



Yolo County Emergency Medical Services Agency

Protocols

Revised Date: May 1, 2024

HEAT ILLNESS

Adult

Pediatric

Definitions

Heat Cramps: Temperature is usually normal, sweaty, may be warm or cool, neurological exam is normal.

Heat Exhaustion: Temperature is normal or slightly elevated, sweaty, usually hot to the touch; patient may feel weak and report flu like symptoms.

Heat Stroke: Altered mental status, core temperature is usually $\geq 40^{\circ}\text{C}$ (104°F); skin is usually flushed and hot to the touch, may have persistent seizures and sweating may or may not be absent.

BLS

- Assess vital signs, including temperature
- Remove excess clothing
- Move to a cool environment
- O_2 , titrate to $\text{SpO}_2 \geq 94\%$

Heat Cramps or Heat Exhaustion

- Give cool/cold fluids slowly by mouth

Heat Stroke

- Support rapid cooling measures performed on-scene by athletic training staff, if available
 - Immersion in ice water bath until rectal probe temperature reaches 39°C (102°F)
 - Remove patient for treatment and transport for unstable airway or seizures
- Evaporative cooling measures. Stop if shivering is induced
 - Undress patient and cover with wet sheet
 - Cold packs on neck, axilla, and inguinal areas
 - Fanning and misting with room-temperature water

ALS

Cardiac Monitor, Waveform EtCO₂, Vascular Access

Heat Exhaustion or Heat Stroke

Fluid Bolus NS 250 mL IV/IO

- If blood pressure ≤ 90 systolic

Fluid Bolus NS 20mL/kg IV/IO

- Titrate to age appropriate SBP

Direction

- Contact Base Hospital for additional treatment
- In the absence of immediate life threats, transport may be delayed for rapid cooling of Heat Stroke