

#### POLICY M10 - ADULT HYPOTHERMIA

Effective Date: September 1, 2018 Last Review: October 3, 2011 Next Review: September 2021

Authority: Health and Safety Code, Division 2.5, California Code of Regulations, Title 22, Division 9

#### **DEFINITION: LOW BODY TEMPERATURE - 95°F OR LESS**

MILD 95°F to 93°F - Shivering, complaint of cold, usually conscious, ALOC, clumsiness, normal BP, or cyanosis.

MODERATE 86°F to 93°F - Confusion, semiconscious, combative, shivering ceases, muscle rigidity, dilated pupils, decreased breathing rate, BP difficult to obtain, VF with agitation/sudden movement (handle/move patient gently).

SEVERE 86°F OR LOWER - Comatose, no rigidity (flaccid), apnea, spontaneous VF, the severely hypothermic patient may appear to be clinically dead.

Pulse and respirations may need to be checked for longer periods before beginning CPR (up to 60 seconds).

### **BLS TREATMENT:**

**OXYGEN:** as appropriate keep SpO2 at least 94%, assist ventilations as necessary.

VITALS: assess vitals

**CHECK TEMPERATURE:** assess temperature

**BLOOD SUGAR CHECK:** test blood sugar and treat as appropriate.

**WARMING MEASURES:** Remove wet clothing. If patient requires moving, do so carefully to avoid jostling or bumping. Gentle warming measures (blankets & hot packs), avoid unnecessary movement or rubbing. Protect against heat loss,

keep patient horizontal, Initiate CPR as needed

## ALS TREATMENT: MILD/MODERATE 86°F OR GREATER

**OXYGEN:** as appropriate keep SpO2 at least 94%, establish advanced airway as needed.

**MONITOR:** treat rhythm as appropriate. If pulseless/apneic initiate CPR.

Give IV meds as indicated, but at longer than standard intervals. Defibrillate VF/VT as necessary (standard ACLS).

IV/IO ACCESS: Warm IV fluids rate as appropriate

**BLOOD SUGAR CHECK:** Test blood sugar if < 60 mg/dl refer to Adult M5 ALOC Policy

### ALS TREATMENT: SEVERE LESS THAN 86°F

**OXYGEN:** as appropriate keep SpO2 at least 94%, establish advanced airway as needed.

**MONITOR:** assess for pulse up to 60 seconds, treat rhythm as appropriate. If pulseless/apneic initiate CPR. Withhold IV meds until temperature is **GREATER THAN 86°F** Limit shocks for VF/VT to one shock. Once temperature is **GREATER** 

**THAN 86°F** defibrillate VF/VT as necessary.

**IV/IO ACCESS:** Administer warm IV fluid bolus (250 ml increments), reassess patient frequently. Most severely hypothermic patients are volume depleted.

BLOOD SUGAR CHECK: Test blood sugar if < 60 mg/dl refer to Adult M5 ALOC Policy

Approved By: Ajinder Singh, MD EMS Medical Director Page 1



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