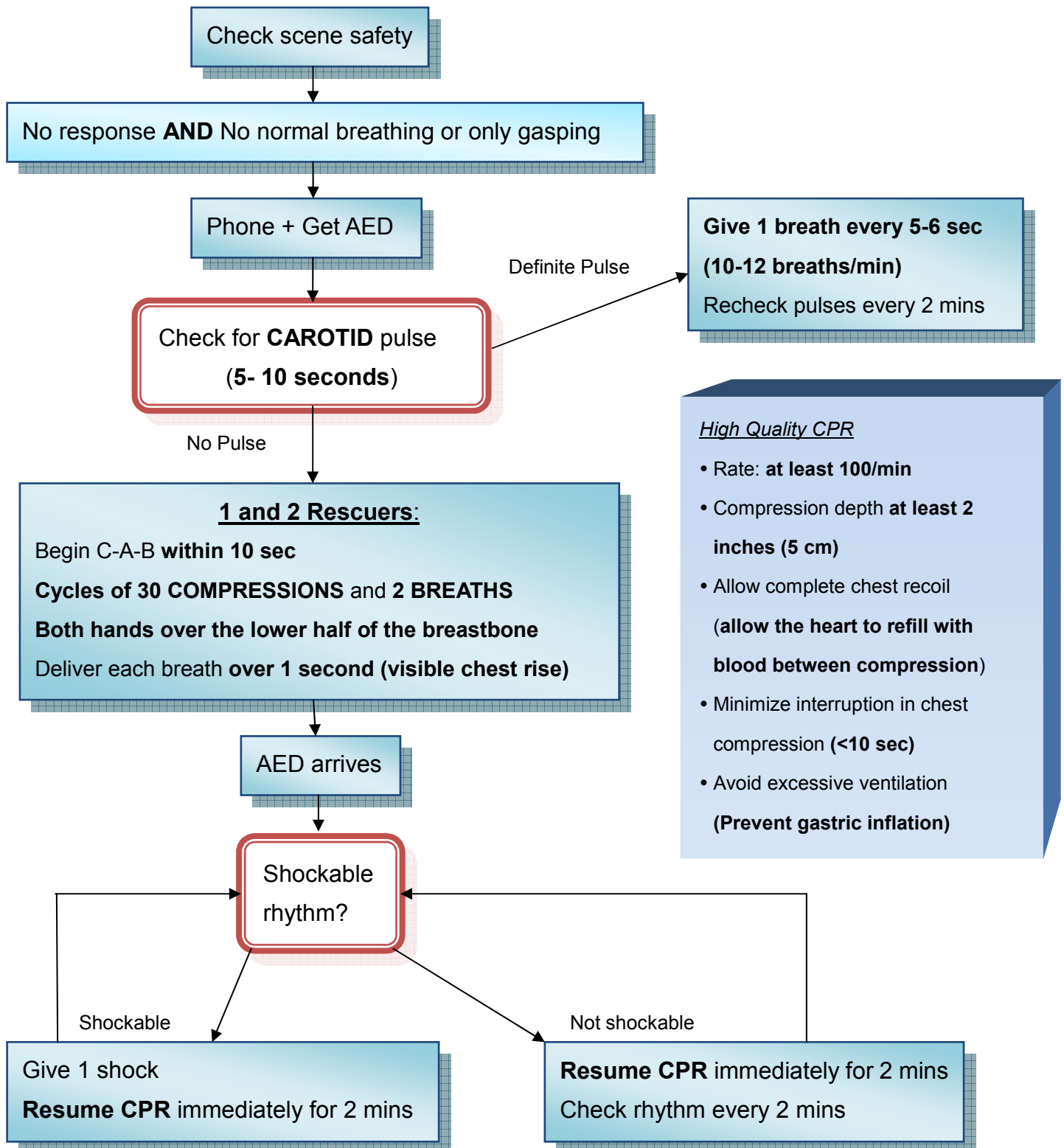


# Adult BLS Algorithm



## 2 rescuer CPR: role

- Rescuer 1: Perform chest compressions
- Rescuer 2: Maintain an airway & give ventilations
- Switch roles after every 5 cycles of CPR

## Advanced airway (adult, child and infant):

- Compressions rate at least 100/min with no pause for ventilation
- 1 breath every 6 to 8 seconds (8 to 10 breaths/min)

# Pediatric BLS Algorithm

**Children:** 1 year of age to puberty

**Infants:** up to 1 year of age

Check scene safety

No response and No normal breathing or only gaspings

Lone Rescuer:  
For **SUDDEN COLLAPSE**,  
Phone + Get AED

Check for pulse (**5 - 10 seconds**)  
(**CAROTID / FEMORAL** pulse for **CHILDREN**)  
(**BRACHIAL** pulse for **INFANTS**)

Definite Pulse

Give 1 breath every 3-5 sec  
(**12-20 breaths/min**)  
Recheck pulses every 2 mins

No Pulse or pulse rate < 60/min  
with poor perfusion

Begin C-A-B within 10 sec

**INFANTS:** compression below the nipple line

1 rescuer: 2 fingers

2 rescuers: 2 thumb-encircling hands technique

**CHILDREN:** 1 or 2 hands over the lower half of the breastbone

• 1 Rescuer: 30 **COMPRESSIONS** and 2 **BREATHS**

• 2 Rescuers: 15 **COMPRESSIONS** and 2 **BREATHS**

Deliver each breath over 1 second (visible chest rise)

After about 2 mins,  
phone and get AED if not done

AED arrives

Shockable  
rhythm?

Shockable

Not shockable

Give 1 shock  
**Resume CPR** immediately for 2 mins

**Resume CPR** immediately for 2 mins  
Check rhythm every 2 mins

## High Quality CPR

- Rate: at least 100/min
- Compression depth at least 1/3 AP diameter of chest, about 1 1/2 inches (4cm) in infants and 2 inches (5cm) in children
- Allow complete chest recoil (allow the heart to refill with blood between compression)
- Minimize interruption in chest compression (< 10 sec)
- Avoid excessive ventilation (Prevent gastric inflation)

## Automated External Defibrillator

### Choice of AED

#### Adult:

- AED with adult dose / pads

#### Child (aged 1 to <8):

- 1<sup>st</sup> priority: AED with pediatric dose attenuator / child pads
- 2<sup>nd</sup> priority: AED with adult dose / standard adult pads

#### Infant (aged <1):

- 1<sup>st</sup> priority: Manual defibrillator
- 2<sup>nd</sup> priority: AED with pediatric dose attenuator / child pads
- 3<sup>rd</sup> priority: AED with adult dose / standard adult pads

### Universal steps for operating an

#### AED:

1. Power on the AED
2. Attach AED pads
3. Analyze the rhythm
4. Press the shock button as prompted by the AED if shock delivery is required
5. Resume CPR immediately, starting with chest compression, if no shock is needed or after any shock delivery

## Relief of choking

### Management of choking in a

#### RESPONSIVE victim:

Age  $\geq 1$

- Abdominal thrusts

Infants (age <1)

- Back slaps and chest thrusts

### Management of choking in an **UNRESPONSIVE** victim:

- Send someone to activate the emergency response system
- Begin CPR immediately, starting with chest compressions (do not check for a pulse)
- Open and examine the victim's mouth and look for the foreign body (remove it if is present) before giving breaths to the victim

## Ventilation

### **Mouth-to-mouth** ventilation:

1. Opens the airway
2. Seals his / her mouth over the victim's mouth
3. Pinches the victim's nose closed
4. Gives 2 breaths while watching for the chest to rise

☞ Bag-mask device is not recommended for a single rescuer to provide breaths during CPR