

IN CASE OF COLLAPSE

- 1 On approach, assess for any hazards and call for practice assistance
- 2 At the patient establish if the patient is?
 - Responsive to pain?
 - Breathing normally?
 - If the answer is **YES** to one **or** both of these questions the patient **does not need resuscitation**.
 - If the answer is **NO** to both these questions **start fast, deep chest compression immediately and send someone to retrieve the nearest AED.**

YES	NO	YES	NO
YES	YES	NO	NO
Medical problem <u>not requiring immediate resuscitation</u>	Unconsciousness Look for cause: A—Alcohol E—Epilepsy I— Insulin O— Overdose U— Uraemia T— Trauma I— Infection P— Psychiatric S— Stroke	Conscious but breathing compromise: Look for causes: Airway obstruction, CVA, head injury asthma/anaphylaxis, lung injury, PE, drug overdose, post-ictal, diabetic , cardiac causes	<u>Start fast + deep chest compressions immediately</u> <u>Call for AED</u>
CLINICAL ASSESSMENT - INCLUDING PULSE CHECK			

- 3 If resuscitation is indicated switch on the AED and follow prompts
- 4 When the clinical staff and emergency equipment arrive they will make decisions about airway management, ventilation (when, if and how) and the need for external assistance.

IF THERE ARE NO CLINICAL STAFF PRESENT AT THE PRACTICE DIAL 000 FOR AMBULANCE IMMEDIATELY