NORMOTHERMIA MAINTENANCE

NURSING

✓ Insert indwelling urinary catheter; Reason for Urinary Catheter: <u>Strict intake and output</u>
 ✓ Normothermia Instructions:

- Monitor temperature continuously while on Arctic Sun with bladder or esophageal thermometer,
- NOTE-least desirable is rectal thermometers.
- No oral or axillary temperatures while on Arctic Sun
- Monitor water temperature on the Arctic Sun Q Hr
- Do a bedside shivering assessment scale (BSAS) Q Hr
- Apply ice bags to neck, axilla, and groins
- Discontinue ice bags when patient is placed on Arctic Sun cooling machine
- Arctic Sun cooling machine with gel pads to cover 40% of body surface area, set goal Temperature of 37°C
- Apply counter warming measures to prevent shivering when BSAS > 1.
- Counter warming measures include:
 - Socks applied to hands and feet
 - •Warming blanket (Bair Hugger) to provide surface warming and prevent shivering
- May interrupt Arctic Sun if needed for transport off unit for procedure such as CT scan or MRI
- Notify Intensivist if patient consistently has a fever as indicated by Arctic Sun water Temperature indicator.

Weaning Arctic Sun:

- -When water temperature on Arctic Sun stable for 24 Hrs turn off Arctic Sun machine
- -Continue to monitor patient temperature Q Hr for 24 Hrs. If temperature rises above 38°C (100.4°F), restart normothermia orders

Stage I cooling measures for Normothermia:

- -Give Tylenol Prn temperature > 38° C per MD orders.
- -Ice packs to groin, axilla, and neck until temperature is < 38° C (100.4°F)

Stage II cooling measure for Normothermia:

- -Initiate if fever does not change 2 Hrs after implementation of stage I cooling and
- -Temperature is not < 38° C (100.4°F).
- -Initiate standard cooling blanket under patient
- -Monitor for shivering (See Shivering scale below)
- -Continue ice packs to groin, axilla, and neck

Stage III cooling measure for Normothermia:

- -Initiate 2 Hrs after implementation of stage II cooling and temperature is not < 38° C.
- -Initiate Arctic Sun cooling machine.
- -Apply the appropriate size Arctic Sun gel pads to the back, trunk and thighs
- -Connect the patient pad lines to the fluid delivery line of the Arctic Sun
- -Turn on the device.
- -Set Arctic Sun only on Automatic mode, goal temperature is set at to 37° C (98.6°F)
- -Connect the temperature probe to Arctic Sun
- -Assess for presence of shivering Q 1 Hr.

DO NOT WAIT UNTIL FULL BODY RIGORS HAS OCCURRED TO MANANGE SHIVERING

| Medications: STEP 1: |
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| Institute the following on all patients when cooling strategies are implemented: ☐ Acetaminophen (Tylenol) 650 mg Po Q 6 Hrs. Hold if NOT on cooling measures. RN to contact pharmacy to enter NG or PR order if pt cannot take by mouth. |
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| Medications: STEP 2: |
| □ Meperidine (Demerol) 25 mg IV Push Q 1 Hr Prn 1st signs of shivering (BSAS > or = 1). Hold if SCr > 1.5. |
| □ FentaNYL (Sublimaze) 25 mCg IV Push Q 1 Hr Prn 1 st signs of shivering (BSAS > or = 1) if not able to give meperidine. |
| □ BusPIRone (BuSpar) 30 mg Po Q 8 Hrs Prn shivering (BSAS > or = 1) not relieved with meperidine or fentanyl. RN to contact pharmacy to enter NG order if pt cannot take by mouth. |
| Medications: STEP 3: |
| Reminder – For FentaNYL IV infusion - Use "FentaNYL IV Infusion SS" ☐ Magnesium sulfate 40 Gm/1000 mL SWFI Bolus with 2 Gm over 60 min x 1 dose Prn Shivering (BSAS > or = 2) then start a continuous IV infusion at 1 Gm/Hr. Titrate up or down in 0.5 Gm/Hr increments Q 4 Hrs up to a max of 4 Gm/Hr to maintain serum magnesium between 3 – 4 mg/dL. For serum magnesium > 4 mg/dL, hold magnesium infusion and contact MD. |
| Medications: STEP 4: |
| Reminder – For Propofol IV drip order – Use "Sedation SS - Critical Care" |
| Reminder – Ensure sedation and analgesia are optimal prior to initiation of paralytic therapy. ☐ Vecuronium (Norcuron) (0.1 mg/Kg, Max =10 mg/dose)=mg IV Push Q 2 Hrs Prn shivering (BSAS > or = 3) |
| □ Vecuronium (Norcuron) (0.1 mg/Kg, Max =10 mg/dose)=mg IV Push x 1 dose Prn shivering (BSAS > or = 3) |
| □ Vecuronium (Norcuron) 1 mCg/Kg/min continuous IV infusion Prn shivering (BSAS > or = 3), start at 1 mCg/Kg/min and titrate up by 0.25 mCg/Kg/min or down by 50% after each train of four test to maintain train of four with neuromuscular stimulator goal 1 of 4. (max dose = 1.75 mCg/Kg/min) □ Lubricating Ophthalmic Ointment (Lacri-lube) to both eyes Q 4 Hrs ATC while on neuromuscular blocking agent. RN to contact Pharmacy to DC Lubricating Ophthalmic Ointment order when |
| Vecuronium is discontinued. |
| Other medications: |
| *All labs/diagnostics will be drawn/done routine now unless otherwise specified |
| LABORATORY - Chemistry |
| REMINDER: MUST BE ORDERED IF PATIENT IS ON MAGNESIUM INFUSION ☐ Magnesium (Mg)-Q 4 Hrs |
| DIAGNOSTICS - Neurology □ EEG |
| REMINDERS: |
| Inclusion Criteria: •Patients with diagnosis of subarachnoid hemorrhage (SAH), intracranial hemorrhage (ICH) stroke, |
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ischemic stroke, and traumatic brain injury.

MEDITECH MNEMONIC: MD.NORMT NANCY CHRISTIANSEN/ANKER

hypothermia order set.

ZYNX - None

•Post cardiac arrest patients may be maintained normothermic using the arctic sun according to the

Exclusion Criteria: Arctic Sun is **contraindicated** in patients with the following conditions:

- •Certain hematological disorders that affect thrombosis (cryoglobulinemia, sickle cell disease, serum cold agglutinins)
- •Peripheral vasospastic disorders (narrowing of the blood vessels leads to decreased blood flow)
- •Extensive skin defect (Burns and skin grafts)
- Caution is advised with sepsis patients