



RESCUE BREATHING POLICY:

As the authority in aquatic life saving education, The Royal Life Saving Society Canada acknowledge its responsibility to inform participants of possible cross-infection resulting from rescue breathing practices.

Medical evidence suggests that cross-infection may result from mouth-to-mouth, hand-to-mouth, hand-to-eye or hand-to-nose contact. Diseases that may be transmitted in this manner include: infectious mononucleosis, hepatitis A (infectious hepatitis), and hepatitis B (serum hepatitis), herpes simplex, the common cold (rhinovirus) and tuberculosis.

There is no evidence that Acquired Immune Deficiency Syndrome (AIDS) can be transmitted as a result of mouth-to-mouth contact.

The Royal Life Saving Society Canada does not require direct contact with another person in rescue breathing in order to achieve an RLSSC award. Instructors and Examiners should respect the candidate's preference to demonstrate rescue breathing with the partner of their choice (with or without direct contact) or mannequins or suitable device.

When a partner is selected, candidates demonstrate all steps in rescue (including airway management) up to the point of contact. The evaluator should question the candidate to ensure that he/she understands the reasons for, and methods of, effectively sealing the mouth and nose and inflating the victim's lungs.

When mannequins are used, candidates demonstrate all the procedures for rescue breathing including an effective seal of the mouth or nose and ability to inflate the victim's lungs. To minimize the risk of transferring an infection between participants, minimize the number of individuals using the same mannequin. After each candidate, the mannequin should be effectively cleaned according to acceptable medical procedures.

When a device is selected, it should allow the candidate to demonstrate correct seal and inflation.

To minimize the risk of transferring an infection, individuals with known transmittable diseases or with obvious infections (i.e. colds, cold sores, coughs or respiratory infections) should not participate in rescue breathing practice.

(This policy was adopted by the Royal Life Saving Society in December 1985.)