Basic Life Support & Advanced Cardiac Life Support: Knowledge & Attitudes of Medical Students in New Delhi

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Background

The chain of survival includes Basic Life Support (BLS) as an important element. Advanced Cardiac Life Support (ACLS) too plays an important role in its multiple key links. ACLS interventions depend upon the BLS groundwork of immediate recognition and activation of the emergency response system, early CPR, and rapid defibrillation to increase the chances of survival. The likelihood to achieve return of spontaneous circulation increases with drug therapy, advanced airway management and physiological monitoring. Knowledge of CPR is an important part of a medical student's training, but there is still no routine training included in the medical undergraduate teaching in developing countries like India. Therefore medical graduates often face difficulty in emergency situations.

Aims & Objectives

To assess knowledge and attitudes among medical students of New Delhi from different professional years towards BLS & ACLS.

Methodology

Study design

This multi-centric study was planned as an analytical cross-sectional study with the study sample being drawn from medical students enrolled in various professional years during the session 2012-13 at six medical colleges of New Delhi.

Sample size

The sample size was 1000 with 20% sample being drawn each from 1st professional, 2nd professional, 3rd professional part-1, 3rdprofessional part-2 years respectively and the rest 20% being interns from various Teaching Hospitals of New Delhi.

Study duration

The study was conducted from May to July 2013.

Study tool

The study tool was a pre-designed self-administered objective questionnaire with 15 minutes given to each participant. The questionnaire was multiple-choice based with 20 questions devoted to BLS and 10 questions devoted to ACLS.

Statistical Analysis

The data gathered was periodically entered into Microsoft Excel 2010 and subsequently analysed using Microsoft Excel 2010 and Stata S.E 9.0. The scores obtained by each participant were tabulated and comparisons made among various aspects and among various subgroups of the study population.

Results & Conclusions

Being compiled