

Responding to Emergencies: Comprehensive First Aid/CPR/AED

INSTRUCTOR'S MANUAL

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CARDIAC EMERGENCIES

Lesson Length: 45 minutes

GUIDANCE FOR THE INSTRUCTOR

To complete this lesson and meet the lesson objectives, you must:

- Discuss all points in the topic, "Introduction."
- Discuss all points in the topic, "Cardiovascular Disease."
- Discuss all points in the topic, "Heart Attack."
- Show the video segment, "Signs and Symptoms of a Heart Attack" (1:43).
- Discuss all points in the topic, "Angina Pectoris."
- Discuss all points in the topic, "Cardiac Arrest and the Cardiac Chain of Survival."
- Show the video segment, "The Cardiac Chain of Survival" (2:46).
- Discuss all points in the topic, "Closing."

LESSON OBJECTIVES

After completing the lesson, participants should be able to:

- List the signs and symptoms of a heart attack for both men and women.
- Describe the care for a person having a heart attack.
- Describe the difference between a heart attack and cardiac arrest.
- Identify the links in the Cardiac Chain of Survival.

MATERIALS, EQUIPMENT AND SUPPLIES

- Responding to Emergencies: Comprehensive First Aid/CPR/AED textbook
- Responding to Emergencies: Comprehensive First Aid/CPR/AED DVD or downloaded video segments
- Course Presentation: Part Three, Cardiac Emergencies

TOPIC: INTRODUCTION

Time: 5 minutes

INSTRUCTION



REFERENCES Course Presentation Slide 9.1

- Two of the most common cardiac emergencies are heart attack and cardiac arrest.
- Cardiovascular disease is the leading cause of cardiac emergencies.
- Explain to participants that this lesson will discuss heart attack and cardiac arrest, the risk factors for cardiovascular disease and what they can do to control those risks.

TOPIC: CARDIOVASCULAR DISEASE

Time: 5 minutes

INSTRUCTION



REFERENCES

Course Presentation Slide 9.2

- Cardiovascular disease is an abnormal condition that affects the heart and blood vessels. It remains the number one killer in the United States and is a major cause of disability.
- Cardiovascular disease causes coronary heart disease (CHD), also known as coronary artery disease.
- CHD occurs when the coronary arteries that supply blood to the heart muscle harden and narrow in a process called atherosclerosis. The damage occurs gradually, as cholesterol and fatty deposits called plaque build up on the inner artery walls.
- As this build-up worsens, the arteries become narrower. This reduces the amount of blood that can flow through the arteries and prevents the heart from getting the blood and oxygen it needs.
- If the heart does not get blood containing oxygen, it will not work properly.

TOPIC: HEART ATTACK

Time: 20 minutes

INSTRUCTION



REFERENCES Course

Course Presentation Slide 9.3

- Explain to participants that a heart attack occurs when blood flow to part of the heart muscle is blocked (for example, as a result of coronary artery disease). Because the cells in the area are not receiving the oxygen and nutrients they need, they die, causing permanent damage to the heart muscle.
- Seeking advanced medical care as soon as the signs and symptoms of a heart attack are recognized can minimize damage to the heart and may save the person's life.



About the Science: There is strong evidence that suggests that when a person is experiencing signs and symptoms of a heart attack, outcomes are improved when cardiac catheterization is performed within 90 minutes of the onset of signs and symptoms and within 60 minutes of arrival to the hospital. When cardiac catheterization is not readily available, the administration of certain medications within the first few hours of the onset of signs and symptoms has also been shown to be of benefit.

SIGNS AND SYMPTOMS OF A HEART ATTACK

INSTRUCTION



- Ask participants to list the signs and symptoms of a heart attack.
- Record the participants' responses on newsprint or a board.
- Ask participants what they would do to care for someone who might be having a heart attack.

REFERENCES

Course Presentation Slide 9.4

INSTRUCTION



REFERENCES

Course Presentation Slide 9.5 Show the video segment, "Signs and Symptoms of a Heart Attack" (1:43).

(Continued)

INSTRUCTION



REFERENCES

Presentation Slides 9.6-9.7 Again ask participants, "After watching the video, what are the signs and symptoms of a heart attack?" Add any additional signs and symptoms to the original list.

Responses should include:

- Chest pain, discomfort, pressure or squeezing that lasts longer than 3 to 5 minutes and is not relieved by resting, changing position or taking medication, or that goes away and then comes back.
- O Discomfort or pain that spreads to one or both arms, the back, the shoulder, the neck, the jaw or the upper part of the stomach.
- Dizziness or light-headedness.
- Trouble breathing, including noisy breathing, shortness of breath and breathing that is faster than normal.
- Nausea or vomiting.
- Pale or ashen (gray) skin.
- Sweating.
- A feeling of anxiety or impending doom.
- Extreme fatique.
- Unresponsiveness.



Instructor's Note: When completing this discussion, compare the participants' responses recorded earlier about the signs and symptoms of a heart attack with those presented in the discussion.

INSTRUCTION



REFERENCES

Course Presentation Slides 9.8-9.9

- Explain to participants that individuals may experience heart attack signs and symptoms differently and that not everyone will have every sign or symptom.
- Even people who have had a heart attack before may not experience the same signs and symptoms if they have a second heart attack.
- While men often have the "classic" signs and symptoms of a heart attack (such as chest pain that radiates down one arm), women often have more subtle signs and symptoms.
 - In women, chest pain or discomfort may be milder and/or accompanied by more general signs and symptoms such as shortness of breath, nausea or vomiting, extreme fatigue, and dizziness or light-headedness.
 - Because these signs and symptoms are so general and nonspecific, women may experience them for hours, days or even weeks leading up to the heart attack, but dismiss them as nothing out of the ordinary.
- Signs and symptoms of a heart attack may also be subtler in people with certain medical conditions, such as diabetes.

INSTRUCTION



- Many people who are experiencing the signs and symptoms of a heart attack wait too long to get advanced medical care.
- Ask participants, "What are some reasons people might delay seeking medical attention when they are experiencing signs and symptoms of a heart attack?"

Responses could include:

- Lack of knowledge about, or failure to recognize, the signs and symptoms of a heart attack.
- Denial or fear related to potentially having a life-threatening condition.
- Concerns about feeling foolish or embarrassed for seeking advanced medical care for a "false alarm."
- Inadequate access to healthcare or a lack of healthcare insurance.
- It is important to call 9-1-1 or the designated emergency number immediately if you think that someone is having signs and symptoms of a heart attack.

CARING FOR A HEART ATTACK

INSTRUCTION



REFERENCES Course Presentation Slides 9.10-9.11

- If you think someone is having a heart attack, act promptly.
- You should:
 - Call 9-1-1 or the designated emergency number immediately.
 - Be prepared to give CPR and use an AED if the person becomes unresponsive and stops breathing normally.
 - Help the person to rest in a comfortable position, and loosen any tight clothing. Many people find it easier to breathe when sitting.
 - If the person takes a prescribed medication for chest pain (e.g., nitroglycerin), offer to get the medication for the person and assist them with taking it.
 - Reassure the person and monitor their condition until EMS personnel arrive and take over.

INSTRUCTION



- Aspirin helps to prevent blood clotting and can be effective when given soon after a person experiences signs and symptoms of a heart attack.
 - Other types of pain relief medications, such as acetaminophen (Tylenol®), ibuprofen (Motrin®, Advil®) or naproxen (Aleve®) are not effective for a person who is experiencing a heart attack.
 - Aspirin-containing combination products meant to relieve multiple conditions are also not effective for a person who is experiencing a heart attack.
- Do not delay calling 9-1-1 or the designated emergency number to look for or offer aspirin.
- Only offer aspirin if the person is responsive, able to chew and swallow and is allowed to have aspirin.
 - To verify that the person is allowed to have aspirin, ask:
 - Are you allergic to aspirin?
 - Do you have a stomach ulcer or stomach disease?
 - Are you taking any blood thinners?
 - Have you ever been told by a healthcare provider to avoid taking aspirin?
 - If the person answers "no" to each of these questions, you may offer the person two 81-mg low-dose aspirin tablets or one 325-mg regular-strength aspirin tablet.
 - Have the person chew the aspirin completely.

TOPIC: ANGINA PECTORIS

Time: 2 minutes

INSTRUCTION



REFERENCES Course Presentation Slide 9.12

- Angina pectoris is chest pain that comes and goes at different times (intermediate chest pain or pressure).
- Often simply called angina, it develops when the heart needs more oxygen than it is getting due to a narrowing of the coronary arteries.
- When the coronary arteries are narrow and the heart needs more oxygen, heart muscle tissues may not get enough oxygen.
- Pain associated with angina seldom lasts longer than 3 to 5 minutes.
- A person who knows that they have a history of angina may have prescribed medication, such as nitroglycerin, to temporarily widen the arteries and therefore help relieve the pain.

(Continued)

- Most people with angina are advised by their doctor to take three nitroglycerin doses over a 10-minute period if they are experiencing pain or discomfort, however some doctors prescribe nitroglycerin differently.
- Since areas of narrowing can be the focus for clot formation and heart attack, if a person's typical pain of angina lasts longer than usual, 9-1-1 or the designated emergency number should be called. It may be that the angina has progressed to a heart attack.

TOPIC: CARDIAC ARREST AND THE CARDIAC CHAIN OF SURVIVAL

Time: 10 minutes

INSTRUCTION



REFERENCES Course Presentation Slides 9.13-9.14

- Cardiac arrest occurs when the heart stops beating or beats too ineffectively to circulate blood to the brain and other vital organs.
- Cardiac arrest frequently happens suddenly, without any signs and symptoms.
- Cardiac arrest can occur as a result of cardiovascular disease; breathing emergencies, such as drowning and choking; severe trauma; electric shock; and drug overdose.
 - In children and infants, the most common causes of cardiac arrest are breathing emergencies, chest trauma and congenital heart disease.

CARDIAC ARREST VS. HEART ATTACK

INSTRUCTION



REFERENCES Course Presentation **Slide 9.15**

- Remind participants that cardiac arrest is not the same as a heart attack.
- Although a heart attack can lead to cardiac arrest, the two conditions are different.
- Remember that a heart attack occurs when blood flow to part of the heart muscle is blocked, causing part of the heart muscle to die.
- On the other hand, cardiac arrest occurs when the heart stops beating or beats too ineffectively to circulate blood to the brain and other vital organs. A person in cardiac arrest is not responsive, not breathing and has no heartbeat.

CARDIAC CHAIN OF SURVIVAL

INSTRUCTION





REFERENCES Course Presentation Slide 9.16

- Show the video segment, "The Cardiac Chain of Survival" (2:46).
- Make the following points:
 - The Cardiac Chain of Survival consists of five actions that, when taken, increase a person's chance of surviving cardiac arrest.
 - Each link in the chain depends on, and is connected to, the other links.
 - Each minute that CPR and defibrillation are delayed reduces the chance of survival by about 10 percent.
 - As a trained lay responder, you are the first link in the Cardiac Chain of Survival.
 - Four out of every five cardiac arrests in the United States happen outside of the hospital. By completing the first three links in the Cardiac Chain of Survival, responders can make the difference between life and death for a person in cardiac arrest.
- Answer participants' questions.

TOPIC: CLOSING

INSTRUCTION Heart attack and cardiac arrest are the two most common cardiac emergencies. Learning to recognize the signs and symptoms of a heart attack and responding immediately can reduce the risk of cardiac arrest occurring. ■ The primary symptom of a heart attack is persistent chest pain, discomfort or pressure. A person in cardiac arrest is not responsive and is not breathing normally. ■ If a person experiences cardiac arrest, the best chance for the person to survive the incident is when the first three links of the Cardiac Chain of Survival—early recognition of cardiac arrest and activating the EMS system, immediately beginning CPR and using an AED as soon as possible—are completed. Answer participants' questions. **ASSIGNMENT** Review Chapter 6, CPR for an Adult. Review the skill sheet, "Giving CPR to an Adult," in Chapter 6 of the textbook.

CPR—ADULT

Lesson Length: 45 minutes

GUIDANCE FOR THE INSTRUCTOR

To complete this lesson and meet the lesson objectives, you must:

- Discuss all points in the topic, "Introduction."
- Discuss all points in the topic, "CPR."
- Show the video segment, "Giving CPR (Adult)" (2:03).
- Conduct the skill session for the skill, "Giving CPR—Adult," and show the video segment, "Giving CPR: Practice While You Watch (Adult/Child)" (2:45).
- Discuss all points in the topic, "If the Chest Does Not Rise with Breaths."
- Show the video segment, "If the Chest Does Not Rise with Breaths (Adult)" (0:57).
- Discuss all points in the topic, "Compression-Only CPR."
- Discuss all points in the topic, "Closing."

LESSON OBJECTIVES

After completing the lesson, participants should be able to:

- Describe the role of CPR in cardiac arrest.
- Demonstrate how to perform CPR for an adult.

MATERIALS, EQUIPMENT AND SUPPLIES

- Responding to Emergencies: Comprehensive First Aid/CPR/AED DVD or downloaded video segments
- Responding to Emergencies: Comprehensive First Aid/CPR/AED textbook
- Course Presentation: Part Three, CPR—Adult
- Skill Chart and Skill Assessment Tool: "CPR—Adult"
- Disposable latex-free gloves (multiple sizes)
- CPR breathing barriers (face shields or resuscitation masks, one for each participant)
- Adult manikins (one for every two participants)
- Decontamination supplies
- Blankets or mats
- Participant Progress Log (Appendix E)

TOPIC: INTRODUCTION

Time: 5 minutes

INSTRUCTION



- Remind participants that a person in cardiac arrest is not responsive, not breathing normally, and has no heartbeat. Agonal breaths, or occasional gasps, do not count as normal breathing.
- The cells of the brain and other vital organs will continue to live for a short period until oxygen is depleted. However, without immediate intervention a person will not survive.
- Explain to participants that this lesson will introduce CPR and will teach participants how to perform CPR on an adult who is in cardiac arrest.

TOPIC: CPR

Time: 10 minutes

INSTRUCTION



Course Presentation Slide 10.1 ■ Show the video segment, "Giving CPR (Adult)" (2:03).

INSTRUCTION



Course Presentation Slide 10.2

- Cardiopulmonary resuscitation, or CPR, is a skill that is used when a person is in cardiac arrest to keep oxygenated blood moving to the brain and other vital organs until advanced medical help arrives.
- CPR involves giving sets of 30 chest compressions followed by sets of 2 rescue breaths.
 - When you give compressions, you press down on the person's chest. This squeezes (compresses) the heart between the breastbone (sternum) and spine when the person is on a firm flat surface, moving blood out of the heart and to the brain and other vital organs. After each compression, you must let the chest return to its normal position. This allows blood to flow back into the heart.
 - The rescue breaths you give after each set of 30 compressions deliver a fresh supply of oxygen into the person's lungs.
- When you give CPR, you help to keep oxygenated blood moving throughout the body, which can buy the person some time until medical help arrives.

INSTRUCTION



Course Presentation Slide 10.3



Instructor's Note: As you explain the steps listed below, demonstrate the steps for the scene size-up including forming an initial impression and one round of CPR (30 compressions and 2 rescue breaths) on an adult manikin.

- Remind participants that they should follow the emergency action steps, **CHECK—CALL—CARE**, to determine if an unresponsive adult needs CPR.
 - CHECK the scene and the injured or ill person for severe, lifethreatening bleeding.
 - CALL, or have someone else call, 9-1-1 or the designated emergency number if your initial impression reveals a potential life-threatening situation.
 - If you think the person is unresponsive, shout to get the person's attention, using the person's name if it is known.
 - If there is no response, tap the person's shoulder and shout again, while checking for normal breathing.
 - Check for responsiveness and breathing for at least 5 but no more than 10 seconds.

(Continued)

- If the person is not breathing normally, you will give CARE by beginning CPR with 30 chest compressions followed by 2 rescue breaths. Ensure 9-1-1 or the designated emergency number has been called if not already done. If alone, leave the person to make the call and get an AED if no mobile phone is available.
- If necessary, you may need to move the person so they are lying on their back on a firm, flat surface before beginning CPR. CPR is not effective if the person is on a soft surface, such as a bed or sofa, or if they are sitting up.
- Move the person in the safest manner possible and try to avoid further injury, but the person must be moved quickly by any possible means.

TOPIC: SKILL ACTIVITY: GIVING CPR—ADULT

Time: 20 minutes

SKILL ACTIVITY: GIVING CPR—ADULT

INSTRUCTION



Presentation Slide 10.4

 Ask the participants to take the textbook, disposable latex-free gloves and breathing barriers to the practice area. Tell participants that they will be using the skill sheet in Chapter 6 of the textbook.

If participants will be sharing manikins, ask participants to find a partner.



Instructor's Note: If participants are sharing a manikin, properly clean the manikin before another participant assumes the role of responder.

- One participant will act as the responder and the other observes, then participants will switch roles. Have the participant acting as the responder from each pair kneel beside the manikin and clean or prepare the manikin for use.
- Guide participants through each component of the skill. Give participants an opportunity to practice each component before moving on to the next:
 - Body position
 - Giving compressions
 - Opening the airway
 - Giving rescue breaths



Instructor's Note: Remind participants that it is important to minimize interruptions to compressions. After they finish giving rescue breaths, they should return to giving compressions as quickly as possible (within less than 10 seconds).



Instructor's Note: Tell participants that if more than one responder is available and trained in CPR, the responders should switch responsibility for compressions every 2 minutes or whenever the responder giving compressions indicates that they are tiring. Switching responsibility for giving chest compressions frequently reduces responder fatigue which improves the quality of chest compressions and leads to a better chance of survival for the person.

- Tell participants that next, they will practice giving CPR along with a video guide. Show the video segment, "Giving CPR: Practice While You Watch (Adult/Child)" (2:45). Switch roles to ensure all participants have a chance to practice with the video.
- Check off participants' skills on the Participant Progress Log (Appendix E) after skills have been performed successfully.
- Use the remaining time to allow participants to continue practicing with partners to become more proficient with this skill.
- Answer participants' questions.

Time: 5 minutes

TOPIC: IF THE CHEST DOES NOT RISE WITH BREATHS

INSTRUCTION



Course Presentation Slides 10.5-10.7

- There are three reasons why the person's chest may not rise when you give rescue breaths:
 - The airway was not opened properly.
 - The person's nose and mouth were not properly sealed.
 - An object is blocking the airway.
- If the first rescue breath does not cause the chest to rise, re-tilt the head to ensure that the airway is properly opened and ensure that the person's nose and mouth are properly sealed before giving the second rescue breath.
- If the second breath does not make the chest rise, an object may be blocking the person's airway.
 - Never attempt more than 2 rescue breaths between sets of compressions.
 - Immediately begin the next set of chest compressions. The chest compressions may force the object out of the person's airway.
 - After the set of compressions and before giving rescue breaths, open the person's mouth, look for an object in the mouth and if you see it, remove it.
 - To remove an object that you see in the person's mouth, do a finger sweep using your index finger (for an adult) or your little finger (for a child or infant).
 - Be sure that you actually see the object in the person's mouth before attempting to remove it. If you cannot see the object and you put your finger in the person's mouth, you might accidentally push the object deeper into the person's throat.
 - After removing the object, give 2 rescue breaths.
 - If the breaths go in, continue CPR (starting with compressions) until one of the conditions for stopping CPR is met.
 - If the breaths do not go in, continue CPR (starting with compressions), looking for the object in the person's mouth after each set of compressions and removing the object if seen, until the rescue breaths go in. Then continue CPR until one of the conditions for stopping CPR is met.

INSTRUCTION



Course Presentation Slide 10.8

- Tell participants that now they will see a video demonstration of what to do if breaths do not cause the chest to rise.
- Show the video segment, "If the Chest Does Not Rise with Breaths (Adult)" (0:57).

TOPIC: COMPRESSION-ONLY CPR

Time: 3 minutes

INSTRUCTION



Course Presentation Slide 10.9

- If you are unable or unwilling for any reason to perform full CPR (chest compressions with rescue breaths), give continuous chest compressions at a rate of 100-120 per minute after calling 9-1-1 or the designated emergency number.
- Continue giving chest compressions until another trained responder or EMS personnel take over, or you notice an obvious sign of life.

INSTRUCTION



- When performing CPR on an adult, give 30 chest compressions to a depth of at least 2 inches, at a rate between 100 and 120 compressions per minute, allowing the chest to return to its normal position after each compression followed by 2 rescue breaths.
- Minimize any interruption to chest compressions to less than 10 seconds.
- Do not stop CPR unless:
 - The adult shows obvious signs of life, such as normal breathing.
 - An AED becomes available and is ready to use.
 - Another trained responder or EMS personnel arrive and take over.
 - You are too exhausted to continue.
 - The scene becomes unsafe.
- If at any time the adult begins to breathe normally, stop CPR, keep the airway open, and monitor breathing and any changes in the adult's condition closely until EMS personnel take over.
- Answer participants' questions.

ASSIGNMENT

Review the skill sheet, "Giving CPR to a Child," in Chapter 6 of the textbook.

SKILL CHART AND SKILL ASSESSMENT TOOL

SKILL CHART

CPR—ADULT

In addition to performing the steps listed in the Skill Chart in the correct order, participants must meet the listed objectives at the proficient level to be checked off for the skill.

- 1. Verifies that person is unresponsive and not breathing normally. Shouts to get person's attention, using person's name if known. If person does not respond, taps person's shoulder and shouts again while checking for normal breathing.
- 2. Places person on back on a firm, flat surface. Kneels beside person.
- 3. Gives **30** chest compressions.
 - Places heel of one hand on the center of the person's chest, with other hand on top.
 - Positions body so that shoulders are directly over hands.
 - Keeping arms straight, pushes down at least 2 inches and then lets the chest return to its normal position.
 - Gives compressions at a rate of 100–120 compressions per minute.
- 4. Gives 2 rescue breaths.
 - Places breathing barrier over person's nose and mouth.
 - Opens airway. (Puts one hand on the forehead and two fingers on the bony part of the chin, and tilts the head back to a past-neutral position.)
 - Pinches nose shut and makes a complete seal over person's mouth with their mouth.
 - Takes a normal breath and blows into person's mouth for about 1 second, looking to see that the chest rises.
 - If first rescue breath does not cause the chest to rise, re-tilts head and ensures a proper seal before giving a second rescue breath.
 - Takes another breath, makes a seal, then gives a second rescue breath.
- 5. Continues giving sets of 30 chest compressions and 2 rescue breaths until one of the conditions for stopping CPR is met.

SKILL ASSESSMENT TOOL: CPR—ADULT			
Objective	Proficient	Not Proficient	
Ensure that the person is unresponsive and not breathing or only gasping before beginning CPR.	Shouts to get person's attention, using person's name if known. If person does not respond, taps person's shoulder and shouts again while checking for normal breathing.	Begins compressions without checking for responsiveness and breathing.	
Place hands properly.	Places hands on center of chest on the lower half of the sternum (breastbone).	Places hands over the xiphoid process (the lower tip of the sternum) or on the upper half of sternum.	
Compress chest at least 2 inches.	Compresses chest straight down at least 2 inches for 24–30 times per 30 compressions.	Compresses chest less than 2 inches for 7 or more times per 30 compressions.	
Let chest return to its normal position before pushing down again.	Compresses and fully releases chest without pausing or taking hands completely off chest for 24–30 times per 30 compressions.	Pauses or fails to fully release chest while compressing for 7 or more times per 30 compressions.	
Compress chest at a rate of 100–120 times per minute (30 compressions in about 15–18 seconds).	Compresses chest 24–36 times in about 18 seconds.	Compresses chest 24–36 times in greater than 20 seconds or less than 13 seconds.	
Give 2 rescue breaths.	Gives 2 rescue breaths that make the chest rise. Gives 2 rescue breaths that each last about 1 second.	Gives 2 rescue breaths that do not make the chest rise. OR Gives 2 rescue breaths that last 2 or more seconds. OR Gives more than 2 rescue breaths.	
Return to compressions.	Delays compressions by less than 10 seconds to give rescue breaths.	Delays compressions by 10 or more seconds to give rescue breaths.	