Cardiac Arrest Management/AED Essay to Skill Examiners

Thank you for serving as a Skill Examiner at today’s examination. Before you read the specific essay for the skill you will be evaluating today, please take a few moments to review your general responsibilities as a Skill Examiner:

- Conducting examination-related activities on an equal basis for all candidates, paying particular attention to eliminate actual or perceived discrimination based upon race, color, national origin, religion, sex, gender, age, disability, position within the local EMS system, or any other potentially discriminatory factor. The Skill Examiner must help assure that the EMR/EMT Assistant and/or Simulated Patient conduct himself/herself in a similar manner throughout the examination.
- Objectively observing and recording each candidate’s performance
- Acting in a professional, unbiased, non-discriminating manner, being cautious to avoid any perceived harassment of any candidate.
- Providing consistent and specific instructions to each candidate by reading the “Instructions to the Psychomotor Skills Candidate” exactly as printed in the material provided by the OEMS. Skill Examiners must limit conversation with candidates to communication of instructions and answering of questions. All Skill Examiners must avoid social conversation with candidates or making comments on a candidate’s performance.
- Recording, totaling, and documenting all performances as required on all skill evaluation forms.
- Thoroughly reading the specific essay for the assigned skill before actual evaluation begins.
- Checking all equipment, props, and moulage prior to and during the examination.
- Briefing any Simulated Patient and EMR/EMT Assistant for the assigned skill.
- Assuring professional conduct of all personnel involved with the particular skill throughout the examination.
- Maintaining the security of all issued examination material during the examination and ensuring the return of all material to the Exam Coordinator.

This station is designed to test the candidate's ability to effectively manage an unwitnessed out-of-hospital cardiac arrest by integrating scene management skills, CPR skills, and usage of the AED. The candidate arrives on scene to find an unresponsive, apneic and pulseless adult patient who is lying on the floor. The manikin must be placed and left on the floor for this skill. This is an unwitnessed cardiac arrest scenario and no bystander CPR has been initiated. After performing 5 cycles of 1-rescuer adult CPR, the candidate is required to utilize the AED as he/she would at the scene of an actual cardiac arrest. The scenario ends after the first shock is administered and CPR is resumed.

After arriving on the scene and assuring scene safety, the candidate should assess the patient and determine that the patient is unresponsive. The candidate should immediately request additional EMS resources. The candidate should then assess for breathing and pulse simultaneously for no more than ten (10) seconds. If it is determined that the patient is apneic or has signs of abnormal breathing, such as gasping or agonal respirations and is pulseless, the candidate should immediately begin chest compressions. All actions performed must be in accordance with 2020 American Heart Association Guidelines for CPR and Emergency Cardiovascular Care. Any candidate who elects to perform any other intervention or assessment causing delay in chest compressions has not properly managed the situation. You should check the related “Critical Criteria” and document the delay.
Each candidate is required to perform 2 minutes of 1-rescuer CPR. Because high-quality CPR has been shown to improve patient outcomes from out-of-hospital cardiac arrest, you should watch closely as the candidate performs CPR to assure adherence to the current recommendations:

- Adequate compression depth and rate
- Allows the chest to recoil completely
- Correct compression-to-ventilation ratio
- Adequate volumes for each breath to cause visible chest rise
- No interruptions of more than 10 seconds at any point

After 5 cycles or 2 minutes of 1-rescuer CPR, the candidate should assess the patient for no more than 10 seconds. As soon as pulselessness is verified, the candidate should direct a second rescuer to resume chest compressions. The candidate then retrieves the AED, powers it on, follows all prompts and attaches it to the manikin. Even though an AED trainer should be used in this skill, safety should still be an important consideration. The candidate should make sure that no one is touching the patient while the AED analyzes the rhythm. The AED should then announce, “Shock advised” or some other similar command.

Each candidate is required to operate the AED correctly so that it delivers one shock for verification purposes. As soon as the shock has been delivered, the candidate should direct a rescuer to immediately resume chest compressions. At that point, the scenario should end and the candidate should be directed to stop. Be sure to follow all appropriate disinfection procedures before permitting the next candidate to use the manikin and complete the skill.

Please realize the Cardiac Arrest Management/AED Skill is device-dependent to a degree. Therefore, give each candidate time for familiarization with the equipment in the room before any evaluation begins. You may need to point out specific operational features of the AED but are not permitted to discuss patient treatment protocols or algorithms with any candidate. Candidates are also permitted to bring their own equipment to the psychomotor examination. If any enter your skill carrying their own AED, be sure that the State EMS Official or approved agent has approved it for testing, and you are familiar with its appropriate operation before evaluating the candidate with the device. You should also be certain that the device will safely interface with the manikin.

The manikin must be placed and left on the floor in this skill. It is not permissible to move the manikin to a table, bed, etc. This presentation most closely approximates the usual EMS response to out-of-hospital cardiac arrest and will help standardize delivery of the psychomotor examination. If any candidate insists on moving the manikin to a location other than the floor, you should immediately request assistance from the Exam Coordinator.

**Equipment List**

This skill should be located in a quiet, isolated room with a desk or table and two comfortable chairs. The manikin must be placed and left on the floor for this skill. Live shocks must be delivered if possible. If the AED does not sense appropriate transthoracic resistance and will not deliver a shock, the Skill Examiner must operate the equipment to simulate actual delivery of a shock as best as possible. The following equipment must also be available and you must assure that it is working adequately throughout the examination:

- Examination gloves
- Mouth-to-barrier device (disposable)
- Automated External Defibrillator (trainer model programmed with current AHA Guidelines) with freshly charged batteries and spares
- CPR manikin that can be defibrillated with an AED Trainer
- Appropriate disinfecting agent and related supplies

**INSTRUCTIONS TO THE PRACTICAL SKILLS CANDIDATE FOR CARDIAC ARREST MANAGEMENT/AED**

This skill is designed to evaluate your ability to manage an out-of-hospital cardiac arrest by integrating patient assessment/management skills, CPR skills, and usage of an AED. You arrive on scene by yourself and there are no bystanders present. You must begin resuscitation of the patient in accordance with current American Heart Association Guidelines for CPR. You must physically perform 1-rescuer CPR and operate the AED, including delivery of any shock. The patient’s response is not meant to give any indication whatsoever as to your performance in this skill. Please take a few moments to familiarize yourself with the equipment before we begin and I will be happy to explain any of the specific operational features of the AED. If you brought your own AED, I need to make sure it is approved for testing before we begin.

You will have ten (10) minutes to complete this skill once we begin. I may ask questions for clarification and will acknowledge the treatments you indicate are necessary. Do you have any questions?