POLICY STATEMENT

Approved April 2023

Emergency Department Ultrasound Privilege and Practice

Revised April 2023 with current title

Originally approved June 2017 titled "Advocacy for Emergency Department Ultrasound Privilege and Practice" ACEP believes hospitals should consider emergency ultrasound as standard care in emergency medicine across emergency departments in the United States. ACEP additionally recognizes that the scope and utilization of ultrasound has greatly increased to where it is now an essential tool to the emergency physician.

Emergency ultrasound enables emergency physicians to diagnose, resuscitate, safely perform procedures, monitor, and treat at the bedside.

The American Medical Association approved a policy in 1998 that acknowledges the diverse use and application of ultrasound in medical practice and that ultrasound is within the scope of practice of appropriately trained physicians. Initial training and credentialing has become standardized among emergency medicine residency programs, with training criteria as defined by ACEP ultrasound guidelines. As such, emergency ultrasound is within the scope of practice for an emergency physician (as defined by the ACEP policies and ACEP ultrasound guidelines) and should not require any additional training or certification to become credentialed within a hospital or hospital system.

Hospitals and hospital systems should not engage in the use of any exclusive institution-wide imaging contracts that restrict the use of emergency ultrasound. Hospitals should also consider ultrasound machines to be standard equipment for the emergency department and should provide and maintain dedicated ultrasound machines as they would for any other essential equipment. As with other healthcare services, emergency ultrasound should be reimbursed at fair market value, and the billing of these studies should not be restricted by exclusive imaging contracts on an institutional level.