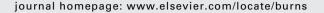


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# Introducing the Advanced Burn Life Support (ABLS) course in Italy



F. D'Asta <sup>a,b,c,\*</sup>, J. Homsi <sup>d</sup>, P. Clark <sup>e</sup>, M.C. Buffalo <sup>f</sup>, D. Melandri <sup>g</sup>, A. Carboni <sup>g</sup>, E. Pinzauti <sup>b</sup>, A. Graziano <sup>h</sup>, A. Masellis <sup>i</sup>, L. Bussolin <sup>c</sup>, A. Messineo <sup>a</sup>

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### ABSTRACT

Systematic education based on internationally standardized programs is a well-established practice in Italy, especially in the emergency health care system. However, until recently, a specific program to treat burns was not available to guide emergency physicians, nurses, or volunteers acting as first responders. In 2010, two national faculty members, acting as ABA observers, and one Italian course coordinator, trained and certified in the United States, conducted a week-long training program which fully certified 10 Italian instructors. Authorized ABLS provider courses were conducted in Italy between 2010 and 2012, including one organized prior to the 20th annual meeting of the Italian Society of Burns (SIUst). In order to increase the effectiveness and diffusion of the course in Italy, changes were approved by the ABA to accommodate societal differences, including the translation of the manual into Italian. The ABA has also approved the creation and publication of a bilingual ABLS Italian website for the purpose of promoting the ABLS course in Italy. In response to high demand, a second ABLS Instructor course was organized in 2012 and has been attended by physicians and nurses from several Italian burn centers. In the following discourse the experiences of the first 15 Italian ABLS courses will be discussed.

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<sup>&</sup>lt;sup>a</sup> Department of Neurosciences, Psychology, Drug Area and Child Health, University of Florence, Italy

<sup>&</sup>lt;sup>b</sup> Paediatric Burn Center and Plastic Surgery, Meyer Children Hospital, Firenze, Italy

<sup>&</sup>lt;sup>c</sup> Paediatric Trauma Center, Meyer Children Hospital, Firenze, Italy

<sup>&</sup>lt;sup>d</sup> University of Massachusetts Amherst, United States

e University of Manchester, Medical School, United Kingdom

f Shriners Burns Hospital-Galveston, TX, United States

g Burn Center and Regional Skin Bank, "Bufalini" Hospital, AUSL Cesena, Italy

<sup>&</sup>lt;sup>h</sup>Burn Center, Azienda Ospedaliero-Universitaria Pisana, Pisa, Italy

<sup>&</sup>lt;sup>i</sup>Department of Plastic Surgery and Burn Therapy-ARNAS Ospedale Civico, Palermo, Italy

<sup>\*</sup> Corresponding author at: Department of Neurosciences, Psychology, Drug Area and Child Health, University of Florence, Italy. Tel.: +39 3345737821.

#### 1. Introduction

### 1.1. Principle of the "golden hour" and the ABLS provider course

In recent decades, several factors have contributed to a decrease in the mortality of severely burned patients, such as early and effective resuscitation [1–3]. In order to provide a proper resuscitation, a structured and methodical approach is required in the initial assessment and management during the "golden hour" [4]. However, the performance of emergency healthcare personnel during such maneuvers is strongly correlated to the standard to which they are trained. A standardized program that provides a systematic education to emergency physicians, general surgeons, and residents is critical because the treatment of a burn patient requires unique skills and equipment. In this way, appropriate management of multiple-trauma patients with burns or with associated injuries can be well managed by the resuscitating team.

To better treat trauma patients, the American College of Surgeons (ACS) developed the Advanced Trauma Life Support (ATLS) course in 1980 in the United States. After emerging in the US, this course has spread throughout the world and is well established in the medical education of most countries. A core principle of the ATLS course is to educate all emergency care physicians, not only those specifically working in trauma centers, about the assessment, stabilization, and transfer of the patient. Although the ATLS course offers burn management in their curriculum, it has become increasingly recognized that a more thorough understanding of burn treatment is necessary. Realizing this need, ACS collaborated with the American Burn Association (ABA) to create the Advanced Burn Life Support (ABLS) course.

Understanding the dynamics of ABLS is crucial to providing the best possible outcome for the patient. The ABLS Provider Course is an eight hour course for physicians, physician assistants, nurses, nurse practitioners, paramedics, and EMTs. Through the ABLS course, personnel become trained to assess and stabilize patients with severe burns during the first critical hours following injury and to identify those patients requiring transfer to a burn center.

### 1.2. First aid, Burn Centers and the educational program in Italy

The resuscitation and stabilization of burn victims in Italy are performed either by the nearest hospital emergency department or by the nearest Burn Center. First aid in Italy is organized on a regional basis, with all operations and transportation methods being coordinated by one public service: the Italian Society 118 System (SIS-118). Once a call is received, the patient is brought to the nearest emergency ward for triage. If admission to a burn center is considered necessary, the emergency ward organizes the transfer of the patient to an available nearby burn center.

Of the 17 burn centers certified in Italy, 15 are located in general hospitals where both adult and pediatric burn patients are admitted, whereas only two burn centers are integrated

into exclusively Children's Hospitals: Florence-Meyer and Naples-Santobono.

Standardized acute care programs, such as the Advanced Cardiac Life Support (ACLS) course, the Advanced Trauma Life Support (ATLS) course, and the Pediatric Life Support (PALS) course have all been widely integrated throughout Italy. However, until 2010, no standardized educational program was available to guide emergency physicians, nurses, or volunteers acting as first responders to burns.

### 1.3. Introducing the ABLS provider course

A comprehensive study of the structure and function of Italian burn centers was recently published [5]. The study shows that a high percentage (25%) of admitted burn patients in Italy are children despite there being only two pediatric burn centers with a total capacity of seven beds. Moreover until 2012, the centrally located pediatric burn center in Tuscany (Florence-Meyer) only had facilities for patients with <30% total body burn surface area, presenting an even greater challenge to emergency burn patient care. It was clear changes were necessary in order to improve pediatric burn treatment.

In 2010, through the collaboration of the Meyer Children's Hospital, the University of Florence, and the Tuscan Minister of Health, a project was initiated to improve Meyer Hospital's Burn Center. While renovations to update the facility were undertaken, more initiatives were concentrated on the education of emergency staff working in burn care. In order to acquire the necessary knowledge in burn management, a research fellow attended Shriners Hospital for Children in Boston to observe the acute management of burns, reconstructive surgery and rehabilitation. Additionally, the fellow participated with the ABA in their ABLS course as a provider, then as an instructor, and lastly as a course coordinator. Once an adequate understanding of the course was acquired, proposals to introduce the ABLS course in Italy were drafted with support from the University of Florence, Meyer Children's Hospital, and the Tuscan Minister of Health. The course has also received patronage from the Society of Italian Emergency-Urgent Medicine (SIMEU; Società Italiana di Medicina di Emergenza-Urgenza). By 2010, the ABA and Meyer Children's Hospital finalized an agreement to begin providing the ABLS program in Italy.

The program began with a week of training designed to certify a select number of Italian physicians and nurses as ABLS instructors. Since the program was led by the Italian course coordinator and two ABA faculty members from the USA, the course was conducted in English. On the first day of the week-long training, ten new instructors were chosen from the ABLS Provider Course from its 25 attendees based on ABA selection criteria. On the following day, an ABLS Instructor Course was conducted for the ten newly elected instructors. As required by the ABA, the ten trainees taught two training courses under the supervision of the ABA faculty members in order to become fully certified instructors. After the certification of the instructors, all the necessary components to hold the ABLS Provider Course were acquired, thus allowing the program to become regularly offered in Italy.

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