Hypotension

For systolic BP < 90mmHg in adults with transient low BP or rapidly responds to fluid resuscitation and without signs of shock

**History**
- Volume loss (vomiting, diarrhea or blood)
- Infection (e.g., UTI, pneumonia, etc.)
- Cardiac ischemia (MI or CHF)
- Pregnancy
- Poor oral intake
- Allergic reaction
- Medications (diuretics, beta blockers)
- End stage renal disease/dialysis

**Signs and Symptoms**
- Pale, cool skin
- Tachycardia
- Weak, rapid pulse
- Delayed capillary refill
- Wounds/bruising/active bleeding/epistaxis
- Shortness of breath

**Differential**
- Shock (neurogenic vs. hemorrhagic vs. obstructive (tension pneumothorax))
- Ectopic pregnancy
- Sepsis
- Cardiac (cardiogenic shock, arrhythmia, ACS)
- Medication
- Hypovolemia
- Anaphylaxis
- Vasovagal event

**Pearls**
- Hypotension is defined as a patient with a systolic blood pressure < 90.
- This primary impression is reserved only for patients who respond to a single 500ml fluid bolus or less or who have a transient low blood pressure reading.

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**Blood glucose analysis**
- Cardiac monitor
- IV/IO procedure
  - **Consider, 12-Lead ECG**
  - If systolic BP < 90
  - Normal Saline bolus 500ml IV/IO
  - Maximum 2L

**Blood pressure normal?**
- Yes
  - Notify receiving facility. Consider Base Hospital for medical direction
- No
  - Consider hypovolemic (dehydration or GI bleed), cardiogenic (STEMI or CHF), distributive (sepsis or anaphylaxis), and obstructive (PE, cardiac tamponade or tension pneumothorax) shock

**Treatment Protocol**

- Effective November 2018
- Effective April 2023