

Training Standards for Thoracic Ultrasound (TUS)

Frequently Asked Questions

When will this training standard be incorporated into the Respiratory Specialty training Curriculum?

This will be included in the new curriculum, going live for new trainees from August 2020.

I am a specialty registrar currently trying to obtain focussed thoracic ultrasound / RCR level 1 competence – should I switch to the new training pathways and if so which one?

You should transfer over to the new training pathways and agree with your local thoracic ultrasound mentor what level of CiP entrustment on emergency / primary pathway is appropriate for you. This decision might be made based upon a combination of your logbook as well as direct observation.

Once I transfer onto one of the new pathways how will this be recognised in my eportfolio and at ARCP?

You should upload evidence of CiP entrustment to your eportfolio to allow your educational supervisor to make the appropriate judgement about competence in thoracic ultrasound in relation to that specific learning objective. This will allow for standard ARCP review of progress.

I cannot establish who my Thoracic Ultrasound Mentor is in my trust - how can I continue training in the new pathway if I can't get confirmation of CiP level?

The TUS mentor is a new role following publication of the training standard. It may take a short period of time for each trust to clarify the name of their TUS mentor so we would advise you continue to gain experience of TUS through supervised practice and continue to collect evidence of procedures (log book and saved images) until your local TUS mentor has been established.

I'm a TUS mentor / trainer and being pressured to sign off a CiP level because my trainee says they've "done enough scans" but I don't think they are yet at that level – what do I do?

If you don't feel someone cannot be entrusted at a particular level then you are not compelled to agree sign off purely on the basis of number of scans performed. The training standard makes it clear that the numbers are only a minimum and some learners will need to gain more experience / do further DOPS to gain a particular level of entrustment.

Does having RCR Focused Thoracic Ultrasound competency mean I transfer automatically to a certain point in the new pathways?

No - you should discuss your experience and log of procedures with your TUS mentor to agree your current level of CiP entrustment. Having focused thoracic ultrasound competence would normally suffice for entrustment at level 4 CiP Emergency pathway but you may be able to demonstrate learning and experience beyond this to Level 5 CiP Emergency or a certain point on the Primary pathway – it really depends on your individual experience and discussion with your TUS mentor.

Does having Level 1 RCR competency automatically mean I transfer to a certain point in the new pathways?

No - you should discuss your experience and log of procedures with your TUS mentor to agree your current level of CiP entrustment. Having RCR level 1 competence would normally suffice for entrustment at level 4 CiP Primary pathway but you may be able to demonstrate learning and experience beyond this to Level 5 CiP Primary or a certain point on the Advanced pathway – it really depends on your individual experience and discussion with your TUS mentor.

I am not the TUS mentor in my trust but want to continue training individuals in TUS – can I do this?

Yes and we would absolutely encourage this. Any individual entrusted at level 5 of a pathway is able to supervise, train and make entrustment decisions (up to and including CiP level 4 – independent practice) in the pathway they have CiP level 5 entrustment for (and indeed any earlier stage pathway). TUS mentors are the only individuals who can make CiP level 5 entrustment decisions.

I do not have any Advanced or Expert TUS operators in my trust but I think I should be level 5 CiP in Primary operator pathway so I can train my registrars – how do I get become entrusted at this level?

There will be at least one Advanced or Expert operator available regionally who should be able to provide this level of entrustment. Again, this might take time within each region to identify advanced/expert TUS operators.

I think the training standard should have more in it – how can I give feedback and when will this be reviewed?

Please send any email feedback to bts@brit-thoracic.org.uk . This will call be collated and reviewed alongside opinion from other stakeholders in a review that will be complete by mid-2021.

BTS

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