



How a dollmaker helped to save thousands of lives

Eagles February 220208 – Tore Laerdal

Laerdal started making childrens books and toys



With the need for a lifesize doll our mission turned to
Helping save Lives



1958 - 2008

Resusci Anne - the first patient simulator



1960: First time in the US

(Photo Archer S. Gordon)



Asmund S Laerdal

Hans H. Dahl

1961- Stavanger



Peter Safar

Archer Gordon

Jim Elam

RECOMMENDATIONS OF THE SYMPOSIUM ON EMERGENCY RESUSCITATION

Stavanger, Norway. August 21-24, 1961.

1. The method of artificial respiration recommended in an emergency is extension of the head and blowing through the mouth or nose.
2. The immediate start of resuscitation should be given priority over the airway and draining water from the body of the victim.
3. The prone position should not be regarded as superior to the supine position either with regard to patency of the airways or with regard to drainage from the lungs.
4. First-aid workers of all categories, school-children and the general public should be taught mouth-to-mouth and mouth-to-nose resuscitation.
5. Organisations and individuals concerned with teaching life-saving should try to obtain training aids, which include dolls or manikins, airway films and film-strips, diagrams and pictures.
6. The use of airways and other adjuncts should be taught only to personnel, nurses, and recognised life-savers.
7. External cardiac resuscitation should be taught and used only in conjunction with artificial ventilation, and for the present its use should be confined to medical personnel, nurses, and recognised life-savers.
8. The best way of disseminating the knowledge of artificial respiration is its compulsory teaching to school-children.
9. A central information bureau should be set up in each country to collect information about incidents occurring outside hospitals in which methods of resuscitation have been applied.
10. The World Health Organisation should be asked to act as an international information centre to collect and classify information from national centres.

RONALD F. WOOLMER
Great Britain

MORRIS H. BROOK
Canada

JAMES O. ELAM
U.S.A.

GÖRAN HAGLUND
Sweden

BJØRN LUND
Norway

HENNING POULSEN
Denmark

W. P. CLELAND
Great Britain

RUDOLF FREY
Germany

BRUNO HAID
Austria

BERNARD B. G. LUCAS
Great Britain

HENNING RUBES
Denmark

IVAR LUND
Norway

ALLEN B. DORRIN
U.S.A.

ARCHER S. GORDON
U.S.A.

WERNER HUGEN
Switzerland

YVONNE NOVIANT
France

PETER SAFAR
U.S.A.

4. First Aid workers of all categories, schoolchildren and the general public should be taught mouth-to-mouth and mouth-to-nose resuscitation

A dollmaker and many helpers



Asmund S. Laerdal

Peter Safar

Bjorn Lind

1960s; Need for a lifelike training aid for m-t-m ventilation,
and to make rescuers willing to blow into a "dead" person

Resusci-Anne

The life-size - life-like manikin for teaching MMR - CPR



RESUSCI-ANNE

Resusci-Anne was designed to teach lung inflation and cardiopulmonary resuscitation. It is used in 104 countries and over 30 million persons have been taught life saving techniques using this training aid. Realism is important in training.

The realistic features of Resusci-Anne are:

- The natural mobility of the head
- A jaw which opens
- A skin which feels natural
- Human breathing is simulated
- The head and shoulders are of natural weight.
- There is no problem of cross infection
- All parts are easily dismantled for cleaning.

CARDIOPULMONARY RESUSCITATION (CPR)

Resusci-Anne can be used as a training manikin for this type of resuscitation by use of the attachments shown in (Fig. 1). This type of resuscitation was reported on in The Journal of American Medical Association, Oct. 24, 1966, Vol. 198, No. 4, by an Ad Hoc group of National Academy of Sciences - National Research Council (reprints available upon request). The consensus of opinion is that Resusci-Anne is the best training aid available.

With its use the student is taught:

- How to take the carotid pulse
- Positioning of the hands for cardiac compression
- The method of compressing the sternum
- The amount of pressure to exert
- The timing and ratio of compression to inflation.



ÅSMUND S. LÆRDAL

RESUSCI-ANDY is a male manikin for the teaching of MMR and CPR



Standard equipment: Air Pump, Disinfectant and Cleaners, Head Section Model and Repair Kit.

A manikin for Polo top training is also available



HEAD
SECTION
MODEL



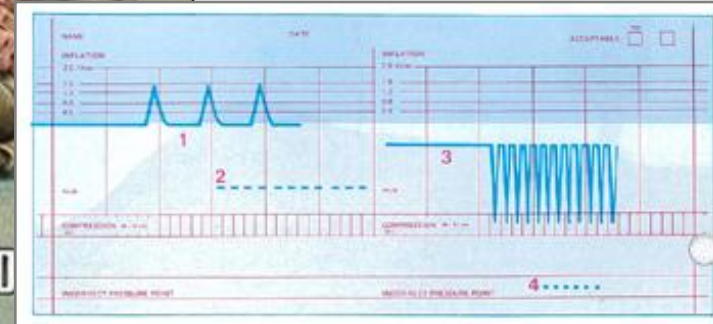
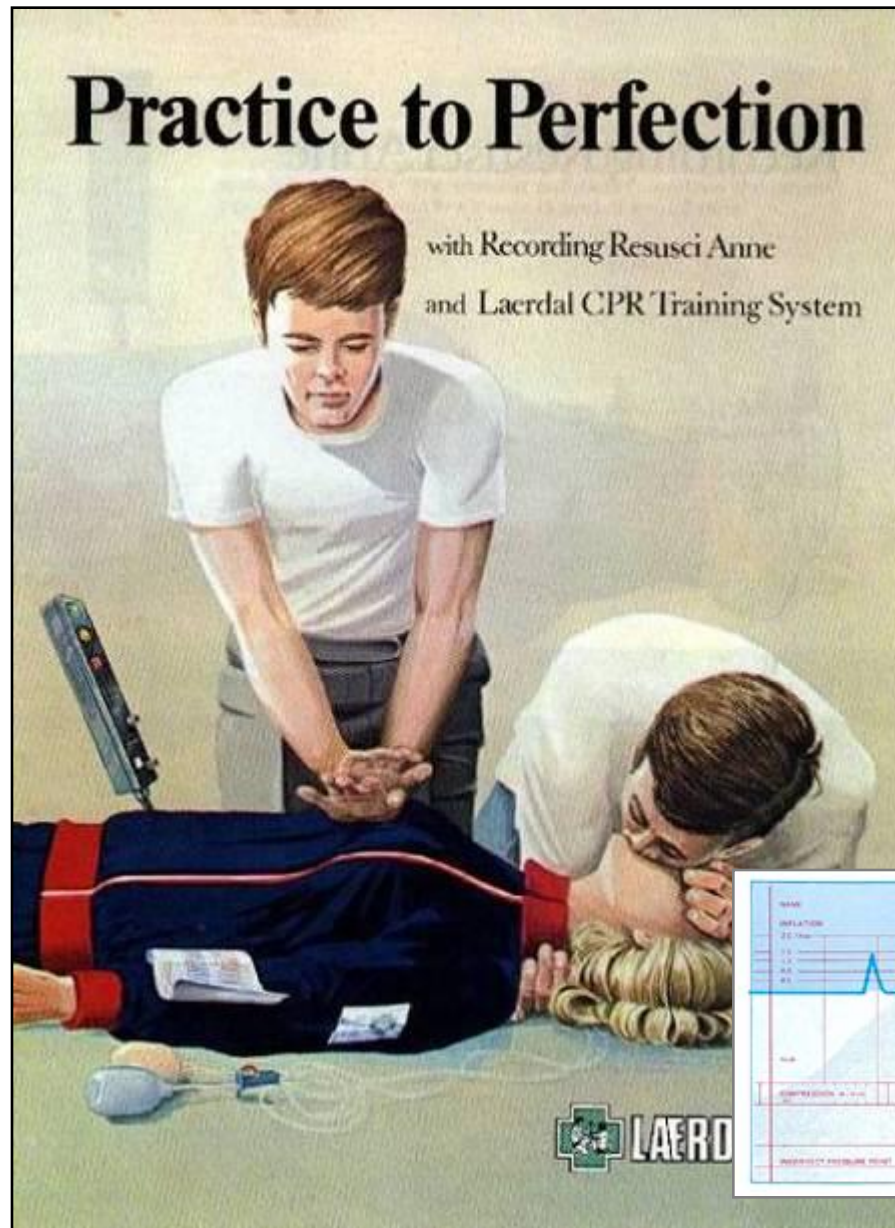
VISUAL
INFLATION
AND HEART
COMPRESSION
GAUGE



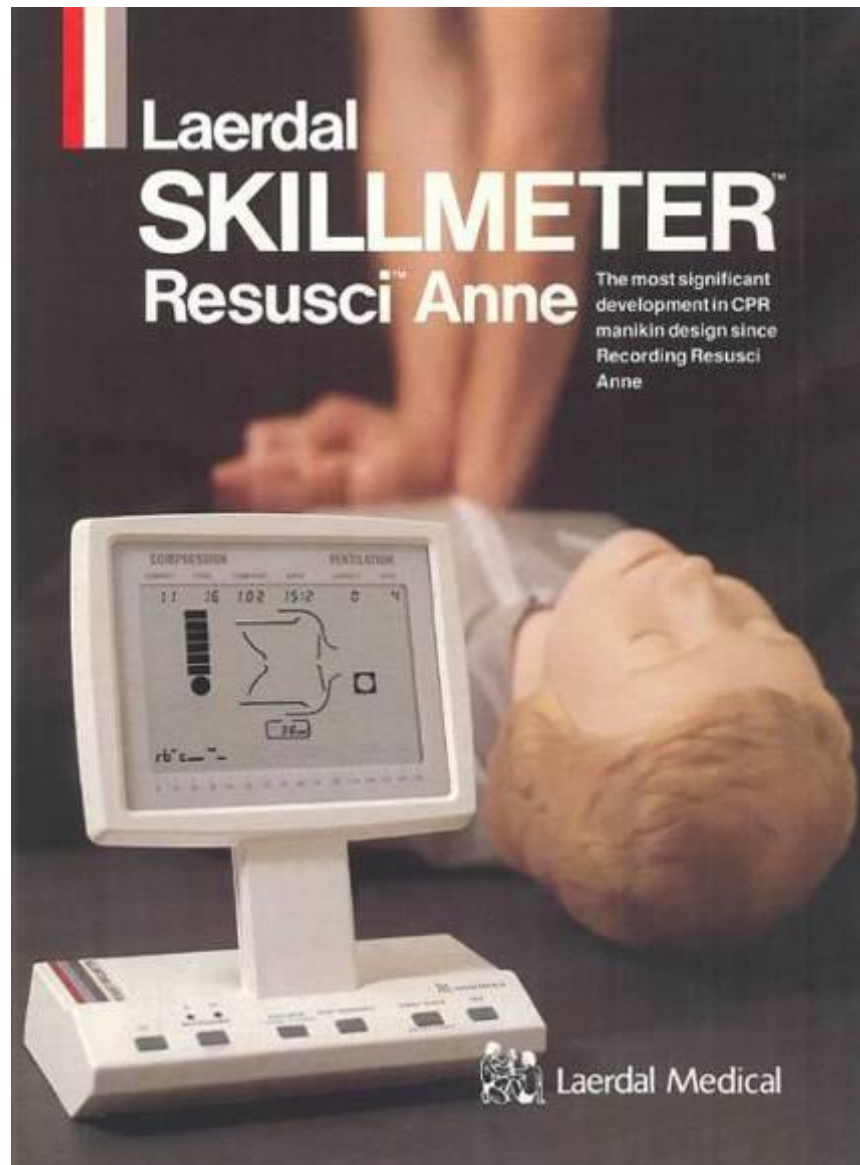
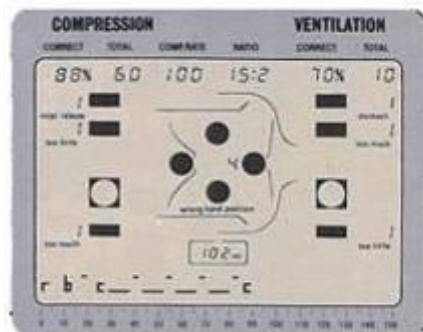
EYE
OVERLAY



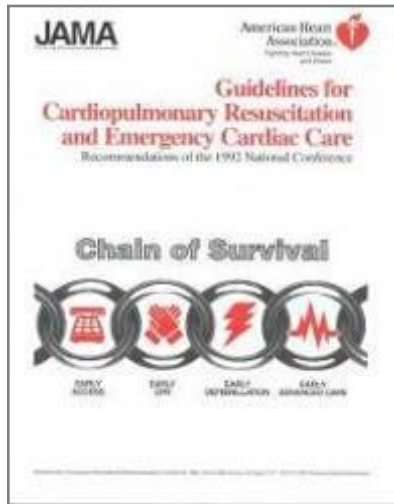
1974: "Practice to perfection", to allow training of laypeople in CPR



1980s: Quantitative feedback for 90% pass criteria

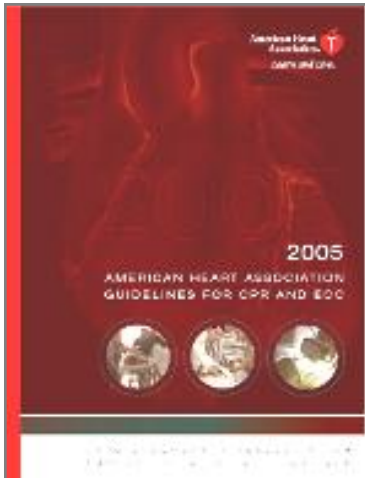


1992: More hands on training



Still instructor driven

2005: Self-directed training



Patient simulation

CPR Anytime "take-home" kit



Resusci Anne Skill Station

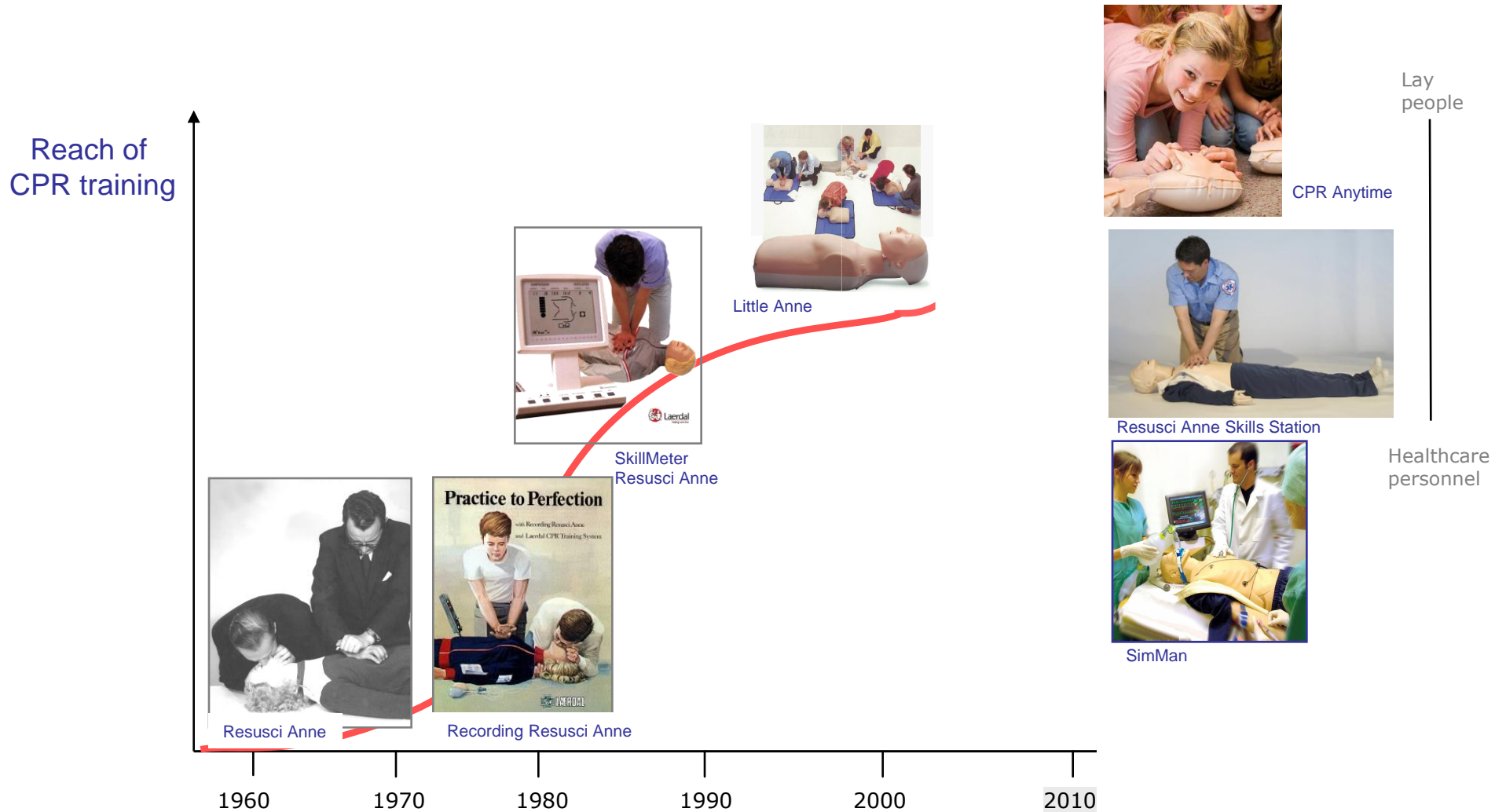
Voice prompt feedback training

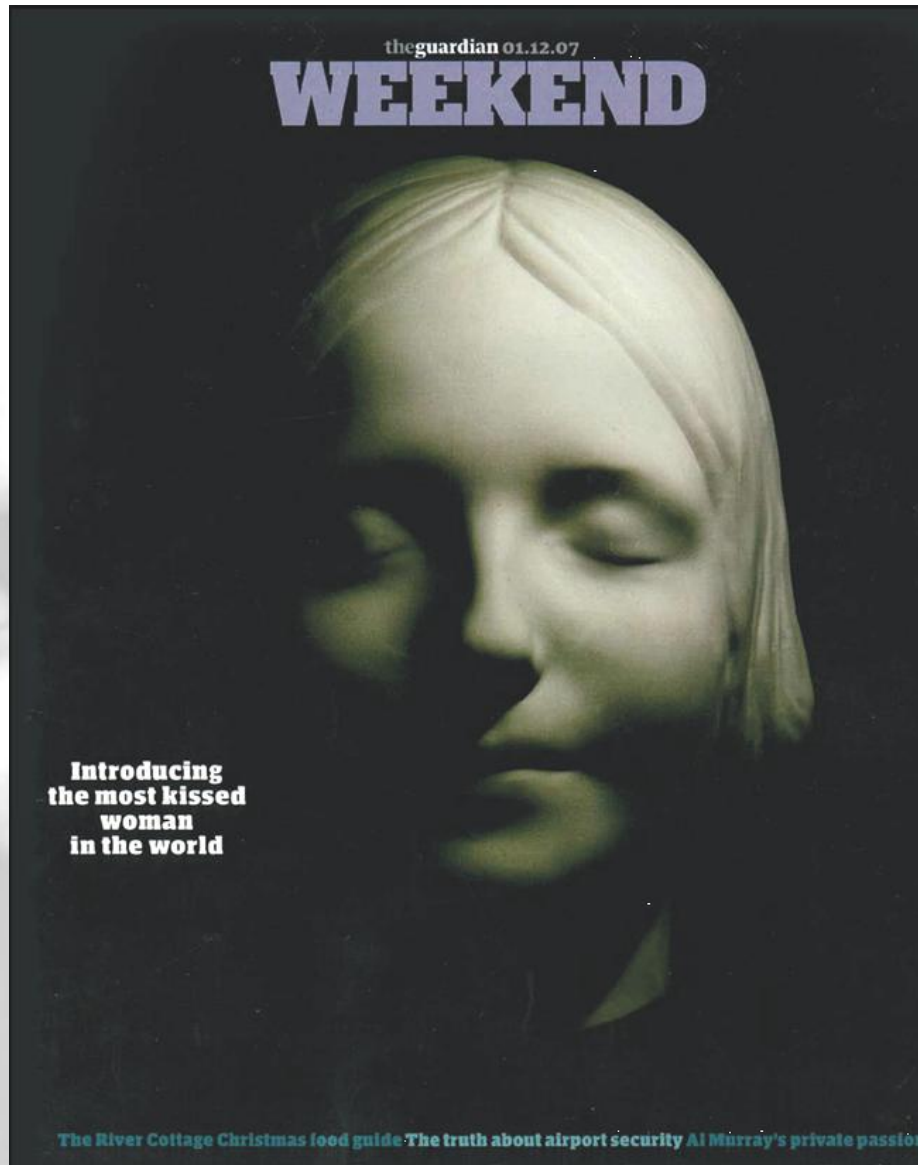
Realtime training at the scene

"Compress deeper"



Evolving needs and solutions





50 years - 300 million

9 page cover story in "The Guardian" , Dec 1 2007

10 + models, one facemask



Nation

CPR kit could train 20 million people per year

Officials hope users share life-saving skill with family, friends

By Robert Davis
USA TODAY

Cities struggling to save more victims of cardiac arrest have a new tool — a CPR lesson in a box.

CPR Anytime for Family and Friends is a \$30 kit from the American Heart Association that includes a mini-manikin, an instructional booklet and a DVD. The kit is meant to be shared in communities so that many people learn the skill — in as little as 20 minutes — using the same kit.

Instruction in cardiopulmonary resuscitation, which includes chest compressions and rescue breathing, traditionally takes place in a class. AHA officials believe, based on what they have observed in test cities, that the home-instruction kit will spread this knowledge faster and more efficiently.

"In two hours I trained 96 kids in a school in Minnesota, and they went home and trained their friends, parents and other family members," the AHA's Ed Stapleton says. His initial effort resulted in 396 people learning CPR. "If I had taught a traditional course, I would have trained six people."

Stapleton hopes the kit is a hit with schools, which for the most part have not taught the basic life-saving skill because teachers are rarely certified as CPR instructors. "This lets the teachers be facilitators," he says. "They just put in the DVD. Then the kids go home and teach parents and grandparents, the people who are more likely to be around during a cardiac arrest."

USA TODAY published a series of stories in 2003 that examined the nationwide recurrence of emergency

medical systems to sudden cardiac arrest. Among the findings was the fact that thousands of people die needlessly each year when they collapse after suffering this short-circuit in the heart, and no one around them knows CPR and emergency crews can't get there fast enough.

Chest compressions keep blood flowing until a shock can be delivered by an automated external defibrillator or until paramedics arrive to administer drugs. Easy-to-use AEDs are increasingly visible in public places.

But cardiac arrest victims often collapse at home, far from either an AED

or rescue personnel. And this is where the kits come in. The heart association hopes they will be used to train 20 million people each year. Currently, the AHA trains 9 million annually; the traditional classes are still available.

The kits can be ordered at 1-877-242-4277 or www.cpranytime.org.

The training material indicates that if would-be rescuers don't want to do rescue breathing, they can buy time with chest compressions alone.

In cities that struggle to raise cardiac-arrest survival rates, officials see the kits as a new weapon. Nashville hopes to train thousands on "CPR Sat-

urday" at the Coliseum on Nov. 12.

"CPR training should be fun, easy and quick," says Corey Slovis, medical director of Nashville's emergency medical services. "That's why we want to roll this out."

"This is what we've all been waiting for," says Neal Richmond, Louisville's EMS medical director. "When I first used this, I walked out feeling like, gee, I know CPR."

Louisville is distributing 5,000 kits to its citizens. "We believe we'll have 10,000 to 15,000 Louisville lifesavers on the streets of our town," Mayor Jerry Abramson says.



American Heart Association

CPR Anytime: The American Heart Association's new kit comes with an inflatable manikin, an instructional booklet and a DVD.

75 CENTS

THE NATION'S NEWSPAPER

www.usatoday.com

SPORTS SCORES

Coach K to lead U.S. team

Gets the call to turn around men's basketball for 2006 world games and 2008 Olympics

1C

Mike Krzyzewski: Duke coach since 1980.

USA TODAY

NO. 1 IN THE USA

'Time' for Wonder

After 10 years, Stevie Wonder returns with new CD, *A Time to Love*

Interview, 1, 3D

Angels wing to early lead

Los Angeles takes the first game of ALCS

Baseball

Newsline

News Money Sports Life

Markets mixed on inflation concerns

Index

Close Change

16,253.17 14.41

10:04

Baseball

Los Angeles takes the first game of ALCS

Yankees 5-0

Baseball

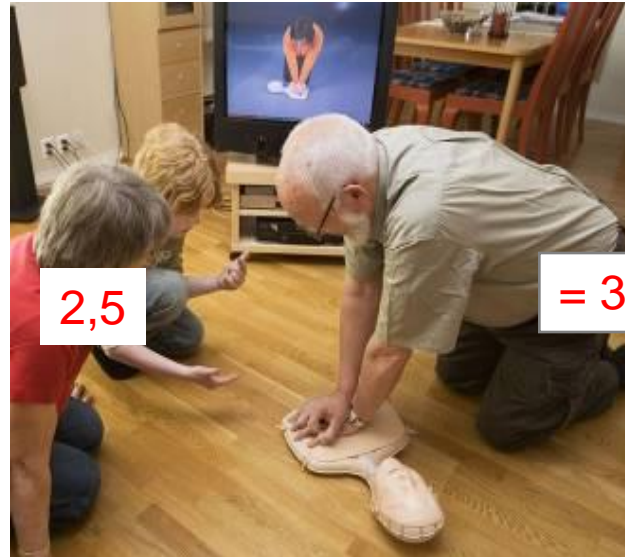
Los Angeles takes the first game of ALCS

Yankees 5-0

10% of a population trained in two years



+



= 3,5

Norway last two years: 120.000 schoolchildren on average trained 2,5 family members

...but only possible if

- The project is carefully planned and widely endorsed
- The support by the headmasters and the teachers are secured
- The project is concentrated in time and supported by a well structured media campaign, creating a demand pull effect when the kits are brought home.

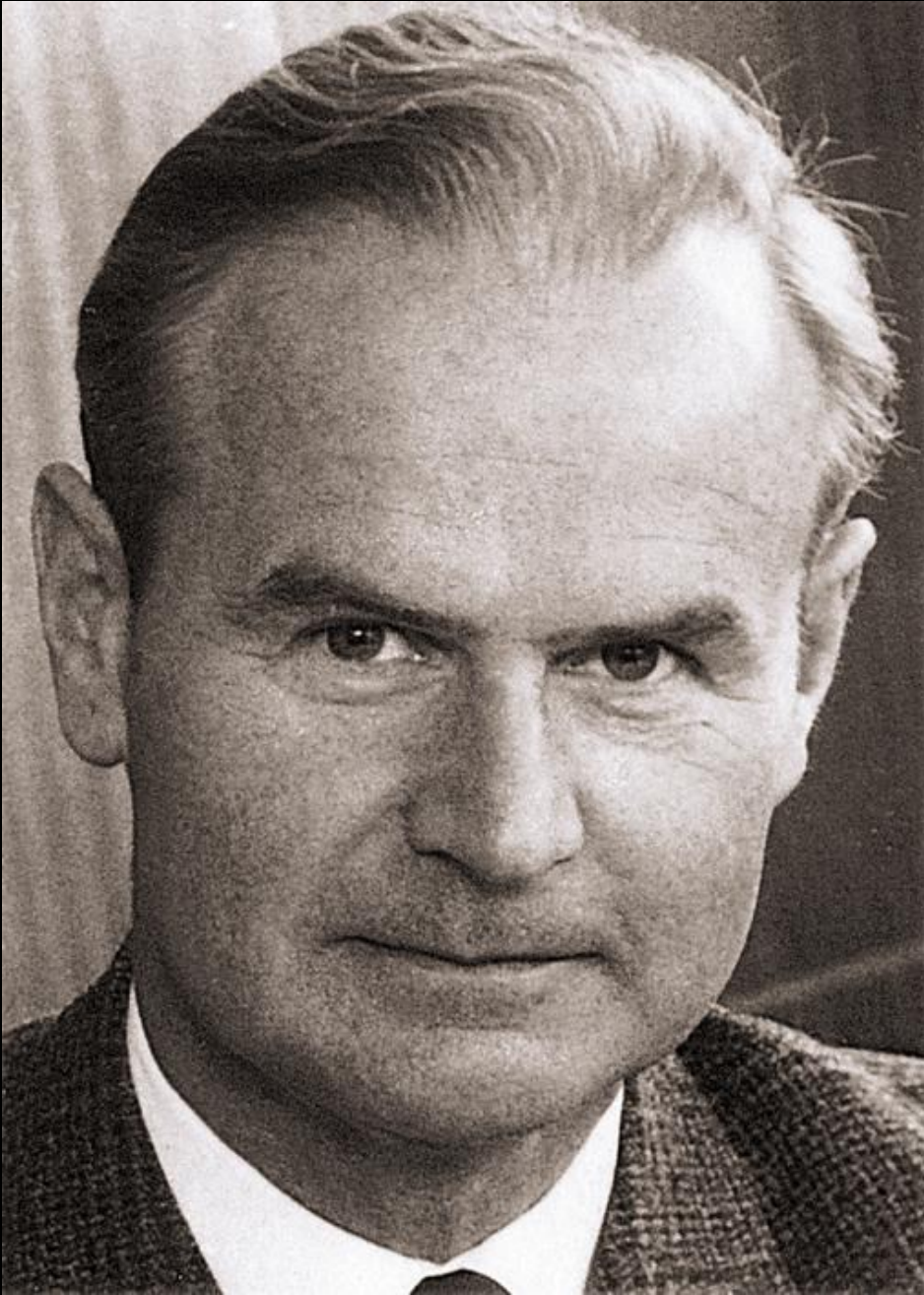
Evidens based education



1994; Laerdal Cardboard Home Trainer

1978 ; AHA honoring the CPR Pioneers and the dollmaker





Asmund S. Laerdal 1913 - 1981

Empathy
Curiosity
Respect

Vision
Entrepreneurship
Hard work

"Values we believe in"

