## BMUS»

## British Medical Ultrasound Society



## Moor News – Greetings from Dartmoor

In the news this morning, NHS managers are warning of unprecedented financial difficulties as they plan for the forthcoming winter. The NHS providers organisation have calculated that an extra 350 million pounds of investment is required to manage this winter's risk to patient safety, combined with a new strategy for a longer-term, sustainable approach to urgent and emergency care that avoids the annual cycle of winter crisis. Does this all sound familiar? August used to be a time of relatively low demand on hospital services, a chance to recover and tackle waiting list backlogs. This summer my hospital has seen unprecedented numbers of patients presenting for emergency care; the critical shortage of hospital beds, cancellation of elective cases and escalation of discharges now seems to be a daily occurrence. Summer doesn't feel any different from winter and the pressure now seems to last throughout the year. The activity lost from a single days Bank Holiday seems to take an age to recover as we work at maximum capacity for almost all the time. I am sure that many of you have been doing additional sessions this summer to cover absent colleagues and you possibly have also needed to work outside your comfort zone in areas of ultrasound where you are less experienced. There seems to be little resilience in the system to manage the peaks and troughs in demand and cope with annual leave, sickness and equipment/IT failures that are an inevitable part of working life. Amid the turmoil it is often difficult to find the time to reflect on ways to manage and minimise these potential stresses and keep ourselves happy, healthy, enthusiastic and resilient.

It is certain that these pressures will remain for the foreseeable future and we must try to ensure that the quality of the ultrasound service that we provide is not threatened by the demands made on it. Most of you will be aware that there are many significant changes in ultrasound education currently being proposed and implemented in anticipation of increasing the number of qualified sonographers to address the current shortage. Undergraduate sonography programs and apprenticeship training schemes are likely to gather further momentum to supplement the traditional postgraduate route of sonography training. We will all welcome the prospect of more trained sonographers but there are clearly also hazards associated with novel training schemes. However training is delivered it must result in a competent ultrasound practitioner who is able to undertake the work needed by employers with a minimum of additional training and supervision. BMUS is actively involved in discussions on future training models and maintenance of standards in ultrasound training. A positive outcome from this work is that it strengthens the argument for state registration of sonographers in their own right.

Ultrasound practitioners tend to be an active bunch but do you scan sitting or standing? There is now a huge weight of evidence to confirm the dangers of a sedentary lifestyle. Radiologists who spend long periods of time sitting reporting cross-sectional imaging examinations are particularly at risk; short bursts of frantic activity (such as regularly going to the gym) don't protect from the dangers of spending too much time sitting down. We must be aware of turning into the 'active couch potato'; too much sitting is different from too little exercise. Fortunately there are a few simple things that can be done to improve the situation, which include spending more time scanning standing up. It has even been shown that radiologists can report CT scans on a treadmill will good accuracy and acceptable productivity! As imaging specialists we learned to manage the risks associated with ionising radiation years ago, we now need to do the same for our modern working practices. Although I have implemented a few changes myself I remain distressingly fond of a good curry and a few hours in front of a TV box set.

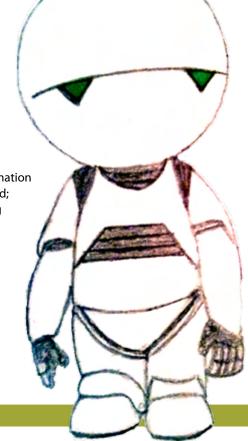
Having read through this column my wife tells me that it sounds too depressing and as though it was written by Marvin the Paranoid Android (for those of you unfamiliar with the Hitchhikers Guide to the Galaxy, Marvin was a terminally depressed robot), this was not my intention. Although times are tough, healthcare

has always been a demanding profession - we have survived and flourished so far and will continue to do so.

I hope that as many of you as possible will attend this year's BMUS Annual Scientific Meeting in Cheltenham for a chance to reinvigorate yourself and refocus on the mysteries and fascination of diagnostic ultrasound; I look forward to seeing you there.

### **Simon Freeman**

President



# Professional Development Officer Report

### Join us for a 'Super' study day and ASM education programme in 2017

Like all aspects of industry and healthcare BMUS has reviewed it's operating structure in 2017. There are various facets to BMUS and several sub-committees have formed over the history of the Society. All of these sub-committees provide a vital role to the Society's membership. However, they have perhaps not served BMUS well in terms of efficiency, both in terms of costs, but also in the time our voluntary committee members give to the society.

When our committee membership was reviewed in 2016 it became apparent that there are individuals sitting on multiple committees, all of which take precious time from their increasingly busy professional lives. In a drive to become less time intensive the BMUS super committee was formed. Admittedly, the name is not great and somewhat ostentatious but the aims are admirable. The super committee has it's first meeting in late April 2017 and was deemed a tiring but extremely valuable day for all involved.

The aim of the super committee (alternative names on a postcard please!) is to ensure the various subcommittees meet individually on the same day, joining together at the end of the day to share progress and agree a strategy and priority for development across all specialist streams. The ultimate aim is to identify key topics that require support from BMUS with regard to education, guideline development, journal articles and study day topics.

The super committee is comprised of the following sub-committees:

### **Organising Group**

**Professional Standard Group** 

**Publications** 

Safety

#### Science and Education

The development of the super-committee – name not withstanding – was a great success and enabled us to develop an education strategy for the following

12 months. One only has to take a look at the extensive study day programme and the ASM programme to see that BMUS is providing cutting edge education to support it's members

If you would like to join us in any of the sub-groups and help support BMUS deliver it's core aims please get in touch with us via the contact us option on the website. Any suggestions for a committee name change gratefully received too!

### **Education Update**

Over the last 2 years or so Health Education England has been supporting the Integrated Imaging Workforce Working Group (IIWWG) - another snappy title. The aim has been to review the current sonographer workforce and education in an attempt to develop sonography as a profession with an identified career progression framework. This has involved identifying current and future education models, including post-graduate, direct access, under-graduate and apprenticeship programmes. Current activities and work streams being undertaken by the IIWWG are focusing on Sonographer Scope of Practice, Preceptorship, Regulation, and Training Capacity. The Professional Standards Group is heavily involved in the development of these work streams and BMUS has strong representation on the IIWWG; however we would welcome your views. There will be a stakeholder event in mid-Autumn where outcomes of the project streams will be presented and discussed. If you want to be involved with any of the work streams or attend the stakeholder event please contact the BMUS office for more details.

This is an interesting time for sonographic education and for the future of the sonographic profession. The aim of BMUS is to ensure members views are fairly represented and that we continue to promote ultrasound for healthcare professionals.

#### Pam Parker,

**Development Officer** 

# Getting to know BMUS – Structure and Purpose

Over the next few issues of BMUS News we will be explaining how the BMUS structure works, who's who in different committees and how these individuals volunteer their time and expertise to ensure BMUS continues to be there for its members.

First and foremost BMUS is a charity, with educational charitable objectives;

- The advancement of the science and technology of ultrasonics as applied to medicine.
- The maintenance of the highest standards in these fields.
- The advancement of education and research in these areas, and dissemination of the results.
- The provision of advice and information regarding ultrasound to the public at large.

It is also a Company Limited by Guarantee and as such has a structure that meets the requirement of the Companies Act 2006. This ensures BMUS is a Society that delivers its objectives in the best interests of its members. In line with these requirements BMUS holds an Annual General Meeting.

### The Annual General Meeting (AGM)

The AGM is held once a year and all registered members are invited to attend. The AGM receives and considers the Honorary Secretary's report and financial statement from the Treasurer. They confirm the appointment of Officers, of which there are 5 and who hold their term for 2 years. In addition to this they receive the results of any elections to Council. It is their job to appoint Auditors and to carry out any other formal business that is needed to ensure the smooth running of BMUS. This meeting is an essential part of the BMUS structure and formal business.

#### Council

The Council is made up of approximately 20 individuals, there are 5 Officers, 7 elected members, a varying number of non-voting members who attend due to their membership of other professional bodies, or their position in other BMUS committees, the BMUS Executive Officer, attends all meetings too.

The Council sets the overall strategic direction of BMUS, it takes all of the key decisions in relation to the charitable aims of the society and professional activities.

It meets three times a year and decisions taken here direct the work of the other BMUS Committees:

- Science and Education
- Editorial
- Safety
- Professional Standards
- Annual Scientific Meeting Organising Group

Look out for more information on these committees in the next BMUS news.

All members are cordially invited to attend the

## 34th Annual General meeting of the British Medical Ultrasound Society

to be held at Cheltenham Racecourse, Evesham Road, Cheltenham GL50 4SH

on Thursday 7th December at 12.45pm



## **Getting to know BMUS**

### Simon Freeman BMUS President and resident sourdough baker!

I have been employed as a consultant radiologist with specialist interests in ultrasound and uroradiology at Derriford Hospital Plymouth for the past 20 years, working in an ultrasound department that performs approximately 60,000 non-obstetric scans per year.

The role of the President is to lead the Society in meeting its charitable objectives of promoting the effective and safe use of ultrasound in medicine, maintaining the highest professional standards, advancing education and research and providing information to the public. The President is also responsible for promoting the image of BMUS as a leading multi-disciplinary medical Society both nationally and internationally.

In reality I chair the Annual General Meeting at the ASM. I also chair the regular Officers and Council meetings, ensuring these groups work together to deliver the objectives of BMUS. I liaise weekly with Joy, our Executive Officer, to help manage issues as they arise and answer queries from within and outside the Society.

I have been a member of BMUS for 20 years and have been actively involved since 2004. In 2006 I was chair of the Annual Scientific Meeting which took place in Manchester and have been a member of the Scientific Organising Committee for three other Annual Scientific Meetings. I was elected to BMUS Council in 2009 and chaired the Science and Education Committee from 2011 – 2013. I progressed to BMUS Honorary Secretary from 2014-2015 and then President Elect in 2015. At this time I started to write for the BMUS newsletter as the Grumpy Old Ultrasound Consultant, a task that I enjoyed thoroughly

**Simon Freeman with former President Carmel Moran** 

and reluctantly
handed over to
an equally mature
and cantankerous
colleague last year.
I became President in
January 2017 and will
hold this position until
December 2019.

I live with my wife and favourite child (yellow Labrador) north of the city on the edge of Dartmoor National Park, my two children now having flown the nest. Outside of work I am a fanatical, and



Simon Freeman President

occasionally successful, artisan bread baker and also love to walk on Dartmoor.

Although it is probably unwise to tempt fate my first year as BMUS President has been less stressful than I was anticipating. There are many reasons for this including my good fortune to inherit the post at a time when the Society had made very significant advances over the preceding few years under the capable leadership of the past two Presidents. BMUS now has achieved a level of stability that allows us to concentrate on delivering our core objectives. We are now also fortunate to have a talented, effective and happy group of office staff and managers working tirelessly on your behalf. BMUS

also has committed and capable Officers and committee members who spend many hours of their own time to provide the services that BMUS members enjoy; without these people BMUS would not exist. I am however conscious that there is still much to be done to keep BMUS relevant and useful to its members and to encourage others to join, particularly at a time of great uncertainly and change in UK healthcare.

It has been a privilege to take on the responsibilities of BMUS President and to meet so many people who share a passion for ultrasound. I look forward to the next year with great anticipation and optimism. If you are attending the meeting in Cheltenham, please do introduce yourself to me and let me know any ideas that you might have to help us continue to make improvements to the Society.

### HITACHI Inspire the Next



# Hitachi hits the high note with ARIETTA 850 at BMUS ASM 2017!

With its heritage in ultrasound technology, it's little surprise that Hitachi was the first company to put the MATRIX CMUT (Capacitive Micromachined Ultrasound Transducer) into practical use. And now, after nearly two decades of research, this technology is becoming an exciting alternative to the conventional piezoelectric transducer. Hitachi is proud to announce, that its flagship model the **ARIETTA 850** with CMUT technology, will be unveiled at **BMUS 2017**.

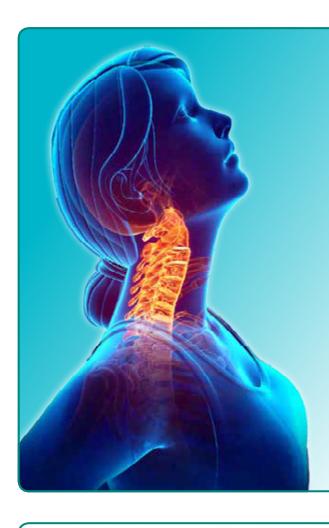
This latest addition to Hitachi's fleet of diagnostic ultrasound platforms offers a one probe solution for whole body imaging with wide bandwidth capabilities up to 22MHz. Combined with e-Focusing (a dynamic transmission and reception technology) the ARIETTA 850 achieves outstanding clarity of imaging from near to far field. In addition, Hitachi has also developed new single crystal technology bringing even greater sensitivity to the convex array. And with substantial investment in sophisticated ergonomics, the ARIETTA 850 helps answer the demands of multiple applications.

Technologies fostered by Hitachi hone the high quality "sound" even further from wave generation to image display, harmonizing performance. To celebrate the launch of ARIETTA 850 and ensure we are "singing from the same hymn sheet" as conference delegates, Hitachi will be surprising guests with a very special musical treat!

Join us on the Hitachi booth for Prosecco, canapes and entertainment during the Welcome Reception, Wednesday 6th December at Cheltenham Racecourse. For an exclusive "tour" and expert analysis of the system and technologies please contact Barbara Dowell at b.dowell@hitachi-medical-systems.com for your preferential invite to the VIP event and to pick up a unique #Arietta850 goody bag (whilst stocks last).

'Arietta': a short, beautifully uncomplicated aria within an opera





## BMUS"

## Head & Neck Ultrasound Training Day

26th April 2018 | Hull

The Hull Head and Neck Ultrasound Course – with practical hands–on scanning experience. To be delivered by a dedicated team of established Sonographers and Radiologists in the field of Head and Neck ultrasound in conjunction with the British Medical Ultrasound Society.

This course will outline the uses of Ultrasound in the head and neck by a series of practical live demonstrations and multiple "hands-on sessions".

CPD Accredited | www.bmus.org

## MUSCULOSKELETAL ADVANCED

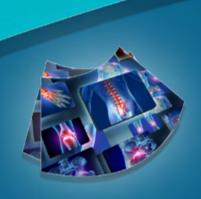
The aim of this study day is to introduce competent sonographers from any profession to the field of Musculoskeletal Ultrasound.

A team of experienced MSK sonographers will deliver presentations on several aspects of MSK ultrasound and provide 'hands on' training using high quality ultrasound systems

Promoting ultrasound for healthcare professionals

### 23rd June 2018 Keele University

www.bmus.org



## **Ultrasound 2017**

The summer holidays are now behind us and December feels much closer than it did a month ago. This means that the preparations for this year's ASM are notching up a gear and the BMUS newsletter provides a very good outlet to give a run-down to our members to show how preparations are progressing.

It is traditional in the final newsletter before the ASM to give a detailed description of the scientific program. The stream leads have put together a fantastic program this year and I think that the quality of the scientific program speaks for itself and is given at the end of this piece.

Sadly, the ultrasound community has lost two giants this year with the deaths of Professor David Cosgrove and Professor Peter Wells. The Scientific and Education Committee have ensured that there is a session dedicated to each of these men, highlighting their contribution to diagnostic ultrasound as the indispensable imaging modality that it is today.

The program has the usual mix of invited speakers, proffered papers, master classes and practical workshops. It is always difficult for ultrasound users to keep up with current clinical guidance and best practice because ultrasound fits into so many different clinical pathways. The scientific program has been designed to reflect many of these trends and changes.

Professional issues sessions are peppered throughout the program. There are many policy and cultural changes affecting the ultrasound community, not least around demand management and changes to both training and careers structures of the next generation of ultrasound professionals. These are very important topics and it is hoped that these sessions will be well attended as the views and enthusiasm

of all ultrasound professionals are necessary to ensure that ultrasound retains its respected position with the modern healthcare imaging armoury.

The call for papers has been hugely successful with more than 110 abstracts submitted either for poster or oral presentations. It has been very heartening to see so many ultrasound professionals willing to showcase their work either by poster or presentation who are able to contribute to the ASM in such a positive way. The quality of abstracts has been very high. The larger size of the exhibition hall has enabled us to increase the size of the poster exhibition this year. The quality of original research by some of our young investigators has also been particularly high this year and the young investigator session promises to be a most interesting, an illuminating session.

BMUS is very aware of the financial, time and professional constraints that many in ultrasound are currently working under. It is also aware of the multidisciplinary nature of the delegates that come to the ASM, and indeed this is one of the great strengths of BMUS. The program has been carefully designed to appeal to delegates who may undertake a more limited scope of ultrasound practice as part of their professional duties and may only be able to attend for 1 or 2 days as well as those delegates who are attending for all 3 days.

This is also a busy time of year for our commercial friends and partners in ultrasound, as they gear up for the ASM. The presence of a high-quality exhibition provides a focal point for the conference, a place to meet up with old friends, network and view the latest technological innovations and gizmos. The exhibition hall at Cheltenham is a fantastic space and this year's exhibition promises to be as engaging and interesting as those in previous years.



Finally, the BMUS staff have been working hard to ensure the success of this year's ASM. While the scientific and education committee oversee the scientific program, there are a hundred other tasks that need to be done to ensure that the ASM runs smoothly, including registering all delegates and running reception at the event, liaising with speakers, commissioning a professional AV company, putting together the exhibition and producing all material for the programme and conference app. The BMUS staff have organised an excellent social programme with a drinks reception in the main exhibition on the Wednesday evening and the Gala Dinner at the Pittville Pump Rooms in Cheltenham on the Thursday evening.

It only remains for me to welcome you to Cheltenham in December. This promises to be a fantastic ASM and I look forward to seeing you all there.

**Day 1** will begin with Memorial lecture to David Cosgrove as part of the General Medical Stream, The Peter Wells memorial will feature in the second session of the Physics lectures. In addition to Physics and General Medical there will be MSK Fundamental lectures in the morning with complimentary workshops in the afternoon. The first day will also feature the DMB lecture as the final session of the day before we break for welcome drinks and networking in the exhibition

Day 2 educational streams include
Obstetrics, featuring the Peter Twinning
Lecture, Head and Neck lectures and
practical session, Vascular and Young
Investigators sessions as well as the MSK
Advanced lectures and practical sessions.
Once again we will have a satellite
session by the Therapy in Ultrasound
Group (THUGS). Day 2 will finish with
the Annual Gala Dinner and Awards
Ceremony, this is a must attend event at
the ASM, tickets sell out so please prebook if you want to attend.

**Day 3** includes a number of key lectures covering Paediatrics, Gynaecology, Early Pregnancy and Professional Issues. Practical sessions include an Elastography

masterclass and a DVT session, both promise to deliver some high quality education. If this isn't enough to wet your whistle running alongside the main programme will be a Translational Ultrasound Imaging satellite session.

### Peter Cantin

**ASM Chair** 



## **Grumpy Old US Consultant**

### Loose words cost lives

The US report stated "mild bilateral hydronephrosis". The clinical team interpreted this as excluding obstruction as a cause of crashing acute renal failure and continued medical treatment.

The obstruction due to cancer of the cervix was not diagnosed for another two weeks and this delay may have contributed to the very poor clinical outcome.

The US report was unhelpful, but was it incorrect?

It may seem unfair but as levels of clinical experience on the acute wards becomes more variable (that's me being polite), the standard of reporting of imaging examinations has to rise.

Nothing can be taken for granted. Not only must observed findings be clearly stated, these must be interpreted in the clinical context. I recommend as a rule of thumb that the report be written as if it were going to be sent to the patient, which is likely to be the case soon (and quite right too).

In order to fulfil this demanding standard, there must be a "clinical context" in which to interpret the findings. So accepting substandard request details is foolhardy.

If a clinical error occurs because the scan was performed without adequate clinical information, it is no good retrospectively blaming the ward staff. Accepting the request implicitly validates it as adequate.

So what about the descriptor "mild"? What does it mean? What is the significance in the clinical context? What is the reporter trying to convey to the clinical team?

In my experience "mild" is often used instead of borderline, meaning the lower limit of abnormal overlaps the upper limit of normal findings. But "as any fule kno", dilatation

follows obstruction and the absence of dilatation does not exclude obstruction.

In this case the term distracted the clinicians from the pursuit of obstruction ( for which they must carry the brunt of the blame) with significant negative consequences.

Please add 'mild' to your list of Weasel Words and drop it from use.

Interpret findings and answer clinical questions directly

Vet requests for adequate clinical information before accepting them.

**Peter Rogers** 





## PROSTRATE ULTRASOUND

5th October 2018 | Hull & East Yorkshire Hospital

Join us in Hull where experts in the field of prostrate ultrasound will present an interesting programme of lectures to update your knowledge.

The course is accredited with BMUS and RCR CPD points.

### BMUS»

Hull and East Yorkshire Hospitals Anlaby road, Hull HU3 2JZ

For registration and further details visit: www.bmus.org

## **Honorary Secretary's report**

Autumn has arrived, which means it's time to blow off the cobwebs from the BMUS Memorandum and Articles and get ready for this year's Annual General Meeting. The BMUS AGM 2017 will be held on the second day of Ultrasound 2017 at Cheltenham (12:45pm on Thursday 7th of December). The AGM provides an opportunity for BMUS members to hear about the Society's activities and finances, vote on proposed changes to the constitution, and to quiz myself and fellow BMUS Officers about our running of the Society.

This year's AGM will be particularly momentous since we are taking the unusual step of proposing revisions to our Memorandum of Association which is an important legal document underpinning the Society's purpose and objectives.

The proposed changes seek to better reflect the role of the society in setting standards for professional ultrasound practice, and also provides an opportunity to update the wording of the Articles to reflect our increased use of 'new inventions' such as internet and email. With BMUS's 50th anniversary approaching, our aim is to provide a revised set of documents that will take the society forward a further 50 years.

Info on the changes will be distributed via a special mailing as an addendum to the AGM

notification. Please do take the time to consider the planned changes in advance of voting at the AGM. I look forward to seeing you all there in December.

Since the days are getting shorter, it's worth remembering to get plenty of vitamin D and as much sunlight as possible over winter.

For those of us who work long hours indoors in darkened hospital rooms it's easy to become deficient without really noticing. The symptoms are very non-specific; tiredness, fatigue, aching, feeling run-down, susceptibility to coughs and colds, taking ages to get better. Last spring I had a blood test which confirmed I was vitamin D deficient.

Fortunately, it's easy to fix and after a course of supplements and sunshine I am feeling so much better. For those of us who can't manage winter in the sun, a lunchtime walk is probably the next best option. Apparently sunlight through windows doesn't count! From my personal experience, vitamin D deficiency is debilitating and easily overlooked. Please do guard against it creeping in. I will certainly be looking after myself a lot better this year. Winter is coming!

### **Dr Emma Chung** (Honorary BMUS Secretary)



## **Study Days 2018**



### **April**

Gynaecology 19th April, London Head & Neck 26th April, Hull

### May

MSK Study Weekend 12th - 13th May, Keele University

### June

Hepatology
1st - 3rd June, London
CEUS
11th - 12th June, London
MSK Advanced
23rd June, Keele University
BMUS Summer School
28th - 29th June, Leeds

### September

General Medical
15th September, Oxford
Interventional
15th September, Oxford
Paediatrics
28th September, Leeds

### **October**

Prostate
5th October, Hull
Dublin
13th October, UCD

Each year, BMUS runs a varied programme of educational study days and courses across the country. In 2018, we will once again be running a full programme of study days as outlined above.

All courses carry BMUS CPD Points.
For programmes and registration, please visit www.bmus.org