

# Hyperthermia



## History

- Age
- Exposure to increased temperatures and / or humidity
- Past medical history / medications
- Extreme exertion
- Time and length of exposure
- Poor PO intake
- Fatigue and / or muscle cramping

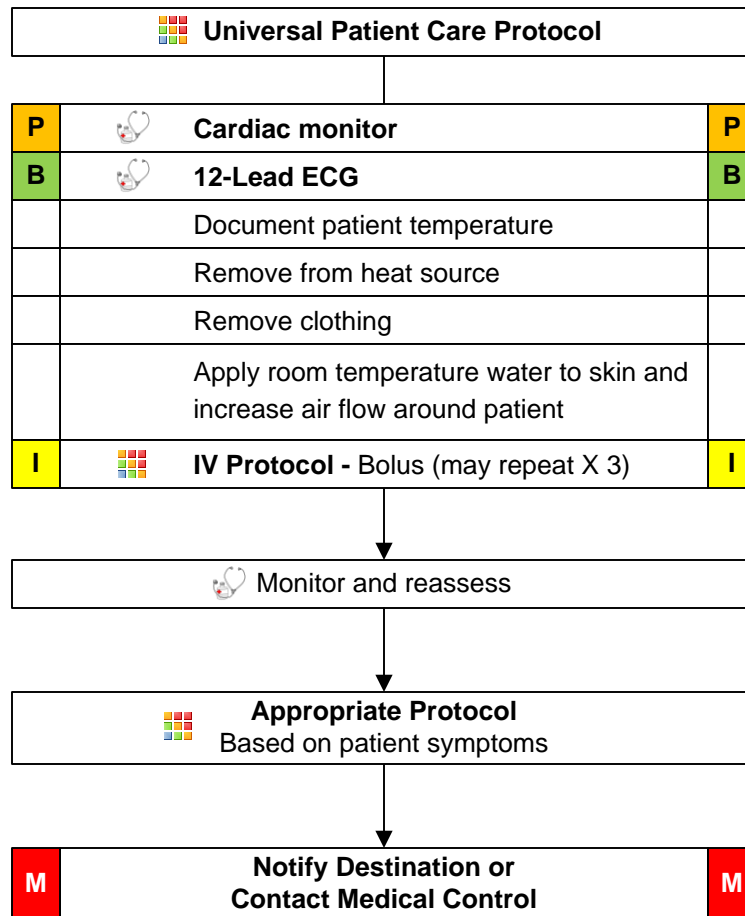
## Signs and Symptoms

- Altered mental status or unconsciousness
- Hot, dry or sweaty skin
- Hypotension or shock
- Seizures
- Nausea

## Differential

- **Fever (Infection)**
- **Dehydration**
- **Medications**
- **Hyperthyroidism (Storm)**
- **Delirium tremens (DT's)**
- **Heat cramps**
- **Heat exhaustion**
- **Heat stroke**
- **CNS lesions or tumors**

Legend		
	MR	
B	EMT	B
I	EMT- I	I
P	EMT- P	P
M	Medical Control	M



## Pearls

- **Recommended Exam: Mental Status, Skin, HEENT, Heart, Lungs, Neuro**
- Extremes of age are more prone to heat emergencies (i.e. young and old).
- Predisposed by use of: tricyclic antidepressants, phenothiazines, anticholinergic medications, and alcohol.
- Cocaine, Amphetamines, and Salicylates may elevate body temperatures.
- Sweating generally disappears as body temperature rises above 104° F (40° C).
- Intense shivering may occur as patient is cooled.
- **Heat Cramps** consists of benign muscle cramping 2° to dehydration and is not associated with an elevated temperature.
- **Heat Exhaustion** consists of dehydration, salt depletion, dizziness, fever, mental status changes, headache, cramping, nausea and vomiting. Vital signs usually consist of tachycardia, hypotension, and an elevated temperature.
- **Heat Stroke** consists of dehydration, tachycardia, hypotension, temperature >104° F (40° C), and an altered mental status.