



2020 Interim Training Materials: ACLS and ACLS EP Lesson Plan Changes

Purpose

These instructions will help you as an Advanced Cardiovascular Life Support (ACLS) and ACLS for Experienced Providers (ACLS EP) Instructor to update the current ACLS and ACLS EP course materials* with science from the *2020 American Heart Association (AHA) Guidelines for Cardiopulmonary Resuscitation (CPR) and Emergency Cardiovascular Care (ECC)* (2020 Guidelines).

Use the interim materials to teach **all ACLS courses** from October 21, 2020, until you begin teaching the new 2020 ACLS course with the new materials. You must complete the 2020 ACLS Instructor Update online course and begin using the 2020 ACLS course materials by February 1, 2021.

Use the interim materials to teach **all ACLS EP courses** beginning October 21, 2020. ACLS EP Instructors must complete the 2020 ACLS Instructor Update online course by February 1, 2021.

*The 2016 *ACLS Instructor Manual*, 2016 *ACLS Provider Manual*, 2017 *ACLS for Experienced Providers Instructor Manual*, and 2017 *ACLS for Experienced Providers Manual and Resource Text*

Instructor Preparation

As an ACLS and/or ACLS EP Instructor, you should be prepared to answer students' questions about the 2020 Guidelines. Therefore, you should review these interim training materials, interim written exam information, the 2020 Guidelines, and the *Highlights of the 2020 AHA Guidelines for CPR and ECC* before teaching your ACLS or ACLS EP courses.

Instructor Manual Lesson Plan Changes

To teach the ACLS Course, ACLS Update Course, or ACLS EP Course, modify the lesson plans from the 2016 *ACLS Instructor Manual* or the 2017 *ACLS EP Instructor Manual* with the changes listed in this document.

Only those lessons affected by the 2020 Guidelines science changes are listed here. Lessons not listed here should be taught as written in the 2016 ACLS Instructor Manual or the 2017 ACLS EP Instructor Manual.

Throughout any course, emphasis should be on the components of high-quality CPR.

ACLS

1. Adult Chain of Survival

2020 Changes

- A sixth link, recovery, was added to both the in-hospital and out-of-hospital Chain of Survival.
 - The process of recovery from cardiac arrest extends long after the initial hospitalization. Support is needed during recovery to ensure optimal physical, cognitive, and emotional well-being and return to social/role functioning. This process should be initiated during the initial hospitalization and continue for as long as needed.

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- **Lesson 2:** Learning Station: The Science of Resuscitation, video

2. Intravenous Access Preferred Over Intraosseous

2020 Changes



- Intravenous (IV) access is the preferred route of medication administration during ACLS resuscitation.
- Intraosseous (IO) access may be considered if attempts at IV access are unsuccessful or not feasible.

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- All learning stations where IV/IO access is required

3. Ventilation in Respiratory and Cardiac Arrest

2020 Change

- For respiratory and cardiac arrest, provide 1 breath every 6 seconds (10 breaths per minute). This does not include the 30:2 CPR ratio/protocol.

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- **Lesson 2:** Learning Station: The Science of Resuscitation
- **Lesson 4:** Learning Station: High-Quality BLS Practice
- **Lesson 5:** Learning Station: Airway Management Practice
- **Lesson 10:** Learning Station: Cardiac Arrest
- **Lesson 16:** Learning Station: Megacode Practice

4. Adult Cardiac Arrest Algorithm

2020 Change

- Early epinephrine was modified to emphasize the role of early epinephrine for nonshockable rhythms after starting CPR.

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- **Lesson 10:** Learning Station: Cardiac Arrest
- **Lesson 15:** Learning Station: Immediate Post–Cardiac Arrest Care
- **Lesson 16:** Learning Station: Megacode Practice

5. Post–Cardiac Arrest Algorithm

2020 Change

- Algorithm changed from “≥94%” in 2016 to “92% to 98%” in 2020

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- **Lesson 10:** Learning Station: Cardiac Arrest
- **Lesson 15:** Learning Station: Immediate Post–Cardiac Arrest Care

6. Adult Bradycardia Algorithm

2020 Changes

- Updates to dosages:
 - Atropine was changed from 0.5 mg to 1 mg.
 - Dopamine was changed from 2 to 20 mcg/kg per minute to 5 to 20 mcg/kg per minute

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- **Lesson 7:** Learning Station: Acute Coronary Syndromes
- **Lesson 13:** Learning Station: Bradycardia
- **Lesson 16:** Learning Station: Megacode Practice

7. Adult Tachycardia Algorithm With a Pulse

2020 Change

- Removed recommended doses for cardioversion and replaced it with “Refer to device-specific recommended energy level to maximize first shock success.”



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- **Lesson 6:** Technology Review
- **Lesson 7:** Learning Station: Acute Coronary Syndromes
- **Lesson 14:** Learning Station: Tachycardia
- **Lesson 16:** Learning Station: Megacode Practice

8. Acute Coronary Syndromes Algorithm

2020 Changes

- The first medical contact–to–balloon inflation (percutaneous coronary intervention) goal is 90 minutes or less.
- Acute coronary syndrome is now broken into 2 primary categories: ST-segment elevation myocardial infarction and non–ST-segment elevation acute coronary syndrome.
- Best practice is to bypass the emergency department and go straight to the cath lab if a cath lab team is available.

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- **Lesson 7:** Learning Station: Acute Coronary Syndromes

9. Adult Suspected Stroke Algorithm

2020 Changes

- Best practice is to bypass the emergency department and go straight to the brain imaging suite per protocol.
- “Administer aspirin” was removed.
- Endovascular therapy can be done up to 24 hours from last known normal.
- Alteplase and endovascular therapy are both recommended for a patient if indicated.

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- **Lesson 8:** Learning Station: Acute Stroke

ACLS EP

10. Revised Cardiac Arrest in Pregnancy ACLS Algorithm

2020 Change

- Changed cesarean delivery from “if no ROSC in 4 minutes” to “if no ROSC in 5 minutes”

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- Cardiac Arrest in Pregnancy ACLS Algorithm

11. Opioid Overdose

2020 Changes

- Give naloxone for respiratory arrest.
- Consider naloxone for cardiac arrest.

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- ACLS EP Instructor CD: Case-Based Scenarios
- Clinical Pharmacology and Toxicology: Opioid Toxicology