

Lifeguard, CPR, AED, and First-aid Study Guide

Lifeguards are trained to prevent and respond to aquatic emergencies. They are trained to perform water rescues, C.P.R., AED, and first-aid.

The FIND Model: F = Figure out the problem
I = Identify possible solutions
N = Name the pros and cons of each solution
D = Decide which solution is best

Aquatic safety team is a network of people who prevent, prepare for, respond to and assist in an emergency at an aquatic facility.

Preventing Injuries-Patron Safety

Risk management involves identifying dangerous conditions or behaviors that can cause injuries and then taking steps to minimize or eliminate them. A good example of this is clearing everyone from the water at the first sound of thunder or sight of lightning.

Communication as an injury-prevention strategy requires lifeguards to:

- *Inform patrons about potential risk.
- *Educate patrons about inappropriate behavior.
- *Enforce rules and regulations.

A primary tool for a lifeguard is effective patron surveillance. This includes: Victim recognition, Effective scanning, Lifeguard stations, Area of responsibility.

RID Factor refers to: Recognition, Intrusion, and Distraction.

EAP's = Emergency Action Plans.

General Procedures in an Emergency are:

Size up the scene.

Perform an initial assessment.

Summon EMS personnel, by calling 911 or a local emergency number.

Perform a secondary assessment.

Initial Assessment includes checking for: Consciousness, Signs of life (movement and breathing), Pulse, and severe bleeding.

Use protective equipment, such as disposable gloves and a breathing barrier, when providing care. This helps protect from blood borne pathogens.

Asthma victims that need help because they are without an inhaler should be placed in a position to help them (comfort) and call for EMS.

Rescue Breathing for an adult, give 1 rescue breath about every 5 seconds. For a child/infant give 1 rescue breath every 3 seconds. Each rescue breath should last 1 second and make the chest rise.

ABC's = Airway, Bleeding, and Circulation.

Airway Obstruction

Ask the victim if they are choking.

Encourage them to continue to cough.

If they can not cough, speak or breathe, call EMS personnel. Begin back blows and abdominal thrusts for an adult or child or back blows and chest thrust for an infant.

If the victim is unconscious: Size up the scene and approach the victim.

Look for movement, check for breathing and give 2 rescue breaths. If the rescue breaths do not make the chest clearly rise, reposition the airway and attempt the rescue breaths again.

If the rescue breaths still do not make the chest rise, begin chest thrust for an adult, child or infant.

Difficulty breathing and chest pains could be signs of a heart attack.

Give 5 chest thrust, look for a foreign object and then give 2 rescue breaths.

Two-Rescuer CPR: To signal for a position change, the second rescuer calls "change" instead of 30 for an adult and 15 for a child/infant.

Using an AED

1. Turn on the AED.
2. Wipe the victim's chest dry.
3. Attach the pads (pediatric pads for children).
4. Plug the connector into the AED, if necessary.
5. Make sure no one, including you, is not touching the victim.
6. Push the analyze button, if necessary.
7. If a shock is advised, push the "shock" button.

Restlessness and irritability is a sign/symptom of shock

When immobilizing an arm leave it in the position you find it or the position it was being held in by the patron.

Secondary Assessment: Head to Toe for an adult and Toe to Head for a child/infant.

SAMPLE: S = Signs and Symptoms

A = Allergies

M = Medications

P = Pertinent Past Medical History

L = Last Oral Intake

E = Events leading up to the incident

Using a Backboard after stabilizing the victim's head and neck with either the head splint technique or the head chin support, secure the victim on a backboard.