

POLICY: 555.64
TITLE: Heat Illness (Pediatric)

EFFECTIVE: 7/1/2018
REVIEW: 7/2023
SUPERCEDES:

APPROVAL SIGNATURES ON FILE IN EMS OFFICE

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HEAT ILLNESS (PEDIATRIC)

- I. AUTHORITY: Health and Safety Code, Division 2.5, California Code of Regulations, Title 22, Division 9
- II. PURPOSE: To serve as the treatment standard for EMRs, EMTs, AEMTs and Paramedics within their scope of practice.
- III. PROTOCOL:

Heat Exhaustion: Muscle cramping, fatigue, nausea, headache, normal or slightly elevated body temperature. Syncope or dizziness is almost universal.

Heat Stroke: Persistently altered level of consciousness and elevated body temperature (usually greater than 104° F or 40° C), tachycardia and hypotension. Sweating is variable.

STANDING ORDERS	
HEAT EXHAUSTION	
ASSESS	CAB
OXYGEN	Oxygen delivery as appropriate.
COOLING MEASURES	Place patient in a cool environment.
HEAT STROKE	
ASSESS	CAB
SECURE AIRWAY	Using the simplest effective method. A BLS airway with objective evidence of good ventilation and oxygenation is adequate and acceptable. Refer to Policy 554.00 – General Protocols.
COOLING MEASURES	Remove heavy or insulating clothing and splash patient with water. Place ice packs on head, neck and in axilla and inguinal areas. Promote cooling by fanning. Use all available cooling measures.
OXYGEN	Oxygen delivery as appropriate.
IV/IO ACCESS	Two large bore cannulas with volume control chambers. Give 20 ml/kg boluses until length based tape systolic BP target. Reassess the patient after each bolus.
CONSIDER	
ACCUCHECK	Test for glucose.
DEXTROSE	If Blood glucose is less than 60 mg/dl: D50W 1ml/kg IV/IO for patients greater than 2 years of age, or D25W 2ml/kg IV/IO who are less than 2 years of age. May repeat once. Give oral glucose to patients who are awake and have an intact gag reflex. Recheck blood glucose in 5 minutes.
GLUCAGON	0.05 mg/kg IM if blood glucose is less than 60 mg/dl and no IV/IO access immediately available. Maximum dose 1 mg. May repeat once. Recheck blood glucose in 5 minutes

MIDAZOLAM

If seizing: 0.1 mg/kg IV/IO (maximum dose 5 mg.) If unable to establish IV after one attempt, give 0.2 mg/kg IM (maximum dose 5 mg.) May repeat once in 10 minutes if seizures continue.