

Identifying Cardiac Arrest

1. Is the patient awake?

Yes: Respond as usual (see appropriate chief complaint)

No: Go to Step 2

Unsure: **Try to wake them up while I wait on the line**

2. Is the patient breathing normally?

Unknown: Go to Step 3

Yes: Respond as usual (see appropriate chief complaint)

No: Dispatch ALS/BLS; Go to **page 2** CPR Prearrival Script

3. Describe the patient's breathing, what does their breathing sound like? How often do you see them breath?

- If breathing is absent or reported as one of the following agonal descriptors:
 - Gaspings
 - Once in a while
 - Snoring now and then
 - Gurgling
 - Barely breathing
 - Moaning – weak or heavy
 - Occasional

Dispatch ALS/BLS; Go to **page 2** CPR Prearrival Script

- If breathing normally: respond as usual (see appropriate chief complaint)

CPR Prearrival Script

Help is on the way. I am going to tell you what to do until they arrive.

- Actively listen to the story the caller and PSAP dispatcher are telling you:
 - If they say how old the patient is go directly to the appropriate script. If the patient is an adult or older than 8 years old and you suspect the arrest is secondary to respiratory arrest (e.g., drowning, choking) or an overdose go to **page 4**
based on what PSAP/caller tells you – do not ask questions
 - If they say the patient is pregnant in third trimester go to **page 9**
 - If they say the patient is a neonate (field delivery) go to **page 8**
 - If they say the patient has a Tracheostomy/Laryngectomy Patients (Stoma) **page 10**
 - If you suspect the patient is not in arrest (e.g., you hear the patient talking/crying, hear someone say they are breathing at a normal rate, or have a blood pressure), confirm the patient is in cardiac arrest:
 - **Is the patient awake?**
 - **Is the patient breathing normally?**
 - Any Yes: Go to **page 11**
 - If you suspect the patient is conscious but actively choking go to **page 12**
 - If you suspect the patient is conscious but actively bleeding go to **page 13**
 - Both No: Go to correct script for age and situation**
 - ****If in your judgment the patient is unlikely to be in cardiac arrest go to page 11 (e.g., you hear them talking or crying in the background)****

4. Is the person an adult or a child?

Adult: go to Adult CPR script **page 3**

- If you suspect the arrest is secondary to respiratory arrest (e.g., drowning, choking) or an overdose go to **page 4**

Child: **Is the child older than 8?**

Yes: go to Child Over 8 Years Old CPR script **page 5**

- if you suspect the arrest is secondary to respiratory arrest (e.g., drowning, choking) or an overdose go to **page 4**

No: **Is the child older than 1 year?**

Yes: go to Child 1-8 CPR script **page 6**

No: go to infant CPR script **page 7**

CPR/Adults – Page 3

Get the phone NEXT to the person -- if possible put your phone on speaker.

Listen carefully. I'll tell you what to do.

1. Get them FLAT on their back on the floor.
2. KNEEL by their side.
3. Put the HEEL of your HAND on the CENTER of their CHEST, right BETWEEN the NIPPLES. ***can instruct to bare chest if needed
4. Put your OTHER HAND ON TOP of THAT hand.
5. With your arms straight PUSH DOWN FIRMLY, ONLY on the HEELS of your hands, as hard and fast as you can.
6. Do it 50 times, just like you're PUMPING the chest. Count OUTLOUD 1-2-3.... *** (correct rate if needed)
7. Great job, keep going, PUMP the chest as hard and fast as you can another 50 times. Count OUTLOUD 1-2-3.... *** (correct rate if needed, can restart counting at lower numbers if needed)
8. Great job, keep going, PUMP the chest as hard and fast as you can another 50 times. Count OUTLOUD 1-2-3.... *** (correct rate if needed, can restart counting at lower numbers if needed)
9. Great job, keep going, PUMP the chest as hard and fast as you can another 50 times. Count OUTLOUD 1-2-3.... *** (correct rate if needed)

If help has not arrived after ~600 compressions go to page 4, step 8 (rescue breathing)

If rescuer becomes too tired to continue instruct them to have someone else take over. If alone, have them rest a short time then continue compressions as soon as possible.

10. Keep doing it until help takes over. I'll stay on the line.

NOTE: If caller reports vomiting, instruct caller to:

- Turn their head to one side.
- Sweep out contents with your fingers before you resume. ***Go back to step 3

NOTE: If you suspect a traumatic arrest and the CALLER REPORTS there is significant bleeding, after step 6 ask the caller:

- Is there someone there who can help you?

No: return to step 7 and continue with CPR

Yes: ask the caller to continue compressions and put the other person on the phone and read instructions on page 12. Make sure to regularly verify that compressions are being provided.

CPR/Adults with ventilations – Page 4

Get the phone NEXT to the person -- if possible put your phone on speaker.
Listen carefully. I'll tell you what to do.

1. Get them FLAT on their back on the floor.
2. KNEEL by their side.
3. Put the HEEL of your HAND on the CENTER of their CHEST, right BETWEEN the NIPPLES
***can instruct to bare chest if needed
4. Put your OTHER HAND ON TOP of THAT hand.
5. With your arms straight PUSH DOWN FIRMLY, ONLY on the HEELS of your hands, as hard and fast as you can.
6. Do it 30 times, just like you're PUMPING the chest. Count OUT LOUD 1-2-3... *** (correct rate if needed)
7. THEN COME BACK TO THE PHONE!

(Breathing) Listen carefully. I'll tell you what to do next.

8. PINCH the nose.
9. With your OTHER hand, LIFT the CHIN so the head BENDS BACK.

If possible choking: "Look inside mouth, remove any obvious obstruction".

10. COMPLETELY COVER their mouth with your mouth.
11. GIVE 2 breaths of air.

If they don't want to give breaths continue with compression only

12. THEN, COME BACK TO THE PHONE!

Listen carefully, I'll tell you what to do next.

13. MAKE SURE the HEEL of your hand is on the CENTER of their chest, RIGHT BETWEEN the NIPPLES PUMP the CHEST 30 times as hard and as fast as you can.
14. PINCH the NOSE and LIFT the CHIN so the head BENDS BACK.
15. Give 2 MORE breaths
16. KEEP DOING THIS. REMEMBER, PUMP the CHEST as hard and fast as you can 30 times, then 2 breaths
17. Keep doing it until help takes over. I'll stay on the line.

Foreign Body Airway Obstruction: (confirmed choking now unconscious)

• After each set of 30 compressions "Look inside the mouth, remove any obvious obstruction". ***If object is removed give ventilations between each set of 30 compressions. If object not seen continue with compressions (step 4).

NOTE: if caller reports vomiting, instruct caller to:

- Turn their head to one side.
- Sweep out contents with your fingers before you resume.

NOTE: If you suspect a traumatic arrest and the CALLER REPORTS there is significant bleeding, after step 6 ask the caller:

- Is there someone there who can help you?

No: return to step 7 and continue with CPR

Yes: ask the caller to continue compressions and put the other person on the phone and read instructions on page 12. Make sure to regularly verify that compressions are being provided.

CPR/Children Over 8 Years Old – Page 5

Get the phone NEXT to the person -- if possible put your phone on speaker.

Listen carefully. I'll tell you what to do.

1. Get them FLAT on their back on the floor.
2. KNEEL by their side.
3. Put the HEEL of your HAND on the CENTER of their CHEST, right BETWEEN the NIPPLES. ***can instruct to bare chest if needed
4. Put your OTHER HAND ON TOP of THAT hand.
5. With your arms straight PUSH DOWN FIRMLY, ONLY on the HEELS of your hands, as hard and fast as you can.
6. Do it 50 times, just like you're PUMPING the chest. Count OUTLOUD 1-2-3.... *** (correct rate if needed)
7. Great job, keep going, PUMP the chest as hard and fast as you can another 50 times. Count OUTLOUD 1-2-3.... *** (correct rate if needed, can restart counting at lower numbers if needed)
8. Great job, keep going, PUMP the chest as hard and fast as you can another 50 times. Count OUTLOUD 1-2-3.... *** (correct rate if needed, can restart counting at lower numbers if needed)
9. Great job, keep going, PUMP the chest as hard and fast as you can another 50 times. Count OUTLOUD 1-2-3.... *** (correct rate if needed)

If help has not arrived after ~600 compressions go to page 4, step 8 (rescue breathing)

If rescuer becomes too tired to continue instruct them to have someone else take over. If alone, have them rest a short time then continue compressions as soon as possible.

10. Keep doing it until help takes over. I'll stay on the line.

NOTE: If caller reports vomiting, instruct caller to:

- Turn their head to one side.
- Sweep out contents with your fingers before you resume. ***Go back to step 3

NOTE: If you suspect a traumatic arrest and the CALLER REPORTS there is significant bleeding, after step 6 ask the caller:

- Is there someone there who can help you?

No: return to step 7 and continue with CPR

Yes: ask the caller to continue compressions and put the other person on the phone and read instructions on page 12. Make sure to regularly verify that compressions are being provided.

CPR/Children 1-8 Years - Page 6

Get the phone NEXT to the child -- if possible put your phone on speaker.

Listen carefully. I'll tell you what to do.

1. Move the child to a HARD surface
2. PINCH the NOSE
3. With your OTHER hand, LIFT the CHIN and TILT the head back

If possible choking: "Look inside mouth, remove any obvious obstruction"

4. Completely COVER their mouth with your mouth and give 2 breaths.
If they don't want to give breaths continue with compression only
5. THEN COME BACK TO THE PHONE.

Listen carefully. I'll tell you what to do next.

6. Put the HEEL of ONLY ONE HAND on the CENTER of the chest, right BETWEEN the NIPPLES. ***can instruct to bare chest if needed
7. PUSH down firmly one-half the depth of the chest.
8. Do this 30 times QUICKLY. Count OUTLOUD 1-2-3-4-5...
9. THEN COME BACK TO THE PHONE.

Listen carefully. I'll tell you what to do next.

10. PINCH the NOSE, LIFT the CHIN, and gently tilt the head back.
11. Give 2 breaths
12. PUSH down firmly one-half the depth of the chest with ONLY ONE HAND 30 times again
13. Give 2 breaths
14. KEEP DOING THIS. REMEMBER, 2 breaths, then PUSH down on the CHEST 30 times with ONLY ONE HAND.
15. Keep doing it until help takes over. I'll stay on the line.

Note: If caller reports vomiting, instruct caller to:

- Turn their head to one side.
- Sweep it all out with your fingers before you resume ventilations.

NOTE: If you suspect a traumatic arrest and the CALLER REPORTS there is significant bleeding, after step 9 ask the caller:

- Is there someone there who can help you?

No: return to step 10 and continue with CPR

Yes: ask the caller to continue compressions and put the other person on the phone and read instructions on page 12. Make sure to regularly verify that compressions are being provided.

CPR/Infants 0-12 Months – Page 7

**Bring the baby to the phone -- if possible put your phone on speaker.
Listen carefully. I'll tell you what to do.**

- 1. Lay the baby FLAT on their BACK on a table.**
- 2. BARE the baby's CHEST. **if confused suggest they remove any clothing from the chest**
- 3. LIFT the CHIN slightly. MAKE SURE THE NECK REMAINS LEVEL.**

If possible choking: "Look inside mouth, remove any obvious obstruction".

- 4. TIGHTLY COVER the baby's MOUTH AND NOSE with your mouth.**
- 5. GIVE 2 small BREATHS of air.**
If they don't want to give breaths continue with compression only
- 6. THEN COME BACK TO THE PHONE**

Listen carefully. I'll tell you what to do next.

- 7. Put your FIRST AND MIDDLE fingertips of ONE HAND on the CENTER of the chest, right BETWEEN the NIPPLES.**
- 8. PUSH down one-half the depth of the chest. Do it 30 times RAPIDLY. Count OUTLOUD 1-2-3-4-5...**
- 9. Go do that. Then come back to the phone.**

Listen carefully.

- 10. NEXT, LIFT the CHIN slightly, MAKING SURE THE NECK REMAINS LEVEL, and give 2 small breaths of air.**
- 11. Then, put your FIRST AND MIDDLE FINGERS of ONE HAND on the CENTER OF THE CHEST, right BETWEEN the NIPPLES.**
- 12. PUSH down one-half the depth of the chest. Do it 30 times RAPIDLY. Count OUTLOUD 1-2-3-4-5...**
- 13. Follow with 2 small breaths**
- 14. KEEP DOING THIS. REMEMBER, 2 small breaths, then PUSH down on the CHEST 30 times with TWO fingers of ONE HAND.**
- 15. Keep doing it until help takes over. I'll stay on the line.**

NOTE: If caller reports vomiting, instruct caller to:

- Turn their head to the side.**
- Sweep it out with your fingers before you resume ventilations. (Do not attempt to get anything out of the mouth that you cannot see - no blind finger sweeps).**

NOTE: If you suspect a traumatic arrest and the CALLER REPORTS there is significant bleeding, after step 9 ask the caller:

- Is there someone there who can help you?**

No: return to step 10 and continue with CPR

Yes: ask the caller to continue compressions and put the other person on the phone and read instructions on page 12. Make sure to regularly verify that compressions are being provided.

CPR/Neonate (Newborn-associated with field delivery) – Page 8

Bring the baby to the phone -- if possible put your phone on speaker.

Listen carefully. I'll tell you what to do.

- 1. Lay the baby FLAT on their BACK on a table.**
- 2. BARE the baby's CHEST. **if confused suggest they remove any clothing from the chest**
- 3. LIFT the CHIN slightly. MAKE SURE THE NECK REMAINS LEVEL.**
- 4. TIGHTLY COVER the baby's MOUTH AND NOSE with your mouth.**
- 5. GIVE 1 short PUFF of air.**
*****If they don't want to give breaths continue with compression only*****
- 6. Then come back to the phone**

Listen carefully. I'll tell you what to do next.

- 7. Put your FIRST AND MIDDLE fingertips on the CENTER of the chest, right BETWEEN the NIPPLES.**
- 8. PUSH down one-half the depth of the chest, 3 times. Count OUTLOUD 1-2-3.**
- 9. Go do that. Then come back to the phone.**

Listen carefully. I'll tell you what to do next.

- 10. NEXT, LIFT the CHIN. MAKING SURE THE NECK REMAINS LEVEL.**
- 11. TIGHTLY COVER the baby's MOUTH AND NOSE with your mouth.**
- 12. GIVE 1 short Puff of air.**
- 13. Then come back to the phone.**
- 14. KEEP DOING THIS. REMEMBER, 1 breath, then PUSH down the CHEST 3 times.**
- 15. Keep doing it until help takes over. I'll stay on the line.**

NOTE: If caller reports vomiting, instruct caller to:

- Turn newborn on their side.**
- Sweep out anything you can see with your fingertips. (Do not attempt to get anything out of the mouth that you cannot see).**

CPR/Pregnant Woman (3rd Trimester) – Page 9

Get the phone NEXT to her, if you can -- if possible put your phone on speaker
Listen carefully. I'll tell you what to do.

1. Get her FLAT on her BACK on the floor.
2. Get a pillow or folded blanket and WEDGE it under her RIGHT Side at the SMALL of the BACK.
3. KNEEL by her side.
4. Put the HEEL of your HAND on the CENTER of her CHEST, right BETWEEN the NIPPLES. ***can instruct to bare chest if needed
5. Put your OTHER HAND ON TOP of THAT hand.
6. PUSH DOWN FIRMLY, ONLY on the HEELS of your hands as hard and fast as you can.
7. Do it 30 times, just like you're PUMPING her chest. Count OUTLOUD 1-2-3-4-5...
8. THEN, COME BACK TO THE PHONE!

Listen carefully. I'll tell you what to do.

9. PINCH her nose.
10. With your OTHER hand, LIFT the CHIN so the head BENDS BACK.

If possible choking: "Look inside mouth, remove any obvious obstruction".

11. COMPLETELY COVER her mouth with your mouth.

If they don't want to give breaths continue with compression

12. GIVE 2 breaths of air.
13. THEN, COME BACK TO THE PHONE!

Listen carefully, I'll tell you what to do next.

14. MAKING SURE the HEEL of your hand is on the CENTER of her chest, RIGHT BETWEEN the NIPPLES
PUMP the CHEST 30 times as hard and fast as you can.
PINCH the NOSE and LIFT the CHIN so the head BENDS BACK.
15. Give 2 MORE breaths
16. KEEP DOING THIS. REMEMBER, PUMP the CHEST 30 times as hard and fast as you can then give 2 breaths
17. Keep doing it until help takes over. I'll stay on the line.

NOTE: If caller reports vomiting, instruct caller to:

- Turn their head to the side.
- Sweep it out with your fingers before you resume ventilations. (Do not attempt to get anything out of the mouth that you cannot see - no blind finger sweeps).

NOTE: If you suspect a traumatic arrest and the CALLER REPORTS there is significant bleeding, after step 9 ask the caller:

Is there someone there who can help you?

No: return to step 10 and continue with CPR

Yes: ask the caller to continue compressions and put the other person on the phone and read instructions on page 12. Make sure to regularly verify that compressions are being provided.

CPR/Tracheostomy/Laryngectomy Patients (Stoma) – Page 10

Get the phone NEXT to the person -- if possible put your phone on speaker.

Listen carefully. I'll tell you what to do.

1. Get them FLAT on their BACK on the floor.
2. BARE the CHEST and NECK. **if confused suggest they remove any clothing from the chest and neck***
3. KNEEL by their side.
4. Put the HEEL of your HAND on the CENTER of their CHEST, right BETWEEN the NIPPLES.
5. Put your OTHER HAND ON TOP of THAT hand.
6. PUSH DOWN FIRMLY, ONLY on the HEELS of your hands
7. Do it 30 times, push hard and fast just like you're PUMPING their chest. Count OUTLOUD 1-2-3-4-5....
8. THEN COME BACK TO THE PHONE!

Listen carefully, I'll tell you what to do next.

9. TILT the head back slightly. DO NOT let it turn to the side.
10. COMPLETELY SEAL their MOUTH by covering it with your hand and PINCH the NOSE shut.
11. COMPLETELY COVER the stoma with your MOUTH and GIVE 2 BREATHS of AIR into their LUNGS.
If they don't want to give breaths continue with compression only
12. THEN COME BACK TO THE PHONE!

Listen carefully, I'll tell you what to do next.

13. Place the HEEL of your hand on the CENTER of their chest, RIGHT BETWEEN the NIPPLES. Pump hard and fast 30 times.
14. Then COMPLETELY SEAL their MOUTH and PINCH the NOSE shut.
15. COMPLETELY COVER the stoma with your MOUTH. GIVE 2 BREATHS.
16. KEEP DOING THIS. REMEMBER, PUMP the CHEST hard and fast 30 times and then 2 breaths
17. Keep doing it until help takes over. I'll stay on the line.

NOTE: If you suspect a traumatic arrest and the CALLER REPORTS there is significant bleeding, after step 12 ask the caller:

Is there someone there who can help you?

No: return to step 10 and continue with CPR

Yes: ask the caller to continue compressions and put the other person on the phone and read instructions on page 12. Make sure to regularly verify that compressions are being provided.

Patients not in Cardiac Arrest – Page 11

If you determine the patient is unlikely to be in cardiac arrest, use any or all of the following suggested prompts:

- 1) If the patient is lying down they can place them in the recovery position.
OK, help is on the way; while you are waiting can you turn the patient on their side?
***Note if the patient is having difficulty breathing place them in the position of comfort. Avoid placing patients who are having difficulty breathing on their backs.
Ok, help is on the way; while you are waiting help him/her get in the position that seems most comfortable for their breathing.

- 2) Verify that EMS can enter the house.
OK, help is on the way; while you are waiting do you know if your house is unlocked? Please make sure your door is open so when help arrives they can get in.

Do you have a dog? Can you put them in another room so that when help arrives they can get in?

(If it's dark) **Is your front porch/door light on so that when help arrives they can easily see your house?**

Is there someone else there you can send outside to show where your house is when help arrives?

- 3) Get a medication list or their medications for the EMS providers if the patient is at home.
Do you know if the patient takes any medications? Do you have a list of those medications so that when help arrives you can give it to them or can you gather the actual pill bottles?

- 4) Remind the caller not to give the patient anything to eat or drink. However, if a caller asks you if they should give a medication such as Narcan or an epi pen, you can let them give it.
Do you have that medication to use when this happens? You should follow those recommendations.

- 5) If you believe the patient is conscious but choking go to page 11

- 6) If the caller mentions that the patient is actively bleeding go to page 12

- 7) Verify that the patient is still not in cardiac arrest and if you have no concern the patient will arrest prior to EMS arrival
How is the patient? Are they still awake and breathing normally? Would you like me to stay on the line until help arrives?

If they do not want to stay on the line say, **“OK call 911 again if anything changes.”**

If they do want to stay on the line or you have concern the patient's condition might change say, **“OK I am going to stay on the line with you. You may not hear me for a little while but I am here and will check on you, if anything changes just let me know”**

***check back that the patient is still awake and breathing normally at least every 30 seconds but it is ok to remain silent.

Choking – Page 12

Get the phone NEXT to the person -- if possible, put your phone on speaker.

1. Are they able to cough or able to speak?

YES – Ok let them stay how they are most comfortable and let me know if anything changes or they cannot talk or cough anymore. ** stay on the phone with the caller until the ambulance arrives, verify the patient is still awake and talking or coughing every few minutes**

NO – Proceed below:

Listen carefully. I'll tell you what to do.

1. STAND directly behind them.

2. Wrap your LEFT hand around to their stomach and feel for their belly button.

***If the patient is a small child tell the caller to kneel behind the patient so they can reach their belly.

***If the caller cannot reach around to the front because the patient is too large or is extremely pregnant, tell the caller to place their hand over the center of the chest

3. Make a fist with your left hand and place it just above their belly button.

4. Wrap your RIGHT hand around the other side of him/her and grab your fist, like you are hugging them from behind.

5. As hard as you can, push inward and upward into their belly.

6. Keep pushing inward and upward let me know if anything changes

***have the caller keep pushing until the victim becomes unconscious or they're able to breathe.

If the patient clears the object:

1. Great job. Help is on the way. Keep them comfortable and I will stay on the phone until help arrives.

If the patient becomes unconscious:

1. OK here is what I need you to do, lower them to the floor

---Proceed to “CPR/Adults with ventilations – Page 3” or “CPR/Children 1-8 Years – Page 5” and read those directions

Bleeding Control Page 13

Get the phone NEXT to the person – if possible put your phone on speaker

Listen carefully. I'll tell you what to do.

Where is the wound?

OK listen carefully I am going to tell you what to do

1. Look around you for a clean cloth, something like a towel, t-shirt or rag that you can hold to the wound.
2. Does it look like there is enough space to push some of the cloth into the wound?

Yes: Push as much of the cloth into the wound as you can. Continue to step 3

No: Place the cloth over the wound. Continue to step 3

3. Apply firm and constant pressure with your hand to hold the cloth firmly against the wound.
4. Do not remove the cloth, but tell me does the bleeding appear to have stopped?

Yes: Good job! Keep applying firm and constant pressure until help arrives and tell me if anything changes

No and NOT an extremity wound: That is okay, it may take a few minutes. Keep applying firm and constant pressure to the wound and if possible press even harder. Help is on the way

No and an extremity wound: Is there a tourniquet nearby?

Yes: Get the tourniquet.

- Wrap the tourniquet around their [arm/leg] about 3 inches above the location of the wound.
 - If they are unsure of where the wound is: Wrap the tourniquet as high on the limb as you can, [the very top of the upper arm near the arm pit/the very top of the upper leg near the groin].
- Wrap the tourniquet as tightly as you can. There should be no space between their skin and the tourniquet. Tell me when it's on.
- Now twist the small stick, this will tighten the tourniquet even more. Twist the stick as tightly as you can.
- Great job, now secure the stick in the clip so that it stays twisted when you let go.
- Tell me, does the bleeding appear to have stopped?

Bleeding Stops: Great job! Keep watching the wound until help arrives and tell me if anything changes

Bleeding doesn't stop: That is okay, it may take a few minutes. Keep holding direct pressure to the wound and if possible press even harder. Help is on the way

No: That is okay. Keep applying firm and constant pressure to the wound and if possible press even harder. Help is on the way.

***Note if the victim complains of discomfort or pain from the direct pressure or the tourniquet reassure the caller that it is normal and indicates they are doing it correctly