CHOKING

Follow these steps for adults and children over 8 years of age who have an obstructed airway.

Use common sense with any serious injury. Call 911 (or other emergency number) for assistance right away. Know the type of injury and the exact location of the victim. Avoid moving the victim whenever possible; bring help to him/her instead. Know where AEDs and first aid kits are kept. This information does not take the place of CPR (Cardiopulmonary Resuscitation) training. For emergency first aid and CPR training, contact your Human Resources Department, local Red Cross or American Heart Association.

1 Determine if the victim is choking:
Choking is recognizable when the victim CANNOT breathe, cough or talk – no air is moving through the person's throat. Ask, "Are you choking?" If the victim can breathe, cough or speak, stand by, but do not interfere.

2 If the victim is NOT talking, coughing or breathing:
Stand behind the victim and wrap your arms around the person's waist above the navel. Make a fist, with thumb side against the stomach (above the waist and well below the breastbone), and grasp your fist with your other hand.

3 Pull your fist toward the victim's stomach:
Use quick upward and inward thrusts. Repeat as necessary, until the obstruction is cleared or the victim becomes unconscious. If this should happen, call 911 immediately.

4 If the victim becomes unconscious:
Carefully lay the victim on his or her back, protecting the head and neck. Open the airway by placing one hand on the victim's forehead and the other hand under the chin and gently tilt the head back (head tilt-chin lift). Keep the mouth open. Check for obstruction in the airway. If you see an obstruction, reach in and take it out. If you don't see anything, immediately attempt chest compressions.

5 Begin chest compressions:
Locate the middle of the breastbone by drawing an imaginary line between the nipples. Place the heel of one hand just below that line and then place the heel of the second hand on top of the first so the hands are overlapped. Straighten your arms, lock elbows and lean over so your shoulders are in line above your hands. Using the heels of both hands, firmly push straight down approximately 2 inches but no more than 2.4 inches on the chest. Release pressure completely between pushes, keeping your hands on the victim's chest at all times. Allow the chest to return to its normal position completely after each compression. Avoid leaning on the chest between compressions. Count the number of compressions by saying "one and two and three …" Push hard and push fast (rate of 100 to 120 compressions a minute).

6 After 30 compressions – open the airway and begin rescue breathing:
Open the airway by placing one hand on the victim's forehead and the other hand under the victim's chin and gently tilt the victim's head back (head tilt-chin lift method). Maintaining the open airway, gently pinch the victim's nose shut and cover the mouth with yours, creating an airtight seal, or use a mouth guard as shown. Give the victim two full, slow rescue breaths. Each rescue breath should be delivered in one second and should cause the chest to rise. Make sure you take a regular (not a deep) breath between each rescue breath. This prevents you from getting dizzy or lightheaded. Watch the victim's chest. If it does not clearly rise and fall after the first rescue breath, perform the head tilt-chin lift again before giving the second rescue breath.

7 After delivery of two rescue breaths:
Repeat the combination of 30 chest compressions and two rescue breaths, remembering to release all pressure between pushes and to watch the chest rise and fall during breaths. You should continue this combination of compressions/breaths until an AED arrives, the victim begins to move or EMS personnel take over care of the victim.

EMERGENCY INFORMATION:

Ambulance: __________________________ Phone: __________________________
Local Emergency Phone #: __________________________
CPR Kit Location: __________________________ Phone: __________________________

CPR VOLUNTEERS:

Name: __________________________ Phone: __________________________
Name: __________________________ Phone: __________________________
Name: __________________________ Phone: __________________________