



- **C** - Commence **CPR**, rate of 30 compressions to 2 breaths,
- **D** - Apply **Defibrillator**
- The signs to look for before commencing CPR have been simplified to “responsiveness’ and “breathing” i.e. if not responsive and not breathing, commence CPR.
- The term “Signs of Life” is no longer used
- Note that there will be minor word changes to support the above emphasis.
- However, there has been a slight change in the protocol for the sudden, **adult** cardiac arrest (the most common form of arrest)
  - **D** - Check for **Danger**
  - **R** - Check for **Response**, if NO Response,
  - **S** - **Send for Help**
  - **A** - Check **Airway**
  - **B** - Check **Breathing**, if NOT Breathing,
  - **C** - Commence **CPR**, rate of 30 compressions to 2 breaths,
  - **D** - Apply **Defibrillator**
- The difference between the protocol for the drowned person and the sudden adult cardiac arrest is that for the drowned victim we still deliver 2 breaths before starting the CPR cycle (30:2) whereas in the sudden cardiac arrest we immediately commence with the CPR cycle, that is, the 30 compressions before the 2 breaths.

### When is Compression Only CPR useful?

Compression-only CPR relies on the fact that in sudden, adult cardiac arrest the lungs and blood contain oxygen at the moment the heart stops. For the first few minutes afterwards, the prime need of the victim is for artificial circulation of the blood. This is provided by chest compressions. It is believed that better results will be obtained if there are no pauses for rescue breaths. After approximately 5 minutes, however, ventilation is required to restore oxygen to the body.

While a number of International teaching bodies have advocated “CAB (Compressions, Airway, Breathing) to emphasis Compressions first and the fact that Compression Only CPR is acceptable, at least for a period of time, the ARC, and Surf Life Saving, will retain the 30:2 ratio for ease of teaching.

The ARC, and Surf Life Saving, also recognise that any attempt at resuscitation is better than no attempt at all, and therefore, if a person is unwilling or unable to perform rescue breathing, then Compression Only CPR is better than no CPR at all.

### Statements from other world bodies in relation to CPR for the drowned person

#### American Heart Association (AHA)

*“CPR for drowning victims should use the traditional A-B-C [airway – breathing – chest compression] approach in view of the hypoxic nature of the arrest.*

*The first and most important treatment of the drowning victim is the immediate provision of ventilation. Prompt initiation of rescue breathing increases the victim’s chance of survival.*

*As soon as the unresponsive victim is removed from the water, the rescuer should open the airway, check for breathing, and if there is no breathing, give 2 rescue breaths that make the chest rise.”*

#### European Resuscitation Council (ERC)

*“[In cases of drowning] chest compression combined with rescue breaths is ... the method of choice for CPR delivered by both trained lay rescuers and professionals.*

*Most drowning victims will have sustained cardiac arrest secondary to hypoxia. In these patients, compression-only CPR is likely to be less effective and should be avoided.*

*The first and most important treatment for the drowning victim is alleviation of hypoxaemia. ... Give five initial ventilations/rescue breaths as soon as possible.”*

It will be noted that the AHA and ERC each recommend a different number of initial breaths in the resuscitation of drowning victims. Surf Life Saving's recommendation is that there be **at least** two initial breaths and that the protocol in the ARC guidelines be followed.

### **International Lifesaving Federation**

The above two statements specifically relating to CPR for drowned victims are endorsed by the International Life Saving Federation (ILS) in their statement 'Compression-Only CPR and Drowning Statement' from the ILS Medical Committee. Note that Dr Natalie Hood is also a member of the ILS Medical Committee.

### **Clarification to the use of Defibrillation and Children**

Circular 40 2010/2011 dated November 2010 refers.

Defibrillation on children between the ages of 1 and 8 has been endorsed by both the ARC and Surf Life Saving.

### **Transition to the new protocols**

Surf Life Saving will transition to the new guidelines by 1 June 2011. This will require the updating of some resources (this may be either by an insert or printing of new material). During this period instructors, trainers, and assessors should continue with their current teaching unless otherwise advised by their State or Branch. There may be some cases where some people are taught under the old guidelines and some under the new guidelines. Surf Life Saving believes that while the guidelines continue to improve the process of teaching CPR there is no risk to a person either receiving or delivering CPR.

### **For Further Information**

For further information and/or clarification contact the State/Territory Director of Lifesaving.