



# British Medical Ultrasound Society

NEWS

www.bmus.org – Spring 2015

News from  
the North

**BMUS  
2015**

Grumpy Old  
Ultrasound  
Consultant

2016 COUNCIL  
NOMINATIONS

Saving  
the Rhino

**Journal  
Prize 2015**



# News from the North

**H**ello again from a spring-like Edinburgh. As I write this piece, the general election is only 13 days away and by the time this newsletter lands on your desk at work or home, a new government will be in place. In Scotland, despite our referendum vote in September, there is still significant appetite for political debate, much of which is centred on future funding for the NHS. The report by Simon Stevens, head of the NHS in England on the 5-year forward view of the NHS, appears to be having significant political coverage. Let us hope that the financial promises made to the NHS in this election year by all parties turn to real commitments over the next 4 years whoever is in power.

Interestingly, after my last newsletter piece when I commented on seeing Gail ter Haar on the news discussing focused ultrasound, the technique seems to be popping up more and more in the news and research journals. Last night I received my monthly newsletter from the Focused Ultrasound Foundation along with their annual report. The report highlights strides made in research using focused ultrasound for brain disorders and cancer treatments. Although still an early stage technology, ongoing clinical trials suggest significant benefits for treatment of breast tumours, soft tissue tumours and psychiatric disorders, once more demonstrating the versatility and utility of ultrasound in the clinical arena.

News from Europe is that BMUS members are eligible to compete for the EFSUMB best published paper prize. Details of this competition are on the EFSUMB website

(<http://www.efsumb.org/research/prize-bestpublished.asp>) but essentially this prize is for a research ultrasound paper published since Nov 2012. Please submit your potential paper nominations to the BMUS office by 12th June 2015 to compete to be the British entry to this European competition – (perhaps we should call this our Eurosound nomination!)

It also gives me great pleasure in this newsletter to invite nominations for Honorary Membership of BMUS. BMUS members are invited to be Honorary members if they have contributed in a sustained and substantial manner to the development and practice of ultrasound in medicine and biology and also to the work of BMUS. Nominations for honorary membership should be accompanied by 500 words of text explaining why Honorary membership is justified. The closing date for submission of nominations is 30 September with announcements of new Honorary members at the annual scientific meeting.

And finally, you will see the call for abstracts for our annual scientific meeting is included in this Newsletter. Our dedicated Scientific Organising Committee are putting the final touches to the 2015 annual scientific meeting program and social events. We look forward to seeing you in Cardiff from 9-11th December, whether it is your first meeting or you are a seasoned BMUS ASM attendee.

**Carmel Moran**  
BMUS President

## 2016 COUNCIL NOMINATIONS

**Y**ou will notice that this year there is not a call for Council Nominations within this *Ultrasound* journal / BMUS Newsletter mailing. This is due to the change in the BMUS Constitution at the end of 2013, and as such we find ourselves this year with a full Council membership until the end of 2016.

The first anticipated vacancies that will occur, will now be at the end of 2016 (for the period 2017 – 2019), and as usual a call for nominations will be made during May 2016. Please look out for the nomination paper in our May mailing and on our BMUS Website.

However, should you wish to get more involved in any of the work that BMUS is currently engaged in, there are currently vacancies on our Website Group, Safety and Science & Education Committees. Should any of these groups be of interest please contact me at [joy@bmus.org](mailto:joy@bmus.org) and I will be pleased to put you in touch with the Chair of the group concerned.



*Obituary:***Dr P L Allan - FRCR, FRCP**

Past President of the British Medical Ultrasound Society.

Born 26th August 1950 in Barrow-in-Furness

Died 12th January 2015, age 64 in Edinburgh

It is with great sadness that we report on the death of Paul Allan earlier this year, a much loved figure, well respected radiologist with a specialist interest in Ultrasound and a former President of this Society.

Paul was born and raised in Barrow-in-Furness and began his medical training at University College London where he graduated in 1974. His junior medical posts were based in London and Southampton combining both obtaining his MRCP and meeting his wife Helen, whom he married in 1978. Shortly after he announced that they would be moving to Edinburgh, for a couple of years only, so he could begin his career in radiology, a career which was to become synonymous with excellence, establishing the city as a major ultrasonic centre within the UK and more personally, himself, as a well-respected national and international figure in ultrasound.

Having obtained his FRCR in 1982 he was appointed as a Senior Lecturer in medical radiology and Honorary Consultant at Edinburgh Royal Infirmary in 1983. His remit was to develop the role of ultrasound, something he did with a joy, passion and enthusiasm that continued for throughout his career. As the only radiologist at that time with an interest in this field, he developed the service essentially from nothing introducing many new techniques in particular within the vascular and biopsy fields, establishing techniques which today we now largely take for granted. He recalled many a time, often over a few drinks in the bar late at night, his fondness for these early ultrasonic days, before real-time machines, colour Doppler imaging, elastography and other

techniques were even thought of. His skills were in demand and valued by both his radiological and clinical colleagues and his prodigious appetite for work, willingness to be available at any hour of the day or night, whether on call or not made him a highly valued appreciated and indispensable individual and it is no surprise his one primitive ultrasound machine stuck in the corner somewhere developed over time into a highly respected department consisting of 5 ultrasound machines continually in use.

Anyone who knew Paul could see he had a fantastic work ethic but was also extremely approachable, friendly, with an easy manner. He used those characteristics serving the British Medical Ultrasound Society with distinction for many years including as Honorary Treasurer, then as President in 1998 – 2000 leading the Society, at the time when its influence was perhaps at its peak. He represented the Society both at home and in Europe and was a great teacher of ultrasound. There is probably no one who was a member of BMUS at that time who didn't know Paul in one way or another and his passion with ultrasound continued for his entire career as he attended the annual BMUS meetings long after his committee work was completed, renewing old friendships, making new ones and appraising himself of all the emerging techniques within the various ultrasonic fields.

Paul also had a very high profile research portfolio having authored 80 peer reviewed papers, 20 book chapters and obtained £3 million in research grants. He published a number of books including Clinical



Doppler Ultrasound which sold more than ten thousand copies and was the lead Editor of the 2011 edition of Clinical Ultrasound, a universally acclaimed definitive UK text book which received a BMA recommendation. A frequent invited speaker at national and international meetings he also helped organise a number within the UK and was also heavily involved in both under and postgraduate medical education for several years in the South East of Scotland.

He was deeply respected and highly regarded in a number of roles in which he served on behalf of the Royal College of Radiologists. He was President of the Scottish Radiological Society 2004 – 2006, Chairman of the UK Training Scheme Assessments and Chairman of the Standing Scottish Committee, the arm of the RCR in Scotland. For nigh on 20 years he was the RCR in Scotland. He was Clinical Director of Radiology for Edinburgh and Lothian for the last 14 years a thankless task but one he bore with his usual combination of cheer and optimism.

Paul had many outside interests, in a sporting sense having played rugby when younger and following Edinburgh Wanderers, perhaps laterally more in a social rather than competitive manner. He enjoyed walking, and was an enthusiastic computer user for many years. An

*Continued from page 3*

indomitable figure he did not allow either DVT or pulmonary embolus to hamper his lifestyle or optimism.

Paul was a dedicated, hard working individual but with a great sense of fun and a willingness to enjoy the odd piece of downtime. He was very welcoming to all around him and was a great ambassador for the Society and the conversation never dipped when Paul was in the room. He could be reliably found after most

meetings for a chat and a drink which often continued to the early hours of the morning and was always relaxing and entertaining, thus allowing his friendly optimistic approach to life to come to the fore. Paul's glass was always half full.

Laterally he started to prepare for retirement and had only begun to reduce his work when we learned of his sudden death. He will be sorely missed by his many colleagues

and friends but in particular by his wife Helen and sons Nicholas and Christopher, of whom he was extremely proud.

His passion for ultrasound and BMUS is recognised, appreciated and will not be forgotten. He will be remembered and missed as an individual and for his contribution; a great man, friend and colleague to many, with a first class work ethic and a wry sense of humour.

## Grumpy Old Ultrasound Consultant

### *Chapter 3. The ultrasound request card.*

Surely I cannot be alone in my irritation with the ultrasound request card? We now have a new request form imposed upon us for patients referred with a clinical suspicion of urological cancer. The new form runs to five sides of A4 paper and contains a vast amount of information, virtually none of which is of any interest to the poor sod actually doing the scan. The clinical details section of the form now comprises a tick-box to indicate the organ in which the cancer is suspected (kidney, bladder, testis etc.), and an optional dialogue box which may, or may not, contain a few fragments of clinical information. With my rapidly failing near-vision it usually takes me about five minutes to find the relevant part of the document after I have enjoyed perusing the cut and pasted information that the patient was diagnosed with hypertension and haemorrhoids in 1961, and that their prescription for Prozac wasn't renewed eighteen months ago.

I don't need to tell a BMUS audience how important relevant (brief) clinical information is in interpreting an imaging investigation. As an example of this we scanned a fit middle-aged patient and identified a large left supra-renal mass as an incidental finding. The lesion was thought to be adrenal in origin and after CT, MRI and extensive biochemical investigations an MDT decision was made advising laparoscopic adrenalectomy. By chance, my colleague reviewed an old request card on the patient stating that she had undergone a left adrenalectomy (benign adenoma) some fifteen years previously – the patient remembered the surgery although was unsure of its nature. After a rapid MDT review, in light of the new clinical information, the imaging of the mass was considered to be consistent with an old post-operative haematoma. Surgery was cancelled and the mass has been stable on imaging ever since.

We all know the frustration of searching for a gallbladder in a patient with "RUQ pain,? cholecystitis" on the request form before we discover that the patient had a cholecystectomy ten years ago. In ultrasound we have the luxury of being able to talk to our patients and

examine their abdomens for evidence of "the smoke of surgical battle"; this is not possible when reporting other imaging studies. A radiology friend at another hospital has recently audited all the imaging requests for trauma CT at his Level 1 trauma centre over a two year period with respect to the minimum clinical data set required (taken from the RCR document on Trauma Imaging). How many request cards met the minimum clinical information required as the audit standard? Wait for it.....: 0%.

My irritation reached a peak last week when the clinical information supplied for an abdominal ultrasound study was the single character "?". How did this get through our ultrasound protocol procedure? Simple, we are all too busy to spend the time required trying to contact referrers to get additional clinical information to justify the study and it is easier just to agree to do it. Should we be more militant and return cards to the requestor if the clinical details are inadequate? – Probably but it is the patient who will suffer with additional diagnostic delay. I recently overheard a surgical F2 trainee talking to a friend saying "it's great working here you can get [a CT or ultrasound of] almost anything day or night". In my opinion this is a dreadful thing to hear for too many reasons to list.

Mrs Grumpy Old Consultant, who is kind enough to listen to these BMUS Newsletter rants (and tone them down) frequently asks why we have allowed this to happen to us. I don't have a good answer for her; ultimately we control the service and are responsible for its quality. We should resist the imposition of new request forms where we have not been consulted in their design, demand that we are given adequate clinical information (by a clinician who has actually seen and examined the patient) and let the referrer know when they do not meet the standards we need to work efficiently and safely. Too much trouble? - Perhaps, but standards will only improve if we take a firmer stance – bring on the revolution.

*Until next time, stay well.*

**Simon Freeman**  
BMUS President Elect

# BMUS 2015 update

The teaching elements of the scientific programme are now almost complete and you will have received the Call for Papers with this May journal.

**Day 1** will have Abdominal, Professional Issues and Physics streams, together with DVT training workshops. Abdominal sessions will include complementary cross-sectional imaging techniques, practical guidance on new technologies and frequent or important errors. Professional Issues sessions will include discrepancy management and a medico-legal masterclass. New technologies, safety, standards and the Sonography/Physics interface will be discussed in the Physics sessions. In the final session of the first day we are delighted to welcome Professor Peter Wells, who will be delivering the Donald, MacVicar and Brown lecture.

**Day 2** streams are Paediatrics, Head and Neck, Quality Issues, Gynaecology and Vascular, including sessions on the acute paediatric abdomen and the paediatric urinary tract, salivary glands and larynx, demand management, current issues and advances in ultrasound of the uterus and ovaries, and carotid, venous and non-atherosclerotic diseases. There will be Head & Neck training sessions and a Quality and Governance workshop.

The main streams on the final day are MSK, including fundamental and advanced sessions, and Obstetrics including fetal anomaly screening and a diverse range of other topics. The Peter Twining memorial lecture will be delivered by Dr Trish Chudleigh, who is very well known and respected in the field. There will be a repeat of the popular conundrums session, a quiz and a session on outreach programmes. The integrated training will be on basic and advanced MSK ultrasound.

## Nick Dudley

Scientific Chair BMUS 2015

The BMUS team recently went on a site visit to sunny Cardiff.

Cardiff City Hall sitting pretty in the sun. Spot the ardent sunbather by the fountain...

Cardiff City Hall  
BMUS HQ selfie.



National Museum Cardiff,  
venue for our annual dinner



# Postgraduate Journal Prize 2015

We are pleased to offer a prize for the best article published in Ultrasound in 2015 by a postgraduate student.



Articles may be related to any field of medical ultrasound, but should be:

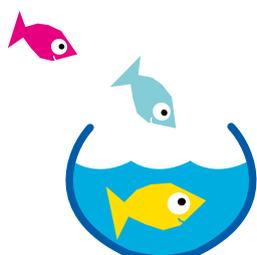
- A review, research paper or case report
- Completed within the last two years
- Supported by your academic supervisor

All articles should be submitted via the Ultrasound on-line Manuscript Central site at: <http://mc.manuscriptcentral.com/ult>.

Please state in your covering letter that you wish your article to be considered for the journal prize. The prize is limited to student entries but does not exclude non-BMUS members.

#### Terms and Conditions:

1. Articles must be published in Ultrasound in 2015.
2. The winner will be announced at the BMUS Annual Scientific Meeting in December 2015. Winners will be contacted within one week of announcing the results.
3. The article must be authored by a postgraduate student or relate to a postgraduate project completed within the last two years.
4. Authors must abide with standard terms and conditions for publication in Ultrasound.
5. The prize is not open to anyone professionally connected with the competition.
6. The judges' decision is final.



We lure  
the best!

**Interested in a working holiday or permanent move to Australia or New Zealand? We have opportunities available in coastal locations, cities and rural areas.**

Exceptional packages for permanent and locum positions including travel and accommodation benefits.

We offer comprehensive professional registration advice and have registered migration agents on staff who can assist you with specialized information.

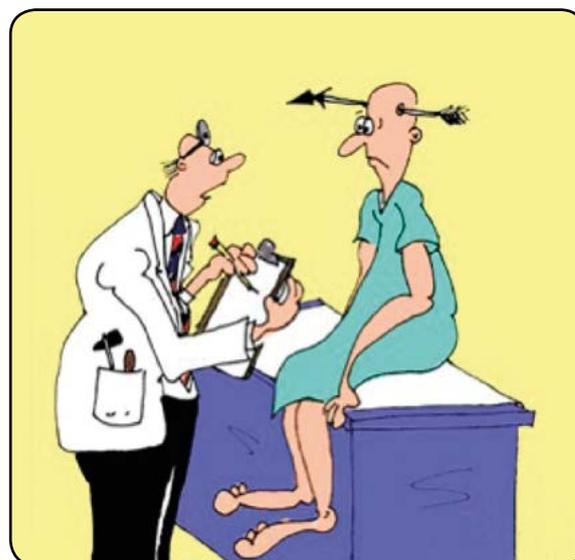
Global Health Source has successfully placed British health professionals in Australia and New Zealand for more than fifteen years.

Call us for an  
informal chat

Freecall Overseas:  
00800 9227 0822

 **global health source**  
allied health recruitment

T +618 9227 0822  
F +618 9227 0833  
E [ghs@globalhealth.com.au](mailto:ghs@globalhealth.com.au)  
[globalhealth.com.au](http://globalhealth.com.au)  
PO Box 8186 Perth WA 6849



"Off hand, I'd say you're suffering from an arrow through your head, but just to play it safe, I'm ordering a bunch of tests."

**EUROSON 2015**  
 27<sup>th</sup> Congress of the European Federation of Societies for Ultrasound in Medicine and Biology (EFSUMB)

**11<sup>th</sup>** Congress of the Hellenic Society for Ultrasound (HSUMB)

**UltraSound UpGRades**  
 prevention/diagnosis/therapy

**Athens Greece, November 6–8**

EUROSON 2015 Athens, Greece, 6-8 November. Call for abstracts and registration. For all conference information visit :- [www.euroson2015.org/site/](http://www.euroson2015.org/site/)

# Saving the rhino – only the thick skinned need apply

A team of vets at a safari park near Stirling have carried out a delicate ultrasound on a two tonne southern rhino called Lucy.

Lucy was moved to Blair Drummond Safari Park in 2012 and paired to mate with Graham, the mature bull as part of an endangered species breeding programme.

Sadly, the pair showed little interest in each other, so park bosses brought in a team of vets to investigate and help put their important breeding programme back on track.

**Lucy giving us her best 'don't mess with me' face**

Lucy was sedated during the ultrasound, but vets had to keep her upright by strapping her to a metal frame so that they could scan her uterus and ovaries.

The size and thickness of the rhino's skin added to the challenge and meant the ultrasound transducer had to be inserted inside her in order to produce an accurate scan.

The vets now believe her ovaries are not producing eggs and are looking at potential hormone treatments or relocating Lucy to another wildlife park.

Chris Lucas, the park's large mammal team leader, said: "It's vitally important that we do everything we can to get Lucy breeding naturally as soon as possible. These beautiful creatures need to be protected. She is getting to a point in her life where if she doesn't start having calves within the next couple of years then she never will."

With the arrival of royal baby number 2, our fertility watch is all about Lucy the rhino these days.

**Prepping Lucy for her scan**





# BMUS STUDY DAYS 2015

*Keeping you up to date with  
the latest developments*

For further details  
please contact:  
[bookings@bmus.org](mailto:bookings@bmus.org) or  
BMUS on 020 7636 3714

## May

9th – 10th MSK study weekend, PGMC, Stafford  
15th Obstetrics ultrasound day, NCEM, York

## June

17th Professional Issues study day,  
The Studio, Manchester  
25th – 26th International Paediatric CEUS course,  
King's College Hospital, London

## August

7th BMUS Abstract submission deadline

## September

25th Paediatric ultrasound, Leeds Radiology Academy

## November

14th Gynaecology – Ultrasound Imaging and  
Management, University College, Dublin

## December

BMUS 2015  
9th – 11th December, Cardiff City Hall

More events will be added shortly  
Please check the website for updates -  
[www.bmus.org/conference-events/ce-studydays.asp](http://www.bmus.org/conference-events/ce-studydays.asp)