

Incorporating Advanced Cardiac Life Support into Undergraduate Education

Advanced cardiac life support (ACLS) certification can prepare undergraduate nursing students to practice from an evidence base; deliver safe, quality patient care; and use clinical and critical reasoning to address simple to complex situations (American Association of Colleges of Nursing, 2008). The purpose of this article is to describe the incorporation of ACLS into an undergraduate baccalaureate program and to offer suggestions for replicating the activity at other institutions. Integrating ACLS certification into required coursework provides a direct process for meeting the essential outcomes requisite for graduation from an accredited nursing program (American Association of Colleges of Nursing, 2008). Outcomes such as the confidence and decision-making skills required to manage deteriorating patients, as well as an easier transition from the role of student to RN, have been cited by researchers evaluating this innovative strategy (Rice, Gallagher, Mc Kenna, Traynor, & McNulty, 2009; Smith et al., 2013).

Method

For the past 2 years, senior-level nursing students in a program graduating second-degree, as well as traditional, baccalaureate students have participated in a 2-day (16 hour) ACLS course as part of their final semester clinical hours. The objective was to cultivate and bolster confidence in clinical assessment skills, decision making, evaluative competence, and prioritization of patient care. Opportunity was also noted for graduating students to boast ACLS certification on their resumes while job hunting.

To perform this activity, American Heart Association-certified ACLS instructors were procured from the community (local firefighters, flight medics, and paramedics). The students were each provided with an ACLS Provider Manual published by the American Heart Association and were charged a nominal fee to cover the cost of the certification card. For admission to the course, students were expected to prepare by following instructions in the manual for completing self-assessment modules on a student Web site; studying cardiac rhythms, medications, and algorithms; and submitting printed proof of the completed self-assessment.

The 2-day training took place on the college campus, with didactic material presented on the first day in a large classroom, followed by the use of the simulation center for skills stations and case-based algorithm training on the second day. Successful completion of the written examination, skills check-offs, and comprehensive simulation scenario (mega code) earned the student an ACLS provider certification card. Time for remediation and review was provided as needed, but the course grade was not dependent on attainment of certification; clinical hours were still awarded for meeting the participation requirement.

Student Results and Reactions

Evaluations were collected over a 2-year period from 98 baccalaureate nursing students who had successfully completed the written examination and the comprehensive simulation scenario (mega code) required to earn ACLS provider certification. The evaluation tool utilized a Likert scale (1 = *not at all* to 4 = *completely*) to elicit self-reported ratings

on the achievement of specific ACLS criteria. Aggregate data were analyzed for descriptive mean scores. Objectives were met, as evidenced by confidence indicator ratings from 3.27 to 3.59; decision-making from 3.52 to 3.59; evaluative competence from 3.58 to 3.62; and prioritization of patient care from 3.63 to 3.95. Also, students enjoyed interacting with community instructors, who were able to share how ACLS is used on a daily basis. It was also believed that a low student-to-instructor ratio was beneficial when students were asked to apply what they had learned at the skills stations. Overall, students were satisfied with the outcomes they were able to achieve while collaborating with faculty and ACLS mentors.

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