FLUID AND ELECTROLYTE DISTURBANCE

FLUID RESUSCITATION IN SHOCK

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Abstract: Shock is a common emergency in children and hypovolemic shock is one of the commonest type of shock to present as an emergency in our country. The first medication to be administered to a child with shock after oxygen is fluids. It is essential to understand the physiology, use and limitations of fluid therapy to successfully manage this emergency. It must be understood that fluid therapy is only one component of a complex hemodynamic resuscitation strategy with the aim of restoring intravascular volume. When shock is fluid refractory, adjunctive therapies to augment cardiac contraction and venous return will be needed in the form of inotropes. Besides intravascular volume end organ function also needs to be monitored.

Keywords: Shock, Fluid resuscitation, Management.

Points to Remember

- Shock is one of the commonest emergencies seen in pediatric practice.
- Hypovolemic shock is the commonest type of shock.
- All children with shock should be administered oxygen as the first therapy.
- Crystalloids are the fluid of choice in the acute resuscitation of a child with shock and normal saline is the fluid of choice.
- The clinical state of the patient will determine the volume and rate of fluid administration.
- Fluids should be administered with the same caution and care as with any intravenous drug.
- Assiduous clinical monitoring during and after therapy is mandatory.
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