

SUMMARY

In order to prevent hypothermia in our patients, several potential areas of heat loss have been identified, and six steps to address the issue have been implemented. It is crucial that these procedures are followed for every patient. There are an additional four steps for pediatric/small patients, which are also critical measures to follow.

POLICY

Normal Patient Protocol:

1. All patients will have wet or soiled newspaper/bedding promptly removed to keep them clean, comfortable, and dry.
2. The veterinary assistant setting up the recovery blanket in the morning is responsible for making sure that the electric blanket is operational, and that it extends the full length of the recovery area. Every patient will have a clean, dry, appropriately-sized blanket on the surgery table and in recovery. “Appropriately-sized” means that the blanket covers the entire animal (head to tail), including its feet. If it is determined, once in the recovery area, that the blanket is not of an appropriate size, an additional blanket will be wrapped around the animal. It is **unacceptable** for a recovering animal to have anything but his/her head exposed while in the recovery area, unless he/she is awake, moving, and awaiting transportation back to his/her cage.
3. Every patient will have **at least** one warm rice bag adjacent to him/her while on the recovery blanket. This rice bag should be checked periodically to assure it is still warm, and should be placed beside the patient, outside his/her personal blanket.
4. If recovery is prolonged, the patient will have his/her temperature taken, and anything below 99°F will be considered hypothermic. The team technician and doctor will be notified, and these animals will have additional heat loss prevention steps taken, such as being wrapped in an emergency blanket. Proactive warming steps (i.e., warm SQ/IV fluids, warm blankets) should be considered, at the supervising doctor's discretion, also first run fluids on your skin to make sure they are warm.
5. When patients are brought back to their cages, they will be brought back with clean, dry blankets. They will be checked at several points throughout the day, and if the blankets become wet/soiled, they will be removed and/or replaced.
6. Any patient who is hypothermic, but too fractious to remain on the recovery blanket, will go back to his/her cage with additional blankets and several warm rice bags. This does not apply to aggressive animals.

7. After pre-medication, all dogs will have a blanket/towel placed in their kennel on top of the newspaper (after soiled newspaper is removed).
 8. All cats will have a blanket/towel placed in their kennel immediately after check-in.
 9. After induction, all dogs will have baby socks put over their feet on the prep table.
 10. Ensure surgical scrub and solution is warmed for surgical prep.
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Pediatric/Small Patient Protocol:

These patients are at greater risk of heat loss, so additional measures are taken to the ones listed above:

11. After premedication, pediatric/small patients are given a blanket and a warm rice sock in a palpation sleeve. If using a protocol where vomiting occurs (i.e., morphine), wait until after the patient has vomited and then complete step 8.
12. A blanket will be put on the prep table prior to inducing the patient.
13. After induction, the patients will have baby socks put over their feet.
14. Warm rice bags will be placed on the side of these patients while on the prep table, if a significant length of the body is out of the thoracic positioner during preparation. Heater water circulating blankets will be used on the surgical table.
15. For all patients receiving a blanket to be prepped on, bubble wrap will be placed on the prep table, under their towel.