

 County of San Diego EMS A Division of San Diego County Fire	TREATMENT PROTOCOL		S-138
	SHOCK		
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BLS

- O₂ saturation
- O₂ and/or ventilate PRN
- Control obvious external bleeding
- Treat associated injuries
- NPO, anticipate vomiting
- Remove transdermal patch
- Keep patient warm

ALS

- Monitor/EKG
- IV/IO SO
- Capnography SO PRN

Non-traumatic, hypovolemic shock*

- 500 mL fluid bolus IV/IO SO, MR to maintain SBP ≥90 mmHg SO

SBP <90 mmHg after second fluid bolus

- Push-dose epinephrine 1:100,000 (0.01 mg/mL)
1 mL IV/IO BHO, MR q3 min, titrate to SBP ≥90 mmHg BHO

Neurogenic shock

- 500 mL fluid bolus IV/IO SO, MR to maintain SBP ≥90 mmHg SO

SBP <90 mmHg after second fluid bolus

- Push-dose epinephrine 1:100,000 (0.01 mg/mL)
1 mL IV/IO BHO, MR q3 min, titrate to SBP ≥90 mmHg BHO

Push-dose epinephrine mixing instructions

1. Remove 1 mL normal saline (NS) from the 10 mL NS syringe
2. Add 1 mL of epinephrine 1:10,000 (0.1 mg/mL) to 9 mL NS syringe

The mixture now has 10 mL of epinephrine at 0.01 mg/mL (10 mcg/mL) concentration.

*If suspected AAA, fluid boluses to maintain SBP of 80 mmHg. Treat per Abdominal Discomfort / GI / GU (Non-Traumatic) Protocol (S-120).