

BLS Provider - Guidelines 2025
CPR (Cardio Pulmonary Resuscitation)

	ADULT Puberty and beyond	CHILDREN 1 year of age to puberty	INFANTS Younger than 1 year, excluding newborns		
SCENE SAFETY	Scene is safe for rescuers AND victims				
Check for RESPONSIVENESS	Hey, Hey, are you OK? * Shout for nearby help				
CALL 911 and Get the AED, or Call a Code	* Activate the emergency response system & get an AED as soon as the victim is found unresponsive * <i>With adults,</i> ALWAYS call first *	*If victim is unresponsive – WITNESSED or OTHERS present: activate the emergency response system & get an AED * If ALONE & UNWITNESSED: Perform 5 cycles of CPR before activating emergency response system and getting an AED			
Check for BREATHING AND PULSE simultaneously	* Scan & check simultaneously for breathing & carotid pulse * If no pulse, start compressions	* Scan & check simultaneously for breathing & carotid pulse (If pulse is < 60 beats per min with signs of poor perfusion, start compressions)	* Scan & check simultaneously for breathing & brachial pulse (If pulse is < 60 beats per min with signs of poor perfusion, start compressions)		
<p>* Gasping is not normal breathing. If the victim is gasping begin CPR starting with compressions</p> <p>* If the victim does not have a pulse & is not breathing normally, high quality CPR is required</p>					
Compression Location	Lower half of the breastbone * Heel of 1 hand, 2nd hand on top of the first (heel of one hand for small child victims if adequate depth can be achieved with 1 hand)		Just below the nipple line * Heel of one hand OR two thumb encircling hands technique		
Compression Depth * PUSH HARD	At Least 2 inches	At Least 1/3 the depth of the chest			
Compression Rate * PUSH FAST	100 - 120 compressions per minute				
Compression Ventilation * Ratio	30:2 (1 or 2 rescuers)	30:2 (1 rescuer) 15:2 (two or more rescuers)			
Compression Method	Allow for complete chest recoil (allowing the heart to completely refill with blood) between each compression - avoid LEANING - Minimize interruptions (< 10 seconds) in chest compressions				
Open the AIRWAY	Head tilt-chin lift - (suspected trauma: jaw thrust)				
Give 2 BREATHS that make the chest rise	Give 2 breaths (making the chest rise & fall, lasting 1 second each) Avoid excessive ventilations, return to compressions within 10 seconds				
AED	TURN ON THE AED, FOLLOW THE PROMPTS				
*Defibrillator takes an abnormal heart rhythm into normal rhythm	* Use adult pads ONLY . Do not use child pads/system.	*Use child pads/system if available. If not, use adult pads, placing one on front center of chest, the other on the center of the back			
<p>NOTE: To avoid fatigue & provide high quality CPR, when 2 or more rescuers are available, it is important to alternate the compressor role every 2 minutes (5 cycles of 30:2 for adults, 10 cycles of 15:2 for children & infants)</p>					

RESCUE BREATHING

	ADULT Puberty & beyond	CHILDREN 1 year of age to puberty	INFANTS Younger than 1 year, excluding newborns
<i>When the victim has a valid pulse – but is not breathing normally *check pulse every 2 mins*</i>	<ul style="list-style-type: none"> give 1 breath every 6 seconds give each breath over 1 sec with visible chest rise 	<ul style="list-style-type: none"> give 1 breath every 2 to 3 seconds give each breath over 1 sec with visible chest rise 	

ADVANCED AIRWAY

<i>When any Advanced Airway is in place</i>	<ul style="list-style-type: none"> provide continual compressions give 1 breath every 6 seconds 	<ul style="list-style-type: none"> provide continual compressions give 1 breath every 2-3 seconds
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RELIEF OF CHOKING (for a **RESPONSIVE** victim)

<i>Mild Obstruction</i>	<ul style="list-style-type: none"> with continuous/spontaneous coughing encourage victim to keep coughing do not interfere with the victim's own attempts but stay and monitor their condition if mild obstruction persists - call 911 	<ul style="list-style-type: none"> do not interfere with victim's own attempts to expel object if mild obstruction persists <ul style="list-style-type: none"> - call 911
<i>Severe Obstruction</i>	<ul style="list-style-type: none"> Ask the victim – “Are you choking? Can I help you?” If the victim nods “yes” and cannot speak Call 911 Perform abdominal thrusts (Heimlich maneuver) * repeated cycles pf 5 back blows (slaps) followed by 5 abdominal thrusts & repeat until the object is expelled, or the victim becomes unresponsive 	<ul style="list-style-type: none"> If victim cannot make any sounds or breathe – Call 911 Perform a series of 5 back blows (slaps) alternating with 5 chest thrusts until the object is expelled or the child becomes unresponsive * The heel of 1 hand technique for chest thrusts is now recommended for infants

Choking victim becomes **UNRESPONSIVE** continue to attempt to relieve the airway obstruction

If help is available, have them call 911 <ul style="list-style-type: none"> begin 2 minutes of CPR, starting with compressions added action - open the mouth wide & look for the object (removing it if seen) before attempting 2 breaths 	If ALONE with no immediate access to a phone <ul style="list-style-type: none"> begin 2 minutes of CPR, starting with compressions added action - open the mouth wide & look for the object (removing it if seen) before attempting 2 breaths activate 911
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TEAM DYNAMICS *Utilize a CPR Coach when available	<ul style="list-style-type: none"> CLEAR ROLES & RESPONSIBILITIES allows all team members to know their positions, functions, and tasks during a resuscitation attempt KNOWING YOUR LIMITATIONS is communicating boundaries and asking for help when needed during a resuscitation attempt Communication is presented with clear messages and mutual respect, messages are repeated back to Team Leader to insure comprehension
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