



## **System Medical Advisory February 13, 2021**

### **Cold Weather Emergencies & Hypothermia**

As the concerning winter weather continues and forecasted to worsen, it is important to provide clinical reminders related to cold weather and hypothermia.

- General Patient Care
  - Remember, the first sign of severe hypothermia may be confusion or combativeness.
  - Be very gentle when handling and moving hypothermic patients. Avoid rough and rapid movements as such acts can result in dysrhythmias including v-fib.
  - Keep all patients warm. This includes turning on ambulance heat in the patient compartment when responding to calls to increase ambient temperature. Always minimizing patient heat loss. Utilize heat packs and IV fluid warmers for patients who require active warming.
  - Temporal thermometers are likely unreliable during extremely cold weather. Consider an oral or rectal temperature.
  - Be mindful to cutting down filled jackets or winter/snow clothing as it can quickly result in a mess.
- Cardiac Emergencies
  - Cardiac Arrest: Hypothermic patients in cardiac arrest need to receive active warming strategies concurrent with resuscitative efforts. Remember, a core body temperature below 86F negatively impacts the ability of medications and defibrillation to work. Focus on warming, chest compressions, and ventilations until the patient's body temperature is greater than 86F.
  - Bradycardia: TCP and Atropine are not likely to be effective in hypothermic bradycardic patients, therefore early active warming strategies are required.
- Carbon Monoxide Poisoning & Burns
  - Review the system medical advisory previously sent on Carbon Monoxide Poisoning. Remember that nausea, fatigue, shortness of breath, dizziness are all common findings for CO poisoning. Chery red nails or lips are late findings and not typically seen. Remember your own safety in concerning environments. Always consider CO

poisoning when multiple patients in the same area, especially confined areas, have the same symptoms.

- o Recognize the potential for increased structure fires and/or burns from heat sources. Remember the importance of preventing heat loss in burns. During such emergencies there is always a concern for cyanide toxicity, especially when your patient is pulled from a structure fire. Signs and symptoms for cyanide toxicity include cardiac arrest, unresponsiveness, shortness of breath, and/or nausea/vomiting. As a reminder, Cyanokits are located on AFD Battalion Chief vehicles.

For both you and your patients, the importance of good nutrition and hydration only increases when experiencing weather extremes.

Thank you for all you do for our EMS system and communities.



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