

# Resuscitation and CPR Training Guidelines

Effective January 1, 2005

The following are recommendations for establishing the appropriate level of training/competency with regards to cardiopulmonary resuscitation and is consistent with current Medical Center Policy No. 0187.

## YEAR ONE

Clinical Staff and Patient Care Providers:

1. BLS Certification (every 2 years) is required as follows:
  - A prerequisite for obtaining advanced life support certification (i.e. ACLS or PALS)
  - Maintaining Instructor status (ACLS, BLS, PALS)
  - By local policy
  - For staff who monitor Procedural Sedation per Medical Center Policy No.0153.
  - The hands-on skills evaluation must be completed by a current AHA BLS Instructor.

All Other Care Providers:

2. A CPR competency will be required, every two years. This competency will consist of:
  - Demonstration of ability to perform CPR according to AHA guidelines\* by a current AHA BLS Instructor according to one of these two competency validation forms found at the Life Support Learning Center website: <http://www.healthsystem.virginia.edu/internet/lslc/>, select *CPR Competencies*.
  - Knowing how to access Code 12 Team
  - Use of appropriate emergency equipment – AED (where available), defibrillators, code carts
  - Appropriate documentation

## YEAR TWO

A targeted resuscitation competency will be required based on review of issues related to codes and emergency situations. This review will be the responsibility of the Resuscitation Committee. The Life Support Learning Center will oversee the development of training modules. Managers should assist staff in determining which modules are appropriate as all are not required. The Resuscitation Committee will provide recommendations upon request or in the incidence of practice variances.

### **Non Patient Care Staff (individuals who do not provide direct patient care):**

Annually, non clinical staff, or staff in non patient care areas should know the following:

Access code team/ emergency assist

Role in support of emergency care (bring the AED/Lifepak to bedside STAT, errand running etc) for involved patient

Role in support functions for family and remaining patients in area

\*AHA Guidelines are based upon the consensus statement of the International Liaison Committee on Resuscitation (ILCOR). These evidence based care recommendations and specific steps can be found in the BLS for Healthcare Provider manual from the American Heart Association.