	COUNTY OF SACRAMENTO EMERGENCY MEDICAL SERVICES AGENCY	Document #	8038.13
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Signature on File EMS Medical Director <u>Signature on File</u> EMS Administrator

Purpose:

A. To serve as the treatment standard in treating patients with signs and symptoms of shock (hypoperfusion).

Authority:

- A. California Health and Safety Code, Division 2.5
- B. California Code of Regulations, Title 22, Division 9

Notes:

- A. Shock exists any time there is inadequate perfusion of tissues to meet metabolic demands of the body. Signs of shock include, cool and/or moist skin, tachycardia, decreased sensorium, and generally low systolic blood pressure (SBP) less than 90 mmHg.
- B. The evaluation of a patient in shock must include a search for its cause from one of the forms of shock:
 - 1. Hypovolemic
 - 2. Hemorrhagic
 - 3. Cardiogenic
 - 4. Neurologic
 - 5. Insulin Shock
 - 6. Anaphylactic
 - 7. Septic
- C. In addition to the fluid resuscitation and transport noted below, treat any underlying cause as dictated by protocol.

Protocol:

	BLS		
1.	ABC's/ Routine Care- Supplemental O2 as necessary to maintain SPO2 > 94%.		
	Use the lowest contentration and flow rate of O2 as possible.		
2.	Airway adjuncts as needed.		
3.	Warming measures, except with suspected fever.		
4.	Spinal immobilization (SMR) if necessary by protocol.		
5.	Control external bleeding.		
6.	Immobilize associated fractures (without delaying transport-may be done enroute)		
7.	Prepare for Immediate transport. Do not delay at scene except in special		
	circumstances, i.e. prolonged extrication.		
	ALS		
1.	Establish vascular access-with normal saline, titrate to a SBP ≥ 90 -100 mmHg.		
2.	Cardiac Monitoring		
3.	Treat any underlying cause per policy as appropriate.		

Cross Reference: PD# 8025 - Burns

- PD# 8065 Hemorrhage in Trauma PD# 8018 - Overdose and/or Poison Ingestion PD# 8061 - Decreased Sensorium PD# 8001 - Allergic Reaction/Anaphylaxis PD# 8067 - Sepsis/Septic Shock
- PD# 8044 Spinal Motion Restrictions (SMR)
- PD# 8024 Cardiac Dysrhythmias
- PD# 8026 Respiratory Distress
- PD# 8015 Trauma