TRAINING EFFECTIVENESS IMPROVEMENTS OF CARDIOPULMONARY RESUSCITATION SKILLS BASED ON 2010 CPR GUIDELINE IN EMERGENCY MEDICINE

Zhan Hong, Xiong Yan, Xu Jia, Cai Ruibin, Zhan Wei, Ye Zi The First Affiliated Hospital of Sunyat-Sen University, Guangzhou, China

10.1136/heartjnl-2011-300867.717
Objectives Cardiopulmonary resuscitation is the most important technique for the first-aid in the rescue of the patients with cardiac arrest. Many aspects in basic life supporting has been adjusted in 2010 CPR guideline. This research aims to evaluate and analyse the training effectiveness improvements of cardiopulmonary resuscitation skills based on 2010 CPR guideline in emergency medicine.

Methods Sixty clinical training doctors in the First Affiliated Hospital of Sun Yat-sen University, who were trained in the emergency department from August, 2010 to March, 2011, were taken as the research groups. Among them, 30 doctors assigned into control group, entered emergency department before 2010 CPR guideline was published and were supposed to be trained based on 2005 CPR guideline and the other 30 doctors assigned into experimental group, were trained after 2010 CPR guideline was published and were trained based on 2010 CPR guideline. Theory and skill-practice tests were employed to evaluate the training effectiveness after the training course was finished in both groups.

Results Total scores of the experimental group are higher than those of the control group (p<0.05). The theory test scores have no significant difference between the two groups (p>0.05), while the experimental group acts better in skill-practice test (p<0.05). More prompt initiating of chest-pressing and defibrillation, higher rates and superior quality of chest-pressing, as well as better self-evaluation among trainees, are obtained in the experimental group (p<0.05). However, other items including self-protection awareness, airway-opening skills and ventilation quality, are similar between the two groups (p>0.05).

Conclusions It seems helpful to improve training effectiveness of basic life-support procedures in medical staff based on the adjustment of 2010 CPR guideline.