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## Response

To the Editor:

Thank you, Dr Poelaert, for your comments and your interest in our article.<sup>1</sup> We carefully reviewed your study again for a detailed explanation of the methods used.<sup>2</sup> As stated in your publication, "Patients scheduled for cardiac surgery were randomly assigned to receive polyurethane (PU) (Sealguard; Covidien, Mansfield, MA) or a standard polyvinyl chloride (PVC; Mallinckrodt Inc, Hazelwood, MO), high volume, low-pressure cuffed endotracheal tube (ETT) at induction of anesthesia."<sup>2</sup> Your correspondence on our article suggests that the Sealguard ETT used in your study was a barrel-shaped polyurethane cuffed ETT, which is different from the tapered-shaped polyurethane product featured on the company's website using the specific trademarked name described in your study, accessed by us in spring 2011 and reconfirmed at the time of this writing in July 2012.<sup>3</sup> In addition, the online product description references the ETT studied by Lorente et al<sup>4,5</sup> as a tapered PU cuff as well. The specific description of the shape of the ETT is not actually found in either your article<sup>2</sup> or that of Lorente et al,<sup>4</sup> suggesting an important limitation of the current literature. Future studies should describe in detail not only the material of the ETT and cuff but also the shape of the cuff. Therefore, we believe our review was correct based on the information that was available to us at the time of writing the article.

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## Development and Efficacy of a 1-d Thoracic Ultrasound Training Course

To the Editor:

Thoracic ultrasound (TUS) improves the safety of pleural interventions,<sup>1,4</sup> and guidelines strongly recommend that image guidance should be used for pleural fluid procedures.<sup>5</sup> Adequately trained nonradiology physicians have a comparable safety profile to radiologists and are increasingly undertaking TUS,<sup>6</sup> partially stimulated by physician training curricula that now require TUS skill acquisition in multiple specialties.<sup>7-10</sup> Although several TUS qualifications exist (e-Table 1), a common requirement is the attendance of a training course to gain the essential background knowledge and skills.

Anticipating an increasing demand for TUS courses, the British Thoracic Society pleural diseases group set up a UK