



# C.A.R.D.I.O.

## MEDICAL EMERGENCY CONTROL PLAN

FOR INCIDENT CONTROLLERS AND FIRST AID RESPONDERS

# C.A.R.D.I.O. CONTROL PLAN FOR MEDICAL EMERGENCY CONTROLLERS

## C

**CONTROL** the scene to ensure:

- First aid officers (if applicable) and Triple Zero (**000**) emergency services are called.
- The safety of everyone especially the bystander crowd if others are distressed, agitated or getting in the way.
- There is clear and exclusive access for emergency services (no delay or interference) e.g. access control to all areas; gates open; elevator isolated; traffic cleared; crowds contained.

## A

**APPOINT** someone to:

- Commence cardiopulmonary resuscitation (CPR) if not already started.
- Retrieve the automated external defibrillator (AED) immediately.
- Maintain communication with Triple Zero (**000**) operator.
- Wait for emergency services or paramedics to arrive and guide them to the scene.
- Document time and key points to ensure an accurate record of incident.

## R

**RESPOND** to the incident by ensuring that:

- AED is attached without delay to casualty's **BARE chest**.
- AED is protected (or safeguarded) and remains attached to casualty's body.
- Rescuers performing CPR change over at regular intervals to minimise fatigue.
- Effective compressions continue until casualty responds with normal breathing or paramedics take over.

## D

**DELEGATE/DESIGNATE** during and post event:

- Liaison with management and key personnel (if applicable).
- Notification and support of casualty's family or next of kin.
- Handover of accurate record of incident and relevant medical history to paramedics.

## I

**INCIDENT REPORT**

- Download AED data report (after the incident). This recorded event data is useful for medical diagnosis and ongoing management of the casualty.
- Complete workplace incident report.
- Arrange replacement of AED consumables and maintenance check of AED.

## O

**OFFER SUPPORT**

Any medical emergency is distressing for witnesses and rescuers.

- Provide opportunity for debriefing and traumatic stress management.
- Ensure access to professional psychological support services.
- Facilitate workplace activities to provide support and encourage communication.
- Follow up on welfare of the casualty and their family.

# D.R.S.A.B.C.D. ACTION PLAN FOR FIRST AID RESPONDERS

## D

### DANGER

Assess danger and ensure the scene and everyone in the vicinity are safe. Be mindful that bystanders are often the main hindrance.

## R

### RESPONSIVENESS

Assess response from casualty using 'talk and touch' techniques, e.g. ask them to open their eyes. If no response – **DO NOT WASTE TIME** – **call for help**.

## S

### SEND FOR HELP

Call for emergency medical services – in Australia call Triple Zero (**000**) – or confirm that someone else has called for help. Be clear about location and landmarks. Emergency operators will stay on line during the event to guide and assist.

## A

### AIRWAY

Open airway. A person with a blocked airway cannot breathe. Check if airway is clear by looking inside mouth. If airway is not clear, roll casualty onto their side to drain the mouth and airway. **DO NOT WASTE TIME** – when airway is clear, **roll casualty onto their back quickly**.

## B

### BREATHING

Check if casualty's breathing is normal by looking for chest rise, listening for breath and feeling for movement of the chest/abdomen. A casualty needs **immediate cardiopulmonary resuscitation (CPR)** if there are unusual breathing noises/gasps or no breathing at all. **DO NOT WASTE TIME** – survival is directly related to the speed with which compressions and defibrillation are provided.

## C

### CPR

Start **CPR** without delay. **Push hard** and **push fast** on the breastbone in the centre of the chest at about **2 compressions per second** and  $\frac{1}{3}$  depth of the casualty's chest. **After every 30 compressions, give 2 rescue breaths**. If unable or unwilling to provide rescue breaths, continue with compressions only. Avoid fatigue by changing rescuers performing CPR every 2 minutes. **MINIMISE INTERRUPTION TO COMPRESSIONS**.

## D

### DEFIBRILLATION

As soon as **AED** is available, open it and **follow the prompts**. Remove casualty's clothing and apply one adhesive pad to the adult casualty's upper right chest and the other pad to just below the nipple line. Paediatric pads can be placed on centre of chest and centre of back. Pads must be on the casualty's bare chest before the AED can assess the heart rhythm and determine if defibrillation is necessary. **DO NOT REMOVE PADS EVEN IF CASUALTY STARTS TO BREATHE**.

# MANAGING A MEDICAL EMERGENCY INCIDENT IN A HEART SAFE WORKPLACE™

**Sudden cardiac arrest is the #1 cause of death in the developed world and the most likely cause of death in the workplace.**

Organisations cannot always rely on the belief that trained first aid staff will be on hand if a sudden cardiac arrest occurs. Management of the environment surrounding the incident is just as important as providing first aid. First aid responders should be focused on resuscitating the casualty and others should be capable of stepping up and taking control of the incident to minimise time delay and optimise a successful recovery.

The **C.A.R.D.I.O.** plan for managing medical emergencies is a joint initiative of Defib First and Adopt-A-Defib.

**C.A.R.D.I.O.** is the medical emergency control plan for the incident controller at the scene of a sudden cardiac arrest. It guides rescuers and onlookers to stay focused on tasks that will enhance the success of the rescue, i.e. survival of the casualty.

**D.R.S.A.B.C.D.** is the internationally recognised standard action plan for first aid responders which guides rescuers in the use of CPR and an automated external defibrillator (AED) to resuscitate a person suffering a sudden cardiac arrest.

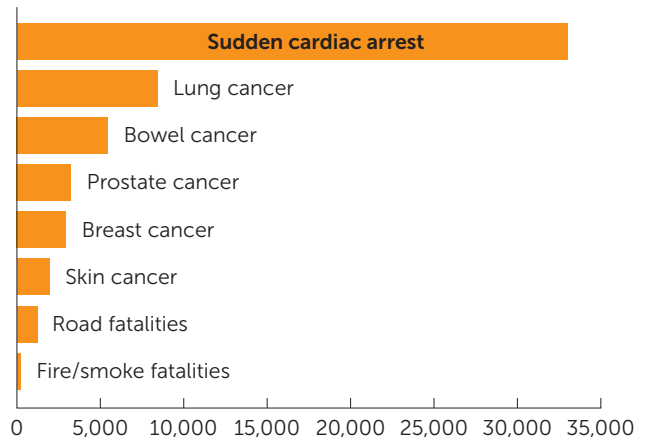
Every person, regardless of whether they have first aid training, should have the confidence to and be capable of applying an AED in the event of a sudden cardiac arrest.

## MINUTES MATTER TO SAVE A LIFE!

The **C.A.R.D.I.O.** control plan can be displayed as an A3 poster or attached to a first aid kit/AED as an A4 information brochure. Additional copies are available from [defibfirst.com.au](http://defibfirst.com.au) and [adoptadefib.org](http://adoptadefib.org)

## Causes of death in Australia compared with the incidence of sudden cardiac arrest (SCA)

Source Australian Bureau of Statistics and BITRE



In a **HEART SAFE WORKPLACE™** there are:

- sufficient automated external defibrillators (AED) on the premises to ensure retrieval within 90 seconds;
- easily accessible AEDs that are clearly visible;
- official signs identifying the AED locations;
- AED locations are registered with Triple Zero (000) emergency services;
- signs referencing the exact address of the organisation (with cross streets and/or GPS);
- education sessions made available to all staff on AED locations and why, when and how to apply the pads to casualty's bare chest;
- designated staff trained in cardiopulmonary resuscitation (CPR);
- nominated emergency incident controllers;
- monitoring and maintenance protocols for AED;
- risk and hazard identification protocols for rapid emergency access; and
- security access overrides for emergency services, including elevator isolation capability.

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**HEART SAFE  
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