



**Infertility Treatment
Authority**



WE ARE THE STATUTORY BODY TO ADMINISTER THE REGULATION
OF INFERTILITY TREATMENT WITHIN THE STATE OF VICTORIA

ANNUAL REPORT 2005

purposes of this report

The Annual Report is submitted in compliance with Section 137 of the *Infertility Treatment Act 1995* (the Act).

The reporting period for the eighth Annual Report is:

- 1 July 2004 to 30 June 2005 for the licences, approvals, exemptions and accounts; and
- 1 January 2004 to 31 December 2004 for all other activities.

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The last year at the Infertility Treatment Authority (ITA) has witnessed many changes and developments in its work that are important for its strategic directions in the future.

First and foremost, the ITA has made a number of submissions to different organisations and bodies investigating and reporting on infertility treatment. In particular, we welcome the reference to the Victorian Law Reform Commission (VLRC) to review and comment on parts of the *Infertility Treatment Act 1995*. The ITA has provided input into the review by the VLRC through expert committee advice and submissions in response to the VLRC Position Papers. We also had an opportunity to comment on the ethical guidelines on assisted reproductive technology (ART) in clinical practice produced by the CREGART (Committee to Review Ethical Guidelines for Assisted Reproductive Technology) of the National Health and Medical Research Council of Australia (NH&MRC). These submissions allowed the Authority to comment on and make suggestions about the regulation of infertility treatment in Victoria from its perspective and responsibility for administering the Act. During 2003, the Act was amended to mirror the federal legislation covered by the Prohibition of *Human Cloning Act 2002* and *Research Involving Human Embryos Act 2002*, as required by an agreement of the Council of Australian Governments. In light of these changes, the Authority revised its licensing guidelines to take into

account the implementation of the federal legislation in 2004.

The Authority convened a meeting of medical and allied health personnel working in ART clinics, together with representatives of the adoption agency and donors and consumers, to discuss a number of issues including the supply of donor sperm, and the issue of "telling" offspring conceived by donor sperm. This important meeting highlighted the concerns surrounding the issue of whether or not offspring had been told of their biological origins if they had been conceived through donor insemination. This concern relates particularly to the requirement of the Act that the Authority contact offspring conceived in this way once they turn 18 years, if requested by the donor, whether or not they have been "told" by their parents about their conception. The Authority is actively following up this matter in its public education programs and in its briefings with Government and other relevant authorities with the aim of increasing family and community awareness of the issue and alleviating as much as possible, adverse outcomes from the "telling" process. For this effort to be sustained and successful, it will be necessary to increase the resources available to the Authority over the next three years.

A landmark event has been the development of guidelines within the framework of the Act for clinics to offer storage of sperm from identified donors for self insemination. This has allowed the screening of sperm for

transmissible diseases before it is released for self insemination, as well as requiring the recipients to register the birth of any children resulting from the insemination. This now allows children conceived in this way to discover their biological origins while screening reduces any associated health risks. One clinic has been licensed to carry out these procedures. These guidelines will be reviewed after a suitable number of clients have taken advantage of this facility to assess its acceptance in the community and success in achieving its objectives.

A second development has been the licensing of a clinic to use a procedure to minimise the likelihood of transmission of HIV/AIDS through donor insemination. This involves a special washing procedure of the semen sample, before insemination, that has been shown to minimise viral infections. The Authority will make an assessment of the outcome of this procedure when sufficient patients have been treated in this way.

Late in 2004 Dr Heather Wellington indicated that she did not wish to seek reappointment to the Authority. We welcome Ms Ann Styles as a new member of the Authority. The Deputy Chairperson, Mr Michael Gorton AM, was made a Member of the Order of Australia for his services to the community. We congratulate Michael on his well-deserved recognition. The CEO, Helen Szoke, was awarded a Doctorate of Philosophy by the University of Melbourne for her thesis

This report to the public and the Parliament allows me to formally and publicly thank all of the members who contribute significantly to the work of the Authority



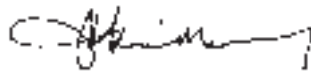
on "Social regulation, reproductive technology and the public interest".

In November, Dr Szoke advised the Authority that she had accepted the position of Chief Conciliator/Chief Executive Officer of the Equal Opportunity Commission as of December, and offered her resignation. Helen was the inaugural CEO of the Authority, and was responsible for guiding its early development and subsequent activities. The contribution that Helen made to the Authority, to the policy and processes of regulation of ART in Victoria, and to public policy discussions on this topic has been enormous. The Authority has been fortunate and privileged to have a person of Helen's calibre as its CEO. Our sincere thanks and best wishes for the future go to her.

The Authority, with generous assistance from the Minister for Health and her Department, has appointed Ms Louise Johnson as the new CEO. Louise has a background in science, teaching and public administration, and, at the time of writing, has already demonstrated her capacity to effectively manage the affairs of the ITA. We welcome her to our team.

The Authority would like to thank the Department of Human Services for its continued support of the work of the ITA, and the Minister for Health for her interest in and encouragement of our work. We also acknowledge the cooperation of the staff of the NHMRC since the Act was amended to cover

embryo research and prohibition of human cloning. The Authority operates with a very small staff, effectively only three full time. Their dedication and professionalism contribute greatly to the success of the work of the Authority. Our past and current CEOs have given us invaluable service that we are pleased to recognise. The various panels whose members give their time and advice to the Authority also deserve our sincere thanks. My personal gratitude goes to my colleagues on the Authority for their wisdom, patience and foresight and for helping to maintain the excellent public image of the Authority. I am especially grateful to my Deputy Chairperson, Michael Gorton AM, for his sound legal advice, and for his support particularly in my absence.



Professor Jock Findlay AM
Chairperson

In 2004 there was a continued focus on review, public education and legislation. The Authority's core statutory work was undertaken with an increasing level of activity in the ART sector.

The public education program included the second Louis Waller lecture presented by Dr Sally Cockburn. She discussed fertility issues and the stigma surrounding couples who are unable to conceive naturally. In addition a symposium on Reprogenetics was held in partnership with the Victorian Biotechnology Ethics Advisory Committee. This symposium brought together a unique group of speakers and audience members to discuss the future of reproductive and genetic technologies and what the implications would be for the future role of regulatory bodies.

The Authority was pleased to receive renewed funding for a small public education program to extend these education activities into rural areas to complement existing initiatives such as the ITA News and the website. A brochure was developed for use in public education activities: *Are there adverse outcomes arising from Infertility Treatment? Information for consumers.*

In early 2004 the Authority reviewed the *Conditions for Licence, Applications for Licences by Hospitals and Day Procedure Centres*. Various policies and procedures in this Authority document are subject to regular review to ensure consistency

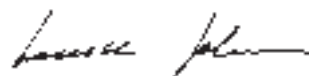
with any legislative changes and to address appropriate policy changes.

There were a number of administrative changes with the resignation of Ms Kate Welsh as Personal Assistant to the CEO and Office Manager and appointment of Ms Carolyn Murray in late 2004. In addition, Ms Lexi Neame was appointed as part-time Research and Policy Officer. Ms Sarah Davis has continued working with the Authority to manage the work associated with the Birth Registers and Ms Janine Madsen as part-time Administrative Officer. This small team of staff has made an enormous contribution to the continued high standards maintained by the Authority.

In 2005 Ms Kate Dobby has replaced Ms Sarah Davis while on maternity leave and Ms Sue Edwards replaced Ms Janine Madsen to provide administrative support to Ms Carolyn Murray.

The first public policy internship at the Authority was taken up by Ms Kate Kuring in 2004, undertaking a Bachelor of Public Policy and Management at Melbourne University with work on the Authority's 10 family donor limit policy. A second public policy internship was taken up by Ms Mary Anne Macaoay with work on: *ART regulations in various jurisdictions and related issues* and a policy discussion paper: *Registering birth utilising donor treatments in Victoria: What are the best interests of the child?*

In late 2004 Dr Helen Szoke, CEO resigned to take up the position of CEO and Chief Conciliator with the Equal Opportunity Commission. Particular acknowledgement should be made of her strong leadership and management of the operational work of the Authority. I am delighted to have joined the Authority as CEO in 2005 and am looking forward to the many challenges associated with this interesting and diverse role.



Louise Johnson
Chief Executive Officer

I am delighted to have joined the Authority as CEO in 2005 and am looking forward to the many challenges associated with this interesting and diverse role



The Infertility Treatment Authority is established under the *Infertility Treatment Act 1995* as an independent, statutory authority, whose role is to regulate the provision of assisted reproductive technology in Victoria.

The work of the Authority is necessarily informed by the four guiding principles, which are enunciated in the Act, in descending order of importance and application. These principles are:

- the welfare and interest of any person born or to be born as a result of a treatment procedure are paramount;
- human life should be preserved and protected;
- the interests of the family should be considered; and
- infertile couples should be assisted in fulfilling their desire to have children.

The Authority, since its formation in 1996, has sought to:

- ensure that appropriate information and counselling are available to those who seek treatment;
- assist in the smooth provision of healthcare by the treatment institutions;
- gather and store information relevant to the proper regulation and broad oversight of the provision of reproductive assistance and to release such information, where appropriate; and

- promote community understanding of the complex issues involved in the treatment of infertility; and
- report to the Parliament under the terms of the Act.

It does so through its specific functions, which are:

- the licensing of places for treatment and for approved research;
- the approval of practitioners, including doctors, counsellors and clinical and research scientists;
- the maintenance of statutory time limits in relation to the storage of sperm, eggs and embryos for use in treatment procedures;
- the approval of the bringing into Victoria or the taking out of Victoria sperm, eggs or embryos;
- the maintenance of registers related to donor treatment procedures;
- monitoring and reporting information about assisted reproductive technology within this State, through the Annual Report to the Minister for Health; and
- approving research as required under the Act.

These functions are informed by the development of policies and guidelines, and conditions, which relate to licensing and approvals under the Act. Copies of all of these documents can be found on the Authority website at www.ita.org.au. Each document is reviewed and revised on an annual basis.

In addition to the Annual Report, the Authority disseminates information via general brochures and pamphlets, the maintenance of a website, and by providing media comment and briefings on issues as they arise. The Authority also maintains a reference library, which is available for general use during business hours.

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Professor Jock Findlay AM

The Minister for Health nominates the members of the Authority and the appointments are made by the Governor-in-Council. Section 123 of the Act states that in making nominations to the Governor-in-Council, the Minister must have regard to the need for diversity and expertise.

The following is a list of current membership and membership during 2004.

Professor Jock Findlay AM

CHAIRPERSON

TERM OF MEMBERSHIP EXPIRES 31 MARCH 2006

Professor Findlay, a NHMRC Senior Principal Research Fellow, is the Deputy Director of Prince Henry's Institute of Medical Research and an Honorary Professor at Monash University. Professor Findlay is Chairperson of the National Health and Medical Research Council Embryo Research Licensing Committee and has been awarded the UK Society for Endocrinology 2006 Dale Medal in recognition of his research in the field of reproductive endocrinology.



Mr Michael Gorton AM



Professor Henry Burger AO



Ms Margaret Coady

Mr Michael Gorton AM

DEPUTY CHAIRPERSON FROM 2 APRIL 2003

TERM OF MEMBERSHIP EXPIRES 31 MARCH 2006

Michael Gorton is a partner with Russell Kennedy, Solicitors. He was appointed by the Victorian Government as the former President of the Health Services Review Council, current Chairperson of the Victorian Biotechnology Ethics Advisory Committee and Ministerial representative to the Board of Management of the Monash Institute of Medical Research.



Dr David Edgar



The Hon Caroline Hogg



Dr Heather Wellington



Ms Ann Styles



The Authority Staff

L-R:

Carolyn Murray, Sue Edwards, Louise Johnson, Kate Dobby and Lexi Neame (absent Jenny Burden)

Professor Henry Burger AO

TERM OF MEMBERSHIP EXPIRES 30 APRIL 2007

Professor Burger was Director of Prince Henry's Institute of Medical Research and Director of Monash Medical Centre's Department of Endocrinology until December 1998. He is an Honorary Professorial Fellow in the Faculty of Medicine, Monash University. Professor Burger is a reproductive endocrinologist, with extensive experience in the management of infertile couples. He is active in the field of menopausal medicine, and was President of the International Menopause Society. He is a Fellow of the Australian Academy of Science and is a member of the editorial boards of several international scientific journals.

Ms Margaret Coady

TERM OF MEMBERSHIP EXPIRES 1 DECEMBER 2006

Ms Coady is Manager of the Welfare Ethics Program, Centre for Applied Philosophy and Public Ethics and Senior Lecturer, Department of Learning and Educational Development, University of Melbourne. She has acted as a consultant on codes of ethics to a number of professional bodies including the Royal Australian and New Zealand College of Psychiatry, the Australian Association of Social Workers, and the Victorian College of Optometry. She has been a member of the Psychosurgery Review Board, and was until February 2004 a member of the Victorian Government's Child Death Review Committee. She is a member of the Clinical Ethics Advisory Group of the Royal Women's Hospital, of the Ethics Committee of the Victorian Association of Family Therapy and of the Victoria Police Forensic Services Advisory Board.

Dr David Edgar

TERM OF MEMBERSHIP EXPIRES 1 DECEMBER 2006

Dr Edgar is Scientific Director at Melbourne IVF and the Reproductive Biology Unit at the Royal Women's Hospital, and is also a Senior Fellow in the Department of Obstetrics and Gynaecology at the University of Melbourne. He is a member of the European Society for Human Reproduction and Embryology, the Fertility Society of Australia and Scientists in Reproductive Technology. Dr Edgar was a member of the Authority's clinical and scientific panel.

The Hon Caroline Hogg

TERM OF MEMBERSHIP EXPIRES 31 MARCH 2008

Ms Hogg was a member of the Victorian parliament from 1982 to 1999 and was a Minister between 1985 and 1992. She held Portfolios in Health, Ethnic, Municipal and Community Affairs, Education and Community Services.

Dr Heather Wellington

TERM OF MEMBERSHIP EXPIRES 30 JUNE 2005

Dr Wellington is a medical practitioner who is also qualified in law. She has a background in health care management and policy. She is a member of the Australian Council for Safety and Quality in Health Care and a Director of Barwon Water, Bio21 and GMHBA (a regional private health insurer). She is also Chair of the Peter MacCallum Cancer Institute and a Councillor for the Coryule Ward in the City of Greater Geelong. Dr Wellington is a consultant with the Melbourne health practice of Phillips Fox Lawyers.

Ms Ann Styles

TERM OF MEMBERSHIP EXPIRES 31 MAY 2008

Ann Styles is a corporate communications executive at the City of Melbourne. She has a background in journalism and has worked as a reporter, chief-of-staff and editor in South Australia and Victoria. Ms Styles is a consumer representative on the Royal Australian and New Zealand College of Obstetricians and Gynaecologists Australia Overseas Trained Specialists/Area of Need Assessment Committee.

The Authority Staff

The Authority's Chief Executive Officer is Ms Louise Johnson. She has an honours degree in microbiology and a management background in the health and public education sectors. Ms Johnson is supported by Ms Carolyn Murray who is her Personal Assistant and Office Manager, Ms Lexi Neame as Research and Policy Officer, Ms Kate Dobby as Registers Officer, Ms Sue Edwards as Administrative Officer and Ms Jenny Burden as Education Officer. During 2004, the Chief Executive Officer was Dr Helen Szoke, Ms Sarah Davis was the Registers Officer and Ms Janine Madsen filled the position of Administrative Officer. In 2004, Mr Ross Adams provided support for the collection and preparation of data for the Annual Report, this responsibility has been handed over to the National Perinatal Statistics Unit for the 2004 Annual Report.

Section 135 of the Act provides that the Authority may set up one or more Committees, comprised of members of the Authority. Full meetings of the Authority were held on ten occasions. A summary of the Committees' work is outlined below.

Annual Report Committee

The Committee has responsibility for the production of the Annual Report to the Minister for Health and the Parliament of Victoria. The Committee also has responsibility for presenting data on treatment cycles undertaken in the previous calendar year. This Committee met once during 2004, and undertook significant work out of session to review the text of the Annual Report.

Conflict of Interest Committee

The Committee has not required a meeting during 2004, although declarations of conflict of interest are minuted at all meetings and, where appropriate, members are requested to absent themselves from the discussion.

Finance and Personnel Committee

The Committee has responsibility for reviewing the monthly financial statements and profit and loss statements, and also undertaking duties related to policy in relation to personnel. In addition, the Committee becomes the Remuneration Committee for the purposes of performance appraisal of the CEO. The Committee met on eight occasions to discharge its financial and personnel responsibilities. The Remuneration Committee met on five occasions.

Licensing and Approval Committee

The members of this Committee have responsibility to ensure the currency of the Conditions for Licence produced by the Authority. The conditions are applied in the assessment of licence and approval applications and other policy matters related to infertility treatment. The Committee met on eight occasions during 2004.

Research Committee

The Research Committee has responsibility to review and make recommendations on any matters related to research under the provisions of Part 3 of the Act, including the assessment of applications for Preimplantation Genetic Diagnosis, and the development and monitoring of policies in this area. During 2004 the Research Committee also assumed responsibility for monitoring issues related to the implementation of the Commonwealth *Research Involving Human Embryos Act 2002* and the *Prohibition on Human Cloning Act 2002*. The Committee met on six occasions during 2004.

Storage Committee

This Committee meets predominantly by teleconference to deal with applications for import and export of gametes and embryos and applications to extend the storage time for gametes and embryos. The Committee also has responsibility for guidelines relating to these areas. The Committee met on seven occasions.

Registers Committee

The Registers Committee has responsibility to oversee the development of policies and procedures relating to the operation of the Central and Voluntary Registers of donor treatment procedures. The Committee met on three occasions in 2004.

Communications and Public Relations Committee

The Communications and Public Relations Committee has the responsibility to oversee the implementation of the communications strategy including the public education program, conference presentations and publications. The Committee met on three occasions in 2004.

Section 135 of the Act provides that the Authority may set up one or more committees. In addition the Authority has three advisory panels that facilitate its work

The Authority has three advisory panels that facilitate its work. The panels comprise participants who are experts in their fields and who contribute to the work of the Authority on a voluntary basis. Membership is reviewed on an annual basis.

The panel participants are subject to the same strict requirements as Authority members and staff in relation to confidentiality and security of information. The final decision on matters of policy remains with members of the Authority.

Clinical and Scientific Panel

The Panel's role is:

- Provision of up-to-date information on general matters relating to reproductive technology;
- Response to questions of a technical or scientific nature on request by the Authority; and
- Provision of technical advice to the Research and Licensing Committees of the Authority on related fields of investigation.

The following people agreed to participate as clinical or scientific expert advisers for the Authority during 2004:

- Professor Agnes Bankier
Genetic Health Services Victoria
- Professor David de Kretser AO
Monash University
- Dr Robert James McKinlay Gardner
Genetic Health Services Victoria
- Associate Professor Paul Lancaster
University of New South Wales

- Professor Robert I McLachlan
Prince Henry's Institute of Medical Research
- Dr Adrienne Pope
Monash IVF
- Dr Catharyn J Stern
Melbourne IVF
- Professor Alan Trounson
Monash Institute of Reproduction and Development
- Dr Beverley Vollenhoven
Monash IVF
- Professor Robert Williamson AO, FRS, FAA
Murdoch Children's Research Institute
- Dr Leeanda Wilton
Melbourne IVF

Ethics Panel

The panel comprises people with specific expertise in moral philosophy and bioethics. The panel participants are invited to comment on specific cases, which are made anonymous or to comment on the ethical implications of policy produced by the Authority. The membership during 2004 was:

- Dr Leslie Cannold
Centre for Applied Philosophy and Public Ethics, The University of Melbourne
- Dr Lynn Gillam
Centre for the Study of Health and Society, The University of Melbourne
- Associate Professor Helga Kuhse
School of Philosophy, Linguistics and Bioethics, Monash University
- Rev Alan Nichols
Consultant Ethicist

- Rev Dr Christopher Pullin
Consultant Bioethicist
- Dr Merle Spriggs
Ethics Unit, Murdoch Children's Research Institute
- Dr Nicholas Tonti-Fillippini
Consultant Ethicist

Registers Panel

This panel draws people from a variety of backgrounds including counselling, the adoption sector, epidemiology and others representing the consumer perspective. The panel provides advice on policies relating to the operation of the Central and Voluntary Registers and also policy regarding donor treatment procedures. The membership of the panel during 2004 included:

- Ms Jenny Blood
Melbourne IVF
- Mr Ian Bowler
Registry of Births, Deaths and Marriages
- Ms Fiona Bruinsma
Centre for the Study of Mothers' and Children's Health
- Ms Margaret Campi
Victorian Standing Committee on Assisted Family Formation
- Ms Maureen Cleary
Adoption Information Service
- Mr Andrew McLean
Donor Conception Support Group
- Ms Gillian Thomas
VANISH (non-government search agency)

Part 8 of the *Infertility Treatment Act* 1995 outlines the requirements for the Authority to issue licences and approvals to places and to people. An application for licence for a place may be made by the legal person at a public hospital or by a denominational hospital or private hospital or a day procedure centre. The licence will be with respect to those specific premises. The licence is granted to undertake a treatment procedure, which includes in vitro fertilisation (IVF), gamete intrafallopian transfer (GIFT), donor insemination (DI), the formation of an embryo outside of the body of a woman, and the storage of gametes and embryos.

The licensing process, where possible, is undertaken when accreditation by the Reproductive Technology Accreditation Committee (RTAC) of the Fertility Society of Australia (FSA) occurs. This ensures that the technical, scientific and clinical aspects are addressed through the RTAC process, while adherence to the legal provision of the Act is assessed by the Authority.

A list of fifteen places licensed to provide treatment is provided in Appendix 1.

Under the Act, doctors are required to be licensed to carry out a treatment procedure, to transfer an embryo to a woman, to carry out donor insemination at a place which is not licensed or to carry out or be responsible for the carrying out of approved research. Scientists are required to be approved to form an embryo outside the body of a woman or to carry out or be responsible for carrying out approved research. Counsellors are required to be approved to provide counselling on the kinds of treatment procedures or research specified in the Act or to a woman and her husband and a donor and his/her partner, if they have one, prior to donor treatment.

During the 2004/2005 financial year the number of approvals was:

Counsellors	14
Clinical Scientists	30
Doctors	9
Research Scientists	0

Appendices 2 – 5 list approvals under the *Infertility Treatment Act* 1995.

Licensing Visits

The Authority undertook the following licensing visits during the 2004/2005 financial year:

- Monash IVF at Epworth Hospital
- the Monash IVF Satellite at Central Gippsland Health Service
- Monash IVF at Monash Surgical Private Hospital
- the Monash IVF Satellite at Bendigo Health Care Group
- Ballarat IVF at Ballarat Day Procedure Centre
- Melbourne IVF at Freemasons Hospital
- Melbourne IVF at Royal Women's Hospital

The licensing process involved three steps:

1. the Licence Application provides the basis for the licensed place to review its procedures against ITA Conditions for Licence; this is the self-assessment phase;
2. the Application form and all supporting material must be forwarded to the ITA to be reviewed against the Conditions for Licence, and the ITA will identify any specific issues which it wishes to raise during a site visit; and
3. a site visit is conducted, where possible coinciding with an RTAC accreditation visit and a recommendation for a licence is made to the Authority.

The Conditions for Licence were also revised during the reporting year, with the 5th edition released in January 2004. The major changes related to:

1. clarification about licensed places' obligations in relation to notification of incidents to the Authority;
2. changes arising from the passage of the *Health Legislation (Research Involving Human Embryos and Prohibition of Human Cloning) Act 2003*, which revised the definitions and prohibitions in relation to research that destroys the embryo;
3. the inclusion of conditions which relate to people seeking treatment who are HIV discordant;
4. requirements in relation to genetic testing; and
5. changes to the provision relating to the export of embryos, arising from changes to the Customs regulations.

Storage of Sperm by Women Using Known Donors for the Purposes of Self Insemination

In late 2004, Melbourne IVF at the Royal Women's Hospital applied for a variation in its licence for the storage of sperm by women using known donors for the purposes of self insemination. This was granted with the incorporation of a review and reporting process by the end of 2005.

Reference to the Victorian Law Reform Commission (VLRC)

The Consultation Paper, *'Assisted Reproductive Technology & Adoption: Should the Current Eligibility Criteria in Victoria be Changed?'* was released by the Victorian Law Reform Commission (VLRC) in January 2004. The Authority prepared a submission in response to this consultation paper. The Commission held a number of consultative forums in 2004, which representatives from the Authority attended. The VLRC's *Assisted Reproductive Technology & Adoption Position Paper 1 – Access* with interim recommendations was released in May 2005. The Infertility Treatment Authority provided a submission in response to this position paper. Further position papers will be released by the VLRC in 2005 prior to preparing final recommendations in late 2005.

There are two types of research which can be undertaken utilising human embryos:

- Research, which must be approved by the Authority, under the provisions of the *Infertility Treatment Act 1995*, which ensures that the embryo remains fit for use in a treatment procedure. There were no applications for research in this category during the 2004 calendar year.
- Research utilising embryos which are declared in excess and no longer required for treatment. This is regulated by the provisions of the *Research Involving Human Embryos Act 2002 (Cth)*, which is administered by the NHMRC Licensing Committee. Further information about that type of research can be found at www.nhmrc.gov.au. The Chairperson of the Infertility Treatment Authority is also the Chair of the NHMRC Licensing Committee.

Research Notifications

The Research Committee reviews notifications from licensed places relating to research or novel treatments. During 2004 the Authority did not receive any notifications of research to be conducted under the Act. In July 2004, a progress report was provided to the Authority on an ongoing research project – New Methods of Cryopreservation of Embryos.

Genetic Testing

The Research Committee monitors notifications for the use of Preimplantation Genetic Diagnosis (PGD) in accordance with section 4.2 in the policy, and applications for some uses of PGD in accordance with section 4.3.

NOTIFICATIONS

During the 2004 calendar year the following notifications were received:

- Hereditary Sensory Neuropathy Type 1
- Alagille Syndrome
- Alpha-Thalassaemia

APPROVALS

During the 2004 calendar year applications for PGD were approved in the following categories:

1. Where PGD and sex selection were proposed in those cases where there is a higher incidence of a condition in one sex, but there is inconclusive evidence about the genetic transmission of that condition, individual cases are presented to the Authority, complete with clinical evidence, family history and peer-reviewed evidence to support the application. Applications were approved for:
 - Autism – 3 cases
 - Asperger's Syndrome – 1 case
2. Exclusion testing – where a person at risk of transmitting an autosomal dominant condition undertakes PGD to exclude embryos carrying the affected chromosome. Exclusion testing enables a woman or couple to begin an unaffected pregnancy without revealing the patient's own genetic status. Individual cases are presented to the Authority, along with a family history and advice from a clinical geneticist. Applications were approved for:
 - Motor Neurone Disease – 1 case.

Review of PGD Policies

The Research Committee also has responsibility for developing policy in

relation to genetic testing. During 2004 a review of the current policy in relation to PGD was initiated. The review involved a literature review of ethical issues associated with PGD; an analysis of international regulations on PGD, including the identification of a variety of regulatory regimes; and a limited consultation with stakeholders – geneticists, clinicians, scientists, members of ethics committees and a representative of the Genetic Support Network Victoria. The review is ongoing. Outcomes will include a revised policy document and schedule; procedures for processing notifications and applications for PGD; and recommendations for future action, depending upon the outcome of the Victorian Law Reform Commission review. During 2004, material from the review was presented in scientific poster format at the annual Fertility Society Meeting in Adelaide, and in a presentation at *Contesting Freedom in Healthcare: Policy Practice and Ethics*, in Sydney in November.

Patient Information Brochure

Following the Clinical Roundtable in 2003, it was proposed that the Authority produce a patient information brochure outlining the issues associated with infertility treatment. During 2004 the pamphlet – *Are there adverse outcomes arising from Infertility Treatment?* Information for Consumers - was developed and distributed. The pamphlet provides an overview of the possible health issues arising from infertility treatment, for men, for women and for children born as a result of treatment procedures.

Details of treatment cycles involving PGD for genetic testing or for IVF and pregnancy failure can be found in Section 6 of the Data on Services in Victoria, page 26

Storage

The Storage Committee of the Authority considers applications for extension of the storage period on a monthly basis.

An extension of the storage time of embryos requires the consent of both parties who have formed the embryos. Where the future use of the embryo is unresolved or in dispute, then a short extension of storage time may be given to allow those for whom the embryos were formed to reach agreement. People with embryos in storage are advised that the length of time that embryos, oocytes (eggs) or sperm can remain in storage is determined by law. The *Infertility Treatment Act 1995* provides that embryos must not remain in storage in excess of five years, and oocytes and sperm in excess of ten years, except with the approval of the Authority. This means that they must ensure that the clinic where their embryos or gametes are stored is able to contact them should they wish to seek an extension of the storage time.

It is unlawful for a clinic to retain the embryos, sperm or oocytes in storage in excess of the storage time, except with the approval of the Authority. It is difficult to trace people who have embryos or gametes in storage if they have not advised the clinic of their contact details and the clinic may be instructed to remove the embryos or gametes from storage.

In 2004, the Storage Committee considered the following applications with the following outcomes:

APPLICATIONS FOR EXTENSIONS OF STORAGE EMBRYOS AND SPERM:

1 January 2004 to 31 December 2004

STORAGE TYPE	No. OF APPLIC.	OUTCOME
Embryo	121	Approved
Embryo	2	Approved with Conditions
Embryo formed from Donor Gametes	10	Approved
Embryo	1	Withdrawn

Import and Export of Gametes and Embryos

The Authority is required to approve the transfer of embryos and gametes (sperm or eggs) to and from Victoria. The Act requires that the Authority may approve an application only if the proposed use of the gametes or embryos would be consistent with the requirements of the Act. This means, for example, that in those cases where donor gametes were used to form an embryo, then counselling and record keeping provisions in legislation must be met.

The following applications were received:

APPLICATIONS TO IMPORT GAMETES AND EMBRYOS:

1 January 2004 to 31 December 2004

STORAGE TYPE	No. OF APPLIC.	OUTCOME
Donor Sperm	3	Approved with Conditions
Embryo formed from Donor Gametes	5	Approved with Conditions
Embryo formed from Donor Gametes	1	Withdrawn
Embryo	23	Approved
Embryo	1	Pending
Sperm	8	Approved
Donor Sperm	1	Pending

APPLICATIONS TO EXPORT GAMETES AND EMBRYOS:

1 January 2004 to 31 December 2004

STORAGE TYPE	No. OF APPLIC.	OUTCOME
Donor Sperm	32	Approved with Conditions
Donor Sperm	1	Withdrawn
Embryo formed from Donor Gametes	8	Approved with Conditions
Embryo formed from Donor Gametes	1	Withdrawn
Embryo	25	Approved
Embryo	4	Withdrawn
Sperm	13	Approved

The Infertility Treatment Authority has responsibility for maintenance of four Registers, under the provisions of the *Infertility Treatment Act 1995*. The Registers record information about donors, recipient parents and the person born as a result of egg, sperm and embryo donation.

1984 Central Register

This Register was established under the *Infertility (Medical Procedures) Act 1984*. The management of the Register was handed over to the Infertility Treatment Authority at the time of proclamation of the *Infertility Treatment Act 1995*. Information that identifies any person on the Register may be released only with the consent of the person about whom the information relates. Registrations still continue to be made to this register in those cases where the consent to donation of gametes was made before the 1 January 1998.

TOTAL NUMBER OF BIRTH REGISTRATIONS

As at 31 December 2004 2479
For year 1/01/2004 to 31/12/2004 201

TOTAL NUMBER OF DONOR REGISTRATIONS

As at 31 December 2004 578
For year 1/01/2004 to 31/12/2004 0

1995 Central Register

This Register allows access to identifying information by offspring when they attain the age of 18 years. This right is conferred unconditionally, the donor consenting to the use of their gametes or embryos on the understanding that this information will be made available if requested. This Register includes all donors who have consented to the use of their gametes

after 1 January 1998, the date on which the *Infertility Treatment Act 1995* came into effect. If donors request identifying information about offspring aged 18 years or more, there must be consent from the offspring before information is released to the donor.

TOTAL NUMBER OF BIRTH REGISTRATIONS

As at 31 December 2004 664
For year 1/01/2004 to 31/12/2004 289

TOTAL NUMBER OF DONOR REGISTRATIONS

As at 31 December 2004 403
For year 1/01/2004 to 31/12/2004 152

Post 1988 Donor Treatment Procedure Information Register

This Register is set up under the provisions of section 82 of the Act, and is known as the Voluntary Register. Anyone who has been involved with a treatment procedure since July 1988 may apply to this Register. The applicant may provide identifying information to be released to applicants, or may wish to lodge photos or messages and any other information which may be of interest to other parties associated with the donor procedure.

TOTAL NUMBER OF REGISTRATIONS

As at 31 December 2004 71
Donor 31
Offspring N/A
Recipient family 40

Pre-1988 Donor Treatment Procedure Register

This Register is also voluntary and allows people involved with donor treatment procedures before 1 July 1988 to register. This Register operates in a similar manner to the

Post 1988 Register, except that the donor code, which is the linking mechanism, has to be provided by the clinic with the consent of the person about whom the application relates.

TOTAL NUMBER OF REGISTRATIONS

As at 31 December 2004: 65
Donor 37
Offspring 18
Recipient family 10

'Telling Research'

The Authority has been concerned that, for many parents, there are insufficient resources to facilitate the process of telling their children about their birth origins. Following Ethics Committee approval from the Department of Human Services, the Authority has undertaken a series of confidential interviews with parents, offspring and counsellors about the sorts of resources they would require to facilitate the process of telling or finding out about their particular birth stories. Work initiated in 2003 was continued during 2004, with a view to documenting the requirements and also seeking funding to produce resources to help families.

Donor Family Research

Support was provided during 2003 – 2004 for a project conducted by Monash IVF in collaboration with the Australian Institute of Family Studies to incorporate couples with donor-conceived children in a study of family life. Results should provide insight into issues facing these families.

A public policy internship was taken up by Ms Mary Anne Macaoay with work on: *ART regulations in various jurisdictions and related issues and a policy discussion paper: Registering birth utilising donor treatments in Victoria: What are the best interests of the child?*

Management of Clinical Medical Records

In 2004, discussions with Prince Henry's Institute of Medical Research have continued in relation to clinical medical records from their closed donor clinic. A review of staffing arrangements at Prince Henry's Institute of Medical Research has facilitated easier access to birth records and long-term arrangements remain under discussion.

Directed Donations

Preliminary meetings about directed donations were held in 2004 with representatives from the Equal Opportunity Commission, Victorian Law Reform Commission, Counsellors and donor conception support group representatives. This was held to start to address a range of issues associated with directed donations of sperm, eggs or embryos associated with infertility treatment in Victoria. Issues associated with directed donations have subsequently been taken up in the 2005 Victorian Law Reform Commission's Position Paper 1-Access.

Roundtable Discussion about Donors Seeking Access to Offspring

The Authority convened a roundtable discussion relating to the issues associated with the management of the central registers and particularly about the issue of requests from donors for information from those registers. Following the roundtable discussion views were sought from the Authority's Registers Expert Panel and the Ethics Panel. Different views were expressed about the rights of donors to request information about people born as a result of their donation and the meeting highlighted the complexities in this area. Work on this issue will continue in 2005.

Donor Limits

The Infertility Treatment Authority includes in its responsibilities the regulation of the provision of donor treatment in Victoria. Presently, the Authority strongly discourages the use of a single donor's gametes to produce more than ten families. In early 2004, the Infertility Treatment Authority undertook a preliminary review of the issues that inform this policy. Kate Kuring, Public Policy Intern, conducted a literature review and consulted stakeholders including treatment providers, donors, recipient families and donor-conceived people to gain perspectives on donor limits. A scientific poster was produced as a result of this research, and presented at the annual Fertility Society Meeting in Adelaide, highlighting important issues including the prevention of consanguinity, the potential for several children to wish to have a relationship with a donor and the needs of donor-conceived offspring.

The Infertility Treatment Authority includes in its responsibilities the regulation of the provision of donor treatment in Victoria

During 2004 the Authority undertook a range of events to communicate to the broader public the activities of the ITA. These include:

- Public education visits to provincial centres in Mildura and Ballarat;
- Presentation to international and national conferences;
- Distribution of the ITA News and the Annual Report;
- Presentations to conferences, lectures and other meetings;
- The second Louis Waller lecture; and
- The Reprogenetics Symposium.

In addition, the Chairperson is also the Chair of the NHMRC Licensing Committee and the previous CEO, Dr Helen Szoke, was a member of that Committee.

The activities of the CEO, Authority Members and staff are outlined below:

2 – 3 MARCH

Lectures to Senior Secondary Students and Public Meeting – Mildura

16 APRIL

Victorian Biotechnology Ethics Advisory Committee – Code of Ethics Workshop

4 MAY

Lecture to Law Students – La Trobe University

22 MAY

Presentation to International Infertility Counsellors Organisation – Montreal, Canada

24 MAY

Presentation and Poster exhibited at the International Federation of Fertility Society Conference in Montreal, Canada

28 MAY

Meeting with CEO of the Human Fertilisation and Embryology Authority, London, UK

2 JULY

SBS Insight Program in Sydney, NSW

5 JULY

Victorian Law Reform Committee Advisory Committee Meeting

6 JULY

Second Louis Waller lecture delivered by Dr Sally Cockburn

27 JULY

Presentation to the Committee to Review Ethical Guidelines for Assisted Reproduction – Tullamarine, Melbourne

4 AUGUST

Presentation to JP Society meeting

20 SEPTEMBER

Williamson Retirement Symposium and Dinner

7 OCTOBER

Presentations to Tertiary students at Ballarat University

11 – 13 OCTOBER

Poster presentations at the Fertility Society of Australasia Conference, Adelaide

14 OCTOBER

Health Law Lecture – Monash University

19 OCTOBER

Master of Clinical Embryology Lecture – Monash University

25 OCTOBER

Workshop with Ms Angela McNab, CEO of the Human Fertilisation and Embryology Authority, UK

26 OCTOBER

Workshop with Professor Ken Daniels, Canterbury University, New Zealand

27 OCTOBER

Reprogenetics Symposium

13 NOVEMBER

Presentation to Australian Institute of Health, Law and Ethics, Sydney, NSW.

General Enquiries to the Infertility Treatment Authority

1 January 2004 to 31 December 2004

NATURE OF ENQUIRY	NO. OF ENQUIRIES
Information	269
Legislation	72
Media	106

Section 137 of the *Infertility Treatment Act 1995* requires that the Authority report to the Minister for Health, on the 30th of September each year, outlining particulars of each program including details about the number of treatment procedures carried out and their outcomes. This report outlines the procedures carried out at each licensed place and the status of stored embryos and gametes for each of the licensed places.

Trends in Treatment

The data in this report shows an increase in the overall number of treatment cycles. Diagram 1 shows the changes in the use of procedures, by type of treatment procedure since 1995. It should be noted that no data was collected in 1996.

The general trend in the changes in the proportion of treatments offered is depicted in Diagram 2.

Number of Oocytes Frozen

The Authority also collects data about the number of oocytes stored for use in a treatment procedure (see table 3.7).

DIAGRAM 1: INFERTILITY TREATMENT CYCLES COMMENCED IN VICTORIA 1995 – 2004

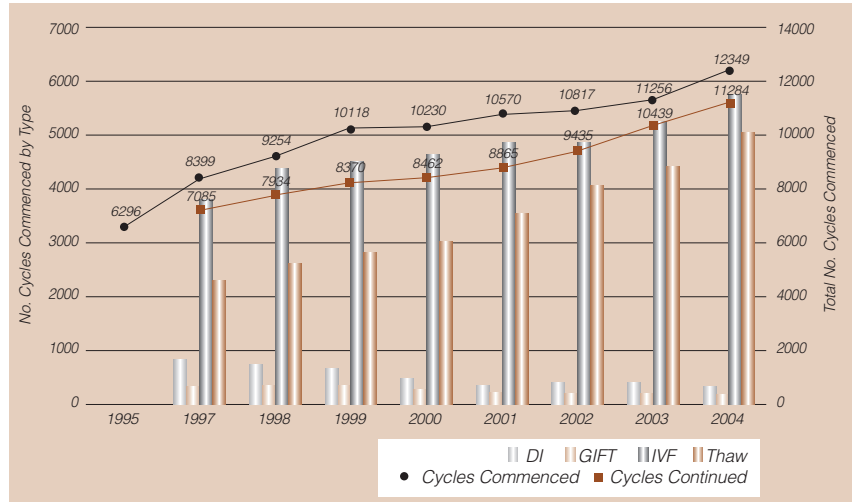
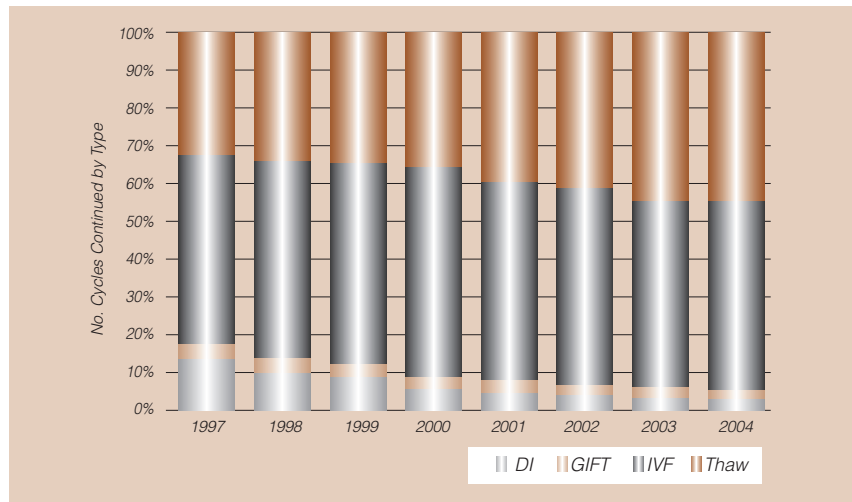


DIAGRAM 2: PROPORTION OF TOTAL TREATMENT CYCLES CONTINUED BY TYPE IN VICTORIA 1997 – 2004



Please note that the figures in the following tables are derived from the latest versions of 2004 ANZARD data provided to NPSU by each of the units. Final 2004 pregnancy outcomes data for the ANZARD database is not required until 31 March 2006 and therefore 2004 pregnancy outcomes are likely to be under counted for all units.

The following dates indicate when the latest versions of 2004 ANZARD data were provided to NPSU by each of the units – pregnancy outcomes for each unit will only have been recorded up to these dates

- **17/06/05 Monash IVF**
- **28/06/05 Melbourne IVF**
- **31/03/05 Mercy Assisted Conception Centre**
- **31/05/05 Mildura Reproductive Medicine Centre**
- **26/05/05 Ballarat IVF**

The Authority, in reporting this information on each of the places it licenses, recognises the complexity of reporting data related to assisted reproduction. In reporting treatment procedures by place, it should be noted that there are significant differences in the patient numbers and the types of services offered. In addition, the licensed places implement different treatment policies, and this may also have an impact on the outcome for different procedures.

Caution should therefore be exercised in any interpretation of the data outlined in this report, particularly in attempting to make comparisons regarding outcomes.

terminology used in reporting data

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The terminology used in this report is fully explained below. In the following tables, it should be noted that double counting of couples might occur because they may:

- attend more than one licensed place for treatment, or
- receive treatment using more than one type of procedure.

AGE OF PATIENT

Age of patient as at the first treatment cycle for the period reported.

BABIES BORN

Infant with signs of life after pregnancy of at least 20 weeks gestation.

CLINICAL PREGNANCY

Any type of pregnancy except that diagnosed only by measuring levels of human chorionic gonadotrophin. This definition includes ectopic pregnancy, blighted ovum and spontaneous abortion.

CONFINEMENT

Birth of one or more babies from a pregnancy. Such an event is counted as a single delivery for the pregnancy, irrespective of the number of babies born.

DI (DONOR INSEMINATION)

Artificial insemination with donor sperm.

EMBRYO

(please note that this definition was changed in 2003)

Any stage of human embryonic development at and from syngamy. Syngamy is that stage of development of a fertilised oocyte where the chromosomes derived from the male and female pronuclei align on the mitotic spindle.

FERTILISATION

Penetration of an oocyte (egg) by sperm. Only oocyte/s with two pronuclei will be reported.

GAMETE

An oocyte (egg) or sperm

GIFT (GAMETE INTRA FALLOPIAN TRANSFER)

A medical procedure of transferring oocyte/s (egg/s) and sperm to the body of a woman.

ICSI (INTRA CYTOPLASMIC SPERM INJECTION)

ICSI is a micromanipulation technique where a single sperm is injected into the inner cellular structure of an oocyte. For the purposes of this report, ICSI treatment cycles are included in the total of IVF treatment cycles.

IVF (IN VITRO FERTILISATION)

Co-incubation of sperm and oocyte outside the body of a woman. [It does not necessarily result in the formation of an embryo which is fit for transfer.] Intra Cytoplasmic Sperm Injection (ICSI) may also be used as a part of an IVF procedure.

LICENSED PLACE

A place in respect of which a licence under Part 8 of the Act is in force.

ONGOING PREGNANCIES

Ongoing clinical pregnancies as at the dates on page 17. Finalised delivery and birth details will be reported in the next Annual Report to be published.

OOCYTE (EGG) RETRIEVAL

Procedure undertaken in an attempt to collect oocyte/s from a woman.

PREIMPLANTATION GENETIC DIAGNOSIS

After IVF, one or two cells are removed from the embryo in vitro and tested to avoid the transmission of a genetic abnormality or congenital disease inherited from the parents. This

procedure may also be used for IVF and pregnancy failure.

STIMULATED CYCLE

A treatment cycle in which the woman's ovaries are stimulated with superovulatory drugs, excluding clomiphene citrate, to produce more than one oocyte.

THAW CYCLE

A thaw cycle commences with the removal of frozen embryos from storage in order to be thawed and then transferred.

TRANSFER

The procedure of placing embryos or oocytes and sperm into the body of a woman.

TREATMENT CYCLE COMMENCED

A treatment cycle begins (a) on the day when superovulatory drugs were commenced or (b) from the date of the last menstrual period.

TREATMENT CYCLE CONTINUED

For the purposes of reporting, a treatment cycle continues when: (a) for IVF/GIFT, an oocyte retrieval procedure occurs (b) for frozen embryo transfer, an embryo transfer procedure occurs (c) for donor insemination, if insemination occurs.

UNSTIMULATED CYCLE

A treatment cycle where no superovulatory drugs are used or where only clomiphene citrate is used.

WOMEN IN TREATMENT

Women in treatment are either married women, women in a heterosexual de facto relationship, or single women. All women must be eligible for treatment as outlined in section 8 of the Act.

Final Outcomes for Treatment Cycles Commenced in 2003

This report includes a final outcome of treatment procedures undertaken in 2003. These final figures were not available at the time of the production of the 2004 Annual Report. Similarly, this year, a full report on treatment outcomes is not possible until next year's Annual Report. As pregnancies are ongoing, some outcomes are not known at the time of this report going to print.

Licensed Place	Total No. Women Treated	Cycles Cont'd	Clinical Preg-nancies	Confine-ments	No. of Babies Born	Preg. Outcome Unknown	Total No. Women Treated	Cycles Cont'd	Clinical Preg-nancies	Confine-ments	No. of Babies Born	Preg. Outcome Unknown
	IVF						GIFT					
Bairnsdale Regional Health Service	20	21	3	2	3	0	1	1	0	0	0	0
Ballarat Day Procedure Centre	119	147	41	30	38	1	0	0	0	0	0	0
Barwon Health	84	108	17	14	17	0	0	0	0	0	0	0
Bendigo Healthcare Group	46	52	12	8	9	0	0	0	0	0	0	0
Casterton Memorial Hospital	49	59	16	15	18	0	0	0	0	0	0	0
Central Gippsland Health Service	50	51	14	13	14	0	2	2	0	0	0	0
Epworth Hospital	598	770	200	161	197	1	7	8	1	1	1	0
Freemasons Hospital	996	1312	317	237	282	0	5	5	0	0	0	0
Mercy Hospital for Women	0	0	0	0	0	0	101	132	27	17	20	0
Mildura Private Hospital	46	56	10	10	13	0	0	0	0	0	0	0
Monash Surgical Private Hospital	1007	1337	304	240	283	1	4	4	0	0	0	0
Northern Health	67	88	15	12	13	0	2	3	1	1	1	0
The Royal Women's Hospital	1048	1259	312	235	283	0	0	0	0	0	0	0
Aggregated Total	4130	5260	1261	977	1170	3	122	155	29	19	22	0
	THAW CYCLE						DI					
Bairnsdale Regional Health Service	17	17	4	4	6	0	0	0	0	0	0	0
Ballarat Day Procedure Centre	60	88	14	9	9	0	0	0	0	0	0	0
Barwon Health	10	13	3	3	3	0	0	0	0	0	0	0
Bendigo Healthcare Group	14	18	1	1	1	0	0	0	0	0	0	0
Casterton Memorial Hospital	30	35	4	4	5	0	0	0	0	0	0	0
Central Gippsland Health Service	24	26	0	0	0	0	0	0	0	0	0	0
Epworth Hospital	546	847	90	66	74	1	35	99	11	8	10	0
Freemasons Hospital	725	1217	231	174	194	2	4	4	1	1	1	0
Mildura Private Hospital	47	64	13	9	9	0	0	0	0	0	0	0
Monash Surgical Private Hospital	636	987	112	90	97	0	32	92	8	8	8	0
Northern Health	17	20	1	0	0	0	0	0	0	0	0	0
The Royal Women's Hospital	744	1273	265	198	228	1	57	168	30	24	24	0
Aggregated Total	2870	4605	738	558	626	4	128	363	50	41	43	0

section 2

Summary of Treatment Procedures in Victoria

The following tables outline what happens in Victoria in terms of the different treatment procedures. Greater detail is given about treatment procedures and the outcomes at different places in Section 3.

Table 2.1 Summary of Treatment Procedures In Victoria, 2004 Calendar Year

Licensed Place	Total No. Women Treated	Total No. Cycles Continued	Total No. Clinical Pregnancies	Total No. Confinement	Total No. Babies Born	Total No. Ongoing Pregnancies
Whole of Victoria	7456	11284	2170	907	1042	929
BY PROCEDURE						
IVF	4243	5812	1293	542	645	577
GIFT	98	134	25	2	2	0
THAW	3003	5046	822	348	380	338
DI	112	292	30	15	15	14

Table 2.2 Outcomes by Treatment Type by Age of Women – Whole of Victoria, 2004 Calendar Year

Age Group of Women	Total No. Women Treated	Total No. Cycles Continued	Total No. Clinical Pregnancies	Total No. Confinements	Total No. Babies Born as at dates p17	Total Ongoing Pregnancies as at dates p17
DI PROCEDURES						
20-24	1	3	0	0	0	0
25-29	18	47	5	3	3	2
30-34	40	100	13	6	6	7
35-39	39	114	12	6	6	5
40-44	13	27	0	0	0	0
45-49	1	1	0	0	0	0
Aggregated Total	112	292	30	15	15	14
IVF/GIFT/THAW PROCEDURES						
< 20	2	2	0	0	0	0
20-24	64	127	36	12	15	20
25-29	508	974	231	91	103	112
30-34	1769	3497	802	366	439	344
35-39	1969	3997	812	338	375	342
40-44	1031	2157	229	78	86	84
45-49	119	214	25	7	9	9
50-54	11	24	5	0	0	4
Aggregated Total	5473	10992	2140	892	1027	915

Outcomes from IVF, GIFT and Thaw Cycles

Tables in this section outline the specific types of treatment and the outcomes arising from that treatment. They also provide comprehensive information about the use of embryos.

Table 3.1 Outcomes Per Licensed Place, IVF, 2004 Calendar Year

Licensed Place	Total No. Women Treated	Total No. Cycles Continued	Total No. Clinical Pregnancies	Total No. Confinements	Total No. Babies Born as at dates p17	Total Ongoing Pregnancies as at dates p17
Bairnsdale Regional Health Service	10	10	2	2	2	0
Ballarat Day Procedure Centre	135	171	51	17	22	24
Barwon Health – Monash IVF Geelong	90	114	28	10	13	15
Bendigo Healthcare Group	59	75	19	8	10	11
Casterton Memorial Hospital	51	61	14	4	4	10
Central Gippsland Health Service	50	58	14	5	5	9
Epworth Hospital	759	1020	218	90	106	106
Freemasons Hospital	1111	1423	323	172	202	99
Mildura Private Hospital	62	76	19	8	9	8
Monash Surgical Private Hospital	1053	1391	259	83	104	162
Northern Health	64	78	19	5	6	11
The Royal Women's Hospital	1117	1335	327	138	162	122
Aggregated Total	4561	5812	1293	542	645	577

Table 3.2 Oocyte Collection and Transfer Per Licensed Place, IVF, 2004 Calendar Year

Licensed Place	Total No. Oocyte Retrievals	Total No. Oocytes Collected	Total No. Oocytes Inseminated	Total No. Oocytes Fertilised	Total No. Cycles where no Embryo formed	Total No. Embryos Transferred	Total No. Embryos Frozen	Total No. Embryos [^]
Bairnsdale Regional Health Service	10	78	68	47	0	15	20	12
Ballarat Day Procedure Centre	171	1469	1515	937	14	286	418	233
Barwon Health – Monash IVF Geelong	114	1254	1157	858	4	198	412	248
Bendigo Healthcare Group	75	739	660	508	2	133	261	114
Casterton Memorial Hospital	61	454	404	287	0	87	125	75
Central Gippsland Health Service	58	599	574	407	0	96	173	138
Epworth Hospital	1020	10244	9814	6458	42	1593	2380	2485
Freemasons Hospital	1423	13438	12677	8500	68	2037	3910	2553
Mildura Private Hospital	76	711	665	378	6	107	161	110
Monash Surgical Private Hospital	1391	14381	13013	8592	51	2071	3101	3420
Northern Health	78	751	677	471	1	121	219	131
The Royal Women's Hospital	1335	12868	12291	8514	70	1945	3950	2619
Aggregated Total	5812	56986	53515	35957	258	8689	15130	12138

[^] Unsuitable for freezing or transfer

Table 3.3 Outcomes Per Licensed Place, GIFT, 2004 Calendar Year

Licensed Place	Total No. Women Treated	Total No. Cycles Continued	Total No. Clinical Pregnancies	Total No. Confinements	Total No. Babies Born as at dates p17	Total Ongoing Pregnancies as at dates p17
Central Gippsland Health Service	2	2	1	1	1	0
Epworth Hospital	2	2	0	0	0	0
Freemasons Hospital	1	1	0	0	0	0
Mercy Hospital for Women	86	122	23	0	0	0
Monash Surgical Private Hospital	6	6	1	1	1	0
Northern Health	1	1	0	0	0	0
Aggregated Total	98	134	25	2	2	0

Table 3.4 Oocyte Collection and Transfer Per Licensed Place, GIFT, 2004 Calendar Year

Licensed Place	Total No. Oocyte Retrieval Attempts	Total No. of Oocytes Collected	Total No. of Oocytes Transferred	Total No. of Oocytes Inseminated	Total No. of Oocytes Fertilised	Total No. of Embryos Frozen
	GIFT			ADDITIONAL PROCEDURES FOLLOWING GIFT		
Central Gippsland Health Service	2	22	4	12	11	9
Epworth Hospital	2	30	4	22	16	14
Freemasons Hospital	1	14	3	11	8	6
Mercy Hospital for Women	122	909	397	0	0	0
Monash Surgical Private Hospital	6	34	11	14	6	5
Northern Health	1	24	2	0	0	0
Aggregated Total	134	1033	421	59	41	34

Table 3.5 Outcomes Per Licensed Place, Thaw Cycle, 2004 Calendar Year

Licensed Place	Total No. Women Treated	Total No. Cycles Continued	Total No. Embryos Thawed	Total No. Embryos Transferred	Total No. Clinical Pregnancies	Total No. Confinements	Total No. Babies Born as at dates p17	Total Ongoing Pregnancies as at dates p17
Bairnsdale Regional Health Service	8	8	27	10	1	0	0	0
Ballarat Day Procedure Centre	77	117	277	212	15	6	5	7
Barwon Health – Monash IVF Geelong	15	19	49	28	3	1	1	1
Bendigo Healthcare Group	15	18	44	31	2	0	0	2
Casterton Memorial Hospital	42	53	108	79	4	2	3	2
Central Gippsland Health Service	22	27	66	42	5	1	2	4
Epworth Hospital	594	925	2107	1342	113	44	49	58
Freemasons Hospital	747	1326	2452	1836	237	122	135	59
Mildura Private Hospital	39	53	120	73	8	2	2	3
Monash Surgical Private Hospital	702	1085	2354	1529	154	43	46	105
Northern Health	17	24	53	39	2	1	1	1
The Royal Women's Hospital	820	1391	2430	1998	278	126	136	96
Aggregated Total	3098	5046	10087	7219	822	348	380	338

Table 3.6 Outcomes Per Licensed Place, Stimulated/Unstimulated IVF/GIFT, 2004 Calendar Year

Licensed Place	Total No. Women Treated	Total No. Cycles Continued	Total No. Clinical Pregnancies	Total No. Confinements	Total No. Babies Born as at dates p17	Total Ongoing Pregnancies as at dates p17
STIMULATED						
Bairnsdale Regional Health Service	10	10	2	2	2	0
Ballarat Day Procedure Centre	123	157	44	15	19	22
Barwon Health – Monash IVF Geelong	85	109	28	10	13	15
Bendigo Healthcare Group	55	71	18	7	9	11
Casterton Memorial Hospital	49	59	13	4	4	9
Central Gippsland Health Service	48	55	15	6	6	9
Epworth Hospital	697	940	197	82	96	96
Freemasons Hospital	1041	1304	304	166	195	89
Mercy Hospital for Women	86	122	23	0	0	0
Mildura Private Hospital	62	76	19	8	9	8
Monash Surgical Private Hospital	1005	1333	242	79	97	152
Northern Health	64	78	18	5	6	10
The Royal Women's Hospital	1047	1240	296	123	146	114
Aggregated Total	4372	5554	1219	507	602	535
UNSTIMULATED						
Ballarat Day Procedure Centre	14	14	7	2	3	2
Barwon Health – Monash IVF Geelong	5	5	0	0	0	0
Bendigo Healthcare Group	4	4	1	1	1	0
Casterton Memorial Hospital	2	2	1	0	0	1
Central Gippsland Health Service	5	5	0	0	0	0
Epworth Hospital	68	82	21	8	10	10
Freemasons Hospital	95	120	19	6	7	10
Monash Surgical Private Hospital	55	64	18	5	8	10
Northern Health	1	1	1	0	0	1
The Royal Women's Hospital	85	95	31	15	16	8
Aggregated Total	334	392	99	37	45	42

Note: Some women had both stimulated and unstimulated IVF/GIFT and therefore are counted in Total no. women treated for both stimulated and unstimulated IVF/GIFT.

Table 3.7 Storage of Oocytes/Embryos Per Licensed Place, 2004 Calendar Year

Licensed Place	Women with Oocytes/Ovarian Tissue	Start of Reporting Period	Thawed for Cycles Commenced	Frozen from Cycles Commenced	Remaining in Storage
OOCYTES STORED					
Bairnsdale Regional Health Service	0	0	27	20	0
Ballarat Day Procedure Centre	0	405	282	556	679
Barwon Health – Monash IVF Geelong	0	0	52	412	0
Bendigo Healthcare Group	0	0	46	261	0
Casterton Memorial Hospital	0	0	107	125	0
Central Wellington Health Service (Sale)	0	0	66	182	0
Epworth Hospital	45	7126	2115	2383	7706
Freemasons Hospital	12	7045	2457	3940	8103
Mercy Hospital for Women	93	0	0	0	0
Mildura Private Hospital	0	320	147	161	334
Monash Surgical Private Hospital	9	5797	2383	3147	6269
Northern Health	0	0	54	219	0
The Royal Women's Hospital	252	8834	2429	3970	9416
Aggregated Total	411	29527	10165	15376	32507
EMBRYOS STORED					

Multiple Births Arising from Treatment Procedures During 2004

Table 4 Multiple Births as at 1 April 2005 Per Licensed Place, 2004 Calendar Year

Licensed Place	Total No. Confinements	Total No. Babies Born	Number of Singletons Born	No. Sets of Twins Born	No. Sets of Triplets Born
Bairnsdale Regional Health Service	2	2	2	0	0
Ballarat Day Procedure Centre	23	27	17	5	0
Barwon Health – Monash IVF Geelong	11	14	8	3	0
Bendigo Healthcare Group	8	10	6	2	0
Casterton Memorial Hospital	6	7	5	1	0
Central Gippsland Health Service	7	8	6	1	0
Epworth Hospital	136	157	113	22	0
Freemasons Hospital	294	337	239	49	0
Mercy Hospital for Women**	0	0	0	0	0
Mildura Private Hospital	10	11	7	2	0
Monash Surgical Private Hospital	127	151	104	22	1
Northern Health	6	7	5	1	0
The Royal Women's Hospital	277	311	227	42	0
Aggregated Total	907	1042	739	150	1

Donor Treatment Procedures

Table 5.1 Use of Donor Gametes and Embryos and Outcomes, All Licensed Places, 2004 Calendar Year

Licensed Place	Total No. Women Treated	Total No. Cycles Continued	Total No. Clinical Pregnancies	Total No. Confinements	Total No. Babies Born as at dates p17	Total Ongoing Pregnancies as at dates p17
Donor embryo	21	30	1	0	0	1
Donor oocytes	242	265	86	35	43	32
Donor Sperm	317	809	116	45	48	61
Aggregated Total	580	1104	203	80	91	94

Table 5.2 Outcomes Per Licensed Place, Stimulated/Unstimulated, DI, 2004 Calendar Year

Licensed Place	Total No. Women Treated	Total No. Cycles Continued	Total No. Clinical Pregnancies	Total No. Confinements	Total No. Babies Born as at dates p17	Total Ongoing Pregnancies as at dates p17
STIMULATED						
Central Gippsland Health Service	1	2	0	0	0	0
Epworth Hospital	1	2	0	0	0	0
Monash Surgical Private Hospital	2	3	0	0	0	0
The Royal Women's Hospital	18	39	10	8	8	2
Aggregated Total	22	46	10	8	8	2
UNSTIMULATED						
Epworth Hospital	27	72	4	2	2	2
Freemasons Hospital	1	1	0	0	0	0
Monash Surgical Private Hospital	30	78	5	0	0	5
The Royal Women's Hospital	44	95	11	5	5	5
Aggregated Total	102	246	20	7	7	12

Note: Some women had both stimulated and unstimulated donor insemination (DI) and therefore are counted in Total no. women treated for both stimulated and unstimulated DI.

Table 5.3 Storage of Donor Sperm, 2004 Calendar Year

Licensed Place	Total No. of Donors whose Sperm is Stored and Available for Donor Treatment (at start of period)	New Donors Recruited during Reporting Year (2004)
Ballarat Day Procedure Centre	0	9
Epworth Hospital	129	13
Mildura Private Hospital	0	0
The Royal Women's Hospital	69	10
Aggregated Total	198	23

Table 5.4 Number of Oocyte and Embryo Donors, 2004 Calendar Year

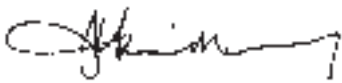
Licensed Place	Known	Anonymous	Known	Anonymous
	OOCYTE		EMBRYO	
Ballarat Day Procedure Centre	13	0	0	1
Barwon Health – Monash IVF Geelong	4	1	0	0
Bendigo Health Care Group	2	1	0	0
Casterton Memorial Hospital	2	0	0	0
Central Wellington Health Service	2	2	0	0
Epworth Hospital	57	12	6	17
Freemasons Hospital	46	0	0	10
Mildura Private Hospital	0	0	0	0
Monash Surgical Private Hospital	57	7	4	1
Northern Health	1	0	0	0
The Royal Women's Hospital	46	8	0	24
Aggregated Total	230	31	10	53

Accountable officer's, chief finance and accounting officer's and member of responsible body's declaration

We certify that the attached financial statements for Infertility Treatment Authority have been prepared in accordance with Part 4.2 of the Standing Directions of the Minister for Finance under the Financial Management Act 1994, applicable Financial Reporting Directions, Australian accounting standards and other mandatory professional reporting requirements.

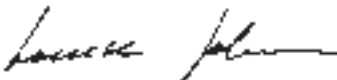
We further state that, in our opinion, the information set out in the statement of financial performance, statement of financial position, statement of cash flows and notes to and forming part of the financial statements, present fairly the results of the financial transactions during the year ended 30 June 2005 and financial position of the Authority as at 30 June 2005.

We are not aware of any circumstances which would render any particulars included in the financial statements to be misleading or inaccurate.



Professor Jock Findlay AM

Chairperson



Ms Louise Johnson

Chief Executive Officer

Date: 13th September 2005

MELBOURNE



AUDITOR GENERAL
VICTORIA

INDEPENDENT AUDIT REPORT

Infertility Treatment Authority

To the Members of the Parliament of Victoria and Members of the Board of the Authority

Scope

The Financial Report

The accompanying financial report for the year ended 30 June 2005 of the Infertility Treatment Authority consists of the statement of financial performance, statement of financial position, statement of cash flows, notes to and forming part of the financial report, and the supporting declaration.

Members' Responsibility

The Members of the Board of the Infertility Treatment Authority are responsible for:

- the preparation and presentation of the financial report and the information it contains, including accounting policies and accounting estimates
- the maintenance of adequate accounting records and internal controls that are designed to record its transactions and affairs, and prevent and detect fraud and errors.

Audit Approach

As required by the *Audit Act* 1994, an independent audit has been carried out in order to express an opinion on the financial report. The audit has been conducted in accordance with Australian Auditing Standards to provide reasonable assurance as to whether the financial report is free of material misstatement.

The audit procedures included:

- examining information on a test basis to provide evidence supporting the amounts and disclosures in the financial report
- assessing the appropriateness of the accounting policies and disclosures used, and the reasonableness of significant accounting estimates made by the members
- obtaining written confirmation regarding the material representations made in conjunction with the audit
- reviewing the overall presentation of information in the financial report.

These procedures have been undertaken to form an opinion as to whether the financial report is presented in all material respects fairly in accordance with Accounting Standards and other mandatory professional reporting requirements in Australia, and the financial reporting requirements of the *Financial Management Act* 1994, so as to present a view which is consistent with my understanding of the Authority's financial position, and its financial performance and cash flows.

The audit opinion expressed in this report has been formed on the above basis.



AUDITOR GENERAL
VICTORIA

Independent Audit Report (continued)

Independence

The Auditor-General's independence is established by the *Constitution Act 1975*. The Auditor-General is not subject to direction by any person about the way in which his powers are to be exercised. The Auditor-General and his staff and delegates comply with all applicable independence requirements of the Australian accounting profession.

Audit Opinion

In my opinion, the financial report presents fairly in accordance with applicable Accounting Standards and other mandatory professional reporting requirements in Australia, and the financial reporting requirements of the *Financial Management Act 1994*, the financial position of the Infertility Treatment Authority as at 30 June 2005 and its financial performance and cash flows for the year then ended.

MELBOURNE
13 September 2005


JW CAMERON
Auditor-General

financial statements

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The accompanying notes form part of these financial statements

Statement of Financial Performance for the year ended 30 June 2005

	Notes	2005 \$	2004 \$
Revenue from ordinary activities	2	522,507	570,811
Employee benefits expense	3	(249,267)	(220,616)
Depreciation and amortisation expenses	3	(17,528)	(13,061)
Other expenses from ordinary activities	3	(277,964)	(271,405)
(Loss)/Profit from ordinary activities		(22,252)	65,729
Total changes in equity other than those resulting from transactions with owners as owners		(22,252)	65,729

Statement of Financial Position as at 30 June 2005

	Notes	2005 \$	2004 \$
CURRENT ASSETS			
Cash assets	6	112,438	129,220
Receivables	7	904	2,427
Total Current Assets		113,342	131,647
NON-CURRENT ASSETS			
Property, plant and equipment	8	46,131	57,008
Total Non-Current Assets		46,131	57,008
TOTAL ASSETS		159,473	188,655
CURRENT LIABILITIES			
Payables	9	41,553	37,485
Prepaid Income	10	31,350	20,970
Provisions	11	8,274	5,936
Total Current Liabilities		81,177	64,391
NON-CURRENT LIABILITIES			
Provisions	11	983	24,699
Total Non-Current Liabilities		983	24,699
TOTAL LIABILITIES		82,160	89,090
NET ASSETS		77,313	99,565
EQUITY			
Contributed Capital	12a	11,200	11,200
Retained profits	12b	66,113	88,365
TOTAL EQUITY		77,313	99,565

Statement of Cash Flows for the year ended 30 June 2005

	Notes	2005 \$	2004 \$
CASH FLOW FROM OPERATING ACTIVITIES			
Operating Grant Receipts		507,302	556,705
Payments to suppliers and employees		(567,251)	(508,341)
GST paid to the ATO		(25,530)	(20,865)
Interest received		3,763	1,784
Income from Fees		55,117	47,034
Other Income		16,468	15,081
Net cash provided by operating activities	13 (b)	(10,131)	91,398
CASH FLOW FROM INVESTING ACTIVITIES			
Payment for property, plant and equipment		(6,651)	(34,636)
Net cash used in investing activities		(6,651)	(34,636)
Net increase/(decrease) in cash held		(16,782)	56,762
Cash at beginning of financial year		129,220	72,458
Cash at end of financial year	13 (a)	112,438	129,220

Notes to the Financial Statements for the year ended 30 June 2005

NOTE 1: STATEMENT OF SIGNIFICANT ACCOUNTING POLICIES

This general purpose financial report has been prepared in accordance with the Financial Management Act 1994, Australian Accounting Standards, Statements of Accounting Concepts and other authoritative pronouncements of the Australian Accounting Standards Board, and Urgent Issues Group Consensus Views.

(a) Comparatives

Where necessary the figures for the previous year have been reclassified to facilitate comparison.

(b) Accrual Basis

The accrual basis of accounting has been used with revenues and expenses being recognised as they are earned or incurred, and are brought to account in the period to which they relate.

(c) Historical Cost

The financial statements have been prepared on the historical cost basis whereby assets are recorded at cost and do not take into account changing money values or the current costs of non-current assets.

(d) Rounding Off

All amounts shown in the financial statement are expressed to the nearest dollar.

(e) Property, Plant and Equipment

Each class of property plant and equipment is carried at cost or fair value less, where applicable, any accumulated depreciation.

The carrying amount of plant and equipment is reviewed annually by the directors to ensure it is not in excess of the recoverable amount from those assets. The recoverable amount is assessed on the basis of the expected net cash flows which will be received from the assets employment and subsequent disposal. The expected net cash flows have not been discounted to present values in determining recoverable amounts.

Depreciation

The depreciable amount of all fixed assets including buildings and capitalised leased assets, but excluding freehold land, are depreciated over their estimated useful lives to the company commencing from the time the asset is held ready for use. Properties held for investment purposes are not subject to a depreciation charge. Leasehold improvements are amortised over the shorter of either the unexpired period of the lease or the estimated useful lives of the improvements. The useful lives of non current assets on which depreciation is based are:

Class of fixed asset	Useful Life
Plant & Equipment	up to 4 years
Furniture & Fittings	up to 5 years
Website development & Software	up to 4 years

(f) Payables

Payables are recognised for amounts to be paid in the future for goods and services received, whether or not billed to the Authority. Payables are normally on 30-day terms.

(g) Receivables

Receivables are carried at nominal amounts due. Credit sales are on 30-day terms.

(h) Contributed Capital

Consistent with UIG Abstract 38 *Contributions by owners made to wholly-owned public sector entities* and Accounting and Financial Reporting Bulletin No. 39 *Accounting for contributed capital*, transfers that are in the nature of contributions or distributions have been designated as contributed capital.

(i) Goods and Services Tax (GST)

Revenues, expenses and assets are recognised net of the amount of GST, except where the amount of GST incurred is not recoverable from the Australian Taxation Office. In these circumstances the GST is recognised as part of the cost of acquisition of the asset or as part of an item of expense or revenue. Receivables and payables in the Statement of Financial Position are shown inclusive of GST. The GST component of a receipt or payment is recognized on a gross basis in the statement of cash flows in accordance with Accounting Standard AAS 28.

(j) Prepaid Licensing Fees

The authority charges License Fees to Licensed Places and professionals who operate infertility treatment practices. The License Fees are for the period 1 March 2005 to 30 April 2006. As a result nine months of License Fees that have been paid in this year have been recognised as prepaid Licensing Fees.

(k) Employee Benefits

Based on pay rates expected to apply when the obligation is settle. On-costs such as WorkCover and superannuation are included in the calculation of leave provisions.

The provision for long-service leave is determined in accordance with AASB 1028. The liability for long-service leave expected to be settled within 12 months of the reporting date is recognised in the provision for employee benefits as a current liability. The liability for long-service leave expected to be settled more than 12 months from the reporting date is recognised in the provision for employee benefits and measured as the present value of expected future payments to be made in respect of services provided by employees up to the reporting date. Consideration is given to expected future wage and salary levels, experience of employee departures and periods of service. Expected future payments are discounted using interest rates on national Government guaranteed securities with terms to maturity that act, as closely as possible, the estimated future cash outflows.

Liabilities for wages and salaries, and annual leave are recognised, and are measured as he amount of unpaid at the reporting date in respect of employee's services up to the reporting date and are measured as the amounts expected to be paid when the liabilities are settled.

(l) Cash

For the purposes of the Statement of Cash Flows, cash includes cash on hand and at call deposits with banks or financial institutions, investments in money market instruments maturing within less than two months and net of bank overdrafts.

(m) Economic Dependency

Infertility Treatment Authority is dependent upon State of Victoria, via the Department of Human Services, for the funding of a significant proportion of its operations.

(n) Impact of Adoption of Australian Equivalents to International Financial Reporting Standards

The Authority is preparing and managing the transition to Australian Equivalents to International Financial Reporting Standards (AIFRS) effective for the financial years commencing from 1 January 2005. The adoption of AIFRS will be reflected in the Authority's financial statements for the year ending 30 June 2006. On first time adoption of AIFRS, comparatives for the financial year ended 30 June 2005 are required to be restated. The majority of the AIFRS transitional adjustments will be made retrospectively against retained earnings at 1 July 2004.

The Authority's management, along with its auditors, have assessed the significance of the expected changes and are preparing for their implementation. An AIFRS committee is overseeing and managing the Authority's transition to AIFRS. The impact of the alternative treatments and elections under AASB 1: First Time Adoption of Australian Equivalents to International Financial Reporting Standards, has been considered where applicable.

The Authority members are of the opinion that the key material differences in the entity's accounting policies on conversion to AIFRS and the financial effect of these differences where known are provided below.

Users of the financial statements should, however, note that the amounts disclosed could change if there are any amendments by standard-setters to the current AIFRS, or interpretation of the AIFRS requirements change from continued work of the Authority's AIFRS committee.

Impairment of Assets

Under AASB 136: Impairment of Assets, the recoverable amount of an asset is determined as the higher of fair value less costs to sell and value in use. In determining value in use, projected future cash flows are discounted using a risk adjusted pre-tax discount rate and impairment is assessed for the individual asset or at the 'cash generating unit' level. A 'cash generating unit' is determined as the smallest group of assets that generates cash flows, which are largely independent of the cash inflows from other assets or groups of assets. The current policy is to determine the recoverable amount of an asset on the basis of undiscounted net cash flows that will be received from the asset's use and subsequent disposal. It is likely that this change in accounting policy will lead to impairments being recognised more often. The authority has reassessed its impairment testing policy and tested all assets for impairment at 1 July 2005. The impact of the change is estimated to be \$NIL.

Notes to the Financial Statements for the year ended 30 June 2005

	Notes	2005 \$	2004 \$
NOTE 2: REVENUE			
Operating Activities			
Approval Fees		11,193	8,415
Government Grant		416,449	457,295
Licensing Fees		33,543	39,435
Sales of Publications		15	1,335
Public Education		43,000	43,000
- Symposium		14,013	12,540
- Interest	2(a)	3,763	1,785
- Other		531	7,006
		522,507	570,811
(a) Interest from: other persons		3,763	1,785
NOTE 3: EXPENSES FROM ORDINARY ACTIVITIES			
Employee Benefits Expense			
Salaries and Wages		224,297	184,627
Superannuation	4	21,853	34,078
Staff Amenities		348	224
Staff Development & Seminars		2,769	1,687
<i>Total employee benefits</i>		249,267	220,616
Supplies and Services Expense			
Accounting		21,295	16,430
Advertising		5,411	2,553
Audit Fees	5	4,484	4,000
Bank Charges		537	352
Compactus		-	6,840
Computer Maintenance		4,873	8,775
Consultants Fees		6,453	11,988
Courier/Postage		3,505	4,296
Entertainment		3,543	3,372
Insurance		520	1,664
ITA Publications		8,094	7,620
Lease Payments		4,200	3,658
Legal Fees		7,176	13,228
Long Service Leave		(1,426)	-
Loss on Sale of Assets		-	2,764
Maintenance		149	1,347
Member Sitting Fees		68,317	67,118
Motor Vehicle Expense		3,715	3,761
Office Outgoings		473	3,289
Other		1,164	-
Printing and Stationery		9,150	10,383
Public Education		5,461	4,276
Public Relations		12,678	10,990
Rent on Land & Building		36,924	39,763
Software		-	2,755
Subscriptions		-	6,118
Staff Recruitment Costs		26,385	-
Symposium/Seminars		24,512	15,858
Telephone		7,599	9,857
Travel and Accommodations		12,772	8,350
<i>Total Supplies and Services</i>		277,964	271,405
Depreciation		17,528	13,061
Total Expenses		544,759	505,082

Notes to the Financial Statements for the year ended 30 June 2005

NOTE 4: SUPERANNUATION

Operating Activities

Details in relation to superannuation funds are as follows:

- The Authority contributed on behalf of its employees during the year ended 30 June 2005 to Vic Super, Hesta, Health Super, Catholic Super, CARE Superannuation Fund, Uni Super, Troike Superannuation Fund, AMP Life and Asgard, being a complying fund under the *Superannuation Industry (Supervision) Act 1993*.
- No loans exist between the Authority and these superannuation funds.
- The amount of total contributions by the Authority to these superannuation funds for the year amounted to \$21,853 (2004: \$111,122) and the contributions outstanding at year end amounted to nil (2004: nil).
- The basis for the calculation of superannuation in accordance with the statutory requirements, which specifies that contributions of the Authority are based on a percentage of the employee's salary. During the period these contributions were at the rate of 9% of gross salaries. Employee contributions were nil (2004: \$14,000).

NOTE 5: AUDITORS REMUNERATION

Remuneration of the auditors for:

	2005 \$	2004 \$
Audit or Review Services	4,200	4,000

NOTE 6: CASH ASSETS

Cash at Bank	112,086	129,170
Cash on Hand	352	50
	112,438	129,220

NOTE 7: RECEIVABLES

Debtors	904	2,427
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NOTE 8: PROPERTY, PLANT AND EQUIPMENT

Plant and Equipment

(a) Motor Vehicles

At Cost	31,216	31,216
Less Accumulated Depreciation	(6,875)	(1,258)
	24,341	29,958

(b) Computer Equipment

At Cost	69,644	62,993
Less Accumulated Depreciation	(52,579)	(42,310)
	17,065	20,683

(c) Office Equipment

At Cost	81,106	81,106
Less Accumulated Depreciation	(76,381)	(74,739)
	4,725	6,367

Total Property, Plant and Equipment

	46,131	57,008
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Movements in Carrying Amounts

Movement in the carrying amounts for each class of property, plant and equipment between the beginning and the end of the current financial year

	Motor Vehicles \$	Computer Equipment \$	Office Equipment \$	Total \$
2005				
Balance at the Beginning of the Year	29,958	20,683	6,367	57,008
Additions	-	6,651	-	6,651
Depreciation Expense	(5,617)	(10,269)	(1,642)	(17,528)
Disposals	-	-	-	-
Carrying Amount at End of Year	24,341	17,065	4,725	46,131

Notes to the Financial Statements for the year ended 30 June 2005

Notes	2005 \$	2004 \$
NOTE 9: PAYABLES		
Current		
Audit and Accounting Fees	11,565	11,717
Fringe Benefits Tax Liability	3,360	736
Group Tax Payable	7,574	9,680
GST Payable	6,322	8,676
Lease Liability	345	345
Superannuation Payable	5,963	5,598
Sundry Creditors and Accruals	6,424	733
	41,553	37,485
NOTE 10: PREPAID INCOME		
Prepaid Licensing Fees	31,350	20,970
NOTE 11: PROVISIONS		
Employee Entitlements		
CURRENT		
Annual Leave (a)	8,274	5,936
NON-CURRENT		
Long-Service Leave (a)	983	24,699
(a) Aggregate Employee Benefits Liability	9,257	30,635
(b) Number of Employees at Year End	6	7
NOTE 12: EQUITY		
(a) Contributed Capital		
Balance at the Beginning of the Reporting Period	11,200	11,200
Recognition of Opening Balance on Adoption of UIG 38/AFR No. 39 Capital Contributions	-	-
Balance at the End of the Reporting Period	11,200	11,200
(b) Retained Profits		
Balance at the Beginning of the Reporting Period	88,365	22,636
Net Profit Attributable to Members of the Authority	(22,252)	65,729
Adjustments Resulting in Change of Accounting Policy	-	-
Balance at the End of the Reporting Period	66,113	88,365
(c) Equity		
Total Equity at the Beginning of the Reporting Period	99,565	33,836
Total Changes in Equity Recognised in the Statement of Financial Performance of the Authority	(22,252)	65,729
Balance at the End of the Reporting Period	77,313	99,565
NOTE 13: CASH FLOW INFORMATION		
(a) Reconciliation of Cash		
Cash at the end of the financial year as shown in the statement of Cash Flows is reconciled to the related items in the statement of financial position as follows:		
Cash at Bank	112,086	129,170
Cash on Hand	352	50
	112,438	129,220
(b) Reconciliation of Cash Flow from Operations with Profit from Ordinary Activities after Income Tax		
Profit from Ordinary Activities after Income Tax	(22,252)	65,729
Non-Cash Flows in Profit from Ordinary Activities		
Depreciation	17,528	13,061
Changes in Assets and Liabilities		
Decrease/(Increase) in Receivables	1,523	615
Increase in Payables	4,068	10,785
Increase/(Decrease) in Prepaid Income	10,380	(1,431)
Increase/(Decrease) in Provisions	(21,378)	2,639
Cash Flows from Operations	(10,131)	91,398

Notes to the Financial Statements for the year ended 30 June 2005

NOTE 14: FINANCIAL INSTRUMENTS

(a) Interest Rate Risk

The company's exposure to interest rate risk, which is the risk that a financial instrument's value will fluctuate as a result of changes in market interest rates and the effective weighted average interest rates on classes of financial assets and financial liabilities, is as follows:

(b) Credit Risk

The maximum exposure to credit risk, excluding the value of any collateral or other security, at balance date to recognised financial assets is the carrying amount of those assets, net of any provisions for doubtful debts, as disclosed in the statement of financial position and notes to the financial report. The company does not have any material credit risk exposure to any single debtor or group of debtors under financial instruments entered into by the company.

(c) Net Fair Values

The net fair value of listed investments have been valued at the quoted market bid price at balance date adjusted for transaction costs expected to be incurred. For other assets and other liabilities the net fair value approximates their carrying value. No financial assets and financial liabilities are readily traded on organised markets in standardised form other than listed investments, forward exchange contracts and interest rate swaps. Financial assets where the carrying amount exceeds net fair values have not been written down as the company intends to hold these assets to maturity. The aggregate net fair values and carrying amount of financial assets and financial liabilities are disclosed in the statement of financial position and in the notes to the financial statements.

NOTE 15: RELATED PARTIES

(a) Responsible Minister

The Hon. Bronwyn Pike, Minister for Health is the Responsible Minister.

(b) Authority Members

The names of Authority members at the date of this report are:

Prof. H Burger AO
 Prof. J.K. Findlay AM (Chairman)
 Ms M. Coady
 Mr. M. Gorton AM
 Dr D. Edgar
 Hon. C. Hogg
 Ms A. Styles

(c) Members' Remuneration

Income paid or payable to all directors of the Authority

	2005	2004
	\$	\$
	68,317	67,118

Number of directors whose remuneration was within the following bands:

	No.	No.
\$0 – \$ 9,999	7	6
\$10,000 – \$19,999	1	1

	Weighted Average Effective Interest Rate %	Floating Interest Rate \$	Fixed Interest Rate Maturities \$	Non Interest Bearing \$	Total \$
30 June 2005					
Assets:					
Cash Assets	4.0	112,086	-	352	112,438
Receivables	-	-	-	904	904
	-	112,086	-	1,256	113,342
Liabilities:					
Payables	-	-	-	(41,553)	(41,553)
	-	-	-	(41,553)	(41,553)
Net Financial Assets/(Liabilities)	-	112,086	-	(40,297)	71,789
30 June 2004					
Total Financial Assets	-	129,170	-	2,477	131,647
Total Financial Liabilities	-	-	-	(37,485)	(37,485)
Net Financial Assets/(Liabilities)	-	129,170	-	(35,008)	94,162

(c) Members' Remuneration (cont'd)

The names of directors who held office during the financial year were:

Prof. H. Burger AO
 Dr. D. Edgar
 Prof. J.K. Findlay AM (Chairperson)
 Hon. C. Hogg
 Ms. M. Coady
 Dr. H Wellington (resigned 30/06/05)
 Mr. M Gorton AM (Deputy Chairperson)
 Ms. A. Styles (approved 01/06/05)

(d) Executive Officer Remuneration

The Authority's executive officer did not receive remuneration in excess of \$110,000.

(e) Retirement Benefits of Responsible Persons

There were no retirement benefits paid by the Authority in connection with the retirement of responsible persons.

NOTE 16: COMMITMENTS

(a) Capital Commitments

At 30 June 2005, the Authority had no outstanding capital commitments (2004: NIL)

(b) Lease Commitments

Non-cancellable operating leases contracted in relation to the rental of the premises, but not included in the accounts:

	2005	2004
	\$	\$
Less than 1 year	47,385	43,740
Greater than 1 year but less than 5 years	-	47,385
Greater than 5 years	-	-
	47,385	91,125

A letter of understanding exists for the rental of the premises, with rent paid on a monthly basis.

(c) Other Commitments

At 30 June 2005, the Authority had no other commitments (2004: NIL)

NOTE 17: CONTINGENT LIABILITIES

There are no contingent liabilities at 30 June 2005 (2004: NIL)

NOTE 18: SEGMENT REPORTING

The company operates in one business and geographical segment being the education and servicing of members in the field of sports medicine throughout Victoria.

NOTE 19: AUTHORITY DETAILS

The registered office of the Authority is:
 Infertility Treatment Authority
 Level 30
 570 Bourke Street
 Melbourne VIC 3000

Places Licensed to Provide Treatment

LEGAL ENTITY	PLACE	NAME OF CLINIC	PERIOD OF APPROVAL	APPROVED TREATMENTS TO BE UNDERTAKEN
Bairnsdale Regional Health Service	Bairnsdale Regional Health Service	Monash IVF	17/10/03 – 16/10/06	IVF / GIFT
Ballarat Day Procedure Centre	Ballarat Day Procedure Centre	Ballarat IVF	12/06/05 – 11/06/08	IVF / GIFT/DI
Ballarat Health Services	Ballarat Base Hospital	Ballarat IVF Monash IVF	19/12/01 – 18/12/04	IVF / GIFT
Barwon Health	Geelong Hospital	Monash IVF	18/12/02 – 31/03/04	IVF / GIFT
Bendigo Health Care Group	Bendigo Hospital	Monash IVF	21/11/04 – 30/06/08	IVF / GIFT
Casterton Memorial Hospital	Casterton Memorial Hospital	Monash IVF	20/03/02 – 31/07/05	IVF / GIFT
Central Gippsland Health Service	Central Gippsland Health Service, Sale	Monash IVF	18/08/04 – 17/08/07	IVF/GIFT
Epworth Hospital	Epworth Hospital	Monash IVF	18/08/04 – 17/08/07	IVF / GIFT / DI Storage of gametes and embryos
Freemasons Hospital	Freemasons Hospital	Melbourne IVF	12/06/05 – 11/06/08	IVF / GIFT / DI Storage of gametes and embryos
Monash IVF Pty Ltd	Monash IVF – Geelong	Monash IVF	21/04/04 – 20/04/07	IVF / GIFT / ICSI
Mercy Hospital for Women	Mercy Hospital for Women	Melbourne Assisted Conception Centre	12/06/02 – 11/06/05	GIFT Storage of gametes
Mildura Private Hospital	Mildura Private Hospital	Repromed Mildura	12/06/02 – 11/06/05	IVF / GIFT / DI Storage of gametes and embryos
Monash Surgical Private Hospital	Monash Surgical Private Hospital	Monash IVF	18/08/04 – 17/08/07	IVF / GIFT / DI Storage of gametes and embryos
Northern Health	Broadmeadows Health Service	Monash IVF	18/09/02 – 17/09/05	IVF / GIFT
The Royal Women's Hospital	The Royal Women's Hospital	Melbourne IVF	12/06/02 – 11/06/05	IVF / GIFT / DI Storage of gametes and embryos

Counsellors Approved under the Infertility Treatment Act 1995

NAME	LICENSED PLACE	CLINIC	APPROVAL TERM
ALESI, Rita	*See Note Below	Monash IVF	14 June 2007
ALIZADEH, Penelope	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	21 September 2007
BELL, Joanne	*See Note Below	Monash IVF	23 March 2007
BLACHER, Tamara	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	17 September 2005
BLOOD, Jenny	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	20 April 2007
BOURNE, Kate	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	20 April 2007
BROWN, Julie	*See Note Below	Monash IVF	17 February 2007
BRUCE, Paula	Mildura Private Hospital	Repromed Mildura	20 May 2004
CARMICHAEL, Michele	*See Note Below	Monash IVF	21 September 2007
CLARKE, Veronica			18 March 2006
COOK, Roger	Mercy Hospital for Women	Melbourne Assisted Conception Centre	14 June 2007
COVENTRY, Traci	*See Note Below	Monash IVF	31 December 2004
DALGEISH, Sarah	*See Note Below	Monash IVF	20 July 2007
DUGGAN, Winnie	*See Note Below	Fertility Associates	20 April 2007
ELLIS, Joi	*See Note Below	Fertility Associates	20 April 2007
FORD, Sarah	*See Note Below	Monash IVF	21 September 2007
GRAHAM, Anne	Mildura Private Hospital	Repromed Mildura	19 August 2004
HAINES, Wendy	*See Note Below	Monash IVF	20 July 2007
HUTCHINS, Pamela	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	17 November 2004
KANE, Helen			7 February 2006
LOCKLEY, Geraldine	*See Note Below	Monash IVF	17 February 2007
LORENSINI, Sandra	Ballarat Day Procedure Centre	Ballarat IVF	17 December 2005
MANNERHEIM, Merrilyn	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	17 September 2005
MASSIE, Merran	*See Note Below	Monash IVF	21 September 2007
MATIC, Hayley	*See Note Below	Monash IVF	20 July 2007
MINA, Marlene	*See Note Below	Monash IVF	18 May 2007
MOFFAT, Jocelyn	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	16 November 2007
NAVE, Catherine	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	18 December 2007
O'BYRNE, Louise	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	20 April 2007
OKE, Kay	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	20 April 2007
PHILLIPS, Sarah	*See Note Below	Monash IVF	21 September 2007
PTACEK, Jana	Mercy Hospital for Women	Melbourne Assisted Conception Centre	15 April 2006
PURVIS, Catherine	Ballarat Day Procedure Centre	Ballarat IVF	18 May 2007
RATHBORNE, Maggie	*See Note Below	Monash IVF	18 February 2006
REID, Catherine	*See Note Below	Monash IVF	17 February 2007
SAUNDERS, Sue	*See Note Below	Fertility Associates	20 April 2007
SHELTON, Beth	*See Note Below	Monash IVF	16 November 2007
SMALES, Andrea	*See Note Below	Monash IVF	15 March 2008
STANLEY- HUNT, Margaret	*See Note Below	Fertility Associates	20 April 2007
TINNEY, Leesa	*See Note Below	Monash IVF	20 July 2007
WARD, Sue	*See Note Below	Monash IVF	19 August 2004

Doctors in places licensed to provide treatment are required to provide all patients with a list of approved counsellors, prior to treatment commencing.

NOTE: * LICENSED PLACES

- Bairnsdale Regional Health Services
- Barwon Health
- Bendigo Health Care Group
- Casterton Memorial Hospital
- Central Gippsland Health Service
- Epworth Hospital
- Monash IVF – Geelong
- Monash Surgical Private Hospital Pty Ltd
- Northern Health

Clinical Scientists Approved under the *Infertility Treatment Act 1995*

NAME	LICENSED PLACE	CLINIC	APPROVAL TERM
ARCHER, Janell	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	31 December 2006
ATKINS, Jan	*See Note Opposite	Monash IVF	31 December 2006
ATTARD, Marlene	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	31 December 2006
BARRY, Michael	Mildura Private Hospital	Repromed Mildura	20 July 2007
BARTON, Susan	*See Note Opposite	Monash IVF	20 August 2008
BOEKEL, Kym	*See Note Opposite	Monash IVF	17 August 2007
BOURNE, Harold	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	31 December 2006
BREARLEY, Cynthia	*See Note Opposite	Monash IVF	11 June 2008
CARSON, Ronald	*See Note Opposite	Monash IVF	19 April 2008
CATT, James	*See Note Opposite	Monash IVF	14 December 2007
CHARLTON, Lucinda	*See Note Opposite	Monash IVF	31 December 2006
CLEARY, Michelle	*See Note Opposite	Monash IVF	20 July 2007
CLEMENTS, Phillippa	*See Note Opposite	Monash IVF	3 February 2006
COLEMAN, Peter	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	31 December 2006
COLEMAN, Susan	*See Note Opposite	Monash IVF	31 December 2006
CONYERS, Karen	Mildura Private Hospital	Repromed Mildura	21 September 2007
DE SILVA, Selvi	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	7 February 2008
DEAR, Melinda	*See Note Opposite	Monash IVF	23 March 2007
DIAMANTE, Maria	*See Note Opposite	Monash IVF	18 March 2006
DIMITRAKOPOULOS, Anna	*See Note Opposite	Monash IVF	16 June 2006
EDGAR, David	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	31 December 2006
EDWARDS, Louise	*See Note Opposite	Monash IVF	19 November 2005
ENDERSBEE, Sharon	*See Note Opposite	Monash IVF	19 April 2008
ERICSSON, Anna	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	3 October 2007
FEIL, Deanne	Mildura Private Hospital	Repromed Mildura	14 December 2007
GALEA, Sandra	*See Note Opposite	Monash IVF	8 June 2008
GALEA, Jessica	*See Note Opposite	Monash IVF	19 October 2007
GRAS, Lyn	*See Note Opposite	Monash IVF	31 December 2006
GORE, Kate	Ballarat Day Procedure Centre	Ballarat IVF	18 May 2007
HAFEEZ, Fareha	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	12 January 2008
HARPER, Jennifer	*See Note Opposite	Monash IVF	31 December 2006
HESKETH, Natalie	Mildura Private Hospital	Repromed Mildura	28 November 2007
HOLDEN, Sandra	*See Note Opposite	Monash IVF	31 December 2006
HOLMAN, Kimberley	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	18 May 2007
JACOBS, Tracie	Mildura Private Hospital	Repromed Mildura	21 September 2007
JEFFREY, Regan	Mildura Private Hospital	Repromed Mildura	20 July 2007
JERICHO, Helena	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	31 December 2006
KASAP, Rachael	*See Note Opposite	Monash IVF	11 June 2008
KIRWAN, Lisa	Mildura Private Hospital	Repromed Mildura	21 September 2007
KORFIATIS, Natasha	*See Note Opposite	Monash IVF	17 August 2007
KRALEVSKI, Vicki	*See Note Opposite	Monash IVF	31 December 2006
LAWLER, Celine	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	3 October 2007
LEKGABE, Edna	*See Note Opposite	Monash IVF	31 December 2006
LIUBINAS, Jayne	Ballarat Day Procedure Centre	Ballarat IVF	23 March 2007
LOMAS, Jane	Mildura Private Hospital	Repromed Mildura	21 September 2007

NAME	LICENSED PLACE	CLINIC	APPROVAL TERM
MANTELOS, Kathy	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	31 December 2006
MAO, Yingzi	*See Note Below	Monash IVF	17 December 2005
MARFATIA, Ridhi	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	18 May 2007
MARTIC, Mirijana	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	15 March 2008
MATTHEWS, Pam	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	20 August 2005
McDONALD, Michele	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	31 December 2006
McGOWAN, Patricia	Ballarat Day Procedure Centre	Ballarat IVF	16 December 2006
MERRY, Nicole	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	31 December 2006
MITTEN, Janine	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	31 December 2006
MUNSIE, Megan	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	31 December 2006
NIETO, Felix	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	31 December 2006
NINNIS, Anna	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	18 May 2007
O'BRIEN, Carmel	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	31 December 2006
OSIANLIS, Grammatiki	*See Note Below	Monash IVF	31 December 2006
POPE, Adrienne	*See Note Below	Monash IVF	31 December 2006
RENDALL, Susan	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	31 December 2006
RIACH, Christine	Mildura Private Hospital	Repromed Mildura	21 September 2007
RICHINGS, Nadine	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	31 December 2006
ROBERTS, Howard	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	21 July 2005
ROBBINS, Bernadette	*See Note Below	Monash IVF	8 June 2008
ROE, Stacey	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	16 November 2007
ROSE, Ilona	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	12 January 2008
RUAN, Qixian	*See Note Below	Monash IVF	19 November 2005
SHIELDS, Emily	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	16 November 2007
SMITH, Ben	Ballarat Day Procedure Centre	Ballarat IVF	18 November 2007
STANGER, James	*See Note Below	Monash IVF	19 November 2005
STEEVES, Tracey	*See Note Below	Monash IVF	31 December 2006
THUMIGER, Susan	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	12 January 2008
VASSILIADIS, Anne	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	31 December 2006
WEBSTER, Debra	*See Note Below	Monash IVF	31 December 2006
WESTLAND, Judy	Mildura Private Hospital	Repromed Mildura	18 May 2007
WILTON, Leeanda	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	31 December 2006
WOOLHOUSE, Jenny	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	3 October 2007

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- Barwon Health
- Bendigo Health Care Group
- Casterton Memorial Hospital
- Central Gippsland Health Service
- Epworth Hospital
- Monash IVF – Geelong
- Monash Surgical Private Hospital Pty Ltd
- Northern Health

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Doctors Approved under the *Infertility Treatment Act 1995*

NAME	LICENSED PLACE	CLINIC	APPROVAL TERM
BAILEY, Catherine	Mildura Private Hospital	Repromed Mildura	16 December 2006
BOWDITCH, John	Mildura Private Hospital	Repromed Mildura	17 December 2005
BURMEISTER, Lynn	*See Note Opposite	Monash IVF	20 August 2005
CATTRAL, Fleur	*See Note Opposite	Monash IVF	18 March 2006
CLARKE, Geoffrey	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	31 December 2006
CULLEN, John	*See Note Opposite	Monash IVF	18 March 2006
DALTON, Russell	Ballarat Day Procedure Centre	Ballarat IVF	18 November 2007
DOBSON, Peter	Mercy Hospital for Women	Melbourne Assisted Conception Centre	15 February 2008
DOWNING, Bruce	*See Note Opposite	Monash IVF	23 March 2007
FOOKS, Marilyn	Ballarat Day Procedure Centre	Ballarat IVF	19 November 2006
FOSTER, Penelope	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	31 December 2006
FOX, Gregory	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	19 November 2006
GRONOW, Michael	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	31 December 2006
HALE, Lyndon	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	31 December 2006
HEALY, David	*See Note Opposite	Monash IVF	14 December 2007
HENSHAW, Richard	Mildura Private Hospital	Repromed Mildura	28 January 2008
JALLAND, Mark	*See Note Opposite	Monash IVF	16 July 2005
KIRBY, Christine	Mildura Private Hospital	Repromed Mildura	21 September 2007
KNIGHT, Rachael	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	17 August 2007
KOVACS, Gab	*See Note Opposite	Monash IVF	16 December 2006
KUHN, Raphael	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	31 December 2006
LAWRENCE, Anthony	*See Note Opposite	Monash IVF	19 November 2006
LAWRENCE, Mark	*See Note Opposite	Monash IVF	19 November 2006
LOLATGIS, Nicholas	*See Note Opposite	Monash IVF	16 December 2006
LOWE, Philip	*See Note Opposite	Monash IVF	17 September 2005
LUTJEN, Peter	*See Note Opposite	Monash IVF	19 November 2006
McBAIN, John	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	31 December 2006
MONGA, Deepika	Ballarat Day Procedure Centre	Ballarat IVF	16 November 2007
MULDER, Annegien	*See Note Opposite	Monash IVF	20 July 2007
MURRAY, Andrew	*See Note Opposite	Monash IVF	19 March 2005
O'CALLAGHAN, David	Mercy Hospital for Women	Melbourne Assisted Conception Centre	23 April 2006
ROMBAUTS, Luk	*See Note Opposite	Monash IVF	30 September 2005
SLEEMAN, Kimberley	Mildura Private Hospital	Repromed Mildura	23 March 2007
SPEIRS, Andrew	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	31 December 2006
STEINBERG, Lionel	Mercy Hospital for Women	Melbourne Assisted Conception Centre	21 September 2005
STERN, Catharyn	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	31 December 2006
STURROCK, Timothy	*See Note Opposite	Monash IVF	19 November 2006
TALBOT, Mac	Mercy Hospital for Women *See Note Opposite	Melbourne Assisted Conception Centre & Monash IVF	16 December 2006
THOMAS, Adrian	Mercy Hospital for Women	Melbourne Assisted Conception Centre	21 September 2007
TREMELLEN, Kelton	Mildura Private Hospital	Repromed Mildura	17 August 2007
TSALTAS, Jim	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	16 December 2006
VOLLENHOVEN, Beverley	*See Note Opposite	Monash IVF	19 November 2006
WEERASIRI, Anil Tilak	*See Note Opposite	Monash IVF	19 November 2005
WHITEHEAD, Julie	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	18 May 2007
WILKINSON, David	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	18 May 2007

Research Scientists Approved under the *Infertility Treatment Act 1995*

NAME	LICENSED PLACE	CLINIC	APPROVAL TERM
GOOK, Debra	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	11 June 2005

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- Monash Surgical Private Hospital Pty Ltd
- Northern Health

Whistleblowers Protection Act 2001

As the Infertility Treatment Authority is a small public body, staff and members are advised to make his or her whistleblower disclosure directly to the Ombudsman. Where the Ombudsman determines such a disclosure to be a 'public interest disclosure', as a general rule, the Ombudsman would not refer the matter back to the Authority for investigation.