

Managing Shock Flowchart

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• Oxygen • Pulse oximetry • ECG monitor		• IV/IO access • BLS as indicated • Point-of-care glucose testing	
Hypovolemic shock: Specific management for selected conditions			
Nonhemorrhagic		Hemorrhagic	
• 20 mL/kg NS/LR bolus, repeat as needed • Consider colloid		• Control external bleeding • 20 mL/kg NS/LR bolus, repeat 2 or 3x as needed • Transfuse PRBCs as indicated	
Distributive shock: Specific management for selected conditions			
Septic	Anaphylactic		Neurogenic
Management algorithm: • Septic Shock	• IM epinephrine (or autoinjector) • Fluid boluses (10-20 mL/kg NS/LR) • Albuterol • Antihistamines, corticosteroids • Epinephrine infusion		• 20 mL/kg NS/LR bolus, repeat PRN • Vasopressor
Cardiogenic shock: Specific management for selected conditions			
Bradyarrhythmia/tachyarrhythmia		Other (eg, CHD, myocarditis, cardiomyopathy, poisoning)	
Management algorithms: • Bradycardia • Tachycardia		• 5 to 10 mL/kg NS/LR bolus, repeat PRN • Inotropic and/or vasoactive infusion • Consider expert consultation • Antidote for poisoning	
Obstructive shock: Specific management for selected conditions			
Ductal-dependent (LV outflow obstruction)	Tension pneumothorax	Cardiac tamponade	Pulmonary embolism
• Prostaglandin E1 • Expert consultation	• Needle decompression • Tube thoracostomy	• Pericardiocentesis • 20 mL/kg NS/LR bolus	• 20 mL/kg NS/LR bolus, repeat PRN • Consider thrombolytics, anticoagulants • Expert consultation