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#### Simulation-Based Resuscitative Transesophageal Echocardiography Training for Emergency Medicine Residents

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### Simulation-Based Resuscitative Transesophageal Echocardiography Training for **Emergency Medicine Residents**

August Felix, MD; Tania D. Strout, PhD, RN, Jessica Hathaway, MD; Andrew Fried, MD

### Introduction

- Resuscitative TEE is an emerging tool in the cardiac arrest tool-box, and can improve outcomes in OHCA.
  - Identifies reversible causes
  - Decreases time off chest
  - Evaluates compression efficacy
  - Improves assessment during pulse-checks
- Simulation training can prepare EM residents to obtain and interpret TEE views on a live patient.

## Methods

- Prospective cohort study
- 15 Senior EM residents
- 20 question pre-test
- 1 hour of TEE didactics
- 10 proctored TEE examinations on HeartWorks TEE Sim model
- 20 question post-test
- Standardized assessment by a credentialed Cardiac Anesthesiologist in OR

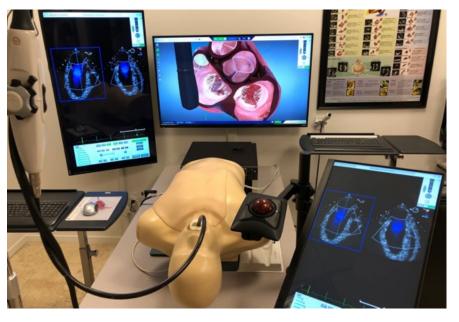
# Results

Simulation Assessment							
	Mean	STD	95% CI	Pearson's Skewness Statistic			
Pre-Test	11.07	+/-3.105	9.35 12.79	0.007			
Post-Test	19.40	+/-0.828	18.94 19.86	-2.17			
	p<0.0001						

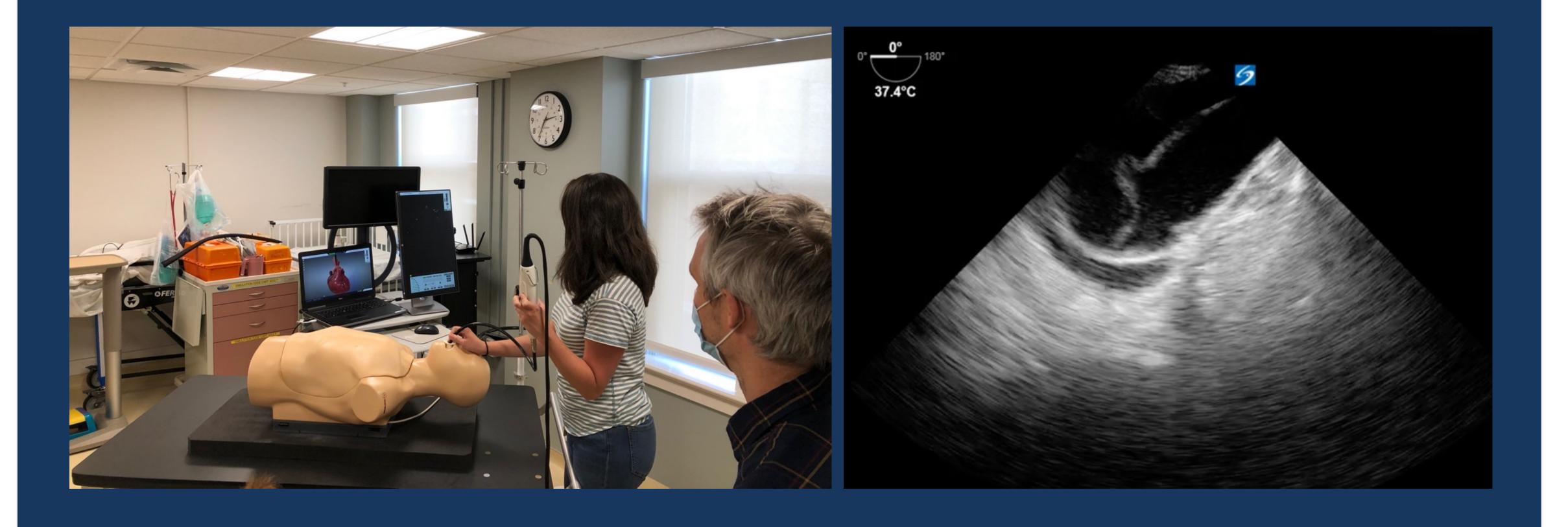
OR Assessment							
		Mean	SD	95% CI	Pearson's Skewness Statistic		
OR Probe Placemen	t Attempts	1.27	0.458	1.01 - 1.52	1.76		
Clinically Acceptable Views	ME4C	93.3%	6				
(% scoring ≥ 8/10	MELAX	93.3%	0				
for Overall Clarity, Angle, Structure 1,	AAOSAX	60.0%	0				
2, 3)	TGSAX	60.0%	0				
	TOTAL	76.7%	6				

### Discussion

- Clinically acceptable views, defined as score of 8/10 or greater, found in: ME 4C 93.3%, ME LAX 93.3%, Asc AO Sax 60%, and TG Sax 60%. Of the 60 total views obtained, 76.7% were acceptable views.
- Simulation training in resuscitative TEE is an effective method for preparing EM residents to obtain and interpret live TEE.



# Simulation training in resuscitative TEE is an effective method for preparing EM residents to obtain and interpret TEE imaging in a live patient.





SCAN ME



**4**....

SCAN to download the full poster, and SEE TEE **VIDEOS!!** 

# **Graphs and Figures**

/IEW	PROBE LOCATION	OMNIPLANE	TTE	
<b>ME</b> 4C	MID ESOPHAGUS	0°	APICAL 4	
ME .AX	MID ESOPHAGUS	120°	PLAX	
TG SAX	STOMACH	0°	PSAX	
	UPPER/MID ESOPHAGUS	0°		

robe placement:										
of attempts										
omplications?										
riteria	Angle	Overal	I Clari	ty	Structure 1	Structure 2	Structure	3		
core	0 = Out of range	0 = Poor			0 = Not visible	0 = Not visible	0 = Not visible			
	2 = Within range	1 = Acceptable 2 Excellent			1 = Visible with fair clarity	1 = Visible with fair clarity	-			
					2 = Visible with good clarity	2 = Visible with good clarity				
	ME 4C (w/o flexion)					UE Asc Ao SAX				
	Criteria	Score	(circl	e)		Criteria	Score (0-	2)		
	Angle (0-20)		:	2		Angle (0-20)	0 2			
	Structure 1 - LA	0	1	2		Structure 1 - SVC	0	1	2	
	Structure 2 - LV	0	1	2		Structure 2 - Asc Ao	0	1	2	
	Structure 3 - RV	0	1	2		Structure 3 - PA	0	1	2	
	Overall Clarity	0	1	2		Overall Clarity	0	1	2	
	Total (≥8 = acceptable)					Total (≥8 = acceptable)				
	ME LAX					TG SAX				
	Criteria	Score	(0-2)			Criteria	Score (0-	2)		
	Angle (110-130)	0 2		2		Angle (0-20)	0		2	
	Structure 1 - LA	0	1	2		Structure 1 - Ant Pap	0	1	2	
	Structure 2 - LV	0	1	2		Structure 2 - Post Pap	0	1	2	
	Structure 3 - AV	0	1	2		Structure 3 - LV	0	1	2	
	Overall Clarity	0	1	2		Overall Clarity	0	1	2	
	Total (≥8 = acceptable)					Total (≥8 = acceptable)				

