



First aid advice on cardiopulmonary resuscitation (CPR) and pandemic H1N1 2009 influenza (swine influenza)

18 October 2009

Notes

- This advice is designed for members of the public attempting resuscitation out of hospital
- Healthcare workers should consult the Resuscitation Council (UK) Statement on [CPR during Pandemic Flu in Healthcare Settings](#)
- Those laypeople with a duty of care that may include CPR should be guided by their employer's advice
- This guidance may change based on increasing experience in the care of patients with H1N1 2009 influenza.

Whenever CPR is carried out, particularly on an unknown victim, there is some risk of cross infection, associated particularly with giving rescue breaths. Normally, this risk is very small and has to be set against the inevitability that a person in cardiac arrest will die if no assistance is given.

The Resuscitation Council (UK) Guidelines 2005 state that if rescuers are not able, or are unwilling, to give rescue breaths, they should give chest compressions alone.

Because of the heightened awareness of the possibility that the victim may have swine flu, the Resuscitation Council (UK) offers this advice:

1. The use of a barrier device (particularly a pocket mask with **one-way valve and filter**) offers some protection. If such a device is readily available consider using it.
2. If no barrier device is available, a judgement will have to be made whether to continue with compressions alone until the ambulance (or advanced care) arrives, or carry out full CPR.
3. After performing CPR (compressions alone or with ventilation) all rescuers should wash their hands thoroughly with soap and water; alcohol-based hand gel is a convenient alternative. They should also seek advice from their GP or medical adviser.