# Assessment of Completion of Training - thoracic

Candidate name: Date:

Supervisor name (PRINTED): SAM membership no:

Professional registration number (GMC, NMC, MVR-PA etc):

| Pre-procedure preparation | |
|---|---|
| | Initials |
| Appropriate approach and manner | |
| Consents patients and explains risks and indications | |
| Checks patient's name badge; enters details into machine | |
| Comfortable and ergonomic positioning of patient and machine | |
| **Scanning** | |
| Correct probe selection and frequency | |
| Optimisation of machine settings | |
| Identification of Upper and Lower BLUE points | |
| Demonstrates characteristic 'batwing' appearance of ribs and pleura | |
| Identification of pleural sliding in 2D and M mode with lung pulse | |
| Able to demonstrate A lines, and B lines where present | |
| Able to identify lung, hemidiaphragms, spleen and liver | |
| Able to demonstrate diaphragmatic movement with respiration | |
| Is systematic and follows BLUE algorithm | |
| Identifies any abnormalities and pathology correctly | |
| Identifies appropriate site for pleural procedure (if appropriate) | |
| **Storage, documentation and interpretation** | |
| Saves cines and/or pictures for each area as appropriate | |
| Reports results to patient where indicated | |
| Identifies need for further imaging and limitations of scan | |
| Cleans equipment and shuts down machine as appropriate | |
| **Logbook and pathology review** | |
| At least 10 supervised and (indicative) further 30 mentored scans completed | |
| Full range of pathology seen with indicative minimum numbers (effusion [including site marked for pleural procedure], consolidation, increased lung water, ability to rule out pneumothorax) | |
| **e-LFH module completed?** | |
| **Theoretical training complete (e-LFH module +- course attendance+- demonstrated throughout training)** | |
| **Thoracic Assessment of Completion of Training complete?** | |
| **Comments (if applicable):** | |

Signed (candidate):

Signed (supervisor):

Once completed return to FAMUS administrator, Society for Acute Medicine Secretariat, Hazeltonhead Farm, Mearnskirk, Glasgow G77 6RS, or scan and e-mail famus@acutemedicine.org.uk