

A Year of PHRM POCUS in Focus

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Introduction

- Point of care ultrasound (POCUS) widely used in contemporary critical care, and is carried by many Helicopter Emergency Medical Systems (HEMS) teams¹.
- MedSTAR is the South Australian pre-hospital and retrieval service containing the General Service (adults and pre-hospital) and MedSTAR Kids (paediatric and neonate).
- Portable ultrasound machines have been carried since its inception in 2009. We currently carry the SonoSite iViz (FUJIFILM Sonosite, Tokyo, Japan)
- There is limited literature about the scope of US use in physician-led prehospital and retrieval services.



Aims

- Describe current use of POCUS in pre-hospital and inter-hospital (retrieval) missions.
- Identify factors associated with the use of ultrasound in these environments
- Identify if ultrasound use was associated with increased scene-time.
- Identify if quality of imaging from POCUS different between mission types

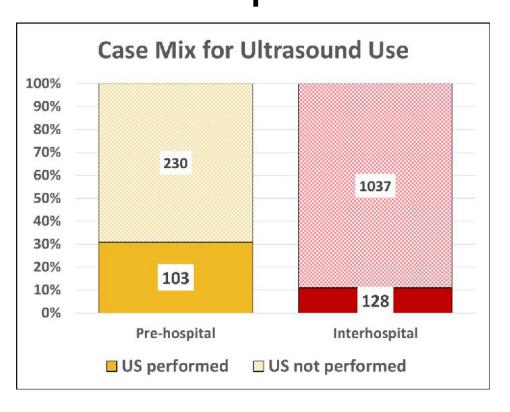
Methods

- Retrospective review of all missions attended by the MedSTAR General Service, excluding stand-downs.
- Data from online database AirMaestro (Avinet, Adelaide, Australia) with casenote review performed for missing data.
- Independent samples T- test for continuous variables and $\chi 2$ for categorical data, analysis in MS Excel.

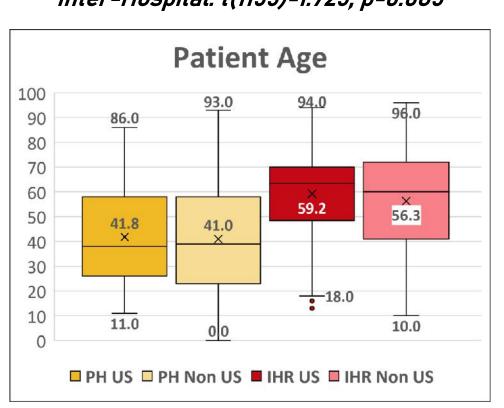
Results

Mission Profile and Demographics

Total 333 Pre-Hospital 1165 Inter-Hospital missions.



Age not associated with POCUS Pre-Hospital: t(323)=0.349, p=0.727. Inter-Hospital: t(1155)=1.725, p=0.085



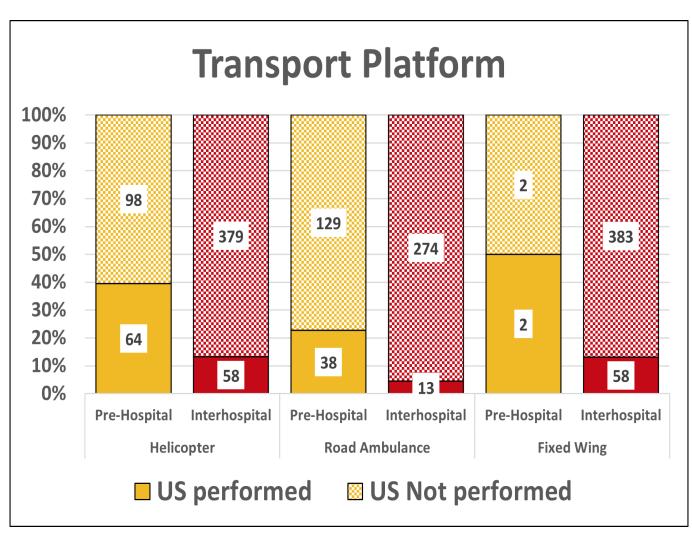
Gender not associated with POCUS

 $Pre-Hospital: \chi 2 (1, N = 333) = 0.23, p = 0.63$ Inter-Hospital.χ2(1, N = 1164) = 0.20, p = 0.65 Gender 90% 80% 418 70% 60% 50% 40% 78 166 79 30% 618 20% 10% **IHR US**

■ Male N Female

Transport Platform POCUS rate if aviation asset for transport.

Pre-Hospital: $\chi 2(2, N = 333) = 11.4$, p = 0.003. Inter-Hospital $\chi^2(2, N = 1165) = 16.6, p < 0.001$

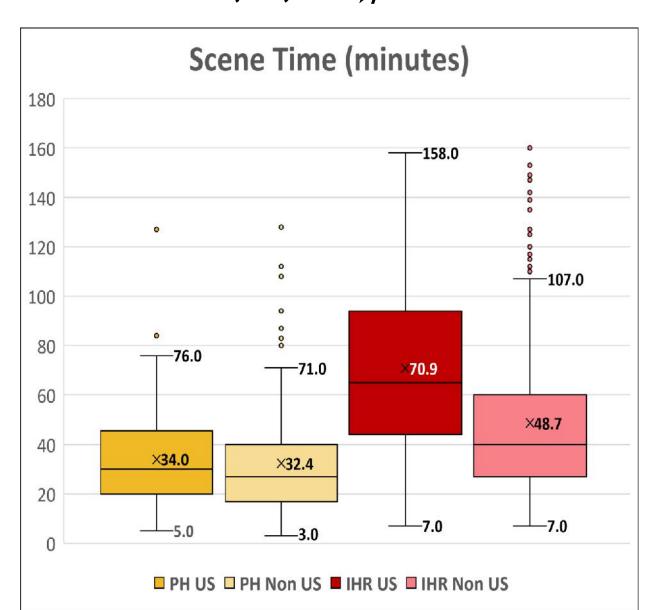


Scene Time

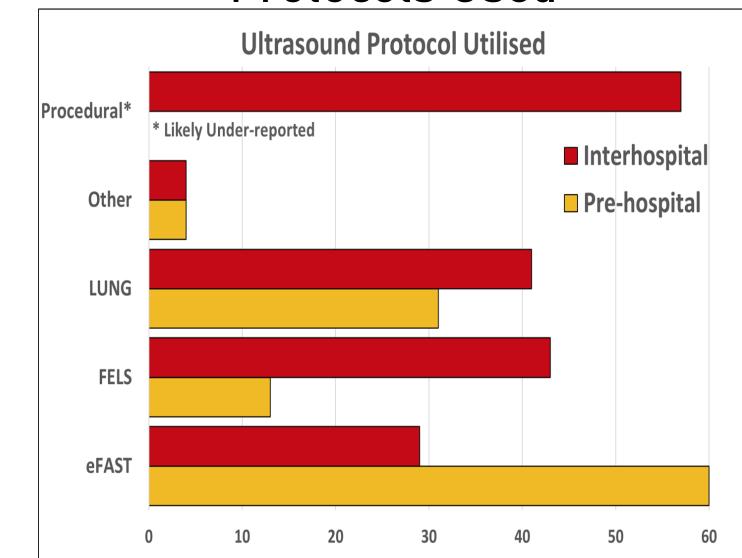
Pre-Hospital: Not significantly different t(279)=0.696, p=0.487

Inter-Hospital:

when US performed t(1292)=6.336, p<0.01

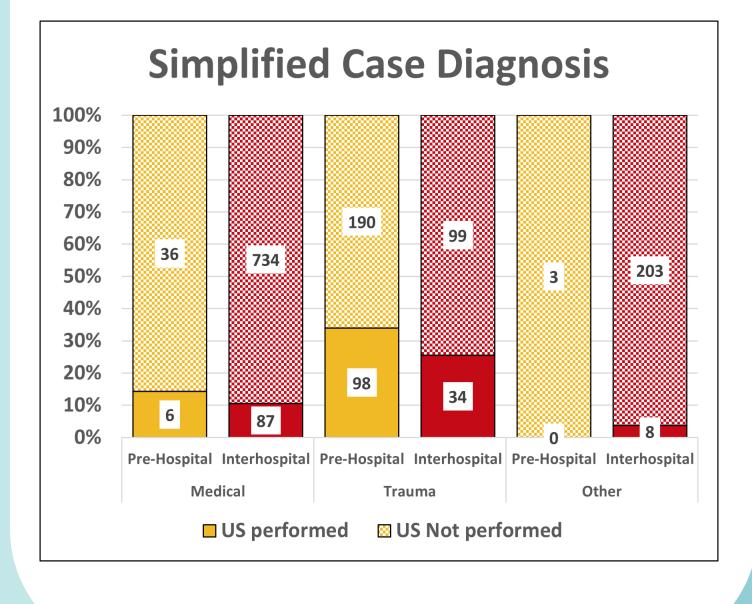


Protocols Used



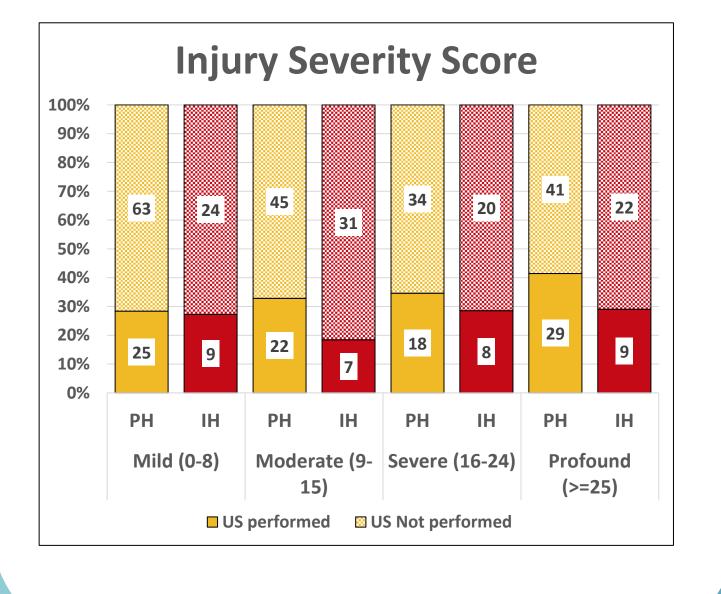
Patient Simplified Diagnosis

Pre-Hospital: ↑ use if trauma χ 2 (2, N = 333) = 8.02, p = 0.018 Inter-Hospital: \tauma, use if "Other" (surgical, obstetric or mental health) $\chi^2(4, N = 1165) = 42.39, p<0.001$

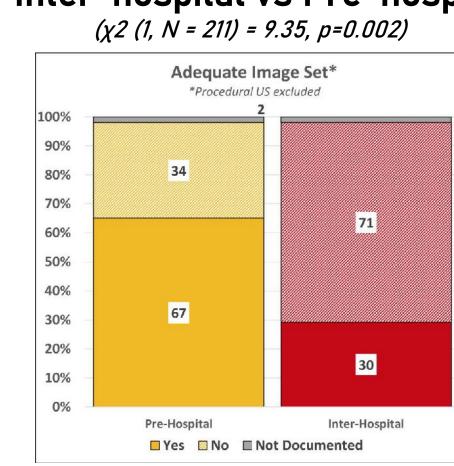


Traumatic Injury Severity (ISS) Pre-Hospital: No significant

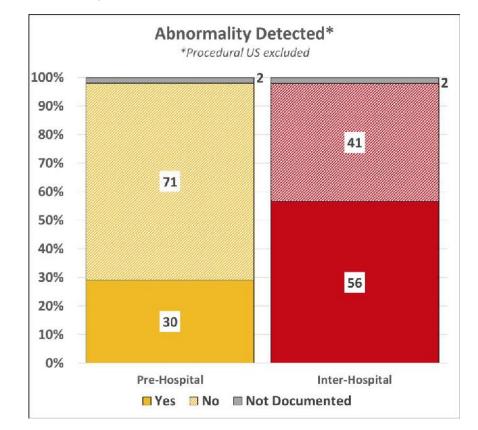
association $\chi^2(3, N = 277) = 3.00, p=0.39$ Inter-Hospital: No significant association χ^2 (3, N = 130) = 5.27, p=0.15



Adequacy of Diagnostic POCUS Inter-hospital vs Pre-hospital



Abnormality Detected Inter-hospital vs Pre-hospital $(\chi 2 (1, N = 211) = 7.13, p=0.007)$



Discussion

- These data reflect that POCUS is used more frequently when far from base (i.e. using aviation assets).
- Inter-hospital scene time when POCUS used likely reflects an increased procedural and diagnostic burden on the retrieval team.
- Minimal impact on pre-hospital scene time is similar to other studies²
- Self-entered data and retrospective review make assessment of adequacy and abnormality challenging to confirm

Conclusions

- Use of POCUS is NOT associated with prolonged scene time in pre-hospital missions.
- The severity of trauma is not associated with a change in the likelihood of POCUS use.
- POCUS can be embedded within a skilled system to provide both diagnostic and procedural assistance, particularly in remote areas.
- Further work is required to confirm adequacy of data sets and abnormalities described.

References

- 1. Hilbert-Carius, P., Struck, M.F., Rudolph, M. et al. Point-of-care ultrasound (POCUS) practices in the helicopter emergency medical services in Europe: results of an online survey. Scand J Trauma Resusc Emerg Med 29, 124 (2021). https://doi.org/10.1186/s13049-021-00933-y
- 2. Scharonow, M., Weilbach, C. Prehospital point-of-care emergency ultrasound: a cohort study. Scand J Trauma Resusc Emerg Med 26, 49 (2018). https://doi.org/10.1186/s13049-018-0519-9



