

SUPPLEMENTAL MATERIAL

Investigators participating in the Japanese Circulation Society with Resuscitation



Science Study (JCS-ReSS):

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Figure S1. Changes in basic life support for shockable cardiac arrest patients.

	The guidelines 2000 for CPR and ECC	The CoSTR 2005	The CoSTR 2010	The CoSTR 2015
Citizen rescuers				
Pulse check within 10 seconds	Elimination 			
Breathing assessment and/or delivery of two breaths if no regular breathing	Elimination 			
Dispatcher-assisted chest compression only resuscitation	Acceptable, safe, and useful	Acceptable, safe, and useful	Acceptable, safe, and useful	Always acceptable, proven safe, and definitely useful
Basic life support maneuvers				
Procedure for the maneuvers	Airway • Breathing • Circulation	Airway • Breathing • Circulation	Circulation • Airway • Breathing	Circulation • Airway • Breathing
Compression rate	≈ 100/min	≈ 100/min	≥ 100/in	100~120/min
Compression-ventilation ratio	15: 2	30: 2	30: 2	30: 2
Compression depth	4~5 cm	4~5 cm	≥ 5 cm	5~6cm
Ventilation volume and duration	10 mL/kg: ≥2sec	6~7 mL/kg: 1sec	6~7 mL/kg: 1sec	6~7 mL/kg: 1sec
Defibrillation protocol	3-shock sequence	1-shock and 2 min CPR	1-shock and 2 min CPR	CPR, 1-shock and 2 min CPR
Post cardiac arrest syndrome care for comatose survivors after out-of-hospital cardiac arrest due to shockable arrest			Hypothermia and percutaneous coronary intervention	33°C~36°C and percutaneous coronary intervention

CPR indicates cardiopulmonary resuscitation; ECC, emergency cardiovascular care; CoSTR, international consensus on cardiopulmonary resuscitation and emergency cardiovascular care science with treatment recommendations.

Figure S2. The percentage of the population in the eight districts of Japan.

