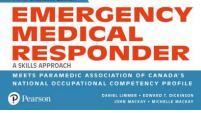
Emergency Medical Responder: A Skills Approach

Fifth Canadian Edition



Chapter 19
Bleeding and Shock



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Objectives (1 of 3)

- Explain the rationale for BSI precautions when dealing with bleeding and soft-tissue injuries.
- State the emergency medical care for external arterial, venous, and capillary bleeding, including direct pressure and pressure points.
- Explain when a splint or tourniquet should be used to stop bleeding.
- Describe emergency medical care of a patient with a nosebleed.

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Objectives (2 of 3)

- List the nine signs and symptoms of internal bleeding, and describe the steps involved in its emergency medical care.
- List the three causes of shock and the signs and symptoms of each stage of shock: compensated, decompensated, and irreversible.
- Outline the emergency medical care of a patient in shock.



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Objectives (3 of 3)

- Outline the emergency medical care of a patient in shock.
- Identify the signs and symptoms (skin, respiratory, circulatory, and general) of a patient experiencing anaphylactic shock, and describe his or her emergency medical care.
- Demonstrate a caring attitude toward the patient and family when dealing with bleeding or shock, while giving priority to the interests of the patient.



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Protecting Against Infection—BSI Precautions (1 of 2)

- Keep a barrier between you and the patient's blood and other body fluids
- Wear approved goggles, mask, and gown if there is spurting or splashing blood or the potential for it
- Never touch your mouth or nose, while you are giving emergency care



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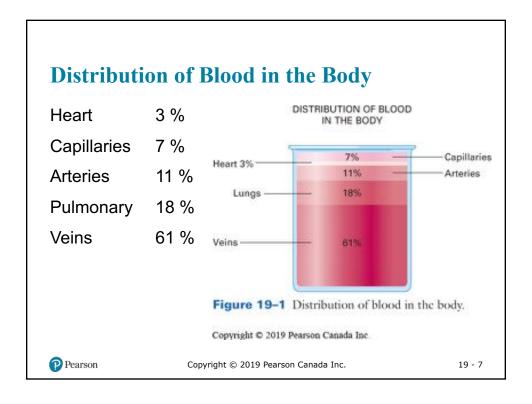
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Protecting Against Infection—BSI Precautions (2 of 2)

- Keep patient's wounds covered with dressings
- Wash hands properly
- Decontaminate or properly dispose of items that have contacted patient's blood or body fluids

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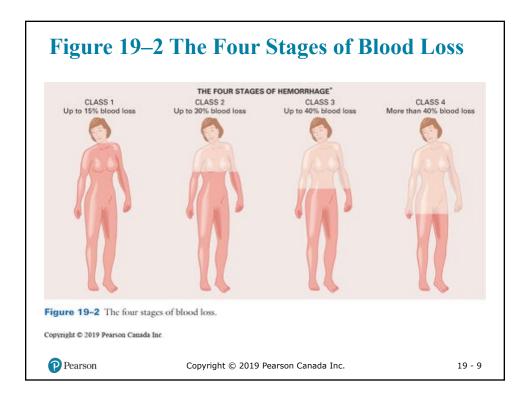


Pop Quiz

How many litres of blood does the human body contain?

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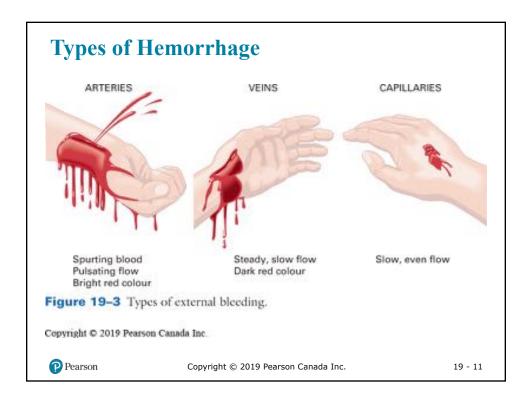
Hemorrhage

Severe bleeding depends on

- Size of blood vessel and how fast it is bleeding
- Whether blood is flowing from an artery or vein
- Whether bleeding is external or internal
- Whether bleeding is a threat to respirations
- Patient's weight, age, and general physical condition

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$Method\ of\ Bleeding\ Control\ (2\ of\ 2)$



Figure 19-5c Assess bleeding and apply additional pressure if needed.

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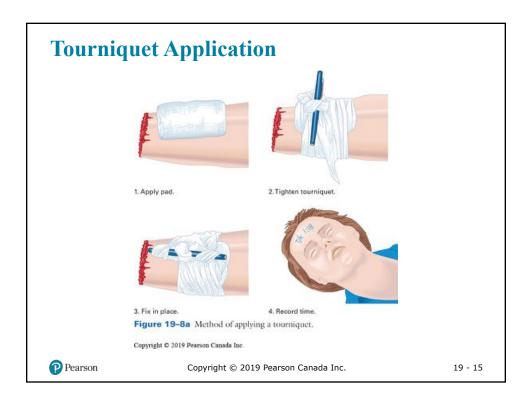
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Other Bleeding Control Methods

- Splints
- Tourniquets

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Causes of Internal Bleeding

- Blunt trauma
- Abnormal clotting
- Blood vessel rupture
- Fracture, etc

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Signs and Symptoms of Internal Bleeding (1 of 2)

- · Discoloured, tender, swollen, or hard tissue
- Increased respiratory and pulse rates
- Pale, cool, clammy skin
- Nausea and vomiting bright red blood or blood the colour of dark ground coffee



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Signs and Symptoms of Internal Bleeding (2 of 2)

- Thirst
- Changes in mental status
- · Dark, tarry stools
- Tender, rigid, or distended abdomen
- Weakness, faintness, or dizziness



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Emergency Care

Take BSI precautions and then

- · Maintain open airway and adequate breathing
- Control any external bleeding
- Keep patient warm
- Treat for shock



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SHOCK



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Shock

Shock, or hypoperfusion, is a condition that results from the inadequate supply of **oxygenated** blood.



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Causes of Shock

- Failure of the heart
- · Abnormal dilation of the blood vessels
- Blood volume loss



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Stages of Shock (1 of 3)

Compensated



Figure 19–12a Compensated shock: slight increase in pulse.

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Figure 19–12b Compensated shock: restlessness or anxiety.

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Stages of Shock (2 of 3)

Decompensated



weak pulse.

Figure 19–12d Decompensated shock: skin colour changes and sweating.

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Stages of Shock (3 of 3)

Irreversible



Figure 19–12e Decompensated shock: decreas-



Figure 19–12f Decompensated shock: unconsciousness.

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Emergency Care

After taking BSI precautions

- Maintain open airway
- Prevent further blood loss
- Place at rest in the shock position
- Keep patient warm
- Provide care for specific injuries while waiting for paramedics

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