## PARALLEL SESSION 6: POCUS

TIME: 15:45 - 17:15



16:00 - 16:15
Hocus POCUS: Demystifying the Clinical Exam with Ultrasound

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## **Abstract:**

The presentation aims to motivate anesthesiologists to acquire proficiency in pointof-care ultrasound (POCUS) and integrate it into their daily practice. We will emphasize the impact of POCUS on clinical outcomes through real life cases and also discuss the need for responsible interpretation of findings. Over the last two decades, the increasing portability and usability of ultrasound systems have led to widespread POCUS adoption across medical specialties. For anesthesiologists, particularly those in regional anesthesia and critical care, transitioning to POCUS proficiency aligns naturally with their ultrasound skills and knowledge of anatomy. POCUS is a powerful tool for the rapid evaluation of perioperative trauma patients, aiding in the timely identification of life-threatening injuries like pneumothorax, pulmonary embolism, hemoperitoneum, and cardiac tamponade. visualization aids in dynamic hemodynamic assessments, enabling informed decisions and improving patient outcomes. POCUS also has value in lower acuity settings, allowing assessment of baseline cardiac and respiratory function, visualization of gastric content prior to anesthesia induction, and fluid resuscitation guidance. There is concern that the rapid adoption of POCUS has outpaced the development of policies to prevent misuse or misdiagnosis. Proper training is imperative, and POCUS should be seen as an extension of the physical examination to answer yes-or-no clinical questions rather than a comprehensive diagnostic tool. Integrating POCUS into daily practice enhances diagnostic accuracy, expedites treatment, and improves patient outcomes. Mastering this skill represents the next frontier for anesthesiology training and, when combined with the physical exam, contributes to better patient care.