

Introductory Emergency US

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Emergency Ultrasound Course

Goals of this course

- Understand the basics of ED ultrasound
 - Understand its limitations
 - Learn how to scan for AAA, EFAST and procedural guidance

EDUS: what's the point?

wny AAA?

- Clinical assessment can mislead
- Life threatening condition mimics a benign one
- Scan takes 2 minutes

Why EFASI?

Tension PTX
Tamponade
Bleeding into belly
Takes 2 minutes

wny procedural?

Remember being a junior at 2am?

Is that a vein or a tendon?

At the end of today, you'll be able to:

Turn on & use an US machine

Find free fluid in the chest or abdomen

Diagnose pneumothorax

Diagnose AAA

Stick a needle in a vessel with US

But you won't be...

An ace

A sonographer

Credentialed

So: the golden rules

Clinical context is paramount.

Make a differential diagnosis list before you switch on the machine.

Only ask questions you can answer.

Leave the fancy stuff to others.

Repeat scans are crucial.

Every time the clinical picture changes.

90% = 100%

Every test has its limitations.

If this bothers you, don't practise critical care.

When in doubt, be a doctor.

You were a clinician before you were a sonographer. If the clinical picture & scan findings don't agree, believe the clinical picture

'What would I diagnose if I didn't have an US machine?'

ultrasound.

