

POST PUBESCENT (ADULT) CPR ASSESSMENT

NAME		SHARIFAH KITEGGA			
ASSE	SSMENT DAT		SPECIALITY & GRADE:		
1.	SAFE APPR			11	
2.	CHECK FOR RESPONSE - Gently shake their shoulders and ask loudly: "Are you all right?"				
3.	SHOUT FOR HELP				
4.	OPEN AIRWAY / CHECK FOR OBSTRUCTION - Head Tilt-Chin Lift or Jaw Thrust				
5.	CHECK FOR BREATHING - Look, listen and feel for normal breathing for no more than 10 seconds. In the first few minutes after cardiac arrest, a victim may be barely breathing, or taking infrequent, slow and noisy gasps. Do not confuse this with normal breathing. If you have any doubt whether breathing is normal, act as if it is they are not breathing normally.				
6.	SIGNS OF CIRCULATION / LIFE – Look for signs of life (blinking/movement etc.) only check for a pulse if trained and competent to do so				
7.	SEND / GO FOR HELP – 999 / 2222 - Ask a helper to call if possible otherwise call them yourself and return with emergency equipment				
8.	START CHEST COMPRESSIONS - Position your shoulders vertically above the victim's chest and press down on the sternum to a depth of 5–6 cm. After each compression, release all the pressure on the chest without losing contact between your hands and the sternum; Repeat at a rate of 100–120 min-1				
9.	VENTILATIONS - After 30 compressions open the airway again using head tilt and chin lift and give 2 rescue breaths using mouth-to-mouth, pocket mask or bag-valve-mask. If you are unable/unhappy to do ventilation breaths, give chest compression only CPR (i.e. continuous compressions at a rate of at least 100–120 min-1)				
10	Stop, You bec	rare for CPR alone to res	t interrupt resuscitation until: A health professional tells you to m is definitely waking up, moving, opening eyes and breathing start the heart. Unless you are certain the person has recovered	V	
11.	AED DEMON securely inser	STRATION / PRACTICAL t the lead to defibrillator of	L UPON REQUEST- connect defibrillator pads to patient and able/socket	0	
12.	AED DEMONSTRATION / PRACTICAL UPON REQUEST – switch on to AED mode and follow verbal instructions whilst ensuring area/other rescuers are safe				

- Ensure CPR is effective and that interruptions are minimized
- Swap chest compression provider every 2 minutes to ensure quality of CPR (when possible)
- Use SBAR to handover (S-situation B-background A-assessment R-recommendations)
- Ensure appropriate PPE is used (i.e. COVID-19 / TB / Influenza mask; fluid resistant surgical face mask, Gloves, Apron and Eye protection / visor etc.)
- Have a low threshold for suspecting injury to the neck. If you suspect this, try to open the airway using jaw
 thrust alone. If this is unsuccessful, add head tilt gradually until the airway is open. Establishing an open airway
 takes priority over concerns about the cervical spine.

PASS	RE-TEST	FAIL
ASSESSORS SIGNATURE:	former.	

Version 2.4 for use in self-assessment under supervision or by an appropriately qualified, trained and experienced ALS / ILS / APLS / PILS / NLS instructor (as relevant to the training being undertaken) and under the approval of the (Lead) Resuscitation Officer reviewed June 2020