

Webinar:

Teaching Basic Life Support Skills with Hands-On Learning Aids



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We partner with educators, administrators and industry leaders to ensure our offerings meet their needs and make lessons truly meaningful.

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Attendees will:

- Learn about hand-on BLS tools from Realityworks
- Explore lessons and activities
- Get implementation tips



Realityworks Tools



Adult Nursing Manikin

- CPR capabilities
- Includes immediate feedback regarding both depth and rate of compressions
 - AHA guidelines



Lessons and Activities

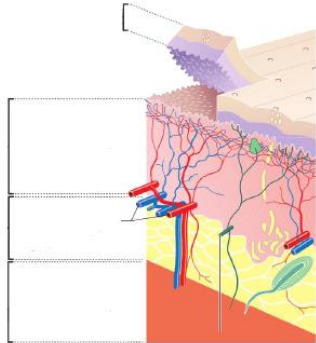
1. Bathing
2. Range of motion
3. Intramuscular injections
4. Intradermal injections
5. Catheterization
6. Pressure injuries
7. Ostomy care
8. IV medication administration
9. Phlebotomy
10. IV insertion

Introduction to Intramuscular Injections

Introduction to Intramuscular Injections (Focus on Anatomy)

Intramuscular is defined as "situated within, occurring within, or administered by entering a muscle" (Merriam-Webster). Below is a diagram of the layers of the skin. Label the diagram with the words listed and answer the questions below.

1. Subcutaneous fat
2. Blood vessels
3. Nerve fibers
4. Epidermis
5. Dermis
6. Muscle



1. Can intramuscular injections bleed? Why or why not?
2. Do intramuscular injections hurt? Why or why not?

Modified work
By Madhero88 (Own work) [CC BY-SA 3.0 (<http://creativecommons.org/licenses/by-sa/3.0/>), via Wikimedia Commons(http://commons.wikimedia.org/wiki/File:1A_Skin_layers.png)]

Merriam-Webster (2014) Dictionary. Retrieved from <https://www.merriam-webster.com/>

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Pediatric Nursing Manikin

- 3-year-old child
- CPR capabilities
- Includes immediate feedback regarding both depth and rate of compressions
 - AHA guidelines



Lessons and Activities

1. Pediatric bathing
2. Pediatric catheterization
3. Pediatric immunizations
4. Pediatric endotracheal intubation
5. Pediatric IV medication administration
6. Pediatric IV insertion
7. Pediatric ostomy care
8. Pediatric phlebotomy
9. Pediatric range of motion

Introduction to Pediatric Endotracheal Intubation Curriculum

Name: _____ Class: _____

Pediatric Intubation Quiz

Fill in the blanks with the correct answer.

1. Because of a soft epiglottis, a _____ blade should be used when intubating young children.
2. To select the correct ET tube size for a child, use a _____ tape.
3. Each intubation attempt should be less than _____ seconds to prevent hypoxia.
4. In some emergencies, a patient can be intubated awake with local _____ or without being premedicated.
5. In emergency situations, do not use an ET if there is upper airway _____ due to a foreign body.

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and Family

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Infant CPR Manikin

- Infant simulator
- Practice CPR and proper head tilt and chin lift processes
- Includes 100 face shields



Lessons and Activities

1. Assessing an emergency situation
2. How to call for emergency medical assistance
3. How to perform infant CPR
4. Hands-on practice

Emergency Infant CPR

Lesson One – Introduction to Emergency Infant CPR

LEARN: Infant CPR

30 minutes

Purpose: This activity helps participants learn about, practice, and check their understanding of the proper procedures in handling an emergency and performing infant CPR.

Materials:

- Infant CPR Manikin
- Alcohol swabs
- *Emergency Infant CPR* slide presentation
- *Check Your Skills* worksheet

Facilitation Steps:

1. Display Slides 1-7 and discuss.
2. Display Slides 8-10 and discuss. Explain that there are differences between infant and child CPR. Since we are only using the Infant CPR Manikin, we're only demonstrating and discussing infant CPR. Explain that the skills demonstrated and practiced in this lesson will be peer-assessed.

Step	Description
1. Check to see that the scene is safe.	
2. Tap the infant's foot and shout, "Are you okay?"	
3. If the infant does not respond, yell for help: • If someone comes, ask them to call for emergency medical assistance. • If no one comes, stay with the infant to start steps of CPR.	
4. Gently place the infant on a firm, flat surface.	
5. Quickly move or open clothes from the front of the chest.	
6. With two fingers, one finger width below the nipple line, give 30 chest compressions, pushing straight down $\frac{1}{2}$ to $\frac{1}{3}$ the depth of the infant's chest at a rate of 100 compressions per minute. Give two small breaths. After each compression, release pressure on the chest, allowing it to return to its normal position.	This pressure not only squeezes the heart to keep it going but it increases intrathoracic pressure.
7. Look, listen, and feel for breathing (5 to 10 seconds).	Put your head sideways down by the chest to see if the chest rises, indicating that the baby is breathing; listen by the nose and mouth area to hear if the baby is breathing.
8. Open the infant's airway.	Tilt the head and lift the chin slightly.
9. If not breathing, give two small puffs (one second each). Watch for the chest to rise with each breath.	If air does not seem to be going through, or the chest does not rise, re-tilt the head and try again. If air is not going through, the airway is blocked, and you'll need to perform the steps for airway obstruction.
10. After one minute or five sets of 30 chest compressions and two breaths, you can call for emergency medical assistance if not already done.	
11. Answer all the dispatcher's questions, then return to the infant/child and start the steps of CPR again.	

Choking Baby

- Choking baby simulator
- Choking object
- Curriculum
- Great for training for:
 - Childcare workers
 - Nursing
 - Babysitters
 - Parenting



Lessons and Activities

1. Identifying objects that can cause choking
2. Why the Heimlich Maneuver should NOT be used
3. Handling an infant airway obstruction emergency
4. Hands-on practice

Infant Airway Obstruction Emergency Procedures

What's in the Bag?

Name: _____
Date: _____

Directions: As your instructor quickly pulls objects out of the paper bag, determine whether each object is safe or unsafe for an infant or toddler under the age of four. Place your answers below, creating two lists—safe and unsafe—then explain why you made the decision you did.

Safe Objects:	Why do you think the object is safe?
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____
9. _____	_____
10. _____	_____

Unsafe Objects:	Why do you think the object is unsafe?
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____
9. _____	_____
10. _____	_____

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BVM Trainer

- Manual ventilation with a BVM
- CPR training
- 1- and 2- person techniques
- Feedback on both skills
 - AHA guidelines



Lessons and Activities

1. Purpose and parts of a bag valve mask
2. Correct use of a bag valve mask
3. Troubleshoot common bag valve mask problems

Introduction to Bag Valve Mask Ventilation Curriculum

Name: _____ Class: _____

Bag Valve Mask Check-Off

Instructor Resource

PREPARATION:

Supplies:

- Bag Valve Mask Ventilation Trainer
- Bag Valve Mask
- PPE
- Rigid suction catheter
- Suction device
- Oropharyngeal airway

After the demonstration, have participants practice bag valve mask ventilation on the ventilation trainer using the following steps:

Optional: Evaluate the participant's ability to complete bag valve mask ventilation using the following steps. May score via points or satisfactory/unsatisfactory.

1.	Takes or verbalizes appropriate PPE precautions	
2.	Checks responsiveness	
3.	Requests additional EMS assistance	
4.	Checks for breathing and pulse simultaneously for no more than 10 seconds	
<i>Instructor: Inform participant that the patient is unresponsive, apneic with a weak pulse of 58</i>		
5.	Opens airway properly	
<i>Instructor: Inform participant that the mouth is releasing secretions</i>		
6.	Prepares rigid suction catheter	
7.	Uses suction device properly	
8.	Inserts rigid suction catheter into mouth of simulator and suctions mouth	
<i>Instructor: Inform participant that the mouth and oropharynx are clear</i>		
9.	Opens the airway manually using head-tilt chin-lift	
10.	Inserts oropharyngeal airway	
<i>Instructor: Inform participant that no gag reflex is present and the patient accepts the oropharyngeal airway</i>		
11.	Ventilates the patient immediately (first ventilation is delivered within 30 seconds) using a BVM device unattached to oxygen or with BVM attached to reservoir and oxygen	
<i>Instructor: Inform participant that ventilation is being properly performed without difficulty</i>		
12.	Re-checks pulse for no more than 10 seconds	
13.	Attaches the BVM assembly (mask, bag, reservoir) to oxygen provide high oxygen concentration (at least 85%, 15 L/minute)	
14.	Ventilates the patient adequately with proper volume to cause visible chest rise (see simulator settings)	
15.	Ventilates the patient adequately with proper rate at 10-12/minute or 1 ventilation every 5-6 seconds (see simulator settings)	



Questions?





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