Be prepared for your career-defining medical emergency

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— John Bovia, co-founder of Life Support Services

The American Heart Association (AHA) estimates that 72 percent of all annual adult coronary heart disease deaths in the U.S. are due to sudden cardiac arrest, suffered outside the hospital setting. Yet the standard Advanced Cardiac Life Support (ACLS) course is geared towards the hospital setting.

As a dentist, what do you do when you don’t have a crash cart on hand or a 14 person response team to rush to the aid of the victim? What do you do when you must work ACLS algorithms without conventional pathways to support the administration of lifesaving drugs?

The average ACLS class will teach you the basics of Advanced Cardiac Life Support but it often fails to provide non-emergency professionals, like dentists, with the skills and tools to realistically save a life in a non-emergency setting, such as a dental office. As a result, profession-specific ACLS courses have begun to emerge, filling in the holes that standard ACLS courses leave open.

Most general dentists still do not use IV access as a common part of their practices. Therefore it is imperative to teach alternative ways of administering medications.

“One of the things we do at the DOCS ACLS course is teach how to give medications emergently without an IV,” says John Bovia, co-founder of Life Support Services and the ACLS Director for the Dental Organization for Conscious Sedation (DOCS). “And we can do that with techniques that are acknowledged by the AHA but are rarely emphasized in a hospital course.”

Alternative routes of administration can include transtracheal, intraosseous, and sublingual injections.

These additional methods have high success rates but are not favored in hospital settings and therefore not commonly taught. This leaves large gaps for viable treatment options for a non-IV trained dentist attending a standard ACLS course. Being able to successfully administer life-saving drugs outside of an IV can mean the difference between life and death for a dental patient.

Additionally, hospital-oriented ACLS courses cater to the demands of first responders and emergency workers which often work in large teams.

Bovia strongly believes in targeted ACLS training for the specific needs of the dental professional.

“We have to recognize that the dentist is preparing to function as a one-person code team, as opposed to a hospital code team which may have as many as 25 medical specialists to assist in a resuscitation,” says Bovia.
Because it is atypical for an entire dental office to receive training in ACLS, the responsibility of preparing the staff for such emergencies falls upon the dentist. The dentist has to take the information that they gain from our courses and take it back to train his or her team to support them. We train the dentist on how to train his or her staff and support team,” says Bovia.

When considering which ACLS course to take, many dentists opt to take the cheapest class in the most convenient location, which on the surface may seem quite reasonable. However it is those classes, designed for emergency staff, that fail to address the practical needs of the dental professional. When weighing the options, consider the skills taught and their relevance to the profession of dentistry. Can they be applied within the walls of your dental practice? Do they involve standard equipment in your office? Would you know what to do if you were not able to administer medication through an IV?

Your patient’s life may depend on it.

http://www.americanheart.org/presenter.jhtml?identifier=3034352