

## Evaluation of Shock

SHOCK	JVD?	Knee caps	Clues?	Acute Management
Septic	No	Warm	fever, WBCs, localizing signs of infection	<ul style="list-style-type: none"> <li>- <i>Stop Sepsis Order Set</i>: bolus fluids, start antibiotics, send stat labs</li> <li>- Escalate care (RRT)</li> <li>- Vasopressors (dopamine pending central access → levophed, phenyl, vaso)</li> </ul>
Cardiogenic	Yes	Cool	h/o CHF, pulm rales, LE edema	<ul style="list-style-type: none"> <li>- Escalate care (RRT, CCU, cardiology fellow)</li> <li>- ECG, labs, CXR, ICU venous panel</li> <li>- Inotropes (dobutamine, etc.), Assist devices (IABP, Impella)</li> </ul>
Hypovolemic	No	Cool	Hgb drop, recent procedure, GIB	<ul style="list-style-type: none"> <li>- Bolus fluids while awaiting blood products if bleeding</li> <li>- Labs (CBC, 2 type and screens, ICU venous panel *get fast Hct)</li> <li>- Consider Massive Transfusion Protocol (call Blood Bank)</li> </ul>

**Special considerations:** Diagnoses not to forget (in the proper clinical setting): PE, PTX, cardiac tamponade