The EPSC maintains, together with the Executive Bureau, Publications Committee and Safety Committee, the EFSUMB website. Thus, EPSC has been publishing since 2006 together with other authorities of EFSUMB a number of recommendations and guidelines http://www.efsumb.org/guidelines/guidelines01.asp of which “Minimum Training Recommendations for the Practice of Medical Ultrasound in Europe” has 15 chapters.

Many of the recommendations and guidelines are reflective of our general professional level but still have not become part of the daily routines of most teachers and trainers of ultrasound in Europe. In practice, however, only a few teachers use these guidelines. A bylaw regulating “Euroson Schools” was recently modified and thus allowed significant expansion of quality educational ultrasound programs into many countries. Euroson Schools have already been organised and carried to completion in Germany, England, France, Italy, Austria, Denmark, and Norway, as well as in Romania, Slovak and Czech Republic, Croatia, Slovenia and Latvia. This year we have had our first school in Greece and also one in Switzerland later this year...

We think that EPSC and even EFSUMB are currently facing decisive steps. Either we popularize learning initiatives across Europe so that they gradually become an integral part of education in each country, or remain a “paper tiger” or rather an “electronic tiger”, which hangs in the Internet, but otherwise is actually useless ... In our opinion, it is necessary to carry out the following steps in the near future:

Integration of European sonographic courses

In the same way that the “Ultraschall in der Medizin” became the basis of the “European Journal of Ultrasound,” the “Course Curriculum” of abdominal ultrasound courses OEGUM, DEGUM and SGUM http://www.efsumb.org/euroson-sch/es-home.asp should become the basis for the common European platform of ultrasound courses. The Harmonisation Commission of OEGUM, DEGUM and SGUM agreed to this curriculum in 2010 and decided that it would be supplemented and improved every 3 years. It is now possible to offer this curriculum to other European ultrasound societies and invite delegates of these societies to participate in and extend the harmonisation commission, to introduce this course curriculum in their countries and to actively take part in its continuous improvement. This will lay the foundation for a pan-European ultrasound educational system that will continue to expand and adapt to the needs of practices.

Each national society will thus be able to organize basic, advanced and final abdominal courses in the form of “Endorsed Courses” (EFSUMB BYLAW No. 11) in their national language. These courses should then be marked with the official logo, the “EFSUMB Endorsed Course” so that when the trainee pays a set fee for this accredited course, a certain amount of the fee (similar to the accreditation fees in Germany, Austria and Switzerland) will be received by a national ultrasound society and a small part by EFSUMB, thereby financially providing for further integration, harmonisation and development of European ultrasound education. In the same way that OEGUM, DEGUM and SGUM mutually recognize certain courses, it must be obvious that harmonised courses in other European countries would have mutual recognition. The common textbook for these courses “EFSUMB Course Book” is available on the internet http://www.efsumb.org/ecb/ecb-01.asp.

e-learning

E-learning is a buzz word, but also something we take very seriously and try to implement together with the Executive Bureau and Publications Committee of EFSUMB. Besides CEUS EUROSON-schools, whose lectures are being filmed, we plan also live demonstrations on patients, as well as live internet discussions with experts.
European Centres of Excellence

In addition to common courses, we need to do more to integrate ultrasound training in Europe. Every beginner learns to investigate not only within the courses, but also during a systematic practical training. And no matter whether you’ve confirmed that you’ve completed the required number of investigations under didactically experienced teachers, additional controlling of your investigations in the department where you practice is rarely possible. It is therefore essential to define and establish learning “European Centres of Excellence in Ultrasound” (ECEUS), able to ensure quality in practical training. The ECEUS should be defined by a minimum frequency of annual investigations as well as a guarantee of expert quality at the centre. In practice, the ECEUS could be gradually recognised by local societies, medical chambers, or state authorities; in short, those who are responsible for overseeing the teaching of ultrasound in the country. Even though we know it will not be easy to introduce this educational system in Europe, the ramifications will be meaningful and extensive. Courses in countries that accede to this model will be recognised in all other countries based on this model. Ultrasound training will gradually become so transparent that each candidate will be able to attend courses and practical training in all countries of the model.

Teaching ultrasound at the University

Ultrasound diagnosis has become a modern stethoscope for each clinician. The function of the stethoscope is to equip a medical student with a device for learning during the first clinical semester. Although both the U.S. and Europe have included ultrasound diagnostics in the teaching curriculum of medical students at universities, it has been implemented with timid steps. Medical students at European universities first learn the function of ultrasound devices at the time of studying for the state exams. Occasionally, students may attempt to take an ultrasound probe into their own hands. But the training of ultrasound as an integral part of the curriculum is needed. Students are not taught how to make detailed ultrasound diagnosis in various diseases until it is time for postgraduate training. But the point of the use of the ultrasound device should be as obvious as a stethoscope. It could thus be considerably more enjoyable teaching anatomy and physiology with this device so that the student would not have to learn on corpses and frog legs, but rather with their living classmates using ultrasonic devices. Students should already have learned to use the device during their studies of knobbyology and be motivated to use this technique throughout their studies and even more intensively during their practice.

Instead of leaving the advancement of ultrasound teaching to specialist societies we need to promote practical and theoretical ultrasound education at the university level, preferably in support of interdisciplinary ultrasound societies and their Federation EFSUMB.

Ultrasound would thus be able to be, a few million years after the bat and dolphin, quite common place for man as well.

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