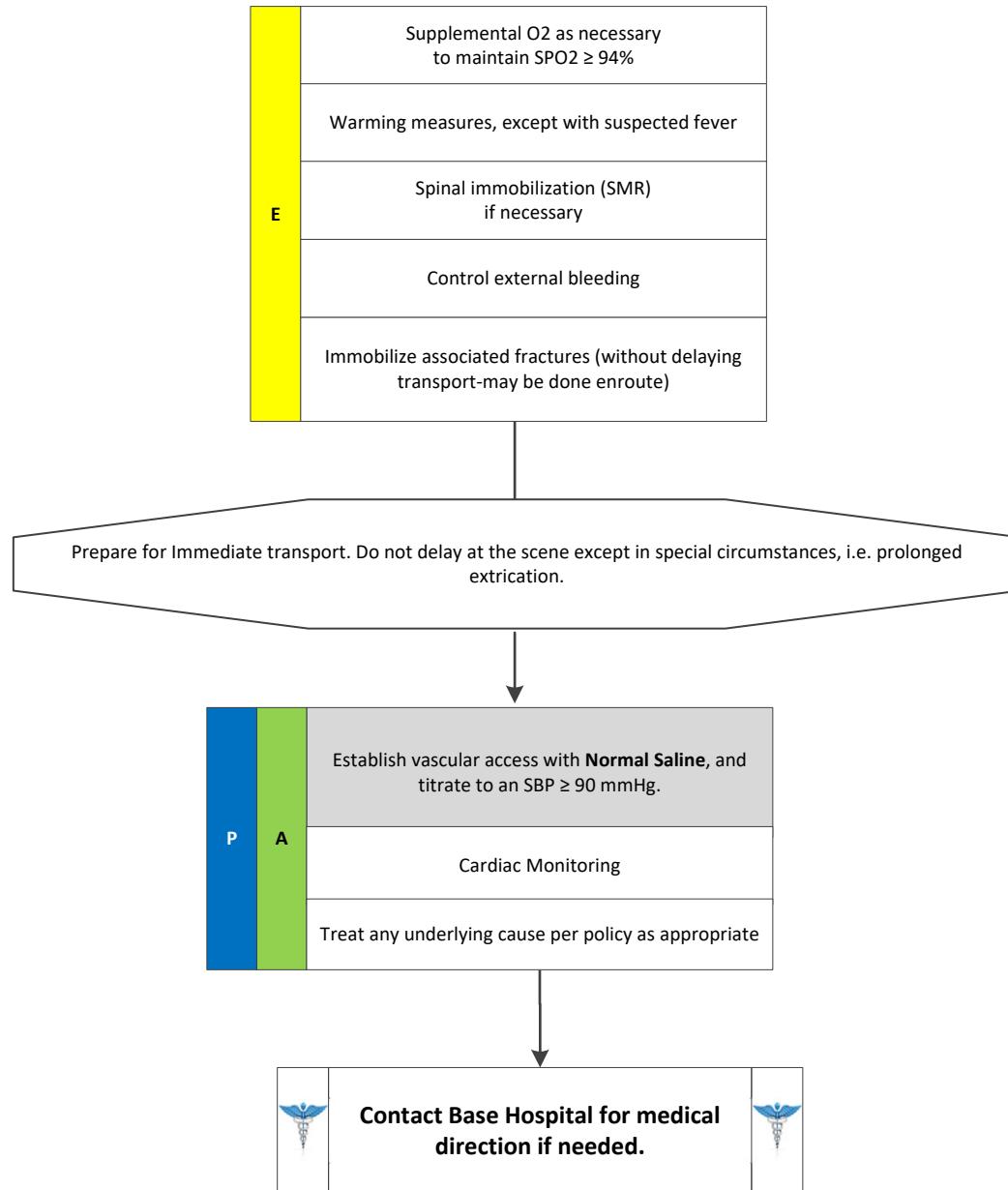


Shock – **SUNDOWN 11/1/26****DRAFT**

E	EMT
A	AEMT
P	Paramedic





Shock

A. Shock exists any time there is inadequate perfusion of tissues to meet the metabolic demands of the body. Signs of shock include cool and/or moist skin, tachycardia, decreased sensorium, and generally low systolic blood pressure (SBP) of less than 90mmHg.

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.

Cross Reference:

- PD# 8001 – Allergic Reaction/Anaphylaxis
- PD# 8002 – Diabetic Emergencies
- PD# 8003 – Seizures
- PD# 8004 – Suspected Narcotic Overdose
- PD# 8015 – Trauma
- PD# 8018 – Overdose and/or Poison Ingestion
- PD# 8024 – Cardiac Dysrhythmias
- PD# 8025 – Burns
- PD# 8026 – Respiratory Distress
- PD# 8844 – Spinal Motion Restrictions (SMR)
- PD# 8065 – Hemorrhage
- PD# 8067 – Sepsis/Septic Shock

