



Saudi Heart Association  
جمعية القلب السعودية



National CPR Committee

# CPR GUIDELINES



It is our pleasure to present to you this work as a result of team work of the **national CPR committee** at the **Saudi Heart Association (SHA)**.  
We adapted the 2010 guidelines as per

## The International Liaison Council (Committee) of Resuscitation (ILCOR)

which was published October, 2010. We modified some of the items of 2005 guidelines and kept some as it is depending on our national need in the kingdom of Saudi Arabia. As an example, the sequence of A.B.C in children and infants should not change because most common cause of child and/or infant arrest is respiratory, so respiratory assessment should take place at the beginning.

Reviewing the international resuscitation science since 2010 till 2012, there is a great emphasis on the early CPR and early defibrillation which make difference between life and death, good outcome and bad outcome of in hospital CPR. there is also a great emphasis on CPR awareness to the community through the skillful programs.





# National CPR

Committee Members

TEAM  
WORK



This product is the nucleus of our own text material in the future. Your active support, opinion and participation are well taken and appreciated.

# ADULT BASIC LIFE SUPPORT (PRE-HOSPITAL)

**UNRESPONSIVE?**

**Shout for help / Call 997 and AED**

**look for breathing effort**

**NOT BREATHING NORMALLY?**

**OR GASPING BREATH**

**30 chest compressions**

**Go for ABC assessment**

**Look, listen, feel  
(if HCP or trained layperson)**

**OPEN AIRWAY**

**2 rescue breaths (if HCP or trained layperson)  
30 compressions**

**Repete this step until EMS arrives or unable to procede**

# IN HOSPITAL RESUSCITATION

**Collapsed / sick patient**

**Shout for HELP  
& assess patient / call for defibrillator**

**Signs of life?**

**YES**

**Assess ABCDE**

Recognize & treat

Oxygen,  
monitoring, iv access

**Call resuscitation team If appropriate  
Or first response team (FRT)**

**Handover to resuscitation team or FRT**

**NO**

**Call resuscitation team**

**CPR 30:2  
with oxygen & airway adjuncts**

**Apply pads/monitor Attempt  
defibrillation If appropriate**

**Advanced life Support when  
resuscitation team arrives**

# PEDIATRIC BASIC LIFE SUPPORT

**Unresponsive?**

**Shout for Help**

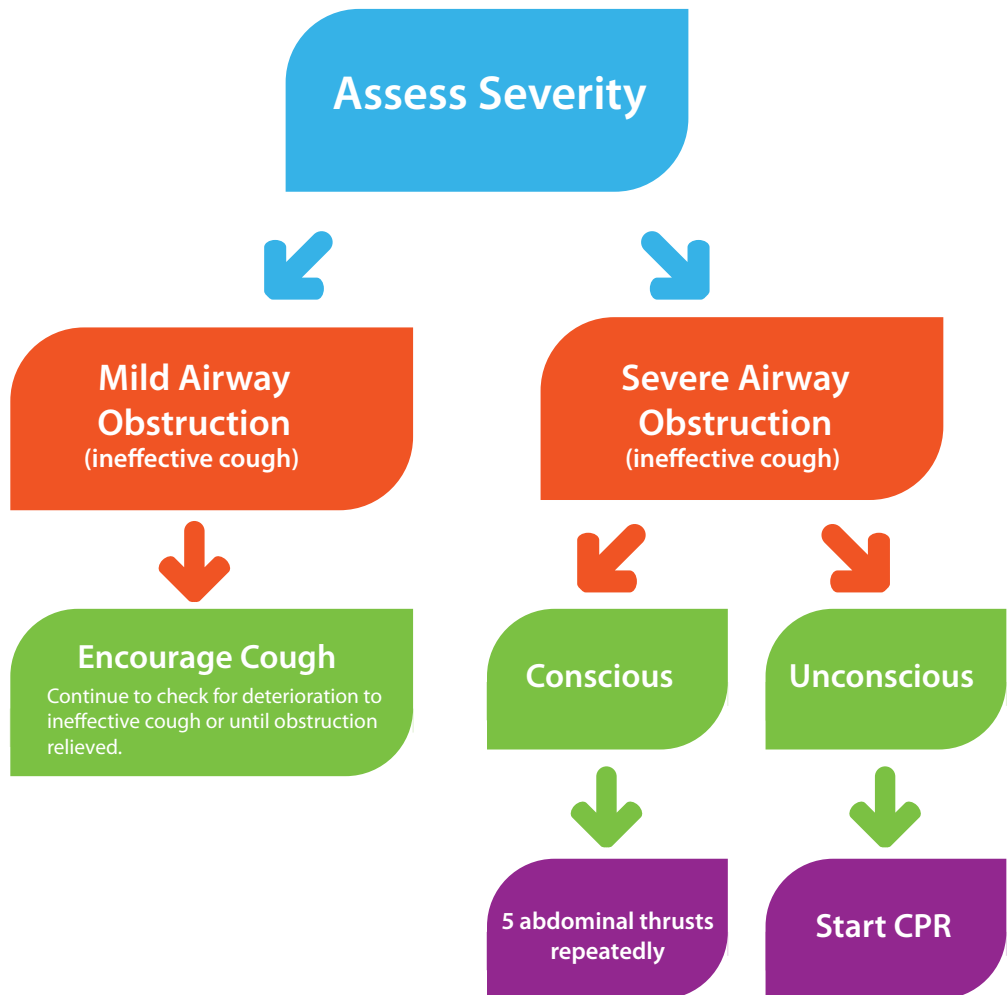
**Open Airway**

Look, listen, feel (if HCP or trained layperson)  
Not breathing normally? No signs of life?

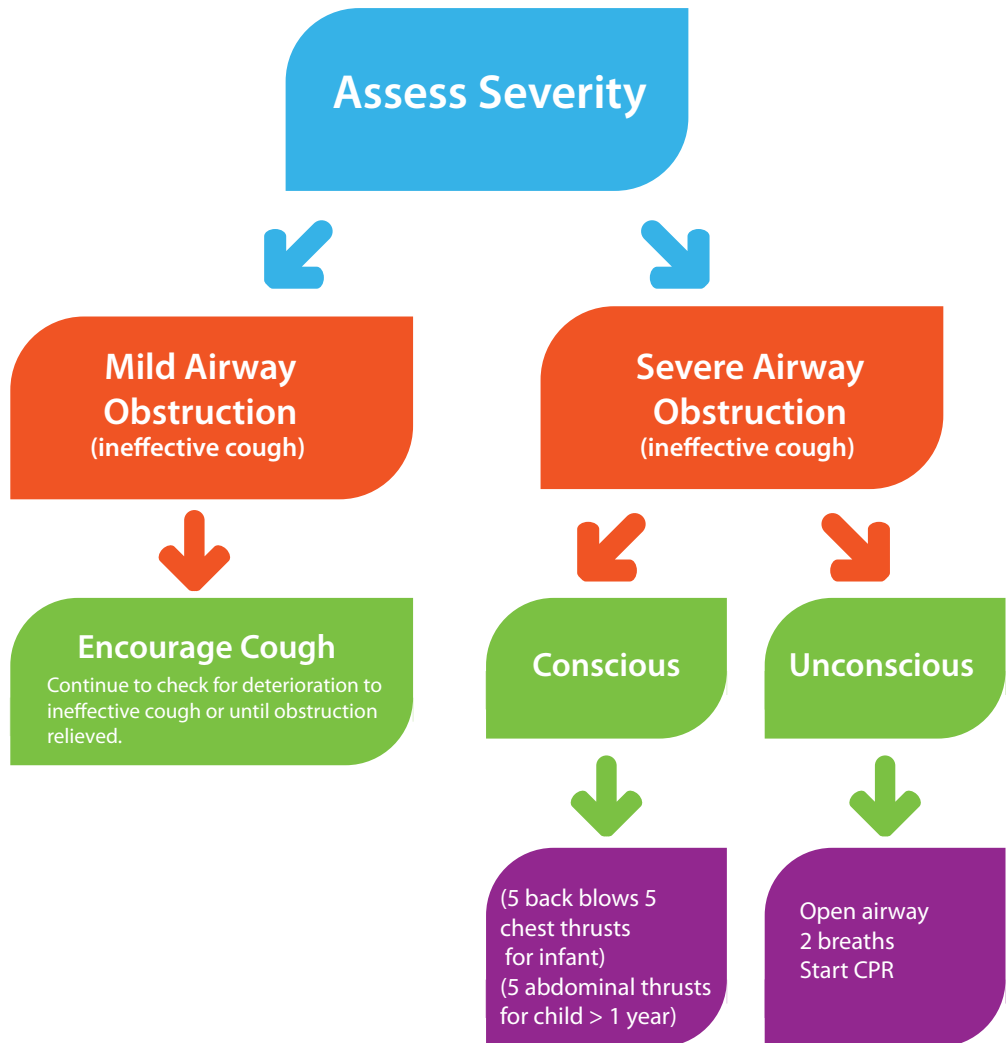
**2 Rescue Breaths  
15 Chest Compressions**

**Call cardiac arrest team or Pediatric ALS team**

# ADULT FOREIGN BODY AIRWAY OBSTRUCTION TREATMENT



# PAEDIATRIC FOREIGN BODY AIRWAY OBSTRUCTION TREATMENT



# AUTOMATED EXTERNAL DEFIBRILLATION ALGORITHM

**Unresponsive?**

**Look for Breathing Effort**  
Not breathing normally/or gasping breath

**Call 997 and AED**

**CPR 30:2**  
Until AED is attached

**AED Assesses Rythm**

**Shock Advised**

**No Shock Advised**

**1 Shock**

**Immediately resume:**  
CPR 30:2 for 2 min

**Immediately resume:**  
CPR 30:2 for 2 min

Continue until the victim  
starts to wake up: to  
move, open eyes and to  
breathe normally



# **PERFORMANCE**

Sheets

# SKILL PERFORMANCE SHEETS

## Skill Performance Sheet (Adult 1-Man CPR)

Student Name \_\_\_\_\_ code # \_\_\_\_\_ batch no. \_\_\_\_\_

Performance Guidelines		Done
1.	Establish unresponsiveness and effort of breathing (3-5 sec.) EMS system should be activated (997) and get the AED	
2.	No effort of breathing, check pulse (if trained 5-10 sec) and immediate chest compression 30 Compressions Within the first 10-15 seconds.(C-A-B) sequence. Open airway (head tilt-chin lift). Check for breathing (look, listen, feel).	
3.	If breathing is absent or inadequate, give 2 breaths (1 second per breath (3 sec.)), Healthcare providers should use a barrier device while lay persons can use any other means of protecting themselves, e.g. Shamagh, Ghuthra, shayla, handkerchief or towel. Watch chest rise and fall during exhalation.	
4.	Locate and check carotid pulse or femoral pulse (5-10 sec.). If pulse is present but no breathing, provide rescue breathing (one breath every 5-6 seconds, about 10 -12 breaths per minute).	
5.	If no pulse, start compression: ventilation cycles. Give 5 cycles (Approximately 2 minutes) with ratio 30:2 and at a rate of at least 100 per minute. Minimal interruption during compressions (<10 seconds), Chest compression (depth of 5 cm = 2 inches.) followed by 2 breaths (1 second/breath). The set of each 30 compressions should take approximately 15-18 seconds.	
6.	After 5 cycles of CPR (Approximately 2 minutes) compression: ventilation ratio 30:2 and at a rate of at least 100 per minute.), check for pulse in carotid or femoral arteries. According to the findings: <ul style="list-style-type: none"> <li>• If there is pulse and breathing: <u>Place the victim in the recovery position</u> carefully, especially if neck injury is suspected, monitor Vital signs until EMS arrives.</li> <li>• If there is pulse but no breathing. <u>Continue rescue breathing</u>, one breath every 5 – 6 sec. (10 - 12/min.), Recheck pulse every 2 minutes.</li> <li>• If there is no pulse, no breathing. <u>Continue CPR</u>, 5 cycles of CPR (Approximately 2 minutes) as mentioned in step 5. Then check pulse in carotid or femoral arteries (optional every 2-5 minutes). Continue the cycles until success is achieved or EMS arrives.</li> </ul>	

Comments:

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Instructor: \_\_\_\_\_

Choose one: ☐ Complete

☐ Needs more practice

# SKILL PERFORMANCE SHEETS

## Skill Performance Sheet (Adult 2 -Man CPR)

Student Name \_\_\_\_\_ code # \_\_\_\_\_ batch no. \_\_\_\_\_

	Performance Guidelines	Done
1.	Establish unresponsiveness and effort of breathing (3 - 5 sec.) Ask a second rescuer to activate the EMS system (997) and get the AED	
	RESCUER 1	
2.	No effort of breathing, check pulse (if trained 5-10 sec) and immediate chest compression 30 compressions Within the first 10-15 seconds.(C-A-B) sequence. Open airway (head tilt-chin lift). Check for breathing (look, listen, feel).	
3.	If breathing is absent or inadequate, give 2 breaths (1 second per breath 3 sec), Healthcare providers should use a barrier device while lay persons can use any other means of protecting themselves, e.g. Shamagh, Ghuthra, shayla, handkerchief or towel. Watch chest rise and fall during exhalation.	
4.	Locate and Check carotid pulse or femoral pulse (5- 10 sec.), If pulse is present but no breathing, provide rescue breathing (one breath every 5 – 6 sec., 10 – 12 times/per min.).	
5.	If no pulse, start compression: ventilation cycles. Give 5 cycles (Approximately 2 minutes) with ratio 30:2 and at a rate of at least 100 per minute. Minimal interruption during compressions (<10 seconds) Chest compression (depth of 5 cm = 2 inches) followed by 2 breaths (1 second/breath). The set of each 30 compression should take approximately 15-18 seconds.	
	RESCUER 2 arrives	
	Rescuer 1 stays as the ventilator and rescuer 2 acts as the compressor	
6.	Continue as 2 man CPR. Rescuer No. 2 immediately starts compression: ventilation cycles. Give 5 cycles (Approximately 2 minutes) with ratio 30:2 as in step 5, followed by 2 breaths (1 second/breath) by Rescuer 1. The pulse is checked at the end of the 2 minutes and every 2 minute thereafter when the switch is made, by rescuer 2 in the carotid or femoral arteries. According to the findings: <ul style="list-style-type: none"> <li>If there is pulse and breathing: <u>Place the victim in the recovery position</u> carefully, especially if neck injury is suspected. Monitor Vital signs until EMS arrives.</li> <li>If there is pulse but no breathing. <u>Continue rescue breathing</u> One breath / 5 – 6 sec. (10 -12 breaths per min.)</li> <li>If there is no pulse, no breathing: <u>Continue CPR</u>, by recue no.2, 5 cycles of CPR (Approximately 2 minutes) as in step 6. Then check pulse in carotid or femoral arteries (every 2 minutes when shift between the rescuers)Continue the cycles until success is achieved or EMS arrives.</li> </ul>	
	NOTE: Rescuers should switch every 5 cycles of CPR approximately 2 minutes.	

Comments:

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Instructor: \_\_\_\_\_

Choose one: ☐ Complete

☐ Needs more practice

# SKILL PERFORMANCE SHEETS

## Skill Performance Sheet (1-Man CPR for Children 1 Year old to puberty)

Student Name \_\_\_\_\_ code # \_\_\_\_\_ batch no. \_\_\_\_\_

Performance Guidelines		Done
1.	Establish unresponsiveness (3-5 sec.) If second rescuer is available, have him/her activate the EMS system. <b>997</b> & get the AED	
2.	No effort of breathing, Open airway (head tilt-chin lift) Check breathing (look, listen, feel) (if trained 5-10 sec). If breathing is present place the victim carefully in recovery position, then check pulse (if trained A,B,C the same sequence no change). If untrained or in pre hospital, apply (C-A-B) sequence with immediate chest compression 30 compressions Within the first 5-10 seconds .	
3.	If breathing is absent or inadequate, give 2 breaths (1 second per breath 3 sec.), Healthcare providers should use a barrier device while lay persons can use any other means of protecting themselves, e.g. Shamagh, Ghuthra, shayla, handkerchief or towel. Watch chest rise, allow for exhalation between breaths.	
4.	Locate and check carotid or femoral pulse (if trained 5-10 sec.). Take between If pulse is present but no breathing, provide rescue breathing (1 breath every 3 – 5 seconds, 12 – 20 breaths per minute)	
5.	If no pulse, Start CPR. Give 5 cycles (approx. 2 minutes) compression: ventilation ratio 30:2 and at a rate of at least 100 per minute. Minimal interruption during compressions (<10 seconds). Chest compression (depth at least ½ the depth of the chest about 2 inches) followed by 2 breaths (1 second per breath).	
6.	After 5 cycles of CPR (approx. 2 minutes, if rescuer is alone, activate EMS, <b>997</b> then check for pulse in carotid or femoral arteries, and breathing. According to findings; <ul style="list-style-type: none"> <li>• If there is pulse and breathing <b>Place the victim in recovery position</b> carefully, monitor vital signs until EMS arrives.</li> <li>• IF there is pulse but no breathing. <b>Continue rescue breathing</b>, 1 breath every 3 - 5 sec. (12 – 20 per minute.)</li> <li>• If there is no pulse and breathing. <b>Continue CPR</b> Give 5 cycles of CPR (approx. 2 minutes) as in step no.5; continue so on until success is achieved or EMS arrives.</li> </ul>	

Comments:

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Instructor: \_\_\_\_\_

Choose one: ☐ Complete

☐ Needs more practice

# SKILL PERFORMANCE SHEETS

## Skill Performance Sheet (2-Man CPR for Children 1 Year old to puberty)

Student Name \_\_\_\_\_ code # \_\_\_\_\_ batch no. \_\_\_\_\_

	Performance Guidelines	Done
1.	Establish unresponsiveness (3 - 5 sec.) If second rescuer is available, have him/her activate the EMS system. (997) & get the AED.	
	RESCUER 1	
2.	No effort of breathing, Open airway (head tilt-chin lift) Check breathing (look, listen, feel) (if trained 5-10 sec). If breathing is present place the victim carefully in recovery position, then check pulse (if trained A,B,C the same sequence no change). If untrained or in pre hospital, apply (C-A-B) sequence with immediate chest compression 30 compressions Within the first 5-10 seconds.	
3.	If breathing is absent or inadequate, give 2 breaths (1 second per breath 3 sec.) Healthcare providers should use a barrier device while lay persons can use any other means of protecting themselves, e.g. Shamagh, Ghuthra, shayla, handkerchief or towel. Watch chest rise and fall during exhalation	
4.	Locate and Check Carotid or femoral pulse(if trained 5 - 10 sec.) If pulse is present but no breathing, provide rescue breathing (one breath every 3- 5 sec., 12 – 20 times/per minute).	
5.	If no pulse or heart rate less than 60bpm with signs of poor perfusion, start CPR. Give 5 cycles (approximately 2 minutes), compression: ventilation ratio 30:2 and at a rate of at least 100 compressions per min. Minimal interruption during compressions (<10 seconds), Chest compression depth ½ the depth of the chest about 5cm. Followed by 2 breaths (1 breath/second). NOTE: Use one-hand / two hand compression method according to the size of the child	
	RESCUER 2 arrives	
6.	Continue as 2 man CPR. Rescuer No. 2 immediately starts to Give 5 cycles (approximately 2 minutes), compression: ventilation ratio 15:2 and at a rate of at least 100 compressions per min. Minimal interruption during compressions (<10 seconds), Chest compression depth ½ the depth of the chest about 4cm. Followed by 2 breaths by rescuer no.1(1 breath/second). The pulse is checked at the end of the 2 minutes and every 2 minute thereafter when the switch is made, by rescuer 2 in the carotid or femoral arteries. According to the findings: <ul style="list-style-type: none"> <li>If there is pulse and breathing: <b>Place the victim in the recovery position</b> carefully, especially if neck injury is suspected. Monitor Vital signs until EMS arrives.</li> <li>If there is pulse but no breathing. <b>Continue rescue breathing</b>, One breath Every 3 – 5 sec. (12 -20 breaths/min.)</li> <li>If there is no pulse, no breathing: <b>Continue 2 man CPR</b> as in step 6. Continue so on until success is achieved or EMS arrives.</li> </ul>	
	NOTE: Rescuers should switch every 5 cycles of CPR.	

Comments:

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Instructor: \_\_\_\_\_

Choose one: ☐ Complete

☐ Needs more practice

# SKILL PERFORMANCE SHEETS

## Skill Performance Sheet (Infant One-Man CPR)

Student Name \_\_\_\_\_ code # \_\_\_\_\_ batch no. \_\_\_\_\_

	Performance Guidelines	Done
1.	Establish unresponsiveness (3-5 sec.) If second rescuer is available, have him or her activate the EMS System. <b>997</b>	
2.	No effort of breathing, Open airway (head tilt-chin lift) Check breathing (look, listen, feel) (if trained 5-10 sec). If breathing is present place the victim carefully in recovery position, then check pulse (if trained A,B,C the same sequence no change). If untrained or in pre hospital, apply (C-A-B) sequence with immediate chest compression 30 compressions Within the first 5-10 seconds.	
3.	If breathing is absent or inadequate, give 2 breaths (1 second per breath 3 sec.). Healthcare providers should use a barrier device while lay persons can use any other means of protecting themselves, e.g. Shamagh, Ghuthra, shayla, handkerchief or towel. Watch chest rise, allow for exhalation between breaths.	
4.	Locate and check brachial pulse (if trained 5-10sec.) If pulse is present but there is no breathing, provide rescue breathing (1 breath every 3 - 5 seconds, 12 – 20 breaths per minute).	
5.	If no pulse or heart rate less than 60bpm with signs of poor perfusion, start CPR. Give 5 cycles (approximately 2 minutes), compression: ventilation ratio 30:2 and at a rate of at least 100 compressions per min. Minimal interruption during compressions (<10 seconds), Chest compression depth ½ the depth of the chest about 4cm. Followed by 2 breaths (1 breath/second).	
6.	After 5 cycles of CPR (approximately 2 minutes), compression: ventilation ratio 30:2 and at a rate of at least 100 compressions per min. Minimal interruption during compressions (<10 seconds), Chest compression depth ½ the depth of the chest about 4cm. Followed by 2 breaths (1 breath/second); If rescuer is alone, activate EMS, <b>997</b> then check for pulse in brachial artery, and breathing. According to findings; <ul style="list-style-type: none"> <li>• If there is pulse and breathing <b>Place the victim in recovery position</b> Carefully, monitor vital signs until EMS arrives.</li> <li>• If there is pulse but no breathing. <b>Continue rescue breathing</b>, 1 breath every 3 - 5 sec. (12 – 20 per minute.)</li> <li>• If there is no pulse and breathing. <b>Continue CPR</b> Give 5 cycles as in step no.6, continue so on until success is achieved or EMS arrives.</li> </ul>	

Comments:

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Instructor: \_\_\_\_\_

Choose one: ☐ Complete

☐ Needs more practice

# SKILL PERFORMANCE SHEETS

## Skill Performance Sheet Infant Two-Rescuer CPR

Student Name \_\_\_\_\_ code # \_\_\_\_\_ batch no. \_\_\_\_\_

	Performance Guidelines	Done
1.	Establish unresponsiveness (3 - 5 sec.) If second rescuer is available, have him or her activate the EMS system. (997)	
	RESCUER 1	
2.	No effort of breathing, Open airway (head tilt-chin lift) Check breathing (look, listen, feel) (if trained 5-10 sec). If breathing is present place the victim carefully in recovery position, then check pulse (if trained A,B,C the same sequence no change). If untrained or in pre hospital, apply (C-A-B) sequence with immediate chest compression 30 compressions Within the first 5-10 seconds.	
3.	If breathing is absent or inadequate, give 2 breaths (1 second per breath (3 sec.) . Healthcare providers should use a barrier device while lay persons can use any other means of protecting themselves, e.g. Shamagh, Ghuthra, shayla, handkerchief or towel. Watch chest rise, allow for exhalation between breaths.	
4.	Locate and check brachial pulse (if trained 5-10sec.) If pulse is present but there is no breathing, provide rescue breathing (1 breath every 3 - 5 seconds, 12 – 20 breaths per minute).	
5.	If no pulse or heart rate less than 60bpm with signs of poor perfusion, start CPR. Give 5 cycles (approximately 2 minutes), compression: ventilation ratio 30:2 and at a rate of at least 100 compressions per min. Minimal interruption during compressions (<10 seconds), Chest compression depth ½ the depth of the chest about 4cm. Followed by 2 breaths (1 breath/second).NOTE: Use 2 thumbs/encircling hands compression technique	
	RESCUER 2 arrives	
6.	Continue as 2 man CPR. Rescuer No. 2 immediately start 5 cycles (approximately 2 minutes), compression: ventilation ratio 15:2 and at a rate of at least 100 compressions per min. Minimal interruption during compressions (<10 seconds), Chest compression depth ½ the depth of the chest about 4cm. Followed by 2 breaths (1 breath/second), by Rescuer 1. The pulse is checked at the end of the 2 minutes and every 2 minute thereafter when the switch is made, by rescuer 2 in the brachial artery. According to the findings: <ul style="list-style-type: none"> <li>• If there is pulse and breathing: <u>Place the victim in the recovery position</u> carefully, especially if neck injury is suspected. Monitor Vital signs until EMS arrives.</li> <li>• If there is pulse but no breathing. <u>Continue rescue breathing</u>, One breath every 3 – 5 sec. (12 -20 breaths/min.)</li> <li>• If there is no pulse, no breathing: <u>Continue 2 man CPR</u> as in step 6. continue so on until success is achieved or EMS arrives.</li> </ul>	
	NOTE: Rescuers should switch every 5 cycles of CPR.	

Comments:

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Instructor: \_\_\_\_\_

Choose one: ☐ Complete ☐ Needs more practice

# SKILL PERFORMANCE SHEETS

## Skill Performance Sheet (Adult Foreign Body Airway Obstruction)

Student Name \_\_\_\_\_ code # \_\_\_\_\_ batch no. \_\_\_\_\_

Performance Guidelines		Done
1.	Ask "Are you choking?" If the patient nods " yes" and uses the universal sign of choking, immediately intervene by:	
2.	Stand behind the victim and give Abdominal Thrusts (Heimlich maneuver), aiming to increase the intrathoracic pressure and expel the foreign body. NOTE: Use Chest thrusts for pregnant or obese victim	
3.	Repeat thrusts with a distinctive movement to achieve expulsion of the foreign body or the victim becomes unconscious	
Adult Foreign Body Airway Obstruction – Victim becomes unconscious		
4.	Put the victim in the ground and activate the EMS system or send someone to activate. (997)	
5.	Observe for breathing normality or absence, If breathing is absent or inadequate, open the airway and try to ventilate. If unsuccessful, re-open the airway and try to ventilate again. If still unsuccessful begin cycles of chest compression and ventilation with the ratio 30:2.	
6.	Every time the airway is opened to give breaths, open the mouth wide and look for the object. If you see an object removes it using finger sweep. Then try to ventilate, If unsuccessful, re-open the airway and try to ventilate again, If still unsuccessful begin cycles of chest compression and ventilation with the ratio 30:2.	
7.	Repeat step 6 till chest raise, if chest raised, check pulse and continue 5 cycles of CPR about 2 minutes.	
8.	Repeat steps 7 and reassess the pulse every 2 minutes; According to findings: <ul style="list-style-type: none"> <li>If there is pulse and breathing: <u>Place the victim in the recovery position</u> carefully, especially if neck injury is suspected. Monitor Vital signs until EMS arrives.</li> <li>If there is pulse but no breathing. <u>Continue rescue breathing</u> one breath every 5 – 6 sec. (10 - 12/min.)</li> <li>If there is no pulse and no breathing. <u>Continue maneuvers of adult CPR</u>.</li> </ul>	
Adult Foreign Body Airway Obstruction – Victim found unconscious		
9.	Establish unresponsiveness and effort of breathing. (3-5 sec.) EMS system should be activated (997) and get the AED	
10.	No effort of breathing, check pulse(if trained) and immediate chest compression 30 Compressions Within the first 10-15 seconds.(C-A-B) sequence.	
	11. Open airway (head tilt-chin lift). Check for breathing (look, listen, feel). (5-10 sec) <u>If FBO suspected</u> Repeat steps 5,6,7 and 8	

Comments:

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Instructor: \_\_\_\_\_

Choose one: ☐ Complete ☐ Needs more practice

# SKILL PERFORMANCE SHEETS

## Skill Performance Sheet (Child Foreign Body Airway Obstruction)

Student Name \_\_\_\_\_ code # \_\_\_\_\_ batch no. \_\_\_\_\_

Performance Guidelines		Done
1.	Ask "Are you choking?" If the patient nods "yes" and uses the universal sign of choking, immediately intervene by:	
2.	Stand behind the victim and give Abdominal Thrusts (Heimlich maneuver), aiming to increase the intrathoracic pressure and expel the foreign body. NOTE: Use Chest thrusts for obese victim. Kneel down if the victim is short stature.	
3.	Repeat thrusts with a distinctive movement to achieve expulsion of the foreign body or the victim becomes unconscious	
Child Foreign Body Airway Obstruction – Victim becomes unconscious		
4.	Put the victim in the ground and activate the EMS system or send someone to activate. (997)	
5.	Observe for breathing normality or absence, If breathing is absent or inadequate, open the airway and try to ventilate. If unsuccessful, re-open the airway and try to ventilate again. If still unsuccessful begin cycles of chest compression and ventilation (30:2).	
6.	Every time the airway is opened to give breaths, open the mouth wide and look for the object. If you see an object removes it using finger sweep. Then try to ventilate, If unsuccessful, re-open the airway and try to ventilate again, If still unsuccessful begin cycles of chest compression and ventilation with the ratio 30:2.	
7.	Repeat step 6 till chest raise, if chest raised, check pulse and continue 5 cycles of CPR about 2 minutes.	
8.	Repeat steps 7 and reassess the pulse every 2 minutes; According to findings: <ul style="list-style-type: none"> <li>If there is pulse and breathing: <u>Place the victim in the recovery position</u> carefully, especially if neck injury is suspected. Monitor Vital signs until EMS arrives.</li> <li>If there is pulse but no breathing. <u>Continue rescue breathing</u> one breath every 3 – 5 sec. (12 - 20/min.)</li> <li>If there is no pulse and no breathing. <u>Continue maneuvers of Child CPR</u>.</li> </ul>	
Child Foreign Body Airway Obstruction – Victim found unconscious		
9.	Establish unresponsiveness and effort of breathing (3-5 sec.) If second rescuer around ask him to activate the EMS system (997) and get the AED	
10.	No effort of breathing, Open airway (head tilt-chin lift) Check breathing (look, listen, feel) (if trained 5-10 sec). If breathing is present place the victim carefully in recovery position, then check pulse (if trained A,B,C the same sequence no change). If untrained or in pre hospital, apply (C-A-B) sequence with immediate chest compression 30 compressions Within the first 5-10 seconds.	
11.	Open airway (head tilt-chin lift). Check for breathing (look, listen, feel). (5-10 sec) <u>If FBO suspected</u> Repeat steps 5,6,7 and 8 butting in consideration the activation of the EMS system (997) after the first 2 minutes of CPR.	

Comments: \_\_\_\_\_

Instructor: \_\_\_\_\_

Choose one: ☐ Complete ☐ Needs more practice

# SKILL PERFORMANCE SHEETS

## Skill Performance Sheet (Infant Foreign Body Airway Obstruction)

Student Name \_\_\_\_\_ code # \_\_\_\_\_ batch no. \_\_\_\_\_

Performance Guidelines – conscious		Done
1.	Confirm airway obstruction. Check for serious breathing difficulty, ineffective cough, weak or absent cry.	
2.	Give up to 5 back blows, turn the infant carefully using both hands supporting the face and the back of the head and give 5 chest Thrusts.	
3.	Repeat blows and thrusts until effective or victim becomes unconscious	
Infant Foreign Body Airway Obstruction – Infant becomes unconscious		
1.	Establish unresponsiveness (3-5 sec.) If second rescuer is available, have him or her activate the EMS System. <b>997</b>	
2.	No effort of breathing, Open airway (head tilt-chin lift) Check breathing (look, listen, feel) (if trained 5-10 sec). If breathing is present place the victim carefully in recovery position, then check pulse (if trained A,B,C the same sequence no change). If untrained or in pre hospital, apply (C-A-B) sequence with immediate chest compression 30 compressions Within the first 5-10 seconds.	
3.	Open the airway and look in the mouth, remove an object only if it is visible. Do not use a Blind finger sweep.	
4.	Try to ventilate. If ventilation is unsuccessful, re-open the airway and try to ventilate again. If still unsuccessful.	
5.	After 5 cycles of CPR (approximately 2 minutes), compression: ventilation ratio 30:2 and at a rate of at least 100 compressions per min. Minimal interruption during compressions (<10 seconds), Chest compression depth $\frac{1}{3}$ the depth of the chest about 4cm. Followed by 2 breaths (1 breath/second); If rescuer is alone, activate EMS, <b>997</b> then check for pulse in brachial artery, and breathing. According to findings; <ul style="list-style-type: none"> <li>If there is pulse and breathing <b>Place the victim in recovery position</b> Carefully, monitor vital signs until EMS arrives.</li> <li>If there is pulse but no breathing. <b>Continue rescue breathing</b>, 1 breath every 3 - 5 sec.(12 – 20 per minute.)</li> <li>If there is no pulse and breathing. <b>Continue CPR</b> Give 5 cycles as in step no.5, continue so on until success is achieved or EMS arrives.</li> </ul>	
6.	N.B. : Every time the airway is opened to give breaths, open the mouth and look for the object and, if one is seen remove it.	

Comments:

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Instructor: \_\_\_\_\_

Choose one: ☐ Complete ☐ Needs more practice

# SKILL PERFORMANCE SHEETS

## Performance Evaluation CPR and AED (Adult , Child & Infant )

Student Name \_\_\_\_\_ code # \_\_\_\_\_ batch no. \_\_\_\_\_

Performance Guidelines		Done
1.	Establish unresponsiveness and effort of breathing (3-5 sec.) EMS system should be activated (997) and get the AED	
2.	No effort of breathing, check pulse(if trained) and immediate chest compression 30 compressions Within the first 10-15 seconds.(C-A-B) sequence. Open airway (head tilt-chin lift). Check for breathing (look, listen, feel (5-10 sec)	
3.	If breathing is absent or inadequate, give 2 breaths (1 second per breath), (3 sec.) Healthcare providers should use a barrier device while lay persons can use any other means of protecting themselves, e.g. Shamagh, Ghuthra, shayla, handkerchief or towel. Watch chest rise and fall during exhalation.	
4.	Locate and check carotid pulse or femoral pulse ( brachial for Infant). (5-10 sec.) If pulse is present but no breathing, provide rescue breathing (one breath every 5-6 seconds, about 10 -12 breaths per minute OR one breath every 3-5 seconds, about 15-20 breath per minute.).	
5.	If no pulse, start compression: ventilation cycles. Give 5 cycles (Approximately 2 minutes) with ratio 30:2 and at a rate of at least 100 per minute. Minimal interruption during compressions (<10 seconds), Chest compression (depth of 5 cm = 2 inches.) followed by 2 breaths (1 second/breath). The set of each 30 compressions should take approximately 15-18 seconds, until AED is available.	
AED Skills (AED arrives at any point during basic CPR)		
6.	Place the AED next to the victim . POWER ON the AED	
7.	Attach electrode pads in the proper positions (as pictured on each of the AED electrodes, sternum and apex, with proper contact and no overlap of pads). NOTE: CPR should not be interrupted during this procedure.	
8.	Clear the victim during the ANALYZE. Some machines may ask you to press the analysis button, others will analyze automatically. The AED may take 5-15 seconds for analysis. (AED advises shock and charges)	
9.	Clear before delivering the shock. Ensure no contact with the victim. <b>Loudly announce "I am clear, you are clear, all are clear" or simply "clear"</b> , then press the shock button. Single shock only to be delivered at the end of 2 minutes and every 2 minutes thereafter. IN between start CPR 5 cycles of chest compression: ventilation as per age group. CPR is applied as 1 man CPR, while the second rescuer only operates the AED.	
10.	Repeat steps 7-8 until the EMS or ACLS team arrive or until the AED shows "No Shock Indicated". Continue monitoring the vital signs and according to findings: <ul style="list-style-type: none"> <li>If there is pulse and breathing: <b>Place in the recovery position</b> carefully, especially if neck injury is suspected, monitor Vital signs &amp; ECG.</li> <li>If there is pulse but no breathing. <b>Continue rescue breathing</b> (1 breath every 5 – 6 sec. (10 – 12/min.) for adult or one breath / 3 – 5 sec. (12 – 20 min.) for child and infant)</li> <li>If there is no pulse and breathing: <b>Continue CPR</b> 5 cycles of CPR (approx. 2 minutes) compression: ventilation 30:2 ratio and at a rate of least 100 per minute. Minimal interruption in compressions. Chest compressions depth according to the age of the victim, then analyze, shock, CPR and so on until success is achieved or EMS arrives.</li> </ul>	

Comments: \_\_\_\_\_

Instructor: \_\_\_\_\_

Choose one: ☐ Complete ☐ Needs more practice