



**Toxins & Environmental
HYPOTHERMIA
Practice Guideline**

Patient Care Goals:

1. Maintain hemodynamic stability
2. Prevent further heat loss
3. Rewarm the patient in a safe manner
4. Appropriate management of hypothermia induced cardiac arrest
5. Prevent loss of limbs

Patient Presentation:
Inclusion Criteria

1. Patients may suffer from hypothermia due to exposure to a cold environment (increased heat loss) or may suffer from a primary illness or injury that, in combination with cold exposure (heat loss in combination with decreased heat production), leads to hypothermia
2. Patients with mild hypothermia will have normal mental status, shivering, and may have normal vital signs while patients with moderate to severe hypothermia will manifest mental status changes, eventual loss of shivering and progressive hemodynamic instability including bradycardia, hypotension, and decreased respiratory status; rescuer may need to clinically evaluate vitals signs longer than standard patients (60 seconds).

Exclusion Criteria

1. Patients without cold exposure
2. Patients in cardiac arrest from a drowning event (see drowning protocol)

Frostbite: Consider transport to St Mary's Milwaukee for patients with significant frostbite who do not meet criteria for transport to trauma center.

Patient Safety Considerations:
Devices that self-generate heat (e.g. heat packs) that are being utilized during the rewarming process should be wrapped in a barrier to avoid direct contact with the skin to prevent burns.

Quality Improvement:
Key Documentation Elements:

1. Reasons resuscitation not initiated PRN.
2. Signs of hemodynamic instability PRN.
3. Destination decision.
4. Patient use of alcohol/drugs or other contributing circumstances.

