

Kaweah Health

GME Ultrasound Goals and Objectives

Anesthesiology

OVERVIEW

The goal of the point of care ultrasound study (POCUS) curriculum is to provide a practical and didactic experience to enable residents to become competent in POCUS applications in their anticipated practice setting. Residents will have competency in ultrasound physics, image generation, acquisition, and interpretation. For complete details on all following items including clinical, didactics, requirements, methods, and resources, refer to www.kaweahem.com/ultrasound

Passing requirements for rotation include:


- Demonstrate competency in the following applications: TTE, TEE, PIV and airway assessments (tracheal vs. esophageal intubation, bilateral ventilation, locate cricothyroid membrane, diagnose PTX, HTX and pulmonary contusions)
- Know how to correctly clean, stock and maintain the ultrasound units.
- Demonstrate ability to perform, interpret and assign attendings in Synchronicity for POCUS exams.
- Demonstrate ability to interpret and differentiate adequate from inadequate studies in QA.

CLINICAL AND DIDACTICS

- Provide a schedule for approval on the first day of the rotation.
- 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. If not, then they will scan under the supervision of the patient's attending physician and have them subsequently reviewed at QA.
- All scans, clinical and non-clinical, need to have all pertinent patient information to be complete.

Requirements and Methods

Passing requirements for rotation include:

- Do 225 or more. Suggested pace:
 - 1 exam per hour x 8 hours for the first week = 32 exams
 - 2 exams per hour x 8 hours the 2nd to 4th week = 64 exams each week
 - Total of 225 exams (adjusted for GME excused days off)
 - Be listed as the primary performer for at least 75% of the exams
- Attend program specific conference days, journal clubs, QA and all ultrasound lectures.
- Complete the required 15 modules in the POCUS 101 course.
- Demonstrate competency via Standardized Direct Observed Testing.
- Demonstrate ability to use Sim Lab BodyWorks Eve and HeartWorks Adam.
- Maintain equipment via appropriate cleaning, stocking, and archiving. 
- Demonstrate commitment to research by enrolling patients in any ongoing ultrasound research

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 Anesthesiology Program Director will, always, maintain an "open door policy" for Emergency Department supervising physicians, all members of the health care team interacted with, and the anesthesiology residents on the service to discuss the rotation and the resident's performance on it. A resident whose performance is substandard will be counseled and remediated during the rotation. The aim being successful completion of the rotation with a high-performance standard on all metrics described in this document.
3. The resident can access all of 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 Anesthesiology Residency Program Director. Needed discussions and mid-course corrections and improvements to the rotation will be addressed as required. If the resident has an issue to discuss that concerns the Ultrasound Program Director, he/she can discuss this issue with the Anesthesiology Residency Program director, another core faculty member of the resident's choosing or with the Hospital's DIO/Chief Medical Officer.
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 Anesthesiology Department'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.