optic nerve sheath diameter. POCUS can also be used for procedural guidance for venous access, regional anesthesia, pericardiocentesis, cricothyrotomy, and foreign body identi cation/removal. With these diagnostic capabilities, u/s can be used to avoid unnecessary procedures and evacuations to higher-level facilities, resulting in saved time, resources, and reduced patient harm.

One of the most signi cant advantages of u/s is it does not require a physician for proper execution, decreasing physician referrals. Concerning military applications, primary care physicians o en care for patients in battalion aid stations with no diagnostic testing available. With POCUS, physicians in war zones could decrease the

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