

First Aid and Cardiopulmonary Resuscitation (CPR) Information

This is a summary of researched information on appropriate steps that can be used when CPR or First Aid is needed. This is a training document and is **not a certification** for CPR or First Aid. To be in compliance with Utah child care licensing regulations, any person alone at the facility, transporting children or accompanying children on an offsite activity would be required to have current CPR and First Aid certification (R381-100-10(2), R381-100-20(5)(d), R381-100-21(2), R430-90/50-10(2), R430-90/50-20(3)(d), R430-90-21(2).

You should know the names of the people in your child care facility or home who are certified in first aid and CPR. When an injury or incident happens if you are not personally certified you can call for the trained co-worker to assist you. For emergencies, a key component of providing proper care is to summon the emergency medical services by calling 911. While waiting, those trained to perform first aid can act within the bounds of their knowledge. It is important for those not trained to assist and remain calm.

First Aid Information

The key aim of first aid can be summarized in three key points, sometimes known as “the three P’s”:

Preserve Life: The first aim is to preserve life by carrying out emergency first aid procedures. This may include CPR. Remember though, this includes preserving your own life. You should never put yourself or others in danger. This is why the first stage is to assess the area and check for any dangers.

Prevent Further Harm: The patient may need to be moved away from any cause of harm. This also includes applying first aid techniques to prevent worsening of the condition, such as applying pressure to stop bleeding or stabilizing an injury to prevent a potential fracture from moving.

Promote Recovery: Arrange for prompt emergency medical help. Simple first aid can significantly affect the long-term recovery. For example, quickly cooling a burn may reduce the risk of long-term scarring and will encourage early healing.

CPR Information

Cardiopulmonary resuscitation (CPR) is a lifesaving technique useful in emergencies when someone is not breathing or their heart has stopped. The American Heart Association recommends that everyone – untrained bystanders and medical personnel alike – begin CPR with chest compressions as soon as possible. It has been proven that good effective CPR results in better outcomes and survival rates. A quick summary of steps is located on the second page.

There are four key points to keep in mind when performing CPR:

Push Hard, Push Fast: Forceful, fast compressions provide better circulation of blood and oxygen. Fast means at least 100 compressions per minute to the accurate depth.

Allow Full Chest Recoil: Relaxing the pressure on the chest between compressions allows the heart to refill and pump more blood.

Minimize Interruption: Blood flow stops if compressions stop. Efforts should be made not to interrupt chest compressions.

Early Defibrillation: Victims have a better chance of surviving when CPR is performed in combination with early defibrillation.

References: <http://www.lifesavingsociety.com/media/100282/98pushhardpushfastinsert2011.pdf>
<http://www.firstaidforfree.com/the-aims-of-first-aid-three-ps/>
<http://www.mayoclinic.org/first-aid/first-aid-cpr/basics/art-20056600>
<http://texasonsitcpr.com/study-guide2.pdf>

Summary of CPR Steps for Adults, Children and Infants

ACTION	INFANT (Less than one year)	CHILD	ADULT (8 years of age and older)
Assess the Scene	Check the scene for safety		
Check for Response	Tap and Shout – Check for normal breathing		
Phone 911	Yell for help! After giving 5 sets of 30 compressions and 2 breaths, if you are alone phone 911		Yell for help! Call 911 and if available send someone to get AED
Check for Pulse	No pulse felt within 10 seconds (check for at least 5 seconds but no more than 10 seconds)		
Check for Breathing	Open airway using head-tilt/chin-lift, take no more than 5 seconds to look for normal breathing using visual cues such as chest rise.		
Start CPR	If victim is unresponsive and not breathing normally, immediately start CPR beginning with chest compressions (30 compressions : 2 breaths)		
Compression Rate	At least 100 per minute		
Compression Location	Just below nipple line on breastbone	Lower half of the breastbone	
Compression Depth	About 1 ½ inches	About 2 inches	At least 2 inches
Chest Wall Recoil	Allow complete recoil between compressions. Rotate every 2 minutes		
Compression Interruptions	Minimize interruptions in chest compressions to less than 10 seconds		
Compressions to Ventilation Ratio	30:2 1 or 2 Rescuer	30:2 Single Rescuer 15:2 2 Rescuer	
Defibrillation	Attach and use AED as soon as available. Minimize interruptions in chest compressions before and after shock; resume CPR beginning with compressions immediately after each shock.		

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