



President's Column

Julie Walton

Welcome to this quarter's BMUS News. As I write, the vuvuzelas are buzzing in the background. It is novel to be writing in summer, while the sun is shining so consistently, and the likes of Wimbledon and Glastonbury have been and gone with not a drop of rain.



It is hard to believe that I have now been President for over 18 months, and as I write this we are in the aftermath of a turbulent election campaign. I, like you, have an acute interest in the outcome and its potential impact on healthcare and our practice in medical ultrasound.

It is of particular concern at this time, as the application for the protection of title of 'Sonographer' put forward by the Health Professions Council is subject to subsequent Parliamentary review. It is difficult to predict what will happen in this respect and the timescale involved. However, rest assured that those of us representing the learned societies involved in ultrasound in the UK will continue to lobby to move this forward in order to protect the public.

I extend a warm welcome to you all to the forthcoming Annual Scientific meeting (ASM) to be held in the fantastic, cosmopolitan Brighton from 28-30 September 2010. Brighton is proving to be a hugely popular venue, so if you have not yet registered, then please do so. We are hoping the experimental move from December to September will draw in as many if not more of you. You will also find a pull-out poster for Brighton in this edition. We would be grateful if you could display this prominently in your hospital.

BMUS 2010 BRIGHTON

28-30 September
An Invitation from Dr Tom Marshall,
Scientific Programme Committee Chair

I am pleased to welcome you to the 42nd Annual Scientific Meeting of the British Medical Ultrasound Society in Brighton.

BMUS 2010 promises to be an exciting and stimulating meeting with an excellent scientific programme supported by well known national and international experts offering a series of state of the art plenary lectures and seminars alongside proffered scientific papers.

Once again, due to popular demand, the scientific programme will be supplemented by a wide range of hands-on workshops giving delegates the opportunity to learn top tips from the experts in a small tutorial group environment with the latest ultrasound technology provided by the AXREM group of manufacturers and suppliers, to whom I am extremely grateful.

There are two interesting professional issues sessions with educational/training and medico-legal themes, chaired by Lol Berman and Julie Walton respectively, which I hope will initiate lively discussion

We are also offering three Integrated Training Days with themes on Regional Anaesthesia, advances in gynaecological ultrasound and vascular imaging during which short clinically focussed lectures will be supported by hands-on sessions and ultrasound demonstrations.

Feedback from previous annual meetings has indicated that interactive sessions between the experts and delegates are well received and I am pleased to announce an interactive debate to address contentious areas in clinical practice, chaired by Gail terHaar and an interactive quiz which, following the huge success in Edinburgh in 2009, will again be chaired by Dr Roger Moshy.

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www.bmus.org

President's column contd.

Dr Tom Marshall and his Scientific Organising Committee have put together an exceptional programme of lectures, hands on workshops and integrated training sessions. In this age, when evidencing your CPD activity is essential for ongoing registration with statutory regulatory bodies, our meeting has lots to offer both members and non members.



Please visit our ASM micro site at www.bmus2010.org for details of the programme and registration details.

As always, as BMUS President, it is my duty to notify the membership of key issues. I am grateful to my colleagues in the Society for their reports which are included in this edition of BMUS News. So here are some key ultrasound issues: **Contd page 3**

BMUS Tagline- In my last column I asked that people submitted a 'tag line' to promote BMUS activity and for advertising materials. I am thrilled to announce that BMUS has accepted the line proposed by Dr Bob Jarman- 'What do you use yours for?'. As you can see, the first of such posters for advertising Brighton is featured on this page, with a couple more examples throughout this newsletter. Here is our CEO, David Roberts-Jones to explain the rationale behind this campaign.

"What do you use yours for?"

David Roberts-Jones

As Julie says, we wanted something that would promote the BMUS identity, but we also wanted a tagline that reflected our multi-disciplinary nature as well as something that would be noticed both within *and* without the world of sonography in general.

We think the "what do you use yours for?" slogan is both intriguing and at the same time an invitation to look at the ad in more detail to get the answer to the question. Obviously BMUS has almost no money to spend on advertising, but on the basis that we hope to get extra members or extra attendees at Brighton, we have decided to take as much free space as we can get, and pay for space in "RAD" and other relevant medical publications where we feel we can get a good response.

Entries have been coming in to the office- some humorous and mind-boggling; some more serious- but we are still open for more – especially if the usage and accompanying picture is out of the ordinary! Ideally, we would like to run the campaign with a new ad appearing in each copy of "RAD", so that readers would look forward to seeing that edition's "what do you use yours for?" ad. Who knows? It might even get a cult following in the world of sonography...! So again, the BMUS office challenges you – What do you use your for?!?!?

Brighton contd.

I would like to take this opportunity to offer my thanks to my fellow members of the scientific organizing committee, and to BMUS Council, who have offered so much of their time and hard work to put this exciting programme together.

In particular I would like to thank President-Elect Colin Deane and President Julie Walton for their support and advice. Thanks also to the professionalism and diligence of the BMUS office staff, Rachel Meir, Alice Hepworth and David Roberts-Jones, without whom, none of this would have been possible.

Brighton is a vibrant and colourful city and the renowned Brighton Conference Centre will be a stunning venue situated on the sea front, in close proximity to a fantastic mix of iconic attractions which should allow for an exciting mix of intellectual and cultural entertainment.



BRIGHTON 2010
28th - 30th September : The Brighton Centre

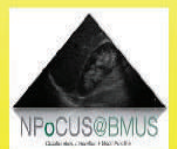


What do you use yours for?

'I use mine for focused echo In medically shocked patients'

Neil Halford,
Consultant in
Emergency Medicine,
Gateshead

www.bmus2010.org



Ultrasound Education for Healthcare Professionals

Honorary Treasurer's Report

Paul Sidhu

We are already in the middle of the New Year, and accounts are nearly finalised for the Annual Scientific Meeting held in Edinburgh 2009.

This was a successful meeting from the scientific point of view, and we have managed to make a small financial surplus. The surplus is not as large as we would normally expect, predominantly due to the underlying cost of hiring the venue in Edinburgh.

We look forward to the ASM in Brighton in September, and hopefully we will be as successful scientifically and more to the point generate a healthy surplus.

This allows the Society to tick over comfortably, supporting activities of the members.

Most of you will have noticed a small increase (£60 up to £70) in subscription rates for the year 2010. I hope this is not too much of a financial burden on you, bearing in mind the current state of the country's economy. I would encourage those of you who have not yet sent in their subscriptions to do so as soon as you can; cash-flow is important to the Society.

Furthermore, those of you who have not ticked off the box to allow us to collect your tax as gift-aid please do so as soon as possible. To date, over 300 members have done so, and this helps us considerably.

I am happy to report that the losses on our reserves, due to the financial crisis in the banking industry, has to a large extent recovered, and we are almost back to levels enjoyed prior to the banking crash.

A number of study days have been organised this year, and we are now in a position to report small surpluses on each of these meetings, which again help us to finance other study days through the year.

For those of you attending the Annual General Meeting later this year, a full Treasurers Report will be presented, and I hopefully will be able to again report continuing viability of the Society.

President's column contd.

NPoCUS (National Point of Care Ultrasound Society)

I am delighted to announce that the formal incorporation of NPoCUS into BMUS has now taken place and we welcome all NPoCUS members to BMUS.

Point of care ultrasound is a rapidly expanding field and we would urge you to encourage all your colleagues who undertake PoCUS to join BMUS and assist us in growing their support.

It is essential that people who undertake ultrasound in the point of care setting provide high quality ultrasound services, with a firm understanding of ultrasound safety and governance issues. Promulgation of such activity through BMUS led education and training for such practitioners is high on our agenda for this sub-group of BMUS.

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Attendance at NPoCUS sessions is included in the overall conference registration fees.

If you are interested in attending any of the streams below you can book a place when registering.

DAY 1 - Tuesday 28th Sept

Emergency medicine Level 1 Course

Echo

Chest

Emergency medicine Level 2 Course

DAY 2 - Wednesday 29th Sept

Vascular

Pleural

Ascites drainage or Suprapubic catheterisation

Pericardiocentesis

DAY 3 - Thursday 30th Sept

Really useful MSK (Paediatric hip/Achilles tendon/fracture)

Heads up ultrasound: Looking at the eyes, head and spine

The Bedside Lung Ultrasound in Emergency (BLUE) protocol

BMUS newly selected as Nominating body for National Clinical Excellence Awards!

BMUS has been officially recognised as a Specialist Society with ACCEA ("Advisory Committee on Clinical Excellence Awards") for the 2011 round and beyond. This means that recommendations made by BMUS for national clinical excellence awards will be considered "official nominations". Doctors eligible for these sorts of awards will now be able to apply to BMUS for consideration as potential nominees for up to six Bronze, three Silver and two Gold awards. Further details are on <http://www.dh.gov.uk/about/ACCEA/index.htm>

Over the summer members of the BMUS scrutiny panel, which will include a lay member, will be selected and a full procedure and application notes policy will be posted on the website well before the opening of the 2011 round on 1st September (it closes on 10th December). Nevertheless, we did want to bring news of this opportunity to members' attention as soon as possible.

BMUS is committed to helping raise the profile of ultrasound users, so if there are other opportunities of this sort which you think that BMUS could be doing, please let us know.

President's Column contd

BMUS Guidelines for the diagnosis of fetal demise

I am very pleased that BMUS can publish its latest guidelines on this clinical area in this BMUS News (page 7). Please ensure that this is disseminated to all those involved in obstetric/gynaecology ultrasound practice. A downloadable version can be found on our website at www.bmus.org/policies-guides/pg-protocol03.asp. Thanks to the working group for their contribution to this valuable document.

Outreach activities with learned societies

We are keen to raise the profile of the society and develop firmer collaborations with other learned societies. This was one of my primary aims when I came to post. The BMUS CEO, myself and officers meet 6 monthly with the SCoR to discuss mutual issues. In fact, our latest meeting led to some useful areas on which we will be collaborating. We have agreed to work together and form a sub-group of interested parties to develop national standards for infection control in ultrasound departments. We have meetings arranged with RCR, SVT, RCOG, BIR and I will continue to report key issues from these in my columns.

Media outreach

BMUS has been working more proactively over the past few months to raise its profile in the media. We have produced statements for the BBC on hand held ultrasound systems and a statement on souvenir scanning in obstetrics in the Prima baby magazine. We have also made a short info-documentary that was aired on NHS TV and sky 166 about the role of ultrasound in medicine. Keep an eye on the website news section for this.

News section on BMUS website

How can you find out about the above? Well, our key communication portal for prompt dissemination of BMUS activities, news etc. is the news section on our website. This is updated at least weekly, but if there are key issues to disseminate, this is done instantly.

Please keep a close eye on the news section of the website for your own professional updating – the address is <http://www.bmus.org/intro/home.asp>

Care Quality Commission

Are you aware of the role of the CQC on independent ultrasound? This will have serious implications for those engaged in

Honorary Secretary's Report

Roger Moshy

This year, late summer includes our Scientific meeting in Brighton. So, instead of Christmas shopping during BMUS breaks, (unless you are super organised,) hopefully you will be able to enjoy a saunter along the Brighton pier in the sun!

May I encourage all of you to sign up and come down and share this with us. The Society relies on a strong response to the scientific meeting to keep us going. We have one of the best scientific meetings in the UK, so let's try and maintain this.

Shortly, in good time for the AGM, we will be posting on our website some constitutional changes that are required to further streamline our operations. Constitutional changes are necessary to ensure that the society is functioning in an open manner to best serve its members.

On the next page, I have written more on this and the council nominations. We encourage all applications, as new blood and ideas on committees is always needed and very welcome to the Society.

The case of the month continues on our website. The first one I thought was quite difficult, but it seems that all of you out there are very clever and those that replied gave the right answer. The second case is now on stream, so let us see how well it prospers. Keep emailing us the cases please!! Send to office@bmus.org

So far summer has been wonderful weather. I hope that your response to register for the forthcoming annual scientific meeting in Brighton will be sizzling hot!!

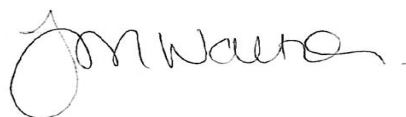
this area, so we encourage you to familiarise yourself with the CQC requirements and refer you to their website <http://www.cqc.org.uk/guidanceforprofessionals/independenthealthcare/ourroleasregulator/regulations.cfm>

More information on this can be found in the article on page 6.

Well, that's it from me. I hope you have a fantastic summer and that the infamous Eyjafjallajökull volcano does not have any impact on holiday travel plans.

I really look forward to seeing you in Brighton.

Best wishes



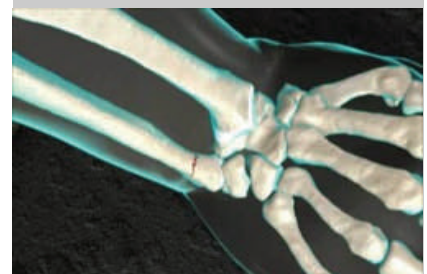
Julie Walton

RSI Research

We have had a request from one of our members, who is researching RSI amongst sonographers and other ultrasound users, for any old videos you may have to aid the study.

The video clips need to have appropriate consents and permission, so that they can observe the movements made by the body in using the probe and/moving the patient.

If you have something that could be of use, please contact secretariat@bmus.org or call 0207 636 3714 and the office will get back to you to discuss the matter further.



BMUS AGM and Council Nominations Update— Roger Moshy

To all members of BMUS

Following discussion with my fellow Officers, it has been decided to retain the traditional AGM date of December- (timed to coincide with the celebrations of the centenary of Ian Donald's birth- 13th of December, at which point, this year, changes to the constitution will be proposed.

These proposed changes will provide sufficient flexibility to enable the AGM to be at the same time as future ASMs whether they are in September, December or any other time of year. Full notice of the proposed changes will be sent out with the agenda but it should help make the Constitution more flexible for future use.

As a result of Dr. Simon Freeman's move to Chair the BMUS S&E committee, there will now be **3** vacancies for Council (one of which has already been announced on 5th March). We have already had a number of nominations, but it has been agreed that in view of the increased availability, the deadline for completed nominations should be extended until the **9th August 2010**.

Those members who have already sent in their completed nomination forms need take no action. Once this revised date has passed, we will publish the names of all the nominees on the BMUS website and send out voting forms in the usual way.

Nominations are invited from ALL specialties. You will have received a Council Nomination form with this newsletter.

Committee News

BMUS welcomes Dr Simon Freeman as the new chair of the BMUS Scientific & Education Committee.

Appointed as a Consultant Radiologist to Derriford in 1997, Simon underwent Radiological training in Bristol, with a fellowship year in Leeds. He held the position of Clinical Director for Imaging 2005-2008.

Simon was the chair of the Scientific Programme Committee for BMUS 2006, Manchester, after which he became a BMUS Council member.

Dr Carmel Moran hands over the Chair of S&E in January 2011. Carmel then becomes BMUS Honorary Secretary, which also makes her a BMUS Officer.

Congratulations, and good luck to Carmel and Simon in their new positions.



Vascular ultrasound – focus on standards – a new BMUS initiative at Brighton ASM

This year's ASM sees a new joint day-long session organised jointly by BMUS and SVT, the Society for Vascular Technology, covering vascular ultrasound applications.

It follows on from the successful co-operation established through NPoCUS, and underlines BMUS' multidisciplinary approach.

Founded 18 years ago, the SVT grew out of a need to provide standards and support to vascular laboratories in the UK and Ireland. The SVT runs its own study days and an annual meeting as part of the Vascular Society and has implemented a training programme culminating in practical and theory exams which leads to accreditation for Vascular Scientists. SVT is an active participant of CASE, the Consortium for Accreditation of Sonographic exams. Many SVT members are also members of BMUS.

The joint day comes at a time when vascular ultrasound is in the headlights of national strategy and screening programmes. The national Stroke Strategy gives guidelines for effective implementation of rapid assessment of transient ischaemic attacks including ultrasound of carotid arteries. The roll out of the aortic aneurysm (AAA) screening programme for men aged 65 is under way and, on a smaller scale, annual transcranial Doppler screening of children with sickle cell is now recommended by the Department of Health. The effective provision of these services requires appropriately trained staff across a range of departments. In many hospitals this is already established but standards still vary across the country.

Vascular laboratories have traditionally been managed within departments of medical physics or surgery. Some run a full range of services, others are more closely linked with vascular surgeons' work so that DVT and abdominal Doppler imaging is performed in radiology departments.

BMUS and SVT realise that the delivery of vascular ultrasound services can be achieved in many different ways, but that the priorities of high quality tests, provided quickly and to suit the patient are common whoever finds themselves holding the transducer.

The joint vascular session will enable members from both societies to share experiences and discuss these issues. There are updates on standards for carotid ultrasound reporting, and developments from the accelerated stroke programme. Two speakers from pilot sites rolling out the AAA screening will discuss the implementation and problems of the scheme so far.

We also have included a session on accreditation of imaging departments and vascular laboratories with speakers from the DoH including Sir Duncan Nichol, former chief executive of the NHS. The day finishes with the vascular scientific session when Emma Chung will show her work in modelling the intracranial circulation.

We hope that the day will bring together all those involved with vascular ultrasound services to show what each organisation can do for the other and that this will be the first of many joint ventures to support high quality standards for these important ultrasound applications.



the advancement of non-invasive
vascular diagnostic services





NHS Improvement - **Stroke**
Supporting the development
of stroke care networks



NHS Improvement

CARE QUALITY COMMISSION (CQC)

BMUS wishes to highlight the following information received from SCoR and bring a recent change in the law in England... to the attention of its members working independently (all modalities) within a partnership or joint venture, as a franchisee, or as a company manager/ director. If you are in one of the above categories and are delivering diagnostic, baby scanning (CQC term), screening or therapy services you will be required by law to register your services with the Care Quality Commission.

Please note that this requirement does not apply to employees. The registration process commenced on 1st April 2010, if you have not already done so, the SCoR advice is to make early contact with the CQC. After October 1st 2010 members could find themselves working illegally if they have not registered when they should have done. Please note that only the CQC can give information as to whether registration will be required in any individual case and neither BMUS nor the SCoR can provide advice in this respect.

Please also note that the CQC applies to England only. There are equivalent bodies to the CQC in Scotland, Wales and Northern Ireland and members in the above categories are advised to make enquiries with them as to whether there are plans to register diagnostic, therapy or screening services as in England. There may be cross border issues if practising in Scotland or Wales but also providing independent diagnostic, screening or therapy services in England. Again, the CQC will be able to advise.

The web links are:

England: Care Quality Commission: www.cqc.org.uk

Scotland: Scottish Commission for the Regulation of Care: www.carecommission.com

Wales : Health Inspectorate Wales: www.hiw.org.uk

Northern Ireland: Regulatory and Quality Improvement Authority: www.rqia.org.uk

The **Accelerating Stroke Improvement** programme is a national initiative designed to ensure that maximum implementation of the Quality Markers in the National Stroke Strategy is achieved before the end of the financial year 2010/11.

Accelerating Stroke Improvement will provide intensive whole-system support to services to accelerate implementation of the strategy during 2010/11, with the aim of achieving key 'milestones' in care across the stroke pathway covering prevention, acute and long-term care and better joint working across the health and social care interface.

NHS Improvement Diagnostics teams will be providing support to Imaging teams to help them deliver CT, MR and Doppler services to improve the outcome and quality of life for patients who have suffered strokes.

The support will consist of:

- Site visits to help facilitate and support change to deliver changes in Imaging services
- Support assessment of efficient resource utilisation
- Promotion of best practice – if you are already achieving this let us know.
- Regional Imaging workshops to promote best practice, share learning and support teams with Implement changes
- Training in Image interpretation for MRI Diffusion Weighted Imaging

'Why treat stroke and transient ischemic attacks (TIAs) as emergencies' – our new document explains the importance of Imaging stroke early and references the research that supports the impact on improving clinical outcomes for this group of patients.

Visit our website for Case Studies www.improvement.nhs.uk
For further information and how to access support for your organisation contact NHS Improvement 01162225122.

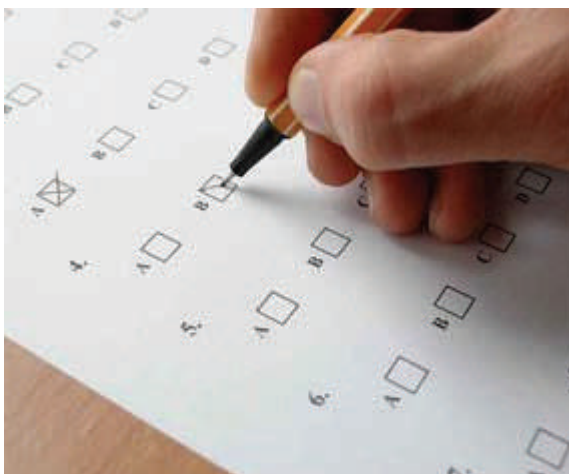
CEUS - 4 Quick Questions

Contrast Enhanced Ultrasound (CEUS) is a recognised useful diagnostic technique in some hepatic scanning situations. We would like to find out how widely used it is amongst sonographers in the UK.

Would you consider answering the questions below, and e-mailing back to: Jane.bates@leedsth.nhs.uk

1. Do you perform Abdominal Ultrasound scans?
2. Is CEUS performed in your department?
3. If YES, is it performed by Radiologists, Sonographers or both?
4. If you personally do NOT perform CEUS, would you like to learn?

Any other comments you wish to add? Thank you for your time.



BMUS statement on Confirmation of early fetal demise by one or more operators

Context:

BMUS has recently received enquiries about confirmation of this distressing situation for the patient, particularly in respect of whether there is a need for a second party to scan the patient to confirm fetal demise.

BMUS response:

There is no national policy on this issue and investigations show a variance in clinical practice between units. However, the Association of Early Pregnancy Units advise where a missed miscarriage is suspected that 2 operators should scan a patient to confirm the diagnosis¹.

Practice appears to be divided into:

i) **diagnosis made by one Sonographer/Ultrasound Practitioner who advises patient accordingly;**

ii) **diagnosis confirmed by second party and patient advised accordingly.**

This may create doubt in the patients mind that the original diagnosis is not correct and they may question the professional integrity of the Sonographer/Ultrasound Practitioner. It may create false hope that the original diagnosis was incorrect.

This situation is often very distressing for the patient, particularly if the examination has been done transvaginally as the probe then has to be reinserted prolonging the examination when a second scan is performed.

However, some staff have expressed that this approach may benefit the patient as confirmation by a second party confirms there to be no doubt in the diagnosis.

BMUS recommends that:

- it should not be necessary for a second member of staff to confirm embryonic/fetal demise as long as the primary Sonographer/Ultrasound Practitioner is confident of the diagnosis;
- a second opinion should be sought if there is any doubt in diagnosis;
- if the patient may gain psychological benefit from having a second Sonographer/Ultrasound Practitioner involved, for example, if she finds the diagnosis hard to accept, a second scan by another professional should always be available and be actively offered;
- a second scan is performed in 7 days in accordance with RCOG guidance² if the embryo measures < 6mm or if there is an apparently empty gestation sac measuring < 20mm;
- practice **must** be supported by a robust local protocol which defines standard practice in the Trust. There should be consistency of staff approach to this situation and no variance in staff practice both for governance and to avoid unnecessary distress to the patient;
- the gold standard for evidencing early pregnancy failure/fetal demise is to archive an M-mode image to demonstrate life/death at the time of the scan.

References

1 www.earlypregnancy.org.uk/whoarewe.asp (guidelines)

- 2 Hinshaw K. The Management of Early Pregnancy Loss. Royal College of Obstetricians and Gynaecologists Green-Top Guideline (No.25), October 2006, RCOG Press, London (www.rcog.org.uk/guidelines)

BMUS Professional Standards Sub-group

*Hazel M Edwards
Sue Halson-Brown
Janette Keit
Darryl Maxwell
Carmel M Moran
Julie M Walton*

New BMUS Honorary Members

BMUS would like to announce two new Honorary Members. We currently have 15 Honorary members, who have all been selected for exemplary and extraordinary services to ultrasound.

We are thrilled to now add Dr Paul Allan and Professor Gail ter Haar to this list.



Dr Paul Allan, is a Consultant Radiologist at the Royal Infirmary, Edinburgh.



Professor Gail ter Haar is head of ultrasound therapy at the Institute of Cancer Research at the Royal Marsden Hospital, Sutton.

Full citations for Paul and Gail will appear in the next issue of the BMUS News.

Ultrasound - Associate Editor vacancy

Ultrasound - the journal of the British Medical Ultrasound Society, is seeking a volunteer for the honorary position of Associate Editor.

You should possess excellent written English, experience of the peer-review process, and good communication skills. Articles are reviewed and managed online, so regular access to the internet/emails and excellent IT skills are essential to this role. A broad interest in medical ultrasound, enthusiasm and dedication are also essential.

Please forward expressions of interest to Emma Chung emlc1@le.ac.uk including a cover letter and CV for consideration by the BMUS Publications Committee.

S&E Committee Report–

BMUS introduces study evenings



Hi, this is Carmel Moran reporting live from the BMUS Scientific and Education committee.

We have had a very successful 8 months on S&E since my last report in September 2009.

A major highlight was the large European attendance at our Annual Scientific Meeting/Euroson in Edinburgh in December. This meeting attracted an outstanding number of poster presentations (114) from ultrasound users from all over Europe.

We are looking forward to our ASM this year in Brighton in September. It is more than 10 years since the conference was held in Brighton, so I am looking forward to good science and bracing walks on the beach.

In this report, I would like to introduce all the members who sit on S&E and in particular welcome those who are new to the committee.

The committee members give freely of their time to sit on the S&E committee and, among other duties, organise the study days which take place around the country.

The current members are the S&E Committee are-

Dr Carmel Moran, Edinburgh, Chair
 Dr Jeff Bamber, London
 Dr Jacinta Browne, Dublin
 Mrs Sue Halson-Brown, Southampton
 Dr Peter Hoskins, Edinburgh
 Dr Bob Jarman, Gateshead
 Mr Daryl Maxwell, London
 Dr Roger Moshy, Peterborough
 Dr Barry Nicholls, Taunton
 Dr James Pilcher, London
 Ms Borsha Sarker, Gateshead
 Prof Gail ter Haar, London
 Mr Stephen Wolstenhulme, Leeds

We have had some very exciting study days over the past few months. There are two exciting points to note with respect to our study day programme.

Firstly, the initiation of study evenings, which we hope will ease the pressure on increasingly cut study leave.

The first evening educational event was a successful meeting run by Darryl Maxwell, on first trimester screening, held on June 30th at the Royal Society of Medicine, London.

We have set up a fixed obstetrics annual programme, led by Darryl. This consists of-

-An evening seminar in London in mid-summer

-A study day out of London (-Bristol in 2011, but this will move around each year, with the location depending on demand and feed-back from BMUS members) in the first quarter of the year

-A study day in London in the last quarter.

The second point of note is the series of meetings to be held in Dublin over the next year, with the potential of exchange of ideas and science between Ireland and the UK.

The first of these was a Contrast day, held at the Royal College of Surgeons in Ireland in May.

As always, details of all these courses and details of the ASM can be viewed on our website or alternatively by contacting our BMUS Education and Events Manager directly on rachel@bmus.org

Dates for your diary

2010

♦ Sept 28-30
BMUS ASM and exhibition,
 Brighton

♦ Oct 7
Pre-clinical ultrasound imaging,
 London

♦ Nov 15
Elastography,
 London

♦ Dec 13-15
BMUS & B.I.R. Celebration of Ultrasound: Before Birth and Throughout Life,
 London
 Dec 13– Media day
 Dec 14– Obstetrics study day
 Dec 15– Schools day

Dec 13
BMUS AGM (to take place after the above event)

2011

♦ Feb 4
Obstetrics,
 Bristol

♦ May 26, 27
Transvaginal scanning,
 Gateshead



Ultrasound Education for Healthcare Professionals

www.bmus2010.org

BRIGHTON 2010

28th - 30th September : The Brighton Centre

Hazel Edwards, Consultant Sonographer & Arne Juette, Specialist Registrar, Norwich Radiology Academy



What do you use yours for?

Farewell, comrade

Some of you will know that our Marketing and Membership Manager, Alice Hepworth, left BMUS in June.

Alice worked for BMUS for 5 years, and we will miss her terribly. We wish her good luck with her move to Reading, which hopefully symbolises the start of some very over-due nesting!



Alice & smiley happy people at Euroson

Alice, you almost won the World Cup sweep-stake— so near yet so far!

We have two excellent members of staff working with us on the Brighton meeting.

Some of you will already know Becki Cox, who has been interning with us since February. The additional member of staff we have brought in is Vikki Newton, who also stepped in to organise UKRC with just 8 weeks til show-down. Welcome on board, girls. You're already doing a sterling job!

New CASE Representative for BMUS Sue Halson-Brown

As Senior Lecturer in Radiography and Ultrasound Programme Leader at the University of Portsmouth, Sue Halson-Brown has been involved in the development and delivery of the MSc Medical Imaging (Ultrasound route) and the BSc (Hons) Radiography Programme with a special interest in ultrasound in trauma. She maintains direct links with clinical practice and clinical currency through Honorary Contracts with two local NHS Trusts.



Amongst many professional interests she is a reviewer for a professional journal, external examiner, Inter-Professional Learning (IPL) Facilitator and member of School, Faculty and University committees. Recently elected to BMUS Council, Sue Halson-Brown is one of two BMUS representatives to CASE Council and is a member of the BMUS Scientific and Education Committee.

Report on the first BMUS Infant hip course

Emma Marrian (Advanced ultrasound practitioner, North Lincolnshire & Poole NHS trust)

The first BMUS ultrasound training course to exclude developmental dysplasia of the hip (DDH) took place on the 22nd and 23rd April 2010 at Kent & Canterbury hospital. This course was aimed at both sonographers and other health professionals involved in the diagnosis and treatment of DDH.

This was focused on ultrasound training in small groups using the Graf classification measurement system, and provided a good combination of both theoretical and practical sessions.

The theoretical sessions provided all the necessary information required to exclude DDH with ultrasound and due to the small and friendly groups, each person had plenty of hands on practical experience.

In addition to this, the location was fantastic as the picturesque cathedral city of Canterbury has good road and rail links to London and the rest of the UK.

This course was a huge success and I would definitely recommend this course to others involved in the diagnosis and treatment of DDH.

Ultrasound machines supplied by Olympus Keymed demonstrated by Application Specialist Daniel Cummings



Infant hip scanning

SECOND ANNOUNCEMENT

EUROSON 2010

Copenhagen

22 – 25 August 2010

10th International Congress on Interventional Ultrasound
Danish Society of Diagnostic Ultrasound Annual Meeting

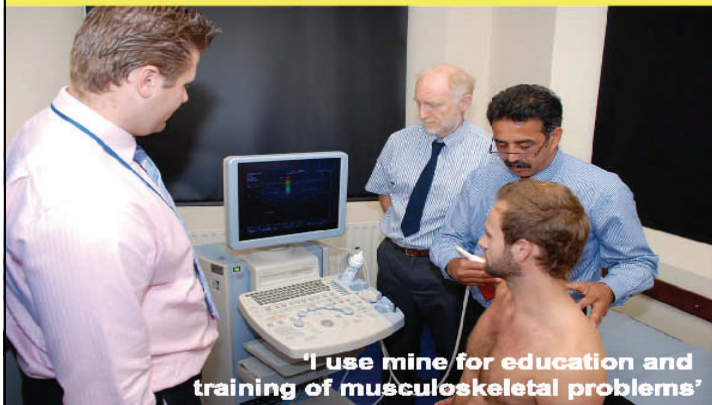
www.euroson2010.org

Ultrasound Education for Healthcare Professionals

BRIGHTON 2010

28th - 30th September : The Brighton Centre

What do you use yours for?



Dr Budgie Hussain, Director, Centre for Ultrasound Studies, AECC

www.bmus2010.org



Say hello to Becki at BMUS by e-mail



For those of us who are faced with a daily barrage of e-mails, it may seem amazing that the BMUS office still doesn't have e-mail addresses for over a third of its membership.

Due to this, we consequently spend around £1,000 each time we send a mail shot. We try to keep down costs by "doubling up" where possible, for example sending things with the journal, but it would really help us to keep down costs if we were able to communicate by e-mail too.

If you are not sure whether we have a mail address that you use regularly, or if you have changed address our new member of staff, Becki Cox, would be glad to hear from you. All you need to do is send her an e-mail with your name and surname in the header and we will do the rest. Email: becki@bmus.org

Members will be aware that BMUS is extending its collaborations with other ultrasound learned societies.

As a result, we are delighted to assist SCoR in promoting a new statement on image recording.
Julie Walton, BMUS President

The recording of images during diagnostic or screening obstetric ultrasound examinations

Sonographers are frequently asked by a woman's partner or other person accompanying them if they will allow them to make their own real-time recording of a diagnostic or screening obstetric ultrasound examination. This request may be to record the examination with a mobile telephone, record on to a DVD or utilise other digital or analogue recording media. With rapid developments in communications technology the ways in which such recordings are able to be made are likely to become ever more varied.

The decision as to whether to allow this should be made by the individual departments concerned although in general terms the SCoR would discourage this.

Departments should have a clear policy on this issue following a risk assessment that takes account of the following:

i) Possible medico-legal complications arising if an abnormality is recorded that is not reported or acted upon. Conversations between the sonographer and the woman and her partner may also be recorded. The employer must be aware of any local arrangements if it is decided to allow this, as they may impact on its risk management strategy and insurance arrangements.

ii) Sonographer preferences both as a group and individually should clearly be taken into account. Many sonographers may not want to be filmed or recorded and their wishes should be respected.

iii) It can be a great distraction and can increase stress levels for the sonographer at a time when they require very high levels of concentration.

iv) It has the potential to unnecessarily extend the time of the ultrasound examination.

v) Departments should take into consideration the possible existence of local policies allowing the recording of the actual birth. Many Trusts or Health Boards do try to facilitate this type of request within the Directorates that have responsibility for maternity services.

vi) Departments should consider consulting with any relevant patient liaison groups that the Trust may have and ensure the finally agreed policy is publicly available.

vii) Departments might also wish to consider how staff should respond to situations where filming begins or continues without permission and contrary to the agreed policy.

This statement does not refer to the taking of images by the sonographers themselves and that is agreed procedure between the ultrasound department and the employing Trust or Health Board. This is often for a previously advertised fee.

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London's leading independent hotel group, Grange hotels, are offering 2 free nights for 2 people at any Grange hotel.



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www.grangehotels.com