

Changes to ARTC resources v1.3 to 1.4a

Pg14 Table of abnormal vital signs – abnormal breathing <8 added

Pg 16 – removal of term absent breathing for clarity (difference between oxygen therapy and oxygen used during resus).

Pg 17 – term near drowning replaced with ‘drowning’.

Pg 18 – hypoventilation. Sentence ‘The carbon dioxide level rises, leading to inadequate oxygen in the blood’. Replaced for factual accuracy with ‘The blood carbon dioxide level rises leading to a decreased conscious state, and the blood oxygen level falls leading to inadequate supply to vital organs’. (also changed suggested answer to assessment question in D&A guide, Q 13)

Pg30 Removal of advice on how to clean equipment after resus as we now encourage use of disposable equipment. Reworded to:

After use, disposable items should be discarded appropriately. Any equipment that is to be reused should be cleaned as per the manufacturer’s guidelines .

Pg 32 When to insert an OP airway

Text changed to say that an OP airway can be inserted whilst the patient is on their back. Text that says CPR has to be paused to insert the airway removed. Break-out box that says OP airway should not be inserted during delivery of compressions removed.

NB: Also included in New Things to Note in Delivery and Assessment guide

Pg 36 Hypoxia caused by suction

‘Correction: ‘Hypoxia (lack of oxygen) is always a risk when suction is used’ replaced’ with ‘Prolonged suction should be avoided as this can stimulate the vagus nerve in the back of the throat and cause bradycardia (slow pulse)’. Heading changed to ‘length of time to apply suction’

Pg 35 & 37 – Photos of suction catheter in use. Photos changed as previous photo showed ineffective technique.

Pg 42. Sinus rhythm – addition of further explanation:

A patient can have an electrical sinus rhythm but still not have a pulse. In these cases, even if no shock is recommended, if the patient is not breathing and unresponsive, continue CPR. The medical term for normal electrical rhythm but no pulse is ‘electro-mechanical dissociation’.