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## Shock Emergencies and Call Review

Date: March 1, 2010

**KEYNOTE SPEAKER: Dr. Reynold L. Trowers, M.D. FACEP**

**CME hours: 2**

### **Objectives:**

- Define shock and the shock syndrome
- Discuss the differential diagnosis for shock
- Describe the typical clinical/physical findings of patient presenting in shock
- Discuss the typical treatment modalities indicated to treat various types of shock
- Review the four levels of severity of hypovolemic shock
- Discuss optimal treatment approaches for each level of hypovolemic shock

### **Syllabus:**

7:00 PM EST. **Shock Emergencies with Q&A**

8:00 PM EST. **Call Review**

9:00 PM EST. **Survey and certificate**

### **References for Shock Emergencies:**

1. Parks, JK, Elliott, AC, Gentilello, LM, Shafi, S. **Systemic hypotension is a late marker of shock after trauma: a validation study of Advanced Trauma Life Support® principles in a large national sample.** Am J Surg 2006; 192:727.

2. American College of Surgeons. Advanced **Trauma Life Support® (Student Manual)**. Eighth edition, American College of Surgeons 2008.
3. Alam, HB, Rhee, P. **New developments in fluid resuscitation**. Surg Clin North Am 2007; 87:55
4. Roberts, I, Evans, P, Bunn, F, et al. **Is the normalisation of blood pressure in bleeding trauma patients harmful?**. Lancet 2001; 357:385.
5. Owens, TM, Watson, WC, Prough, DS, et al. **Limiting initial resuscitation of uncontrolled hemorrhage reduces internal bleeding and subsequent volume requirements**. J Trauma 1995; 39:200.
6. Cowell C, Marx JA, Grayzel J: **Management of Shock in Adult Trauma**, Up to Date 17.3, 2009