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Original article

Transesophageal Echocardiography Utilization in High-Volume Liver Transplantation Centers in the United States

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Objective

Transesophageal echocardiography (TEE) during liver transplantation (LT) has been shown to be helpful in managing fluid therapy, monitoring myocardial function, and identifying intraoperative LT complications. The present study sought to investigate the current utilization of TEE by anesthesiologists during LT as well as issues of training and credentialing in this monitoring modality.

Design

A survey distributed by electronic mail.

Setting

LT centers in the United States in which more than 50 liver transplantation procedures

were performed annually.

Participants

Survey respondents were contact persons in the LT divisions of the anesthesiology department of selected centers.

Interventions

Data collection only.

Measurement and Main Results

A total of 40 high-volume LT centers were identified, and survey responses were received from 30 of those. Among 217 anesthesiologists, 86% performed TEE in some or all LT cases. Most users performed a limited-scope examination, although some performed a comprehensive TEE examination during LT. Most users acquired their TEE skills informally. Only 12% of users were board certified to perform TEE, and only 1 center reported having a policy related to credentialing requirements for TEE.

Conclusions

There is high utilization of intraoperative TEE by anesthesiologists to perform limited-scope examinations during LT cases. Training to perform such examinations is mostly informal, and credentialing processes are lacking. An opportunity exists to establish guidelines, training programs, and standards for quality assurance in the use of this valuable monitoring modality.

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Key Words

transesophageal echocardiography; liver transplantation; cardiovascular monitoring; credentialing; training

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