\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

AWARDEE REPORT FORM

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| NAME | | Prof Debs Patten | | |
| UNIVERSITY | | University of Sunderland | | |
| NAME OF AWARD | | **Symington Bequest Fund** | | |
| PURPOSE OF AWARD *conference/event attended/organised (full name) with city and dates.* | | | | |
| Attendance and oral presentation at the IFAA 2019 meeting in London August 9th to 11th | | | | |
| REPORT: What were your anticipated benefits? | | | | |
| The conference was excellent. I have been unable to attend recent conferences due to work and family commitments, so this was much anticipated and it didn’t disappoint. | | | | |
| COMMENTS: Describe your experience at the conference / lab visit / course / seminar/ event. | | | | |
| Overall the conference was excellent.  The ultrasound session brought together the key players in ultrasound curriculum development in the UK and the USA so many opportunities to share experiences and ideas and many opportunities to network.  There are several US universities who have made significant progress in developing their undergraduate ultrasound curricula. The US Universities who appear to have led the development of undergraduate ultrasound curricula are the University of South Carolina, California Irvine University, Wayne State University, Ohio State University and George Washington University. More recently in the UK there has been some progress in ultrasound curriculum development within medicine.  Notably Richard Hoppman from the University of South Carolina School of Medicine shared his extensive experiences of ultrasound curriculum development at his own institution alongside contributors from Brighton, Leeds and Sunderland in the UK. All contributors:   * described similar experiences of curriculum development in terms of challenges and barriers. * reported the introduction of ultrasound into anatomy teaching was successful with staff and students responding positively to the experience. * reported that with training and practice anatomy tutors can use ultrasound effectively to add clinical contextualisation to living anatomy teaching and to provide an early introduction to US when the anatomy to be highlighted is simple. * reported that sonographers or other experts must be involved in curriculum design and delivery of some sessions and that PoCUS Clinical examination should be delivered by clinical experts. * reported that there is value in allowing undergraduate students to scan their peers; scanning allows students to participate in active learning, haptic feedback obtained during scanning aids image orientation and interpretation and the clinical experience fosters enthusiasm for the session.   In the UK progress towards a vertically integrated US curriculum model is desirable, but even with the falling cost and miniaturisation of ultrasound technology, access to equipment and expertise means that curriculum development has remained slow.  Given the growing integration of PoCUS across the medical specialities worldwide, it seems likely that undergraduate medical students and other healthcare professionals will require training in PoCUS procedures, most notably those used in emergency medicine such as FAST scanning, Abdominal Aortic Aneurysm Screening and echocardiography. However, in order to progress with this agenda there are some important questions for educators and policy makers to consider. | | | | |
| REPORT: In relation to skills, what were the most important things you gained? *(does not apply to equipment grant.* For public engagement/outreach awards what did your audience gain and how did you evaluate success? | | | | |
| Skill development at such events is around communication, presentation skills and networking etc. | | | | |
| REPORT: How do you think you will put this learning experience into practice in the future? For public engagement/outreach awards how with the materials/knowledge generated by this activity be used in the future? | | | | |
| For me this provided an important opportunity to assess the landscape regarding the development of ultrasound curricula in the UK. I realise that in order for further progress to be made there are some broad questions for educators to consider:  **Is there a need for a standardised core curriculum for ultrasound, specific to the needs of each profession? If so,**   * Who should design and deliver the curriculum? * What lessons can we learn from our colleagues in the USA? * Who should deliver and accredit the training? GMC? BMUS? Other professional organisations? * Who should fund the training? Individual institutions (HEI/NHS depending on timing of training)? Government-funded?   **What should the standardised core curriculum content include?** Suggestions include:   * Knobology * Science & technology * Scanning technique and protocols * PoCUS Procedures * Governance & reporting issues * Health and safety of operators and persons being scanned * Assessments   N.B. notwithstanding student numbers, appropriate teaching, learning and assessment strategies must be employed; this has considerable resource implications (e.g. current cost for one portable handheld ultrasound machine is in the order of ~£8k, minimum specification) for progress to be made.  **Who should deliver the standardised core curriculum content?**   * Sonographers * Radiologists * Non-sonographers   The author welcomes comment from members of the Anatomical Society on the current debate surrounding the need for and provision of a standardised core ultrasound curriculum for undergraduate medical students. | | | | |
| Data Protection/GDPR: I consent to the data included in this submission being collected, processed and stored by the Anatomical Society. | | | | |
| YES | | | | |
| Graphical Images: If you include graphical images you must obtain consent from people appearing in any photos and confirm that you have consent. A consent statement from you must accompany each report if relevant. A short narrative should accompany the image. | | | | |
| N/A | | | | |
| Copyright: If you submit images you must either own the copyright to the image or have gained the explicit permission of the copyright holder for the image to be submitted as part of the report for upload to the Society’s website, Newsletter, social media and so forth. A copyright statement must accompany each report if relevant. | | | | |
| N/A | | | | |
| SIGNATURE | D. PATTEN | | DATE | 11th November 2019 |

*If submitted electronically, a type-written name is acceptable in place of a hand-written signature*

*File: AS-Award-Report-Form-BLANKCO-SEAL-date110216-Amended AT-070818*

*File: SB201819 Report Final no Sig -Patten*