



GLOBAL EMERGENCY MEDICAL REGISTRY

Shock Case (Septic) Documentation Form

Candidate (Print): _____ Date: _____

Examiner (Instructor Name Printed): _____

Examiner Signature: _____

Note: Examiner will use or modify a simulator shock case to reflect Sinus Tachycardia at 120 with a MAP less than 55 mmHg, SpO₂: 88%, EtCO₂: 30 mmHg, RR: 30, Temp: 39.5 C. The 80 kg patient is an unresponsive suspected sepsis patient who was interacting but progressively became unresponsive. The patient has had a three-day course of “flu like” disease with progressive extremis. The examiner may conclude the case following proper care by having the patient return to stable with all vital signs returning to normal range.

PASS _____ Fail _____

Task	Correct	Incorrect
Identifies Hypotensive state as possible septic shock		
Identifies unstable patient condition		
Assures proper oxygenation of the patient		
Considers or Obtains Endotracheal Tube and ventilates patient 10-20 bpm with 6-8 ml/kg PBW volume to reduce portion of cardiac output utilized for ventilation.		
Identifies need for additional treatment and establishes large bore IV above the level of the diaphragm		
Utilizes 20 ml/kg bolus of balanced high SID IV fluid to attempt to improve MAP, repeated as necessary		
Begins antibiotic therapy with 1-2 gm ceftriaxone IV		
Reassess patient after each intervention and a minimum of every two minutes		

Note: any “incorrect” represents a skill failure

Critical Failure Criteria

Failure to establish oxygenation for the patient
Failure to take appropriate medication and/or fluid bolus intervention
Failure to identify unstable patient
Failure to manage the patient as a competent provider
Exhibits unacceptable affect with patient or other personnel
Uses or orders a dangerous or inappropriate intervention

NOTE: You must factually document any “incorrect” or critical failure criteria on the bottom or back of this form.