



Nursing Care of Patients in Shock

Chapter 9

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Shock

Circulatory collapse resulting in organ damage and death without immediate treatment

Shock



Pathophysiology of Shock

Inadequate tissue perfusion

Tissue perfusion and B/P are maintained by:

- Adequate blood volume
- Effective cardiac pump
- Effective blood vessels

Compensation (Compensatory Mechanism)

- Once system fails and changes are made in one or both of nonfailing systems
- Shock occurs when compensatory mechanism fails



Metabolic and Hemodynamic Changes in Shock

Epinephrine/NorEpi released triggering



Sympathetic nervous system

- Tachycardia
- Tachypnea
- Oliguria
- Cool, clammy skin with pallor

Decreased blood pressure

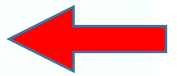




Effect on Organ and Organ Systems

Tissue ischemia and organ injury

Brain death if anoxic over 4 minutes



Complications from Shock



Decreased clotting factor

Acute respiratory distress syndrome (A R D S)

Disseminated intravascular coagulation (D I C)

Multiple organ dysfunction syndrome (M O D S)

Classification of Shock

| | |
|--------------------|--|
| Hypovolemic shock | • Decreased circulating blood volume |
| Cardiogenic shock | • Cardiac failure |
| Obstructive shock | • Blockage of blood flow outside heart |
| Distributive shock | • Excessive dilation of venules/arterioles |

Characteristics of all shock is decreased blood pressure - below level to maintain adequate blood flow to tissues.

Hypovolemic Shock

- Decreased circulating volume
- Any severe loss of body fluid including dehydration
- Causes
 - Dehydration, hemorrhage
 - Loss of fluid from burns, vomiting, diarrhea, or intravascular into interstitial space
- Signs and Symptoms
 - Restlessness, altered mental status
 - Pale, cool, clammy skin
 - Tachycardia, tachypnea
 - Nondistended peripheral veins, decrease jugular vein circumference
 - Decrease urine output

Cardiogenic Shock

- Cardiac failure, heart fails to adequately pump blood to the body
- Causes
 - Acute myocardial infarction
 - Rupture of heart valve
 - Acute myocarditis/cardiomyopathy
 - End stage heart disease
 - Severe dysrhythmias (A-fib)
 - Traumatic injury to the heart
- Signs and Symptoms
 - Similar to hypovolemic – plus-
 - Distended jugular and peripheral vein
 - Pulmonary edema, extreme shortness of breath, wheezing and gasping for breath, coughing white frothy sputum

Obstructive Shock

- Blocked blood flow outside heart
- Causes
 - Pericardial tamponade- Pericardial sac fills with blood
 - Tension pneumothorax- compression of heart with air in pleural spaces
 - Acute pulmonary hypertension- increase pressure in pulmonary artery
- Signs and Symptoms
 - Similar to hypovolemic
 - Distended jugular

Distributive Shock

Peripheral vascular is loss due to excessive dilation of venules/arterioles

Types

- Anaphylactic shock
- Septic shock
- Neurogenic shock



Anaphylactic Shock

Extreme hypersensitivity reaction to antigen, death in minutes



- Causes
 - Insect stings, antibiotics, peanuts, anesthetics, dye, blood
- Signs and symptoms
 - Similar to hypovolemic shock
 - Allergic reactions, rash, urticaria, laryngeal edema, severe bronchospasm, wheezing
 - Conscious: SOB, metallic taste
 - Administer Epinephrine (Adrenaline) and O2

First action is to maintain airway patency, Highest priority

- Monitor lung sounds and SpO2

Septic Shock

- Systemic infection and inflammation
- Causes
 - Gram negative bacteria
 - Multidrug resistant bacteria and fungi
- Predisposing conditions
 - Trauma
 - Diabetes
 - Corticosteroid therapy
 - HIV
 - Chemotherapy
 - Burns
 - Malnutrition
 - Invasive catheters

Septic Shock

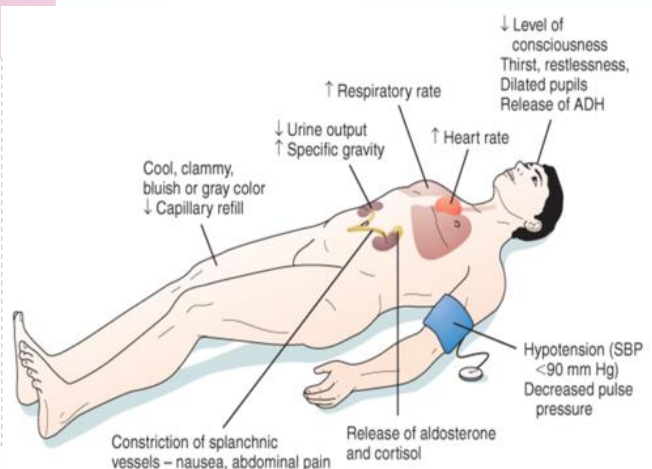
- Signs and Symptoms
 - Early Phase
 - Warm/flushed skin
 - Fever, elevated WBC's
 - Decreased B/P, tachycardia
 - tachypnea
 - Second Phase
 - Decreased B/P, tachycardia, nondistended jugular and peripheral veins, cold clammy skin
 - Tachypnea
 - Oliguria
 - Temperature decreases to normal or subnormal
 - Altered mental status
- Leading cause of death in critically ill clients

Neurogenic Shock

- Dysfunction or injury of the nervous system, dilation of peripheral blood vessels
- Causes
 - General anesthesia
 - Fever
 - Metabolic disturbances
 - Brain contusions/concussions
- Signs and Symptoms
 - Decreased B/P, altered mental status
 - Early s/s: bradycardia, warm dry skin
 - Late s/s: tachycardia, cool clammy skin

Classic Signs of Shock

- Tachycardia
- Tachypnea
- Oliguria
- Pallor, and cool clammy skin



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Therapeutic Measures for Shock



Maintain airway/respiratory support.



Provide cardiovascular support.



Maintain circulatory volume.



Control bleeding.



Treat cause/identify source of infection.

Nursing Care

Maintain airway, oxygenation.

Monitor vital signs.

Monitor intake and output.

Provide fluids as ordered.

Provide warmth.

Relieve pain.

Monitor for pressure injury (vasopressor use).



Review Question

The nurse is reinforcing teaching to the family of a patient experiencing hypovolemic shock. Which of these would the nurse correctly state causes hypovolemic shock?

1. "Circulating blood volume is decreased."
2. "The heart fails to pump blood."
3. "There is a blockage of blood flow outside the heart."
4. "Excessive dilation of blood vessels occurs."

Review Question

Which action would be appropriate for the nurse to take for a patient with cardiogenic shock?

1. Administer epinephrine as ordered.
2. Give ordered antimicrobials within 1 hour.
3. Question I V fluid orders.
4. Provide ordered nutrition.

Review Question

The nurse reinforces teaching to a patient with allergies that includes which of these?

1. Sleep with head of bed elevated.
2. Carry epinephrine autoinjector.
3. Do ankle exercises hourly.
4. Change positions slowly.

Review Question

Which of these would the nurse implement as the priority action for the patient with newly diagnosed septic shock?

1. Obtain blood cultures before antibiotics.
2. Give broad-spectrum antibiotics within 1 hour of septic shock diagnosis.
3. Monitor ordered I V fluids.
4. Provide ordered enteral nutrition.

Review Question

Which of these interventions would the nurse implement for the patient experiencing shock? *Select all that apply.*

- ☒ 1. Maintain airway, oxygenation.
- ☒ 2. Monitor vital signs.
- ☒ 3. Monitor intake and output.
- ☐ 4. Ambulate patient bid.
- ☒ 5. Relieve pain.
- ☐ 6. Check capillary refill in older adult.