# Shock treatment

Shock treatment revolves around controlling loss of fluid and blood, replacing what's been lost, and stabilizing damage that both caused and resulted from the hypovolemic shock. This will also include treating the injury or illness that caused the shock, if possible.

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Antibiotics may be administered to prevent septic shock and bacterial infections.

Close cardiac monitoring will determine the effectiveness of the treatment you receive.

## Cardiovascular agents for shock

see Volume expansion

These include:

Blood plasma transfusion

Platelet transfusion

Red blood cell transfusion

Intravenous crystalloids

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Plasma expanders. Includes:

1. crystalloids: normal saline has less tendency to promote cerebral edema than others; under control of elevated ICP

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2. colloids: e.g. hetastarch (Hespan®). ✖ CAUTION: repeated administration over a period of days may prolong PT/PTT and clotting times and may increase the risk of rebleeding in aneurysmal SAH

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3. blood products: expensive. Risk of transmissible diseases or transfusion reaction

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Medications that increase the heart's pumping strength to improve circulation and get blood where it's needed:

Dopamine

Dobutamine

Epinephrine

Norepinephrine

Amrinone

Phenylephrine

Norepinephrine

Epinephrine

Isoproterenol

Levophed