

Kaweah Delta Medical Center

GME Ultrasound Goals and Objectives

Transitional Year

OVERVIEW

The primary goal of the ultrasound curriculum is to provide a practical and didactic experience that will enable residents to become competent with emergency ultrasound (EUS) applications. Residents should complete their ultrasound training feeling confident in their ability to utilize ultrasound in caring for patients in their anticipated practice setting. Residents will be expected to demonstrate competency in basic ultrasound physics, image generation and acquisition and interpretation of images. (For up-to-date details on below areas visit <http://kaweahem.com/ultrasound/>)

- Understand the principles of ultrasound physics and use them to enhance their image acquisition.
- Demonstrate competency in ultrasound ideally completing 5-10 of the following depending on the resident's selected specialty, i.e., PM & R, Radiology, Ophthalmology, Dermatology. It is expected residents will concentrate on those topics that ultimately will prepare them best for their specialty: abdominal aorta, DVT (Deep Venous Thrombosis), musculoskeletal, procedural, e.g., nerve blocks, ocular, central and peripheral IV access, renal, cardiac and lung
- Know how to correctly clean, stock and maintain the XPorte ultrasound units.
- Demonstrate ability to order POCUS exams, assign themselves to the patient, enter results in both the XPorte worksheet and the Synchronicity program and assign the patient to their attending.
- Demonstrate ability to correctly interpret and differentiate adequate from inadequate studies in QA.

CLINICAL AND DIDACTICS

- Residents are expected to submit an equitable schedule the first day of the rotation to Mia.
- Introduce yourself to all attendings & check the ED tracking board for scanning opportunities.
- When the ultrasound faculty or fellows are present, they will provide hands-on education and supervision.
- When the ultrasound faculty or fellows are not present, the resident will scan under the supervision of the patient's attending physician and have them subsequently reviewed at QA.
- All scans need to be clearly labeled and have all pertinent patient information.

Requirements, Methods and Resources

Passing requirements for rotation include:

- Do 75 or more scans (regardless or not if vacation is taken).
- Attend program specific conference days, journal clubs, QA and all ultrasound lectures.
- Complete all of Core Fundamentals.
- Set up room and US equipment for SIM/US workshops occurring during conference times.
- Demonstrate competency via observation or Standardized Direct Observed Testing.
- Demonstrate ability to use Sim Lab BodyWorks Eve and HeartWorks Adam with a personal account and perform adequate Sim cases to meet competency requirements.
- Maintain equipment via appropriate cleaning, stocking and archiving.
- Pass any exams with a score of 70% or higher.

Assessment Methods (Resident):

1. The resident will receive written and verbal feedback and evaluations during the rotation and at rotation's end. Formative feedback (ways to improve) will be provided to the resident during the

rotation. The aim is early recognition of both good and poor performance while there's time for mid-course adjustments.

2. The Transitional Year Residency Program Director will, always, maintain an "open door policy" for ED physicians and the Transitional Year residents on the service to discuss the rotation and the resident's performance on it. This same "open door policy" will extend to all members of the health care team with whom the resident interacts. A resident whose performance is substandard will be counseled and remediated during the rotation.
3. The resident can access all the written evaluations online through New Innovations.

Assessment Method (Program Evaluation)

1. At any time during the rotation, the resident on service is invited to confidentially discuss any aspect of his/her experience with the Transitional Year Residency Program Director. Discussions and mid-course corrections and improvements to the rotation will be addressed as required.
2. All residents will be asked for both confidential written and open verbal feedback on this rotation (and all others) at the end of the rotation and during the Transitional Year's annual program evaluation. Residents are also invited to discuss this rotation (and all others) during their resident-only meetings.
3. Program graduate performance in subsequent training programs will be used to identify areas for improvement in the content of the rotation.