

## Information for facilitators

This teaching session is designed to be delivered by the roadside to a small group. It generally runs for 20 minutes followed by a debrief of approximately 20-25 minutes (40-45 mins total).

## Aim

The aims for this session is to provide prehospital ALS following a hanging and develop confidence in end of life discussions on scene.

## What you will need

There are THREE components to this session:

Page 2 contains **background information** that can be read to the group and an expected sim progression.

Page 3 contains **details of the scenario** with expected progression for the sim technician.

Page 4 contains the **checklist for facilitators** to fill out during the scenario and a list of equipment required.

## Introduction

*“You are responding to a Category 1 call of a 22-year-old female who has been found hanging at home.*

*CPR is ongoing and you are likely to be first on scene.”*

## Expected Progression

- Approach to first on scene cardiac arrest.
- Continue ongoing ALS management.
- Maximise team leadership and effectiveness.
- Manage asystole and evaluate response to therapy.
- Recognise end of life and appropriate point to PLE.

<b>Case title</b>	Hanging at home			<b>Sim no.</b>	PRU 13
<b>Setting</b>	Inside a room	<b>Patient age</b>	22	<b>Patient sex</b>	F
<b>Diagnosis</b>	Asphyxia resulting in hypoxic brain injury and arrest			<b>Curriculum code</b>	
<b>Injuries</b>	<ul style="list-style-type: none"> <li>• Ligature mark to neck</li> <li>• Hypoxic cardiac arrest</li> <li>• Asystole unresponsive to interventions</li> </ul>				
<b>Staff required</b>	1 x PRU Paramedic, 1 x PRU Doctor, Ambulance staff, Simulated relative (sister/friend/partner)				
<b>Learning objectives</b>	<ol style="list-style-type: none"> <li>1. To provide ALS in the prehospital environment</li> <li>2. Provide effective leadership</li> <li>3. Gain confidence in managing end of life discussions in the prehospital environment</li> </ol>				

## INITIAL SETUP

<b>Observations</b>				<b>Arrival route</b>	N/A
<b>HR</b>	Asystolic	<b>GCS</b>	E 1 V 1 M 1 = 3/15	<b>Carers?</b>	None
<b>RR</b>	0			<b>Visible external findings:</b> Ligature mark to neck.  <b>Progression:</b> Chest compressions provided by relative. Non shockable rhythm. No response to initial interventions. Despite interventions does not respond. Relative present to be involved in end of life discussions.	
<b>SpO2</b>	UTR	<b>Pupils</b>	8mm		
<b>BP</b>	UTR	<b>Temp</b>	35.2°C		
<b>CRT</b>	-	<b>Weight</b>	80 kg		
<b>Glucose</b>	9.1				
<b>Equipment on arrival</b>	Standard response bags	<b>Additional info</b>	Adult mannequin. Actor to act as relative.		

DOMAIN	TASK	TIME	DONE
Preparation	Role allocations		
	Disposition discussions		
Initial Actions	Scene safety		
	Information gathering		
	Introductions to individuals on scene		
	Early update to control and further resources		
Assessment	Ensure BLS ongoing		
	Early confirmation of rhythm		
	4H's and 4T's		
Interventions	BLS		
	Airway management		
	IV access		
	Adrenaline		
	Appropriate discussions with relative on scene		
Decision-Making	Recognise futility		
	Leadership and ensuring interventions complete		