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Checking a Responsive Adult

1

Interview the person (or bystanders) using SAMPLE.

- **S** = Signs and symptoms
- **A** = Allergies
- **M** = Medications
- **P** = Pertinent medical history
- **L** = Last food or drink
- **E** = Events leading up to the incident



2

Do a head-to-toe check.

- Look and feel for signs of injury, including pain, bleeding, cuts, burns, bruising, swelling or deformities.



3

Provide care **for any conditions found.**

Checking an Adult Who Appears to Be Unresponsive

1

Shout, tap and shout **again while checking for normal breathing.**

- Gaspings is not normal breathing.
- Check for no more than 5 to 10 seconds.



2

If the person responds but is not fully awake:

- Send someone to call 9-1-1 and obtain an AED and first aid kit.
- Do a head-to-toe check.
- Place the person into the recovery position if there are no apparent injuries.



3

If the person does not respond and is not breathing or is only gasping:

- Send someone to call 9-1-1 and obtain an AED and first aid kit.
- Immediately begin CPR and use an AED as soon as possible.



CPR

1 Verify that the person is unresponsive **and is not breathing or is only gasping.**

2 **Ensure that the person is face-up on a firm, flat surface.**

3 **Give 30 chest compressions.**

- Push hard and fast in the center of the chest to a depth of **at least 2 inches** and at a rate of **100–120 compressions per minute.**



4 **Give 2 rescue breaths.**

- Open the airway, pinch the nose shut and make a complete seal over the person's mouth with your mouth.
- Blow into the person's mouth for about 1 second, ensuring that the chest rises.



If the chest does not rise, retilt the head and ensure a proper seal before giving the second rescue breath.



- Take a breath, make a seal and then give the second rescue breath.



If the second breath does not make the chest rise, begin compressions. After the next set of chest compressions, open the mouth, look for an object and, if seen, remove it. Continue to check the mouth for an object after each set of compressions until the rescue breaths go in.

5 **Continue giving sets of 30 chest compressions and 2 rescue breaths.**

AED

1 Turn on the AED and follow the voice prompts.

2 Remove all clothing covering the chest.

3 Place the pads.



4 Plug the connector cable into the AED if necessary.



5 Let the AED analyze the heart's rhythm.

- Make sure no one is touching the person.



AED (Continued)

6

Deliver a shock if the AED determines one is needed.

- Make sure no one is touching the person.
- Push the “shock” button to deliver the shock.



7

After the AED delivers the shock, or if no shock is advised:

- Immediately begin CPR, starting with compressions.
- Continue giving CPR and following the AED's prompts until you see an obvious sign of life or EMS personnel arrive.

Choking

1 Verify **that the person is choking** and obtain consent.

2 Give **5** back blows.




3 Give **5** abdominal thrusts.



4 Continue giving sets of **5** back blows and **5** abdominal thrusts until:

- The person can cough forcefully, speak, cry or breathe.
- The person becomes unresponsive.

 *If the person becomes unresponsive, lower him or her to the ground and begin CPR, starting with compressions. After each set of compressions and before attempting rescue breaths, open the person's mouth, look for the object and remove it if seen.*

External Bleeding

1

Cover the wound with a sterile gauze pad and apply direct pressure until the bleeding stops.

- If blood soaks through the first gauze pad, put another one on top and apply additional direct pressure.



2

Apply a roller bandage.

- Check for circulation (feeling, warmth and color) beyond the injury.
- Wrap the bandage around the wound several times to hold the gauze pad(s) in place.
- Tie or tape the bandage to secure it.
- Check for circulation (feeling, warmth and color) beyond the injury and loosen the bandage if necessary.



If the bleeding does not stop, call 9-1-1 if you have not already and give care for shock if necessary.

Burns

1

Stop.

- **Thermal burn:** Remove the source of the heat.
 - **Chemical burn:** Remove contaminated clothing. Flush the area with cool water for 20 minutes (wet chemical) or brush the chemical off and then flush with cool water for 15 minutes (dry chemical).
 - **Electrical burn:** Turn off the power at its source. Do not touch the person until the power has been turned off.
-

2

Cool.

- Use cool or cold water that is suitable for drinking.
 - Cool the burn for at least 10 minutes.
-

3

Cover.

- Cover the burn loosely with a sterile dressing.

Stroke

1

Think FAST.

- **Face.** Ask the person to smile. Is there weakness or drooping on one side of the face?
 - **Arm.** Ask the person to raise both arms. Does one arm drift downward or appear to be weak?
 - **Speech.** Ask the person to repeat a simple sentence, such as “The sky is blue.” Does the person have trouble speaking, or is his or her speech slurred?
 - **Time.** If the person has difficulty performing any of these actions or shows any other signs and symptoms of stroke, call 9-1-1 immediately.
-

2

Stay with the person **until EMS personnel arrive.**

- If the person is responsive but not fully awake, put the person in the recovery position.

Anaphylaxis

- 1 Check the label and the medication.
- 2 Locate the injection site (outside middle of one thigh).
- 3 Grasp the auto injector firmly with one hand and pull off the safety cap.
- 4 Have the person hold the tip of the auto injector at a 90-degree angle to the thigh.
- 5 Have the person quickly and firmly push the tip straight into the outer thigh.
 - Hold the auto injector in place for the recommended amount of time.
- 6 Remove the auto injector and massage the injection site for several seconds.
- 7 Check the person's condition and response to the medication.



Help to administer a second dose only if EMS personnel are delayed and the person is still having signs and symptoms of anaphylaxis 5 to 10 minutes after the first dose.