http://ccm.anest.ufl.edu/education/ultrasound

Universi
Ultraso

Self Learni

A lines, B lines, comet tails are all due to artifacts from various real structures

Name:

B lines located only on one side of the thoracic exam is suggestive of pathology on that side of the chest, specifically pneumothorax. Other entities can be pulmonary contusion or other focal abnormalities

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With A profile, diagnosis in the respiratory failure patient that must be considered are pulmonary embolism, pneumonia (posterior), COPD, or asthma

Reviewer Comments

B lines in anterior chest both sides of the thoracic exam is highly suspicious of pulmonary edema as the diagnosis. The etiologies are extensive

Blebs, pneumonia, and other pathologies that make the lung 'stick' to the chest wall can all cause decreased or absent lung sliding. Mainstem intubation or no breathing can also cause absence of lung sliding

1. The ultrasound basis for use of lung profiles are:

A. Harmonic imaging techniques
B. Gain setting techniques
C. Artifacts
D. Crystal deflections

2. An A/B profile with lung sliding is most suggestive of what?

A. Pulmonary edema
B. Pleural effusion
C. Pneumothorax
D. Pneumonia

3. An A profile in a patient with respiratory failure should prompt what study next?

A. Lower extremity vascular studies for DVT and suspicion for pulmonary embolism
B. Posterior lung exam in search of consolidation for atelectasis or pneumonia
C. Cardiac examination in search of heart failure
D. Both A and B

4. B profile is suggestive of:

A. Pulmonary edema
B. Pneumothorax
C. Pleural effusions bilaterally
D. Pulmonary embolism

5. T or F: Absent lung sliding always means pneumothorax

A. True
B. False