



British Association of  
Perinatal Medicine



## Application Statements for NeoFOCUS Executive Committee 2024

### Instructions

We have received the following application statements from members wishing to join the NeoFOCUS Executive Committee. Please read the statements and vote using the online form by **11:59pm, 19<sup>th</sup> June 2024**.

A voting link will be emailed to members. If you have not received this please email [bapm@rcpch.ac.uk](mailto:bapm@rcpch.ac.uk).

All NeoFOCUS members are entitled to vote. Votes will be counted by BAPM Office staff and will be treated completely confidentially.

## **Nursing / ANNP Representative (6 applications)**

### **Miss Samantha Dixon ANNP**

I am an ANNP at Saint Marys in Manchester, caring for infants with medical and surgical needs. I have a special interest in infants with surgical conditions, particularly Congenital Diaphragmatic Hernia (CDH). Routine targeted ECHOs for infants with CDH and management of associated pulmonary hypertension appropriately is an area I am keen to develop further in our unit. After reviewing data over the last 8 years, there appears to be a deficiency in physiological based management of pulmonary hypertension, with historic practice of starting support without identifying the initial problem. I believe that functional ECHOs will help the team identify, monitor and manage the condition more effectively and efficiently, improving outcomes in the long-term. I am also interested in central line insertion and management. As an ANNP it is within my job role to be inserting PICC lines and umbilical lines, with one of the biggest frustrations being line adjustment practice with the increasing number of x-rays and radiation. I am attending a vascular access course in June 2024, which will enable me to insert lines using ultrasound guidance, with the aim to develop the skill to then check the line tip position. As a unit we have the equipment to provide POCUS care for our infants, which is sadly not utilised enough. I believe that this interest group will give us the platform to create a standardised, evidence-based approach to practice, caring for these infants and their families with their health and safety at the front of our minds.

### **Mrs Gemma Finch Senior Advanced Neonatal Nurse Practitioner**

I am an ANNP working on a level 3 NICU in Surrey, where the use of ECHO has long been established, and with an increasing adoption of the use of POCUS by the wider team, via in house training to enhance the clinical care we provide to babies and their families. I have personally thoroughly enjoyed developing my skills in this area, including CrUSS, Lung USS, assessment of line positions (longline and umbilical lines), and more recently have attended a 2 day hands on course for echocardiography, for which I hope to further build my skills, knowledge and experience. I strongly believe in the benefits of ECHO and POCUS, for promoting timely individualised intervention, guiding patient care, and building staff knowledge and understanding. However, I am aware that as a new or developing skill to many there is always a greater need for streamlined education and training to help promote knowledge acquisition and build safe effective practice. Furthermore, to provide up to date evidence and information to those who are more experienced within the field. With this in mind I am keen to be a part of the NeoFocus-UK Committee, having reviewed the committee terms of reference and the objectives for the next phase of work as I feel these strongly align with my own experiences and goals in this area of practice, and is something I feel passionately about.

### **Mr Alistair Hill Advanced Neonatal Nurse Practitioner**

I am an ANNP who undertakes both Cranial USS and currently in the process of training to undertake Lung POCUS via an IMPROVE online module. As an ANNP I have experience liaising with the both the Imaging Team and Consultant Team to produce a Learning Pack for the Trainee and ANNP cohorts. Similarly, Lung POCUS will be a new investigatory modality on the Level 3 Unit where I work and therefore I am particularly keen to explore the challenges of governance, positive educational experience, and most important safe outcomes for our patient population. I would relish the opportunity to support the development of an overarching set of guidelines to support the professional development of both my ANNP and Medical colleagues alike. Thank you.

**Mr Fergal O' Malley****Advanced Neonatal Nurse Practitioner**

The use of ultrasound guidance for assessment of various aspects of neonatal care has reached an exciting milestone and I would be honoured to be considered for the position of ANNP representative. My interest in the heart stretches back almost three decades when I was a staff nurse and then educator at the Royal Brompton Hospital in 1995. I first used ultrasound as a Paediatric Advanced Nurse Practitioner 20 years ago in the transport environment where ultrasound removed the guesswork when attempting femoral and neck access. I moved to the neonatal speciality in 2012 and have since used ultrasound (on a few occasions!) for femoral lines and for long lines. I attended the Introduction to Neonatologist Performed Echocardiography when working in Qatar in 2019 and attended the LAUNCH course in 2020 in Paris and was inspired by information we could obtain about lung pathologies.

ANNPs are a constant presence on most neonatal units and their inclusion as part of this group serves to ensure ongoing support for all levels of staff as we roll out this exciting new training initiative. I am a passionate teacher and advocate for the use of non-invasive imaging and my enthusiasm for ultrasound is well established. What is clear is that expertise can be achieved and now we get to navigate the best structure to ensure competence is assessed and verified within a robust governance structure.

Thank you for considering my application.

**Mrs Kelly Rutherford****ANNP**

My interest in POCUS started from a project I led on our unit to improve umbilical line placement, trying to get it right first time! My driving force was to reduce the amount of x-rays & reduce the time to 'hands off the baby' to achieve the golden hour. I made some improvements but not enough which led me to look at ultrasound for line tip confirmation. Since then here at Southampton we have set up a small POCUS group & are keen to get accredited. I have recently signed up for the CACTUS lung ultrasound accreditation course as this is also an area I am interested in. This again can reduce the number x-rays performed & offers more real time information. We have produced guidelines locally for lung & line ultrasound but as highlighted in the NeoFOCUS webinar, national governance & structure is lacking. I am super keen to get involved to make this happen. I would be delighted & privileged to be part of this national working group in my capacity as an experienced ANNP.

**Ms Sonia Yohannan****ANNP**

I have been a neonatal nurse for 11 years and an ANNP for five years. My special interest is cardiology, and I have attended an ECHO course. I am actively involved in performing POCUS under supervision for line confirmation; it has enabled me to confirm line position, troubleshoot, and perform line adjustments much more effectively without exposing the baby to more radiation. I have independently performed cranial scans for the last four years and can interpret them. In addition to that, I am currently training to perform Lung ultrasound. I want to be a committee member to broaden my knowledge and skills to perform POCUS based on up-to-date evidence. I hope to offer better haemodynamic assessment for premature and sick babies with the skill I achieve. With this knowledge, I can support and train my colleagues to perform POCUS to provide more efficient patient care.

## Trainee Representative (27 applications)

### **Dr Mohammed Abdalhady**

#### **Neonatal GRID trainee**

I am a paediatric trainee who recently accepted a neonatal GRID training offer in the North West deanery (Manchester). I am interested in neonatal POCUS specially the POCUS application in neonatal emergencies. Hence, I am leading the setup of a regional/network group for POCUS use in the acutely deteriorating newborn infant. This initiative has involved close collaboration with consultant neonatologists, paediatric intensivists and radiologists across the region. I am working on creating the foundation of a comprehensive training framework which includes organizing training sessions, setting up mentoring programs, establishing training logs and developing a robust clinical governance structure. I recently organized a lung-ultrasound course for the consultant neonatologists from 3 tertiary neonatal units and invited the lung ultrasound experts- Dr Anna Milan, Sadaf Bhayat and Dr Mahmood Montasser to deliver the training for the consultant group. I am in the process of organizing a Cardiac POCUS workshop for the deanery neonatal consultants. I am currently working on purchasing a new ultrasound machine for the purpose of POCUS in Leeds Children's Hospital neonatal unit in addition to sourcing funds with the help of a consultant colleague for the purchase of ultrasound simulator (BabyWorks).

I am aiming to work with the group to help the establishment of a robust training framework for the neonatal POCUS that leads to the development of nationally recognized accreditation.

### **Dr Sarah Arthur**

#### **Neonatal Registrar**

I am a neonatal registrar currently setting up a Point of Care Ultrasound (POCUS) fellowship in Bristol. Working on this project has brought home how crucial it is to use POCUS safely, how important it is to quality assure and have the correct working systems. And the importance of collaboration with other specialists. I know how challenging it can be to acquire POCUS skills under appropriate and prompt supervision. I want to be part of the team that addresses the safety and advice around POCUS use nationally. Previously, I worked with a neonatologist to implement the use of POCUS in umbilical venous catheter insertion at a level two unit. I learned how difficult it can be to obtain these views and how sinuses can produce artefacts that, to an untrained eye, can resemble UVCs. I became invested in POCUS education, writing education materials, and developing guidance.

I have experience writing interactive online courses and have previously designed regional modules for Hypoxic Ischemic Encephalopathy and nationally for Vitamin D. I am dedicated and conscientious; I have contributed to national initiatives for the trainees' committee, such as national guidelines for fertility and Progress+ leadership and wellness articles. Recently, I have spearheaded a national group focused on improving Paediatric training with the goal of changing the culture toward supporting professional activity.

I am very interested in the work of this group and believe I can play an important role in delivering frameworks for practice for POCUS in neonates.

### **Dr Kerry Blackett**

#### **Paediatric registrar ST4**

I would like to apply to be a trainee representative for the NeoFOCUS-UK committee as I believe that point of care ultrasound is an exciting and also key aspect to neonatal care to be able to manage neonatal patients more effectively and efficiently. I am keen to further my own ultrasound skills to be able to put this into practice as I embark on my own neonatal career. Being able to increase the knowledge, experience and competence of units across the country and advocate for change in practice with this is a challenge I look forward to taking on.

I have experience in working in tertiary NICUs both in the UK and New Zealand, as well as district general hospitals and in neonatal transport. This background has highlighted the multiple opportunities that point of care ultrasound could have improved the care of the neonatal patient I have been looking after.

**Dr Patrick Blundell****ST6 Neonatal Medicine (Neonatal Grid Trainee)**

As a neonatal sub-specialty trainee developing my skills in neonatal POCUS and functional neonatal echocardiography (FNE), I am in a prime position to offer insight to the committee, with the aim of promoting the safe and effective use of these evolving skills. I believe POCUS and FNE provide a wealth of information, contributing to better clinical decision making, and ultimately safer and more effective neonatal care. These skills are essential for neonatologists and should be seen in the same regard as intubation or x-ray interpretation. I have developed my own skills in this area, performing cranial ultrasonography for over 5 years, and developing skills in lung ultrasound and echocardiography. I have undertaken a number of hands-on FNE courses and am now furthering skill informally through supervised clinical practice. I am undertaking a further POCUS course in July 2024. However, as I look towards independent practice, the variation in governance between neonatal units and the lack of formal accreditation are key challenges which I see. I am highly motivated to improve these areas. I see the 'gold standard' as being a formalised training programme embedded within the neonatal subspecialty curriculum, providing a mandate for training units and deaneries to offer opportunities for this development. Following this, formal accreditation would help to safeguard both clinicians and infants. I have a strong interest in medical education, and experience in developing postgraduate educational programmes, as well as experience on national BAPM working groups. I hope I could contribute significantly to the committee's work.

**Dr Annie Colthorpe****ST7 Neonatal GRID trainee- currently OOPE neonatal haemodynamics and TNE in Toronto**

I am an ST7 neonatal GRID trainee, currently completing an OOPE diploma in neonatal haemodynamics/TNE with the University of Toronto/NHRC. This experience has given me an invaluable insight into how individualized, precision management of babies' physiology can improve both clinical outcomes and team confidence. I have a longstanding passion for haemodynamics and POCUS, previously completing courses in NPE and lung USS and am committed to developing personally and supporting others in their training. I have published and presented work on haemodynamics in therapeutic hypothermia, late onset sepsis and TGA. I equally have a strong interest in education/mentoring. I was awarded a PG Cert with distinction in Postgraduate Medical Education, am an NLS/ARNI instructor and was trainee lead for paediatric return to training. I am an RCPCH national mentoring champion, creating and leading a successful ongoing mentoring programme across my deanery. Throughout my career, I have received positive feedback for sustained commitment to teaching. I am currently developing education research into assessment of NPE and neonatal haemodynamic competencies to address a recognized educational gap. I believe that the development of specific assessment for trainees is important to provide ongoing high quality training. I believe my skill mix would be an asset to the NeoFOCUS-UK team in developing and promoting haemodynamics education and practice frameworks in the UK. I would highly value the opportunity to support this mission and represent trainees in this evolving area and hope that my experience in an established North American programme will also provide a useful perspective.

**Dr Leanne Dearman**  
**Subspecialty trainee**

As a neonatal subspecialty trainee, I am passionate about the use of ultrasound in the management of patients. The ability to obtain time-sensitive information on pathology and line placement, without the need to (occasionally repeatedly!) expose the baby, family and staff to radiation, is really important.

During my paediatric training I've attended POCUS (adult) and CACTUS courses. Unfortunately, I have been unable to continue this learning due to a lack of senior knowledge in peer reviewing my images. My next subspecialty rotation is on Paediatric Critical Care, where several of the Consultants teach the CACTUS course. I requested this rotation to further my scanning ability.

There is the feeling from some health care professionals that echocardiography should only be performed by those who are accredited – a level of training that is extremely difficult to achieve and maintain yet vital in the everyday care of babies. Having heard the impact echocardiography and subsequent haemodynamic and PDA management can have, especially on extreme pre-term infants, is inspiring, and something I want to be involved in.

I have recently completed a neonatal education/simulation fellow role at a tertiary cardiac centre where I was able to develop my teaching style. I also completed a regional Leadership and Management with Quality Improvement Course where I won first prize for both poster and presentation.

I would love to join the NeoFOCUS-UK group to help develop and roll out frameworks, education and accreditation packages to enable others to learn this invaluable skill.

**Dr Lauren Dhugga**  
**Neonatal simulation and transport fellow**

As a neonatal registrar and transport fellow, I have seen POCUS improve neonatal patient care in many ways. This includes faster diagnoses, less patient (and staff) radiation, real time diagnosis and management, and rationalised treatment.

As a neonatal transport registrar, I often wish that I had the training and skill to be able to provide POCUS. I independently move infants around the Northern region in pursuit of intensive care. Often, POCUS is the first diagnostic tool that benefits an infant in a tertiary centre. The ability to assess cardiac function and rationalise haemodynamic therapies, or exclude congenital heart disease, is a skill that can change the clinical course of patients and help to decide on their most suitable place of care.

As a neonatal simulation fellow, I am passionate about improving patient care through education and networking. I use the skills that I have acquired through my paediatric training, PGCert MedEd and as a simulation and life support instructor, to share my passion for improving neonatal care with neonatal doctors and nurses across the country. As a national RCPCH trainee representative, I enjoy being able to connect with trainees across the country to share learning and collaborate, and would be delighted to use the connections that I have made to share my passion for neonatal POCUS as an important new development in neonatology.

It would be a privilege to sit amongst a group of experts and be part of one of the most exciting developing areas of neonatology today.

**Dr Alexandra Downes**  
**Neonatal grid trainee**

As neonatology is moving towards more personalised practice, such as targeted haemodynamic assessment to guide management of hypotension or use of lung ultrasound to guide surfactant administration, there is a requirement for a robust training programme for neonatal professionals and guidelines for practice that can be adapted universally to the needs and skill mix of individual units.

It has been a constant frustration of mine throughout my training that there has been no consistency in provision of training for targeted neonatal echocardiography and point of care ultrasound. I have also experienced a range of different practices between units meaning that it is difficult to practice skills acquired on one unit, for example lung ultrasound, once you have moved on to another unit where the level of expertise may be different.

By joining the NeoFOCUS group as a trainee representative I would be able to share the challenges that I have experienced to date on my training pathway to help guide the group and advocate for my peers and the consultants of the future. I am currently in the process of learning targeted neonatal echo and hope that alongside my own journey of professional development I would be able to facilitate a more straightforward path for future trainees and be at the forefront of embedding my newly-acquired skills into everyday neonatal practice not only at a personal level, but as a national standard of care.

**Dr Mervat Elyas**  
**Paediatric trainee ST5 - Leeds teaching Hospitals NHS trust**

Throughout my career as an overseas doctor, I've consistently shown dedication to enhancing healthcare practices. A pivotal point in this journey was my PICU fellowship, where I refined my skills in point-of-care ultrasound and was involved in developing a protocol for Lung ultrasound in our unit .

Driven by a passion for neonatal care, my training in the UK involved a year-long placement in a tertiary neonatal unit, where I regularly conducted lung and cranial ultrasounds. Seeking to deepen my expertise, I actively pursued additional training opportunities, including regular attendance at Neonatal POCUS Collaborative webinars and hands-on echocardiography courses. Currently, I conduct cardiac scans under consultant supervision, continually honing my skills in neonatal targeted functional echocardiography.

My dedication to advancement is evident in my upcoming project, introducing ultrasound-guided line insertion for UAC/UVC adjustments to enhance procedural safety and efficacy in the unit.

Joining NeoFOCUS group resonates with my ethos of staying informed about developments and contributing to neonatal care. I'm enthusiastic about collaborating with professionals to promote best practices in neonatal ultrasound, with the ultimate goal of enhancing patient outcomes and healthcare delivery.

**Dr Reema Garegrat****Clinical Research Fellow Neonatal Neurology**

As a neonatologist, I have been acutely aware of the need for a life course and holistic approach to a child health. Origins of much of the problems that I see in my day-to-day clinical work starts in the womb and continues to have impact throughout childhood and later into life. Thus, opportunity to work with and bring together a wide range of health care professionals, not just in paediatric sub specialities, but across a spectrum of existent technologies using point of care ultrasound is appealing to me. I particularly enjoy finding solution to clinical problems by engaging with a wide range of professionals and early career and senior researchers working at the frontiers in the field so that the research is always focussed on the needs of the child and their family.

As a neonatologist, I think ultrasound is a bedside tool which should be easily available to all trainees from the initial days along with clinical skills, not to replace but supplement their skills to diagnose, prognosticate and treat a variety of neonatal conditions.

My capabilities on leadership, interpersonal skills, and ability to engage people will help in developing this special interest group as a new platform for encouraging and building a group of motivated trainees for neofocus.

My aims for the role at the Centre:

1. Information sharing: Create and build a community of trainees in different neonatal POCUS subspecialities at neofocus.
2. Developing a training curriculum to inspire them in POCUS research and involve them in training sessions.
3. Bridging the gap: Acting as a link between the trainees and consultants at neoFOCUS-UK BAPM.

**Dr Mohamed Heikal****Neonatal Registrar trainee**

I have been passionate about POCUS for quite some time now. Learning about BAPM launching this group for the development of POCUS in neonatal medicine fills me with joy. I believe the UK lags behind some European nations in neoPOCUS and having this group will propel us forward. I'm proficient in Cranial USS and lung USS, and continuously enhancing my functional ECHO skills. My aspiration is to see a tailored training curriculum for neoPOCUS in the UK in the near future.

**Dr Hazem Helmy Elemam****Paediatric trainee**

As an IMG pediatric trainee with over 13 years of experience in neonatology, I am excited about the opportunity to contribute to the advancement of neonatal care in the UK by promoting for the integration of neonatal targeted functional echocardiography and point-of-care ultrasound (POCUS) into neonatal training.

Throughout my career, I have practiced and witnessed the profound impact of functional echocardiography and POCUS in enhancing diagnostic accuracy and improving patient's outcomes in neonatal care settings by its ability to provide rapid and precise diagnostic information at the bedside with no risk of radiation exposure. I have worked over the last few years on building up my skills by attending ECHO, Lung ultrasound and POCUS courses and practice under supervision.

Joining the Neo-Focus-UK Committee presents an exciting opportunity for me to collaborate with like-minded professionals and drive positive change in the field of neonatology. I am enthusiastic about the prospect of working alongside esteemed colleagues to shape the future of neonatal care



**Dr Rashida Javed**  
**ST3 Paediatrics**

I am currently working as a Pediatric trainee (ST3) in East Midlands deanery. I have previously done 2 years fellowship program in a busy tertiary NICU at Heartlands hospital, Birmingham. I have gained experience in basic echocardiography and central line POCUS. Due to my enthusiasm in developing basic echocardiography skills, I took initiative and coordinated local echo teachings for 6 months while working as a clinical fellow. This was appreciated by my supervisor and other trainees. While developing these skills, I knew the challenges faced by trainees like lack of curriculum, training packages and trainers. Eventually, with my perseverance and keen interest in POCUS skills, I could develop these skills.

As a trainee representative for NeoFOCUS group, I can contribute to the curriculum and training package development. As I understand the challenges faced by trainees, I can provide ideas and suggestions to the group about how trainees can be involved and appropriately supported in developing TnECHO and POCUS skills. I am attending a hands-on POCUS course in a deteriorating neonate in July to strengthen my POCUS skills and develop lung ultrasound skills. My long-term aim is to become a Neonatologist with expertise in Echocardiography and POCUS skills.

I am enthusiastic, motivated, and flexible person. I am very happy to represent all the trainees of UK who are interested in developing POCUS skills.

**Dr Elizabeth Jones**  
**neonatal GRID trainee**

My name is Elizabeth and I am a neonatal GRID trainee working in Wales. I have an interest in education and have undertaken a PGCERT in medical-education. I also have a passion for neonatal performed echocardiography and point of care ultrasound as it has helped me understand neonatal disease pathophysiology/haemodynamics, and guide appropriate treatment.

I worked for 6 months as a registrar in paediatric cardiology (non-surgical centre) where I learnt to perform sequential/functional cardiac echocardiography on paediatric patients and used results to guide management of common pathologies such as heart failure, arrhythmia and deliver post operative care once patients were transferred back to the non-surgical centre. More importantly I have developed links with the paediatric cardiology team which means that when I perform neonatal ECHOs I discuss my scans with the attending cardiology and neonatal consultant ensuring robust interpretation of images, and safe/appropriate plans for patients, and my ongoing learning.

I have also undertaken/passed the lung ultrasound course endorsed by ESPNIC 2023. However, lung ultrasound is not undertaken on our unit and I am unable to practice as have no peer review. To continue learning I watch NeoFOCUS weekly presentations.

Although I have a passion for POCUS/echocardiography skills there lacks formal training/assessment which leads clinicians vulnerable. I would love to be part of the NeoFocus committee to help develop frameworks for practice nationally, that can be translated locally to improve safety and training. I believe my passion for POCUS/echocardiography and training in medical-education would help with this role.

**Dr Daniel Keen****Neonatal GRID Trainee, St George's Hospital**

As a Neonatal GRID Trainee I have come to appreciate the profound benefits that POCUS can offer to the clinician in managing the unwell neonate. I have firsthand experience of how POCUS can provide a tailored physiological approach to the management of hypoperfusion, reduce radiation burden with assessing line positions and make rapid diagnoses in the unstable infant including pneumothoraces, tamponade and extravasation. In my opinion, It is clear that an understanding of POCUS will become essential to the future neonatal trainee and there is a need to integrate POCUS into the neonatal curriculum. To the committee, I am able to bring my previous experience as a trainee representative, at local and network level, in the implementation of new guidelines and quality improvement projects. I am an enthusiastic learner and teacher, skills which I can apply to the provision of new educational material. NeoFOCUS-UK has opened the discussion surrounding POCUS in the UK and has provided excellent teaching opportunities, showcasing the great work being undertaken across the country. I am passionate that these ideals are translated into the neonatal curriculum and would be excited to have the opportunity to work with the committee in establishing guidance that will standardise our approach to care and help embed POCUS within our training programs.

**Dr Arangan Kirubakaran****Neonatal SpR**

I am a ST4 trainee and have worked in both DGH and tertiary environments.

I am passionate about education and improving outcomes for babies and their families. I have worked as an education lead in my department and will be undertaking a clinical educational fellow job.

I believe that embracing new techniques such as point-of-care ultrasound will revolutionise care on the ground in neonatal units.

There is a vast variety of clinical applications for POCUS which is an underutilised skill in neonatology. As a potential trainee representative I aim to widen access to training and to help advocate for junior members of staff in order to empower departments and share learning.

**Dr Harish Kumar****Registrar**

I am writing to express my interest for the position of trainee representative of NEOFOCUS-UK group. Currently, I am a Pediatrics trainee and commenced training in September 2023. I have previously worked as a Registrar in Level 3 neonatal unit at Birmingham Women's Hospital for more than 3 years. During this period, I have been involved in a variety of clinical governance initiatives. I am excited about the opportunity to leverage my skills and experience to drive quality improvement initiatives. I was appointed as the local lead in Stoke for Precision Project (October 2023- March 2024). Through strategic planning and effective coordination, I successfully led my team in completing the project's first phase within the stipulated timeframe. I have also developed echocardiography skills during this period and perform echocardiogram independently.

I am particularly drawn to the QI Co-Lead role as it presents an opportunity for me to further enhance my leadership skills while making valuable contributions to the advancement of quality improvement initiatives within NHS. I have shown good team player traits such as effective communication, accountability, and flexibility. This has been reflected in my multi source feedback(MSF). I am planning to apply to neonatal GRID post in November 2024. I am enthusiastic about the possibility of joining the committee and contributing to the ongoing success of quality improvement initiatives.

Thank you for considering my application. I look forward to the possibility of joining the committee.

**Dr Marika Lasokova**  
**ST 7 Neonatal Trainee**

I am a neonatal Grid Trainee with an interest and enthusiasms in POCUS, neonatal Echocardiography, haemodynamic assessment and holistic neonatal management. I am aspired to gain Neonatal Cardiology and POCUS Interest. Throughout my training I have improved my experience in teaching and leadership from a wide variety of activities; I updated KPP for RCPHC, joined a team of EAP to write exam questions and also presented a case at their conference. I organised teaching sessions for trainees in EoE and was responsible to set up virtual sessions and later I became lead of the Teaching committee where my responsibilities included recruitment for new committee members, proposal of teaching plan aligned with the paediatrics curriculum to ensure training needs are met. From a teaching perspective, I delivered local, regional and international sessions. I particularly enjoyed delivering presentation for NeoFocus group for UVC insertion, which enriched my knowledge through the literature review and images reviews.

I attended Echocardiography course as ST1 and have insight how challenging it is for a trainee to achieve confidence and competencies in this procedure. I view ultrasound probe as an easy bedside tool which has the protentional to improve practice safety from lines point of view, diagnostics for heart morphology or lungs assessments or delivering infant specific treatment from haemodynamic assessment. I have hands of clinical experience of ECHO assessment and POCUS. I helped organised Echocardiography course for neonatologist. All above fill me with a desire to be involved in an important development of neonatal POCUS.

**Dr Ahmed Moharram**  
**Neonatal GRID trainee, North West**

Point of Care Ultrasound (POCUS) has captured my interest since my first ultrasound course in 2017, during my neonatal fellowship in the UAE. After relocating to the UK, I pursued neonatal GRID training in the North West and have continued to enhance my POCUS expertise. My training includes attending a US-guided line insertion course at Aberdeen University and practicing US-guided line insertions. I have completed POCUS courses with both the NeoFOCUS and FUSIC teams. I am a regular participant in the weekly Friday NeoFOCUS meetings and am scheduled to present a talk on April 26th, 2024, as well as teach at a lung ultrasound workshop in London in September 2024. Currently, in my role at St. Mary's Hospital, I have utilized my POCUS skills in patient care and compiled a comprehensive logbook of diverse cases. Leading changes in my tertiary unit, I have collaborated with a consultant to author a lung ultrasound guideline. Additionally, I have developed an online training module for lung ultrasound targeted at trainees and ANNPs in our unit. This initiative is designed to transform the unit's culture and establish a POCUS group capable of implementing these new guidelines.

Furthermore, as a member of the BAPM CVC guidelines review team, I am actively advocating for the inclusion of ultrasound in the revised guidelines. I am committed to being an effective trainee representative, poised to significantly contribute to the success of the NeoFOCUS group.

**Dr Derek Ng**  
**NIHR ACF/Paediatric Trainee**

I am a paediatric trainee with interests in neonatology and echocardiography/POCUS. I am conscious of difficulties trainees have in obtaining POCUS training opportunities and the lack of an official framework directly impact each other, especially as trainees with constrained study budgets. I hope to help in ensuring there are training opportunities in the form of webinars and guidance as well as advocating for research opportunities.

**Dr Nikitha Rajaraman****ST4 Paediatrics, starting Neonatal GRID at ST5 from September 2024**

I am incredibly excited about the emerging evidence and growing adoption of Neonatal POCUS, an area of interest I have developed under my mentor's guidance. Currently, I lead a regional Quality Improvement Project spanning NICUs in the West Midlands, focused on enhancing POCUS utilisation for UVC positioning. This initiative aims to reduce malpositioning, excessive handling of unwell babies and radiation exposure.

In collaboration with my team, we have developed a Standard Operating Procedure for UVC POCUS and are actively improving awareness and conducting training across the region, advancing into the next phase of data collection.

Additionally, I have contributed an evidence review to BMJ Archimedes, where I appraised evidence on the use of POCUS for UVC positioning compared to radiographs, further highlighting my profound interest in this area.

Attending a regional POCUS course has enabled me to apply my skills in clinical practice, particularly in UVC POCUS and cardiac POCUS, deepening my appreciation for further advancements in neonatal POCUS to enhance patient care. Serving as a committee member in the Paediatric Research Across the Midlands (PRAM) Network, I have led other regional projects and established guidelines, including on a national level in BSPGHAN. These experiences have improved my time management, organisational skills, task delegation, and my ability to foster collaboration in a multidisciplinary setting while working towards a shared goal.

With my passion, experience and skills, I aspire to collaborate with experts in the field to further my learning, and most importantly to improve neonatal care practice, improving patient outcome.

**Dr Chrysoula Rizava****Neonatal GRID trainee ST7**

My name is Chrysoula Rizava and I am a neonatal GRID trainee ST7 in Kent Surrey Sussex deanery. Neonatal echocardiography has been my passion for more than 4 years. I have recently completed my training as paediatrician with expertise in paediatric cardiology (PEC) in Leeds, I sat and passed my exams in congenital echocardiography (EACVI) and I will be submitting my portfolio towards full accreditation (EACVI) this month. In my clinical practice as neonatal specialty trainee I perform cranial and lung ultrasounds. I have been a member of the PECSIG and the BAPM for more than 3 years. I have also been a trainee representative in a different BAPM focus group (for the update of the framework for neonatal MRI) which gave me an insight into the procedures and processes of BAPM groups.

Since my first steps in echocardiography, I realized that there are many clinicians that perform neonatal echocardiograms in the neonatal units with differing degrees of experience and training. As a trainee it was exceptionally difficult for me to decide what was the best way for me to learn and practice safely. I therefore fully understand the need for a framework for training and practice for clinicians that practice POCUS in the neonatal units. I also firmly believe that engaging with the community of trainees is one of the best ways to ensure that their voices are heard, and their needs are met when it comes to POCUS. If chosen I will be honored to take that position.

**Dr Neha Sharma****Speciality Doctor**

I am passionate about point of care ultrasound as a quick, focussed modality which can guide diagnosis, therapeutic interventions and their progression without untoward delay or handling.

I am involved in implementing point of care ultrasound for the lung in our tertiary neonatal unit as a QI project after successfully conducting a Lung ultrasound workshop in our unit.

I perform echocardiograms under the guidance of our neonatal consultants. Our unit has been doing neonatal echocardiograms since 2004 and we perform approximately 420 echocardiograms in a year. 3 of our consultants do independent echo clinics and are very well supported by the paediatric cardiologists in Cardiff. We conduct periodic peer review of our scans for clinical governance and mentoring junior staff.

I am still learning but have been successful in generating interest in our group. I look forward to the opportunity to further POCUS' implementation as minimally invasive diagnostic modality to assist neonatal management and develop safe guidelines to implement it in practice.

**Dr Joshua Somerville****Paediatric registrar**

I developed an interest in learning to echo during my ST1-2 years and began to see first hand at this point how useful it can be as a skill within neonatology.

Attending BAPM conferences, haemodynamics has been highlighted as an increasing area with which to achieve individualized care to neonates.

I am undertaking an OOPE from next february in a neonatal unit in Adelaide, where they will accomodate my CCPU accreditation. This will help develop my skill and provide me with an accreditation in undertaking scans, but more importantly will give me an insight into how an established accreditation system can best be implimented in the UK and how centralised teaching units can be at the forefront of this, as they are in Australia.

**Dr Sumit Thakur****ST6 Neonatal Grid Trainee**

As a Neonatal Grid trainee, I am excited to apply for the position of Trainee Representative in the Neo-FOCUS group. My goal is to promote the use of targeted functional echocardiography and point-of-care ultrasound (POCUS) in neonatal care for optimising outcomes. As a representative, I want to ensure that the unique perspectives and needs of trainees are heard and addressed and also hope to contribute to the development of educational resources, frameworks and training opportunities, organize workshops, webinars and training sessions. Through my training, I have gained valuable insights into the challenges faced by trainees. I am skilled in performing independent functional echocardiography (ECHOs) in a busy tertiary neonatal unit, which plays a crucial role in the management of sick babies. I have attended ECHO training course and Neo BUS course, which provided me with training not only in ECHO but also in lung, abdomen, and renal POCUS which has helped the team in improving outcomes.

Currently, I am leading a Quality Improvement (QI) project that involves real-time monitoring of UVC Tip location and improving ECHO reporting in a standardised way. Along with this, I am also leading a QI project that focuses on developing an SOP and training sessions for Ultrasound-guided IV cannulation. I have attended a certified course on USS-guided IV cannulation, which has added to my expertise in this area.

In essence, joining Neo FOCUS as a Neonatal Trainee Representative aligns perfectly with my commitment to advancing neonatal care through collaboration, education and integration of cutting-edge technologies.

**Dr Hannah Tobin****ST7 Paediatrics/Neonates**

Over the last few years working in various neonatal units, I have become acutely aware of the benefits of bedside ultrasound and the challenges that trainees face in familiarising themselves with these techniques and developing the skills to use in the future. Such variation exists in expertise and facilitation, as well as governance around their use, providing barriers as a trainee, learning these techniques. Ultrasound is fast becoming such an important skill set within Neonatology. As a trainee, I would love to see a more robust training programme that could be more universally delivered to give all trainees the opportunity to learn and benefit from these skills and would be keen to be involved in its development.

**Dr Megan Tombling****ST7 Neonatal SPIN Trainee**

As a neonatal specialist interest (SPIN) trainee I am very interested in applying for this role as I recognise this work will lead to innovative changes in the practice of neonatal medicine. As a trainee I value the importance of developing additional skills and techniques in my training to improve the diagnostic future of the speciality. Whilst benefiting my own training journey this role would enable me to communicate with my peers this opportunity to learn these modalities and signpost to courses and educational opportunities to develop and maintain the required skill set. As trainees we are stakeholders in the development of training programs and incorporation of these opportunities into the national training programs for specialist interest and GRID training. I can use my unique position of being a current trainee to feedback the trainee perspective of POCUS and current training opportunities and how these could be progressed further. I am a motivated trainee with a drive to succeed in neonatal medicine and I would be privileged to be involved with this focus group and development of POCUS training.

**End of Statements**