

Review of: "Development of a Curriculum for Emergency Physicians to Teach Transesophageal Echocardiography for Cardiac Arrests: A Kern Six-Step Model"

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Potential competing interests: No potential competing interests to declare.

The author has reported on curriculum for EPs to teach TEE for cardiac arrest. I think it is well written, covering every important issue based on various guidelines. To further improve this paper, I would like to make several comments.

The author may describe the relationship of this curriculum to other programs, such as training in the OR for learning basic manipulations for visualizing these basic views. The latter would be essential as well because there are a number of tips and pitfalls potentially related to the occurrence of complications such as injuries to the esophagus and stomach, while these are difficult to learn in the simulation system.

As one of the TEE examiners, I would like to stress the importance of artifact, which may lead to misdiagnosis. Since TEE in emergency situations would be the only diagnostic modality, misleading diagnoses can make the prognosis worse.

Personally, I would include the descending aorta view in the program because a type B dissection cannot be detected in these three views but may lead to a retrograde type A aortic dissection when perfusion via the femoral artery is initiated. This view also clarifies the presence of hemothorax as a cause of extreme hypovolemia.

Also, visualization of the pulmonary arteries is important. Together with acute myocardial infarction and aortic dissection, three acute syndromes necessitating some immediate intervention are covered.

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