

# HYPOTHERMIA EMERGENCIES

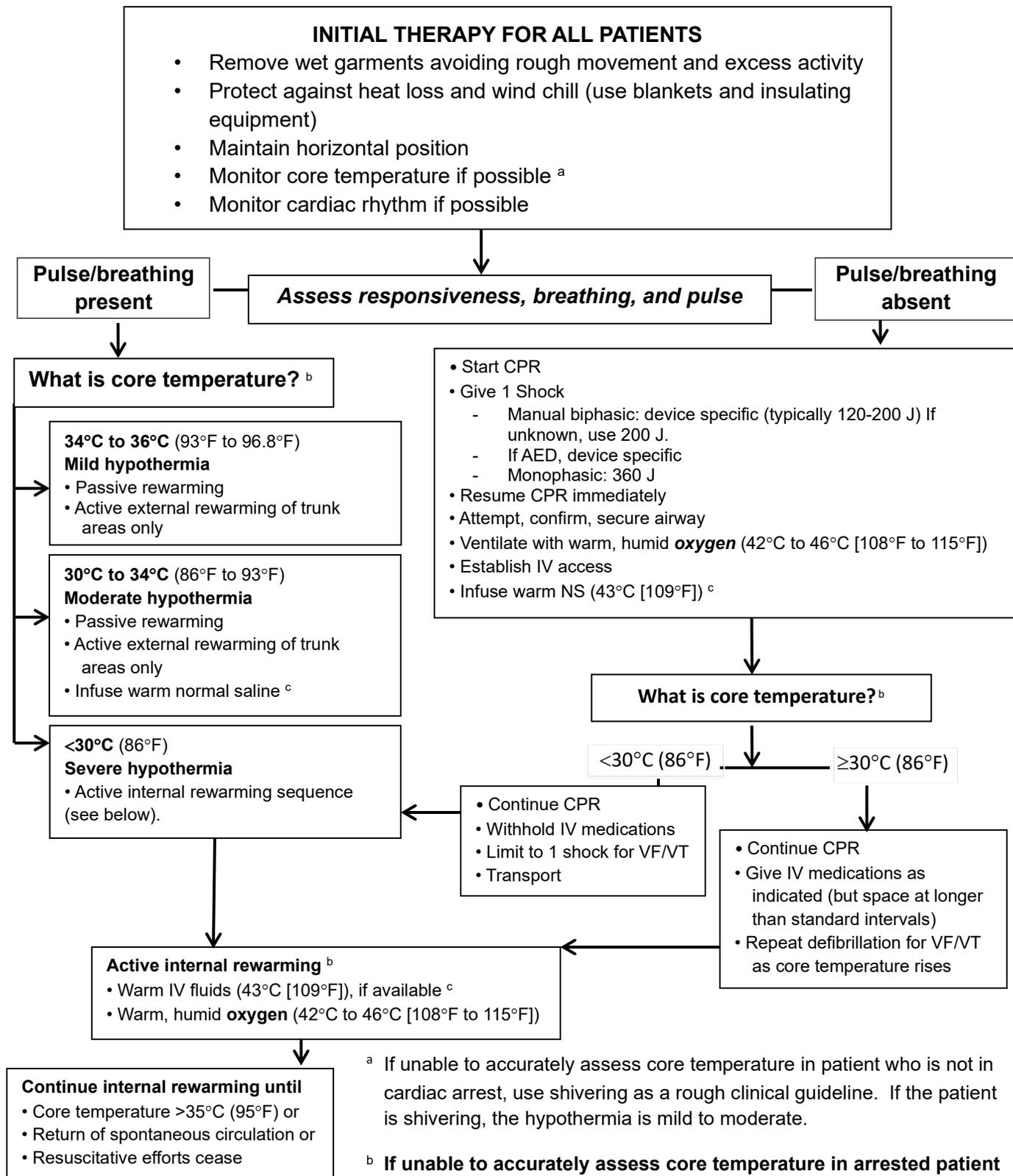
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Follow Assessment, General Procedures Protocol

- Consider hypothermia with elderly patients, poverty and drug/alcohol use.
- Shivering generally occurs between 90-98° F (32-37° C), but may be absent or minimal below this.
- Severe hypothermia is currently defined in ACLS guidelines as core temperature below 86°F (30°C).
- Handle patients gently, **the patient should not be allowed to ambulate** as manipulations can **worsen hypothermia and** precipitate lethal cardiac arrhythmias.
- Consult MD for therapies or direction of care when unclear about degree of hypothermia.
- See attached ACLS severe hypothermia algorithm.

<b>EMR</b>	<ul style="list-style-type: none"><li>• Remove/protect from environment</li><li>• Remove wet clothing</li><li>• Protect against heat loss and wind chill</li><li>• Maintain horizontal position</li><li>• Assess and support ABC's</li><li>• Monitor vitals, to include frequent core temperature assessments</li><li>• Oxygen therapy. (Heated preferred) – <b>See Oxygen Therapy</b></li><li>• Assist ventilations as needed</li><li>• Begin warming immediately, use caution with the application of hot packs – <b>See Hypothermia Algorithm</b></li><li>• Administer liquid oral glucose for treatment of possible hypoglycemia if indicated.</li></ul>
<b>EMT</b>	<ul style="list-style-type: none"><li>• Check blood glucose.</li><li>• If blood glucose is &lt;60: administer glucose solution orally if the patient is awake and able to protect own airway.</li><li>• Obtain 12 lead ECG if able. - <b>See ECG/12 Lead</b></li></ul>
<b>A-EMT / EMT-I</b>	<ul style="list-style-type: none"><li>• IV – NS with standard tubing/saline lock. Use warmed solution if possible (109°F 43°C) 500 ml, then reduce rate to 1 L/hr.</li><li>• IO as indicated for shock and no IV access – <b>See EZ-IO/IO Infusion</b></li><li>• Consider additional 500 ml bolus if hypotensive, unless contraindicated by onset of pulmonary edema</li><li>• If patient is hypoglycemic and temperature is &gt;93F (34C) administer Dextrose.</li><li>• If patient is hypoglycemic and temperature is &lt;93F (34C) administer Dextrose 5% (50 grams in a 1 liter bag).</li></ul>
<b>PARAMEDIC</b> 	<ul style="list-style-type: none"><li>• Avoid intubation if possible</li><li>• <b>MD Order</b> prior to any cardiac meds</li></ul>

## Algorithm for Treatment of Severe Hypothermia



<sup>a</sup> If unable to accurately assess core temperature in patient who is not in cardiac arrest, use shivering as a rough clinical guideline. If the patient is shivering, the hypothermia is mild to moderate.

<sup>b</sup> If unable to accurately assess core temperature in arrested patient and unsure whether this patient is severely hypothermic, use routine ACLS guidelines.

<sup>c</sup> If hypoglycemic, add 50g dextrose to 1000 cc NS