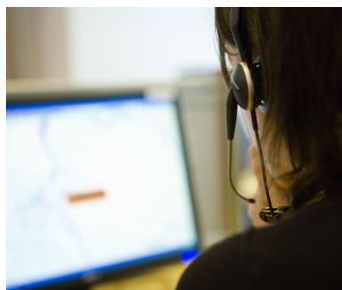




Telecommunicator-CPR (T-CPR)

Enhancing the Chain of Survival



OVERVIEW

Annually, over 350,000 people fall victim to sudden cardiac arrest (unexpected loss of heart function, breathing, and consciousness - commonly the result of an electrical disturbance in the heart) outside of a hospital environment.¹ Unfortunately, only about 1 in 10 victims survive this dramatic event.¹

Lay rescuer cardiopulmonary resuscitation (CPR) is a critical link in the chain of survival while emergency vehicles are in transit to the scene, less than half those experiencing an out-of-hospital cardiac arrest (OHCA) receive lay rescuer CPR

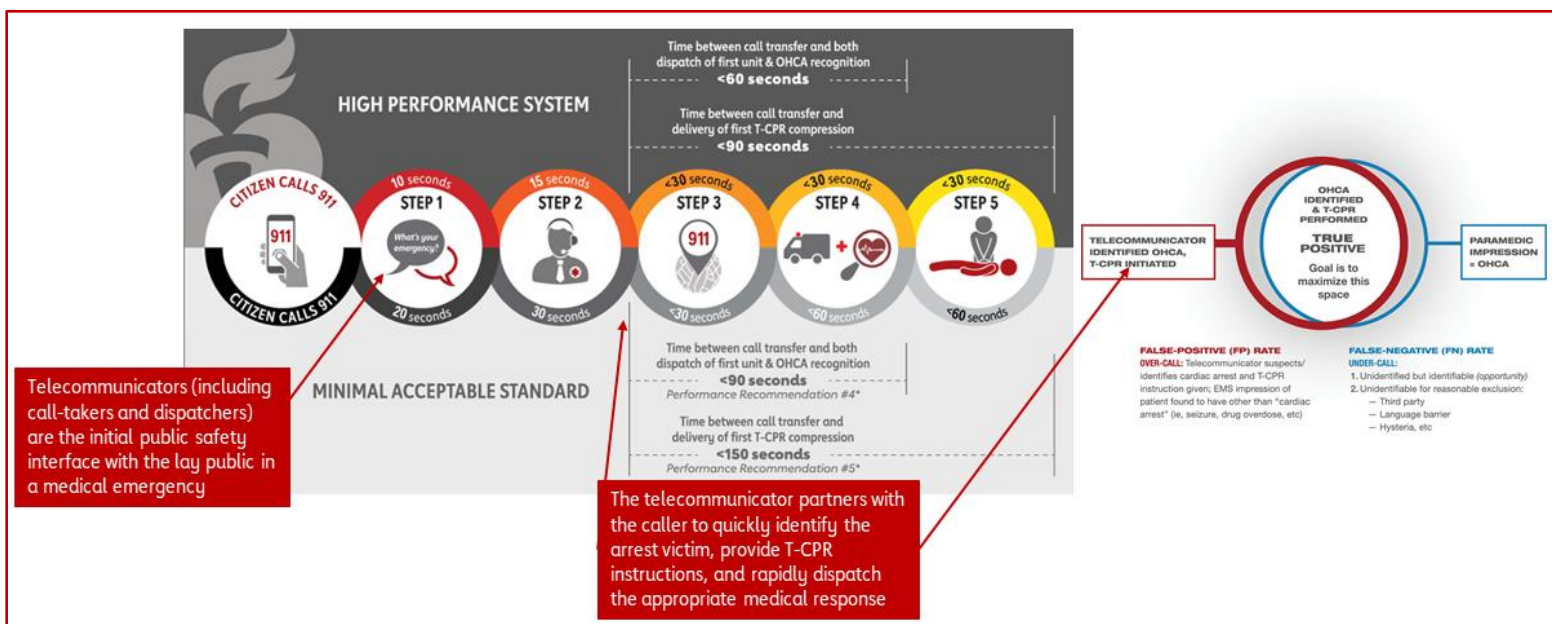
before emergency professionals arrive. Moreover, the provision of lay rescuer CPR may vary within a given community based on neighborhood, especially among minorities, which highlights high-yield opportunities to improve lay rescuer CPR and save lives.¹

OHCA CHAIN OF SURVIVAL

Successful resuscitation of cardiac arrest victims requires the time-sensitive, expert care described by each of the links in the Chain of Survival.¹



T-CPR: WHAT IS IT?



T-CPR INCREASES ACCESS TO LAY RESCUER CPR & IMPROVES OHCA SURVIVAL RATES

- Only about 40% of those experiencing an out-of-hospital cardiac arrest (OHCA) receive lay rescuer CPR before the arrival of professional emergency rescuers²
- T-CPR offers a safe, cost-efficient, and effective approach to substantially increase community lay rescuer CPR¹
- Near-universal use of 9-1-1 (or equivalent emergency numbers outside the United States) ensures activation of an emergency communication center for virtually all treated cardiac arrest events¹
- CARES data demonstrated that 73% of OHCA events received lay rescuer CPR after T-CPR instruction.³
- Early lay rescuer CPR is associated, on average, with an approximately two-fold increase in the chances of survival after OHCA, with or without T-CPR instruction^{4,5}
- CARES data demonstrated equitable delivery of T-CPR instruction regardless of race or socioeconomic factors but did find reduced lay rescuer CPR (after T-CPR instruction) based on older age and lower median household income.³
- Even in communities where T-CPR is a standard practice, directed quality improvement efforts involving T-CPR & community education may increase lay rescuer CPR^{3,6-8}

THE AHA ADVOCATES¹

- Ensure T-CPR training is a compulsory requirement for all 911 telecommunicators who provide dispatch for emergency medical conditions.
- Ensure T-CPR training shall follow evidence-based, nationally recognized guidelines for high quality T-CPR which incorporates recognition protocols for OHCA and continuous education.
- Secure monies to provide for the effective implementation of T-CPR training and ongoing quality improvement requirements.

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