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Cpr & Lifesaving (Quick Study)

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WORLDWIDE QUICK REFERENCE GUIDE

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Quick Study HEALTH CPR & Lifesaving

STEP-BY-STEP GUIDE FOR HANDLING MEDICAL EMERGENCIES & TRAUMA INJURIES

BASICS

Chain of Survival

- Early recognition of an emergency
- Early access to help
- Early cardiopulmonary resuscitation (CPR)
- Early defibrillation with an automated external defibrillator (AED)
- Prompt emergency medical services (EMS) response

CPR & First-Aid Training

- Courses are available through the American Heart Association, the American Red Cross, hospitals, and fire departments.
- Although you can provide CPR and first aid to a person without taking a course, proper skills and knowledge allow you to provide the best care to an injured or sick person.

Good Samaritan Law

- A Good Samaritan law is provided by each state to protect individuals who help people in medical emergencies.
- A Good Samaritan is someone who renders aid or assistance in an emergency when he/she is not legally obligated to do so (e.g., a driver who stops to help at the scene of a motor vehicle accident).
- Unless there is negligence or malicious intent, a Good Samaritan is protected from being held liable for the injury or death of the injured person.
- Check the specifics of the Good Samaritan law in your state.

Consent

- Consent means permission. An adult, if conscious, must give further permission to receive medical care.
- If an adult is unconscious, consent is implied. You do not need the person's permission to provide emergency care, such as CPR.
- If an infant or child is unconscious and the parent or guardian is nowhere to be found, consent is also implied. If the parent or guardian of the infant or child is present, you must ask for consent before providing medical care, including CPR.

Emergency Scene Evaluation

- Is the scene safe? Making the decision to act is often a difficult decision. Your personal safety and that of your family members should always come first. Look for hazards that could be dangerous (e.g., traffic, electrical wires, flooding, other people).
- What happened? Is it a car crash, an explosion, a fire, a child who was hit while riding a bicycle, a person who has suffered a heart attack or stroke, or something else?
- How many people are injured? This will help determine the need for additional resources when calling for help.

Calling for Help

- Call 911. If your area does not have 911 service, know the appropriate phone numbers for police, fire, and EMS.
- Call Patient Control, if needed. In the United States, call 1-800-222-1222.
- Call your family physician or pediatrician and any specialist that your family members use.

CPR

Cardiopulmonary arrest is when a person's heart stops beating and breathing ceases. When assessing a person, you should look for normalizing or abnormal breathing (only done gaps for breath), no movement, and no response to touch or verbal cues. CPR may be indicated if a person suffers from a heart attack, trauma, drowning, poisoning, shock, or a central nervous system injury. CPR should be started immediately, even if there is a question about downtime or viability. Resuscitation should be continued until medical help arrives or you become too exhausted to perform CPR.

Adult CPR (18 Years or Older)	Child CPR (1-8 Years Old)	Infant CPR (Less Than 1 Year Old)
1. Make sure the scene is safe. 2. Check to see if the person is responsive. Tap the person's shoulder and shout, "Are you OK?" 3. Check for breathing. Is the person not breathing or breathing abnormally (only slow gaps for breath)? Slow gaps for breath indicate a lack of adequate breathing and a need for CPR. 4. Call for help, call 911, and get an AED. 5. Place the person facing up on a firm, flat surface. 6. Begin the C-A-B steps for CPR (see steps 7-15). 7. C-Compressions A. Position your hands: • Place 1 hand on top of the other in the lower half of the breastbone in the center of the chest (at the middle of the nipple line). • Keep your elbows straight. B. Provide 30 chest compressions at a rate of at least 100 compressions per minute: • Push hard and fast. • Compress the chest at least 2 inches (5 cm). • Allow time for the chest to recoil between compressions. 8. A-Airway: Open the airway A. Use the head-tilt, chin-lift method. B. Use the jaw-thrust method if you suspect head or neck injury. 9. B-Breathing: Use mouth-to-mouth, a barrier device, or a face mask. A. Give 2 breaths. B. Watch the chest rise. 10. Continue cycles of 30 compressions to 2 breaths until the person wakes up or an AED or EMS arrives. 11. If the person is unresponsive but breathing normally, place the person in the recovery position and monitor closely.	1. Make sure the scene is safe. 2. Check to see if the child is responsive. Tap the child's shoulder and shout, "Are you OK?" 3. Check for breathing. Is the child not breathing or breathing abnormally (only slow gaps for breath)? Slow gaps for breath indicate a lack of adequate breathing and a need for CPR. 4. If you are alone, perform CPR for 5 cycles or about 2 minutes prior to calling for help. If a second rescuer is available, have him/her call 911 and get an AED. 5. Place the child facing up on a firm, flat surface. 6. Begin the C-A-B steps for CPR (see steps 7-15). 7. C-Compressions A. Position your hands: • Place 1 or 2 hands on the lower half of the breastbone in the center of the chest (at the middle of the nipple line). For larger children, you may have to use both hands. • Keep your elbows straight. B. Provide 30 chest compressions at a rate of at least 100 compressions per minute: • Push hard and fast. • Compress the chest at least 2 inches (5 cm) or 1/3 the depth of the chest. • Allow time for the chest to recoil between compressions. 8. A-Airway: Open the airway A. Use the head-tilt, chin-lift method. B. Use the jaw-thrust method if you suspect head or neck injury. 9. B-Breathing: Use mouth-to-mouth, a barrier device, or a face mask. A. Give 2 breaths. B. Watch the chest rise. 10. Continue cycles of 30 compressions to 2 breaths until the child wakes up or an AED or EMS arrives. 11. If the child is unresponsive but breathing normally, place the child in the recovery position and monitor closely.	1. Make sure the scene is safe. 2. Check to see if the infant is responsive. Tap the infant's foot and look for movement. 3. Check for breathing. Is the infant not breathing or breathing abnormally (only slow gaps for breath)? Slow gaps for breath indicate a lack of adequate breathing and a need for CPR. 4. If you are alone, perform CPR for 5 cycles or about 2 minutes prior to calling for help. If a second rescuer is available, have him/her call 911 and get an AED. 5. Place the child facing up on a firm, flat surface. 6. Begin the C-A-B steps for CPR (see steps 7-15). 7. C-Compressions A. Position your hands: • Place 2 fingers of 1 hand on the lower half of the breastbone in the center of the chest just below the nipple line. • Keep your elbows straight. B. Provide 30 chest compressions at a rate of at least 100 compressions per minute: • Push hard and fast. • Compress the chest at least 1.5 inches (4 cm) or 1/3 the depth of the chest. • Allow time for the chest to recoil between compressions. 8. A-Airway: Open the airway A. Use the head-tilt, chin-lift method. B. Use the jaw-thrust method if you suspect head or neck injury. 9. B-Breathing: Use mouth-to-mouth, a barrier device, or a face mask. A. Give 2 breaths. B. Watch the chest rise. 10. Continue cycles of 30 compressions to 2 breaths until the infant wakes up or an AED or EMS arrives. 11. If the infant is unresponsive but breathing normally, place the infant in the recovery position and monitor closely.

The recovery position allows the airway to stay open. It also allows gravity to help keep the airway clear of vomit, mucus, saliva, etc.

Recovery Position

TIP Cardiac arrest in infants and children is usually due to a breathing problem and not heart related. That is why you begin CPR immediately for 5 cycles or about 2 minutes before calling for help. This allows oxygen to circulate more quickly.

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Synopsis

Making the decision to help in an emergency situation is often a difficult choice. Be prepared for emergencies with the help of our CPR & Lifesaving QuickStudy® guide. Packed with quickly accessible information on different aspects of lifesaving, this go-to reference will help you respond effectively in an emergency until professional help arrives. Learn how to evaluate a scene, the steps in CPR and AED use, standard precautions, and other essential elements in the chain of survival. This durable, laminated guide also includes illustrations for easy understanding. Keep a copy in your home, with your camping gear, at your office, in your car, etc., so that you will always be prepared.

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Customer Reviews

This thing has it all . Very detailed and portable . Has all you would need to know in order prep for you before your BLS class. I recommend it.

I like this than the book for those doing a refresher course. I recommend this to use and it is easier to carry and read than a book.

I included this in the first aid kits that I made for family members. A good way to become informed quickly as needed.

My Caregiver did the class last Thursday September 15th and really enjoyed it. Thank You, Susan Lankin

Wonderful tool for learning about CPR!! I recommend to anyone who wants to learn CPR

It works to have this on hand to read daily. Being laminated helps

Will help me to recertify with CPR and you cannot beat the price

Good product A+++ Just what I needed and wonderful price

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