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Title

Point of Care Ultrasound Track at One Year in an Academic Family Medicine Department

Priority 1 (Research Category)

Education and training

Presenters

Sebastian Schoneich, MD, Juana Nicoll Capizzano, MD, Scott Kelley, MD, Ben Beduhn, MD, William Saunders

Abstract

Point of care ultrasound (POCUS) is the bedside acquisition and interpretation of sonograms and is rapidly expanding in ambulatory primary care. Our department built a POCUS curriculum through obtaining an ultrasound fellowship-trained physician, purchasing Mindray TE7 machines for resident clinics, and establishing image storage. All family medicine residents received POCUS didactics, and three PGY-3 residents underwent an intensive year-long POCUS track.

While prior studies describe attitudes to POCUS and the development of POCUS residency curricula, there is a dearth of evidence detailing training outcomes. To address this gap, we conducted a retrospective chart review of all outpatient POCUS scans performed during the first year of our POCUS residency track in a single academic family medicine department.

A total of 534 POCUS scans were performed on patients in three outpatient family medicine clinics over 12 months. The most common scans were soft tissue (27.5%), musculoskeletal (25.3%), obstetric (10.1%), cardiac (7.9%), and abdominal aortic aneurysm screen (6.5%). An average of 45.1 (SD 11.7) scans were completed monthly. The three POCUS track residents performed 225 patient scans (42.1% of all scans). Non-track residents (36 residents) performed 64 scans (11.9%).

To our knowledge, this is the first study describing a POCUS track in a family medicine residency. We detail the volume and range of POCUS applications in ambulatory family medicine clinics. As anticipated, most scans were for soft tissue and musculoskeletal concerns, consistent with common outpatient chief complaints amenable to POCUS. The POCUS track residents performed more scans than their non-track peers. All three track residents went on to match into ultrasound-focused fellowships (two POCUS and one sports medicine fellowship). Offering a POCUS track provides more scan volume and may be an important strategy to growing POCUS expertise within family medicine residencies.