

Doctor ABCD **DRABCD**

D

DANGER



Prior to approaching the casualty, ensure the safety of the casualty, yourself and any bystanders.

R

RESPONSE



If possible, approach the casualty from their feet as this prevents hyperextension of the neck from a responsive casualty. Use the AVPU scale when checking for a response.

A

AIRWAY



Place the casualty onto their back. Open the airway using the head-tilt/chin-lift method.

(place your hand on their forehead and gently tilt back the head; with your fingertips under the point of the casualty's chin, lift the chin to open the airway).

B

BREATHING



After opening the airway; look, listen and feel for normal breathing for no more than 10 seconds.

Agonal Gasps

In the first few minutes after a cardiac arrest, a casualty may be barely breathing or taking infrequent, slow agonal gasps. Do not confuse this with normal breathing. If in any doubt that breathing is normal, act as if not breathing normally and prepare to start CPR.

If the casualty is breathing normally but still unresponsive, check for further injuries (conduct a secondary survey), and if safe to do so, place them in the recovery position. Call an ambulance (999), and check breathing regularly, if the casualty deteriorates or stops breathing normally then be prepared to commence CPR immediately.

C

CALL 999 + CIRCULATION



Call an ambulance (999)

Ask a helper to call, otherwise, call yourself.

Stay with the casualty when making the call if possible, and activate speaker function on the phone to aid communication with ambulance service.

Send someone to get an AED if available. If you're on your own do not leave the casualty: start CPR



Casualty not breathing

30 compressions 2 breaths. Depth of compression 5 – 6 cm. At a rate of 100 – 120 compressions per minute.

D

DEFIBRILLATION



If an AED arrives, switch it on and follow the spoken or visual prompts. An AED is used in conjunction with CPR.



Compression only CPR

If you are untrained or unable to do rescue breaths for a casualty who is not breathing, give chest compression-only CPR.

These should be continuous at a rate 100-120 per minute and to a depth of 5 - 6 cm.

+ REMEMBER

The 'P' in the acronym AVPU is sometimes also referred to as 'Pain' depending on the scale used.

- A** **ALERT** - Are they moving/talking - No - Proceed to **V**.
- V** **VOICE** - Do they respond to speech? - No - Proceed to **P**.
- P** **PLACE** - Place your hand on their shoulders and gently shake them asking, 'Are you alright?', if No response then proceed to **U**.
- U** **UNRESPONSIVE** - Assume the casualty is unresponsive. (If the casualty responds and providing there is no further danger, leave them in the position found and try to find out what is wrong, get help if needed.)

