

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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Cardiac arrest is a challenging event. Many factors may significantly affect the success or failure of resuscitation maneuvers, and among them, the efficacy of CPR and the timely identification of potentially reversible causes has been recognized as the most important. In the last few years, Transesophageal Echocardiography (TEE) has been proposed as a useful tool for improving CPR and facilitating the recognition of some underlying causes in the setting of a cardiac arrest. However, performing TEE is not a usual skill among emergency physicians, and teaching them the fundamentals of this tool is an ineludible step for implementing the use of TEE during resuscitation efforts.

Dr. Swerdllow, in this article, proposes a structured approach for developing a curriculum constructed to teach focused transesophageal echocardiography for out-of-hospital cardiac arrests to emergency physicians. The six-step approach, developed following the Kern model, is well-detailed and fully explained in its basic principles. However, I feel the part regarding the implementation of this program is incomplete and lacks some relevant details. What is the time framework estimated for completing the teaching process? How could the practical part of the curriculum be effectively implemented? What is the minimal technology needed to implement the practice sessions? How can we assess the effective achievement of practical skills needed to effectively and safely implement this tool in the real world? Moreover, which professional expertise (e.g., cardiologists, anesthesiologists, emergency physicians) should be involved in the teaching and assessing of competencies process? Finally, is this teaching program cost-effective?

These are open questions that remain after reading this paper and that should be addressed before implementing this teaching curriculum. I acknowledge Dr. Swerdllow for giving the impulse to start this program. Many steps are still missing before the "rubber can meet the road."