

Table 2. Point of Care Ultrasound Image Interpretation Criteria.

Image interpretation is a core element of any POCUS competency program (I in the I-AIM framework). The following elements evaluate learner performance when interpreting images or clips. This section is meant to evaluate the interpretation skills of the performer. Essentially this means we are assessing how well the performer is able to achieve the POCUS targets. We achieve this goal by using the following criteria on each organ system. This document also satisfies criteria for the OSCE content on POCUS. This component is part of the formative and summative assessment portions of the program, each evaluated separately.

1	CARDIAC	Pass	Incomplete
	For all cardiac images/ clips exams obtained the following objective criteria should include:		
	i. Aquisition technique. Image interpretation can only be reliable if the image aquisition technique is of reasonable standard (see Aquisition Criteria)	<input type="checkbox"/>	<input type="checkbox"/>
	ii. Criteria for formative and summative evaluation remain the same.		
	No errors of the following targets are permitted on either evaluations.		
A	The following are considered to be major findings that trainees are expected to recognize correctly and given a 'pass-grade' for their FoCUsed exam.		
	a. Moderate/severe dilation of the LV, RV, LA, RA or aorta.	<input type="checkbox"/>	<input type="checkbox"/>
	b. Moderate/severe dysfunction of the LV, or RV	<input type="checkbox"/>	<input type="checkbox"/>
	c. Severe or obvious systolic dysfunction or the LV or RV	<input type="checkbox"/>	<input type="checkbox"/>
	d. Severe or obvious dysfunction of any valve including severe stenosis or prominent vegetation/thrombus.	<input type="checkbox"/>	<input type="checkbox"/>
	e. Moderate/large size pericardial effusion and pericardial tamponade.	<input type="checkbox"/>	<input type="checkbox"/>
	f. Gross masses or clot in transit.	<input type="checkbox"/>	<input type="checkbox"/>
	g. Presense of an aortic dissection	<input type="checkbox"/>	<input type="checkbox"/>
	h. Presense of fluid responsiveness	<input type="checkbox"/>	<input type="checkbox"/>
	i. Presense of non collpasable lower extremity vein when concerned for PE/DVT	<input type="checkbox"/>	<input type="checkbox"/>
	j. No gross pathology observed	<input type="checkbox"/>	<input type="checkbox"/>
B.	Formartive evaluation		
	i. Pass	<input type="checkbox"/>	
	ii. Fail		<input type="checkbox"/>

3	GASTRIC	Pass	Incomplete
	For all cardiac images/ clips exams obtained the following objective criteria should include:		
	i. Aquisition technique. Image interpretation can only be reliable if the image aquisition technique is of	<input type="checkbox"/>	<input type="checkbox"/>
	reasonable standard (see Aquisition Criteria)		
	ii. Criteria for formative and summative evaluation remain the same.		
	No errors of the following targets are permitted on either evaluations.		
	A The following are considered to be major findings that trainees are expected to recognize correctly		
	and given a 'pass-grade' for their gastric exam.		
	a. Empty gastric antrum regardless of changes in position indicating minimal aspiration risk	<input type="checkbox"/>	<input type="checkbox"/>
	b. Empty gastric antrum in supine but filled with fluid in the RDL or semirrecumbent	<input type="checkbox"/>	<input type="checkbox"/>
	if such is the case then a linear model can be used to estimate risk of aspiration.		
	c. Gastric antrum filled with fluid in the supine and RDL or semirrecumbent indicating more than	<input type="checkbox"/>	<input type="checkbox"/>
	baseline secretions and full stomach precautions should be followed.		
	e. Gastric antrum distended and filled with echogenic material indicating recent meal	<input type="checkbox"/>	<input type="checkbox"/>
	f. Gastric antrum with acoustic shadowing indicating very recent meal and high aspiration risk.	<input type="checkbox"/>	<input type="checkbox"/>
	B. Formartive evaluation		
	i. Pass	<input type="checkbox"/>	
	ii. Fail		<input type="checkbox"/>
	C. Summative evaluation		
	i. Pass	<input type="checkbox"/>	
	ii. Fail		<input type="checkbox"/>
4	FAST	Pass	Incomplete
	For all FAST images/ clips exams obtained the following objective criteria should include:		
	i. Aquisition technique. Image interpretation can only be reliable if the image aquisition technique is of	<input type="checkbox"/>	<input type="checkbox"/>
	reasonable standard (see Aquisition Criteria)		
	ii. Criteria for formative and summative evaluation remain the same.		
	No errors of the following targets are permitted on either evaluations.		

