



AB091. SOH23ABS_221. Pathway to Focused Ultrasound in Intensive Care Heart training at University Hospital Limerick: a 3-year review

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Background: Basic echocardiography has become a core skill for intensive care medicine trainees. It can provide timely and clinically useful information that can aid intensivists' decision making and result in changes in patient management. Focused Ultrasound in Intensive Care (FUSIC) Heart is a level 1 accreditation in echocardiography that has been adopted as a framework for teaching echocardiography to intensive care trainees.

Methods: A training pathway has been put in place here at University Hospital Limerick (UHL) to teach FUSIC Heart: (I) the trainee completes a series of online lectures; (II) attendance at practical group scanning sessions; (III) first 10 cases (4 scans per case) supervised by mentor(s) in person; (IV) the trainee completes a logbook of 50 cases; (V) the online storage of de-identified images using the Sonoclipshare platform is encouraged. This allows remote access to relevant images for review by mentors; (VI) Upon completion of the logbook, a 'triggered assessment' is conducted by a supervisor to assess competency in a real-life scenario. This tests the candidate's ability to acquire a basic image set and provide answers to five key questions; (VII) the Joint Faculty of Intensive Care Medicine of Ireland (JFICMI) website outlines the funding required for the various components of this pathway.

Results: Year 1: 3 graduates (2 cardiology, 1 intensive care); year 2: 2 graduates (1 cardiology, 1 intensive care); year 3: 9 trainees undertaking training (2 cardiology, 7 intensive care). The main group taking this accreditation are intensive care trainees. cardiology and emergency medicine

trainees are also engaging. Historically <25% of trainees complete accreditation process within the designated 1-year period. Cardiology trainees have the highest completion rate and many complete the program in 3 months or less. Integration with cardiology/cardiac physiologists allows the training platform to grow locally. Additional mentors results in increased access to supervised scanning with more trainees taking part.

Conclusions: A pathway for teaching and learning basic echocardiography is now in place at UHL. Funding this process will lead to increased learner and trainer engagement. Future directions: cardiologist/cardiac physiologist/intensivist input is key for program success. Supporting trainers to gain level 2 echocardiography certification will guarantee the future success of this program.

Keywords: Echocardiography; Focused Ultrasound in Intensive Care (FUSIC); intensive care; training pathway; ultrasound

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Footnote

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