

CSA 1a: Basic Life Support - Infant

| Competency Statement: Demonstrate the knowledge and skills required to perform Basic Life Supp | port on an Infai | nt (< 1 year) | |
|---|------------------|-----------------------------|--|
| Instructional Strategies: Learning module, demonstration / observation and supervised practise or | n manikins | | |
| Name: Date: | | | |
| Organisation: Work Unit: | Work Unit: | | |
| This clinical assessment is to be completed following review of the Basic Life Sup | port informa | tion. | |
| Element One – Assess for danger | | | |
| Performance Criteria | Achieved | Learning Need Identified | |
| 1.1 Checks area for danger to themselves, victim & others 1.2 Removes any hazards 1.3 Approaches victim safely 1.4 States infection control considerations when delivering first aid and CPR | | | |
| Element Two – Assesses responsiveness | | - | |
| Performance Criteria | Achieved | Learning Need Identified | |
| 2.1 Uses verbal and tactile stimuli to rouse, specific for an infant 2.2 Considers disabilities when stimulating | | | |
| Element Three – Activates Resuscitation procedure by Sending for | help | | |
| Performance Criteria | Achieved | Learning Need Identified | |
| 3.1 Raises alarm using appropriate method 3.2 Sends others to seek assistance (when possible) 3.3 Checks the time resuscitation commences (not mandatory) | | | |
| Element Four — Clears / establishes a patent airway | | | |
| Performance Criteria | Achieved | Learning Need Identified | |
| 4.1 If the airway is obstructed, turns victim on side, clears mouth and nostrils 4.2 Performs finger sweep to level of front gums/teeth 4.3 Demonstrates removal of foreign objects using back blow method 4.4 Opens airway – places infant's head in a neutral position with jaw supported 4.5 List three (3) causes of airway obstruction | | | |



| Element Five — Assesses for breathing | | |
|---|----------------|-----------------------------|
| Performance Criteria | Achieved | Learning Need Identified |
| 5.1 Maintains appropriate head position (neutral position) 5.2 Assesses for breathing 5.2.1 Looks for movement of chest and upper abdomen 5.2.2 Listens for escape of air from nose and mouth 5.2.3 Feels for movement of chest and upper abdomen | | |
| Element Six — Administers chest compressions | | |
| Performance Criteria | Achieved | Learning Need Identified |
| 6.1 Locates correct site for external cardiac compressions 6.2 Administers compressions at correct rate and depth 6.3 Uses 2 fingers or 2 thumb technique to administer chest compressions 6.4 Administers compressions and breaths at correct ratio for both 1 or 2 rescuers, i.e. at a ratio of 30 compressions to 2 breaths [30:2] 6.5 States when the rescuer performing compressions should change with another person, i.e. after delivering 5 cycles of [30:2] or 2 minutes 6.6 Demonstrates advanced CPR for 2 healthcare rescuers (victim not intubated at correct ratio, i.e. at a rate of 15 compressions to 2 breaths [15:2] |) | |
| Element Seven – Ceasing CPR | 1 | _ |
| Performance Criteria | Achieved | Learning Need Identified |
| 7.1 States the accepted reasons for ceasing CPR once commenced | | |
| Reference: ANZCOR Guidelines (January 26) Competency Achieved: YES NO Comments | 016), ILCOR Gu | idelines (2015). |
| Assessor's Signature Assessor's Name | (РІраза Р | |
| Assessee's Signature | (1 16036 T | 1 mt/ |



CSA 1b: Basic Life Support - Child

| Competency Statement: | tatement: Demonstrate the knowledge and skills required to perform Basic Life Support on a child (I – 8 years) | | |
|--|---|--------------|-----------------------------|
| Instructional Strategies: | Learning module, demonstration \prime observation and supervised practise o | n manikins | |
| Name: | Date: | | |
| Organisation: | Work Unit: | | |
| This clinical asses | sment is to be completed following review of the Basic Life Sup | port informa | tion. |
| Element One – As | ssess for danger | | |
| Performance Crit | eria | Achieved | Learning Need Identified |
| 1.2 Removes any ha 1.3 Approaches vict | | | Tabiliniba |
| Element Two – A | ssesses responsiveness | | |
| Performance Crit | eria | Achieved | Learning Need Identified |
| | tactile stimuli to rouse, specific for a child ilities when stimulating | | |
| Element Three — | Activates Resuscitation procedure by Sending for | help | |
| Performance Crit | eria | Achieved | Learning Need Identified |
| 3.2 Sends others to | ing appropriate method seek assistance (when possible) resuscitation commences (not mandatory) | | idonimod |
| Element Four — [| Clears / establishes a patent airway | | |
| Performance Crit | | Achieved | Learning Need Identified |
| 4.2 Performs finger4.3 Demonstrates r4.4 Opens the airwa | obstructed, turns victim on side, clears mouth sweep to level of front teeth emoval of foreign objects using back blow method by by applying head tilt and chin lift manoeuvre uses of airway obstruction | | |



| Element Five – Assesses | for breathing | | |
|----------------------------------|--|----------------|-----------------------------|
| Performance Criteria | | Achieved | Learning Need Identified |
| 5.1 Maintains appropriate bac | ward head tilt and jaw support | | Tabilitia |
| 5.2 Assesses for breathing | ina a nead the and Jan support | | |
| e e | ent of chest and upper abdomen | | |
| | of air from nose and mouth | | |
| _ | nt of chest and upper abdomen | | |
| Element Six – Administer | s chest compressions | L | |
| Performance Criteria | | Achieved | Learning Need Identified |
| 6.1 Locates correct site for ext | ernal cardiac compressions | | |
| 6.2 Administers compressions | - | | |
| 6.3 Maintains vertical position | above victim and maintains straight arm/arms | | |
| | and breaths at correct ratio for both 1 or 2 0 compressions to 2 breaths [30:2] | | |
| | rforming compressions should change with | | |
| = | delivering 5 cycles of [30 : 2] or 2 minutes | | |
| | PR for 2 healthcare rescuers (victim not intubate te of 15 compressions to 2 breaths [15:2] | ed) | |
| Element Seven – Ceasing | CPR | L | |
| Performance Criteria | | Achieved | Learning Need Identified |
| 7.1 States the accepted reason | s for ceasing CPR once commenced | | |
| | Reference: ANZCOR Guidelines (January | 2016), ILCOR G | uidelines (2015). |
| Competency Achieved | ven 🗖 | | |
| Competency Achieved: | YES NO | | |
| Comments | | | |
| | | | |
| | | | |
| Assessor's Signature | Assessor's Name | /ni | |
| | | (Please | Print) |
| Assessee's Signature | | | |



CSA 2: Basic & Advanced Airway Management (Paediatric)

| Competency Statement: Instructional Strategies: | Demonstrate the knowledge and skills Learning module, demonstration / obs | | • | nanagement |
|--|---|--|----------------|-----------------------------|
| Name: | | Date: | | |
| Organisation: | | Work Unit: | | |
| This clinical assess | ment is to be completed following | review of Airway Manager | nent informati | on. |
| Element One - Estal | blishes a patent airway | | | |
| Performance Criter | | | Achieved | Learning Need Identified |
| 1.2 Demonstrates corairway. 1.2.1 Sizes from constrates corrairway. 1.3 Demonstrates corrairway. 1.3.1 Sized from ton 1.3.2 Inserts airway. | rect head positioning to establish rect sizing and insertion techniquentre of mouth (incisors if present) to serts airway into the oropharynx by rect sizing and insertion techniquents of nose to tragus of the ear ay using a twisting motion bevel end flange touches nare | ue for oropharyngeal o angle of the mandible sliding over the tongue te for nasopharyngeal | | |
| Element Two – Den | nonstrates use of airway a | adjuncts | | |
| Performance Criter | ia | | Achieved | Learning Need Identified |
| 2.1.1 Prepares equ 2.1.2 States O_2 tur 2.1.3 Performs eff 2.1.4 States amoun 2.1.5 Identifies con | nt of ventilation delivered is sufficier mplications associated with hyperversion of air into stomach, † intrathoracic perseal around mask. | nt to make chest rise and fall ntilation | | |
| Element Three — De | emonstrates insertion of L | MA | | |
| Performance Criter | ia | | Achieved | Learning Need Identified |
| Syringe 3.2 Identifies correct s 3.3 Deflates cuff of LM 3.4 Demonstrates corr 3.5 Recommences oxy 3.6 Assesses LMA place | ize of LMA to be inserted A and lubricates upper surface. rect insertion technique for LMA genation of victim. cement. lateral chest expansion; auscultates be | | | |



| Element Four - Intubation | | |
|---|----------|-----------------------------|
| Performance Criteria | Achieved | Learning Need Identified |
| 4.1 Prepares suction and intubation equipment. Laryngoscope & approp. blade with light source Appropriate sized endotracheal tube (ETT) Syringe – 10 mL & Lubricant (water-soluble) 4.2 Identifies correct size of ETT to be inserted. 4.3 Lubricates tube if requested. 4.4 Correctly passes laryngoscope to operator. 4.5 Discusses application of cricoid pressure. 4.6 States when cricoid pressure should not be performed. Response: If there is swelling of the front of the neck from recent trauma or if the victim is actively vomiting 4.7 Correctly passes ETT to operator (operator inserts ETT) 4.8 Inflates cuff (if present) using air-filled syringe if instructed by operator 4.9 Recommences oxygenation of victim. 4.10 Assesses ETT placement. Observes for bilateral chest expansion Auscultates both lungs over the bases and over epigastrium Attaches end-tidal carbon dioxide (CO₂) monitor (if available) 4.11 Determines depth of ETT insertion by reading centimetre markings on tube. 4.12 Secures ETT using tape available. 4.13 Demonstrates ventilation via ETT. 4.14 Documents depth of ETT insertion stating reading obtained at gums or at teeth. 4.15 States reasons for noting ETT position. To detect ETT movement/displacement 4.16 States chest x-ray is required for final verification of tube placement. 4.17 States intubation procedure to result in minimal interruption to CPR. | | iuentineu |
| 4.18 Describes the complications associated with endotracheal intubation. (i.e. hypoxia; malposition; trauma; haemodynamic compromise) | | |
| Reference: ANZCOR Guidelines (January 20 Competency Achieved: YES ND Comments | | |
| Assessor's Signature Assessor's Name | | |
| Assessee's Signature | | |



Competency Statement:

CSA 3: Clinical Scenario: Cardiac Arrest Management (Paediatric)

Demonstrate the knowledge and skills required to manage a cardiac arrest scenario

| Instructional Strategies: Learning module, demonstration / observation, supervised practise on manikins | | | |
|---|-------------------------------------|-----------------------------|--|
| Name: | Date: | | |
| Organisation: | Work Unit: | | |
| This clinical assessment is to be completed following reviewing information. | ew of the Cardiac Arrest Clinical M | anagement | |
| Element One — Team member role identification | | | |
| Performance Criteria | Achieved | Learning Need Identified | |
| Clearly identifies team leader's role. 1.1.1 Undertakes clinical management of the resuscitation 1.1.2 States name on arrival and identifies from ALS response team 1.2 Directs team in correct sequence of events. 1.2.1 Gives clear directions 1.2.2 Co-ordinates personnel and delegates duties 1.2.3 Projects a calm, positive manner 1.3 Maintains safety specific to the arrest procedure. | ı | | |
| 1.3.1 Maintains electrical safety 1.3.2 Disposes of sharps appropriately 1.3.3 Uses standard precautions → personal protective equipment (1.4 Outlines implementation of appropriate biohazard procedures a | as appropriate | | |
| Element Two — Kecognition of required algorithm | | | |
| Performance Criteria | Achieved | Learning Need Identified | |
| 2.1 Recognises and demonstrates appropriate management for the sover): 2.1.1 Ventricular Fibrillation 2.1.2 Pulseless Ventricular Tachycardia 2.1.3 Asystole 2.1.4 PEA 2.2 Recognises additional common rhythms and demonstrates appr (e.g. SR, SB, ST, SVT). 2.3 For each rhythm change and identification, performs patient ass instigating treatment (systematic patient assessment) | ropriate management | | |
| Element Three – Management of Arrest procedur | e | | |
| Performance Criteria | Achieved | Learning Need Identified | |
| 3.1 Briefly assesses rhythm (& pulse taking no > 5 seconds) prior to defibrillation. 3.2 Identifies correct joules required for defibrillation (4J/kg BW). 3.3 Ensures continuation of CPR between all procedures, with minimum. | | | |
| 9.4. Ensures appropriate basic and advanced airway management is | - | | |



| Element Three – Management of Arrest procedure (continued) | | |
|--|----------------|-----------------------------|
| Performance Criteria | Achieved | Learning Need Identified |
| 3.5 Identifies the correct dose, route, actions and indications for the following drugs: | | IUEIILIIIEU |
| 3.5.1 Adrenaline 3.5.3 Calcium, Magnesium, Potassium 3.5.2 Amiodarone, Lignocaine 3.5.4 Sodium Bicarbonate | | |
| 3.6 States a 'flush' is required after each drug given. | | |
| 3.7 States maintenance of CPR required to obtain circulation of drug. | | |
| Element Four — Post Resuscitation Care | | |
| Performance Criteria | Achieved | Learning Need Identified |
| 4.1 Ensures adequate airway maintenance and oxygenation. | | |
| 4.2 Identifies appropriate observations \rightarrow pulse, respirations, BP, body T°, SpO ₂ , neuro. | | |
| 4.3 Identifies appropriate investigations and procedures → BGL, CXR, FBC, Electrolytes, ABGs (as required). | | |
| 4.4 States the required post-resuscitation care measures to be instigated for the patient. | | |
| 4.4.1 Airway management & ventilation 4.4.2 Monitoring → rhythm & perfusion | | |
| 4.4.3 Seizure Control \rightarrow monitor for seizure activity | | |
| 4.4.4 Blood Glucose Control → avoid hypoglycaemia and hyperglycaemia 4.4.5 Targeted Temperature Management → avoid hyperthermia, discusses TTM | | |
| 4.5 States care required for family → support family members, answer questions, clarify information and offer comfort. | | |
| 4.6 States components of Critical Incident debriefing for staff. 4.6.1 Promotes positive aspects of the response system, the team and the resuscitation 4.6.2 Allow team members to discuss the arrest 4.6.3 Encourage team members to share feelings or anxieties 4.6.4 Inform team members they can contact the team leader with questions or seek clarification of any points | | |
| Reference: ANZCOR Guidelines (January | 2016), ILCOR G | uidelines (2015). |
| Clinical Scenarioas selected from "Clinical Scenario History & Assessment" set: | | |
| Scenario 1: | | |
| Scenario 2: | | |
| Scenario 2: | | |
| Competency Achieved: YES 🗖 NO 🗖 | | |
| Comments | | |
| Comments | | |
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| Assessor's Signature Assessor's Name | (Please Prir | |
| | (116926 41) | IL <i>)</i> |
| Assessee's Signature | | |