

Michigan
TRAUMA AND ENVIRONMENTAL
HYPOTHERMIA/FROSTBITE

Initial Date: 5/31/2012

Revised Date: 05/22/2023 03/17/2025

Section 2-11

Hypothermia/Frostbite

1. Follow **General Pre-hospital Care-Treatment Protocol**

HYPOTHERMIA:

1. If cardiac arrest develops follow **Adult or Pediatric General Cardiac Arrest-Treatment Protocol**.
2. Move patient to a warm dry place, then remove wet clothing & wrap in warm blankets and protect from wind exposure. The patient who can be evacuated to a warm environment (the ambulance) within 30 min should have their clothing left in place and wrapped in a vapor/wind barrier. Once in a warm environment, remove wet clothing, gently dry the skin and wrap in warm blankets.
3. If patient temperature is less than 30° C (86° F)
 - A. Gentle handling is required.
 - 2-B. Facilitate transport immediately
- 3-4. If the patient's temperature is greater than 30° C (86° F) or patient shivering & conscious:
 - A. Apply heat packs to groin, axillae, and neck/torso if possible.
 - B. Use warmed humidified oxygen if available.
- 4-1. If patient is alert, administer warm non-caffeinated beverages (if available) by mouth, slowly.
- 5-1. If patient temperature is less than 30° C (86° F)
 - A. Gentle handling is required.
 - B. Facilitate transport immediately.
5. If altered mental status, check:
 - A. Check blood glucose (may be MFR skill, see **Blood Glucose Testing-Procedure Protocol**) and treat
 - B. Treat as indicated per **Adult or Pediatric Altered Mental Status-Treatment Protocol** and assess
 - 6-C. Assess for other causes of alterations of mentation- and treat according to applicable protocols.
- 7-6. If hypotensive, follow **Shock-Treatment Protocol**.
 - Ⓢ A. If a commercial device designed for warming IV fluids is available, warm fluid prior to administration.
7. Administer oxygen, if available.
 - A. If a commercial device designed for warming and/or humidifying oxygen is available, oxygen should be warmed and humidified prior to administration.
8. If patient is alert, administer warm non-caffeinated beverages (if available) by mouth, slowly.
8. -

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SUSPECTED FROSTBITE:

1. Remove wet or constricting clothing. Keep skin dry and protected from wind.
2. Do not allow the limb to thaw if there is a chance that limb may re-freeze before evacuation is complete or if patient must walk to transportation.
3. Dress injured areas lightly in clean cloth to protect from pressure, trauma or friction. Do not rub. Do not break blisters.

MCA Name:

MCA Board Approval Date:

MCA Implementation

MDHHS Approved: 5/22/23 3/17/25

MDHHS Reviewed 2023 2025

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- 4. Keep patient warm.
- 5. Frostbitten areas should be supported and elevated during transport.
- 6. Treat pain per **Pain Management-Procedure Protocol**.

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Protocol Source/References: NASEMSO CLINICAL GUIDELINES
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for the Out-of-Hospital Evaluation and Treatment of Accidental Hypothermia. WILDERNESS &
ENVIRONMENTAL MEDICINE, 25, 425-445 (2014).

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