

# Certificate in Clinician Performed Ultrasound (CCPU)

**Syllabus** 

**Acute Scrotum** 

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# **Acute Scrotum Syllabus**

#### **Purpose**

This unit is designed to cover the theoretical and practical curriculum for the Acute Scrotum.

## **Prerequisites**

Learners should have completed the Applied Physics in Ultrasound unit.

# **Course Objectives**

On completing this unit, delegates should be able to:

- Demonstrate detailed understanding of the gross anatomical structure and surface anatomy of the relevant organ systems and the anatomical relationship to surrounding organs and structures.
- Attain proficiency in image optimisation in order to enable appropriate diagnosis
- Demonstrate optimisation and limitations of colour Doppler
- Diagnose an ischaemic testis
- Diagnose epididymoorchitis

#### **Course Content**

## Anatomy:

- Relational anatomy of adjacent organs and structures
- Identify mediastinum testis
- Identify epididymis head
- Blood supply capsular arteries, centripetal arteries, transmedial arteries
- Ultrasonic characteristics of a normal testis

# <u>Ultrasound Imaging Protocols, Skills:</u>

- Protocols for scrotal scanning grey scale and Doppler
- Colour Doppler settings
- Patient positioning

#### Pathology and Sonographic appearance of:

- Torsion
- Hydroceles
- Epididymitis
- Orchitis
- Simple Cysts

#### **Limitations and Pitfalls**

- Inability of ultrasound to exclude torsion particularly intermittent torsion, partial torsion.
- Masses other than simple cysts require formal evaluation.
- Testicular abnormalities thought due to infection should be reviewed after resolution to exclude underlying pathology.

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#### **Training**

- Recognised through attendance at an ASUM accredited Acute Scrotum course. (Please see the website for accredited providers)
- Evidence of the satisfactory completion of training course is required for unit award.

#### **Teaching Methodologies**

All courses accredited toward the CCPU will be conducted in the following manner:

- A pre-test shall be conducted at the commencement of the course which focuses learners on the main learning points
- Each course shall comprise at least two (2) hours of teaching time of which at least one (1) hour shall be practical teaching. Stated times do not include the physics, artefacts and basic image optimization which should be provided if delegates are new to ultrasound.
- Learners will receive reference material covering the course curriculum.
- The lectures presented should cover substantially the same material as the ones printed in this curriculum document.
- An appropriately qualified clinician will be involved the development and delivery of the course (they do not need to be present for the full duration of the course).
- The live scanning sessions for this unit shall include sufficient live patient models to ensure that
  each candidate has the opportunity to scan. Models will include normal subjects and patients with
  appropriate pathologies. Given that it may be difficult to find subjects with sufficient pathology, it
  is appropriate to include a practical 'image interpretation' session in which candidates must
  interpret images of the relevant pathology.
- A post-test will be conducted at the end of the course to ensure the required learning objectives are met.

#### **Assessments**

- Two (2) formative assessments of clinical skills, specificially related to the assessment of the acute scrotum
- One (1) summative assessment of clinical skills, specificially related to the assessment of the acute scrotum

All assessments are to be performed under the supervision of the Primary Clinical Supervisor using the competence assessment form supplied at the end of this document.

Please refer to section 8 of the <u>CCPU Regulations</u> for information regarding timing and exclusion of these assessments in the logbook.

#### **Logbook Requirements**

- Fifteen (15) Acute Scrotum scans, including three (3) positives
- A maximum of 50% paediatric cases (14 years and under) may be included in the logbook.
   Record in the column provided.
- All scans must be clinically indicated
- All cases must be compared with gold standard findings (such as comprehensive imaging, pathological findings or if these are unavailable then clinical course)
- All logbook cases must be signed off by a suitably qualified supervisor (see section 6 of the <u>CCPU</u>
   <u>Regulations</u>)
- At the discretion of the ASUM CCPU Certification Board candidates may be allowed an alternative mechanism to meet this practical requirement

**Please note:** All assessments and logbooks are required to be completed by the Primary Clinical supervisor as outlined in the CCPU regulations.

# **Minimal Imaging Sets**

The following are proposed as minimal imaging sets for focused ultrasound examinations for the CCPU units. It is understood that in many cases more images should be recorded to fully demonstrate the abnormality. In some cases the patient's condition will not allow the full set to be obtained (e.g. basic echo during CPR or positive free fluid in an unstable trauma patient), in which case the clinician should record whatever images are obtainable during the time available to adequately answer the clinical question without allowing the ultrasound examination to interfere with ongoing medical treatment. If local protocols recommend more images for a particular examination then these should be adhered to.

- Bilateral examination for comparison is essential.
- Longitudinal testes x 3 (lateral to medial)
- Transverse testes x 3 (superior to inferior)
- Colour Doppler of each side
- 'Spectacle' view of both testes grey scale
- 'Spectacle' view of both testes with Doppler box comparing flow in both sides.
- Grey scale epididymidis of each side
- Colour Doppler epididymis of each side
- Further views of scrotal thickness and hydrocele or cord abnormality may be indicated on a case by case basis.

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# ASUM Competence Assessment Form Acute Scrotum Ultrasound

Candidate: _					
Assessor:					
Date:					
Assessment type	e: Formative (feedback & teaching given during	assessment for	education) [		
, too oo o morne type	Summative (prompting allowed but teaching n		•		
	Cammative (prempting anowed but teaching in	or given during c	2000001110111)	ш	
To pass the sum	nmative assessment, the candidate must pass all	components list	ted <b>Prompted</b>	Fail	
Prepare patient		Competent	Trompteu	ı alı	
	Position				
	Consent / Explanation				
Prepare Enviro	nment		T		
	Lights dimmed if possible				
Daniel Marchin					
Prepare Machir					
	Correct position				
Turn machine o	on				
	•••				
Probe Selection	n				
	Can change transducer				
	Selects appropriate transducer for indication				
Pre-set selection					
Data autori	Select correct pre-set				
Data entry	Enter national / study details				
	Enter patient / study details				
Image Optimisation					
	ljusts machine to optimise image:				
,	Depth				
	Frequency				
	Focus (if required)				
	Gain / TGC				
			_		
Image Acquisition		Competent	Prompted	Fail	
Longitudinal Vi Technique	Aligns on long axis				
i somilqu <del>c</del>	Fans through in longitudinal plane				
	. and anough in longitudinal plant		1	1	

Identifies					
	Teste				
	Medistinum of teste				
	Scrotal skin				
	Epididymis head				
	Epididymis body (if seen)				
	Venous plexus				
	Hydrocoele (if present)				
Transverse View		<u> </u>			
Technique					
·	Aligns on transverse axis				
	Fans through in transverse plane				
	Performs comparison view				
	(grey and colour)				
Identifies	,	<u> </u>			
	Teste				
	Medistinum of teste				
	Scrotal skin				
	Epididymis head				
	Epididymis body (if seen)				
	Venous plexus				
	Spermatic cord				
	Hydrocoele (if present)				
	Trydrococie (ii present)		<u>l</u>		
Colour Doppler					
Technique					
	Adjusts Doppler gain and scale				
	Compares with contralateral side				
Identifies			<u>l</u>		
	Testicular blood flow				
	Epididymal blood flow				
	Epididymai blood now		<u>I</u>		
Image Interpretation					
Describes					
	Appearance of Torsion		1		
	Appearance of Epididymitis				
	Appearance of Orchitis				
	Appearance of Simple Cyst				
	Appearance of Hydrocoele				
	Appearance of Frydrococie		<u>l</u>		
Essential Clinical Knowledge Competent Prompted Fail					
Understands the aims of the Acute Scrotal Scan					
	"Rule in" for torsion				
	Does not exclude torsion		<u> </u>		
	Changes due to infection need follow up Other abnormalities need formal scan				

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Record Keeping		
Stores / prints appropriate images		
Writes appropriate report		
Documents focussed scan		
Machine Maintenance		
Cleans ultrasound probe appropriate	ely	
Stores machine and probes safely an correctly	nd	
For Formative Assessment Only: Feedback of particularly good areas:		
Agreed actions for development		
Examiner Signature:	andidate Signature:	
Examiner Name:	Candidate Name:	
Date:		

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