

SHOCK

30 Second Review

Shock

RN, LPN

DEF: Inadequate tissue perfusion

S/S: Decreased BP, increased pulse, pale, clammy, cold

RX: Place patient in supine position, monitor vital signs, O2 at 8-10 L, IV LR wide open, transport to E.R., notify practitioner.

SKILL LEVEL: RN, LPN

DEFINITION: A state in which blood flow to peripheral tissues and central organs is inadequate to sustain life because of insufficient cardiac output, or mal-distribution or loss of blood volume, almost always associated with hypotension.

Episodes of simple faint, hypoglycemia, syncope, where the patient normalizes rapidly are not appropriate for this protocol.

Shock may be due to hypovolemia, cardiogenic disorders, vasodilation, or sepsis. Shock and its underlying specific cause should be treated concurrently.

DATA BASE:

Subjective: "I feel faint."

Objective:

- Hypotension (BP < or = 80 systolic)
- Fainting
- Tachycardia
- Thready pulse
- Cool, moist skin
- Pallor
- Confusion, anxiety, or stupor
- Fever (possible septic shock) may be present
- Evaluate for Bleeding
 1. External
 2. Internal
- Dehydration-Decreased skin turgor, dry mouth, and dry skin.

Shock

Plan:

1. Place patient in SUPINE POSITION and elevate feet if possible.
2. Assess **Airway, Breathing, Cardiac** status. **START HIGH FLOW O2** at 8-15 Liters, preferably by mask.
3. Take vital signs, BP, pulse, respiration, now and every 5-10 minutes until transported.
 - Any patient in shock will need transport to a hospital facility. If changes in BP, respiration, or pulse normalize in the supine position, contact the medical provider immediately.
4. **START AN IV INFUSION:** Lactated Ringers or Normal Saline run as rapidly as possible up to 20-30 ml per kilogram in the first 30 minutes. (approximately 500 ml per 10 minutes)

Note: Cardiogenic shock is not a hypovolemic state and fluid loading will be of little value - but an open IV line is essential.

5. Transport to emergency facility.
6. Contact medical provider for further instructions while awaiting transport.

APPROVED:

Medical Services Manager

Date

Chief Medical Officer

Date

Steven Sheer MD

Medical Director

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Date

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