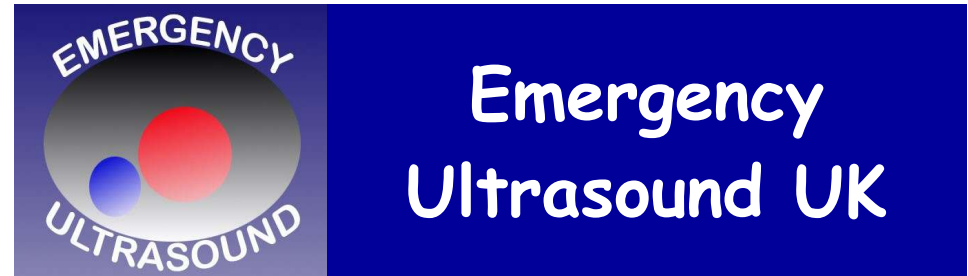


Emergency Ultrasound UK



**Emergency Department Ultrasound  
Log Book**

## Emergency Ultrasound UK

## Emergency Ultrasound UK

**Name:**

### **Introductory Course**

**Name:** *Emergency Department  
Ultrasound Course*

**Location:**

**Date:**

**Other Courses / Workshops etc**

## Proficiency Record

| Level      | Date | Sign-off |
|------------|------|----------|
| <b>I*</b>  |      |          |
| <b>I</b>   |      |          |
| <b>II</b>  |      |          |
| <b>III</b> |      |          |

Trauma—FAST Module

Date

Sign-off

AAA Module

Date

Sign-off

Soft Tissue Foreign Body Module

Date

Sign-off

Cardiac Module

Date

Sign-off

# Emergency Ultrasound UK

## RECORD OF EXPERIENCE

|    | Hosp No. | Date | Type of Scan and Findings | Sign-off |
|----|----------|------|---------------------------|----------|
| 78 |          |      |                           |          |
| 79 |          |      |                           |          |
| 80 |          |      |                           |          |
| 81 |          |      |                           |          |
| 82 |          |      |                           |          |
| 83 |          |      |                           |          |
| 84 |          |      |                           |          |
| 85 |          |      |                           |          |
| 86 |          |      |                           |          |
| 87 |          |      |                           |          |
| 88 |          |      |                           |          |
| 89 |          |      |                           |          |
| 90 |          |      |                           |          |

|                         |
|-------------------------|
| Musculo-Skeletal Module |
| Date                    |
| Sign-off                |

|                |
|----------------|
| Biliary Module |
| Date           |
| Sign-off       |

|              |
|--------------|
| Renal Module |
| Date         |
| Sign-off     |

|            |
|------------|
| O&G Module |
| Date       |
| Sign-off   |

|              |
|--------------|
| _____ Module |
| Date         |
| Sign-off     |

|              |
|--------------|
| _____ Module |
| Date         |
| Sign-off     |

## Emergency Ultrasound UK

### TRAUMA—FAST

| FAST—Minimum 25, 50% clinically indicated, 5 abnormal |          |      |          |          |
|-------------------------------------------------------|----------|------|----------|----------|
|                                                       | Hosp No. | Date | Findings | Sign-off |
| 1                                                     |          |      |          |          |
| 2                                                     |          |      |          |          |
| 3                                                     |          |      |          |          |
| 4                                                     |          |      |          |          |
| 5                                                     |          |      |          |          |
| 6                                                     |          |      |          |          |
| 7                                                     |          |      |          |          |
| 8                                                     |          |      |          |          |
| 9                                                     |          |      |          |          |
| 10                                                    |          |      |          |          |
| 11                                                    |          |      |          |          |
| 12                                                    |          |      |          |          |

| RECORD OF EXPERIENCE |          |      |                           |          |
|----------------------|----------|------|---------------------------|----------|
|                      | Hosp No. | Date | Type of Scan and Findings | Sign-off |
| 65                   |          |      |                           |          |
| 66                   |          |      |                           |          |
| 67                   |          |      |                           |          |
| 68                   |          |      |                           |          |
| 69                   |          |      |                           |          |
| 70                   |          |      |                           |          |
| 71                   |          |      |                           |          |
| 72                   |          |      |                           |          |
| 73                   |          |      |                           |          |
| 74                   |          |      |                           |          |
| 75                   |          |      |                           |          |
| 76                   |          |      |                           |          |
| 77                   |          |      |                           |          |

ED Sonographer will review each case and sign-off those that meet credentialing criteria.

## Emergency Ultrasound UK

### RECORD OF EXPERIENCE

|    | Hosp No. | Date | Type of Scan and Findings | Sign-off |
|----|----------|------|---------------------------|----------|
| 52 |          |      |                           |          |
| 53 |          |      |                           |          |
| 54 |          |      |                           |          |
| 55 |          |      |                           |          |
| 56 |          |      |                           |          |
| 57 |          |      |                           |          |
| 58 |          |      |                           |          |
| 59 |          |      |                           |          |
| 60 |          |      |                           |          |
| 61 |          |      |                           |          |
| 62 |          |      |                           |          |
| 63 |          |      |                           |          |
| 64 |          |      |                           |          |

### FAST—Minimum 25, 50% clinically indicated, 5 abnormal

|    | Hosp No. | Date | Findings | Sign-off |
|----|----------|------|----------|----------|
| 13 |          |      |          |          |
| 14 |          |      |          |          |
| 15 |          |      |          |          |
| 16 |          |      |          |          |
| 17 |          |      |          |          |
| 18 |          |      |          |          |
| 19 |          |      |          |          |
| 20 |          |      |          |          |
| 21 |          |      |          |          |
| 22 |          |      |          |          |
| 23 |          |      |          |          |
| 24 |          |      |          |          |
| 25 |          |      |          |          |

## Emergency Ultrasound UK

**FAST—Minimum 25, 50% clinically indicated, 5 abnormal**

|    | Hosp No. | Date | Findings | Sign-off |
|----|----------|------|----------|----------|
| 26 |          |      |          |          |
| 27 |          |      |          |          |
| 28 |          |      |          |          |
| 29 |          |      |          |          |
| 30 |          |      |          |          |
| 31 |          |      |          |          |
| 32 |          |      |          |          |
| 33 |          |      |          |          |
| 34 |          |      |          |          |
| 35 |          |      |          |          |
| 36 |          |      |          |          |
| 37 |          |      |          |          |
| 38 |          |      |          |          |

**RECORD OF EXPERIENCE**

|    | Hosp No. | Date | Type of Scan and Findings | Sign-off |
|----|----------|------|---------------------------|----------|
| 39 |          |      |                           |          |
| 40 |          |      |                           |          |
| 41 |          |      |                           |          |
| 42 |          |      |                           |          |
| 43 |          |      |                           |          |
| 44 |          |      |                           |          |
| 45 |          |      |                           |          |
| 46 |          |      |                           |          |
| 47 |          |      |                           |          |
| 48 |          |      |                           |          |
| 49 |          |      |                           |          |
| 50 |          |      |                           |          |
| 51 |          |      |                           |          |



## Emergency Ultrasound UK

### RECORD OF EXPERIENCE

|    | Hosp No. | Date | Type of Scan and Findings | Sign-off |
|----|----------|------|---------------------------|----------|
| 26 |          |      |                           |          |
| 27 |          |      |                           |          |
| 28 |          |      |                           |          |
| 29 |          |      |                           |          |
| 30 |          |      |                           |          |
| 31 |          |      |                           |          |
| 32 |          |      |                           |          |
| 33 |          |      |                           |          |
| 34 |          |      |                           |          |
| 35 |          |      |                           |          |
| 36 |          |      |                           |          |
| 37 |          |      |                           |          |
| 38 |          |      |                           |          |

## ABDOMINAL AORTA

### AAA—Minimum 25, 50% clinically indicated, 5 abnormal

|    | Hosp No. | Date | Findings | Sign-off |
|----|----------|------|----------|----------|
| 1  |          |      |          |          |
| 2  |          |      |          |          |
| 3  |          |      |          |          |
| 4  |          |      |          |          |
| 5  |          |      |          |          |
| 6  |          |      |          |          |
| 7  |          |      |          |          |
| 8  |          |      |          |          |
| 9  |          |      |          |          |
| 10 |          |      |          |          |
| 11 |          |      |          |          |
| 12 |          |      |          |          |

ED Sonographer will review each case and sign-off those that meet credentialing criteria.

## Emergency Ultrasound UK

AAA—Minimum 25, 50% clinically indicated, 5 abnormal

|    | Hosp No. | Date | Findings | Sign-off |
|----|----------|------|----------|----------|
| 13 |          |      |          |          |
| 14 |          |      |          |          |
| 15 |          |      |          |          |
| 16 |          |      |          |          |
| 17 |          |      |          |          |
| 18 |          |      |          |          |
| 19 |          |      |          |          |
| 20 |          |      |          |          |
| 21 |          |      |          |          |
| 22 |          |      |          |          |
| 23 |          |      |          |          |
| 24 |          |      |          |          |
| 25 |          |      |          |          |

## RECORD OF EXPERIENCE

|    | Hosp No. | Date | Type of Scan and Findings | Sign-off |
|----|----------|------|---------------------------|----------|
| 13 |          |      |                           |          |
| 14 |          |      |                           |          |
| 15 |          |      |                           |          |
| 16 |          |      |                           |          |
| 17 |          |      |                           |          |
| 18 |          |      |                           |          |
| 19 |          |      |                           |          |
| 20 |          |      |                           |          |
| 21 |          |      |                           |          |
| 22 |          |      |                           |          |
| 23 |          |      |                           |          |
| 24 |          |      |                           |          |
| 25 |          |      |                           |          |

**Emergency Ultrasound UK**

**OTHERS**

| RECORD OF EXPERIENCE |          |      |                           |          |
|----------------------|----------|------|---------------------------|----------|
|                      | Hosp No. | Date | Type of Scan and Findings | Sign-off |
| 1                    |          |      |                           |          |
| 2                    |          |      |                           |          |
| 3                    |          |      |                           |          |
| 4                    |          |      |                           |          |
| 5                    |          |      |                           |          |
| 6                    |          |      |                           |          |
| 7                    |          |      |                           |          |
| 8                    |          |      |                           |          |
| 9                    |          |      |                           |          |
| 10                   |          |      |                           |          |
| 11                   |          |      |                           |          |
| 12                   |          |      |                           |          |

| AAA—Minimum 25, 50% clinically indicated, 5 abnormal |          |      |          |          |
|------------------------------------------------------|----------|------|----------|----------|
|                                                      | Hosp No. | Date | Findings | Sign-off |
| 26                                                   |          |      |          |          |
| 27                                                   |          |      |          |          |
| 28                                                   |          |      |          |          |
| 29                                                   |          |      |          |          |
| 30                                                   |          |      |          |          |
| 31                                                   |          |      |          |          |
| 32                                                   |          |      |          |          |
| 33                                                   |          |      |          |          |
| 34                                                   |          |      |          |          |
| 35                                                   |          |      |          |          |
| 36                                                   |          |      |          |          |
| 37                                                   |          |      |          |          |
| 38                                                   |          |      |          |          |

Sonographer will review each credentialing case and sign-off those that meet required criteria. See training policy for further information on numbers required to gain proficiency in teach module.

**Emergency Ultrasound UK**

**FOREIGN BODY**

| FB—Minimum 25, 50% clinically indicated, 5 abnormal |          |      |          |          |
|-----------------------------------------------------|----------|------|----------|----------|
|                                                     | Hosp No. | Date | Findings | Sign-off |
| 1                                                   |          |      |          |          |
| 2                                                   |          |      |          |          |
| 3                                                   |          |      |          |          |
| 4                                                   |          |      |          |          |
| 5                                                   |          |      |          |          |
| 6                                                   |          |      |          |          |
| 7                                                   |          |      |          |          |
| 8                                                   |          |      |          |          |
| 9                                                   |          |      |          |          |
| 10                                                  |          |      |          |          |
| 11                                                  |          |      |          |          |
| 12                                                  |          |      |          |          |

| CARDIAC—Minimum 25, 50% clinically indicated, 5 abnormal |          |      |          |          |
|----------------------------------------------------------|----------|------|----------|----------|
|                                                          | Hosp No. | Date | Findings | Sign-off |
| 26                                                       |          |      |          |          |
| 27                                                       |          |      |          |          |
| 28                                                       |          |      |          |          |
| 29                                                       |          |      |          |          |
| 30                                                       |          |      |          |          |
| 31                                                       |          |      |          |          |
| 32                                                       |          |      |          |          |
| 33                                                       |          |      |          |          |
| 34                                                       |          |      |          |          |
| 35                                                       |          |      |          |          |
| 36                                                       |          |      |          |          |
| 37                                                       |          |      |          |          |
| 38                                                       |          |      |          |          |

ED Sonographer will review each case and sign-off those that meet credentialing criteria.

## Emergency Ultrasound UK

**CARDIAC—Minimum 25, 50% clinically indicated, 5 abnormal**

|    | Hosp No. | Date | Findings | Sign-off |
|----|----------|------|----------|----------|
| 13 |          |      |          |          |
| 14 |          |      |          |          |
| 15 |          |      |          |          |
| 16 |          |      |          |          |
| 17 |          |      |          |          |
| 18 |          |      |          |          |
| 19 |          |      |          |          |
| 20 |          |      |          |          |
| 21 |          |      |          |          |
| 22 |          |      |          |          |
| 23 |          |      |          |          |
| 24 |          |      |          |          |
| 25 |          |      |          |          |

**FB—Minimum 25, 50% clinically indicated, 5 abnormal**

|    | Hosp No. | Date | Findings | Sign-off |
|----|----------|------|----------|----------|
| 13 |          |      |          |          |
| 14 |          |      |          |          |
| 15 |          |      |          |          |
| 16 |          |      |          |          |
| 17 |          |      |          |          |
| 18 |          |      |          |          |
| 19 |          |      |          |          |
| 20 |          |      |          |          |
| 21 |          |      |          |          |
| 22 |          |      |          |          |
| 23 |          |      |          |          |
| 24 |          |      |          |          |
| 25 |          |      |          |          |

## Emergency Ultrasound UK

| FB—Minimum 25, 50% clinically indicated, 5 abnormal |          |      |          |          |
|-----------------------------------------------------|----------|------|----------|----------|
|                                                     | Hosp No. | Date | Findings | Sign-off |
| 26                                                  |          |      |          |          |
| 27                                                  |          |      |          |          |
| 28                                                  |          |      |          |          |
| 29                                                  |          |      |          |          |
| 30                                                  |          |      |          |          |
| 31                                                  |          |      |          |          |
| 32                                                  |          |      |          |          |
| 33                                                  |          |      |          |          |
| 34                                                  |          |      |          |          |
| 35                                                  |          |      |          |          |
| 36                                                  |          |      |          |          |
| 37                                                  |          |      |          |          |
| 38                                                  |          |      |          |          |

## EMERGENCY CARDIAC

| CARDIAC—Minimum 25, 50% clinically indicated, 5 abnormal |          |      |          |          |
|----------------------------------------------------------|----------|------|----------|----------|
|                                                          | Hosp No. | Date | Findings | Sign-off |
| 1                                                        |          |      |          |          |
| 2                                                        |          |      |          |          |
| 3                                                        |          |      |          |          |
| 4                                                        |          |      |          |          |
| 5                                                        |          |      |          |          |
| 6                                                        |          |      |          |          |
| 7                                                        |          |      |          |          |
| 8                                                        |          |      |          |          |
| 9                                                        |          |      |          |          |
| 10                                                       |          |      |          |          |
| 11                                                       |          |      |          |          |
| 12                                                       |          |      |          |          |

ED Sonographer will review each case and sign-off those that meet credentialing criteria.