

CPR



CPR is short for Cardio Pulmonary Resuscitation

These notes are designed to accompany face to face training with a manikin and are in no way definitive.

CPR is a lifesaving action performed on a casualty who is unconscious and not breathing. As with all first aid scenarios you must consider your own safety first and then that of others before the casualty. You don't want another casualty.

Primary survey

- Danger
- Responses
- Airways
- Breathing > 999
- Circulation



The primary survey, we should default to this with every casualty we deal with.

Danger. Is it safe for us to approach? Can I make people safer?

Response. Is the casualty able to respond to your presence, your voice or to pain? If not they are unconscious.

Airways. Is anything blocking the airway? Vomit or their own tongue?

Breathing. Is the casualty breathing? IF NO THEN CPR

Circulation. Are there any problems with circulation? IF NO BREATHING THEN YES THERE IS A PROBLEM SO DO CPR.

Is it magic?



CPR is rarely a magic fix like we see on TV it is in fact rare that a person starts breathing again while a first aider does CPR. Rather we are keeping oxygenated blood circulating whilst the emergency services get to us. If we keep the brain oxygenated then the emergency services will be much more likely to be able to save the person's life.

It is not guaranteed that CPR will save a life but it will give the casualty a much greater chance.

Agonal Gasps

Sometimes when doing a primary survey on a casualty you may be unsure if someone is breathing or not because of Agonal Gasps. The mouth is opening and closing (similar to a fish) but air is not being drawn in and not being circulated. Watch the video below for an example.

Real life CPR video

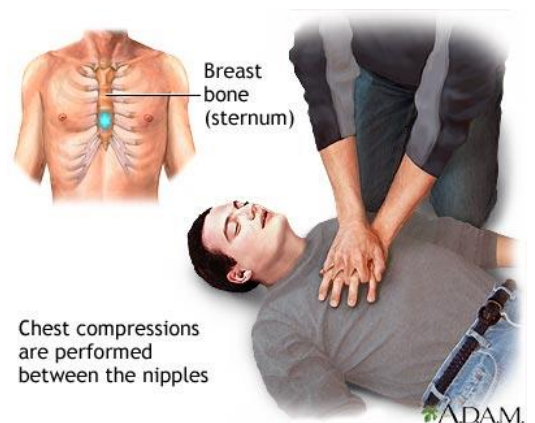
NB some people may find content alarming. In this video the casualty is giving agonal gasps.

<https://www.youtube.com/watch?v=88uCTEmuuGI>

Please note that the lifeguards are using a different technique to that which first aiders use. This is due to different training and equipment being available.

To give effective CPR to an adult we should;

1. Go through the Primary Survey, **includes calling 999!**
2. Establish the casualty is not breathing.
3. Place the HEAL of your hand in the centre of the casualty's chest.
4. Press down 5 to 6 cm and allow to lift to normal then repeat.
5. 30 compressions of the same depth at a rhythm of 100 to 120 beats per minute.
6. 2 breaths into the mouth holding the nose to prevent air escape. Just enough air to make the chest rise is enough.
7. Back to 30 compressions.
8. Repeat until help arrives.



<http://67.199.56.100/adam/dohtml/graphics/images/en/19658.jpg>

Reasons to stop CPR

- The casualty is definitely coming round, breathing and moving.
- The emergency services tell you to stop
- You become exhausted



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Further considerations

Because of the possibility of the transfer of a minute amount of bodily fluids there are masks available for CPR, find these in all good first aid kits. If the casualty is suffering from contact with a corrosive liquid you must use a mask. If you are relatively close to help or doing breaths is not possible then doing only compressions and no breaths is advised.

If you ever have to perform CPR ensure that you look after yourself afterwards, call a friend, don't be alone.

Casualty vomiting during CPR is common you will hear gurgling. Roll casualty onto side to drain vomit. Wipe mouth and continue CPR. Do this as swiftly as possible.

AED (that electric shock thingy)

Most people have by now noticed the AED machines being installed in a variety of public places. These are Automated External Defibrillators and as such anyone is able to use it. They are very well designed with step by step instructions and you cannot shock yourself using one.

Please make it your business to have a nosy next time you see one or have a look on this map for your nearest device <http://www.heartsafe.org.uk/AED-Locations> check now, don't leave it too late!! Once you have checked it's location take a trip to check it is actually still there, no-one is paid to oversee their placement.

*AED training is available

Where is your nearest AED?

How do you get into it?

