

HeartCode ACLS Course Overview

Original Release Date: 11/2003

Date of Last CME Review: September 2008

DESCRIPTION:

HeartCode™ ACLS is the official, self-directed, comprehensive e-learning program from the American Heart Association® (AHA). HeartCode™ ACLS is an e-learning product that uses microsimulation technology to present realistic patient scenarios. Students are presented with a Team Dynamics lesson, 10 ACLS cases in hospital-based scenarios, and a written test. While interacting with the program, students assess each patient, formulate a treatment plan based on ACLS guidelines, and provide treatment. Successful completion of the cognitive component, paired with skills verification provided by an AHA ACLS Instructor or a voice assisted manikin system meets the requirements for the issuing of an AHA ACLS Provider card to the participant.

LEARNING OBJECTIVES:

At the conclusion, participants should be able to: Recognize and initiate early management of peri-arrest conditions that may result in cardiac arrest or complicate resuscitation outcome; Demonstrate proficiency in providing BLS care, including prioritizing chest compressions and integrating AED use; Manage cardiac arrest until return of spontaneous circulation, termination of resuscitation, or transfer of care; Identify and treat ischemic chest pain and expedite the care of patients with acute coronary syndromes; Recognize other life threatening clinical situations, such as stroke, and provide effective initial care and transfer to reduce disability and death; Demonstrate effective communication as a member or leader of a resuscitation team and recognize the impact of team dynamics on overall team performance.

CONTINUING EDUCATION CREDIT:

ACCREDITATION TERMS:

- ACCME/AMA (Physicians) - September 2008 – September 2011
- ANCC (Nurses) - September 2010 – September 2011
- ACPE (Pharmacists) - September 2008 – September 2011
- CECBEMS (EMS Practitioners) - September 2008 – September 2011

ACCREDITATION STATEMENTS:

Continuing Medical Education Accreditation - Physicians

The American Heart Association is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

The American Heart Association designates this educational activity for a maximum of 12.00 *AMA PRA Category 1 Credits*™. Physicians should only claim credit commensurate with the extent of their participation in the activity.

All faculty participating in CME/CE activities sponsored by The American Heart Association will disclose to the audience (1) significant financial relationships with the manufacturer(s) of products from the commercial supporter(s) and /or the manufacturer(s) of products or devices discussed in their presentation, and (2) unlabeled/unapproved uses of drugs or devices discussed in their presentation. Such disclosures will be made in writing in course presentation materials.

Continuing Medical Education Accreditation – Physician Assistants

AAPA accepts Category I credit from AOACCME, Prescribed credit from AAFP, and *AMA PRA Category 1 Credit™* from organizations accredited by ACCME.

Continuing Education Accreditation - Nurses

The American Heart Association is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.

The maximum number of hours awarded for this CE activity is 12.0 contact hours.

Continuing Education Accreditation – Pharmacists



The American Heart Association is accredited by the Accreditation Council for Pharmacy Education as a provider of continuing pharmacy education. ACPE Credit: 12.00 Contact Hours or 1.200 CEUs. Universal Program Number: 256-000-08-569-H01-P.

Successful completion of this CME/CE activity includes completion of the following: Team resuscitation lesson, 10 interactive medical cases, posttest and evaluation form. Once successful completion has been achieved, a CME/CE certificate can be claimed immediately by selecting your profile, selecting the "Claim CME/CE Certificate" button and printing your CME/CE certificate.

Continuing Education Accreditation – Emergency Medical Services

This continuing education activity is approved by the American Heart Association, an organization accredited by the Continuing Education Coordinating Board for Emergency Medical Services (CECBEMS), for 12.00 Advanced CEHs, activity number 08-AMHA-F3-0053.

DISCLOSURE FOR HEARTCODE ACLS 2008:

I. Instructions for Independent Study

Successful completion of this CE activity includes the following:

- (1) Complete the Team Dynamics lesson, the 10 cases with a debriefing grade of 70% or above and the written test.
- (2) Complete the course Evaluation form.
- (3) Print Certificate/Statement of Credit.

II. Cost

There is no additional fee for CME/CE/CEH credits for this activity.

Disclosure Statement

As a sponsor accredited by the Accreditation Council for Continuing Medical Education (ACCME), the American Association of Critical-Care Nurses (AACN), the Accreditation Council for Pharmacy Education (ACPE), and the Continuing Education Coordinating Board for Emergency Medical Services (CECBEMS), the American Heart Association must ensure fair balance, independence, objectivity, and scientific rigor in all of its individually sponsored or jointly sponsored educational activities.

Accreditation / Disclosure Statements

Therefore, all faculty and authors participating in continuing education activities sponsored by the American Heart Association must disclose to the audience: (1) any significant financial relationships with the manufacturer(s) of products from the commercial supporter(s) and/or the manufacturer(s) of products or devices discussed in the activity, and (2) unlabeled/unapproved uses of drugs or devices discussed in the activity. The intent of this disclosure is not to prevent an author with a significant financial or other relationship from contributing but rather to provide participants with information with which they can make their own judgments. It remains for the participants to determine whether the author's interests or relationships may influence the content.

I. The following authors have declared financial interest(s) and / or affiliations:

II. The following faculty have declared NO financial interest(s) and or affiliations:

Name

John Field, MD

Erik Soderberg, MS

Unlabeled/unapproved uses of drugs or devices is included in this activity

This continuing education computer-based instruction contains recommendations from the American Heart Association Emergency Cardiovascular Care Committee, Subcommittee on Advanced Cardiovascular Life Support, as published in the American Heart Association ACLS Provider Manual. Most of these recommendations are based on guidelines developed in an evidence evaluation consensus process for the Guidelines 2005 Conference. The evidence evaluation consists of expert review, an analysis, and discussion of relevant scientific studies published in peer-reviewed journals. The drug treatments recommended in this text are consistent with the indications, contraindications, and doses approved by the Food and Drug Administration (FDA) with the exceptions listed here.

Alteplase, recombinant (rtPA)

For patients with acute ischemic stroke who are not candidates for IV thrombolysis, administration of intra-arterial thrombolysis in an experienced stroke center with immediate access to cerebral angiography and qualified interventionalists may be considered within the first few hours after onset of symptoms. Facilities are encouraged to define criteria to credential individuals who can perform intra-arterial thrombolysis (Class I, Level of Evidence C). Intra-arterial thrombolysis is reasonable in patients who have contraindications to use of intravenous thrombolysis, such as recent surgery (Class IIa, Level of Evidence C) Intra-arterial administration of tPA has not yet been approved by the US Food and Drug administration (FDA).

Amiodarone

This drug is FDA approved for life-threatening ventricular arrhythmias, including recurrent VF and hemodynamically unstable VT. All other use constitutes an “off-label” indication, including hemodynamically stable VT, wide-complex tachycardia of uncertain origin, AF, atrial flutter, pre-excited arrhythmias and arrhythmias in context of CHF. Similarly, the use of IV amiodarone for “shock refractory VF/VT” would not be an off-label use if given as a 150 mg dose, but giving it as a 300 mg bolus for this approved indication could be construed as “off label.”

Vasopressin

This drug is approved for diabetes insipidus, abdominal distention, and abdominal roentgenography.

Vasopressin has not been shown to differ from Epinephrine (Class Indeterminate) in cardiac arrest. One dose of vasopressin may replace either the first or second dose of epinephrine.

Note on Medication Doses

Emergency cardiovascular care is a dynamic science. Advances in treatment and drug therapies occur rapidly. Readers are advised to check for changes in recommended dose, indications, and contraindications in the following sources: Currents in Emergency Cardiovascular Care, future editions of this handbook, and the AHA textbooks as well as the package insert product information sheet for each drug.

Clinical condition and pharmacokinetics may require drug dose or interval dosing adjustments. Specific parameters may require monitoring, for example, creatinine clearance or QT interval.

Some medications listed in this handbook were scientifically reviewed by the Guidelines evidence-based evaluation process. They may not be available in all countries and may not be specifically approved by the FDA for a particular treatment or application.

TARGET AUDIENCES:

Primary Audience:

- Physicians
- Nurses
- Paramedics/EMT-Is
- Residents
- Nurse Practitioners
- Physician Assistants
- Clinical Pharmacists
- Respiratory Therapist