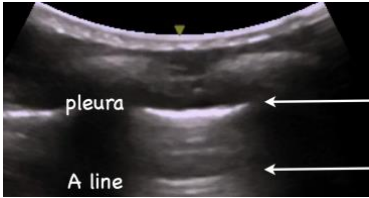


LUNG

Patient in any position for all images. Start with a superficial view, between ribs, with probe exactly perpendicular to Pleural line. Assess Pleura, then increase depth and gain to assess Lung Fields.



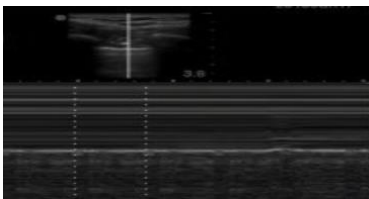
Pleura Assessment with A-Line
(Reverberation artefact in normal aerated lung)

- 1. Rt Anterior Superior Chest**
 - Labelled **RIGHT ANT SUP**
 - Longitudinal view
 - Demonstration of pleural sliding
 - Demonstration of lung field (most sensitive for pneumothorax assessment)



Lung Field Assessment with B-Line
(Reflection artefact, <3 B-Lines is normal)

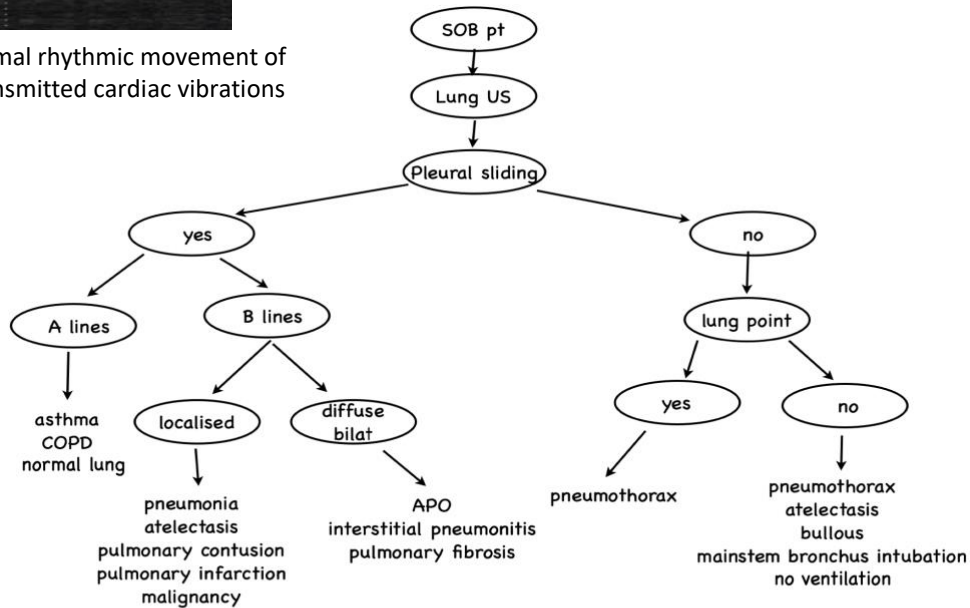
- 2. Rt Anterior Inferior Chest**
 - Labelled **RIGHT ANT INF**
- 3. Rt Lateral Superior Chest**
 - Labelled **RIGHT LAT SUP**



Lung Pulse- normal rhythmic movement of Pleura from transmitted cardiac vibrations

- 4. Rt Lateral Inferior Chest**
 - Labelled **RIGHT LAT INF**
 - + assess lung-diaphragm interface (more sensitive for dependent lung pathology)

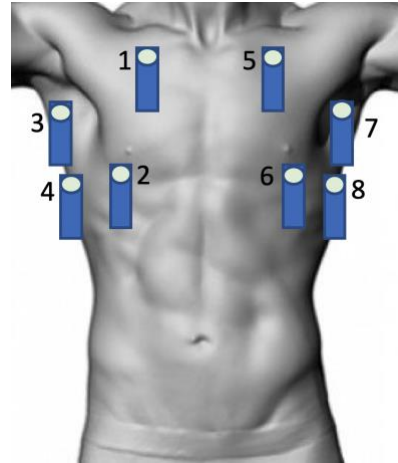
5. To 8. Same as Above on Left Chest *LEFT



Pneumonia- Thickened irregular pleura, Shred Sign, Hepatisation, Air Bronchograms, Pleural Effusion.
 Pneumothorax- No pleural sliding. Barcode Sign on M-Mode. Lung Point. Static A-Lines. Absent B Lines.
 APO- Diffuse bilateral or confluent B-Lines. Pleural Effusions.
 Pleural Effusion- Hypoechoic space deep to pleural line. Often associated with collapsed/ consolidated floating lung
 Pleural Abnormalities- Consider benign/ malignant tumours, inflammatory or local infective pathology

Image Sets

- Minimum 10 Video Loops
- (8x Lung Field- 4 each side,
- 2x Pleural Assessment – 1 each side)
- 10-14 Video Loops +/- 2 Images
- Optional extra views including:
- Posterior Inferior and Superior Views
- Focussed views to highlight Pathology



Machine Settings

- CURVILINEAR Probe
- LUNG setting for all images

Documentation – Pocus LUNG

- Views: Adequate/ Inadequate
- Findings: NAD / Abnormal
- Pleura- NAD/ Abnormal (no pleural sliding/ lung point/ barcode sign on M-Mode/ thickened/ irregular)
- Lung Fields- NAD/ Abnormal (B-Lines / Effusion/ Hepatisation/ Shred Sign/ Other- and describe)

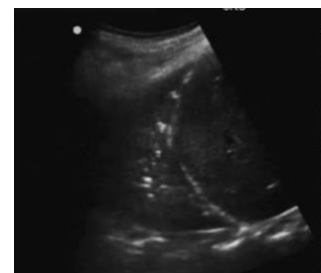
Positive Findings (always consider clinical context)



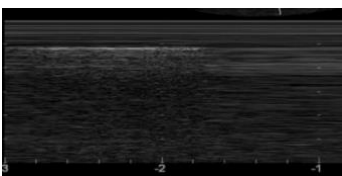
Shred sign + thickened pleura



Diffuse B-Lines in APO



Hepatisation



Lung Point in PTx on M-Mode



Large Pleural Effusion with collapsed lung



Thickened irregular pleura with pleural fluid and B-lines