

Ultrasound for Primary Care

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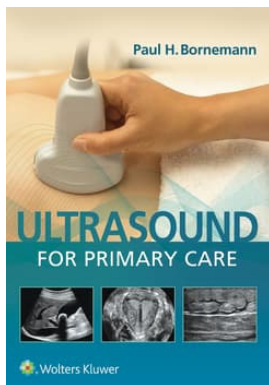
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In 2016, an American Academy of Family Physicians (AAFP) curriculum guideline dubbed point-of-care ultrasound (POCUS) the greatest advancement in bedside diagnostics since the advent of the stethoscope.¹ The integration of POCUS into primary care practice, however, represents a shift in how primary care clinicians approach diagnosis and treatment.^{2,3} Historically associated with hospital-based specialties, ultrasound has become increasingly recognized as a valuable tool in the outpatient setting, offering enhanced diagnostic accuracy, real-time clinical decision-making, and procedural planning and guidance^{2,3}—all at lower cumulative health care costs⁴ and with the potential to redress health inequities.⁵

The use of ultrasound in primary care has been driven by a variety of factors, including advances in portable technology,^{3,6} increasing evidence of clinical utility,⁷ and a broader push toward diagnostic autonomy in outpatient settings. Motivated by the growing momentum behind POCUS and a notable gap in resources specific to outpatient primary care settings, Paul Bornemann, MD, a past member of the Board of Governors for the American Institute of Ultrasound in Medicine and founding chair of the AAFP POCUS member interest group, responds by providing a comprehensive, clinically grounded resource tailored specifically to the needs of primary care providers. With backgrounds in family medicine, internal medicine, pediatrics, emergency medicine, obstetrics and gynecology, sports medicine, and orthopedics, Bornemann and contributors seek to bridge the gap between emerging ultrasound applications and the practical realities of primary care medicine.

Ultrasound for Primary Care is divided into four parts, which are further organized into systems, sections, and chapters. The introduction begins with an easily accessible explanation of the basic physics of ultrasonography, followed by a succinct description of the three most commonly used transducers (curvilinear, linear, phased array), various ultrasound modes, functions, knobology, conventions, terminology, and common artifacts seen on ultrasound. The start of the book is introductory in nature and is best suited for learners with limited POCUS experience. In juxtaposition, the second chapter sets the theme for the remainder of the book and delves into the nuances of integrating POCUS into primary care practice, with specific descriptions of competency, credentialing, reimbursement, billing, and practice considerations—all of which are topics best suited for leadership or providers who are keenly interested in becoming institutional POCUS champions.

Part II, “Answering Clinical Questions,” is the most substantive portion of the text and is organized into four systems by anatomical distribution (head and neck, thorax, abdomen and pelvis, muscles/bones/soft tissue), subsections by organ, and multiple embedded chapters covering common clinical presentations and pathology often seen in the primary care setting. Much like other POCUS pedagogical resources available today, each chapter provides a succinct literature review, instructions for how to perform the applicable scan, and images/diagrams of relevant anatomy, normal appearance, and pathology. However, this resource sets itself apart by integrating clinical recommendations with levels of evidence, flow diagrams for patient management, pearls, pitfalls, and applicable billing information. Akin to previous portions of the book, the final

part provides high-yield clinical, technical, and system-level education and guidance regarding procedural applications of ultrasound in the outpatient primary care setting in addition to inpatient procedures.

Ultrasound for Primary Care is a thoughtfully constructed and highly practical resource that succeeds in translating the growing body of POCUS knowledge into the realities of modern primary care. As a reader, the text strikes an effective balance between foundational instruction and clinically actionable guidance, making it approachable for novice sonographers while still offering value to more experienced clinicians seeking to refine technique or champion ultrasound integration within their institutions. Its clear anatomical illustrations and instructions, along with the inclusion of billing considerations, make it a particularly relevant resource.

For educators in family medicine, this book offers a structured, systems-based approach that can be readily adapted into training programs, fostering both technical proficiency and clinical reasoning. Its emphasis on common primary care presentations ensures direct applicability to daily practice, while the integration of pearls, pitfalls, and workflow considerations reflects an awareness of real-world constraints. In our digital age, the print format may limit interactivity and accessibility in clinical environments, and the absence of paired instructional videos or dynamic probe-position demonstrations may slow skill acquisition for visual or hands-on learners; therefore, the publisher may consider an interactive internet-based format or paired digital resources in future editions. Nonetheless, the first-of-its-kind focus specifically on primary care, comprehensiveness, and affordability position this text as an impactful resource that stands to inform individual practice and advance the broader adoption of POCUS within primary care.

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