

Chest-Compression-Only



If someone unexpectedly collapses follow these 3 steps



1. CHECK

Check for responsiveness: Shake the person and shout, "Are you all right?" Rub the breast bone with your knuckles. If no response . . .

2. CALL

Call 911 or direct someone to make the call if the person is unresponsive and struggling to breathe, gasping, snoring or not breathing at all.

3. COMPRESS

Position patient on the floor face up. Place the heel of the hand on the center of the chest and the heel of the other hand on top of the first. Lock your elbows, move your shoulders over the center of the chest, and use the weight of your upper body to "fall" straight downward, compressing the chest at least two inches deep. Lift your hand slightly each time to allow chest wall to recoil. Compress chest at a rate of at least 100 per minute. When you tire, take turns with others until paramedics arrive.

If an Automated External Defibrillator (AED) is available, turn it on and follow the AED's voice instructions. Otherwise, continue chest compressions until paramedics arrive.

Important: Do chest compressions even if the patient gasps. Noisy breathing or gasping is not a sign of recovery. It is a sign you are doing a good job. A patient in cardiac arrest may vomit and rarely will have a seizure.

Note: For unresponsiveness in young children (age 8 or under) and respiratory arrest caused by drowning or drug overdose, follow conventional CPR (30 compressions followed by two mouth-to-mouth ventilations). However, even in those cases, Chest-Compression-Only CPR is better than doing nothing. To learn conventional CPR, a formal training class is recommended.

For more resources, including training videos and information on how to support our programs, visit heart.arizona.edu or azshare.gov.

