

Magnitude and Outcome of Resuscitation Activities at Rwanda Military Hospital for the Period of April 2013-September 2013

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Background

Prior to April 2012, resuscitations were often ineffective resulting in poor patient outcomes. An initiative was implemented at Rwanda Military Hospital (RMH) to review root causes and plan strategies to improve patient outcomes. An interdisciplinary committee was developed to review this problem.

Methods

The purpose of this project was to analyze the frequency, obstacles, and outcomes of patient resuscitation following cardiac and/or respiratory arrest. A form was developed to record all actions taken during resuscitation including: response time, staff presence, and equipment and medications used. Collection of data was achieved through the use of a resuscitation flow sheet followed by an audit of the chart documentation. Analysis of all resuscitation data collected was performed.

Results

The patient population requiring the most resuscitation efforts are the intensive care patients, most frequently the neonatal intensive care patients (42.8%). Despite having trained staff representatives, not all resuscitations followed protocol. Lack of compliance with drug administration guidelines was noted, particularly in the lack of initiating administration of specific drugs, despite the drug being available (59%).

Conclusion

Basic Life Support training for interdisciplinary staff resulted in more effective response to cardiac and/or respiratory arrest at RMH. Obstacles to effective resuscitation included : number of staff, knowledge and skill level of staff, availability of appropriate equipment and medications, staff communication, and patient's *Do not Attempt Resuscitation (DNR)* status. More training in this area would be beneficial to improve patient outcomes.

Key words: resuscitation, cardiac arrest, intensive care, Rwanda