ORANGE COUNTY EMERGENCY MEDICAL SERVICES
BASE HOSPITAL TREATMENT GUIDELINES
THERMAL DISORDERS- ADULT/ADOLESCENT

BASE GUIDELINES

1. Determine ALS Standing Order treatments/procedures rendered prior to base hospital contact. Use ALS standing order as guidelines for treatments/procedures not initiated prior to base hospital contact.

Hypothermia:

1. If patient presents with pain, consider *Morphine Sulfate 5 mg IV to relieve pain, may repeat once* (hold if BP less than or drops below 90 systolic).

Hyperthermia:

1. If presenting with altered level of consciousness, obtain blood glucose in addition to initiating Normal Saline bolus.

ALS STANDING ORDER

Hypothermia:

Not in Cardiac Arrest:

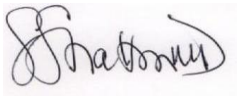
1. Initiate warming as available; remove any wet clothing and cover to conserve body heat.
2. Cardiac monitor, document rhythm.
3. Expect slow heart rate and weak pulse; do not attempt to reverse bradycardia in field.
4. Transport to nearest ERC.

Apparent Cardiac Arrest and Not Obviously Dead:

1. Monitor pulse for 30-45 seconds before initiating CPR. ► If no pulse detected, treat using cardiac arrest SO (SO-C-10).
2. Assist ventilation with bag-valve-mask, avoid hyperventilation.
3. Initiate warming as available; remove any wet clothing and cover to conserve body heat.
4. ALS escort to nearest ERC, contact Base Hospital as needed.

Hyperthermia:

1. Pulse oximetry, if oxygen saturation less than 95%:
   ► *High flow oxygen by mask as tolerated.*
2. If hypotensive or signs of poor perfusion and lungs clear to auscultation (no evidence CHF):
   ► *Establish IV access.*
   ► *Infuse 250 mL Normal Saline bolus, may repeat up to maximum 1 liter to maintain adequate perfusion*.
3. Cooling measures as available.
4. ALS escort to nearest ERC, contact Base Hospital as needed.

Approved: 

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