

The Society of Point of Care Ultrasound

The Society of Point of Care Ultrasound is the only national organization committed to clinical ultrasound. SPOCUS has become a leader by creating national policy, generalist guidelines, and ultrasound training so that every clinician can utilize sonography to provide the best patient care. SPOCUS can support your goal of developing or improving the ultrasound presence in your institution by providing advice on curriculum integration, faculty training, and access to free text books and web based didactics.

A robust ultrasound presence can be created for students by providing personal ultrasound machines for \$65 per student per month.

SPOCUS can even connect you to a program mentor to establish a Student Ultrasound Interest Section (SUIS) as a student extracurricular activity. SPOCUS can also provide advice with billing, credentialing, leadership, quality assurance, risk management and other administrative tasks, as well as help you formalize your current ultrasound practice presence so you can assume a leadership position in your organization.

SPOCUS Membership

- Consulting and advice on machine purchase
- Mentorship for Students Ultrasound Interest Section (SUIS)
- Free remote peer training for faculty members, Train the Trainer Program
- "Clinical Ultrasound Director Leadership Packet," containing all the paperwork needed to formalize your practice ultrasound presence
- Generalist Clinical Ultrasound Guidelines
- Discounts to CME courses
- Society leadership and committee positions
- Publishing opportunities

SPOCUS.org

SPOCUS CME Workshop

If your organization is interested in hosting a hands on workshop at their next CME event, SPOCUS has a cadre of instructors with amazing teaching experience. Our team can custom design and plan a workshop that will get your members on the road to POCUS competency.

- Cardiac- Basic and Advanced
- Procedures/Needle Placement
- DVT
- Renal
- Lung Ultrasound
- Musculoskeletal Ultrasound
- Gall Bladder
- Bowel- Obstruction, Appendicitis, Pyloric Stenosis, Intussusception
- FAST
- Regional Anesthesia
- AAA
- Soft Tissue
- Gyn and First Trimester Pregnancy
- Thyroid
- Testicular
- Instrumentation and Physics

SPOCUS Membership

- Critical Care- Volume Assessment, Stroke Volume, Sepsis, Resuscitation
- Primary Care
- Pediatrics
- Faculty, Teaching and Medical Education
- Emergency Medicine
- Orthopedics
- Trauma

Point of Care Ultrasound for Regional Anesthesia- The Ear



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SPOCUS.org

UltrasoundSociety.org

Ultrasound has changed the way we approach pain management. With the ability to visualize peripheral nerves, ultrasound can safely target the superficial cervical plexus to anesthetize from the ear to the clavicle. One can specifically target the Greater Auricular Nerve which provides innervation to much of the auricle.

Created by Patrick Bafuma, EMinFocus.com
and Nicolette LaRosa

POCUS Conquers:
Local at the Lobule (aka Ear
Lac. analgesia)

Ideal for: Emergency Medicine,
 Plastic Surgery, Urgent Care

Ultrasonic Solution:

The torn ear lobe or the embedded earring. How do you anesthetize that?!? Landmark based field blocks provide spottier coverage than a low-cost cellular plan – not to mention multiple injections. The solution? A success rate of 100% in identifying the greater auricular nerve using POCUS with a block success rate of near 100% with a single injection. Effective volumes as low as 1 mL can be used vs classic descriptions using 15-20 mL of local anesthetic. Advance your skills to other areas of the Superficial Cervical Plexus to include anesthesia for clavicle fractures and central lines.

Level of difficulty:
 Ultrasound Guided Auricular
 Blocks:



SlideShare.com



HighlandUltrasound.com



Andrew Herring, MD



Figure 1. (A) A 30-year-old man with a right ear lobe abscess undergoing dynamic injection with an ultrasound-guided block of the greater auricular nerve. (B) Drainage of ear abscess with routine post drainage during the procedure. (C) Post-drainage and drainage of the right ear abscess, with small loop drain placed.

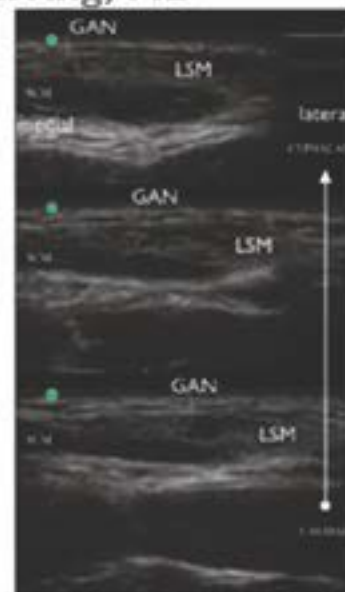
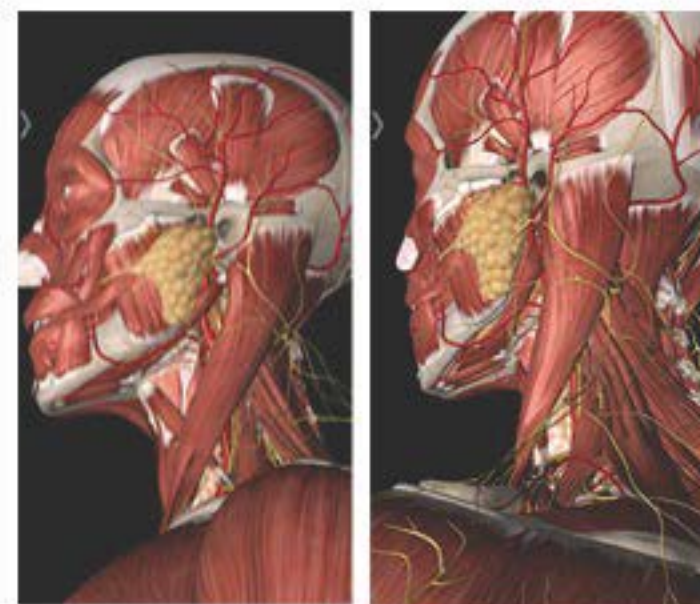


Figure 2. Survey ultrasound scan of the greater auricular nerve (small hypoechoic structure to the left of the screen when scanned caudally to cephalad). The levator scapulae muscle (LSM) and sternocleidomastoid muscle (SCM) are labeled for identification.

Thaller et al. recently described a UGANB in an other-



Introduction to Bedside Ultrasound Vol I&II,
 By Mallin and Dawson
 UltrasoundPodCast.com
 UltrasoundLeadershipAcademy.com



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