



## Emergency Medical Services

# Partners

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[uconnems.uhc.edu](http://uconnems.uhc.edu)

### West Hartford Heat Stroke

**American Medical Response** paramedic Rod Furtado, EMTs Chris Carroll and Bob Ragusa, and responders from the **West Hartford Police** and **West Hartford Fire Departments** responded to a call for a patient who had suddenly collapsed while training for a half marathon on an excessively hot day. The patient was unresponsive, hot to the touch, pale and profusely diaphoretic. His gaze was fixed to the left and he was vomiting. His blood pressure was 100/35, pulse 133, and respiratory rate 24. Furtado removed the patient's clothing and began cooling him with wet towels and IV hydration. The patient was rapidly transported to the **John Dempsey Hospital ED**, where the patient's core temperature was recorded at 107 F. The patient was rapidly cooled with ice, wet blankets, a fan, IV fluids and a three-way Foley. The patient suffered multiple seizures and had critical lab values indicating kidney and liver injury. His temperature was soon brought down to safe levels, and after a week's stay in the ICU, he was discharged home with instructions to rest. Thanks to the great prehospital and in-hospital care, the patient survived a life-threatening event.



### Heat Stroke and Cooling

Morbidity and mortality in heat stroke are directly associated with duration of elevated body temperature. For patients in heat stroke, lowering temp below 104 F in the first 30 minutes after collapse is critical. If an ice bath is readily available, contact online medical control for permission to delay transport to cool on scene.



### Heat Emergencies Review

Heat emergencies cause more deaths than all other weather related emergencies combined. Infants and children, the elderly, and bed bound patients are most at risk.

**Heat Cramps:** Pain in muscles due to loss of fluid and salt. Frequently affects lower extremities and abdomen. Cool, moist skin, normal to slightly elevated temperature; nausea.

**Heat Exhaustion:** The state of more severe fluid and salt loss leading to syncope, headache, nausea, vomiting, diaphoresis, tachycardia, pallor and/or weak pulse.

**Heat Stroke:** A very serious condition. The patient may present with hot and flushed skin, strong bounding pulse and altered mental status. The situation may progress to coma and/or seizures. **CAUTION:** Sweating may still be present in 50% of heat stroke patients.

#### PEARLS

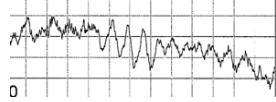
- Place patient in cool environment and determine need for advanced life support.
- Determine patient's past medical history and history related to present event.
- Do not give patient oral fluids if patient is nauseated or confused.
- Do not massage cramping muscles
- Remove as much clothing as practical, cool patient with a cool wet sheet
- Establish IV **Normal Saline**, Consider Fluid Bolus
- Apply cold packs under the arms, around the neck and at the groin.
- Apply Cardiac Monitor & 12 Lead ECG



## Cardiac Care Kudos

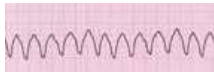
UCONN Fire Paramedic Wendell Cote, American Medical Response EMTs Janet Desrosiers

and John Ryan and Farmington Fire responders Keith Slater, Anthony Flamio, Jason Salemme and Jeff Armington successfully resuscitated a Farmington resident found in v-fib cardiac arrest. After restoring pulses with CPR and defibrillation, the patient was raced to the JDH cardiac cath lab, where a blockage was successfully cleared and stented. The patient, who also underwent hypothermia therapy, was discharged alert and oriented to a rehab facility where he continues to make great progress.



UCONN Fire Paramedic Brian Little, AMR paramedic Michael Carl and EMT Sean Freiman successfully treated

a patient in ventricular tachycardia. The patient, who received amiodarone from the medics stabilizing him, was also rushed to the cath lab where a critical lesion was cleared. The patient was discharged home two days later.



Bristol EMS paramedic Elizabeth Austin and her partner EMT Scott Mimnaugh called in a STEMI alert to JDH for a 61-year old female with chest pain. The patient had a complete blockage of her right coronary artery and received 4 stents in the cath lab. She was discharged home in good condition two days later.



Great job all!

## Construction Update

As you know, we have begun ED renovations, which will eventually include a new room for EMS crews.



For the next two months, the normal John Dempsey Hospital ED ambulance entrance doors will be closed to stretcher traffic. Ambulance stretchers are entering the ED through the MRI corridor to the left of the current patient entrance. The normal ambulance doors are being used as the walk-in patient doors while our waiting room is remodeled. We ask that ambulance crews EXIT through the MRI door as well as ENTER. We apologize for any inconveniences this may cause.

## UCONN Health Center EMS Web Site

For news, educational information, CME schedule and past copies of our newsletter *Partners*, check out our web site at:

[uconnems.uhc.edu](http://uconnems.uhc.edu)



## John Dempsey Hospital EMS CME 2012



Morning (8:30 A.M.)

*July Canceled—NO CME*

*August 2012—NO CME*

*September 19, 2012 (Wednesday)*

*October Skills, TBA*

*November 21, 2012 (Wednesday)*

*December 19, 2012 (Wednesday)*

Evening (7:00 P.M.)

*September 5, 2012 (Wednesday)*

*December 5, 2012 (Wednesday)*

Keller Auditorium

**All EMS Responders and General Public  
are Welcome!**

**Coffee, juice and bagels will be available provided  
free prior to all morning CMEs and pizza and soft  
drinks before the evening CMEs.**

Enter main door, take escalator down one floor. Daytime parking in main lot at top of hill is now limited to visitors and patients. If you are unable to find parking, please park in lower lots and take shuttle bus. For the evening CME, there is plenty of parking at the top of the hill. 3 Hours CME are offered. One additional hour will be given for reading journal article and completing short quiz.

Note: Due to construction, Fire and EMS vehicles should not park at non-ED entrances during the day when attending EMS sessions.

## John Dempsey Hospital EMS Conference

**Date To Be Announced  
Coming Fall 2012**

## CONTACT US:

Any questions or suggestions about EMS? Looking for patient follow-up?



Contact EMS Coordinator Peter Canning at  
[canning@uchc.edu](mailto:canning@uchc.edu) or call (860) 679-3485.