

For Instructors from the CDC June 2020

It's so exciting to be resuming courses after the interruption due to the pandemic!

Guidelines for managing a [COVID-safe APLS environment](#) have been sent to candidates and are available via the APLS website.

There have been some changes to the course material made during the break

Please read below for details about:

1. Welcome and Aims session
2. Basic Life Support teaching and assessment
3. Airway skills teaching
4. Scenario updates
5. Trauma plenary – including pelvic binders
6. Spinal skills workshop
7. New ALSi's and extra monitor in all kits

1. Welcome and Aims session- in addition to recently added Acknowledgement of the Traditional Owners and "Respect and feeling Safe" slides, there will be a slide informing candidates of the measures to help reduce the risk of Covid-19 transmission. We also suggest that the Course Director state that there will be insufficient time to discuss infectious disease control measures and how they relate to advanced life support during the course, although the subject may be briefly covered in some sessions.

2. Basic Life Support teaching and assessment

BLS- Mouth-to-mouth rescue breaths will no longer be taught. The candidate will be asked to deliver the initial 2 rescue breaths by bag-valve mask device (BVM) then instruct another candidate to deliver subsequent rescue breaths using BVM.

During assessment, after the initial 2 rescue breaths, the candidate will instruct the assessor to deliver subsequent rescue breaths using BVM.

3. Airways Skills- the two-handed grip for BVM ventilation will be taught as a technique for reducing the risk of transmission of aerosolised secretions in a Covid-19 risk setting, viral filters (with capnography port) will be introduced into the kits and their use demonstrated.

- *Covid resources for ALS/Airway management* - Laminates regarding ALS and airway management in Covid paediatric patients (modified from APLS ALS algorithm and QLD health) will be available in kits. These are to assist with responding to candidates' questions and are general guidelines only. State and local guidelines should be emphasised as the primary source of definitive advice.

4. Scenario Updates

Many of the scenarios (teaching and testing) have been updated so please check them carefully

- The ALSi scenarios and quick picks have been updated. Capnography has been added to the ALSi scenario set up when indicated, although the CO2 value will need to be added by the instructor during the scenario according to clinical circumstances
- There are two new scenarios;
 - i. **Cardiac scenario 7** is a shockable rhythm as a result of local anaesthetic toxicity. The main emphasis is the management of VT/VF. An algorithm for the management of local anaesthetic toxicity is included.
 - ii. **Trauma scenario 3** is a penetrating chest wound due to a shooting.

5. Trauma Plenary- this has been modified to run in a more intuitive way and includes teaching about pelvic binders. The session will run 5-10 minutes longer than the previous version, but this time will be offset by a shorter session that replaces Spinal Skills.

6. Spinal Skills will be replaced by a short video (thanks to the team at Sydney Children's Emergency Dept) covering spinal immobilisation, log rolls and the correct use of pelvic binders. This can be followed by a Q&A in preparation for use during trauma scenarios on Day 3.

- Pelvic binder models and splints have been added to the equipment packs thanks to Geraldine's sewing skills!

7. New ALSi monitors have been purchased and 5 units will be available at each course. The ALSi software works exactly the same. The iPads are updated and the monitor screen is larger and enclosed. There is no home button so a screen home button has been added to assist. Please familiarise yourself with the new units at the start of the course

I am sure that further improvement to the course will be identified as the first few are run in this new way so feedback to the CDC via the course report (or emails to the team) will be extremely valuable.

Thanks again for your commitment to improving the care delivered to sick and injured children,

Jacquie Schutz on behalf of the CDC.