

AG28 Shock/Non-Traumatic

Objectives:

- To assess and treat patients with shock

General Information:

- Hypoperfusion/shock signs and symptoms:
 - a) Hypotension
 - b) Diaphoresis
 - c) Tachycardia
 - d) Tachypnea/dyspnea
 - e) Altered mental status
- Types of Shock
 - a) Hypovolemic
 - i) Hemorrhage
 - * GI bleed, nose bleed
 - ii) Fluid loss
 - * Vomiting diarrhea, dehydration
 - b) Cardiogenic (pump failure)
 - i) Additional symptoms may include pulmonary edema, chest pain
 - ii) Implement Chest Pain/AMI and Breathing Difficulty protocols as necessary
 - iii) If no signs of pulmonary edema administer 250 ml bolus, may repeat up to 1000 ml if breath sounds remain clear
 - iv) Dopamine 2-20 mcg/kg/min titrated to systolic BP of 80-90 mmHg
 - c) Vasogenic shock (inappropriate vasodilation)
 - i) Examples: anaphylactic, neurogenic, septic
 - ii) Treat anaphylaxis per Allergic Reaction/ Anaphylaxis protocol
 - iii) Fluid boluses are frequently ineffective; vasopressors are often necessary
 - iv) Dopamine 2-20 mcg/kg/min titrated to systolic BP of 80-90 mmHg



Warnings/Alerts:

- Dopamine is contraindicated in a hypovolemic patient

OMD Notes:

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References:

AAOS Pharmacology Applications Paramedic, 2009, page 479
Mosby's Paramedic Textbook, 3rd Edition (Revised), 2007

Performance Indicators:

Vital Signs every 5 Minutes

Treatment and Response to Treatment

Amount of Fluid Given

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