



CPR

How will you respond?

STUDY GUIDE

Someone collapses in a café. You are nearby, and two people can help. Step in, make the decisions that matter, and find out why each one comes when it does.

YOU ARE

The person who steps forward

SCENARIOS

Three, each about 5–7 minutes

COVERS

Adult CPR and AED, Australia

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BEFORE YOU START

This game is a learning prototype. It helps you practise the **decisions** of a first response. It is not a CPR certificate and it is not a tool to use in a real emergency. Tapping a screen cannot teach how hard to push, how to let the chest recoil, where your hands really are or how to give a breath. Practise those physical skills with an accredited first aid instructor.

In an emergency in Australia, call 000 and follow the call taker.

This guide does not tell you what to choose at the game's decision points. It sets out each stage, gives you questions to think about before and after you play, and leaves room for your notes. The game gives you feedback as you go.

Welcome: you step forward

In **CPR: How will you respond?** you are in a café in Australia when an adult collapses on the floor. Nobody else has taken charge. You do.



The Corner Café. Two people nearby can help: a barista and a customer.

The whole game happens inside one illustrated scene. You act by choosing things in the scene itself: checking the space around the person, speaking to them, giving jobs to the two people nearby, opening the airway, watching their breathing, giving compressions, turning on the AED on the floor and dragging its pads onto the person's chest. A caption bar tells you what is happening, and a progress bar across the top shows where you are: **Danger, Response, Send, Airway, Breathing, CPR, AED**.

WHAT YOU WILL PRACTISE

- Following the first-aid sequence in order, and knowing why each step comes when it does.
- Giving clear jobs to other people so help is called and an AED is brought.
- Telling normal breathing apart from breathing that is not normal.
- Choosing a CPR route that matches what you are trained and willing to do.
- Keeping a steady compression rhythm, and following an AED's prompts.
- Handing over to paramedics.

WHAT IT CANNOT DO

- Make a real call: every call in the game is simulated.
- Measure how deep or hard you would push, or whether the chest recoils.
- Check your hand position or your rescue breaths on a real person.
- Replace training with an accredited instructor.
- Cover children, drowning, injuries, pregnancy or every special situation.

HOW TO USE THIS GUIDE

Before you play a stage, read its page and answer the "before you play" questions. Make your own predictions. Then play. Afterwards, answer the "after you play" questions and write a note in your own words. The section on the three scenarios helps you replay and compare them.

How a scenario works

The start screen offers two ways in. Each scenario takes about 5 to 7 minutes.

BEGIN GUIDED EXPERIENCE

The best place to start. Guided mode always plays the first scenario, **"A sudden collapse"**. Its prompts give fuller instructions at several steps, so you can learn the sequence as you go. The top bar shows **GUIDED PRACTICE**.

PRACTISE WITHOUT HINTS

Choose any of the three scenarios from a panel titled "A new moment to respond." The game says the clinical details reveal themselves as you play, and the decisions are left to you. The prompts are shorter. The top bar shows **INDEPENDENT PRACTICE**.

What happens in a stage

- 1 **A prompt.** A short title and instruction appear, for example "Take a moment. Look around."
- 2 **Act in the scene.** Choices appear as labelled targets on the person, the helpers or the equipment. Some steps have one action; some ask you to decide between two.
- 3 **The scene responds.** A caption says what happens, and the characters move: the head tilts, the chest rises, a helper walks off for the AED.
- 4 **Feedback when needed.** If an action does not fit the situation, a feedback box explains why. The game records it as a **learning moment** and you can try again straight away.

At the end

When the paramedics take over, a summary appears: "You stepped forward." It shows your learning moments (with the feedback you received), how your compression rhythm went, and a short checklist. You can then choose **"Try another scenario"** or **"Replay guided"**.

CONTROLS

- Click or tap the targets in the scene, or use Tab and Enter.
- During compressions, tap the chest or press Space.
- Drag the AED pads onto the person, or select a pad and then its place.
- Pause with the II button or the Escape key.

SETTINGS (THE "I" BUTTON)

- Sound effects, spoken prompts, volume, captions and reduced motion.
- The clinical guidance the game is based on, with links to the Australian guidelines.
- Opening settings pauses the scenario.

Recognising when someone needs CPR

Everything in the game turns on one recognition: a person who is **unresponsive** and **not breathing normally** needs CPR, straight away.

When a person's heart suddenly stops pumping effectively (a cardiac arrest), they collapse and stop responding. Their breathing stops or becomes abnormal. CPR, chest compressions with or without rescue breaths, keeps some blood moving until an AED and paramedics arrive. An AED (automated external defibrillator) checks the heart's rhythm and, if the rhythm is one a shock can treat, tells the rescuer to give a shock.

NOT BREATHING NORMALLY

Breathing that is absent is not normal. Neither is **gasp**ing: occasional, irregular gasps with long pauses. Gasps can look like breathing, which is why people sometimes wait when they should act. The game's own words: occasional irregular gasps are not normal breathing.

LOOK, LISTEN AND FEEL

To check breathing, the airway must be open first. Then look for the chest rising and falling, listen for breathing sounds and feel for air moving. Ask yourself whether it is *normal*, not just whether there is *any* movement.

The sequence: DRSABCD

Australian first-aid guidance from ANZCOR (the Australian and New Zealand Committee on Resuscitation) sets out the first response as DRSABCD. The game follows the same order, and its progress bar uses the same steps.

D	R	S	A	B	C	D
Danger	Response	Send for help	Airway	Breathing	CPR	Defibrillation
Check for danger	Talk and touch	Call 000, get the AED	Head tilt–chin lift	Look, listen, feel	Start compressions	Attach an AED

The order matters. You cannot help if you are hurt (Danger). You need to know the person is unresponsive before you send for help (Response, Send). The airway must be open before breathing can be judged (Airway, Breathing). What you find decides whether you start CPR (Compressions) and use the AED (Defibrillation), or, if breathing is normal, protect the airway and keep watching.

TRY THIS BEFORE YOU PLAY

Write DRSABCD down the side of a page. Next to each letter, write the word it stands for and one thing you think a rescuer does at that step. Check your list after your first scenario.

STAGE 01 · D · DANGER

Danger

Before you help anyone, make sure you will not become a second casualty.

"Take a moment. Look around."



You meet this stage in every scenario.

THE SITUATION

An adult has collapsed on the floor of the Corner Café. Two other people are nearby. Before you go to the person, the game stops you and asks you to look around first: "An adult has collapsed. Check for danger to you, the person and others."

KEY TERMS

Danger

Hazard

Bystander

DRSABCD

BEFORE YOU PLAY

1. What kinds of danger might there be in a café? Think about the floor, equipment, electricity and people moving around.
2. Why might checking for danger come before going to help, even when someone needs help quickly?
3. The game says to check for danger to three groups. Who do you think they are?

AFTER YOU PLAY

1. What did the game tell you once you had checked the scene?
2. How long did the check take? Why is a quick check still worth doing?
3. Name one place (a road, a pool, a sports field) where the check might find something very different. What would you look for there?

NOTES

STAGE 02 · R · RESPONSE

Response

Talk and touch: find out whether the person responds.

"Can they respond to you?"



You meet this stage in every scenario.

THE SITUATION

You are now beside the person. They are lying still on their back. The game asks "Can they respond to you?" You check by speaking to them and gently touching their shoulders.

KEY TERMS

Responsive

Unresponsive

Talk and touch

BEFORE YOU PLAY

1. What could you say to someone to check whether they respond? Why might a simple question work best?
2. Why touch the shoulders gently rather than shaking the person?
3. What would tell you that a person is responding?

AFTER YOU PLAY

1. What happened when you spoke to the person and touched their shoulders?
2. The caption told you what to do next. What was it, and why does that come straight after this check?
3. How would you describe "unresponsive" to a friend in one sentence?

NOTES

STAGE 03 · S · SEND

Send for help

Two jobs, two people: one calls 000, one brings the AED.

"Give someone a clear job."



You meet this stage in every scenario.

THE SITUATION

Two people are close by: a barista behind the counter and a customer near the window. The game asks you to Give someone a clear job. "Two people are nearby. Ask one to call 000 and one to bring the AED."

KEY TERMS

000 (Triple Zero)

Ambulance

AED

Delegation

Call taker

BEFORE YOU PLAY

1. If you shout "Somebody call an ambulance!" to a room, what might happen? How could you make it more likely that someone acts?
2. What is an AED? Have you noticed where one is kept at your school or a place you visit?
3. Why might the rescuer stay with the person instead of making the call themselves?

AFTER YOU PLAY

1. Which job did you give to each person, and what did each of them say back to you?
2. What would you say to a stranger to give them a clear job? Write the exact words.
3. What information did the caller say they would give on the call?

NOTES

STAGE 04 · A · AIRWAY

Airway

Head tilt and chin lift, with the pistol grip.

“Open their airway.”



You meet this stage in every scenario.

THE SITUATION

Help is on its way. Before you can check breathing, the game asks you to Open their airway. A close-up view shows the rescuer's hands at the person's head and chin.

KEY TERMS

Airway

Head tilt–chin lift

Pistol grip

Soft tissues of the neck

BEFORE YOU PLAY

1. What is the airway, and why might it need opening in a person who is unresponsive and lying on their back?
2. Where do you think the rescuer's hands should go to open the airway?
3. Why might pressing on the soft part under the chin be a problem?

AFTER YOU PLAY

1. Describe the pistol grip in your own words: where do the thumb, index finger and middle finger go?
2. What did the game warn you not to do with your fingers?
3. Why does the game ask you to open the airway before checking breathing?

NOTES

STAGE 05 · B · BREATHING

Breathing

Look, listen and feel, then decide: is this normal breathing?

“Is their breathing normal?”



You meet this stage in every scenario.

THE SITUATION

With the airway open, the game asks the most important question in the scenario: “Is their breathing normal?” You observe first, using a close view of the face and chest, a breathing track and sound, then decide.

KEY TERMS

Normal breathing

Gasping

Look, listen and feel

Observation

BEFORE YOU PLAY

1. What is the difference between “breathing” and “breathing normally”?
2. What exactly would you look for, listen for and feel for?
3. If you were unsure what you were seeing, what could you do before deciding?

AFTER YOU PLAY

1. Describe exactly what you saw and heard during the observation, using the game’s words if you can.
2. Did you replay the observation? What did a second look add?
3. How confident were you in your decision? What made it hard or easy?

NOTES

STAGE 06 · C · CPR

Choosing a CPR route

Compression-only CPR, or 30 compressions to 2 breaths if trained and willing.

"They need CPR. Start now."



You meet this stage in some scenarios.

THE SITUATION

The person is unresponsive and not breathing normally. The game says "They need CPR. Start now." and asks you to Choose the route that matches your ability.

KEY TERMS

CPR

Compression-only CPR

Rescue breaths

30:2

Trained and willing

BEFORE YOU PLAY

1. What does "trained and willing" mean to you? What might make someone unable or unwilling to give rescue breaths?
2. If you could not give breaths, what could you still do?
3. Which route would you choose today, honestly, and why?

AFTER YOU PLAY

1. Which route did you choose, and what happened next in the scenario because of it?
2. Replay and choose the other route. What changed?
3. Why might the game treat both routes as acceptable?

NOTES

STAGE 07 · C · CPR

Hand position

Where on the chest do compressions go?

"Where do your hands go?"



You meet this stage in some scenarios.

THE SITUATION

Before compressions begin, the game asks "Where do your hands go?" Two places on the chest are offered in the scene.

KEY TERMS

Breastbone (sternum)

Heel of the hand

Firm surface

BEFORE YOU PLAY

1. Where on the chest do you think compressions should go? Point to it on yourself.
2. Many people believe the heart is on the left. How might that belief affect where people put their hands?
3. Why might the person need to be on a firm surface?

AFTER YOU PLAY

1. Describe the hand position in your own words, using the words "heel", "breastbone" and "on top".
2. What did the scene note say about your arms and shoulders?
3. If you chose differently from the game's guidance, what did the feedback say?

NOTES

STAGE 08 · C · CPR

Chest compressions

Tap a steady rhythm of 100 to 120 a minute, or watch a demonstration.

"Find a steady rhythm."



You meet this stage in some scenarios.

THE SITUATION

Now you give compressions. The game asks you to Find a steady rhythm. by tapping the person's chest in the scene, or pressing Space, for a short practice sample of 30 taps.

KEY TERMS

Compression rate

100–120 per minute

Full recoil

Interruptions

Beat guide

BEFORE YOU PLAY

1. How fast do you think 100 to 120 compressions a minute is? Tap it on the desk for ten seconds and count.
2. What does "full recoil" mean? Why might it matter?
3. What can a tapping game measure, and what can it never measure about real CPR?

AFTER YOU PLAY

1. What did the rate meter and feedback line tell you while you tapped?
2. Did you use the beat guide? Did it help or distract you?
3. How did your rhythm change when you got tired or distracted?

NOTES

STAGE 09 · C · CPR

Rescue breaths (30:2)

Only on the trained-and-willing route: two breaths, about one second each.

“30 compressions. Now 2 breaths.”



You meet this stage on the trained-and-willing route only.

THE SITUATION

If you chose the trained-and-willing route, the 30 compressions are followed by 30 compressions. Now 2 breaths. An animation shows the rescuer lean in, seal and breathe, and the chest rise and fall.

KEY TERMS

Rescue breath

Seal

Chest rise

Excessive ventilation

BEFORE YOU PLAY

1. What do you think a rescuer must do with the person's nose and airway before giving a breath?
2. How would a rescuer know that a breath has worked?
3. Why might giving too much air be a problem?

AFTER YOU PLAY

1. List the steps the game described for each breath.
2. What should a rescuer check if a breath does not raise the chest?
3. How long did each breath take in the animation? Why not longer?

NOTES

STAGE 10 · D · AED

The AED arrives

Turn it on, follow its prompts, and expose the chest.

"The AED is here. Turn it on."



You meet this stage in some scenarios.

THE SITUATION

The helper is back with the AED, which now sits open on the floor beside the person. The game says "The AED is here. Turn it on." Then the chest must be uncovered: "Pads must touch bare skin."

KEY TERMS

AED

Prompts

Expose the chest

Bare skin

BEFORE YOU PLAY

1. What do you think happens when you turn an AED on?
2. Why might the AED's pads need bare skin?
3. Who keeps doing CPR while the AED is being set up?

AFTER YOU PLAY

1. Where was the AED, and how did you turn it on?
2. What did the scene note say about CPR while the AED was being prepared?
3. Who was ready to take over CPR at the chest-exposure step?

NOTES

STAGE 11 · D · AED

Attaching the pads

Below the right collarbone, and on the left side below the armpit.

“Follow the diagrams on the pads.”



You meet this stage in some scenarios.

THE SITUATION

The chest is bare. Your helper now gives CPR while you attach the pads: “Follow the diagrams on the pads.” You drag each pad from beside the AED onto the person, or select a pad and then a highlighted place on the chest.

KEY TERMS

Pads

Collarbone

Armpit

Front view

Implanted device

BEFORE YOU PLAY

1. Where do you think the two pads should go?
Sketch a chest and mark them.
2. Why might the pads go on opposite sides of the heart?
3. What might stop a pad sticking properly to the skin?

AFTER YOU PLAY

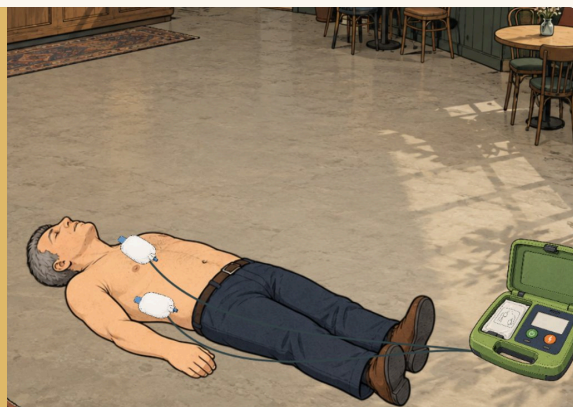
1. Describe where each pad went, using the words “right”, “left”, “collarbone” and “armpit”.
2. In the front-view diagram, why is the person’s right on your left?
3. What did the scene note say about wet skin, medication patches and implanted devices?

NOTES

Analysis, shock and resuming CPR

Everyone clear. The AED decides. Then CPR again, straight away.

“Stand clear. Nobody touches them.”



You meet this stage in some scenarios.

THE SITUATION

The AED checks the heart's rhythm: “Stand clear. Nobody touches them.” Depending on the scenario, it either advises a shock or does not. Either way, the next instruction is about CPR.

KEY TERMS

Analysis

Stand clear

Shock advised

No shock advised

Resume CPR

BEFORE YOU PLAY

1. Why must nobody touch the person while an AED analyses?
2. Who do you think decides whether a shock is given: the rescuer or the AED?
3. What do you think a rescuer should do straight after the AED has finished?

AFTER YOU PLAY

1. What did the AED say in your scenario? What did you do next?
2. What does the game say “No shock advised” does not mean?
3. Why might a rescuer be tempted to stop and check the person after the AED, and what does the game say?

NOTES

Recovery position and monitoring

Unresponsive but breathing normally: protect the airway and keep watching.

“Protect their airway.”



You meet this stage in one scenario.

THE SITUATION

In one scenario the person is unresponsive but breathing normally. Instead of CPR, the game asks you to Protect their airway. in three steps, then to stay and keep watching their breathing until help arrives.

KEY TERMS

Recovery position

Monitor

Airway

Abnormal breathing

BEFORE YOU PLAY

1. Why might an unresponsive person who is breathing still need help with their airway?
2. Why roll someone onto their side gently, supporting the head?
3. What would you keep checking while you wait for the ambulance?

AFTER YOU PLAY

1. List the three steps the game used for the recovery position.
2. What does the game tell you to do if breathing becomes absent or abnormal while you are monitoring?
3. Which steps of DRSABCD did this scenario use, and which did it not need?

NOTES

STAGE 14 · AED

Handover to paramedics

Keep going until professionals take over, then tell them what happened.

“The paramedics are coming in.”



You meet this stage in every scenario.

THE SITUATION

Time moves forward. Paramedics come in through the café door and approach while you keep caring for the person. The game says “The paramedics are coming in.” When they reach you, you hand over.

KEY TERMS

Paramedic

Handover

Continue care

BEFORE YOU PLAY

1. When do you think a rescuer can stop giving CPR?
2. What would paramedics want to know when they arrive?
3. Why keep going while the paramedics are walking over?

AFTER YOU PLAY

1. What did the paramedics say as they arrived and when they reached you?
2. Write a short handover: what you saw and what you did, in the order you did it.
3. What did the completion screen tell you about your decisions and your rhythm?

NOTES

Three scenarios

Each scenario starts the same way: a collapse in the same café. What you find when you check breathing, and what happens after that, differs.

SCENARIO 01

A sudden collapse

Also the guided scenario.

SCENARIO 02

A different response

SCENARIO 03

Look a little closer

Play all three in independent practice (“**Practise without hints**”). For each one, fill in the table as you go. Do not look ahead: the point is to notice the differences yourself.

A SUDDEN COLLAPSE	A DIFFERENT RESPONSE	LOOK A LITTLE CLOSER
What I observed when I checked breathing		
What I decided, and why		
What the AED said (if used)		
What happened next		
Learning moments I had		

After all three

1. At which stage did the three scenarios start to differ? Why there?
2. Which observation was hardest to judge? What made it hard?
3. In which scenarios did the AED give different instructions? What did you do after each one, and was it the same or different?
4. Which steps of DRSABCD did every scenario use? Which did one scenario not need, and why?

Your notes on the scenarios

WHAT I NOTICED WHEN I COMPARED THE SCENARIOS

A SCENARIO I WANT TO REPLAY, AND WHAT I WILL DO DIFFERENTLY

Rhythm practice and your results

During compressions you tap the person's chest in the scene, or press Space, aiming for **100 to 120 compressions a minute**. That is a tap a little more often than once every half-second.

WHILE YOU TAP

- The inset shows your **compressions per minute** and how many of the 30 practice taps you have done.
- A meter moves between **SLOWER** and **FASTER**, with 100–120 in the middle.
- A feedback line tells you to go a little faster, a little slower, or that your rhythm is steady.
- The **beat guide** ticks at 110 a minute. You can switch it off.

WATCH RHYTHM INSTEAD

If tapping is difficult or uncomfortable, choose **"Watch rhythm instead"**. The game demonstrates compressions at 110 a minute. Demonstration taps are never counted as yours: your results will say your timing was not assessed.

How your taps are scored

The game measures the time between each of your taps (an **interval**). It does not just take an average, because an average can hide a rhythm that keeps speeding up and slowing down.

- An interval between 0.5 and 0.6 seconds counts as **on target** (100–120 a minute). Shorter is **too fast**; longer is **too slow**.
- You need at least **8 measured intervals** for a full assessment.
- A pause of more than **1.5 seconds** between taps is counted as a long gap.
- Time spent paused, on the AED steps or giving breaths is not counted, and neither are demonstration taps.
- Your **typical pace** is worked out from your middle interval, so one stray tap does not distort it.

What the results can say

These examples were produced by the game's own scoring, using made-up tap patterns.

TAP PATTERN	ON TARGET	HEADING	ADVICE SHOWN
Steady taps about 0.55 s apart	100%	Mostly on target	Keep this pace and practise maintaining it for longer.
Taps hurried to about 0.45 s apart	0%	Timing needs practice	Slow your tapping down. Follow the beat guide and leave time between presses.
Taps drifting to about 0.7 s apart	0%	Timing needs practice	Increase your tapping pace. Follow the beat guide and keep going steadily.
Steady, then one pause of 2 seconds	95%	Timing needs practice	Increase your tapping pace. Follow the beat guide and keep going steadily.
Alternating quick and slow taps	0%	Timing needs practice	Your pace alternated between fast and slow. Aim for evenly spaced presses.
Only five taps	–	Not enough tapping to assess	Try a full tapping round to get useful rhythm feedback.

REMEMBER

The results measure the timing of clicks or key presses, nothing more. Real compressions also need the right depth (the game's guidance says about one-third of the chest, more than 5 cm, for an adult), full recoil, the right hand position and few interruptions. Only hands-on practice with an instructor and a manikin can build those.

Closing reflection

1. Which decision in the game did you find hardest? What would help you make it more confidently?
2. Describe one learning moment you had, in your own words. What did the feedback teach you?
3. Explain to a friend why “they’re breathing a bit” might not be a reason to wait.
4. Write the exact words you would use to give two strangers a clear job each.
5. What can this game not teach you? Where could you learn it?

YOUR REFLECTION

Keep going

- ☐ Play all three scenarios in independent practice.
- ☐ Replay one scenario choosing the other CPR route.
- ☐ Find out where the nearest AED is at your school, home or club.
- ☐ Ask about an accredited first aid or CPR course.

Glossary

000 (Triple Zero)

The emergency number in Australia. Ask for an ambulance and give your location. Calls in the game are simulated.

30:2

The pattern for rescuers who are trained and willing to give breaths: 30 chest compressions, then 2 rescue breaths.

AED

Automated external defibrillator: a portable device that analyses the heart's rhythm through pads on the chest and, if a shock is advised, prompts the rescuer to give one. Turn it on and follow its prompts.

Airway

The passage that air travels through from the mouth and nose to the lungs.

Analysis

The few seconds when the AED checks the heart's rhythm. Nobody may touch the person.

ANZCOR

The Australian and New Zealand Committee on Resuscitation, which publishes the guidelines the game is based on. ANZCOR has not endorsed the game.

Breastbone

The flat bone in the centre of the chest (the sternum). Compressions go on its lower half.

Bystander

Someone who happens to be present when an emergency occurs.

Cardiac arrest

When the heart suddenly stops pumping blood effectively. The person collapses, does not respond and does not breathe normally.

Compression-only CPR

Continuous chest compressions without rescue breaths, for rescuers who are unable or unwilling to give breaths.

CPR

Cardiopulmonary resuscitation: chest compressions, with or without rescue breaths, for a person who is unresponsive and not breathing normally.

Delegation

Giving a specific task to a specific person, such as "please call 000".

DRSABCD

Danger, Response, Send for help, Airway, Breathing, CPR, Defibrillation: the order of a first response.

Expose the chest

Remove clothing so the AED pads can stick to bare skin.

Full recoil

Letting the chest rise all the way back up between compressions.

Gasping

Occasional, irregular gasps. Gasping is not normal breathing.

Handover

Telling the arriving paramedics what you saw and what you have done, as they take over care.

Head tilt–chin lift

Opening the airway of an adult by gently tilting the head back and lifting the bony point of the chin.

Learning moment

The game's name for an action that did not fit the situation. Feedback explains why, and you try again.

Normal breathing

Regular breathing, with the chest rising and falling and air moving with each breath.

Pads

The sticky AED electrodes. In the game: one just below the person's right collarbone, one on the left side of the chest below the armpit.

Paramedic

A health professional who responds to emergencies, usually by ambulance.

Pistol grip

The hand shape for the chin lift: thumb below the lower lip, index finger along the jaw, middle finger supporting the bony chin.

Recovery position

Lying an unresponsive person who is breathing normally on their side, with the airway open and the mouth directed downwards.

Rescue breath

A breath given mouth to mouth, about one second long, with enough air to make the chest rise.

Shock advised / No shock advised

The AED's decision after analysis. Either way, CPR resumes straight away. "No shock advised" does not mean the person has recovered.

Unresponsive

Not reacting to voice or touch.

The game is based on ANZCOR basic life support guidance, checked by its makers on 1 October 2026. ANZCOR has not reviewed or endorsed the game or this guide.