



SHOCK

Effective: April 27, 2017
Replaces: February 8, 2013
Review: April 27, 2022

1. BLS Treatment

- 1.1. Routine Medical Care – Adult **(700-S04)**
 - 1.1.1. **Oxygen High Flow** – assist with ventilations as appropriate
- 1.2. Place patient in shock position
- 1.3. Control any obvious bleeding as appropriate
 - 1.3.1. Consider the use of a tourniquet if bleeding is not controlled **(700-M17)**
- 1.4. Maintain patient's body temperature
- 1.5. If Anaphylaxis is suspected see treatment protocol **(700-A12)**
- 1.6. If Trauma is suspected see treatment protocol **(700-A16)**
- 1.7. If Sepsis is suspected see treatment protocol **(700-A04)**

2. ALS Treatment

- 2.1. **Vascular Access (IV)**, large bore, TKO
 - 2.1.1. A second IV may be established if appropriate
- 2.2. **Vascular Access (IO)**, if patient is unconscious

3. Hypovolemic Shock

- 3.1. Titrate IV to maintain SBP 90mmHg
- 3.2. Consider **500ml Fluid bolus**, to maintain SBP greater 90mmHg

4. Cardiogenic shock

- 4.1. Obtain **12 Lead ECG**
- 4.2. If dysrhythmia is present, treat according to appropriate protocol
- 4.3. **250ml Fluid bolus**, if lung sounds are clear
- 4.4. **Dopamine 5–20 mcg/kg/min IV**, titrate to SBP greater than 90mmHg