

**Treatment Protocols****Heat Illness/Hyperthermia****Date: 07/01/2025****Policy #9120P**

<b>Stable</b> Blood pressure appropriate for age	<b>Unstable</b> Systolic blood pressure low for age, and/or signs of poor perfusion
<b>Pediatric BLS Standing Orders</b>	
<ul style="list-style-type: none"> <li>• <b>Universal Patient Protocol</b></li> <li>• Give oxygen and/or ventilate PRN per <b>Airway Policy</b></li> <li>• Monitor O2 saturation PRN</li> <li>• Remove patient from hostile environment</li> <li>• Blood glucose PRN</li> <li>• Capnography</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Universal Patient Protocol</b></li> <li>• Give oxygen and/or ventilate PRN per <b>Airway Policy</b></li> <li>• Monitor O2 saturation PRN</li> <li>• Remove patient from hostile environment</li> <li>• Blood glucose PRN</li> <li>• Capnography</li> </ul>
<p><b><u>Heat Exhaustion (Not Altered)</u></b></p> <ul style="list-style-type: none"> <li>• Loosen or remove clothing</li> <li>• Cool gradually (spraying with tepid water and fanning); avoid shivering</li> <li>• If alert and no nausea, give small amounts of cool liquids by mouth</li> <li>• Obtain baseline temperature</li> </ul>	<p><b><u>Heat Stroke (Altered Mental Status)</u></b></p> <ul style="list-style-type: none"> <li>• Remove clothing</li> <li>• Implement rapid cooling measures, ice packs to axilla, groin, cervical area</li> <li>• Flush or spray with tepid water, fan patient</li> <li>• Avoid shivering</li> <li>• Obtain baseline temperature</li> </ul>
<b>Pediatric LALS Standing Order Protocol</b>	
<ul style="list-style-type: none"> <li>• Establish IV PRN</li> <li>• Capnography</li> </ul>	<ul style="list-style-type: none"> <li>• Establish IV</li> <li>• Capnography</li> </ul>
<p><b><u>Heat Exhaustion</u></b></p> <ul style="list-style-type: none"> <li>• 10-20 mL/kg NS IV bolus; titrated to age-appropriate systolic BP MR x1 PRN for suspected dehydration</li> </ul>	<p><b><u>Heat Stroke</u></b></p> <ul style="list-style-type: none"> <li>• 10-20 mL/kg NS IV bolus; titrated to age-appropriate systolic BP MR x1</li> </ul>
<b>Pediatric ALS Standing Orders</b>	
<ul style="list-style-type: none"> <li>• Monitor EKG</li> <li>• Establish IV/IO PRN</li> <li>• Capnography</li> </ul>	<ul style="list-style-type: none"> <li>• Monitor EKG</li> <li>• Establish IV/IO</li> <li>• Capnography</li> </ul>
<p><b><u>Heat Exhaustion</u></b></p> <ul style="list-style-type: none"> <li>• 10-20 mL/kg NS IV/IO bolus; titrated to age-appropriate systolic BP MR x1 PRN for dehydration</li> </ul>	<p><b><u>Heat Stroke</u></b></p> <ul style="list-style-type: none"> <li>• 10-20 mL/kg NS IV/IO bolus; titrated to age-appropriate systolic BP MR x1</li> </ul>

**Pediatric Base Hospital Orders**LALS

BH - Repeat NS 0.9% 20 mL/kg IV

ALS

BH - Repeat NS 0.9% 20 mL/kg IV/IO

BHP – Dopamine per weight-based protocol

**Notes:**

- Always consider medical sources for hyperthermia such as:
  - Sepsis or infection
  - Intoxication or medication overdose (ex: serotonin syndrome)
- Remove these factors if possible

APPROVED:

SIGNATURE ON FILE – 07/01/25

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