

## ENVIRONMENTAL EMERGENCIES - HEAT EXPOSURE

Heat exposure can cause various types of heat illness. Heat cramps, heat exhaustion, and heat stroke are the most often encountered. Heat cramps are often associated with heat exhaustion. Initial treatment for all heat illness is similar. Secondary treatment may differ after the signs and symptoms are specifically identified. Heat stroke is a serious life-threatening condition requiring rapid treatment and transport.

- A. Perform **Initial Treatment / Universal Patient Care Protocol** and follow the proper protocol for medical management based on clinical presentation.
1. Remove patient from hot environment and place in cool environment.
  2. Loosen or remove clothing.
- B. If patient has warm, moist skin, with general weakness, dizziness, nausea, or occasionally syncope (heat exhaustion):
1. If patient has normal level of consciousness and is not nauseated, encourage patient to drink oral fluids (cool water or electrolyte replenisher).
  2. Cool by fanning without chilling the patient. Watch for shivering.
  3. If patient experiences muscle cramps, apply moist towels over cramped muscles.
  4. Transport and notify **Medical Command**.
- C. If patient has very hot, dry skin with rapid pulse, rapid shallow breathing, and/or altered mental status or unconsciousness (heat stroke):
1. Expedite transport and continue treatment en route. Consider ALS backup.
  2. If signs and symptoms of shock continue, treat **per Shock Protocol 6108**.
  3. Cover patient with moist sheet.
  4. Apply ice packs to axilla, neck, ankles, and wrists. Do not overcool. Watch for shivering.
  5. Monitor vital signs and temperature closely.
- D. If no change in patient condition seek further treatment options **per order of Medical Command**.

