

NON-TRAUMATIC SHOCK

ALWAYS USE STANDARD PRECAUTIONS

INDICATION

- SBP < 90 and signs of shock, i.e., ALOC, severe vomiting, diarrhea, dark tarry stools, or vaginal bleeding


PHYSICIAN CONSULT

- If SBP < 80, obtain physician consult for **Push-dose Epinephrine**

CRITICAL INFORMATION

- If rales present, see Acute Pulmonary Edema R 5

TREATMENT

- ALS RMC; initiate two large bore IVs
- Give 250 ml bolus. Repeat as needed up to two liters.
-  If SBP < 80 obtain physician consult for **Push-dose Epinephrine**:
 - Mix 1mL Epinephrine (0.1mg/mL concentration) with 9mL Normal Saline in a 10mL syringe
 - Administer Push-dose Epinephrine 1mL IV/IO every 3-5 minutes
 - Titrate to maintain SBP >80mmHg
- Monitor blood pressure every five minutes

DOCUMENTATION- ESSENTIAL ELEMENTS

- 12-lead ECG finding
- Vital signs pre/post fluid boluses
- History of progression of illness

RELATED POLICIES/ PROCEDURES

- Severe Nausea/Vomiting M 5