



The Norwegian Resuscitation Council

2021 Guidelines for Adult basic life support

English summary

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Background

In June 2021, the Norwegian Resuscitation Council (NRC) published guidelines for basic life support¹ for Norway, based on the European Resuscitation Council 2021 guidelines.² This document represents a short summary.

The NRC recommend the following sequence of actions when assessing an adult person with reduced consciousness or no signs of life (Figure 1 and 2):

1. Ensure your own safety.
2. Call emergency number / 113 when in Norway
 - Early contact will promote an early assessment, early provision of lifesaving first aid, and early ambulance dispatch.
 - 113 is the toll-free Norwegian number to Emergency Medical Communication Centres (EMCC) for medical prioritization and ambulance dispatch.
3. 113 will supervise the caller to open airways by lifting the chin and extending the head slightly backwards.
4. After opening the airways, 113 will supervise the caller to listen, feel and look for breathing for a maximum of 10 seconds.
 - If the patient is breathing normally, 113 will advise the caller to put the patient into the recovery position. Caller will be advised to monitor breathing continuously, and to secure open airways. Suspected neck injury should not prevent efforts to secure the airways.
 - If the patient is not breathing or has unnormal/irregular breathing, 113 will aid the caller to initiate cardiopulmonary resuscitation (CPR). Activate the loudspeaker on the phone to allow CPR guidance during the call.
5. 113 will instruct caller to start CPR: Press down at the middle of the chest at a rate of 100-120 per minute. Press to achieve a depth of 5-6 cm. Continue with 30 chest compressions and two ventilations in an alternating pattern (30:2). If you are not trained in CPR, 113 will instruct you to perform continuous chest compressions instead. If unable or unwilling to perform mouth-to-mouth ventilations, you should provide continuous chest compressions.
6. 113 will advise caller to retrieve an automated external defibrillator (AED). 113 will aid in decision making based on number of persons available on scene, AED-proximity, and expected response interval. Publicly available AEDs in the public AED-registry are visible for 113 and their location can be found at www.113.no.
 - 113 will instruct the caller to attach the AED and follow the instructions.
7. Until ambulance arrival, 113 will continue to guide and encourage CPR efforts. If the patient shows signs of life and starts to breathe normally, caller will be advised to continue close observation in the lateral position. If the patient displays unnormal/irregular breathing, initiate CPR again. The AED should remain attached and switched on.

For paediatric patients, the following modifications apply:

1. If it is not possible to immediately alarm 113 or get help, and the child appears lifeless, give 5 mouth-to-mouth ventilations and perform CPR for 1 minute before leaving the child.
2. Depth of chest compressions should be 1/3 of anterior-posterior diameter of chest.
3. For health care professionals, the recommended compressions-to-ventilation ratio in children is 15:2, for all others it is 30:2.

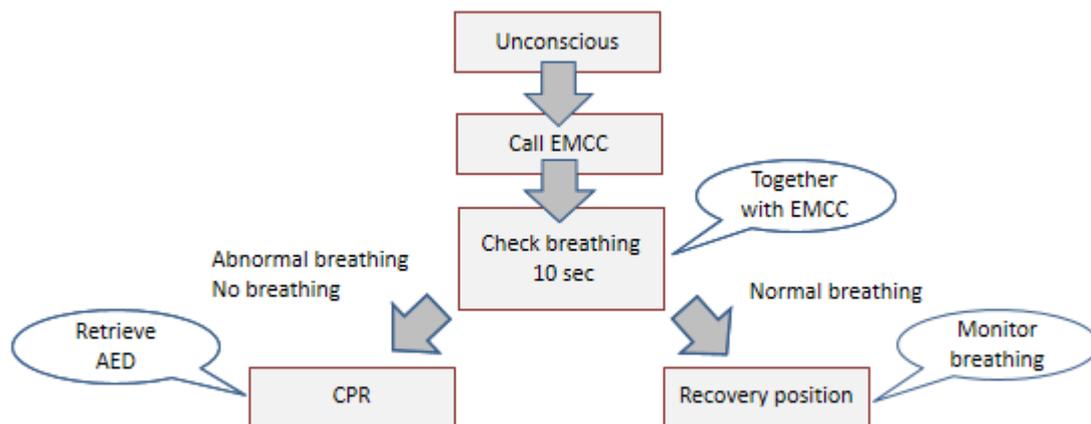


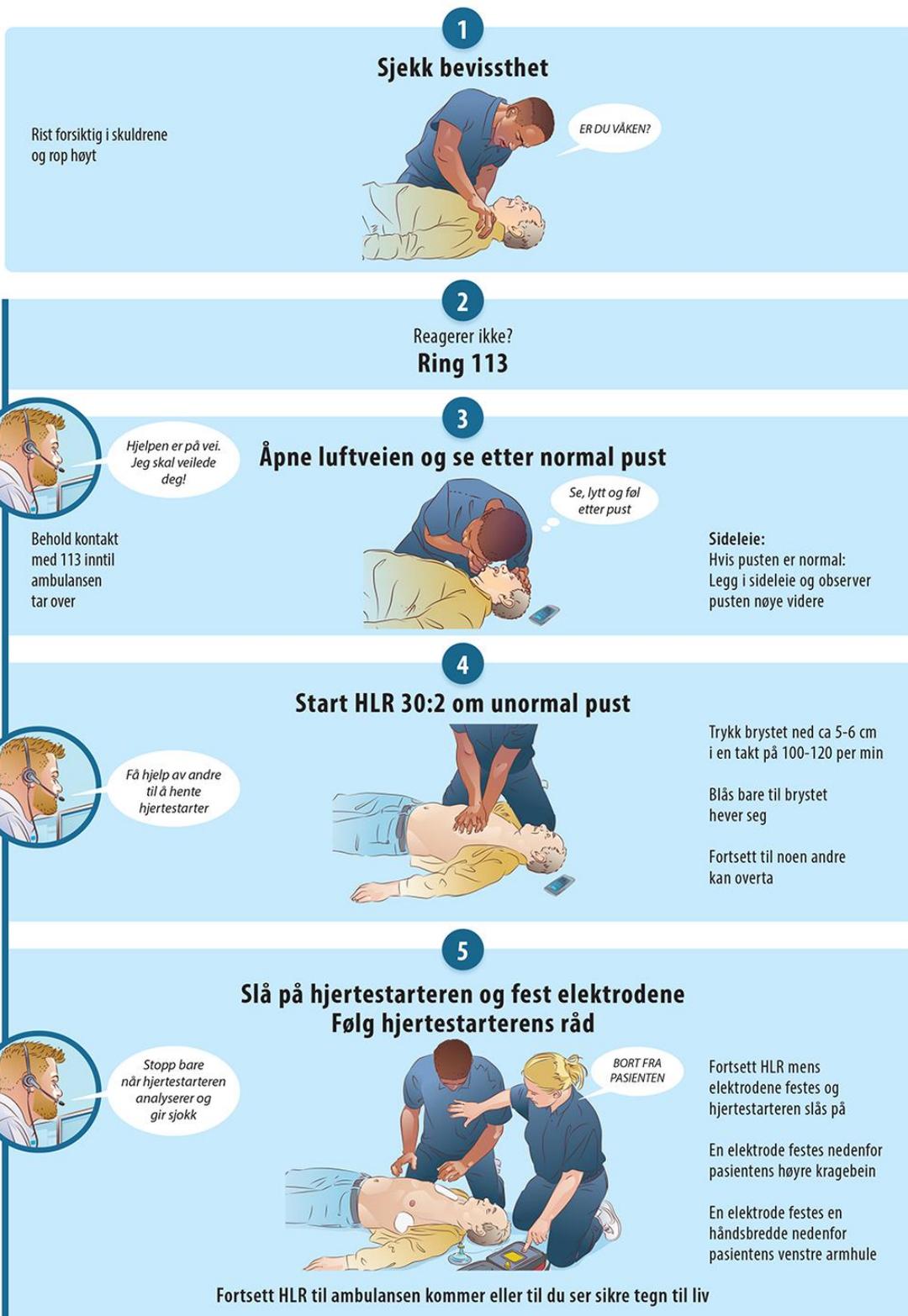
Figure 1: The 2021 Norwegian guideline for adult basic life support.

EMCC advises on retrieval of AED based on number of rescuers on scene, proximity of nearest AED, and expected response interval.

Abbreviations: CPR – Cardiopulmonary resuscitation, EMCC – Emergency Medical Communication Centre, AED – Semi-automatic external defibrillator

(Figure 2 on next page)

Hjerte-lungeredning til voksne (HLR)



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Figure 2: The 2021 Norwegian guideline for adult basic life support

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