

Monsanto

FROM (NAME & LOCATION) J. Townsend, Texas City, Texas

PLAINTIFF'S EXHIBIT

MON-1374

DATE : February 16, 1983
SUB : Safety Meetings
REFERENCE : For February
TO : Department 50 Personnel

cc.

*Rosalie
your records.*

Safety meetings for the month of February, 1983 will be held according to the following schedules. The topic will be "Rusuci-Ann".

Tues. 3-1-83 1300

Elfstrom ✓
Dannar ✓
Tolley ✓
Davis ✓ SC

Thurs. 3-5-83 1530

Butler ✓
Cross ✓
Nealy ✓

Mon. 3-7-83 1300

Dorsey ✓
Schaper ✓
Thurman ✓
Nagel ✓
Weir ✓

Friday 3-11-83 1300

Adlof ✓
Hardgrave ✓
Sanchez ✓
DeLaCruz ✓

Thurs. 3-17-83 1300

Johnson ✓
Walzel ✓
Garcia ✓
Worthey ✓

J. Townsend

/rt

SC

000094

LAM001291

CPR Practice Checklist

One Man Rescue of Adult Victim

1. Check unresponsiveness: a) shake b) shout
2. Call for help if unresponsive
3. Open airway
4. Assess breathing: a) look for chest rising b) feel for breath
c) listen for breathing 5.7
5. If not breathing, pinch nostrils, and give four quick, deep breaths.
6. Feel for carotid pulse - 5 to 10 sec.
7. If pulse is absent, have someone activate EMS system, find the landmark for chest compression. The index and middle fingers are run up along the rib cage to the sternal notch. With one finger on the notch the other finger is placed next to the first finger on the lower end of the sternum.
8. Place the heel of your other hand on the victim's chest next to the two fingers.
9. Once this hand is in position, remove the two fingers finding the landmark, place that hand on top of the other, and lock fingers.
10. Begin compressions. Do 15 compressions at a rate of 80/min. Depress the sternum to a depth of $1\frac{1}{2}$ to 2 inches. Keep skin contact with the victim's chest at all times.
11. Then - open the airway and give 2 breaths.
12. Then - find the landmark again as in steps 7 and 8 and repeat compression.
13. Keep repeating cycle of 15 compressions to 2 breaths.
14. Always find the landmark before beginning compressions.

N.B.* After performing CPR for one minute, check for return of spontaneous breathing and pulse. If breathing and pulse are still absent and you are alone, activate EMS system & return as soon as possible to continue CPR.

Developed by Poldi Fell, RN, BSN, CPR Instructor
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Charlotte O'Rourke, RRT, CPR Instructor

January, 1981

Obstructed Airway Procedure for the Unconscious Adult

1. Follow Steps 1-5 of the Adult Rescue Procedure.
2. You will know that the victim is obstructed when you try to give him the four breaths because: the chest will not rise and the breaths will meet with resistance.
3. Immediately, tilt the head back again (reposition the airway) and try to give one more breath.
4. If still obstructed, turn the victim, as a unit, towards you. (Do this by supporting his head and shoulders with one hand and his hips with the other.)
5. Give four sharp blows with the heel of the hand between the shoulder blades, in the direction of victim's head.
6. Turn the victim on his back again.
7. Kneel beside the victim. Place one hand between the umbilicus and the sternal notch (the xyphoid process). Place the other hand on top.
8. Give four upward thrusts (abdominal thrusts).
9. Open the victim's mouth by grasping both the tongue and the lower jaw between your thumb and fingers and lifting. Then use a hooking action with your index finger to dislodge the foreign body.
10. Open the airway, again.
11. Check for breathing.
12. Give the four breaths again.
13. If the chest rises, go on to feel for the pulse and do chest compression, if necessary.
14. If still obstructed, go back to Steps 4-12 and repeat until the obstruction cleared.

*N.B. When an adult victim gets air in his stomach, do not try to push it out by pressing on his abdomen unless his respiratory system is compromised. Just reposition his airway and continue with the CPR.

2 Man Rescue

1. One man rescue is already in progress
2. Second person comes upon the scene and says "I know C.P.R. can I help?"
3. The second rescuer will then kneel down on the opposite side of the victim from the first rescuer. He will then feel for a carotid pulse while the first rescuer continues compressions. If the first rescuer's compressions are adequate, the second rescuer calls out "Stop compressions". The second rescuer then checks for return of spontaneous pulse and breathing. If pulse and breathing are absent, the second rescuer informs the first rescuer and immediately gives a breath.
4. After that breath, the person compressing immediately changes the rate from "1 and 2 and 3 ..." to 1-1000 - 2-1000 - 3-1000" This slows the rate to 60/min.
5. The second rescuer gives one breath on the upstroke of every fifth compression. 5 compressions to one breath.
6. When the person doing the compressions becomes tired, he calls for a change, saying, "We will change this time".
7. The rescuer doing ventilations gives the victim a last breath and moves to find his hand position on the chest. The person doing compressions will move to the head and check for the return of a spontaneous pulse. If there is no pulse, he will inform the other rescuer and give a breath. Compressions are started again.
8. The person now at the victim's head gives a breath on the upstroke of the fifth compression.
9. They continue the routine of 5 compressions to 1 breath, making a switch whenever the person compressing becomes tired.

CPR Practice Checklist

Infant Rescue Procedure

1. Try to arouse the baby: shout - flick their heels with your finger-nail - rub their breastbone with your knuckle.
2. If no response call for help. Hold the baby in one arm, or lay on hard surface
3. Open the airway by the head tilt-chin lift or head tilt-neck lift method. Do not hyperextend the baby's head.
4. Check for breathing: look for chest rising - listen for breathing sounds - feel for the baby's breath on your cheek.
5. If not breathing, immediately place your mouth over the baby's mouth and nose.
6. Give four small breaths. Use only the air in your mouth.
7. Then - feel for the brachial pulse - take 5-10 seconds to do this.
8. If no pulse have someone activate the EMS system, begin compressions immediately.
9. Place two fingers on the middle of the baby's chest, just between the two nipples.
10. Compress at a rate of 100 compressions per minute with a depth of 1/2 to 1 inch.
11. Give one breath on the upstroke of every fifth compression. Do not stop the compressions to breathe.
12. Count in your head "one, two, three, four, five - breathe - one, two, three ..."

Infant Rescue Procedure

N.B.* In infants and small children, backward tilt of the head lifts the back. A firm support beneath the back is therefore required for external chest compression and can be provided by the rescuer slipping one hand beneath the child's back while using the other hand to compress the chest.

Obstructed Airway Procedure for the Unconscious Infant

1. Follow Steps 1-6 of the baby rescue.
2. Try to give the baby the four breaths but: the breaths meet with resistance and, the chest does not rise. The baby is obstructed. Air cannot go into his lungs.
3. Reposition the head and try to breathe again.
4. Supporting the baby's head turn the baby over on his stomach with his head down.
5. Give four back blows with the heel of the hand between the shoulder blades, going in the direction of the head.
6. Turn the baby over on his back with his head down and give four chest thrusts. Chest thrusts are performed in the same manner as chest compressions.
7. Perform tongue jaw lift and try to visualize foreign body. If foreign body can not be visualized, do not attempt blind finger sweep.
8. Check for breathing.
9. If no breathing, try to give the four breaths.
10. If the chest rises, go on to feel for the pulse and do chest compressions if necessary.
11. If the baby is still obstructed, go back to Steps 4-9 and repeat until the obstruction is cleared.

N.B.* If the baby gets air in his stomach (abdominal distention), do not try to push it out by pressing on his abdomen unless his respiratory system is compromised. Just reposition his airway & continue CPR.

ESTABLISH UNRESPONSIVENESS

CALL FOR HELP!

OPEN AIRWAY

B.L.S. DECISION
TREE

(Revised 1-81)

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