

Improving basic ultrasound training experience for junior doctors in obstetrics and gynaecology

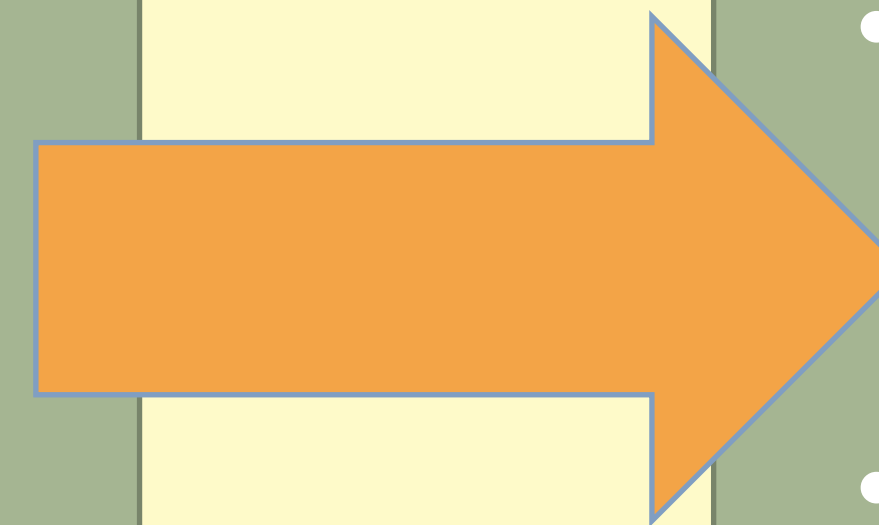
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Objective: To improve training experience of basic ultrasound for junior doctors in obstetrics and gynaecology by moving from ad-hoc training to a formal 'scan week'.

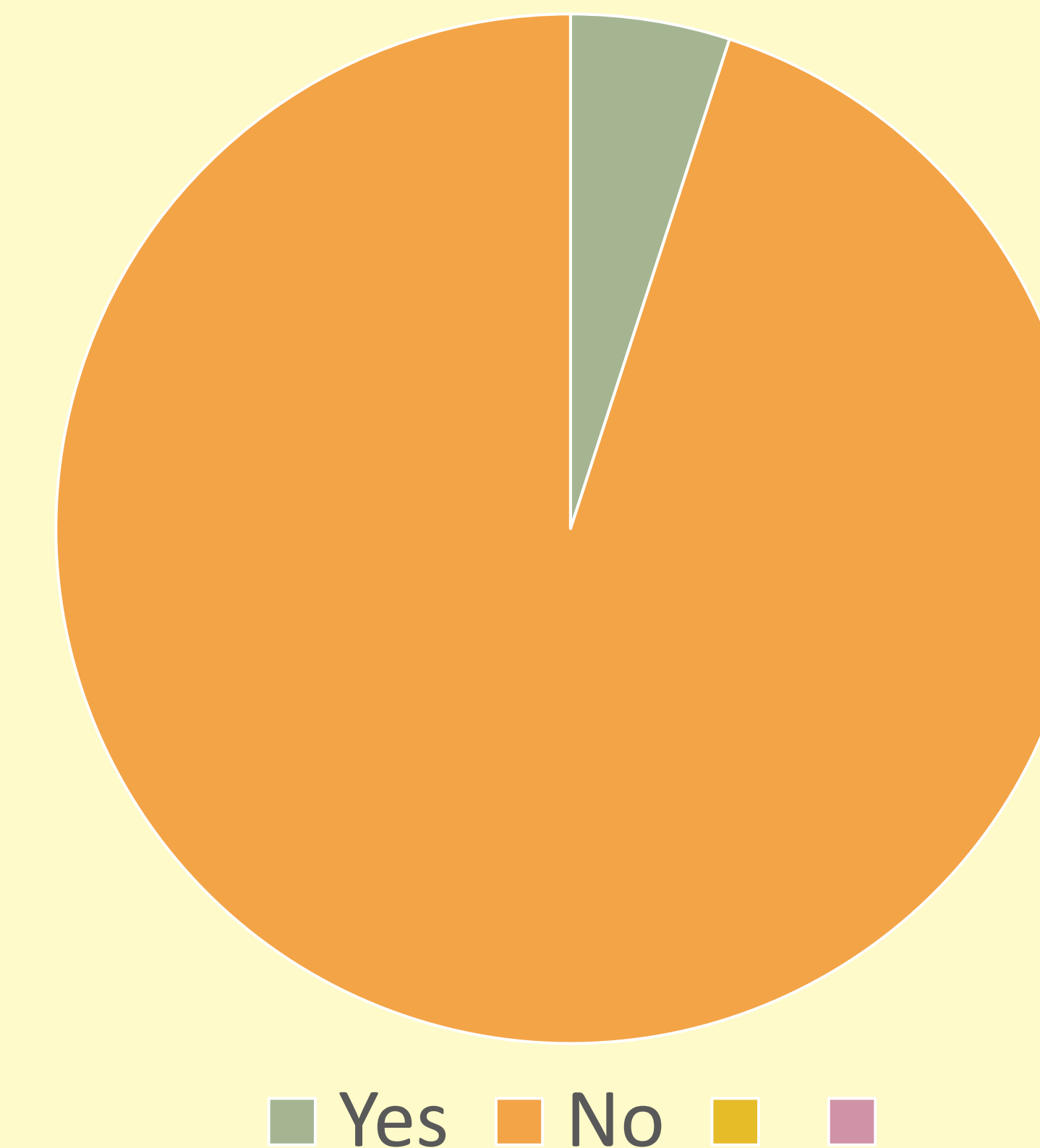
Design: A baseline survey was sent out to the junior doctor cohort assessing their confidence in:

- Operating/using the different functions of an ultrasound machine
- Establishing the presence of a live embryo/foetus
- Evaluating the presentation of a foetus in late pregnancy
- Estimating the age of a pregnancy on scan
- Evaluating the amount of amniotic fluid around the foetus
- Measuring cervical length



- Formal scan week introduced
- Participants apply for study leave for their allotted week to ensure that the time was protected.
- During the week they spent 4 mornings in the early pregnancy/emergency gynaecology unit
- 5 afternoons in the ultrasound screening unit
- 1 morning in the preterm birth clinic evaluating cervical length.
- They were then asked to repeat the survey to assess how their confidence had improved.

Do you feel your training provides you with enough scan experience?



- A small percentage of participants reported that they were able to gain adequate experience during their working hours but most reported that they used special interest sessions or came in during annual leave or 'zero days' to gain experience.
- The majority of participants did not feel confident estimating the age of a pregnancy, location of placenta, amount of amniotic fluid or checking for opening of the cervix.
- Following the scan week intervention there was a significant improvement in user confidence most notably in evaluating the age of pregnancy and measuring cervical length.

Conclusions:

Basic ultrasound is of paramount importance in modern obstetrics and gynaecology practice. Formalising and affording junior doctors protected time to achieve basic competencies allows them to perform reproducible scan on the labour ward or emergency departments. The benefits include equipping junior doctors with a vital tool to aid decision making which has the additional benefits of taking pressure off sonographers and scan departments and reducing unnecessary admissions and burden on trusts.