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This brief is one in a series of non-technical articles that discuss bystander delivery of oxygen during breathing emergencies

Creating an Emergency Medical Response Plan

Imagine that you just said “good morning” to your good friend at work and an instant later she collapsed to the floor, unresponsive and not breathing, one of over 350,000 annual victims of a cardiac arrest. Would you know what to do or would you panic, wasting precious moments and jeopardizing your friend’s chances for survival? Proper planning for and response to medical emergencies can help save lives.

Assessing Your Response Situation

Emergency medical response plans are common in facilities like schoolsⁱ but may be weak or lacking at other public locations like golf clubs and corporate offices. Strong planning can help save lives and may reduce premises liability lawsuits^{ii,iii} for facilities of all sizes and capabilities.

Large facilities may have a full-time nurse on-site who has a dedicated landline or radio that connects directly to 911, medications like Epinephrine auto-injectors to combat allergic reactions and compressed oxygen cylinders to provide support to victims of breathing emergencies. Even in such well-resourced settings some of these medical tools must be kept out of public areas for safety reasons. Compressed oxygen cylinders, for example, cannot be stored in a public hallway or cafeteria because of the risk of rupture and explosion and can be used only by trained personnel.

Response by Severity of the Emergency

Physicians, nurses and paramedics are examples of medical personnel who are trained to reliably sort medical emergencies into one of three broad categories:

- Conditions that can cause death or disability within minutes and require immediate action such as cardiac arrest and breathing difficulties
- Conditions that are potentially life-threatening or disabling and require action as soon as possible such as burns, broken bones and allergic reactions
- Conditions that aren’t likely life-threatening such as mild fever, headache and minor cuts

Facilities that do not employ full-time medical personnel on-site must rely upon employees to alert 911 and assist the victim until emergency medical services (EMS) arrive on-scene. Facilities of all sizes should be equipped with all life support tools that can be made available to and used by untrained personnel such as a basic first aid kit, automated external defibrillator (AED) and an R15 portable emergency oxygen device. Unlike conventional compressed oxygen cylinders, **the R15 device is cleared** by the Food and Drug Administration (FDA) **for use in public spaces by untrained bystanders.**

Employee Actions During Medical Emergencies

Non-medical employees must be trained on what actions to take, including proper use of support tools, and following a plan that is successfully implemented by select managers or safety committee. Although the specific actions in a plan can reflect unique facets of a facility, the following steps are common in any medical emergency response plan.

1. **Contact 911** and tell the operator:
 - a. the location of the victim – the street address, floor, nearest entry into the facility, etc.
 - b. the time that the medical emergency started
 - c. the condition of the victim (e.g. unconscious, no pulse, bleeding, burned)
2. Send an associate to **meet EMS on their arrival** and navigate them to the victim’s location and answer questions regarding the facility and emergency event
3. **Act with all available tools** such as a first aid kit. In cases of cardiac arrest or breathing emergencies the specific actions below are appropriate

Possible Cardiac Arrest ^{iv} (unresponsive, no pulse, no breath)	All Breathing Emergencies ^v (difficulty breathing, conscious or unresponsive)
<ul style="list-style-type: none"> ✓ Attach the AED pads to the victim, activate the AED and follow the voice instructions ✓ Attach the R15 face mask to the victim and activate the R15 device to start oxygen delivery to the victim ✓ Initiate cardio pulmonary resuscitation (CPR) until EMS arrives 	<ul style="list-style-type: none"> ✓ If the victim has medication such as an inhaler for asthma, then help the victim access their medication ✓ Attach the R15 face mask to the victim and activate the device to start oxygen delivery to the victim ✓ Monitor the victim until EMS arrives and if symptoms change to indicate a possible cardiac arrest then follow steps for cardiac arrest

Medical emergencies can occur at any time and place, putting the victim of the emergency in a potentially life-threatening situation. Employees who are properly trained and follow an emergency response plan can provide life-saving support until trained EMS personnel arrive on scene.

To read more articles like this one please visit
<https://rapidoxygen.com/white-papers>

ⁱ An Act Relative to Medical Emergency Response Plans for Schools [online 03Apr19> <https://malegislature.gov/Laws/SessionLaws/Acts/2012/Chapter77>

ⁱⁱ How a Premises Liability Injury Case Works, AllLaw, [online 5Apr19> <https://www.alllaw.com/articles/nolo/personal-injury/how-premises-liability-case-works.html>

ⁱⁱⁱ Shock Value: How to Protect Your Company from a Negligence Lawsuit on Account of an AED, Seyfarth Shaw LLP, [online 5Apr19> <http://tinyurl.com/yyz52bln>

^{iv} Emergency Treatment of Cardiac Arrest, AHA [online 5Apr19> <https://www.heart.org/en/health-topics/cardiac-arrest/emergency-treatment-of-cardiac-arrest>

^v Breathing Difficulty, Medline Plus, [online 5Apr19> <https://medlineplus.gov/ency/article/003075.htm>