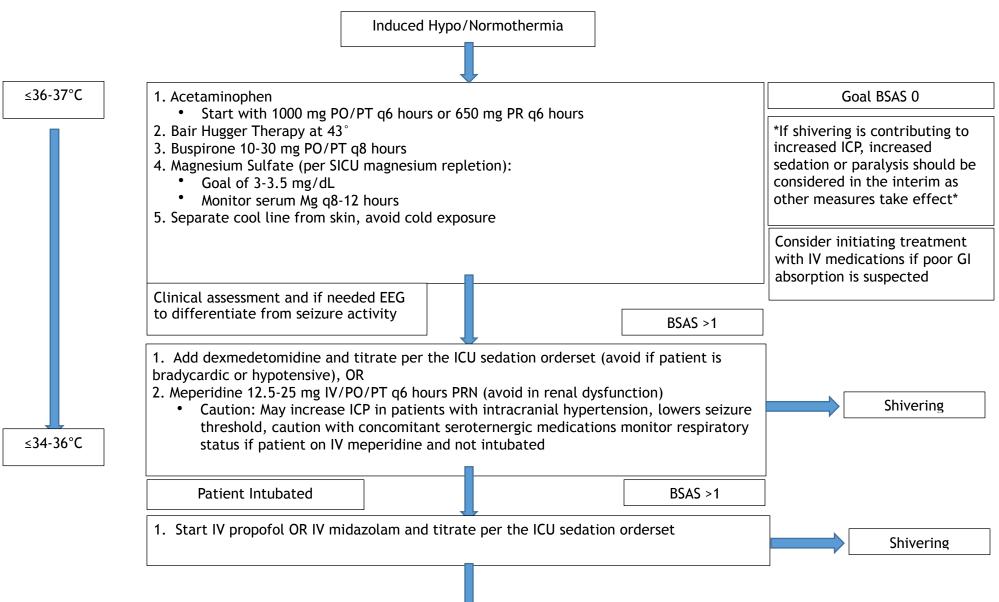
Barnes-Jewish Hospital & Washington University Antishivering Pathway

Note: Individualized, clinical judgment supersedes all written guidelines



- 1. Neuromuscular Blockade
 - $^{\bullet}$ Cisatracurium infusion 2 mcg/kg/min, titrate to a TOF $1\!\!/\!_{4}$ twitches and monitor BIS

Step-down/Discontinuation:

(In reverse order, starting with therapies initiated at the end first)

Patients on induced barbiturate coma do not need anti-shivering treatment until they are weaned from this therapy.

Appendix 1.

Bedside Shivering Assessment Scale (BSAS)

0-None: No shivering

1-Mild: Shivering localized to neck/thorax, may be seen only as artifact on ECG or felt by palpitation

2-Moderate: Intermittent involvement of the upper extremities +/- thorax 3-Severe: Generalized shivering or sustained upper/lower extremity shivering