

**ECIM 2025 PoCUS Workshop I**

**Program**

Recorded Powerpoint Sessions	Basic principles of ultrasound and knobology
	Lung assessment
	Heart assessment
	Vascular assessment for Deep Venous Thrombosis

**Hands on practice**

*March 5<sup>th</sup>*

12:45	Welcoming Session
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	Station 1 Approach to the Breathless patient 1	Station 2 Approach to the Chest Pain patient 1	Station 3 Approach to the Breathless patient 2	Station 4 Approach to the Chest Pain patient 2	Station 5 Approach to the Breathless patient 3
13:00	Group A	Group B	Group C	Group D	Group E
14:00	Group B	Group C	Group D	Group E	Group A
15:00	Group C	Group D	Group E	Group A	Group B
16:00	Group D	Group E	Group A	Group B	Group C
17:00	Group E	Group A	Group B	Group C	Group D

18:00	Closing Session
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### **Clinical Case design**

- Case duration: 60 min
- Clinical vignette with physical examination
- Instructor shows assessment in real time without comments, and explains what is doing and seeing
- Trainee performs and comments (at least 10 min per trainee).
- Clinical case and images/films are shown with pathologic findings
- Trainee checklist to assure all goals are achieved

### **Clinical Cases Goals**

#### **Station 1 - Approach to the Breathless patient 1**

##### *Pneumonia with pleural effusion*

- Acquire adequate lung images at every thoracic point
- Acquire adequate cardiac images
  - Parasternal long axis
  - Parasternal short axis
  - Apical
  - Subcostal
- Identify anatomical structures
  - Atria and ventricular walls
  - Cardiac valves
  - Pericardium
  - Soft tissue
  - Ribs (bony and cartilaginous)
  - Pleural sliding
  - Diaphragm
- Identify patterns
  - A pattern
  - Focal B lines
  - C pattern
  - Atelectasis
  - Pleural effusion
  - Collapsing ventricula (septic shock)
  - Collapsing Inferior Vena Cava

#### **Station 2 - Approach to the Chest Pain patient 1**

##### *Pericardic effusion*

- Acquire adequate cardiac images
  - Parasternal long axis
  - Parasternal short axis
  - Apical
  - Subcostal
- Identify anatomic structures in each cardiac window
  - Atria and ventricular walls
  - Cardiac valves
  - Pericardium

- Identify patterns
  - Pericardial effusion
  - Tamponade signs

### Station 3 - Approach to the Breathless patient 2

#### *Heart failure*

- Acquire adequate cardiac images
  - Parasternal long axis
  - Parasternal short axis
  - Apical
  - Subcostal
- Acquire adequate lung images at every thoracic point
- Identify anatomic structures in each window
  - Atria and ventricular walls
  - Cardiac valves
  - Pericardium
  - Soft tissue
  - Ribs (bony and cartilaginous)
  - Pleural sliding
  - Diaphragm
- Identify patterns
  - Diffuse B lines
  - Bilateral pleural effusion
  - Compromised myocardial function
  - Ingurgitated Inferior Vena Cava

### Station 4 - Approach to the Chest Pain patient 2

#### *Pneumothorax*

- Acquire adequate lung images at every thoracic point
- Acquire adequate cardiac images
  - Parasternal long axis
  - Parasternal short axis
  - Apical
  - Subcostal
- Identify anatomical structures
  - Atria and ventricular walls
  - Cardiac valves
  - Pericardium
  - Soft tissue
  - Ribs (bony and cartilaginous)
  - Pleural sliding
  - Diaphragm
- Identify patterns
  - A' pattern
  - Lung point
  - Right ventricular dilatation
  - Ingurgitated Inferior Vena Cava

## Station 5 - Approach to the Breathless patient 3

### *Pulmonary Embolism*

- Acquire adequate lung images at every thoracic point
- Acquire adequate cardiac images
  - Parasternal long axis
  - Parasternal short axis
  - Apical
  - Subcostal
- Perform lower limbs venous assessment by two points compression (popliteal and femoral)
- Identify anatomical structures
  - Atria and ventricular walls
  - Cardiac valves
  - Pericardium
  - Soft tissue
  - Ribs (bony and cartilaginous)
  - Pleural sliding
  - Diaphragm
  - Popliteal vein and artery
  - Femoral vein and artery
  - Safena vein
- Identify patterns
  - A pattern
  - C pattern
  - Right ventricular dilatation
  - Ingurgitated Inferior Vena Cava
  - Non-compressible venous structures