Basic Life Support Study Guide



CPR	ADULT & OLDER CHILD (puberty and older)	CHILD (1-8 years old)	INFANT (up to 1 year old)
Establish unresponsiveness / no breathing / breathing not normal (gasping) and activate 9-1-1 and get AED	If alone, place victim in recovery position and call 9-1-1 first.	If alone, give 5 cycles of CPR before placing victim in recovery position and calling 9-1-1.	
Check pulse for 10 secs.	Check the carotid art of the victim's		
Victim has a DEFINITE detectable pulse: Rescue Breathing	Give 1 breath every 5-6 seconds Check pulse again every 2 minutes	Give 1 breath every 3 seconds Check pulse again every 2 minutes If pulse less than 60 beats per minute, or perfusion remains poor add compressions	
Victim has NO detectable pulse: Begin CPR (chest compressions & breaths) Minimize interruptions	30 compressions then 2 breaths (1 and 2 rescuer) push hard and push fast	30 compressions then 2 breaths (1 rescuer) 15 compressions then 2 breaths (2 rescuers) push hard and push fast	
Compression location	Center of breastbone (be	etween the nipples)	One finger width below nipple line
Compression method	Heel of one hand, other on top with fingers interlaced and elbows locked	Heel of one hand with elbow locked	2 fingers
Compression depth Allow chest to fully recoil	Equal to or greater than 2' 1/3 to 1/2 the depth of the chest		
Compression rate	100 per minute		
Activate (turn on) the AED when it arrives	Follow prompts. Never remove the AED.		
Using an AED Victim not breathing	Turn on AED and follow instructions		
AED precautions: Hairy chest	If victim has a hairy chest and AED pads do not stick, remove pads and shave chest. Place new pads on chest.		
AED precautions: Implanted defibrillator Pacemaker (you notice a hard lump under the skin of the upper chest or abdomen)	Place AED pads at least 1 inch to the side of the implant		AED not recommended for infants
AED precautions: Medication patches	Remove the patch and wipe the area clean before placing pads on victim		
AED precautions: Water	Do not use in water, water conducts electricity		

Basic life support study guide is an essential resource for anyone looking to understand the crucial steps involved in providing immediate care to someone experiencing a life-threatening emergency. The principles of basic life support (BLS) are fundamental for healthcare professionals and laypersons alike, as they can significantly increase the chances of survival during critical situations such as cardiac arrest, choking, or respiratory failure. This study guide aims to provide a comprehensive overview of BLS, covering essential techniques, protocols, and the importance of timely intervention.

Understanding Basic Life Support (BLS)

Basic Life Support (BLS) refers to the initial care provided to an individual experiencing a medical emergency. BLS focuses on maintaining adequate circulation and oxygenation until

advanced medical help arrives. The primary components of BLS include:

- Cardiopulmonary Resuscitation (CPR): A life-saving technique that combines chest compressions and rescue breaths to restore blood circulation and breathing.
- Defibrillation: The use of an automated external defibrillator (AED) to deliver an electric shock to the heart to restore a normal rhythm.
- Airway Management: Ensuring that the airway is clear and open, allowing for effective breathing.

The Importance of BLS Training

BLS training is crucial for several reasons:

- 1. Increased Survival Rates: Prompt and effective BLS can double or triple a victim's chance of survival after cardiac arrest.
- 2. Community Preparedness: Trained individuals can respond effectively in emergencies, improving community resilience.
- 3. Confidence and Competence: Training provides the knowledge and skills necessary to act decisively in emergencies, reducing hesitation and panic.

Recognizing Emergencies

Before administering BLS, it's important to recognize when an emergency exists. Key signs include:

- Unresponsiveness: The person does not respond to verbal or physical stimuli.
- Abnormal Breathing: Gasping or irregular breathing patterns.
- Chest Pain: Severe and persistent chest pain may indicate a heart attack.
- Other Symptoms: Signs of choking or severe bleeding.

Steps for Performing BLS

The BLS process can be broken down into a series of critical steps:

1. Assess the Scene

- Safety First: Ensure the scene is safe for both the rescuer and the victim.
- Determine Responsiveness: Tap the person and shout to check for responsiveness.

2. Call for Help

- Activate Emergency Services: If the person is unresponsive, call 911 or ask someone else to do so.
- Get an AED: If available, retrieve an automated external defibrillator.

3. Check for Breathing

- Look for chest rise or listen for breath sounds for no more than 10 seconds.
- If the person is not breathing or only gasping, begin CPR.

4. Perform CPR

- Chest Compressions:
- Position yourself beside the victim.
- Place the heel of one hand on the center of the chest, interlock fingers with the other hand, and keep your elbows straight.
- Compress at a rate of 100 to 120 compressions per minute, allowing full chest recoil between compressions.
- Rescue Breaths:
- After 30 compressions, give 2 rescue breaths.
- Ensure the airway is open by tilting the head back slightly and lifting the chin.
- Pinch the nose, seal your lips around the victim's mouth, and give a breath lasting about 1 second, watching for chest rise.

5. Use of AED

- Turn on the AED: Follow the visual and audio prompts provided by the device.
- Attach Pads: Place the pads on the victim's bare chest, ensuring proper placement (one pad on the upper right chest and the other on the lower left chest).
- Stand Clear: Ensure no one is touching the victim during analysis and shock delivery.
- Deliver Shock: If advised, press the shock button, then resume CPR immediately after.

Special Considerations

Different scenarios may require specific adaptations of BLS techniques:

For Children and Infants

- Chest Compressions: Use one hand for children or two fingers for infants.

- Rescue Breaths: Use a gentle puff of air for infants, covering both the mouth and nose.

For Choking Victims

- Conscious Adults and Children:
- Encourage coughing if they can.
- If they cannot cough, speak, or breathe, perform the Heimlich maneuver (abdominal thrusts).
- Infants:
- Administer 5 back blows followed by 5 chest thrusts.

Post-Resuscitation Care

Once emergency medical services arrive, provide them with information about the event, including:

- Time of onset of symptoms.
- Actions taken during BLS.
- Any known medical history of the victim.

Conclusion

In summary, this basic life support study guide serves as a vital tool for understanding and mastering the essential techniques of BLS. The ability to perform CPR, use an AED, and effectively manage airway emergencies can make a significant difference in critical situations. Remember, BLS training is not only beneficial for healthcare professionals but also for anyone who may find themselves in a position to help during an emergency. Regular training and practice are key to maintaining the skills and confidence needed to respond effectively when it matters most. By being prepared and knowledgeable about BLS, you can potentially save a life and make a positive impact in your community.

Frequently Asked Questions

What is the primary purpose of Basic Life Support (BLS)?

The primary purpose of BLS is to maintain blood circulation and oxygenation to vital organs until advanced medical help arrives.

What are the key components of BLS?

The key components of BLS include early recognition of cardiac arrest, activation of

emergency response, high-quality chest compressions, and timely defibrillation.

What is the recommended compression-to-ventilation ratio for adults in BLS?

The recommended compression-to-ventilation ratio for adults in BLS is 30 compressions to 2 breaths.

What is the significance of the 'CAB' sequence in BLS?

The 'CAB' sequence stands for Circulation, Airway, and Breathing, emphasizing the importance of chest compressions first, followed by establishing an airway and providing breaths.

How deep should chest compressions be during BLS for adults?

Chest compressions for adults should be at least 2 inches (5 cm) deep.

What is the importance of using an Automated External Defibrillator (AED) during BLS?

Using an AED during BLS is crucial as it can restore a normal heart rhythm in cases of sudden cardiac arrest, significantly increasing the chances of survival.

What should you do if you are alone and witness an adult collapse?

If you are alone and witness an adult collapse, you should quickly call emergency services (or activate the emergency response system) before starting BLS.

Can children and infants receive the same BLS techniques as adults?

No, children and infants have different techniques and ratios for BLS; for children, use 30:2 or 15:2 for two rescuers, and for infants, use gentle compressions with two fingers and a 30:2 ratio.

What are common barriers to performing BLS?

Common barriers include fear of causing harm, lack of confidence in skills, and uncertainty about when to act.

Why is it important to take a BLS certification course?

Taking a BLS certification course is important because it equips individuals with the knowledge and skills to effectively respond to emergencies and potentially save lives.

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