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 or 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.