BLS Provider - Guidelines 2020 CPR (Cardio Pulmonary Resuscitation)

		T	T	
	ADULT	CHILD	INFANT	
	and adolescents who have	1 year to before	Less than 1 year of age	
	reached puberty	puberty		
SCENE SAFETY	Scene is safe for rescuers AND victims			
Check for				
RESPONSIVENESS		Hey, Hey, are you OK?		
CALL 911 and Get the AED, or Call a Code	Activate the emergency response system and get an AED as soon as the victim is found unresponsive *With adults, ALWAYS call first*	If victim is unresponsive - WITNESSED or others present: activate the emergency response system and get an AED ALONE and UNWITNESSED: Perform 5 cycles of CPR before activating emergency response system and getting an AED		
Check for BREATHING AND PULSE simultaneously	Scan and check simultaneously for breathing and carotid pulse (If no pulse, start compressions)	Scan and check simultaneously for breathing and carotid pulse (If pulse is < 60 beats per min with signs of poor perfusion, start compressions)	Scan and check simultaneously for breathing and brachial pulse (If pulse is < 60 beats per min with signs of poor perfusion, start compressions)	
Gasping is not no	rmal breathing. If the victim i		ing with compressions	
	Lower half of the breastbone		Just below the nipple line	
Compression	Heel of one hand, 2nd hand on top of the first		- 2 fingers (2 thumb-encircling	
Location	(heel of one hand for small child victims if		hands for 2-rescuer, OR as a 1	
Location	adequate depth can be achieved with one		rescuer option, OR heel of 1	
	hand)		hand as a 1 rescuer option)	
Compression <i>Depth PUSH HARD</i>	At Least 2 inches	At Least 1/3 the depth of the chest		
Compression				
Rate	100 - 120 compressions per minute			
PUSH FAST				
Compression -	30:2	30:2	(one rescuer)	
Ventilation	(one rescuer, OR			
Ratio	multiple rescuers)	15:2 (two or more rescuers)		
Compression	•	Allow for complete chest recoil (allowing the heart to completely refill with		
Method	blood) between each compression - avoid LEANING -			
Minimize interruptions (< 10 seconds) in chest compressions				
Open the AIRWAY	Head tilt-chin lift - (suspected trauma: jaw thrust)			
Give 2 BREATHS that	Give 2 breaths (making the chest rise & fall, lasting 1 second each)			
make the chest rise	Avoid excessive ventilations, return to compressions within 10 seconds			
	ON THE AED, FOLLOW T	THE PROMPTS		
.	Use adult pads ONLY.	Use child pads/system if available.		
AED	Do not use child	If not, use adult pads, placing one on front center of		
	pads/system.	chest, the other	on the center of the back	
***NOTE: To avoid fatigue and provide high quality CPP, when 2 or more resource are				

***NOTE: To avoid fatigue and provide high quality CPR, when 2 or more rescuers are available, it is important to alternate the compressor role every 2 minutes (5 cycles of 30:2 for adults, 10 cycles of 15:2 for children and infants)

	RESCUE	BREATHING	
	ADULT	CHILD	INFANT
	Puberty and older	1 year to puberty	Less 1 year of age
When the victim has a valid pulse – but is not breathing normally *check pulse every 2 mins*	•give 1 breath every 6 seconds •give each breath over 1 sec with visible chest rise	IF PULSE IS < 60 • give 1 breath every 2 to 3 seconds • give each breath over 1 sec with visible chest rise	
	ADVAN	CED AIRWAY	
When any Advanced Airway is in place	 provide continual compressions give 1 breath every 6 seconds 	 provide continual compressions give 1 breath every 2-3 seconds 	

RELIEF OF CHOKING (for a RESPONSIVE victim)				
Mild Obstruction good air exchange responsive and can cough forcefully may wheeze between coughs	with continuous/spontaneous coughing encourage victim to keep coughing do not interfere with the victim's own attempts but stay and monitor their condition if mild obstruction persists - call 911	 do not interfere with victim's own attempts to expel object if mild obstruction persists call 911 		
Severe Obstruction • poor or no air exchange • weak, ineffective cough or no cough at all • high-pitched noise or no noise at all •unable to speak • possible cyanosis (turning blue) • clutching the throat	 Ask the victim – "Are you choking? Can I help you?" If the victim nods "yes" and cannot speak Call 911 Perform abdominal thrusts (Heimlich maneuver) → stand or kneel behind the victim and wrap arms around waist → make a fist with one hand → place the thumb side of fist against the victim's abdomen – slightly above the navel and well below the breastbone → grasp fist with the other hand and press the fist into the victim's abdomen with a quick upward thrust → repeat until the object is expelled, or the victim becomes unresponsive → give each thrust with a separate, distinct movement to relieve the obstruction 	If victim cannot make any sounds or breathe – Call 911 Perform a series of back slaps and chest thrusts →Kneel or sit with the infant in lap →hold the infant facedown with head lower than chest – supporting the infants head and jaw →using the heel of hand - deliver up to 5 back slaps forcefully between the shoulder blades →turn the infant as a unit with infant on his back →provide 5 quick downward chest thrusts at the same position as chest compressions – about 1 per second →repeat until relieved or unconscious		

Choking victim becomes *UNRESPONSIVE* continue to attempt to relieve the airway obstruction

If help is available, have them call 911

- begin 2 minutes of CPR, starting with compressions
- added action open the mouth wide & look for the object (removing it if seen) before attempting 2 breaths

If ALONE with no immediate access to a phone

- begin 2 minutes of CPR, starting with compressions
- added action open the mouth wide & look for the object (removing it if seen) before attempting 2 breaths
- activate 911

TEAM DYNAMICS

*Utilize a CPR Coach when available

- CLEAR ROLES & RESPONSIBILITIES allows all team members to know their positions, functions, and tasks during a resuscitation attempt
- KNOWING YOUR LIMITATIONS is communicating boundaries and asking for help when needed during a resuscitation attempt
- Communication is presented with clear messages and mutual respect, messages are repeated back to Team Leader to insure comprehension