



SHOCK



Escambia County, Florida – 1st Responder Medical Protocol

The causes of shock are many and varied, but the initial approach to the patient should be the same.

Shock that comes on suddenly or quickly is frequently more concerning and catastrophic than shock which comes on slowly or gradually.

The primary focus remains on the ABCs with rapid movement to definitive care.

Assessment

Adult Shock is defined as:

Signs of inadequate perfusion:

- A. Altered mental state (restlessness, inattention, confusion, agitation)
- B. Tachycardia (pulse greater than 100)
- C. Pale, cool, moist skin
- D. Rapid shallow respirations

Pediatric Shock is defined as:

Signs of inadequate perfusion:

- 1. Altered mental status
- 2. Tachycardia
- 3. Weak or absent distal pulses
- 4. Pallor
- 5. Cold, clammy and/or mottled skin



Approved: 10/01/2011
Version: 3.1

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Approved by:

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Charles Neal, D.O. Medical Director



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Treatment

- A. (See [General Supportive Care Protocol](#)).
- B. Manually stabilize the head and cervical spine if trauma of the head and neck is suspected!
- C. Assure that the patient's airway is open and that breathing and circulation are adequate.
- D. Administer high concentration oxygen, and **be prepared to ventilate the patient!**
- E. Place the patient in a face-up position **and** elevate the patient's legs 8 - 12 inches if there is no trauma to the legs.
- F. Keep the patient warm.
- G. Update the responding EMS unit.
- H. Perform Physical Exam.
- I. Obtain History using SAMPLE.

Report

- A. Report to crew as indicated in [General Supportive Care Protocol](#).



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