



**Hyperthermia**

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Approval: Victoria Pinette – Executive Director

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**BLS**

- Move pt to a cool environment, remove excess clothing & begin cooling measures as soon as possible
- Assess V/S, including temperature if thermometer available
- O<sub>2</sub> at appropriate rate if hypoxemic (SpO<sub>2</sub> <94%)

**HEAT CRAMPS**

- Neuro: Normal, may have muscle cramps (usually in the legs)
- Skin: Sweaty, may be warm to the touch
- Temp: Usually normal

**HEAT EXHAUSTION**

- Neuro: Feels weak with otherwise normal function
- Skin: Sweaty, usually hot to the touch
- Temp: Usually normal to slightly elevated
- Typically feels sick with flu like symptoms

**HEAT STROKE**

- Neuro: Altered mental status, may have persistent seizures
- Skin: Usually flushed, hot; may or may not be moist
- Temp: Usually ≥ 104

**LALS**

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- Give cool/cold fluids slowly by mouth
- Rest cramping muscles

- Cardiac monitor
- Give cool/cold fluids slowly by mouth as tolerated
- IV NS: 1000 mL bolus

- Aggressive cooling - cold packs on neck, axilla & inguinal areas; fanning & misting if possible, undress pt, cover with sheet & wet thoroughly
- Cardiac monitor
- IV NS: 1000 mL bolus, reassess & repeat if necessary for SBP <90, or signs of poor perfusion

Monitor & reassess