

<b>Abdomen (AB) Tasks</b>	
<b>Anatomy and physiology</b>	<b>30%</b>
<i>Normal anatomy and physiology</i>	
Evaluate anatomic structures of the liver	
Evaluate anatomic structures of the biliary system	
Evaluate anatomic structures of the pancreas	
Evaluate anatomic structures of the spleen	
Evaluate anatomic structures of the urinary system (i.e., kidneys, ureters, bladder)	
Evaluate anatomic structures of the peritoneal cavity	
Evaluate anatomic structures of the retroperitoneum (e.g., great vessels and branches)	
Evaluate anatomic structures of the scrotum and contents (e.g., testes, epididymides)	
Evaluate anatomic structures of the penis	
Evaluate anatomic structures of the prostate	
Evaluate anatomic structures of the glands of the neck (i.e., thyroid, parathyroid, salivary)	
Evaluate anatomic structures of the other superficial structures (e.g., subcutaneous)	
<i>Perfusion and function</i>	
Evaluate liver for function and/or perfusion	
Evaluate biliary system for function and/or perfusion	
Evaluate urinary system (i.e., kidneys, ureters, bladder) for function and/or perfusion	
Evaluate retroperitoneum (e.g., great vessels and branches) for function and/or perfusion	
Evaluate scrotum and contents (i.e., testes, epididymides) for function and/or perfusion	
Evaluate glands of the neck (i.e., thyroid, parathyroid, salivary) for function and/or perfusion	
<b>Pathology</b>	<b>40%</b>
<i>Abnormal perfusion and function</i>	
Evaluate urinary system (i.e., kidneys, ureters, bladder) for vascular abnormalities (e.g., renal artery stenosis)	
Evaluate retroperitoneum (e.g., great vessels and branches) for abnormalities (e.g., aneurysm, dissection, thrombus)	
Evaluate liver for transjugular intrahepatic portovenous shunt (TIPS)	
Evaluate liver for vascular abnormalities (e.g., Budd-Chiari, arteriovenous fistula, portal vein thrombosis, and collateralization)	
Evaluate scrotum and contents (e.g., testes, epididymides) for vascular abnormalities (e.g., torsion)	
Evaluate spleen for vascular abnormalities (e.g., infarction)	
Evaluate vascularity of the neck structures for abnormalities	
<i>Abnormal physiology</i>	
Evaluate adrenal glands for masses and/or trauma	
Evaluate chest for fluid or masses	
Evaluate for biliary infection	
Evaluate for biliary masses (e.g., primary tumors, metastatic disease, etc.)	
Evaluate for biliary obstruction	
Evaluate for diffuse hepatocellular disease (e.g., hepatitis, fatty infiltration, cirrhosis, etc.)	
Evaluate for hepatic masses (e.g., neoplasm, abscess, cyst, etc.)	
Evaluate for diffuse splenic disease (e.g., splenomegaly, parenchymal changes, etc.)	
Evaluate for splenic masses	
Evaluate for pancreatic infection	
Evaluate for pancreatic masses	
Evaluate for pancreatic obstruction	
Evaluate urinary system (i.e., kidneys, ureters, bladder) for masses	

Evaluate urinary system (i.e., kidneys, ureters, bladder) for obstruction
Evaluate urinary system (i.e., kidneys, ureters, bladder) for parenchymal disease
Evaluate peritoneal cavity for the presence of fluid
Evaluate joints for effusion
Evaluate superficial structures for foreign body
Evaluate superficial structures for infection
Evaluate superficial structures for masses
Evaluate breast for infection or abscess
Evaluate gastrointestinal (GI) system for herniation
Evaluate gastrointestinal (GI) system for inflammation (e.g., appendicitis, colitis)
Evaluate gastrointestinal (GI) system for obstruction (e.g., pyloric stenosis, intussusception)
Evaluate glands of the neck (i.e., thyroid, parathyroid, salivary) for diffuse parenchymal disease
Evaluate glands of the neck (i.e., thyroid, parathyroid, salivary) for inflammation
Evaluate glands of the neck (i.e., thyroid, parathyroid, salivary) for masses
Evaluate prostate for parenchymal disease or masses (e.g., benign prostatic hypertrophy)
Evaluate retroperitoneum for masses (e.g., fibrosis, lymphadenopathy)
Evaluate scrotum and contents (e.g., testes, epididymides) for fluid
Evaluate scrotum and contents (e.g., testes, epididymides) for herniation
Evaluate scrotum and contents (e.g., testes, epididymides) for masses
Evaluate scrotum and contents (e.g., testes, epididymides) for infection/inflammatory disease
Evaluate scrotum and contents (e.g., testes, epididymides) for parenchymal disease
<b><i>Congenital anomalies</i></b>
Recognize the presence of anatomic variants/congenital anomalies of the liver
Recognize the presence of anatomic variants/congenital anomalies of the biliary system
Recognize the presence of anatomic variants/congenital anomalies of the pancreas
Recognize the presence of anatomic variants/congenital anomalies of the spleen
Recognize the presence of anatomic variants/congenital anomalies of the urinary system (i.e., kidneys, ureters, bladder)
Recognize the presence of anatomic variants/congenital anomalies of the retroperitoneum (e.g., great vessels and branches)
Recognize the presence of anatomic variants/congenital anomalies of the scrotum and contents (e.g., testes, epididymides)
Recognize the presence of anatomic variants/congenital anomalies of the glands of the neck (i.e., thyroid, parathyroid, salivary)
Recognize the presence of anatomic variants/congenital anomalies of the other superficial structures (e.g., subcutaneous)
Recognize the presence of anatomic variants/congenital anomalies of the infant hip
<b><i>Postoperative (surgically corrected) anatomy</i></b>
Evaluate organ transplant for complications
Evaluate the post surgical neck for abnormalities (e.g., recurrent disease, lymphadenopathy)
<b>Patient care 3%</b>
<b><i>Infection control</i></b>
Maintain infection control
Practice universal precautions and good hygiene
Use sterile technique when preparing for procedure
<b>Integration of data 8%</b>
<b><i>Incorporate outside data (Clinical assessment, H &amp; P, Lab values)</i></b>

Assess indications for examination requested
Assess relevant clinical lab values for examination being performed
Assess relevant patient signs and symptoms for examination being performed
Correlate ultrasound findings with other imaging modalities
<b>Protocols 3%</b>
<i>Clinical standards and guidelines</i>
Inform patient or referring practitioner of examination preparations (e.g., fasting for biliary imaging)
Modify the examination based on sonographic findings
Use multiple patient positions and planes to evaluate anatomic structures
<i>Measurement techniques</i>
Measurement techniques
Obtain measurements of anatomic structures
Obtain measurements of blood flow velocities
<b>Physics 10%</b>
<i>Artifacts</i>
Assess artifacts of gray-scale imaging
Assess artifacts of color Doppler imaging
Assess artifacts of spectral Doppler imaging
<i>Imaging instruments</i>
Record images on a picture archiving and communication system (PACS)
Use 2-D, real-time, gray-scale imaging (B-mode)
Use color flow imaging
Use power Doppler
Use pulsed wave Doppler
Use harmonic imaging
Use curvilinear array transducer
Use linear array transducer
Use phased array transducer
<b>Treatment 3%</b>
<i>Sonographer role in procedures</i>
Assist in needle biopsy procedures
Obtain consent form and patient lab results prior to a procedure
Assist during and/or provide ultrasound guidance for procedures
<b>Other 3%</b>
<i>Managing medical emergencies</i>
Recognize findings that require immediate action
<i>Traumatic injury</i>
Identify abnormalities related to traumatic events
Identify urinary system (i.e., kidneys, ureters, bladder) abnormalities related to traumatic events
Identify scrotal and content (e.g., testes, epididymides) abnormalities related to traumatic events
Identify splenic abnormalities related to traumatic events