

Category : **Cardiovascular: cardiac arrest\CPR**

**A196 - Contribution of simulation learning management of cardiocirculatory arrest**

**W Sellami<sup>1</sup> ; K Raddaoui<sup>2</sup> ; T Hannachi<sup>3</sup> ; I Ben Mrad<sup>4</sup> ; I Labbene<sup>4</sup> ; M Ferjani<sup>4</sup>**

*<sup>1</sup>Military Hospital of Tunis, Department of anesthesiology and Intensive Care Unit, Tunis, Tunisia, <sup>2</sup>Institut Mohamed kassab, Department of anesthesiology and intensive care unit, Manouba, Tunisia, <sup>3</sup>Bougatfa Hopsital , department of anesthesiology and Intensive Care Unit, Bizerte, Tunisia, <sup>4</sup>Military Hospital of Tunis, department of anesthesiology and Intensive Care Unit, Tunis, Tunisia*

**Introduction:**

Medical simulation is both a means of assessment and training. The aim of this study is to study the medium – term educational contribution of high-fidelity simulator compared to conventional training.

**Methods:**

A population of anesthesiologist-intensive care and emergency medicine residents; already familiar with simulation for clinical situations other than cardiocirculatory arrest at the IMS simulation center; were included in the study and divided into two groups. A group “ACC” for Cardio-Circulatory Arrest, which was specifically trained on a simulator on this topic. A control group “C” who had only theoretical training. Each of the residents was assessed on their management of critical situation: refractory ventricular fibrillation (VF) at six weeks and then at six months from the date of initial practical training for the ACC group. The scenario was the same for all residents

**Results:**

Twenty residents in intensive care anesthesia and 10 in emergency medicine were included with 15 residents per group (10 anesthesia-intensive care and 5 emergency medicine). The scores obtained by ACC group were significantly higher than those of the C group either at 6 weeks or at 6 months, and also for the “diagnosis” and “compliance with the algorithm” subgroups. There is no significant improvement in scores between the different assessment times for the ACC group. On the other hand, for group C there is a significant improvement in grades at 6 months (T1) compared to grades obtained at 6 weeks. The ratings of participants during the study were positive

**Conclusion:**

This study confirms the short and medium term educational benefit of simulator training versus traditional training. The use of simulation allows knowledge retention for up to one year after the initial practical training phase.