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Speaker 1: MySafe:LA is the public education partner of the Los Angeles Fire Department. You're listening to a MySafe:LA fire and life safety podcast.

Cameron: Hello everybody. This is Cameron Barrett, the education director for MySafe:LA. Thanks for joining us for our MySafe:LA fire and life safety podcast. I am here with a co-host and colleague, Todd Lights. Hey Todd.

Todd: Hey there!

Cameron: Public information officer for MySafe:LA. The reason why there's two of us chatting you guys up this time around is because we're the two resident EMTs in the MySafe:LA staff

Todd: That is correct.

Cameron: Yeah. When did you become and EMT Todd?

Todd: Twenty-ten.

Cameron: Twenty-ten. Where'd you go?

Todd: I got my EMT credentials and National Registry of Emergency Medical Technicians from Valley College out in the Sherman Oaks Valley Village area.

Cameron: Yeah. I got mine farther south at Saddleback back in 2008. Both of us, of course, rode out with the Los Angeles Fire Department to do that requirement of our education and that was pretty interesting on my part. How about you?

Todd: It was great. We rode out with LA County Fire, as a matter of fact and responded with them to 9-1-1 calls and had some pretty cool stuff during my 10-hour ride out.

Cameron: Todd rode out with the Los Angeles County Fire Department. I rode out with the Orange County Fire Authority down there and of course both of us in our duties with MySafe:LA have ridden out with the Los Angeles City Fire Department.

We've seen some pretty interesting stuff in our ride outs. The interesting thing about all 3 of those agencies is the fact that all of those agencies have 85% or higher of their calls these days, have nothing to do with fires do they?

Todd: No.

Cameron: It's emergency medical calls that come in to all of these fire departments.

Todd: Yeah, more and more, they're finding that EMS is the lion's share of their responses right now. It's more important than ever for them to really concentrate on EMS, although that may not be as popular among firefighters who got into the business, perhaps, to put out fires. Many more are coming on as paramedics as well, so they have advanced life support skills.

Cameron: There's a lot of reasons behind that. First and foremost, especially in large urban areas, the fire code works. Buildings that have sprinkler systems, buildings that have smoke alarms and buildings that are properly constructed to compartmentalize any fires that happen to be in certain areas, are working. Big, residential fires just don't happen the same way that they used to. Which is awesome! If you want to make a living fighting fires and not going on EMS calls, that might be a little tough. It means the fire service is really fundamentally changing in 2014.

Todd: When we say that firefighters respond to medical emergencies, sometimes they're not the first responder. Sometimes it's you and me that are the first responder and it's our responsibility to know what to do. Cameron and I have a duty to act as EMTs, we have to jump in to try to help somebody if we can. You as a normal citizen, can be that same way but you need a little bit of knowledge. Since it's American Heart Health Month, we wanted to talk to you guys today about hands only CPR, which is the new paradigm for cardio pulmonary resuscitation. The good news is that it's even easier than ever before to become proficient in CPR, hands-only CPR, and to save a life. How cool is that?

Cameron: It's amazing, you don't need to be an EMT to do what Todd and I are about to teach you. The weird thing is, you can learn this on a podcast. I am so not kidding about this, it is so simple.

Todd, do you remember the first time you learned CPR?

Todd: Yes. I had to do it before I could even start taking EMT classes and it was an all day affair almost. I think it was 4 to 6 hours or something of compressions and rescue breaths and counting. It really took some concentration to learn it. I think that's what a lot of people are intimidated by that.

Cameron: Exactly. When I first learned CPR, I was 14 years old and I wanted to be a junior life guard. Just the math alone was really staggering. I learned it several times after that and it was always, are there 30 beats to 2 breaths for an adult, but there are 15 to 2 for kids but there's 100 to something for infants. It was just really hard to remember. The other thing is that it was that whole thought of, one day I might need to do this and I'm going to have to put my mouth on a complete stranger. What we found in the last half-a-century or so when CPR has slowly climbed up into the absolute ubiquitous general public consciousness that

everybody knows what CPR stands for and most people know how to do it, is that people are really rather nervous about that whole mouth-to-mouth thing

Todd: It's somewhat daunting. I used to travel around with a little CPR mask; it was on my key chain. It was basically just kind of a plastic baggie type thing that you would put over the person's mouth to create a barrier of safety because you don't know what might have lead to them falling down and basically ...

Cameron: Needing your help.

Todd: I think a lot of people are scared off by that. What's so beautiful about hands-only CPR is that it takes that whole mouth-to-mouth thing out of the equation. It takes all the counting out. It's really just start compressions, do them hard and fast at the right depth and you have a good chance at saving that person's life until help arrives and they're able to take them off to the hospital.

Cameron: Some folks actually call hands-only CPR, sidewalk CPR, because that's how easy it is and that's what it's meant for. It's meant for you literally on the sidewalk, coming upon someone who needs your help, to be able to offer that help.

Here's the neat thing about hands-only CPR, it's not a second best if you don't want to use rescue breaths; it's not that. It's as effective as that original CPR that used to be taught to all of us. In fact, it's the only type of CPR that they American Heart Association is currently teaching to the public. It's what is considered the thing to do, not the second best thing to do.

Todd: I guess the reason behind that was that they found that there's enough oxygen in our blood to keep out brains and brain cells alive ...

Cameron: As long as that blood gets to the brain ...

Todd: As long as you continue it pumping. That's why you do the compressions so you're pumping the blood. Giving rescue breaths is not a bad thing but by just doing something and just giving those compressions, you're moving the blood throughout the body so that it can get full perfusion and there will be no cell death, no tissue death if you're able to keep that going.

Cameron: We should have a little caveat out here and we should say that hands-only CPR is when you know that you're going to be able to dial 9-1-1 before you start and that there will be first responders that will come within the first 5 or so minutes. Brain death is that 8 minute window right there. If you're out in the middle of nowhere and hands-only is not going to help you for 20, 30, 40 minutes, that's not going to work. Hands-only CPR in an urban setting, like Los Angeles, where you can dial 9-1-1 and get the Los Angeles Fire Department on its way with their

more sophisticated knowledge and their more sophisticated equipment, this is perfect. This is that measure you need to take while you're waiting for those first responders to arrive.

We should just get right into it. It's five easy steps. You want to go through those Todd?

Todd: Yeah. Either you witness somebody collapsing and falling unconscious and stopping breathing or you come upon somebody, obviously, it's more, perhaps, ideal if you actually see someone go down so then you can give information about when exactly they went unconscious or stopped breathing. If you come upon somebody, you immediately will call 9-1-1, most of us carry a cellphone so that's not a big deal, or you instruct another bystander to go call 9-1-1. If you happen to have your cellphone, you can dial it upright there, put it on speaker, tell the dispatcher who answers the phone, exactly the nature of your emergency and exactly where you are, to the best of your ability. It's always a good idea to give cross streets and things like that as well. Then immediately begin the hands-only CPR.

Cameron: Put that mobile phone on speaker so that you can talk to them because you're going to need both your hands right now to help this person out.

Todd: That's right. This is definitely a hands-free moment and a hands-on moment when you're working on the victim, so to speak.

You start by determining whether they're conscious or not. If you shake them and say, "Sir, Ma'am, are you OK? Are you OK?" That may wake somebody up. You check for signs of breathing, if they've stopped breathing, and you can start CPR, start the hands-only compressions. What rate are we talking about for hands-only CPR?

Cameron: It's so simple. You will never forget this. A hundred compressions a minute. It's that's simple. The really fun this is, if there is anything fun about doing CPR on somebody who has collapsed and needs you to do it, is that if you lose count or it's too difficult to count while you're talking to the 9-1-1 operator or instructing other folks standing by to help out, if you lose track, don't worry about that. Just sing inside your head, ah, ah, ah, ah, staying' alive, staying' alive. Really, that beat will give you about a hundred compressions a minute. Sounds corny but it helps

Todd: Of course, Cam is singing the Bee Gees song

Cameron: Not that you could tell with my nasty voice

Todd: Well you got the point across. That's the Bee Gees song from Saturday Night Fever, Staying Alive. I think what would be a good public service if we could try to come up with a more contemporary song because 1978 or whenever that movie came out, we're getting 40 years ago.

Cameron: That's true. Staying Alive is really ... That's what I love about that song. It's not just that it's the right beat but it's the right title. That's what you're doing. You're going to keep this person alive by doing this.

It's important though to position those compressions correctly and get them, not just the number, but the depth. Could you go over that Todd?

Todd: Exact. You want to find the proper place on a person's body and that's right in the center of the chest at the nipple line. You want to press the heel of your hand down and lock your fingers or just put the other hand on top of it, right or left, whichever one's more comfortable for you, get your body positioned right over it so your arms are locked in place so you can put the full force of your weight down for your compressions. You want to do them at a depth of about 2 to 3 inches which can also be a little intimidating because you feel like, "Oh my goodness, I'm hurting this person." Let's face facts here folks. If somebody has fallen, collapsed, they're not breathing and their heart is not beating, then they are dead. Technically, they are dead.

A lot of people worry that they could crack a sternum or break a rib or something like that. That's much better than being dead.

Cameron: Yeah. Don't worry about breaking a bone when you need to get a heart restarted; that's your goal here. Don't worry about that. The sternum is that big, bony piece of your skeleton that's right over the center of your chest. That's what you're going for. The only way to really be able to do a hundred compressions a minute, 3 inches down, for perhaps 5 minutes, because it's surprisingly tiring, the only way to make that happen is by kneeling next to this person, on their side and making sure your entire upper body is positioned over your straight arms and hands. Think about that; exactly perpendicular to the ground. Your shoulders, your elbows, your wrists and your hands are literally in a perfectly straight line. That way your whole upper body can move up and down with your hands. You're basically using your core to do this work instead of just your arms. You'll be able to last much longer doing that.

Todd: The great news about that, as Cameron mentioned, it does get to be quite tiring after a minute or more even. Usually a group of bystanders will form around you and if you know what you're doing, and it's very simple to know what you're doing, you can train somebody else who's just watching to spell you, to take over for you. If you do a countdown of some kind and show them the proper form

and technique and depth and rhythm, they can take over for you and then somebody can take over from them and hopefully advanced life support help will come within some period of that time.

It's really easy to teach somebody, even on the spot, even in that kind of a stressful situation.

Cameron: Don't stop. I say that, especially if there are other people around who can spell you. Don't stop. It's really important to keep going. If you are alone, if you're getting exhausted, if help still hasn't arrived, remember that one dead person or one seriously sick person is bad, but two is even worse. Do not make yourself pass out doing this.

What you do is take a break. Truly spell yourself. Sit back on your heels. Take a couple of really deep breaths. Bring your heart rate down and then position yourself again over your patient and start all over again.

Todd: To review. We can quickly say that you come upon an unconscious person or an apparently unconscious person. You shake them to determine their level of consciousness, perhaps they wake up at that point.

Cameron: Which is great. That would be awesome.

Todd: Right. Don't even bother to check their pulse or even listen for breathing, just commence the compressions. Believe me, if they're semi-conscious, they'll wake up and say, "Hey, what are you doing man? Get off of me." That's a great thing if they do that. If they don't, start the compressions and keep going. Find the middle of the chest at the nipple line, heel of your hand, arms locked, body straight over, do compressions at the rate of a hundred per minute or to the tune of the Bee Gees song Staying Alive, Staying Alive or whatever other song that has a similar rhythm, but Staying Alive is a really good one. We'll try to come up with another one. Do not stop. Use bystanders to help you and make sure that you've called 9-1-1, given them your exact location and the nature of the emergency and put them on speaker phone and put the phone down beside the victim, so to speak.

Cameron: Really, it's that simple. It really is.

Todd: That's really all there is to it, isn't there.

Cameron: There have been plenty of examples all over the country, all over the world, where hands-only CPR has saved a life. You can do that. You don't need to be an EMT like Todd and I. You don't need to be a paramedic, a firefighter. You don't need a whole bunch of lengthy classes or a bunch of numbers in your head. Just

know that a hundred compressions a minute and you can save a life. It's that awesome.

Todd: Just the willingness to act and a little bit of information and you've got it. You can be a hero.

Speaker 1: You've been listening to a MySafe:LA Fire and Life Safety podcast. MySafe:LA is the public education partner of the Los Angeles Fire Department. Visit us at mysafela.org and lafdong.

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