

Names: _____

Chapter 23 – Shock Presentation Notes

Cognitive and Affective Objectives

5-1.9 List signs and symptoms of shock (hypoperfusion).

5-1.10 State the steps in the emergency medical care of a patient with signs and symptoms of shock (hypoperfusion).

5-1.11 Explain the sense of urgency to transport patients who are bleeding and show signs of shock (hypoperfusion).

Psychomotor Objectives

5-1.16 Demonstrate the care of the patient exhibiting signs and symptoms of shock (hypoperfusion).

5-1.17 Demonstrate completing a prehospital care report for the patient with bleeding and/or shock (hypoperfusion).

Shock

•State of _____ and _____ of the cardiovascular system

•Leads to inadequate _____

•Without adequate _____, cells cannot get rid of _____ wastes

•The result of _____ to cells that causes the organ, then organ systems, to fail

Perfusion

•The cardiovascular system's _____ of _____ and _____ to all the cells in different _____ and _____ of the body

Perfusion Triangle - Capillary Sphincters

• _____ the blood flow through the capillary beds.

• _____ are under the control of the automatic nervous system.

• _____ of blood flow is determined by cellular need.

Perfusion and Neurogenic Shock - Cardiovascular Causes of Shock (1 of 4)

- _____ (cardiogenic shock)
 - _____ function of the heart or pump failure
 - Causes a _____ of blood into the lungs
 - Results in _____
 - _____ edema leads to _____ ventilation
- _____ vessel function (neurogenic shock)
 - Damage to the _____ may affect control of the size and muscular tone of blood vessels.
 - The vascular system _____.
- Blood in the body cannot fill the _____ system.
- _____ shock occurs.

Cardiovascular Causes of Shock

- _____ failure (hypovolemic shock)
 - Results from _____ or _____
 - Blood is lost through _____ and _____ bleeding.
 - Severe thermal burns cause _____.
 - _____ aggravates shock.
- Combined vessel and content failure
 - Some patients with severe _____ infections, _____, or _____ tissues contract septic shock.
 - _____ damage vessel walls, causing _____ and _____ ability to _____.
 - Leads to _____ of vessels and _____ of _____, causing shock

Noncardiovascular Causes of Shock

- Respiratory insufficiency

—Patient with a _____ or _____ may be unable to breathe adequate amounts of oxygen.

— _____ oxygen in the blood will produce shock.

- _____ shock

—Occurs when a person _____ to a substance.

— Four categories of common causes:

- _____
- _____
- _____
- _____

Psychogenic shock

—Caused by _____ reaction of the _____ system that produces a _____, generalized _____

—Commonly referred to as fainting or _____

—Can be brought on by serious causes: _____ heartbeat, _____

—Can be brought on by fear, bad news, unpleasant sights

Progression of Shock

- _____ shock
- When the body compensates for blood loss
- _____ shock
- The late stage of shock when blood pressure is falling
- _____ shock
- The terminal stage

Compensated Shock

- _____
- _____
- _____
- _____ of _____
- _____
- _____
- _____
- _____
- _____, _____ breathing
- Shortness of breath
- Nausea or _____
- Delayed _____ refill
- Marked _____

Decompensated Shock

- _____ blood pressure (_____ mm Hg in an adult)
- Labored, _____ breathing
- _____, mottled, _____ skin
- _____ or _____ pulse
- Dull eyes, _____ pupils
- _____ output

Irreversible Shock

- This is the _____ stage of shock.
- A _____ of any type will not be enough to save a patient's life.

When to Expect Shock

- Multiple severe _____
- _____ or _____ injuries
- _____ injuries
- Severe _____
- Major _____
- _____

You are the Provider

- You and your partner respond to an MVC involving two cars. En route you follow BSI.
- You arrive to a 25-year-old man.
- Law enforcement informs you that the other car left the scene. Patient was restrained and is sitting outside car. He is pale.
- The airbag has deployed and the steering wheel has some damage.

Scene Size-up

- In addition to BSI, what are some _____ at the scene?
- What is the _____ of _____?

You are the Provider

•You approach the patient and introduce yourself. He appears visibly upset but lets you take his vital signs.

—Pulse: 115 beats/min

—Respirations: 26 breaths/min

—Blood pressure: 110 mm Hg

•He has a laceration on his knee where it hit the dashboard.

Initial Assessment

•Describe the steps of your initial assessment and findings:

— _____

— _____

— _____

— _____

— _____ decision

You are the Provider (continued)

•Spinal immobilization needed.

•Pallor is a sign of shock.

•He is “A” on the AVPU scale.

•Airway is open.

•Breathing is rapid.

•Inspect and palpate chest for DCAP-BTLS.

•Observe for accessory muscle use.

You are the Provider (continued)

•Patient has rapid pulse.

•Clammy skin.

•Knee laceration

- Priority transport

Focused History and Physical Exam

- Would you perform a rapid physical exam or focused physical exam?
- What is your reasoning?

Detailed Physical Exam

- If time permits, perform en route to the hospital.

Ongoing Assessment

- Perform reassessment.
- Take vital signs every 5 minutes.

You are the Provider (continued)

- You reassess the patient in the ambulance and he has a pulse of 122 beats/min, respirations of 30 breaths/min, and a blood pressure of 106/68 mm Hg.
- What do his vital sign changes indicate?

Emergency Medical Care

- Make certain patient has _____.
- Keep patient _____.
- _____ bleeding.
- _____ any broken bones or joint injuries.
- Always provide _____.
- Place _____ under and over patient.
- If there are no broken _____, _____ the legs 6" to 12".
- Do not give the patient anything by _____.

Pneumatic Antishock Garment

- Some localities allow EMTs to apply a _____ (PASG) for some patients in _____ shock.
- Know your local protocol regarding their usage.

Treating Cardiogenic Shock

- Patient may breathe better in a _____ or semi-sitting position.
- Administer _____.
- Assist _____ as necessary.
- Have _____ nearby in case the patient _____.
- _____ promptly.

Treating Neurogenic Shock

- Maintain _____ and assist breathing as needed.
- Keep patient _____.
- Transport _____.

Treating Hypovolemic Shock

- _____ obvious _____.
- _____ any _____ or _____ injuries.
- If _____, raise legs _____ to _____.
- _____ and maintain airway.
- Give _____ as soon as you suspect shock.
- Transport _____.

Treating Septic Shock

- Transport as promptly as possible while giving all general support available.
- Give _____ - _____ during transport.
- Use _____ to conserve body _____.

Treating Respiratory Insufficiency

- _____ and _____ the airway.
- Clear _____ of any _____.
- _____ if needed with a _____ device.
- Administer _____.
- _____ promptly.

Treating Anaphylactic Shock

- Administer _____.
- Provide _____ transport.
- Provide all possible support.

— _____

— _____ assistance

Treating Psychogenic Shock

- It is usually _____ - _____.
- Assess patient for _____ from _____.
- If patient has difficulties after regaining consciousness, suspect another problem.