



Primary ^{and} Secondary Care

Addendum (ERC Version)

Re: Recent changes to CPR protocols

Dear Emergency First Response Course Participant

In October 2010 the European Resuscitation Council (ERC), a member of the International Liaison Committee on Resuscitation (ILCOR), slightly modified its CPR and Emergency Cardiac Care (ECC) guidelines. Emergency First Response follows guidelines established by the ILCOR member associations and implements changes whenever protocols are revised.

The new guidelines do not show a great change to the information found in this Primary and Secondary Care Participant Manual, but do further reinforce emphasis on providing effective chest compressions with minimal interruptions. Studies have shown the importance of providing fast, effective chest compressions as a critical aspect in treating a patient who has suffered cardiac arrest.

Please note each change in the chart below, and where in the Primary and Secondary Care Participant Manual it applies:

New Guideline

When obtaining help, ask for someone to call for an ambulance and to bring an automated external defibrillator (AED), if one is available

Compress adult chest to a depth of at least 5 cm at a rate of at least 100 compressions per minute

To minimise interruptions in chest compressions, if there is more than one rescuer present, continue CPR while the AED is switched on and the pads are being placed on the patient

Compress infant chest to approx 4cm and child chest to approx 5cm at a rate of 100-120 compressions per minute

Old Guideline

When obtaining help, ask someone to call for an ambulance

Previously, 4-5 cm and a rate of 100 compressions per minute

Previously, no reference to continuing chest compressions while preparing the AED

Previously, approx one third the depth of the chest and 100 compressions per minute

Rationale & (page) affected

With more and more AEDs being placed in public places it is becoming more common for an AED to be accessible when administering CPR in a public place (1-11, 1-20, 2-7, 2-9)

Importance is being placed on good quality chest compressions with an attempt to reduce the number and duration of pauses during chest compressions (2-9)

Importance is being placed on reducing the number and duration of pauses during chest compressions (2-19, 2-20)

Emphasis is on providing quality compressions of an adequate depth (3-3)

Thank you for participating in an Emergency First Response course