



Resuscitation Competition 2023 Rules

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Location

Palau De Congressos De Barcelona, Avenida La Reina Maria Cristina 08004, Barcelona, Spain.

Timing

Preliminary round: Thursday, November 2 & Friday, November 3, 2023. Final: Saturday, November 4, 2023.

Transport and accommodation

Transport and accommodation are at the expense of the participating teams.

Registration

Registration for the ERC Congress is mandatory for the Resuscitation competition participants. A reduced registration fee is available for team members. There are no additional costs for entry to the competition.

Scope

The competition is restricted to adult and paediatric Advanced Life Support according to the current ERC Guidelines.

Composition of teams

Teams must be composed of a team leader plus a maximum of four team members (smaller numbers allowed). All team members must be registered doctors, paramedics, nurses or allied health professionals (e.g. physiotherapists). Students of Medicine or Nursing may participate if they are regularly participating in resuscitation as part of their clinical practice.

Number of teams / selection

The National Resuscitation Councils will be contacted to select a team to represent them. If places remain available by the 15th September 2023 then the competition will be opened up to individual teams who can apply via the ERC congress secretariat. Places will be offered on a first come first served basis.

Competition rules

There will be two rounds; round one on days 1 and 2 of the Congress and the final round on day 3. The three teams with the highest score from round one will compete in the final. Each scenario will be assessed by two judges (ERC ALS / EPALS instructors) who will present the clinical scene, circulate during the scenario and monitor the quality of teamwork. The judges will be independent from the teams to avoid a COI. The schedule of participation for teams and judges will be created in order to avoid any potential conflict of interest through country of origin.

Scenarios will be presented / run in English.

The level of fidelity for simulations will be equivalent to the ERC ALS / EPALS course. Teams will be scored on adherence to the current ERC Guidelines according to the four-point scoring system (Napier et al. Resuscitation. 2009 Sep;80(9):1034-8.) and on the quality of CPR as measured by the manikin. The maximum duration of every scenario is 15 minutes. No mechanical CPR devices are allowed.

Standard ALS / EPALS equipment will be available to participants. The organisers provide this. Teams will not be allowed to use their own equipment with the exception of CPR feedback devices. The use of real time CPR feedback devices is allowed. Teams must provide their own if required. If teams wish to familiarise themselves with equipment used they should present themselves to the judges no sooner than 15 minutes prior to their allotted scenario time.

After each team participates there will be a short debriefing in front of the audience. Judges will not reveal scores at this point but will facilitate reflection using techniques based on Rudolph, J. W et al (2007) Debriefing with good judgment: combining rigorous feedback with genuine inquiry. Anaesthesiology clinics, 25 (2): 361-376.

Teams should not share information about the scenarios nor observe other teams or try and obtain information about the CPR competition tasks from any source before participating in the competition. Violation of these rules by a team member will result in disqualification of the whole team.

All teams will sign a fair play agreement prior to participation. Each team will be sent the CPR competition schedule. The team should appear at the designated area between 15 and 5 minutes in advance of their allotted start time. Failure to attend at the allotted location and time will result in disqualification.

Every scenario is strictly limited for time. The time for each scenario begins after the judges give the scenario to the team and confirm its understanding. When the allotted time has elapsed, the judge will terminate the scenario and no further marks will be allocated after this point.

During the scenario the team will receive information about the patient's status. Any other information, needed for further treatment, should be obtained either by examining the manikin or from the leading judge. Judges will provide information only after a clear request of the team members/leader. All questions must be related directly to the scenario. All medical interventions will be performed on the manikin and if that is not possible they should be simulated in real time .

Scoring

Preliminary rounds, Adult manikins: scoring will be calculated based on the combination of two elements:

- 1) Detail and degree of assessment as well as adherence to treatment protocols.
Scoring in this element will be based on the four-point system as described by Napier et al., (Resuscitation. 2009 Sep;80(9):1034- 8.) This element will account for 50% of the available marks.
- 2) Quality of CPR
Scoring in this element will be automatically calculated by the CPR quality measurement tool built into the manikin operational system and includes the following:
 - Chest compression depth
 - Chest compression rate
 - Recoil
 - Flow fraction
 - Ventilation rate
 - Time to first defibrillation (starting from time of collapse/cardiac arrest initiation)

This element will account for the other 50% of the available marks.

The three teams with the highest scores will be entered into a final round where they will participate in a paediatric scenario. Scores will be 'reset' to zero for the final for all teams.

Final round, Paediatric manikin: scoring will be calculated based on the combination of two elements:

- 1) Detail and degree of assessment as well as adherence to treatment protocols.
Scoring in this element will be based on the four-point system as described by Napier et al., (Resuscitation. 2009 Sep;80(9):1034-8.) This element will account for 50% of the available marks.
- 2) Teamwork / Team Leadership
Scoring in this element will be based on the Team Emergency Assessment Measurement as described by Cooper et al., (Resuscitation. 2010 Apr;81(4):446-52)
This element will account for 50% of the available marks.

The highest scoring team in this final scenario will be declared the winner. The Judges' decision is final, no appeal is possible.

Outfit

Teams are encouraged to participate in their usual work uniform.

Award

- A trophy
- Title of "ERC Resuscitation Champions 2023"
- Free access to the next ERC congress for every team member of the winning team
- Invitation to defend the title at the next meeting

Notes:

1. Depending on the number of teams, it is possible for the programme to have minor changes.
2. The final version of the CPR competition schedule will be sent to registered participants of the congress not later than 3 weeks prior to the competition.
3. All the information about the competition will be delivered on the ERC congress website.