STA CPR and First Aid Update 2021



Summary of Changes

Following the Resuscitation Council updated 2021 guidelines, STA have updated the qualification resources manuals, qualification resources and where applicable, qualification assessment materials to reflect the new guidelines and industry standards.

Please note, the numbers within the tables relate to the page affected within the corresponding manual

Definition of a Child

Resuscitation age definitions:

Baby or infant: Under 1 year

• Child: 1 year to 18 years*

Adult: Beyond 18 years*

*If age is in doubt, it's suitable to follow the child sequence.

PL	SAT	First Aid	EFAW	PAED	CPR & AED	CPR &
137	10			11		

CPR

Greater emphasis has been placed on advising to call 999 / 112 on a speaker-phone so that CPR can be started while simultaneously talking to the ambulance call handler.

Ask a bystander to call 999 / 112 or a rescuer / first aider should activate the speaker function on their phone so that they can start CPR while talking to the ambulance call handler.

PL	SAT	First Aid	EFAW	PAED	CPR & AED	CPR &
130	8	8	9	13, 17, 19	11	

Recovery Position

Additional advice update: The recovery position is intended for an unresponsive, uninjured casualty who is breathing normally and does NOT need CPR.

For an injured unconscious casualty, keep them still and continually monitor airway and breathing. Only use the recovery position if the airway is at risk, (e.g. fluids in the airway, or a rescuer / first aider has to leave them to get help and therefore, cannot continually monitor breathing).

PL	SAT	First Aid	EFAW	PAED	CPR & AED	CPR & ANA
153	17	15, 41	15, 30	23, 24	23	4

Learners are still required to demonstrate placing a casualty in the recovery position as part of the practical assessment.

AVPU Scale

Pain has been changed to 'pressure' to better reflect appropriate actions of a rescuer / first aider.

The casualty responds to pressure:

- Localises pressure
 - o The casualty is able to localise where pressure stimulus is being applied.
- Responds to (but does not localise) pressure
 - The casualty responds to pressure stimulus but is unable to localise it.

PL	SAT	First Aid	EFAW	PAED	CPR & AED	CPR &
123	7	14	14	22	22	

Choking

Recognition:

- Suspect choking if someone is suddenly unable to speak, particularly if eating
- If choking is mild, the casualty will be able to speak, cough and breathe.

Advice amended: shout for help to:

• Shout for someone to call 999 / 112, or the rescuer / first aider should call on a speaker-phone if they can do this as the same time as giving treatment.

Additional treatment advice: Received chest thrusts now added to reasons to seek immediate medical attention after treatment.

PL	SAT	First Aid	EFAW	PAED	CPR & AED	CPR &
157	22	12, 13	17, 18, 19	26, 27, 28	24, 25, 26	7

Anaphylaxis

Recognition: A rapid onset and rapid progression – becoming very ill, very quickly.

Treatment: The dose of adrenaline can be repeated after 5 minute intervals if there is no improvement or symptoms return.

PL	SAT	First Aid	EFAW	PAED	CPR & AED	CPR &
188		17	35	51		14, 17

Asthma

Treatment:

- The casualty should take one puff of their reliever inhaler (usually blue) every 30 60 seconds for up to 10 puffs
- Use a spacer device if available
- Call 999 / 112 for emergency help if the casualty feels worse at any point or if they don't feel better after 10 puffs
- The 10 puff inhaler routine can be repeated after a few minutes if the ambulance hasn't arrived.

PL	SAT	First Aid	EFAW	PAED	CPR & AED	CPR &
189	20	18	34	53		

Controlling a Bleed

Pressure has been amended slightly to: a rescuer / first aider may need to press into the wound.

• If a dressing gets saturated with blood, take it off and ensure direct pressure is being applied to the exact point of bleeding. Only re-dress when the bleeding is controlled.

PL	SAT	First Aid	EFAW	PAED	CPR & AED	CPR &
167	26	29	22	30		

Heat Stroke

Heat stroke occurs when the core body temperature exceeds 40°C. It is an urgent medical emergency and can lead to severe organ damage and death if the core temperature is not reduced promptly.

The condition often follows prolonged exercise or prolonged exposure to heat. Those with impaired heat regulation (such as children and the elderly) are also susceptible in hot weather.

Recognition:

- Elevated body temperature
- Confusion, agitation, disorientation
- Seizures
- Throbbing headache
- Lowered levels of response leading to unconsciousness
- Nausea, vomiting
- Flushed, hot, dry skin (no sweating).

Treatment:

- Remove the casualty from the heat source
- Call 999 / 112 for emergency help
- Cool the casualty rapidly, using fastest method available

The fastest methods, in approximate order, are:

- 1. Whole body immersion from the neck down in cold water (1–26°C)
- 2. A cold shower (or garden hose)
- 3. Large bags of ice placed on neck, armpits and groin.

Other cooling methods if these aren't possible include iced sheets or towels, cooling vests or fanning.

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200		45		59		

Knocked Out Adult Tooth

Treatment:

- Handle the tooth at the tip, not the root
- If possible, re-implant the tooth back in its socket. Ask the casualty to bite on a clean swab to hold the tooth in place
- If the tooth is visibly dirty, it can be rinsed under a tap for a maximum of 10 seconds
- If re-implanting the tooth is not possible wrap it in cling film or store it in cow's milk
- Arrange urgent transfer to a dentist.

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181		32				

Strains and Sprains

Treatment: Maximum time for ice application changed to 20 minutes.

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178		40		42		

Stroke

Recognition: Other red flag symptoms added to aid recognition of other stroke symptoms that may not be identified with the FAST test.

Other red flag symptoms:

- Balance: sudden loss of balance, trouble walking, dizziness or loss of coordination
- Eyes: sudden vision loss, double vision or partial loss of vision in one or both eyes
- Sudden severe headache, nausea or vomiting.

PL	SAT	First Aid	EFAW	PAED	CPR & AED	CPR & ANA
195		25	33			