Michigan TRAUMA AND ENVIRONMENTAL DROWNING/SUBMERSION INJURY

Initial Date: 5/31/2012
Revised Date: 10/25/2013

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Drowning/Submersion Injury

Drowning is defined as, "A process resulting in primary respiratory impairment from submersion or immersion in a liquid medium." (American Heart Association, 2010).

Uncertainty exists regarding survival in cold water drowning, however, recent literature suggests the following:

- 1. In cold water (temperature is less than 43° F (6° C)) and the patient is submerged with evidence of cardiac arrest:
 - A. Survival is possible for submersion time less than 90 minutes and resuscitative efforts should be initiated
 - B. Survival is not likely for submersion time greater than 90 minutes and providers may consider not initiating resuscitation or termination of resuscitation on scene
- 2. If warm water (temperature is greater than 43° F (6° C)) and the patient is submerged with evidence of cardiac arrest:
 - A. Survival is possible for submersion time less than 30 minutes and resuscitative efforts should be initiated
 - B. Survival is not likely for submersion time greater than 30 minutes and providers may consider not initiating resuscitation or termination of resuscitation on scene.
- 3. It may often be impractical to determine water temperature; subsurface water temperatures may be considerably colder than surface temperature. When in doubt, consider water to be cold.
- 4. Time estimation begins when the patient is presumed to be submersed.

If SCUBA incident with rapid ascent, transport the patient in the left lateral recumbent position.

1. Follow General Pre-hospital Care Protocol.

- A. Primary survey should include aggressive airway management and restoration of adequate oxygenation and ventilation.
- B. Exam should include consideration of possible c-spine injury.
- C. Assess for other associated injury such as injury to the head or diverelated emergency.
- D. Assess patient's temperature.

2. If pulse is absent:

- A. If pulse is absent, consider submersion time and temperatures as indicated above. Refer to the **Dead on Scene Procedure as indicated**.
- B. In normothermic, (> 34 C or 93F) patients initiate CPR and refer to Cardiac Arrest General Protocol (Adult or Pediatric).
- C. If patient is hypothermic, (≤ 34C or 93F) go to **Hypothermia Cardiac** Arrest Protocol.



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3. If pulse is present:

- A. If patient is hypothermic, go to **Hypothermia/Frostbite Protocol**.
- B. Prevent further heat loss by transport in a warm environment.
- C. Patient should be dry.
- D. Patients may develop subacute respiratory difficulty after drowning and therefore all victims of drowning should be transported for observation.
- E. Consider CPAP/BiPAP (if available) per CPAP/BiPAP Procedure.
- F. Contact Medical Control if no transport is considered or requested.

*Note: For SCUBA incident with rapid ascent, medical control can consider contacting the Divers Alert Network (DAN) @ 919-684-9111 to arrange evacuation and hyperbaric recompression at a properly equipped and staffed chamber.



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Follow General Prehospital Care Protocol Aggressive airway management and adequate oxygenation and ventilation Consider C-Spine Injury Assess for other associated injury Assess patient temperature Pulse Present Pulse Absent If patient is hypothermic, go to Hypothermia/Frostbite Protocol. In normothermic patients, initiate CPR and refer to CARDIAC ARREST-GENERAL PROTOCOL. Prevent further heat loss by transporting in a warm environment. Patient should be dry. Patient hypothermic, proceed to **HYPOTHERMIA CARDIAC ARREST** PROTOCOL. In case of respiratory distress, consider CPAP/ BiPap. Consider submersion time and temperatures, refer to **DEAD ON SCENE PROTOCOL** Contact Medical Control if no

transport is considered or requested