



INLAND COUNTIES EMERGENCY MEDICAL AGENCY POLICY AND PROTOCOL MANUAL

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COLD RELATED EMERGENCIES

I. FIELD ASSESSMENT/TREATMENT INDICATORS

MILD HYPOTHERMIA

- Decreased core temperature.
- Cold, pale extremities.
- Shivering, reduction in fine motor skills.
- Loss of judgment and/or altered level of consciousness or simple problem solving skills.

SEVERE HYPOTHERMIA

- Severe cold exposure or any prolonged exposure to ambient temperatures below 36 degrees with the following indications:
 - Altered LOC with associated behavior changes.
 - Unconscious.
 - Lethargic.
- Shivering is generally absent.
- Blood pressure and heart sounds may be unobtainable.

SUSPECTED FROSTBITE

- Areas of skin that is cold, white, and hard to touch.
- Capillary refill greater than two (2) seconds.
- Pain and/or numbness to affected extremity.

II. BLS INTERVENTIONS

- Remove from cold/wet environment; remove wet clothing and dry patient.
- Begin passive warming.
- Insulate and apply wrapped heat packs, if available, to groin, axilla and neck. This process should be continuous.
- Maintain appropriate airway with oxygen as clinically indicated (warm, humidified if possible).
- Assess carotid pulse for a minimum of one (1) to two (2) minutes. If no pulse palpable, place patient on AED. If no shock advised, begin CPR.
- Insulate to prevent further heat loss.

- Elevate extremity if frostbite is suspected.
- Do not massage affected extremity.
- Wrap affected body part in dry sterile gauze to prevent further exposure and handle with extreme care.

III. LIMITED ALS INTERVENTIONS

- Advanced airway as clinically indicated.
- Obtain vascular access.
- Obtain blood glucose level, if indicated administer:
 - **ADULT/PEDIATRIC**
 - Dextrose per ICEMA Reference #11010 - Medication - Standard Orders.
 - May repeat blood glucose level. Repeat Dextrose per ICEMA Reference #11010 - Medication - Standard Orders.
 - Glucagon per ICEMA Reference #11010 - Medication - Standard Orders if unable to establish IV.
- Obtain vascular access and administer fluid bolus.
 - Nine (9) years and older: 500 ml warmed NS, may repeat.
 - Birth to eight (8) years: 20 ml/kg warmed NS, may repeat.
- Contact base hospital.

IV. ALS INTERVENTIONS

- Obtain vascular access.
- Cardiac monitor.
- If clinically indicated, obtain blood glucose. If hypoglycemic administer:
 - **ADULT/PEDIATRIC**
 - Dextrose per ICEMA Reference #11010 - Medication - Standard Orders.
 - Glucagon per ICEMA Reference #11010 - Medication - Standard Orders, if unable to establish IV.
- For complaints of pain in affected body part:
 - **ADULT/PEDIATRIC**
 - Fentanyl per ICEMA Reference #11010 - Medication - Standard Orders.
- Advanced airway as clinically indicated.

- Obtain vascular access and administer fluid bolus.
 - Nine (9) years and older: 500 ml warmed NS, may repeat.
 - Birth to eight (8) years: 20 ml/kg warmed NS, may repeat.
- Obtain rhythm strip for documentation.
- For documented VF, Pulseless V-Tach:
 - Defibrillate one (1) time at manufacturer recommended dose. Do not defibrillate again until patient has begun to warm.
- For documented asystole:
 - Begin CPR.
 - May give additional fluid bolus.
- Contact base hospital.

V. REFERENCE

<u>Number</u>	<u>Name</u>
11010	Medication - Standard Orders