## Effectiveness of chest compressions skill training in the prone position: comparison of two methods

E. Peixoto<sup>1</sup>, R.E.A. Batista<sup>1</sup>, M.F.P. Okuno<sup>1</sup>, R.C.N. Baptista<sup>2</sup>, C.R.V. Campanharo<sup>1</sup>, J.L. Lopes<sup>1</sup>

<sup>1</sup> Federal University of Sao Paulo (UNIFESP), Paulista School of Nursing, São Paulo, SP, Brazil., Sao Paulo, Brazil; <sup>2</sup> Nursing School of Coimbra,

Coimbra, Portugal

Funding Acknowledgement: Type of funding sources: Public Institution(s). Main funding source(s): Coordenação de Aperfeiçoamento de Pessoal de Nível Superior (CAPES)

**Introduction:** The current pandemic caused by the new coronavirus (COVID-19), has become challenging for the health system.1 Pulmonary complication take patients to require ventilatory support and one of the interventions performed to improve then oxygenation is the prone position.2 In view of the current reality of patients with COVID-19 in a prone position, it is necessary to train cardiopulmonary resuscitation in this position.3 Purpose: To compare the effectiveness of two training methods, video and self-instructional guide, in the ability of chest compressions in prone position.

**Methods:** This is a randomized clinical trial. The sample consisted of nurses, nursing technicians, physiotherapists and residents of the intensive care and emergency unit of a public hospital. Randomization was performed in blocks of four using the Random @ system. Group 1 (G1) consisted of professionals who watched a validated video while practicing chest compression on a low-fidelity mannequin placed in the prone position. Group 2 (G2) consisted of professionals who practiced compression guided by a previously validated self-instructional guide. The study's out-

come was the performance of chest compressions skills assessed before and after interventions, using a previously validated instrument. The study was approved by the Research Ethics Committee (no. 4.016.959).

**Results:** Ninety-one professionals participated in the study (45 from group 1 and 46 from group 2). It was observed that there was an improvement in hand positioning (G1 pre: 16 professionals correctly and post: 31 (p0.001); G2 pre: 20 correct and post: 20 (p0.781), of body positioning (G1 pre: 32 professionals hit and post: 41; G2 pre: 32 hit and post: 39) and the frequency of compressions G1 pre: 10 professionals hit and post: 19 (p0.017); G2 pre: 13 hit and post: 16 (p0.363)) after the interventions. Statistically, when applying the test within each group, a p-value of 0.0003 was obtained in G1 (video) and 0.512 in G2 (self-instructional guide). Thus, we can infer that only group 1 (video) had a change when we compared the two moments.

**Conclusion:** The video associated with simulation was more effective than the self-instructional guide and can be used as an attractive and dynamic teaching tool.



CPR in prone position