

Check, Call, Care—Adult, Child, Baby

Participant Name: _____

		SKILL SUCCESSFULLY	
MUST-SEE STEPS	DETAILS	DEMONSTRATED YES NO	
Preparing to Respond	Wear gloves and use a barrier device.		
Check the Scene	 Is it safe? What happened? How did it happen? How many ill or injured people are there? Is there someone to help me? Is there someone who looks to be unconscious? 		
Check the Person	 If it is safe to do so, check the person: Ask the person, "Are you okay?" If the person does not respond to your voice, tap the person on the shoulder. For a baby, clap loudly and gently flick the bottom of the baby's feet. Get consent to help. Does the person want your help? Tell the person: Who you are That you are trained in first aid That you are here to help Check the person's ABCs (Airway, Breathing, and Circulation) simultaneously. Checking the ABCs is a rapid assessment that should take no more than 5 to 10 seconds. A = Check the Airway / B = Check Breathing Tilt the head back and lift the chin. Check for normal breathing for a maximum of 5 to 10 seconds. C = Check Circulation Look for deadly bleeding and signs of shock. Quickly look at the person from head to toe. 		
Shout for Help or Call EMS/9-1-1	 If the person responds, determine whether there is any need to call EMS/9-1-1. If the person is unresponsive, have someone call EMS/9-1-1 and get an automated external defibrillator (AED), if available. If alone with an/a: Adult: call EMS/9-1-1 yourself, get an AED, and return to care for the person (start CPR). Child: do five cycles (two minutes) of CPR first, if necessary, then call EMS/9-1-1, get an AED, and return to care for the child. Baby: do five cycles (two minutes) of CPR first, if necessary, then take the baby with you to call EMS/9-1-1, get an AED, and return to providing care. 		

Check, Call, Care—Adult, Child, Baby (continued)

		SKILL SUCCESSFULLY DEMONSTRATED	
MUST-SEE STEPS	DETAILS	YES	NO
Care	 Care for all life-threatening conditions first. If someone is there to help, he or she can treat deadly bleeding or treat for shock while you treat other life-threatening conditions. 		
Care for Shock*	While you are waiting for EMS personnel to arrive:		
* This skill is not required for	Have the person rest.Keep the person warm.		
standalone CPR courses.	 Ensure the person's ABCs are present. Give comfort and reassurance. 		



H.A.IN.E.S. Recovery Position—Adult, Child, Baby

Participant Name: Date:		
MUST-SEE STEPS	DETAILS	CESSFULLY STRATED NO
Arm Placement	 Starting with the person on his or her back: Kneel beside the person's waist. Raise the person's farthest arm away from you by rotating it outwards while keeping the palm facing upwards. Place the arm nearest to you across the person's chest, with the fingers pointing to the opposite shoulder. 	
Leg Placement	□ Bend the person's nearest leg at the knee.	
Head and Neck Placement	 Carefully place your forearm that is nearest to the person's head and neck under the person's shoulder to provide extra leverage. Place the hand of that arm under the hollow of the person's neck and head to stabilize the person. DO NOT push or lift the person's head or neck. 	
Roll	□ Carefully roll the person away from you by pushing simultaneously on the person's nearest shoulder with your stabilizing forearm and on the person's flexed knee with your other hand.	
Final Drainage Placement	 Pull the person's top leg closer to the chest. Place the person's upper hand on the outstretched arm against the forehead. Check the person's airway and, if required, clear the airway with the face turned slightly downward to permit drainage from the mouth. Treat the person for shock, ensure the person's ABCs are present, and monitor the quality of the person's vital signs. Ensure the person's head remains in contact with the outstretched arm and is supported by your hand. 	



Secondary Survey: Hands-Off Check—Adult, Child, Baby*

* This skill is not required for standalone CPR courses.

Participant Name: _____

		SKILL SUCCESSFULLY	
		DEMONSTRATED	
MUST-SEE STEPS	DETAILS	YES	NO
Ask Questions	 Ask the SAMPLE questions: S = Signs and symptoms Are there any cuts or bruises? How do you feel? Do you feel any pain? Does anything feel different? A = Allergies Are you allergic to anything? M = Medications Do you take any medicine? What is it for? P = Past medical history Do you have any medical conditions such as heart disease or another illness? Has this happened before? L = Last meal When did you last eat? What did you eat? E = Events leading up to the emergency What happened? 		
Check the Quality of Vital Signs	 Level of consciousness Is the person awake or sleepy? Does the person seem confused? Is the person responsive? Breathing Listen for sounds. Is the breathing fast or slow, shallow or deep? Is breathing painful for the person? Skin Is it dry or wet? Is it an unusual colour or temperature? 		
Head-to-Toe Check	 If the person is conscious and able to answer questions: Tell the person what you are going to do and ask the person to stay still. Look at all exposed areas of the body for discoloration or deformities. Look at the appearance of the skin and check its temperature with the back of your hand. Ask the person to move each body part one at a time, beginning with the head, to see if anything hurts. (a) If the person has neck pain, do not move the neck. If there is no neck pain, ask if the person can slowly move the head from side to side. (b) Look in the ears, nose, and mouth for blood or other fluids. (c) Ask the person to shrug the shoulders. Ask if there is any pain or discomfort. (d) Check the chest by asking the person to take a deep breath and then blow air out. 		

Secondary Survey: Hands-Off Check—Adult, Child, Baby (continued)

Participant Name: _____ Date: _____

MUST-SEE STEPS	DETAILS	 CESSFULLY STRATED NO
Head-to-Toe Check	 (e) Check the abdomen by asking the person to push the stomach out and then pull it in. (f) Check the hips by asking the person to move them slightly. If there is no pain in the hips, ask the person to wiggle the toes. If there is no pain in the toes, ask the person to move the ankles. If there is no pain in the ankles, ask the person to bend the knees. (g) Check the hands by asking the person to wiggle the fingers. If there is no pain in the fingers, ask the person to move the wrists. If there is no pain in the fingers, ask the person to move the wrists. If there is no pain in the wrists, ask the person to move the elbows. If the person doesn't complain of any pain and doesn't have tender areas or signs of injury, ask the person to rest for a few minutes in a comfortable position. Check the quality of vital signs and make sure the ABCs are present. If you see no problem, help the person to stand up slowly when ready. If the person has pain or dizziness or cannot move a body part, check the ABCs again. Have the person rest, help keep the body temperature normal, and give reassurance. If you find any injuries, provide first aid as needed and decide whether you need to call EMS/9-1-1. 	



Secondary Survey: Hands-On Check—Adult, Child, Baby

Participant Name: _____

		SKILL SUCCESSFULLY DEMONSTRATED	
MUST-SEE STEPS	DETAILS	YES NO	
Ask Questions	 Ask the SAMPLE questions: S = Signs and symptoms Are there any cuts or bruises? How do you feel? Do you feel any pain? Does anything feel different? A = Allergies Are you allergic to anything? M = Medications Do you take any medicine? What is it for? P = Past medical history Do you have any medical conditions such as heart disease or another illness? Has this happened before? L = Last meal When did you last eat? What did you eat? E = Events leading up to the emergency What happened? 		
Check the Quality of Vital Signs	 Level of consciousness Is the person awake or sleepy? Does the person seem confused? Is the person responsive? Breathing Listen for sounds. Is the breathing fast or slow, shallow or deep? Is breathing painful for the person? Skin Is it dry or wet? Is it an unusual colour or temperature? 		
Head-to-Toe Check	 If the person is unconscious and unable to answer questions: Check the head and neck. Look and feel for any abnormalities such as bumps, soft spots, or bleeding. Do not push on soft spots. Check the shoulders by looking and feeling for any bumps or bone deformities. Check the chest by feeling the ribs for deformity. Ask the person to take a deep breath. If any part of the ribs moves differently from the rest when the person breathes in or out, call EMS/9-1-1. Gently press on the abdomen to see if it is hard. If it is hard or painful, do not poke or push on it. To check the hips, put your hands on both sides of the pelvis and push in and down on the hips at the same time. Do not push or pull if the person shows any signs of discomfort. Check the legs by feeling for any deformity in the bones or any swelling. 		



Severe Choking—Conscious Adult

Participant Name: Date:			
MUST-SEE STEPS	DETAILS		CESSFULLY STRATED NO
Preparing to Respond	□ Wear gloves and use a barrier device.		
Check	 Check the scene to ensure it is safe. If it is safe to do so, check the person and the person's ABCs. 		
Call	□ Shout for help.		
Care:			
Positioning	 Stand behind the person and wrap one of your arms diagonally across the person's chest. Bend the person forward at the waist until the person's upper airway is at least parallel to the ground. 		
Back Blows	□ With the heel of your other hand, deliver five firm back blows between the shoulder blades. To deliver effective back blows, you may need to stand behind and slightly to the side of the person rather then directly behind the person.		
Abdominal Thrusts	 If the object has not been dislodged, make a fist and place it just above the belly button. Place your other hand over the fist and pull sharply in and up, doing five abdominal thrusts. Continue the cycle of five firm back blows and five abdominal thrusts until the object comes out or the person begins to breathe or cough or becomes unconscious. 		
Continual Care	□ If the person becomes unconscious, support the person to the ground, protecting the head. Place the person on his or her back. Recheck the person's ABCs. Call EMS/9-1-1, get an AED, and follow the steps for an unconscious, choking adult.		



Severe Choking—Conscious Child

Participant Name: Date: _			
MUST-SEE STEPS	DETAILS		CESSFULLY STRATED NO
Preparing to Respond	Wear gloves and use a barrier device.		
Check	 Check the scene to ensure it is safe. If it is safe to do so, check the child and the child's ABCs. 		
Call	□ Shout for help.		
Care:			
Positioning	 Stand (or kneel for a small child) behind the child and wrap one of your arms diagonally across the child's chest. Bend the child forward at the waist until the child's upper airway is at least parallel to the ground. 		
Back Blows	With the heel of your other hand, deliver five firm back blows between the shoulder blades. To deliver effective back blows, you may need to stand behind and slightly to the side of the child rather then directly behind the child.		
Abdominal Thrusts	 If the object has not been dislodged, make a fist and place it just above the belly button. Place your other hand over the fist and pull sharply in and up, doing five abdominal thrusts. Continue the cycle of five firm back blows and five abdominal thrusts until the object comes out or the child begins to breathe or cough or becomes unconscious. 		
Continual Care	□ If the child becomes unconscious, support the child to the ground, protecting the head. Place the child on his or her back. Recheck the child's ABCs. Call EMS/9-1-1, get an AED, and follow the steps for an unconscious, choking child.		



Severe Choking—Conscious, Larger or Pregnant Person

Participant Name: Date:		
MUST-SEE STEPS	DETAILS	CESSFULLY STRATED NO
Preparing to Respond	Wear gloves and use a barrier device.	
Check	 Check the scene to ensure it is safe. If it is safe to do so, check the person and the person's ABCs. 	
Call	□ Shout for help.	
Care:		
Positioning	Stand behind the person and wrap both of your arms around the person's chest just under the armpits.	
Chest Thrusts	 Make a fist and place the thumb side of the fist in the middle of the person's chest. Place your other hand over your fist and pull straight back towards you. If the first couple of thrusts are not effective, pull more sharply and deeply. 	
Back Blows	Continue to alternate between five firm back blows and five chest thrusts until the object comes out or the person begins to breathe or cough or becomes unconscious.	
Continual Care	□ If the person becomes unconscious, support the person to the ground, protecting the head. Place the person on his or her back. Recheck the person's ABCs. Call EMS/9-1-1, get an AED, and follow the steps for an unconscious, choking adult.	



Severe Choking—Conscious Person in a Seated Position

Participant Name: Date:			
MUST-SEE STEPS	DETAILS	SKILL SUCCESSFULLY DEMONSTRATED YES NO	
Preparing to Respond	Wear gloves and use a barrier device.		
Check	 Check the scene to ensure it is safe. If it is safe to do so, check the person and the person's ABCs. 		
Call	□ Shout for help.		
Care:			
Positioning	 If the person is in a wheelchair, lock the wheels of the wheelchair. Kneel or crouch behind the person. 		
Abdominal Thrusts/ Chest Thrusts	 Wrap both of your arms around the person's abdomen. Make a fist with one hand and place the thumb side of the fist just above the person's belly button. Grasp your fist with your other hand and pull sharply in and up five times. Make a fist with one hand and place the thumb side of the fist in the middle of the person's chest. Place your other hand over your fist and pull straight back towards you sharply five times. Continue to alternate between abdominal thrusts and chest thrusts until the object comes out or the person begins to breathe or cough or becomes unconscious. 		
Continual Care	□ If the person becomes unconscious, support the person to the ground, protecting the head. Place the person on his or her back. Recheck the person's ABCs. Call EMS/9-1-1, get an AED, and follow the steps for an unconscious, choking adult or child.		



Severe Choking—Conscious Person Choking Alone

Participant Name:	Date:	Date:		
MUST-SEE STEPS	DETAILS		CESSFULLY STRATED NO	
Call	Dial EMS/9-1-1 and leave the phone off the hook. This will tell the dispatcher to send help.			
Care:				
Abdominal Thrusts	 If there are people nearby, move to a place where you can get noticed. Drop your abdomen onto a safe object with no sharp edges or corners, such as the back of a chair. Try to dislodge the object by doing thrusts on the same area used for abdominal thrusts. 			



Severe Choking—Conscious Baby

Participant Name: Date:		
MUST-SEE STEPS	DETAILS	 CESSFULLY STRATED NO
Preparing to Respond	Wear gloves and use a barrier device.	
Check	 Check the scene to ensure it is safe. If it is safe to do so, check the baby and the baby's ABCs. 	
Call	 Shout for help. Send someone to call EMS/9-1-1 and to get an AED. 	
Care:		
Positioning	 Kneel on the ground. Sandwich the baby between your forearms, supporting the head. Turn the baby face down with the head lower than the body. 	
Back Blows	Lower your forearm onto your thigh. With the heel of your hand, deliver five firm back blows between the shoulder blades.	
Chest Thrusts	 If the object has not been dislodged, while still supporting the head, turn the baby face up, with your arm supported on your thigh. Place two fingers on the middle of the chest just below the nipple line and "push hard, push fast"—at least 4 cm (1.5 in.) or 1/3 to 1/2 the depth of the baby's chest—five times. Repeat the five firm back blows and five chest thrusts until the object is coughed up; the baby starts to cry, breathe, or cough; or the baby becomes unconscious. 	
Continual Care	If the baby becomes unconscious, follow the steps for an unconscious, choking baby.	



Unconscious, Choking Adult

Participant Name: Date:			
MUST-SEE STEPS	DETAILS	SKILL SUCCESSFULLY DEMONSTRATED YES NO	
Preparing to Respond	Wear gloves and use a barrier device.		
Check	 Check the scene to ensure it is safe. If it is safe to do so, check the person and the person's ABCs. 		
Call	 If the person does not respond, have someone call EMS/9-1-1 and get an AED. If alone with an adult, call EMS/9-1-1 yourself, get an AED, and then return to care for the person. 		
Care:			
Chest Compressions	 Start chest compressions in the middle of the person's chest. "Push hard, push fast"—at least 5 cm (2 in.). Allow the chest to recoil after each compression. Perform 30 compressions in about 18 seconds. 		
Airway	Open the airway using the head-tilt/chin-lift.		
Breathing	 Give one rescue breath lasting one second, with just enough volume to make the chest start to rise. If the person's chest does not rise after the first breath, perform the head-tilt/chin-lift again, tilting the head farther back. Attempt to give another breath. If your breath still does not go in, repeat the cycle of 30 compressions, then look in the person's mouth by grasping both the tongue and lower jaw and lifting. If the object is not visible, return to the rescue breathing steps. If the object is visible, remove it with a finger sweep. Turn the head to the side, slide your finger down the inside of the person's cheek to the base of the tongue, and try to sweep the object out. When the object is out of the person's mouth, return to the rescue breathing steps. After repositioning the head and attempting to give a second breath once, do not repeat the repositioning step between chest compression cycles. 		
Considerations	 When both breaths go in and there is no obvious response, start the CPR sequence of 30 compressions and 2 breaths. If there is any change in the person's condition during the CPR sequence, stop and check the person's ABCs. If there are two First Aiders present, alternate every five cycles (about two minutes). Continue CPR until an AED arrives, more advanced care takes over, the scene becomes unsafe, or you become physically unable to continue. 		



Unconscious, Choking Child

Participant Name: Date:		:	
MUST-SEE STEPS	DETAILS		CESSFULLY STRATED NO
Preparing to Respond	Wear gloves and use a barrier device.		
Check	 Check the scene to ensure it is safe. If it is safe to do so, check the child and the child's ABCs. 		
Call	 If the child does not respond, have someone call EMS/9-1-1 and get an AED. If alone with a child, do five cycles (two minutes) of CPR first, then call EMS/9-1-1, get an AED, and return to care for the child. 		
Care:			
Chest Compressions	 Start chest compressions in the middle of the child's chest. "Push hard, push fast"—at least 5 cm (2 in.) or 1/3 to 1/2 the depth of the child's chest. Allow the chest to recoil after each compression. Perform 30 compressions in about 18 seconds. 		
Airway	Open the airway using the head-tilt/chin-lift.		
Breathing	 Give one rescue breath lasting one second, with just enough volume to make the chest start to rise. If the child's chest does not rise after the first breath, perform the head-tilt/chin-lift again, tilting the head farther back. Attempt to give another breath. If your breath still does not go in, repeat the cycle of 30 compressions, then look in the child's mouth by grasping both the tongue and lower jaw and lifting. If the object is not visible, return to the rescue breathing steps. If the object is visible, remove it with a finger sweep. Turn the head to the side, slide your finger down the inside of the cheek to the base of the tongue, and try to sweep the object out. When the object is out of the child's mouth, return to the rescue breathing steps. After repositioning the head and attempting to give a second breath once, do not repeat the repositioning step between chest compression cycles. 		
Considerations	 When both breaths go in and there is no obvious response, start the CPR sequence of 30 compressions and 2 breaths. If there is any change in the child's condition during the CPR sequence, stop and check the child's ABCs. If there are two First Aiders present, alternate every five cycles (about two minutes). Continue CPR until an AED arrives, more advanced care takes over, the scene becomes unsafe, or you become physically unable to continue. 		



Unconscious, Choking Baby

Participant Name:	Date:	
MUST-SEE STEPS	DETAILS	CESSFULLY STRATED NO
Preparing to Respond	Wear gloves and use a barrier device.	
Check	 Check the scene to ensure it is safe. If it is safe to do so, check the baby and the baby's ABCs. 	
Call	 If the baby does not respond, have someone call EMS/9-1-1 and get an AED. If alone with a baby, do five cycles (two minutes) of CPR first. If a head and/or spine injury is not suspected, take the baby with you to call EMS/9-1-1 and get an AED, then return to providing care. 	
Care:		
Chest Compressions	 Start chest compressions with two fingers in the middle of the baby's chest. "Push hard, push fast"—at least 4 cm (1.5 in.) or ¹/₃ to ¹/₂ the depth of the baby's chest. Allow the chest to recoil after each compression. Perform 30 compressions in about 18 seconds. 	
Airway	Open the airway using the head-tilt/chin-lift.	
Breathing	 Give one rescue breath lasting one second, with just enough volume to make the chest start to rise. If the baby's chest does not rise after the first breath, perform the head-tilt/chin-lift again. Attempt to give another breath. If your breath still does not go in, repeat the cycle of 30 compressions, then look in the baby's mouth by grasping both the tongue and lower jaw and lifting. If the object is not visible, return to the rescue breathing steps. If the object is visible, remove it with a finger sweep. Turn the head to the side, slide your finger down the inside of the cheek to the base of the tongue, and try to sweep the object out. When the object is out of the baby's mouth, return to the rescue breathing steps. After repositioning the head and attempting to give a second breath once, do not repeat the repositioning step between chest compression cycles. 	
Considerations	 When both breaths go in and there is no obvious response, start the CPR sequence of 30 compressions and 2 breaths. If there is any change in the baby's condition during the CPR sequence, stop and check the baby's ABCs. If there are two First Aiders present, alternate every five cycles (about two minutes). 	

Unconscious, Choking Baby (continued)

		SKILL SUCCESSFULLY DEMONSTRATED	
MUST-SEE STEPS	DETAILS	YES	NO
Considerations	□ Continue CPR until an AED arrives, more advanced care takes over, the scene becomes unsafe, or you become physically unable to continue.		



External Deadly Bleeding

Participant Name: Date:			
MUST-SEE STEPS	DETAILS	SKILL SUC DEMONS YES	
Preparing to Respond	Wear gloves and use a barrier device.		
Check	 Check the scene to ensure it is safe. If it is safe to do so, check the person and the person's ABCs. 		
Call	□ Have someone call EMS/9-1-1 and get an AED. If alone, call EMS/9-1-1 yourself, get an AED, and then return to care for the person.		
Care	 Expose the wound. Apply direct pressure to the bleeding. Secure the dressing. Ensure the person's ABCs are present. 		



CPR—Adult

Participant Name: Date: SKILL SUCCESSFULLY DEMONSTRATED **MUST-SEE STEPS** DETAILS YES NO Preparing to Respond □ Wear gloves and use a barrier device. Check \Box Check the scene to ensure it is safe. \Box If it is safe to do so, check the person and the person's ABCs. Call □ If the person does not respond, have someone call EMS/9-1-1 and get an AED. □ If alone with an adult, call EMS/9-1-1 yourself, get an AED, and then return to care for the person. Care: **Chest Compressions** □ Start chest compressions in the middle of the person's chest. □ "Push hard, push fast"—at least 5 cm (2 in.). Allow the chest to recoil after each compression. □ Perform 30 compressions in about 18 seconds. Airway □ After 30 compressions, open the person's airway with a head-tilt/chin-lift. Give two rescue breaths, each lasting one second, with just enough Breathing volume to make the chest start to rise. Considerations □ If both breaths go in, repeat the cycle of 30 compressions and 2 breaths until an AED arrives, more advanced care takes over, the scene becomes unsafe, or you become physically unable to continue. □ If breaths do not go in, provide care for obstructed airway. \Box If there is any change in the person's condition during CPR, stop and check the person's ABCs. □ If there are two First Aiders present, alternate every five cycles (about two minutes). AED □ When the AED arrives, turn it on and follow the voice prompts while minimizing interruptions in chest compressions. □ Remove any clothing or objects from the person that may come in contact with the pads. Check for a pacemaker. □ Make sure the chest is dry and free of hair so the pads can stick. □ Using the appropriate pads, follow the diagrams to place them on the person. □ Follow the AED's automated prompts. □ When prompted to give a shock, stand clear and say, "I'm clear, you're clear, everybody's clear." Make sure that no one is touching the person

in cardiac arrest during the "analyze" and "shock" modes.



NO

CPR—Child

Participant Name: Date: SKILL SUCCESSFULLY DEMONSTRATED **MUST-SEE STEPS** DETAILS YES Preparing to Respond □ Wear gloves and use a barrier device. Check \Box Check the scene to ensure it is safe \Box If it is safe to do so, check the child and the child's ABCs. Call □ If the child does not respond, have someone call EMS/9-1-1 and get an AED. □ If alone with a child, do five cycles (two minutes) of CPR first, then call EMS/9-1-1, get an AED, and return to care for the child. Care: **Chest Compressions** □ Start chest compressions in the middle of the child's chest. \square "Push hard, push fast"—at least 5 cm (2 in.) or $\frac{1}{3}$ to $\frac{1}{2}$ the depth of the child's chest. Allow the chest to recoil after each compression. □ Perform 30 compressions in about 18 seconds. □ After 30 compressions, open the child's airway with a head-tilt/chin-lift. Airway Breathing Give two rescue breaths, each lasting one second, with just enough volume to make the chest start to rise. Considerations □ If both breaths go in, repeat the cycle of 30 compressions and 2 breaths until an AED arrives, more advanced care takes over, the scene becomes unsafe, or you become physically unable to continue. □ If breaths do not go in, provide care for obstructed airway. □ If there is any change in the child's condition during CPR, stop and check the child's ABCs. □ If there are two First Aiders present, alternate every five cycles (about two minutes). AED □ When the AED arrives, turn it on and follow the voice prompts while minimizing interruptions in chest compressions. □ Remove any clothing or objects from the child that may come in contact with the pads. Check for a pacemaker. \Box Make sure the chest is dry so the pads can stick. □ Using the appropriate pads, follow the diagrams to place them on the child. □ Follow the AED's automated prompts. □ When prompted to give a shock, stand clear and say, "I'm clear, you're clear, everybody's clear." Make sure that no one is touching the child in

cardiac arrest during the "analyze" and "shock" modes.



CPR—Baby

Participant Name: _____

			CESSFULLY STRATED
MUST-SEE STEPS	DETAILS	YES	NO
Preparing to Respond	Wear gloves and use a barrier device.		
Check	 Check the scene to ensure it is safe. If it is safe to do so, check the baby and the baby's ABCs. 		
Call	 If the baby does not respond, have someone call EMS/9-1-1 and get an AED. If alone with a baby, do five cycles (two minutes) of CPR first. As long as a head and/or spine injury is not suspected, take the baby with you to call EMS/9-1-1 and get an AED, then return to providing care. 		
Care:			
Chest Compressions	 Keep the airway open by using your hand to maintain a head-tilt. Start chest compressions with two fingers in the middle of the baby's chest. "Push hard, push fast"—at least 4 cm (1.5 in.) or 1/3 to 1/2 the depth of the baby's chest. Allow the chest to recoil after each compression. Perform 30 compressions in about 18 seconds. 		
Breathing	Give two rescue breaths, each lasting one second, with just enough volume to make the chest start to rise.		
Considerations	 If both breaths go in, repeat the cycle of 30 compressions and 2 breaths until an AED arrives, more advanced care takes over, the scene becomes unsafe, or you become physically unable to continue. If breaths do not go in, provide care for obstructed airway. If there is any change in the baby's condition during CPR, stop and check the baby's ABCs. If there are two First Aiders present, alternate every five cycles (about two minutes). 		
AED	 When the AED arrives, turn it on and follow the voice prompts while minimizing interruptions in chest compressions. Remove any clothing or objects from the baby that may come in contact with the pads. Check for a pacemaker. Make sure the chest is dry so the pads can stick. Using the appropriate pads, follow the diagrams to place them on the baby. Follow the AED's automated prompts. When prompted to give a shock, stand clear and say, "I'm clear, you're clear, everybody's clear." Make sure that no one is touching the baby in cardiac arrest during the "analyze" and "shock" modes. 		



Tube Sling for Collarbone Fracture*

* This skill is not required for standalone CPR courses.

Participant Name: _____

MUST-SEE STEPS	DETAILS	SKILL SUCCESSFULLY DEMONSTRATED YES NO	
Preparing to Respond	Wear gloves and have a barrier device available.		
Check	 Check the scene to ensure it is safe. If it is safe to do so, check the person and the person's ABCs. 		
Call	Call EMS/9-1-1 and get an AED if there is a problem with the person's ABCs, the person has multiple injuries or an altered level of consciousness, or if the injury makes walking difficult or involves the head, spine, thigh bone, or pelvis.		
Care	 Treat the injury using the RICE method. Check circulation by comparing the warmth and colour of the fingers with the other hand. Put the forearm of the injured side across the chest, with the fingers pointing at the opposite arm. Position the open triangular bandage over the forearm and hand. The point of the triangular bandage should extend past the elbow and shoulder. Support the forearm and carefully tuck the bandage under from the hand to the elbow. Carry the end of the bandage near the elbow around the back. Twist the top of the point of the sling. Adjust the height of the sling to make sure it is supporting the arm. Tie the ends together in the hollow of the neck on the uninjured side. Pad between the arm and the body, in the natural hollow, with a soft, firm material. Tie a broad bandage from the elbow on the injured side across the body. Recheck circulation and ask the person if there is any numbness or tingling in the fingers. Ensure the person's ABCs are present. Perform a secondary survey and treat any non-life-threatening conditions. 		



Regular Sling and Binder*

* This skill is not required for standalone CPR courses.

Participant	Name:	
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MUST-SEE STEPS			CESSFULLY STRATED NO
Preparing to Respond	Wear gloves and have a barrier device available.		
Check	 Check the scene to ensure it is safe. If it is safe to do so, check the person and the person's ABCs. 		
Call	Call EMS/9-1-1 and get an AED if there is a problem with the person's ABCs, the person has multiple injuries or an altered level of consciousness, or if the injury makes walking difficult or involves the head, spine, thigh bone, or pelvis.		
Care	 Treat the injury using the RICE method. Check circulation by comparing the warmth and colour of the fingers with the other hand. From the most comfortable position, have the person support the injured arm, holding it across the body with the fingers pointed at the opposite shoulder. Position the open triangular bandage under the injured arm, against the body. The point of the triangular bandage should extend past the elbow. The opposite, or bottom, end should be straight up and down on the body with the upper end over the shoulder. Take the bottom end of the bandage and place it over the opposite shoulder. Tie the bandage at the back of the neck, without creating any discomfort. Twist the top of the point of the elbow on the injured side across the body. Recheck circulation and ask the person if there is any numbness or tingling in the fingers. Ensure the person's ABCs are present. Perform a secondary survey and treat any non-life-threatening conditions. 		



Rigid Splint for Lower Arm*

* This skill is not required for standalone CPR courses.

Participant Name: _____

MUST-SEE STEPS	DETAILS	SKILL SUC DEMONS YES	
Preparing to Respond	Wear gloves and have a barrier device available.		
Check	 Check the scene to ensure it is safe. If it is safe to do so, check the person and the person's ABCs. 		
Call	Call EMS/9-1-1 and get an AED if there is a problem with the person's ABCs, the person has multiple injuries or an altered level of consciousness, or if the injury makes walking difficult or involves the head, spine, thigh bone, or pelvis.		
Care	 Treat the injury using the RICE method. Check the skin temperature and colour below the injured area before and after splinting. When possible, splint the injured arm in the position in which it was found. For bone and joint injuries, immobilize above and below the site of the injury. Pad the splint to make the person more comfortable. Ensure the person's ABCs are present. Perform a secondary survey and treat any non-life-threatening conditions. 		



Anatomical Splint for Leg*

* This skill is not required for standalone CPR courses.

Participant Name: _____

MUST-SEE STEPS	DETAILS	SKILL SUC DEMONS YES	
Preparing to Respond	Wear gloves and have a barrier device available.		
Check	 Check the scene to ensure it is safe. If it is safe to do so, check the person and the person's ABCs. 		
Call	Call EMS/9-1-1 and get an AED if there is a problem with the person's ABCs, the person has multiple injuries or an altered level of consciousness, or if the injury makes walking difficult or involves the head, spine, thigh bone, or pelvis.		
Care	 Treat the injury using the RICE method. Check the skin temperature and colour below the injured area before and after splinting. When possible, splint the injured leg in the position in which it was found. For bone and joint injuries, immobilize above and below the site of the injury. Pad the splint to make the person more comfortable. Ensure the person's ABCs are present. Perform a secondary survey and treat any non-life-threatening conditions. 		



Soft Splint for Ankle*

* This skill is not required for standalone CPR courses.

Participant Name: _____

MUST-SEE STEPS	DETAILS	SKILL SUC DEMONS YES	
Preparing to Respond	Wear gloves and have a barrier device available.		
Check	 Check the scene to ensure it is safe. If it is safe to do so, check the person and the person's ABCs. 		
Call	 Call EMS/9-1-1 or if the person needs transportation. Call EMS/9-1-1 and get an AED if there is a problem with the person's ABCs, the person has multiple injuries or an altered level of consciousness, or if the injury makes walking difficult or involves the head, spine, thigh bone, or pelvis. 		
Care	 Treat the injury using the RICE method. Check the skin temperature and colour below the injured area before and after splinting. When possible, splint the injured ankle in the position in which it was found. Immobilize the ankle by splinting the bone above and below the site of the injury. Pad the splint to make the person more comfortable. Ensure the person's ABCs are present. 		



Healthcare Provider Two-Rescuer Rescue Breathing—Adult

Participant Name: _____

MUST-SEE STEPS	DETAILS	SKILL SUCCESSFULLY DEMONSTRATED	
		YES	NO
Preparing to Respond	Wear gloves and use a barrier device.		
Check	 Check the scene to ensure it is safe. If it is safe to do so, check the person and the person's ABCs. 		
Call	If the person does not respond, have someone call EMS/9-1-1 and get an AED.		
Care:			
Breathing	 If normal breathing is not present, one rescuer opens the person's airway with a head-tilt/chin-lift and/or jaw thrust and seals the mask on the person's face. The second rescuer squeezes the bag to give two breaths/ventilations with just enough volume to make the chest start to rise. If there is a pulse, continue rescue breathing. Give one breath/ventilation every five to six seconds. After two minutes of rescue breathing, check again for signs of circulation and normal breathing for no longer than 5 to 10 seconds. If there are signs of circulation and breathing, perform a secondary survey and treat any non-life-threatening conditions.* If there are no signs of circulation, start CPR. * This skill is not required for standalone CPR courses. 		



Healthcare Provider Two-Rescuer Rescue Breathing—Child

Participant Name: _____

MUST-SEE STEPS	DETAILS	SKILL SUCCESSFULLY DEMONSTRATED	
		YES	NO
Preparing to Respond	Wear gloves and use a barrier device.		
Check	 Check the scene to ensure it is safe. If it is safe to do so, check the child and the child's ABCs. 		
Call	□ If the child does not respond, have someone call EMS/9-1-1 and get an AED.		
Care:			
Breathing	 If normal breathing is not present, one rescuer opens the child's airway with a head-tilt/chin-lift and/or jaw thrust and seals the mask on the child's face. The second rescuer squeezes the bag to give two breaths/ventilations with just enough volume to make the chest start to rise. If there is a pulse, continue rescue breathing. Give one breath/ventilation every three to five seconds. After two minutes of rescue breathing, check again for signs of circulation and normal breathing for no longer than 5 to 10 seconds. If there are signs of circulation and breathing, perform a secondary survey and treat any non-life-threatening conditions.* If there are no signs of circulation, start CPR. * This skill is not required for standalone CPR courses. 		



Healthcare Provider Two-Rescuer Rescue Breathing—Baby

Participant Name: _____

MUST-SEE STEPS	DETAILS	SKILL SUCCESSFULLY DEMONSTRATED YES NO	
Preparing to Respond			
Check	 Check the scene to ensure it is safe. If it is safe to do so, check the baby and the baby's ABCs. 		
Call	□ If the baby does not respond, have someone call EMS/9-1-1 and get an AED.		
Care:			
Breathing	 If normal breathing is not present, one rescuer opens the baby's airway with a head-tilt/chin-lift and seals the mask on the baby's face. The second rescuer squeezes the bag to give two breaths/ventilations with just enough volume to make the chest start to rise. If there is a pulse, continue rescue breathing. Give one breath/ventilation every three to five seconds. After two minutes of rescue breathing, check again for signs of circulation and normal breathing for no more than 5 to 10 seconds. Feel for a brachial pulse. If there are signs of circulation and breathing, perform a secondary survey and treat any non-life-threatening conditions.* If there are signs of circulation but no breathing, continue rescue breathing. If there are no signs of circulation, start CPR. * This skill is not required for standalone CPR courses. 		



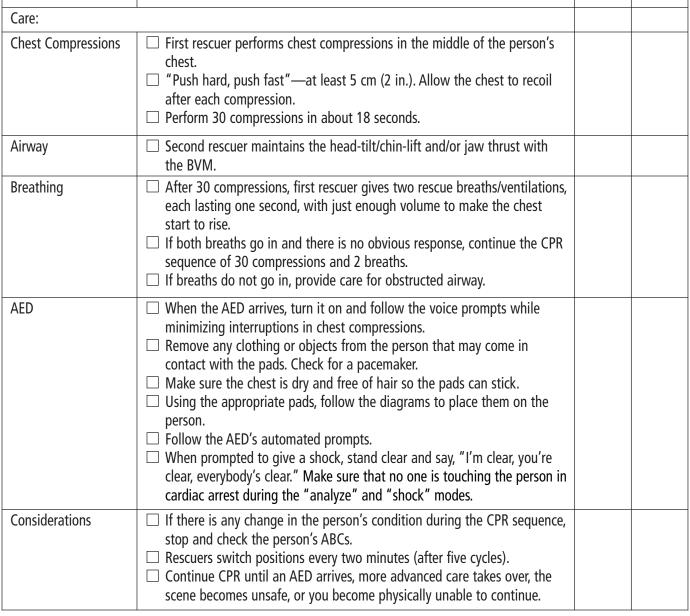
SKILL SUCCESSFULLY DEMONSTRATED

NO

YES

Healthcare Provider Two-Rescuer CPR—Adult

Participant Name: **MUST-SEE STEPS** DETAILS □ Wear gloves and use a barrier device. Preparing to Respond Check \Box Check the scene to ensure it is safe. \Box If it is safe to do so, check the person and the person's ABCs. Call □ If the person does not respond, have someone call EMS/9-1-1 and get an AED. Care: **Chest Compressions** chest.



Date:



Healthcare Provider Two-Rescuer CPR—Child

Participant Name: Date: SKILL SUCCESSFULLY DEMONSTRATED **MUST-SEE STEPS** DETAILS YES NO □ Wear gloves and use a barrier device. Preparing to Respond Check \Box Check the scene to ensure it is safe. \Box If it is safe to do so, check the child and the child's ABCs. Call □ If the child does not respond, have someone call EMS/9-1-1 and get an AED. Care: **Chest Compressions** □ First rescuer performs chest compressions in the middle of the child's chest. \square "Push hard, push fast"—at least 5 cm (2 in.) or $\frac{1}{2}$ to $\frac{1}{3}$ depth of the child's chest. Allow the chest to recoil after each compression. □ Perform 15 compressions in about 9 seconds. Airway □ Second rescuer maintains the head-tilt/chin-lift and/or jaw thrust with the BVM. Breathing □ After 15 compressions, first rescuer gives two rescue breaths/ventilations, each lasting one second, with just enough volume to make the chest start to rise. \Box If both breaths go in and there is no obvious response, continue the CPR sequence of 15 compressions and 2 breaths. □ If breaths do not go in, provide care for obstructed airway. □ When the AED arrives, turn it on and follow the voice prompts while AED minimizing interruptions in chest compressions. □ Remove any clothing or objects from the child that may come in contact with the pads. Check for a pacemaker. \Box Make sure the chest is dry so the pads can stick. □ Using the appropriate pads, follow the diagrams to place them on the child. □ Follow the AED's automated prompts. □ When prompted to give a shock, stand clear and say, "I'm clear, you're clear, everybody's clear." Make sure that no one is touching the child in cardiac arrest during the "analyze" and "shock" modes. Considerations \Box If there is any change in the child's condition during the CPR sequence, stop and check the child's ABCs. □ Rescuers switch positions every two minutes (after five cycles). □ Continue CPR until an AED arrives, more advanced care takes over, the scene becomes unsafe, or you become physically unable to continue.



Healthcare Provider Two-Rescuer CPR—Baby

Participant Name: Date: SKILL SUCCESSFULLY DEMONSTRATED **MUST-SEE STEPS** DETAILS YES NO Preparing to Respond □ Wear gloves and use a barrier device. Check \square Check the scene to ensure it is safe. \Box If it is safe to do so, check the baby and the baby's ABCs. Call □ If the baby does not respond, have someone call EMS/9-1-1 and get an AED. Care: Chest Compressions □ First rescuer performs chest compressions in the middle of the baby's chest. \square "Push hard, push fast"—at least 4 cm (1.5 in.) or $\frac{1}{2}$ to $\frac{1}{3}$ the depth of the baby's chest. Allow the chest to recoil after each compression. □ Perform 15 compressions in about 9 seconds. Airway □ Second rescuer maintains the head-tilt/chin-lift and/or jaw thrust with the BVM. Breathing □ After 15 compressions, first rescuer gives two rescue breaths/ventilations, each lasting one second, with just enough volume to make the chest start to rise. □ If both breaths go in and there is no obvious response, continue the CPR sequence of 15 compressions and 2 breaths. Considerations \Box If there is any change in the baby's condition during the CPR sequence, stop and check the baby's ABCs. □ Rescuers switch positions every two minutes (after five cycles). AED □ When the AED arrives, turn it on and follow the voice prompts while minimizing interruptions in chest compressions. □ Remove any clothing or objects from the baby that may come in contact with the pads. Check for a pacemaker. □ Make sure the chest is dry so the pads can stick. \Box Using the appropriate pads, follow the diagrams to place them on the baby. □ Follow the AED's automated prompts. □ When prompted to give a shock, stand clear and say, "I'm clear, you're clear, everybody's clear." Make sure that no one is touching the baby in cardiac arrest during the "analyze" and "shock" modes.

Healthcare Provider Two-Rescuer CPR—Baby (continued)

		SKILL SUCCESSFULLY DEMONSTRATED	
MUST-SEE STEPS	DETAILS	YES	NO
Alternate Method	 One rescuer maintains the head-tilt/chin-lift and/or jaw thrust while the second rescuer encircles the baby's chest with both hands, spreading his or her fingers around the baby's back and placing both thumbs on the lower half of the baby's breastbone. While the first rescuer maintains the head-tilt/chin-lift and/or jaw thrust, the second rescuer gives rescue breaths/ventilations, maintaining a ratio of 15 compressions to 2 breaths/ventilations. 		