



## Top Ten Things To Know CPR and First Aid

1. Over 326,000 out-of-hospital cardiac arrests (OHCA) and 209,000 in-hospital cardiac arrests (IHCA) occur annually. Despite advances in resuscitation science, survival rates are only about 10%.
2. This 2015 AHA Guidelines Update for CPR and ECC marks the transition from periodic review and publication of new science-based recommendations to a more continuous process of evidence evaluation and guideline optimization designed to more rapidly translate new science into resuscitation practice that will save more lives.
3. The new Systems of Care part focuses on the necessary integrated structures and processes that are incorporated to create OHCA and IHCA systems of care that are capable of measuring and improving quality and patient outcomes. New OHCA and IHCA Chains of Survival have been developed.
4. The new Education part targets resuscitation education of both lay rescuers and healthcare providers. Emphasis on frequent training intervals and the use of feedback devices/manikins will optimize performance of CPR in training and practice.
5. There is emphasis on the use of mobile phones by bystanders to aid in calling 911 sooner and receiving dispatch-assisted CPR instructions. Additionally, mobile-technology and social media applications that notify rescuers of a nearby cardiac arrest may increase the rate of bystander-initiated CPR.
6. Components of high-quality CPR have been updated. These include a range for compression rate and depth.
7. A new lay provider algorithm is introduced for opioid-associated life-threatening emergencies that incorporates naloxone administration with CPR and AED.
8. Updates to targeted temperature management (TTM) suggest a range of temperatures may be acceptable to target in the post-cardiac arrest period.
9. Survival from both IHCA and OHCA has increased over the past decade, but there is still tremendous potential for improvement. Systems that monitor and report quality of- care metrics, and patient-centered outcomes will have the greatest opportunity through quality improvement to save the most lives.
10. The Guidelines Update suggests a persistent huge knowledge gap for resuscitation science that has not been sufficiently addressed in the past 5 years. This gap in resuscitation science needs to be addressed through targeted future research funding.

Read the full articles in Circulation

[2015 International Consensus on Cardiopulmonary Resuscitation and Emergency Cardiovascular Care Science With Treatment Recommendations](#)

[2015 American Heart Association Guidelines Update for Cardiopulmonary Resuscitation and Emergency Cardiovascular Care](#)

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