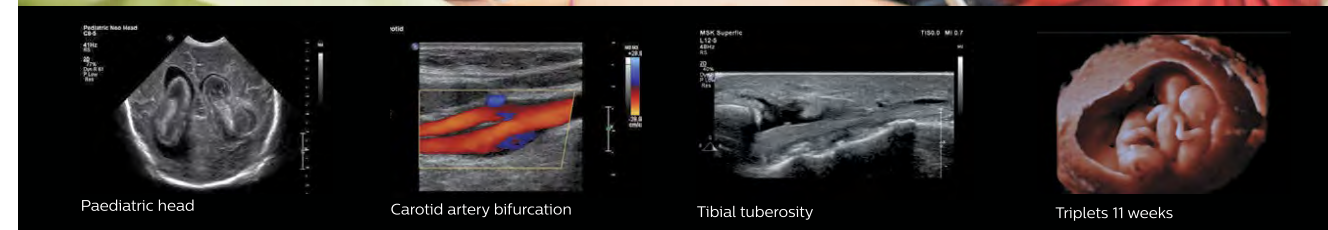
An event wrap up and highlights will be shared with you in the next issue of *soundeffects news*.

DAY ONE SATURDAY 16 SEPTEMBER 2017 LECTURES	WORKSHOPS		
MUSCULOSKELETAL	VASCULAR	VASCULAR	PAEDIATRIC
MRI ultrasound and elbow tendinopathies – <i>Dr Shaun Fowler</i> Shoulder surgery and surgical management of biceps insertion – <i>Dr Gavin Nimon</i> Shoulder and elbow rehabilitation – <i>Marc Elliot</i> Q&A discussion	Varicose veins – <i>Suzanne Marshall</i>	Arm veins & thoracic outlet – <i>Sue Welsh</i>	Gut sonography – <i>Roger Gent</i>
VASCULAR	VASCULAR	VASCULAR	PAEDIATRIC
Application for contemporary surgical practice – <i>Dr Peter Subramaniam</i> IV contrast ultrasound – <i>Richard Allan</i> Vascular research – <i>Sandhya Maranna</i> Q&A discussion	Varicose veins – <i>Suzanne Marshall</i>	Arm veins & thoracic outlet – <i>Sue Welsh</i>	Appendix – <i>Roger Gent</i>
MUSCULOSKELETAL	MUSCULOSKELETAL	MUSCULOSKELETAL	PAEDIATRIC
Hamstring injuries & tendinopathy – <i>Dr Geoff Verrall</i> Hamstring & tendinopathy rehabilitation – <i>Michael Nitschke</i> Q&A discussion	Shoulder – <i>Daniel Walkley</i>	Wrist – <i>Stephen Bird</i>	Pitfalls, errors & artefacts – <i>Roger Gent</i>
VASCULAR	MUSCULOSKELETAL	MUSCULOSKELETAL	PAEDIATRIC
Hamstring injuries & ultrasound diagnosis of stress fractures – <i>Dr Juliana Tsuruta</i> Hamstring injuries & tendinopathy – <i>Dr Geoff Verrall</i> Hamstring & tendinopathy rehabilitation – <i>Michael Nitschke</i> Q&A discussion	Shoulder – <i>Daniel Walkley</i>	Wrist – <i>Stephen Bird</i>	Appendix – <i>Roger Gent</i>
VASCULAR	VASCULAR	VASCULAR	PAEDIATRIC PLENARY
Haemodialysis fistulas – <i>Ian Schroen</i> False aneurysms – <i>Dr Rebecca Scroop</i> Varicose veins – <i>Dr Ewan McCauley</i> Q&A discussion	Arm arteries – <i>Julie Bakutis</i>	Renal arteries – <i>Benjamin Gobbie</i>	Head – <i>Lino Pliotto</i>
MUSCULOSKELETAL	VASCULAR	VASCULAR	PAEDIATRIC
Lower limb nerves – <i>Andrew Spurrier</i>	Arm arteries – <i>Julie Bakutis</i>	Renal arteries – <i>Benjamin Gobbie</i>	Renal – <i>Joanne Johnson</i>
MUSCULOSKELETAL	MUSCULOSKELETAL	MUSCULOSKELETAL	PAEDIATRIC
Upper limb nerves – <i>Daniel Walkley</i>	Hamstrings – <i>Sean McPeake</i>	Elbow – <i>Darren Curtis</i>	Hip pain – <i>Lino Pliotto</i>
VASCULAR	MUSCULOSKELETAL	MUSCULOSKELETAL	PAEDIATRIC
Carotid – <i>Andrew Spurrier</i>	Hamstrings – <i>Sean McPeake</i>	Elbow – <i>Darren Curtis</i>	Renal – <i>Joanne Johnson</i>
VASCULAR	MUSCULOSKELETAL	MUSCULOSKELETAL	PAEDIATRIC
Deep vein thrombosis – <i>Melissa Farnham</i>	Hamstrings – <i>Sean McPeake</i>	Elbow – <i>Darren Curtis</i>	Renal – <i>Joanne Johnson</i>

ASA ANNUAL GENERAL MEETING FOLLOWED BY ASA NETWORKING RECEPTION GLENROY ROOM		
DAY TWO SUNDAY 17 SEPTEMBER 2017 WORKSHOPS		
VASCULAR	MUSCULOSKELETAL	MUSCULOSKELETAL
Renal transplant – <i>Santosh Olakkengil and Julie Bakutis</i>	Groin – <i>Sean McPeake</i>	Fingers – <i>Andrew Spurrier</i>
VASCULAR	MUSCULOSKELETAL	MUSCULOSKELETAL
Varicose veins – <i>Kate Lamb</i>	Groin – <i>Sean McPeake</i>	Fingers – <i>Andrew Spurrier</i>
MUSCULOSKELETAL	VASCULAR	VASCULAR
Lower limb nerves – <i>Andrew Spurrier</i>	Abdominal aortic aneurysm – <i>Ian Schroen</i>	Leg arteries – <i>Sean McPeake</i>
MUSCULOSKELETAL	VASCULAR	VASCULAR
Upper limb nerves – <i>Daniel Walkley</i>	Abdominal aortic aneurysm – <i>Ian Schroen</i>	Leg arteries – <i>Sean McPeake</i>
VASCULAR	MUSCULOSKELETAL	MUSCULOSKELETAL
Carotid – <i>Andrew Spurrier</i>	Ankle – <i>Sue Farnam</i>	Forefoot – <i>Matthew Gourlay</i>
VASCULAR	MUSCULOSKELETAL	MUSCULOSKELETAL
Deep vein thrombosis – <i>Melissa Farnham</i>	Ankle – <i>Sue Farnam</i>	Forefoot – <i>Matthew Gourlay</i>



Every image counts,
because every patient matters
EPIQ Evolution 3.0



To learn more about Philips ultrasound solutions

Visit: www.philips.com.au/healthcare
Call us on: 1800 251 400 (Australia)
0800 251 400 (New Zealand)



Sonographer - Full-Time/Part-Time/ Casual, Brisbane QLD

Qscan are currently seeking qualified Sonographers to join our practices in the Brisbane region on a part-time, full-time, or casual basis. Qscan's Brisbane clinic locations include Redcliffe, Everton Park, Windsor, Mater Private Clinic, Annerley, Toowong, Victoria Point, Cleveland, Aspley and Carindale.

This is an excellent opportunity for skills growth, to manage a varied case mix including high end MSK.

Qscan Radiology's commitment to quality and exceptional patient care means we have ensured appropriate time for appointments, specialised bookings teams, dedicated clinical trainers, as well as subspecialty trained Radiologists and Sonographers.

Qscan offers rewarding careers, where career development and training is a priority. Our staff are supported in their career with opportunities for professional development and a safe and flexible working environment is provided to allow for work/life balance.



For more information or to apply, please visit:
qscan.com.au/careers/current-vacancies

Trusted Analysis | Excellence | Compassionate Care

Follow Us On

qscan.com.au



Glenda McLean
Editor, *Sonography*

Volume three (3) of *Sonography* (2016) has seen a continuing growing online readership with just under half of the full text article downloads from outside Australia and New Zealand (48%) (Fig 1). It's interesting to know that people all over the world are reading these articles. Up until the end of 2016, readers had free access to *Sonography*, but from January 2017 it is now a subscription journal. ASA members will continue to have online and print copy access as part of their ASA membership, and this is a significant member benefit. To access all articles, members will need to log on to the ASA website and click through to the Wiley Online Library *Sonography* journal.

The journal is also included in the Council of Australian University Librarians (CAUL) group of journals which Wiley sells to libraries and institutions. This means it will continue to be available to people who have access to a university. The Figure 2 graph shows the trend in downloads over the first three volumes and shows over 16,000 article downloads in 2016 alone.

Table 1 has details of the top ten most downloaded articles from the journal. One article stands out with significant readership; number 1 was the article on measurement of the liver by Childs et al., that had 2,381 downloads at the time of reporting earlier this year. This put it into the Wiley top 5 Radiology journal articles for 2016, and with considerable marketing of this by Wiley, this has increased further. A significant achievement!

Content alerts

Content alerts are available and some readers have opted to receive automatic alerts from the journal when new content

Table 1. *Sonography's* Top Ten downloaded articles from the Online Library

Rank	Author(s)	Article Title	Vol.	Issue	No. of times accessed
1	Childs J et al	Ultrasound in the assessment of hepatomegaly: A simple technique to determine an enlarged liver using reliable and valid measurements	3	2	2,381
2	O'Hara S et al.	The maternal cervix: Why, when and how?	2	4	1,253
3	Baird S et al.	Detection of the growth-restricted fetus: which centile charts?	3	3	765
4	Stoodley P, Richards D	Cardiac amyloidosis: the value of myocardial strain echocardiography in diagnosis and treatment	2	2	528
5	Reddan T et al.	Sonographic diagnosis of acute appendicitis in children: a 3-year retrospective	3	3	502
6	Innes S et al.	Ultrasound guided musculoskeletal interventions: professional opportunities, challenges and the future of injection therapy	2	4	482
7	Schultz T	Axillary artery aneurysm	1	2	469
8	Cartwright L	A sonographer's guide to the assessment of heart disease	1	1	428
9	Johnson J, Piotto L et al.	Ultrasound features of omental infarction in children	3	1	371
10	Allcorn T	Sonographer's guide to venous surgery and treatments	2	1	353

is available on Wiley Online Library. To activate this feature, members should click on the tag 'Get New Content Alerts' under 'Journal Tools' menu in the top left corner on the *Sonography* homepage. You will be sent an email when articles are published to Early View or an issue is published.

Sonography App

The *Sonography* IOS app from Apple has had an upgrade this year and is now accessing all articles and issues. This will provide easy reading when on the go. Members will initially need to log in using their ASA login to gain access to all articles. The Android version is in development and we hope it will not be too long before this is also available.

Submissions

Authors are encouraged to submit their work for publication in *Sonography*. Manuscripts on all aspects of sonography and medical ultrasound are encouraged and articles may take the form of original research, review articles, case reports and series, resource reviews, commentary, letters to the editor and education articles outlining new techniques and equipment. All manuscripts are to be submitted and processed online. To submit your manuscript to *Sonography* you will need to create an account on the ScholarOne website and follow the instructions to upload the article and images (www.mc.manuscriptcentral.com/sono).

To view the author guidelines for *Sonography*, visit the Wiley Online Library website. These guidelines will assist you to

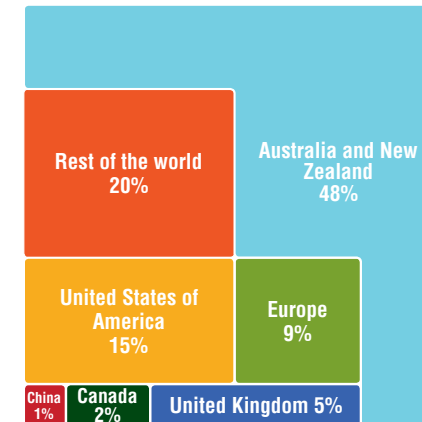


Fig 1. Online readership by location

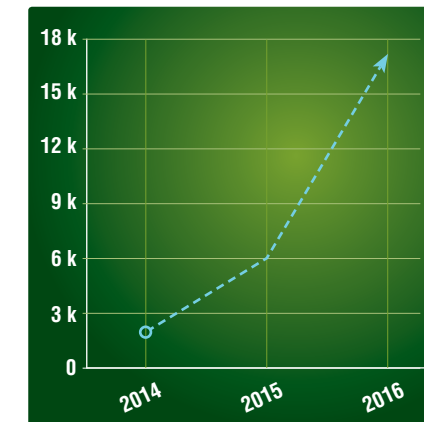


Fig 2. Article downloads trend over last 3 years

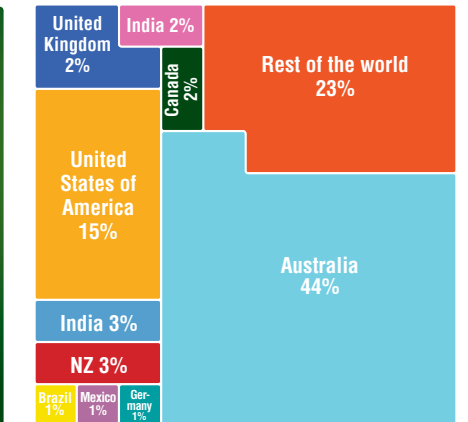


Fig 3. Article downloads by location

prepare your manuscript – <http://onlinelibrary.wiley.com/doi/10.1002/sono.v2.S1/issuetoc>

Services for authors and reviewers

Authors and reviewers should visit Wiley Author Services – a collection of tools and services designed to help authors in the publishing process. This includes help with English language editing if required. The Reviewer Resource Centre includes a webinar and guides on how to perform a peer review and advice on the peer review process.

Call for papers: Special Issue in 2018 on measurement

A special issue of the journal will be published in 2018 featuring articles on measurement. Sonographers' measurements are an important part of the ultrasound examination and these values are critical in the management of patients.

- Articles for this special issue could address (but should not be restricted to):

- original research articles to determine normal measurements in ultrasound
- reliability of measurements, including assessment of inter- and intra-observer error
- review articles on reference charts and selecting the appropriate chart for your ultrasound measurement
- case reports where measurement was a crucial component
- protocol and worksheet production where measurement is involved
- the impact of new technology on measurements (e.g. imaging software, artificial intelligence, automated border detection techniques, contrast).

Please consider starting a research project on measurement and submitting to *Sonography*. The deadline for this has not been set but all articles should be submitted in the first half of 2018. Further updates on this will be made available through the weekly *cross section* e-newsletter.



SONOGRAPHY APP AVAILABLE



Scan the QR code to download the *Sonography* iOS app

<http://bit.ly/SonoApp>

Australian Sonographer Accreditation Registry (ASAR) CPD Participants

The ASA CPD Program, PD-asa, supports the new ASAR CPD framework and requirements for accredited medical sonographers in the following ways:

- New allocations and caps for ASAR CPD points have been applied to PD-asa participants' records.
- Participants have access to the new ASAR CPD codes for logging non-ASA CPD activities.

The ASA will continue to log all completed ASA CPD activities to PD-asa participants' records under the new ASAR CPD framework. The ASA will also continue to work with participants selected for audit and provide evidence of completion of ASA CPD activities at audit.

Reflection is a key element of CPD; you are encouraged to reflect on all CPD activities. It is the ASA's understanding that reflection will become a mandatory ASAR requirement at a later date.

Please note that under ASAR Code 4, CPD points can now be claimed for student supervision, tutoring and lecturing. However, the CPD credit applies to the time spent preparing

and reflecting on the activity, not the delivery. Documentation is required outlining how you performed these tasks and any references are to be included. Participants are also to reflect on the outcomes and document what you would alter or add for future sessions.

New Zealand Medical Radiation Technologists Board (MRTB) CPD Participants

The ASA CPD Program, PD-asa, is a tool for New Zealand members registered with the MRTB to capture their participation in CPD activities. The PD-asa program supports the MRTB recertification requirements for sonographers as medical imaging technologists.

Participants' fixed trienniums have been set to 01/04/17 to 31/03/20, to align with the MRTB annual practising certificate renewal date of 31 March.

Participants are required to record 60 CPD hours per triennium with a minimum of 10 hours per annum. PD-asa can record both 'substantive' and 'general' CPD activities. Substantive CPD activities must be directly relevant to your scope(s) of practice with at least 35 hours of these activities per triennium. General CPD activities are those that relate to learning in the healthcare environment. Up to 25

hours of these activities are allowed over a triennium period.

Reflection documentation is a mandatory component of CPD for sonographers registered with the MRTB. It is expected that all CPD activities will incorporate a degree of reflection whereby you analyse experiences so as to learn from them, and record that learning. Reflection is to include:

- *A summary of learning* – What was learnt? How has the CPD activity contributed to your body of knowledge and skills?
- *Outcomes* – How have you applied this learning to your work and integrated the knowledge and findings into your practice?
- *Further learning* – What further learning could you undertake?

The ASA will continue to log all ASA CPD activities to New Zealand PD-asa participants' records. The MRTB will undertake annual audits to monitor practitioners' compliance with recertification requirements.

If you have any queries or require further advice about any of the above information, please contact the PD-asa Program Coordinator at cpd@sonographers.org

soundbite

Q: Are you up to date with recent CPD changes?

A: Visit the PD-asa page on the ASA website www.sonographers.org to stay up to date with changes and alerts. If you're not a PD-asa member, there's never been a better time to sign up to PD-asa and enjoy the benefit of a practical solution to planning and managing your CPD.



Over 1300 delegates attended our 24th Annual Conference, ASA2017 Brisbane, and enjoyed an exceptional educational program. The conference and social functions also provided plenty of opportunities to network with colleagues, meet new colleagues, and sample the latest equipment on display. Our conference is the largest Australasian educational event designed specifically for sonographers. The unique program caters for all streams of sonography and has topics that appeal to students as well as to experts.

This year our great invited speakers challenged us to challenge ourselves. During the opening plenary session we cried listening to the very talented Rachel Callander tell her own personal story of triumph over the inaccessible medical language surrounding her superhero baby, Evie. We gasped as Glenn Gardener showed us footage of heroic, in utero surgery to repair spina bifida. And we marvelled at the synergistic use of ultrasound during shoulder surgery. By the time we entered the exhibition hall for lunch on the first day, we had plenty to talk about. In fact the talk never stopped on that day until after the ASA Welcome Reception sponsored by GE Healthcare.

The ASA Annual Conference has a great mix of invited talks and practical scanning workshops. The workshops are an often-cited highlight for many of our delegates and this year was no exception. Watching superb sonographers in action is a unique educational experience and especially useful for sonographers who work in relative isolation. Another

highlight is the Awards of Excellence Breakfast. There we celebrate those members that give their time so generously to promote the profession we all love, and we honour a few very worthy members with the annual ASA Awards of Excellence. At the end of the conference, the closing plenary is an opportunity to honour those sonographers who have provided outstanding presentations during the conference proceedings, with ASA conference awards. Memorable conference presentations tend to stay with us long after an educational event, and significantly contribute to the knowledge base that delegates take home and include in their own practice.

Our conference presentation awards this year went to:

Best Overall Presentation: Peter Coombs

Best Clinical Presentation: Peter Coombs

Best Research Presentation: Jessie Childs

Best e-poster Presentation:
Christopher Gilmore

Best First-time Presentation:
Mehrnaz Masouminamaghi

Best Student Presentation: Helen de Bree

Best Contribution to Sonography Journal:
Jessie Childs, Adrian Esterman, Kerry Thoires and Richard Turner

Each year we are indebted to our sponsors, whose commitment to the medical sonography community is unwavering. Delegates enjoy mingling with sponsors and trying out their equipment. We would especially like to thank platinum sponsors GE Healthcare

and Philips, and other ultrasound companies for providing the equipment and application specialists for the scanning workshops.

Thanks also to the student volunteers. At the ASA we value sonography students and offer them free membership. This year we were supported by them! Student sonographers assisted us with workshops and crowd control. They also got to see some great talks and sessions, and meet a few gurus along the way. Of course a conference like this doesn't just happen. We acknowledge the organising committee for choosing great speakers and arranging a fabulous social events program that was capped off by a superb Gala Dinner sponsored by Philips Healthcare. This year's committee was co-chaired by Julie Cahill and Anna Galea and included Deborah Fox, Christopher Gilmore, Toni Halligan, Lynette Hassall, Natalie Kelly, Warren Lewis, Afroz Najafzadeh, Donna Napier, Nayana Parange, Rhyan Priestley, Tristan Reddan and Vanessa Roach.

Organising a conference like this is challenging but satisfying, and this year we were ably supported by a professional conference company. Nothing quite compares to that moment when the first delegates arrive; they bring a sense of anticipation about the event and a passion for their profession. Once the event kicks off, we can all relax a little and enjoy the brief time that we are all together. Yet before we left Brisbane, we were already planning for the ASA's 25th conference in Sydney in 2018.



“ Meals and poster presentations in the same area encouraged people to interact with exhibitors. ”

“ The great range of workshops and networking meant I left feeling that we do a great and very important job with many avenues of development and career progression available. ”

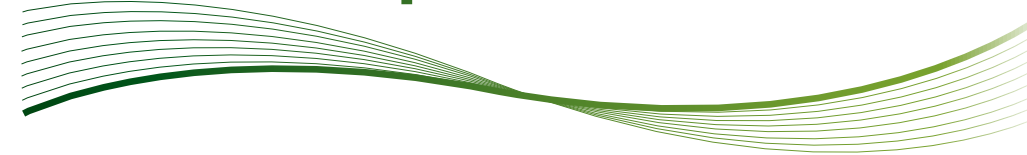
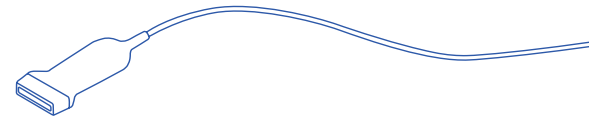
PHILIPS
innovation + you

“ Great inclusion of student sessions. The Gala Dinner and the lunch-time presentation by the Sea World vet were excellent. ”

“ The opening talk on the way we word our conversations with patients, from the NZ photographer Rachel Callender was excellent. ”

LIFE, LOVE AND AWESOMENESS
the impact and implications of language at diagnosis

TOSHIBA MEDICAL
Interactive introduction on
shoulders into the clinical
environment
Prof. George Murrell



Sponsorship

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



Platinum sponsor,
ASA Welcome Reception sponsor



Platinum sponsor,
Gala Dinner and Cardiac Symposium sponsor



Gold sponsor,
International Keynote Speaker, Coffee Cart, Proffered Paper Prize and Satchel sponsor



Gold sponsor



ePoster, Coffee cart and Proffered Paper Prize sponsor



Gold sponsor



Proffered Paper Prize sponsor



Gold sponsor



Proffered Paper Prize sponsor



Gold sponsor



Coffee cart sponsor

ASA2018 Sydney

We are designing a world-class program for next year's ASA Annual Conference at the International Convention Centre, Sydney (25-27 May 2018). This event is not to be missed - keep an eye out for updates!



A DIFFERENT POINT OF VIEW
asa
ASA2018
SYDNEY

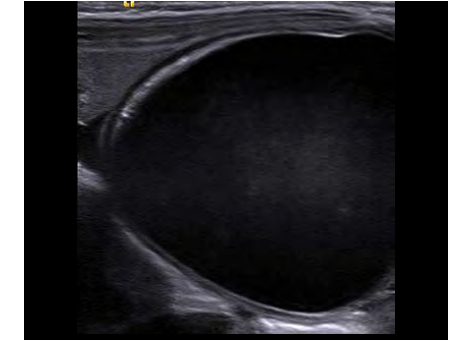
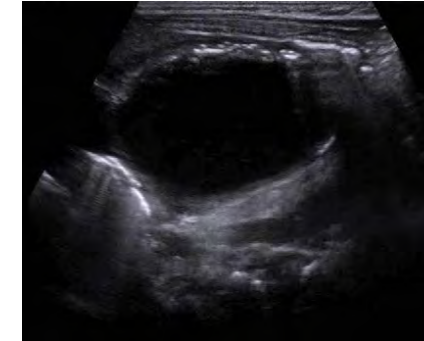


This issue's case

These images were taken on a 5-day-old baby. A right lower quadrant mass was palpable and the baby had milky

and bilious vomiting. The abdominal scan demonstrated normal liver, spleen, pancreas, biliary tree and kidneys. The bladder was seen to be empty. Case

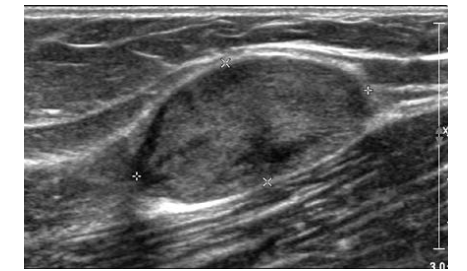
supplied by Cain Brockley. Email your answers to editor@sonographers.org.



Last issue's cases

The images from last issue demonstrated a solid mass on the upper arm. The patient had the genetic disorder neurofibromatosis type 1.

fat. The tapered superior and inferior margins and the known condition made it probable it was a neurofibroma which was confirmed on MRI.



The images show a well circumscribed, vascular, mildly heterogeneous solid lesion that is isoechoic to the subcutaneous

Case supplied by Glenda McLean. No correct answers for the June reader competition were received.

online reference collection

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

www.sonographers.org

asa award winners

Rural and Remote Sonographer Scholarships

The ASA supports sonographers who live and work in rural and remote areas by offering scholarships for up to three ASA members to attend our Annual Conference. The 2016 scholarships were awarded to Bernadette Dellar, Bonnie Hall and Michael Woolgar. Here's their account of ASA2017 Brisbane after attending the conference in June.

Bernadette Dellar

I'm very thankful to ASA for the opportunity to attend the conference through the Rural and Remote Scholarship. I made full use of the conference to gather as much information as I could. I found it very rewarding and I'm sure many other attendees had some take-home messages too.

I enjoyed lectures on obstetrics, liver scanning and research. Although I didn't get to attend the talks by Nicolette McCabe and Scott King (from Princess Alexandra Hospital), I managed to chat with them during the breaks about TIPS – trans jugular intrahepatic portosystemic shunt, and kidney/liver transplants respectively.

Working in Weipa a few years back, I scanned a lady to check on her liver transplant. For her to travel to Brisbane for this ultrasound would have meant a few days off work. Thanks to Queensland Health network's ability to transfer images between sites, she was able to have her scan at Weipa and have a Telehealth conference with her doctor instead of travelling for follow ups. Although many think that these specialised scans are only performed in city hospitals, sonographers in remote areas are often jacks of all trades!

I was happy to catch up with colleagues Camillus McLaughlin and Scott King at

the Gala Dinner. I relieved Camillus at Moranbah years ago so that he could go on holiday. Scott was my supervisor at Logan Hospital years ago when I was a student sonographer at QUT. At the conference I also managed to see sonographer friends from places where I have worked in WA and NSW.

Bonnie Hall

Every day's a school day in ultrasound. The ASA has again delivered an exceptional educational conference that catered for sonographers both new to the profession and those well established. The clinical presentations and workshops provided me with up-to-date information and skills to advance my clinical practice and improve the quality of our medical imaging service in the Torres Strait.

Presenters and exhibitors were enthusiastic, accessible and approachable. I am also impressed with the ASA's commitment in striving to improve the learning opportunities for sonographers at these conferences by sourcing appropriate modern technologies, for example: good quality e-Posters, interactive workshop apps, and especially the post-conference learning support. I have particularly appreciated the Dropbox PowerPoint presentations provided by the presenters, which has greatly assisted me in consolidating and cementing what I have learned. These materials have had a direct impact on my clinical practice and will certainly be a useful resource.

Michael Woolgar

I live in Devonport, in northwest Tasmania, around an hour's drive from Launceston. I was the fortunate recipient of an ASA Rural and Remote Scholarship for this year's 2017 ASA conference. The conference theme was 'Impact' and it certainly did deliver!

The opening plenary started with a special welcome to country by Songwoman Maroochy. This was followed by a moving presentation by Rachel Callander, describing her journey of parenting a child with a chromosomal abnormality. This was a wonderful insight into the patient experience after ultrasound and the importance, even at the earliest stage, of positive communication. There were not many dry eyes in the crowd as Rachel shared photographs from her *Super Power Baby Project*.

The next highlight was Dr Glenn Gardener's personal reflection of spina bifida surgery in utero. I was unaware that this procedure was being undertaken right here in Brisbane. I was fascinated to listen to the journey undertaken by Dr Gardener's team, from identifying the need to development of the service that provides these life-changing outcomes.

I really appreciated the well-presented refresher on the safety aspects of ultrasound imaging and this presentation made me think about my own practice.

The paediatric stream was of a very high quality with a number of insightful workshops and presentations. A particular highlight was Dr Mark Walsh's talk on the varying presentations of congenital vascular anomalies. Dr Walsh described the improvement in naming conventions as a result of the International Society for the Study of Vascular Anomalies (ISSVA) classification scheme. I was impressed by the images and ingenuity of Lino Piotto in his presentation of ultrasound of ingested foreign bodies. The cine loop of a button battery moving in and out of the pylorus was a highlight!

As anticipated, this year's ASA conference had a positive impact, both in a professional and personal sense. I thank the organising committee and the ASA for the generous scholarship that facilitated my attendance.

Student award winners

Daniel Bowles – CQUniversity

Winning an ASA student award was such an honour, but beyond that it allowed me to attend the ASA conference in Brisbane this year. The conference was the highlight of the academic year so far, with vibrant speakers, educational workshops and the opportunity to network in the exhibition area. The only down side to the conference was trying to narrow down which talk or workshop to attend, as the speakers presented such a varied and clinically-relevant array of topics! The award also gave me the confidence to submit an abstract for an e-poster and present an oral presentation of my student research at the conference. The highlight of the ASA conference for me were the workshops. Peter Coombs gave me the confidence to believe that I can actually find that appendix. Glenda McLean described the criteria for paediatric hip evaluation for developmental dysplasia of the hip (DDH) in a simple and understandable way. Professor George Murrell and Lisa Hackett provided a 'down and dirty' 45-second clinical shoulder ultrasound assessment to aid in the sonographic diagnosis of shoulder injuries. And Deborah Moir made pelvic floor assessment make sense. Thank you, ASA, for the opportunity to further my knowledge and skills and attend the ASA conference!

Kimberly Hui – UniSA

The ASA conference this year in Brisbane was the first one I have been to, and it was a great three days filled with relevant workshops, insightful discussions and memorable networking. The conference started with an eye-opening (and tear-jerking) presentation from Rachel Callander about her meeting and photographing families of children with disabilities. This set the tone for the conference, highlighting the importance of our role as sonographers and of professional development. I found a lot

of the lectures helpful in areas which I deal with daily, with topics on subfertility, breast implants, difficult third trimester obstetric scans, as well as updates on new criteria for polycystic ovarian syndrome and tips for assessing axillary lymphadenopathy. Musculoskeletal workshops also brought to light some areas which I could improve on, and a lower limb arterial vascular workshop equipped me with more skills and confidence at work, as these scans are rare in our practice. Lunch and tea breaks made for great opportunities to network. I met some lovely people from all over Australia, as well as overseas, and was able to catch up with some colleagues too. Overall it was an excellent weekend and I'm looking forward to next year's conference already!

Matthew Lambert – QUT

Having been the lucky recipient of the 2016 ASA student award, I was fortunate enough to attend the 2017 ASA conference as part of my prize. As a new graduate, this provided me with the opportunity to not only attend the fantastic presentations on offer, but also a forum to meet and interact with fellow sonographers, cardiac and general alike. Highlights included the interesting case studies performed at other hospitals (as well as my own) and how some of the newer/emerging techniques are being used in cardiac ultrasound labs across the country. Another highlight was Ruth Ramm's 'visual anatomy of the heart' workshop, which involved constructing 3D Play-Doh models of the heart before performing a range of echocardiographic cuts. Despite some funky looking hearts, this exercise was not only a fun way of connecting our everyday 2D echocardiographic slices with the 3D nature of the heart, but also brought back fond childhood memories of mooshing Play-Doh between the fingers. The smaller nature of the cardiac breakaway group allowed for some good discussion amongst sonographers on a range of

asa award winners

topics, as well as up-close viewing for the live scanning workshop. Finally it has to be said that the food and the conference dinner/dance is always something to look forward to, and they did not disappoint. Overall a very well organised conference that was a pleasure to attend.

Andrew Turbane – Charles Sturt University

This was my second time attending the annual ASA conference. Much like the first, it was an outstanding weekend of social events, contemporary technical demonstrations, and interactive learning. A large number of talks/workshops were offered over the three days, many of which I gathered useful information from and I definitely foresee a tangible benefit to my scanning in the future.

One workshop I thought was particularly fascinating was Dr Colin Chong's presentation on uncommon sources of pain in the foot and ankle. Dr Chong's extensive MSK knowledge was evident; he explained the various pathologies beyond the simple tendons and ligaments. His description of the lateral cord of the plantar fascia (LCPF) as a reason for lateral midfoot pain, over the head of the 5th metatarsal, I feel will be useful knowledge to have.

I was fortunate enough to attend the Awards of Excellence Breakfast on the Saturday morning. There I saw and heard about all the exemplary work, such as research projects, being done by a number of high-achieving sonographers. This was very inspiring for me. Rachel Callander's heart-warming story of her daughter, and the way in which the language we use as sonographers has such a significant impact was also something I will remember for a long time.

I would like to sincerely thank the ASA for my award and sending me along to what was, as expected, a fantastic conference. I look forward to attending many more in the future.



**Tony Forshaw,
2017 FDF Chairperson**

Along with other surveys, consultation and committee input, the Future Directions Forum (FDF) forms an important part of how the ASA Board prioritises strategies and resources each year. The Association's *Strategic Intent 2015-2020* document and strategic goals draw heavily on the outputs from these forums. The FDF panel this year saw a fantastic sample of the sonography community represented, covering most specialty areas.

The diversity of the membership is in many ways one of the profession's strengths, but it does pose a significant challenge to ensuring resources are allocated fairly across the membership. Issues that are major concerns for one group of sonographers may not involve another sub-specialty at all. It is important that the Board and management have access to these perspectives. The ability to

expand and delve further into these areas to really understand the issues is the real benefit of the FDF over merely surveying members.

This year's FDF saw a shift away from being a closed-room event and was scheduled at an unopposed time on the conference schedule to allow the general membership the chance to observe and interact. The panel was made up of invited representatives from a variety of specialty areas, including ASA Special Interest Groups (SIGs). Panellists included Tristan Reddan (Paediatric SIG) QLD, Jenny Parkes (Breast SIG) Vic, Jacqui Robinson (Vascular SIG) NSW, Ian Went (Rural and Remote representative on Allied Health Professions Australia) WA, Julie-Ann Craig (Cardiac SIG) ACT, Kerry Thoirs (Research SIG) SA, Carolynne Cormack (VIC Branch) Vic and Ann Quinton (O&G SIG) NSW. The panel was also joined by Gillian Whalley

(Acting CEO) and Jennifer Alphonse (ASA President). I was fortunate enough to be invited to chair the session.

The forum agenda focused largely on the delivery of education and CPD and, in keeping with the conference theme, whether current educational offerings were achieving maximal impact. In particular, the sustainability of ASA Travelling Workshops was discussed. The consensus was that the Travelling Workshops had a vital role to play in the delivery of education to the membership. The challenges of running the workshops were discussed, and the problem of access due to popularity was raised. In 2017 the ASA has addressed this particular problem by offering a morning and afternoon session for each Travelling Workshop location. It was clear from the panel that for this to be a sustainable model of educational delivery, it could not remain as a completely free offering to members indefinitely.

There was a trend of audience questions that took us away from education and strongly towards issues of registration and professional identity. These perennial topics are extremely important and I allowed the digression. It highlighted (and reminded me) how passionate the membership is about shaping our profession in this way. This will no doubt continue to be at the fore of all strategic plans.

The FDF aimed to tease out ways that the ASA as an association can improve the bang for its buck in the delivery of education and CPD. In these terms, it was a success. The scheduled time for the session maximised the opportunity for members to attend by being unopposed, but the morning after the conference Gala Dinner is a big ask of anyone. I certainly appreciated the enthusiasm mustered by the panel and attendees on such an early start to a Sunday. The session was recorded for the Board to replay the discussion and put the information to use at the next round of strategic planning. I really look forward to seeing the FDF continue as an open forum and hope to see increasing involvement in the discussion from members in future years. This is our profession, our association, and our opportunity to help shape both.

soundbite

Have you visited the *Member Discussion Forum* on the ASA website yet? This is a place for members to connect and share information and opportunities, or discuss topics of interest. Log in to www.sonographers.org to visit the discussion forum under 'our community' and join the conversation!



Invited panellists at the 2017 Future Directions Forum

SONOGRAPHY
THE JOURNAL OF THE AUSTRALASIAN SONOGRAPHERS ASSOCIATION

WILEY

Out now!
www.onlinelibrary.wiley.com/journal/sono



**Kristie Sweeney,
Sonographer Health and Wellbeing
Special Interest Group**

Workplace violence and aggression

Violence and aggression in the healthcare sector have been prevalent in the news recently. In Melbourne, a surgeon died after a violent incident outside a hospital where he was employed [1]. Nurses were held up with knives in hospitals in NSW and Victoria [2,3], and assaults against ambulance officers in Queensland are increasing [4]. Nurses in South Australia have reached the point where they are turning away intoxicated patients in an attempt to curb violence perpetrated by patients presenting to emergency departments [5].

Workplace violence is defined as any incident in which an individual is abused, threatened or assaulted in their place of occupation [6,7]. Examples include physical assault, such as biting, kicking, pushing, punching, throwing objects, aggravated assault, indecent physical contact and verbal threats [8]. Rude gestures can also be considered violent behaviour [9]. Verbal aggression is the most prevalent form of abuse [10], which includes bullying and harassment by co-workers or management. This article focuses on workplace violence perpetrated by a patient or visitor.

Violence and aggression in the healthcare workplace appears to be on the rise. Those employed in healthcare are 16 times more likely to experience workplace violence than other service workers [11]. First responders are at high risk for workplace violence [8] and, while emergency departments and nurses are common sites and targets, the threat exists across all occupation groups [10]. In general, workplace violence occurs

more in areas that directly deal with the public, providing care or advice, working with confused older people, working with people with mental health issues and people under stress. Clearly sonographers fit into these categories and are also at risk.

There appears to be growing awareness of the problem of workplace violence. Many public organisations, including NSW Health, have 'zero tolerance' policies [7]. The Victorian government has recently doubled the investment into the Health Service Violence Prevention Fund after the death of the Melbourne surgeon [12]. Workplace violence in the healthcare sector has been probably under-reported in the past due to a misconception that it is an inherent part of the job [8,10]. However, it clearly remains a major concern.

Possible consequences of workplace violence to sonographers

Articles published about workplace violence in the healthcare sector are easily found. However there are limited published articles involving or pertaining to sonographers in Australasia. A systematic review undertaken in 2014 [13] of workplace violence among healthcare workers could indicate some possible consequences to sonographers. The study reported that victims became afraid of patients in general. Some studies have reported a decrease in the quality of patient care after a violent incident. Post-traumatic stress and depression in staff are described, in addition to negative emotions such as anger, sadness, fear and disgust [13].

Risk factors

There are multiple risk factors identified for workplace violence:

- Patients under the influence of alcohol or drugs.
- Patients with psychiatric disorders.
- Patients with a prior history of violence [10].
- Staff working at night [14]. After-hours is a peak time for violence in the emergency department [10].
- Staff working alone or in an isolated or remote area [14].
- Staff handling drugs or valuables [14].
- Male patients are reported to demonstrate violent behaviours more often than females [10].
- Corroborating a common belief, violent incidents are twice as common during a full moon [15].

What can sonographers do to reduce the risk of workplace violence?

The risk of workplace violence varies by place of work and types of patients. The aforementioned risk factors appear to place sonographers employed at a hospital at higher risk. However the following suggestions for improving sonographer safety can be applied in any workplace to protect yourself and colleagues.

- Know your workplace policies and procedures that outline what to do in the event of a violent incident.

- Know the risk factors that contribute to workplace violence. Some workplaces have a system of flagging previous violent offenders, which may indicate where extra caution is needed.
- Ask for patients to be escorted if they exhibit risk factors for violence e.g. intoxication. Use workplace security staff if available.
- Know where and how to use any safety devices in your workplace. Some workplaces may have duress alarms.
- Use strategies to de-escalate aggressive encounters. Ask for workplace training in these techniques if necessary.
- Ask for another staff member to be in the room during the exam if you feel unsafe.
- If you feel unsafe at any point during an examination, leave the room immediately. Always leave a clear escape route; don't leave wheelchairs or other items between yourself and the door.
- If you work alone and isolated from other hospital staff, which often occurs when sonographers are called in, make sure patients are escorted to you and have someone close by until they are returned to the emergency department.
- If you leave your place of employment in the dark, ask for security to escort you to your car, or leave with a colleague. Workplaces should have safe means of entering and exiting.

- Report any safety and security issues to your management. Discuss possible strategies and solutions to these issues.
- Report any incidents to management, security or police as necessary.

Conclusion

Sonographers are at risk of workplace violence, which is becoming increasingly prevalent in the healthcare sector. There is a lack of published articles relating specifically to sonographers and workplace violence, but information for other healthcare workers can be easily found and applied. The suggestions for keeping sonographers safe at work have been recommended for other workplaces and from sonographers' own experiences.

References

1. Costin L. Vic surgeon's family devastated by death. *Herald Sun*. 2017 June 28.
2. Olding R. Hospital security crisis: Nurses 'held hostage with meat cleaver' at Wyong. *The Sydney Morning Herald*. 2017 April 10.
3. Bowden E. Nurse taken hostage by knife-wielding patient at Royal Melbourne Hospital. *The Age*. 2017 April 13.
4. Stigwood E. Assaults on ambulance officers continue to increase. *The Courier Mail*. 2016.
5. Kemp M. Nurses will turn away violent, drunk and drug-affected patients in unprecedented bid to curb attacks on hospital emergency staff. *The Advertiser*. 2016 March 31.

6. Australian Nursing and Midwifery Federation. Prevention of Occupational Violence and Aggression in Healthcare. *Australian Nursing and Midwifery Journal*. 2015; 22(10):34-5.
7. NSW Government. *Preventing and Managing Violence in the NSW Health Workplace – A Zero Tolerance Approach*. 2015.
8. Safework Australia. Workplace Violence [Available from: <https://www.safeworkaustralia.gov.au/workplace-violence#overview>]
9. Society of Radiographers. *Violence and aggression at work (including lone working)*. 2nd edn. 2008.
10. Nikathil S, Olaussen A, Goentas RA, Symons E, Mitra B. Review article: Workplace violence in the emergency department: A systematic review and meta analysis. *Emergency Medicine Australasia*. 2017; 29(3):265-75.
11. Elliot P. Violence in healthcare. What nurse managers need to know. *Nursing Management*. 1997; 28(12):38-41.
12. McArthur G. Security boost: Victorian hospital ERs to get secure safe rooms. *Herald Sun*. 2017 June 12.
13. Lanctôt N, Guay S. The aftermath of workplace violence among healthcare workers: A systematic literature review of the consequences. *Aggression and Violent Behavior*. 2014; 19(5):492-501.
14. Work Safe Victoria. Work-related violence [Available from: <http://www.worksafe.vic.gov.au/pages/safety-and-prevention/health-and-safety-topics/occupational-violence#riskfactors>]
15. Calver LA, Stokes BJ, Isbister GK. The dark side of the moon. *The Medical Journal of Australia*. 2009; 191(11-12):692.

asa fellowships



Recognising sonographers whose outstanding commitment has made a significant contribution to the sonography profession. For more information visit www.sonographers.org/membership/fellowship-program

Iлона Lavender

Short bio

I was born in Ukraine and migrated to Australia with my family when I was five years old, without a word of English. It was very challenging learning a new language and being in a different country. However, being young, I picked up the language better than anyone in the family. This led to me being the 'translator' for the entire family, including at medical appointments. I remember watching my grandfather get an ultrasound and being so infatuated that at that moment I decided that's what I wanted to do.

I was lucky enough to commence radiography at Monash University and even luckier to secure a sonographer training position at Monash Health in 2009 as a first-year radiographer. The two years of training were very difficult; however, it helped to go through it with my partner (now husband and fellow sonographer). A few years after being qualified, I began my career as part of the management group where I was the site supervisor at Moorabbin Hospital, Monash Health, before starting my dream job as a tutor sonographer in 2015 (also Monash Health).

Throughout my career I have been involved in running ultrasound labs at Monash University and marking exam papers. Currently I am a member of the paediatric Special Interest Group (SIG) committee for the ASA, as well as the Central Queensland University (CQUniversity) program reference committee. Due to my passion for teaching, educating and continual professional development, I have performed numerous audits and presented at multiple conferences, including a paediatric **asawebinar** last

year. I enjoy scanning all types of exams; however, I have a particular interest in obstetrics (especially neurosonography), paediatrics and thyroid intervention, and have published papers in these areas.

Being a sonographer is an amazing and rewarding career. I couldn't think of a job I'd rather be doing. Patient stories, amazing pathologies and technological advances make every day different and the weeks just fly by. Working in an incredible workplace with the best colleagues makes all these things even better. I look forward to many more years in this stimulating profession.

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

I have been fortunate enough to have an amazing job I love, so giving back to the profession is very rewarding. I have always enjoyed teaching and educating, and being part of the ASA allows me to bring my two passions together.

What does your current job involve?

My job contains so many different aspects: scanning patients, teaching trainee sonographers and radiology registrars, running tutorials and organising workshops. I'm really lucky that in one week, I can do everything from working with obstetricians in the fetal diagnostic unit to cranial ultrasound on tiny babies in the neonatal intensive care unit (NICU).

What aspect of sonography has been most rewarding?

Teaching and educating. I have loved being a part of the journey and achievements of trainee sonographers as



they become qualified. It's very rewarding. Being empathetic and doing the best I can for my patients is also very rewarding. I strongly believe we can make a big difference for our patients in everything we do, from how we deliver bad news of a fetal demise to the other extreme of putting a smile on parents' faces with a 3D image of their unborn baby.

Have you done other volunteer work?

Aside from being part of the ASA paediatric SIG and CQUniversity committee, I've done varied volunteer work over the years. I have been involved in various fundraisers and have also taught children to play tennis and dance.

What do you enjoy doing outside work?

I like to challenge myself and keep busy. Other than spending time with friends and family, I enjoy teaching Zumba and have been a registered instructor for about five years. My most recent challenge was walking 30 km for the Fred Hollows Foundation.

What is your greatest achievement?

My greatest professional achievement was receiving the 'Educator of the Year' award and the 'Pru Pratten Memorial Award' this year. It was a complete surprise but something I will always be grateful for.

Who do you have respect for and why?

My wonderful parents who left a country they called home, and moved to Australia with nothing, to give me a better life.

I can't even imagine how hard it would have been for them to leave everything behind with so much uncertainty.

Do you have a philosophy for life?

'Don't leave until tomorrow what you can do today.' This is something my grandmother said to me as a child and it stuck with me. This simple message helped me over the years to stop procrastinating and get things done despite not always wanting to. I get very stressed out leaving things to the last minute. If there's a job to do, I like to get it done as soon as possible.

Who are your favourite authors?

Paullina Simons and Jodi Picoult (Jodi's books are amazing and the endings are always a surprise).

What is the last meal you cooked?

Chicken and rice; however, I have to be honest, cooking is not my strength. It's something I hope to improve in the future.

What do you consider the perfect weekend?

A mixture between relaxing and doing: spending time with my wonderful

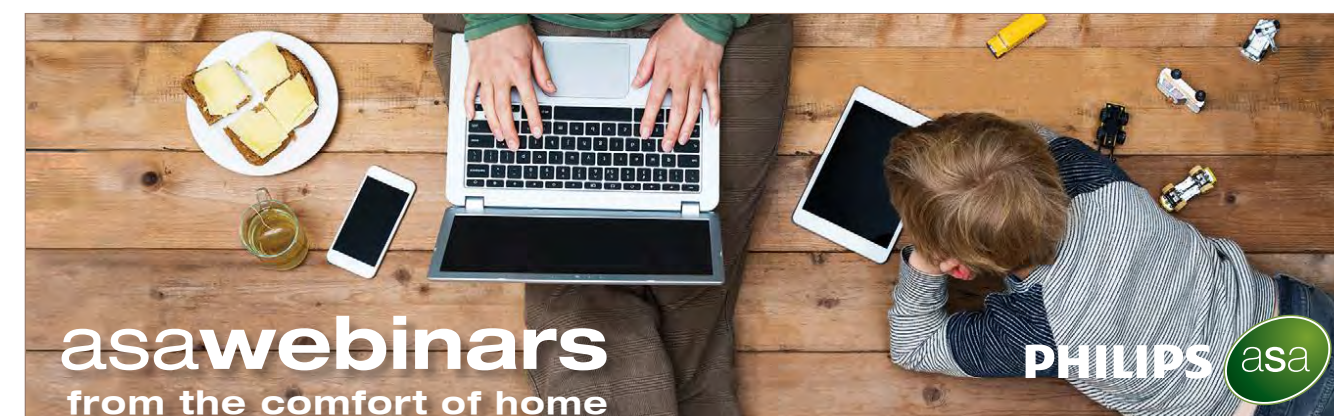
and supportive husband, exercising, going out for lunch and relaxing watching a movie.

Your favourite movie?

Dirty Dancing. You can't go past Patrick Swayze and the famous 'Nobody puts baby in the corner' line.

What talent do you wish you had?

I've always wanted to be able to sing. This is one thing I won't be doing in public!



asawebinars
from the comfort of home



Tuesday 5 September | 7.30–8.30 pm AEST

[Tips and traps in ultrasound of chronic liver disease](#)

Presented by Professor Robert Gibson



Wednesday 4 October | 7.30–8.30 pm AEDT

[Point of care ultrasound](#)

Presented by Carolynne Cormack and Anthony Wald



Wednesday 1 November | 7.30–8.30 pm AEDT

[Iliocaval venous stenting: Scanning protocol and migration](#)

Presented by Gail Size



Thursday 7 December | 7.30–8.30 pm AEDT

[The utility of echocardiography in systemic diseases – infiltrative and respective cardiomyopathies](#)

Presented by Dr Rebecca Perry

For all the latest **asawebinars** and other ASA CPD events, visit www.sonographers.org

Auckland-Waikato

In early May, our branch held an evening meeting at Starship Hospital, where a variety of stimulating material presented by our four speakers was enjoyed by 35 attendees.

Consultant radiologist Dr Kirsty Pearce spoke on *Antenatal and postnatal renal dilatation – protocol updates*. A new protocol has been devised by a consensus group, to be used nationwide across all disciplines, with the aim of detecting significant urinary tract dilatation and standardising the best pathway for further follow-up or investigation. New grading classifications and terminology for urinary tract dilatation and dilated sites are now to be used. We were guided through

the colour-coded flow charts for both the antenatal and postnatal period. One of the take-home messages was that 4/7/10 mm are the new abnormal numbers, with 4 mm for up to 28 weeks, 7 mm from 28 weeks until term, and 10 mm postnatal. Thank you to Kirsty for guiding us through what appeared to be a complex flow chart, and to the consensus group for all your excellent work to produce this to benefit our precious children.

We benefited from the fascinating paediatric cases presented by two sonographers, Vanessa Galloway and Philippa Maurer. Included in these was a central chest lump which increased in size (a venous malformation), and a large breast lump in a 14-year-old (a fibroadenoma). Also presented was



Photo courtesy of: www.orangutan.com/orangutans/orangutan-facts/

a small solitary asymptomatic pit on the cheek which presented as a firm nodule and ultrasonically appeared as a heterogeneous lesion with a hypoechoic rim. This was surgically removed and was a rare non-hereditary benign tumour of the hair follicle (a philomatrixoma), which commonly develops on the head and neck, and usually in under 20-year-olds.

Sonographer Judy Tee presented her dealings with *A most interesting patient list*, describing her incredible experiences scanning orangutans and teaching scanning techniques in Sumatra. Judy visited the Sumatran Orangutan Conservation Programme (SOCP), a modern quarantine facility in Batu-Mhelin near Medan in North Sumatra. The facility runs a rehabilitation program for confiscated illegal pets, and a reintroduction program to release these animals back into the wild. In excess of 250 orangutans have been brought to SOCP, with more than 220 reintroduced to the rainforest. Orangutans are among the most critically endangered great apes due to poaching and loss of habitat resulting from deforestation and palm oil plantations. Judy used her considerable skills in teaching ultrasound techniques to the staff who care for these apes. Other sonographers may also like to help. The link to this worthwhile organisation is: www.sumatranorangutan.org

Our committee wishes to express its gratitude to Toshiba for the catering and to Starship Hospital for providing the venue for this educational event. We are tremendously grateful for your support of our branch. We wish to recognise and thank our presenters for sharing their experiences, resulting in the extension of our knowledge. We anticipate providing further enriching branch meetings during 2017.

Julie Heaney
Auckland-Waikato Branch Committee

Australian Capital Territory

The ACT Branch has had a busy 2017 so far, welcoming many new faces to the ACT Branch Committee. Incoming chairperson is Teri Carmody, vice chair is Luke Robinson, secretary is Tegan Sullivan and treasurer is Les

Burgess. This new executive, as well as many new faces on the committee, have been meeting regularly to plan a full schedule of CPD events to see out the rest of the year for our local sonographer community.

The first education event of the year was held at the Peter Yorke Theatre in Deakin on Monday 27 February, with some excellent obstetrics cases presented by Dr Karen Mizia and Dr Farah Sethna. The topics for their presentation covered *Multiple pregnancy and the consequences of misdiagnosis* and *What's new in obstetrics: the role of first trimester screening and cell free DNA testing*. Non-invasive prenatal testing (NIPT) was discussed, including a comparison to combined risk assessment and the continued importance of scanning fetal structures at 12–14 weeks' gestation. Both topics were expertly presented, with the take-home message for multiple pregnancy being: when in doubt label twins as monochorionic so that the patient is followed-up more intensively. If nothing is later detected, no harm done.

The second education event was an open case study night held at The Canberra Hospital in June. This was a new initiative introduced by the ACT committee to give local sonographers a chance to present an interesting case or learning point in a more relaxed setting. The night began with an unusual case of lobular capillary haemangioma, presented by Nathan Jack. The next presentation was given by David Yang, in which he presented the findings of his Master's research on fatty liver. David will be taking his research findings to the World Federation for Ultrasound in Medicine and Biology (WFUMB) meeting in Taipei in October. We wish him all the best as he presents in front of an international audience! The final case study was



Dr Karen Mizia, Teri Carmody and Dr Farah Sethna, ACT obstetrics night



Presenters at the June case study night

titled *Cystic lesions of the pelvis* by Les Burgess, which demonstrated some rarely seen and thought-provoking lesions of the female pelvis.

The plan is to have several more of these interesting case sessions in the future, so all local sonographers are encouraged to present. Thanks to the staff at The Canberra Hospital Fetal Medicine Unit for hosting the first night. Sincere thanks also to all the presenters, sponsors and volunteers this year who have helped provide these fantastic learning opportunities.

Looking ahead there is a busy CPD calendar for the remainder of 2017. Continuing on the obstetrics theme in late July, Deb Paoletti will present *Imaging of the corpus callosum* and Dr Karen Mizia will return to present on intrauterine growth restriction. There is also a one-day paediatric seminar



planned for Saturday 5 August. The ACT Branch Committee is excited about what the next few months have to offer local members and look forward to seeing you all soon. Thank you to Lisa Hicks who is signing off after a decade as the ACT *soundeffects* news reporter.

Stephanie Chen
ACT Branch Committee

New South Wales

Our first meeting for 2017 was held at St Vincent's Public Hospital, with consultant radiologist Dr Grant Bigg-Wither presenting on nodule characteristics and classifications in thyroid ultrasound. This helped everyone have a greater understanding of nodule classification and use of the American Thyroid Association (ATA) 2015 *Nodule sonographic pattern risk of malignancy*. This was followed by a presentation by cytologist Deborah Thompson who provided valuable insight into sample collection and typical appearances of thyroid pathologies. She also described how to gain the best slides and send them for evaluation for those without on-site cytologists.

Our annual case study night was held in May, hosted by the Australian Institute

of Healthcare Education (AIHE) at St Leonards. CEO Luke Fay introduced the educational facility and explained its role within the ultrasound community. This was a great opportunity to gain some CPD points but also to have a go at presenting in a friendly environment, with the format being *5 slides in 5 minutes*. This was a fantastic venue with a large turnout. We had 11 cases presented by sonographers at all levels of experience, from student to tutor. There was a range of ultrasound topics including vascular, abdominal pathology, small parts, musculoskeletal, gynaecology and paediatrics. A huge thank you to all our presenters including: Christina Farr, Sarah Skillen, Solange Obeid, Patrick Nielsen, Mariana Josevska, Robyn Henderson, Keely Barakat, Fiona Sarode, Adam Westwood, Victoria Sissane and Bhavikkumar Patel. Special thanks to Lucy Taylor for organising the venue and catering. We look forward to having a case study night early in 2018.

We would like to thank all our speakers who generously give their time and expertise to present. Thank you also to our meeting sponsors who are extremely supportive of continued sonographer education. If you have a presentation you would like to give, know someone who is willing to present, or are interested in

joining the committee, we would love to hear from you at nsw@sonographers.org. The NSW Branch has organised some amazing events for the second half of 2017, including breast and fetal topics. We look forward to seeing you at our upcoming events.

Sarah Skillen
NSW Branch Committee

Northern Territory

The start of 2017 kicked off with a committee meeting to discuss the preparations for the NT Branch year. In March, we enjoyed a group viewing of ASA webinars *Fetal genitourinary anomalies* by Jennie Durant and *Breast lesion characterisation – how do I know if it needs a biopsy?* by Frauke Lever and Jenny Parkes. Although there is the option of viewing the webinars at home, the Darwin sonographer community still enjoys catching up and learning as a group.

In May, Carol Brotherton, Senior Sonographer, Royal Darwin Hospital, kindly presented an *Interesting cases night* which showcased an array of ultrasound pathologies and techniques set to test the knowledge of all and initiate discussion within the group. The same night we openly discussed thoughts and ideas of how sonographers can attain CPD points locally as individuals and as a group. This consensus has helped the committee prepare activities for the second half of the year, targeting topics of particular interest.

In July, we were honoured to have guest speaker Dr Jane Davies present *The Hep B story in the NT*, based on her hepatitis B research in clinical and molecular epidemiology, as well as a health education tool for Indigenous

communities of the NT. Dr Davies is a Senior Clinical Fellow in Infectious Diseases at the Royal Darwin Hospital, and an NHMRC and Sidney Myer PhD scholar. Gaining insight into the local research programs in the NT provides context for our contribution to the process. It also helps form strong bonds between the medical imaging departments and the doctors who are at the frontline of the research and management of conditions and diseases diagnosed. We would like to thank Dr Davies for her time and wish her well in her ongoing research and contributions to the NT and Australian research!

Lastly a big thank you to all the organisers and guest speakers who have contributed to our meetings. We appreciate your time and efforts. Thank you to the ASA for all your help in preparation and for the funding provided for our meetings. The NT Committee is looking forward to the second part of 2017 and wishes its branch members a happy dry season!

Sheree Armstrong and Barbara Vanini
NT Branch Committee

Queensland

Our first branch event this year was on 21 February at the Wesley Hospital. Our speaker was Dr Michelle Reintals, Director of Breast Imaging for I-MED Radiology who also sponsored the event. Dr Reintals is the current chair of the Breast Imaging Reference Group for RANZCR, an executive committee member of the Australasian Society for Breast Disease, and has undertaken sabbaticals at a number of international institutions.

Dr Reintals spoke to delegates about *Ultrasound of the axilla* and discussed features of lymph node appearance and pathology in detail. She also shared a

number of interesting cases in breast imaging which helped to illustrate the importance of ultrasound imaging in the clinical context. Feedback from the evening was very positive. As one member said, 'I left thinking that even after twenty years of scanning, I can walk away from a meeting like this having learned something new and interesting.'

On 28 March, the Queensland Branch held a case study evening at The Prince Charles Hospital (TPCH) Education Centre. Siemens generously sponsored the event. Forty delegates enjoyed catching up over pizza before settling in for the wide variety of cases presented.

Tristan Reddan spoke about an unusual paediatric case involving 'more than a bump on the head', with a final diagnosis of Pott's puffy tumour. Kate Wardrope also presented a paediatric case, this one describing a hepatoblastoma, covering the initial discovery at TPCH and subsequent imaging at Lady Cilento Children's Hospital. Anne Marie Timms spoke next, giving a comprehensive overview of intussusception lead points with multiple examples. Heather Allen followed, presenting two cases involving cystic lesions of the cervix. Beryl Oldham highlighted the importance of thinking outside the box, using a 'temporal tap' technique in her assessment of the radial arch prior to vascular intervention. Glenn Naggs discussed multimodality assessment of focal nodular hyperplasia, with an emphasis on the role of contrast-enhanced ultrasound.

Maylene Mendoza presented a very interesting and rare case of conjoined twins and described the different types of conjoined twins that can occur. Sabine Cappiello spoke next, giving everyone something to think about in her case examples of well-hidden breast lesions, including a known



Rob Federer (Qld Branch member) thanking Dr Reintals (presenter) at the breast education meeting

lesion that was so subtle it took a lot of effort for even an experienced breast sonographer to locate. The last speaker of the night was Dr Colin Chong, an interventionist musculoskeletal (MSK) and sports imaging radiologist. Although several of Dr Chong's cine images had difficulty playing, his enthusiasm for MSK ultrasound shone through as he discussed scanning techniques, including tips and tricks, while describing the cases.

Thank you once again to all the presenters and attendees who make these evenings such a success. We look forward to seeing you again soon at our upcoming events.

Heather Allen
Queensland Branch Committee

South Australia

On 16 May, UniSA hosted an ASA branch meeting to demonstrate the simulation equipment and the new ultrasound simulation space available to sonographers in Adelaide. The evening was kindly and generously sponsored by Mediquip, the manufacturers of the six Vimedix simulators. Brooke Osborne gave a summary of her honours research on the transferability of skills learned on the simulators to real patients. Nayana Parange and Jessie Childs demonstrated the simulators. It was a wonderful eye-opening evening for supervisors



Presenters at the NSW Case Study night



Brooke Osbourne demonstrates the Vimedix obstetric simulator and students, who were amazed at the realism of the simulators and impressed with the refurbished room. The SA Branch has some great speakers lined up for the rest of the year. Keep your eyes peeled for upcoming dates.

Jessie Childs
SA Branch Committee

Victoria

The Victoria Branch has had a very busy year so far, starting off in February with an obstetrics-focused night sponsored by Philips. There was a great turnout for an update on the changes in recent years to obstetric scanning across all three trimesters of pregnancy. Two very experienced obstetric sonographers, Silvana Mandarano and Rowena Findlay, gave us the *Top ten changes to obstetric ultrasound* in the first trimester and second trimester respectively. Obstetrician Dr Alice Robinson updated us on changes to third trimester ultrasound.

Next up we ran a cardiac night sponsored by Siemens. We had a look at the heart throughout life, starting with an antenatal heart ultrasound presentation by Kate Guskich, who works at the fetal diagnostic unit at Monash Health. This was followed by Dr Suraj Varma, paediatric cardiologist, who gave us a fascinating insight into surgical interventions for congenital cardiac abnormalities. The night ended with a look at adult cardiac pathologies



From left to right: Greg Lammers, Peter Coombs, Louise Worley and Martine Chadwick by Anthony Wald, cardiac sonographer and point of care echocardiography educator at Monash Heart.

We followed this in May with an upper limb musculoskeletal workshop with four seasoned and highly experienced sonographers: Peter Coombs, Louise Worley, Greg Lammers and Martine Chadwick. Each demonstrated their expertise with live scanning of the shoulder (Peter Coombs), wrist (Louise Worley), hand and fingers (Greg Lammers) and elbow (Martine Chadwick).

We would like to thank Linda Bradfield for her contribution to the Victoria Branch committee. Linda stood down from the Victoria Branch committee earlier this year.

We would also like to thank our corporate sponsors: GE, Phillips, Siemens and Toshiba for their continued support. A big thank you also to all our high quality speakers for their hard work and dedication.

Stay tuned for the next Victoria Branch report for a summary of the July *Women's imaging* meeting and the Christmas case study evening.

Ramya Gunjur
Victoria Branch Committee

Wellington

Welcome again from truly windy Wellington where we recently enjoyed winds up to 170 km per hour, as winter took a stranglehold on New Zealand.

We have had a slow start to branch meetings this year, trying to match our meetings to the new CPD calendar set by our licensing board, the New Zealand Medical Radiation Technologists Board. This effectively started everyone at zero points from April.

With this in mind, we have had one meeting so far. In June, guest speaker Dr Mark Leadbitter took us through a very informative presentation on *Neck masses in children*, and to our delight, continued with an informal chat about groin hernias.

By the time this goes to print, we will have had our second meeting with Dr Rodney Wu, presenting *Imaging of the acute abdomen*. We will also be gearing up for an obstetric presentation in August.

Everyone is once again looking forward to the travelling workshop being held here in September. Hopefully by then the weather here will be much nicer!

Lynn McSweeney
Wellington Branch Committee

Western Australia

On June 27 at the Royal Perth Hospital, *Varicose veins and what the surgeon needs to know* was presented by Ryan Kelaart, an experienced independent contract sonographer, and Dr Luke Matar, a radiologist and phlebologist from The Vein Clinic Perth.

Mr Kelaart gave us an introduction into venous insufficiency/reflux. He described the anatomy, various aetiologies, scanning methods, techniques and important goals of performing a venous examination. Among other issues he emphasised the importance of segmental scanning in longitudinal planes of the



Dr Luke Matar (left), Garry Swann from Toshiba (centre) and Ryan Kelaart (right)

veins; the assessment of their relative venous junctions (sapheno-femoral/popliteal); and the identification of any accessory veins. He also spoke about postsurgical cases and underlined factors important to the surgeon, such as the level of reflux, location, depth, and,

importantly, the source of incompetence when performing a routine scan.

Dr Matar covered a range of topics, sharing with us his personal story; his treatment regime for varicose veins; his collaboration with consultant vascular surgeon Professor Mark Whiteley; descriptions of various skin conditions associated with varicose veins; and key factors of patient histories. He emphasised the need to identify the source of reflux, especially if there are multiple sources; the deepest and most proximal aspect of reflux; and the length rather than the size of the veins. He demonstrated excellent case studies of endovenous

laser and radiofrequency ablation with correlating ultrasound and clinical pictures. He also showed us other interesting techniques such as cyanoacrylate adhesive procedures. Notably, Dr Matar emphasised the importance of ultrasound follow-up for patients after ablation to detect heat-induced thrombosis and/or branch varicosities.

We thank Mr Kelaart and Dr Matar for their contribution. The event was kindly sponsored by Toshiba and we thank Garry Swann for his support.

Kiran Singh
Western Australia Branch Committee

AIHE Graduate Diploma of Diagnostic Medical Ultrasound (General Discipline) graduation

19 May 2017 dawned with torrential rain in Sydney. However, this was not enough to dampen the spirits of a hardy group of graduates of the Graduate Diploma in Diagnostic Medical Ultrasound course at the Australian Institute of Healthcare Education (AIHE).

The first cohort had their graduate diplomas conferred in a ceremony supported by a number of leading figures in the ultrasound community, as well as friends and family. Dr Greg Kesby, Chair of the Medical Council of NSW, spoke on the importance of ethical practice in sonography and Dr Caroline Hong gave a stirring speech on the opportunities in the career of the professional sonographer.

The graduates were very ably represented by Daniel Cai who spoke on the experience of the trainee sonographer undertaking two years of rigorous postgraduate studies; the highs and the challenges, of course, all being worth it at the point of graduation.

One of the highlights of the ceremony was the announcement of the Excellence Award for the top student, Rachel Bethe, who was honoured to have it presented by ASA President Dr Jennifer Alphonse.

All in all, the event was a huge success; suitable recognition for a dedicated and tenacious group of students.

Luke Fay, Lucy Taylor and Amanda Dietsch



From left to right: Luke Fay, Dr Jennifer Alphonse, Dr Greg Kesby, Dr Glenn McNally and Lucy Taylor



Graduates of the AIHE Graduate Diploma of Diagnostic Medical Ultrasound course of 2017

Board of Directors

President: Jennifer Alphonse
president@sonographers.org
Vice President: Steve Mackintosh
Directors: Erika Cavanagh, Sarah Colley, Michele Dowling, Jodie Long, Silvano Palladino, Tony Parmiter, Lars Schiphorst

Finance and Risk Committee

Chairperson – Lars Schiphorst
Secretariat – Carolyn Todhunter
Committee – Jennifer Alphonse, Sarah Colley, Steve Mackintosh, Silvano Palladino

Education Advisory Committee

Chairperson – Jennifer Alphonse
Committee – Richard Allwood, Samantha Brinsmead, Julie-Ann Craig, Ramya Gunjur, Toni Halligan, Allison Holley, Jane Keating, Sharmaine McKiernan, Bernadette Mason, Jacqui Robinson, Tracey Taylor, Kerry Thoires

Sonographer Advancement Working Party

Chairperson – Simon Stanton
Committee – Vicki Ashfield-Smith, Erika Cavanagh, Karen Farrar, Sandhya Maranna, Steve Mackintosh, Rod McGregor, Jenny Parkes, Tony Parmiter, Ian Shroen, Gillian Whalley

Branch Committees

Alice Springs

alice@sonographers.org
Co-chairs – Micaela Gumbley, Emily Vargo
Committee – Kirstie Geiger

Auckland–Waikato

auckland@sonographers.org
Chairperson – Scott Allen
Secretary – Kerrie Child
soundeffects – Julie Heaney
Committee – Rima Al-Odeh, Andrea Gibb, Marion Raffaelli, Yvonne Taylor

Australian Capital Territory

act@sonographers.org
Chairperson – Teri Carmody
Vice Chairperson – Luke Robinson

Secretary – Les Burgess
soundeffects – Stephanie Chen
Committee – Lucy Adams, Maisie Graham, Jenny Gorton, Lisa Hicks, Ellen Hulbert, Tegan Ingold, Angus McKenzie, Michael Sun, Natalie Smith, David Yang, Sabrina Zawartko

Darling Downs

toowoomba@sonographers.org
Chairperson – Kelly Champion
Committee – Kristine Lawless

Far North Queensland

fnq@sonographers.org
Chairperson – Kath Deed
Treasurer – Lee Williams
Committee – Sharlyn Ellis, Marnie Leighton, Lisa Wellby

Gippsland

gippsland@sonographers.org
Chairperson – Tania Waixel
soundeffects – Nerrida Robinson
Committee – Kasey Baker, Dayna Dwyer, Julie Rosato, Kathryn Spark, Megan Stewart

Gold Coast

goldcoast@sonographers.org
Chairperson – Anna-Maria Galea
Committee – Kristy Sanderson, Ebony Hunt

Goulburn Valley

gv@sonographers.org
Chairperson – Kristy Thomas
Treasurer – Anne Snell
soundeffects – Kathleen Steigenberger
Committee – Kirsten Arthur, Eileen Brettig, Gavin Curley, Sandy Hommes, Natalie Keane, Tuo Lin, Joanne McCready

Illawarra

illawarra@sonographers.org
Chairperson – Lauren Dwight
Vice Chairperson – Tony Chapman
Secretary – Saheeda Zotter
Committee – Simon Otis

Mackay

Chairperson – Ainslie Heinke
Committee – Amy Leigh, Sherida Williams, Claire Whitaker

MidCentral NZ

midcentralnz@sonographers.org
Chairperson – Rebecca Witteman
Secretary – Kerry Barker
Committee – Melissa Westwood, Deb Mackintosh, Amanda Radich

Moreton Bay

moretonbay@sonographers.org
Chairperson – Chris Edwards
Secretary – Gail Petersen

Newcastle

newcastle@sonographers.org
Co-chairs – Sonya Simpson, Jill Wilcock
Committee – Sue Drinic, Danny Pavan, Warren Lewis

New South Wales

nsw@sonographers.org
Chairperson – Christina Farr
Secretary – Sarah Skillen
Trade liaison – Mary McPhail
Treasurer – Solange Obeid
Committee – Kelly Basley, Sarah Colley, Sophie Humphries, Robyn Tantau, Lucy Taylor, Adam Westwood

North Queensland

townsville@sonographers.org
Chairperson – Rhianna Weekes
Vice Chairperson – Jodi Flowers
Secretary – Kylie Elmore
Treasurer – Kristen Colleton

Northern Territory

nt@sonographers.org
Co-chairs – Barbara Vanini, Sheree Armstrong
Committee – Sadie Atkins, Helena Lassemillante

Queensland

qld@sonographers.org
Chairperson – Louise Duffield
Secretary – Rachel Williams
Treasurer – Madonna Burnett
Trade liaison – Tina Hamlyn
soundeffects – Heather Allen
Committee – Robert Federer, Christopher Gilmore, Toni Halligan, Simone

Karandrews, Tristan Reddan, Rachel Veitch, Michelle Wilson

Riverina

riverina@sonographers.org
Chairperson – Simone Francis
Committee – Beth Cheung, Chantel Goonan

South Australia

sa@sonographers.org
Chairperson – Jessie Childs
Vice Chairperson – Sandhya Maranna
Secretaries – Jessie Childs, Rachel Ting
Treasurer – Tim Sawyer
Sponsor Coordinator – Alison Deslandes
Future Directions Forum – Julie Bakutis, Melissa Farnham
Committee – Lino Piatto

Tasmania

tas@sonographers.org
Committee – Emma Brodribb

Victoria

vic@sonographers.org
Chairperson – Carolynne Cormack
Secretary – Lynne Johnson
Trade liaison – Amanda Chan
soundeffects – Ramya Gunjur
Committee – Ray Hora, Lynne Johnson, Frauke Lever, Sharon Stafford

Wellington

wellington@sonographers.org
Chairperson – (Margaret) Lynn McSweeney
Committee – Sally Agar, Paula Carryer, Poonam Leavesley, Sarah Owen, Alison Notman, Karina Burns

Western Australia

wa@sonographers.org
Chairperson – Nicole Cammack
Acting Secretary – Gail Crawford
soundeffects – Kirstin McLennan
Trade liaison – Natalie Colley
Committee – Carla Elliott, Kelly Kinder, Krystie Regnault, Carly Styles

Special Interest Group Committees

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.

SIG Abdominal and chest

Jane Keating, Faye Temple, Marilyn Zelsco

SIG Breast

Alison Arnison, Jing Fang, Ramya Gunjur, Frauke Lever, Jenny Parkes

SIG Cardiac

Richard Allwood, Judith Baxter, Luke Cartwright, Julie-Ann Craig, Tony Forshaw, Diane Jackson, Alison White

SIG Musculoskeletal

Michelle Fenech, Deborah Fox, Sharmaine McKiernan, Craig Newson, Luke Robinson, Daniel Walkley

SIG Obstetric and Gynaecological

Jennifer Alphonse, Deanne Chester, Lynda Fletcher, Ling Lee, Ann Quinton, Nayana Parange, Tracey Taylor

SIG Paediatric

Cain Brockley, Madonna Burnett, Vanessa Galloway, Allison Holley, Leanne Lamborn, Ilona Lavender, Glenda McLean, Emma Rawlings

SIG Research

Anna Graves, Ling Lee, Afrooz Najafzadeh, Kerry Thoires, Caterina Watson, Gillian Whalley

SIG Vascular

Tony Lightfoot, Anne Pacey, Daniel Rae, Jacqui Robinson

SIG Sonographer Health and Wellbeing

Samantha Brinsmead, Peter Esselbach, Lynette Hassall, Bernadette Mason, Elizabeth Naseby, Kristie Sweeney, Robin Valentine

Other committees

SIGS2017 Adelaide Program Committee

Jessie Childs, Sue Farnan, Joanne Johnson, Sandhya Maranna, Tony Parmiter, Lino Piatto, Daniel Walkley

ASA Fellowship Panel

Bonita Anderson, Jessie Childs, Tony Forshaw, Jenny Parkes, Tony Parmiter, Tracey Taylor

To contact any of the ASA committees, please email admin@sonographers.org

Affiliate members

Society of Diagnostic Medical Sonography – SDMS

2745 N Dallas Pkwy Ste 350,
Plano TX 75093-4706 USA
T: +1 214 473 8057
F: +1 214 473 8563
W: www.sdms.org

Sonography Canada/Échographie Canada

PO Box 1220 Kemptville,
ON K0G 1J0 Canada
T: +1 888 273 6746
F: +1 888 743 2952
W: www.csdms.com

soundbite

Q: Have you visited the ASA website recently?

A: Login to www.sonographers.org and have a look at the ASA discussion forum or better still join a conversation. Visit the events calendar for dates and details of upcoming events and how to register. Access the ASA online reference collection EBSCO, which is a great source for self-directed learning as part of your continuing professional development.



Aon

Steve Talbot
T: +61 3 9211 3272
E: steve.talbot@aon.com
W: www.business-insurance.aon.com.au

Aussie Locums

Nichole Fitzgerald
T: +61 7 4031 9991
E: nichole@aussielocums.com.au
W: www.aussielocums.com.au

ChoiceOne

Brett van Grootel
T: +61 8 9215 3888
E: brett@choiceone.com.au
W: www.choiceone.com.au

Coastal Medical Imaging

Sean O'Connor
T: +61 7 5413 5000
E: info@coastalxray.com.au
W: www.coastalxray.com.au

CQUUniversity

Jane Wardle
T: +61 7 3023 4200
E: j.wardle@cqu.edu.au
W: www.cqu.edu.au

Forme Medical

Waseem Sedhom
T: +61 3 9708 2661
E: waseem@formemedical.com.au
W: www.formemedical.com.au

Fujifilm SonoSite Australasia

Gina Kent
T: +61 2 9466 2600
E: gina.kent@fujifilm.com
W: www.sonosite.com

GE Healthcare Australia

James Odgers
T: +61 3 8576 7400
E: james.odgers@ge.com
W: www.gehealthcare.com

Global Health Source

Joanna Calder
T: +61 8 9227 0822
E: ghs@globalhealth.com.au
W: www.globalhealth.com.au

Global Medical Solutions

Maryanne Muisai
T: +61 3 9334 5404
E: maryanne.muisai@globalmedical.com.au
W: www.globalmedicalsolutions.com

H1 Healthcare

Matthew Bradbury
T: +61 2 9078 8195
E: matthew.bradbury@h1healthcare.com.au
W: www.h1healthcare.com.au

Healthcare Imaging Services

Marianne Farag
T: +61 2 9432 9759
E: marianne.farag@healthcareimaging.com.au
W: www.healthcareimaging.com.au

Horizon Radiology

Ellen Wilburn
T: +64 0800 746 853
E: ellen.wilburn@horizonradiology.co.nz
W: www.horizonradiology.co.nz

I-MED Network

Laurinda Morgan
T: +61 2 8274 1000
E: laurinda.morgan@i-med.com.au
W: www.i-med.com.au

Integral Diagnostics

Greg Hughes
T: 03 9321 4900
E: info@integraldiagnostics.com.au
W: www.integraldiagnostics.com.au

Julie Warner Health

Caroline McAree
T: +61 2 9957 1166
E: caroline@jwhealth.com.au
W: www.jwhealth.com.au

Meditron

Paul Blewitt
T: +61 3 8833 1237
E: pbf@scanmedics.com
W: www.meditron.com.au

Philips Healthcare

Annette Phillips
T: +61 2 9947 0000
E: annette.phillips@philips.com
W: www.healthcare.philips.com

Qscan Radiology Clinics

Kate Challenor
T: +61 7 3357 0907
E: kate.challenor@qscan.com.au
W: www.qscan.com.au

Quantum Healthcare

Tricia Mares
T: 1800 228 118
E: sales@qhealthcare.com.au
W: www.qhealthcare.com.au

Queensland University of Technology

Anne-Marie Lacaze
T: +61 7 3138 0066
E: annemarie.lacaze@qut.edu.au
W: www.qut.edu.au

Siemens Healthineers

Peter Spryszynski
T: +61 7 3332 8414
E: peter.spryszynski@siemens-healthineers.com
W: www.healthcare.siemens.com.au

Sugarman Group International

Caroline Robinson
T: +61 2 9549 5700
E: caroline@sugarmangroup.com.au
W: www.sugarmangroup.com.au

The Bambach Saddle Seat

Elkie Johnston
T: +61 2 8966 4800
E: ejohnston@bambach.com.au
W: www.bambach.com.au

Tognetti Consulting

James Buck
T: +61 8 9322 3088
E: jamesb@tognetti.com.au
W: www.tognetti.com.au

Toshiba Medical

Queenie Northey
T: 1300 655 155
E: qnorthey@toshiba-tap.com
W: www.medical.toshiba.com.au

Tristel

Ash McMaster
T: 1300 680 898
E: mail-au@tristel.com
W: www.tristel.com

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

Our goals are to:

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

ASA Office

PO Box 356
Dingley Village Vic 3172
Australia

T +61 3 9552 0000
F +61 3 9558 1399
W www.sonographers.org

Membership and insurance enquiries should be directed to:

Membership Coordinator
Carly McDougall
members@sonographers.org



PHOTO BY PAUL BICA, FLICKR

A DIFFERENT POINT OF VIEW



ASA2018 SYDNEY

THE 25TH ANNUAL INTERNATIONAL CONFERENCE OF THE AUSTRALASIAN SONOGRAPHERS ASSOCIATION
International Convention Centre Sydney, 25–27 May 2018



PO Box 356
Dingley Village
Victoria 3172, Australia
T +61 3 9552 0000
F +61 3 9558 1399
W www.sonographers.org