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A Vital Skill

Rescuers — alone or as a team — should learn how to provide in-water ventilation

In-water ventilation provides a victim with quick, effective care when immediate extrication is not an option. It's performed on a victim who is unconscious, not breathing, has a pulse and cannot immediately be removed from the water, and/or definitive care will be delayed by 30 seconds or longer. The primary rescuer should have a resuscitation mask, assembled with a one-way valve attached (not within the case) in the fanny pack. This article discusses in-water ventilation drills for a victim who has not sustained a spinal injury.

SINGLE RESCUER SKILLS

Review the following three skills for a single rescuer in shallow water prior to the drills.

Rescue tube placement.

► The primary rescuer should wrap the victim's arms under the rescue tube, which allows the victim to remain secured. If not, the rescuer will have to continuously stabilize the victim on the tube. Depending on the victim's size and weight, the rescuer might need to slide the rescue tube lower on the victim's body to allow their airway to fall open for in-water ventilations.

► Proper rescue tube placement should allow the rescuer to be hands-free. Conversely, a lack of symmetry in the rescue tube placement could allow it to slip out. Watch out for entanglement with the rescue tube strap.

Airway management, non-spinal victim. The primary rescuer needs to be proficient in opening the airway with the Head-Tilt/Chin-Lift and the Jaw-Thrust maneuver.

► **Head-Tilt/Chin-Lift:** Rescuers should check for a pulse and look down the body for the chest to rise. Ear placement should be directly over the victim's mouth, feeling for breathing. Rescuers sometimes forget to do the pulse-check due to using both hands on the Head-Tilt/Chin-Lift.

► **Jaw-Thrust maneuver with head exten-**

sion: When checking for breathing, the rescuer's head should be slightly to one side, positioning his or her ear directly over the victim's mouth.

► The rescuer should complete the Head-Tilt/Chin-Lift, and then move the body position, using the Jaw-Thrust maneuver with head extension for rescue breaths. This is because many people's facial structure, along with the lack of a firm surface, can make it difficult to keep the resuscitation mask firmly sealed.

Resuscitation mask use. The rescuer should be able to remove the mask with one hand, even though the fanny pack is underwater. Shake the mask to remove water before placing it on the victim.

► The rescuer should consider the Jaw-

Thrust maneuver with head extension, using the double "C" double "E" method to seal the mask from the head position. This uses the fingers and thumbs pushing against each other while gripping the victim's jaw to keep the mask sealed, whereas the Head-Tilt/Chin-Lift requires downward pressure on a hard surface to assist in sealing the mask.

► The mask seal should prevent water from entering or air escaping if the mask-face contact line is submerged. Mask can be submerged with only the tip of the one-way valve exposed and still deliver rescue breaths.

► When giving ventilations, the rescuer needs to be directly above the victim. This will be challenging when ventilations are done in deep water. Note: If "victim" is anxious about



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wearing the resuscitation mask, remove the valve to boost air flow, or switch victims.

TEAM RESCUER SKILLS

After the single rescuer skills review, divide lifeguards into groups of three or four to work on these three team rescuer skills:

Primary lifeguard support. The primary lifeguard may need aid in victim stabilization, which can be done through additional rescue tube placement or having a secondary lifeguard support the victim or primary lifeguard with a rescue tube or their own body.

► In deeper water, the primary guard may be challenged to get high enough over the victim's head to provide adequate breaths. That can be remedied by either lifting the primary guard, or slightly submerging the victim.

Sequencing from victim contact to in-water ventilations. It's important for the primary and secondary guards to figure out how to work together. Here's an example of effective sequencing:

- Primary rescues victim
- Secondary assists in placing rescue tube
- Primary checks breathing and pulse
- Secondary preps resuscitation mask, and passes mask to primary
- Primary gives rescue breaths, then begins

rescue breathing

- Secondary assists in airway management, or supports victim, or supports primary
- Primary reassesses victim
- Secondary determines extrication route

Determining extrication needs and continued victim care. Definitive care happens out of water, so setting a quick, efficient extrication route is necessary. Movement toward land can be in progress while assessing the patient and giving rescue breaths.

► Guards must decide if they'll provide the two initial breaths, then rapidly tow victim in, or tow while continuing rescue breathing.

Clarification: "Airway management" refers to opening/maintaining airway during and after checking for breathing and a pulse.

SINGLE RESCUER DRILLS

► Victim is face down on the surface; drill ends when victim is secured and airway management has occurred. Rescuer assesses victim and states, "Victim has a pulse and is breathing." (15-20 seconds)

► Victim is face down on the surface; drill ends when victim is secured and airway management has occurred. Rescuer states, "Victim has a pulse, but is not breathing." Resuscitation mask is pulled and two breaths are

delivered. Rescuer assesses victim and states, "Victim is breathing." (15-20 seconds)

TEAM RESCUER DRILLS

► Victim is face down on surface; drill ends when victim is secured, airway management has occurred. Rescuer assesses victim and states, "Victim has a pulse, but is not breathing." Resuscitation mask is pulled, two breaths given. Rescuer states, "Victim is breathing." Rescuers tow victim to side. (20 seconds)

► Victim is face down on surface; drill ends when victim is secured, airway management has occurred. Rescuer assesses victim and states, "Victim has a pulse, but is not breathing." Resuscitation mask is pulled and two breaths are given. Rescuer begins rescue breathing for three breaths. (30 seconds)

► Change-up variation: As the trainer, during one of the drills you'll state which rescuer has the resuscitation mask, or that neither have one. (20-40 seconds)

Variables can be substituted to change the drills' difficulty. This includes shallow (3-5 feet), mid-depth (5-7 feet), deep (over 7 feet), and victim being face up, face down, submerged face up and face down, facing rescuer, facing away, and on the bottom. ■



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LIFESAVING MOVES: When administering in-water ventilations, the rescuer needs to be directly over the victim to deliver adequate breaths (opposite page). To seal the resuscitation mask, the rescuer can use the double "C" double "E" hold (this page).