

BCLS Guidelines 2006

by NRC BCLS Subcommittee

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Assess Responsiveness



Call 995



Position Victim



Open Airway



Check Breathing

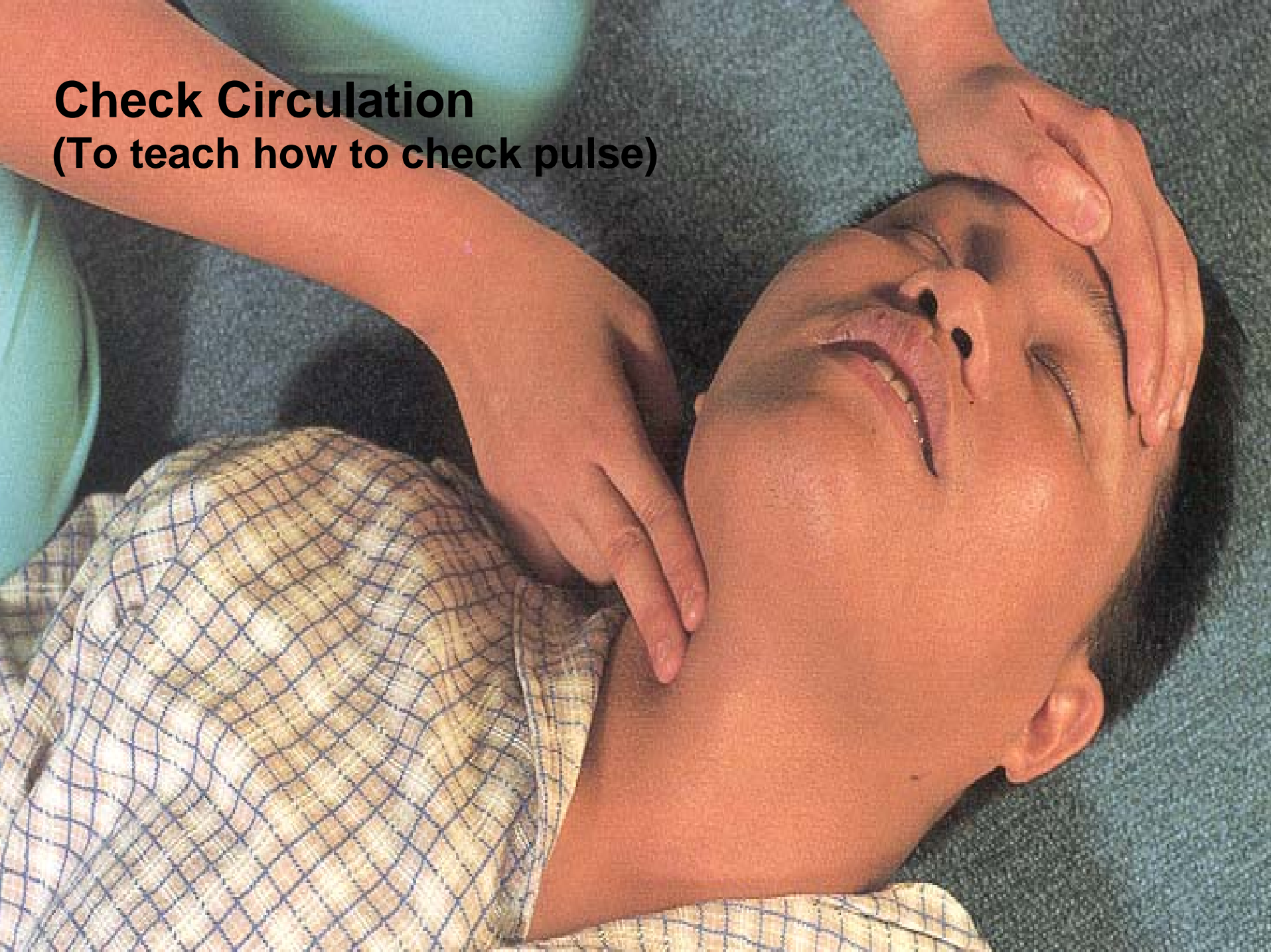
(☑ of normal/abnormalbreathing)



Ventilation Volume
400 - 1000 ml
(1 sec/breath)



Check Circulation
(To teach how to check pulse)

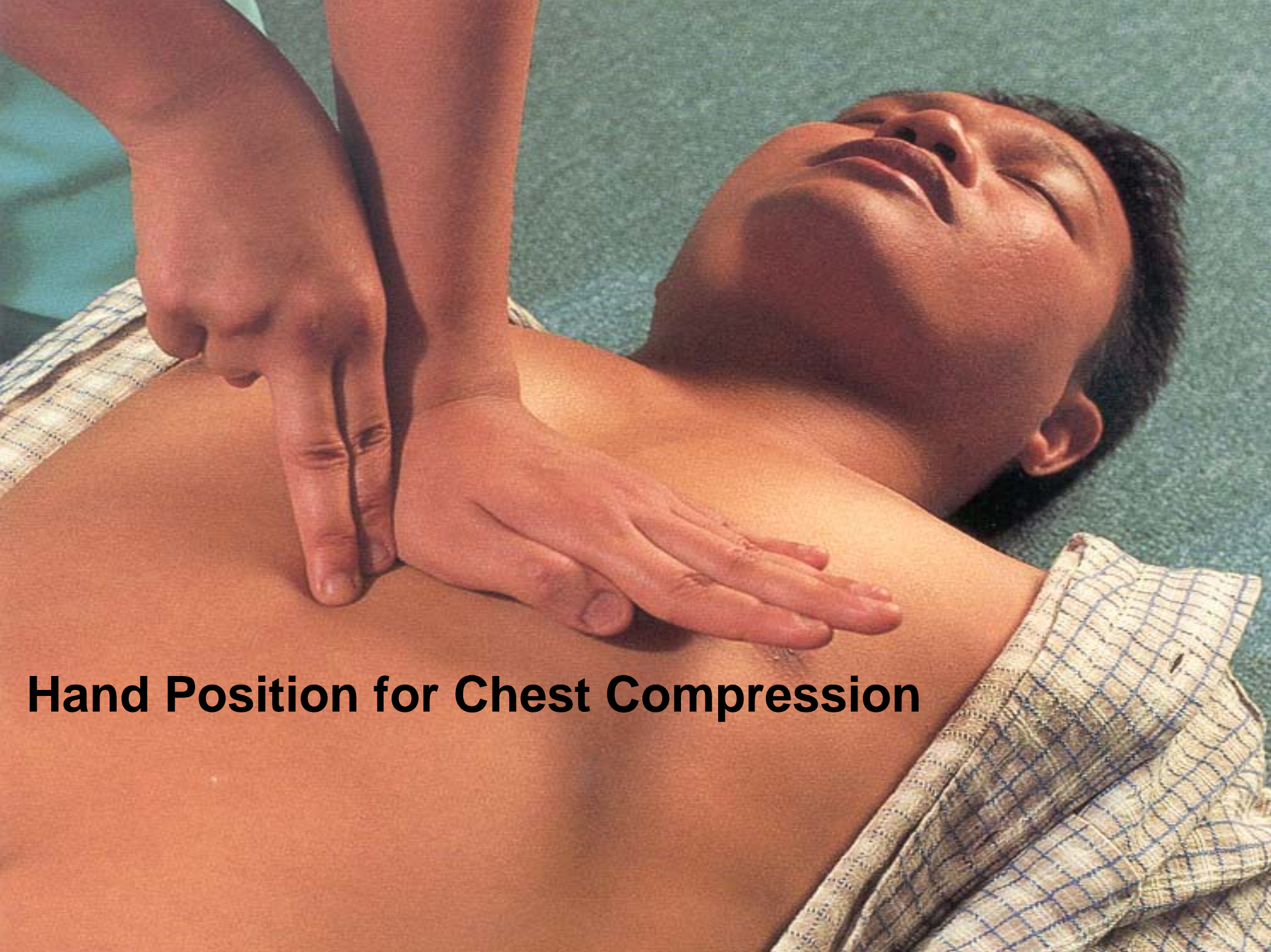




Sternal Notch



**Locate landmark for
chest compression**



Hand Position for Chest Compression

30/15 Compressions : 2 Breaths



CPR Sequence	Adult and Older Child	Child (Approximately 1-8 Years of Age)	Infant (Less than 1 Year of Age)
Establish unresponsiveness, activate EMS	Immediately	After 2 min CPR	After 2 min CPR
Open airway			
Check for breathing: If victim breathing: place in recovery position. If victim not breathing :			
Initial	2 effective breaths at 2 second per breath → 1 second per breath	2 effective breaths at 1 to 1½ seconds per breath → 1 second per breath	2 effective breaths at 1 to 1½ seconds per breath at → 1 second per breath
Signs of Circulation and Pulse. Begin Chest compressions	Carotid	Carotid	Brachial
Compression landmarks	Lower half of sternum	Lower half of sternum	Lower half of sternum (1 finger width below intermammary line)
Compression method	Heel of 1 hand, other hand on top	Heel of 1 hand, other hand on top or Heel of 1 hand	Index and middle fingers
Compression depth	Approximately 1/3 to 1/2 the depth of the chest (4 to 5 cm)	Approximately 1/3 to 1/2 the depth of the chest → 3 cm	Approximately 1/3 to 1/2 the depth of chest → 2 cm
Compression rate			
Compression/ventilation ratio	15:2 (1 or 2 rescuers) → 30:2 (1 or 2 rescuers)	15:2 (1 or 2 rescuers) → 30:2 (1 or 2 rescuers)	5:1 (1 or 2 rescuers) → 30:2 (1 rescuer)

CPR Sequence	Adult and Older Child	Child (Approximately 1-8 Years of Age)	Infant (Less than 1 Year of Age)
Reassess	←	After 5 cycles of 30 compressions : 2 ventilations	→
Rescue breathing	12 breaths/min	20 breaths/min	20 breaths/min
Foreign-body airway obstruction	Abdominal thrusts	Abdominal thrusts	Back blows and chest thrusts

CHEST COMPRESSION ONLY CPR

- **Lay rescuers were reluctant to perform mouth to mouth ventilations for unknown victims of cardiac arrest.**
- **Survival rate of cardiac arrest treated by lay rescuer.**
Ventilation + chest compression > chest compression only > no CPR. If airway is open, occasional gasps and passive chest recoil provide some air exchange.

**Mouth - to - mouth rescue breathing is
safe and effective**

Chest compression only CPR

recommended only in :

**Rescuer unable or unwilling to perform
mouth - to - mouth rescue breathing.**





The most important link of Chain of Survival depends on the lay person

- **Evidence based Resuscitation Guideline**

- **Simplification**

Simplification

Simplification

Simplification

Simplification

Simplification

CPR for non healthcare provider

- **Check Pulse will not be taught**



- **Tongue jaw lift will not be taught**

MANAGEMENT OF AN OBSTRUCTED AIRWAY (Are you CHOKING ?)



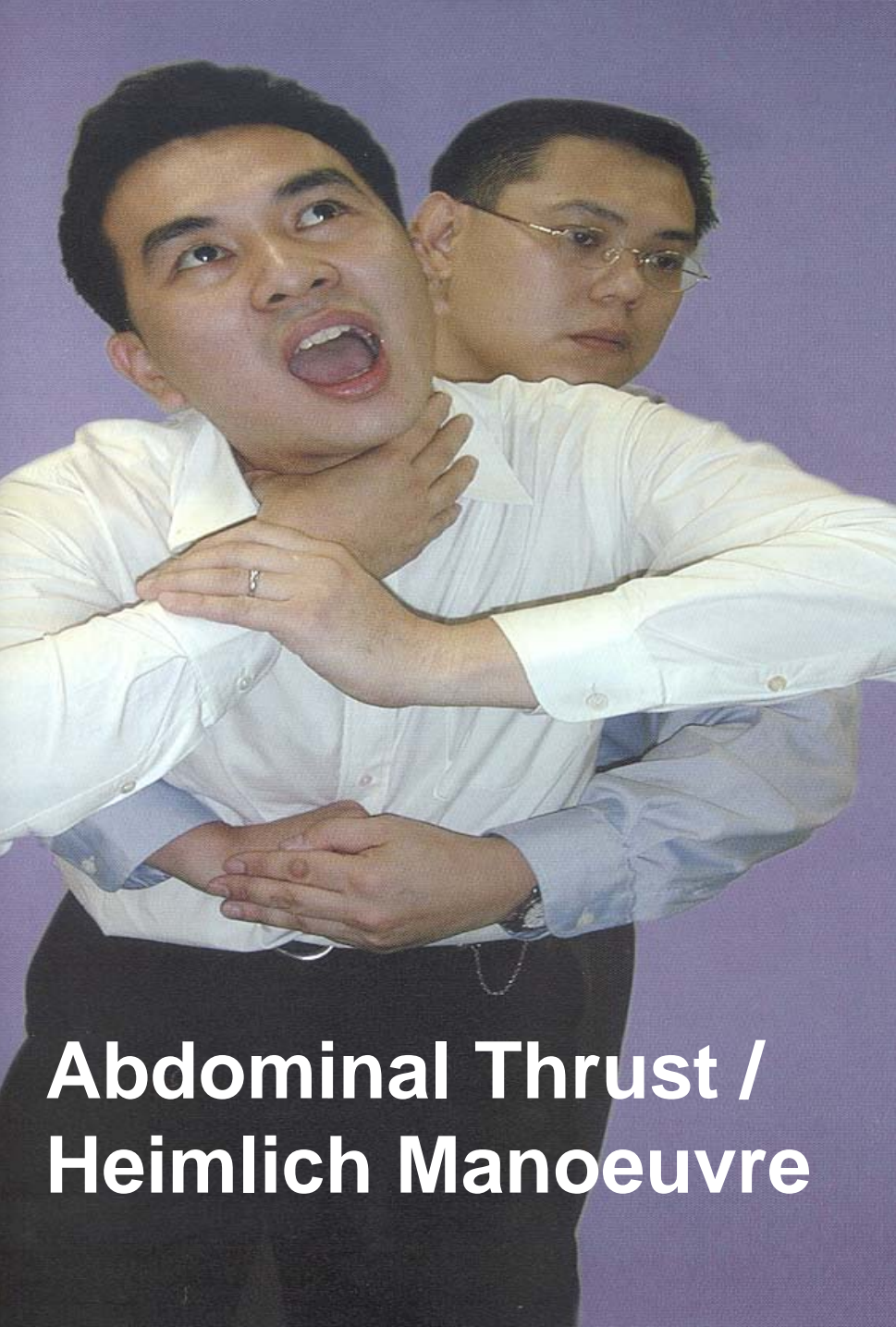
Signs of severe obstruction

Silent cough

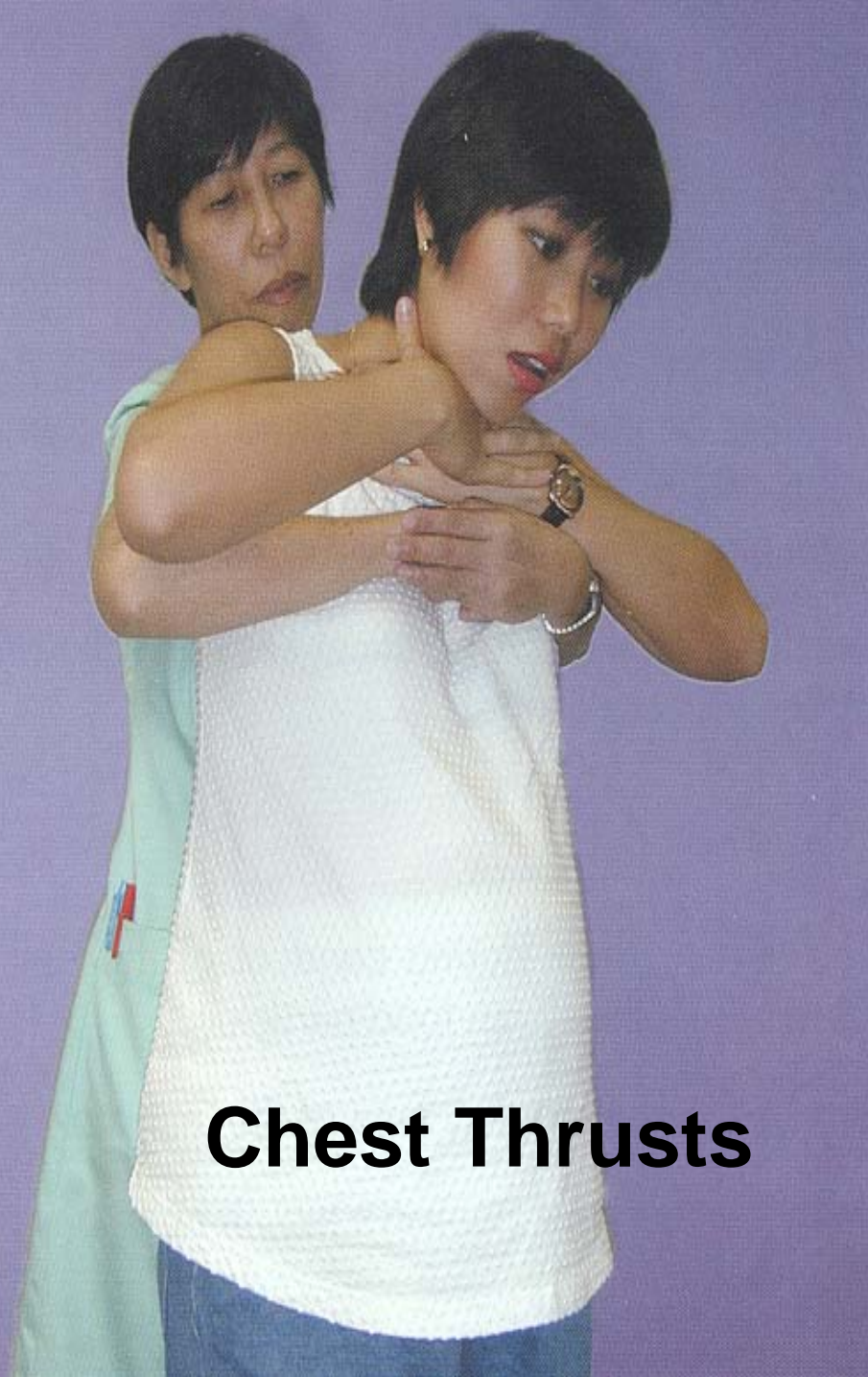
inability to speak

Increased breathing difficulties

cyanosis



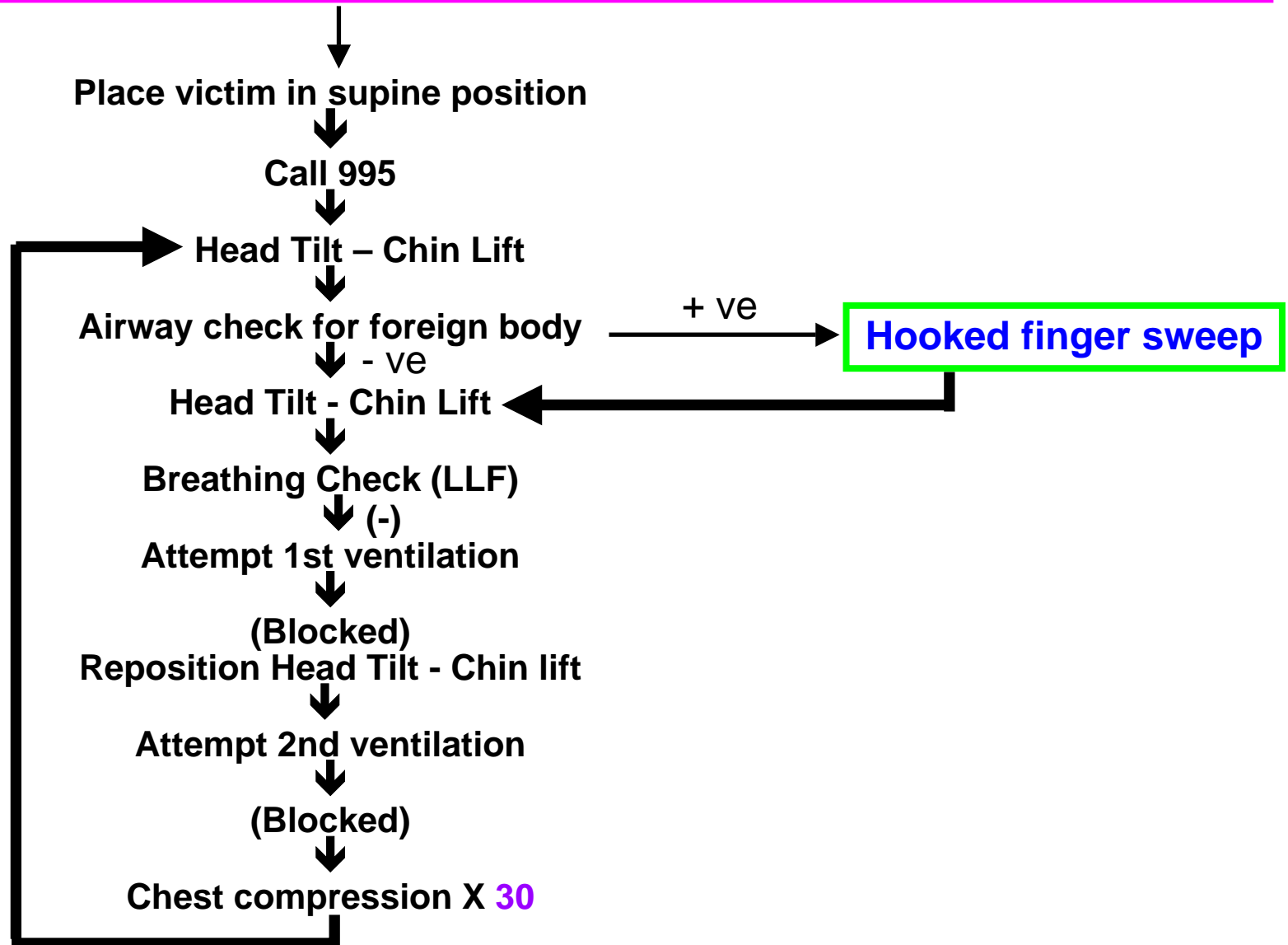
**Abdominal Thrust /
Heimlich Manoeuvre**



Chest Thrusts

Conscious to unconscious victim

Conscious choking → Abdominal thrust → Becomes unconscious



Recovery Position

