Shock

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* Decreased cellular profusion
* Cellular tissue hypoxia
* “If you don’t inspire, you expire”
* In order to have blood pressure, you need
  + Blood
  + Pump
* Types of shock
  + Distributive
    - Septic
      * Overwhelming infection
        + Almost always bacterial
      * (40-60% mortality)
      * Pressure goes down
        + Swelling, edema
      * Vasodilation
      * Bacterial meningitis
        + You’re going to die. Be afraid.
      * Get the antibiotics without bothering to test
    - Anaphylactic
      * You bottom out your blood pressure
      * Throat swells and airway obstructs
      * Epipen:
        + Epi: 1:1000 0.3 mg

Inject them anywhere

* + - Spinal
      * Physical trauma to the neck
        + Anything above T6
        + Loss of sympathetic nerve control

Controls vasso dilation

Hypotension and bradycardia

* + - * They will have no pain and can’t give feedback
  + Obstructive shock
    - Blockage of blood flow
    - Pulmonary Embolism (PE)
      * Make sure to get up at some point during flights
    - Rare
  + Hypovolemic
    - Can be from blood loss, dehydration
    - Usually hemorrhagic
    - Can be trama or medical (GIB, AAA)
    - Not just bloodloss
      * Diareha and vomit
        + Be afraid of them
    - Surgery
  + Cardiogenic shock
    - Pump stops working—poor cardiac function
    - Need fluid and pump
    - Bad
    - Likely won’t survive
    - LVAD—left ventricular assist device
* Always lie to patients if they’re going to die
* Emergency medical practice