

Title: Emergency Department Ultrasound Criteria

Document Owner: Teresa Onken, Karyn Delgado	PI Team: N/A	Date Created: 10/01/2007
Approver(s): Denise Duschek, Karyn Delgado, Teresa Onken	Date Approved with no Changes: 12/18/2018	Date Approved: 12/18/2018 12/01/2007
Location: Saint Joseph Regional Medical Center (SJPMC)		Department: Centralized Credentials

Printed copies are for reference only. Please refer to the electronic copy for the latest version.

POLICY:

1. It is understood that ultrasound performed at the bedside by Emergency Physicians, within the Emergency Department, is intended to be used as an adjunct to the physical exam and is therefore a means of determining appropriate therapy and additional formal imaging in the department of Radiology. As such, it is not considered a billable procedure and is not performed under the control of or the responsibility of the Radiology Department or the Radiology Department's Physicians, but is solely the responsibility of the Emergency Physician. The need for formal fully documented imaging studies in the Department of Radiology is duly noted and will be performed on all patients as their condition/situation allows.
 - A. Education: M.D. or D.O.
 - B. Training: The applicant must be able to demonstrate successful completion of an approved residency program in Emergency Medicine
 - 1) AND: Verification that the physician has obtained Emergency Ultrasound training during Residency.
 - 2) OR: Verification that the physician has obtained Emergency Ultrasound training through one year ACGME/AOA fellowship training.
 - 3) OR: A formal course (16+ hours) covering primary applications.
 - 4) OR: A series of 1-day single-application courses.

References/Standards:

- Policy Origin Date: October 2007 (M)
- Review Date: December 2009 (M), December 2012 (M), December 2015 (M), December 2018 (M)
- Revised Date: July 2009 (M), October 2012 (M), September 2015 (M), September 2015 (P)
- Effective Date: December 2007 (M), September 2010 (P)
- Reviewed/Recommended By: Medical Executive Committee
- Policy 156