



ITA

Infertility Treatment Authority



2006  
Annual Report

# 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 ninth Annual Report is:

- 1 July 2005 to 30 June 2006 for the licences, approvals, exemptions and accounts; and
- 1 January 2005 to 31 December 2005 for all other activities.

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# Chairperson's report

During the past year the Infertility Treatment Authority has been a hive of activity. The Victorian Law Reform Commission (VLRC) released extensive interim recommendations for changes to the *Infertility Treatment Act 1995*. Cases concerning the use of gametes from a person known to be dead went before the Supreme Court and the Victorian Civil and Administrative Tribunal. In addition the Authority continued planning for the management of donor information and for supporting families who decide to tell their children they were conceived using donated sperm (or eggs).

During 2005 the Authority contributed to the VLRC's public consultation on changes to the laws regulating access to assisted reproductive technology, adoption and surrogacy. The Authority made written submissions on the issues of access and eligibility, the posthumous use of gametes and embryos, and the management of donor treatment information. The Authority also participated in the VLRC's roundtable consultations on access, legal parentage and surrogacy. The Authority looks forward to the release of the VLRC's final recommendations for changes to the *Infertility Treatment Act*.

The use of gametes from a person known to be dead, an emerging issue that has been closely monitored by the Authority for a number of years, became a central concern during 2005. In 2001 and 2003, amendments were made to section 43 of the *Infertility Treatment Act*, which previously banned procedures involving gametes from people known to be dead. These amendments led to the proceeding in the Supreme Court known as *AB v Attorney-General of Victoria*, in which 'AB' (a widow whose husband's sperm had been extracted and stored in Victoria following his death in 1998) sought a court order

allowing her to use the sperm in a treatment procedure. In May 2005, Justice Hargrave made a declaration that the proposed treatment procedure itself was no longer prohibited by section 43, but that it could not be carried out in Victoria because of section 12 (3), a provision relating to consent by gamete donors. AB then made an application to the Authority to export the sperm out of Victoria. After seeking legal advice and further submission from AB, the Authority decided that, while sympathetic to AB's situation, it could not approve the export of gametes to another jurisdiction for a purpose which is prohibited in Victoria. AB subsequently applied to the Victorian Civil and Administrative Tribunal for a review of her application. Justice Morris overturned the Authority's decision, approving the export. The issue of posthumous use exemplifies the challenges involved in administering legislation where amendments have resulted in ambiguous and contested provisions that are subject to legal challenge. More positively, it is also a welcome demonstration that an effective and transparent process exists for reviewing Authority decisions.

In the context of ongoing legal uncertainty around the matter of posthumous use, the Authority has developed *Guidelines on the posthumous use of gametes and embryos*. These guidelines are based on legal advice the Authority has received on various aspects of the Act's application, including eligibility for treatment and requirements for counselling and consent. The guidelines specify requirements relating to the use of embryos formed prior to the death of a partner; the use of gametes from a deceased partner to form embryos for treatment; the export of gametes or embryos after the

death of a gamete provider; and the use of donor gametes, or embryos formed with donor gametes, where the donor has died. The Authority has also released an *Advance Directive for Posthumous Use of Stored Gametes by a Partner*, a declaration designed to assist individuals proposing to store gametes, or who already have gametes in storage, to provide an advance directive describing their wishes for the use of the gametes in the event of their death.

In September 2004, the National Health and Medical Research Council released the Australian Health Ethics Committee's new *Ethical guidelines for the use of assisted reproductive technology in research and clinical practice*. The Fertility Society of Australia followed in February 2005 with the 4th revision of the Reproductive Technology Accreditation Council's *Code of Practice for Assisted Reproductive Technology Units*. With the aim of clarifying the interface between these national regulatory tools and the regulation of ART in Victoria, a comprehensive review of the Authority's Conditions for Licence was undertaken. The substantially revised 6th Edition of the Conditions for Licence reflects a number of other legislative and policy changes as well, including a strengthened requirement for clinics to observe the 10 family limit on the use of donor gametes to create new families, and the end of the transitional provisions for the use of sperm donated under the provisions of the *Infertility (Medical Procedures) Act 1984*.

Victoria was the world's first jurisdiction to legislate to protect the right of donor-conceived people to information about their donor origins. The *Infertility (Medical Procedures) Act 1984* and the *Infertility Treatment Act 1995* prevent anonymous donation, and

established Donor Registers to retain information about donors, recipient parents and donor-conceived offspring. The full impact of the *Infertility (Medical Procedures) Act* 1984 will be felt from July 1 2006, when the first children on the Central Register turn 18, and can apply for identifying information about their donor, which the Authority can release with the donor's consent. Donors can also apply for identifying information, which again will only be released with the consent of the donor-conceived child's parents, or the consent of the donor-conceived adult themselves, once they turn 18.

A central component of the Authority's evolving strategic plan has been to sensitively manage processes around the release of information from the Donor Registers. The Authority was delighted to receive funding from the Victorian Government for a three year *Time to Tell* public education campaign designed to support families formed using donated gametes. The initial objective of the campaign is to provide information and support to families affected by this legislation, particularly those who are considering if, when and how to tell children about donor conception.

In addition, the Department of Human Services will fund a public health research project undertaken by the Authority in partnership with Melbourne University's Key Centre for Women's Health in Society. The project – *Supporting parents in telling their adolescent children about their donor-assisted conception: Research, resource development and public information* – will commence in the latter half of 2006 and will provide information and resources for the Authority's public education campaign.

The Authority, the Department of Human Services and the National

Health and Medical Research Council signed a Memorandum of Understanding to facilitate direct communication between the organisations and the prompt transfer of information about issues affecting the regulation of research involving excess ART embryos. The MOU will ensure all parties can fulfil their respective responsibilities in this area, and work together on mutually acceptable solutions to address any concerns that may arise.

No organisation can function well without an excellent management team. The Authority is fortunate to have Louise Johnson as its CEO supported by a very dedicated and hard working office staff. The Authority also acknowledges the support of the clinics and the contributions of the many stakeholders with an interest in ART.



Professor Jock Findlay AM  
Chairperson

The use of gametes from a person known to be dead, an emerging issue that has been closely monitored by the Authority for a number of years, became a central concern during 2005



# CEO's report

Major activities in 2005 included the review of licences for a number of places conducting assisted reproductive technology in Victoria and responses to the review of the Infertility Treatment Act by the Victorian Law Reform Commission. As well, the Authority developed a public education campaign to provide information, services and support for young adults born through the use of donor eggs or sperm, their parents and donors.

Licensing visits to rural and metropolitan hospitals by the Authority provided an opportunity to gain further insight, to review the current operation of infertility treatment clinics and to discuss issues of concern. The Authority reviewed eight applications from licensed places throughout regional and metropolitan Victoria and conducted licensing visits in

collaboration with the Fertility Society of Australia's reproductive technology accreditation committee (RTAC). All applications resulted in licence renewal, reflecting the highly professional operation of the clinics concerned.

The Victorian Government's support for ongoing public education in rural areas provided opportunities to visit rural universities and hospitals to conduct education seminars. The public education program included the third Louis Waller lecture on 1 September presented by Dr Norman Swan, producer and presenter of Radio National's *Health Report*. Dr Swan's address, *Infertility Treatment and Research – is a Nanny State the Answer?* provided an opportunity for the audience to discuss of the challenging issues surrounding infertility treatment and research in Victoria.

The annual symposium in 2005 was titled, *Future Directions in ART; Choices, Rights and Responsibilities* and was supported by the Victorian Department of Human Services and the Victorian Biotechnology Ethics Advisory Committee. The symposium brought together a wide range of people with an interest in the issues associated with ART.

Strategic plans were developed for a *Time to Tell* public information and education campaign which is supported by the Victorian Government for a three year period. This funding enabled the Authority to commence advertising, to plan public relations and community education and to employ Helen Kane as Manager Donor Register Services in early December. This is an exciting initiative and the Authority has been delighted with the support received to

## Highlights

### ■ Increased success in ART Treatment Outcomes

A comparison of ART figures over the last six years show a gradual increase in the number of treatment cycles continued (oocyte retrieved, frozen embryo transferred or donor treatment occurs), however the resulting number of clinical pregnancies and babies born has increased enormously (more than doubled over six years).

Annual Report Year	Year for data Collected	Cycles Continued	Clinical Pregnancies	Confinements	Babies Born
1999	1997	3866	604	479	595
2002	2000	4688	715	580	718
2006	2004	5814	1298	1055	1271

### ■ Time to Tell Campaign

From July 1 2006, donor-conceived young adults can apply for identifying information about their donor once they turn 18. The donor can also apply for identifying information about the child. However, the exchange of identifying information can only occur if both parties agree. This new environment, which the Authority will operate in from July 1 2006, is the result of the Infertility (Medical Procedures) Act 1984 and the Infertility Treatment Act 1995. During 2005 the Authority has been preparing for the impact of this legislative change by developing an education program and

a media-advertising campaign called *Time To Tell*. This has been made possible because of Victorian Government funding. The initial focus of the campaign will be to support families, affected by this legislation, who decide to tell their children about their donor conception.

The Authority is collaborating with Melbourne University's Key Centre for Women's Health in Society on a public health research project funded by the Department of Human Services. The project, *Supporting parents in telling their adolescent children about their donor-assisted conception: Research, resource development and public information* – is expected to deliver outcomes that can be used by the Authority in its public education campaign in 2006 and beyond.

date from consumer groups, personnel from within infertility treatment clinics, and a wide range of others with an interest in providing support.

Staffing changes included the appointment in August of Tanya Colbert as Office Manager and Personal Assistant replacing Carolyn Murray, and in early 2006, Sloane Orger as Administrative Officer (part time) replacing Sue Edwards who resigned towards the end of 2005 before the birth of her second child.

Staffing resources increased towards the end of 2005 to an equivalent of 4.3 full time persons with the appointment of Helen Kane. Lexi Neame has continued as Senior Research and Policy Officer (part time), Kate Dobby as Registers Officer (part time) and Jenny Burden as Education Officer (part time). I would like to

acknowledge the enormous contribution the staff members make to the work of the Authority. Their support and professionalism are highly valued.

The Authority has been delighted to be a host for Crystal Liu, Fulbright scholar from the *United State of America until mid 2006*. *Crystal's research topic is: United States and Victoria: A study of the regulation of assisted reproductive technologies*. Another student, Simone Loughnane from Deakin University looked at the recent literature relevant to the Authority's research on telling donor-conceived children about their conception. This work was reviewed by Dr Maggie Kirkman and has been published on the Authority's web site. Student placements continue to provide a valuable contribution to the work of the Authority.

I would like to acknowledge the invaluable support provided by Members of the Authority, the Chairperson and Deputy Chairperson in my first year as Chief Executive Officer in this challenging and interesting role.



Louise Johnson  
Chief Executive Officer

#### ■ Review of the Infertility Treatment Act 1995

The Victorian Law Reform Commission (VLRC) released extensive interim recommendations for changes to the *Infertility Treatment Act 1995* in 2005, following a lengthy public consultation period. The Authority contributed to the VLRC's public consultation on changes to the laws regulating access to ART, adoption and surrogacy. The Authority made written submissions on the issues of access and eligibility; the posthumous use of gametes and embryos; and the management of donor treatment information. As well, the Authority was part of the VLRC's roundtable consultations on access, legal parentage and surrogacy. The VLRC's final recommendations for changes to the *Infertility Treatment Act, 1995* are expected to be released in late 2006.



# Membership



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 2005.

## **Professor Jock Findlay AM**

CHAIRPERSON

TERM OF MEMBERSHIP EXPIRES 31 MARCH 2009

Professor Findlay, a National Health and Medical Research Council (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



Dr David Edgar



The Hon Caroline Hogg



Ms Ann Styles

## **Mr Michael Gorton AM**

DEPUTY CHAIRPERSON FROM 2 APRIL 2003

TERM OF MEMBERSHIP EXPIRES 31 MARCH 2009

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



The Authority Staff

L-R: Helen Kane, Sloane Orger, Lexi Neame, Tanya Colbert, Louise Johnson, Kate Dobby, Crystal Liu (visiting Fulbright Scholar) (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, Faculty of Education, 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.

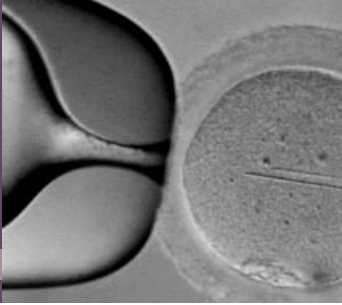
### **Ms Ann Styles**

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**

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 Tanya Colbert who is her Personal Assistant and Office Manager, Ms Lexi Leame as Research and Policy Officer, Ms Kate Dobby as Registers officer, Ms Sloane Orger as Storage Administrator and Ms Jenny Burden as Education Officer. In early December 2005, Ms Helen Kane joined the Authority in the new role of Manager, Donor Register Services. Her role is to develop the services relating to applications for information from the Registers administered by the Infertility Treatment Authority. This includes building working relationships with the clinics, support groups, and professional groups which work with families and donors. Also working at the Authority was visiting student Crystal Liu, a graduate of the University of California, Berkeley. Crystal is one of 20 Americans to be granted a Fulbright Postgraduate Award in 2005. Crystal studied the regulation of PGD in Australia.



# Aims and functions

The welfare and interest of any person born or to be born as a result of a treatment procedure are paramount

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](http://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.

# Committees

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 10 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 on two occasions during 2005, 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 2005, although declarations of conflict of interest are minuted at all meetings and, where appropriate, members are requested to abstain from discussion and decision making on relevant items.

## **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 six occasions to discharge its financial and personnel responsibilities. The Remuneration Committee met on one occasion.

## **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 10 occasions during 2005.

## **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. The Committee met on six occasions during 2005.

## **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 10 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 four occasions in 2005.

## **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 six occasions in 2005.

# Panel of advisers

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 from 2004 was carried through to 2005.

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 from 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 2005 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 2005 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)
- Ms Giuliana Fuscaldo  
Centre for Ethics in Medicine and Society Dept of Medicine, Central and Eastern Medical School  
Monash University, Alfred Hospital.

# Research

Two types of research can be undertaken utilising human embryos:

1. Research conducted under the provisions of the *Infertility Treatment Act 1995* requires the approval of the Authority, and must leave the embryo fit for use in a treatment procedure. There were no applications for research in this category during the 2005 calendar year.
2. Research utilising embryos which are declared in excess and no longer required for treatment 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 this type of research can be found at [www.nhmrc.gov.au](http://www.nhmrc.gov.au). The Chairperson of the Infertility Treatment Authority, Professor Jock Findlay AM, 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 2005 the Authority did not receive any notifications of research to be conducted under the *Infertility Treatment Act 1995*.

## Lockhart Review

The *Prohibition of Human Cloning Act 2002* and the *Research Involving Human Embryos Act 2002* were passed by the Australian Federal Parliament in December 2002. They established a strict regulatory framework to prohibit certain unacceptable practices, including human cloning, and to regulate, through the NHMRC, research involving excess human embryos created through assisted reproductive technology. In June 2005, a Committee was appointed to conduct an independent review of the Acts. The Review Committee undertook

consultations in all States and Territories with a range of people with expertise or experience of relevant issues.

The ITA's Chairperson and CEO presented information to the Review Committee during its consultation process in Melbourne. The ITA discussed the effects of different definitions and terminology in the Federal legislation and Victoria's *Infertility Treatment Act*. The Committee was also advised of the ITA's experience of collaborating with RTAC, particularly through joint site visits, and the Authority's assessment of the effectiveness of the RTAC accreditation process in overseeing clinical and laboratory standards, and as an enforcement mechanism for the NHMRC Ethical Guidelines.

The Lockhart Committee released its report to Parliament in December 2005. The report recommended that a strong regulatory framework, including a system of licensing and monitoring, should be maintained to oversee research being conducted under the two Acts. The Committee also concluded that the current regulatory framework should be augmented to allow research on experimental fertilisation techniques to improve ART treatment outcomes, and research into emerging scientific practices (including Somatic Cell Nuclear Transfer) to increase the understanding of disease and disability.

## Genetic Testing

The Research Committee monitors notifications for the use of preimplantation genetic diagnosis (PGD), and considers applications for some uses of PGD in accordance with the ITA policy *Genetic Testing and the Requirements of the Infertility Treatment Act 1995: Policy in Relation to the use of Preimplantation Genetic Diagnosis (PGD)*.

## Notifications

During the 2005 calendar year the following notifications were received:

- Kennedy disease (direct test)
- Kennedy disease (sex selection)
- Alpha-1-antitrypsin deficiency (direct test)
- X-linked hydrocephalus (sex selection)
- X-linked mental retardation (non-syndromic) (sex selection)

## Approvals

During the 2005 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 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 for sex selection in these circumstances were approved in:
  - Autism – six cases
  - Partial Androgen Insensitivity Syndrome – one case
2. Exclusion testing – where a person at risk of transmitting an autosomal dominant condition undertakes PGD to exclude embryos carrying the affected grandparental 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:
  - Huntington's disease – three cases

Details of treatment cycles involving PGD for genetic testing or for IVF and pregnancy failure can be found in Section 5 of the Data on Services in Victoria, page 26 .

# Licensing and Approvals

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 15 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 2005/2006 financial year the number of approvals was:**

Counsellors	10
Clinical scientists	16
Doctors	12
Research scientists	0

Appendices 2 – 5 lists all current approved practitioners approvals under the *Infertility Treatment Act* 1995.

#### **Licensing Visits**

The Authority undertook the following licensing visits during 2005/2006 financial year:

- Monash IVF at Casterton Memorial Hospital
- the Monash IVF Satellite at Mildura Private Hospital
- the Monash IVF Satellite at Northern Health
- the Monash IVF Satellite at Bendigo Health Care Group
- Ballarat IVF at Ballarat Day Procedure Centre
- Melbourne IVF at Epworth Freemasons Hospital
- Melbourne IVF at Royal Women's Hospital
- Melbourne Assisted Conception Centre at Mercy Hospital for Women

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;
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.

### Conditions for Licence

An extensive review of the Conditions for Licence was undertaken during the reporting period. This revision incorporated a number of amendments, endorsed by the Authority during 2005 and 2006, that resulted from legal or policy changes:

- requirements for RTAC accreditation, and compliance with the NHMRC's new *Ethical Guidelines for the Use of Assisted Reproductive Technology in Clinical Practice and Research* has been added, replacing the direct incorporation of guidelines from the previous NHMRC Ethical Guidelines and RTAC Code of Practice;
- a requirement for annual reporting of adverse incidents requiring notification to the Authority and/or insurers;
- a requirement for prospective notification of surrogacy arrangements;
- strengthening the requirement for clinics to observe the 10 family limit in relation to the use of donor gametes to create new families;
- the end of the transitional provisions in relation to the use of sperm donated under the provisions of the *Infertility (Medical Procedures) Act 1984*; and
- the removal of the conditions relating to the use of embryos.

In addition, the Authority undertook a more extensive review of the function and design of the Conditions for licence in order to enhance its operation as a regulatory tool. The substantially revised 6th Edition of the Conditions for Licence was released in May 2006.

### 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. Melbourne IVF has reported that since approval of a variation in the licence:

- 13 known donors have stored sperm for use in the self-insemination program between December 2004 and December 2005;
- 16 women have completed an agreement for the release of the sperm in line with Interim Condition 6 (stipulating that sperm will be used only in accordance with the consent of the donor, and the Authority will be notified of any live birth to enable birth details to be lodged on the Central Register); and
- as of December 2005, no women have reported live births under this provision.

The ITA's Interim Conditions *Storage of Sperm by Women using Known Donors for the Purposes of Self-Insemination* will be reviewed with the release of the VLRC's final recommendations.

### Reference to the Victorian Law Reform Commission (VLRC)

In October 2002 the VLRC was given a reference to enquire into and report on the desirability and feasibility of changes to the *Infertility Treatment Act 1995* and the *Adoption Act 1984* to expand eligibility criteria in respect of any or all forms of assisted reproduction and adoption. During 2004 the VLRC released an initial Consultation Paper and three Occasional Papers. During 2005 the VLRC released three Position Papers – on Access, Parentage and Surrogacy – containing interim recommendations for changes to the *Infertility Treatment Act 1995* (and other legislation relevant to their terms of reference). The Authority provided written submissions in response to each of these papers. The VLRC also held consultative forums on each of the topics covered in the interim recommendations. Authority representatives participated in each of the roundtable meetings. The ITA anticipates the release of the VLRC's final recommendations in late 2006.

# Storage, import and export

## OF SPERM, EGGS AND EMBRYOS

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 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 (eggs) and sperm in excess of 10 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 if they cannot be contacted.

In 2005, the Storage Committee received 306 applications. It was a significant increase from the previous year in which 260 applications were received. The committee considered the following applications with the following outcomes:

### APPLICATIONS FOR EXTENSIONS OF STORAGE EMBRYOS AND SPERM:

1 January 2005 to 31 December 2005

STORAGE TYPE	No. OF APPLIC.	OUTCOME
Embryo	177	Approved
Embryo formed with Donor Gametes	20	Approved
Embryo formed with Donor Gametes	1	Pending
Donor Embryo	2	Approved
<b>Total</b>	<b>200</b>	

### APPLICATIONS TO IMPORT GAMETES AND EMBRYOS:

1 January 2005 to 31 December 2005

STORAGE TYPE	No. OF APPLIC.	OUTCOME
Embryo	18	Approved
Embryo	1	Approved with Conditions
Embryo	1	Withdrawn
Sperm	5	Approved
Sperm	1	Approved with Conditions
Donor Sperm	9	Approved with Conditions
Donor Sperm	2	Approved with Conditions Pending
Donor Embryo	1	Approved with Conditions
Embryo formed with Donor Gametes	2	Approved with Conditions Pending
<b>Total</b>	<b>40</b>	

### APPLICATIONS TO EXPORT GAMETES AND EMBRYOS:

1 January 2005 to 31 December 2005

STORAGE TYPE	No. OF APPLIC.	OUTCOME
Embryo	24	Approved
Embryo	1	Withdrawn
Sperm	9	Approved
Sperm	1	Deferred
Sperm	1	Approved with Conditions
Embryo formed with Donor Gametes	6	Approved with Conditions
Donor Sperm	23	Approved with Conditions
Egg / Oocyte	1	Withdrawn
Donor Sperm	1	Pending
Donor Sperm	2	Approved with Conditions Pending
<b>Total</b>	<b>69</b>	



# Communications and Public Relations

During 2005 the Authority undertook a range of events to communicate to the broader public the activities of the ITA. These include:

- the third Louis Waller Lecture “Infertility Treatment and Research – is a nanny state the answer?” presented by Dr Norman Swan;
- annual symposium “Future Directions in ART – Choices, Rights and Responsibilities”;
- public education visits in rural Victoria to universities, hospitals and schools;
- presentations to students at Melbourne, Monash, Deakin and LaTrobe universities; and
- distribution of ITA *News* and the *Annual Report*.

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

## MARCH

Presentation to third-year Nursing students at Deakin University, Geelong

## APRIL

Presentation to Midwifery students and third-year nursing students at Ballarat University

## MAY

Presentations to:

- Midwifery students at Ballarat University
- Nursing staff at Ballarat Hospital
- Law and Medicine students at Latrobe University

## JUNE

Presentations to:

- Year 9 Biology students at Norlane High School in Geelong
- Staff of Geelong Private Hospital and Geelong Hospital

## AUGUST

Presentations to:

- Third-year Nursing students at Ballarat University
- Nursing staff at Ballarat Hospital
- Year 11 Biology students at Clonard Catholic Girls College, Geelong

## SEPTEMBER

- Third Louis Waller Lecture delivered by Dr Norman Swan
- Presentation in conjunction with Ballarat IVF nursing and counselling staff to the Ballarat IVF Patient Support Group

## OCTOBER

Presentations to:

- Human Development and Genetics students at Monash University, Churchill
- Year 11 students at Mildura Senior College
- Staff of Repromed Mildura and Mildura Base Hospital
- Law students at Monash University
- Embryology students at Melbourne University

## NOVEMBER

- Future Directions in ART – Choices Rights and Responsibilities Symposium
- Presentation to law students, Melbourne University

## General Enquiries to the Infertility Treatment Authority

1 January 2005 to 31 December 2005

NATURE OF ENQUIRY	NO. OF ENQUIRIES
Information	318
Legislation	25
Media	47
Other	11
<b>Total Enquiries</b>	<b>401</b>



# Registers

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 <u>BIRTH</u> REGISTRATIONS	
As at 31 December 2005	2501
For year 1/01/2005 to 31/12/2005	22

TOTAL NUMBER OF <u>DONOR</u> REGISTRATIONS	
As at 31 December 2005	578
For year 1/01/2005 to 31/12/2005	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 <u>BIRTH</u> REGISTRATIONS	
As at 31 December 2005	773
For year 1/01/2005 to 31/12/2005	109

TOTAL NUMBER OF <u>DONOR</u> REGISTRATIONS	
As at 31 December 2005	463
For year 1/01/2005 to 31/12/2005	60

## 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 2005	84
Donor	41
Offspring	N/A
Recipient family	43

## 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 2005	78
Donor	44
Offspring	22
Recipient family	11

### **'Telling Research' and the Time to Tell Public Education Campaign**

The Authority held concerns that for many parents there are insufficient resources to facilitate the process of telling their children about their birth origins. Qualitative "Telling" research involving interviews with parents, donor-conceived young adults and counsellors initiated in 2003 was completed in 2005. This work has informed the planning of a three-year *Time to Tell* public information and education campaign to provide information and support for family members affected by donor conception.

In 2005 Simone Loughnane, psychology student, Deakin University, spent an internship with the Authority and reviewed recent literature relevant to the Authority's research on telling donor-conceived children about their conception. Simone's research was titled *Parents Disclosing Donor Conception to Their Children: What does the Literature Tell Us?* This work was reviewed by Dr Maggie Kirkman and published on the Authority's web site.

Following this research, strategic plans were developed for a *Time to Tell* public information and education campaign, which was supported by the Victorian Government for a three-year period. This funding enabled the Authority to commence advertising, public relations and community education planning, and employ Helen Kane as Manager Donor Register Services in early December. This appointment has been invaluable for the planning and development of sensitive support services for young people conceived using donor eggs or sperm, and also for parents and donors. Initial consultations with counsellors based at infertility

treatment clinics and consumer groups were vital for developing strategies for the campaign. This is an exciting initiative and the Authority has been delighted with the support received to date from consumer groups, personnel from infertility treatment clinics, and a wide range of other interested people. Consultations with all of these groups are ongoing and will be vital for the continued success of the campaign.

### **Management of Clinical Medical Records**

Discussions with Prince Henry's Institute of Medical Research continued in 2005 in relation to clinical medical records from their closed donor clinic. Options for long-term arrangements for the records remain under discussion to enable access to information required for the Authority to process applications to the donor registers. Support from the Government is being provided to enable resolution of this issue in 2006.

# Outcome of treatment procedures

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.

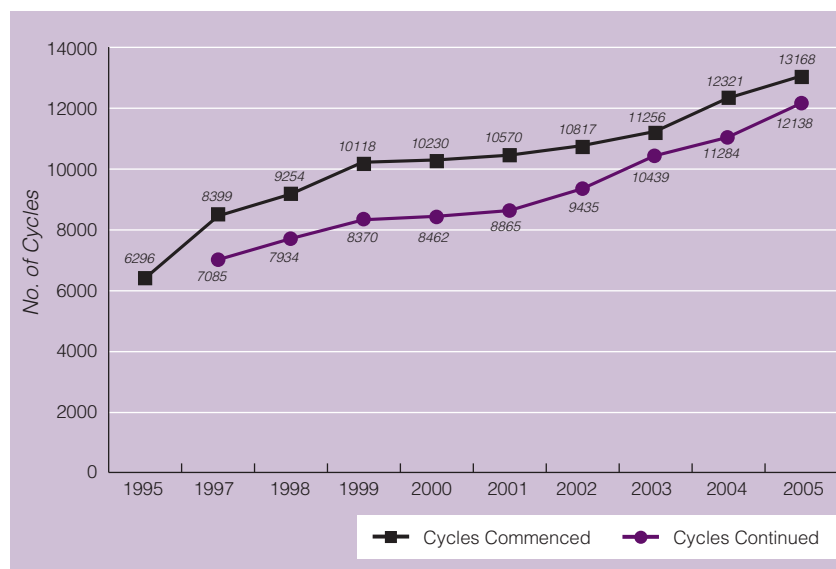
## Trends in Treatment

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.

## Number of Oocytes Frozen

The Authority also collects data about the number of oocytes stored for use in a treatment procedure (see table 2.6).

DIAGRAM 1: CYCLES CONTINUED IN VICTORIA 1995 – 2005



### Please note

The figures shown in the tables on pages 20–26 are derived from the latest versions of 2005 ANZARD data provided to NPSU by each of the units. Final 2005 pregnancy outcomes data for the ANZARD database is not required until 31

March 2006 and therefore 2005 pregnancy outcomes are likely to be under counted for all units.

The following dates indicate when the latest versions of 2005 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.

- 18/05/06** Monash IVF
- 29/03/06** Mildura Reproductive Medicine Centre
- 17/05/06** Melbourne IVF
- 11/05/06** Ballarat IVF
- 06/04/06** Mercy Assisted Conception Centre

**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

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.

*(please note that this definition was changed in 2005)*

## 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

Pregnancy resulting in at least one birth.

*(please note that this definition was changed in 2005)*

## DI (DONOR INSEMINATION)

Artificial insemination with donor sperm.

## EMBRYO

A live embryo that has a human genome or an altered human genome and that has been developing for less than eight weeks since the appearance of two pronuclei or the initiation of its development by other means.

*(please note that this definition was changed in 2003)*

## 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.

## LIVE BIRTH

A live birth in which a fetus is delivered with signs of life after complete expulsion or extraction from its mother, beyond 20 completed weeks of gestational age. (Live births are counted as births events, e.g. a twin or triplet live birth is counted as one birth event.)

## ONGOING PREGNANCIES

Ongoing clinical pregnancies as at the dates on page 18. 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.

# Section 1

## Final Outcomes for Treatment Cycles Commenced in 2004

This report includes a final outcome of treatment procedures undertaken in 2004. These final figures were not available at the time of the production of the 2005 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
	<b>IVF</b>						<b>GIFT</b>					
Bairnsdale Regional Health Service	10	10	2	2	2	0						
Ballarat Day Procedure Centre	135	171	51	41	51	0						
Barwon Health - Monash IVF Pty Ltd, Geelong	90	114	28	24	29	0						
Bendigo Health Care Group	59	75	19	17	21	0						
Casterton Memorial Hospital	51	61	14	14	17	0						
Central Gippsland Health Service	50	58	14	13	16	0	2	2	1	1	1	0
Epworth Hospital	758	1020	218	173	206	0	2	2	0	0	0	0
Freemasons Hospital	1112	1425	324	262	312	6	1	1	0	0	0	0
Mercy Hospital Inc							86	122	23	20	26	0
Mildura Private Hospital	62	76	19	16	18	0						
Monash Surgical Private Hospital	1052	1391	259	218	273	1	6	6	1	1	1	0
Northern Health	64	78	19	14	19	0	1	1	0	0	0	0
The Royal Women's Hospital	1117	1335	331	261	307	0						
<b>Aggregated Total</b>	<b>4560</b>	<b>5814</b>	<b>1298</b>	<b>1055</b>	<b>1271</b>	<b>7</b>	<b>98</b>	<b>134</b>	<b>25</b>	<b>22</b>	<b>28</b>	<b>0</b>
	<b>THAW CYCLE</b>						<b>DI</b>					
Bairnsdale Regional Health Service	8	8	1	0	0	0						
Ballarat Day Procedure Centre	77	117	15	13	14	0						
Barwon Health - Monash IVF Pty Ltd, Geelong	15	19	3	2	2	0						
Bendigo Health Care Group	15	18	2	1	1	0						
Casterton Memorial Hospital	42	53	4	4	5	0						
Central Gippsland Health Service	22	27	5	4	5	0	1	2	0	0	0	0
Epworth Hospital	594	925	113	85	92	0	28	74	4	3	3	0
Freemasons Hospital	745	1324	239	179	198	2	1	1	0	0	0	0
Mercy Hospital Inc												
Mildura Private Hospital	40	53	8	5	5	0						
Monash Surgical Private Hospital	702	1085	154	131	144	0	31	81	5	3	3	0
Northern Health	17	24	2	2	2	0						
The Royal Women's Hospital	820	1391	280	217	238	3	54	136	21	20	21	0
<b>Aggregated Total</b>	<b>3097</b>	<b>5044</b>	<b>826</b>	<b>643</b>	<b>706</b>	<b>5</b>	<b>115</b>	<b>294</b>	<b>30</b>	<b>26</b>	<b>27</b>	<b>0</b>

# Section 2

## 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 2.1** Outcomes Per Licensed Place, IVF, 2005 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 p18	Total Ongoing Pregnancies as at dates p18
Bairnsdale Regional Health Service	14	14	3	3	4	0
Ballarat Day Procedure Centre	188	228	72	29	33	34
Barwon Health - Monash IVF Pty Ltd, Geelong	104	129	32	12	13	17
Bendigo Health Care Group	57	66	18	6	7	7
Casterton Memorial Hospital	45	50	16	8	9	7
Central Gippsland Health Service	64	74	19	8	10	9
Epworth Hospital	813	1081	287	73	95	194
Freemasons Hospital	1134	1501	389	143	171	151
Mildura Private Hospital	72	91	23	5	5	17
Monash Surgical Private Hospital	1130	1476	404	110	134	253
Northern Health	38	44	13	6	7	7
The Royal Women's Hospital	1210	1466	387	135	159	172
<b>Aggregated Total</b>	<b>4869</b>	<b>6220</b>	<b>1663</b>	<b>538</b>	<b>647</b>	<b>868</b>

**Table 2.2** Oocyte Collection and Transfer Per Licensed Place, IVF, 2005 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 <sup>^</sup>
Bairnsdale Regional Health Service	14	118	108	81	0	25	44	12
Ballarat Day Procedure Centre	228	2274	2168	1408	15	346	711	352
Barwon Health - Monash IVF Pty Ltd, Geelong	129	1251	1185	803	8	220	448	136
Bendigo Health Care Group	66	631	521	404	0	116	212	76
Casterton Memorial Hospital	50	454	381	274	1	73	145	56
Central Gippsland Health Service	74	717	673	480	1	130	265	85
Epworth Hospital	1081	10683	10081	6776	33	1756	2760	2260
Freemasons Hospital	1501	13228	12309	8406	73	2057	3522	2829
Mildura Private Hospital	91	934	839	475	9	104	215	156
Monash Surgical Private Hospital	1476	13950	12564	8244	62	2298	3086	2861
Northern Health	44	411	354	269	0	75	166	28
The Royal Women's Hospital	1466	13182	12351	8713	51	2086	4247	2381
<b>Aggregated Total</b>	<b>6220</b>	<b>57833</b>	<b>53534</b>	<b>36333</b>	<b>253</b>	<b>9286</b>	<b>15821</b>	<b>11232</b>

<sup>^</sup> Unsuitable for freezing or transfer

**Table 2.3** Outcomes Per Licensed Place, GIFT, 2005 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 p18	Total Ongoing Pregnancies as at dates p18
Epworth Hospital	9	11	3	0	0	1
Freemasons Hospital	1	1	0	0	0	0
Mercy Hospital Inc	80	102	30	8	11	16
Monash Surgical Private Hospital	1	2	0	0	0	0
<b>Aggregated Total</b>	<b>91</b>	<b>116</b>	<b>33</b>	<b>8</b>	<b>11</b>	<b>17</b>

# Section 2

**Table 2.4** Oocyte Collection and Transfer Per Licensed Place, GIFT, 2005 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		
Epworth Hospital	11	72	22	20	13	7
Freemasons Hospital	1	1	1			
Mercy Hospital Inc	102	746	319			
Monash Surgical Private Hospital	2	33	4	29	14	11
<b>Aggregated Total</b>	<b>116</b>	<b>852</b>	<b>346</b>	<b>49</b>	<b>27</b>	<b>18</b>

**Table 2.5** Outcomes Per Licensed Place, Thaw Cycle, 2005 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 p18	Total Ongoing Pregnancies as at dates p18
Bairnsdale Regional Health Service	8	8	21	13	1	0	0	0
Ballarat Day Procedure Centre	112	169	369	271	30	11	12	16
Barwon Health - Monash IVF Pty Ltd, Geelong	33	43	104	64	3	1	1	1
Bendigo Health Care Group	31	38	99	64	2	0	0	2
Casterton Memorial Hospital	30	45	88	72	3	0	0	2
Central Gippsland Health Service	38	49	110	73	5	1	1	3
Epworth Hospital	668	1022	2420	1420	177	36	38	111
Freemasons Hospital	802	1402	2405	1821	277	117	134	105
Mildura Private Hospital	40	66	147	87	5	0	0	3
Monash Surgical Private Hospital	721	1041	2376	1408	166	36	39	113
Northern Health	12	12	31	21	2	1	1	0
The Royal Women's Hospital	904	1639	2685	2232	314	105	116	137
<b>Aggregated Total</b>	<b>3399</b>	<b>5534</b>	<b>10855</b>	<b>7546</b>	<b>985</b>	<b>308</b>	<b>342</b>	<b>493</b>

**Table 2.6** Storage of Ovarian Tissue/Oocytes/Embryos Per Licensed Place, 2005 Calendar Year

Licensed Place	No. Patients with Ovarian Tissue in storage as at 31/12/05	No. Treatments using Frozen Oocytes for 2005 calendar year	No. of Embryos in storage as at 31/12/05
Bairnsdale Regional Health Service	0	0	23
Ballarat Day Procedure Centre	0	0	1028
Barwon Health - Monash IVF Pty Ltd, Geelong	0	0	343
Bendigo Health Care Group	0	0	113
Casterton Memorial Hospital	0	0	57
Central Gippsland Health Service	0	0	155
Epworth Hospital	117	0	7400
Freemasons Hospital	0	0	9071
Mercy Hospital Inc	0	0	0
Mildura Private Hospital	0	0	215
Monash Surgical Private Hospital	0	0	6196
Northern Health	0	0	135
The Royal Women's Hospital	219	3	10555
<b>Aggregated Total</b>	<b>336</b>	<b>3</b>	<b>35291</b>

Note: Satellites store frozen material in Melbourne



# Section 3

## Multiple Births Arising from Treatment Procedures During 2005

**Table 3** Multiple Births as at 1 April 2006 Per Licensed Place, 2005 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	3	4	2	1	0
Ballarat Day Procedure Centre	40	45	35	5	0
Barwon Health - Monash IVF Pty Ltd, Geelong	13	14	10	2	0
Bendigo Health Care Group	6	7	5	1	0
Casterton Memorial Hospital	8	9	7	1	0
Central Gippsland Health Service	10	12	8	2	0
Epworth Hospital	109	133	83	25	0
Freemasons Hospital	260	305	212	45	1
Mercy Hospital Inc	8	11	6	1	1
Mildura Private Hospital	5	5	3	1	0
Monash Surgical Private Hospital	149	176	120	28	0
Northern Health	7	8	6	1	0
The Royal Women's Hospital	251	286	210	38	0
<b>Aggregated Total</b>	<b>869</b>	<b>1015</b>	<b>707</b>	<b>151</b>	<b>2</b>

# Section 4

## Donor Treatment Procedures

**Table 4.1** Use of Donor Gametes and Embryos and Outcomes, All Licensed Places, 2005 Calendar Yr

Licensed Place	Total No. Women Treated	Total No. Cycles Continued	Total No. Clinical Pregnancies	Total No. Confinements	Total No. Babies Born as at dates p18	Total Ongoing Pregnancies as at dates p18
Donor embryo	38	52	8	2	2	6
Donor oocytes	206	230	68	20	23	34
Donor sperm**	353	861	159	54	59	70
<b>Aggregated Total</b>	<b>597</b>	<b>1143</b>	<b>235</b>	<b>76</b>	<b>84</b>	<b>110</b>

\*\* including DI

**Table 4.2** Outcomes Per Licensed Place, Stimulated/Unstimulated, DI, 2005 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 p18	Total Ongoing Pregnancies as at dates p18
<b>STIMULATED</b>						
Ballarat Day Procedure Centre	5	11	0	0	0	11
Central Gippsland Health Service	3	3	2	1	1	3
Epworth Hospital	2	4	1	0	0	4
Freemasons Hospital	1	1	0	0	0	1
The Royal Women's Hospital	13	29	4	2	2	29
<b>Aggregated Total</b>	<b>24</b>	<b>48</b>	<b>7</b>	<b>3</b>	<b>3</b>	<b>48</b>
<b>UNSTIMULATED</b>						
Epworth Hospital	15	45	2	0	0	2
Freemasons Hospital	1	1	0	0	0	0
Monash Surgical Private Hospital	33	77	6	3	3	3
The Royal Women's Hospital	45	97	17	9	9	4
<b>Aggregated Total</b>	<b>94</b>	<b>220</b>	<b>25</b>	<b>12</b>	<b>12</b>	<b>9</b>

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.

# Section 4

**Table 4.3** Storage of Donor Sperm, 2005 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 (2005)
Ballarat Day Procedure Centre	7	1
Epworth Hospital	143	2
Freemasons Hospital	0	0
Mildura Private Hospital	0	0
Monash Surgical Private Hospital	0	0
The Royal Women's Hospital	79	15
<b>Aggregated Total</b>	<b>222</b>	<b>17</b>

**Table 4.4** Number of Oocyte and Embryo Donors, 2005 Calendar Year

Licensed Place	OOCYTE		EMBRYO	
	Known	Anonymous	Known	Anonymous
Ballarat Day Procedure Centre	11	1	0	4
Barwon Health - Geelong	5	4	0	0
Bendigo Health Care Group	0	0	0	0
Casterton Memorial Hospital	1	0	0	0
Central Wellington Health Service	2	0	0	3
Epworth Hospital	50	7	3	26
Freemasons Hospital	36	0	0	3
Mildura Private Hospital	0	0	1	0
Monash Surgical Private Hospital	58	7	3	1
Northern Health	1	0	0	0
The Royal Women's Hospital	44	1	0	4
<b>Aggregated Total</b>	<b>208</b>	<b>20</b>	<b>7</b>	<b>41</b>

# Section 5

## Preimplantation Genetic Diagnosis

**Table 5.1** PGD for Patients with a Known Genetic Risk, 2005 Calendar Year

Licensed Place	No. of Women in Treatment	Total No. Cycles where PGD Performed	Total No. Clinical Pregnancies	Total No. Confinements	Total No. Babies Born as 30/06/06
Freemasons Hospital	31	43	5	4	4
Monash Surgical Private Hospital	38	63	10	4	5
<b>Aggregated Total</b>	<b>69</b>	<b>106</b>	<b>15</b>	<b>8</b>	<b>9</b>

Licensed Place	Total No. Oocyte Retrieval Attempts	Total No. Oocytes Collected	Total No. Oocytes Inseminated	Total No. Oocytes Fertilised	Total No. Cycles where Genetically*	Total No. Embryos Transferred	Total No. Embryos Frozen	Total No. Embryos <sup>^</sup>
Freemasons Hospital	43	526	471	304	25	33	22	249
Monash Surgical Private Hospital	59	777	635	421	43	65	27	329
<b>Aggregated Total</b>	<b>102</b>	<b>1303</b>	<b>1106</b>	<b>725</b>	<b>68</b>	<b>98</b>	<b>49</b>	<b>578</b>

\*Suitable embryos available for transfer – represents embryos that did not have the abnormality being tested for. The number of embryos suitable for transfer is low because patients have genetic abnormalities that are being tested for.

<sup>^</sup> Unsuitable for freezing or transfer – includes those embryos diagnosed as genetically unsuitable, as well as embryos unsuitable for other reasons.

**Table 5.2** PGD for IVF and Recurrent Pregnancy Failure, 2005 Calendar Year

Licensed Place	No. of Women in Treatment	Total No. Cycles where PGD Performed	Total No. Clinical Pregnancies	Total No. Confinements	Total No. Babies Born as at 30/04/06
Freemasons Hospital	42	53	7	3	3
Monash Surgical Private Hospital	89	110	20	4	4
<b>Aggregated Total</b>	<b>131</b>	<b>163</b>	<b>27</b>	<b>7</b>	<b>7</b>

Licensed Place	Total No. Oocyte Retrieval Attempts	Total No. Oocytes Collected	Total No. Oocytes Inseminated	Total No. Oocytes Fertilised	Total No. Cycles where Genetically*	Total No. Embryos Transferred	Total No. Embryos Frozen	Total No. Embryos <sup>^</sup>
Freemasons Hospital	53	646	607	452	36	50	24	378
Monash Surgical Private Hospital	105	1338	1109	806	86	142	33	631
<b>Aggregated Total</b>	<b>158</b>	<b>1984</b>	<b>1716</b>	<b>1258</b>	<b>122</b>	<b>192</b>	<b>57</b>	<b>1009</b>

\*Suitable embryos available for transfer – represents embryos that did not have the abnormality being tested for

<sup>^</sup> Unsuitable for freezing or transfer – includes those embryos diagnosed as genetically unsuitable, as well as embryos unsuitable for other reasons.

**Table 5.3** PGD on Embryos that have been Frozen/Thawed, 2005 Calendar Year

Licensed Place	Total No. Patients	Total No. Cycles Commenced	Total No. Embryos Thawed	Total No. Cycles Continued	Total No. Embryos Transferred	Total No. Clinical Pregnancies	Total No. Confinements	Total No. Babies Born	Total No. Ongoing Pregnancies
Freemasons Hospital	0	0	0	0	0	0	0	0	0
Monash Surgical Private Hospital	9	9	78	6	9	0	0	0	0
<b>Aggregated Total</b>	<b>9</b>	<b>9</b>	<b>78</b>	<b>6</b>	<b>9</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

# Financial statements

## 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 operating statement, balance sheet, statement of changes in equity, cash flow statement and notes to and forming part of the financial statements, present fairly the results of the financial transactions during the year ended 30 June 2006 and financial position of the Authority as at 30 June 2006.

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**

16/08/2006

MELBOURNE

# Financial statements

The accompanying notes form part of these financial statements

## Operating Statement for the year ended 30 June 2006

	Notes	2006 \$	2005 \$
Revenue	3	802,123	518,744
Interest income	3	5,651	3,763
Employee benefits expense	4	(331,797)	(249,267)
Depreciation expense	4	(11,947)	(17,528)
Other expenses	4	(401,711)	(277,964)
<b>Operating surplus(Deficit) from ordinary activities</b>		<b>62,319</b>	<b>(22,252)</b>
<b>Total changes in equity other than those resulting from transactions with owners as owners</b>		<b>62,319</b>	<b>(22,252)</b>

## Balance Sheet as at 30 June 2006

	Notes	2006 \$	2005 \$
<b>CURRENT ASSETS</b>			
Cash assets	8	311,478	112,438
Receivables	9	29,645	904
<b>Total Current Assets</b>		<b>341,123</b>	<b>113,342</b>
<b>NON-CURRENT ASSETS</b>			
Property, plant and equipment	10	39,330	46,131
<b>Total Non-Current Assets</b>		<b>39,330</b>	<b>46,131</b>
<b>TOTAL ASSETS</b>		<b>380,453</b>	<b>159,473</b>
<b>CURRENT LIABILITIES</b>			
Trade and other payables	11	195,603	41,553
Deferred income	12	30,113	31,350
Short term provisions	13	14,082	8,274
<b>Total Current Liabilities</b>		<b>239,798</b>	<b>81,177</b>
<b>NON-CURRENT LIABILITIES</b>			
Long term Provisions	13	1,023	983
<b>Total Non-Current Liabilities</b>		<b>1,023</b>	<b>983</b>
<b>TOTAL LIABILITIES</b>		<b>240,821</b>	<b>82,160</b>
<b>NET ASSETS</b>		<b>139,632</b>	<b>77,313</b>
<b>EQUITY</b>			
Contributed Capital	14	11,200	11,200
Accumulated Surplus		128,432	66,113
<b>TOTAL EQUITY</b>		<b>139,632</b>	<b>77,313</b>

## Statement of Changes in Equity as at 30 June 2006

	Contributed Capital \$	Accumulated Surplus \$	<b>Total \$</b>
<b>Balance at 1 July 2004</b>	<b>11,200</b>	<b>88,365</b>	<b>99,565</b>
Capital issued during the year	-	-	-
Profit/(Loss) attributable to members	-	(22,252)	(22,252)
<b>Balance at 30 June 2005</b>	<b>11,200</b>	<b>66,113</b>	<b>77,313</b>
Capital issued during the year	-	-	-
Profit/(Loss) attributable to members	-	62,319	62,319
<b>Balance at 30 June 2006</b>	<b>11,200</b>	<b>128,432</b>	<b>139,632</b>

# Financial statements

## Cash Flow Statement for the year ended 30 June 2006

The accompanying notes form part of these financial statements

	Notes	2006 \$	2005 \$
<b>CASH FLOW FROM OPERATING ACTIVITIES</b>			
Operating Grant Receipts		797,483	507,302
Payments to suppliers and employees		(537,599)	(567,251)
GST paid to the ATO		(76,488)	(25,530)
Interest received		5,651	3,763
Income from Fees		15,139	55,117
Other Income		-	16,468
Net cash provided by operating activities	15	204,186	(10,131)
<b>CASH FLOW FROM INVESTING ACTIVITIES</b>			
Payment for property, plant and equipment		(5,146)	(6,651)
Net cash used in investing activities		(5,146)	(6,651)
Net increase/(decrease) in cash held		199,040	(16,782)
Cash at beginning of financial year		112,438	129,220
Cash at end of financial year	8	311,478	112,438

## Notes to the Financial Statements for the year ended 30 June 2006

### NOTE 1: STATEMENT OF SIGNIFICANT ACCOUNTING POLICIES

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

The financial report covers Infertility Treatment Authority as an individual entity. The Authority is established and domiciled in Australia.

The financial report of Infertility Treatment Authority as an individual entity complies with all Australian equivalents to International Financial Reporting Standards (IFRS) in their entirety.

The following is a summary of the material accounting policies adopted by the Authority in the preparation of the financial report. The accounting policies have been consistently applied, unless otherwise stated.

#### Basis of Preparation

##### First-time Adoption of Australian Equivalents to International Financial Reporting Standards

Infertility Treatment Authority has prepared its financial statements in accordance with the Australian equivalents to International Financial Reporting Standards (IFRS) from 1 July 2005.

In accordance with the requirements of AASB 1: First-time Adoption of Australian Equivalents to International Financial Reporting Standards, adjustments to the Authority's accounts resulting from the introduction of IFRS have been applied retrospectively to 2005 comparative figures excluding cases where optional exemptions available under AASB 1 have been applied. These consolidated accounts are the first financial statements of Infertility Treatment Authority to be prepared in accordance with Australian equivalents to IFRS.

The accounting policies set out below have been consistently applied to all years presented. The Authority's has however elected to adopt the exemptions available under AASB 1 relating to AASB 132: Financial Instruments: Disclosure and Presentation, and AASB 139: Financial Instruments:

Recognition and Measurement. Refer Note 18 for further details.

Reconciliations of the transition from previous Australian GAAP to IFRS have been included in Note 2 to this report.

#### Reporting Basis and Conventions

The financial report has been prepared on an accruals basis and is based on historical costs modified by the revaluation of selected non-current assets, and financial assets and financial liabilities for which the fair value basis of accounting has been applied.

#### Functional and presentation currency

The functional currency of the Authority is measured using the currency of the primary economic environment in which the Authority operates. The financial statements are presented in Australian dollars which is the Authority's functional and presentation currency.

#### (a) Income Tax

In the opinion of the Authority, Infertility Treatment Authority is exempt from income tax under Section 50-5 under the *Income Tax Assessment Act 1997*.

#### (b) Property, Plant and Equipment

Each class of plant and equipment is carried at less any accumulated depreciation and impairment losses.

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

#### Depreciation

The depreciable amount of all fixed assets, is depreciated on a diminishing value basis over their useful lives to the Authority commencing

from the time the asset is held ready for use. The depreciation rates used for each class of depreciable assets are:

Class of fixed asset	Useful Life
Motor Vehicle	up to 4 years
Computer Equipment	up to 5 years
Office Equipment	up to 4 years

The assets' residual values and useful lives are reviewed, and adjusted if appropriate, at each year end. Rates have remained consistent from the previous year.

An asset's carrying amount is written down immediately to its recoverable amount if the asset's carrying amount is greater than its estimated recoverable amount. Gains and losses on disposals are determined by comparing proceeds with the carrying amount. These gains or losses are included in the income statement.

#### (c) Financial Instruments

##### Recognition

Financial instruments are initially measured at cost on trade date, which includes transaction costs, when the related contractual rights or obligations exist. Subsequent to initial recognition these instruments are measured as set out below.

##### Loans and Receivables

Loans and receivables are non-derivative financial assets with fixed or determinable payments that are not quoted in an active market and are stated at amortised cost using the effective interest rate method.

##### Available-for-sale financial assets

Available-for-sale financial assets are reflected at fair value. Unrealised gains and losses arising from changes in fair value are taken directly to equity.

##### Financial liabilities

Non-derivative financial liabilities are recognised at amortised cost, comprising original debt less principal payments and amortisation.

# Financial statements

## Notes to the Financial Statements for the year ended 30 June 2006

### (c) Financial Instruments (cont'd)

#### **Fair Value**

Fair value is determined based on current bid prices for all quoted investments. Valuation techniques are applied to determine the fair value for all unlisted securities, including recent arm's length transactions, reference to similar instruments and option pricing models.

#### **Impairment**

At each reporting date, the Authority assesses whether there is objective evidence that a financial instrument has been impaired. In the case of available-for-sale financial instruments, a prolonged decline in the value of the instrument is considered to determine whether an impairment has arisen. Impairment losses are recognised in the income statement.

### (d) Impairment of Assets

At each reporting date, the Authority reviews the carrying values of its tangible and intangible assets to determine whether there is any indication that those assets have been impaired. If such an indication exists, the recoverable amount of the asset, being the higher of the asset's fair value less costs to sell and value in use, is compared to the asset's carrying value. Any excess of the asset's carrying value over its recoverable amount is expensed to the income statement.

Where it is not possible to estimate the recoverable amount of an individual asset, the Authority estimates the recoverable amount of the cash-generating unit to which the asset belongs.

### (e) Employee Benefits

Provision is made for the Authority's liability for employee benefits arising from services rendered by employees to balance date. Employee benefits that are expected to be settled within one year have been measured at the amounts expected to be paid when the liability is settled, plus related on-costs. Employee benefits payable later than one year have been measured at the present value of the estimated future cash outflows to be made for those benefits.

### (f) Provisions

Provisions are recognised when the Authority has a legal or constructive obligation, as a result of past events, for which it is probable that an outflow of economic benefits will result and that outflow can be reliably measured.

### (g) Cash and cash equivalents

Cash and cash equivalents include cash on hand, deposits held at call with banks, other short-term highly liquid investments with original maturities of three months or less, and bank overdrafts. Bank overdrafts are shown within short-term borrowings in current liabilities on the balance sheet.

### (h) 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 the expense. Receivables and payables in the balance sheet are shown inclusive of GST.

Cash flows are presented in the cash flow statement on a gross basis, except for the GST component of investing and financing activities, which are disclosed as operating cash flows.

### (i) Contributed Capital

Consistent with UIG Interpretation 1038 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.

### (j) Revenue

Revenue from the rendering of a service is recognised upon the delivery of the service to the customers. Approval fee and Licence fee income is recognised on a proportional basis taking into account the relevant period the fee covers against the Authority's financial reporting period.

Public Education income comprises of Department of Human Services grants received and symposium registrations.

Interest revenue is recognised on a proportional basis taking into account the interest rates applicable to the financial assets.

### (k) Government Grants

Government grants are recognised when there is reasonable assurance that the grant will be received and all attaching conditions will be complied with.

When the grant relates to an expense item, it is recognised as income over the period necessary to match the grant on a systematic basis to the costs that it is intended to compensate.

When the grant relates to an asset, the fair value credited to a deferred income account and is released to the operating statement over the expected useful life of the relevant asset by equal annual instalments.

### (l) Prepaid Licensing Fees

The Authority charges License Fees to professionals who operate infertility treatment practices. The License Fees are for the period 1 April 2006 to 31 March 2007. As a result nine months of License Fees that have been paid in this year have been recognised as prepaid Licensing Fees.

### (m) Comparatives

When required by Accounting Standards, comparative figures have been adjusted to conform to changes in presentation for the current financial year.

#### **Critical accounting estimates and judgments**

The Authority evaluates estimates and judgments incorporated into the financial report based on historical knowledge and best available current information. Estimates assume a reasonable expectation of future events and are based on current trends and economic data, obtained both externally and key estimates impairment within the Authority.



# Financial statements

## Notes to the Financial Statements for the year ended 30 June 2006

### Reconciliation of Equity at 1 July 2004

	Previous GAAP at 1 July 2004 \$	Effect of transition to IFRS to IFRS to IFRS \$	Aust. equivalents to IFRS at 1 July 2004 \$
<b>CURRENT ASSETS</b>			
Cash and cash equivalents	129,220	-	129,220
Trade and other receivables	2,427	-	2,427
<b>Total Current Assets</b>	<b>131,647</b>	<b>-</b>	<b>131,647</b>
<b>NON-CURRENT ASSETS</b>			
Property, Plant and equipment	57,008	-	57,008
<b>Total Non-Current Assets</b>	<b>57,008</b>	<b>-</b>	<b>57,008</b>
<b>TOTAL ASSETS</b>	<b>188,655</b>	<b>-</b>	<b>188,655</b>
<b>CURRENT LIABILITIES</b>			
Trade and other payables	37,485	-	37,485
Deferred income	20,970	-	20,970
Short-term provisions	5,936	-	5,936
<b>Total Current Liabilities</b>	<b>64,391</b>	<b>-</b>	<b>64,391</b>
<b>NON-CURRENT LIABILITIES</b>			
Long-term provisions	24,699	-	24,699
<b>Total Non-Current Liabilities</b>	<b>24,699</b>	<b>-</b>	<b>24,699</b>
<b>TOTAL LIABILITIES</b>	<b>89,090</b>	<b>-</b>	<b>89,090</b>
<b>NET ASSETS</b>	<b>99,565</b>	<b>-</b>	<b>99,565</b>
<b>EQUITY</b>			
Contributed Capital	11,200	-	11,200
Retained earnings	88,365	-	88,365
<b>TOTAL EQUITY</b>	<b>99,565</b>	<b>-</b>	<b>99,565</b>

### NOTE 2: FIRST-TIME ADOPTION OF AUSTRALIAN EQUIVALENTS TO INTERNATIONAL FINANCIAL REPORTING STANDARDS

### Reconciliation of Equity at 30 June 2005

	Previous GAAP at 30 June 2005 \$	Effect of transition to IFRS to IFRS to IFRS \$	Aust. equivalents to IFRS at 30 June 2005 \$
<b>CURRENT ASSETS</b>			
Cash and cash equivalents	112,438	-	112,438
Trade and other receivables	904	-	904
<b>Total Current Assets</b>	<b>113,342</b>	<b>-</b>	<b>113,342</b>
<b>NON-CURRENT ASSETS</b>			
Property, Plant and equipment	46,131	-	46,131
<b>Total Non-Current Assets</b>	<b>46,131</b>	<b>-</b>	<b>46,131</b>
<b>TOTAL ASSETS</b>	<b>159,473</b>	<b>-</b>	<b>159,473</b>
<b>CURRENT LIABILITIES</b>			
Trade and other payables	41,553	-	41,553
Deferred income	31,350	-	31,350
Short-term provisions	8,274	-	8,274
<b>Total Current Liabilities</b>	<b>81,177</b>	<b>-</b>	<b>81,177</b>
<b>NON-CURRENT LIABILITIES</b>			
Long-term provisions	983	-	983
<b>Total Non-Current Liabilities</b>	<b>983</b>	<b>-</b>	<b>983</b>
<b>TOTAL LIABILITIES</b>	<b>82,160</b>	<b>-</b>	<b>82,160</b>
<b>NET ASSETS</b>	<b>77,313</b>	<b>-</b>	<b>77,313</b>
<b>EQUITY</b>			
Contributed Capital	11,200	-	11,200
Retained earnings	66,113	-	66,113
<b>TOTAL EQUITY</b>	<b>77,313</b>	<b>-</b>	<b>77,313</b>

# Financial statements

## NOTE 2: FIRST-TIME ADOPTION OF AUSTRALIAN EQUIVALENTS TO INTERNATIONAL FINANCIAL REPORTING STANDARDS (CONT'D)

## Notes to the Financial Statements for the year ended 30 June 2006

Reconciliation of Profit or Loss for the year ended 30 June 2005	Previous GAAP for the year ended 30 June 2005	Effect of transition to IFRS	Aust. equivalents to IFRS for the year ended 30 June 2005
	\$	\$	\$
Revenue	518,744	-	518,744
Other income	3,763	-	3,763
Employee benefits expenses	(249,267)	-	(249,267)
Depreciation expenses	(17,528)	-	(17,528)
Other expenses	(277,964)	-	(277,964)
<b>Profit/(Loss) before income tax</b>	<b>(22,252)</b>	<b>-</b>	<b>(22,252)</b>
Income tax expense	-	-	-
<b>Profit/(Loss) after income tax</b>	<b>(22,252)</b>	<b>-</b>	<b>(22,252)</b>

	Notes	2006 \$	2005 \$
<b>NOTE 3: REVENUE</b>			
<b>Operating Activities</b>			
Approval Fees		1,815	11,193
Government Grant		739,547	459,449
Licensing Fees		50,572	33,543
Sales of Publications		19	15
Symposium		10,170	14,013
Other		-	531
		<b>802,123</b>	<b>518,744</b>
<b>Other income</b>			
Interest income from other persons		<b>5,651</b>	<b>3,763</b>
<b>NOTE 4: PROFIT FROM ORDINARY ACTIVITIES</b>			
Profit from ordinary activities has been determined after the following expenses:			
<b>Employee benefits expense</b>			
Salaries and wages		288,214	224,297
Superannuation		30,213	21,853
Staff Amenities		112	348
Staff development & seminars		13,258	2,769
<i>Total employee benefits</i>		<b>331,797</b>	<b>249,267</b>
<b>Supplies and services expense</b>			
Accounting		25,018	21,295
Advertising		64,028	5,411
Audit Fees	7	4,600	4,484
Bank Charges		444	537
Computer maintenance		1,230	4,873
Consultants fees		52,735	6,453
Courier/Postage		2,587	3,505
Entertainment		3,454	3,543
Insurance		-	520
Lease payments		599	4,200
Legal fees		36,863	7,176
Long service leave		686	(1,426)
Maintenance		1,339	149
Member Sitting Fees		73,234	68,317
Motor Vehicle Expense		2,581	3,715
Office outgoings		10,507	473
Other		2,320	1,164
Printing and publications		23,038	17,244
Public Relations		7,557	18,139
Rent on land & building		52,336	36,924
Software		1,714	-
Staff Recruitment Costs		3,285	26,385
Symposium/Seminars		20,077	24,512
Telephone		7,437	7,599
Travel and Accommodation		4,042	12,772
<i>Total supplies and services</i>		<b>401,711</b>	<b>277,964</b>
Depreciation		11,947	17,528
<b>Total expenses</b>		<b>745,455</b>	<b>544,759</b>

# Financial statements

## Notes to the Financial Statements for the year ended 30 June 2006

### NOTE 5: KEY MANAGEMENT PERSONNEL COMPENSATION

#### Key management personnel

##### Authority Members

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

##### Chief Executive Officer

Ms L Johnson

	SHORT-TERM BENEFITS		POST EMPLOYMENT BENEFIT		LONG-TERM BENEFITS	Total
	Salary and Fees	Non-Cash Superannuation	Benefits	Long Service Superannuation	Leave	
	\$	\$	\$	\$	\$	\$
<b>2006</b>						
Total compensation	175,006	20,235	-	-	362	195,603
<b>2005</b>						
Total compensation	161,381	15,456	-	-	-	176,837

### NOTE 6: SUPERANNUATION

Details in relation to superannuation funds are as follows:

- The Authority contributed on behalf of its employees during the year ended 30 June 2006 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 \$52,869 (2005: \$21,853) and the contributions outstanding at year end amounted to nil (2005: 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 \$30,536 (2005: \$14,000).

### NOTE 7: AUDITORS REMUNERATION

Remuneration of the auditors for:

- audit or review services

	2006	2005
	\$	\$
- audit or review services	4,600	4,200

### NOTE 8: CASH AND CASH EQUIVALENTS

Cash at bank and on hand

	2006	2005
Cash at bank and on hand	311,478	112,438

#### Reconciliation of cash

Cash at the end of the financial year as shown in the Cash Flow Statement is reconciled to the related items in the Balance Sheet as follows:

Cash on hand	311,078	112,086
Cash at bank	400	352
	<b>311,478</b>	<b>112,438</b>

### NOTE 9: TRADE AND OTHER RECEIVABLES

#### CURRENT

Trade receivables

Trade receivables	<b>29,645</b>	<b>904</b>
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# Financial statements

## Notes to the Financial Statements for the year ended 30 June 2006

Notes	<b>2006</b> \$	2005 \$
<b>NOTE 10: PROPERTY, PLANT AND EQUIPMENT</b>		
<b>Plant and Equipment</b>		
(a) Motor Vehicles		
At cost	31,216	31,216
Less accumulated depreciation	(11,439)	(6,875)
	<u>19,777</u>	<u>24,341</u>
(b) Computer Equipment		
At cost	70,892	69,644
Less accumulated depreciation	(58,690)	(52,579)
	<u>12,202</u>	<u>17,065</u>
(c) Office Equipment		
At cost	85,004	81,106
Less accumulated depreciation	(77,653)	(76,381)
	<u>7,351</u>	<u>4,725</u>
Total property, plant and equipment	<b>39,330</b>	<b>46,131</b>

### (a) 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 \$
<b>2006</b>				
Balance at the beginning of the year	24,341	17,065	4,725	46,131
Additions	-	1,248	3,898	5,146
Depreciation expense	(4,564)	(6,111)	(1,272)	(11,947)
Disposals	-	-	-	-
Carrying amount at end of year	<b>19,777</b>	<b>12,202</b>	<b>7,351</b>	<b>39,330</b>

### NOTE 11: TRADE AND OTHER PAYABLES

#### Plant and Equipment

##### CURRENT

Trade Creditors	16,919	6,424
Accruals	12,512	11,565
Fringe Benefits Tax Liability	15,023	3,360
PAYG Withheld	7,416	7,574
GST Payable	30,704	6,322
Lease Liability	7,578	345
Superannuation Payable	6,122	5,963
Salary Packaging Liability	(527)	-
Adolescent Telling Campaign	99,856	-
	<b>195,603</b>	<b>41,553</b>

### NOTE 12: DEFERRED INCOME

Prepaid Licensing Fees	<b>30,113</b>	<b>31,350</b>
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### NOTE 13: PROVISIONS

	Employee Benefits \$	Total \$
Opening balance at 1 July 2005	9,257	9,257
Additional provisions raised during the year	5,848	5,848
Balance at 30 June 2006	<b>15,105</b>	<b>15,105</b>

#### Analysis of Total Provisions

	Notes <b>2006</b> \$	2005 \$
Current- Annual Leave	14,082	8,274
Non Current- Long Service Leave	1,023	983
<b>Total</b>	<b>15,105</b>	<b>9,257</b>

#### Provision for Employee Benefits

A provision has been recognised for employee entitlements relating to annual and long service leave for employees. In calculating the present value of future cash flows in respect to long service leave, the probability of long service leave being taken is based upon historical data. The measurement and recognition criteria for employee benefits have been included in Note 1(e).

# Financial statements

## Notes to the Financial Statements for the year ended 30 June 2006

Notes	<b>2006</b> \$	2005 \$
<b>NOTE 14: CONTRIBUTED CAPITAL</b>		
Balance at the beginning of the reporting period	11,200	11,200
Recognition of opening balance on adoption of UIG 1038/AFR No. 39 Capital Contributions	-	-
Balance at the end of the reporting period	<b>11,200</b>	<b>11,200</b>
<b>NOTE 15: CASH FLOW INFORMATION</b>		
(a) Reconciliation of cash flow from operations with profit from ordinary activities after income tax		
Operating Profit/(Deficit) from ordinary activities after income tax	62,319	(22,252)
Non-cash flows in profit from ordinary activities		
Depreciation	11,947	17,528
Changes in assets and liabilities		
Decrease/(Increase) in trade and other receivables	(28,741)	1,523
Increase in trade and other payables	154,050	4,068
(Decrease)\ Increase in deferred income	(1,237)	10,380
Increase/(Decrease) in provisions	5,848	(21,378)
Cash flows from operations	<b>204,186</b>	<b>(10,131)</b>

### NOTE 16: RELATED PARTY TRANSACTIONS

#### (a) Responsible Minister

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

#### (b) Transactions with related parties

There were no transactions with related parties during the year.

### NOTE 17: FINANCIAL INSTRUMENTS

#### (a) Financial Risk Management

The Authority's financial instruments consist mainly of deposits with banks, accounts receivable and payable.

The Authority does not have any derivative instruments at 30 June 2006.

##### i. Treasury Risk Management

Authority members meet on a regular basis to analyse interest rate exposure and to evaluate treasury management strategies in the context of the most recent economic conditions and forecasts.

##### ii. Financial Risks

The main risks the Authority is exposed to through its financial instruments are interest rate risk, liquidity risk and credit risk.

##### *Interest Rate Risk*

The Authority is not exposed to any material interest rate risk.

##### *Liquidity Risk*

The Authority manages liquidity risk by monitoring forecast cash flows and ensuring that there are sufficient funds to meet expenditure commitments.

##### *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, net of any provisions for impairment of those assets, as disclosed in the balance sheet and notes to the financial statements.

The Authority does not have any material credit risk exposure to any single receivable or group of receivables under financial instruments entered into by the Authority.

##### *Price risk*

The Authority is not exposed to any material commodity price risk.

#### (b) Interest Rate Risk

The Authority'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

# Financial statements

## Notes to the Financial Statements for the year ended 30 June 2006

### NOTE 17: FINANCIAL INSTRUMENTS (CONT'D)

	Weighted Average Effective Interest Rate		Floating Interest Rate		Non-Interest Bearing		Total	
	2006 %	2005 %	2006 \$	2005 \$	2006 \$	2005 \$	2006 \$	2005 \$
<b>Financial Assets:</b>								
Cash at bank	4.5%	4%	311,078	112,086	400	352	311,478	112,438
Trade and other receivables			-	-	29,645	904	29,645	904
<b>Total Financial Assets</b>			<b>311,078</b>	<b>112,086</b>	<b>30,045</b>	<b>1,256</b>	<b>341,123</b>	<b>113,342</b>
<b>Financial Liabilities:</b>								
Trade and other payables			-	-	195,603	41,553	195,603	41,553
<b>Total Financial Liabilities</b>			<b>-</b>	<b>-</b>	<b>195,603</b>	<b>41,553</b>	<b>195,603</b>	<b>41,553</b>

#### (c) Net Fair Values

For 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. Financial assets where the carrying amount exceeds net fair values have not been written down as the Authority intends to hold these assets to maturity.

The aggregate net fair values and carrying amounts of financial assets and financial liabilities are disclosed in the balance sheet and in the notes to the financial statements.

Details of aggregate net fair value and carrying amounts of financial assets and financial liabilities at balance date:

	2006		2005	
	Carrying Amount \$	Net Fair Value \$	Carrying Amount \$	Net Fair Value \$
<b>Financial assets</b>				
Trade and other receivables	29,645	29,645	904	904
<b>Financial liabilities</b>				
Trade and other creditors	195,603	195,603	41,553	41,553

### NOTE 18: CHANGE IN ACCOUNTING POLICY

The Authority has adopted the following accounting standards for application on or after 1 January 2005:

- AASB 132: Financial Instruments: Disclosure and Presentation
- AASB 139: Financial Instruments: Recognition and Measurement

The changes resulting from the adoption of AASB 132 relate primarily to increased disclosures required under the standard and do not affect the value of amounts reported in the financial statements.

The adoption has not resulted in material differences in the recognition and measurement of the Authority's financial instruments. The Authority has elected not to adjust comparative information resulting from the introduction of AASB 139 as permitted under the transitional provisions of this standard. As such, previous Australian accounting standards have been applied to comparative information.

# Financial statements

## Notes to the Financial Statements for the year ended 30 June 2006

### NOTE 19: CAPITAL AND LEASING COMMITMENTS

#### (a) Capital Commitments

The Authority has capital commitments for the registers public education campaign, which is developing infrastructure and suitable systems that will support applications for information, processing and tracking.

Payable

- not later than one year	50,000	-
- later than one year and not later than five years	70,000	-
	<u>120,000</u>	-

#### (b) Lease Commitments

Operating lease commitments ( Rent of office, Photocopier)

Non-cancellable operating leases contracted for but not capitalised in the financial statements:

Payable

- not later than one year	62,497	47,385
- later than one year and not later than five years	21,284	-
	<u>83,781</u>	<u>47,385</u>

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

#### (c) Other Commitments

The Authority had no other significant commitments at 30 June 2006.

### NOTE 20: CONTINGENT LIABILITIES

There are no contingent liabilities at 30 June 2006 (2005: NIL)

### NOTE 21: 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.

### NOTE 22: EVENTS AFTER THE BALANCE SHEET DATE

There are no events after the balance sheet date that would affect the financial report.

### NOTE 23: SEGMENT REPORTING

The company operates in one business and geographical segment being infertility treatment administration in Victoria, Australia.

### NOTE 24: AUTHORITY DETAILS

The registered office and principal place of business of the Authority is:

Infertility Treatment Authority  
Level 30  
570 Bourke Street  
Melbourne VIC 3000



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**

**Matters Relating to the Electronic Presentation of the Audited Financial Report**

This audit report for the financial year ended 30 June 2006 relates to the financial report of the Infertility Treatment Authority included on its web site. The Board of the Authority is responsible for the integrity of the web site. I have not been engaged to report on the integrity of the web site. The audit report refers only to the statements named below. An opinion is not provided on any other information which may have been hyperlinked to or from these statements. If users of this report are concerned with the inherent risks arising from electronic data communications, they are advised to refer to the hard copy of the audited financial report to confirm the information included in the audited financial report presented on this web site.

**Scope**

*The Financial Report*

The accompanying financial report for the year ended 30 June 2006 of the Infertility Treatment Authority consists of the operating statement, balance sheet, statement of changes in equity, cash flow statement, notes to and forming part of the financial report, and the certification.

*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 under the delegated authority provided by the Auditor-General 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.





AUDITOR GENERAL  
VICTORIA

**Independent Audit Report (continued)**

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.

**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 and responsibilities 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 2006 and its financial performance and cash flows for the year then ended.

Stephen O'Kane  
Partner DFK Collins  
Delegate of  
J.W. CAMERON  
*Auditor-General*

MELBOURNE  
18/08/2006

# Appendix 1

## Places Licensed to Provide Treatment

LEGAL ENTITY	PLACE	NAME OF CLINIC	PERIOD OF APPROVAL	APPROVED TREATMENTS TO BE UNDERTAKEN
Bairnsdale Regional Health Services	Bairnsdale Regional Health Services	Monash IVF	17/10/03 – 16/10/06	IVF / GIFT
Ballarat Day Procedure Centre	Ballarat Day Procedure Centre	Ballarat IVF	11/06/05 – 11/06/08	IVF / GIFT / DI Storage of gametes and embryos
Bendigo Health Care Group	Bendigo Hospital	Monash IVF	30/06/05 – 29/06/08	IVF / GIFT
Casterton Memorial Hospital	Casterton Memorial Hospital	Monash IVF	30/06/05 – 29/06/08	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 – 17/8/07	IVF / GIFT / DI Storage of gametes and embryos
Epworth Hospital	Epworth Freemasons Hospital	Melbourne IVF	01/05/06 – 10/06/08	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 Hospitals Inc.	Mercy Hospital for Women	Melbourne Assisted Conception Centre	28/02/06 – 27/02/09	GIFT Storage of gametes
Mildura Private Hospital	Mildura Private Hospital	Repromed Mildura	18/08/04 – 17/08/07	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	18/09/05 – 17/09/08	IVF / GIFT
The Royal Women's Hospital	The Royal Women's Hospital	Melbourne IVF	11/06/05 – 10/06/08	IVF / GIFT / DI Storage of gametes and embryos and approved research

# Appendix 2

## 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 2008
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 July 2007
CARMICHAEL, Michele	*See Note Below	Monash IVF	21 September 2007
CLARKE, Veronica		Private Practice	20 June 2009
COOK, Roger	Mercy Hospital for Women	Melbourne Assisted Conception Centre	14 June 2007
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
GOBLE, Georgina	Freemasons Hospital, The Royal Women's Hospital	Melbourne IVF	20 September 2008
GRAHAM, Anne	Mildura Private Hospital	Repromed Mildura	20 September 2007
HAINES, Wendy	*See Note Below	Monash IVF	20 July 2007
LOCKLEY, Geraldine	*See Note Below	Monash IVF	17 February 2007
LORENSINI, Sandra	Ballarat Day Procedure Centre	Ballarat IVF	13 February 2009
MANNERHEIM, Merrilyn	Freemasons Hospital, The Royal Women's Hospital	Melbourne IVF	10 April 2009
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
MONEY, Liz		Fertility Associates	13 February 2009
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
PALEG, Kim	Freemasons Hospital, The Royal Women's Hospital	Melbourne IVF	13 March 2009
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	21 March 2009
REID, Catherine	*See Note Below	Monash IVF	17 February 2007
ROBERTSON, Anne	*See Note Below	Monash IVF	19 July 2008
SAUNDERS, Sue	*See Note Below	Fertility Associates	20 April 2007
SHELTON, Beth	*See Note Below	Monash IVF	16 November 2007
SMALES, Andrea	Freemasons Hospital	Melbourne IVF	15 March 2008
STANLEY- HUNT, Margaret	*See Note Below	Fertility Associates	20 April 2007
STRATIGAKOS, Georgina		Private Practice	10 April 2009
TINNEY, Leesa	*See Note Below	Monash IVF	20 July 2007

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

# Appendix 3

## 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
ATARD, Marlene	Freemasons Hospital, The Royal Women's Hospital	Melbourne IVF	31 December 2006
BAINBRIDGE, kate	*See Note Opposite	Repromed Mildura	13 December 2008
BARRY, Michael	Mildura Private Hospital	Repromed Mildura	20 July 2007
BARTON, Susan	*See Note Below	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, Phillipa	*See Note Opposite	Monash IVF	10 April 2009
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
DESSINIOTIS, Martha	*See Note Opposite	Monash IVF	16 May 2009
DIAMANTE, Maria	*See Note Opposite	Monash IVF	10 April 2009
DIMITRAKOPOULOS, Anna	*See Note Opposite	Monash IVF	16 June 2009
EDGAR, David	Freemasons Hospital, The Royal Women's Hospital	Melbourne IVF	31 December 2006
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
GLUSCHENKKO, Georgina	Freemasons Hospital, The Royal Women's Hospital	Melbourne IVF	18 April 2009
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
HAMILTON, Hamish	*See Note Opposite	Repromed Mildura	16 August 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
KARANI, Jerustin	Freemasons Hospital, The Royal Women's Hospital	Melbourne IVF	18 October 2008
KASAP, Rachael	*See Note Opposite	Monash IVF	11 June 2008
KIRWAN, Lisa	Mildura Private Hospital	Reprpmed Mildura	21 September 2007
KORFIATIS, Natasha	*See Note Opposite	Monash IVF	17 August 2007

NAME	LICENSED PLACE	CLINIC	APPROVAL TERM
KRALEVSKI, Vicki	*See Note Below	Monash IVF	31 December 2006
KRISHNAMOORTHY, Kalyani	Freemasons Hospital, The Royal Women's Hospital	Melbourne IVF	13 February 2009
LAWLER, Celine	Freemasons Hospital, The Royal Women's Hospital	Melbourne IVF	3 October 2007
LEKGABE, Edna	*See Note Below	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
MANTELOS, Kathy	Freemasons Hospital, The Royal Women's Hospital	Melbourne IVF	31 December 2006
MARFATIA, Riddhi	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 2008
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
MOHAN, Patrick	Ballarat Day Procedure Centre	Ballarat IVF	20 September 2008
MUNSIE, Megan	*See Note Below	Monash 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
PODKOWINSKI, Arthur	*See Note Below	Monash IVF	18 April 2009
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
ROBBINS, Berrtadette	*See Note Below	Monash IVF	19 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	16 May 2009
SEATON, Angela	*See Note Below	Monash IVF	20 June 2009
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
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
WALE, Petra	Freemasons Hospital, The Royal Women's Hospital	Melbourne IVF	18 October 2008
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

NOTE:\* LICENSED PLACES

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

# Appendix 4

## Doctors Approved under the *Infertility Treatment Act 1995*

NAME	LICENSED PLACE	CLINIC	APPROVAL TERM
BAILEY, Catherine	Mildura Private Hospital	Repromed Mildura	16 December 2006
BARDSLEY, Michael	Ballarat Day Procedure Centre	Ballarat IVF	16 August 2008
BOWDITCH, John	Mildura Private Hospital	Repromed Mildura	17 December 2008
BURMEISTER, Lynn	*See Note Below	Monash IVF	3 April 2009
CATTRAL, Fleur	*See Note Opposite	Melbourne IVF	9 May 2009
CHANDRIKA, Parmar	Mercy Hospital for Women	Melbourne Assisted Conception Centre	20 June 2009
CLARKE, Geoffrey	Freemasons Hospital, The Royal Women's Hospital	Melbourne IVF	31 December 2006
CULLEN, John	*See Note Opposite	Monash IVF	4 April 2009
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
ELZEINY, Hossam	Freemasons Hospital, The Royal Women's Hospital	Melbourne IVF	18 May 2009
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	19 July 2008
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
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
MONRO, Robin	*See Note Opposite	Monash IVF	16 August 2008
MULDER, Annegien	*See Note Opposite	Monash IVF	20 July 2007
O'CALLAGHAN, David	Mercy Hospital for Women	Melbourne Assisted Conception Centre	23 April 2008
PEARCE, Scott	Freemasons Hospital, The Royal Women's Hospital	Melbourne IVF	13 March 2009
PEDERSEN, Dorrit Elschner	*See Note Opposite	Monash IVF	16 August 2008
ROMBAUTS, Luk	*See Note Opposite	Monash IVF	16 August 2008
SLEEMAN, Kimberley	Mildura Private Hospital	Repromed Mildura	23 March 2007
SPEIRS, Andrew	Freemasons Hospital, The Royal Women's Hospital	Melbourne IVF	31 December 2006
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
TOLEDO, Manuela	Freemasons Hospital, The Royal Women's Hospital	Melbourne IVF	13 March 2009

NAME	LICENSED PLACE	CLINIC	APPROVAL TERM
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 Below	Monash IVF	19 November 2006
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

*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
- Bendigo Health Care Group
- Casterton Memorial Hospital
- Central Gippsland Health Services
- Epworth Hospital
- Monash IVF – Geelong
- 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.*

## **Infertility Treatment Authority**

ABN 94 021 324 852  
Level 30, 570 Bourke Street  
Melbourne Vic 3000

Telephone (61 3) 8601 5250  
Facsimile (61 3) 8601 5277  
Email [ita@ita.org.au](mailto:ita@ita.org.au)  
Web [www.ita.org.au](http://www.ita.org.au)