

# Emergency Care for Hypothermia

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Hypothermia “lower than normal core body temperature” is a life-threatening medical emergency.

The first consideration in dealing with a hypothermia patient is to rescue the person as gently as possible. Rough handling of victims of hypothermia can aggravate their condition.

Once the person is rescued treatment will depend on both the condition of the survivor and the facilities available. Generally speaking, hypothermic patients who are rational and capable of recounting their experience, although shivering dramatically, merely require the removal of all wet clothes, replacement with dry clothes or blankets, and rest in a warm environment. A person that can manage his / her airway – that is conscious and capable of keeping his throat clear – may be given warm, sweet liquids, preferably **not** coffee or tea and definitely **not alcohol**. These survivors will generally rewarm themselves.

In more serious cases, where the person is semiconscious or unconscious, or apparently dead, you should immediately contact the nearest rescue unit to arrange for prompt medical evacuation. While awaiting further medical instruction and evacuation, you should administer the following first-aid care:

1. After removing the person from the cold and gently transferring him to a warm environment (being sure to avoid rough handling, as this can cause further harm), check **Airway, Breathing, and Circulation**. If after **careful** examination of the patient, you determine that there is no breathing and no heartbeat, immediately begin CPR (cardiopulmonary resuscitation).
2. Remove wet clothes, keeping movement of the person’s body to a minimum; cut the clothes away with scissors or knife, if necessary. Do not massage the person.
3. Lay the unconscious or semiconscious patient in a level, face-up position. If vomiting occurs, turn the person’s head to one side. Be sure to check for breathing and heartbeat frequently. You must be prepared to begin CPR if breathing and heartbeat stops.
4. Insulate the patient from further heat loss by wrapping him in blankets. Do not attempt to aggressively rewarm the unconscious person. Severe hypothermia is a true medical emergency, but rewarming a person can lead to complications. Definitive rewarming should

be accomplished in a hospital. Your main goal in providing first-aid is to prevent the patient from getting colder.

5. If there will be a long delay in getting the patient to a hospital, gentle rewarming techniques may be used:
  - Apply heating pads or hot water bottles under the blankets to the person’s head, neck, chest and groin. Keep them wrapped in blankets.
  - Apply your own body warmth by direct body-to-body contact with the patient. Blankets should be wrapped around you and the patient to conserve the heat you are supplying.
6. Prepare the patient for evacuation: Wrap securely in several blankets, cover with two large plastic bags (one pulled up over the legs and one pulled down from the top with a hole for the head - tape securely at the waist), or put in a sleeping-bag, cover the head with a blanket or heavy wool cap.

## To Sum Up

**RESUSCITATE:** If patient is not breathing, begin mouth-to-mouth ventilation. If they have no pulse, begin cardiac compressions.

**INSULATE:** To prevent further heat loss.

**EVACUATE:** To medical facility as soon as possible.

**REMEMBER:** “No one is dead until warm and dead!” Individuals have successfully recovered after reaching a core temperature as low as 64°F.

## Near Drowning

If, in addition to being cold, the patient has had his face under water, you should immediately begin CPR. Don’t stop. Insulate to prevent further cooling. Do not rewarm. Transport ASAP. Don’t give up!

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This discussion is adapted from an article by Richard Hiscock that appeared in *Proceedings of the Marine Safety Council* (USCG), December 1982. Mr. Hiscock is a founder and former Vice President of the *Marine Safety Foundation*, a private not-for-profit corporation providing research, education and coordination in all areas of marine safety and survival.