

Compression-Only CPR American Red Cross Position

April 25, 2008

Recently, Compression-Only CPR (giving continuous chest compressions) has received attention by media. Per the 2005 *International Consensus on CPR and ECC Science with Treatment Recommendations*, the Red Cross recognizes that, in some cases, Compression-Only CPR is the best technique for a non-certified, lay responder (untrained bystander) who witnesses the sudden collapse of an adult.

Based on scientific evidence and the likelihood of untrained bystanders witnessing an adult cardiac arrest, the American Red Cross Advisory Council on First Aid, Aquatics, Safety and Preparedness developed their Advisory Statement on Compression-Only CPR in May, 2007.

Per the advisory statement, the Red Cross recognizes that Compression-Only CPR is an acceptable alternative for those who are *unwilling, unable, untrained* or are no longer able to perform full CPR (cycles of chest compressions and rescue breaths) and, in some cases, the preferred method *for untrained bystanders* who witness an adult suddenly collapse.

The Red Cross uses the term “Compression-Only CPR” while the American Heart Association (AHA) uses “Hands-Only CPR.” The technique is the same – performing continuous chest compressions (at the rate of 100 compressions per minute) without rescue breathing.

To Review

- Based on scientific evidence, the American Red Cross supports Compression-Only CPR (continuous chest compressions) as an acceptable alternative when:
 - A responder is unwilling, unable, untrained or unsure how to perform full CPR (cycles of chest compressions and rescue breaths).
 - An untrained bystander has witnessed the sudden collapse on an adult.
- Both Red Cross and AHA hope that Compression-Only CPR will save lives by encouraging untrained bystanders who witness the sudden collapse of an adult to get involved and have someone call 9-1-1 or the local emergency number and then start performing chest compressions until help arrives or the adult shows obvious signs of life (breathing and movement).
- If a bystander is unwilling, unable, untrained or is no longer able to perform full CPR (cycles of chest compressions and rescue breaths), calling 9-1-1 or the local emergency number and then performing continuous chest compressions (which circulate blood containing oxygen) until professional help arrives may benefit anyone (adult, child or infant) in cardiac arrest.
- An automated external defibrillator (AED) should be used as soon as it becomes available – regardless of whether or not the sudden collapse was witnessed. The device will not cause additional harm to the victim and will not defibrillate unless a shockable rhythm is detected.
- Full CPR (cycles of 30 chest compressions and 2 rescue breaths) is still important to learn. It is critical to know what to do during an emergency. Red Cross first aid, CPR and AED training can give people the skills and the confidence to act in an emergency.
- In addition to learning how to recognize cardiac emergencies and how to perform CPR, Red Cross CPR course participants learn what to do if someone is choking or having a breathing emergency, how to care for shock and more.
- The following individuals will still need to take training which includes full CPR (cycles of chest compressions and rescue breaths).
 - Those who take CPR training for certification to meet State and Federal requirements;
 - Lay responders in workplaces who have a duty to respond;
 - Those responsible for infants and children;
- Compression-Only CPR does not affect professional rescuer CPR/AED training programs or protocols.
- Compression-Only CPR does not affect the curricula or skills in current Red Cross lay responder or professional rescuer level courses.

Red Cross CPR can help save lives. If you are interested in taking a course, visit

<http://njredcross.org/courses/courseDescriptions.asp>