



**Australasian Sonographers Association**

# **2024 Employment & Salary Industry Report**

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Prepared by Survey Matters

August 2024



This research was commissioned by ASA

The ASA is the professional organisation for Australasian sonographers who are the experts in ultrasound. With over 7,000 members and a membership of more than 75% of Australasia's sonographers, the ASA has a significant role in supporting and advising the profession on the highest standards to provide the best possible outcomes in ultrasound for patients.

The purpose of the Australasian Sonographers Association is to foster a sonography profession that delivers high quality ultrasound with a vision of creating a healthier world through sonographer expertise.

The Association works to advance the health of the public and to advance the education and safety for those performing ultrasound. Other key roles include advocating for the sonography profession, raising professional standards, addressing the shortage of sonographers for improved patient access and to increase recognition. They also focus on increasing sonographers' professional development opportunities and supporting evidence-based research which will help to deliver better health care outcomes for the public and better protect and maintain the health and safety of sonographers.

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# 01.

## Executive Summary

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# Introduction

Welcome to the **2024 Sonographer Employment and Salary Industry Report**, compiled by the Australasian Sonographers Association (ASA) in conjunction with research agency, Survey Matters.

As the peak sonographer professional body, ASA prides itself on providing relevant, insightful, and timely research and information to our corporate partners. This information is also utilised in our government and advocacy role to help ensure our members are heard and respected.

The 2024 Sonographer Employment and Salary Industry Report provides you with valuable insights and information on sonographers' employment conditions, entitlements and remuneration. While most questions are benchmarked against previous results for the past 5 years, some are benchmarked against previous results extending back more than 10 years to provide insights into the key trends occurring across the profession.

This is the only report of its kind for sonographers across Australia and New Zealand.

The 2024 report provides in-depth research and analysis that highlights areas of difference between Australia and New Zealand, public and private employment as well as general, cardiac, obstetrics and gynaecology, and other specialist sonographers.

As with previous reports, the 2024 Sonographer Employment and Salary Industry Report is designed to:

- Highlight key trends and insights that are of interest to both individual sonographers and employer organisations
- Provide useful benchmarks that ASA corporate partners can use in their workforce planning, recruitment and human resource strategies and decision making

We trust that this information helps to keep you up to date and informed about trends and current conditions with respect to sonographer remuneration, employment conditions and professional development support across the industry.

Finally, we would like to thank all those sonographers that completed the survey. Without sonographers dedicating the time to fill in the survey we would not have these relevant and insightful findings to share with you.

We hope you find this report valuable.

**Tony Coles**

CEO

Australasian Sonographers Association

# Methodology

The **2024 Sonographer Employment and Salary Survey** was designed by the ASA, in conjunction with Survey Matters, and largely aligns with that used in 2021.

The survey questionnaire included a range of questions related to sonographer demographics, employment, remuneration, employment benefits, workplace practices and satisfaction, with most questions remaining the same as prior survey waves, allowing comparison to prior years.

## Survey Distribution

The survey was made available online for ASA members and non-members in Australia and New Zealand from 2 July 2024 until 31 July 2024.

It was distributed via an email, inviting ASA members to complete an online survey. An anonymous, open survey was made available to non-ASA members via social media and other ASA communications channels during the survey fieldwork period. Weekly social media and email communications were also maintained throughout the survey period to encourage participation. In addition to the original invitation, direct reminder emails were also sent to respondents who had not completed the survey.

## Response Rate

From a distribution to 7,212 a total of 973 responses were received. Pleasingly, the number of respondents in 2024 was similar to previous surveys in 2021 and 2019. Of the responses, 945 (97%) were ASA members, with the balance of 28 (3%) being non-ASA members.

## Analysis

The survey responses were analysed in Q Research Software for in-depth analysis. Where possible, and questions have remained consistent, comparisons have been made to previous years to enable the identification of trends and changes over time. Results are also presented to show differences in sonographer employment and remuneration based on the sonographer's employment location (private or public employer) and area of practice.

The hourly rates of pay for sonographers were collected from respondents in both Australia and New Zealand, with 750 responses received from Australia and 86 from New Zealand. Respondents from each country reported their salary data in their local currency (AUD for Australia and NZD for New Zealand). For the purposes of this analysis, no currency conversion was applied, and the data was combined and analysed in the currency in which it was provided. The decision to retain the data in its local currency was made to minimise distortion of the findings.

It is important to note that pay rates in New Zealand tend to be lower than in Australia. If the New Zealand data were converted into Australian dollars, the overall averages would likely be slightly lower than those presented in this report.

Given the larger number of responses from Australian professionals, the data presented in this report is more representative of the rates paid in Australia. This is particularly the case for segmented analysis, such as rates by employer type and area of practice, where the smaller sample size from New Zealand meant there were insufficient responses to provide representative data for these segments.

Please note that for some questions, totals may not add up to 100% due to rounding and / or where a small number of "other" responses were provided.

The Sonographer Employment and Salary Industry Report was completed in August 2024.

# KEY FINDINGS

01

## **Increase in Average Hourly Rates for Sonographers**

The average hourly pay rate for sonographers increased by 9.6% from \$64.80 in 2021 to \$71.00 in 2024. This represents an annualised growth rate of 3.2%.

02

## **Private Practice Sonographers Earn More Than Public Hospital Peers**

Sonographers in private practice earned higher average hourly rates than those in public hospitals across all specialties, at \$69.10 and \$71.50, respectively. In particular, cardiac sonographers in private practice earned \$12.50 more per hour than their public hospital counterparts. Satisfaction with remuneration is significantly lower among sonographers working in public hospitals, at just 30%.

03

## **Shift Toward Part-Time Employment Continues**

Over half of sonographers (52%) reported working part-time in their main role in 2024, particularly in Australia (54% of sonographers are part-time, compared to 42% in New Zealand). This trend aligns with the ongoing shift from full-time to part-time roles observed in previous years, particularly in the public sector.

04

## **Higher Satisfaction with Workload in Private Practice**

Sonographers in private practice reported higher satisfaction with their workload (64%) and work scheduling (65%) than those in public hospitals, where satisfaction was lower (57% and 54%, respectively). This may be attributed to the higher proportion of time sonographers in private practice spend on core sonographic services (81%) compared to those in public hospitals (68%). Sonographers in private practice complete 15.2 scans per day on average, compared to 11.5 in the public sector.

05

## **Scan Times Show Stability but Vary by Specialty and Setting**

While average scan times remained stable between 2021 and 2024, significant variations exist depending on specialty and setting. For instance, cardiac sonographers in public hospitals had an average scan time of 49 minutes, whereas those in private practice were allocated only 39 minutes. General sonographers in private practice performed an average of 16.2 scans per day, with a scan time of 27 minutes, compared to 12.4 scans per day in public hospitals, with a 31-minute scan time.

06

#### **Decreased Satisfaction with Scan Times**

Overall satisfaction with the time allocated per scan decreased from 70% in 2021 to 66% in 2024. While down from 80% in 2021, sonographers in public hospitals (74%) tend to have higher satisfaction with the time they have been allocated per scan than those working in private practice (65%). General sonographers in public hospitals were the most satisfied, with 82% content with their scan times.

07

#### **Public Hospital Sonographers More Likely to Work Overtime and On Call**

In 2024, 57% of sonographers in public hospitals worked overtime, compared to 44% in private practice. Those in public hospitals worked an average of 3.2 overtime hours per week (compared to 2.9 hours by their private practice peers). Similarly, sonographers in public hospitals reported working on-call during weekends (61%) and weekdays (57%) at a higher rate than those in private practice (21% and 14% respectively).

08

#### **Increased Reliance on Multiple Employers Among Public Hospital Employees**

The number of sonographers in public hospitals holding multiple jobs increased from 27% in 2021 to 31% in 2024. This trend is less pronounced in private practice, (at 17%). The proportion of sonographers whose primary role is in a public hospital but who hold a secondary role in private practice increased significantly from 38% in 2021 to 54% in 2024. This shift may indicate that sonographers are seeking higher pay or more flexible work conditions offered in the private sector.

09

#### **Sharp Increase in Uptake of Financial Support to Access CPD**

While the proportion of employers offering financial support for CPD has remained largely unchanged from 2021, there has been significant increase in the proportion of sonographers accessing or using this support. Those who did not use the support indicated it was due to personal, time or financial constraints, indicating often the allowance does not cover all expenses leaving them to self-fund the remainder.

10

#### **High Levels of Stress and Morale Issues Continue Among Sonographers**

Feedback highlights ongoing stress and morale issues among sonographers, primarily driven by high workloads, time pressures, staffing issues and the expectation to perform multiple tasks within limited timeframes. Overall, 54% of respondents said that stress levels at their workplace had increased over the last year, while 50% said morale had fallen.





# 02.

Snapshot of the  
Profession

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## Demographics

Sonography is a female dominated profession, with over half of all sonographers working in New South Wales and Victoria.

### Gender

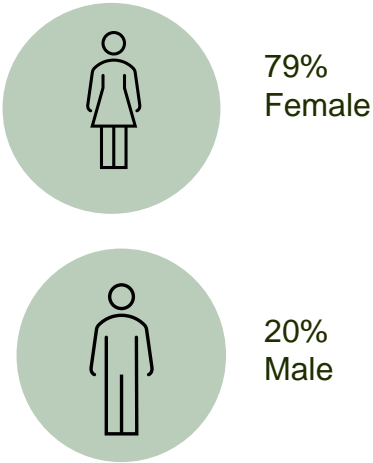
Nearly four in five responding sonographers are female (79%), with a further 20% male. No respondents reported as being either non-binary or gender diverse, with 2% preferring not to answer.

### Location

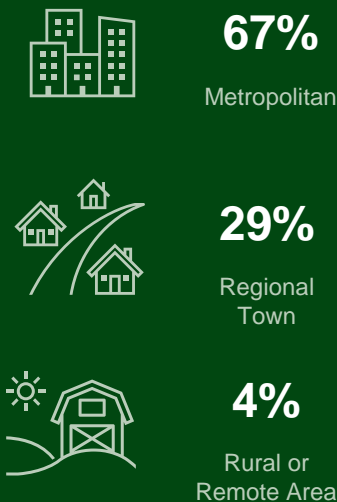
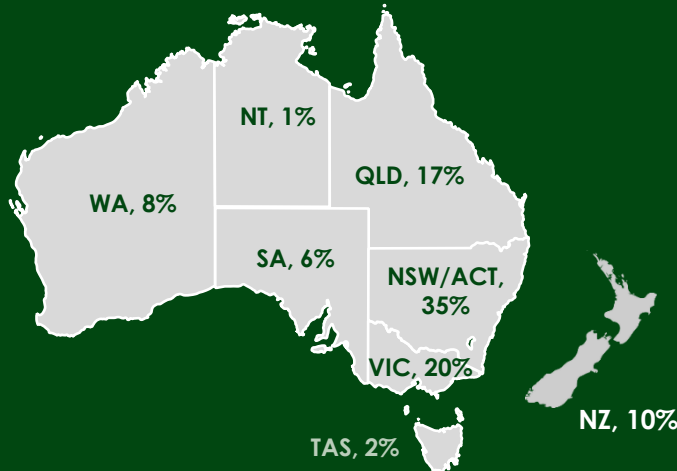
Sonographers work across Australia and New Zealand, with over half working in either Victoria or New South Wales.

Overall, 35% work in New South Wales or the ACT, 20% in Victoria, 17% in Queensland, 8% in Western Australia, 6% in South Australia and 3% work in either Northern Territory or Tasmania. One in ten respondents were from New Zealand.

A majority of sonographers work in major cities. Three quarters (67%) are based in a metropolitan area, while around one in three work in a regional towns (29%). Only 4% working in rural or remote communities.



### Location



Most sonographers hold either a postgraduate diploma or higher-level degree, with an average of 15.9 years experience across the profession.

Education and Experience

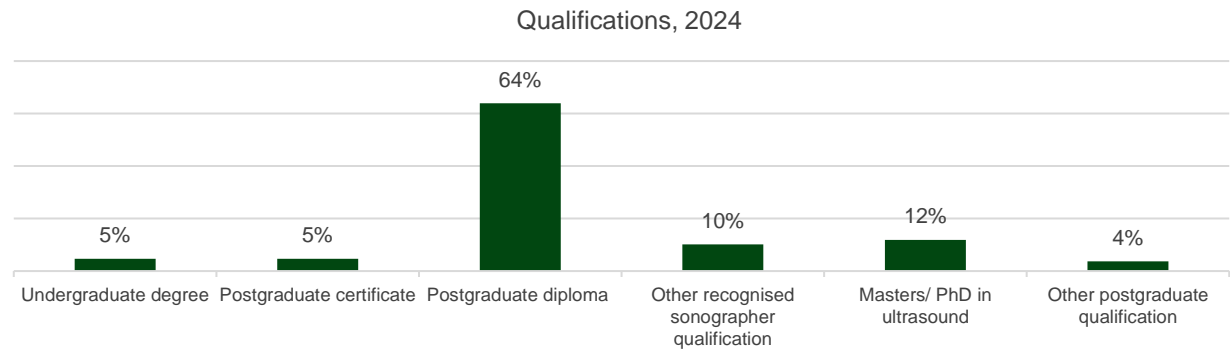
Nearly two thirds of sonographers indicated that their highest sonography qualification is a postgraduate diploma (64%) in ultrasound. A further 12% hold a Master’s in ultrasound by coursework or research, or a PhD or Doctoral degree in a sonography related topic. One in ten hold an undergraduate degree, postgraduate certificate, or other sonographer qualification.

As well as being highly educated, sonographers are very experienced. The average experience level across respondents was 15.9 years, with a third (33%) having over 20 years experience working as a sonographer. A further 27% have been working as a sonographer for between 10 and 20 years.

While there is little difference between sonographers working in the public and private sectors, across different practice areas sonographers have different levels of average experience. Respondents working in obstetrics and gynecology are the most experienced, with an average of 19.5 years working as a sonographer. General sonographers have an average of 15.6 years in the profession, while cardiac sonographers have, on average, been working as a sonographer for 13.6 years.

Experience	2024
Less than 3 years	11%
3-5 years	11%
6-10 years	19%
11-15 years	15%
16-20 years	12%
21-25 years	12%
Over 25 years	21%
Average	15.9 years

How long have you been working as a sonographer?  
n=973



Q. What is the highest qualification you have? n=973



56%

of sonographers have a background as a radiographer, while 15% come from another health science and 7% directly via undergraduate entry into the profession (e.g. CQU) \*

Q. What was your prior area of expertise? n=973  
\* Remainder includes: 6% other applied science, 5% nuclear medicine, 3% nursing, 2% radiation therapy, 5% other area.

## Employment Profile

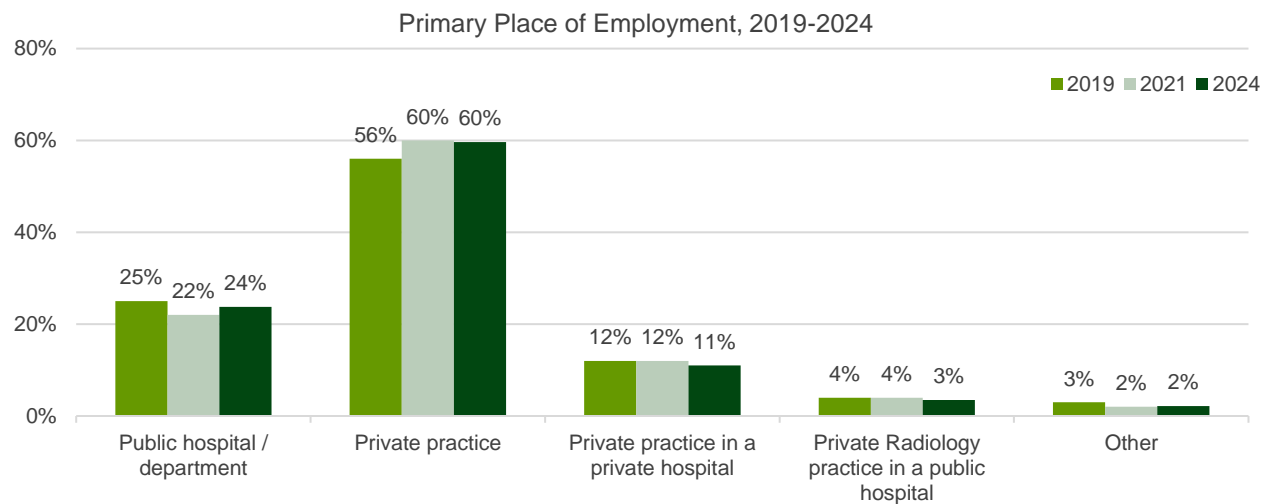
While most sonographers work in private practice, a quarter are employed in the public system.

### Primary Place of Employment

Sonographers continue to be more commonly employed in private practice, with three-quarters (74%) indicating they are working in private practice in 2024, consistent with 76% in 2021.

Within Australia, 59% of Australian sonographers work in private practice, independent of a hospital, and 23% in a public hospital. This increases to 64% and 28% respectively for sonographers based in New Zealand. By contrast, a higher proportion of Australian sonographers work in a private practice within a hospital setting (16%), than is the case in New Zealand (7%). These results are roughly consistent with those from 2021, with only a slight increase noted in the proportion of New Zealand sonographers working in a private practice independent of a hospital (up from 60%).

Cardiac sonographers (32%) are more likely to work in public hospitals than are obstetrics & gynaecology (29%), general (22%), and other specialist sonographers (17%).



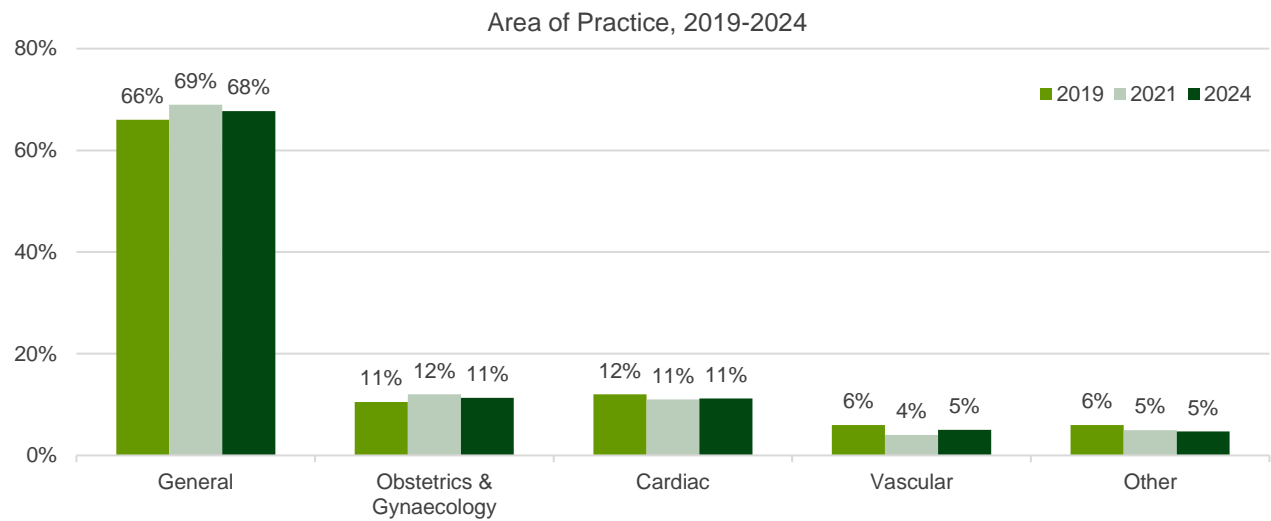
	Australia			New Zealand		
Primary Place of Employment	2019	2021	2024	2019	2021	2024
Sample	1,086	1,058	870	105	91	100
Public hospital / department	25%	22%	23%	24%	30%	28%
Private practice	55%	60%	59%	66%	60%	64%
Private practice in a private hospital	12%	12%	12%	8%	9%	6%
Private radiology practice in a public hospital	5%	4%	4%	1%	1%	1%
Other	3%	2%	2%	2%	0%	1%

Two thirds of sonographers work in general ultrasound, with one in ten specialising in obstetrics and gynaecology or cardiac sonography.

Main Practice Area

Around two in three sonographers provide general sonography services (68%), consistent with 69% in 2021. Obstetrics and gynaecology (11%) and cardiac (11%) sonography are the most common specialist areas, with around one in twenty (5%) specialising in vascular sonography.

A significantly higher proportion of New Zealand sonographers specialise in obstetrics & gynaecology (22%) than is the case in Australia (10%). Instead, Australians have a slightly higher proportion of cardiac (12%) and general (69%) sonographers than their New Zealand counterparts (5% and 59% respectively).



In which area of ultrasound do you MAINLY practice? (2024 n=973; 2021 n=1,153; 2019 n=1,197)



Main Area of Practice	Australia	New Zealand
Sample	870	100
General	69%	59%
Obstetrics & Gynaecology	10%	22%
Cardiac	12%	5%
Vascular	5%	4%
Breast	1%	0%
Pediatrics	1%	0%
Other	2%	9%

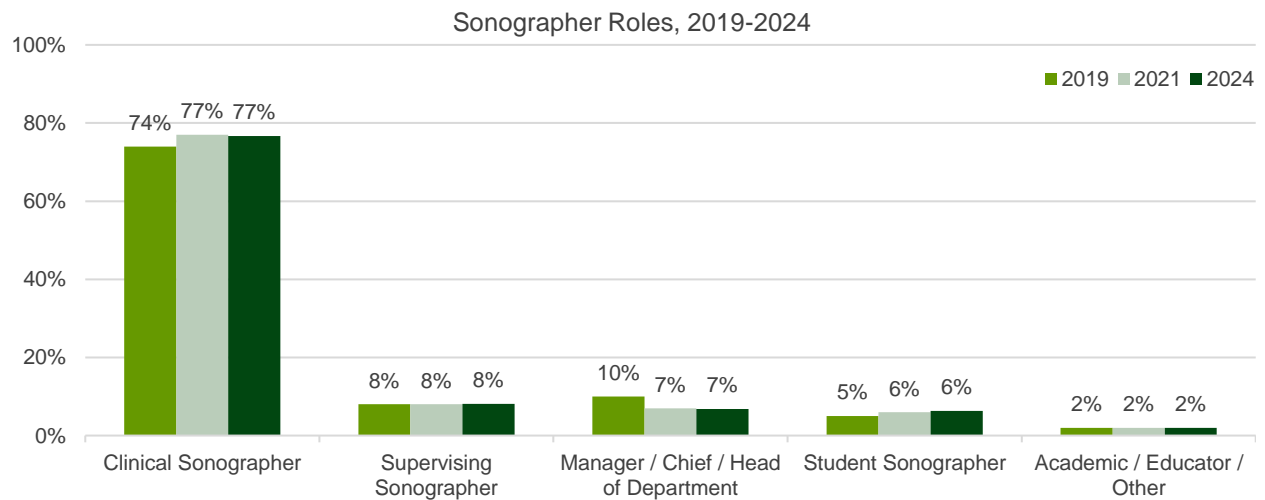
Results are significantly higher / lower than other groups at 95% confidence interval



A majority of respondents are working as clinical sonographers, with around one in seven in a management role.

Primary Role

Consistent with 2021, 77% of survey respondents are employed as a clinical sonographer in 2024. These proportions are 77% and 74% respectively for Australian and New Zealand sonographers. Among the remaining respondents, similar proportions are employed as a supervisor (8%), manager (7%) or student sonographer (6%).



Which of the following best describes your PRIMARY job role or position: (2024 n=973; 2021 n=1,153; 2019 n=1,197)



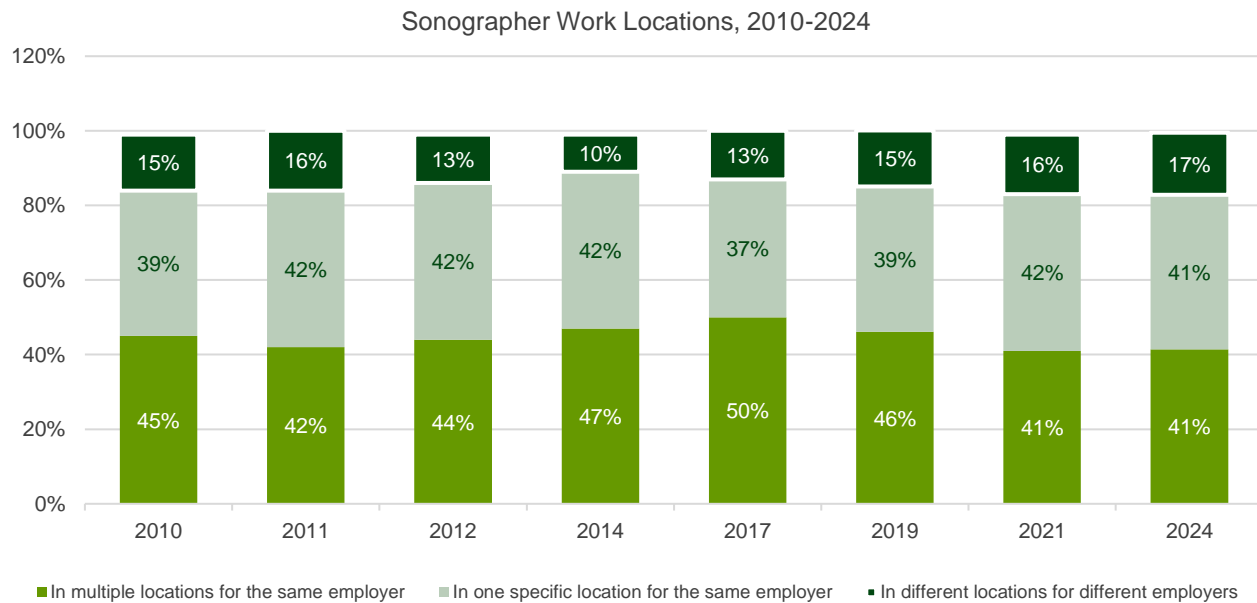
Over four in five sonographers work for a single employer, although often across multiple workplaces.

Work Location

Unchanged since 2021, around four in five respondents work for a single employer in 2024, with 41% either working in one specific location, or multiple locations for this employer. The remainder(17%) work across multiple sites for different employees.

By location, New Zealanders continue to be more likely than their Australian counterparts to work in multiple locations for a single employer (48%, compared with 41%). Sonographers in New South Wales continue to be the least likely to work in multiple locations for the same employer (33%), despite a shift up from 29% in 2021.

There are also significant differences by location, with those based in metropolitan locations significantly more likely to work across multiple locations for a single employer (45%) that those in regional and rural areas (33%). Instead, those in regional and rural locations are more likely to work in a single location for their employer (50%, compared with 37% for those in metropolitan based locations).



	Australia			New Zealand		
Work location	2019	2021	2024	2019	2021	2024
Sample	1,092	1,057	870	105	91	100
In multiple locations for the same employer	45%	41%	41%	49%	46%	48%
In one specific location for the same employer	39%	43%	42%	37%	37%	37%
In different locations for different employers	15%	16%	17%	14%	15%	15%

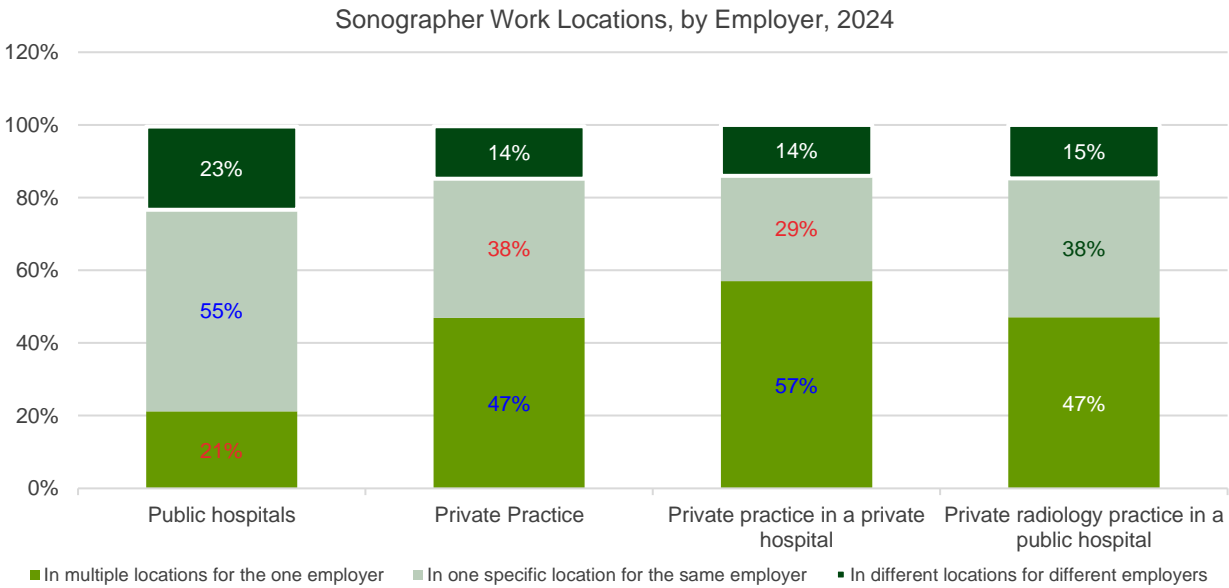
Are you working: (2024 n=973; 2021 n=1,153; 2019 n=1,197; 2017 n=793)  
\* Totals may not add up to 100% due to rounding and a small number of “other” responses

In 2024, a greater proportion of respondents in public hospitals worked in one specific location for the same employer, at 55%. While this continues the downward trend from 57% in 2021 and 61% in 2019, it remains significantly higher than for sonographers working in any form of private practice (37%).

By contrast, those in private practice (48%) are significantly more likely than their counterparts in public hospitals to work in multiple locations for a single employer.

While the proportion of sonographers in private practice working for multiple employers has remained stable between 2021 and 2024 at 14%, there continues to be an upward shift in the number of sonographers in public hospitals with multiple jobs, increasing from 18% in 2019 and 20% in 2021 to 23% in 2024.

Public hospital sonographers are increasingly relying on multiple employers, despite primarily working in a single location.



	Public Hospital			Private Practice		
Work location	2019	2021	2024	2019	2021	2024
Sample	296	258	231	865	876	721
In multiple locations for the same employer	21%	23%	21%	55%	48%	48%
In one specific location for the same employer	61%	57%	55%	32%	37%	37%
In different locations for different employers	18%	20%	23%	13%	14%	14%

Which best describes your PRIMARY place of work? (2024 n=973; 2021 n=1,153; 2019 n=1,197)  
Are you working: (2024 n= 973; 2021 n=1,153; 2019 n=1,197)

Results are significantly higher / lower than other groups at 95% confidence interval





“Expected to scan, supervise trainees and perform admin duties in between studies. Very stressful and often work overtime”

Cardiac, Private

## Employment Arrangements

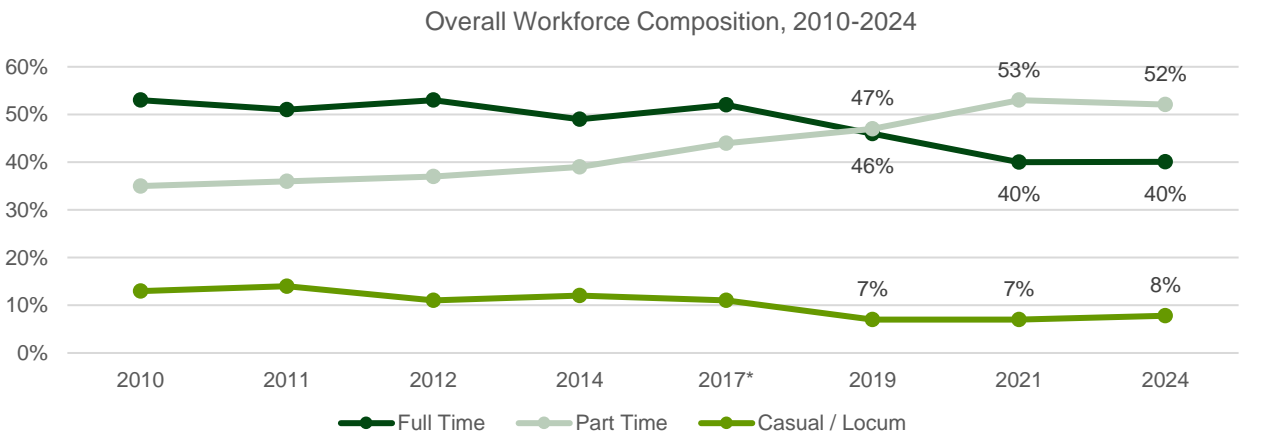
The shift to part-time employment firmly established, with over half of sonographers continuing in part-time roles in 2024.

### Workforce Composition

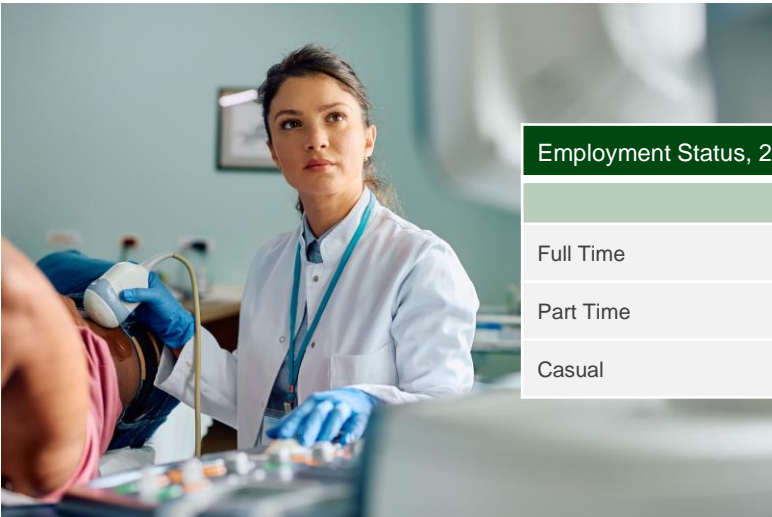
Consistent with 2021, more than half (52%) of sonographers indicated they worked part time in 2024, with Australians (54%) significantly more likely to work part time than those based in New Zealand (42%).

By contrast, a higher proportion of New Zealanders work on a full-time basis (55%) than do those in Australia (38%), with 40% overall indicating that they work full time, consistent with 2021.

The proportion of sonographers working on a casual basis, or as a locum, continues to remain stable, shifting up from 7% in both 2019 and 2021, to 8% in 2024. While not significant, Australians are slightly more likely to work on a casual or locum basis (8%) than their New Zealand counterparts (3%).



In your PRIMARY role or position, are you employed: (2024 n=973; 2021 n=1,153; 2019 n=1,197)  
\* This question was asked differently in 2017, which resulted in the total percentage of respondents exceeding 100%



Employment Status, 2024	Australia	New Zealand
Sample	870	100
Full Time	38%	55%
Part Time	54%	42%
Casual	8%	3%

Results are significantly higher / lower than other groups at 95% confidence interval



Public sector employment continues to move towards the private model of greater reliance on part time and casual roles.

A fall in the proportion of sonographers working full time in public hospitals between 2021 (45%) and 2024 (41%) has led to a more balanced distribution of the workforce across the public and private sectors. In 2024, two in five respondents work full time in both public hospitals and private practice, while a little over half work part time in both public hospitals (53%) and private practice (52%). These proportions are relatively consistent with 2021.

A small increase in the proportion of sonographers in public hospitals working on a casual or locum basis (6%) has brought this figure in closer alignment to the proportion working under these arrangements in private practice (8%) in 2024.

Across all specialist areas, the proportion of sonographers working on a full or part time basis have remained relatively stable over the last three years. At 61%, obstetrics and gynaecology sonographers are the most likely to be working on a part time basis, dropping to 43% for cardiac sonographers. By contrast, generalists are the most likely to be working full time (43%), compared to 37% for cardiac sonographers and 30% for sonographers working in obstetrics and gynaecology.

Cardiac sonographers are more likely than all others to work on a casual or locum basis (20%). The proportion of cardiac sonographers working casually dropped from 19% in 2021 to 12% in 2024, while the proportion working as a locum increased from 3% to 8% over the same time.

	Public Hospital			Private Practice		
Work location	2019	2021	2024	2019	2021	2024
Sample	296	258	231	865	877	721
Full time	53%	45%	41%	43%	39%	40%
Part time	41%	52%	53%	49%	53%	52%
Casual	3%	1%	3%	5%	6%	6%
Locum	3%	2%	3%	2%	1%	2%

Which best describes your PRIMARY place of work? (2024 n=973)  
In your PRIMARY role or position, are you employed? (2024 n=973; 2021 n=1,153; 2019 n=1,197)

One in five respondent sonographers have a secondary sonographer role in 2024.

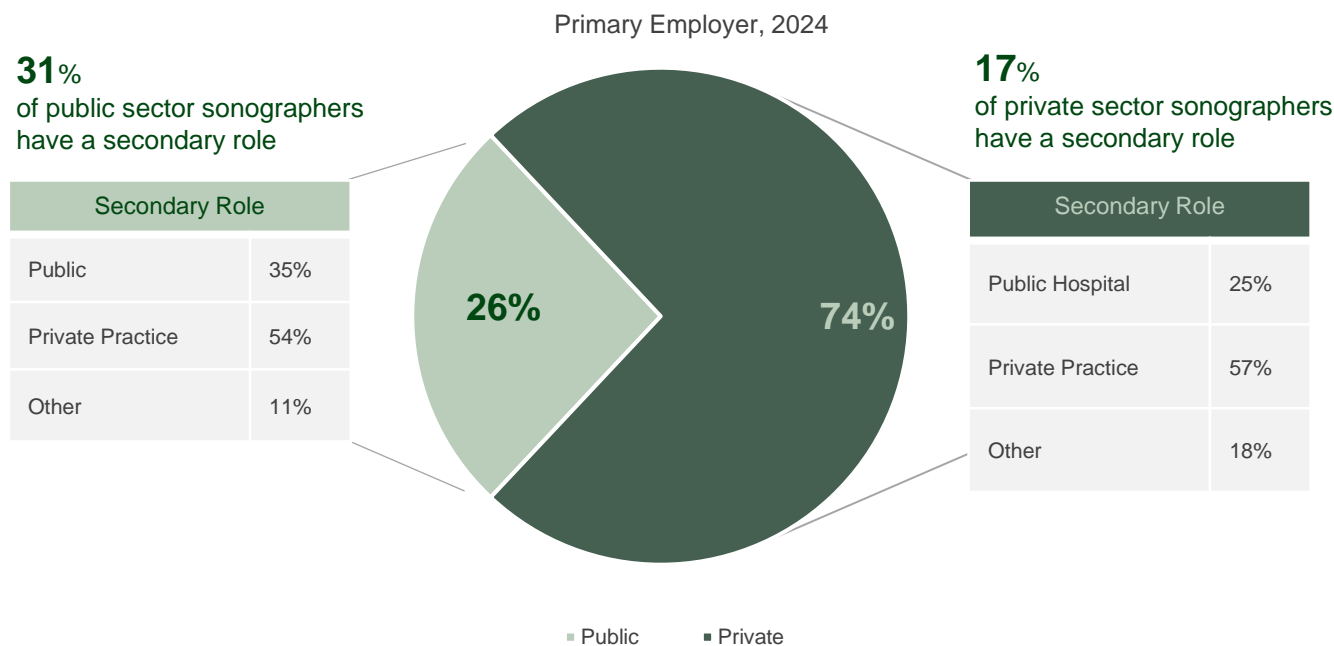
Secondary Roles

At 17%, sonographers working in private practice are significantly less likely to have a secondary role than their counterparts working in public hospitals (31%). Cardiac sonographers are also more likely to have a secondary role (36%), particularly when compared with generalists (17%).

In 2021, sonographers with secondary role tended to perform their secondary role within the same type of employment (public hospitals or private practices) as their main role. This trend has shifted in 2024, with 55% of all secondary roles being in a private practice.

For sonographers whose primary role is in a private practice, 57% are also employed in private practice in their secondary role, consistent with 58% in 2021. However, for sonographers whose primary role is in public hospitals, only 35% have a secondary role in a public hospital in 2024, down from 52% in 2021. Instead, 54% of those working a primary role in a public hospital have a secondary role in private practice in 2024, up from 38% three years ago.

Sonographers with secondary roles in 2024 tend to work their second job in a private practice, irrespective of where their primary role is located.



Which best describes your SECONDARY place of work? (Sonographers whose main role is in a public hospital 2024 n=80; 2021 n=71) / Which best describes your SECONDARY place of work? (Sonographers whose main role is in a private practice 2024 n=133; 2021 n=184)



# 03.

## Workload and Productivity

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# Sonographer Workload

Sonographers worked an average of 30.0 hours per week in 2024, relatively consistent with 29.8 in 2021.

## Hours Worked

Overall, sonographers reported working an average of 30.0 hours per week in their primary role, broadly unchanged from 2021. The average hours worked each week by sonographers in public hospitals in their primary role shifted down to an average of 29.8 hours in 2024. By contrast, the average hours worked by those in private practice increased to 30.1 hours, moving them above the hours worked by publicly employed sonographers for the first time.

General sonographers work longer hours, on average, than those in more specialised fields. This group reported working an average of 30.9 hours per week in their primary role, compared to 27.4 for obstetrics & gynaecology sonographers, 28.2 for cardiac sonographers, and 28.6 for those with a different specialisation.

On average, sonographers in New Zealand work longer hours than their Australian counterparts, at 31.9 and 29.7 hours on average per week respectively. Within Australia, sonographers in New South Wales (28.0) work significantly fewer hours on average per week than those based in Queensland (31.9) or Victoria (31.1).

When including secondary roles as well, sonographers work an average of 32.2 hours in total in 2024, consistent with 2021. This suggests that many sonographers are working multiple jobs in order to work their desired number of hours. This is particularly true for sonographers whose main role is in a public hospital, who work an average of 33.4 hours per week in total when including their secondary role, an additional 3.6 hours on top of their primary role. Cardiac sonographers are also working an additional 3.7 hours on average over and above the hours worked for their main employer.

	Average Hours Worked per Week (Primary Role Only)			Average Hours Worked Per Week (Including Secondary Role)		
Workload	2019	2021	2024	2019	2021	2024
Total	31.0	29.8	30.0	32.8	32.3	32.2
Public Hospital	31.7	30.2	29.8	34.2	33.8	33.4
Private Practice	30.8	29.7	30.1	32.3	31.8	31.7
General	31.7	30.7	30.9	33.1	32.7	32.7
Cardiac	29.0	28.8	28.2	32.1	33.7	31.9
Obstetrics & Gynaecology	29.1	26.6	27.4	31.9	28.9	29.7
Other	30.7	28.8	28.6	33.1	31.4	31.5

Sonographers working in the public system dedicate a significantly higher proportion of their worktime to clinical supervision and training than those in the private sector.

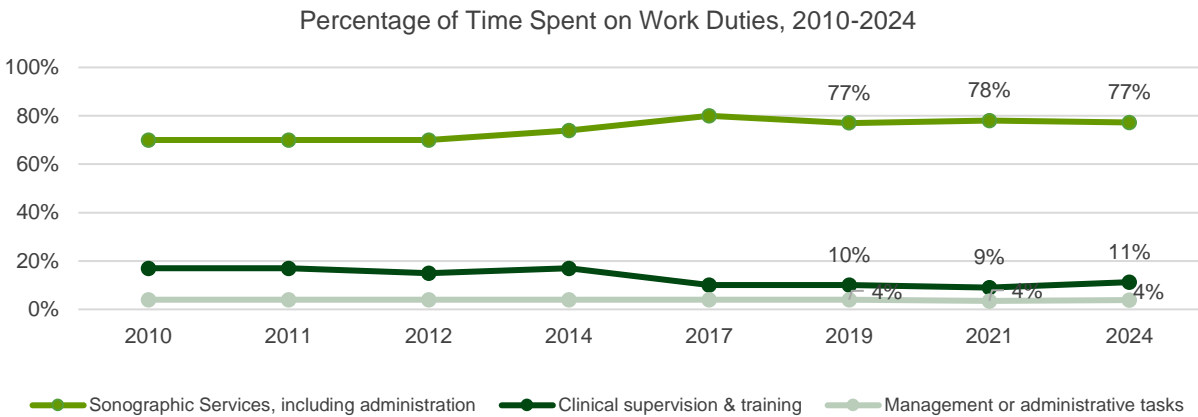
Allocation of Time To Various Work Duties

Consistent with 2019 and 2021, a majority (77%) of sonographer time is allocated to core sonographic services in 2024. While there continues to be very little time allocated to administrative management or other tasks, sonographers’ time spent on supervision and training has increased slightly from 9% in 2021 to 11%.

The allocation of work tasks remains consistent between Australian and New Zealand sonographers. There is also little variation by practice area, although cardiac sonographers indicate spending a higher proportion of their time (7%) on other non-scanning duties than generalists (3%).

When examining results by workplace, key difference do exist between those working in public and private sectors. Sonographers in private practice allocate a significantly higher proportion of their time to core sonographic services (81%) than to their counterparts in public hospitals (68%). In contrast, sonographers in public hospitals spend a higher proportion of their time on clinical supervision (16%) and non-ultrasound imaging services (3%) than those in private practice (10% and 1% respectively).

This differentiated division of work is likely a contributing factor to the fact that sonographers in private practice ae significantly more likely to be satisfied with their workload (64%) and work scheduling (65%) than their contemporaries working in public hospitals (57% and 54% respectively).



Work Duties, 2024	Public Hospital	Private Practice
Sample	231	721
Sonographic Services, including administration	68%	81%
Clinical Supervision and Training	16%	10%
Management or Administrative Tasks	5%	3%
Delivery of Sonographic Education	3%	1%
Non-ultrasound Imaging	3%	1%
Other Non-Scanning Duties	4%	4%



# Sonographer Feedback About Workload

## Workload Concerns

Many sonographers spoke about the stress and pressure sonographers experience due to high patient volumes and the challenges of balancing scanning duties with administrative and other responsibilities.

“We keep expanding the list of things that we are required to look at/documentation required, with no associated increase to time allocated for the scan and admin.” (General, Public)

“Constant pressure on throughput and maximising usage of appointment spots, on the background of low staff numbers and increased complexity of scans.(General, Private)

‘Do not have adequate breaks between patients or time off screens. No time to catch up at end of a shift to finish reports or review cases or follow up cases. Non stop rush” (Obstetrics & Gynaecology, Private)

## Stress and Time Pressures

Many comments indicated sonographers stressed feel due to time constraints, high expectations, and the need to maintain a high level of accuracy under challenging conditions.

“There is always pressure to do shorter scans, however I resist due to wanting to protect my shoulder for career longevity, and to make sure the patient gets a thorough scan. The pressure remains though!” (General, Private)

‘The clinical workload is increasing and the stress levels as well, as wages go up so does the performance pressure” (General, Private)

‘Workload demands are ever increasing, especially within the public hospital system. It remains very hard to stand up for yourself with regards to scanning time.” (General, Public)

## Administrative Duties

Other comments specifically referred to the administrative tasks that sonographers must perform, often in addition to their clinical responsibilities. Many sonographers appear frustrated by the lack of time allocated for administrative tasks

“I have a close to full time clinical role but need to manage administrative tasks mostly in my own time” (General, Public)

‘Little time for admin, CPD or extra duties such as quality control” (General, Private)

‘Too much admin. No admin support. No IT support.” (General, Public)

“Clinical demands and lack of adequate staff numbers make the delivery of quality education difficult with limited administrative time to prepare and keep abreast of current guidelines, policies and procedures.” (Cardiac, Public)

## Patient Care

Some sonographers spoke of the challenges in managing patient care and maintaining high-quality standards due to heavy workloads, making it difficult for sonographers to provide the thorough and compassionate care they strive for.

“Adequate although can get behind time if have patient has complex issues requiring extra scanning time, patient needing reassurance, elderly patient needing help with dressing or a patient with a lot of questions.” (Cardiac, Private)

“Not enough time for appropriate patient care” (General, Private)

“For morphology, definitely need 60 minutes at least as most of patients nowadays comes in large body habitus. Any less than 60 minutes does significantly affect the quality of this scan” (General, Public)



## Scan Times

Across all roles, sonographers working in private practice perform a significantly higher number of scans per day than those working in public hospitals.

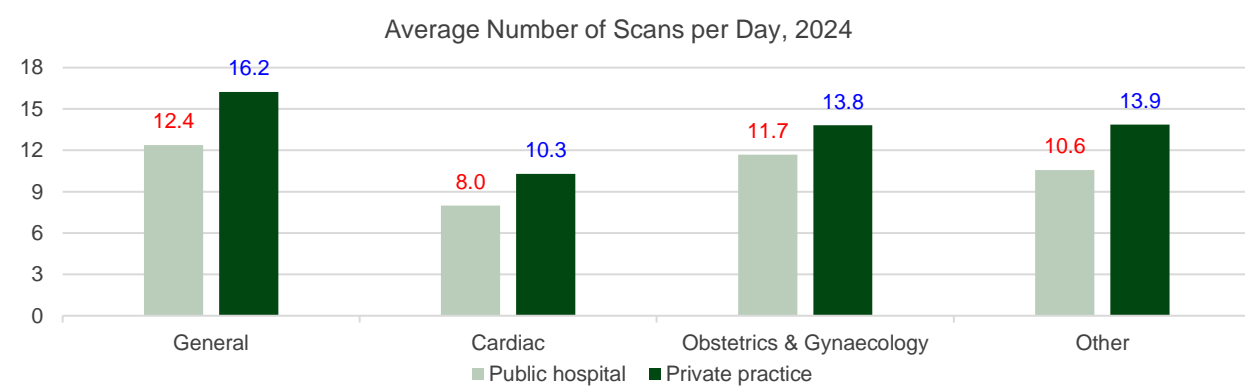
### Average Number and Time Allocated per Scan

Overall, sonographers perform an average of 14.2 scans per day. In private practice this number increases to 15.2, while in public hospitals it is only 11.5. It should be noted that public hospitals generally have more complex scans to perform

Among generalist sonographers, the average number of scans performed per day in a public hospital was 12.4 (up from 11.9), with an allocated scan time of approximately 31 minutes. In private practice they performed an average of 16.2 scans (consistent with 2021), with an average allocated scan time of 27 minutes.

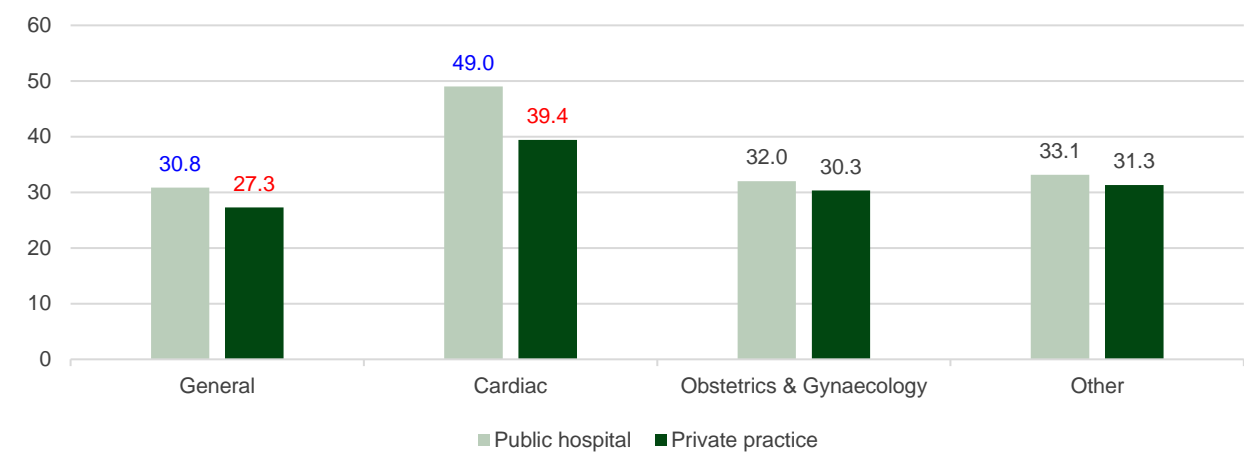
There was an increase in the number of scans performed on average by cardiac sonographers. The average number of scans performed by cardiac sonographers per day in a private practice was 10.3 in 2024 (up from 10.1 in 2021), with an average time allocated per scan at about 39 minutes. In public hospitals, they conducted an average of 8.0 scans per day, up from 7.3 in 2021, with a significantly higher average allocated scan time of 49 minutes.

The average number of scans performed by obstetrics & gynaecology sonographers in public hospitals fell from 12.3 to 11.7 per day and dropped from 14.0 to 13.8 in private practice. Scan times allocated for this speciality in public and private settings were around 32 and 30 minutes respectively.



Average No. of Scans per Day						
Scans	Public Hospital			Private Practice		
	2019	2021	2024	2019	2021	2024
Total	11.9	11.3	11.5	14.8	15.1	15.2
General	12.8	11.9	12.4	15.9	16.2	16.2
Cardiac	7.7	7.3	8.0	10.3	10.1	10.3
Obstetrics & Gynaecology	13.3	12.3	11.7	14.5	14.0	13.8
Other	11.9	10.8	10.6	12.9	14.1	13.9

Average Time Allocated per Scan (Minutes), 2024



What is the average time in minutes allocated per scan in your workplace? (2024 n=968)

Results are significantly higher / lower than other groups at 95% confidence interval

Average Time Allocated per Scan						
Time	Public Hospital			Private Practice		
	2019	2021	2024	2019	2021	2024
Total	33.6	33.5	33.9	29.6	29.3	29.2
General	30.2	31.0	30.8	27.9	27.3	27.3
Cardiac	49.1	47.4	49.0	38.9	40.2	39.4
Obstetrics & Gynaecology	30.9	32.3	32.0	29.3	30.3	30.3
Other	32.0	32.1	33.1	32.2	31.2	31.3



What is the average time in minutes allocated per scan in your workplace? (2024 n=968; 2021 n=1,153; 2019 n=1,197)

There has been little change in the time allocated per scan since 2019.



“The workload/time allocation is well balanced when correctly booked and with no unexpected incidents. However, we are expected to perform double bookings and late arrivals on top of the normal workload which creates stress..”

(Cardiac, Private)

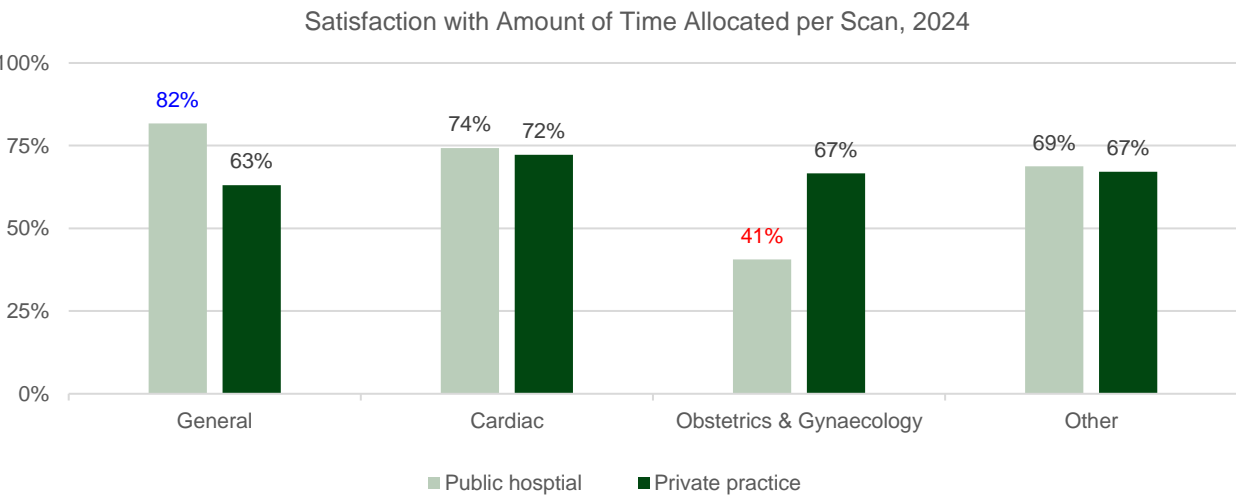
# Sonographer Satisfaction with Scan Time

## Scan Time Satisfaction

While there was little change to the time allocated per scan, satisfaction fell among many sonographers.

Overall, two in three (66%) respondent sonographers indicated that they are satisfied with their time allocation per scan in 2024, down from 70% in 2021 and 2019. In 2024, 66% of sonographers in Australia are satisfied, compared with 73% in New Zealand.

At 82%, general sonographers in public hospitals are the most satisfied with the time allocated for their scans, with obstetrics & gynaecology sonographers in public hospitals the least satisfied (41%). There was very little difference in satisfaction between different sonographers working in private practice.



How satisfied are you with the following in your job? / Time allocated per scan (2024 n=973)

Results are significantly higher / lower than other groups at 95% confidence interval



Two-thirds of sonographers are satisfied with the amount of time they are allocated to perform each scan, down from 70% in 2021

While satisfaction with scan times among generalist sonographers in public hospitals has remained consistent over the last three years, there were some notable changes for those in more specialised role. Satisfaction among cardiac sonographers increased from 69% to 74%. Conversely, satisfaction among obstetrics and gynaecology sonographers dropped (from 69% to 41%), as did satisfaction among other specialists (from 84% to 69%).

Despite a fall in satisfaction among other specialist sonographers in private practice (67%, down from 77%), satisfaction among other sonographers in private practice generally remained stable over the last three years.

	Public Hospital			Private Practice		
Top 2 Satisfaction	2019	2021	2024	2019	2021	2024
Sample	296	258	231	865	877	721
General	83%	84%	82%	68%	65%	63%
Cardiac	84%	69%	74%	61%	75%	72%
Obstetrics & Gynaecology	72%	69%	41%	73%	65%	67%
Other	87%	84%	69%	79%	77%	67%

How satisfied are you with the following in your job? / Time allocated per scan  
(2024 n=973; 2021 n=1,153; 2019 n=1,197)

While most respondents feel that the allocated time is adequate, many expressed concerns about the length of time given for various scans, particularly complex cases where more time is required.

“

”

- '30 min scans can be hard with complex morphology" (Cardiac, Private)
  - 'Complexity of scans has increased over the last few years with no increase in scan time." (Gynecology, Private)
  - 'Some scans run over when there is complicated pathology of difficult patients but usually the allocated time is enough" (General, Private)
  - "I believe our 60 minute slots allow for complex cardiac studies to be completed with quality and time for report writing." (Cardiac, Public)
  - "I feel the allocated time is generally enough for myself. More complicated cases obviously can take longer." (General, Public)
- Q. 'Do you have any comments to make about your workload and the time you are allocated to complete scans and other tasks? N=430 free text comments



04.

Sonographer  
Remuneration

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# Pay Arrangements

Hourly rates continue to be the most common pay arrangement for sonographers, with over four in five paid on an hourly basis.

## Remuneration Methods

For the past five years, sonographers were asked whether they were paid an hourly rate, an annual salary or a payment per scan in their main job. The split between these three different payment methods has been broadly consistent since 2010, with an hourly rate the most common form of remuneration for sonographers. In 2024, 86% of sonographers indicated that they are paid an hourly rate in their main job, with this proportion similar across both Australia (87%) and New Zealand (86%).

Overall, only one in ten sonographers were paid an annual salary in 2024, rising to a significantly higher 25% of cardiac sonographers. The numbers of those paid per scan has remained consistent at 3% overall, with cardiac sonographers (23%) again more likely to be paid by this method than those in other fields.

Sonographers working in private practice are significantly more likely to be paid an hourly rate (89%) or a rate per scan (4%) than their counterparts in public hospitals (81% and 1% respectively). In contrast, sonographers working in public hospitals (18%) are significantly more likely than those in private practice (7%) to earn an annual salary.



How are you being paid in your PRIMARY role? (2024 n=973; 2021 n=1,152; 2019 n=1,197)



# Wages

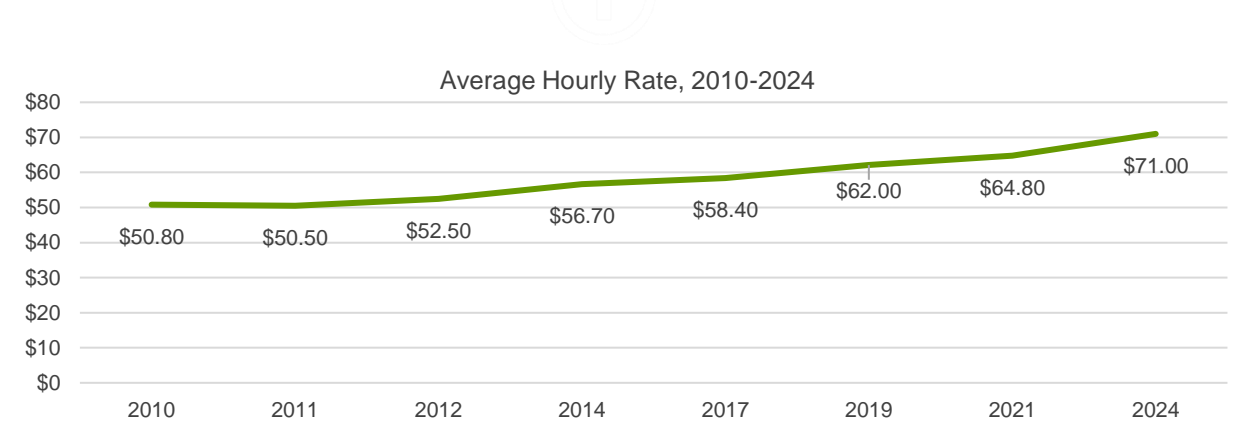
Sonographers’ hourly rates have increased by 9.6% since 2021, with wage growth in New Zealand outpacing Australia.

## Average Hourly Rates

The average hourly rate for sonographers increased 9.6% from \$64.80 in 2021 to \$71.00 in 2024. This continues the steady growth over the last 13 years, increasing by \$20.50 since 2011. This rise represents an overall increase of 40.6%, or an annualised growth rate of 3.1%. Interestingly, despite this increase, overall satisfaction with remuneration by those paid an hourly rate has fell slightly from 48% in 2021 to 43% in 2024.

Sonographer pay rates in Australia and New Zealand both increased in 2024. In Australia, pay rates increased from \$65.10 in 2021 to \$70.90 in 2024. This represents an annualised growth rate of 2.9% which compares to the seasonally adjusted national wage price index increase of 4.1% for the March 2024 quarter.<sup>1</sup>

In New Zealand, sonographer pay rates in 2024 increased from \$61.10 to \$71.70. This represents an annualised increase of 5.7% and is now higher than the pay rate for Australian sonographers. In comparison, national wage inflation in New Zealand was 4.1% for the March 2024 quarter.<sup>2</sup>



	Australia (AUD)*			New Zealand (NZD)		
Average Hourly Rates	2019	2021	2024	2019	2021	2024
Sample	907	895	750	89	75	86
Average (Mean)	\$62.00	\$65.10	\$70.90	\$61.60	\$61.10	\$71.70
Minimum	\$19.70	\$24.00	\$25.00	\$42.00	\$27.00	\$23.00
Maximum	\$160.00	\$140.00	\$162.00	\$100.00	\$85.00	\$101.00

In your PRIMARY role, how much are you paid per hour (excluding overtime / penalties)? (2024 n=837; 2021 n=973; 2019 n=996)

<sup>1</sup> <https://www.abs.gov.au/statistics/economy/price-indexes-and-inflation/wage-price-index-australia/latest-release>. Accessed 9/8/2024  
<sup>1</sup> <https://www.stats.govt.nz/information-releases/labour-market-statistics-march-2024-quarter/>. Accessed 9/8/2024

\* Data presented reflects the hourly rates of sonographers in both Australia and New Zealand as reported by respondents in their local currency. No conversion of New Zealand salaries to Australian dollars was applied to preserve the integrity of responses. The dataset is primarily composed of Australian respondents, with a smaller portion from New Zealand.

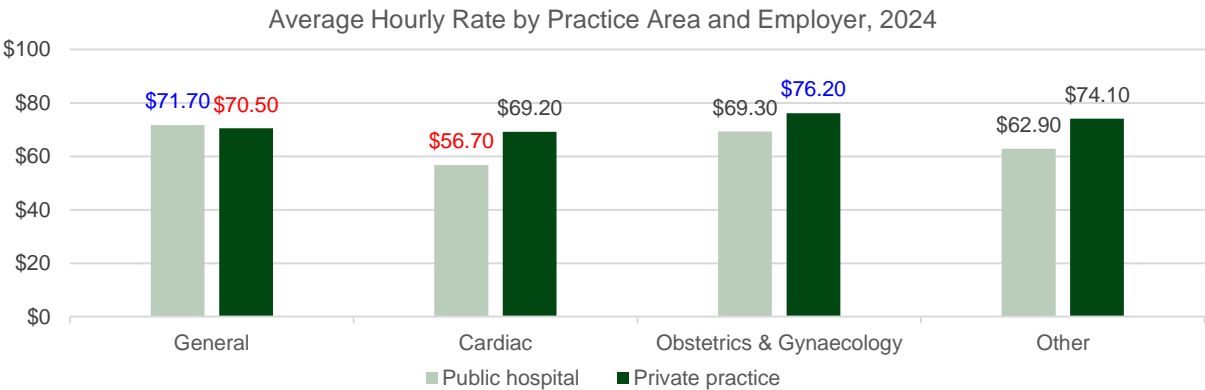


Private practice sonographers earn more than public hospital peers, with the discrepancy most pronounced for cardiac sonographers.

In general, cardiac sonographers are paid less than general sonographers or other specialists. In private practice they earn an average hourly rate of \$69.20 per hour, compared to \$70.50 for general sonographers and \$76.20 for obstetrics & gynaecology sonographers. This difference is even more pronounced in public hospitals, where cardiac sonographers earn \$15.00 less per hour than general sonographers (\$56.70, compared to \$71.70.)

While general sonographers tend to earn a similar pay rate in both public hospitals and private practice, specialists tend to earn more in the private sphere. This difference is particularly pronounced for cardiac sonographers, who are paid \$12.50 more when working in private practice than in a public hospital. This is due in part to a larger increase in hourly rates for those sonographers working in private practice (up \$7.60 per hour) than in the public sector (up \$5.50 per hour).

Across all practice areas, sonographers in private practice are more likely to be satisfied with their remuneration (46%) than those earning an hourly rate in public hospitals (29%).



	Public Hospital			Private Practice		
Average Hourly Rates, 2024	2019	2021	2024	2019	2021	2024
Sample	213	193	187	766	772	637
Total	\$62.50	\$62.40	\$69.10	\$61.80	\$65.40	\$71.50
General	\$64.00	\$63.60	\$71.70	\$60.90	\$64.70	\$70.50
Cardiac	\$52.20	\$51.20	\$56.70	\$58.00	\$61.60	\$69.20
Obstetrics & Gynaecology	\$59.70	\$63.80	\$69.30	\$65.80	\$67.70	\$76.20
Other	\$63.50	\$59.80	\$62.90	\$65.70	\$71.90	\$74.10

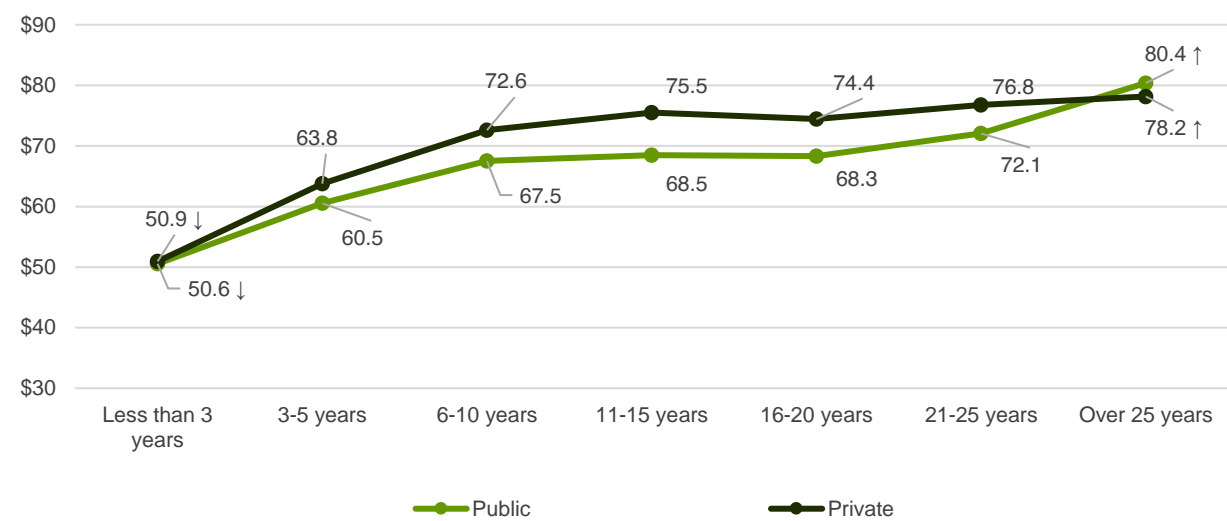
In your PRIMARY role, how much are you paid per hour (excluding overtime / penalties)? (2024 n=837)

By year: 2024 results are significantly higher / lower than 2021 at 95% confidence interval

By practice area : Results are significantly higher / lower than other groups at 95% confidence interval

\* Data presented reflects the hourly rates of sonographers in both Australia and New Zealand as reported by respondents in their local currency. No conversion of New Zealand salaries to Australian dollars was applied to preserve the integrity of responses. The dataset is primarily composed of Australian respondents, with a smaller portion from New Zealand. Consequently, the overall figures are more representative of the rates paid in Australia, particularly for comparisons by employer type and practice area.

Average Hourly Rate by Experience and Employer, 2024



In your PRIMARY role, how much are you paid per hour (excluding overtime / penalties)? (2024 n=837)

**There is a clear correlation between experience and remuneration, with hourly rates increasing rapidly for the first 10 years, before stabilising and then increasing again after around 20 years' experience.**

Sonographers in both the public and private sectors have a starting hourly rate at around \$51 per hour. In private practice, sonographers experience a steady pay increase for the first 10 years to \$72.60 per hour, remaining relatively stable for the remainder of their career.

In contrast, the increase in salaries for the first 10 years in the public sector is lower, to \$67.50 per hour. While this rate remains relative stable for approximately 10 years, with 20 years' experience average hourly rates for those in public hospitals begins to increase to a high of \$80.40 for those with over 25 years' experience. This is above the \$78.20 earned by similarly experienced colleagues in the private sector.

Experience, 2024	Public Hospitals	Private Practice
Sample	187	637
<3 years	\$50.60	\$50.90
3-5 years	\$60.50	\$63.80
6-10 years	\$67.50	\$72.60
11-15 years	\$68.50	\$75.50
16-20 years	\$68.30	\$74.40
21-25 years	\$72.10	\$76.80
Over 25 years	\$80.40	\$78.20

In your PRIMARY role, how much are you paid per hour (excluding overtime / penalties)? (2024 n=837)

\* Data presented reflects the hourly rates of sonographers in both Australia and New Zealand as reported by respondents in their local currency. No conversion of New Zealand salaries to Australian dollars was applied to preserve the integrity of responses. The dataset is primarily composed of Australian respondents with a smaller portion from New Zealand. Consequently, the overall figures are more representative of the rates paid in Australia, particularly for comparisons by employer type and practice area.

Annual salaries

Overall, only 10% of responding sonographers were paid an annual salary in 2024. This increases to 17% of those working full time, who earn approximately \$123,869 on average per year. This is up 8.9% from \$113,703 in 2021.

At an average of \$133,877 per annum, sonographers in private practices tend to receive higher annual salaries than those in public hospitals (\$113,836). In addition, generalists (\$125,785) and those with other specialisations (\$150,935) tend to have higher average annual salaries than sonographers who specialise in cardiac (\$103,602) ultrasound.

By location, New Zealand based sonographers who work full time on an annual salary tend to have higher salaries on average than their Australian counterparts (\$137,457 and \$121,934 per annum respectively).

Those with less than three years' experience earn an annual salary of \$88,273 on average. Once employed for three years, salaries increase significantly to over \$120,000, and generally stabilise around this figure for the remainder of their career.

Payments per scan

Only a relatively small number (30) of surveyed sonographers stated that they are paid per scan in their primary role in 2024. Of these, over half (53%) are paid between \$50 and \$75 per scan. The overall average payment per scan for sonographers in 2024 is \$74.90, up from \$65.20 in 2021.

Among those sonographers paid per scan, there is considerable variation in the average number of scans conducted per day, averaging at 12.8. This is relatively consistent with 12.1 in 2021.

What is your annual salary (excluding superannuation) in your PRIMARY role? (2024 n=100) / In your PRIMARY role, how much are you paid per examination (scan / study)? (2024 n=30) / Thinking about your PRIMARY role, on average, how many scans do you perform per standard week (n=32)





## Overtime

After trending downwards since 2017, the proportion of sonographers working overtime has stabilised at 47% for the last three years.

### Proportion of Sonographers Working Overtime

In 2024, 47% of sonographers indicated that they work paid overtime in a typical week, consistent with 2021. In 2024, sonographers in public hospitals are significantly more likely to work overtime in an average week (57%) than those in private practice (44%). Among sonographers in public hospitals, 44% work less than five hours overtime on average per week. The compares with 35% for those working in private practice.

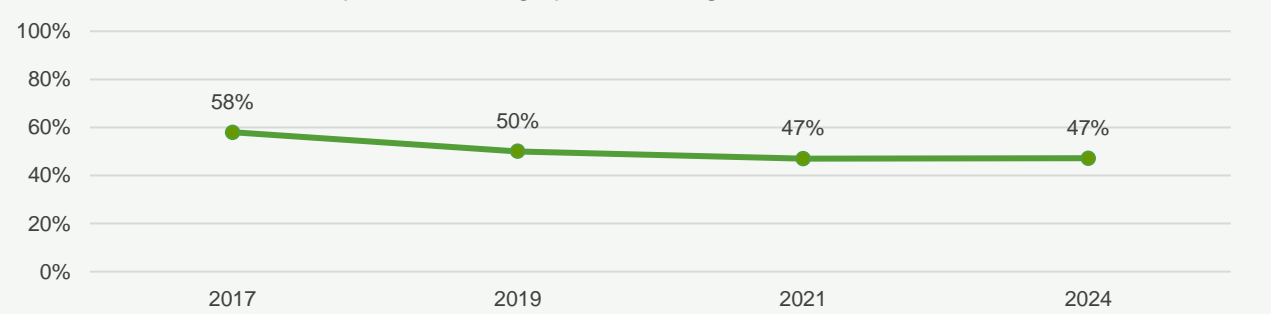
Among those who do work overtime hours, sonographers worked an average of 3.0 overtime hours in 2024, relatively consistent with 2.9 in 2021. In public hospitals, the average number of overtime hours worked per week is 3.2, compared with 2.9 in private practice.

Increasing from 38% to 44% in 2024, New Zealand sonographers are now similarly likely to work overtime in an average week than their Australian counterparts (47%). Although Australian sonographers still work slightly longer hours on average (3.0 hours) than do those in New Zealand (2.8 hours).

Sonographers working in rural and remote areas (44%) were less likely to have worked overtime in 2024 than those in city and metropolitan areas (49%), with those who do work overtime putting in an average of 2.8 and 3.1 hours per week, respectively.

Cardiac sonographers who undertook overtime worked an average of 5.9 hours (up from 3.5 in 2021) overtime per week, significantly higher than 2.5 for generalist sonographers.

Proportion of Sonographers Working Overtime, 2017-2024



Overtime Hours per Week, 2024	Public Hospital	Private Practice
Sample	228	715
None	44%	57%
Less than 5 hours	44%	35%
5-9 hours	8%	7%
10 or more hours	4%	1%
Average	3.2 hours	2.9 hours

How many overtime hours (excluding on call hours) do you work in a typical week? (2024 n=973; 2021 n=1,153; 2019 n=1,197)

Results are significantly higher / lower than other groups at 95% confidence interval



While most sonographers are compensated for the overtime hours they work, sonographers working a in public hospital are more likely to receive compensation that is above their standard hourly rate.

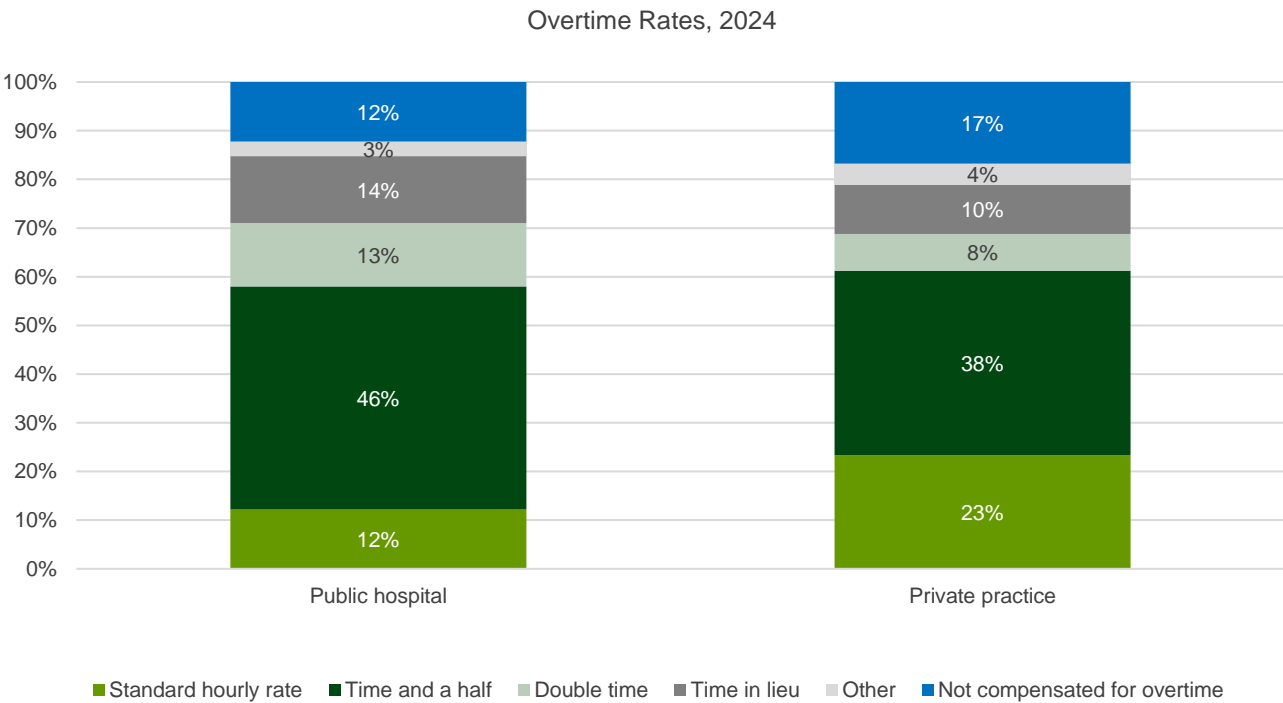
Overtime Rates

A little under half (46%) of respondents in public hospitals indicated that they were paid time and a half for the overtime hours they work, while 13% are paid double time. This compares with 38% and 8% for those in private practice respectively. In addition, a higher proportion of sonographers in public hospitals were offered time in lieu (14%) than were those working in private practice (10%). By comparison, almost one in four (23%) sonographers in private practice were compensated at their standard hourly rate for overtime hours, compared with 12% in public hospitals.

Unchanged from 2021, 12% of those in public hospitals and 17% in private practice indicated that they did not receive any compensation for their overtime hours in 2024. This compare to 12% and 19% in 2021 respectively.

While Australian (39%) and New Zealand (41%) based sonographers were similarly likely to be paid time and half for their overtime hours, New Zealanders are more likely to be compensated at their standard hourly rate (30%, compared with 19%). By contrast, Australians were more likely to receive double time (10%, compared with 2%) or time in lieu (12%, compared with 5%) than their New Zealand based counterparts.

Australians are also more likely than their New Zealand based colleagues to receive no compensation for overtime hours (16%, compared with 11%).



## On Call Arrangements

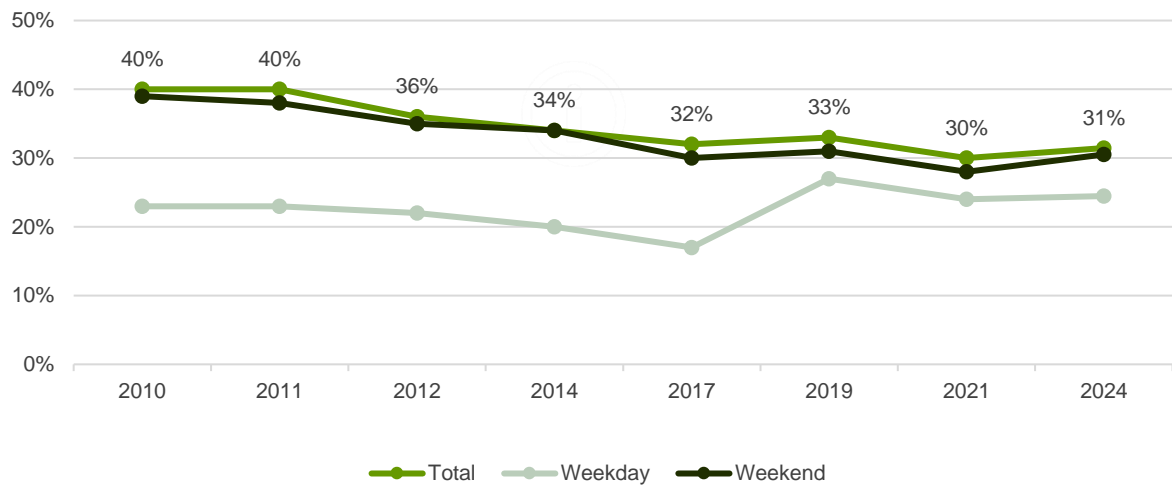
The proportion of sonographers doing on call work is also stable at around three in ten.

### Proportion of Sonographers Performing On Call Work

The proportion of sonographers that perform on call work has remained relatively stable over the last five years at around little over three in ten, with 31% of respondents working on call in 2024, similar to 30% in 2021, 33% in 2019 and 32% in 2017.

The weekend remains the most common time to be on call, at 31% in 2024 (28% in 2021). The proportion working on call on weekdays has remained steady at 24%.

Proportion of Sonographers who Perform On Call Work, 2010-2024



### New Zealand based sonographers are less likely to be on call than those in Australia.

Overall, 33% of Australian sonographers and 21% of those based in New Zealand indicated that they work on call . Almost one in three (32%) sonographers in Australia worked on call on weekends in 2024, up from 29% in 2021, and higher than 19% in New Zealand. Similarly, Australians are significantly more likely to work on call on weekdays (26%) than are sonographers in New Zealand (12%).

	Australia			New Zealand		
% of Sonographers on Call	2019	2021	2024	2019	2021	2024
Sample	1,092	1,058	870	105	90	100
Weekday	28%	25%	26%	14%	13%	12%
Weekend	33%	29%	32%	19%	20%	19%

A significantly higher proportion of sonographers in public hospitals work on call than those in private practice.

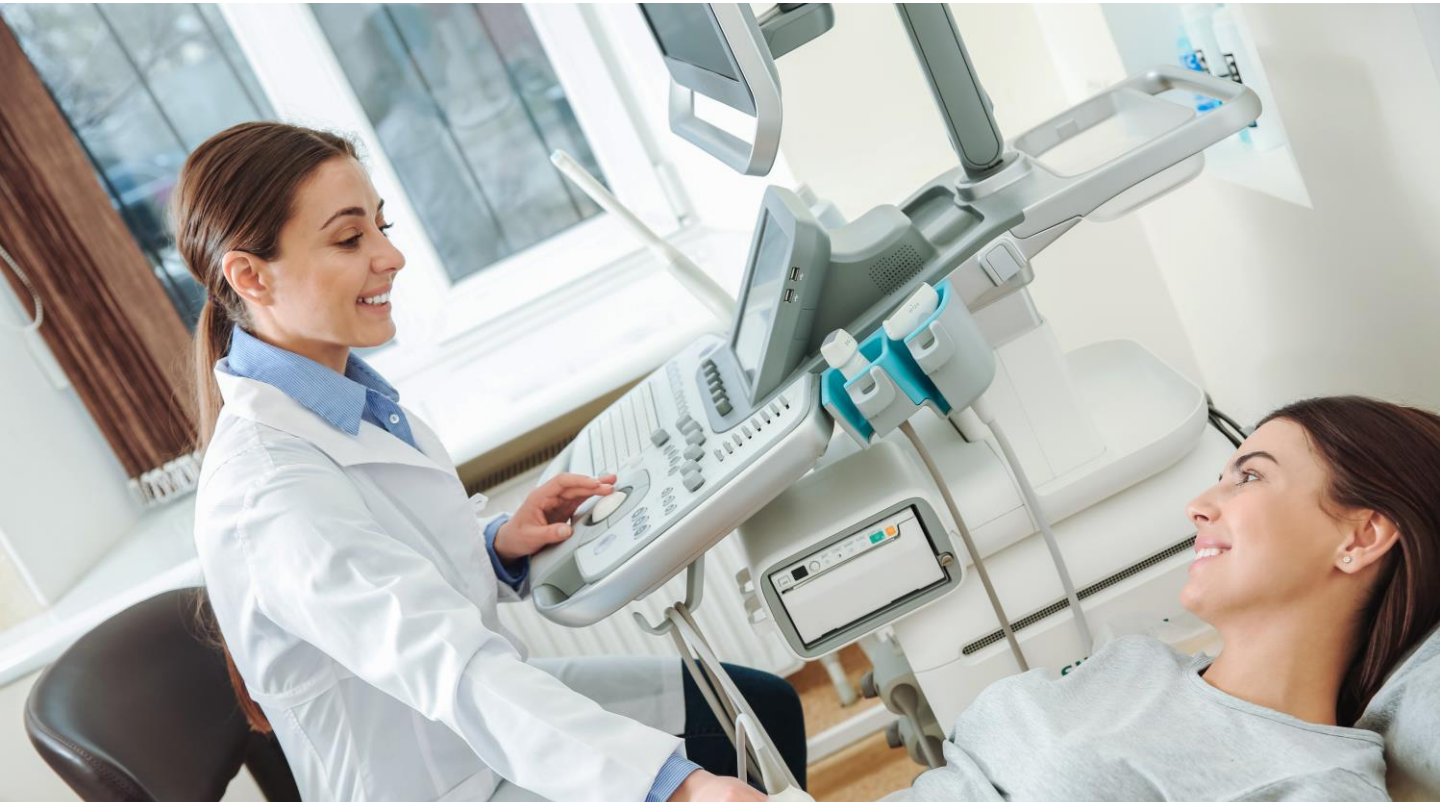
On Call Frequency

In 2024, over three in five (61%) sonographers in public hospitals work on call on weekends, with a little under this (57%) doing so on weekdays. Monthly remains the most common on call frequency for public hospital sonographers on the weekend (27%), followed by every 2-3 weeks at 21%. Over a quarter of (26%) public hospital sonographers are on call weekly on a weekday.

In contrast, only one in five (21%) respondent sonographers in private practice are on call on weekends (up from 18% in 2021), and 14% on a weekday. The frequency with which those private practice sonographers work on call on weekdays is evenly divided between weekly (3%), every 2-3 weeks (2%), monthly (4%) and less often (4%). For those on call on weekends, 8% do so monthly, with a further 8% less frequently.

	Public Hospital		Private Practice	
On Call Frequency, 2024	Weekdays	Weekends	Weekdays	Weekends
Sample	231		721	
Every week	26%	1%	3%	1%
Every 2-3 weeks	14%	21%	2%	4%
Monthly	7%	27%	4%	8%
Less often	10%	11%	4%	8%
Never	43%	39%	86%	79%

On average, how often do you work on call? (2024 n=973)

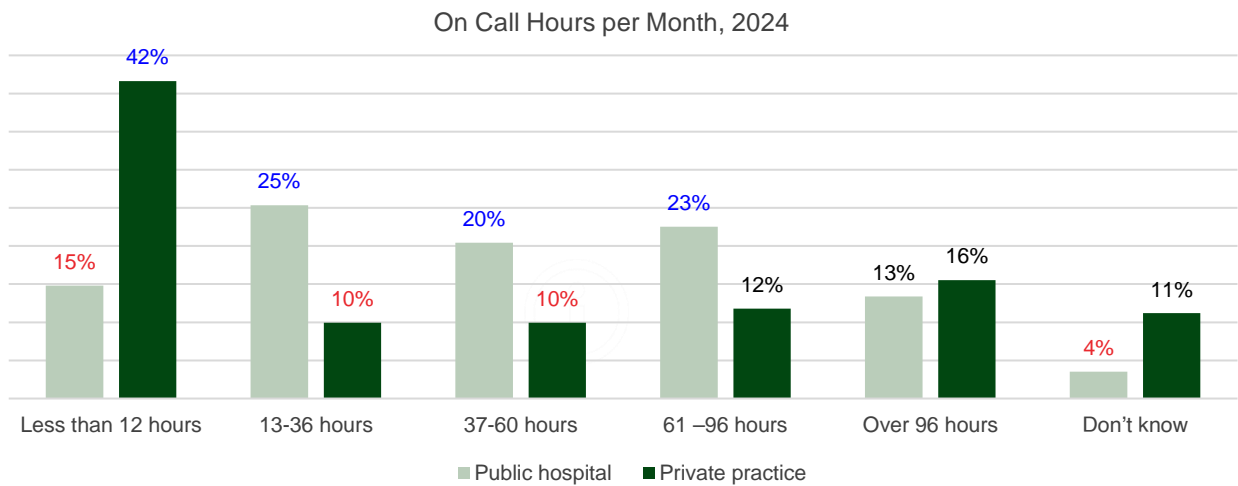




On Call Hours

The number of hours sonographers are on call for varies considerably, with the overall number of hours continuing to decline over time.

In 2024, just under three in ten (29%) sonographers are expected to be available for less than 12 hours per month, up from 22% in 2021, and 12% in 2019. Similarly, has been a continued fall in the proportion on call for more than 96 hours per month from 31% in 2019 and 20% in 2021 to a low of 14% in 2024.



Typically, how many hours are you on call per month? (Sonographers who work on call 2024 n=309) Results are significantly higher / lower than other groups at 95% confidence interval

Sonographers in private practice typically work fewer hours on call hours than those in public hospitals.

In 2024, 15% of sonographers who perform on call work in public hospitals were typically on call for less than 12 hours per month, with over half (56%) on call for more than 36 hours per month.

Conversely, over two in five (42%) sonographers in private practice who work on call typically did so for less than 12 hours per month in 2024, with 38% on call for more than 36 hours a month—significantly lower than for those in public hospitals.

While 28% of Australian sonographers were on call for less than 12 hours a month, this increased to 48% for those in New Zealand. Instead, Australians were more likely to work on call for more than 36 hours (47%), than were those based in New Zealand (24%).

On Call Hours	2019	2021	2024
Sample	304	365	309
Less than 12 hours	12%	22%	29%
13-36 hours	17%	15%	18%
37-60 hours	17%	17%	14%
61-96 hours	18%	17%	17%
Over 96 hours	31%	20%	14%
Don't know	6%	9%	8%

Typically, how many hours are you on call per month? (Sonographers who work on call 2024 n=309; 2021=356; 2019=304)

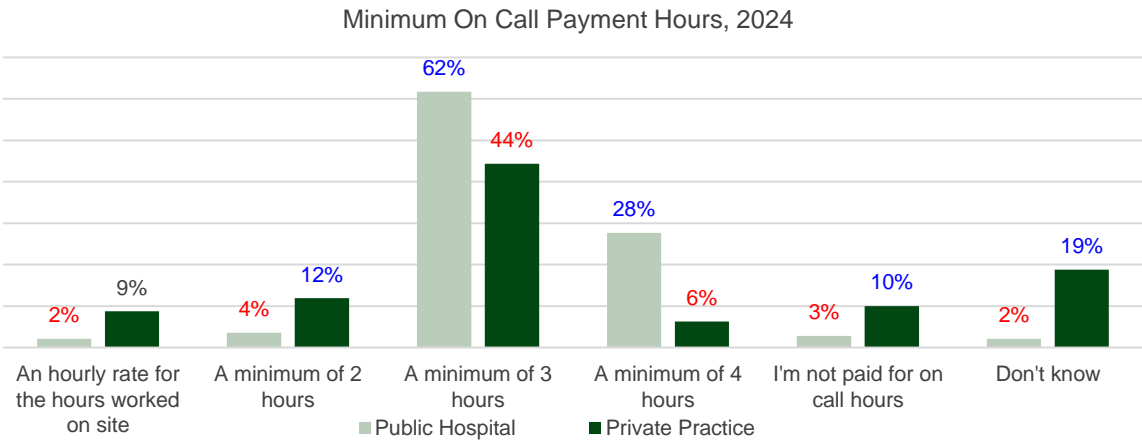
When called in, sonographers are most commonly paid for a minimum of 3 hours.

Minimum On Call Payments

Around three out of five (62%) sonographers in public hospital are paid for a minimum of 3 hours when called out, regardless of the time worked, consolidating the upward trend from 58% in 2019. Consistent with 2021, a minimum of four hours is paid to 28% of sonographers in public hospitals when they are called in.

The proportion of sonographers in private practice paid a minimum of three hours is significantly lower, at 44%, comparable to 42% in 2021. Similarly, a significantly lower proportion of private practice sonographers (6%) are paid for a minimum of 4 hours when called out. Instead, private practice sonographers are significantly more likely to be paid a minimum of two hours for their own call work than those in public hospitals.

Up significantly since 2021, 10% of sonographers in private practice are not paid when they are called out, while a further 19% are unsure about the rate they receive for this work.



	Public Hospital			Private Practice		
Minimum on call payment hours	2019	2021	2024	2019	2021	2024
Sample	160	167	141	135	179	160
An hourly rate for the hours worked	3%	1%	2%	10%	12%	9%
A minimum of 2 hours	8%	9%	4%	21%	21%	12%
A minimum of 3 hours	58%	60%	62%	58%	42%	44%
A minimum of 4hours	29%	28%	28%	7%	4%	6%
I'm not paid for on call hours	1%	1%	3%	1%	5%	10%
Don't know	2%	1%	2%	2%	16%	19%

While the most common on call rate for weeknights continues to be 1.5 times the normal rate, there has been a steady increase in the proportion paid double time, particularly in private practice.

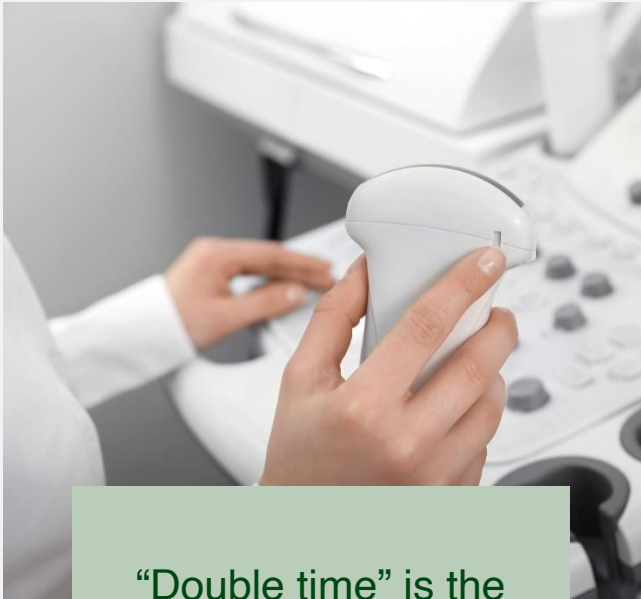
On Call Rates

In 2024, just under two in five respondents (38%) indicated that they receive 1.5 times their normal pay for working on call on weeknights. This is down from 43% in 2021 and 48% in 2019. While slightly higher for those in public hospitals (41%) than in private practice (36%), the gap has narrowed from 48% and 36% in 2021 respectively.

Instead, there has been an increase in the proportion of sonographers being paid twice their normal hourly rate, up from 34% to 36% this year, particularly in public hospitals, where this proportion has increased from 34% to 38%.

At 66%, the most common on call payment rate for weekends is 2 times their normal hourly rate, broadly consistent with 64% in 2021. Over seven in 10 sonographers in public hospitals (71%) are paid double time when called out on a weekend, as are 62% of those in private practice.

On public holidays, 57% of sonographers in public hospitals and 41% of those in private practice receive 2.0 times their normal rate, although a very high proportion either don't know or have a different arrangement in place (34% and 49% respectively).



“Double time” is the most common rate for on call work on a weekend or public holiday

	Public Hospital			Private Practice		
On call pay rate, 2024	Weeknights	Weekends	Public Holiday	Weeknights	Weekends	Public Holiday
Sample	134	134	134	113	113	113
Normal hourly rate	7%	4%	1%	7%	4%	3%
1.5 x normal rate	41%	17%	7%	36%	17%	8%
2 x normal rate	38%	71%	57%	35%	62%	41%
Other / don't know	14%	8%	34%	22%	17%	49%

When you are called out, please indicate what rate the hours are paid at: (2024 n=252)

Results are significantly higher / lower than other groups at 95% confidence interval

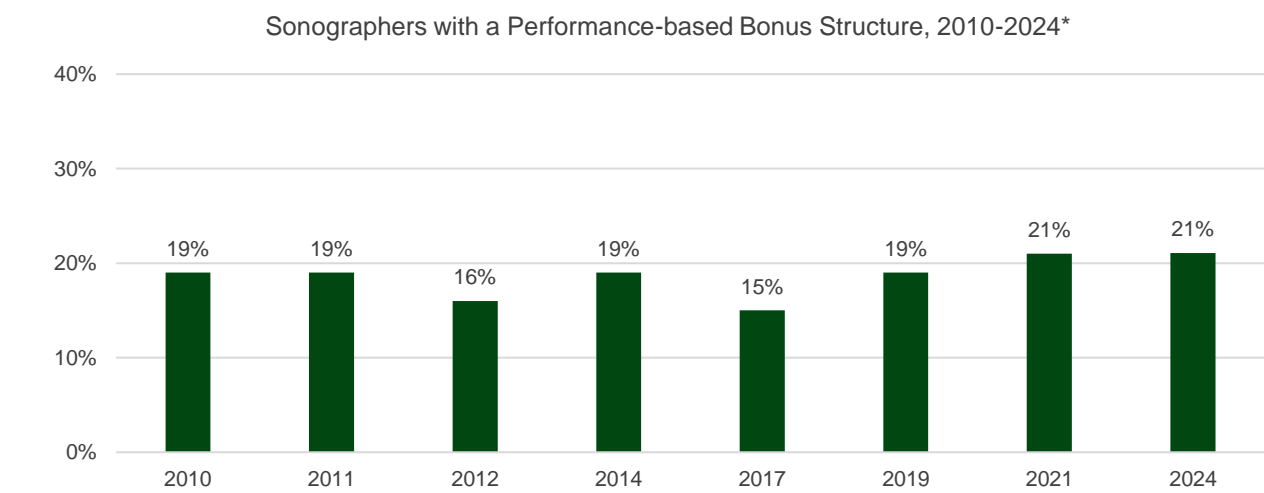
## Performance Bonus

General sonographers and those working in private practices are most likely to receive performance-based bonuses in 2024.

### Proportion of Sonographers with a Performance Bonus

Consistent with 2021, 21% of sonographers were eligible to receive a performance-based bonus in 2024. This increases to 23% for Australian sonographers, significantly higher than 7% for those in New Zealand.

Similarly, 27% of sonographers in private practice indicated that they are eligible for bonus, with a significantly lower 1% of those in public hospitals claiming similar eligibility. By specialisation, general sonographers are significantly more likely to indicate that they are eligible for a performance-based bonus (25%) than are cardiac (12%), obstetrics & gynaecology (12%) and other (18%) specialists.



% of Sonographers with a Performance Based Bonus	2021	2024
Sample	1153	973
Australia	21%	23%
New Zealand	6%	7%
Public Hospital	2%	1%
Private Practice	27%	27%
General	26%	25%
Cardiac	9%	12%
Obstetrics & Gynecology	10%	12%
Other	15%	18%

Is there a performance-based bonus structure available to you? (2024 n=973; 2021 n=1,153; 2019 n=1,197)  
\*In 2024, 6% did not know if there was a performance-based bonus available to them

Among sonographers who earnt a bonus last year, the average amount received was \$10,473, up from \$9,475 in 2021.

Bonus Amounts

In 2024, two in three (66%) sonographers with a performance-based bonus structure available to them received a bonus. This is down from one in four (75%) in 2021. Despite this drop in the proportion receiving a bonus, the average bonus received increased by 10.5%. Similar proportions received \$2,000 or less (24%), between \$2,000 and \$10,000 (23%), and over \$10,000 (20%).

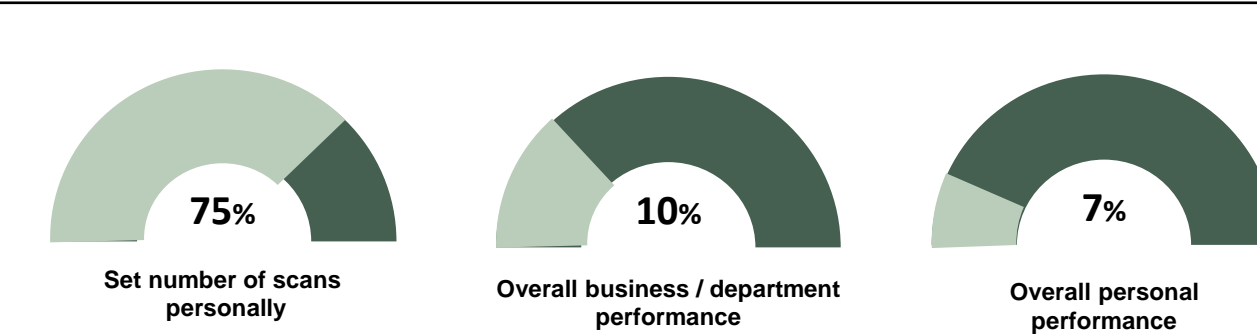


Three quarters of sonographers eligible for a performance bonuses are measured based on personally achieving a set number of scans.

Three in four sonographers (75%) eligible for a performance-based bonus in 2024 indicated that their bonus is based on achieving a set number of scans personally. This is broadly consistent with 73% in 2021. Bonus determination is based on overall personal performance in 7% of instances.

Overall business or departmental performance is used to determining bonuses in 10% of bonuses, with attainment of a minimum number of scans by the overall department used as a determinant in only 1% of instances.

Performance Measurement Metrics, 2024





# 05.

## Employment Benefits

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## Employment Benefits

While Australians are more likely to have a performance-based bonus structure, New Zealand sonographers are more likely to be offered a broader range of other benefits.

Showing significant increase from 2021, paid annual leave of more than four weeks continues to be the most common benefit paid for by employers, offered to 68% of respondent sonographers. This proportion increases to 85% for those in New Zealand, compared to 66% of Australians.

Continuing the downward trend from 44% in 2019, 36% of sonographers indicated that they received support for additional study in 2024, with this proportion increasing to 73% for those in New Zealand.

With the overall proportion of benefits paid for by employers remaining broadly consistent with 2021, results show that New Zealand sonographers were significantly more likely to receive many of these benefits than their Australian counterparts. This is particularly true for annual membership fees (90%, compared with 12%), professional accreditation (94%, compared with 25%), professional indemnity insurance (62%, compared with 13%), and support for additional study (73%, compared with 32%).

Around half (49%) of New Zealand based sonographers are satisfied with the range of benefits they receive, significantly higher than the 29% of Australian sonographers.

Overall, around one in three (34%) sonographers indicated that their employers provided salary packaging or salary sacrifice benefits. While this benefit was available to 36% of responding sonographers in Australia, only 13% of their counterparts in New Zealand indicated that they were also offered salary sacrificing options.

While results were generally consistent across practice areas, there were a few exceptions. Cardiac sonographers were significantly less likely than others to indicate that their employer paid for additional annual leave (53%), annual professional accreditation (10%) or annual membership fees (6%) than were those in other practice areas. In addition, general sonographers were significantly less likely to have support for research (7%) or a car park (17%), particularly when compared with those with other specialisations (15% and 43% respectively).

**Paid annual leave of more than four weeks continues to be the most common additional employment benefit paid for by employers.**





Partially or Fully Paid Benefits by Employer	2019	2021	2024	Australia	New Zealand
Sample	1,196	1,153	973	870	100
Additional Annual Leave	58%	60%	68%	66%	85%
Additional Superannuation	40%	38%	41%	38%	62%
Support for Additional Study	44%	41%	36%	32%	73%
Salary Packaging / Salary Sacrifice	N/A	31%	34%	36%	13%
Professional Accreditation	35%	32%	32%	25%	94%
Automatic CPI Increase	36%	32%	29%	29%	30%
Car Parking	17%	17%	21%	19%	37%
Annual Membership Fee (ASA, Union)	21%	19%	20%	12%	90%
Professional Indemnity Insurance	19%	16%	18%	13%	62%
Support to Conduct Research	9%	8%	9%	9%	12%

By year: 2024 results are significantly higher / lower than 2021 at 95% confidence interval  
By country: Results are significantly higher / lower than other groups at 95% confidence interval

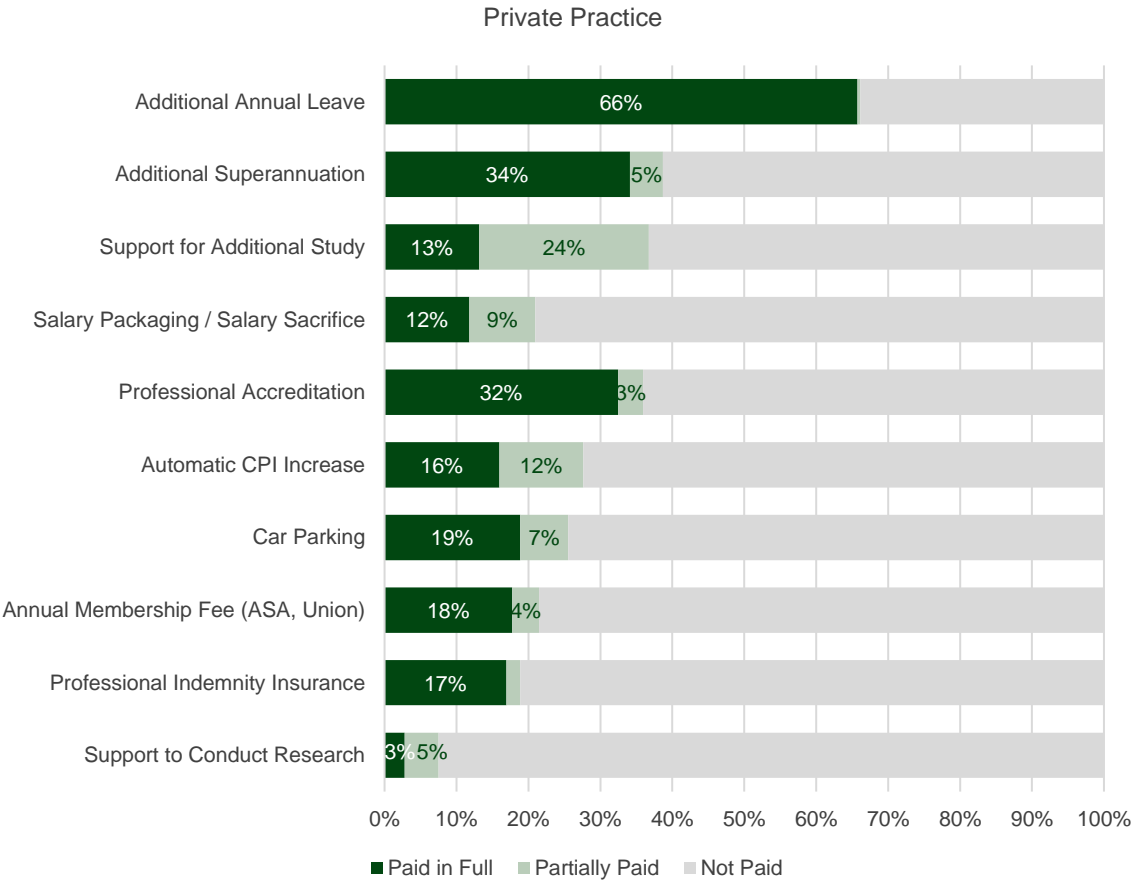
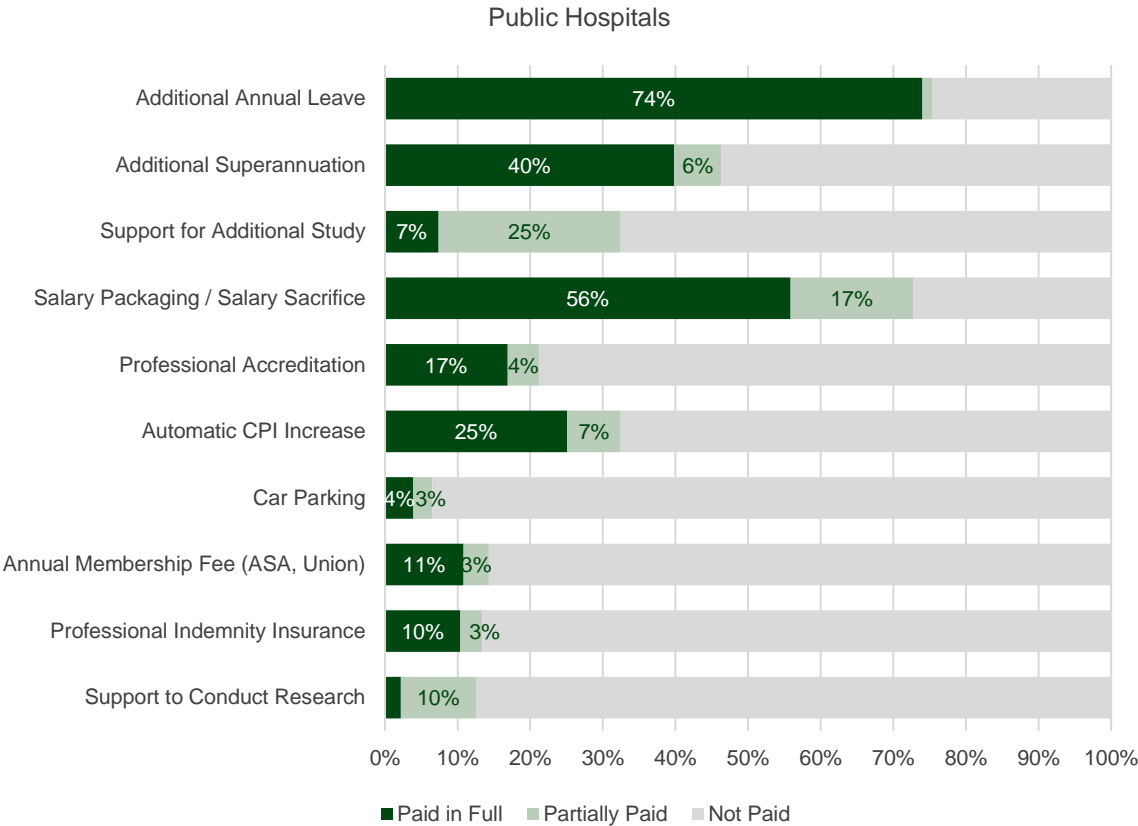
Are any of the following employee benefits paid for by your employer? (2024 n=973; 2021 n=1,153; 2019 n=1,196)

**Sonographers in public hospitals are more likely to receive salary packaging options, those in private practice are instead more likely to have their employers cover their professional accreditation fees.**

Results for 2024 show only minor differences between sonographers working in public hospitals and private practice with respect to the benefits paid for by their employees, with the gap between the proportion of employers offering additional paid annual leave, additional superannuation contributions, and annual membership fees narrowing noticeably from 2021. However, some significant differences still remain.

As with 2021, there is a significant difference in the proportion of sonographers that received salary packaging / salary sacrifice benefits. While almost three in four (73%) of sonographers in public hospitals are offered these benefits, this drops to just one in five (21%) of those in private practice. Thirteen percent (13%) of public hospital sonographers receive support to conduct research, compared with only 8% of those in private practice.

Conversely, sonographers in private practice are more likely to have their annual professional accreditation fees paid (36%) and have a funded car park made available to them (26%) than their colleagues in public hospitals (21% and 6% respectively).



## CPD Support

Despite little change in the proportion of employers offering financial assistance for professional development, there has been a sharp rise in the proportion of sonographers using this assistance over the last three years.

### Provision and Use of CPD Support

The proportion of sonographers indicating that their employer offered either full or partial financial support for a range of professional development activities has remained largely unchanged over the last three years, with support for local activities general remaining higher than support for international opportunities.

However, there has been significant increase in the uptake of this support over the same period,. While less than three in ten sonographers able to access financial assistance for professional development used it in 2021, over two in five have done so to access local professional development activities (46%), conference leave (46%) or pay national conference registration fees (43%) in 2024.

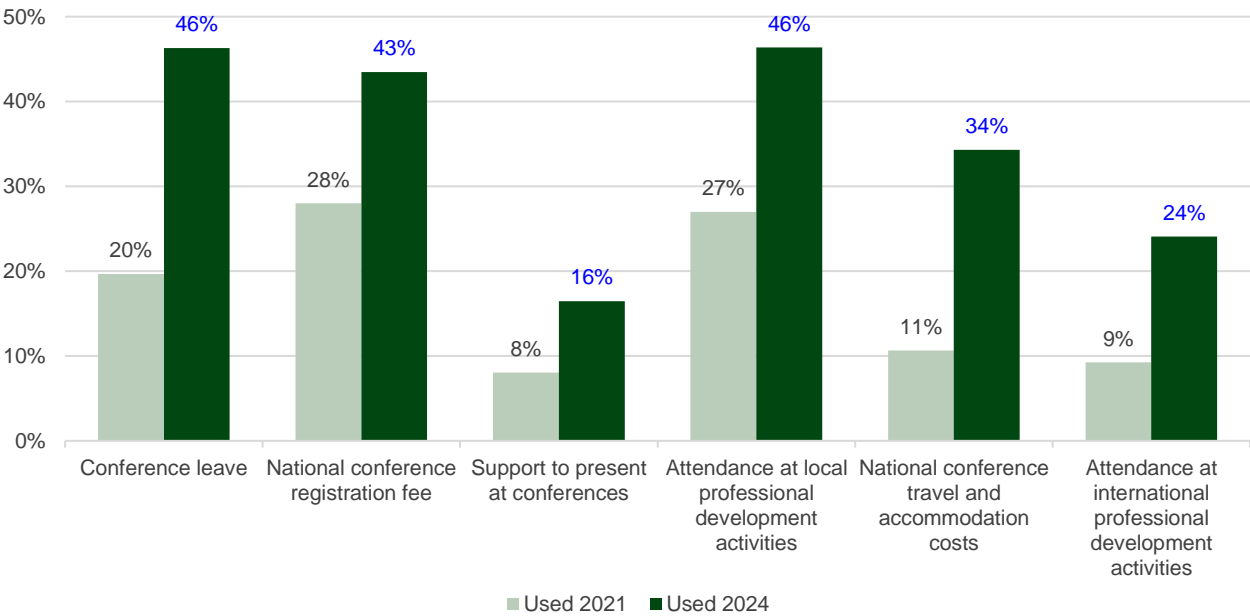
Support for international professional development has also increased, with one in three (34%) using financial support to cover travel and accommodation costs, and 24% to attend international professional development activities (up from 11% and 9% respectively).



Types of CPD Support	2021	2024	Used in 2024
Sample	1,153	973	
Conference Leave	55%	53%	46%
National Conference Registration Fee	57%	56%	43%
Support to Present at Conferences	33%	36%	16%
Attendance at Local Professional Development	42%	44%	46%
National Conference Travel & Accommodation	41%	42%	34%
Attendance at International Professional Development	32%	33%	24%



CPD Support Offered and Used by Sonographers, 2021-2024



	Public Hospital			Private Practice		
	Paid in Full	Partially Paid	Used in 2024	Paid in Full	Partially Paid	Used in 2024
Sample	231			721		
Conference Leave	56%	20%	49%	27%	18%	44%
National Conference Registration Fee	25%	30%	33%	23%	34%	46%
Support to Present at Conferences	23%	21%	19%	17%	15%	13%
Attendance at Local Professional Development	20%	24%	35%	17%	26%	50%
National Conference Travel & Accommodation	16%	29%	27%	13%	28%	35%
Attendance at International Professional Development	13%	24%	23%	8%	23%	24%

Are any of the following employee benefits paid for by your employer? (2024 n=973)  
Did you access or use this paid support in the last year? (2024 n=various)

Results are significantly higher / lower than other groups at 95% confidence interval

Public sector sonographers receive more conference funding but are less likely to use it than private practice colleagues.

Overall, over half of sonographers indicated that their employers fund, either partially or in full, leave (53%) and fees (56%) to attend national conferences. However, while over half of those working in public hospitals indicated that their leave was funded by their employer (56%), this compares to only 27% of those working in private practice.

Similar proportions indicated that their fees were fully funded (25% for public hospitals and 23% for private practice). Despite this, fewer respondents in public hospitals took up this offer when available over the last year (33%) than those in private practice (46%).

Sonographers in public hospitals (44%) are significantly more likely to receive financial support (paid either partially or in full) to present at a conference than their colleagues in private practice (32%). As a result, public sector sonographers were slightly more likely to use this support in 2024, at 19% compared to 13%.

While support provided by public and private employers to attend local professional development opportunities is similar, half of sonographers in private practice used financial support to attend a local professional development activity, compared to 35% of those in public hospitals. Private practice sonographers were also more likely to use financial support for travel and accommodation costs associated with attending a national conference.

By practice area, obstetrics & gynaecology sonographers were more likely than others to have their employer fund (either partially or in full) attendance at an international professional development activity (47%). In contrast, cardiac sonographers were less likely than others to have national conference registration fees covered (40%).

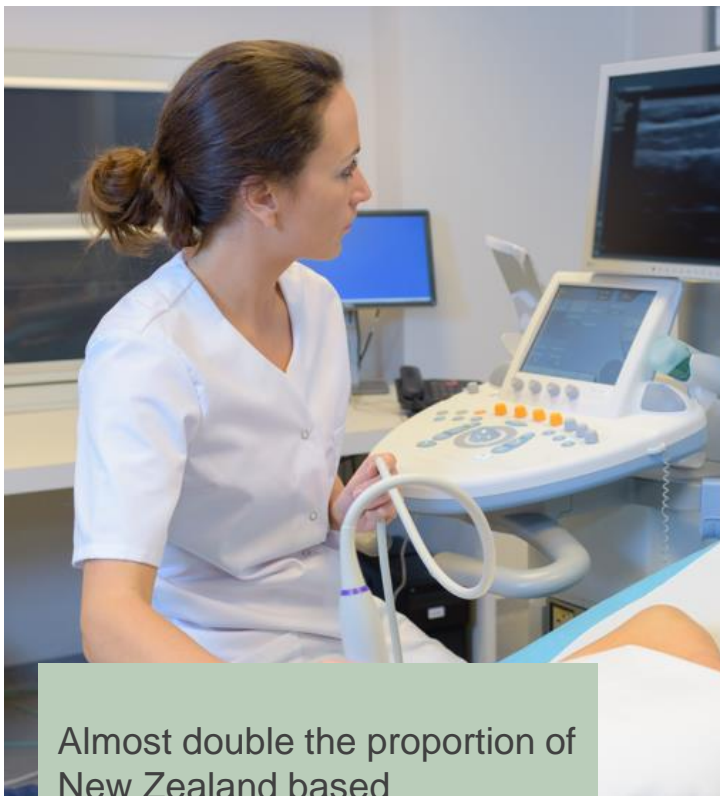
New Zealand based sonographers are significantly more likely to have their employers fully fund their CPD costs.

Over three quarters of New Zealand sonographers (76%) have their national conference registration fees fully funded by their employer. This compares with only 18% for their Australian colleagues, who are instead more likely to have their fees only partially funded (34%, compared with 19% for New Zealand).

New Zealanders are also more likely to be offered full financial support for conference leave, conference related travel and accommodation, support to present at conferences and attend local professional development than Australians.

When it comes to international professional development, New Zealand based sonographers are also significantly more likely to be offered full (56%) and partial (35%) funding than their Australian based colleagues (4% and 22% respectively).

In addition to being more likely to receive full funding, a higher proportion of New Zealand sonographers offered financial support chose to use access this funding over the last year. This is particularly true for conference leave (71%), and support to attend a local (67%) and international (45%) professional development activities.



Almost double the proportion of New Zealand based sonographers (64%) are satisfied with the level of support they receive for CPD, compared to their Australian based colleagues (34%).

	Australia			New Zealand		
Types of CPD support, 2024	Paid in Full	Partially Paid	Used in 2024	Paid in Full	Partially Paid	Used in 2024
Sample	870			100		
Conference Leave	30%	19%	41%	66%	18%	71%
National Conference Registration Fee	18%	34%	41%	76%	19%	55%
Support to Present at Conferences	15%	17%	16%	49%	17%	17%
Attendance at Local Professional Development	12%	26%	41%	69%	22%	67%
National Conference Travel & Accommodation	8%	28%	32%	69%	25%	44%
Attendance at International Professional Development	4%	22%	16%	56%	35%	45%



# Reasons for Not Accessing CPD Support

## Financial & Administrative Concerns

Financial barriers are common among respondents who do not use their CPD support, with many indicating that the CPD allowance does not cover all expenses leaving them to self-fund the remainder. Some were also deterred by the complexity of the application and reimbursement processes.

“The cost of a conference attendance is now too expensive and only partially covered by my employer. I chose to do online CPDs and attend local meetings instead.” (General, Private)

“It is very hard to apply for it and they take so long to approve it. Also only working part-time - I am only entitled to part payment.” (General, Private)

“We get a capped amount to spend on CPD. I will wait until next financial year before I do another conference so I can afford it.” (General, Private)

## Personal Choice and Circumstances

Personal circumstances, such as health issues, maternity leave, or simply the choice not to attend a conference, were reasons why some members did not use the CPD allowance.

“I was too busy at work with no sonographer cover; we own/run the practice.” (General, Private)

“I am a student and don't need CPD. Although many staff don't use CPD leave as they make it hard to access.” (General, Private)

“I have finished my CPD for the triennium, so I did not need to use the allowance this year.” (General, Private)

## Professional Development Preferences

Many respondents chose not to use the CPD allowance because they preferred other professional development opportunities or felt that the offerings covered by the allowance were not relevant or valuable to their specific needs.

“I did not need to utilise the CPD allowance this year because I completed all my required CPD points through online webinars.” (General, Private)

“I chose to go to an international conference rather than a national one.” (Obstetrics & Gynaecology, Private)

“I have either paid for webinars myself that were affordable or attended free educational activities.” (Obstetrics & Gynaecology, Private)

## Travel and Time Constraints

Travel requirements and time constraints were deterrents for other sonographers, particularly those with family commitments or those living in remote areas. Others mentioned it was hard to leave work for conferences that required extensive travel.

“It's way more expensive to travel interstate for conferences than just taking the leave. It's much more complicated logistically with a young family too.” (General, Private practice)

“Unable to use conference leave as the conference was on a non-work day, being over a weekend. Not allowed to access it for travel days to a conference.” (General, Private)

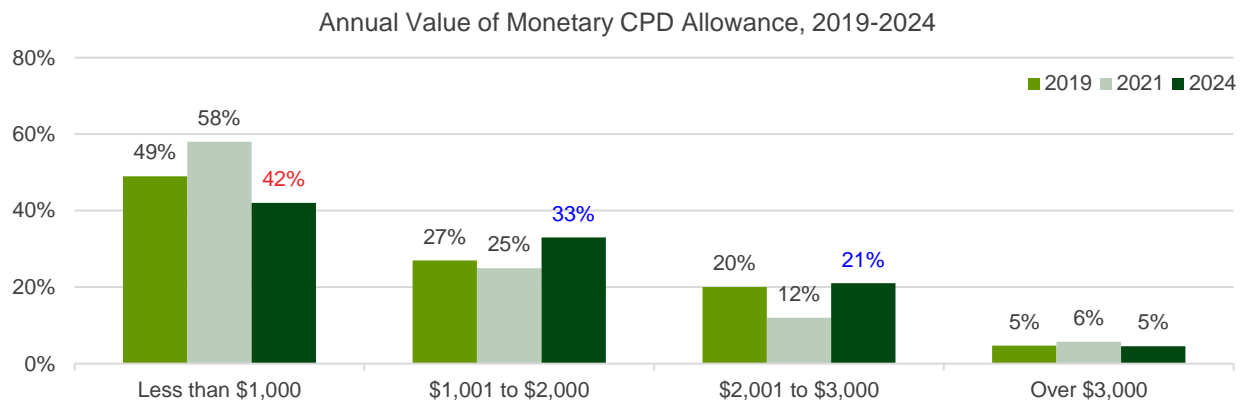
“I live in a rural area and find it difficult to access single-day workshops.” (General, Public)



Approximately a third of sonographers receive a direct monetary allowance for their continuing professional development in 2024.

CPD Allowances

There has been an increase in the value of direct monetary CPD allowances provided to sonographers in 2024. Less than half of sonographers who receive a monetary allowance received \$1,000 or less in 2024 (42%), down from 58% in 2021. Instead, there has been significant increases in the proportions receiving \$1,000 to \$2,000 (33%, up from 25%), and over \$2,000 (25%, up from 17%).



**Sonographers working in public hospitals, and in New Zealand, received the highest CPD allowances.**

Up from \$1,209 in 2021, private practice sonographers received an average annual CPD allowance of \$1,487 in 2024, with the highest proportion receiving a CPD allowance of up to \$1,000 (58%). For sonographers in public hospitals, the CPD allowance rates increased from an average of \$2,266 to \$2,403 in 2024; they most commonly received a CPD allowance of between \$2,001 and \$3,000 (28%), compared with only 12% of those in private practice.

New Zealand sonographers continue to receive a higher CPD allowance than those in Australia. In 2024, 71% of sonographers in New Zealand received a CPD allowance of over \$2,000, compared with 7% in Australia. Conversely, 63% of sonographers in Australia received an allowance of \$1,000 or less, compared with only 6% of sonographers in New Zealand.

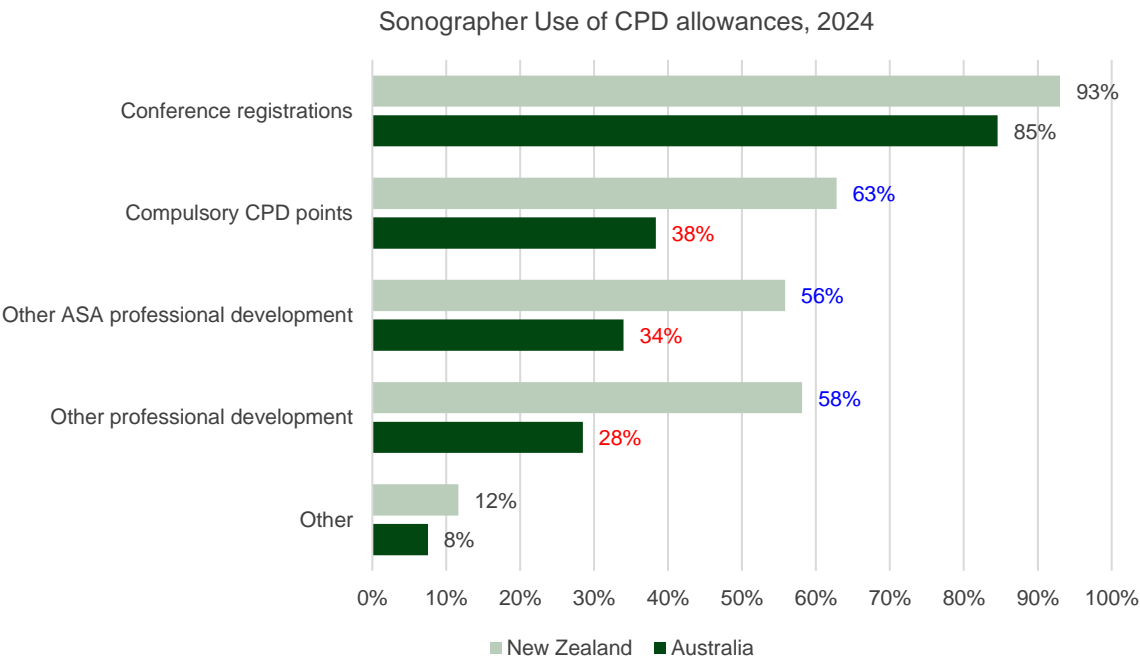
Annual Value of Monetary CPD Allowance, 2024	Public Hospital	Private Practice	Australia	New Zealand
Sample	73	247	243	83
\$0 to \$1,000	25%	58%	63%	6%
\$1,001 to \$2,000	36%	26%	30%	23%
\$2,001 to \$3,000	28%	12%	4%	58%
\$3,001 to \$5,000	3%	3%	1%	11%
Over \$5,000	8%	0%	2%	2%
Average 2024	\$2,403	\$1,487	\$1,352	\$2,653
Average 2021	\$2,266	\$1,209	\$1,169	\$2,610
Average 2019	\$1,547	\$1,480	\$1,157	\$2,584

By year: 2024 results are significantly higher / lower than 2021 at 95% confidence interval  
By employer and country: Results are significantly higher / lower than other groups at 95% confidence interval

Conference registration is the most common use of CPD allowances, in both Australia and New Zealand.

Consistent across locations, conference registration is the most common use of CPD allowances, being utilised by 85% of Australian sonographers, and 93% of those in New Zealand. Among publicly and privately employed sonographers these figure are 82% and 88% respectively.

In 2024, over half of New Zealand sonographers indicated that they used their CPD allowance to assist with meeting compulsory CPD points (63%), other ASA professional development (56%) and other professional development (58%). With a lower overall allowance, less than two in five Australians indicated that they used their CPD allowances for the same purposes. Public hospital sonographers were also more likely to use their CPD allowance for these activities than those working in private practice.



What do you use your CPD allowance for? (2024 n=339)

Results are significantly higher / lower than other groups at 95% confidence interval

**87%**

of sonographers used their CPD allowance for conference registrations, with 44% seeking to secure compulsory CPD points.



06.

Sonographer  
Satisfaction

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## Attracting Sonographers to the Profession

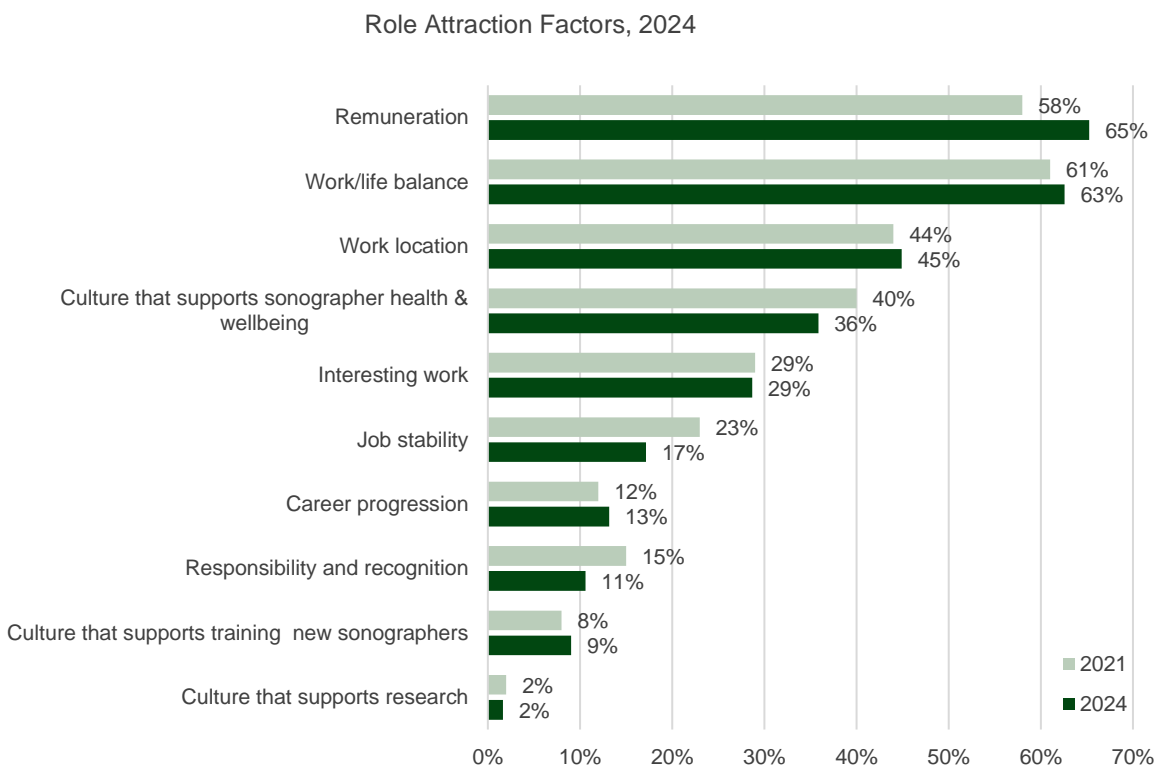
Amid rising living costs remuneration just surpasses work-life balance as the top consideration for sonographers in 2024 when considering a new role.

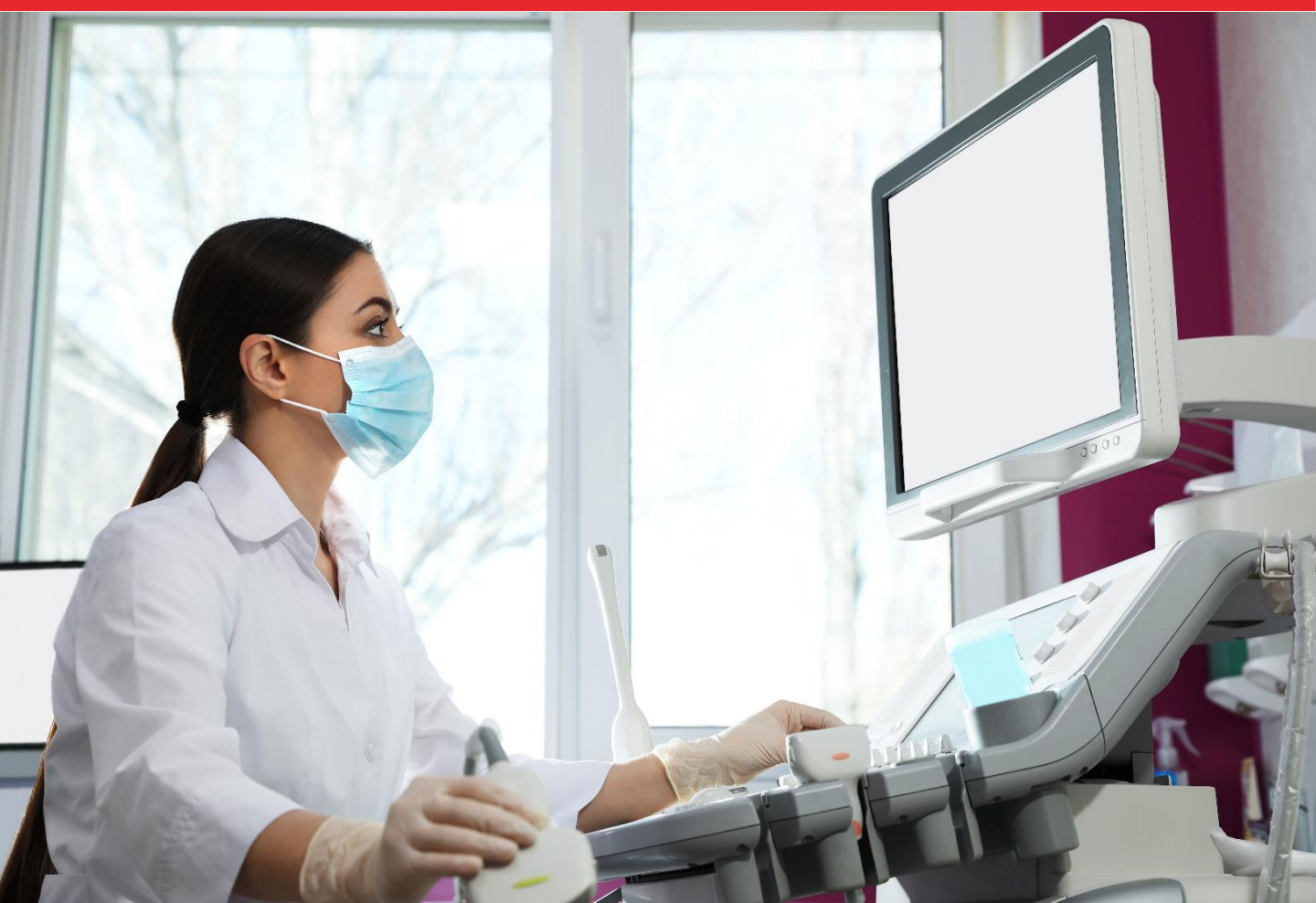
Remuneration and work/life balance continue to be the two most important factors in role related decisions, with remuneration returning to the most important consideration in 2024. This is likely due to a mixture of increasing cost of living pressures, and a reduction in covid related concerns over the course of the last three years.

Up significantly from 58% in 2021, remuneration is important to 65% of sonographers in 2024 and is relatively consistent across locations and sectors. Work/ life balance has remained important to over three in five sonographers (63%, consistent with 61%), with sonographers in rural or remote areas (73%) significantly more likely to rate this as important to them than their colleagues in city or metropolitan areas (57%).

Consistent with 2021, then next most important factors remain work location (45%), a culture that supports sonographer health and wellbeing (36%), and interesting work (29%). The location of their work is particularly important to general sonographers (48%) and those in private practice (50%). In contrast, having interesting work was more important to obstetrics and gynaecology sonographers (42%) and those in public hospitals (42%).

While job stability remains of particularly strong importance for cardiac sonographers (27%), it has dropped in overall importance, from 23% in 2021 to 17% in 2024. The level of responsibility and recognition has also dropped in overall importance (11%, down from 15%), but remains significantly higher for obstetrics and gynaecology sonographers at 20%.





## Job Satisfaction

Employee satisfaction remained relatively stable in 2024, only dropping for satisfaction with career path opportunities.

### Overall Career Satisfaction

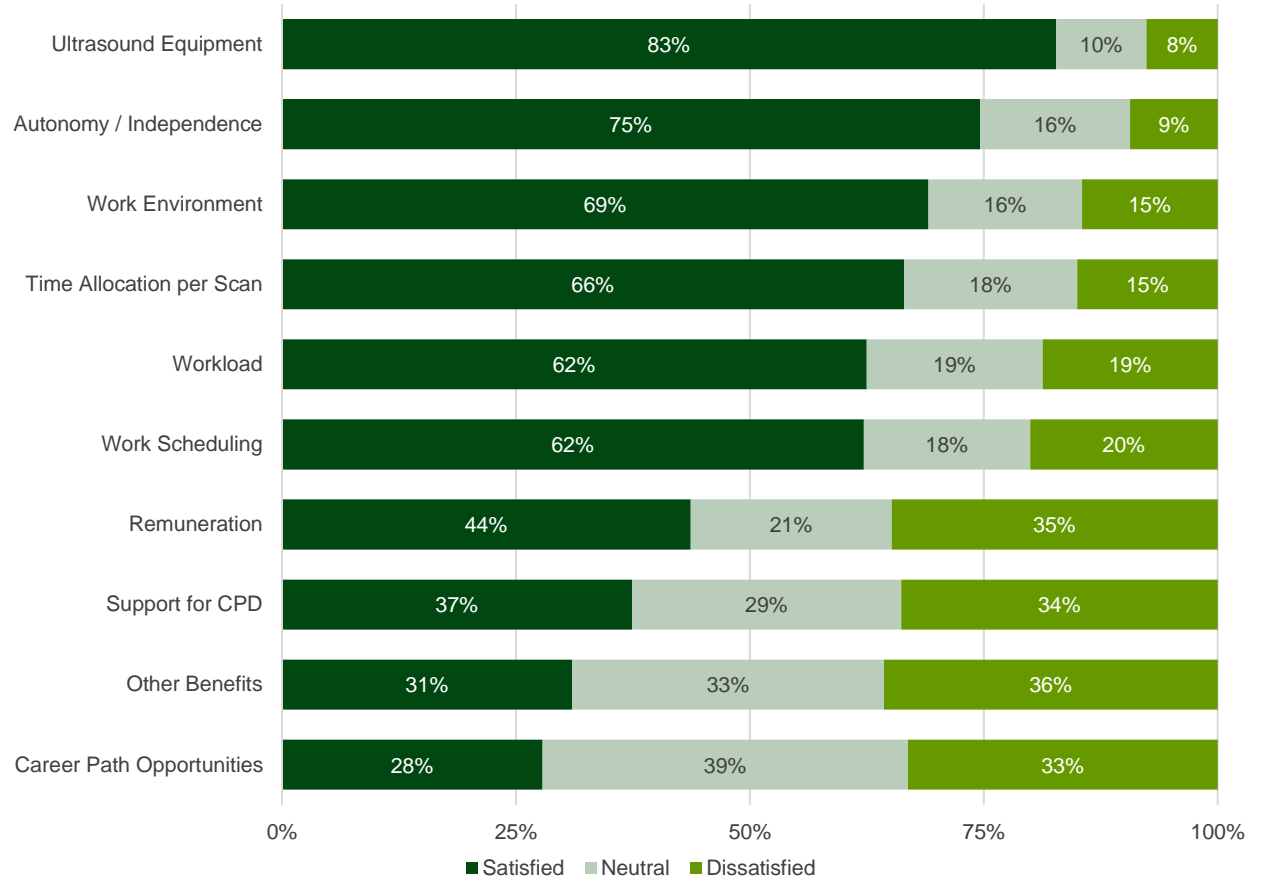
At the overall level, sonographer satisfaction with different elements of their work has remained largely unchanged over the last five years, with over four in five continuing to be satisfied with the ultrasound equipment they use (83%, up from 80%). Satisfaction with their level of autonomy and independence also remains high at 75% in 2024.

Over three in five sonographers continue to be satisfied with their work environment, time allocations, workload and schedules. Although it should be noted that general sonographers (66%) are less satisfied with their work environment than those working in a specialist role (75%). In addition, while three quarters of cardiac sonographers (74%) are satisfied with their work schedules, this drops to less than half (49%) of those specialising in obstetrics & gynaecology.

Down slightly from 49% in 2021, less than half of sonographers are satisfied with their remuneration (44%), although this is roughly consistent across practice area and location. New Zealand based sonographers are more likely than their Australian counterparts to be satisfied with the level of support they receive for CPD (64%, compared with 34%) and other employee benefits (49%, compared with 29%).

In 2024, less than three in ten sonographers are satisfied with their career path opportunities. While roughly consistent across groups, this is down significantly from 34% in 2021.

Sonographer Satisfaction, 2024



Sonographer Satisfaction (Top 2 Box Score)	2012	2014	2017	2019	2021	2024
Sample				1197	1153	973
Ultrasound Equipment	78%	78%	75%	81%	80%	83%
Autonomy / Independence	65%	61%	75%	75%	73%	75%
Work Environment	64%	65%	64%	70%	69%	69%
Time Allocation per Scan				72%	70%	66%
Workload	62%	60%	59%	68%	64%	62%
Work Scheduling	57%	57%	66%	64%	61%	62%
Remuneration	48%	45%	49%	51%	49%	44%
Support for CPD	42%	41%	40%	48%	38%	37%
Other Benefits	39%	28%	31%	35%	32%	31%
Career Path Opportunities	29%	27%	39%	33%	34%	28%



Sonographers in private practice tend to have slightly higher satisfaction than those working in public hospitals.

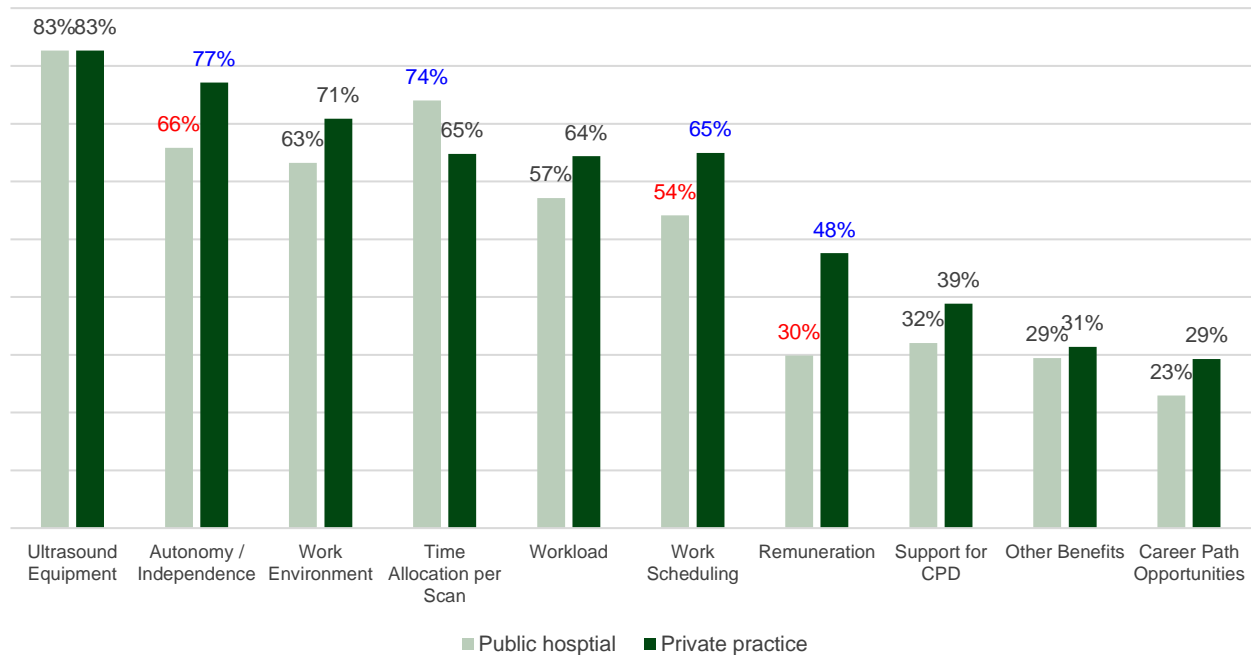
At 83%, sonographers in public hospitals and private practice were similarly satisfied with the ultrasound equipment they use. However, there were notable differences among other aspects of their employment.

In particular, private practice sonographers were more satisfied with their level of autonomy (77%), work schedule (65%) and remuneration (48%) than their colleagues in public hospitals (66%, 54% and 30% respectively). The difference in satisfaction with remuneration reflects the higher average annual salary and hourly rates paid in the private sector.

In contrast, sonographers in public hospitals (74%) tend to have higher satisfaction with the time allocated per scan than those working in private practice (65%).

While satisfaction across all elements has remained relatively consistent with 2021 for private practice sonographers, satisfaction among those in public hospitals has declined significantly for remuneration (30%, down from 51%), support for CPD (32%, down from 43%), other employee benefits (29%, down from 48%), and career path opportunities (23%, down from 34%).

Sonographer Satisfaction by Employer, 2024



How satisfied are you with the following in your job? (2024 n=973; 2021 n=1153; 2019 n=1197) Results are significantly higher / lower than other groups at 95% confidence interval

# Comments about Job Satisfaction

## Compensation & Benefits

Compensation and benefits are frequently mentioned as a source of dissatisfaction among sonographers. Many respondents feel that their pay does not adequately reflect the level of responsibility, skill and physical demand required by the job.

“For our expertise in a highly niche field with significant responsibilities, we are very much underpaid when compared to other professions.” (General, Private)

“I feel sonographers are vastly underpaid. I do not feel overpaid, but I feel I am paid the correct amount for the complexity of work I do.” (General, Public hospital)

“I feel like despite recently doing masters and being able to bring in additional services to the company, I wasn’t rewarded with a raise increase.” (General, Private)

## Work Life Balance and Stress

Many comments highlight the challenges of maintaining a healthy balance due to long hours, high workload, and the physical and mental demands of the job. Respondents also mention the lack of flexibility in work schedules.

“I find the job mentally and physically draining and have been considering leaving the profession. I deeply struggle with the lack of flexibility in the job and find I’m so overwhelmed while I’m at work.” (General, Public)

“Demanding patients and lack of staff is making life as a sonographer difficult. I can’t wait to reduce hours further and retire.” (General, Private practice)

“No work-life balance flexibility. Unable to work from home.” (General, Public hospital/department)

## Working Conditions and Equipment

Other respondents report inadequate facilities, unsupportive management, staffing shortages and poorly maintained equipment, which hinder their ability to perform effectively. The combination of suboptimal environments, lack of support and outdated or insufficient scanning equipment diminishes job satisfaction.

“The equipment is inconsistent and variable. It varies from site to site and from machine to machine. It affects the standardisation and accuracy of the scans.” (Vascular, Public)

“My main issue is being continually short staffed, so only one room will run instead of 2...”

“I submitted my resignation with my current employer due to the current understaffing situation in our department, excessive workload, unreasonable ultrasound requests, and lack of hospital management support in addressing these issues.” (General, Public)

## Physical and Mental Wellbeing

The physical and mental health of sonographers was also mentioned, with many reporting injuries related to the physical demands of scanning. Comments often mention musculoskeletal issues, mental strain, and the lack of adequate support to mitigate these health concerns.

“Workplace injury through scanning continues to be a significant problem. Even with care and support services in place, all of us suffer injury.” (General, Private)

“Breaks are essential for OHS, especially as you get older, even if you scan smarter. Very physical job. MSK injury symptoms occur after work and hard to prove it happened at work.” (General, Public)

“Not enough attention to physical wellbeing. Particularly high BMI patients and patients with high acuity.” (General, Public)



Despite the various challenges highlighted by respondents, many sonographers express satisfaction with their work and overall employment.

Comments provided by this group reflect a sense of fulfillment, appreciation for supportive workplace environments, and positive relationships with colleagues and management. Sonographers who are satisfied often cite factors such as a good work-life balance, opportunities for professional growth, and the intrinsic rewards of patient care. This highlights that, while there are areas for improvement, many sonographers still find joy and satisfaction in their roles, especially when they feel valued and supported.

"I love my job and am satisfied with the scan times allocated. The work environment is the most supportive I have encountered in 30 years as a health professional." (Obstetrics & Gynaecology, Public hospital)

"I really enjoy my work and the team I work with." (General, Private practice)

"I am extremely lucky to work in such a supportive environment doing a job I love." (Obstetrics & Gynaecology, Private practice)

"It is a great career as long as the workload is reasonable." (General, Private practice)

"Love being a sonographer and my place of work is excellent" (Vascular, Private)

# Workplace Environment

Despite workforce growth, unfilled sonographer roles and workplace injuries rise in 2024.

## Workload and Staffing Indicators

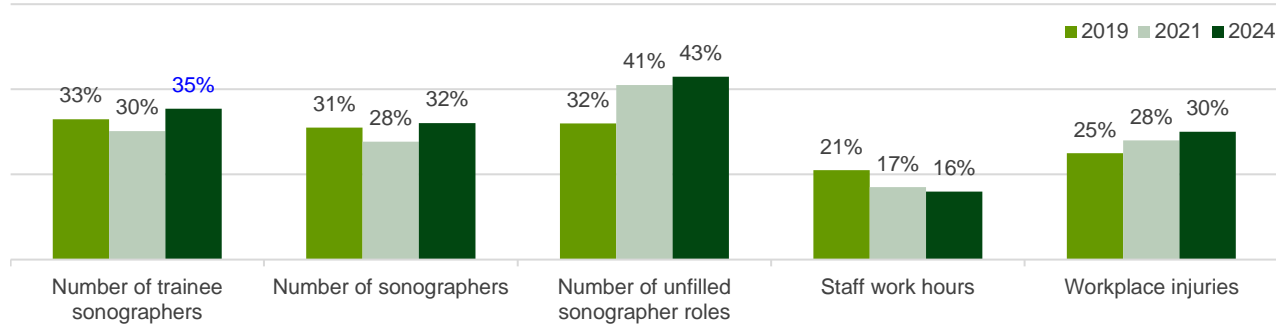
Approximately a third of sonographers indicated there had been an increase in the number of trainee (35%) and fully qualified sonographers (32%) at their workplace. Despite this, 43% of sonographers reported that there has also been an increase in unfilled sonographer roles over the last year. This increases to 53% in public hospitals, where respondents were also less likely to say there had been an increase in the number of both trainee and fully qualified sonographers.

Subsequently, most sonographers (72%) indicated that there had been no change to the hours staff work at their workplace, with 16% saying hours have increased. The increase in staff work hours was most pronounced in public hospitals, with 22% of sonographers in these settings saying staff work hours had increased over the last 12 months.

The number of respondents reporting that the number of workplace injuries had increased was also up, at 30%. Again, this was higher in public hospitals with 40% reporting an increase in workplace injuries over the last 12 months.

On average, sonographers reported that approximately 15% of sonographer positions at their workplace remain unfilled. Potentially reflecting the lower rates of pay in the public system, this increases to 18% in public hospitals and compares to an average of 14% in private practices.

Increase Workload and Staffing Indicators, 2019-2024



	Public Hospital			Private Practice		
Workload and Staffing Indicators, 2024	Decrease	No change	Increase	Decrease	No Change	Increase
Sample	231			721		
Number of Trainee Sonographers	16%	53%	31%	12%	51%	38%
Number of Sonographers	39%	34%	27%	31%	35%	34%
Number of Unfilled Roles	11%	36%	53%	13%	47%	40%
Staff Work Hours	8%	70%	22%	7%	79%	14%
Workplace Injuries	0%	60%	40%	2%	71%	27%

Please indicate if there has been an increase, decrease or no change in the following at your workplace in the last year. (2024 n=973; 2021 n=1151; 2019 n=1197). Don't know responses excluded. 2024 results are significantly higher / lower than 2021 at 95% confidence interval

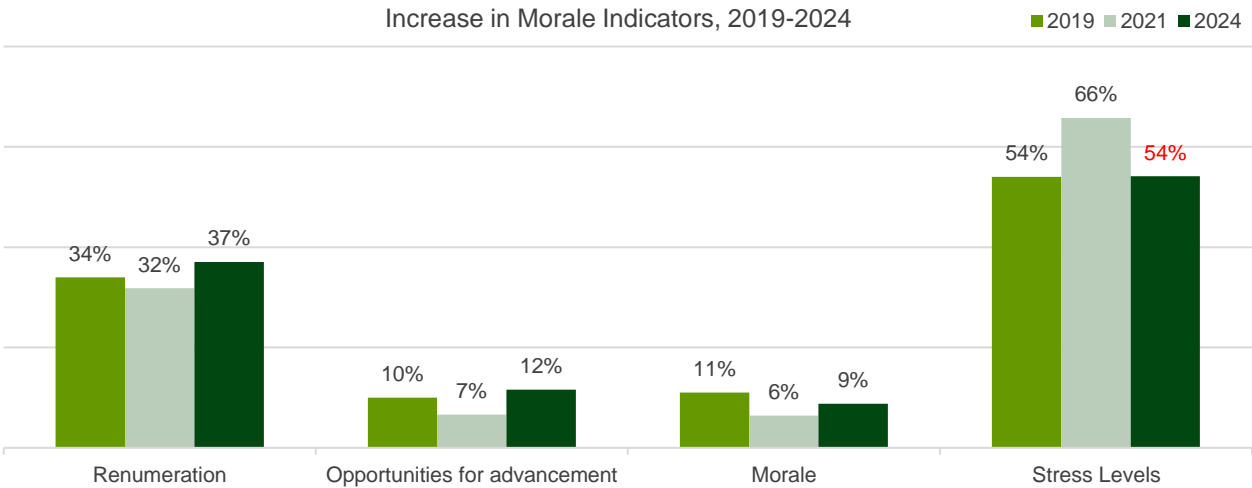
Over half of sonographers reported an increase in stress levels amongst staff at their workplace over the last 12 months.

Morale Indicators

While down significantly since 2021, with evident staffing and workload challenges the proportion of sonographers who reported that stress levels had increased at their workplace over the last 12 months remained high, at 54%. Stress levels appear higher in public hospitals, with almost two thirds (65%) of public sector sonographers saying stress levels at their workplace were up.

At the same time, while an increasing proportion of sonographers accepted that remuneration had increased over the last 12 months, few reported that the opportunities for advancement were improving. Despite an increasing number of unfilled roles, three quarters (76%) said there had been no change to their career prospects over the last 12 months.

As a result, only one in ten have noticed an increase in morale (9%) at their workplace. While this is up slightly from 6%, a majority (50%) said morale was lower. Again, this appears to be particularly acute in public hospitals, where 62% of sonographers indicated morale had fallen.



	Public Hospital			Private Practice		
Morale Indicators, 2024	Decrease	No change	Increase	Decrease	No Change	Increase
Sample	870			100		
Remuneration	4%	71%	25%	2%	57%	41%
Opportunities for Advancement	18%	74%	8%	13%	75%	13%
Morale	62%	32%	6%	46%	45%	9%
Stress Levels	2%	33%	65%	4%	46%	50%

There were very few differences in how working conditions have changed for Australian and New Zealand sonographers in 2024.

While 37% of sonographers in Australia indicated there has been an increase in the number of trainee sonographers at their workplace over the last year, only 19% of those in New Zealand reported a rise in their own workplaces. Similar proportions reported an increase in the number of qualified sonographers (32% in Australia and 29% in New Zealand). The trend in staff hours worked and workplace injuries were also consistent.

Approximately half of responding sonographers in both counties reported that stress levels are higher and morale is lower at their workplace.

The proportion of sonographer roles that remain unfilled in workplaces across Australia (15%) and New Zealand (14%) is similar, at approximately 1 in 6.

	Australia			New Zealand		
Change in Working Conditions, 2024	Decrease	No change	Increase	Decrease	No Change	Increase
Sample	870			100		
Staffing Indicators						
Number of Trainee Sonographers	13%	50%	37%	14%	67%	19%
Number of Sonographers	33%	35%	32%	35%	37%	29%
Number of Unfilled Roles	12%	45%	43%	16%	41%	43%
Staff Work Hours	7%	77%	16%	11%	74%	15%
Workplace Injuries	2%	68%	30%	0%	68%	32%
Morale Indicators						
Remuneration	3%	61%	36%	1%	51%	48%
Opportunities for Advancement	15%	74%	12%	9%	79%	12%
Morale	49%	42%	8%	53%	34%	13%
Stress Levels	3%	43%	54%	6%	38%	56%

Please indicate if there has been an increase, decrease or no change in the following at your workplace in the last year. (2024 n=973). Don't know responses excluded.

Results are significantly higher / lower than other groups at 95% confidence interval





“I feel that sonographers everywhere I talk to are feeling pressured to work faster and they are fearful of reduced work quality and therefore patient care being compromised. I have seen a lot of stressed and unwell sonographers more and more..”

General, Private Practice

# Comments About Workplace Environment

## Workplace Morale

Many respondents expressed dissatisfaction with the increasing pressure to perform more tasks in less time, leading to a decline in morale.

“ "Corporatisation of our clinics has had a negative impact on staff morale." (General, Private Practice)

"Decreased workplace morale." (General Sonography, Private)

"Morale is low throughout the team." (General, Private)

"With staff that have left, approx 15 in the last 2 years and no replacement of staff, we are now overworked and feeling dissatisfied" (Obstetrics & Gynaecology, Private)

## Staffing Issues

Many respondents reported understaffing and the strain it places on existing staff. The comments highlighted difficulties in filling vacant positions, reliance on locum staff, and the resulting impact on the workload and patient care.

“ "Being constantly understaffed is preventing any positive change occurring in this department." (General, Public)

"We are very understaffed, resulting in more stress in vetting referrals." (General, Public)

"Staff have left in droves and not been replaced. Leave is limited, and morale is appalling." (General, Private)

'Almost all sonographers have left to work in private settings as the pay in public is so poor. At the public site we are understaffed daily. (General, Public)

## Patient Care & Workflow

Many comments revolved around increased pressure to perform more scans in less time, which respondents felt was compromising the quality of care.

“ 'Focus on numbers has increases, rather than focus on patient care." (General, Public)

"Overall, patients are getting more complex and difficult to scan, but time allocations have not changed." (General , Public)

"The pressure to work faster and do more scans is definitely being felt." (General, Private)

## Workplace Management

Other respondents indicated that management issues such as poor communication, lack of support, and ineffective leadership were leading to increased stress and dissatisfaction among staff.

“ "New management with poor management/people skills has resulted in more staff leaving." (General, Private)

"Poor management has led to a loss of many qualified staff, especially as the remuneration in the public system isn't comparable to private." (General, Public)

"The tension between sonographers and management has increased, making it anxiety-inducing at times." (Obstetrics & Gynaecology, Public)

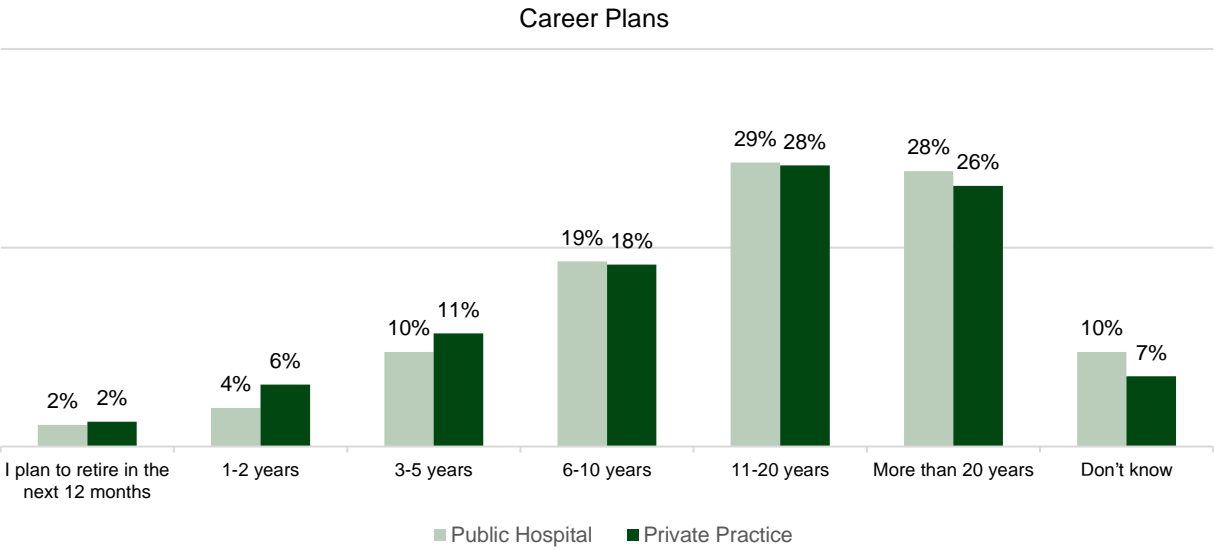
# Future Plans

Over half of sonographers plan to stay in the profession for at least another 10 years, although obstetrics and gynecology specialists are more likely to be considering a departure within the next 2 years.

## Career Plans

Sonographers in public hospitals and private practice exhibit similar career plans, with most expecting to continue working in the profession for more than 10 years. A slightly higher percentage of private practice sonographers (8%) plan to retire within the next 2 years compared to those in public hospitals (6%). Public hospital sonographers are slightly more likely to be uncertain about their retirement plans (10% compared to 7% in private practice).

While there are also few differences in the career plans of sonographers across the different specialties, 15% of sonographers specialising in obstetrics and gynecology indicated they plan to leave the profession within the next 2 years. This compares to only 7% of both general and cardiac sonographers. At least half of general sonographers (55%), cardiac sonographers (50%) and obstetrics and gynecology sonographers (50%) expect to continue working in the profession for at least another 10 years.



How many more years do you expect to continue working in the profession? (2024 n=973.

## ABOUT

Survey Matters specialise in providing services to associations and not for profit organisations, their customers and members.

Survey Matters have helped a wide range of associations understand their value proposition - what is important to members, how the association can help them and how satisfied they are with their associations' performance. We also work with associations to generate and build industry data and knowledge to support advocacy, promotion, industry development and marketing activities.

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