

## Hours/Locations -

- Shifts are 11A-11P in KCH main ED, Mon, Tue, Fri
- Second week 2 overnights 7P-7A
- Thurs: tape review usually at 9A in US room, then work to 9P (or 12 after you came in)
- Off on weekends and Wed (conference)
- Email Dr. Catharine Bon 1 week before start of rotation

## Responsibilities -

- Assign yourself to all female patients (quad 1-4) w/
  - Pregnant
  - Vaginal bleeding
  - Lower abdominal pain
  - Urinary symptoms
- Order pregnancy test!!! Then discuss with attending what other tests you want to do depending on patients' presentation (UA/UCx/UhCG + Blood: CBC, T&S, CMP, Quant hCG, PT/PTT)

## Requirements: Must get these numbers!

Try to do all 4 of these scans on each patient so that you complete your requirement on time. If you are behind on your numbers you may have to come in on weekends and Wednesday

- Pelvic 25-50
- FAST 25
- Aorta 25
- Renal 25

Keep track of your numbers! Make your own data sheet.

## Ultrasound:

- Start: "New patient"
  - Put your name and supervisor
  - Patients MRN
  - Brief Hx
  - Then click "2D" to sono
- When you're done: must put interpretation to get credit. Click on

"TEXT", must take a picture of text for it to save, click on the camera button.

Interpretation Ex:

- FAST Neg, No AAA, No Hydro.
- IUP, No FF, Pos FHR, Pos Mvmt

**FAST:** RUQ: Liver tip, diaphragm, kidney, morison's pouch. LUQ: Spleen, diaphragm, Kidney. Pericardial - subxiphoid. Bladder - transverse and sagittal

**Renal:** Fan through kidney in both views (sagittal and transverse). Look for hydro, cysts. Bladder - ureteral jets for obs

**Aorta:** (4 views): (proximal- celiac trunk/seagull sign, mid- SMA/snowman sign, bifurcation, longitudinal) Aorta (<3 cm). Iliac (<1.5 cm) (outer wall to outer wall)

**Pregnant Pelvic/Transvag:** Gest sac + Yolk sac (lil cheerio in sac, must see yolk sac) = IUP. FHR (M-Mode heart) / Baby mvmt. (Make sure attending supervises pregnant sono)

## BHCG:

1000-2000: gestational sac (TV)  
>1500-2000: yolk sac (TV), gestational sac (TA)  
>5000 fetal pole (TV) or Yolk sac (TA)  
>10,000 cardiac (TV) or fetal pole (TA)

## Important Numbers

-10-20-5 Rule (blighted ovum)  
-Gestational sac 10mm – visualize yolk sac  
-Gestational sac 20mm – visualize fetal pole  
-Fetal Pole 5mm – cardiac motion  
Myometrial mantle (distance from outer GS to outer wall of uterus) should be greater than 8mm

<https://drive.google.com/file/d/0B66fVEVNgK80dFRIWGWTVVWOXhqMjVRdVE1b2pISHE1V0FB/view>