Building the Framework: Consensus-Based Recommendations for POCUS in PA Curricula

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Objectives

Many physician assistant / associate (PA) programs integrate POCUS, with wide **variation** in **content** & **instructional time**

No formal guidance or consensus recommendations for POCUS in PA education exist

Identified a need to **establish expert consensus** on essential curricular components for PAs

Study aim: identify & prioritize **POCUS knowledge, skills, & applications** for PA program curricula

Methodology

Design: Quantitative survey using RAND/UCLA Appropriateness Method (RAM) to establish consensus

Survey content: Foundational POCUS concepts, imaging modalities, organ systems, procedural applications, and protocols

Rating system: 9-point Likert scale assessing appropriateness for PA education

Participants: PAs in two categories:

- *Experts* with ≥2 years clinical experience, plus active POCUS use, teaching experience, or publication in POCUS education (n=97)
- *New graduates* (n=3) for early career perspective

Analysis: Descriptive statistics, median scores, and interquartile ranges to assess appropriateness and degree of consensus

Outcomes: Recommendations categorized as:

++ Strongly recommended

+ Recommended

+/- Conditional recommendation

- Not recommended

Results

Respondents: 63% (n=63); mean years in practice = 13.9; majority with active POCUS clinical use (92.7%) & POCUS teaching experience (93.0%)

Recommended for Inclusion in PA POCUS Curricula:

Foundational Concepts:

++Knobology ++ image optimization ++ transducer recognition & movement ++ obtain images in B-mode + artifact identification + obtain images in M-mode, and color flow mode

Obtain Imaging, Identify Structures, Recognize Findings:

++ *Abdomen:* RUQ, LUQ, lower abdomen transverse, liver, spleen, kidneys, hepatorenal space, splenorenal space, free fluid, hydronephrosis

++*Cardiac:* PLAX, parasternal short axis, apical 4 chamber, subcostal, L & R atria & ventricles, mitral & aortic valves, myocardium, pericardial effusion

++*Lungs & Chest:* ribs, rib shadows, lung sliding present/absent, B lines

+*Pelvis:* Blader, uterus, fetus

++*Vascular:* abdominal aorta

Procedures: & Protocols:

+ peripheral IV + arthrocentesis +joint injection **++** eFAST, + RUSH, +BLUE

Conclusion

Landmark consensus-based recommendations for PA POCUS curricula, prioritizing foundational concepts, image acquisition, high-yield findings for **curricular consistency**, **preparation for practice**, & align with **competency-based education**

Full Text PDF:

https://duke.is/POCUSinPA

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