Aberdeen Accident and A.

of confident resuscitors

Aberdeen Royal Infirmary

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Teaching of basic life support

Sir

Current teaching of basic life support indicates that, prior to commencing any cardiopulmonary resuscitation, adequate assessment of the situation and of the patient is mandatory. Two recent events have highlighted the importance of this teaching to us and we feel that the lessons are worth drawing to a wider audience.

We have just completed an assessment of the ability of 106 medical students to perform basic life support adequately. The assessment comprised an MSQ to assess theoretical knowledge and a practical test on a mannequin. Only one student was unable to perform the actual mechanics of cardiopulmonary resuscitation upon the mannequin. However, in total, just under one third of the students failed the overall exam. This was almost exclusively on account of a deficiency in either theoretical knowledge of the initial assessment of the patient or inability to initially assess the mannequin in the practical part of the examination.

Shortly after this assessment was completed a middle-aged male was brought to the A&E Department having undergone treatment by bystanders. The bystander assessment indicated that the man was breathing and had a pulse. He was consequently transported to Accident and Emergency in the recovery position. Continuous assessment was made throughout the journey and we were assured that all vital signs were present on arrival. Assessment in the Accident and Emergency Department revealed asystole, a mouth and pharynx blocked with vomitus, fixed dilated pupils and marked anterior lividity. The man was pronounced dead soon after his arrival to A&E.

If bystander cardiopulmonary resuscitation is to be effective the patient must be assessed accurately. Our experience is that a student acquires the mechanical skills of cardiopulmonary resuscitation with ease. However, it would appear that initial assessment of a collapsed patient which would determine whether or not resuscitative measures are instituted, may present a quandary to the rescuer. We believe that anyone embarking on basic life support teaching, to whatever group, must stress the importance of adequate assessment of the patient. Only then will rescuers confidently embark on resuscitative measures thus avoiding the tragedy of withholding such life saving measures from those patients who most need them.

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