

Ultrasound Program Management: A Comprehensive Resource for Administrating Point-of-Care, Emergency, and Clinical Ultrasound, 2nd Edition

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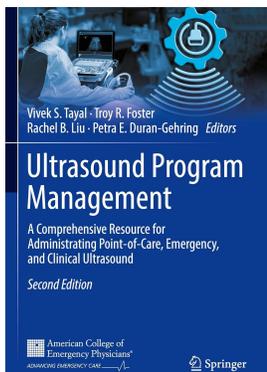
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HOW TO CITE: Yang JJ, Recidoro AM. Ultrasound Program Management: A Comprehensive Resource for Administrating Point-of-Care, Emergency, and Clinical Ultrasound, 2nd Edition. *Fam Med.* 2026;0(0):1–2. doi: [10.22454/FamMed.2026.139556](https://doi.org/10.22454/FamMed.2026.139556)

FIRST PUBLISHED: March 16, 2026

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Book Title: Ultrasound Program Management: A Comprehensive Resource for Administrating Point-of-Care, Emergency, and Clinical Ultrasound, 2nd Edition

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Publication Details: Springer, 2025, 673 pp., \$139.00 ebook

Point-of-care ultrasound (POCUS) use and acceptance has expanded significantly over the last 25 years. POCUS is now an Accreditation Council for Graduate Medical Education (ACGME) requirement for residency in several specialties, including anesthesiology, urology, emergency medicine, and family medicine.^{1–4} As family physicians increasingly integrate POCUS into clinical practice and resident education, deliberate programmatic infrastructure becomes a necessity. *Ultrasound Program Management* addresses this growing demand with a thoughtful and organized resource. The editors are leaders in the field of emergency ultrasound education and administration. Their collective experience spans academic program development, credentialing, billing, and clinical integration of POCUS. This expertise gives the volume both authority and practical relevance. The authors of each chapter are from a wide range of specialties and practice settings, spanning large academic centers to rural and global health systems. This expertise allows this resource to be particularly relevant to family medicine educators who may be tasked with building sustainable ultrasound curricula within resource-variable practice settings.

The book is divided into seven parts that provide a playbook for developing a POCUS program: leadership, education, machines and equipment, workflow, program politics, special communities, and closing words. The parts are divided into 35 concise but comprehensive chapters, which read similarly to review articles and make them accessible for busy clinicians. The structured chapters begin with learning objectives and end with actionable key recommendations. The early chapters establish the rationale for the ultrasound director's role and outline strategies for gaining institutional buy-in from key stakeholders and hospital leadership. They also provide examples of building interdepartmental relationships and reviewing ultrasound education programs and modalities. The middle chapters help describe necessary equipment, systems, workflow processes, certifications, credentialing, privileging, reimbursements, and accreditation. The later chapters in the most recent edition address expansion of POCUS outside of emergency medicine programs to other specialties, clinical settings, and the future of POCUS.

A notable strength of the book is its granular attention to program logistics as well as its diligence to address many common pitfalls in program development stages. The book provides specific responses to many problems people face, such as clinician hesitation, with literature showing that the most common reason for litigation is failure to perform the exam.⁵ The sections on credentialing, image archiving, and billing compliance help provide background knowledge, providing contextual definitions and templates that can be adapted to a variety of practice settings. The book also provides helpful historical and medical political context for adoption and expansion of POCUS in emergency medicine, which will be useful for any specialty looking to expand the acceptance and use of POCUS. The overview of medical education by stages of training and social media such as Free Open-Access Medical Education is a comprehensive review of the current educational landscape.

Despite its thoroughness, the text still has limitations. Not surprisingly, the bias remains heavily weighted toward emergency medicine as leaders in POCUS. The text also could explore models of POCUS leadership in other specialties, such as family medicine, hospitalist, critical care, and anesthesiology, and how these compare to models proposed by emergency medicine. Further work can be done to assess the interdisciplinary success of programs, measuring and comparing outcome metrics, financial data, and lessons learned. Additionally, future editions could be strengthened by including literature emphasizing the importance of cost-effectiveness and measurable impact in POCUS adoption, such as changing referral patterns, patient safety, and patient access.

In the broader context of the literature, *Ultrasound Program Management* fills a critical gap by addressing the administrative, educational, and operational infrastructure necessary to make a POCUS program sustainable. This text is a timely and comprehensive guide, readily adaptable for community-based teaching programs that may lack experienced ultrasound champions or multispecialty institutional support and buy-in. While more examples of successful family medicine POCUS clinical and educational programs would strengthen its relevance to family medicine education, this volume provides some practical considerations that could be readily implemented in family medicine residency clinics. *Ultrasound Program Management* succeeds in its goal of being a definitive reference for administrators and clinicians tasked with guiding POCUS from concept to clinical and educational reality. For family physician educators, this book offers a timely road map for doing so systematically and sustainably—an invaluable contribution to the evolving landscape of POCUS education in family medicine training programs.

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