

## First Aid Taking Action Instructor's Manual

Replaces "Special Note to Instructors", Lesson 6 pages 6-1 & 6-2 and Appendix A, page 2

### Special Note to Instructors

The DVDs for this course employ a relatively new teaching method of teaching CPR called video self instruction (VSI). Research has shown that VSI results in better CPR skills acquisition and retention than traditional methods of instruction. With VSI, the DVD drives the CPR instruction instead of being supplementary to it. This method frees you from lectures and demonstrations and provides participants with a standardized, real-time, practice-intensive model of CPR skills. Participants perform CPR at the same time it is performed on the DVD and take their cues from the rescuer on the screen. This teaching method will help you provide consistent instruction to all participants and, simultaneously, keep to a tight schedule. More importantly, it will allow you to observe participants, give them feedback and remediate their performance.

To use the VSI DVD:

- Arrange the room with manikins placed about three feet apart from each other. Be sure participants are facing the television monitor(s). Up to two participants can share a manikin. The video will tell participants when to let the second student take a turn.
- Immediately before starting the video, tell participants that once you start the video, they will be practicing along with it. Direct them to follow the rescuer in the video and do exactly what she does: pump the manikin along with her, give breaths when she does, count aloud with her. Explain that you will be watching them practice and helping them if they need help. Your up-front directions are crucial to the success of this instructional approach.
- Start the video and let it run without interruption until participants have completed the "pumping" practice. Then **pause** the video and provide the following explanation of Hands-Only CPR. *Performing chest compressions only is called Hands-Only CPR. It can be used by any bystander to treat **adult** victims of out-of-hospital **witnessed** cardiac arrest. Conventional CPR, with compressions and breaths, is still needed for all other unresponsive victims who are not breathing adequately, including infants and children. If you are ever in a real-world role of "bystander" at the scene of an adult victim of out-of-hospital witnessed cardiac arrest, use the CPR technique that allows you to confidently deliver good-quality chest compressions with minimal interruption—either conventional CPR or Hands-Only CPR.* Next, explain that you will now continue the conventional CPR training for Healthcare and Professional Rescuers to learn the other CPR skills needed to resuscitate patients in the performance of their professional duties.
- Let the rest of the video run without interruption. Do not pause the video to correct individual participants. Do not demonstrate CPR before, during, or after the video.

- While the video is running and participants are learning and practicing their skills, observe the participants to ensure everyone is following along well. If a participant is performing a specific action poorly, such as not compressing deeply enough or blowing too much air into the lungs, tell the person how to correct the action (e.g., push down harder when you pump; keep your breaths to one second).
- After the video CPR instruction and again after the video AED instruction, give participants additional time to practice as needed. After participants have finished practicing, evaluate each participant using the performance checklists found in Appendix B in their student workbook. If a participant needs additional practice, provide corrective feedback and encourage him or her to practice the skill. When the participant is ready, reevaluate his or her mastery of CPR (and later, AED).

**Replaces *Compression-Only CPR*, FATA IM 6-7**

**Hands-Only CPR**

- Hands-Only CPR is CPR without mouth-to-mouth breaths. It can be used by any bystander to treat *adult* victims of out-of-hospital *witnessed* sudden cardiac arrest and consists of two steps:
  1. Call 9-1-1 or the local emergency number (or send someone to do that).
  2. Begin providing high-quality chest compressions by pushing hard and fast in the center of the chest with minimal interruptions.
 Continue Hands-Only CPR until an AED arrives and is ready to use or EMS providers take over care of the victim.
- Conventional CPR (CPR with breaths and compressions) should be provided for all infants and children, for adult victims who are found already unconscious and not breathing normally, and for any victims of drowning or collapse due to breathing problems.
- If you are at the scene of an adult victim with sudden cardiac arrest, you should use the CPR technique that allows you to confidently deliver good-quality chest compressions with minimal interruption—either conventional CPR or Hands-Only CPR.

Note: Slide 6-30 which accompanies the information above should be changed to read:  
Hands-Only CPR

- Providing high-quality chest compressions
- Minimal interruptions

**Amends CPR: Healthcare and Professional Rescuers Differ Somewhat From Lay Rescuers, FATA IM, Appendix A, page 12**

(Insert as the last bullet in the series)

- Performing chest compressions only is called Hands-Only CPR. It can be used by any bystander to treat adult victims of out-of-hospital, witnessed cardiac arrest. Professional rescuers in a real world role of **bystander** at the scene of an adult victim of witnessed cardiac arrest should use the CPR technique that allows them to confidently deliver good-quality chest compressions with minimal interruption.