



PEDIATRIC FIRST AID | CPR AED

SKILL GUIDE

VERSION 10, 2026



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CHILD – RESPONDING TO AN EMERGENCY

1 Begin with Assessment

- Assess scene safety. Take standard precautions. *(The scene is safe.)*
- Assess responsiveness. Tap them and ask loudly, “Are you okay?” *(The child is unresponsive.)*
- Activate EMS and/or your EAP. Send someone to get a first aid kit and an AED *(unless readily available to you).*
- Assess breathing for at least 5 seconds and no more than 10 seconds. *(The unresponsive child is breathing normally.)*



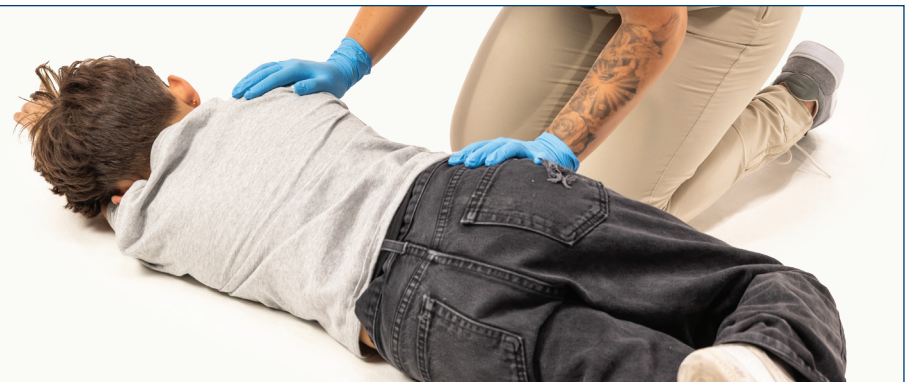
2 Position Arms & Leg

- Cradle the infant in your arms, with their head tilted downwards.
- Place the child on their side in the recovery position to help protect the airway *(or verbalize steps 2–3).*
- With the child lying down, face up, place the arm nearest you up alongside the child's head.
- Bring the far arm across the chest and place the back of the hand against the cheek.
- Grasp the far leg to bend the knee and pull it up so the foot is flat on the ground.



3 Roll Child

- Grasping the shoulder and hip, roll the child toward you in a single motion, keeping the head, shoulders, and body from twisting.
- Make sure the head ends up resting on the extended arm and roll the child far enough for the face to be angled toward the ground.
- Make sure there is no pressure on the chest that might restrict breathing.



4

Operate AED

- Power on the AED training device. Follow the voice prompts.
- Remove any clothing that prevents direct contact between the pads and the training manikin's skin.



5

Apply Pads

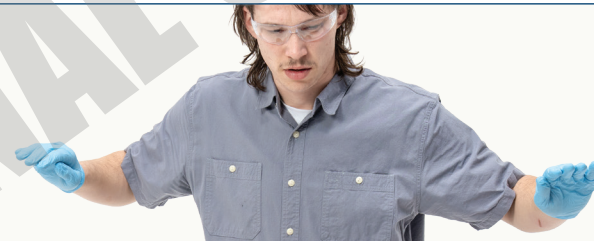
- Locate the pediatric defibrillation pads.
- Peel the pads from the backing sheet one at a time and place each according to the pictures.



6

Allow AED Analysis

- Clear the training manikin and allow the AED to analyze the heart rhythm.
- Be certain that no one is touching the training manikin.



7

Clear Again & Deliver Shock

- If the AED advises a shock, it will prompt you to clear again. Loudly say, "Everybody clear," or something similar.
- Be certain that no one is touching the training manikin.
- Simulate delivering a shock.



8

Continue CPR AED

- Immediately resume high-quality CPR starting with chest compressions.
- Continue high-quality CPR AED until another CPR provider, someone with more advanced training, or EMS providers arrive and take over, or until the child starts breathing, moving, or reacting in other ways.



SCENARIO SHEET THREE

CHILD – USING A CPR MASK

You may change the underlined words to your occupational setting: childcare, camp, school, entertainment, recreation, sports, etc.

You are a trained pediatric CPR provider who has responded to A RADIO REQUEST for a child pulled unresponsive from THE RETENTION POND. The scene is safe. You have taken standard precautions. The child is limp, unresponsive, and not breathing. EMS has been activated and an AED is on the way. You have a CPR mask with a one-way valve and a first aid kit. Demonstrate what to do next.

PROCEDURE	PROVIDER ACTION (PERFORMANCE CRITERIA)	PROMPTER
Position Mask	Place the child/adult CPR mask flat on the child/adult training manikin's face with the top of the mask over the bridge of the nose.	ⓘ Prompt with Provider Action only as needed.
Open Airway	- Tilt the head and lift the chin to open the airway. - Lift the training manikin's face up into the mask to create an airtight seal.	ⓘ Prompt with Provider Action only as needed.
Deliver Breaths	- Give 2 breaths by blowing through the valve opening. - Each breath is 1 second in length. - Give enough air to create a visible rise of the chest, but no more.	ⓘ Prompt with Provider Action only as needed.
END SCENARIO. WHAT WENT RIGHT? WHAT NEEDED IMPROVEMENT?		

SCENARIO SHEET SEVENTEEN

OPTIONAL

CHILD – USING A MALLEABLE SPLINT

You may change the underlined words to your occupational setting: childcare, camp, school, entertainment, recreation, sports, etc.

You are the sole trained first aid provider responding to AN EMERGENCY ALERT TEXT for a child who fell. As you reach the scene, you see A 6-YEAR-OLD LYING AT THE BOTTOM OF A STAIRWAY. The scene is safe. The crying child is responsive. EMS is activated but the response is significantly delayed. You have disposable gloves and a first aid kit with a malleable splint. Consent has been established by an emergency care consent form signed by a parent/guardian. Demonstrate what to do next.

PROCEDURE	PROVIDER ACTION (PERFORMANCE CRITERIA)	PROMPTER
Approach	Introduce yourself and, with calm reassurance, let the child know you are there to help.	ⓘ Prompt with Provider Action only as needed.
Assess for Life-Threatening Conditions	Quickly scan the child for life-threatening conditions.	<i>No life-threatening conditions are present.</i> <i>The child is whimpering in pain and says, "My ankle hurts a lot. Is it broken?"</i>
Assess Injured Limb	Gently expose and inspect the injury site for open wounds.	<i>The ankle is obviously deformed and swollen. There are no open wounds.</i>
Shape Splint	Shape a properly sized splint to match the contours of the injured limb.	ⓘ Prompt with Provider Action only as needed.
Set Splint	Place the splint to immobilize the injury site, along with the joints above and below it.	ⓘ Prompt with Provider Action only as needed.
Secure Splint & Monitor Limb	- Use tape, self-adhesive roller or elastic bandages, or plastic cling film to secure the splint to the limb. - Be careful not to impair circulation. - Monitor for signs of poor circulation, like coolness, discoloration, pain, or numbness.	ⓘ Prompt with Provider Action only as needed.
END SCENARIO. WHAT WENT RIGHT? WHAT NEEDED IMPROVEMENT?		

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HSI is the successor organization to American Safety and Health Institute (ASHI), MEDIC First Aid, and EMS Safety.



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