

## o-1 VAGINAL HEMORRHAGE WITH SHOCK

### PRIORITIES:

- ABCs
- Identify signs of shock
- Determine stage (trimester) of pregnancy (if pregnant)
- Determine the degree of physiologic distress, estimate amount of blood loss
- Assure an advanced life support response

### Shock/Impending Shock or Third Trimester Bleeding

*Profuse vaginal bleeding, signs of shock or any bleeding in the third trimester..*

1. Ensure a patent airway (suction as necessary)
2. Be prepared to support ventilation with appropriate airway adjuncts
3. OXYGEN THERAPY – Begin oxygen at 6 liters/minute by nasal cannula or 10 liters/minute by mask. If there is a history of Chronic Obstructive Pulmonary Disease (COPD), observe for respiratory depression and support respirations as needed. **DO NOT** withhold oxygen from a patient in cardiorespiratory distress because of a history of COPD.
4. Place patient in left lateral decubitus position if patient is pregnant;
5. Monitor vital signs frequently;
6. Assist advanced life support personnel with patient packaging and movement to ambulance;
7. See SHOCK – NOT TRAUMATIC (Protocol c-1).