



Amherst Fire District Procedure

CPR

Clinical Indications:

- Basic life support for the patient in cardiac arrest

Procedure:

1. Assess the patient's level of responsiveness (shake and shout)
2. If no response and there is no mechanism indicating a spinal injury, open the patient's airway with the head-tilt, chin-lift and look, listen, and feel for respiratory effort. For infants, positioning the head in the sniffing position is the most effective method for opening the airway.
3. If the patient may have sustained C-spine trauma, use the modified jaw thrust while maintaining immobilization of the C-spine.
4. If no respiratory effort, give two rescue breaths using the appropriately sized BVM (infant, child, adult).
5. Check pulse (carotid for adults and children, brachial for infants) for at least 10 seconds, if no pulse, start CPR. If pulse is <60bpm in infants and children, with signs of poor perfusion, start CPR. Initiate compressions according to the Infant, Child, Adult chart below.
6. If the arrest was witnessed by EMS personnel move directly to defibrillation. If possible, consider having a second provider initiate chest compression while preparing for defibrillation.
7. If the arrest was unwitnessed initiate compressions at 100-120/min for 2 minutes. If possible have a second provider attach AED/monitor to analyze rhythm after completion of 200 compressions.

Age	Location	Depth	Ratio
Infant	Just below nipple line on sternum.	1/3 to 1/2 the anterior – posterior chest depth. (about 1 ½ inches)	30:2 (one Rescuer) 15:2 (two Rescuer) 100-120 compressions/min.
Child	Center of sternum between nipples.	1/3 to 1/2 the anterior – posterior chest depth. (about 2 inches)	30:2 (one Rescuer) 15:2 (two Rescuer) 100-120 compressions/min.
Adult	Center of sternum between nipples.	At least 2 inches	30:2 (one Rescuer) 30:2 (two Rescuer) 100-120 compressions/min.

2015 AHA Guidelines

8. Provide no more than 8 to 10 breaths per minute with a BVM and only until chest rise is observed.
9. Reassess shockable rhythm every 2 minutes. (pulse checks are not necessary unless a rhythm change has occurred.)
10. Establish an advanced airway per “Cardiac Arrest” protocol
11. Document all times and procedures in the Patient Care Report (PCR)

Certification Requirements:

- Successfully complete an annual skill evaluation inclusive of the indications, contraindications, technique, and the possible complications of the procedure.