

Check for DANGER Prior to approaching the casualty, check the scene is safe for you and any bystanders.

RESPONSE

Check for a RESPONSE If possible, approach the casualty from the feet as this prevents a whiplash injury to the neck of a responsive casualty, due to them suddenly moving. Then using the APVU scale to check for a response.

ALERT - Is the casualty moving/talking?

VOICE - Does the casualty respond to speech?

shoulder and gently shake them. Ask

PLACE - Place your hand on the casualty's

loudly "Are you OK?"

No, proceed to V

No, proceed to P



SHOUT FOR HELP You must shout as loud as you can. If you're on your own do not leave the casualty at this stage.



OPEN THE AIRWAYS For unresponsive casualties, place the casualty onto their back. Open the airway using the head-tilt-chin lift method.

Head-tilt-chin lift method = (place your hand on their forehead and gently tilt back the head; with your fingertips under the point of the casualties chin, lift the chin to open the airway)



CHECK FOR BREATHING With the head now tilted, check for breathing. Look, listen and feel for normal breathing for no more than 10 seconds.

In the first few minutes after a cardiac arrest, a casualty may fit or be taking infrequent, slow noisy gasps. Do not confuse this with normal breathing. If in any doubt that breathing is normal, act as if they are not breathing normally and prepare to start CPR.



COMMENCE CPR If the casualty isn't breathing ask the helper to call an ambulance (999/112). If you don't have a helper you need to make the call. If possible, always stay with the casualty.

If you have one, ask someone to get the Defib.





DEFIB - If an AED arrives, switch it on and follow the spoken or visual prompts. An AED is used in conjunction with CPR.

Compression only

If you are unable to. untrained or unwilling to give rescue breaths, give chest compressions only.

Commence CPR

- 30 compression / 2 breaths
- Depth of compression 5-6cm at a rate of 100-120 compressions per minute.

If the casualty is breathing normally but still not responsive, if safe to do so, place into the recovery position. Continue to check their breathing, then conduct a secondary survey to check for further injuries.



No, proceed to U UNRESPONSIVE - Assume the casualty is unresponsive





