

First Five RCDP Coaching Guide

One of the goals of SimUAB® & UAB Clinical Simulation is to promote standardized training opportunities. As a part of that initiative, we encourage the use of coaching guides.

Coaching guides are intended to supplement the clinical expertise of the facilitator by highlighting important or helpful pieces of information at various steps of the procedure.

First Five Priority	Coaching Points
Check Responsiveness	
Expected learner action:	"Hey, hey, are you ok?"
	Shake patient
Suggested facilitator	Always assess for more than only verbal stimulation-
scripting for correction	sternal rub or shake
Suggested Facilitator next	Restart
step:	
Check Pulse	
Expected learner action:	Place finger on central pulse
	Assess for no more than 10 seconds.
	If no pulse, call out" There is no pulse" followed
	Starting chest compressions
Suggested facilitator	"I didn't see you check a pulse, or I didn't see you check a
scripting for correction	central pulse. Checking a central pulse is the best way to
	assess effectiveness of circulation.
	"There is no pulse" is an <u>action-linked phrase</u> ! Immediately
	start compressions
Suggested Facilitator next	Restart
step:	
Call for Help	
Expected learner action:	"I need help, the patient is coding. Bring a crash cart"
	Ask specifically for crash cart
Suggested facilitator	"I didn't hear you specifically ask for the crash cart.
scripting for correction	Remember the goal is to have those responding arrive
	with everything they need to manage the resuscitation."
Suggested Facilitator next	Restart/ rewind
step:	

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Expected learner action: Start CPR "This patient is pulseless, I'm starting CPR" Suggested facilitator "I didn't see you immediately start chest compressions after identifying pulselessness. Remember the words scripting for correction "under" are linked to immediately start ing chest	
"This patient is pulseless, I'm starting CPR"Suggested facilitator scripting for correction"I didn't see you immediately start chest compressions after identifying pulselessness. Remember the words	
scripting for correction after identifying pulselessness. Remember the words	
pulso" are linked to immediately starting sheet	"no
pulse" are linked to immediately starting chest	
compressions."	
Suggested Facilitator next Restart/rewind/resume (you may rotate learner roles if	
step: restarting)	
Perform High-Quality CPR	
Expected learner action: 1. Head of bed down	
2. Side rails down	
3. Stool	
4. Backboard	
5. Compressor swap	
Suggested facilitator "I want to talk about high quality CPR."	
scripting for correction Maximize effectiveness of chest compressions	
1. Head of bed down	
2. Side rails down	
3. Stool:	
- Compressor step right/ left	
- Stool placed	
- Compressor step up	
- Hand on compressor for safety	
4. Backboard	
- "I have the backboard"	
- lead the count to 3	
- Roll towards compressor	
- Minimize interruption in compressions	
5. Compressor swap	
- With pulse check if possible	
- Choreograph swap	
Minimize pause in compressions	
Appropriate rate, rhythm, and depth	
To ops: "Can you give us feedback on quality of chest	
compressions?"	
Suggested Facilitator next Rewind/resume/restart (rotate roles if restart)	
step:	

Expected learner action:	1. Defibrillator pads on
	2. Turn on
	3. Follow prompts
	4. Shock, if advised
Suggested facilitator	1. Defibrillator pads on
scripting for correction	 "Pads are on" announce to the room
	2. Turn on
	3. Follow prompts
	4. Shock, if advised
	- Charging: continue compressions
	- Clear patient: "I'm clear, you're clear, we are all
	clear."
	- Eyes on bed, finger on button (the entire time!)
	- Deliver shock: "shock delivered, continue
	compressions"
	Minimize pause in compressions
Suggested Facilitator next	Rewind/restart (you may rotate learner roles if restarting)
step:	
Prepare Epinephrine	
Expected learner action:	Check IV access
	Open box and prep abboject
	If shockable rhythm, administer after 2 nd shock
Suggested facilitator	Abboject (demonstration): flip, flip, screw, screw, green
scripting for correction	means go
	Goal: give epinephrine within 5 minutes of cardiac arrest
Suggested Facilitator next	Rewind/resume
step:	
Take Away	
Reactions	
Next steps	
Simulation safety check	