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Checking a Responsive Child or Infant

1

Interview the child or parent (or bystanders) using SAMPLE.

- **S** = Signs and symptoms
- **A** = Allergies
- **M** = Medications
- **P** = Pertinent medical history
- **L** = Last food or drink
- **E** = Events leading up to the incident



2

Do a head-to-toe check.

- Look and feel for signs of injury, including pain, bleeding, cuts, burns, bruising, swelling or deformities.



3

Provide care for any conditions found.

Checking a Child or Infant Who Appears to Be Unresponsive

1

Shout, tap and shout **again while checking for normal breathing.**

- Gasping is not normal breathing.
- Check for no more than 5 to 10 seconds.



2

If the child or infant responds but is not fully awake:

- Send someone to call 9-1-1 and obtain an AED and first aid kit.
- Do a head-to-toe check.
- Place the child or infant into the recovery position if there are no apparent injuries.

3

If the child or infant does not respond and is not breathing or is only gasping:

- Send someone to call 9-1-1 and obtain an AED and first aid kit.
- Immediately begin CPR and use an AED as soon as possible.

CPR (Child)

1 Verify that the child is unresponsive **and is not breathing or is only gasping.**

2 **Ensure that the child is face-up on a firm, flat surface.**

3 **Give 30 chest compressions.**

- Push hard and fast in the center of the chest to a depth of **about 2 inches** and at a rate of **100–120 compressions per minute.**



4 **Give 2 rescue breaths.**

- Open the airway, pinch the nose shut and make a complete seal over the child's mouth with your mouth.
- Blow into the child's mouth for about 1 second, ensuring that the chest rises.



 *If the chest does not rise, retilt the head and ensure a proper seal before giving the second rescue breath.*

- Take a breath, make a seal and then give the second rescue breath.

 *If the second breath does not make the chest rise, begin compressions. After the next set of chest compressions, open the mouth, look for an object and, if seen, remove it. Continue to check the mouth for an object after each set of compressions until the rescue breaths go in.*

5 **Continue giving sets of 30 chest compressions and 2 rescue breaths.**

CPR (Infant)

1 Verify that the infant is unresponsive **and is not breathing or is only gasping.**

2 **Ensure that the infant is face-up on a firm, flat surface.**

3 **Give 30** chest compressions.

- Push hard and fast in the center of the chest to a depth of **about 1½ inches** and at a rate of **100–120 compressions** per minute.



4 **Give 2** rescue breaths.

- Open the airway and make a complete seal over the infant's nose and mouth with your mouth.
- Blow into the infant's nose and mouth for about 1 second, ensuring that the chest rises.



 *If the chest does not rise, retilt the head and ensure a proper seal before giving the second rescue breath.*

- **Take a breath, make a seal and then give the second rescue breath.**

 *If the second breath does not make the chest rise, begin compressions. After the next set of chest compressions, open the mouth, look for an object and, if seen, remove it. Continue to check the mouth for an object after each set of compressions until the rescue breaths go in.*

5 **Continue giving sets of 30 chest compressions and 2 rescue breaths.**

AED

1 Turn on the AED **and follow the voice prompts.**

2 **Remove all clothing covering the chest.**

3 **Place the pads.**

- Place one pad on the upper right side of the chest and the other on the lower left side of the chest below the armpit.
- If the pads may touch, use front-and-back pad placement.



4 **Plug the connector cable into the AED if necessary.**

5 **Let the AED analyze the heart's rhythm.**

- Make sure no one is touching the child or infant.

6 **Deliver a shock if the AED determines one is needed.**

- Make sure no one is touching the child or infant.
- Push the “shock” button to deliver the shock.

7 After the AED delivers the shock, or if no shock is advised:

- Immediately begin CPR, starting with compressions.
- Continue giving CPR and following the AED's prompts until you see an obvious sign of life or EMS personnel arrive.

Choking (Child)

1 Verify **that the child is choking** and obtain consent.

2 Give **5** back blows.



3 Give **5** abdominal thrusts.



4 Continue **giving sets of 5 back blows and 5 abdominal thrusts until:**

- The child can cough forcefully, speak, cry or breathe.
- The child becomes unresponsive.



If the child becomes unresponsive, lower him or her to the ground and begin CPR, starting with compressions. After each set of compressions and before attempting rescue breaths, open the child's mouth, look for the object and remove it if seen.

Choking (Infant)

1 Verify **that the infant is choking** and obtain consent.

2 Give **5** back blows.



Always support the infant's head, neck and back while giving back blows and chest thrusts.



3 Give **5** chest thrusts.



4 Continue giving sets of **5** back blows and **5** chest thrusts until:

- The infant can cough forcefully, cry or breathe.
- The infant becomes unresponsive.



If the infant becomes unresponsive, lower him or her to the ground and begin CPR, starting with compressions. After each set of compressions and before attempting rescue breaths, open the infant's mouth, look for the object and remove it if seen.

External Bleeding

1

Cover the wound with a sterile gauze pad and apply direct pressure until the bleeding stops.

- If blood soaks through the first gauze pad, put another one on top and apply additional direct pressure.



2

Apply a roller bandage.

- Check for circulation (feeling, warmth and color) beyond the injury.
- Wrap the bandage around the wound several times to hold the gauze pad(s) in place.
- Tie or tape the bandage to secure it.
- Check for circulation (feeling, warmth and color) beyond the injury and loosen the bandage if necessary.



If the bleeding does not stop, call 9-1-1 if you have not already and give care for shock if necessary.

Burns

1

Stop.

- **Thermal burn:** Remove the source of the heat.
 - **Chemical burn:** Remove contaminated clothing. Flush the area with cool water for 20 minutes (wet chemical) or brush the chemical off and then flush with cool water for 15 minutes (dry chemical).
 - **Electrical burn:** Turn off the power at its source. Do not touch the person until the power has been turned off.
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2

Cool.

- Use cool or cold water that is suitable for drinking.
 - Cool the burn for at least 10 minutes.
-

3

Cover.

- Cover the burn loosely with a sterile dressing.

Anaphylaxis

1 Check the label and the medication.

2 Locate the injection site (outside middle of one thigh).

3 Grasp the auto injector firmly with one hand and pull off the safety cap.

4 Have the person hold the tip of the auto-injector at a 90-degree angle to the thigh.

5 Have the person quickly and firmly push the tip straight into the outer thigh.

- Hold the auto injector in place for the recommended amount of time.



6 Remove the auto injector and massage the injection site for several seconds.



7 Check the person's condition and response to the medication.



Help to administer a second dose only if EMS personnel are delayed and the person is still having signs and symptoms of anaphylaxis 5 to 10 minutes after the first dose.