

# BABYSITTER'S TRAINING IN-CLASS HANDOUTS



American  
Red Cross





## IN-CLASS ACTIVITY WORKSHEET 1-1

# Leadership Skills

**Directions:** Pick **three** skills you are good at for babysitting and put a checkmark next to them. Then pick **three** skills you want to get better at and circle them.

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|--|--|---|
| <input type="checkbox"/> Planning        | <input type="checkbox"/> Recognizing strengths in others | <input type="checkbox"/> Negotiation            |
| <input type="checkbox"/> Communication   | <input type="checkbox"/> Organization                    | <input type="checkbox"/> Patience               |
| <input type="checkbox"/> Empathy         | <input type="checkbox"/> Motivation                      | <input type="checkbox"/> Listening              |
| <input type="checkbox"/> Creativity      | <input type="checkbox"/> Delegation                      | <input type="checkbox"/> Encouragement          |
| <input type="checkbox"/> Positivity      | <input type="checkbox"/> Honesty                         | <input type="checkbox"/> Fairness               |
| <input type="checkbox"/> Adaptability    | <input type="checkbox"/> Problem-solving                 | <input type="checkbox"/> Teamwork               |
| <input type="checkbox"/> Time management | <input type="checkbox"/> Conflict resolution             | <input type="checkbox"/> Responsibility         |
| <input type="checkbox"/> Dependability   | <input type="checkbox"/> Decision-making                 | <input type="checkbox"/> Respectfulness         |
| <input type="checkbox"/> Teaching        |  | <input type="checkbox"/> Confidence             |
|  |  | <input type="checkbox"/> Trustworthiness        |
|  |  | <input type="checkbox"/> Imagination            |
|  |  | <input type="checkbox"/> Emotional intelligence |
|  |  | <input type="checkbox"/> Strategic thinking     |
|  |  | <input type="checkbox"/> Other                  |





**IN-CLASS ACTIVITY WORKSHEET 1-2**

# Solution Sleuth

**Directions:** Review each scenario carefully. Use the Decision-Making Model to identify the problem, think about a few possible solutions (including pros and cons) and decide which solution is best.

**SCENARIO  
1**

**Basketball Buddies—Foul Play Debate**

Jayla and Jase are playing basketball. Jayla misses a basket. She shouts, “No fair. Jase fouled me.”

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**SCENARIO  
2**

**Wheels, Goals and Easygoing Souls—An Outdoor Dilemma**

You tell the children that it is time to play outside. Hannah exclaims, “Let’s ride bikes.” Jordan argues, “No, I want to play tag.” Ethan shrugs his shoulders and says, “I’m fine with either.”

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## IN-CLASS ACTIVITY WORKSHEET 1-2 CONTINUED

### SCENARIO 3

#### Soccer Chaos—The Great Street Chase

Kai and Naomi are playing soccer in their front yard. Naomi kicks the ball into the street. “Oh no!” Kai shouts. He dashes toward the street with his eyes fixed on the rolling soccer ball.

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### SCENARIO 4

#### Homework Hiccups—Marisol’s Frustration Fix?

Marisol is having a hard time with her homework. She puts her pencil down and sadly sighs, “I’m so bad at drawing.”

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**IN-CLASS ACTIVITY WORKSHEET 1-3**

# Rules and Expectations

**Directions:** Brainstorm questions you could ask your own parents or guardians related to your assigned category. Share your ideas and write down your answers. You can complete the other categories at home.

**Schedule:**

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**Safety:**

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**Location and Transportation:**

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**Money:**

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**IN-CLASS ACTIVITY WORKSHEET 2-1**

# Hazard Hunt

**Directions:** Look through the following image and circle as many safety hazards as you see.



IN-CLASS ACTIVITY WORKSHEET 2-1

# Hazard Hunt

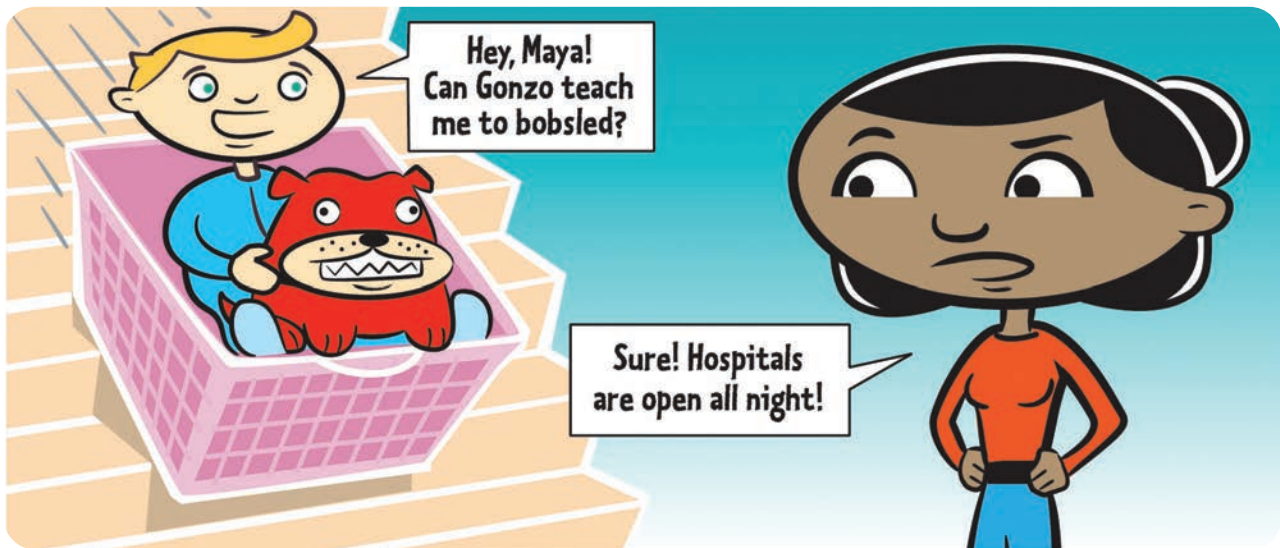
**Directions:** Look through the following image and circle as many safety hazards as you see.



## IN-CLASS ACTIVITY WORKSHEET 2-2

# Wacky Word Adventure

**Instructions:** The reader asks each person to call out a word—an adjective, noun or whatever the space calls for—and fills in the blank space in the story. When the reader reads the completed story, you'll discover that you've written a silly story. **Do not read the story until all the words have been filled in.**



Maya was babysitting Will and Anna on a Saturday afternoon. Their playful dog, Gonzo, wanted to join in on the fun. "Hey, Maya! Can Gonzo teach me to bobsled?" Will begged Maya. "Sure, hospitals are open all night!" Maya quipped. "Really?" Anna asked [\_\_\_\_\_].

adverb ending in -ly

"No, not really," Maya replied. "Let's try something just as [\_\_\_\_\_], but safer."

adjective

Will and Anna decided to ride their bikes to [\_\_\_\_\_] Park with Maya. "Don't forget your [\_\_\_\_\_] [\_\_\_\_\_] and bike helmets," Maya reminded them. Anna complained, "I don't want to wear my helmet. It makes me look like a [\_\_\_\_\_]!"

mythical creature

"Yeah," Will added. "Bike helmets are so [\_\_\_\_\_]." Maya insisted, "No helmets, no bike ride." After some [\_\_\_\_\_] they put on their bike helmets and set off.

verb ending in -ing

(Continued)



## IN-CLASS ACTIVITY WORKSHEET 2-2 CONTINUED

On the way to [\_\_\_\_\_]  
word starting with P (same as above)] Park, Maya told them to cross the street safely.

But the kids were so [\_\_\_\_\_] that they flew toward the intersection like [\_\_\_\_\_] superhero.

“Slow down,” Maya shouted. “You need to look both ways before crossing.” They immediately stopped just before [\_\_\_\_\_] [\_\_\_\_\_] whizzed down the street. The kids were very [\_\_\_\_\_] that they listened to Maya.

At [\_\_\_\_\_] Park, the kids raced to the top of the [\_\_\_\_\_] slide.

Anna climbed the ladder, while Will climbed up the slide. Just as Will reached the top, he slipped and tumbled down like a [\_\_\_\_\_] [\_\_\_\_\_] animal. Anna took the lead and won!

Will exclaimed, “Let’s race again.” Maya stepped in. “You could get hurt climbing up the slide like that.

Let’s play something else like [\_\_\_\_\_] playground game.”

They didn’t play for long because an unexpected [\_\_\_\_\_] weather event was on the horizon. A loud

[\_\_\_\_\_] sound could be heard in the distance. “OK everyone, time to head home.” The kids

[\_\_\_\_\_] past-tense verb onto their bikes. They got home right as the [\_\_\_\_\_] weather event started

to get bad. Gonzo met them at the door and [\_\_\_\_\_] past-tense verb. Will hugged Gonzo and asked

Maya, “Still no bobsledding?” Maya replied, “Broken [\_\_\_\_\_] body parts are a great way to learn

about anatomy...but still no bobsledding!”



**SKILL SHEET 3-1:**

# Handwashing

1. Turn on the water and adjust the temperature so that it is warm but not too hot.



2. Wet your hands under the running water and apply soap.



3. Wash your hands for at least 20 seconds (about the time it takes to sing the ABCs).



4. Start by rubbing your hands together to make a lather.



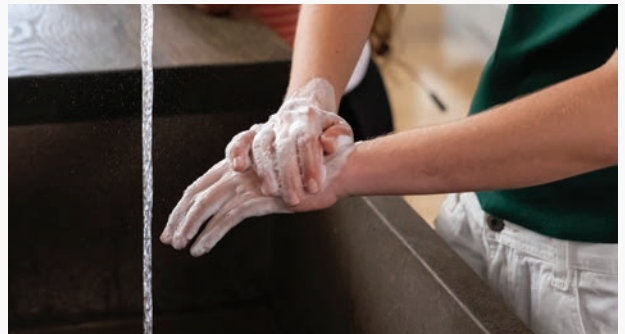
*(Continued)*



## SKILL SHEET 3-1: CONTINUED

### 5. Wash:

- » The palms of your hands.
- » The backs of your hands.
- » In between your fingers.
- » Under your nails (rub the nails of one hand against the palm of the opposite hand).



(Continued)



## SKILL SHEET 3-1: CONTINUED

6. Rinse your hands under the running water.



7. Dry your hands with a paper towel or clean towel.



8. Turn off the water and throw away the paper towel.



### Common errors:

- » Not washing your hands long enough
- » Washing only certain parts of the hands and not all sides of the hands, fingers and nails



**SKILL SHEET 3-2:**

# Removing Latex-Free Disposable Gloves

1. Pinch the palm side of one glove near your wrist.



2. Carefully pull the glove toward your fingertips turning it inside out as you pull it off your hand.



3. Hold that glove in the palm of your still gloved hand.



4. Slip 2 fingers under the wrist of the remaining glove.



*(Continued)*



5. Pull the glove toward your fingertips, turning it inside out, with the first glove tucked inside.



6. Throw away the gloves in a proper trash container and wash your hands.



## Common errors:

- » Not inverting the gloves during removal
- » Touching bare skin with a contaminated glove
- » Not washing your hands after glove removal



**SKILL SHEET 3-3:**

# Picking Up and Holding an Infant

**Note:** Always support the head and neck of a baby younger than 3 months.

## PICKING UP AN INFANT - METHOD 1

1. Slide both of your hands under the infant's underarms.



2. Wrap your hands around the infant's ribs.



3. Gently lift the infant.



(Continued)



## PICKING UP AN INFANT - METHOD 2

1. Slide one hand under the infant's head and back, supporting the neck.



2. Slide your other hand under the infant's bottom.



3. Gently lift the infant.



*(Continued)*



## SKILL SHEET 3-3: CONTINUED

### HOLDING AN INFANT - SHOULDER HOLD

1. Put one arm under the infant's bottom and the other arm along their back, with your hand supporting their head and neck, if needed.



2. Hold the infant securely against your chest or with their head up so they are against one shoulder.



*(Continued)*



## SKILL SHEET 3-3: CONTINUED

### HOLDING AN INFANT - CRADLE HOLD

1. Support the infant's back along one arm, with their head resting in the crook of your elbow and your hand supporting their bottom.



2. Use your other arm to support the infant's bottom and legs.



### Common errors:

- » Not supporting the infant's head, neck and back when lifting the infant
- » Not lifting the infant in a smooth, continuous movement
- » Not supporting the infant's head, neck and back when holding them
- » Not holding the infant close to your body



**SKILL SHEET 3-4:**

# Picking Up and Holding a Toddler

1. Kneel or bend your knees in front of the toddler.



2. Slide both hands under the toddler's underarms and wrap them around the toddler's ribs.



3. Lift with your legs in a smooth, continuous motion.



4. Put one arm under the toddler's bottom and the other across their back.



*(Continued)*



## SKILL SHEET 3-4: CONTINUED

5. Hold the toddler close to you, at the front of your body.



### Common errors:

- » Not bending your knees
- » Leaning over and not having a straight back when lifting the toddler
- » Not lifting the toddler in a smooth, continuous movement
- » Not holding the toddler close to your body
- » Not using your arm to support the toddler's bottom and back



**SKILL SHEET 3-5:**

# Bottle-Feeding

1. Put the infant in a safe place.



2. Wash your hands.



3. Gather your supplies.

- » Bottle
- » Nipple
- » Bib
- » Burp cloth or small towel



*(Continued)*



## SKILL SHEET 3-5: CONTINUED

4. Prepare the bottle according to the client's instructions. If they have asked you to warm the bottle:
  - » Put the bottle in a bottle warmer or bowl of warm water for a few minutes. Never use the microwave.
  - » Gently swirl or shake the bottle to make sure the liquid is heated evenly.
  - » Drip a few drops of liquid onto the inside of your wrist to test the temperature. Don't let the nipple touch your skin to avoid spreading germs.
  - » The liquid should be lukewarm. If it is hot, let it cool naturally.



(Continued)



## SKILL SHEET 3-5: CONTINUED

5. Sit down and hold the infant on your lap in a cradle hold, with their head higher than their shoulders.



6. Give the infant the bottle.
- » If the infant cannot hold the bottle by themselves, hold it for them.
  - » Tilt the bottle to a 45-degree angle so that air does not get into the nipple.



7. When the infant has taken about one-third of the bottle, burp them.
- » Hold them upright on your shoulder over the burp cloth or sit them on your lap and place the burp cloth under their chin.
  - » Make sure to support their head and neck if needed.
  - » Pat the infant firmly on the back until you hear a burp.
  - » Clean up any spit-up with the burp cloth.



8. Reposition the infant comfortably on your lap in the cradle hold and give them the rest of the bottle.



(Continued)



## SKILL SHEET 3-5: CONTINUED

9. When the infant is finished with the bottle, burp them.



10. When finished feeding, clean the infant's face with a wipe or damp cloth.



11. Wash your hands



### Common errors:

- » Not washing your or the infant's hands before feeding
- » Not gently swirling or shaking the bottle before testing the temperature
- » Not testing the temperature of the liquid before feeding
- » Touching the nipple to your skin when testing
- » Not holding the infant's head above the rest of their body
- » Not holding the bottle at about a 45-degree angle when feeding
- » Not stopping bottle-feeding to let the infant rest and to burp them
- » Not supporting the infant's head, neck and back when burping them
- » Not burping firmly or for a long enough time



**SKILL SHEET 3-6:**

# Spoon-Feeding

1. Put the child in a highchair or booster seat and buckle the safety strap.



2. Wash your hands and the infant's or toddler's hands.



3. Gather your supplies.
  - » Food
  - » Infant or toddler spoon
  - » Unbreakable dish
  - » Bib
  - » Clean washcloth



*(Continued)*

## SKILL SHEET 3-6: CONTINUED

4. Prepare the food according to the client's instructions. If they have asked you to warm the food:
  - » Place the container of food in a bowl of hot water for a few minutes or heat it in the microwave for about 15 seconds. Never put metal in the microwave.
  - » Stir the food well and then let it stand for 30 seconds.
  - » Put a drop of food on the inside of your wrist without touching the spoon to your skin.
  - » The food should be lukewarm. If it is hot, let it cool naturally. Do not blow on the food.



(Continued)



## SKILL SHEET 3-6: CONTINUED

### 5. Begin feeding.

- » Put a small bit of food on the spoon.
- » Hold it a few inches in front of the infant.
- » Let them lean in and take the food.
- » Pull the spoon straight out.
- » Feed slowly, giving time to swallow and ask for more.
- » If they push it back out, use the spoon to catch the food and try feeding them again.



### 6. Allow older infants and toddlers to feed themselves with the spoon or their hands if they want to do so.



### 7. When you are finished feeding, wash their hands and face and wipe up any spilled food. Allow toddlers to help clean up if they want to do so.



(Continued)



## SKILL SHEET 3-6: CONTINUED

8. Wash your hands.



### Common errors:

- » Not buckling the infant into the highchair
- » Not washing your hands before feeding
- » Not washing the child's or infant's hands before feeding
- » Not using a bib or cloth
- » Not stirring the food before testing
- » Not testing the temperature of the food before feeding
- » Touching the spoon to your skin when testing the temperature
- » Blowing on food that is hot
- » Putting too much food on the spoon



**SKILL SHEET 3-7:**

# Diapering

1. Put the infant or toddler in a safe place.



2. Wash your hands.



3. Gather your supplies.

- » Clean diaper
- » Wipes
- » Disposable gloves
- » Waste bin
- » Toy for the child to hold (optional)
- » Clean washcloth or extra diaper for covering the child (optional)



4. Put on your disposable gloves.



*(Continued)*



## SKILL SHEET 3-7: CONTINUED

5. Place the infant or toddler on their back on a changing table or on a water-resistant changing pad on the floor.

- » Use the safety straps on the changing table to secure them.
- » Keep one hand on them until they are safely secured.
- » Always stay close and keep a careful eye on them. Never leave them alone on a changing table. If you need to leave, take them with you.



6. Give them a toy to hold so they don't get their hands messy, if needed.



7. Remove their clothing, as needed, and take off the dirty diaper.



*(Continued)*



## SKILL SHEET 3-7: CONTINUED

8. Unfasten the sticky tabs. For boys, use a washcloth or extra diaper to block any surprise peeing.



9. Use one hand to hold their feet and gently lift their bottom up.



(Continued)



## SKILL SHEET 3-7: CONTINUED

10. Slide the dirty diaper out from underneath them, folding it so that the mess is on the inside.



11. Throw away the dirty diaper or set it aside out of reach.



12. Clean them with the wipes:

- » Wipe from front to back to avoid spreading germs (especially for girls).
- » Use a clean wipe each time to avoid spreading germs.
- » Clean carefully around genitalia and in the folds of the skin.



*(Continued)*



## SKILL SHEET 3-7: CONTINUED

### 13. Put on the clean diaper:

- » Open the clean diaper and slide it underneath them. The sticky tabs go in the back and should be about even with their belly button.
- » If you are diapering a boy, make sure their penis is pointing down to prevent leaks.
- » Bring the front of the diaper between their legs and fasten the sticky tabs. Be sure to stick the tabs to the front of the diaper, not their skin. The diaper should be snug and comfortable.



### 14. Redress the infant or toddler as needed.



(Continued)



## SKILL SHEET 3-7: CONTINUED

15. Place the remaining dirty supplies in the disposal bin, and then remove and throw away your gloves.



16. Wipe their hands with a clean wipe, and then move them to a safe place.



17. Clean up the changing area. Put on another pair of disposable gloves if necessary.



18. Wash your hands.



*(Continued)*



## SKILL SHEET 3-7: CONTINUED

### Common errors:

- » Not securing the infant or toddler before diapering
- » Not keeping one hand on the infant or toddler until they are safely secured
- » Not staying close and keeping a careful eye on them
- » Not cleaning the infant or toddler thoroughly
- » Not cleaning from front to back
- » Using each wipe more than once
- » Not cleaning around the genitalia and folds of skin
- » Putting the diaper on backward or inside out
- » Not placing the fresh diaper underneath the child with the sticky tabs in the back and about even with their belly button
- » Not fastening the sticky tabs properly (too tight or too loose)
- » Not keeping dirty supplies out of the infant's or toddler's reach



## IN-CLASS ACTIVITY WORKSHEET 4-1

# Create Play

Write down age-appropriate play activities for each scenario, using the information from the video and Table 4-1.

### SCENARIO 1

You are babysitting a 10-month-old infant who can sit, crawl and move around holding on to furniture for support. What types of activities could you do?

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### SCENARIO 2

You are babysitting two young school-age children who want to play outside. What kinds of activities could you do?

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**IN-CLASS ACTIVITY WORKSHEET 4-1 CONTINUED**

**SCENARIO  
3**

You are babysitting a 4-year-old child who is imaginative.  
What kinds of activities could you do?

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**SCENARIO  
4**

You are babysitting a 2-year-old child who needs quiet time.  
What kinds of activities could you do?

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## SKILL SHEET 5-1:

# Checking a Child or an Infant

**1. CHECK the scene for safety, form an initial impression, and get consent from the parent or guardian (if present).**



**2a. If the child or infant appears unresponsive, check for responsiveness and breathing.**

- » Use the **shout-tap sequence**: Shout using the child's or infant's name if you know it. If there is no response, tap the child's shoulder or the bottom of the infant's foot.
- » Look to see if their chest is rising and falling. Listen for normal breathing that is quiet, regular and effortless. Isolated or infrequent gasps are not normal breathing.

**Note:** Check for at least 5 seconds but no more than 10 seconds.

**Note:** When checking for breathing make sure they are face-up. If they are face-down, roll them onto their back.



(Continued)



## SKILL SHEET 5-1: CONTINUED

# Checking a Child or an Infant

**2b. If the child or infant is unresponsive, responsive but not fully awake, or not breathing normally, move immediately to the CALL and CARE steps.**

**Note:** For a child or an infant who is unresponsive and not breathing normally (i.e., not breathing or only gasping), care includes starting CPR and using an AED as soon as one is available. A 9-1-1 operator might be able to walk you through the steps of CPR and care if you are unsure or unclear.

**Note:** For a child or an infant who is unresponsive but breathing normally, or responsive but not fully awake, they should be placed in the recovery position and monitored for changes.



**3. If the child or infant has another sign of a life-threatening condition or life-threatening bleeding, move immediately to the CALL and CARE steps.**

**Note:** Start care for the condition found and monitor for changes. Continue your check as appropriate to get more information and determine whether additional care is needed.



(Continued)



## SKILL SHEET 5-1: CONTINUED

4. If the child or infant appears to have a non-life-threatening condition or you are not sure if the condition is life-threatening, continue the **CHECK** step to get additional information.

» Use SAM:

- **S = Signs and symptoms:** Ask what's wrong or how they're feeling.
- **A = Allergies:** Check if they have any allergies.
- **M = Medications and medical conditions:** Check if they take any medicines or have medical issues.

» Do a **focused check** if appropriate. Check the part or parts of the body they say are hurting or they are holding, or where you see obvious signs of injury. Note if they have pain or discomfort or are unable or unwilling to move the body part.

**Note:** Do not ask them to move if you suspect a head, neck or spinal injury. Do not ask them to move any area of the body that causes discomfort or pain.



5. If at any time during your **CHECK** of a responsive child or infant you determine they have a life-threatening injury or illness, immediately move to the **CALL** step and then start **CARE** according to your level of training.



## Common errors:

- » Not checking the scene for safety
- » Not calling 9-1-1 and getting equipment or telling someone to do so
- » Not using the shout-tap sequence



## SKILL SHEET 5-2:

# Caring for a Choking Child

- 1. Check the scene for safety, form an initial impression, and get consent from the parent or guardian (if present).**



- 2. Verify that the child is choking by asking them to speak to you.**

**Note:** If the child is able to speak, cry or cough forcefully, they are getting enough air and the body is trying to clear the obstruction. Encourage them to keep coughing. Keep observing the child and be prepared to care for choking (as noted below) if they are not able to clear the object and their condition changes.



- 3. If the child is not able to speak, cry or cough, or is making only high-pitched noises:**

- » Assume the airway is obstructed.
- » Call 9-1-1 or tell someone to do so immediately.
- » Get any necessary equipment to give care.

**Note:** If you are alone with the choking child, this is a Care First situation. If you have a mobile phone, call 9-1-1, put the phone on speaker mode and immediately begin care according to your level of training. However, if you do not have a phone, immediately begin care with back blows.



(Continued)



## SKILL SHEET 5-2: CONTINUED

### 4. Give 5 back blows.

- » Position yourself to the side and slightly behind the choking child.  
**Note:** For a small child, you might need to kneel rather than stand.
- » Place one arm diagonally across their chest (to provide support) and bend them slightly forward at the waist.
- » Strike them firmly between the shoulder blades with the heel of your other hand. Each of the 5 back blows should be separate from the others.



### 5. Give 5 abdominal thrusts.

- » Move behind the child and place your front foot in between the child's feet. Bend your knees slightly to provide balance and stability.  
**Note:** For a small child, you might need to kneel rather than stand.
- » Find their navel with one hand. Make a fist with your other hand and place the thumb side against their abdomen, right above your fingers.
- » Take your first hand and cover your fist with that hand.
- » Pull inward and upward to give an abdominal thrust. Each of the 5 abdominal thrusts should be forceful and separate from the others.



(Continued)



## SKILL SHEET 5-2: CONTINUED

### 6. Continue giving sets of 5 back blows and 5 abdominal thrusts until:

- » The child can speak, cry or cough forcefully.
- » The child becomes unresponsive.

**Note:** *If the child becomes unresponsive, gently lower them to a firm, flat surface, such as the ground, and begin CPR and AED use, starting with compressions (if you are trained to do so). After each set of compressions and before attempting breaths, open the child's mouth, look for the object and, if seen, remove it with a finger sweep. Never do a finger sweep unless you actually see the object.*



### Common errors:

- » Not correctly positioning one's hands during back blows or abdominal thrusts
- » Not placing one's foot between the feet of the choking child during abdominal thrusts
- » Not placing one's fist just above the navel



## SKILL SHEET 5-3:

# Caring for a Choking Infant

- 1. Check the scene for safety, form an initial impression, and get consent from the parent or guardian (if present).**



- 2. Verify the infant is choking by listening for crying or forceful coughing.**

**Note:** *If the infant is crying or coughing forcefully, they are getting enough air and the body is trying to clear the obstruction. Allow them to keep coughing. Be prepared to give first aid for choking if the infant's condition changes.*



- 3. If the infant is not able to cry or cough, or is making only high-pitched noises:**

- » Assume the airway is obstructed.
- » Call 9-1-1 or tell someone to do so immediately.
- » Get any necessary equipment to give care.

**Note:** *If you are alone with the choking infant, this is a Care First situation. If you have a mobile phone, call 9-1-1, put the phone on speaker mode and immediately begin care. However, if you do not have a phone, immediately begin care with back blows.*



(Continued)



## SKILL SHEET 5-3: CONTINUED

### 4. Give 5 back blows.

- » Place the infant's back along your forearm, cradling the back of the infant's head with your hand.
- » Place your other forearm on the infant's front, supporting the infant's jaw with your thumb and fingers; do not cover the infant's mouth.
- » Turn the infant to a face-down position and hold them along your forearm using your thigh for support. Keep the infant's head lower than their body.
- » Use the heel of your hand to firmly strike the infant between the shoulder blades. Keep your fingers up to avoid hitting the infant's head or neck.
- » Each of the 5 back blows should be separate from the others.



### 5. Give 5 chest thrusts.

- » Position the infant between your forearms:
  - Support the head and neck.
  - Turn the infant face-up.
  - Lower the infant onto your thigh with their head lower than their chest.
- » Place 2 fingers in the center of the infant's chest, just below the nipple line.
- » Give 5 quick chest thrusts about 1 1/2 inches deep. Let the chest return to its normal position, keeping the fingers in contact with the chest. Each chest thrust should be separate from the others.

**Note:** Always support the infant's head and neck while giving back blows and chest thrusts.



(Continued)



## SKILL SHEET 5-3: CONTINUED

### 6. Continue giving sets of 5 back blows and 5 chest thrusts until:

- » The infant can cry or cough forcefully.
- » The infant becomes unresponsive.

**Note:** *If the infant becomes unresponsive, lower them to a firm, flat surface, such as a sturdy tabletop or the ground, and begin CPR and AED use, starting with compressions (if you are trained to do so). After each set of compressions and before attempting breaths, open the infant's mouth, look for the object and, if seen, remove it with a finger sweep. Never do a finger sweep unless you actually see the object.*



### Common errors:

- » Not positioning the infant face down with their head lower than their body for back blows
- » Not supporting the infant's head and neck
- » Not positioning the infant face-up with their head lower than their body for chest thrusts
- » Not correctly positioning one's hands during back blows or fingers for chest thrusts



## SKILL SHEET 5-4:

# Using Direct Pressure to Control Life-Threatening Bleeding

### 1. Check and call.

- » Check the scene for safety, form an initial impression and obtain consent from the parent or guardian, if they are present
- » Call 9-1-1 or tell someone to do so immediately. Get any necessary equipment to give care.

**Note:** *If you are alone with the child or infant this is a Care First situation. If you have a mobile phone, call 9-1-1, put the phone on speaker mode and immediately begin care according to your level of training. However, if you do not have a phone, immediately begin care.*



### 2. Put on PPE when appropriate.

**Note:** *Do not delay care until you can find gloves.*



### 3. Find the source of the bleeding.

- » If there is more than one wound, care for life-threatening bleeding first.
- » Let them know the amount of pressure you need to apply might be painful, but it is necessary to control the bleeding.



(Continued)



## SKILL SHEET 5-4: CONTINUED

### 4. Choose a dressing.

- » Use a hemostatic dressing if you have one.
- » Otherwise, use a gauze pad or other available material (such as a clean T-shirt) as a dressing.



### 5. Place the dressing on the wound.

- » Ensure good contact with the bleeding surfaces of the wound.



*(Continued)*



## SKILL SHEET 5-4: CONTINUED

### 6. Apply steady, firm pressure directly over the wound until the bleeding stops.

- » Ensure there is a flat, hard surface underneath the injured body part.
- » Position your body:
  - Put one hand on top of the dressing and put your other hand on top of that.
  - Position your shoulders over your hands and lock your elbows.
  - Push down as hard as you can.

**Note:** If blood soaks through the original dressing, place a second dressing on top of the first and continue direct pressure. If the second dressing becomes soaked, you can remove it and replace it with a new one, but do not remove the original dressing placed on the wound.

**Note:** If you are alone and need your hands, you can use your knee to apply pressure.



### 7. Hold direct pressure until:

- » The bleeding stops.
- » You are too exhausted to continue.
- » The situation becomes unsafe.
- » A trained responder applies a tourniquet (for life-threatening bleeding from an arm or leg).
- » EMS arrives to relieve you.



(Continued)



## SKILL SHEET 5-4: CONTINUED

### 8. Apply a bandage (if the bleeding stops before EMS arrives).

- » Check for circulation beyond the injury before applying bandage.
- » Apply the bandage over the dressing:
  - Place the end of a bandage on the dressing at an angle.
  - Continue wrapping the bandage over the dressing.
  - Tape, tuck or tie the bandage to secure it in place.
- » Check again for circulation beyond the injury. If there is any change, the bandage might be too tight; carefully loosen the bandage.



### 9. Monitor for re-bleeding.

- » If bleeding reoccurs, apply direct pressure again until the bleeding stops. Do not remove the bandage or dressing and do not apply an additional dressing or bandage to what is in place.



(Continued)



## SKILL SHEET 5-4: CONTINUED

**10. Monitor for signs and symptoms of shock, and give care for shock if necessary until help arrives.**



**11. After giving care, remove your gloves and wash your hands.**



### Common errors:

- » Not using both hands stacked on one another to apply direct pressure
- » Not locking the elbows when applying direct pressure
- » Not checking for circulation beyond the injury before and after bandaging