





## MANAGEMENT OF MEDICAL EMERGENCIES IN THE GENERAL PRACTICE

## **Reinforcing Post Course Activity Report**

## **Instructions for completing this report:**

It is a requirement of the RACGP that you complete a reinforcing activity after completing the Management of Medical Emergencies in the General Practice course. The activity must be completed and submitted to Cynergex before any QI/CPD points can be awarded to you via the RACGP website.

## Purpose of post-course activity:

This activity is designed to assist you, in ensuring, you have the systems and processes in place for both you and your team to achieve the best outcomes for your patients, should an unexpected medical emergency occur.

Please complete the following analysis of your current processes and include any action you will be taking following your review.

Please submit your report to Cynergex Group by email: Frances.fahey@cynergexgroup.com.au within TWO WEEKS of completing the course.

Name:	QI/CPD Num	ber:	
Practice:	Date of cour	Date of course attended:	
	Currently in place (please tick)	If you answer NO to any area what action is to be taken?	
POLICY			
Does your surgery have a written policy for the management of medical emergencies?	☐ Yes ☐ No		
Does the policy include a procedure detailing the roles of the following? If yes, please describe:			
The practitioner/s	☐ Yes ☐ No		
The practice nurse/s	☐ Yes ☐ No		
The role of reception	☐ Yes ☐ No		

Questions continue on following page

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	(please tick)	is to be taken?	
<b>EQUIPMENT</b> Does the practice maintain relevant emergency equipment? Such as:			
Oxygen and pulse oximetry?	☐ Yes ☐ No		
AED and 12 lead ECG?	☐ Yes ☐ No		
Effective airway management tools?	☐ Yes ☐ No		
Relevant drug kit?	☐ Yes ☐ No		
TRAINING			
Is there In-Practice training in managing medical emergencies?	☐ Yes ☐ No		
QUALITY IMPROVEMENT Does your practice have in place a post event debrief which allows:			
The identification of what went well?	☐ Yes ☐ No		
The identification of areas for improvement?	☐ Yes ☐ No		
Can all staff contribute to this process?	☐ Yes ☐ No		
Has this been utilised before?	☐ Yes ☐ No		
If yes, what improvements have been made to the plan?			
Is the plan revisited at regular intervals to ensure that it is still valid, reflects the current people working at the practice and that they are aware of the plan?	☐ Yes ☐ No		

Thank you for completing this activity.

Upon completion click here to submit this form via email to Frances.fahey@cynergexgroup.com.au

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