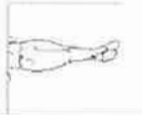






## Physical Counterpressure Maneuvers

Method	Description	Illustration
Lower-body PCMs		
Leg crossing with muscle tensing	Leg crossing with tensing of the leg, abdominal, and buttock muscles while lying down or, if necessary, while standing	
Squatting	Lowering the body into a squatting position. Adjunctive lower-body and abdomen muscle tensing can be done during the squat and then on standing once symptoms have resolved.	
Upper-body PCMs		
Arm tensing	Gripping opposing hands with fingers and pulling with arms in opposing directions with maximum force	
Isometric handgrip	Clenching fist at maximum contraction with or without an item in the hand	
Neck flexion	Touching the chin to the chest and tightening the neck musculature	

PCM indicates physical counterpressure maneuver.

### Relevant Here

- *Heartsaver First Aid CPR AED Instructor Manual*; Part 5: Heartsaver First Aid CPR AED Lesson Plans, Instructor-Led Course; First Aid Lesson Plans; Lesson 4: Medical Emergencies
- *Heartsaver Pediatric First Aid CPR AED Instructor Manual*; Part 5: Heartsaver Pediatric First Aid CPR AED Lesson Plans, Instructor-Led Course; Pediatric First Aid Lesson Plans; Lesson 4: Medical Emergencies

### Bee and Wasp Stings (New)

- If a person experiences anaphylaxis due to a bee, wasp, or hornet sting and an epinephrine autoinjector is available, the person should self-administer the autoinjector.
- A first aid provider should assist a person experiencing anaphylaxis to use the auto-injector if assistance is required.
- If a person experiences anaphylaxis due to a bee, wasp, or hornet sting, the emergency response system should be activated.
- Stings to the eye should be evaluated by a trained medical professional.
- Removal of a stinger remaining in the skin, as soon as possible, by plucking or scraping, can be beneficial.
- Over-the-counter oral antihistamines can be used to alleviate local itching.
- Topical corticosteroids can be used to alleviate local itching.
- It is reasonable to wash the area of a bee, wasp, or hornet sting with soap and water.
- Administration of over-the-counter acetaminophen and nonsteroidal anti-inflammatory agents may be considered to alleviate local pain.

- It is reasonable to use simple dietary sugars as an alternative if glucose tablets or gel are not available to treat hypoglycemia.
- For children with suspected hypoglycemia who are awake but unwilling or unable to swallow glucose, it may be reasonable to apply a slurry of granulated sugar and water under the tongue.
- Oral glucose should not be administered to people who are not awake or not able to swallow.

***Relevant Here***

- *Heartsaver First Aid CPR AED Instructor Manual*; Part 5: Heartsaver First Aid CPR AED Lesson Plans, Instructor-Led Course; First Aid Lesson Plans; Lesson 4: Medical Emergencies
- *Heartsaver Pediatric First Aid CPR AED Instructor Manual*; Part 5: Heartsaver Pediatric First Aid CPR AED Lesson Plans, Instructor-Led Course; Pediatric First Aid Lesson Plans; Lesson 4: Medical Emergencies

**First Aid for Presyncope**

- If a person experiences signs or symptoms of presyncope (including pallor, sweating, lightheadedness, visual changes, and weakness) of vasovagal or orthostatic origin, that person should maintain or assume a safe position such as assisted sitting or lying down.
- Once the person with presyncope is in a safe position, it can be beneficial for that person to use physical PCMs [physical counterpressure maneuvers] to avoid syncope.
- Lower-body PCMs may be preferable to upper-body and abdominal PCMs in first aid for presyncope.
- If no improvement occurs within 1 to 2 minutes, if syncope occurs, or if symptoms worsen or reoccur, the first aid provider should activate emergency services.
- The use of PCMs is not recommended when symptoms of a heart attack or stroke accompany presyncope.

# 2024 Focused Update on Resuscitation Following Drowning: Implications for Training Heartsaver®, BLS, and PALS Providers



American  
Heart  
Association.

## CPR & Emergency Cardiovascular Care

The “2024 American Heart Association and American Academy of Pediatrics Focused Update on Special Circumstances: Resuscitation Following Drowning: An Update to the American Heart Association Guidelines for Cardiopulmonary Resuscitation and Emergency Cardiovascular Care” contains updated and new recommendations. These recommendations are listed below and can be reviewed in the full 2024 focused update to the recommendations for resuscitation following drowning at the [American Heart Association's flagship journal, \*Circulation\*](#), and the *Highlights of the 2024 American Heart Association and American Academy of Pediatrics Focused Update on Special Circumstances: Resuscitation Following Drowning: An Update to the American Heart Association Guidelines for Cardiopulmonary Resuscitation and Emergency Cardiovascular Care* on [this web page](#).

- **Updated:** It may be reasonable for appropriately trained rescuers to provide in-water rescue breathing to an unresponsive person who has drowned if it does not compromise their own safety.
- **New:** Trained rescuers should provide supplemental oxygen if available to persons with cardiac arrest following drowning.
- **New:** In cardiac arrest following drowning, CPR with rescue breaths should be started before AED application.
- **New:** AED use is reasonable in cardiac arrest following drowning.
- **New:** The initiation of CPR should not be delayed to obtain or apply an AED in cardiac arrest following drowning.
- **Updated:** In cardiac arrest following drowning and after removal from the water, CPR with rescue breaths and chest compressions should be provided to all persons.
- **New:** In cardiac arrest following drowning, if the rescuer is unwilling, untrained, or unable to provide rescue breaths, it is reasonable to provide chest compressions only, until help arrives.
- **New:** In cardiac arrest following drowning, it may be reasonable for trained rescuers to initiate CPR with rescue breaths followed by chest compressions.
- **New:** Implementation of PAD [public access defibrillation] programs is reasonable in areas where there is a high risk of cardiac arrest, including aquatic environments (eg, areas with high population density, frequent utilization, other forms of exercise, long distances or response times to nearest AED).
- **New:** It is reasonable for trained rescuers to provide rescue breaths by the first means available (mouth-to-mouth, pocket mask, or bag-mask ventilation) for persons in cardiac arrest following drowning to avoid any delay in ventilation.

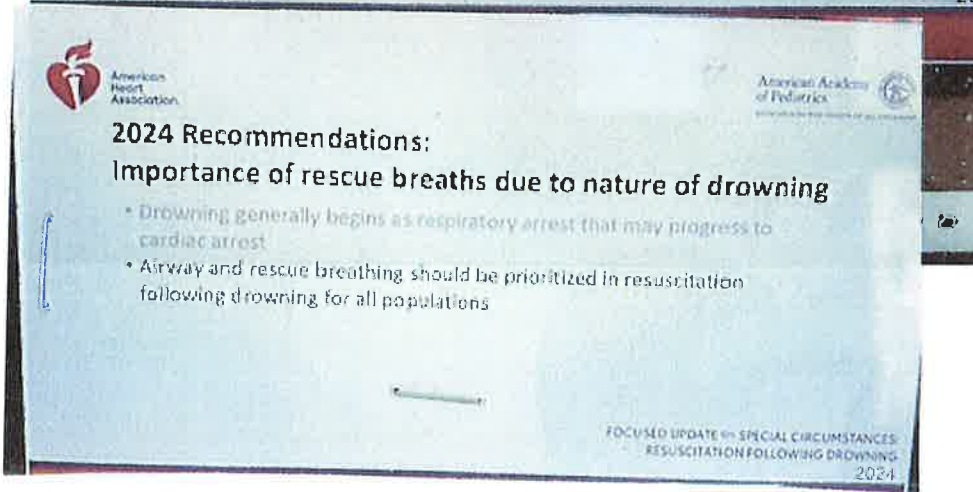
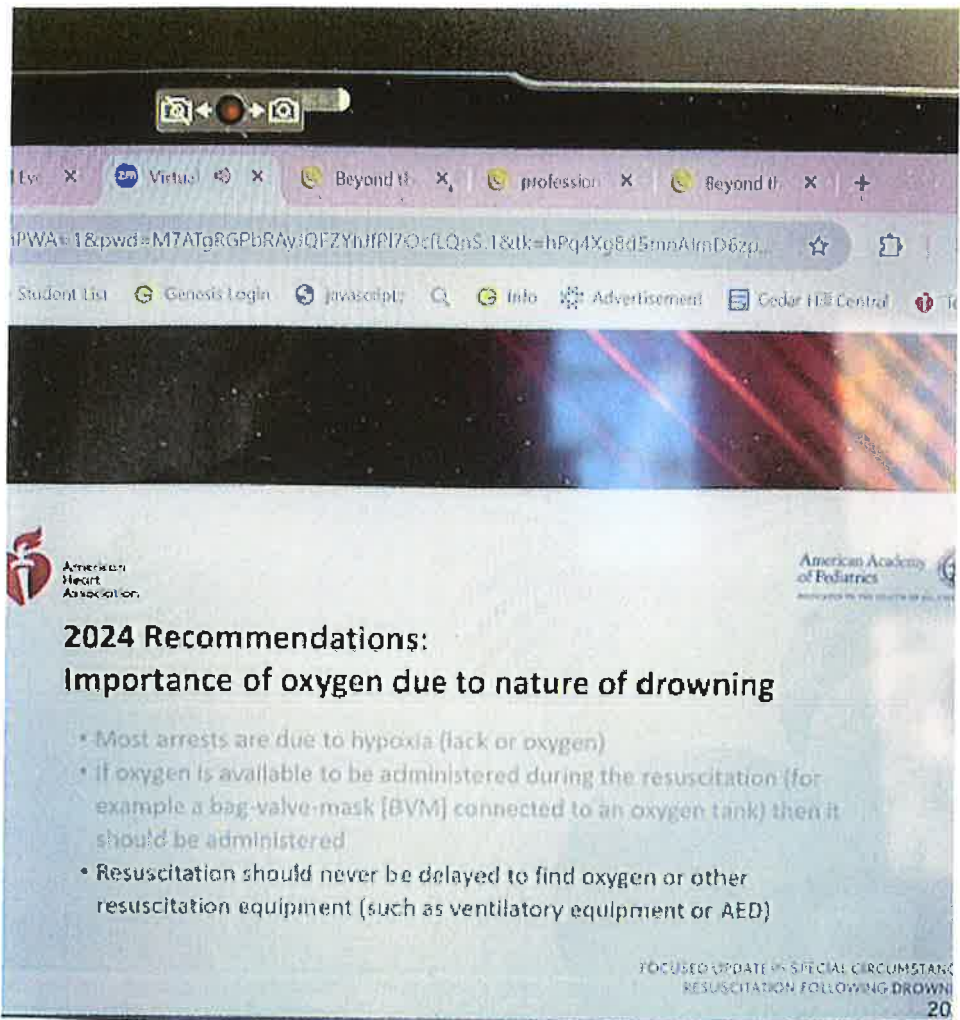
- **New:** Provision of rescue breathing using equipment (bag-mask or advanced airways) should be optimized by providing rescuers a competency-based training program with regular retraining and maintenance of equipment.
- An important concept highlighted in this focused update is the **Drowning Chain of Survival** (originally published in *Resuscitation*; reproduced with permission from Elsevier). When put into action by trained rescuers or untrained lay rescuers, the actions within the links may reduce mortality associated with drowning. The links are
  - Prevent drowning; be safe in and around water
  - Recognize distress; ask someone to call for help
  - Provide flotation to prevent submersion
  - Remove from water only if safe to do so
  - Provide care as needed; seek medical attention

These recommendations may be relevant to

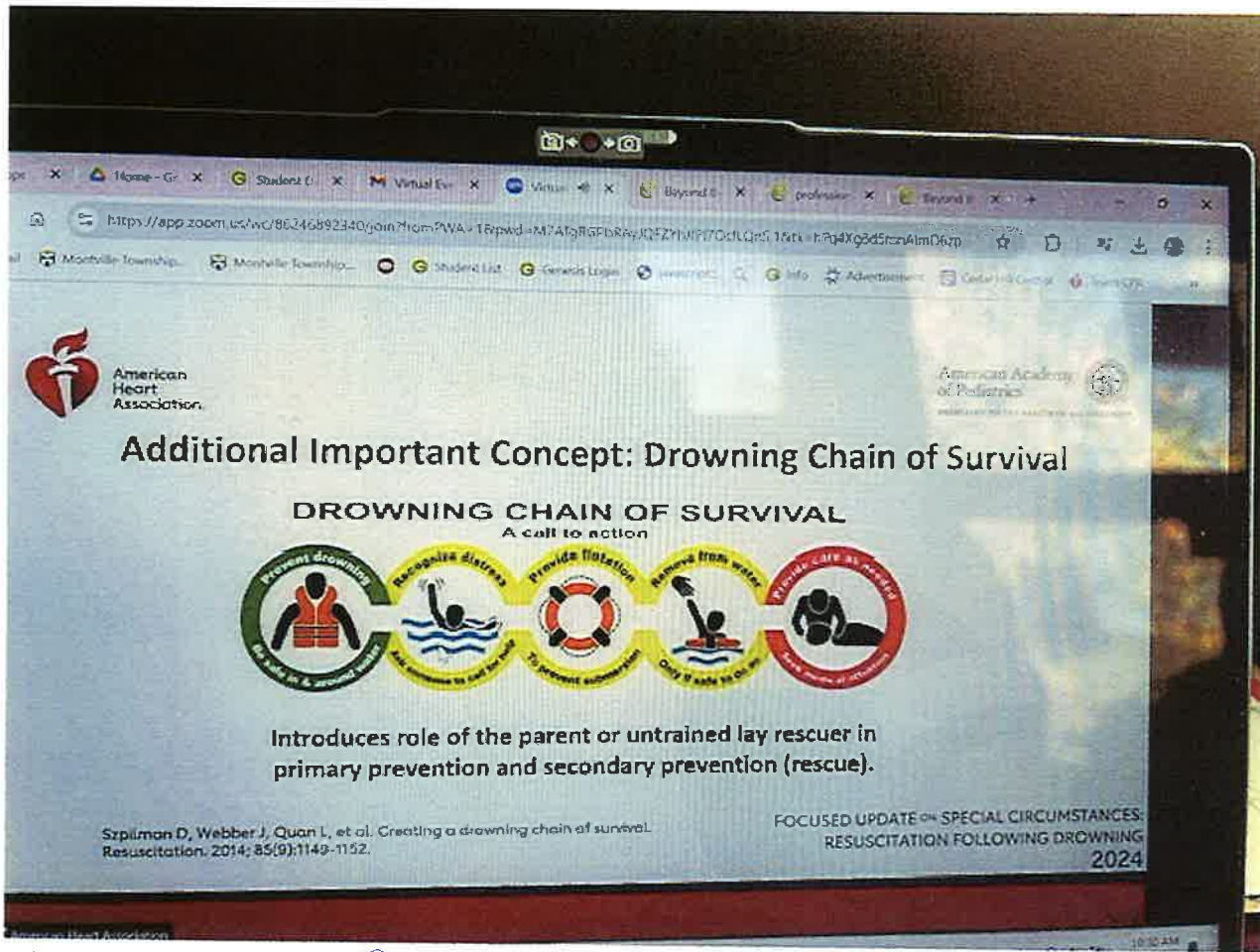
- *Heartsaver Pediatric First Aid CPR AED Instructor Manual*; Part 5: Heartsaver Pediatric First Aid CPR AED Lesson Plans, Instructor-Led Course; Pediatric First Aid Lesson Plans; Lesson 6: Injury and Environmental Emergencies
- *Heartsaver First Aid CPR AED Instructor Manual*; Part 5: Heartsaver First Aid CPR AED Lesson Plans, Instructor-Led Course; Adult CPR AED Lesson Plans; Lesson 8: Water Safety
- *Basic Life Support (BLS) Provider Manual*; Part 10: Other Life-Threatening Emergencies; Drowning
- *Pediatric Advanced Life Support (PALS) Provider Manual*; Part 5: Recognizing and Managing Cardiac Arrest; Managing Cardiac Arrest; Pediatric Cardiac Arrest Algorithm; Pediatric Cardiac Arrest: Special Circumstances

Heartsaver Instructors may explain the above principles and answer questions after completing the relevant lessons. BLS and PALS Instructors may discuss the above guidelines if treatment of drowning is discussed during the course.

No modifications to the course or course materials are required at this time. The American Heart Association is reviewing how these recommendations will be incorporated into future American Heart Association products and training.



Parents supervise while children are swimming  
 Early swim Lessons



A trained Rescuer is a person who has advanced aquatic training - Now you are trained in that role.  
 For Drowning or submerging watch for 44sec for cardiac and resp. status.  
 90% of all drownings are preventable.