AAOS
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EMERGENCY CARE
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CPR and AED

Seventh Edition

Instructor's Manual

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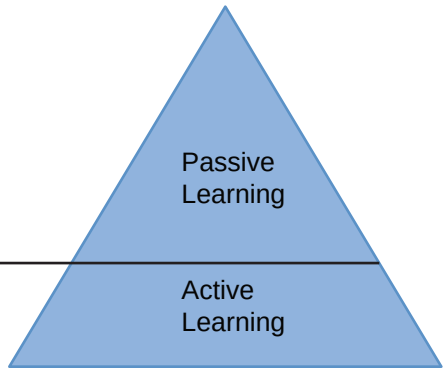
Tell me and I forget.
Teach me and I may remember.
Involve me and I learn.

—Benjamin Franklin

People generally remember…

10% of what they read
20% of what they hear
30% of what they see
50% of what they see and hear
70% of what is discussed with others
90% of what they say and do.



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Instructor's Manual

Introduction

This instructor's manual can help almost anyone become a better teacher! Many instructors get bogged down in the details of running a course. This manual describes ways of making instruction go more smoothly, for both the instructor and the participants.

Objectives

You will not find a long list of objectives in this instructor's manual. To provide quality first aid instruction for most injuries and sudden illnesses, only two objectives are needed:

1. Recognize or identify a specific condition (eg, heart attack, chemical burn).
2. Describe or apply proper first aid procedures.

To illustrate these objectives, the participant manual contains *What to Look For/What to Do* tables. The *What to Look For* column in these tables lists the signs and symptoms of specific conditions. The *What to Do* column describes the first aid procedures to be used for specific conditions.

Simplified, the two objectives can be remembered as *find it; fix it*.

Customization

This instructor manual offers a host of instructional strategies and course components to meet the preferences of the instructor and the needs of the participants. Instructors can utilize any of these strategies and customize the course to accomplish the following:

- Meet the needs of an organization, a business, or local or state regulations.
- Match the participants' needs and capabilities.
- Fit the instructor's preferred style of instruction. How a person teaches reflects his or her experiences.
- Provide a variety of instructional strategies. A variety of strategies is more effective than adhering to only one or two methods.

Instructional Strategies

It is important to remember that all learning is brain-based. The brain does not just receive information—it processes it. Learning occurs when participants make sense of what they encounter or experience while interacting with others. During this process, neural connections are made in the brain, allowing participants to interpret the information they are being provided.

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Passive methods of learning, such as listening or watching a video, do not require neural connections or interpretations to be made. Pouring facts into a participant's head actually interferes with his or her learning. A glitzy presentation may make an immediate impression on the brain, but unless the participant has a photographic memory, he or she simply cannot retain all of the information being presented. Learning is not a spectator sport. To learn, participants must be engaged in higher-level tasks of thinking.

Real learning is not memorization. Most of what we memorize is lost in a matter of hours. To retain what has been taught, participants must mull it over, deliberate, and ponder on it. Without the opportunity to discuss and ask questions, the ability to learn is greatly reduced.

Having class members interact and collaborate is known as active learning. Active learning is effective, efficient, and engaging. People learn more and retain information longer if they acquire it in an active rather than a passive manner. Merely hearing or seeing something is not enough to learn it. The most common instructional error is mistaking the presentation of information for actual instruction.

Lecture

When instructors say they have covered content, they often mean they have presented the content in a lecture format. However, content covered is not always content learned. Learner involvement may be very minimal during lecture presentations. Still, that does not mean lecturing should never be used. In this course, lectures are accompanied by PowerPoint presentations. PowerPoint presentations are a fast, easy, and inexpensive supplement to lecturing, adding a visual component to the presentation.

When using the lecture instructional strategy, consider the following guidelines:

- Avoid overusing or reading word for word from the PowerPoint slides.
- Write key points from the presentations on a whiteboard, chalkboard, or easel paper pad.
- Make it a point to ask thought-provoking questions, and allow time for questions and discussion on a topic. Otherwise, class members will have little opportunity for involvement during the PowerPoint presentations.
- Keep lectures as brief as possible. Do not succumb to the "pull of the podium"; that is, do not expound and elucidate too much.
- Avoid sharing too many stories of your own personal experiences; such stories can come across as bragging.
- Do not stand in one place. Walk around the room during the lecture, but avoid pacing back and forth.

Troubleshoot a Scenario

Scenario-based learning is motivating to many people and makes training seem relevant. This course contains multiple components to allow for scenario-based learning. For example, the Worksheets and PowerPoint presentations present two scenarios for each topic. To provide

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scenario-based learning, an instructor may choose to show the PowerPoint presentation slide(s) for a particular injury or illness and then do one of the following:

- Show and read aloud one of the two scenarios found in the PowerPoint presentation.
- Ask the participants, "Have any of you experienced or witnessed a situation in which someone _____ (eg, was severely burned, had broken a bone, had been stung by a bee)? Please tell the class what happened."
- If teaching at a worksite or other location, acquire past on-site injury and sudden illness incidents to serve as scenarios, if possible, and share these incidents with the class.

Flowcharts (included as separate PDF files) can also be used for scenario-based learning. After presenting a scenario, consider showing the associated flowchart. Use the decision point questions in the flowchart to walk the participants through the scenario. When a decision point is reached, ask the participants which path is best to take for the particular situation. As you lead the participants through the flowchart, point out the key points and procedures. You may also choose to point out the key points and procedures for the flowchart's other paths.

Active Learning

The use of active learning has been well researched. The results show that participants who have opportunities to work collaboratively learn faster and more efficiently, have greater information retention, and feel more positive about the learning experience. With active learning, people are not just put into a group and assigned a task. Instead, instructors guide participants through simple but effective instructional strategies as they work cooperatively with their classmates. Very specific steps should be followed to ensure success, and it is essential that both instructors and participants are aware of them.

Some may think that an instructor who asks questions during a course is following the active learning model; however, when an instructor simply asks questions, a couple problems can arise. First, when a question is posed to the class as a whole, usually a limited number of participants volunteer to answer. Research on participation has shown that in small classes, a few people do about 75% of the talking (excluding that which is done by the instructor). Second, as soon as the first person is called upon, many of the class members stop processing the answer. Using the active learning method overcomes these two problems. It actively involves *every* class member and has a far greater impact on learning than other strategies do.

Additional benefits of active learning include the following:

- It gets participants to think. To learn something, people need to interact with it. Active learning strategies offer a quick way to do that.
- It gets participants active. It takes them out of the sitting and watching or listening mode and puts them into an interactive talking mode.
- It provides novelty. Talking with a peer is a unique experience and makes the learning more memorable.
- It allows for assessment. The instructor can listen as participants talk and can gauge who understands the topic and who doesn't.

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- It requires almost no preparation. Combining active learning strategies allows an instructor to teach anywhere and anytime.
- It increases participation. Every person talks, and most people find it safer or easier to enter into a discussion. Too often, participation involves only a few students (usually the same few). Active learning allows even the quiet, shy, or intimidated person to participate.
- It provides structure to discussions and keeps participants focused on the task at hand.
- Participants learn new ways of thinking from each other. This may include new ways of thinking about a first aid procedure.
- More of what is learned is retained because participants have an opportunity to discuss and reflect on the topic.

Learner-centered active learning activities include Think-Pair-Share and Round Robin. When using these active learning strategies, make sure to give clear instructions—what participants are to do, how much time they have to complete an activity, and with whom they will work. Clear instructions help ensure buy-in and better participation.

Think-Pair-Share (TPS)

The following steps can be used to complete the Think-Pair-Share activity:

1. *Think.* Participants individually respond to a set of questions or scenarios (eg, the Scenarios and Agree/Disagree statements included in the Worksheets and PowerPoint presentations, which are more thoroughly explained in the Course Components section of this Instructor Manual). Be sure to tell participants how much time they have to complete this segment of the activity (1 minute or less).
2. *Pair.* Pair each participant with a partner. Instructors may assign pairs or let participants pick their own partner. Be sensitive to those who may have reading, attention, or language difficulties. Do not keep a participant with the same partner throughout the course. Rotating partners allows participants to interact with different people and prevents incompatible participants from being stuck with each other. Pairing participants makes it impossible for them to avoid participating and thus enhances learning.
3. *Share.* Participants compare and discuss their answers from the Think segment of the activity with their partner, making note of any differences between their answers (1 minute or less). Direct partners to tell each other why they chose the answer they did (especially for those with which they disagree). Discussing answers with a partner maximizes participation, focuses attention, and engages students in comprehending the information. During this time, the instructor can walk around and listen to the conversations to get an idea of the participants' understanding while they are in pairs.

   Occasionally, if time allows, consider expanding the Share segment of this activity by either (1) having one pair turn to another pair to compare and discuss their answers or (2) having one pair share their answers with the entire class. When first using this second technique, ask for volunteers; for later responses and answers, call on other pairs.

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4. *Debriefing.* When most or all pairs have finished sharing their answers (after about 1 minute), reassemble the entire class and give the correct answers. Ask if any of the topics need further clarification. The clarification process can lead to a stimulating class discussion. The instructor can also focus upon other key points and procedures.

It can be challenging to get participants to come back to the larger group after working together in pairs. It is helpful to indicate at the beginning of the activity how long participants have to complete each segment of the activity (ie, how long to Think and how long to Share). Negotiate with the class a signal for participants to stop talking, such as sounding a buzzer, using an alarm on a smartphone, or flashing the room's lights. Doing so will keep participants on task and help transition them into the larger group for debriefing.

Instructors should also avoid racing through material to finish it all by the end of a certain time. Rushing an activity is almost always counterproductive. Instead, vary the order of the Think-Pair-Share activity. For example, participants may be instructed to complete the Think segment but skip the Pair and Share segments; at the end of the Think segment, the instructor can ask participants to vote for answers to the questions by raising their hands. The instructor can then provide the correct answers and, if needed, clarification.

Round Robin

The following steps can be used to complete the Round Robin activity:

1. Participants individually respond to a set of questions or scenarios (eg, the previously discussed Scenarios and Agree/Disagree statements).
2. Participants then work with a partner to compare and discuss their answers.
3. Reassemble the class and have one pair of participants answer a question before confirming the correct answer and providing explanation if necessary. Then, have the next pair of participants answer the next question, and continue around the remaining pairs until all of the questions or scenarios have been completed.

Games

Educational games can be an effective and engaging instructional strategy. They provide challenge, competition, and a break from routine. Having an inexpensive prize to give to the winners can add to the participants' incentive to win and to become actively involved in the game.

Tic-Tac-Toe Game

To play the Tic-Tac-Toe game, the instructor should have a set of nine or more questions available (the Agree/Disagree statements found in the Worksheets and PowerPoint presentations can be used for some of the questions).

1. Draw a large diagram of the # symbol (looks like a pound sign) to create a 3- by 3-square grid on a whiteboard, chalkboard, or easel paper pad.
2. Randomly pick a number from 1 through 9 and insert it in one of the squares on the grid.

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3. Divide the class into two teams, and assign one team the symbol X and the other the symbol O.
4. After determining which team goes first (ie, flipping a coin or guessing a number written on a piece of paper), start by having one member of a team (or the entire team) select a number from the Tic-Tac-Toe diagram. Then, ask that team member (or the entire team) a question.
5. If answered correctly, insert the team's symbol (X or O) over the number in the diagram and give the team 2 points.
6. If the team's answer is incorrect, the other team gets a chance to answer. If their answer is correct, they receive 1 point (but no mark in the diagram).
7. If neither team answers correctly, discuss the correct answer with the class.
8. Continue playing, with the team that did not have the original question playing next. Repeat steps 1–7 until one team succeeds in placing three of their symbols in a horizontal, diagonal, or vertical row, or until all squares have been used. Teams can attempt to block each other's progression.
9. If the game ends quickly with squares unused, discuss the remaining questions with the class.

20 Questions

1. Start by assigning a "sick person." This person can be a class member or the instructor. The chosen person writes a sudden illness on a piece of paper and secures it in a pocket or under a book.
2. Participants attempt to determine what illness the "sick person" has by asking questions that can be answered with a "yes" or "no" (eg, "Are you taking insulin?" "Do you have chest pain?"). The "sick person" can refer to the participant manual for signs and symptoms (found in the *What to Look For/What to Do* tables) to help answer the participants' questions.
3. If participants do not guess the illness within 20 questions, they lose the game. Participants can guess the illness at any time, but the guess counts as a question.
4. If the illness is identified, the "sick person" shows the paper with the illness written on it to confirm the answer is correct.
5. The game can also be played competitively, pitting one team against another. A prize can be given to the participant or the team who gives the correct answer.

Skill Instruction

Learning a skill (eg, CPR) is a type of active learning. Some first aid trainers believe that practicing skills sufficiently places their program in the active learning category; however, in the ECSI course, participants are actively learning and interacting throughout the course, not just when a skill is being practiced.

Skill instruction can be either instructor-led or shown through a video segment.

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Video Segment

Videos can support a course and minimize the need for lectures. Still, it is important to remember that good teaching is more than just pushing the Play button. When a video is shown in a classroom with the lights dimmed or turned off, some participants have a tendency to doze off. Prevent participant boredom by focusing upon skill development (eg, CPR) and requiring participants to physically move and practice the skills. Skill videos should be used as follows:

1. *Watch the video segment* of one of the skill demonstrations.
2. *Practice.* Place the participants in pairs or in teams of three to four participants. Participants should take turns performing the different roles described in the following list so that each participant performs the skill.
   - *If in pairs:* One participant starts as the first aid provider performing the skill, and the second participant serves simultaneously as the person receiving care and the coach. As the coach, the participant refers to the Skill Sheet associated with the video segment. After the skill is performed, the participants switch roles.
   - *If in small teams of three to four participants:* The roles of coach, person receiving care, and first aid provider are assigned and rotated among the team members.

Instructor-Led

If the instructor prefers, he or she can demonstrate a skill instead of using the video segment. (When leading the skill instruction, the instructor should refer participants to the appropriate Skill Sheets; this course component is more thoroughly explained later in the Course Components section of this Instructor Manual.)

Whole-Part-Whole-Whole Method

When providing skill instruction (whether instructor-led or video-driven), use the Whole-Part-Whole-Whole method. Take, for example, the skill of performing CPR:

1. *Whole.* Before demonstrating the skill, tell participants what to notice in the demonstration. This makes the participants aware of the most important features of the skill. Demonstrate (either by the instructor or the video segment) the "whole" action of CPR (ie, RAB-CAB).
2. *Part.* Participants practice each component of RAB-CAB (ie, the "parts" of CPR). This step can be optional, since most first aid skills do not require "parts" to be practiced.
3. *Whole.* This step can also be optional. The whole CPR procedure, or skill, is demonstrated again, either by the instructor or video segment.
4. *Whole.* Participants combine the parts of the skill and practice the sequence as a whole. The skill can be practiced by either of the two following methods:
   - *Drill practice.* The instructor leads the skill practice and the participants practice in unison. Depending upon the amount of equipment available (eg, manikins, bandages), participants may have to take turns practicing the drill.
   - *Paired or triad practice.* If in pairs, one participant practices the skill while the other gives cues and feedback. If in threes (triad), one participant practices the skill on another participant, while the third participant provides cues and feedback. All participants then rotate through the three positions.

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Instruction Sequence Options

Table 1 shows how instructors can use the different instructional strategies discussed in this manual.

Table 1 Instruction Sequence Options

Show: Photos and illustrations from the PowerPoint presentations to gain attention and introduce a new topic.

Active Learning	Lecture	Troubleshoot a Scenario
• ***Think:*** Individually, participants answer or respond to the Agree/Disagree statements or Scenarios found in the Worksheets or PowerPoint presentations. • ***Pair:*** Participants pair up with a partner. • ***Share:*** Participants compare and discuss their answers, focusing upon those with which they disagree. ***Debriefing:*** Instructor gives correct answers and answers participant questions.	• Show and read the Scenarios found in the Worksheets and PowerPoint presentations. • Show the "What to Do" slide(s) in the PowerPoint presentations. Point out key procedures.	• Show and read the Scenarios found in the Worksheets and PowerPoint presentations. • Show the Flowchart PDF. Lead participants through the flowchart, asking which path to take at each decision point.

Skill instruction: Skill lesson plans appear later in this manual.

Components of the Course

Participant's Manual

CPR and AED, Seventh Edition, is a comprehensive guide to handling common injuries and illnesses. This participant's manual contains *Skill Sheets* that provide a concise summary of what signs to look for and what treatment steps to take when faced with an unresponsive person.

Instructor's Manual

In addition to providing instructors with easy-to-use tips for providing quality first aid instruction, the instructor's manual includes the following:

- Lesson plans for every topic
- Skill lesson plans for CPR, AED, and choking care skills
- An instructional strategies matrix table containing:
  - Instructional strategies on the top horizontal axis
  - Injury and sudden illness course topics on the left vertical axis

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The instructor can either insert a check mark or write the participant manual's page number in the cells to identify which strategies he or she will use for each of the listed topics.

- Final exams (*Note:* Although final exams are not a required part of the *CPR and AED* course, an employer or a regulatory agency [ie, local or state] may require participants to take and pass a written exam. For such cases, written exam questions are provided. For a participant with a reading or language difficulty, an oral exam may be given by the instructor.)

PowerPoint Presentations

The PowerPoint presentations for the *CPR and AED* course contain the following:

- *What to Do slides.* These slides are based on the *Skill Sheets* found in the participant manual. They provide the steps to take to care for an unresponsive person.
- *Photographs and illustrations.* Eye-catching photographs and illustrations appear throughout the PowerPoint presentations to help prepare participants for actual emergencies.
- *Scenario slides.* These slides can be used to introduce a new topic and help capture the participants' attention; they can also be used during a debriefing to help participants recall key points relating to the topic.
- *Agree/Disagree statement slides.* These slides can be used to conduct the Think-Pair-Share and Round Robin active-learning strategies.

Note: PowerPoint Presentations with embedded skills demonstration videos are also available.

Worksheets

Worksheets contain the Scenarios and Agree/Disagree statements found in the PowerPoint presentations as well as bonus scenarios that you may want to use for topics that students seem to struggle with the most. Instructors may choose to hand these worksheets out to participants to fill out and answer individually, such as during the Think segment of the Think-Pair-Share activity, or display them and simply discuss as a class.

Flowcharts

Flowcharts are included as separate PDF files that can be displayed during class or printed and shared with participants. Some of these flowcharts are also included in the student manual. The flowcharts show the essential steps of first aid in a logical, organized, and clear fashion. The charts' top-down flow is easy to follow and helps reduce the time needed to learn the details of a particular first aid procedure. The format of the flowcharts reinforces the decision-making process and appropriate procedures:

- The hexagon-shaped boxes include decision-point questions.
- The rectangular boxes include the steps to take to treat the injury or illness.

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Skill Videos

Videos devoted to showing proper CPR and first aid skills (eg, bandaging, splinting) support the course and minimize the need for lectures. All of the skills in **Table 2** have an associated video segment showing how to perform the skill. Some of the skills also have an associated Skill Sheet and/or Flowchart (as denoted). A list of equipment and supplies needed for the skills is found in the Skill Lesson Plans.

Table 2 Skill Videos

CPR, AED, and Choking Care
Placing a Person in the Recovery Position (Skill Sheet 2-1)
Adult and Child CPR (Skill Sheet 2-2, Flowchart 2-1)
Practicing Chest Compressions
Using an AED (Skill Sheet 4-1)
Adult or Child Choking Care (Skill Sheet 3-1)
Infant CPR (Skill Sheet 2-3, Flowchart 2-2)
Infant Choking Care (Skill Sheet 3-2)

Note: The Practicing Chest Compressions video segment in the CPR, AED, and Choking Care section provides opportunity to "practice while watching"; that is, participants perform the skill at the same time as it is shown in the video. The practice-while-watching method can present problems if the correct equipment is not available, if the equipment is broken or malfunctioning, if the instructor has difficulty using the equipment, or if the screen or monitor is difficult to view. Another potential problem may occur if participants bend their necks to look up at the screen. This is especially true when practicing on CPR manikins. Encourage participants to refrain from holding this position to avoid causing a neck problem or irritating an existing one.

Skill Sheets

Skill Sheets offer step-by-step explanations and visual summaries of important skills. This component can be used in conjunction with the skill videos or used separately as a reference for participants if the instructor chooses to lead the skill demonstration. Skill sheets are included in the student manual and are also provided in PDF format in your teaching package for display and discussion during class.

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Skill Check-off Sheets

The Skill Check-off Sheets are used to determine if a participant passes or needs more practice demonstrating a skill. For each step of a particular skill, the instructor should mark either the "Pass" column or the "Needs practice" column. Participants do not have to perform the skills perfectly, but they do need to be able to complete them reasonably well. These sheets help determine if a participant meets a passable proficiency level.

Course Evaluation Form

The Course Evaluation Form may be given to participants at the conclusion of the course.

Lesson Plans

Lesson Plan 1-1: Actions Before Helping

Objectives

Participants should be able to:

- Determine what to do before helping an unresponsive person.
- Prevent disease transmission when exposed to bodily fluids.

Instructional Strategies

Place a check mark next to the chosen strategy for this topic's instruction.

❏ **Lecture** (Chapter 1 PowerPoint presentation)
❏ **Troubleshoot a Scenario**
❏ **Think-Pair-Share**
❏ **Round Robin**
❏ **Tic-Tac-Toe game** (chalk- or whiteboard, or large paper pad)
❏ **20 Questions game**
❏ **Other strategy:** _____

Lesson Plan 1-2: Scene Size-up

Objectives

Participants should be able to:

- Determine what to do before helping.
- Conduct a scene size-up.

Instructional Strategies

Place a check mark next to the chosen strategy for this topic's instruction.

❏ **Lecture** (Chapter 1 PowerPoint presentation)
❏ **Troubleshoot a Scenario** (Scenarios, Flowchart 1-1)

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- ❑ **Think-Pair-Share** (Worksheet 1-1, or Scenarios and Agree/Disagree statement slides in the Chapter 1 PowerPoint presentation)
- ❑ **Round Robin** (Worksheet 1-1, or Scenarios and Agree/Disagree statement slides in the Chapter 1 PowerPoint presentation)
- ❑ **Tic-Tac-Toe game** (chalk- or whiteboard, or large paper pad)
- ❑ **20 Questions game**
- ❑ **Other strategy:** _____

Scenarios

Scenario 1: You are the first to arrive at a motor-vehicle crash scene involving two cars. One vehicle contains two people who appear to have minor injuries resulting from the seat belts. In the other vehicle, the driver appears to be motionless and unresponsive.

Scenario 2: You see your middle-aged neighbor shoveling snow off his driveway. When he is about halfway finished, he walks to the front steps of his house and sits down with a distressed look on his face. You walk over and ask if he is okay. He replies, "I think I pulled a muscle in my chest." You see that he is breathing rapidly and appears pale and anxious.

Agree/Disagree Statements

1. Emergency scenes can be unsafe. **Agree.**
2. Every time you approach an emergency scene, perform a scene size-up. **Agree.**
3. Most emergency scenes involve multiple people. **Disagree.**
4. Move bystanders aside; they are not helpful. **Disagree.**
5. While approaching a person, you should have a first impression of whether the person is injured or ill. **Agree.**
6. While approaching a person, you should have a good idea of whether the person is responsive or unresponsive. **Agree.**

Lesson Plan 1-3: Seeking Medical Help

Objectives

Participants should be able to:

- Describe how to call for medical help.

Instructional Strategies

Place a check mark next to the chosen strategy for this topic's instruction.

- ❑ **Lecture** (Chapter 1 PowerPoint presentation)
- ❑ **Troubleshoot a Scenario** (Scenarios)
- ❑ **Think-Pair-Share**
- ❑ **Round Robin**
- ❑ **Tic-Tac-Toe game** (chalk- or whiteboard, or large paper pad)

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❏ **20 Questions game**
❏ **Other strategy:** _____

Lesson Plan 1-4: Legal Aspects

Objectives

Participants should be able to:

- Describe the legal aspects of providing first aid, including laws that provide some protections for first aid providers.

Instructional Strategies

Place a check mark next to the chosen strategy for this topic's instruction.

❏ **Lecture** (Chapter 1 PowerPoint presentation)
❏ **Troubleshoot a Scenario**
❏ **Think-Pair-Share** (Agree/Disagree statement slides in the Chapter 1 PowerPoint presentation)
❏ **Round Robin** (Agree/Disagree statement slides in the Chapter 1 PowerPoint presentation)
❏ **Tic-Tac-Toe game** (chalk- or whiteboard, or large paper pad)
❏ **20 Questions game**
❏ **Other strategy:** _____

Agree/Disagree Statements

1. People designated as first aid providers by their employers must give first aid while on the job. **Agree.**
2. First aid providers can be sued. **Agree.**
3. Good Samaritan laws provide protection against lawsuits for those acting with good intentions and without compensation. **Agree.**

Lesson Plan 1-5: Disease Protection

Objectives

Participants should be able to:

- Take appropriate actions to prevent disease from blood and other body fluids.

Instructional Strategies

Place a check mark next to the chosen strategy for this topic's instruction.

❏ **Lecture** (Chapter 1 PowerPoint presentation)
❏ **Troubleshoot a Scenario**
❏ **Think-Pair-Share**

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- ❑ **Round Robin**
- ❑ **Tic-Tac-Toe game** (chalk- or whiteboard, or large paper pad)
- ❑ **20 Questions game**
- ❑ **Other strategy:** _____

Lesson Plan 2-1: Adult and Child CPR

Objectives

Participants should be able to:

- Describe the difference between a heart attack and cardiac arrest.
- Define CPR.
- Perform CPR using the RAB-CAB mnemonic.

Instructional Strategies

Place a check mark next to the chosen strategy for this topic's instruction.

- ❑ **Lecture** (Chapter 2 PowerPoint presentation)
- ❑ **Troubleshoot a Scenario** (Scenarios, Flowchart 2-1)
- ❑ **Think-Pair-Share** (Worksheet 2-1, or Scenarios and Agree/Disagree statement slides in the Chapter 2 PowerPoint presentation)
- ❑ **Round Robin** (Worksheet 2-1, or Scenarios and Agree/Disagree statement slides in the Chapter 2 PowerPoint presentation)
- ❑ **Tic-Tac-Toe game** (chalk- or whiteboard, or large paper pad)
- ❑ **20 Questions game**
- ❑ **Other strategy:** _____

Scenarios

Scenario 1: While walking your dog, you pass a house where an older man who was mowing his lawn has just collapsed. His panicked wife has not yet called 9-1-1 for help. The man is unresponsive and not breathing.

Scenario 2: As the designated first aid provider at your office, you receive a phone call urgently telling you about an employee who was found collapsed on the workroom floor. You run down the hallway to the workroom and find two employees looking at the person but doing nothing. They seem relieved to see you and move off to the side for you to get next to the person.

Number the Steps

_____ Call 9-1-1. **Step 2**

_____ Give 30 compressions at the same beat as the Bee Gee's song "Stayin' Alive." **Step 4**

_____ Open airway with head tilt–chin lift. **Step 5**

_____ Pinch the nose shut and give 2 breaths (1 second each). **Step 6**

_____ Check for no breathing or only gasping. **Step 3**

_____ Tap the person's shoulder and shout, "Are you okay?" **Step 1**

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Skill Instruction

See Skill Lesson Plan: Placing a Person in the Recovery Position; Skill Lesson Plan: Adult and Child CPR; Skill Lesson Plan: Using an AED; and Skill Sheet 2-2: Adult and Child CPR.

Lesson Plan 2-2: Infant CPR

Objectives

Participants should be able to:

- Perform CPR on an infant using the RAB-CAB mnemonic.

Instructional Strategies

Place a check mark next to the chosen strategy for this topic's instruction.

❏ **Lecture** (Chapter 2 PowerPoint presentation)
❏ **Troubleshoot a Scenario** (Scenarios, Flowchart 2-2)
❏ **Think-Pair-Share** (Worksheet 2-2, or Scenarios and Agree/Disagree statement slides in the Chapter 2 PowerPoint presentation)
❏ **Round Robin** (Worksheet 2-2, or Scenarios and Agree/Disagree statement slides in the Chapter 2 PowerPoint presentation)
❏ **Tic-Tac-Toe game** (chalk- or whiteboard, or large paper pad)
❏ **20 Questions game**
❏ **Other strategy:** _____

Scenarios

Scenario 1: A babysitter placed an infant in its crib to sleep. When its mother came home, the infant would not wake up or respond to the mother's shouting. The mother finds that the baby is not breathing.

Scenario 2: You accompany your child to the birthday party of one of their friends. You are talking with some of the other parents at the party while the children play in the backyard pool. Suddenly one of the older children shouts that Jack, an infant, is in the shallow end of the pool. His mother quickly pulls him to the side of the pool and finds that he is not breathing.

Number the Steps

_____ Call 9-1-1 after giving 5 cycles of CPR if not already done. **Step 2**
_____ Give 30 chest compressions (rate of 100 beats per minute). **Step 4**
_____ Continue giving cycles of 30 compressions and 2 breaths until the infant starts breathing or EMS takes over. **Step 7**
_____ Check for breathing. **Step 3**
_____ Open the airway. **Step 5**
_____ Cover the infant's mouth and nose with your mouth, and give 2 breaths, each lasting 1 second. **Step 6**
_____ Tap the infant's foot and shout his or her name. **Step 1**

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Skill Instruction
See Skill Lesson Plan: Infant CPR and Skill Sheet 2-3: Infant CPR.

Lesson Plan 3-1: Adult and Child Choking

Objectives
Participants should be able to:

- Recognize a person who is choking.
- Explain how to care for a person who is choking.

Instructional Strategies
Place a check mark next to the chosen strategy for this topic's instruction.

❏ **Lecture** (Chapter 3 PowerPoint presentation)
❏ **Troubleshoot a Scenario**
❏ **Think-Pair-Share**
❏ **Round Robin**
❏ **Tic-Tac-Toe game** (chalk- or whiteboard, or large paper pad)
❏ **20 Questions game**
❏ **Other strategy:** _____

Skill Instruction
See Skill Lesson Plan: Adult and Child Choking and Skill Sheet 3-1: Adult and Child Choking.

Lesson Plan 3-2: Infant Choking

Objectives
Participants should be able to:

- Recognize an infant who is choking.
- Explain how to care for an infant who is choking.

Instructional Strategies
Place a check mark next to the chosen strategy for this topic's instruction.

❏ **Lecture** (Chapter 3 PowerPoint presentation)
❏ **Troubleshoot a Scenario**
❏ **Think-Pair-Share**
❏ **Round Robin**
❏ **Tic-Tac-Toe game** (chalk- or whiteboard, or large paper pad)
❏ **20 Questions game**
❏ **Other strategy:** _____

Skill Instruction
See Skill Lesson Plan: Infant Choking and Skill Sheet 3-2: Infant Choking.

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Lesson Plan 4-1: Automated External Defibrillation

Objectives

Participants should be able to:

- Describe the common elements of an AED.
- Use an AED.

Instructional Strategies

Place a check mark next to the chosen strategy for this topic's instruction.

❏ **Lecture** (Chapter 4 PowerPoint presentation)
❏ **Troubleshoot a Scenario**
❏ **Think-Pair-Share**
❏ **Round Robin**
❏ **Tic-Tac-Toe game** (chalk- or whiteboard, or large paper pad)
❏ **20 Questions game**
❏ **Other strategy:** _____

Lesson Plan 5-1: CPR Performance Mistakes

Objectives

Participants should be able to:

- Identify rescue breathing mistakes made during CPR.
- Identify chest compression mistakes made during CPR.

Instructional Strategies

Place a check mark next to the chosen strategy for this topic's instruction.

❏ **Lecture** (Chapter 5 PowerPoint presentation)
❏ **Troubleshoot a Scenario**
❏ **Think-Pair-Share**
❏ **Round Robin**
❏ **Tic-Tac-Toe game** (chalk- or whiteboard, or large paper pad)
❏ **20 Questions game**
❏ **Other strategy:** _____

Lesson Plan 5-2: CPR Precautions

Objectives

Participants should be able to:

- Identify general precautions to take during CPR training.
- Identify disease precautions to take during CPR training.
- Identify disease precautions to take during actual CPR.

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Instructional Strategies

Place a check mark next to the chosen strategy for this topic's instruction.

- ❑ **Lecture** (Chapter 5 PowerPoint presentation)
- ❑ **Troubleshoot a Scenario**
- ❑ **Think-Pair-Share**
- ❑ **Round Robin**
- ❑ **Tic-Tac-Toe game** (chalk- or whiteboard, or large paper pad)
- ❑ **20 Questions game**
- ❑ **Other strategy:** _____

Lesson Plan 5-3: Special Resuscitation Situations

Objectives

Participants should be able to:

- Identify special resuscitation situations.
- Describe what to do during special resuscitation situations.

Instructional Strategies

Place a check mark next to the chosen strategy for this topic's instruction.

- ❑ **Lecture** (Chapter 5 PowerPoint presentation)
- ❑ **Troubleshoot a Scenario**
- ❑ **Think-Pair-Share**
- ❑ **Round Robin**
- ❑ **Tic-Tac-Toe game** (chalk- or whiteboard, or large paper pad)
- ❑ **20 Questions game**
- ❑ **Other strategy:** _____

Skill Lesson Plans

In most cases, the equipment and supplies cited for each Skill Lesson Plan identify what is needed for two participants. The amount needed to conduct a course depends upon the number of participants.

CPR, AED, and Choking Care Skills

Skill Lesson Plan: Placing a Person in the Recovery Position

1. Refer to Skill Sheet 2-1.
2. Tell participants about several key points to notice in the demonstration.
3. Show the skill by either: (check one)
   - ❑ Video segment
   - ❑ Instructor demonstration

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4. Practice the skill accompanied with feedback: (check one)
   ❏ Drill practice
   ❏ Paired or triad practice

Equipment and supplies needed for this skill include the following:

- Clean floor or blankets to lie on

Skill Lesson Plan: Adult and Child CPR

1. Refer to Skill Sheet 2-2.
2. Tell participants about several key points to notice in the demonstration.
3. Show the skill by either: (check one)
   ❏ Video segment
   ❏ Instructor demonstration
4. Practice the skill accompanied with feedback: (check one)
   ❏ Drill practice
   ❏ Paired or triad practice

Equipment and supplies needed for this skill include the following:

- Child manikin (Use an adult manikin if a child manikin is not available.)
- Adult manikin
- Manikin cleaning materials (Read the manufacturer's instruction about the manikin's care and cleaning.)

Skill Lesson Plan: Using an AED

1. Refer to Skill Sheet 4-1.
2. Tell participants about several key points to notice in the demonstration.
3. Show the skill by either: (check one)
   ❏ Video segment
   ❏ Instructor demonstration
4. Practice the skill accompanied with feedback: (check one)
   ❏ Drill practice
   ❏ Paired or triad practice

Equipment and supplies needed for this skill include the following:

- Adult manikin
- AED trainer (See the manufacturer's instruction manual on its use and necessary supplies.)

Skill Lesson Plan: Adult and Child Choking

1. Refer to Skill Sheet 3-1.
2. Tell participants about several key points to notice in the demonstration.

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3. Show the skill by either: (check one)
   ❏ Video segment
   ❏ Instructor demonstration
4. Practice the skill accompanied with feedback: (check one)
   ❏ Drill practice
   ❏ Paired or triad practice

Equipment and supplies needed for this skill include the following:

- Child manikin (Use an adult manikin if a child manikin is not available.)
- Adult manikin

Skill Lesson Plan: Infant CPR

1. Refer to Skill Sheet 2-3.
2. Tell participants about several key points to notice in the demonstration.
3. Show the skill by either: (check one)
   ❏ Video segment
   ❏ Instructor demonstration
4. Practice the skill accompanied with feedback: (check one)
   ❏ Drill practice
   ❏ Paired or triad practice

Equipment and supplies needed for this skill include the following:

- Infant manikin
- Manikin cleaning materials (Read the manufacturer's instruction about the manikin's care and cleaning.)

Skill Lesson Plan: Infant Choking

1. Refer to Skill Sheet 3-2.
2. Tell participants about several key points to notice in the demonstration.
3. Show the skill by either: (check one)
   ❏ Video segment
   ❏ Instructor demonstration
4. Practice the skill accompanied with feedback: (check one)
   ❏ Drill practice
   ❏ Paired or triad practice

Equipment and supplies needed for this skill include the following:

- Infant manikin

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Selecting Instructional Strategies

Table 3 lists all of the possible topics and instructional strategies for the course. Instructors can choose which strategies to use for each topic by placing a check mark or the participant manual's page number in each topic's cell matching the instructional strategy to be used for the topic. (Review the Instructional Strategies section for more information.)

Table 3 Instructional Strategy Selection

			Active Learning		Games		
Topics	**Lecture**	**Trouble-shoot a Scenario**	**Think-Pair-Share**	**Round Robin**	**Tic-Tac-Toe**	**20 Questions**	**Skill Instruction**
Before Helping, Take the Appropriate Actions							
Actions Before Helping							
Scene Size-up							
Seeking Medical Help							
Legal Aspects							
Disease Protection							
CPR							
Adult and Child CPR							Adult and Child CPR
Infant CPR							Infant CPR
Choking Care							
Adult and Child Choking Care							Adult and Child Choking Care
Infant Choking Care							Infant Choking Care
AED							
AED Use							Using an AED
CPR Precautions, Complications, and Special Situations							
CPR Performance Mistakes							
CPR Precautions							
Dangerous Complications							
Special Resuscitation Situations							

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Equipment and Supplies for Conducting the Course

_____ Equipment for showing the video skill segments
_____ Equipment for showing the PowerPoint presentations
_____ Manikin decontamination supplies (eg, 4- by 4-inch gauze pads, buckets, nonlatex disposable gloves, bleach solution)
_____ Adult manikins (1 for every 3 participants)
_____ Child manikins (optional—can use the adult manikins)
_____ Infant manikins (1 for every 3 participants)
_____ Extra manikin supplies (eg, lungs, faces)
_____ Blankets or mats for every adult manikin
_____ AED training device, pads, extra batteries
_____ ECSI course completion certification cards
_____ CPR barrier masks (1 for every participant)
_____ Nonlatex disposable gloves (1 pair for every participant)
_____ Extra pens and pencils
_____ Blank paper for participants to respond to the Agree/Disagree statements
_____ Copies of the final written exams (optional and if required by an employer or regulatory agency)

Final Exams

Written tests are not required to qualify for a course completion certificate. However, if an employer or a state or local agency requires a final exam, the instructor can select an appropriate one from the following exams. If a participant has a reading or language difficulty, the instructor can use a verbal exam.

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Adult and Child CPR Exam A

1. RAB stands for:
   a. Recognize, Action, Breathing.
   b. Responsiveness, Activate, Breathing.
   c. Repair, Accelerate, Bend.
   d. Recognize, Analyze, Bring.
2. Before approaching an unresponsive person:
   a. check for bleeding from the ears and nose.
   b. look for items to splint possible fractures.
   c. check the scene for hazards.
   d. begin rescue breaths immediately.
3. Determine unresponsiveness by:
   a. rolling the person onto his or her side (recovery position).
   b. splashing water on the person's face.
   c. tapping the person and shouting.
   d. tilting the head back.
4. The correct sequence for CPR is:
   a. open airway, rescue breaths, chest compressions.
   b. rescue breaths, chest compressions, open airway.
   c. chest compressions, open airway, rescue breaths.
   d. control bleeding, open airway, rescue breaths.
5. How many chest compressions should be given before rescue breaths?
   a. 5
   b. 10
   c. 20
   d. 30
6. How many rescue breaths should be given after chest compressions?
   a. 1
   b. 2
   c. 4
   d. 6
7. An unresponsive person should be placed in what position when CPR is needed?
   a. On the right side
   b. Facedown
   c. On a soft surface such as a bed
   d. Faceup on a firm, flat surface
8. What should be done after you have checked for scene safety and looked for clues as to what happened?
   a. Check if the person is responsive.
   b. Control the person's bleeding.
   c. Give two rescue breaths.
   d. Open the person's airway.

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9. Where should you place your hands when giving chest compressions?
   a. 2 inches below the breastbone
   b. On the stomach above the navel
   c. On the breastbone in the center of the chest
   d. On either side of the breastbone
10. "Push hard and fast" refers to which part of CPR?
   a. Rescue breaths
   b. Opening the airway
   c. Tapping on the shoulder
   d. Chest compressions
11. Continue CPR until:
   a. the person begins breathing, cries, or moves.
   b. an AED arrives and is used.
   c. you are replaced by a trained person.
   d. All of these options are correct.
12. A person is exhibiting the universal sign of choking if he or she:
   a. has pale or blue discoloration around the lips.
   b. is grasping the throat.
   c. is clutching the chest.
   d. is opening the mouth and pointing to it.
13. To care for an alert choking adult or child:
   a. wait until the person becomes unresponsive to provide care.
   b. open the airway and begin rescue breathing.
   c. give abdominal thrusts until the object is removed.
   d. begin chest compressions.
14. Which of the following is a sign of a stroke?
   a. Shoulder and jaw pain
   b. Paralysis of one side of the face (facial droop)
   c. Chest discomfort
   d. Upset stomach
15. The first check of an injured person is directed at:
   a. gathering past medical information about the person.
   b. identifying and treating immediate life-threatening conditions.
   c. determining the number of rescuers needed.
   d. determining how to contact a family member.

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Adult and Child CPR Exam B

1. CAB stands for:
   a. Chest, Airway, Bleeding.
   b. CPR, Activate, Breaths.
   c. Compressions, Airway, Breaths.
   d. Cardiopulmonary, Action, Bleeding.
2. To check responsiveness:
   a. tap the person and shout, "Are you okay?"
   b. pull the person's hair.
   c. pinch the person's finger.
   d. squeeze the person's hand.
3. To activate the EMS:
   a. call 1-800-222-1222.
   b. call 9-1-1.
   c. text your friend to call.
   d. look for a medical alert bracelet with a phone number.
4. How deep should chest compressions be for an adult?
   a. At least 1 inch
   b. At least 2 inches
   c. At least 4 inches
   d. At least 5 inches
5. For chest compressions, push straight down and allow the chest to come back to its normal position after each compression.
   a. True
   b. False
6. If an AED arrives during CPR:
   a. complete the chest compressions.
   b. complete the rescue breaths.
   c. open the airway.
   d. use the AED immediately.
7. What is one difference between adult and child CPR?
   a. You give 100 chest compressions to a child.
   b. You push harder and faster for a child.
   c. You may need to use only one hand for chest compressions for a child.
   d. There is no difference.
8. How fast should you give chest compressions?
   a. 60 per minute
   b. As fast as you can
   c. To the beat of the Bee Gees song "Stayin' Alive"
   d. 1 compression every 2 seconds

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9. How long should you check for breathing in an unresponsive person before giving chest compressions?
   a. 2 seconds
   b. 3 to 4 seconds
   c. 5 to 10 seconds
   d. at least 10 seconds
10. Continue CPR until you are replaced by a trained person or the scene becomes unsafe.
   a. True
   b. False
11. CPR is used for people:
   a. who are severely bleeding.
   b. whose heart has stopped beating.
   c. who have asthma.
   d. who have chronic obstructive lung disease.
12. You have determined that a person is unresponsive and have sent a bystander to call the EMS. What do you do next?
   a. Position the person facedown.
   b. Begin chest compressions.
   c. Open the airway.
   d. Check circulation.
13. Signs of choking that indicate a need to provide care include:
   a. severe headache.
   b. weak, ineffective cough.
   c. clutching the chest.
   d. coughing forcefully.
14. To care for an alert choking person:
   a. position the person on his or her back.
   b. begin rescue breathing.
   c. give abdominal thrusts.
   d. start CPR.
15. When performing CPR, place the person:
   a. with his or her head higher than his or her body.
   b. on a firm, flat surface.
   c. on his or her side.
   d. facedown.

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AED Exam A

1. Trained first aid providers should use an AED only if it is provided by emergency personnel.
   a. True
   b. False
2. First aid responders should:
   a. use an AED as soon as possible.
   b. place AED pads on top of the person's clothing.
   c. shave the chest of the person before placing pads.
   d. begin rescue breaths immediately after the AED has provided a shock.
3. If no shock is advised:
   a. turn the AED off and do not use it.
   b. check if the person is responsive.
   c. continue CPR with chest compressions.
   d. shock the person anyway.
4. If shock is advised:
   a. give two shocks in a row.
   b. while giving chest compressions, give one shock.
   c. wait for the AED to prompt you to give a shock again.
   d. do not touch the person. Give one shock when advised by the AED.
5. What do you do after shock is delivered to the person?
   a. Resume CPR starting with chest compressions.
   b. Resume CPR starting with rescue breaths.
   c. Resume CPR by opening the person's airway.
   d. Do not resume CPR.
6. If an AED is immediately available following an adult's collapse, you should:
   a. perform at least 2 minutes of CPR and then attach the electrodes.
   b. expose the person's chest and dry it off if needed.
   c. wait until additional rescuers arrive.
   d. apply the electrode pads, with one on the chest and the other on the back.
7. You are about to administer a shock with the AED when you notice someone touching the person. You should:
   a. deliver the shock.
   b. ask the person to step back away.
   c. turn off the AED.
   d. press the Analyze button.
8. A person is struck by lightning. The person is unresponsive and not breathing. You should:
   a. perform CPR until a defibrillator is available.
   b. perform only rescue breathing to avoid additional damage to the heart.
   c. never use a defibrillator on a person who has an electrical injury.
   d. care for any burns before applying an AED.

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9. A person who is successfully defibrillated:
   a. rarely goes back into cardiac arrest.
   b. often still requires CPR after successful defibrillation.
   c. will quickly regain consciousness.
   d. rarely requires advanced medical care.
10. Which of the following statements is true of an AED?
   a. It cannot be used on a person with an implanted pacemaker.
   b. It will deliver a shock to any electrical disturbance in the heart.
   c. It can accurately recognize ventricular fibrillation.
   d. It will always deliver a shock to a person in cardiac arrest.

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AED Exam B

1. EMTs are the only ones who should use an AED.
   a. True
   b. False
2. First aid providers should:
   a. wait to use the AED until five sets of compressions are complete.
   b. place AED pads on top of each other.
   c. shock the person even when the AED does not advise it.
   d. begin chest compressions immediately after the AED has provided a shock.
3. If no shock is advised:
   a. give five sets of chest compressions and rescue breaths; then evaluate by AED again.
   b. the person is responsive.
   c. do not give chest compressions.
   d. shock the person anyway.
4. If shock is advised:
   a. give two shocks in a row.
   b. while giving chest compressions, give one shock.
   c. wait for the AED to prompt you to give shock again.
   d. do not touch the person. Give one shock when advised by the AED.
5. What is the purpose of an AED?
   a. To start the person breathing again
   b. To defibrillate the heart
   c. To stop brain impulses to the body
   d. To open heart valves
6. Inspection of your AED should include:
   a. checking for internal damage.
   b. checking to see that three batteries are available.
   c. checking to see that all required supplies are present.
   d. cleaning internal circuitry.
7. It is always unsafe to deliver a shock if the person:
   a. is in a pool of water.
   b. is 10 years of age.
   c. has an implanted pacemaker.
   d. has had previous heart bypass surgery.
8. Prior to administering a shock, you should:
   a. turn off the AED and allow it to recharge.
   b. notify everyone to “stand clear!”
   c. press the Analyze button.
   d. confirm that EMS personnel have been summoned.

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9. What is ventricular tachycardia?
   a. A fast heart rhythm
   b. An absence of detectable pulse
   c. A very slow heart rhythm
   d. Chaotic, disorganized electrical activity
10. If an AED advises "No Shock Needed," you should:
   a. turn off the AED.
   b. attempt to analyze the heart rhythm again.
   c. begin CPR if the person is unresponsive and not breathing.
   d. remove the patches.

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Infant CPR Exam A

1. There is no difference between infant CPR and adult CPR.
   a. True
   b. False
2. How many fingers should be used for infant chest compressions?
   a. 1
   b. 2
   c. 5
   d. Use a thumb.
3. For infant CPR, chest compression depth should be:
   a. 1 inch.
   b. 1.5 inches.
   c. 3 inches.
   d. 5 inches.
4. How many chest compressions should be given before rescue breaths?
   a. 5
   b. 10
   c. 20
   d. 30
5. How should infant rescue breaths be given?
   a. Pinch the nose of the infant and cover your mouth over the infant's mouth.
   b. Cover the infant's nose and mouth with your mouth.
   c. Cover only the infant's nose with your mouth.
   d. Do not give rescue breaths to infants.
6. If an infant is unresponsive but breathing:
   a. begin chest compressions.
   b. start rescue breathing.
   c. give abdominal thrusts or back blows/chest thrusts.
   d. roll the infant onto his or her side (recovery position).
7. You are alone with an infant and determine that she is unresponsive. What do you do next?
   a. Call 9-1-1 immediately.
   b. Open the airway.
   c. Check for breathing.
   d. Begin chest compressions.
8. How should you open the airway for an infant?
   a. Head tilt–chin lift
   b. Neck lift
   c. Jaw thrust
   d. Chin lift

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9. Before beginning CPR on an infant:
   a. locate a parent or legal guardian to gain consent.
   b. check carefully for any injury to the chest.
   c. determine that the infant is not breathing.
   d. position the infant with the head higher than his or her chest.
10. You should provide care for choking if the infant is:
   a. coughing forcefully.
   b. crying.
   c. unable to cry.
   d. struggling to move.

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Infant CPR Exam B

1. CAB stands for:
   a. Compressions, Airway, Breaths.
   b. Child, Action, Bystander.
   c. Child, Activate, Bleeding.
   d. Cardiac, Airway, Breaths.
2. Where should you place your fingers for infant chest compressions?
   a. Two fingers just below the nipple line
   b. Both thumbs on the stomach
   c. Two fingers on the stomach
   d. One hand on the breastbone
3. For infant CPR, the depth of chest compressions is the same as for adults.
   a. True
   b. False
4. How many chest compressions should be given before rescue breaths?
   a. 5
   b. 10
   c. 20
   d. 30
5. Cover the infant's nose and mouth with your mouth, making an airtight seal.
   a. True
   b. False
6. CPR is used for infants who:
   a. are bleeding.
   b. are experiencing a seizure.
   c. are not breathing.
   d. have a spinal injury.
7. You should continue CPR until:
   a. EMS personnel arrive.
   b. you think the infant will not survive.
   c. you hear a bystander say that the infant is dead.
   d. you think the infant may have permanent brain damage.
8. Signs of choking include:
   a. severe headache.
   b. weak, ineffective cough.
   c. clutching the chest.
   d. coughing forcefully.

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9. When performing CPR, place an infant:
   a. with his or her head higher than his or her body.
   b. on a firm, flat surface.
   c. on his or her side.
   d. facedown.
10. When responding to an infant who is not breathing, the first thing to do is:
   a. gather past medical information about the infant.
   b. determine the cause of the injury or sudden illness.
   c. determine the number of rescuers needed.
   d. correct immediate life-threatening conditions found.

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Exam Answers

Adult and Child CPR Exam A: 1. b; 2. c; 3. c; 4. c; 5. d; 6. b; 7. d; 8. a; 9. c; 10. d; 11. d; 12. b; 13. c; 14. b; 15. b

Adult and Child CPR Exam B: 1. a; 2. a; 3. b; 4. b; 5. a; 6. d; 7. c; 8. c; 9. c; 10. a; 11. b; 12. b; 13. b; 14. c; 15. b

AED Exam A: 1. b; 2. a; 3. c; 4. d; 5. a; 6. b; 7. b; 8. a; 9. b; 10. c

AED Exam B: 1. b; 2. d; 3. a; 4. d; 5. b; 6. c; 7. a; 8. b; 9. a; 10. c

Infant CPR Exam A: 1. b; 2. b; 3. b; 4. d; 5. b; 6. d; 7. c; 8. a; 9. c; 10. c

Infant CPR Exam B: 1. a; 2. a; 3. b; 4. d; 5. a; 6. c; 7. a; 8. b; 9. b; 10. d

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Appendices

Course Introduction

Use the first 5 to 7 minutes of the course to briefly introduce yourself and to welcome the participants to the course. Use the following guidelines for the course introduction:

1. Consider using one of the getting acquainted activities found in the following section to help participants warm up to each other.
2. Provide a brief overview of the course, including:
   - Length of course (total number of hours; class schedule)
   - Break schedule
   - General content to be covered
   - Course completion requirements
     Note: To successfully complete the course and qualify for a completion certification, a participant must (1) attend all class sessions, (2) demonstrate skill competencies, and (3) participate in all course activities. No final written exam is required unless an employer or regulatory agency requires it. If required, a written exam will be given at the end of the course; otherwise, no exams other than the Skill Check-off Sheets will be given.
3. Ask the participants not to eat or drink in class.
4. Point out the locations of fire exits, restrooms, and drinking fountains.
5. Instruct participants to consider the following health precautions:
   - Wash hands before and after class.
   - Remove jewelry, lipstick, chewing gum, etc. Place jewelry and other valuables in a safe place, such as a deep pocket or purse.
   - Remove pencils and pens from pockets when practicing skills.
   - Participants with long hair may need to pull back their hair to keep it from falling over their face or into their mouth while practicing CPR.
   - Participants should notify the instructor if allergic to latex.
   - Participants should notify the instructor of any medical concern or disability. For example, a participant with a back problem or knee injury may be unable to kneel next to a manikin; a participant with a heart or respiratory condition may need to abstain from giving chest compressions, which can require a great deal of exertion.
   - Participants should see the instructor about postponing training or having a separate manikin in the event of any of the following:
     - Participant has a respiratory infection (eg, cold or sore throat).
     - Participant has been recently exposed to an infection or is showing signs and symptoms of any infectious disease (eg, cold, chickenpox, mumps, fever).
     - Participant has cuts or sores on the hands or in or around the mouth (eg, cold sores, tooth extractions).
     - Participant has tested positive for hepatitis B.

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- During training, participants should protect themselves and other students from infection by doing the following:
  - Wash hands before working with a manikin or performing another skill.
  - Do not eat, drink, chew gum, use smokeless tobacco products, or smoke before or during manikin use.
  - Before using the manikin, vigorously wipe the manikin's face and inside of its mouth with a clean gauze pad soaked with either a solution of liquid chlorine bleach and water or rubbing alcohol. Place the wet pad over the manikin's mouth and nose and wait at least 30 seconds before wiping the face dry with a clean gauze pad.
- Participants should NOT make mouth-to-mouth contact, give actual rescue breaths, or perform abdominal or chest thrusts or chest compressions on another person—ONLY on a manikin.
- Inform participants of the location of the first aid kit, AED, and fire extinguisher.
- During skill practice, participants should not "horse around" or engage in inappropriate behavior.

Getting Acquainted Activities

Consider using one of the following activities to warm the class up and help participants meet each other. If the participants already know each other, you may choose not to use any of these activities; however, getting to know each individual participant will prove useful to you and the other class members.

Paired Information

Pair off participants and instruct them to learn each other's names and one unique bit of personal information (eg, hobby, favorite movie, last vacation trip, favorite food) about their partner. Reassemble the class and have the participants introduce their partners to the rest of the group.

Find Someone Who . . .

Print off the worksheet titled "Finding Someone Who . . ." for each participant. Instruct participants to circulate and mingle with other classmates to locate a person who matches the description of each question found on the worksheet. When a match is found, the participant should write the person's first name next to the question. A person's name can be used twice if he or she matches more than one of the questions. For small classes, using the same person's name three times might be a good idea.

If time allows, reconvene the class and have a participant identify who he or she found for the first question. Then, the identified person cites who was found for the second question. Continue this process until reaching the last question.

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FIND SOMEONE WHO . . .

Directions: Find a person who fits one of the following descriptions. Place his or her first name in the space provided. Continue until all lines are filled in or time runs out. You can use the same person twice or more for small class sizes.

Find a person who has . . .	**First name**
1. A first aid kit in his or her car	_____
2. Given first aid to a severely injured person	_____
3. Taken a first aid class	_____
4. Been burned	_____
5. Given first aid within the last two weeks	_____
6. Taken an EMT course	_____
7. A desire to take an EMT course	_____
8. Received first aid for a severe injury	_____
9. Been in a disaster (eg, tornado, flood)	_____
10. Never been in a motor-vehicle crash	_____
11. Broken a bone	_____

Name Game

Form a circle with the participants. Instruct the person to your right to begin by stating his or her name and giving one personal detail, such as a hobby. Then the person on the right of the first participant says his or her name, gives a personal detail, and recites the previous participant's name and personal detail. The next person says his or her name, gives a personal detail, and recites the previous two participants' names and personal details. This process continues until you (the last member of the circle) have to repeat everyone's name. Participants should help out if a person gets stuck.

Summary of OSHA's Workplace First Aid Requirements

Employers are required by the Occupational Safety and Health Administration (OSHA) standard 29 CFR 1910.151 to have a person or people adequately trained to render first aid for worksites that are not in near proximity to an infirmary, clinic, or hospital.

It is advised that the first aid program for a particular workplace be designed to reflect the known and anticipated risks of the specific work environment. Instructors should consider consulting with local emergency medical experts and providers of first aid training when developing a first aid program.

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The program must comply with all applicable OSHA standards and regulations. OSHA requires certain employers to have CPR-trained rescuers on site.

Sudden cardiac arrest is a potential risk at all worksites, regardless of the type of work. Serious consideration should be given to establishing a workplace AED program.

First aid supplies must be available in adequate quantities and be readily accessible.

First aid training courses should include instruction in general and workplace hazard-specific knowledge and skills. CPR training should incorporate AED training if an AED is available at the worksite. First aid training should be repeated periodically to maintain and update knowledge and skills.

Management commitment and worker involvement are vital in developing, implementing, and assessing a workplace first aid program.

Reference

Occupational Safety and Health Administration. *Best Practice Guide: Fundamentals of a Workplace First-Aid Program*. https://www.osha.gov/Publications/OSHA3317first-aid.pdf.

How Good Are Video-Driven Courses?

Several first aid training programs allow videos to drive and dominate the course through an approach unaffectionately known as "information dumping." Unfortunately, there is not much evidence demonstrating the effectiveness of visual-based instruction upon the learning outcomes of participants. An extensive review of 74 studies of visual-based instruction found that, in comparison to conventional teaching strategies (such as lecturing), participants' achievement increased only slightly when visual-based techniques were used.

Many visual-based videos have a "talking head," which is essentially the same as a lecture. Therefore, showing a video does not actively involve participants any more than having them listen to a lecture. According to Stolovitch and Keeps, "Studies on the impact of media on learning over the past 50 years generally end up with the same conclusions: All other things being equal, media is not the key variable in learning effectiveness." Instead, videos should be used in conjunction with other active learning strategies to prevent participant boredom and focus upon skill development.

References

Bonwell CC, Eison JA. *Active Learning: Creating Excitement in the Classroom*. ASHE-ERIC Higher Education Report No. 1. Washington DC: The George Washington University; 1991.

Stolovitch HD, Keeps EJ. *Telling Ain't Training*. 2nd ed. Danvers, MA: ASTD Press; 2011.

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