

# Responding to Pediatric Emergencies

Infant and Child CPR and Safety

**Pediatric CPR and Safety Awareness Training**

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# Online Resources:

[www.WellSourceDevelopment.net/infantsafety](http://www.WellSourceDevelopment.net/infantsafety)

Emergencies can happen to  
anyone – at any time or place.

*Will you know how to respond?*

# Recognizing Emergencies

- Before you can effectively respond in an emergency situation, you first have to be able to ***recognize an emergency***
- Emergencies are often signaled by something out of the ordinary that catches your attention

# Recognizing Emergencies

- Sights
- Sounds
- Odors
- Behaviors



# Basic Action Steps:

- Assess
- Alert
- Attend

**(Check things out, call for help, provide care)**

# Basic Emergency Action Steps

- **Assess**

- **First, assess the situation.** What happened? How many people need help? Is it safe for you to approach?
- **Next, assess the condition of the child.** Is s/he conscious? Breathing normally? Bleeding? Etc.

- **Alert**

- Call 911

- **Attend**

- Provide interim care for the child until help arrives
- First aid / care you provide depends on the condition of the child

# Calling 911

- Be prepared to give the following information to the EMS dispatcher:
  - Location/address of where you are calling from
  - Location/address of emergency (if different than above)
  - Telephone number
  - Your name
  - What happened?
  - How many people are involved?
  - What is the condition of the child?
  - What care is being provided?
- ***Do not hang up first!*** Let the EMS dispatcher tell you when it's okay to release the call.





# Emergency Medical Care Needed

- Severe bleeding, burns, bone fractures
- Fever of  $>100.4$  in a child younger than 3 months old
- First time seizure
- Any of the following conditions after a head injury: decrease in level of alertness, confusion, headache, vomiting, irritability, difficulty walking
- Loss in consciousness, unresponsive
- Severe abdominal pain

# Emergency Medical Care Needed

- Swallowed object with difficulty breathing or swallowing
- Difficulty breathing or bluish tinge to lips, skin, fingertips, or nail beds
- Vomiting or coughing up blood
- Severe neck stiffness or rash along with a fever
- Poisonings
- **Call 911 any time it crosses your mind**

# When to Call the Pediatrician for Non-Emergencies

- Minor injuries – soft tissue, muscle, bone, or joints
- Sore throat, earache, mild headache
- Pink eye
- Mild congestion, respiratory illness
- Changes in skin color or appearance
- A fever that rises to 104 degrees for any child
- **Any symptom that you question**

# Lay Rescuers and the Law

- Good Samaritan Laws require lay rescuers to
  - Act in good faith
  - Not be deliberately negligent or reckless
  - Provide care within the scope of training
  - Not abandon the person after starting to provide care
- Obtaining Consent
  - A conscious adult has the right to accept or refuse care
  - To help another child, obtain consent from parent or guardian present
  - Consent is implied for children who are alone

# Breathing Emergencies

- Causes: Illness, chronic conditions, cardiac emergencies, injury, allergic reaction, drugs, poisoning, emotional distress, **airway obstruction**
- Recognizing breathing emergencies
  - Rapid or slow breathing, unusually deep or shallow
  - Gaspings, wheezing, gurgling, high-pitched sounds
  - Change in skin color or appearance
  - Child feels dizzy, light-headed, short of breath
  - Child is signaling universal gesture for “I’m choking!”

# Rescue Technique for Conscious Choking: Children and Adults

- Use this technique only if the person cannot forcefully cough, speak, or breathe
- Place the thumb side of your fist on the stomach just above the belly button and provide **abdominal thrusts** (the “**Heimlich Maneuver**”)
- Repeat inward and upward thrusts until something happens!
  - Object is dislodged from the airway
  - Person can cough, speak, or breathe again
  - Person goes unconscious



# Rescue Technique for Conscious Choking: Infants

- Use this technique only if the infant cannot forcefully cough, cry, or breathe normally
- Provide **alternating back blows and chest compressions – five (5) of each**. Use the heel of the hand to strike the back between the shoulder blades, and a couple of fingers to push on the breast bone in the center of the chest.
- Repeat back blows and chest compressions until something happens!
  - Object is dislodged from the airway
  - Infant can cough, cry, or breathe again
  - Infant goes unconscious

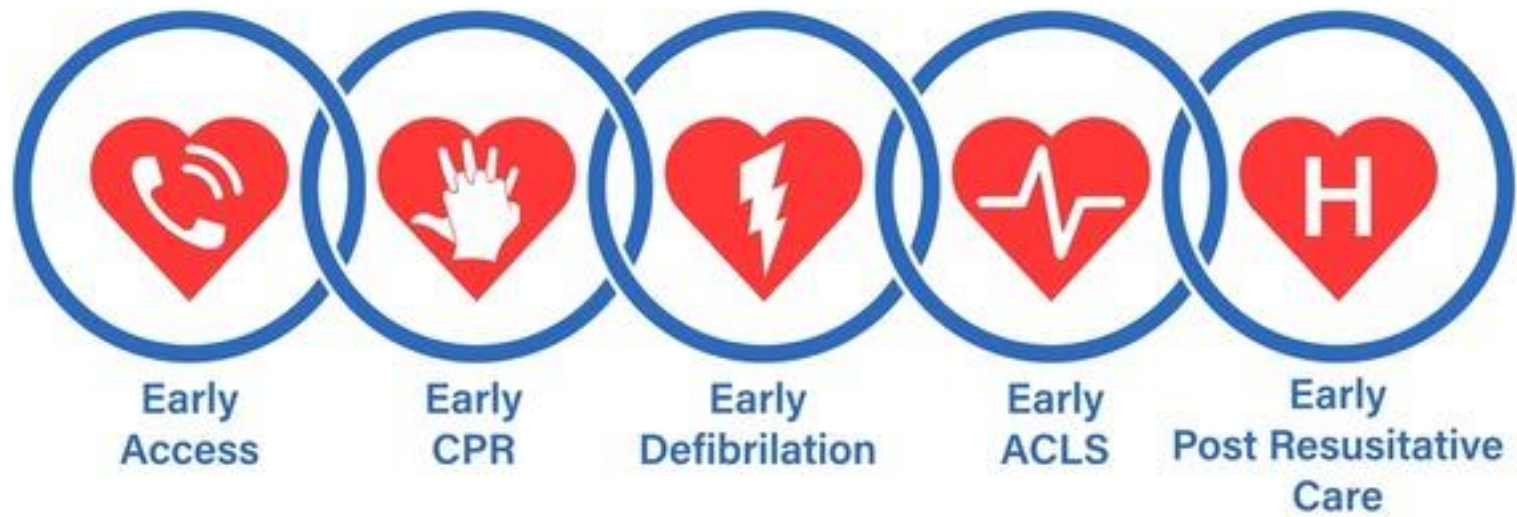


# Cardiac Emergencies

- *Secondary cardiac arrests* are more common for children and infants than sudden cardiac arrests
- This means that the child or infant likely experienced a *breathing emergency first*, and the breathing emergency progressed to a cardiac emergency
- Signs of cardiac arrest include **unresponsiveness** (unconscious) **and not breathing** (or not breathing normally)



# Cardiac Chain of Survival

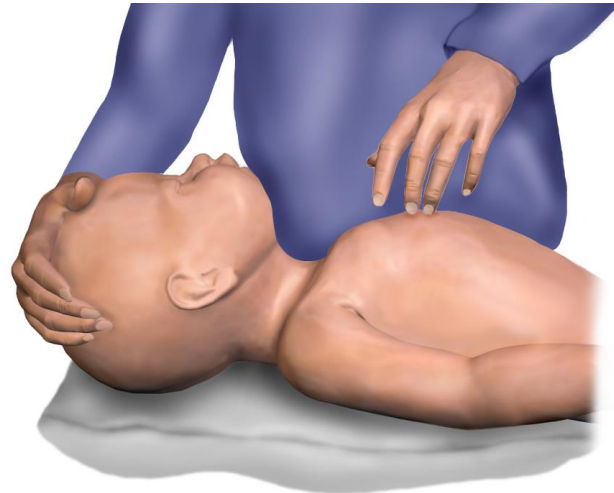


# CPR: Cardio Pulmonary Resuscitation

- To be performed on the person who is unconscious and not breathing
- Consists of chest compressions + rescue breaths
  - “30 to 2 no matter who”
- Compress in the center of the chest relatively hard and fast
  - Center of the chest – armpit level
  - Use the heel of one or two hands for a child
  - Two fingers, or thumbs for infants
- Once cycle of CPR is 30 compressions and 2 breaths. Providing 5 cycles of CPR should take approximately 2 minutes.



**Look, Listen, and Feel  
for Breathing**



**Chest Compression**



**Chest Compression  
for a Child**



**Mouth-to-Nose-and-Mouth  
Breathing**

# Continue CPR Until

- There is a change in the child's condition (for example, breathing normally, regaining consciousness)
- Another rescuer relieves you
- An AED is available and ready for use
- You are too exhausted to continue

# What Next?

- Focus on prevention
  - Are there any noticeable safety risks or hazards in the home that would increase slips, trips, or falls?
  - Choking risks?
  - Risks for soft tissue injuries?
  - Increased risk for poisoning?
- Safe sleeping practices for infants
- Child passenger safety: proper child passenger seat installation, harnessing, positioning
- Situational awareness: Notice where AEDs are in public
- Refresh your training every two years

# Thank You

**Be safe and be well.**

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