A08.EMSG. Pit Crew Approach to Pre Hospital Trauma Resuscitation
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Introduction: Pre hospital trauma care is often delivered by dual crewed ambulances supported by additional resources as necessary and available. Coordinating resuscitation of a critically injured patient may require multiple simultaneous actions. Equally, a large number of practitioners can hinder patient care if not coordinated. Aims: To describe a multi disciplinary, scalable approach to pre hospital trauma care suitable for small and large multi disciplinary teams. Methods The MCI medical team (as part of Motorsport Rescue Services) is a PHECC-registered multidisciplinary team, which provides medical cover at Motorcycle road racing events in Ireland. The MCI medical team has significant experience of major trauma and routinely performs prehospital anaesthesia for trauma patients. We have evolved a pit crew approach to trauma care with pre defined roles and interventions assigned to a five person team, three clinical members, a scribe and a team lead. The approach is both scalable and collapsible, meaning that if multiple patients are present, roles can be merged; if additional clinical input is required, roles can also be supplemented. Each team member carries equipment and medications specific to their role, allowing efficiencies at the patients side. Results: The pit crew approach to pre hospital trauma care has evolved over a decade and is routinely implemented at motorcycle road races in Ireland. Conclusions: The pit crew trauma approach, although applicable to a pre defined five person team in unique circumstances, may also be applicable to ad hoc clinical teams that typically form in the pre hospital arena.

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A09.ISS. Empathy Levels in Canadian Paramedic Students: A Longitudinal Study
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Background: Empathy in healthcare delivery is an essential component to providing high-quality patient care. Empathy in paramedics and paramedic students has been subject to limited study to date. This study aimed to determine the empathy levels demonstrated by first year paramedic students over the course of their first year of study. Methods: This study employed a longitudinal design of a convenience sample of first year paramedic students in a community college program in Ontario, Canada. The Medical Condition Regard Scale (MCRS) was used to measure empathy levels across four medical conditions: intellectual disability, suicide attempt, substance abuse and mental health emergency. Surveys were conducted three times approximately 2-3 months apart; before first semester field placements (Nov/17), after first semester field placements (Jan/18) and near the end of second semester field placements (Mar/18). Results: A total of 20 students completed all three surveys. Females, respondents aged 22-24, and participants with previous post-secondary education demonstrated higher mean empathy scores than their counterparts. Substance abuse was associated with the lowest mean empathy score for every demographic. Mean scores for intellectual disability, attempted suicide and mental health emergency decreased from the first survey to the last. Mean scores for substance abuse increased from 43.3 (SD±8.2) to 46.45 (SD±7.04). Conclusion: Results from this study suggest that in general, empathy levels among paramedic students decline over the course of their education. Male paramedic students are less empathetic than their female counterparts, and those with previous post-secondary education displayed higher mean empathy scores. The findings in this research support previous findings, and suggest that paramedic education programs may benefit from the inclusion of additional empathy training and education.