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Number of Annual Service Requests: 110,000  
Number of Ambulances: 51  
Business Type(s): Privately-Public Partnership

### **Project Participants:**

Michael Johnson – Regional Director – michael.johnson@amr.net  
Anna Cleese – Community Education Specialist – anna.cleese@amr.net

### **Entry Categories:**

Community Impact

### **Situational Analysis:**

Each year, more than 350,000 cardiac arrests occur outside the hospital. On average, 90% of individuals who experience out-of-hospital cardiac arrest will die. Rapid bystander CPR can double or triple the chance of survival.

Recognizing that early bystander CPR and AED usage can dramatically reduce morbidity and mortality associated with sudden cardiac arrest, and that often it is a lack of training or comfort with their training that prevents lay rescuers from performing CPR; we decided to implement an enhanced bystander CPR program designed to increase lay rescuer comfort with performing CPR as well as improve familiarity with how to properly use an AED..

### **Project Goal:**

1. The goal of the Enhanced Bystander CPR program (EBCPR) was to develop an introductory approach to compression only CPR, EMS system activation, AED operation, and Stop the Bleed treatments. The curriculum was based on American Heart Association training material.

### **Planning and Implementation:**

We sent staff to Las Vegas, Nevada to attend the “Stop the Bleed” train the trainer certification event. We also collected American Heart Association material on hands only CPR. We then integrated this material into practically all our stand by events over 2018.

**Results:**

We performed over 750 hours of EBCPR training in 2018, including events at 8 schools, 3 government offices, 3 fire station open houses, 14 Festivals and Safety Fairs.

We trained approximately 4000 individuals in Compression Only CPR, EMS system Activation, and AED operation, and 700 people in based Stop the Bleed Treatment..

**Impact:**

In the year prior to EBCPR, bystander CPR rates for Sudden Cardiac Arrest were 41.9% and Public AED usage was 6.6%. Following EBCPR, bystander CPR rates increased to 49%, and Public AED usage increased to 11.3%.

**Budget:**

We spent over \$50,000 on EBCPR in 2018. \$47,000 of it going towards AEDs to place into the community, educational supplies, and training. An addition \$3,500 was spent on verification of current public access AEDs in to community.

## C – STANDBYS: TEACH EVERYWHERE

This year AMR trained approximately 4,000 individuals in compression only CPR, EMS system activation, and AED operation. Additionally, we taught 700 people in basic Stop the Bleed treatments. Through the EBCPR program, we have developed an introductory approach to each of these subjects based on American Heart Association training material. AMR works with partnering agencies to present this material at staff trainings, festivals, and schools. We take every standby as an opportunity to reinforce this material. As a result, we take our training equipment to practically every event.

 EBCPR - 774 hrs

### Staff Training:

Supervisor Gioia Office  
Tax Treasurer Office  
Childrens Services Office  
DVC and CCC  
Discovery Bay Elementay  
Pleasant Hill Aquatics Center  
El Cerrito Swim Center

### Students and Schools:

Foothill Middle  
Concord High  
Martinez Adult  
Pittsburg High  
Martin Luthar King Junior High  
Making Waves Academy  
Dozier Libbey Medical High

### Open Houses and Group Events:

Station 59  
Station 78  
Station 53  
Faith Lutheran Church  
Trilogy Community Center

### Safety Fairs:

BayPoint Safety Rodeo  
City of Brentwood  
City of San Pablo  
City of Lafayette  
East County Emergency Preparedness  
Old Navy Safety Fair  
USS POSCO Safety Fair

### Festivals:

Walnut Creek Art and Wine  
Juneteeth Event  
Pleasant Hill 4th of July Celebration  
Lafayette Art and Wine  
Walnut Festival  
Pittsburg Music and Seafoog Festival  
Concord, Dana Night Out



### FOR YOUNGER CHILDREN AND INFANTS

<p><b>1</b> Tilt the head back slightly and lift the chin to open the airway and check for breathing.</p>	<p><b>2</b> If no breathing, give 2 rescue breaths:</p> <table border="1"><tr><td><b>CHILD</b> Pinch the nose shut and make a complete seal over the mouth.</td><td><b>INFANT</b> Make a complete seal over the mouth and nose.</td></tr></table>	<b>CHILD</b> Pinch the nose shut and make a complete seal over the mouth.	<b>INFANT</b> Make a complete seal over the mouth and nose.
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# Hands-Only CPR

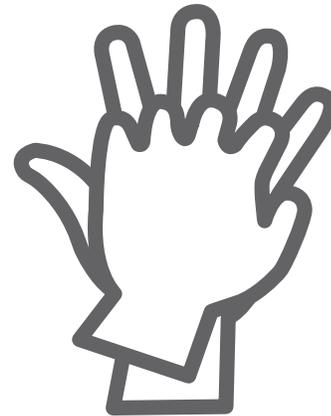
CPR CAN DOUBLE OR EVEN TRIPLE A PERSON'S CHANCE OF SURVIVAL

Learn the two simple steps:

1 Call 911



2 Push hard & fast in the center of the chest



To learn, watch the 90-second Hands-Only CPR video  
at [heart.org/handsonlycpr](https://heart.org/handsonlycpr)



CPR WEEK IS JUNE 1-7

#CPRSAVESLIVES



SAVE A LIFE



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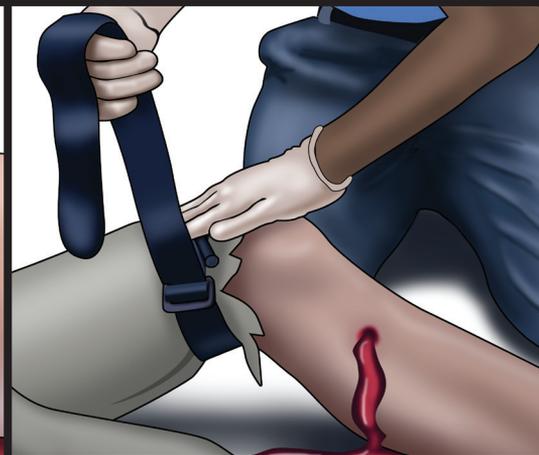
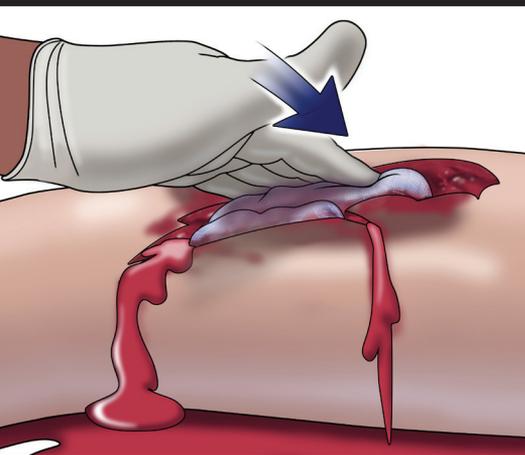


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**BLEEDINGCONTROL.ORG**

# What Everyone Should Know to Stop Bleeding After an Injury





## THE HARTFORD CONSENSUS

The Joint Committee to Increase Survival from Active Shooter and Intentional Mass Casualty Events was convened by the American College of Surgeons in response to the growing number and severity of these events. The committee met in Hartford Connecticut and has produced a number of documents with recommendations. The documents represent the consensus opinion of a multi-disciplinary committee involving medical groups, the military, the National Security Council, Homeland Security, the FBI, law enforcement, fire rescue, and EMS. These recommendations have become known as the Hartford Consensus. The overarching principle of the Hartford Consensus is that no one should die from uncontrolled bleeding. The Hartford Consensus recommends that all citizens learn to stop bleeding.

Further information about the Hartford Consensus and bleeding control can be found on the website: [Bleedingcontrol.org](https://bleedingcontrol.org)

# SAVE A LIFE: What Everyone Should Know to Stop Bleeding After an Injury

## Authors:

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## Acknowledgements:

*The authors acknowledge the contributions of Michael Cohen  
and James “Brooks” Hart, CMI to the design of this manual.  
Some images adapted from Adam Wehrle, EMT-P and NAEMT.*



100+ years

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QUALITY PROGRAMS  
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OF SURGEONS



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# SECTION 1: INTRODUCTION

Welcome to the **Stop the Bleed: Bleeding Control for the Injured** information booklet. Injury results from a wide variety of causes, including accidents or intentional harm, and in a wide variety of locations, such as your home or workplace. It is important that as many people as possible survive their injuries if they sustain trauma.

Uncontrolled bleeding is the number one cause of preventable death from trauma. The greater the number of people who know how to control bleeding in an injured patient, the greater the chances of surviving that injury. You can help save a life by knowing how to stop bleeding if someone, including yourself, is injured.

In this booklet, you will learn the various ways to control bleeding, whether you only have your two hands to use or whether you have a full trauma first aid kit available to you.

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*“Uncontrolled bleeding is the number one cause of preventable death from trauma.”*

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## PRIMARY PRINCIPLES OF TRAUMA CARE RESPONSE

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- Ensure your own safety
- The ABCs of Bleeding
  - **A** – Alert – call 9-1-1
  - **B** – Bleeding – find the bleeding injury
  - **C** – Compress – apply pressure to stop the bleeding by:
    1. Covering the wound with a clean cloth and applying pressure by pushing directly on it with both hands, OR
    2. Using a tourniquet, OR
    3. Packing (stuffing) the wound with gauze or a clean cloth and then applying pressure with both hands.

We will go over each of these points as we go through this booklet.

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*A: Alert ■ B: Bleeding ■ C: Compress*

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## SECTION 2: ENSURE YOUR OWN SAFETY

- Before you offer any help, you must ensure your own safety!
- If you become injured, you will not be able to help the victim
- Provide care to the injured person if the scene is safe for you to do so
- If, at any time, your safety is threatened, attempt to remove yourself (and the victim if possible) from danger and find a safe location
- Protect yourself from blood-borne infections by wearing gloves, if available

# A

## SECTION 3:

### **A** ALERT – CALL 9-1-1



- Get help
  - Call **9-1-1** yourself,
- OR
- Tell someone to call **9-1-1**

- This will notify emergency medical responders and, depending on the situation, police officers to respond to the scene



# B

## SECTION 4: B BLEEDING

- Find the source of bleeding

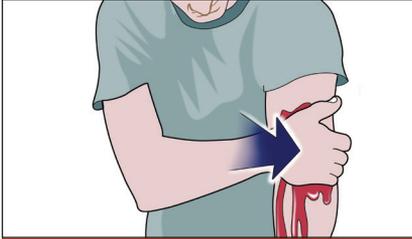


- Open or remove the clothing over the wound so you can clearly see it
- Look for and identify “life-threatening” bleeding

*By removing clothing, you will be able to see injuries that may have been hidden or covered.*



## What is “life-threatening” bleeding?



Blood that is spurting out of the wound.



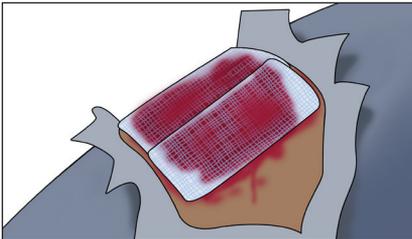
Blood that won't stop coming out of the wound



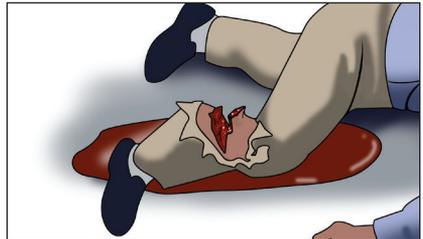
Blood that is pooling on the ground



Clothing that is soaked with blood



Bandages that are soaked with blood



Loss of all or part of an arm or leg



Bleeding in a victim who is now confused or unconscious

# C

## SECTION 5: C COMPRESS

**KEY POINT:** *There are a number of methods that can be used to stop bleeding and they all have one thing in common – compressing a bleeding blood vessel in order to stop the bleeding.*

- If you **don't** have a trauma first aid kit:
  - **Apply Direct Pressure on the wound**  
Cover the wound with a clean cloth and apply pressure by pushing directly on it with both hands (*see page 10*)
- If you **do** have a trauma first aid kit:
  - **For life-threatening bleeding from an arm or leg and a tourniquet is available:**  
Apply the tourniquet (*see page 11*)
  - **For life-threatening bleeding from an arm or leg and a tourniquet is NOT available OR for bleeding from the neck, shoulder or groin:**  
Pack (stuff) the wound with a bleeding control (also called a hemostatic) gauze, plain gauze, or a clean cloth and then apply pressure with both hands (*see page 12*)

We will discuss each of these actions in more detail in the next few pages.

## DIRECT PRESSURE ON A WOUND

---



1. Take any clean cloth (e.g. shirt) and cover the wound
2. If the wound is large and deep, try to “stuff” the cloth down into the wound



3. Apply continuous pressure with both hands directly on top of the bleeding wound
4. Push down as hard as you can
5. Hold pressure to stop bleeding. Continue pressure until relieved by medical responders

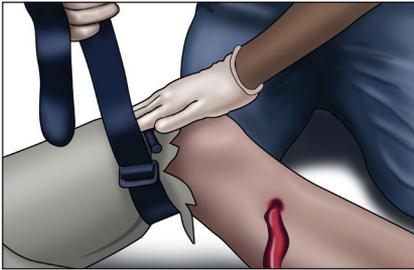
## APPLYING A TOURNIQUET

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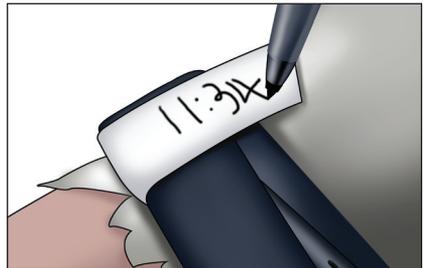
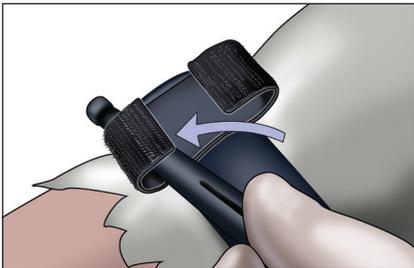
### *If you do have a trauma first aid kit:*

For life-threatening bleeding from an arm or leg and a tourniquet is available:

- Apply the tourniquet
  1. Wrap the tourniquet around the bleeding arm or leg about 2 to 3 inches above the bleeding site (*be sure NOT to place the tourniquet onto a joint – go above the joint if necessary*)



2. Pull the free end of the tourniquet to make it as tight as possible and secure the free end
3. Twist or wind the windlass until bleeding stops



4. Secure the windlass to keep the tourniquet tight
5. Note the time the tourniquet was applied

*Note: A tourniquet will cause pain but it is necessary to stop life-threatening bleeding.*

## WOUND PACKING AND DIRECT PRESSURE

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### *If you do have a trauma first aid kit:*

For life-threatening bleeding from an arm or leg and a tourniquet is **NOT** available

OR

For life-threatening bleeding from the neck, shoulder or groin:

- Pack (stuff) the wound with bleeding control gauze (also called hemostatic gauze), plain gauze, or a clean cloth and then apply pressure with both hands.



1. Open the clothing over the bleeding wound
2. Wipe away any pooled blood

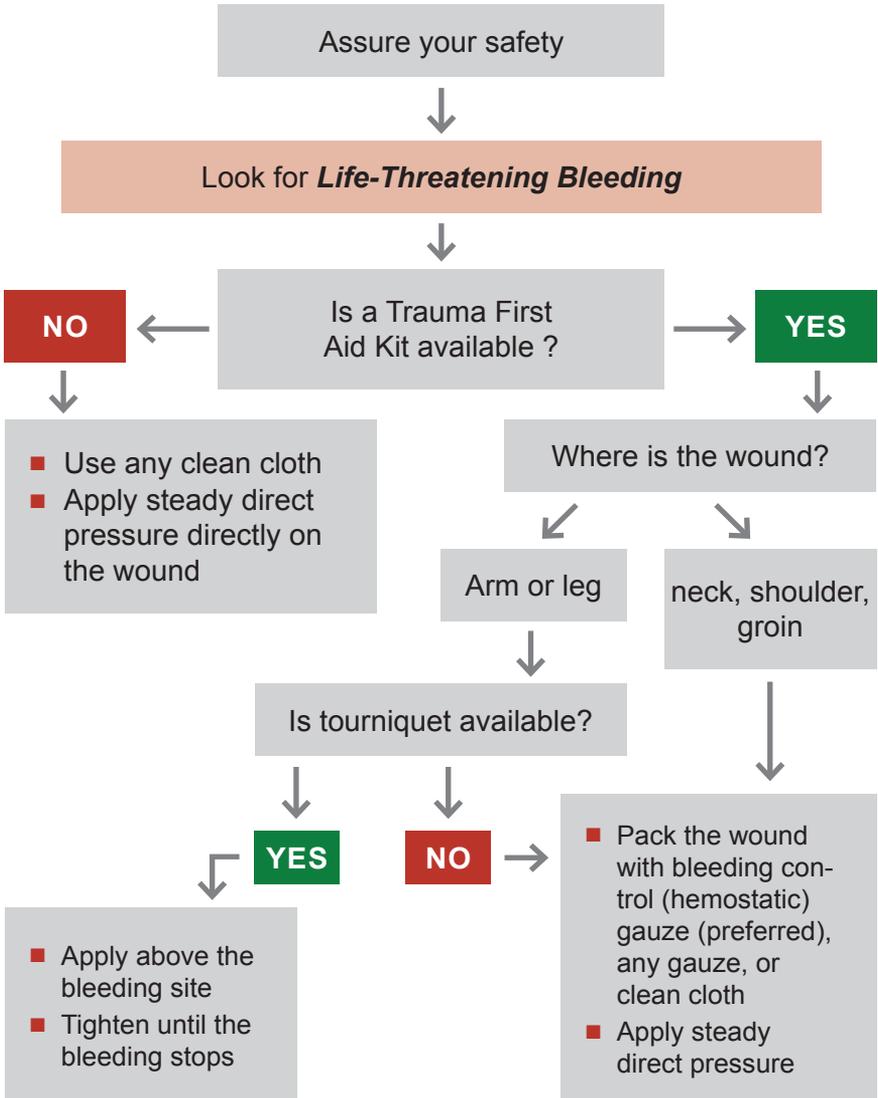


3. Pack (stuff) the wound with bleeding control gauze (preferred), plain gauze, or clean cloth.



4. Apply steady pressure with both hands directly on top of the bleeding wound
5. Push down as hard as you can
6. Hold pressure to stop bleeding. Continue pressure until relieved by medical responders.

# SECTION 6: SUMMARY





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**BLEEDINGCONTROL.ORG**

The only thing more tragic than a death from bleeding...  
**IS A DEATH THAT COULD HAVE BEEN PREVENTED.**

The 'Stop the Bleed' campaign was initiated by a federal interagency workgroup convened by the National Security Council Staff, The White House. The purpose of the campaign is to build national resilience by better preparing the public to save lives by raising awareness of basic actions to stop life threatening bleeding following everyday emergencies and man-made and natural disasters. Advances made by military medicine and research in hemorrhage control during the wars in Afghanistan and Iraq have informed the work of this initiative which exemplifies translation of knowledge back to the homeland to the benefit of the general public. 'Stop the Bleed' is a registered service mark of the Department of the Defense.

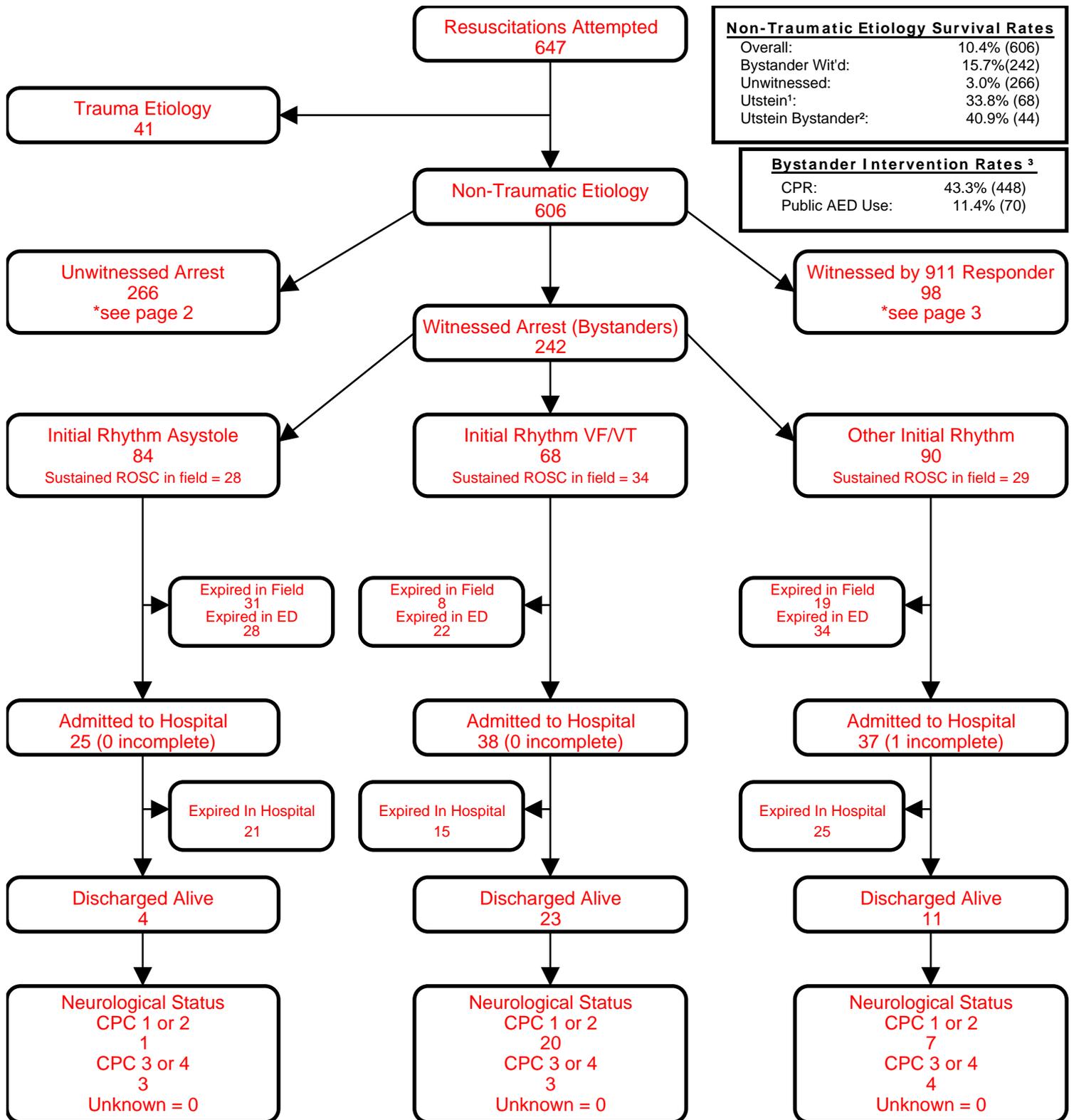
Use of the equipment and the training does not guarantee that all bleeding will be stopped or that all lives will be saved.

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# Utstein Survival Report

AMR Contra Costa

Service Date: From 1/1/2016 Through 12/31/2016



<sup>1</sup>Utstein: Witnessed by bystander and found in shockable rhythm.

<sup>2</sup>Utstein Bystander: Witnessed by bystander, found in shockable rhythm, and received some bystander intervention (CPR and/or AED application).

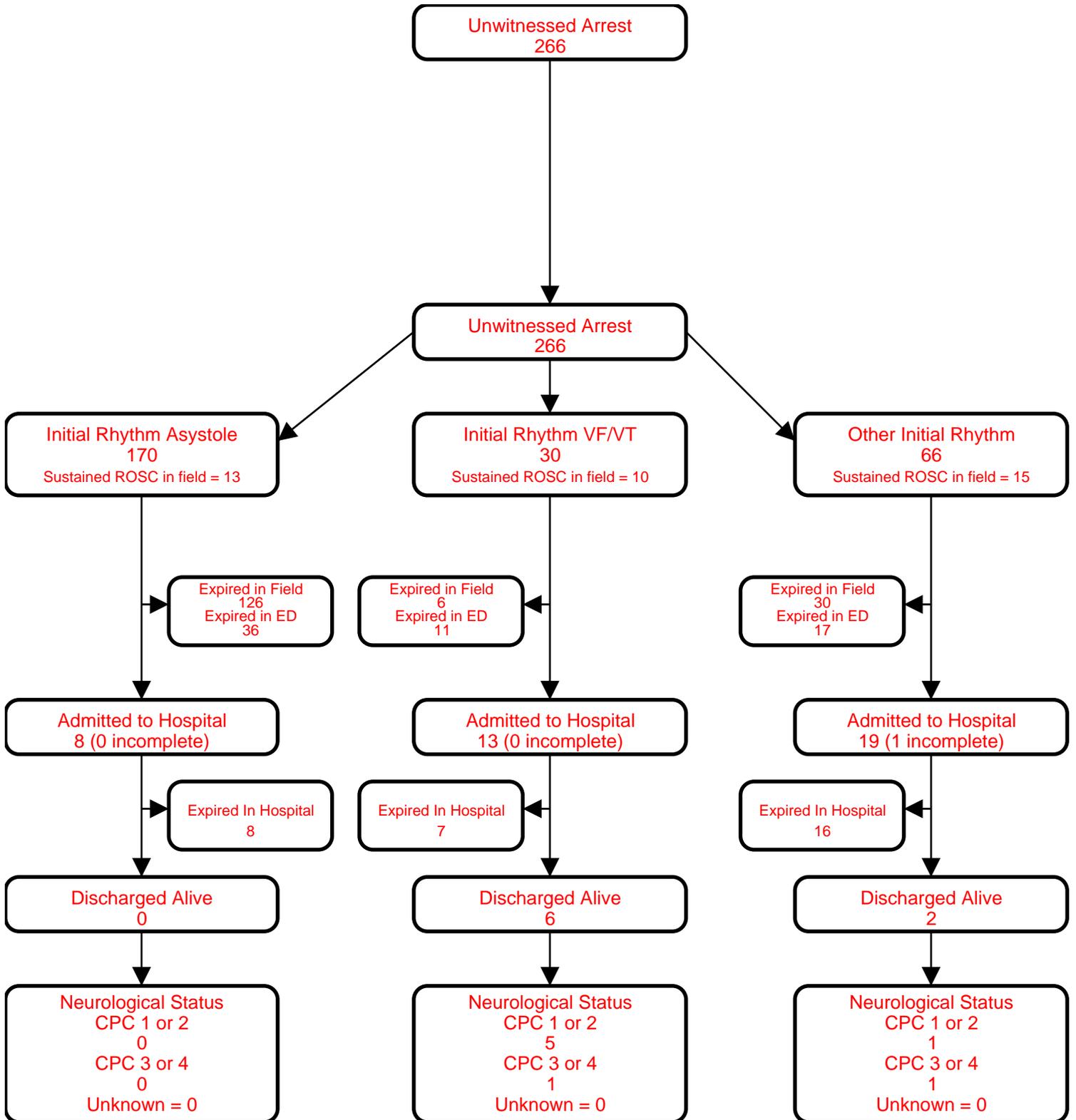
<sup>3</sup>Bystander CPR rate excludes 911 Responder Witnessed, Nursing Home, and Healthcare Facility arrests. Public AED Use rate excludes 911 Responder Witnessed, Home/Residence, Nursing Home, and Healthcare Facility arrests.

\*Only data from the previous calendar year is fully audited. Data from the current calendar year is dynamic.

# Utstein Survival Report

AMR Contra Costa

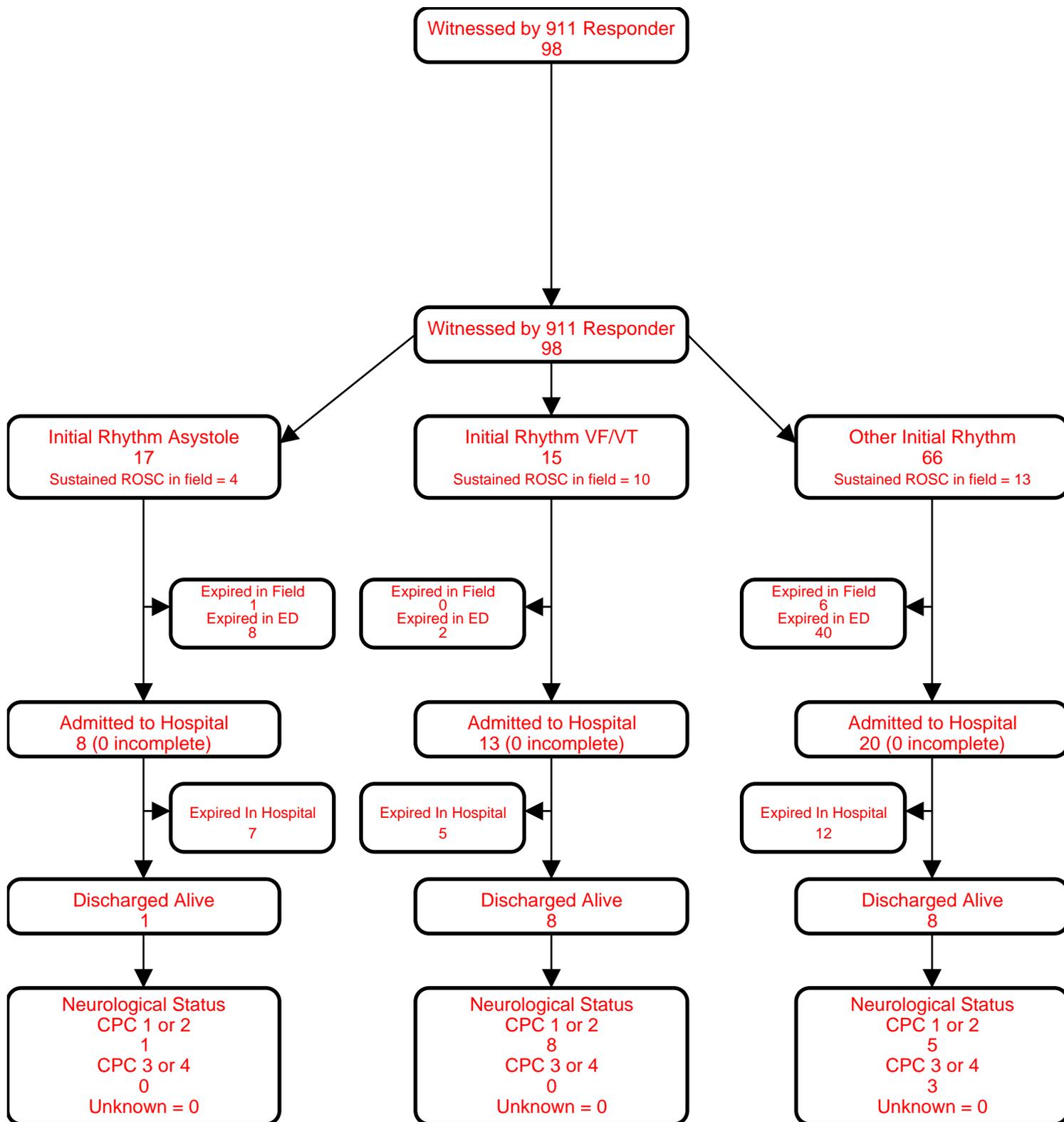
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AMR Contra Costa

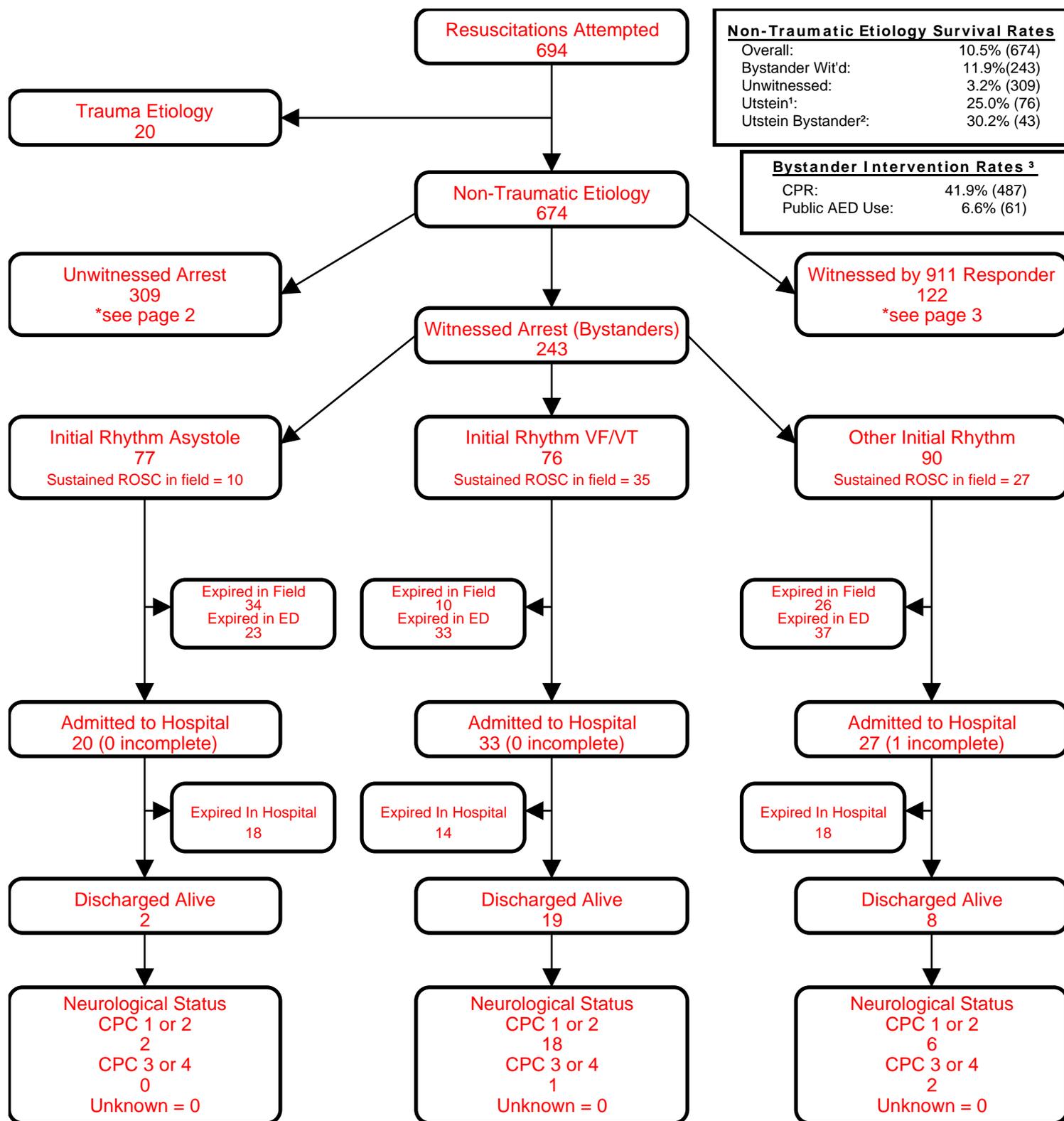
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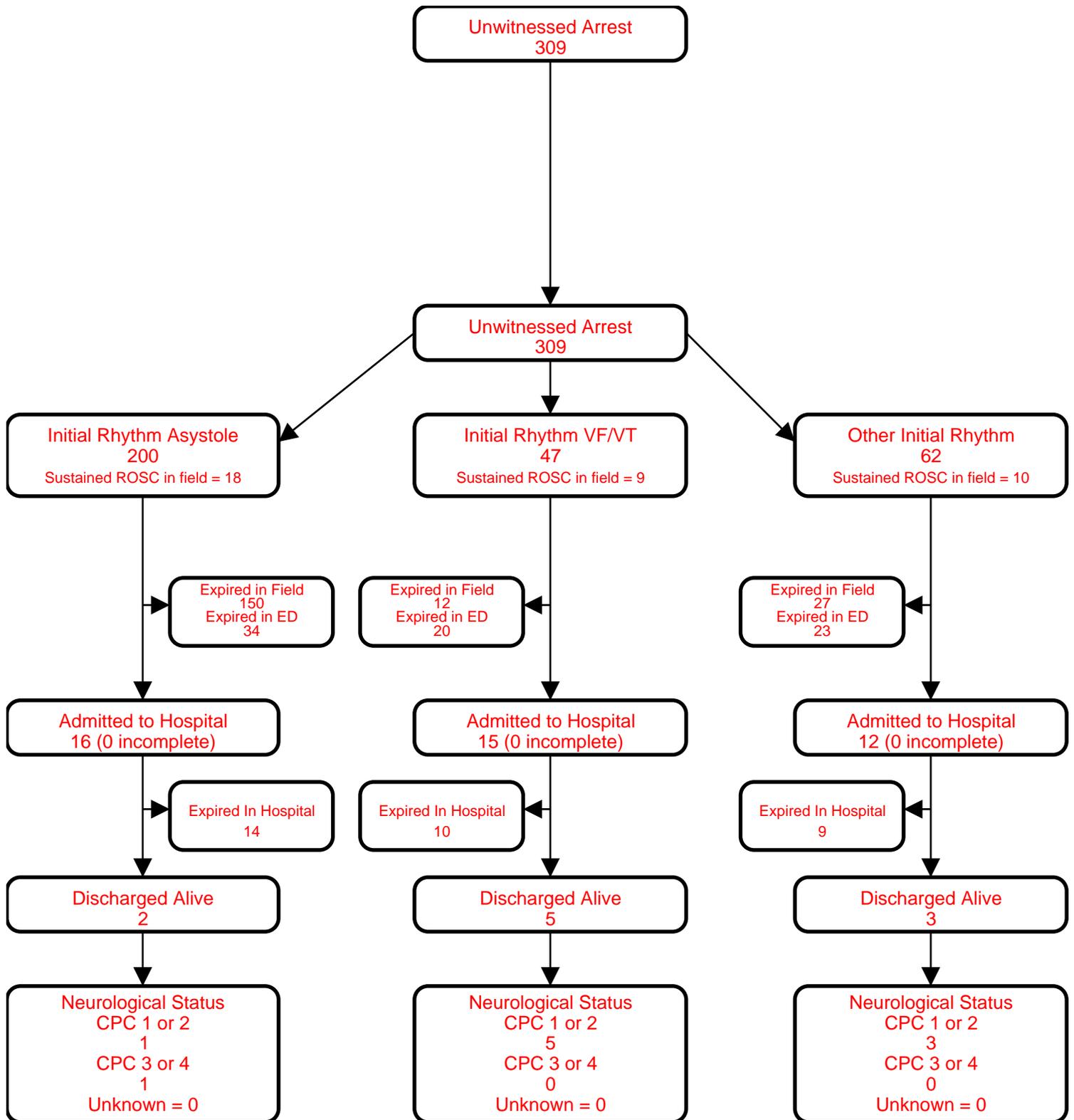
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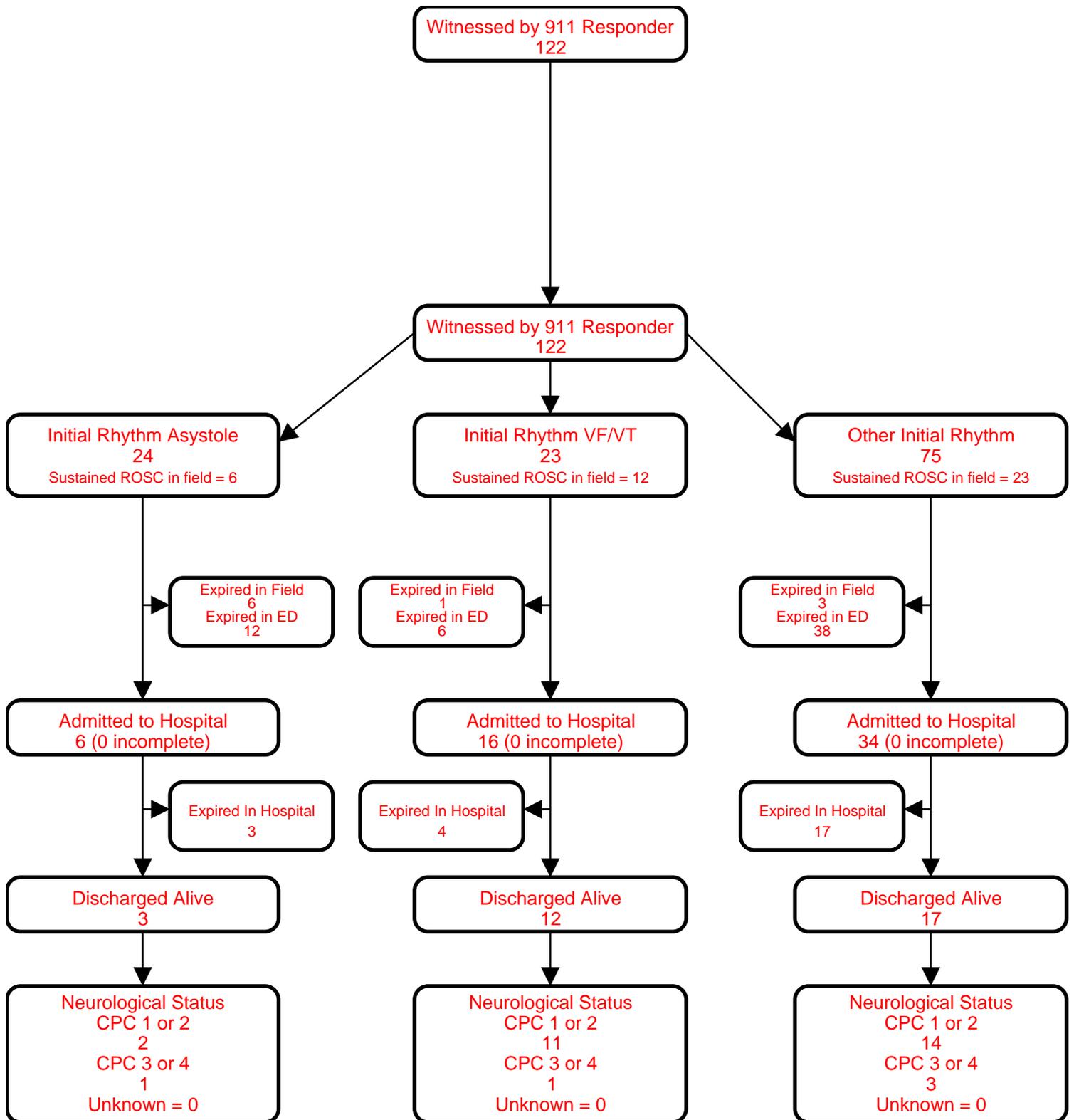
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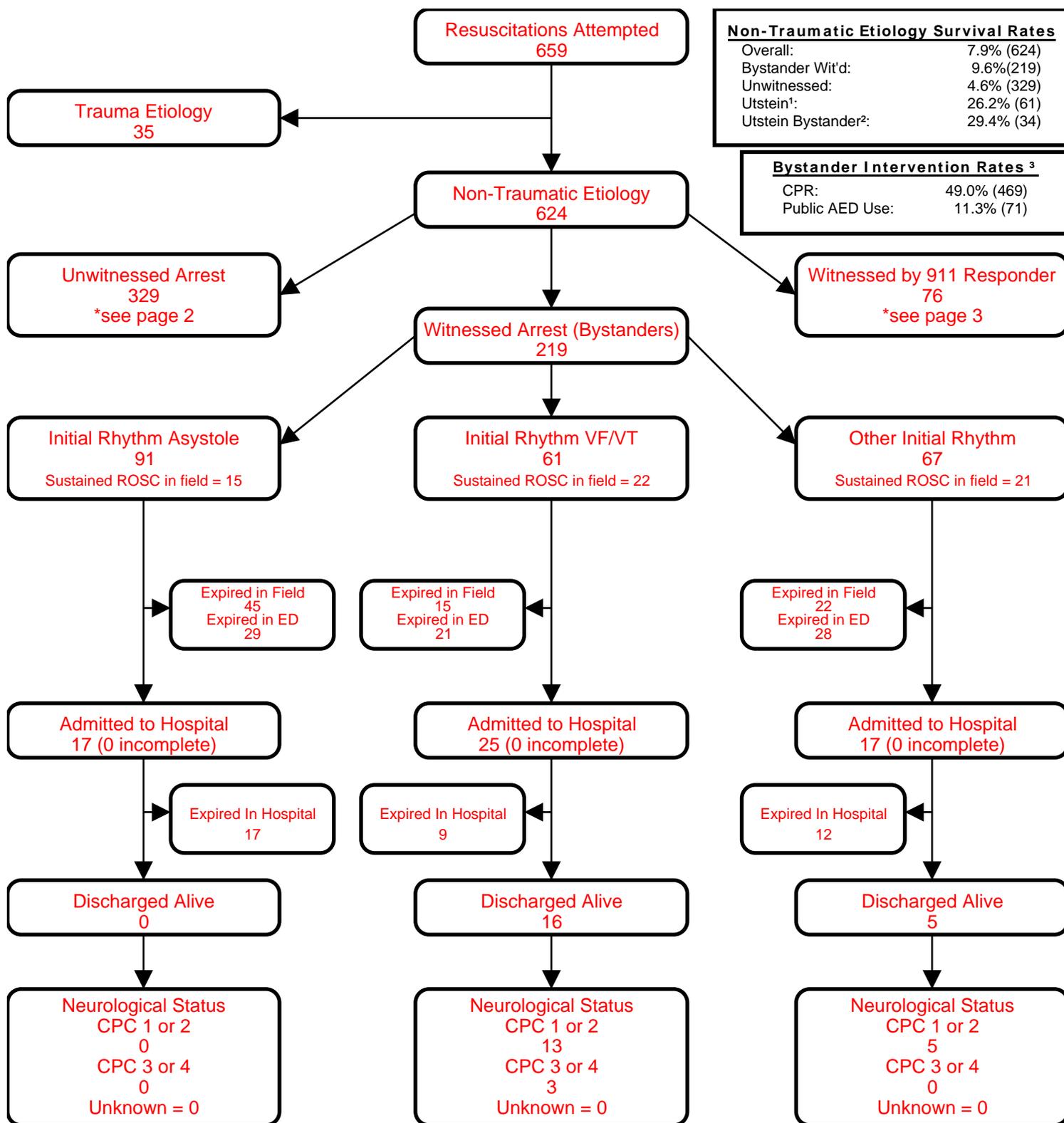
Service Date: From 1/1/2017 Through 12/31/2017



# Utstein Survival Report

AMR Contra Costa

Service Date: From 1/1/2018 Through 12/31/2018



Non-Traumatic Etiology Survival Rates	
Overall:	7.9% (624)
Bystander Wit'd:	9.6% (219)
Unwitnessed:	4.6% (329)
Utstein <sup>1</sup> :	26.2% (61)
Utstein Bystander <sup>2</sup> :	29.4% (34)

Bystander Intervention Rates <sup>3</sup>	
CPR:	49.0% (469)
Public AED Use:	11.3% (71)

<sup>1</sup>Utstein: Witnessed by bystander and found in shockable rhythm.

<sup>2</sup>Utstein Bystander: Witnessed by bystander, found in shockable rhythm, and received some bystander intervention (CPR and/or AED application).

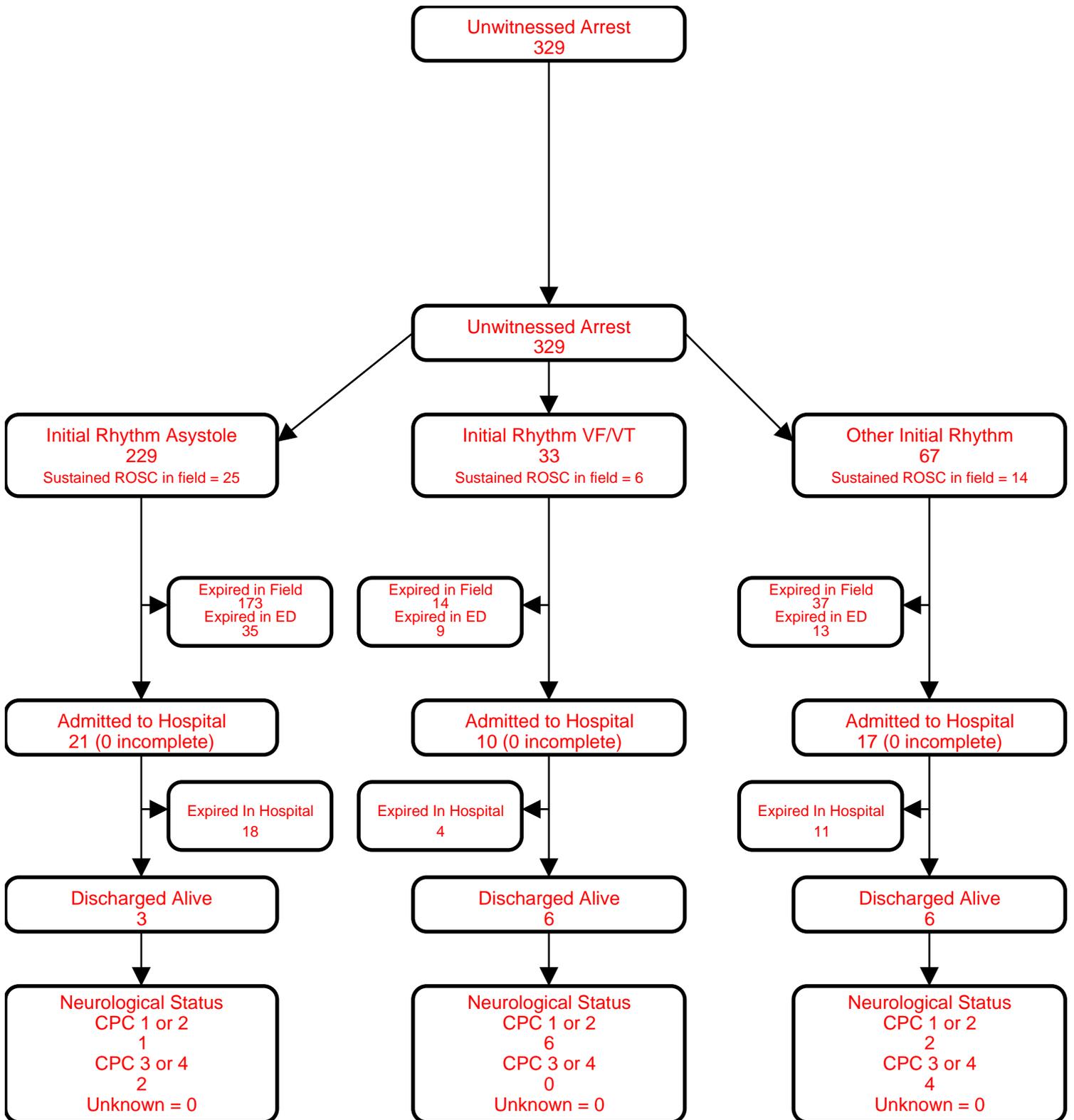
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