

EARLY ACCESS TO THE INTEGRATED EMERGENCY MEDICAL SYSTEM:

A STUDY WITH CHILDREN 6-12 YEARS OLD

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Abstract

Introduction: One of the most incriminating in human life is the occurrence of an unexpected cardiac arrest. Despite advances in the field of cardiopulmonary resuscitation, the risk of death remains between 50-80% (Buist et al., 2002). The increased survival rate of a patient in cardiac arrest depends on the timing of the start, the local maneuvers Basic Life Support, until the arrival of rescue more differentiated. Early access to the Integrated Emergency Medical System (IEMS) is therefore a decisive stage.

Methods: This study sought to understand the ability of children 6-10 years old: recognizing a person unresponsive to stimuli and unventilated; accurately identify their place of residence; indicate the national emergency number. The research was conducted in a group of schools in the district of Portalegre (Portugal), students in 9 classes from basic education, a total of 122 students. For data collection we designed a questionnaire, applied in between 11 and 15 June 2012.

Results: The results point to an illiteracy on evaluative component in response to stimuli and ventilation presence. Most students reveal not able to distinguish whether it is the presence of a sleeping person or someone who does not ventilate. Students participating in the study, mostly, do not know their full address. The national emergency number is unknown by most students.

Conclusions: These results show the urgent need to empower students ages these skills to the drive level of IEMS and early recognition of unconsciousness and lack of ventilation person. It is suggested, accordingly, that teachers are adequately prepared to train students in these skills, decisive to increase survival rates in the event of cardiac arrest.

Key-words: children, Basic Life Support, alarm.