

Cross-specialty point-of-care ultrasound education in The University of Hong Kong

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To the Editor—We read with interest the article by Leung et al¹ that offers a glimpse of undergraduate point-of-care ultrasound (POCUS) education in Asia. In The University of Hong Kong, our POCUS curriculum has extended beyond basic theory and e-learning.²

Thanks to a generous donation, a pocket-sized POCUS device is now on loan solely to year 5 and 6 medical students during their specialty clerkship. The POCUS device can be easily linked to a smartphone or tablet, empowering students to practise their bedside scanning skills anytime and anywhere.

Teachers from different specialties synergise teaching efforts by focusing on relevant organ systems during respective rotations. For instance, the Department of Medicine and the Critical Care Medicine Unit jointly organise the POCUS Boot Camp that offers an intensive hands-on learning experience on basic echocardiography and lung ultrasound. The Department of Emergency Medicine covers the Extended Focused Assessment with Sonography in Trauma and abdominal aorta scan in small-group training, and the Department of Surgery introduces kidney, hepatobiliary and thyroid ultrasound.

Ultrasound is not only an essential skill future doctors can use to make better clinical decisions at the point of care, but can also help students visualise clinical signs, such as cardiac murmurs and pleural effusions, detected during physical examination.³ Given the inherited limitations of POCUS and limited practice experience, students are not expected to diagnose disease independently using POCUS and their scan findings need to be verified by qualified practitioners. However, we believe early ultrasound exposure lays a solid foundation for postgraduate training.

Author contributions

All authors contributed to the concept of the study, acquisition of data, analysis or interpretation of data, drafting of the letter, and critical revision of the letter for important intellectual content. All authors had full access to the data, contributed to the study, approved the final version for publication, and take responsibility for its accuracy and integrity.

Conflicts of interest

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References

1. Leung KY, Bala K, Cho JY, et al. Utility and challenges of ultrasound education for medical and allied health students in Asia. *Hong Kong Med J* 2024;30:75-9.
2. Coiffier B, Shen PC, Lee EY, et al. Introducing point-of-care ultrasound through structured multifaceted ultrasound module in the undergraduate medical curriculum at The University of Hong Kong. *Ultrasound* 2020;28:38-46.
3. Wong CK, Hai J, Chan KY, et al. Point-of-care ultrasound augments physical examination learning by undergraduate medical students. *Postgrad Med J* 2021;97:10-5.