

LIFESAVING CPR

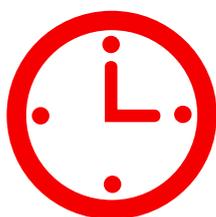


Lifesaving CPR (L CPR) is an evidence-based, standardised, and simplified approach designed to improve survival rates from cardiac arrest, both on and off the beach. Based on the principles of High Performance CPR and supported by research and ANZCOR guidelines, L CPR focuses on doing the basics exceptionally well and reducing variation in practice across our organisation.

THE 6 AIMS OF LIFESAVING CPR

1

REDUCE TIME TO CPR



- Complete with a sense of urgency
- Primary assessment can be undertaken in less than 15 seconds for non-complex patients
- Danger and Response can be assessed simultaneously
- If normal breathing is not detected within a few seconds, start CPR – don't delay

2

IMPROVE QUALITY OF COMPRESSIONS



- Exact hand and finger position do not matter – compressions will be effective so long as they are directly over the lower half of the sternum
- A hands-off technique ensures complete chest recoil
- Compressions should be delivered at a rate of 100-120 beats per minute (bpm). Set a metronome to 110 bpm if available
- Deliver 2 breaths (1 per second) – if the breaths aren't delivered in time, do not re-attempt them, restart compressions

3

TARGET CHEST COMPRESSION FRACTION OF 80%



- Chest Compression Fraction (CCF) refers to the percentage of time spent performing compressions during CPR
- Aim for a CCF of 80%, allowing 20% of time for breath delivery and AED analysis/shocks

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THE VIDEOS



1-person Primary
Assessment



1 Person
CPR



LIFESAVING CPR



4

A COORDINATED APPROACH TO CPR



- Use standardised operator positions to ensure a seamless approach to CPR
- Swap compression operator at least every 2 minutes (e.g. during AED analysis)
- Work around the compression operator to apply AED pads during CPR

5

EFFICIENT AND EFFECTIVE AED USE



- Position AED at the 2 o'clock position
- Hover hands over the chest during analysis in readiness to restart compressions, ensuring you are not touching the patient
- Don't wait for the AED instruction to restart CPR, it is safe to restart immediately
- Use touch (hand tap) and the verbal cue "CPR-Go" after "shock" or "no shock" command

6

BETTER INTEGRATION OF THE ART OPERATOR



- Position oxygen at the 10 o'clock position
- ART operator becomes team leader after OP insertion and the effective delivery of two breaths via BVM
- After this, the BVM can be operated by any trained CPR operator under direct supervision of the ART Operator, using the Rule of 3s:
 - » using 1 hand (3 fingers and thumb)
 - » squeezing a maximum of 1/3 of bag volume
- As team leader, the ART operator:
 - » oversees team performance, providing real-time coaching and feedback
 - » manages radio communication with SurfCom
 - » collects and documents information

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2 Person CPR



3 Person CPR with AED



4 Person CPR

