Classical Heat Stroke:

- Hyperthermia: Core temperature increases above 36.0°C up to 37.5°C.
- Thermoregulation: Hypothermia can lead to hyperthermia.
- Cytokine response.
- Hypothalamic control of core temperature.
- Heat stroke: Core temperature above 40°C.

Conditions associated with classical heat stroke:
- Acute respiratory distress syndrome (ARDS), disseminated intravascular coagulation (DIC), acute kidney injury, hepatic failure, hypoglycemia, rhabdomyolysis, seizures.

1. Complete blood count, electrolytes, BUN, creatinine, liver function test.
2. Coagulogram, renal function tests, liver function tests, electrolytes, blood gas, complete blood count.
3. Serum creatine kinase, calcium, phosphate, myoglobinuria for rhabdomyolysis.
4. Toxicological screening.
Classical Heat Stroke: ??.

1. Tracheal intubation
2. Central venous pressure monitoring
3. Blood pressure monitoring
4. Continuous core temperature monitoring
5. Benzodiazepine

Exertional heat stroke respiratory dysfunction, seizure, vomiting, diarrhea, rhabdomyolysis, acute kidney injury, hepatic injury disseminated intravascular coagulation

References:


