

# 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, 3<sup>rd</sup> Edition (Revised), 2007

## Performance Indicators:

Vital Signs every 5 Minutes

Treatment and Response to Treatment

Amount of Fluid Given

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