

# High Performance CPR

**The importance of good CPR**

- CPR is the foundation of the resuscitation arsenal.
- High performance CPR improves the effectiveness of defibrillatory shock.
- High performance CPR improves the effectiveness of medication treatments.
- The longer the pause preceding shock or following a shock, the lower the chances of survival.

**The components of CPR**

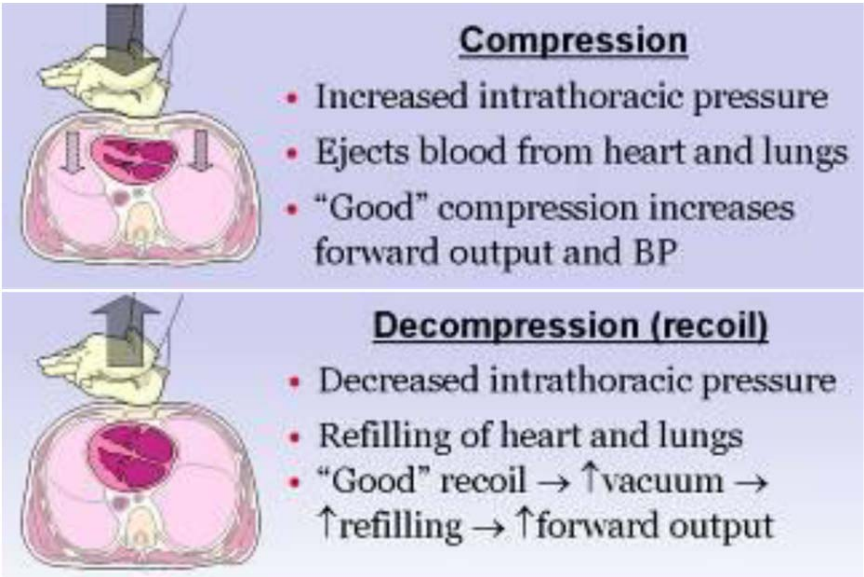
- Better compressions lead to better organ perfusion which leads to better resuscitation.
- Greater depth of compressions=increased likelihood of a successful shock.
- **Compression**=Organ perfusion.
- **Decompression**=Heart perfusion.

**Ventilations**

- Ventilation is believed to be a vital component of resuscitation, **but too much of a good thing (hyperventilation) can decrease survival.**

**Recoil/Decompression**

- If decompression is incomplete, compression is not as effective due to inadequate blood volume in the heart and lungs.
- Inadequate decompression compromises both coronary *and* cerebral blood flow
- Even limited periods of incomplete decompression can have a lingering effect on coronary and cerebral perfusion pressures, which may remain low even after this deficiency in CPR has been corrected.



Legend	
	EMR
	EMT
	Intermediate
	Paramedic

**No matter which model is used or how many responders are present, the following are *always* true:**

- C-A-B.
- Minimize interruptions in compressions.
- Compress at least 100/min, 110/min preferred (use of a metronome is recommended).
- Allow complete chest wall recoil/decompression between compressions (2.5 inches is the recommended depth).
- Very brief rhythm assessment every 2 minutes or, if using waveform capnography, when the ETCO2 begins to rise.
- Rotate compressors every 2 minutes.
- **Hover over patient with hands ready during defibrillation** so compressions can start immediately after the shock (or analysis) has occurred.