

Title CSOP 031

Version No: 1.3

Effective date: 15/05/2023

TAAS Ultrasound Portfolio

Name of Trainee:

Name of Mentor:

Course attended / RCEM Modules / Local USS Level 1 course equivalent training :

Date attended:

Date Logbook Reviewed:

Verified by:

Final Sign-off

This clinician is certified as competent in Emergency Medicine Point of Care Ultrasound Scanning (PoCUS) for the modules of eFAST scanning and echocardiography in life support, as defined by the Royal College of Emergency Medicine. They have undergone theoretical and practical training; demonstrating competency in all the required areas.

TAAS approved USS sign-off Supervisor (print name / sign):

Date:

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Ultrasound Logbook

Candidates should have evidence of 10 cases for each of FAST scanning, Echocardiography in life support and Thoracic ultrasound.

At least 5 scans of each modality entry in the logbook should have evidence of reflective practise and be supervisor observed.

Supervisor comments are to specify the level of entrustment each observed scan achieves (see below adopted from RCEM 2021 PoCUS training guide for TAAS PHEM use).

Entrustment scale:

1	<i>Direct Supervisor observation / involvement, able to provide immediate direction / assistance</i>
2	<i>Supervisor present at scene with clinician performing ultrasound scan, monitoring at regular intervals</i>
3	<i>Supervisor 'oncall' similar to current CS role. Available for queries, able to provide direction via phone / videocall if required</i>
4	<i>Would be able to manage with no supervisor involvement and be confident to teach this skill</i>

Within each of the following three sections, the learner must:	Medical assessors' comments recorded during the assessment	Competent?
1. Preparation for the scan		
Greets the patient appropriately and identifies the patient with the notes		
Confirms that the indication for the procedure is within own competency		
Positions the patient correctly		
Demonstrates appropriate attitude and professional manner		
2. The scan		
Sets up the equipment acceptably <ul style="list-style-type: none"> o Patient details o Body marker insertion 		
Probe selection, handling and scanning technique		
Acquisition of the best possible image: Demonstrates subxiphoid view plus one other cardiac view (eg long axis parasternal) Identifies pericardial space and any fluid that is present. Identifies presence / absence of ventricular wall motion, globally and focal. Comments appropriately on right and left ventricular size and can decide if RV dilated. Identifies IVC in LS. Assesses IVC diameter and collapsibility.		
Timelines <ul style="list-style-type: none"> o Speed of scan 		
Saves/prints		
3. Post scan		
Informs the patient appropriately		
Makes a record of the findings		
Interprets and reports findings appropriately		
Indicates if a CXR is needed (ie in CV access)		

Triggered Assessments

Echo in Life Support

Date:

Examiner:

Within each of the following three sections, the learner must:	Medical assessor's comments recorded during the assessment	Competent?
1. Preparation for the scan Greet the patient appropriately and identify the patient with the notes		
Confirm that the indication for the procedure is within own competency		
Position the patient correctly		
Demonstrate appropriate attitude and professional manner		
2. The scan Set up the equipment acceptably <ul style="list-style-type: none"> o Patient details o Body marker insertion 		
Probe selection, handling and scanning technique		
Acquisition of the best possible image: Demonstrate Morison's pouch Demonstrate the spleno-renal interface Demonstrate potential fluid in the pelvis Demonstrate pericardial views Demonstrate the pleural space and can identify fluid		
Timelines <ul style="list-style-type: none"> o Knows when to scan o Speed of scan 		
Saves/prints		
3. Post scan Inform the patient appropriately		
Make a record of the findings		
Interpret and report findings appropriately		
Knows if a repeat scan would be useful		

FAST

Date:

Examiner: