

COLD INDUCED INJURY

ALWAYS USE BODY SUBSTANCE ISOLATION PRECAUTIONS

INDICATION

- Exposure to cold and/or wet environment

CRITICAL INFORMATION

- Mild Hypothermia - Clinical features: Shivering, often painful. May display any of the following: dysarthria, apathy, poor judgment, ataxia (e.g., stumbling), tachycardia and tachypnea. Presentation includes normal blood pressure and level of consciousness.
- Moderate Hypothermia - Clinical features: In addition to above symptoms, the patient may display an absence of shivering, stupor, progressive decrease in level of consciousness as temperature drops, and atrial arrhythmias, especially atrial fibrillation, which will resolve with rewarming.
- Severe Hypothermia – Clinical features: Minimal voluntary motion, minimal or no response to pain, decreasing level of consciousness, hypotension, ventricular arrhythmias, especially ectopy. Peripheral pulses may be difficult to obtain.

TREATMENT

- Move to a warm environment
- Remove any wet clothing and cover entire body (including head & hands) with warm blankets
- ALS RMC
- Mild Hypothermia:
 - Apply heat packs to neck, axilla, and groin
- Moderate and Severe Hypothermia
 - Cardiac monitor – treat dysrhythmias per appropriate policy
 - High flow oxygen
 - IV **NS** 250 ml (warm preferred), bolus q 15 minutes

SPECIAL CONSIDERATION

- More subtle presentations exist in the elderly, newborns, chronically ill, patients taking medications and alcohol
- Handle the patient gently for all procedures; physical manipulations have been reported to precipitate ventricular fibrillation.