

SDMS News Wave is published to inform SDMS members of meetings, events and policies as well as trends and issues in the sonography profession. Comments, questions or concerns about the articles appearing in SDMS News Wave, should be directed to [newswave@sdms.org](mailto:newswave@sdms.org).

## Advanced Practice in Sonography – Past, Present and Future

My name is Ted Whitten and I currently serve as the Chair for the SDMS Advanced Practice Committee (APC) and was recently appointed to serve on the SDMS Board of Directors as an At-Large Director. This article will be the first in a series of updates on the status of sonographer advanced practice. I have been following the discussion and development of a sonography mid-level provider for the last 15 years. I had determined early on that when this mid-level provider concept became a reality that I wanted to be one of the sonographers that officially worked as an advanced practice sonographer. In the beginning, there was tremendous excitement surrounding the sonographer mid-level provider concept, however, as is often the case with significant change, there were roadblocks that were encountered and frustrations experienced as we tried to move the concept from idea to reality. A lot of things have happened since that time, but that's how I began

my journey towards advanced practice in sonography.

In 2007 I realized my professional dream when I was offered, and accepted, a position at a large hospital as an "Advanced Ultrasound Practitioner". It is my goal, over the next couple of years, to provide updates to the membership at large about the status of sonographer advanced practice. I am sure there are other clinically practicing sonographers that are as eager for information and updates on the advanced practice issue as I had been. These updates will be provided periodically and I encourage any SDMS member to contact me



Ted Whitten, BA, RDMS, RVT

### In this issue

**cover story:** Advanced Practice in Sonography - Past, Present, and Future • **4** SDMS Product Spotlight: Winter Special! • **5** Presidential Commitment: Passage of the CARE Bill • **6** Election 2012 - Call for Nominations • **7** Now Available! SDMS Commemorative Poster • **8** SDMS Fellow Spotlight • **10** Upcoming SDMS Webinars • **11** Sonographers Around the Globe • Congratulations to October's \$100 VISA Gift Card Winner! • **12** SDMS Welcomes New Members

if they have any questions related to these advanced practice updates.

In order to fully understand where we are today, it is helpful to understand the history of the work of the SDMS regarding advanced practice.

### **The Early Days**

In 1996, a task force was commissioned by the Board of Directors of the Society of Diagnostic Medical Sonography (SDMS) and charged with determining the feasibility of creating a sonographer mid-level provider. The working title for this concept was the Ultrasound Practitioner (UP)<sup>1</sup>. In 1998, the Ultrasound Practitioner Commission (UPC) was formed to investigate the concept of advanced practice in sonography and make formal recommendations to the SDMS leadership. In July 1999, the UP model was published in the *Journal of Diagnostic Medical Sonography (JDMS)* and the concept started to take shape and become more defined. In May 2001, the UP proposed curriculum was published in the *JDMS*. During the years 2002-2005, the SDMS sponsored the UP Committee, which focused on promoting adoption of graduate-level sonographer advanced practice degree programs. Despite repeated efforts with a multitude of universities and colleges, this effort was not successful. Academic deans raised the issue of establishing a graduate-level degree for a profession that has no educational degree standards for entry-level practice.

In 2006, the SDMS hosted a National Consensus Conference on Sonographer Advanced Practice. During the conference, physician specialty groups expressed concern about the title "Practitioner" and the Clinical Sonography Specialist (CSS) concept emerged from the consensus conference as the working title for the sonographer mid-level provider. Soon afterward, the SDMS and the ARDMS conducted a "Needs and Interest" survey for sonographers interested in advanced practice. The SDMS then conducted a "Needs and Interest" survey of various physician stakeholder groups whose results could best be described as equivocal in nature.

In 2009, the SDMS renamed the committee: the Advanced Practice Committee (APC). From 2007-2009 the SDMS promoted the CSS concept and encountered some resistance from physician stakeholder groups including titling concerns, reimbursement issues for allied health mid-level

providers, and preference for a master's level degree entry requirement. In 2010, the SDMS Board voted to move the APC into a monitoring and tracking mode of operation for the coming year. During that timeframe, Michael Hartman and I (the Co-Chairs of the APC) along with other SDMS leaders set up teleconferences with other medical imaging modalities that are promoting a mid-level provider model. These included the Advanced Cardiovascular Sonographer (ACS), which was endorsed by the American Society of Echocardiography (ASE), the Radiologist Assistant (RA), which was endorsed by the American College of Radiology (ACR), and the Nuclear Medicine Advanced Associate (NMAA), which was endorsed by the Society of Nuclear Medicine (SNM). The APC Co-Chairs made a presentation on their findings to the SDMS Board at the 2011 Spring Board Meeting and the SDMS Board voted to reactivate the APC.

### **Where We Stand Today**

While there is currently no official designation, title, or certification examination associated with sonographer advanced practice, we do believe that some sonographers are functioning in a manner consistent with the concept of a sonographer mid-level provider. It is important that we know and understand the extent to which some sonographers have already moved into an advanced practice role, and the responsibilities and clinical activities that they have assumed in making this transition. To provide information to aid in future work, the SDMS APC has developed an "Advanced Practice Sonography Survey." This survey will be targeted, in part, at those sonographers who are officially employed as mid-level providers. I believe that the survey results will help the SDMS formulate a more current model for sonography advanced practice. The ARDMS has expressed interest in participating in this survey process which should help to insure that survey population numbers will be sufficient to achieve statistical reliability and validity. I believe that it is also important to note that the SDMS has become re-engaged in the concept of Sonographer Advanced Practice.

### **The Sonographer Advanced Practice Model**

For those of us who are officially employed as mid-level providers, it is important to understand that we work under the authority of a supervising physician. The physician for whom I work has delegated the clinical responsibilities that constitute my job as an

Advanced Ultrasound Practitioner. Since there is no independent licensure of sonographers in my state and therefore no official scope of practice, I perform my duties only under the authority that is delegated to me by the supervising physician. Although I know several other sonographers that are employed as mid-level providers, we do not know how many are in existence today in the United States; acquiring this information is, in part, the objective of conducting our survey. Although these mid-level providers are known by different names, we believe they have many similarities in the function and duties that they perform. Once we have the results of the advance practice survey, we will have a better understanding of the typical duties and responsibilities. In order to help you more fully understand what sonographer advanced practice really is, I would like to provide you with a personal story of a sonographer that is officially employed as a sonography mid-level provider. Today, I would like to highlight one of my colleagues, Michael Clements BS, RDMS, RVT.



Michael Clements BS, RDMS, RVT

*As a sonographer for 24 years at The University of Alabama at Birmingham Health System in Birmingham, Alabama, I feel very fortunate to have been afforded the opportunity to experience professional growth in a field that I love by practicing as a sonographer radiologist*

*assistant (SRA). Since 2002 I have worked directly with the radiologists by assisting them in their efforts to increase their efficiencies. My primary responsibility is to review completed exams with the sonographer and to "scribe" a preliminary report that I then review with the radiologist and edit to their satisfaction. The report is then electronically signed and made available to the referring team. UAB Health System in Birmingham, Alabama is a large university hospital where we perform an average of 115 sonograms a day at our radiology inpatient and outpatient facilities. My colleague and I directly review and "scribe" the vast majority of sonogram reports done*

*during normal business hours. In addition to our "scribing" of reports, we also assist in the training of sonographers and radiology residents. We also play an active role in maintaining adherence to ACR and departmental protocols.*

*The SRA position has been very successful at our facility due to the support of all involved. We are very fortunate that we have radiologists with a high level of expertise in the practice of sonography. In fact, we have five body-imaging radiologists who are fellows with the Society of Radiologists in Ultrasound. Our sonographers have also been supportive. They appreciate having one of their own to review cases and to assist them when they have a difficult case; this happens routinely at our institution. Finally, our facility administration appreciates the fact that the SRA's have allowed the radiologist to become more efficient, thus improving the bottom line.*

Up to this point, we have seen a picture of where we have been and where we stand today. The next obvious question is "Where do we go from here?"

### **Where do we go from here?**

The SDMS APC will be evaluating the component options that will go into our vision of what an advanced practice; mid-level sonography provider might look like. We will be evaluating:

1. Educational standards, curriculum, and degree standards
  - a. The APC will be reviewing the UP curriculum that was proposed back in 2001 considering whether any additions or modifications may need to be made.
2. Minimum clinical experience that we believe should be required before being recognized as an advanced practice sonographer, and
3. Promoting the development of a national advanced practice certification exam
  - a. The SDMS and the APC will work with other ultrasound professional associations and the national sonography credentialing bodies to encourage interest in developing a national advanced practice sonography certification exam.

I currently serve on the Sonographer Relations Committee of the Society of Radiologists in Ultrasound (SRU) and the SRU is also interested in the topic of advanced practice in sonography and has expressed interest in working collaboratively with the SDMS to promote the model. As we look forward, the future holds encouragement for bringing the concept of sonographer advanced practice to fruition. I am

optimistic that we will be successful due to the work of those who have gone before us and the work of those who are currently committed to making sonographer advanced practice designation reality.

I welcome your comments and/or thoughts: I can be contacted via email at: [twhitten@sdms.org](mailto:twhitten@sdms.org)

*Ted Whitten BA, RDMS, RVT*

## SDMS Product Spotlight - Winter Special!

Keep warm this winter with these popular SDMS items. **Plus, SAVE \$10 this November when you place your order in the SDMS Online Store!** Just go to [www.sdms.org/store](http://www.sdms.org/store) and enter promotion code "NW2011" to save \$10 off of any order totaling \$60 or more.



### Full Zip Hoodie

**Item #:** 4507

**Price:**

\$29 SDMS members /  
\$39 non-members

You'll stay warm, toasty, and fashionable in this full-zip navy hooded sweatshirt. The SDMS logo is screen printed in white on the left chest area.



### "Image is Everything" Tee (Long-Sleeved)

**Item #:** 4535 (white) or 4536 (black)

**Price:** \$18 SDMS members / \$25 non-members

100% cotton, long-sleeved t-shirt. Available in white or black with the *Image is Everything* logo silk-screened on the left chest.

**Check out these and other great sonography products at the SDMS Store at: [www.sdms.org/store](http://www.sdms.org/store)**



### SDMS Membership Number Reminder

Forgotten your SDMS Membership number?

Visit <http://www.sdms.org/members/remindme.asp>, complete the form, and your membership number will be sent to you via email.

## President's Message

# Presidential Commitment: Passage of the CARE Bill

*By Joy Guthrie, DHSc, RDMS, RDCS, RVT, RCS, RVS, ROUB, FSDMS*

In September at the SDMS Annual Conference in Atlanta I had the privilege of being sworn into office as the next President for the SDMS. It is customary for the new President to share their vision of what will serve as the hallmarks of their Presidency with their colleagues. First, I want to thank you, the membership, for providing the opportunity to serve. I appreciate your support and will do everything within my power to justify your confidence.

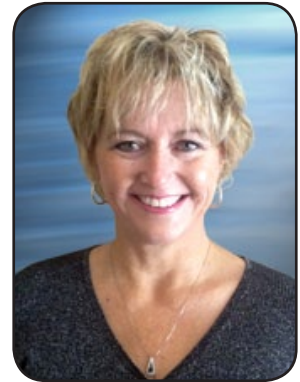
My priorities are clear; first and foremost will be our continued efforts to pass the CARE bill, the piece of legislation that is pending in Congress that would establish certification standards for non-physician providers of medical imaging services, including sonographers. Passing the CARE bill is the "right thing to do" for the patients we serve, and it is good public policy. For purposes of patient safety and public policy it is my opinion that the CARE bill should have been passed a long time ago. Unfortunately, sometimes there is a disconnect between what "should be done" and what our national decision-makers are willing to do. Passage of the CARE bill is the reason that I got involved with the SDMS Government Relations Committee and expressed interest in serving on the SDMS Board of Directors. The CARE bill will continue to be center-stage in our association activities. I make the statement "...will continue..." because this piece of pending legislation has been the focal point of our Society activities for every SDMS President since 2006 when the association joined the Alliance – a twenty-two member coalition of medical imaging organizations committed to establishing national certification standards.

Trying to convince legislative decision-makers of the importance of passing a proposed law, such as the CARE bill, can be a daunting task. There are many competing issues that vie for the time, attention, and focus of our elected officials. Sometimes, using a 'real-life' example can help bridge the gap between proposed statutory language and the need to protect citizens. I would like to share one of my experiences with you to illustrate why I believe it is critical that the Society continues to press for passage of the CARE bill.

This is but one of many such experiences that I could have picked to illustrate the point:

A young woman came into our hospital, pregnant at 24 weeks...as I scanned her I found one of the worst cases of Ebstein's anomaly of the fetal heart (very, very tiny right ventricle, very large right atrium, tricuspid regurgitation....statistically, a very poor prognosis for the fetus). At the time, we had a phenomenal team including pediatric cardiologists, radiologists, geneticists, and genetic counselors at our disposal. I had the pediatric cardiologist, radiologist, and genetic counselor come into the exam room to explain the severity of the fetal heart defect to the patient to which she promptly replied; "None of you know what you are talking about, I just had an ultrasound last week and they said that my baby looked just fine." I asked where she had her ultrasound examination done. She said she had it at the; "...3D place where the 'doctor' gave her baby an absolutely clean bill of health." With a little more investigation I learned that her ultrasound exam had been done at an entertainment ultrasound type facility and the person providing the information was a business woman with NO medical background. It left us defending our practice, with over 30 years of medical expertise in the room, against a business woman who purchased an ultrasound machine for the sole purpose of generating profit. I was livid, and made a commitment to get involved with the professional association to stop this kind of patient practice where nonmedical personnel can perform sonographic exams.

Sonography is different than any other medical imaging modality. As effective as some of the other modalities may be, e.g. MRI, CT, etc. ...with the other medical imaging modalities it truly is the machine that provides the information through multiple planes and density settings, NOT the operator. There is definite skill in providing the setup and



Joy Guthrie, SDMS President

imaging protocol, however, as long as the patient is appropriately positioned within the scanner ...the images will be accurate and of diagnostic value. With sonography, you can "make up masses" or make them disappear if you do not have the gain set appropriately. You can miss pathology if you do not have a thorough understanding of ultrasound physics. You can mimic pathology by inappropriate angulation, etc. Sonography is, by far, the most challenging and operator dependent medical imaging modality. For this reason, the interpreting physician is "at the mercy" of the knowledge and skill set of the sonographer. Sonographers must know and understand pathophysiology to determine when additional images are required, and they must know and understand the appropriate use and application of Doppler principles to provide accurate information to assist the physician in making the diagnosis. To be able to function in this environment it requires that sonographers have a solid educational background and enough clinical hours within their respective area of practice to ensure clinical and didactic competence.

Having successfully completed one of the national sonography certification programs is the **minimal level of competency** that should be required of sonographers. Passage of the CARE bill will be the beginning of the competency demonstration process.

There are other areas where I would like to see additional progress made within the profession; these include support for sonography related research, and movement toward establishing Sonographer Advanced Practice as part of the profession's recognized career ladder. As will always be the case, I welcome comments, thoughts and suggestions from the SDMS membership at large. I can be reached at: [jguthrie@sdms.org](mailto:jguthrie@sdms.org)

Sincerely,

Joy Guthrie, DHSc, RDMS, RDCS, RVT, RCS, RVS, ROUB, FSDMS  
SDMS President



## Election 2012

### Call for Nominations for 2012 Elected Positions



**DEADLINE:**  
**February 10, 2012**

SDMS members may submit their nominations for the following elected positions.

<http://www.sdms.org/members/nominateform.asp>

#### SDMS Board of Directors:

- At Large Director (3 open positions)
- At Large Director – International

#### SDMS Committee Positions:

- Finance Committee Member (1 position open)
- Nominating Committee Member (3 positions open)



# Now Available!

## SDMS Commemorative Poster

### Celebrating 20 Years of Sonography Awareness

SDMS first recognized *Sonographer Awareness Week* in October, 1991. In 2001, it evolved into *Sonography Awareness Month*. Finally, beginning in 2003, SDMS joined with other sonography-related organizations to sponsor *Medical Ultrasound Awareness Month (MUAM)* during the month of October.

This 18" x 24" commemorative poster is now available online in the SDMS Store. Order yours for your home or office today!

Poster is available either folded or rolled. Rolled poster price accounts for additional shipping and handling costs.

#### SDMS MUAM 20-Year Commemorative Poster

##### Folded 18" x 24" Poster

Item # 4740

SDMS Members: \$6.00

Non-members: \$8.00

##### Rolled 18" x 24" Poster

Item # 4741

SDMS Members: \$8.00

Non-members: \$10.00



## Ordering is easy!

- Order online at the SDMS online store at <http://www.sdms.org/store>
- Call toll free 1-800-229-9506 Monday - Friday, 8 am - 5 pm (CDT)



# SDMS Fellow Spotlight

*This is a continuing series of interviews of our distinguished SDMS Fellow members.*



**Robert DeJong, RDMS, RDCS, RVT, FAIUM, FSDMS**

**Current Position:**  
Radiology Technical Manager/Ultrasound, Johns Hopkins Medical Institutions in Baltimore

**Awarded fellow status:**  
2009

## What inspired you to make a career of sonography?

When I graduated from high school, I went directly into X-ray school because I had had some X-rays in my senior year. I spoke to the person taking my X-rays and learned that he was a student. I was really fascinated and looked into X-ray schools. While training, I discovered that I did not want to be a radiologic technologist, however, we had to spend two weeks in this new modality called ultrasound and it was just amazing - not only the technology but also the respect for the technical people from the physicians as they asked the sonographers for their input about what they were seeing. It was just a whole level above radiology where I didn't see much respect from the radiologists. I was very fortunate to hear about a job at a local hospital that was looking for someone to learn ultrasound. When I told the administrator doing the hiring that ultrasound was my primary interest in applying for the job, he had me out there immediately, interviewed me and offered me the position. It was really cool. I have been in the field since 1976.

## Did you have a memorable role model/teacher? Who was it?

I've had so many mentors that I truly feel blessed. But if I have to point to one person who changed my life it is Marveen Craig, AA, RDMS, FSDMS. She was the keynote speaker at our sonography school's graduation and I drove her back to the airport. We had a great conversation and the next thing I know, she had the SDMS call me and was getting me involved in sonography at local and national levels. She continues

to push me to this day in new directions as well as inspire me and presents me with new opportunities. I don't think I'd be who I am today without that drive to the airport with her. Two other incredible women who have been role model/teachers: Marsha Neumyer, BS, RVT, FSVU, FAIUM, FSDMS, and Ulrike Hamper, MD, MSB, MBA, the medical director here at Hopkins. They both have pushed me out of comfort zone and promoted me. Dr. Hamper got me involved with the SRU, RSNA and AIUM, while Marsha with the SDMS, AIUM and local societies. All three have helped to shape my career. But I couldn't have done all this without the support of my wife, Linda. She has been by my side since the very beginning, encouraging me every step.

## What was the most significant advance in the technology that you directly experienced?

The problem is I've experienced them all. I have B-scanned, performed A-mode echoencephalograms, and did M-mode only echoes. Now we've got color and power Doppler as well as 3D. It's been an amazing 30 years! But what I think is the most exciting thing happening right now is fusion technology, being able to fuse sonograms with MRI and CT. It's excited me probably even more than when color Doppler first came out. It's opening up doors and opportunities for us that our current technologies could never offer us. It's still in its infancy, but I see so much potential. I'm very excited about this technology.

## Were there any memorable developments, cases or events that changed the way you practiced sonography?

Having fusion technology has allowed us to do different types of biopsies that patient may not have been able to have or had to have done surgically. It addresses safety, health-care costs, etc. We can now look at patients and say: "Oh yes. You've got your MR/CT. We can fuse it with ultrasound and do your procedure." Months ago, we would have had to say, "Sorry, we tried, but you'll have to look for an alternative method or an open surgical biopsy." I also love power Doppler. It has brought us additional



information and helped us obtain information for patient care. It really has given us the diagnostic confidence to say, "There was flow present," or, "There was no flow there." I think those are my two favorites things that have happened over my 30 years of scanning.

### **What changes do you predict in the immediate future?**

I think sonography is going to really blossom. We're going to grow quickly in the next couple of years. We're looking at the fact that the public is realizing the amount of radiation they're getting from CT scans and that contrast agents used in MR and CT can affect their kidneys. Musculoskeletal sonography is finally making headway, and, when contrast is finally FDA approved for sonography, watch out! Then there's elastography coming on strong with applications extending beyond breast imaging. I don't know how we'll keep up with the volume of patients! My patient load continues to increase while CT volumes are dropping. Emergency department physicians are looking more and more at sonography as the first line of defense as opposed to CT. Physicians are looking more and more at sonography as a primary test.

### **What advice would you give to students/ future sonographers?**

The biggest piece of advice I give to my students upon graduating is to realize this field is constantly changing and you have to continue learning. A good sonographer does not see this as a Monday-Friday, 9-5 job. You have to study, read your journals, and get registered in all areas that you practice. You will see new pathology at work that you may know nothing about. Go home and Google it and learn all about it and how it affects the body and what kind of pictures you might need. Then the next time you see it, you will know exactly what to expect and the images needed. You have to understand no matter how long you've been in the field you still have things to learn. If you're

a new graduate, you'll feel like you don't know how to scan for maybe three to nine months after graduation. But then one day the light bulb will go off. You'll go to work and you'll realize you do know how to scan and your skills are there and your self-confidence will be there. I always feel like people have this light-bulb moment with ultrasound. They say to themselves: "I don't know how to do this," and then boom, things are falling into place and you're going on a nice uphill ride. Have faith in yourself. Have confidence in yourself but, most importantly, have patience with yourself. One day, you'll get there. It's not just going to happen the day you walk out of school. It can be a little bit down the road. Most importantly – find your passion in sonography. This is an incredible profession that makes a difference in people's lives and their health. All these people that are so active in the SDMS and local societies are there because they are passionate about sonography.

### **What's your favorite part of your job?**

My favorite part of my job is actually two parts. One is my staff. I love working with my staff, teaching them, mentoring them, helping them to learn new technologies and making them better sonographers. The second part of my job is my patients. I never see myself not being involved with patients. That's who I am. That's what we're here for - to provide the needed information for patients so that their clinicians can take care of them. It's all about patient care. There's no greater feeling than to realize you just impacted someone's life and found out that everything is OK or you found something that their clinicians need to take care of. Me, I'll jump on those technically challenging patients, and when I turn in a diagnostic exam that others could not, I feel really good about myself. The images may not be pretty, but they are diagnostic. I've done my job knowing that I have made a difference in their health care, and to me it's like how an actor must feel when they hear that applause.



**SDMS News Wave is archived online at:**  
<http://www.sdms.org/members/NewsWave.asp>



# Upcoming SDMS Webinars

Participate in live presentations or watch the recordings at your convenience. Then take the test for instant CME credit, *absolutely free* for SDMS members.

The SDMS Webinar Series is a series of live and recorded CME presentations delivered via the Internet to SDMS members conveniently through their home or work computer. Using your computer and a phone, you have access to exciting sonography technologies and services presented by world-class sonographers.

*The SDMS Webinar Series is available FREE to current SDMS members.*

If you are unable to participate in these live webinars, visit <http://www.sdms.org/members/webinars.asp> for information on viewing a recording of the webinar.

**Registration:** The SDMS Webinar Series is FREE to current SDMS members and is not available to non-members (For information on joining SDMS, visit <http://www.sdms.org/membership/>)



All SDMS Webinars are tracked by SDMS CME Tracker.

## What did you like most about the webinar?

“The acquisition of knowledge of current politics pertaining directly to my profession. The easy access of participating in my own home on my computer. I will definitely be participating in another webinar. Many thanks to the SDMS to providing such quality education and allowing me to earn my required CME's so easily!”

**Live webinars take place at 8 PM EST/7PM CST/6 PM MST/ 5 PM PST unless otherwise noted.**

**Nov. 10** Jennifer Durant, BS, RDMS, RDCS, RVT

**Understanding Lower Extremity Segmental Pressures (VT)**

**Dec. 1** Janette Wybo, BS, RDMS, RDCS, RVT

**Abdominal Scanning Techniques - Taking the Mystery Out of Finding RUQ Structures (AB)**

**Jan. 11** Pam Burgess

**Optimizing Your Images and Doppler Evaluations (VT)**

**1 PM EST / 12 PM CST / 11 AM MST / 10 AM PST**

**Jan. 19** Kathryn Kuntz, M.Ed, RDMS, RVT, RT(R), FSDMS

**Kidney Pathology (AB)**

**Feb. 9** Joe Kreeger, RCCS, RDCS, FASE

**The Basic Pediatric Echocardiogram (PE)**

**Mar. 8** Aubrey Rybynski, BS, RDMS, RVT

**Neonatal Spine (NE)**

<http://www.sdms.org/members/webinars.asp>



# Sonographers Around the Globe

Iran, Belgium, Mali, and Peru are just a few of the countries SDMS members call home. In all, forty-two countries are represented within the SDMS membership-at-large. We were interested in learning more about our international sonographer community so we created a series of articles, each featuring an international SDMS member. Look for them in upcoming issues of SDMS News Wave.

## Casey Lunt, BS, RDMS, RVT (the Netherlands)

If you enjoy travel, you'll envy Casey Lunt – an SDMS member educating and marketing ultrasound to clinicians throughout Europe, the Middle East and Africa. While based in the Netherlands, Casey works for an ultrasound manufacturer that sends him to hospitals, clinics, universities and research institutions across the globe.

Being involved with sonography in so many different countries has definitely opened his eyes to the varied uses of ultrasound, including contrast enhanced

ultrasound, elastography, MSK scanning, ocular scanning, and bowel scanning.

As for changes immediately on the horizon in the field of sonography, Casey expects the auto-optimization of ultrasound will make sonography less and less user dependent.

Casey started out on the post-operative and rehabilitative side of medicine, so he was drawn to the preventative side of healthcare when he began studying sonography nine years ago. He most enjoys pinpointing a health problem early enough to make a difference in the patient's life.

Casey has been a member of SDMS since 2002, and says he benefits most from how SDMS helps him stay connected to the latest updates in the sonography world at large.

*SDMS wishes to express its sincere thanks to Casey for sharing a bit about his career in the Netherlands. It was our privilege to learn about your experience, Casey!*



## Congratulations to October's \$100 VISA Gift Card Winner!

Congratulations to **Sheila Stennes, RDMS** of Olympia, Washington!

Sheila is the October winner for our 2011 Membership Renewal Campaign! Her name was picked randomly from all September members that renewed their membership online between September 1 and 30.

Each month in 2011, any member that renews their membership within 30 days of receiving their FIRST renewal email notice will be automatically entered into a drawing to win a **\$100 VISA gift card**.

- Drawings will occur on the first of each month
- Promotion valid Jan. 1 – Dec. 31, 2011



# SDMS Welcomes New Members

## September 2011

Stacie Accornero, RDMS, RVT	Gustavo Beaumont	Deborah Browning, RT(R), RDMS	Linda Colucci, RDMS
Alyssa Ackerman	Lisa Beckley, RDMS, RVT	Dayna Brownlee, RDMS	Sarah Combs, RT(R)
Marisa Adams, RDMS	Colleen Bell, RT(S)	Yulonda Burkhardt, RT(R), RDMS, RVT	Katherine Comeaux
Bashir Ahmed, RDMS	Randy Bell, RT(R), RDMS	Joan Burlew, RCDS, RVT	Catherine Compton, RT(R)
Miriam Akins	William Belsom, RVT	Suzanne Busdiecker	Amanda Comstock, RDMS
April Albert, RDMS	Sara Benesh	Melinda Bush, RT(R)	Toni Cook
Elrey Alberto, RDMS	Dana Bergman, BS, RT(R)	Jennifer Butchko	Gwenette Cooper, RT(R), RDMS, RVT
Salman Ali, RDMS, RVT	Kathryn Berry, BS	Kristen Butka, RDMS	Daniel Cope, RDMS, RVT
Veronica Altamirano, RDMS, RVT	Scott Best, RDMS, RVT	Diana Cabrera	Cathy Correia, RDMS
Teresa Alvarado, BS, RDMS	Jody Bestul, RT(R), RDMS	Mary Caldwell, RDMS	April Corvasce, BS, RT(R), RDMS, RVT
Cheryl Ammeter, RT(R)(M), RDMS	Lisa Bibeault, RDMS	Kimberly Callahan	Remus Cotrau
Candida Amorim	Elizabeth Bindig, RDMS	Lillian Camino Castillo, RVT	Amanda Cox, RDMS
Brent Amos, RVT	Susan Bjorlie-Score, RDCS	Clara Canals-Walton, RDMS, RDCS	Megan Cox, RDMS
Shamim Anam, BS, RDMS	Melissa Blachman, BS, RDMS	Amber Cantrell	Krista Criscuolo, RDMS, RDCS
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