### 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).