



International Promulgation

Advanced Trauma Life Support Program for Health Care Professionals

Introduction

International promulgation of the American College of Surgeons (ACS) Advanced Trauma Life Support (ATLS) Program for health care professionals is defined as, “The development of the ACS ATLS Program within the requesting country via a recognized Surgical/medical organization or ACS Chapter in that country for all health care professionals within the requesting country who wish to participate regardless of their race, creed, sex, color, or professional discipline.”

This document outlines policies and procedures for requesting, initiating, and potential conducting an approved ACS ATLS Program for Doctors outside the ACS Committee on Trauma (COT) organization. Requests for the ATLS Program must originate from and be managed according to the appropriate organizational processes of the ACS as stipulated by its Board of Regents. The program must be requested and approval must be obtained from the ATLS Subcommittee and the Executive Committee to the ACS COT before proceeding with implementation of the program in another country. The ATLS Subcommittee and Executive Committee forward the request to the Board of Regents for their action as they deem appropriate. If the request is approved, the requesting entity agrees to conduct courses for doctors only within the requesting organization’s country.

If ACS ATLS faculty or anyone else is requested to provide an ATLS Course in another country outside the ACS COT organizational network, the request must be directed to the ATLS Subcommittee for action. This rule applies to both Instructor and Student Courses.

Health care professionals from other countries, in which the program has not been approved, initiated, and/or promulgated, are eligible to participate only in another country into which the program has been officially developed. They are not eligible to participate in or audit an Instructor Course. A surgical organization or ACS Chapter, which may have already implemented the program in its own country, may not export the course to another country.

The ACS COT cannot approve promulgation of the ATLS Program in other countries outside the policies and procedures outlined herein. Importation of the ATLS Program into another country is very structured and is achieved similarly in each country. The ACS COT does not deviate from the standardized process. Although the people and cultures may vary from country to country, the program and its administration are essentially the same.

The American College of Surgeons is sensitive to the costs related to introducing the ATLS Program into other countries and strives for fiscal responsibility in this regard.

Guidelines for Selecting an Appropriate Surgical Organization

A recognized surgical organization is defined as the ACS Chapter in the requesting country or another surgical organization that is the principal or primary surgical organization (society) within the country.

Important questions to consider when selecting the appropriate surgical organization include:

1. Whether the organization requesting the program is the appropriate surgical organization to import the program into the country, for example:
 - a. The organization’s membership is comprised primarily of surgeons (multidisciplinary).
 - b. The organization is representative of all surgeons within the country.
 - c. The organization is well respected by the entire medical community.
 - d. The organization is well established within the medical community.
2. The surgical organization requesting the ATLS Program is oriented toward improving the care of surgical and trauma patients through scientific and educational offerings.
3. The organization has the capability, resources, and willingness to promulgate the program to all doctors in the country.
4. The entity has the organizational and administrative infrastructure to initiate and promulgate the program. Administrative resources are needed to support promulgation, management, and quality assurance of the program. The program cannot be introduced and implemented via a government agency, hospital, university medical school, or by an individual or group of individuals. The need to have a prominent surgical organization (ACS Chapter or surgical society) as the importing entity is well outlined in this document. The ACS does not deviate from the established policies, procedures, or processes.

Surgical Organization or Society

1. Request initiation

If individuals in another country wish to promulgate the ACS ATLS Program in their country, a formal request from the appropriate individual of an established surgical organization or society of that country should be made directly to the Chair of the Subcommittee on ATLS to the ACS COT or the ATLS International Program Course Director via the ACS ATLS Program, 633 N. Saint Clair St., Chicago, IL 60611-3211. Specific request/authorization forms and guidelines

are available from the ACS ATLS Program Office staff members for this purpose (contact 312-202-5150 or atls@facs.org or visit the ACS website at facs.org/quality-programs/trauma/atls and click on “International Promulgation”).

The ACS must recognize the surgical organization or society, and it must be of good standing within the medical community. Once the request is received, it is reviewed and discussed by the ATLS Subcommittee. If approved at the subcommittee level, the request is submitted for approval to the Executive Committee of the ACS COT. Upon approval at all levels, a formal written agreement (Memorandum of Understanding) between the two organizations must be reached.

2. Introductory site visit

The requesting surgical organization designates an individual and preferably a group of individuals for inculcation into the ATLS Program and its organizational structure. For this purpose, an introductory program is presented by the International ATLS Course Director, the ATLS Subcommittee Chair, and/or their designees in the requesting country. The content of this introductory session consists of the history and overview of the ATLS Program, its organizational structure, various responsibilities of the importing organization and the ACS, potential funding resources, cost-saving issues, the importance of input from recognized professional educators, the importance of training skilled course coordinators to facilitate course promulgation, and research issues. Further course logistics and review/selection of the course site and future students are determined at this introductory session. This program includes a free interchange of ideas between the respective meeting participants and requires approximately 10 to 12 hours over a period of two days. During this session, the Memorandum of Understanding between the requesting organization and the ACS may be signed. The introductory program is at the expense of the requesting country, including business class-airfare for the visiting ACS/ATLS representative(s).

3. Initial training

A course coordinator must be trained for approximately six months before the inaugural courses. This person is invaluable in helping organize and plan the inaugural Student and Instructor Courses. This on-site coordinator is trained by the manager of the ATLS Program, attends Student and Instructor Courses, and then spends approximately three days in the ACS ATLS Program Office learning the organizational and administrative components of the program. Participation in this training process by the prospective program director also is recommended. The director and coordinator then are responsible for making facility and equipment arrangements necessary for the inaugural courses and working closely with the ATLS Program Manager in preparing for the inaugural courses in the requesting country.

It is preferable to train an initial cadre of instructor candidates before the inaugural courses in a given country. Doctors, preferably from the surgical organization’s ATLS Working Party of Subcommittee, should be carefully selected to attend Student and Instructor Courses identified by the ACS ATLS Program Manager. A special training program (to include one Student and one Instructor Course) is often set up to specifically train doctors from the country into which the

program will be introduced. After successfully completing both courses, these individuals serve as instructor candidates for the inaugural courses in their country. Upon completing of the inaugural courses, a cadre of fully trained instructors is available to continue promulgation of the program in that country.

An educator candidate also should be identified by the surgical organization’s working group before the inaugural courses. This individual also can be trained during the initial Student and Instructor Courses and serve as a faculty for the inaugural courses, while being monitored by a National Educator.

Expenses related to the aforementioned training endeavors are at the expense of the requesting country.

4. Inaugural courses

The inaugural Student and Instructor Courses are then conducted in the requesting country. Participants from the Student Course are carefully selected for participation in the Instructor Course. The Instructor Course is conducted, at a minimum, two days after the Student Course. Faculty for both courses consist of ACS National ATLS Faculty (doctors, educators, and coordinator) and qualified Instructor candidates trained previously for this purpose. The instructor candidates teach with experienced faculty and complete their teaching requirements during the inaugural Student Course. They then serve with ACS National Faculty as instructors for the Instructor Course. The ATLS Subcommittee Chair and the International ATLS Course Director are without honoraria (except the National Educator), but reimbursement for business-class travel and expenses is expected. This inaugural program is funded by the requesting surgical organization.

It is anticipated that the instructor candidates in these inaugural courses would become Regional and State/Provincial (S/P) Faculty for the requesting country’s surgical organization. Instructor candidates trained during the inaugural courses may be elevated to the S/P Faculty level after they satisfy all the requirements and at the direction of the surgical organization’s ATLS Program Director. Similarly, the proposed designees for the country’s educator and coordinator are present at the inaugural courses and may complete their related performance requirements to be elevated to full status within their respective faculty categories.

5. Continued promulgation

Upon completion of the inaugural training program, course promulgation is offered only in that country and only under the aegis of the approved surgical organization. Further training of ATLS Instructors is limited to doctors residing in the country for which the program is approved.

The non-ACS approved surgical organization is responsible for maintaining records of courses conducted, participants, reverification of instructors and students, and quality assurance measures. After the inaugural courses, successful completion documents are issued by the surgical organization and not from the ACS. The ACS does maintain an international database of instructors for the purposes of instructor reciprocity. Therefore, the surgical organization is expected to submit an annual report of program activity within the respective country

and information related to the instructors trained. Course materials for future courses are provided by ACS ATLS Program Office staff members only to the approved surgical organization or its designees for distribution consistent with policies established by the ACS and within that country only.

International ACS Chapter

Countries with ACS Chapters outside the United States, U.S. territories, and Canada that wish to import the ACS ATLS Program into their country are encouraged to consult with ACS ATLS representatives for developing their own COT organization and becoming members of the International Committees to the ACS COT. The development of a COT structure facilitates promulgation of the ATLS Program and participation in other ACS COT activities, for example, the Resident Paper Competition. Staff members in the ACS ATLS Office can provide references for this purpose upon request.

1. Request initiation

Requests for the ATLS Program from ATLS Chapters in other countries may be honored and managed as outlined for a recognized surgical organization.

2. Introductory site visit, initial training, and inaugural courses

The introductory site visit, initial training process, and inaugural courses for the ATLS Program via an ACS Chapter in another country are managed as outlined for a recognized surgical organization.

3. Continues promulgation

Upon completion of the inaugural Student and Instructor Courses, course promulgation is offered only in the requesting country and only under the aegis of that country's ACS Chapter and its Committee on Trauma. Further training of ATLS Instructors is limited to doctors residing in the country for which the program is approved.

Upon successful completion of the inaugural ATLS Courses, future courses are conducted in the same manner as those within the ACS COT organization.

The ACS provides recognition and documentation of successful course completion. Course reporting, as done within the ACS COT's organizational network, is expected. The ACS ATLS Program Office staff members keep records of all courses and participants in that country and initiates notification for student and instructor expiration dates for reverification purposes. Quality assurance of future programs sponsored by the ACS Chapter in the requesting country, including monitoring and continuation of the program, is a cooperative responsibility of the ACS Chapter and the ACS ATLS Program.

Course materials for future courses are provided by staff members in the ACS ATLS Program Office and only to the ACS Chapter, or its designees, for its distribution consistent with policies established by the ACS and within the country only.

Other International Requests

If ACS ATLS Faculty or anyone else is requested to provide an ATLS Course in another country outside the ACS COT's organizational network, the request must be directed to the ATLS Subcommittee for action. This rule applies to both Instructor and Student Courses for the purposes of promulgation or on a one-time-only basis. Requests for the ATLS Program or Student Course must originate from and be managed according to the appropriate organizational processes of the ACS as stipulated by its COT and Board of Regents. Promulgation of the ATLS Program in other countries outside the guidelines outlined herein cannot be approved by the COT of the ACS.

Summary of Surgical Organization/ACS Chapter Responsibilities

The surgical organization or ACS Chapter is responsible for:

1. Directing their requests for the program to the ATLS Subcommittee Chair or International ATLS Course Director, c/o the ACS ATLS Program Office, 633 N. Saint Clair St., Chicago, IL 60611-3211, 312-202-5160, or atls@fac.org.
2. Consulting with the ACS COT to develop its own Committee on Trauma network (ACS Chapters only).
3. All financial responsibility related to the introductory site visit, inaugural courses (including administrative costs), and continued promulgation of the ATLS Program.
4. Identifying an initial cadre of doctors for training as instructor candidates for special courses designed to provide faculty support for the inaugural courses.
5. Identifying participants for the inaugural program within the limits established for the course.
6. Identifying a professional educator(s) to be trained before or during the inaugural program.
7. Identifying a course coordinator(s) to be trained before the inaugural program.
8. Maintaining records of ATLS Courses and doctors who have completed the courses (surgical organization only).
9. Submitting an annual report of ATLS activities and instructors trained to the ACS ATLS Program office (ACS Chapters only).
10. Reporting of ATLS Courses and participants to the ACS ATLS Program Office on a course-by-course basis (ACS Chapter only).
11. Providing quality measures for the ATLS Program and adhering to the minimum criteria established for the program.
12. Limiting promulgation of the ATLS Program to their own country.

Summary of ACS Responsibilities

The ACS ATLS Program Office staff members and ACS Subcommittee members are responsible for:

1. Responding to requests for or inquiries about the ACS ATLS Program received from a surgical organization, ACS Chapter, or individual(s) in other countries.
2. Providing guidelines and policies as needed to facilitate maintenance of the requirements for international promulgation of the ATLS Program as established by the ACS.
3. Identifying the spokesperson(s) for the introductory site visit.
4. After the request is approved, identifying course sites, within the framework of the ATLS Program at which potential instructor candidates, educators, and coordinators from the requesting country may be trained in preparation for the inaugural program scheduled for that country.
5. Identifying faculty for the inaugural Student and Instructor Courses to be conducted in the requesting country.
6. Providing organizational assistance as needed for the continued promulgation of the ATLS Program in other countries.
7. Providing course materials for ATLS Courses in other countries in which the program has been established in accordance with the established procedures and policies.

Instructor Reciprocity

Instructor reciprocity exists with any recognized surgical organization or ACS Chapter in another country into which the ACS ATLS Program has been officially promulgated and in which the ACS ATLS Program is taught.

Summary

The ATLS Subcommittee endeavors to work cooperatively with an organization and its membership to ensure that the highest-quality program is introduced into a given country within the guidelines established by the American College of Surgeons. For questions or additional information, please contact the International ATLS Course Director or the ACS ATLS Program Manager via the information provided herein.

ATLS Program
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