

CPR – “ON THE SPOTS”

1. Describe some common side effects of Nitroglycerin.

- Headache, dizziness, weakness
- Tachycardia (rate >100), hypotension (BP > 140/90)
- Skin rash, dry mouth, nausea, vomiting

2. What is the expected action of Nitroglycerin?

- Is a rapid-acting smooth muscle relaxant (vasodilator)
- Reduces cardiac work and dilates coronary arteries
- Therefore, increases coronary blood flow and improves perfusion of ischemic myocardium
- Relief of ischemia causes reduction and alleviates chest pain

3. What is hypothermia and does it affect your decision to initiate CPR?

- Lowered temperature of the body core (< 35° C)
- Because the body's circulatory system may be depressed, pulse check may take up to 45 sec.
- If no pulse, CPR is performed as usual – attempt to keep body warm as CPR is being performed

4. What is the mammalian dive reflex?

- Natural body reaction occurring with facial exposure to cold water
- Can lower heart rate by up to 17 beats per minute

5. What are some common problems encountered with mouth to mask breathing?

- Poor sealing of the mask to the face causing leaks
- Gastric distension due to larger breaths

6. Common delays for entry into EMS.

- Victim is a child/infant (EMS is called after 1 minute of treatment if alone)

7. Alternatives to abdominal thrusts (Heimlich Maneuver). In what situations might you use them?

- Back Blows/Chest Thrusts – infant obstructions
- Chest Thrusts – Obese/Pregnant individuals

8. Difference between clinical and biological death.

- Clinical Death – cessation of heart beat and respiration
- Biological Death – Occurs when brain shows no activity (~10 minutes w/o O₂)

9. Common causes of airway obstruction in infant/adult.

- Food
- Small Objects
- Allergic Reaction/Swelling

10. Most common cause of obstruction in unconscious victim.

- Tongue

11. What causes gastric distension?

- Improper Airway/Lack of Oral Airway
- Excessive and forceful breaths
- Both cause air to go to the stomach instead of the lungs

12. Leading cause of death in children.

- Unintentional Injuries – these include:
1) MVA's 2) fire/burns 3) drownings 4) suffocation

13. Teach application and ventilation with mask to mouth.

- Show two hand/finger placement techniques required to make seal

14. What are some common reasons for mouth to mouth breathing failures.

- Mouth/Jaw badly damaged due to trauma – use mouth-to-nose
- Victim has stoma

15. How to perform rescue breathing in a neck fracture is suspected.

- Immobilization technique
- Jaw Thrust

16. Management of vomiting in the unconscious victim.

- Roll to adequate drainage position (3/4 prone)
- Jaw Thrust/Finger Sweep
- Visual Airway Check
- Immediate Ventilation
- Reassessment of breathing

17. Avoiding bruise on lower lip during rescue breathing.

- Use of barrier device
- Be sure to provide mouth-to-mouth seal without use of teeth
- Don't "push" as hard when making seal

18. Complications of CPR.

- Airway is blocked – use obstructed airway technique
- Gastric Distension – reposition airway; provide smaller/less forceful breaths
- Broken Ribs/Sternum – Sontinue CPR; ensure proper landmarking
- Vomit/Regurgitation – Roll patient, clear airway, continue CPR

19. Management of the victim with loose dentures.

- Remove dentures ONLY if loose

20. When do you stop CPR?

- Victim regains pulse or breathing
- Another trained rescuer including EMS personnel takes over
- You are too physically exhausted to continue (you are in danger)
- A DNR order is presented
- A medical doctor says to stop (ie. pronounces death)

21. Causes of sudden and unexpected death besides heart attack.

- **Sudden** - death occurs within one hour of symptoms
- SIDS (infants)
- Electrocution, drowning, hypothermia, trauma
- Drug intoxication, Hypoxia, Pulmonary embolism

22. Difference between angina and heart attack?

- Angina: Heart not getting enough blood and oxygen it needs
- Heart Attack: Death/damage to an area of the heart due to lack of blood/oxygen

23. Chances of survival from a cardiac arrest?

- 5% with CPR
- 20+% with early defibrillation
- Reduced by 10% per minute without defib

24. Does CPR alone save lives?

- No. CPR maintains blood//oxygen flow to the brain and heart until further help arrives

25. Assessing unresponsiveness.

- Tap and Shout

26. Opening the airway without adjuncts?

- Oral Airway

27. Assessing when breathing is inadequate and needs to be provided.

- Look/Listen/Feel and rate checks
- Lack of breathing requires AR
- Rate of <10 or >30 bpm requires assisted ventilations

28. Management of drowning victim.

- Victim should be ventilated in lateral position

29. Management of a heart attack victim.

- EMS
- Constant Assessment of ABC's
- POC
- Rest and Reassurance
- Warmth
- Hx

30. Problems for rescue breathing for rescuer with dentures.

- If dentures are loose, may not be able to make seal

31. Moving victims to perform or while performing CPR.

- Only if absolutely necessary (ie. danger arises or victim needs to be transported in order to get medical attention)

32. How do you know when CPR is working?

- Victim may sporadically take a breath
- Patient is not showing dramatic signs of cyanosis