# EDUCATION OF MEDICAL STAFF FOR THE MANAGEMENT OF EMERGENCIES IN THE CHILD

MINJA PETROVIČ, MAJDA OŠTIR*

*Knowledge of resuscitation procedures is one of the basic skills that every healthcare professional should master. Any care for a life-threatening child is linked to the use of emergency equipment. Regular refinement of knowledge and practical skills is essential for effective resuscitation.*

Descriptors: EDUCATION, HEALTHCARE WORKERS, SIMULATION, RESUSCITATION

## Introduction

Resuscitation teams vary in composition, purpose and tasks. The multidisciplinary resuscitation team is made up of health professionals who are the first to attend to a child when a respiratory or cardiac arrest occurs. Healthcare professionals need to have common characteristics that affect resuscitation performance, such as knowledge, accuracy, speed, and concerted action. Their immediate response is important. When rescuing children, it is recommended to follow the principles of effective communication with one another and to know the necessary medical equipment and technical devices (Koren Golja, 2016). Any care for a life-threatening child is linked to the use of emergency equipment. For the effective maintenance and control of equipment, healthcare institutions must have a list of equipment that is attached in writing to a resuscitation cart (Petrovič and Vidmar, 2014). Theoretical knowledge is only the basis of resuscitation, and mechanical memory, knowledge and maintenance of equipment, and a confident approach can, in a real situation, make the difference between successful and unsuccessful resuscitation (Petrovič and Vidmar, 2014).

## Child rescue education

In the resuscitation, the nurse participates in: establishing an airway through intubation, establishing an airway with alternative techniques, performing artificial respiration via an endotracheal tube with a manual airway, and performing additional resuscitation procedures (Koren Golja, 2016).

Resuscitating a baby is a very stressful situation that requires a great deal of concentration from healthcare professionals. Even the most experienced describe resuscitating a baby as a stressful and difficult situation. In order to reduce stress, it is necessary to carry out trainings that lead to coordinated team work (Koren Golja,

*Univerzitetni Klinični center Ljubljana, Pediatrična klinika, Služba za pljučne bolezni

Address:
E-mail: majda.ostir@kclj.si

2016). The reduction of stress and resuscitation risks can be prevented by standardized protocols for both the establishment and maintenance of equipment and the resuscitation procedures themselves (Maul et al, 2019). Resuscitation training should not only include teaching theoretical knowledge or algorithms, but more importantly, should improve the health practitioners' practical skills. Because training under real circumstances exposes patients to risks and can traumatize inexperienced healthcare professionals, the training simulator is particularly appropriate. Provides hands-on training in critical situations without these risks. Most importantly, team interviews with videos allow health care workers to think critically about their performance and thus can help improve their skills (Hunziker et al, 2010). Simulation learning is important, in which the event is simulated with the help of a dummy and the medical staff is actively involved, which improves coherence in realistic circumstances (Koren Golja, 2016). Each participant should know what his/her tasks are, the division of labor should be organized and the scope of work should be specified. Medical algorithms, technical skills and repetitive training are the classic cornerstones for successful cardiopulmonary resuscitation. Increasing evidence suggests that human factors, including team interaction, communication, and leadership, influence resuscitation performance (Hunziker et al, 2010). The role of the nurse practitioner is also focused on providing support to the family, if present at the resuscitation. It should be emphasized that quite a few parents choose to be present at the resuscitation. The tasks are focused on: providing information, being present with the family throughout the recovery and emotional support (Koren Golja, 2016).

## Conclusion

The constant renewal of knowledge in the field of resuscitation gives the individual the opportunity to successfully work in real situations when it is necessary to save a child's life. Distress and stressful situations are also reduced in those persons who maintain their skills appropriately.

## LITERATURE


1. Hunziker S, Tschan FNK, Howell MD, Marsch S. Human factors in resuscitation: Lessons learned from simulator studies. J Emerg Trauma Shock. 2010; 3 (4): 389-94.

2. Koren Golja M. Vloga članov negovalnega tima pri oživljanju. In: Pavčnik M, ed. XIX. Izobraževalni seminar Kritično bolan in poškodovan otrok - razpoznava, zdravljenje in prevoz. Ljubljana, 2016: Klinični oddelek za otroško kirurgijo in intenzivno terapijo, Kirurška klinika, Univerzitetni klinični center: Medicinska fakulteta, Katedra za pediatrijo, 111-5.

3. Maul E, Latham B, Westgate PM. Save Time Under Pressure: Effectiveness of Standardizing Pediatric Resuscitation Carts. Hospital Pediatrics, 2016; 6 (2), 67-71.

4. Petrovič M, Vidmar I. Vzdrževanje in nadzor opreme za nujno reševanje otrok. In: Š. Grosek ed. Izobraževalni seminar Kritično bolan in poškodovan otrok - razpoznava, zdravljenje in prevoz. Ljubljana, Klinični oddelek za otroško kirurgijo in intenzivno terapijo, Kirurška klinika, Univerzitetni klinični center: Medicinska fakulteta, Katedra za pediatrijo, 2014; 93-8.

5. Vidmar I. Kdo je kdo pri oživljanju. In: Š. Grosek ed. Izobraževalni seminar Kritično bolan in poškodovan otrok - razpoznava, zdravljenje in prevoz. Ljubljana, Klinični oddelek za otroško kirurgijo in intenzivno terapijo, Kirurška klinika, Univerzitetni klinični center: Medicinska fakulteta, Katedra za pediatrijo, 2014; 99-101.