

Appendix E. Emergency Department Worksheet

MSH ED Critical Care Induced Hypothermia Worksheet

Name: Place Sticker Here

MRN:

Date: Time of Screening: .

Inclusion Criteria (Must have All)	Exclusion Criteria (Can have None)
<ul style="list-style-type: none">VF/VT/Unknown Arrest with ROSCCPR initiated within 15 minutesROSC < 30 minutes from CollapseTime now <6 hours from ROSCComatose (does not follow commands)Temperature >30 °CMAP > 60 mmHg on no more than one vasopressor	<ul style="list-style-type: none">DNR, poor baseline status, or terminal diseaseComa believed to be unrelated to the cardiac arrest (e.g. Intox, Lytes, Head Trauma, CVA)Active Bleed, INR >1.7, PTT>1.5x normal, PLTs <50,000O2 sat <85% for > 15 minutesUncontrolled cardiac arrhythmiah/o CryoglobulinemiaPregnancyPre-Protocol MAP <60 for >30 minutes

Induction

- Print this Worksheet and tape to patient's bed. Full protocol is available at www.critical-care.info but these steps are key:
- Obtain Central Access.
- If STEMI on EKG consider Reteplase 10 U IV x 2 separated by 30 minutes (see appendix F for contraindications). If Reteplase is given, start Heparin following infusion.
- Activate Hypothermia Team Alert via AMAC 43611 (will page ccu, neuro). Time of activation: .
- Discuss with CCU Consult (CCU/MICU/NSICU/SICU bed must be available and they must agree pt warrants hypothermia). Time of Discussion: . If pt is deemed ineligible by CCU team, list reason: .
- Place order to initiate Hypothermia Protocol and all appropriate orders in IBEX hypothermia order set.
- Completely expose patient and place cooling blanket above and below. Place temp probe in patient's rectum.
- Hook both cooling blankets and the probe to the same blanketrol machine.
- Ensure Blanketrol machine is filled with distilled water
- Set the machine to auto control and the set temperature to 34°C. List time now: . List Initial Patient Temp: .
- If temp <30°C, patient excluded. If 30-34°C, allow to warm to 34°C. Time that Pt reaches 34°C: .
- If temp >34°C, infuse 500 cc boluses of 4.4°C normal saline every 10 minutes through peripheral or central catheter.
- Stop infusion when patient's temperature reaches 35.5 °C. The patient will drift down to goal temperature of 34°C.
- Record total saline infused . Time that patient reaches 34°C .

Maintenance

- Standing and PRN Medications (see IBEX medication order set):
- Acetaminophen 650 mg per OGT/NGT Q4-6 hours
 - Buspirone 30 mg per OGT/NGT Q8 hours
- Maintaining Mild Hypothermia
- Maintain temperature at 32-34°C for 24 hours.
 - If patient's temperature rises above 34.5°C, infuse 250 cc boluses of cold crystalloid Q 10 min until <34.5°C.
 - For patients who require sedation, Begin sedation with propofol infusion.
 - Hypokalemia: during cooling/maintenance phases only correct potassium <3.4 mEq/L.

Troubleshooting

- If shivering develops see **shivering protocol** at www.critical-care.info.
- If hypotension develops see **hypotension protocol** in appendix of full protocol at www.critical-care.info.
- If dysrhythmia or severe bleeding develops see **rewarming protocol** in appendix of full protocol at www.critical-care.info.
- If patient remains in the ED 24 hours after protocol initiation, begin **rewarming protocol**.
- If rewarming is initiated, document time of rewarming , and indication .
- If saline/blanketrol or other induction equipment is unavailable, contact CCU or NSICU to obtain Arctic Sun Device.