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Resuscitation Plus

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Editorial

Announcement of a special issue on resuscitation education in the resuscitation plus journal



In Europe, the incidence of out-of-hospital cardiac arrest ranges between 67 and 170 per 100.000 inhabitants, with survival rates to hospital discharge between zero and 18%.¹ In comparison, the incidence of in-hospital cardiac arrest ranges between 1.3 and 2.8 per 1.000 hospital admissions, with survival rates to hospital discharge of 15 to 34%.¹ Effective cardiopulmonary resuscitation skills are key to saving lives after cardiac arrest.^{2–4} In the pre-hospital environment, outcomes are improved from regular cardiopulmonary resuscitation training in small groups, which are spaced over time.^{5–7} If in-hospital resuscitation team members attend accredited cardiopulmonary resuscitation courses, patient survival can be improved.^{5,8,9} In summary, good quality cardiopulmonary resuscitation in every environment results in better patient outcomes.¹⁰ The ultimate goal is to achieve early recognition of cardiac arrest, early cardiopulmonary resuscitation and defibrillation, as well as adequate post resuscitation care to restore quality of life.¹¹

In 2003, the International Liaison Committee on Resuscitation (ILCOR) published an advisory statement highlighting for the first time the importance of regular cardiopulmonary resuscitation training for all health care professionals.¹² Since 2010, regional resuscitation councils (including the European Resuscitation Council (ERC) and the American Heart Association (AHA)) have regularly published education chapters in their respective guidelines based on the Consensus on Science and Treatment Recommendation (CoSTR) of the International Liaison Committee on Resuscitation (ILCOR).^{8,13,14}

In order to enhance the evidence base to further improve the effectiveness of resuscitation education, Resuscitation Plus welcomes submissions to a Special Edition on Resuscitation Education. Methodologically sound manikin and simulation studies, scoping and systematic reviews, evaluations of educational interventions on teaching, learning, and assessment of resuscitation, and their impact on clinical outcomes are welcome. These studies may include the application of new innovative approaches to teach resuscitation skills to different provider groups and populations. We also welcome studies including the application of non-traditional educational interventions like technology-enhanced learning, virtual reality, use of smart phone apps, hybrid and blended learning strategies. Narrative reviews require pre-approval by the Handling Guest Editor (Assist. Prof. Sabine Nabecker, M.D., PhD). Please direct all enquiries, including questions about appropriate topics, prior to submission via e-mail to the Handling Guest Editor (sabine.nabecker@sinai-health.ca).

Resuscitation Plus is the only open access journal that focuses entirely on cardiac arrest and cardiopulmonary resuscitation. The

journal publishes studies on education in resuscitation for healthcare professionals working in critical care, emergency medicine, acute medicine, anaesthesia, cardiology, paediatrics, neonatology, trauma and simulation. This Special Edition on Resuscitation Education is an excellent opportunity to publish your educational approaches for an international community interested in education. We welcome a discussion of recent developments and findings. As a special offer, accepted manuscripts will receive an article processing fee waiver.

All submissions deemed suitable to be sent for peer review will be reviewed by at least two independent reviewers. Once a manuscript is accepted, it will go into production and will be simultaneously published in the current regular issue and pulled into the online Special Issue, though they will be clearly marked and branded as Special Issue articles. This will assure fast dissemination of published findings.

The Resuscitation Plus's submission system (<https://www.editorialmanager.com/resplu/default1.aspx>) will be open for submissions to this Special Issue from 01 September 2022 to 01 February 2023. When submitting your manuscript please select the article type "VSI: Resuscitation Education".

Conflict of Interests

Sabine Nabecker is member of the Instructor-Educator-Support Science and Education Committee (SEC-IES) of the European Resuscitation Council (ERC), and member of the Continuous Education and Professional Development (CEPD) Committee of the Canadian Anesthesiologists' Society (CAS).

Andrew Lockey is President of Resuscitation Council UK and member of the International Liaison Committee on Resuscitation (ILCOR)'s Task Force on Education, Implementation and Team.

Robert Greif is the Board Director of Guideline and ILCOR of the European Resuscitation Council (ERC) and Chair of the International Liaison Committee on Resuscitation (ILCOR)'s Task Force on Education, Implementation and Team.

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<https://doi.org/10.1016/j.resplu.2022.100302>

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