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Dear Candidate,

Thankyou for booking a course place on our ALS program .Approximately 4 weeks before your course date you will receive a email from us. The link will come from the ERC COSY which is the course management system. Please can you check that all of your details are correct as we are unable to alter these after the course has finished. If there require any changes please can you contact us via email courses@resusciataion-india.com

If an emergency please contact us on WhatsApp +44 7585338632 – UK time only

You will have access to the course material from today – if you have any difficultly in accessing the course materials please use the email above

Please note all courses start at 08:30 and run until 17:30.

We Have included a course program.

Please note that you are advised to complete all of the pre-course e-learning component of the

course - we can refuse entry to the course if you have not completed the the above.

Course Ground Rules

As we have a full program please can you arrive on time.

Mobile phones only to be used at coffee and lunch times.

Be supportive to your colleagues.

Be ready to work with your instructors at the timing set out on the day.

If you are having any issues regarding the course please speak to us ASAP

We also off a pre-course teaching session – this is an extra to the course program and will be held on Microsoft teams, we have run these prior to the courses before and the candidates have found it a great help as you are able to ask us any questions and it gives us the opportunity to go through the course format with you.

This is normally £75 but if you use the code PRECOURSE50 you will get a 50% discount.

We and the rest of the training team look forward to meeting you on your Course

Good luck

Regards

Martin and Matt

EUROPEAN RESUSCITATION COUNCIL

ALS Provider Course 2015

Course Program

Format/Content	Time	Module	Objectives
Day 1			
Both days start at 08:30 and finish at 17:30			
WS: BLS and defibrillation			• Confirmation cardiac arrest • Delivery of high quality chest compressions • Recognition of need for defibrillation • Safe defibrillation with minimum interruption to chest compressions • Module might be placed after "The deteriorating patient"
WS: The deteriorating patient			• ABCDE approach to a deteriorating patient in case-based discussions • Identification and treatment of life-threatening problems as they are found • Call for help / escalate / refer to specialist
Facultative module: WS: RR and 12-lead ECG			• Indications for ECG monitoring • Effective ECG monitoring • Basic physiology of the ECG • 6-stage approach to rhythm recognition • Recognition of the common 12-lead ECG patterns of acute myocardial infarction
WS: Airway and i.o. access			• Principles of establishing and maintaining a patent airway • Provision of adequate ventilation • Indications for insertion of intraosseous (i.o.) access

			• Insertion of an i.o. device
Lecture: ALS algorithm (*demo practice for remaining faculty*)			• Introduction ALS algorithm • Practice for Demo
SIM Demo: including Team factors			• Introduction of the concept of cardiac arrest simulation training • Demonstration of team work and leadership in managing a cardiac arrest • Demonstration of cardiac arrest recognition and management
SIM Teach 1 (VF, pVT)			• Application of current guidelines and the skills taught in the workshops / skill stations into the practical management of the patient in cardiac arrest • Development of the candidates' skills, attitudes and knowledge required to function as a member of a resuscitation team • Development of the candidates' skills, attitudes and knowledge required to lead a resuscitation team
SIM Teach 2 (Asystole, PEA)			
SIM Teach 3 (Decision making)			• Considerations involved in the decision to stop a resuscitation attempt • Implications of DNAR orders and advanced directives • Ethical and legal implications in regard to resuscitation • Involvement of relatives
SIM Teach 4 (Post Resus Care)			• Treatment of the post cardiac arrest syndrome • Transfer of the patient • Assessing prognosis after cardiac arrest
			• Coaching • Feedback

Day 2	Time	Module	Objectives
Faculty meeting			
Both days start at 08:30 and finish at 17:30			
WS: BLS, manual defibrillation			• Mandatory standalone module
SIM Teach 5 (Non-Technical skills)			• Rehearsal • TEAM • Situational Awareness • Decision making • Leadership • Teamwork and interprofessional skills • Communication • Team membership
WS: Bradycardia, Pacing			• Recognition of bradycardia and differentiation between the different degrees of heart block • Principles of bradycardia management • Indications for cardiac pacing • Different methods for cardiac pacing • Safe and effective application of non-invasive, transcutaneous electrical pacing
WS: Tachycardia, Cardioversion			• Recognition of types of tachycardia, defined by regularity and QRS width • Principles of tachycardia management • Indications for electrical and pharmacological cardioversion • Safe and effective synchronised cardioversion
WS: ABG, Capnography			• Normal ranges for arterial blood gas values • 5-step approach to arterial blood gas interpretation • Some of the common causes of arterial blood gas abnormalities and what to do to correct them

			• The basic physiology of carbon dioxide (CO_2) and the normal concentration in blood and expired air • The terminology associated with CO_2 monitoring • The systems used to monitor end tidal CO_2 • The structure of a normal capnography waveform • The role of waveform capnography during CPR
WS: Special circumstances (3 modules)			• 6 scenarios according to local setting
SIM Teach 6 (bringing it all together)			• Per arrest management • Team factors • Preparation for assessments
SIM Test			• Recognition and intervention in the management of a simulated patient at risk of cardiac arrest • Leading a team in the resuscitation of a simulated patient in cardiac arrest • Demonstrating knowledge and application of current resuscitation guidelines • Demonstrating an understanding of the importance of post-resuscitation care and stabilisation following a return of spontaneous circulation