San Joaquin County Emergency Medical Services Agency



BLS Shock Non-Traumatic

AUTHORITY: Health and Safety Code, Division 2.5, Sections 1797.60, 1797.80, 1797.197, 1797.197a, 1797.204, 1797.220, 1798; California Code of Regulations, Title 22, Chapter 2, Sections 100062, 100063, 100064

INFORMATION NEEDED:

Patient History: onset of symptoms and duration, fluid loss (nausea, emesis, diarrhea, diuretics), fever, infection, trauma, medication or substance ingestion, allergic reaction, past history of cardiac disease, abnormal EKG or internal bleeding disorder.

OBJECTIVE FINDINGS:

Compensating patients: anxiety, agitation, restlessness, tachycardia, normal blood pressure, normal or delayed capillary refill, signs and symptoms of mild or moderate anaphylaxis.

De-compensating patients – decreased level of consciousness, bradycardia or decreasing heart rate, hypotension, cyanosis, delayed capillary refill, inequality of central and distal pulses.

TREATMENT:

- 1. Primary Survey ensure ABC's.
- 2. Place patient in shock position face up with legs elevated 12 18 inches. Modify position if necessary due to respiratory distress.
- 3. Monitor SpO2.
- 4. Administer oxygen for shortness of breath or signs of hypoxia: Oxygen 10-15 L/min via non-rebreathing mask. Patients with ineffective respirations: support ventilations with BVM and airway.
- 5. Give patient nothing by mouth.
- 6. Maintain patient warmth.
- 7. Enhanced Skills EMT: obtain blood glucose determination if patient as altered mental status or history of diabetes.
- 8. If blood glucose is less than 70 mg/dl, administer oral glucose according to EMS Policy No. 5530, BLS Altered Mental Status.
- 9. Secondary Survey and Routine Medical Care.
- 10. If allergen exposure is suspected refer to EMS Policy No. 5551, <u>BLS Allergic Reaction</u> <u>– Anaphylaxis</u>.

Effective:April 1, 2020Supersedes:July 1, 2007

Approved: <u>Signature on file</u> Medical Director

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Signature on file EMS Administrator