

## Key Points

GCS <15 - Transfer immediately to MTC unless in cardiac arrest  
 On Scene - early CPR and intubate apnoeic child  
 Correct hypoxia, acidosis and hypothermia  
 PEEP via cuffed tube  
 Core Temp <32C use active warming measures  
 Use extracorporeal warming in severe hypothermia  
 Consider associated other injuries, intoxication and seizures

Children are more likely to die of drowning than adults.

In ED, remove wet clothing, apply external warming, start resuscitation with warmed intravenous fluids and inhaled gases.

If ventilation required, use a cuffed tube where possible as vomiting and aspiration are common. Deliver PEEP starting at 5cm H<sub>2</sub>O to manage hypoxia and pulmonary oedema.

Extracorporeal warming is the most effective means of rapid restoration of core temperature in severe hypothermia.

If patient is in VF with core temperature below 30 deg C, deliver only 1 defibrillation. If there is no response continue CPR and warming until core temperature is above 30 deg C before defibrillating again.

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<b>AUTHOR</b>	Philip Henman
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