

**CME INTIMATION**

**ONE AND A HALF DAY FETAL**

**ECHOCARDIOGRAPHY COURSE WITH HANDS-ON**

**(17<sup>th</sup> & 18<sup>th</sup> DECEMBER 2022)**

**ORGANISED BY:**

**CHIKITSA DIAGNOSTIC & ULTRASOUND TRAINING CENTRE**

**CONVENER :**

**DR. ANIRUDH BADADE, MD (Radiodiagnosis),**

Hon Sonologist Nowrosjee Wadia Maternity Hospital, Mumbai,  
Hon asst Radiologist, Rajawadi Municipal Hospital, Ghatkopar, Mumbai,  
Faculty in many national and international conferences

**Venue : CHIKITSA DIAGNOSTIC & ULTRASOUND TRAINING CENTRE, 6,7 Mahinder Chambers,  
Opposite Duke's Factory, W.T Patil Marg, Chembur(e), Mumbai, 400071**

## Introduction

Fetal echocardiography is increasingly being used by Radiologists, Obstetricians and Pediatric cardiologists for antenatal diagnosis of fetal cardiac anomalies in clinical practice worldwide. Currently, there is a great demand for the knowledge of fetal echocardiography. This course on fetal echocardiography aims to give the participants the opportunity to learn the sonoanatomy, the ultrasound scanning technique, and the abnormalities under expert radiology guidance.

## Course Structure

The course will be run for 1 1/2 days. It will focus on the examination technique, normal cardiac sonoanatomy and detection of the principal cardiac pathologies. It will consist of lectures with hands on scanning in small groups under experienced supervision.

## Learning Objectives

At the completion of this course, participants should be able to describe the techniques required to perform a diagnostic fetal echocardiography examination. They should also be able to describe the normal ultrasound findings and findings in commonly encountered pathologies. Following the hands-on sessions, participants should be able to adjust machine setting to optimize images, and demonstrate the various views required in a fetal echocardiography examination.

## Hands on content

- Supervised practical handling of the probe and the US machine settings.
- Supervised identification of cardiac sonoanatomy.
- Supervised acquisition of images of normal cardiac structures.

## Number of Delegates

Number of Participants: Maximum 8 participants.

## Target Audience

This hands-on fetal echocardiography course is designed to meet the needs of sonologists who are well versed in obstetric ultrasound scanning and want to add fetal echocardiography to their obstetric ultrasound skills and ultrasound practice.

## Registration

This course is recommended for Radiologists and Obstetricians who are interested in incorporating fetal echocardiography into their clinical practice.

# PROGRAM FOR ONE AND A HALF DAY FETAL ECHOCARDIOGRAPHY COURSE

## DAY 1

02.30 - 02.50	INTRODUCTION	20 MIN
02.50 - 03.05	INDICATIONS AND TIMING OF FETAL ECHOCARDIOGRAPHY	15 MIN
03.05 - 03.20	ULTRASOUND MACHINE SETTINGS FOR FETAL ECHOCARDIOGRAPHY	15 MIN
03.20 - 04.50	SONO-ANATOMY OF THE HEART : BASIC VIEWS IN FETAL ECHOCARDIOGRAPHY, NORMAL FETAL ECHOCARDIOGRAPHIC FINDINGS, CHAMBER IDENTIFICATION, AND NORMAL VARIATIONS	90 MIN
04.50 - 05.05	TEA BREAK	15 MIN

## DAY 2

09.30 - 10.45	BASICS OF DOPPLER, M-MODE, SPECTRAL AND COLOR DOPPLER IN FETAL ECHOCARDIOGRAPHY	75 MIN
10.45 - 11.00	REVISION OF TECHNIQUE PRIOR TO HANDS-ON	15 MIN
11.00 - 02.00	HANDS-ON	180 MIN
02.00 - 02.45	LUNCH	45 MIN
02.45 - 03.30	PATHOLOGIES – PART ONE	45 MIN
03.30 - 04.15	PATHOLOGIES – PART ONE	45 MIN
04.15 - 04.45	FETAL CONGESTIVE CARDIAC FAILURE	30 MIN
04.45 - 05.05	FIRST TRIMESTER ECHOCARDIOGRAPHY	15 MIN
05.05 - 05.35	FETAL ARRHYTHMIAS	30 MIN
	TOTAL TIME	10 HRS 40 MIN

The program is subject to change.

Course Fee Structure: Rs. 20000 [+ GST(liable to change)] per delegate inclusive of registration and course material.

ENTRY LIMITED TO FIRST EIGHT DELEGATES ONLY

**Contact Details:**

Manager: Mrs. Vijaya (O): 9987115680

Email: chikitsa1995@gmail.com

Ph No. +91 22 25201455, +91 22 25201456

**Dr. Anirudh Badade:**

(M) 9324911001

(O) 9769907755

For assistance regarding hotel accomodation contact Mrs. Vijaya

**REGISTRATION FORM**

Name :- \_\_\_\_\_

Age :- \_\_\_\_\_

Sex :- \_\_\_\_\_

Degree :- \_\_\_\_\_

Institution :- \_\_\_\_\_

Experience in Ultrasound :- \_\_\_\_\_

Ph. No. :- \_\_\_\_\_

Email :- \_\_\_\_\_

DD no. / Cash / Money transfer :-