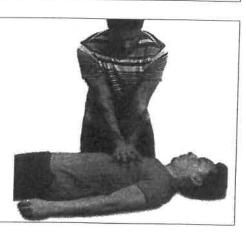
Giving CPR to an Adult

- 1. Verify that the person is unresponsive and not breathing.
 - Shout to get the person's attention, using the person's name if you know it. If the person does not respond, tap the person's shoulder and shout again while checking for normal breathing.
 - If the person does not respond and is not breathing or only gasping, continue to step 2.



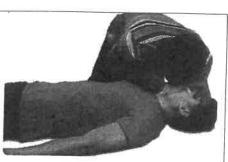
- 2. Place the person on his or her back on a firm, flat surface. Kneel beside the person.
- 3. Give 30 chest compressions.
 - Place the heel of one hand in the center of the person's chest, with your other hand on top. Position your body so that your shoulders are directly over your hands.
 - Keeping your arms straight, push down at least 2 inches, and then let the chest return to its normal position.
 - Push hard and push fast! Give compressions at a rate of 100-120 compressions per minute.



4. Give 2 rescue breaths.

- Place the breathing barrier over the person's nose and mouth.
- Open the airway. (Put one hand on the forehead and two fingers on the bony part of the chin and tilt the head back to a past-neutral position.)
- Pinch the nose shut and make a complete seal over the person's mouth with your mouth.
- Take a normal breath and blow into the person's mouth for about 1 second, looking to see that the chest rises.
- Take another breath, make a seal, then give the second rescue breath.

Note: If the first rescue breath does not cause the chest to rise, retilt the head and ensure a proper seal before giving the second rescue breath. If the second breath does not make the chest rise, an object may be blocking the airway. After the next set of chest compressions and before attempting rescue breaths, open the mouth, look for an object and, if seen, remove it using a finger sweep. Continue to check the person's mouth for an object after each set of compressions until the rescue breaths go in.

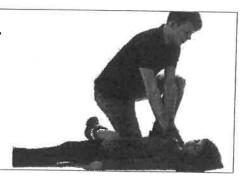


Giving CPR to an Adult continued

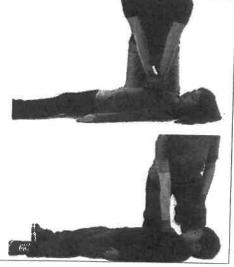
- 5. Continue giving sets of 30 chest compressions and 2 rescue breaths until:
 - You notice an obvious sign of life.
 - An AED is ready to use and no other trained responders are available to assist you with the AED.
 - You have performed approximately 2 minutes of CPR (5 sets of 30:2) and another trained responder is available to take over compressions.
 - EMS personnel take over.
 - You are alone and too tired to continue.
 - The scene becomes unsafe.

Giving CPR to a Child

- 1. Verify that the child is unresponsive and not breathing.
 - Shout to get the child's attention, using the child's name if you know it. If the child does not respond, tap the child's shoulder and shout again while checking for normal breathing.
 - If the child does not respond and is not breathing or only gasping, continue to step 2.



- 2. Place the child on his or her back on a firm, flat surface. Kneel beside the child.
- 3. Give 30 chest compressions.
 - Place the heel of one hand in the center of the child's chest, with your other hand on top. Position your body so that your shoulders are directly over your hands. (Alternatively, in a small child, you can use a one-handed CPR technique: place the heel of one hand in the center of the child's chest.)
 - Keeping your arms straight, push down about 2 inches, and then let the chest return to its normal position.
 - Push hard and push fast! Give compressions at a rate of 100–120 compressions per minute.



- 4. Give 2 rescue breaths.
 - Place the breathing barrier over the child's nose and mouth,
 - Open the airway. (Put one hand on the forehead and two fingers on the bony part of the chin and tilt the head back to a slightly past-neutral position.)



- Pinch the nose shut and make a complete seal over the child's mouth with your mouth.
- Take a normal breath and blow into the child's mouth for about 1 second, looking to see that the chest rises.
- Take another breath, make a seal, then give the second rescue breath.

Giving CPR to a Child continued

Note: If the first rescue breath does not cause the chest to rise, retilt the head and ensure a proper seal before giving the second rescue breath. If the second breath does not make the chest rise, an object may be blocking the airway. After the next set of chest compressions and before attempting rescue breaths, open the mouth, look for an object and, if seen, remove it using a finger sweep. Continue to check the child's mouth for an object after each set of compressions until the rescue breaths go in.

- 5. Continue giving sets of 30 chest compressions and 2 rescue breaths until:
 - You notice an obvious sign of life.
 - An AED is ready to use and no other trained responders are available to assist you with the AED.
 - You have performed approximately 2 minutes of CPR (5 sets of 30:2) and another trained responder is available to take over compressions.
 - You have performed approximately 2 minutes of CPR (5 sets of 30:2), you are alone and caring for a child, and you need to call 9-1-1 or the designated emergency number.
 - EMS personnel take over.
 - You are alone and too tired to continue.
 - The scene becomes unsafe.

Giving CPR to an Infant

- 1. Verify that the infant is unresponsive and not breathing.
 - Shout to get the infant's attention, using the infant's name if you know it. If the infant does not respond, tap the bottom of the infant's foot and shout again while checking for normal breathing.
 - If the infant does not respond and is not breathing or only gasping, continue to step 2.



- 2. Place the infant on his or her back on a firm, flat surface. Stand or kneel next to the infant,
- 3. Give 30 chest compressions.
 - Place one hand on the infant's forehead.
 - Place the pad of two fingers on the center of the infant's chest, just below the nipple line.
 - Compress the chest about 1½ inches, and then let the chest return to its normal position.
 - Push hard and push fast! Give compressions at a rate of 100-120 compressions per minute.



- 4. Give 2 rescue breaths.
 - Place the breathing barrier over the infant's nose and mouth.
 - Open the airway. (Put one hand on the forehead and two fingers on the bony part of the chin and tilt the head back to a neutral position.)
 - Make a complete seal over the infant's nose and mouth with your mouth.
 - Take a normal breath and blow into the infant's nose and mouth for about 1 second, looking to see that the chest rises.
 - Take another breath, make a seal, then give the second rescue breath.

Note: If the first rescue breath does not cause the chest to rise, retilt the head and ensure a proper seal before giving the second rescue breath. If the second breath does not make the chest rise, an object may be blocking the airway. After the next set of chest compressions and before attempting rescue breaths, open the mouth, look for an object and, if seen,



Giving CPR to an Infant continued

remove it using a finger sweep. Continue to check the infant's mouth for an object after each set of compressions until the rescue breaths go in.

- 5. Continue giving sets of 30 chest compressions and 2 rescue breaths until:
 - You notice an obvious sign of life.
 - An AED is ready to use and no other trained responders are available to assist you with the AED.
 - You have performed approximately 2 minutes of CPR (5 sets of 30:2) and another trained responder is available to take over compressions.
 - You have performed approximately 2 minutes of CPR (5 sets of 30:2), you are alone and caring for an infant, and you need to call 9-1-1 or the designated emergency number.
 - EMS personnel take over.
 - You are too tired to continue.
 - The scene becomes unsafe.

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Skill Sheet 3-4

Using an AED

Note: Do not use pediatric AED pads on an adult or on a child older than 8 years or weighing more than 55 pounds. However, adult AED pads can be used on a child younger than 8 years or weighing less than 55 pounds if pediatric AED pads are not available.

- 1. Turn on the AED and follow the voice prompts.
- 2. Remove all clothing covering the chest and, if necessary, wipe the chest dry.
- 3. Place the pads.
 - Place one pad on the upper right side of the chest and the other on the lower left side of the chest below the armpit.
 - If the pads may touch (e.g., on an infant or small child), place one pad in the middle of the chest and the other pad on the back, between the shoulder blades.







4. Plug the connector cable into the AED, if necessary.



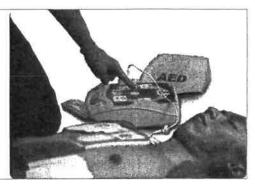
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Using an AED continued

- 5. Prepare to let the AED analyze the heart's rhythm.
 - Make sure no one, including you, is touching the person. Say, "EVERYONE CLEAR!" in a loud, commanding voice.
 - If the AED tells you to, push the "analyze" button to start this process.



- 6. Deliver a shock, if the AED determines one is needed.
 - Make sure no one, including you, is touching the person. Say, "EVERYONE CLEAR!" in a loud, commanding voice.
 - Push the "shock" button to deliver the shock.



- 7. After the AED delivers the shock, or if no shock is advised:
 - Immediately begin CPR, starting with compressions. Continue giving CPR (about 2 minutes, or 5 sets of 30:2) until prompted by the AED.
 - Continue giving CPR and following the AED's prompts until you see an obvious sign of life or EMS personnel arrive.

Caring for an Adult Who Is Choking

- 1. Verify that the person is choking by asking the person to speak to you.
 - If the person is able to speak to you or is coughing forcefully: Encourage the person to keep coughing, but be prepared to give first aid for choking if the person's condition changes.
 - If the person is unable to speak to you or is coughing weakly: Send someone to call 9-1-1 or the designated emergency number and to obtain an AED and first aid kit. Continue to step 2 after obtaining consent.

2. Give 5 back blows.

- Position yourself to the side and slightly behind the person. Place one arm diagonally across the person's chest (to provide support) and bend the person forward at the waist so that the person's upper body is as close to parallel to the ground as possible.
- Firmly strike the person between the shoulder blades with the heel of your hand.



3. Give 5 abdominal thrusts.

- Have the person stand up straight. Stand behind the person with one foot in front of the other for balance and wrap your arms around the person's waist.
- Using two fingers of one hand, find the person's navel. With your other hand, make a fist and place the thumb side against the person's stomach, right above your fingers.
- Cover the fist with your other hand.
- Pull inward and upward to give an abdominal thrust.





(Continued)

- The person can cough forcefully, speak, cry or breathe.
- The person becomes unresponsive.

Note: If the person becomes unresponsive, gently lower him or her to the floor and begin CPR if you are trained, starting with compressions. After each set of compressions and before attempting rescue breaths, open the person's mouth, look for the object and remove it if seen. Never put your finger in the person's mouth unless you actually see the object.

Caring for a Child Who Is Choking

- 1. Verify that the child is choking by asking the child to speak to you.
 - If the child is able to speak to you or is coughing forcefully: Encourage the child to keep coughing, but be prepared to give first aid for choking if the child's condition changes.
 - If the child is unable to speak to you or is coughing weakly: Send someone to call 9-1-1 or the designated emergency number and to obtain an AED and first aid kit. Continue to step 2 after obtaining consent.

2. Give 5 back blows.

- Position yourself to the side and slightly behind the child. Place one arm diagonally across the child's chest (to provide support) and bend the child forward at the waist so that the child's upper body is as close to parallel to the ground as possible. Depending on the child's size, you may need to kneel.
- Firmly strike the child between the shoulder blades with the heel of your hand.



3. Give 5 abdominal thrusts.

- Have the child stand up straight. Stand behind the child with one foot in front of the other for balance (or kneel) and wrap your arms around the child's waist.
- Using two fingers of one hand, find the child's navel. With your other hand, make a fist and place the thumb side against the child's stomach, right above your fingers.
- Cover the fist with your other hand.
- Pull inward and upward to give an abdominal thrust.





- The child can cough forcefully, speak, cry or breathe.
- The child becomes unresponsive.

Note: If the child becomes unresponsive, gently lower him or her to the floor and begin CPR if you are trained, starting with compressions. After each set of compressions and before attempting rescue breaths, open the child's mouth, look for the object and remove it if seen. Never put your finger in the child's mouth unless you actually see the object.

Caring for an Infant Who Is Choking

- 1. Verify that the infant is choking by checking to see if the infant is crying or coughing forcefully.
 - If the infant is crying or coughing forcefully: Allow the infant to keep coughing, but be prepared to give first aid for choking if the infant's condition changes.
 - If the infant is unable to cry or is coughing weakly: Send someone to call 9-1-1 or the designated emergency number and to obtain an AED and first aid kit. Continue to step 2 after obtaining consent.

2. Position the infant.

- Place your forearm along the infant's back, cradling the back of the infant's head with your hand.
- Place your other forearm along the infant's front, supporting the infant's jaw with your thumb and fingers.
- Turn the infant over so that he or she is face-down along your forearm.
- Lower your arm onto your thigh so that the infant's head is lower than his or her chest.

Note: Always support the infant's head, neck and back while giving back blows and chest thrusts.





3. Give 5 back blows.

Firmly strike the infant between the shoulder blades with the heel of your hand. Keep your fingers up to avoid hitting the infant's head or neck.



(Continued)

- Place one hand along the infant's back, cradling the back of the infant's head with your hand.
- While continuing to support the infant's jaw with the thumb and fingers of your other hand, support the infant between your forearms and turn the infant over so that he or she is face-up along your forearm.



Lower your arm onto your other thigh so that the infant's head is lower than his or her chest.

5. Give 5 chest thrusts.

- Place the pads of two fingers in the center of the infant's chest on the breastbone, just below the nipple line.
- Press down about 1½ inches and then let the chest return to its normal position.



- 6. Continue giving sets of 5 back blows and 5 chest thrusts until:
 - The infant can cough forcefully, cry or breathe.
 - The infant becomes unresponsive.

Note: If the infant becomes unresponsive, lower him or her to a firm, flat surface and begin CPR if you are trained, starting with compressions. After each set of compressions and before attempting rescue breaths, open the infant's mouth, look for the object and remove it if seen. Never put your finger in the infant's mouth unless you actually see the object.

Removing Latex-Free Disposable Gloves

1. Pinch the palm side of one glove on the outside near your wrist.



2. Pull the glove toward your fingertips, turning it inside out as you pull it off your hand.



3. Hold the glove in the palm of your other (still-gloved) hand.



4. Carefully slip two fingers under the wrist of the other glove. Avoid touching the outside of the glove.



5. Pull the glove toward your fingertips, turning it inside out as you pull it off your hand. The other glove is now contained inside.



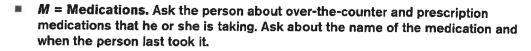
6. Dispose of the gloves properly and wash your hands.



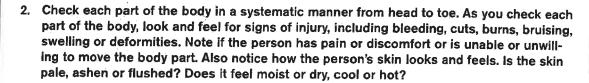
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Checking a Responsive Person

- Interview the person (or bystanders, if necessary) using SAMPLE to get a better understanding of the situation and the nature of the person's illness or injury.
 - S = Signs and symptoms. Take note of signs (which you can observe for yourself, using your senses) and ask the person about symptoms (feelings that only the person can describe to you, such as pain, shortness of breath or nausea).
 - A = Allergies. Ask the person about allergies, noting causes of allergic reactions in the past and whether the allergic reaction was severe or life threatening.



- P = Pertinent medical history. Ask the person whether he or she has any medical conditions.
- L = Last food or drink. Ask the person when he or she last had something to eat or drink, what the person ate or drank, and how much.
- E = Events leading up to the incident. Ask the person what was happening and what he or she was doing just prior to when he or she began to feel ill or was injured.



Note: Do not ask the person to move if you suspect a head, neck or spinal injury. Do not ask the person to move any area of the body that causes discomfort or pain.

Note: As you check the person, take note of any medical identification tags (typically worn around the neck, wrist or ankle).

Head and neck. Check the scalp, face, ears, eyes, nose, mouth and neck for signs of injury.





Chest and abdomen. Check the chest and abdomen for signs of injury. Ask the person to take a deep breath and blow the air out. Look for trouble breathing or changes in breathing. Ask the person if he or she is experiencing pain during breathing.



- Hips. Check the hips for signs of injury. Ask the person if he or she is experiencing hip pain.
- Legs and feet. Check each leg and foot, one at a time, for signs of injury. Ask the person to wiggle his or her toes and feet.



Arms and hands. Check each arm and hand, one at a time, for signs of injury. Ask the person to wiggle his or her fingers and hands.



Checking a Responsive Person continued

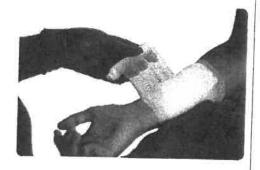
- 3. Provide care for any conditions found.
 - If your check reveals signs or symptoms of an injury or illness, call 9-1-1 or the designated emergency number (if necessary) and provide care according to the conditions that you find and your level of knowledge and training. Be alert to signs that the person's condition is worsening.
 - If the person has no apparent signs or symptoms of injury or illness, have him or her rest in a comfortable position. Continue to watch for changes in the person's condition.

Using Direct Pressure to Control External Bleeding

- Cover the wound with a sterile gauze pad and apply direct pressure until the bleeding stops.
 - If blood soaks through the first gauze pad, put another one on top and apply additional direct pressure (press harder than you did before, if possible). It may take several minutes for the bleeding to stop.



- 2. When the bleeding stops, check for circulation (feeling, warmth and color) beyond the injury.
- Apply a roller bandage. Wrap the bandage around the wound several times to hold the gauze pad(s) in place.
 - Tie or tape the bandage to secure it.
 - Check for circulation (feeling, warmth and color) beyond the injury. If there is a change in feeling, warmth or color (indicating that the bandage is too tight), gently loosen it.



4. Remove your gloves and wash your hands.

Note: If the bleeding does not stop with the application of direct pressure, call 9-1-1 or the designated emergency number if you have not already, and give care for shock if necessary.