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Clinical echography: What? who? what for?

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Dear Editor:

From the last decade of last century, more and more handy, compact and cheap ultrasound machines have been developed. In turn, the use of the clinical ultrasound has increased as support for the diagnosis and therapeutic answer and not only as a complementary test [1].

What is clinical echography? It is so called the ultrasound exploration carried out at the bedside of the patient. It is also called bedside echography, tracking echography or ultrasound or point of care ultrasound. It is considered the stethoscope of the XXI century [2].

Who carries out the clinical echography? The attending physician of the patient carries out the exploration with an ultrasound device that is placed next to the patient's bed. The training to perform it is not complex, there are even learning programs settled for medical students [3].

What for is the clinical echography carried out? With the aim of answering specific questions asked by the assistant physician, the answers must always be binary: yes or no [4]:

Does the patient present pleural effusion? Yes or No;

Does the patient have a pneumothorax? Yes or No;

Is there free liquid in the abdominal cavity? Yes or No.

Does clinical echography substitute the one carried out by sonographer specialists in their department? No, the clinical echography is quick, and is only performed for answering specific questions.

Which are the advantages of the clinical echography? It is performed in an expedite way, it is not necessary to transfer the patient to another department, it is reproducible in any moment, its results are obtained immediately, it avoids exposition to radiations and, it is of low cost.

Its main disadvantage is that results depend on the experience of the operator [5].

This method should be introduced in health systems to improve quality of care in medical facilities from all levels of attention.

Notes

From the editor
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Referencias

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