

FT ACLS Outline Agenda

Basic Guide for Conducting a ACLS first-time class

Class times will vary based on the number of student-approx. 8-10hrs

Utilize your instructor manual to prompt you for sample discussion questions/topics

****Do not skip any videos during the FT ACLS course*****

Systems of Care – Show video (recap AHA Chain of Survival and how it applies to local protocol) (Pages 7-14)

Science of Resuscitation – Show video (recap the high quality BLS and discuss feedback devices)

Systematic Approach- Show Video-recap BLS & thoroughly discuss Primary pg. 21/Secondary Assessments pg. 22, including H&T handout given in student packet

CPR Coach – Show video (discuss the importance of the CPR coach and how it impacts the CCF in code activity) (Page 95)

High Quality BLS – (Page 15) Show video- The first portion is instructor-led practice. Have the students each do 2 minutes of CPR, rotate roles of compressor and CPR coach. Second portion incorporates the AED, practice the use of the AED, and have the students' practice compressions with the AED. Ideally practice CCF with this activity.

Skills Testing Station – Have each student perform individual skills testing, starting with Scene safety and assessment, and do 2 full minutes of CPR – no breaths, and then apply AED according to skills test sheet. ***It is ok to have another student be a CPR Coach here.**

Show Airway Long Version- Complete learning station and the individual airway skills check **Use scenarios out of the ACLS Instructor manual* assessing BLS/Primary/Secondary Assessment, using an Airway Adjunct (possible advanced airway) and time student bagging at the appropriate rate of every 6 seconds for 1 minute with appropriate volume. These are completed one student at a time. (Page 100-113)

Recognition – Show Video and discuss RRT/MET teams

ACS- Show video. Utilize the instructor manual to ask discussion questions when video pauses. (algorithm pg. 32, management pg. 33, medication pg. 35-36). Use dry erase board to summarize using mnemonics from the learning tool resource ring including: VOMIT and OHMAN

Stroke- Show video. Utilize the instructor manual to ask discussion questions when video pauses. (pg. 50), critical time periods (pg. 47), testing and treatment (algorithm pg.48)

Show the High-Performance Teams Video (In facility)- (pages 91-95) Show entire video
*Recap how in the Megacode testing that CCF will be measured, and teams will also be tested on the quality of the CPR delivered. Discuss items such as pre-charging the defib if using a manual monitor, pulse check prior to analyzing, and hovering over the chest.

IO – pages 185, 128, 95, 122 (**there is no page number with site locations**) recap video, demonstrate, and give the opportunity for practice (student demonstration is optional).

Coping with Death – Ask anyone if they need to step out – Play video and discuss the importance of having good communication techniques for families that have had the loss of a loved one. **A lot of instructors chose to show this video earlier in the course, such as just prior to lunch.**

Algorithms ****All case scenarios must come from the instructor manual****

Brady- Show video, rhythm recognition, discussion of algorithm with 2 Case Scenarios using DART Sim (pg.69) ***1 unstable brady case at minimum**

Tachy- Show video, rhythm recognition, discussion of algorithm with 2 Case Scenarios using DART Sim ***Choose both a stable/unstable tachycardia case (pg. 79)**

Cardiac Arrest- Show video, rhythm recognition, discussion of algorithm *Hold Case Scenario (pg.117)

Post Cardiac Arrest- Show video, discussion of algorithm, and then do 1 Practice Case scenarios using DART Sim that will combine a cardiac arrest and post cardiac arrest (pg.153)

***Megacode Practice** will be completed with the instructor as the team lead along with pre-briefing and it is ok to redirect on this practice

Megacode Testing-** Students will be tested in groups of 3 (4 max) and each team should be **given at least 1 Megacode** for testing using the checklist. If all steps of the critical performance steps are met, an additional Megacode is not required unless you have more than one student that would normally function as a Team Leader. Again, it is not wrong to do more than 1 Megacode per group. Teams can be given the chance to remediate if needed. It is reasonable to retest using a similar scenario (ex: if first case was an unstable Brady at the start of the scenario, the retest can also use an unstable Brady. *Remember to pre-brief and debrief****

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*Clarification- at **minimum 2 Megacodes** will be completed in each course (one by the instructor as a practice and 1 per group of 3 or 4 students)

***Any student that functions as the team leader in their actual scope of practice is required to have a Megacode where they are the team leader (so additional Megacodes may be needed). The instructor manual states that this includes ER providers, paramedics, as well as dentist that are required to take ACLS and ICU physicians**

All students should be given the option to be the team leader for a case scenario (this could be the Brady/Tachy/Cardiac arrest or Megacode)