



Hypothermia & Avalanche Resuscitation

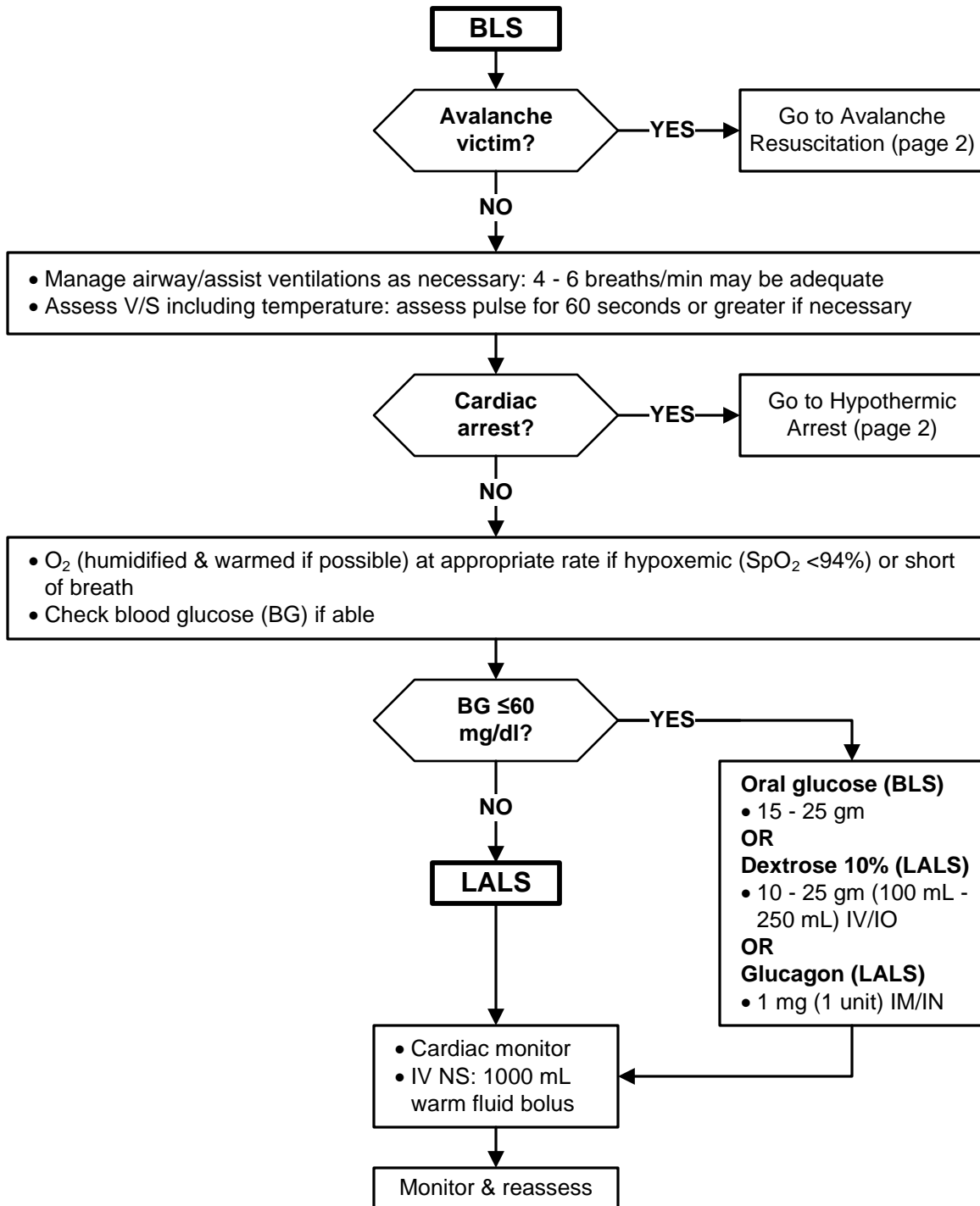
Approval: Troy M. Falck, MD – Medical Director

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Approval: John Poland – Executive Director

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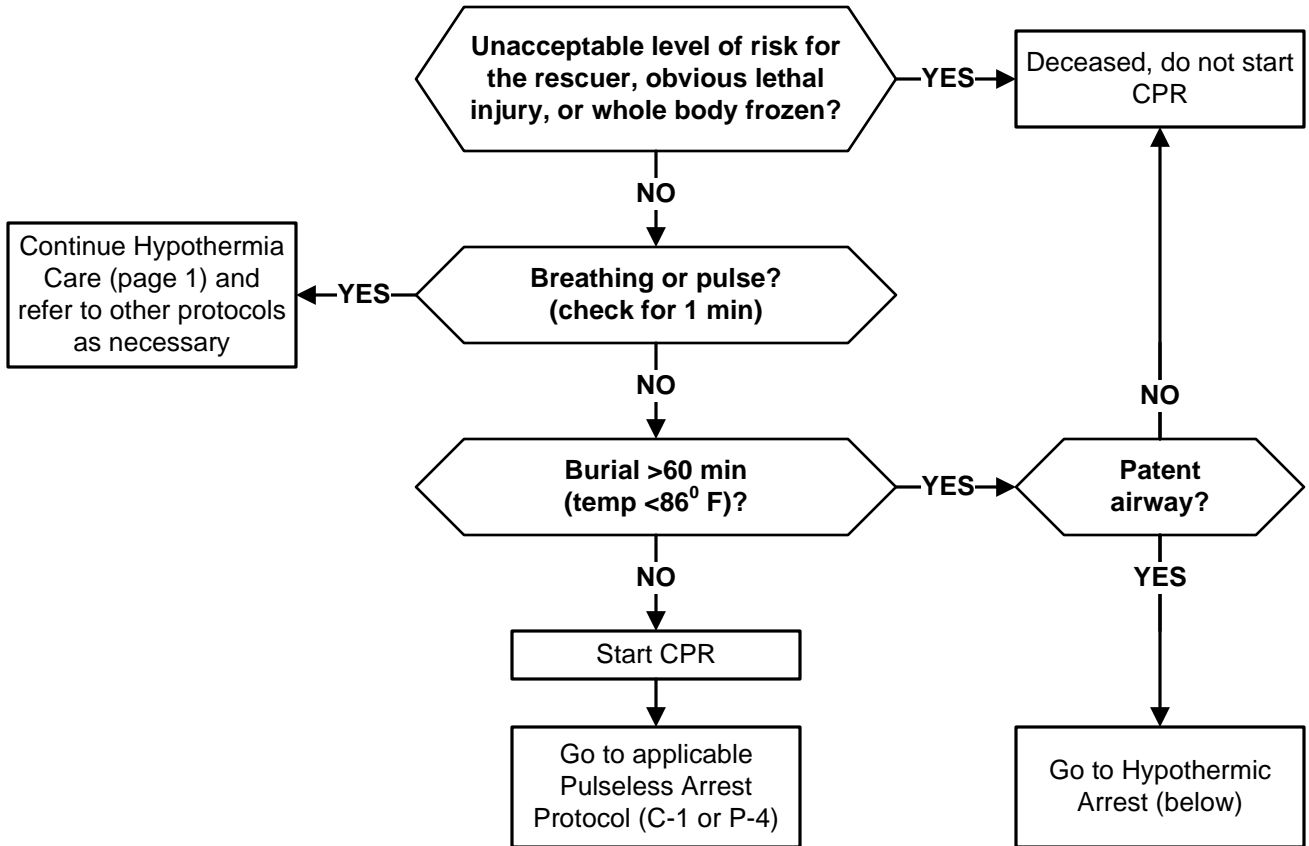
- Move pt to a warm environment, remove wet clothing, begin warming measures as soon as possible.
- Moderately & severely hypothermic pts should be handled as gently as possible.
- This protocol incorporates the official guidelines for the onsite treatment of avalanche victims established by the International Commission for Alpine Rescue (ICAR).





Hypothermia & Avalanche Resuscitation

Avalanche Resuscitation



Hypothermic Arrest

- Medications & defibrillation may be ineffective in a hypothermic cardiac arrest pt. If the pt is in v-fib, one shock & one round of medications should be delivered. It is reasonable to delay further defibrillation attempts & further medications until the pt is rewarmed.
- Continuing CPR & safe expedited transport to the nearest facility is the pt's best chance at survival.

BLS

Begin CPR & apply AED as soon as possible, deliver one AED shock if indicated

LALS

- If indicated according to Pulseless Arrest protocol (C-1 or P-4), administer one manual defibrillation (**AEMT II**) & one round of ALS medications (**AEMT II**)
- Evacuate/transport as soon as possible - continue CPR until ROSC, rescuer exhaustion, hospital arrival, or base/modified base hospital order to terminate resuscitation efforts