



CPR GUIDELINES

TIMING IS CRITICAL

IT IS IMPORTANT TO TAKE IMMEDIATE ACTION

1

CHECK THE VICTIM FOR RESPONSIVENESS

- Do NOT move the victim unless absolutely necessary!
- Tap and shout to see if the victim responds



- If the victim is unresponsive, not breathing, or not breathing normally, call 911.



2

CALL 911

- If someone besides you is present, they should call 911 immediately
- If you are alone with an adult victim (any person over the age of 18) try to call for help prior to starting CPR

- If you are alone with a child or infant victim give about 5 cycles of compressions and ventilations (about 2 minutes) before leaving them to phone 911

3

FOLLOW ALL INSTRUCTIONS GIVEN TO YOU BY THE 911 DISPATCHER. IF YOU ARE UNABLE TO REACH A 911 DISPATCHER, BEGIN ADMINISTERING CPR.

CPR TIMELINE

- 0-4 minutes • brain damage unlikely
- 4-6 minutes • brain damage possible
- 6-10 minutes • brain damage probable
- >10 minutes • probable brain death

EMERGENCY NUMBERS: 911

Ambulance: _____

Fire: _____

Poison: _____

Physician: _____

COMPRESSIONS

- Position victim on their back while supporting head and neck



Locate the correct hand position.

- **Adults:** Place two fingers at the sternum (the spot where the lower ribs meet) then put the heel of your other hand to your fingers. Place one hand on top of the other and interlace the fingers. Lock your elbows and using your body's weight, compress the victim's chest.
- **Children:** Use 1 or 2 hands and compress at the nipple line
- **Infants:** Compress with 2 fingertips on the breastbone just below the nipple line

Compression Rate:

- At least 100 per minute

Compression Depth:

- Adults: at least 2 inches
- Children: about 2 inches
- Infants: about 1.5 inches

Count out loud as you compress 30 times. **PUSH HARD AND PUSH FAST!**

After giving 30 compressions, check the airway and give two rescue breaths.

AIRWAY

- Tilt head back and lift the chin, to open the airway



BREATHING

- If the victim is not breathing, gently support chin so as to keep it lifted up and the head tilted back.
- Pinch victim's nose with your fingertips to prevent air from escaping.
- Place your mouth over the victim's creating a tight seal
- Give **2 slow NORMAL, one second breaths** (not deep breaths) just enough to make the victim's chest rise

- If the victim's chest does not rise when the first rescue breath is delivered, tilt the head and lift the chin again before giving the second breath



- Try not to over-inflate the victim's lungs as this may force air into the stomach, causing them to vomit. If this occurs, turn the person's head to the side and sweep any obstructions out of the mouth before proceeding.
- Between each breath allow the victim's lungs to relax. Watch for their chest to fall as they exhale and place your ear near their mouth and listen for air to escape.

Continue the cycle of 30 compressions followed by 2 breaths until help arrives. Check for responsiveness after each cycle.

This CPR Guideline is used as a guide and an informational resource. It cannot replace real CPR or First Aid training. Please try to attend a CPR training course in your community and be ready to help save a life.

SAFETY

New Cpr Guidelines 2014

Chris Dietz



New Cpr Guidelines 2014

Strategies to Improve Cardiac Arrest Survival Institute of Medicine, Board on Health Sciences Policy, Committee on the Treatment of Cardiac Arrest: Current Status and Future Directions, 2015-09-29 Cardiac arrest can strike a seemingly healthy individual of any age race ethnicity or gender at any time in any location often without warning Cardiac arrest is the third leading cause of death in the United States following cancer and heart disease Four out of five cardiac arrests occur in the home and more than 90 percent of individuals with cardiac arrest die before reaching the hospital First and foremost cardiac arrest treatment is a community issue local resources and personnel must provide appropriate high quality care to save the life of a community member Time between onset of arrest and provision of care is fundamental and shortening this time is one of the best ways to reduce the risk of death and disability from cardiac arrest Specific actions can be implemented now to decrease this time and recent advances in science could lead to new discoveries in the causes of and treatments for cardiac arrest However specific barriers must first be addressed *Strategies to Improve Cardiac Arrest Survival* examines the complete system of response to cardiac arrest in the United States and identifies opportunities within existing and new treatments strategies and research that promise to improve the survival and recovery of patients The recommendations of *Strategies to Improve Cardiac Arrest Survival* provide high priority actions to advance the field as a whole This report will help citizens government agencies and private industry to improve health outcomes from sudden cardiac arrest across the United States

2020 Handbook of Emergency Cardiovascular Care for Healthcare Providers American Heart Association, 2020-10-21 20 1100 **2015 American Heart Association Guidelines**, 2015 **Advances in Cardiopulmonary Resuscitation** Peter Safar, James O. Elam, 2012-12-06 Since the late 1950s revolutionary developments in and the potential future of emergency operations of basic knowledge techniques resuscitation This meeting was initiated by teaching and practice of cardiopulmonary James Elam James Jude owner of the Wolf Creek Lodge Blairsville Georgia 30512 acted resuscitation CPR have resulted in the saving of uncountable lives from conditions that as of previously led to certain death The 1950s The Program Committee invited primarily clinician scientists from the United States brought breakthroughs in respiratory resuscitation the 1960s breakthroughs in cardiac resuscitation solicited synopsis papers and pre-distributed resuscitation and the 1970s have begun to the 37 papers selected to the participants We were spared formal paper presentations and show breakthroughs in resuscitation of the thus could devote ourselves to two full days arrested brain Mobilization of large scale public involvement of informal stimulating provocative discussion in life saving efforts is essential But the sessions This led to cross fertilization of ideas challenges and opportunities of implementing among individuals with different specialty backgrounds

First Aid, Survival, and CPR Shirley A Jones, 2011-10-05 Awarded AJN Book of the Year Award 2012 From performing CPR on an adult child or infant to dealing with bleeding and shock cuts and broken bones heart attacks emergency childbirth

poisoning drowning scuba diving mishaps wilderness survival and natural disasters such as tornadoes wildfires floods and earthquakes this portable waterproof guide helps you quickly find the information you need to develop a plan of action for assessing and treating all kinds of first aid and survival emergencies "Code of Massachusetts regulations, 2014" ,2014 Archival snapshot of entire looseleaf Code of Massachusetts Regulations held by the Social Law Library of Massachusetts as of January 2020 Ventricular Arrhythmias John M. Miller,2008 Ventricular arrhythmias cause most cases of sudden cardiac death which is the leading cause of death in the US This issue reviews the causes of arrhythmias and the promising new drugs and devices to treat arrhythmias Self-Declaration in the Legal Recognition of Gender Chris Dietz,2022-10-21 Self Declaration in the Legal Recognition of Gender examines the impact of legislation premised upon the principle of self declaration of legal gender status Existing doctrinal and comparative analyses have tended to come out strongly in favour of or against self declaration This book offers a socio legal alternative which focuses on how self declaration is experienced on an embodied level by trans and gender diverse people It presents research conducted in Denmark which became the first European state to adopt self declaration in June 2014 By analysing Danish law through a Foucauldian framework which brings together socio feminist and trans legal scholarship on embodiment and jurisdiction the book offers the first empirically based and theoretically informed analysis of self declaration It draws upon legal consciousness affect theory vulnerability and governmentality literatures to argue that the jurisdictional boundaries which existed between law and medicine were maintained throughout the reform process This limited the impact of the legislation enabling access to health care to be restricted in the same year in which amending legal gender status was liberalised As the list of states that have adopted self declaration increases this intervention offers activists and policymakers insights which might shape how they respond to similar reform proposals in the future A timely and important assessment this book will appeal to researchers and practitioners working in trans gender feminist legal and socio legal studies **Clinical Pathways in Emergency Medicine** Suresh S David,2016-05-23 This book aims to provide condensed and crystallised knowledge providing the rationale for investigations and interventions Emergency medicine is a specialty where time and knowledge are critical factors in deciding appropriate management which could otherwise result in loss of life or limb The challenge often is to have lucid management plans whilst standing at the bedside of the patient In order to address this challenge a manuscript is needed which aims to enhance the clinical skills of the emergency physician The objective of this book is to compile a road map for practitioners of emergency medicine which would guide them through algorithm based pathways This format is distinctive by nature for its concise presentation which facilitates easy reading and early application Written by global experts this book aims to be a truly international representation of emergency physicians who have come together to deliver contemporary concepts in emergency patient care **American Red Cross First Aid/CPR/AED Participant's Manual** American Red Cross,2011 Rev ed of First aid CPR AED for schools and the community 3rd ed c2006 **Pediatric Resuscitation** Stephen M.

Schexnayder, Arno Zaritsky, 2008 Pediatric Resuscitation is reviewed in this issue of Pediatric Clinics of North America guest edited by Drs Steve Schexnayder and Arno Zaritsky Authorities in the field have come together to pen articles on Background and Epidemiology CPR Why the New Emphasis Airway Management Arrhythmias Cardioversion and Defibrillation Vascular Access and Medications Medical Emergency Teams Teamwork in Resuscitation Resuscitation Education Outcome Following Cardiac Arrest Extracorporeal Life Support during CPR Post resuscitation Care and Future Directions ACEP First Aid Manual 5th Edition DK, 2014-09-01 A possible life saving reference to keep around the house or in the car DK's First Aid Manual looks at more than 100 different conditions from splinters and sprained ankles to strokes and unconsciousness and shows exactly what to do with step by step photographic sequences Every condition is clearly explained outlining causes symptoms and signs and action plans The updated design makes the instructions easier to follow whether you need information on emergency first aid first aid for babies and children or tips on resuscitation This ACEP First Aid Manual is an invaluable resource to keep you and your loved ones safe and healthy

Forensic Pathology of Infancy and Childhood Kim A. Collins, Roger W. Byard, 2014-02-18 The investigation of sudden or unexplained death of children represents a unique medical and forensic area of study Children have unique anatomic and functional characteristics that must be recognized and understood by the medical investigator Further complicating this process is the fact that the anatomic structure composition and function of various organs and organ systems in the pediatric population change throughout the developmental stages of childhood The disease processes reactions to trauma and risk factors for accidental death and homicide change from infancy through adolescence Forensic Pathology of Infancy and Childhood provides an authoritative comprehensive reference text devoted to the medicolegal investigation of sudden unexpected death in children With contributions from internationally renowned experts individual chapters focus on specific unique causes and organ systems with detailed accounts of the changes in fatal diseases risk factors of causes of sudden death and responses to fatal trauma that occur as a child grows from neonatal stage through infancy toddlerhood childhood and adolescence This text is an essential reference resource for forensic pathologists medical examiner offices pediatric pathologists pediatric hospitals anatomic pathologists and those in training as well as those in related legal professions

Heartsaver First Aid Student Workbook American Heart Association Staff, 2016-04-26 Product 15 1021 *CPR/AED for the Professional Rescuer* American Red Cross, 2006 This New American Red Cross CPR AED for the Professional Rescuer Participant's Manual and course reflect changes based on the 2005 Consensus on Science for CPR and Emergency Cardiovascular Care ECC and the Guidelines 2005 for First Aid Changes to this program and manual include simplifications to many of the CPR skill sequences which helps improve retention There have also been changes to help improve the quality of CPR The integration of CPR skills into the operation of AEDs had changed to help improve survival from sudden cardiac arrest Professional rescuers are now trained to use AEDs on adults and children Information has been updated and added to this program to help professional rescuers administer epinephrine

aspirin and fixed flow rate oxygen The skills learned in this course include adult child and infant rescue breathing conscious and unconscious choking CPR two rescuer CPR and adult and child AED Additional training can be added to this course including bloodborne pathogens training and emergency oxygen administration While the skills and knowledge that professional rescuers use are increasing this training will help you meet your most important responsibility as a professional rescuer the responsibility to save lives

ACLS Study Guide - E-Book Barbara J Aehlert,2016-10-06 Awarded second place in the 2017 AJN Book of the Year Awards in the Critical Care Emergency Nursing category Provide the best possible emergency cardiovascular care using the newest ECC guidelines ACLS Study Guide 5th Edition offers a complete full color overview of advanced cardiovascular life support An easy to read approach covers everything from airway management to cardiac arrest rhythms and their management electrical therapy acute coronary syndromes and acute stroke In addition to the latest ACLS treatment algorithms this edition includes case studies and hundreds of full color photos and illustrations Case studies present common realistic clinical situations helping you learn and apply skills in cardiac rhythm interpretation medication administration and other essential interventions ACLS Pearls boxes offer brief explanations of complex topics and useful tips for clinical practice End of chapter quizzes include answers and rationales helping you learn and remember the most important information Easy to understand approach simplifies your study of advanced cardiac life support thanks to Barbara Aehlert s unique conversational writing style NEW UPDATED content centers on evidence based practice recommendations including the 2015 American Heart Association Guidelines for Cardiopulmonary Resuscitation and Emergency Cardiovascular Care and the 2015 International Consensus on Cardiopulmonary Resuscitation and Emergency Cardiovascular Care Science With Treatment Recommendations NEW Improved format integrates all case studies into the appropriate chapters so that you can apply concepts immediately to real world situations

Model Rules of Professional Conduct American Bar Association. House of Delegates,Center for Professional Responsibility (American Bar Association),2007 The Model Rules of Professional Conduct provides an up to date resource for information on legal ethics Federal state and local courts in all jurisdictions look to the Rules for guidance in solving lawyer malpractice cases disciplinary actions disqualification issues sanctions questions and much more In this volume black letter Rules of Professional Conduct are followed by numbered Comments that explain each Rule s purpose and provide suggestions for its practical application The Rules will help you identify proper conduct in a variety of given situations review those instances where discretionary action is possible and define the nature of the relationship between you and your clients colleagues and the courts

Pierson and Fairchild's Principles & Techniques of Patient Care - E-Book Sheryl L. Fairchild,Roberta Kuchler O'Shea,Robin Washington,2017-03-24 Master the basics of rehab patient care with Pierson and Fairchild s Principles Techniques of Patient Care 6th Edition This proven text not only provides clear how to information on everything from positioning and draping to patient transfers and ambulation activities but it also includes easy to understand rationales explaining the why behind these

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Community Management of Opioid Overdose World Health Organization,2015-09-08 An estimated 69000 people die each year from opioid overdose Opioid overdose is easily reversed with the opioid antidote naloxone and with basic life support Such care is generally only available in medical settings however These guidelines recommend that people who are likely to witness an opioid overdose including people who use opioids and their family and friends should be given access to naloxone and training in its use so that they can respond to opioid overdose in an emergency if a medical response is not available Naloxone can be injected or administered intra nasally and has minimal effects in people who have not used opioids While naloxone administered by bystanders is a potentially life saving emergency interim response to opioid overdose it should not be seen as a replacement for comprehensive medical care

Critical Care Obstetrics Michael A. Belfort,George R. Saade,Jeffrey P. Phelan,Gary D. V. Hankins, MD,Steven L. Clark, MD,2008-04-15 The fourth edition of Critical Care Obstetrics has been extensively revised to reflect the advances that have been made in maternal fetal medicine This edition contains 14 brand new chapters written by the field s leading

physicians Critical Care Obstetrics 4 e offers expanded coverage in areas vital to intensive care management including Neonatal Resuscitation The Organ Transplant Obstetrical Patient and Ethical Considerations This practical guide and reference will be of invaluable assistance to obstetricians and primary care physicians in both the treatment and referral of high risk patients

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