

# [Red cross lifeguarding test](https://assignbuster.com/red-cross-lifeguarding-test/)

CPR Should be performed on a victim who is... In Cardiac Arrest. An unconscious victim with an obstructed airway has similar steps but the process is not called CPRC. A. B. What does it stand for and when is it used? Circulation, Airway, Breathing.
Chest compressions (30). Airway (open). Breaths (2)
Used for CPR ONRED CROSS LIFEGUARDING TEST SPECIFICALLY FOR YOUFOR ONLY$13. 90/PAGEOrder NowRate of chest compressions during CPR? 100 BPM (Roughly the tempo of the song " Staying Alive" by the BeeGees. Ironically, it is also the tempo of " Another One Bites The Dust" by Queen. You are performing CPR when a second lifeguard arrives. What is most appropriate for the second lifeguard to do first? Check to see whether EMS personell have been called. After an AED says " No Shock Advised," it is best to... Perform CPR for about 2 minutes. Adult chest compressions, how do you position your hands? Heel of one hand on the center of the chest with the other hand on top. As the only lifeguard performing CPR on an 7-year old, you would perform cycles of... 30 chest compressions and 2 ventilations. The cycle of chest compressions and ventilations in two-rescuer CPR for an infant is... 15 chest compressions and 2 ventilations. Hand placement for CPR for an:
Adult, Child, InfantAdult and child: Heel of one hand in center of chest (on lower half of sternum) with the other hand on top
Infant: 2-3 fingers on center of chest (just below nipple line)Process of using AEDTurn on machine. Apply the pads. Plug into machine. Follow instructions. CPR should continue during the setup. Child is choking (conscious). After activating EAP and getting consent from the parents, what should you do next? What about someone unconscious? Stand or kneel behind the victim and give 5 back blows and 5 abdominal thrusts.
For unconscious do CPR. Depth of chest compression for CPR for an:
Adult, Child, InfantAdult and child: 2 inches
Infant: 1. 5 inchesTo ensure effective chest compressions during CPR, what should be noted? The chest is able to fully recoil between compressions. You are performing CPR on a victim when you notice the chest begins to rise and fall. What do you do first? Stop CPR and reassess the victim's breathing and pulse. If the breathing is not regular, continue CPR as though no breathing were present. When giving a primary ventilation to an adult who is unconscious and not breathing, you notice the chest is not rising. What should you do next? Re-tilt the head and attempt another ventilation. You are giving ventilations through a resuscitation mask, and the victim vomits. What should you do? Turn the victim as a unit onto his or her side. H. A. IN. E. S. Time it takes to administer a rescue breath? 1 secondAdult is unconscious with a pulse but is not breathing, what rate should you perform rescue breathing at? Child? Infant? 1 ventilation every 5 seconds for adults. 1 every 3 seconds for children and infants. You pull an adult from the water. After a primary assessment, you conclude the victim has a pulse but is breathing irregularly. What should you do first? Give 2 initial ventilations. To clear airway of any water. A victim is having a seizure in the water. What should you do? Support the victim with his or her head above water until the seizure ends. How can you protect yourself from possible bloodborne pathogens when treating a victim? Use Personal Protective Equipment (PPE) such as disposable gloves and a breathing barrier. What is the universal sign that a person is choking? Clutching the throat. Steps of the Chain of Survival? 1. Immediate recognition of cardiac arrest and activation of the emergency response system
2. Early cardiopulmonary resuscitation (CPR) with an emphasis on chest compressions
3. Rapid defibrillation
4. Effective advanced life support
5. Integrated post-cardiac arrest careYou must keep checking a victim's LOC in a secondary assessment. What does LOC stand for? Level of ConsciousnessWhen providing care to a conscious infant who is choking, what part of the hand would you use to give chest thrusts? Two or Three fingers. When immobilizing an injured patron's arm... Leave the arm in the position you find it or in the position the victim is holding it. A boy clutches at his chest and has problems breathing. After obtaining consent for care, his mom informs you that he has asthma, but he does not have his inhaler nearby. What care should you provide? Call EMS and place the victim in a position that helps breathing. A patron cuts her leg on the bleachers and is bleeding severely. You can tell she may be in shock because she may... Becomes restless and irritableWhat should you do when first approaching the scene of an emergency? Size up the scene, make sure it is safe for you to interact. You are providing care for a victim having a heart attack. What should you do first? Summon EMS Personell. When preparing to place AED pads you see:
medicine patch, piercings, pregnant, chest hair, body too small for pads so risk of pads touching.
What should you do in each situation? Remove patch using gloved hand. Work around the piercings. Avoid placing pad over baby bump. Shave chest hair. Place pads on the chest and on the back. A victim has slurred speech, cannot lift their right arm level with the left, is unable to smile and half her face is drooping. What would you assume has happened? A stroke. A victim appears to be having a diabetic emergency. What should you do? Give them something sweet to drinkH. A. IN. E. S. What does it stand for and when is it used? High Arm IN Endangered Spine. It is used when a victim with a possible spinal injury begins to throw up. F. A. S. T. What does it stand for and what is it used to ID? Facial drooping, Arm weakness, Speech difficulties, Time.
Used to ID StrokeR. I. C. E. What does it stand for and when is it used? Rest. Immobilize. Cold. Elevate.
Used for musculoskeletal injuries (broken bones, sprained joint)S. A. M. P. L. E. What does it stand for and when is it used? Signs and Symptoms. Allergies. Medication. Past medical history. Last oral intake (food, meds, drinks, last thing person ingested), Events leading up to incident.
Used for patient assessment. How to do head and chin support? One hand on chin and arm on chest, other hand on back of head and arm under back. squeezing forearms together to secure victim. How to do in-line stabilization? Put the victims arms straight up above the head and squeeze together around the bicepsSteps for deep water submerged victim. 1. EAP
2. " Submerged victim, call EMS, get backboard"
3. Compact or stride entry
4. release tube
5. grasp with one arm, use other to pull yourself up using strap
6. put tube between, swim backwards to landSteps for Active victim1. EAP
2. " Active victim on the surface"
3. Compact or stride entry
4. (forward facing victim) Push tube to victim with both arms, turn around, push forward to land.
4. (rear facing victim) Grasp under armpits and over, swim backwards to land. Steps for Passive Victim1. EAP
2. " Passive victim, call EMS, get backboard"
3. Compact or stride entry
4. (face down) place tube between, grab under armpits and over, roll under victim getting face out of water, swim backwards to land.
4. (face up) go under, place tube between, grab under armpits and over, swim backwards to land
5. secondary holds hands in a crossed position (victim facing forward) and primary gets out
6. put backboard in and flip victim on and remove from waterSteps for Deep Water Submerged Spinal1. EAP
2. " Possible spinal, submerged victim, call EMS, need secondary, get backboard."
3. Slide in entry
4. Release and completely remove rescue tube
5. Put victim into " in-line stabilization"
6. Secondary place tube under primary's arms
7. Backboard placed under victim, tubes placed near the legs and head
8. Change from in-line stabilization to head and chin support (under the backboard)
9. Primary comes to the head and stabilizes victim with two hands on sides of head
10. Secondary and Tertiary strap victim down (under arms, over arms, over legs)
11. put in head immobilizers
12. place backboard on edge.
13. primary out, secondary out (only if there are 3 LGs) and pull victim out
(Communication is key!!)
(Everyone should have a tube under them)Steps for shallow water spinal1. EAP
2. " Possible spinal, victim on surface, call EMS, need secondary and backboard."
3. slide in entry
4. (face down) in-line stabilization or " head and chin" support, turn onto arm WHILE moving forward.
4. (face up) in-line stabilization
5. Backboard placed under victim, tubes placed near the legs and head
6. Change from in-line stabilization to head and chin support (under the backboard)
7. Primary comes to the head and stabilizes victim with two hands on sides of head
8. Secondary and Tertiary strap victim down (under arms, over arms, over legs)
9. put in head immobilizers
10. place backboard on edge.
11. primary out, secondary out (only if there are 3 LGs) and pull victim out
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