



Heat Related

NO

Altered Mental

YES

Mild

Moderate

Heat Rash

- Blocked sweat glands.
- Remove tight coverings.

Hydrocortisone (inflammation) or antibiotic cream PRN (cellulitis).

Heat Edema

- Vasodilation.
- Elevate legs – not diuretics.

Heat Cramps

- Lyte/water loss.
- Rest/rehydrate.

Heat Syncope

- Vasodilation & pooling of blood .
- Consider cardiac syncope.

Heat Exhaustion

- Profound fatigue, weakness, nausea, headache, dizziness.
- Water/lyte deficit.
- Elevated (<40 °C) temperature may be present, but no altered mental status.

Rehydrate oral or IV. Monitor for deterioration.

CORE temperature > 40

NO

YES

Differential Diagnosis

- Sepsis.
- Ischemic/ hemorrhagic stroke.
- Toxicologic
 - malignant hyperthermia, neuroleptic malignant syndrome, serotonin syndrome, sympathomimetic overdose, salicylate, intoxication, anticholinergic intoxication.
- Endocrine
 - Thyroid storm.
 - Pheochromocytoma.
 - Adrenal crisis.

Severe

Heat Stroke

- Cold or Ice- water immersion and volume resuscitation with cooled IV crystalloid.
- Goal: CORE (rectal) temperature of 39 °C (102 °F) in 30 minutes.