Circulatory shock

MANAGING HYPOVOLEMIC SHOCK

There are four main classes of shock

- **Hypovolemic**
- Distributive
- Cardiogenic
- Obstructive

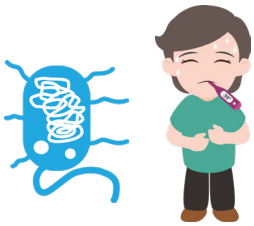
Hypovolemic shock commonly results from

Hemorrhage

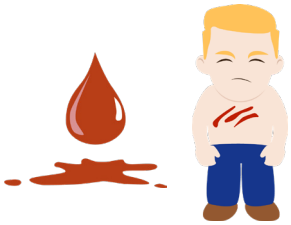
Gastrointestinal losses

Dehydration

Common causes include



Sepsis / infection



Trauma / hemorrhage

In fact, hypovolemia is a very common contributing factor, and is often present concomitantly with other forms of shock. Many shock states (e.g., sepsis) may cause a patient to feel ill and decrease their oral intake and / or cause nausea, vomiting, or diarrhea, adding hypovolemia to the underlying disease process.

Treatment

Treatment for hypovolemic shock primarily includes volume resuscitation, with IV fluids or blood products, as appropriate. It is rational to use pH-appropriate resuscitation fluids to avoid exacerbating underlying electrolyte abnormalities. For example, many patients may have a metabolic acidosis, and 0.9% sodium chloride may exacerbate their acidosis. However, for a patient with a hypochloremic alkalosis (e.g., isolated vomiting), 0.9% sodium chloride may help normalize pH.