

Trauma training transformed: empowering nurse practitioners and physician assistants in advanced trauma life support teaching

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In the dynamic landscape of trauma care, the demand for proficient instructors in Advanced Trauma Life Support (ATLS) courses has surged, paralleling the expansion of this critical program. The paper ‘Building capacity for ATLS Trauma Education: Role of Nurse Practitioners and Physician Assistants’ provides a compelling argument for the inclusion of nurse practitioners (NPs) and physician assistants (PAs) in the arena of ATLS education.¹ This initiative represents a paradigm shift in trauma care training, addressing the need for a broader, more inclusive approach to education in this critical field.

Since the inception of the ATLS, the landscape of trauma care and education has evolved significantly. The course, originally developed and taught exclusively by surgeons, has adapted to dynamic healthcare needs, expanding its instructor base to include diverse medical specialists. This inclusive approach has enhanced the course’s scope and efficacy paving the way for the inclusion of NPs and PAs as students. As the course contends with surging demand, availability is often limited by an inadequate number of instructors, an intriguing proposal emerges—could NPs and PAs step into the role of ATLS instructors? The paper highlights the extensive training and clinical experience of these professionals, underscoring their potential to contribute effectively to ATLS instruction.

The paper reports the results of a survey conducted among trauma-practicing NPs and PAs, focusing on their self-assessed knowledge, comfort level in teaching and perceived barriers to becoming ATLS instructors. A voluntary 91-question survey was distributed to NP/PA lists obtained from professional societies and online social medical channels with 1696 completing the survey. The results indicate a strong foundation of knowledge and comfort among these professionals, especially among those with more extensive experience in trauma care and those who have completed multiple ATLS courses. These findings suggest that NPs and PAs are not only capable of teaching ATLS but also could bring valuable insights and experiences to the course.

However, the paper also acknowledges the challenges and barriers faced by NPs and PAs in this role, primarily related to a lack of formal teaching experience and perceived hierarchical issues in teaching physicians. Addressing these concerns is crucial for the successful integration of NPs and PAs into ATLS education.² The paper advocates for a thoughtful, consistent approach to training and certification for all ATLS instructors, ensuring the maintenance of

high educational standards. The American College of Surgeons Committee on Trauma piloted a program to train and use NPs and PAs as associate instructors in ATLS student courses. NPs and PAs at the eight-site pilot demonstrated successful completion of the instructor course and were well received as faculty in a provider course. Plans for wider implementation have been approved and are under development.

The paper makes a compelling case for the inclusion of NPs and PAs in ATLS education. This inclusion not only addresses the growing demand for trauma care training but also reflects a broader trend towards multidisciplinary and collaborative approaches in medical education. By leveraging the skills and experiences of NPs and PAs, ATLS can continue to evolve and adapt to the changing needs of trauma care, ultimately improving patient outcomes and strengthening the overall healthcare system.³

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