Hypothermia

REFRESHER

RECOGNIZE IT

- Altered mental status / coma; cold, clammy skin; shivering
- Extremity pain or sensory abnormality; bradycardia; hypotension or shock
- History: very young and old; exposure — but it can occur at normal temperatures
- Alcohol and barbiturate use; infection/sepsis; length of exposure, wetness, wind chill

ASSESS

- Measure the temperature; obtain a blood glucose
- Categories: mild 90–95°F; moderate 82–90°F; severe <82°F
- Differential: sepsis, environmental exposure, hypoglycemia, CNS dysfunction, stroke, head injury, spinal cord injury

ACT — FIRST MOVES

1. Remove wet clothing; dry and warm the patient; passive warming
2. Localized cold injury: general wound care — do NOT rub to warm, do NOT allow to refreeze
3. Systemic hypothermia: protect the airway, address AMS, active warming, warm fluid bolus, treat for shock
4. Unresponsive with no pulse: protect the airway and follow the age-appropriate cardiac arrest guideline

PEARLS

- Heat is lost by radiation, convection, conduction, and evaporation — block all four
- Awake with AMS, or unresponsive with a pulse: the page's pathway is airway, AMS, active warming, warm fluids, shock treatment

Take Home Message:

Dry them, warm them, check the glucose, and grade the temperature — mild 90–95, moderate 82–90, severe under 82.