



# Hypotension Non-Traumatic

## Assessment

### Pediatric Pearls:

- Use pediatric dosing of medications or electrical therapy for a pediatric patient < 37 kg and as defined by the PEDIA Tape.
- Pediatric hypotension is defined as SBP < 70 + (age in years x 2) mmHg

### Signs & Symptoms:

- Restlessness, confusion, weakness
- Syncope
- Tachycardia
- Diaphoresis
- Pale, cool, clammy skin
- Delayed capillary refill
- Coffee-ground emesis
- Tarry stools

### Differential:

- Infection/Sepsis
- Dehydration
- Vomiting
- Diarrhea
- Congenital heart disease
- Medication or Toxin
- Anaphylaxis
- Cardiac Failure (myocarditis)

## Clinical Management Options

P	P	P	P	P	P	<ul style="list-style-type: none"> <li>• <a href="#">Oxygen</a></li> <li>• Supine position, keep patient warm</li> </ul>	
L	L	L	L	L	L		<ul style="list-style-type: none"> <li>• <a href="#">Vascular access</a></li> <li>• These fluid boluses are for volume depletion – NOT for active bleeding.</li> <li>• Pediatric: <a href="#">Isotonic Crystalloid</a> bolus 20 ml/kg may repeat 10ml/kg bolus x 2 PRN</li> <li>• Adult non-cardiac: <a href="#">Isotonic Crystalloid</a> 500-1000 ml bolus, may repeat up to 2 liters</li> <li>• Adult Cardiac: <a href="#">Isotonic Crystalloid</a> 250-500 ml bolus, may repeat up to 1 liter</li> </ul>
1	2	3	4	5	6		

### Consult Online Medical Control As Needed

### Pearls:

- Refer to drug formulary charts for all medication dosing for both adults and pediatric patients.
- Adult hypotension can be defined as a systolic blood pressure of < 90 mmHg or MAP < 60 and signs or symptoms of hypoperfusion – altered mental status, increased respirations, tachycardia, poor pulses, skin changes.
- Consider all possible causes of shock and treat per appropriate COG.
- Patients should always have adequate intravascular fluid load prior to the use of vasopressors.
- MAP calculation = [(2 x diastolic) + systolic] divided by 3
- Isotonic Crystalloid should be avoided in patients in whom hemorrhage is suspected.