BLS CPR CARD — WHAT YOU ABSOLUTELY MUST KNOW

AHA BLS Provider written exam: **25 questions, 84% to pass (21/25)** · 2025 AHA Guidelines for CPR & ECC (Oct 2025), Part 7 Adult BLS

THE NUMBERS

Compression rate	**100–120 / min**
Adult depth	**2–2.4 in (5–6 cm)**
Full recoil	lean OFF the chest
Pause limit	**< 10 sec**
Compression fraction	≥ 60%
Switch compressor	every 2 min
Adult ratio (no adv. airway)	**30:2**
2-rescuer infant/child	15:2
With advanced airway	continuous + 1 breath / 6 sec
Pulse, no breathing	1 breath / 6 sec (10/min)
Check pulse + breathing	≤ 10 sec

ADULT SEQUENCE

- Scene safety → check responsiveness **and** breathing ≤10 s
- **Agonal gasps = cardiac arrest** — start CPR, don't wait
- Alone → **activate EMS first, then compress** (2025)
- Carotid pulse ≤10 s; unsure = compress
- Heel of hand, center of chest, lower half of sternum, arms straight
- AED the moment it arrives — don't finish a cycle
- After shock → **resume compressions immediately**

AED

- Pads: below right clavicle + left mid-axillary; AP ok
- Dry the chest · shave/press hairy chest · remove patches
- Pacemaker/ICD: pad **≥1 in** away
- <8 yr / ~55 lb: pediatric pads or attenuator; if none, use adult pads — do not withhold
- Clear everyone · move O_2 away · resume compressions at once

2025 CHANGES — OLD ANSWERS ARE WRONG

- **FBAO: 5 BACK BLOWS first**, then 5 abdominal thrusts, cycle
- **Two-finger infant technique ELIMINATED** — heel of one hand or two-thumb
- **Routine mechanical CPR — NOT recommended**
- **Lone rescuer: activate first**, then CPR
- **Resuscitate where the patient is found**
- **IV before IO** in adult cardiac arrest
- **Naloxone in the adult BLS algorithm**
- **DSED & vector-change — NOT recommended**
- Professionals do **compressions AND ventilations** — compression-only is lay-rescuer
- Obesity: same technique as average weight
- Temperature control ≥36 h if unresponsive to verbal after ROSC
- Cognitive aids: professionals yes, **lay rescuers no**

CHOKING

Patient	Action
Adult/child, conscious, severe	**5 back blows → 5 abdominal thrusts**, repeat
Becomes unresponsive	Start CPR; look in mouth each time
Infant, conscious	5 back blows → 5 chest thrusts

TRAPS THAT COST THE CARD

- "NEXT" vs "MOST IMPORTANT" have different answers
- Any number outside the range (80/min, 2.5 in) = wrong
- Pulse check or rhythm analysis right after a shock = wrong
- Waiting to reassess agonal gasps = wrong
- Abdominal thrusts first = wrong in 2025
- Two fingers for infant = wrong
- Hyperventilation is never the answer

PRACTICE

- Metronome or song at 100–120 · say numbers blind
- Rehearse the 2-min switch out loud
- Take a 25-Q practice exam; sort misses: number / sequence / old-guideline

Sources: 2025 American Heart Association Guidelines for CPR and Emergency Cardiovascular Care — Part 7 Adult Basic Life Support (Circulation, Oct 2025); 2025 AHA Guidelines Top Things to Know. Review material only — follow your local protocol and the current AHA provider manual.