What should an AIM ultrasound curriculum look like?
Results from a national survey of clinicians on the AMU

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Aim
To ascertain what clinicians on the AMU believe an ultrasound curriculum for acute internal medicine (AIM) should contain, in order to help inform training standards being developed for AIM trainees

Methods
Online survey conducted through SurveyMonkey software, sent to all members of the Society for Acute Medicine (SAM). In addition, the survey was circulated to trainees via the trainee programme directors and via social media

Results
A total of 276 people responded to the survey including two Foundation trainees, eight SHOs, 73 trainees at St3/4, 78 at St 5-7 and 100 Consultants. The majority of respondents (67%) were training in or had finished training in AIM. 249 people answered whether some form of ultrasound training should be a core skill or remain a specialist skill in the curriculum. Of these, 20.5% answered specialist skill only, leaving 79.5% of respondents believing ultrasound should be a core component of the AIM curriculum. Respondents were then asked which areas should a curriculum contain, with the results in figure 1.

The survey also asked how respondents felt a curriculum could best be delivered, with the results in figure 2.

Table 1: top six suggested curriculum components in order of frequency

<table>
<thead>
<tr>
<th>Core skill respondents (n=196)</th>
<th>Specialist skill respondents (n=48)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thoracic (fluid/drainage)</td>
<td>Thoracic (fluid/drainage)</td>
</tr>
<tr>
<td>Vascular access (peripheral)</td>
<td>Vascular access (peripheral)</td>
</tr>
<tr>
<td>Abdominal (fluid/drainage)</td>
<td>Thoracic (lung water, consolidation, PTX)</td>
</tr>
<tr>
<td>Thoracic (lung water, consolidation, PTX)</td>
<td>Echocardiography (focussed or BSE)</td>
</tr>
<tr>
<td>Echocardiography (focussed or BSE)</td>
<td>Abdominal (fluid/drainage)</td>
</tr>
<tr>
<td>FAST scan</td>
<td>Renal (hydronephrosis + stones)</td>
</tr>
</tbody>
</table>

Table 2: other suggested curriculum components (number of respondents)

<table>
<thead>
<tr>
<th>Core skill respondents</th>
<th>Specialist skill respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central vascular access (2)</td>
<td>Central vascular access</td>
</tr>
<tr>
<td>FEEL (3)</td>
<td>FICE or FEEL plus level 1 US</td>
</tr>
<tr>
<td>Not renal stones, focussed echo only</td>
<td>IVC, fluid status assessment</td>
</tr>
</tbody>
</table>

Figure 1: Suggested curriculum components of survey respondents

Figure 2: Suggested methods of AIM ultrasound curriculum delivery

Key points
- 76.5% respondents feel US should be a core component of the AIM curriculum
- Whether core or specialist skill, there is agreement about 5 out of the top 6 components to include
- Current alternative standards such as RCEM are not considered appropriate for AIM by these respondents

Conclusion
This UK wide survey showed that over 75% AMU clinicians believe ultrasound should form a core part of the AIM curriculum, in keeping with a recently published trainee survey[1]. Interestingly, whether respondents thought ultrasound should be a core or specialist skill, there was good agreement amongst clinicians as to the components of such a curriculum. This data will be used to help develop an AIM specific ultrasound curriculum.

Abbreviations:
AIM: Acute internal medicine
BSE: British Society of Echocardiography
AMU: Acute medical unit
RCR: Royal College of Radiologists
RCEM: Royal College of Emergency Medicine
PTX: pneumothorax
US: ultrasound
SAM: Society for Acute Medicine