

2005 CPR and AED Guidelines

Lay Rescuers

The following CPR steps are the same for all motionless victims:

- Check responsiveness – Tap and shout. If unresponsive, call/have someone call 9-1-1 or local emergency number.
- Open the airway – Head tilt/chin lift for all victims.
- Check for breathing – Look, listen and feel for breathing for 5-10 seconds (normal breathing – no gasps – for adults; presence/absence of breathing for children and infants).
- If breathing, but unresponsive, place in the recovery position.
- If not breathing, give two normal breaths – each breath lasting 1 second.
- If breaths make chest rise, begin CPR – give cycles of 30 chest compressions and 2 breaths beginning with chest compressions. Note: 5 cycles = 2 minutes.
- If a breath does not make the chest rise, retilt the head and try another breath.
- If the breath does not make the chest rise, assume an obstructed airway. Give cycles of 30 chest compressions, and 2 breaths, looking for an object in the mouth. Remove any object you see.

Differences Based on Age

Action	Adult (≥ 8 years)	Child (1-8 years)	Infant (< 1 year)
Calling EMS when alone	Call immediately after determining victim is unresponsive	Call after performing 2 minutes of CPR (5 cycles of 30:2)	Call after performing 2 minutes of CPR (5 cycles of 30:2)
CPR			
- Hand placement	2 hands on the breastbone between the nipples	1 or 2 hands on the breastbone between the nipples to achieve proper depth	2 fingers on the breastbone just below the nipple line
- Compression depth	1 ½ - 2 inches	1/3 – ½ the depth of the chest	1/3 – ½ the depth of the Chest
AED use	Yes Deliver 1 shock as soon as possible, followed immediately by 2 minutes of CPR	Yes Deliver 1 shock as soon as possible, followed immediately by 2 minutes of CPR. Use pediatric pads if available. If not, use adult pads	No AED use not recommended
FBAO in a responsive victim	Abdominal thrusts (Heimlich maneuver)	Abdominal thrusts (Heimlich maneuver)	Alternate 5 back blows and 5 chest thrusts



2005 CPR and AED Guidelines

Professional Rescuers

The following CPR steps are the same for all motionless victims when 1 rescuer is present:

- Check responsiveness – Tap and shout.
- Open the Airway – Head tilt/Chin lift or Jaw Thrust.
- Check for breathing – Look, listen and feel for adequate breathing (e.g. adults 8-10 breaths/minute)
- If breathing, place in the recovery position.
- If not breathing, give two normal breaths – each breath lasting 1 second.
- If breaths go in, check pulse for no more than 10 seconds.
- If no definite pulse, begin CPR – cycles of 30 chest compressions and 2 breaths for 2 minutes (5 cycles). Interrupt compressions as infrequently as possible. Limit interruptions to ≤ 10 sec.
- If pulse is definitely present but no breathing, provide rescue breathing only (1 breath every 5-6 seconds for adults).
- If a breath does not make the chest rise, retilt the head and try another breath.
- If the breath still does not make the chest rise, assume an obstructed airway. Give cycles of 30 chest compressions and 2 breaths, looking for an object in the mouth. Remove any object you see.

Action	Adult (≥ 8 years)	Child (1 – puberty onset)	Infant (< 1 year)
Calling EMS when alone	Evaluate the likely cause of the event: - Cardiac event Call immediately after determining victim is unresponsive. - Hypoxic event 5 cycles CPR (2 minutes) before calling	Evaluate the likely cause of the event: - Cardiac event - Hypoxic event Provide 2 minutes of care before calling.	Evaluate the likely cause of the event: - Cardiac event - Hypoxic event Provided 2 minutes of care before calling
CPR			
Pulse check	Carotid/femoral	Carotid/femoral	Brachial
Compression location	2 hands on breastbone between the nipples	1 or 2 hands on breastbone between the nipples to achieve proper depth	2 fingers on breastbone just below the nipple line. (2 thumb technique for neonates)
Depth	1 ½ - 2 inches	1/3 – ½ the depth of the chest	1/3 – ½ the depth of the chest
Single rescuer compressions to breath	30:2	30:2	30:2 (3:1 Neonates)
Two-rescuer compressions to breaths	30:2	15:2	15:2 (3:1 Neonates)
FBAO in a responsive victim	Abdominal thrusts (Heimlich maneuver)	Abdominal thrusts (Heimlich maneuver)	Alternate 5 back blows and 5 chest thrusts
AED use	Yes Deliver 1 shock followed immediately by 2 minutes of CPR. Reassess	Yes Deliver 1 shock followed immediately by 2 minutes of CPR. Reassess Use pediatric pads if available.	No AED use not recommended.

2005 First Aid Guidelines

1. Recovery Position
 - Use of the modified HAINES recovery position (**H**igh **A**rm **I**N **E**ndangered **S**pine)
2. Asthma
 - First aid providers may assist a victim in using an inhaler:
 - Victim states he/she is having an asthma attack and has medication
 - Victim identifies medication and is unable to use it without help
3. Anaphylaxis
 - First aid providers can help someone having an anaphylactic reaction self-administer epinephrine.
4. Seizures
 - First aid for seizures includes preventing injury and ensuring an open airway:
 - Protect head with a pillow or soft material
 - Do not restrain victim
 - Do not put anything in victim's mouth
 - Use recovery position after seizure
5. Bleeding Control
 - Control bleeding with direct pressure
 - Insufficient evidence to recommend for or against elevation and pressure points
6. Wounds and Abrasions
 - Irrigate with clean running tap water for ≥ 5 minutes or there appears to be no foreign matter in wound
 - Antibiotic ointment/cream can be used on abrasions or superficial wounds
7. Burns
 - Cool burns with cold water as soon as possible
 - Continue until pain is relieved
 - Loosely cover burn blisters and leave them intact
8. Spine Stabilization
 - Manually stabilize the head so that the head, neck and spine do not move and are kept in line.
 - Do not use immobilization devices
9. Musculoskeletal Injuries
 - Apply cold
 - Use ice or a cold pack
 - Do not use refreezable gel packs
 - Limit application to ≤ 20 minutes
 - Place a barrier between cold container and skin
10. Dental Injuries
 - Handle tooth by crown
 - Clean bleeding wound with tap water or saline solution
 - Stop bleeding with direct pressure
 - Place avulsed tooth in milk and bring with you to dentist
11. Snakebite
 - Do not apply suction
 - For coral snakes, wrap a bandage snugly around entire length of bitten extremity and immobilize.
 - Get medical help as soon as possible
12. Hypothermia
 - Move victim to warm environment, remove wet clothing, wrap all exposed body surfaces
 - Actively rewarm only if far from definitive health care
13. Drowning
 - Remove victim rapidly and safely from water but do not place yourself in danger
 - Start CPR with 2 ventilations. Do 5 cycles (about 2 minutes) before calling EMS
 - Do not try to remove water as if it were a foreign body
14. Chemical Burns
 - Brush chemicals off skin with gloved hand or cloth
 - Remove contaminated clothing
 - Irrigate the area with copious amounts of water
15. Ingested Poisons
 - Do not administer anything by mouth unless advised to do so by PCC
 - This includes milk, water, activated charcoal
 - Do not administer syrup of ipecac