The first task when handling a possible cardiac arrest call is to identify whether a cardiac arrest has occurred. Two vital questions should be asked as early in the call as possible:

1. Is the victim conscious or responsive?
2. Is the victim breathing normally?

If the answer to both is no, use the protocols below as called for:¹

Protocol for Compression-Only CPR

For adult victims and children older than eight years, instructions should be for Compression-Only CPR, or CPR without rescue breathing. Be CALM and ASSERTIVE and follow the script below. Tell the caller:

1. Bring the phone and get NEXT to the person if you can.
2. Listen carefully. I’ll tell you what to do.
   
   A. Place the victim FLAT on his back on the floor.
   
   B. KNEEL by the victim’s side.
   
   C. Put the HEEL of your HAND on the CENTER of the victim’s CHEST.
   
   D. Put your OTHER HAND ON TOP of THAT hand.
   
   E. WITH YOUR ARMS STRAIGHT, PUSH DOWN AS HARD AND FAST AS YOU CAN WITH THE HEELS OF YOUR HANDS. DO IT TEN TIMES AND

¹ It is essential to realize that CPR is not harmful, even when performed on persons not in cardiac arrest. A study of 247 telephone-assisted CPR cases found only six in which a person not in arrest suffered a fracture, and showed no instances of internal injury (Circulation 2010;121:91-97).
COUNT WITH ME: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10 (The rate should be corrected as needed. The ideal rate is 100 compressions per minute. If necessary, the caller should be told to come back to the phone.) KEEP GOING, PUSH HARD AND FAST AND COUNT OUT LOUD TO 10 AGAIN AND AGAIN. I’LL STAY ON THE PHONE. KEEP DOING IT UNTIL HELP ARRIVES. (Encourage the caller. If the caller is tired, ask if he is keeping his arms straight. If necessary, suggest a short rest.)

IF:

• The caller has kept the phone in his ear and says it is interfering with CPR, suggest he use speaker phone. If that option doesn’t work, suggest he put the phone down during compressions.
• The caller reports that the victim vomits, instruct the caller to turn the victim’s head to one side and to sweep out the contents of the victim’s mouth with his fingers before resuming CPR.

Protocol: Conventional CPR (Compressions with Rescue Breaths)

If the victim is

• a child eight years old or younger OR
• an adult whose cardiac arrest has a respiratory cause such as drowning OR
• a person who collapsed 15 or more minutes before

then provide instructions for rescue breathing after the first 30 compressions. Note that when delivering instructions for CPR with rescue breathing THE CALLER SHOULD BE TOLD TO COUNT TO 30 INSTEAD OF 10. After the 30th compression, follow the script below, telling the caller:
1. **PINCH** the victim’s **NOSE**. With your other hand, **LIFT** the **CHIN** so that the head **TILTS BACK**.

2. Completely **COVER** the victim’s **MOUTH** with your **MOUTH**.

3. **GIVE 2 BREATHS** and come back to the phone. When the caller returns to the phone, repeat the compression instructions above. Tell the caller to stop at 30 compressions again. Then repeat the instructions for rescue breathing, continuing this cycle of 30 compressions followed by 2 breaths until professional rescuers arrive.

**Protocol: Foreign Body Airway Obstruction**

If it is confirmed that a victim is choking and is now unconscious, the caller should be told after 30 compressions to look for the object that caused the choking. As in the instructions for CPR with rescue breathing, **THE CALLER SHOULD COUNT TO 30 INSTEAD OF 10**. After each set of 30 compressions, follow the script below, telling the caller:

1. **LOOK** inside the victim’s **MOUTH** and **REMOVE ANY OBVIOUS OBSTRUCTION**.

2. If you remove an object, give **TWO RESCUE BREATHS** between each **SET** of 30 compressions.

3. If no object is seen, **CONTINUE** with chest compressions.