

TREATMENT PROTOCOL: HYPERTHERMIA (ENVIRONMENTAL)

1. Basic airway
2. Pulse oximetry
3. Oxygen prn
4. Provide active cooling measures prn
 - Move to cool environment
 - Remove clothing
 - Apply wet towels and promote cooling by fanning
5. Cardiac monitor: document rhythm and attach ECG strip if dysrhythmia identified
6. Advanced airway prn

ADEQUATE PERFUSION	POOR PERFUSION
7. Encourage oral fluids	7. Venous access
8. Venous access prn	8. Blood glucose test
9. ESTABLISH BASE CONTACT (ALL)	9. If blood glucose is less than 60mg/dl: Dextrose
10. If unable to take fluids orally: Normal Saline fluid challenge 10ml/kg IV at 250ml increments Use caution if rales present	<ul style="list-style-type: none"> 50% 50ml slow IV push  Pediatric: See Color Code Drug Doses/L.A. County Kids Less than 2yrs of age: Dextrose 25% 2ml/kg slow IV push 2yrs of age or older: Dextrose 50% 1ml/kg slow IV push up to 50ml
11. Reassess for potential deterioration	10. ESTABLISH BASE CONTACT (ALL)
	11. Normal Saline fluid resuscitate IV wide open
	12. If blood glucose remains less than 60mg/dl: Dextrose
	<ul style="list-style-type: none"> 50% 50ml slow IV push  Pediatric: See Color Code Drug Doses/L.A. County Kids Less than 2yrs of age: Dextrose 25% 2ml/kg slow IV push 2yrs of age or older: Dextrose 50% 1ml/kg slow IV push up to 50ml