



The 2013 NLI Recert FAQ document posed the following question/answer regarding vomiting:

If a victim vomits during the 2 breaths, does the rescuer clear the airway and then check for breathing?

No. Research has shown that lay rescuers are unable to accurately tell the difference between vomiting and regurgitation. If a victim vomits during rescue breaths (or compressions), the rescuer will clear the airway; provide the ventilations, and then resume CPR. The rescuer will only reassess the patient if they are starting to show signs of consciousness.

It was brought to the attention of the Branch that the answer was unclear, especially surrounding the procedure where vomit/regurgitation is present during compressions versus rescue breaths.

Clarification #1

While vomiting is still a life sign, lay rescuers report that they are unable to accurately tell the difference between vomiting and regurgitation. Rescuers are stopping CPR to clear an airway and reassess for breathing when regurgitation is present. This is detrimental to a patient who requires CPR to circulate oxygen to the brain and to keep the heart primed for defibrillation. This is why we are now encouraging rescuers to reassess the patient only if they are starting to show more obvious signs of life (e.g. consciousness and/or purposeful movement) rather than relying solely on vomiting.

Clarification #2

Since lifesavers and lifeguards often find their patients in the water, there is a high likelihood that some type of fluid/vomit will be present during resuscitation. It is important to note that all patients will aspirate, the question is just how much and what they are aspirating. Our goal is not to stop all aspiration, but instead to minimize any significant aspiration while providing oxygenation and restoration of circulation in as effective a manner as possible.

- In the event that there is fluid (saliva and/or foam) coming out of the mouth during compressions, the lone rescuer will continue CPR and not clear the airway until they are ready to provide the 2 rescue breaths. Do not reassess ABCs!
- Should the lone rescuer observe a large amount of fluid and/or vomitus (fluid containing particulate) filling the mouth to overflowing, they will need to stop compressions, clear the airway then immediately resume CPR. Do not reassess ABCs!
- In the event that there are two trained rescuers available, the second rescuer should turn the patients head to the side (no spinal suspected) and continuously sweep the fluid/vomit from the airway during compressions until ventilations are required. Trained rescuers will switch positions every 2 minutes to ensure effective compressions. Do not reassess ABCs!
- If the patient has fluid/vomit coming out of the mouth between the two rescue breaths, rescuers will clear the airway prior to providing the second breath. Do not reassess ABCs!
- In the event that the patient vomits during an AED analysis/shock phase, continue the AED protocol, administer a shock if required, clear the airway and resume CPR. Do not reassess ABCs!