



## Clinical Case Assessment

The Clinical Case-Based assessments were developed using a standard template that has been customized for each content area. Clinical scenarios are presented to candidates in audio and/or video formats (with closed-captioning and written scripts). Ultrasound media and assessment questions are presented at key points during the patient encounter. Questions are designed to assess the following:

<b>Standard POCUS Views: 8%</b>	<ul style="list-style-type: none"> <li>Familiarity with normal exploration paths</li> <li>Recognition of when patient condition or presentation requires deviations from the normal exploration paths</li> <li>Identification of regions or basic POCUS views described in consensus documents or protocols</li> </ul>
<b>Anatomical Features: 24%</b>	<ul style="list-style-type: none"> <li>Ability to recognize and identify various anatomical features in M-mode and 2D/B-mode images, color Doppler, spectral Doppler</li> </ul>
<b>Sonographic Findings: 32%</b>	<ul style="list-style-type: none"> <li>Knowledge of common sonographic artifacts or measurements</li> <li>Ability to identify artifacts that may aid in diagnosis</li> <li>Recognition of sonographic patterns and their implications for diagnosis</li> </ul>
<b>Diagnostic Findings: 32%</b>	<ul style="list-style-type: none"> <li>The ability to determine and confirm an initial diagnosis using integrated POCUS media and clinical information</li> <li>Understanding and recognition when it is not possible to obtain an initial diagnosis through POCUS</li> </ul>
<b>Abdominal Trauma Pathologies: 4%</b>	<ul style="list-style-type: none"> <li>Knowledge of common pathologies and conditions identified through Abdominal Trauma POCUS (including but not limited to: Positive for Free Intra-peritoneal Fluid, Negative for Free Intra-peritoneal Fluid, Pleural Effusion, Pericardial Effusion, Retroperitoneal hemorrhage, Splenic laceration, Liver laceration, Subcapsular renal hematoma, Pneumoperitoneum)</li> <li>Must comprehend that it is sometimes not possible to get a diagnosis and recognize when this is the case</li> <li>Must know how to determine or confirm a diagnosis using created images</li> <li>Ability to comprehensively consider all case information (images, patient presentation, labs, etc.) to determine an initial diagnosis</li> </ul>

## Peer Evaluation

When applying for Clinical Certificates, you will be asked to provide the names and email addresses of clinicians with a clinical background in ultrasound who are familiar with your ability to obtain clinically-relevant abdominal trauma Point-of-Care Ultrasound images. The POCUS Certification Academy™ will contact of these individuals to ask them to complete a short questionnaire regarding their impressions of your abdominal trauma Point-of-Care Ultrasound abilities. Assessment results are based on the first two evaluations received. Each of the evaluated areas is weighted at 20%. Peer Evaluators will be asked about the following:

<p><b>Diagnostic Quality</b></p> <p>Ability to obtain images of diagnostic quality</p>	<p><b>Gain</b></p> <p>Demonstrate proficient use of gain settings</p>	<p><b>Depth</b></p> <p>Demonstrate appropriate use of depth setting and center the area of interest on the screen</p>	<p><b>Views</b></p> <p>Demonstrate proper transducer placement</p>	<p><b>Pathology</b></p> <p>Acquired and interpreted Point-of-Care Ultrasound (POCUS) images related to most common Abdominal Trauma pathologies for which POCUS is appropriate</p>
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