



Figure 10-6 The four types of shock.

(discussed later) may increase the severity of bleeding by preventing blood from clotting normally.

Blood loss can be external and obvious, or it can be **occult**—internal and hidden. The American College of Surgeons divides blood loss due to hemorrhage into four classes, ranging from class I, mild blood loss (less than 15 percent of total blood volume, or the equivalent of donating 1.5 units of blood) to class IV, extremely life threatening (blood loss of 40 percent of total blood volume or greater). Due to the

occult hidden.

5. Which of the following factors can influence how shock affects the body? _____
 - a. age
 - b. a preexisting medical condition
 - c. a prescription medication or substance abuse
 - d. all of the above
6. Which of the following statements regarding shock is true? _____
 - a. Tachypnea, hypotension, tachycardia, pale diaphoretic skin, and altered mental status are all classic signs/symptoms of shock.
 - b. Compensatory mechanisms could mask or eliminate signs and symptoms.
 - c. A 4-year-old is as likely to spiral rapidly into decompensated shock as is an 80-year-old.
 - d. Signs and symptoms of shock could be masked by medications such as beta blockers, diuretics, or anticoagulants.
 - e. All of the above are true.
7. Which of the following statements regarding the management of shock care is false? _____
 - a. Care centers on returning the patient to a state of homeostasis.
 - b. Any problems affecting the ABCDs should be corrected immediately.
 - c. Care should be begun by ensuring that the patient's airway is open and clear using gravity or suction, as appropriate.
 - d. Interventive care always takes priority over transport.
8. Which is the correct position in which to place a shock patient without suspected spinal trauma? _____
 - a. Rothberg position
 - b. supine position with elevation of the feet 8–12 inches above the heart
 - c. a position in which the feet are elevated 6 inches above the heart
 - d. modified COMA position
 - e. none of the above
9. Which of the statements regarding shock is false? _____
 - a. Shock is caused by inadequate tissue oxygenation.
 - b. Shock is always a life-threatening condition.
 - c. The longer shock goes uncorrected, the greater the chance for recovery.
 - d. Early signs and symptoms of shock may be subtle due to compensatory mechanisms.

Matching

Match the type of trauma or illness to the type of shock it could cause. (more than one answer may apply)

- | | |
|-----------------------------|--|
| _____ 1. anaphylactic shock | a. a head injury (concussion) that occurred three days ago |
| _____ 2. neurogenic shock | b. severe vomiting or diarrhea |
| _____ 3. cardiogenic shock | c. a bee sting |
| _____ 4. septic shock | d. exposure to latex gloves |
| _____ 5. hypovolemic shock | e. cardiac tamponade |
| | f. a massive infection in the bloodstream |
| | g. tension pneumothorax |



CASE DISPOSITION



You inform the other patrollers that you believe the patient is suffering from hypovolemic shock due to internal injuries. The situation has been made worse because he takes an anticoagulant. Working with the other patrollers, you quickly put the man on high-flow oxygen and place him on a backboard with his feet elevated 8–12 inches. Covering him with blankets, you carefully load him into a toboggan. You ski down with the toboggan team and help them move the patient into the first-aid hut. Soon after, a helicopter arrives and transports the patient to a local trauma center. Several months later, you are in the ski area's cafeteria when someone taps you on the shoulder. It's the man and his granddaughter. He thanks you for "saving my life" and informs you that your suspicions were confirmed. Lifting up his sweater, he shows you an abdominal scar. His granddaughter tells you that the impact of the crash ruptured her grandfather's spleen. The doctor told her that had you not stopped and insisted that he be treated, he likely would have died.