

Directions for Instructors and Course Coordinators:

The evaluation forms that follow are used to verify that participants in the ACEP eACLSTM program can demonstrate competency in the skill portion of the eACLSTM course after successfully completing the didactic portion of the course. These forms establish guidelines for competency as a team leader for simulated cardiac and respiratory emergency situations in accordance with the 2010 and 2015 American Heart Association Guidelines for Cardiopulmonary Resuscitation and Emergency Cardiovascular Care.

Make sure that all necessary equipment is readily available and in proper working condition. This equipment includes:

- Manikin
- Airway and ventilation adjuncts
- Medical exam gloves
- IV fluids/medications
- Monitor/defibrillator/TCP
- AED

Instructions:

- Explain to students that they are to assume that there are always enough ALS providers to assist with any skill.
- Follow the prompts provided on the skill sheets when assessing student performance.
- Check the "Critical Criteria" for each station before beginning the scenario.
- Indicate whether the student's actions are "Acceptable" or "Unacceptable" in the appropriate column.
- If a student fails a station, he or she is given another opportunity to pass the station after appropriate remediation. Repeated failure of the station indicates the need for further remediation, and it may be necessary to recommend that the student repeat the course.
- If you are failing a student, document your findings in the "Comments" section of each station.
- Students are exempt from the CPR and AED skill assessment if they possess a current CPR and AED card.
- In the MegaCode station, students must recognize several rhythm changes and treat them appropriately.

Name		
Date		
Pass	Fail	
Evaluator		

Skill Assessment: CPR and AED

Scenario: You are responding to an adult who suddenly collapsed. There is no trauma involved in this witnessed event. You are assisted by a team of basic life support (BLS) providers.

General Steps	Appropriate Actions	Evaluator Response/Prompt	Acceptable	Unacceptable
Scene Assessment	Verbalize scene safety Verbalize taking standard precautions	Scene is safe		
Responsiveness and Breathing Assessment & Intervention	Assess responsiveness (tap & shout) Check chest movement Request additional help per protocol	Victim is unresponsive and not breathing		
Circulation Assessment & Intervention	Check carotid pulse (maximum 10 seconds) If AED unavailable, verbalize CPR performed (30:2) until AED available If AED available, apply now	No signs of circulation An AED is not available An AED is available now		
Defibrillation	Turn on the device Apply pads to bare, dry chest Stand clear Analyze rhythm Stand clear Deliver shock when indicated (1)	Shock advised Shock delivered		
CPR	Verbalize performing 2 minutes of CPR (30:2)	CPR is effective		
Reassessment & Intervention	Reanalyze rhythm If no shock advised, and condition unchanged, continue CPR for another 2 minutes and allow AED to reanalyze Verbalize assessing vital signs	Pulse present; breathing absent		
	Provide rescue breathing Verbalize monitoring and treating any change in condition	Chest rises with ventilation		

Critical Criteria	
Unacceptable actions resulting in failure of this station are:	
☐ Failure to recognize patient is in cardiac arrest	
☐ Failure to begin CPR promptly until an AED is available	
☐ Failure to provide defibrillation without delay	
☐ Failure to provide for safety during defibrillation	
☐ Failure to reassess and treat victim appropriately	
Comments:	

Name		
Date		
Pass	Fail	
Evaluator		

Skill Assessment: Airway and Ventilation Management

Scenario: You are responding to an adult who suddenly collapsed. There is no trauma involved.

You are assisted by a team of advanced life support (ALS) providers.

Criteria	Appropriate Actions	Evaluator Response/Prompt	Acceptable	Unacceptable
Scene Assessment	Verbalize scene safety Verbalize taking standard precautions	Scene is safe Standard precautions taken		
Responsiveness and Breathing Assessment & Intervention	Assess responsiveness (tap & shout) Check chest movement Request additional help per protocol	Victim is unresponsive and not breathing		
Circulation Assessment & Intervention	Check pulse Provide ventilation Verbalize applying a cardiac monitor Verbalize starting an IV	Pulse present; breathing absent Chest rises with ventilation		
Airway Management & Ventilation	Manage the patient's airway according to the scope of practice and maintain oxygen level above 94%	Equal chest rise noted Good lung sounds ETCO ₂ change noted		
Reassessment & Intervention	Verbalize assessing vital signs and verbalize monitoring and treating any change in condition	Pulse present; breathing absent		

Critical Criteria

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Unac	ceptable actions resulting in failure of this station are:		
	Failure to open airway	•	
	Failure to check for and treat apneic victim		
	Failure to appropriately manage the airway		
	Failure to determine proper placement of the airway adjunct device		
	Failure to reassess and treat victim appropriately		

Comments:		

Name		
Date		
Pass	Fail	
Evaluator		

Skill Assessment: Cardiac Arrest Management (MegaCode)

Scenario: You are responding to an adult who suddenly collapsed. There is no trauma involved.

Bystander CPR is in progress upon your arrival, three minutes later. You are assisted by a team of

ALS providers.

General Steps	Appropriate Actions	Evaluator Response/Prompt	Acceptable	Unacceptable
Scene Assessment	Verbalize scene safety Verbalize taking standard precautions Verbalize bystanders to stop CPR	Scene is safe Standard precautions taken		
Responsiveness and Breathing Assessment & Intervention	Assess responsiveness (tap & shout) Check chest movement Request additional help per protocol	Victim is unresponsive and not breathing		
Circulation Assessment & Intervention	Check pulse Verbalize CPR performed (30:2)	No pulse		
Defibrillation & CPR	Apply monitor/ defibrillator for quick look Pause chest compressions for no more than 10 seconds to evaluate the cardiac rhythm Stand clear Deliver shock at proper energy level Immediately resume chest compressions following defibrillation	V-tach Shock delivered		
Additional Assessment & Intervention	During CPR: ECG monitoring/start an IV Consider possible causes of condition			
Airway Management & Ventilation	Manage the patient's airway according to the scope of practice and maintain oxygen level above 94%	Equal chest rise noted Good lung sounds ETCO ₂ change noted		

Reassessment	Pause chest compressions for no more than 10 seconds to evaluate the cardiac rhythm Reassess ECG and patient	No pulse V-fib	
Defibrillation & CPR	Stand clear Deliver shock at proper energy level Immediately resume chest compressions following defibrillation	Shock delivered	
Vasopressor	During CPR: Give epinephrine (1 mg IVP q 3-5 min)	Medication administered	
Reassessment	Stop CPR after 2 minutes Reassess ECG and patient	No pulse V-fib	
Defibrillation & CPR	Stand clear Deliver shock at proper energy level Immediately resume chest compressions following defibrillation	Shock delivered	
Antiarrhythmic	During CPR: Give one of the following: Amiodarone (300 mg IVP) Lidocaine (1–1.5 mg/kg IVP)	Medication administered	
Reassessment & Intervention	Reassess ECG and patient after 2 minutes Evaluate rhythm appropriately Verbalize treating any change in condition	Option 1: Pulse present; no breathing; junctional rhythm Option 2: No signs of circulation; asystole (Select one option and treat rhythm conversion and patient condition appropriately)	

Criti	cal Criteria
Unac	ceptable actions resulting in failure of this station are:
	Failure to recognize V-fib/V-tach
	Failure to treat pulseless victim with CPR
	Failure to provide defibrillation without delay
	Failure to provide for safety during defibrillation
	Failure to properly defibrillate victim
	Failure to determine proper placement of the airway adjunct device
	Failure to administer appropriate treatment (electrical or pharmacological) for the victim's changing
	rhythm/condition
	Failure to recognize converted rhythm and vital sign changes
	Failure to reassess and treat victim appropriately
Com	ments:

Pass Fail Evaluator Skill Assessment: ECG Arrhythmia Recognition and Treatment Modalities dentify each rhythm and provide the proper treatment modalities. #1 From Arrhythmia Recognition: The Art of Interpretation, courtesy of Tomas B. Garcia, MD. Pt. Information: No signs of circulation Rhythm: Treatment:	Name								
Skill Assessment: ECG Arrhythmia Recognition and Treatment Modalities dentify each rhythm and provide the proper treatment modalities. #1 From Arrhythmia Recognition: The Art of Interpretation, courtesy of Tomas B. Garcia, MD. Pt. Information: No signs of circulation Rhythm: Treatment: #2 #2 From Arrhythmia Recognition: The Art of Interpretation, courtesy of Tomas B. Garcia, MD.	Date								
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From Arrhythmia Recognition: The Art of Interpretation, courtesy of Tomas B. Garcia, MD.	#2								
From Arrhythmia Recognition: The Art of Interpretation, courtesy of Tomas B. Garcia, MD.									
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#3
From Arrhythmia Recognition: The Art of Interpretation, courtesy of Tomas B. Garcia, MD.
Pt. Information: Mild headache, BP 120/70 mm Hg Rhythm: Treatment:
#4 II From Arrhythmia Recognition: The Art of Interpretation, courtesy of Tomas B. Garcia, MD. Pt. Information: Shortness of breath, confusion, BP 84/50 mm Hg
Rhythm:
#5 Market Marke
Pt. Information: No signs of circulation Rhythm: Treatment:



