

Pt: \_\_\_\_\_ Date: \_\_\_\_\_

SCAI SHOCK STAGE	PHYSICAL EXAM	BIOCHEMICAL MARKERS	HEMODYNAMICS
<b>A</b>	<input type="checkbox"/> Normal JVP <input type="checkbox"/> Lung Sounds Clear <input type="checkbox"/> Strong Distal Pulses <input type="checkbox"/> Normal Mentation	<input type="checkbox"/> Normal Renal Function <input type="checkbox"/> Normal Lactic Acid	<input type="checkbox"/> SBP>100 or normal for pt. <input type="checkbox"/> CI >2.5 <input type="checkbox"/> CVP <10 <input type="checkbox"/> PA Sat >65%
<b>B</b>	<input type="checkbox"/> Elevated JVP <input type="checkbox"/> Rales <input type="checkbox"/> Strong Distal Pulses <input type="checkbox"/> Normal Mentation	<input type="checkbox"/> Normal Lactate <input type="checkbox"/> Min Renal Fx Impare <input type="checkbox"/> Elevated BNP	<input type="checkbox"/> SBP <90 MAP <60 >30mm Drop <input type="checkbox"/> Pulse >100 <input type="checkbox"/> CI >2.2 <input type="checkbox"/> PA Sat >65%
<b>C</b>	<input type="checkbox"/> Ashen, Mottled <input type="checkbox"/> Volume Overload <input type="checkbox"/> Rales <input type="checkbox"/> BiPap or Mech Vent <input type="checkbox"/> AMS	<input type="checkbox"/> Lactate >2 <input type="checkbox"/> Creat Double <input type="checkbox"/> Increased LFTs <input type="checkbox"/> Elevated BNP <input type="checkbox"/> UOP <30	<input type="checkbox"/> Drug/device to maintain BP <input type="checkbox"/> CI <2.2 <input type="checkbox"/> PCWP >15 <input type="checkbox"/> PAPI<1.85
<b>D</b>	<input type="checkbox"/> Any of Stage C	<input type="checkbox"/> Any of Stage C AND <input type="checkbox"/> Deteriorating	<input type="checkbox"/> Any of stage C AND <input type="checkbox"/> Multiple Pressors <input type="checkbox"/> Addition of MCS
<b>E</b>	<input type="checkbox"/> Near pulselessness <input type="checkbox"/> Cardiac Collapse <input type="checkbox"/> Mech Vent <input type="checkbox"/> Defib Used	<input type="checkbox"/> Lactate >5 <input type="checkbox"/> pH <7.2	<input type="checkbox"/> No SBP without resus <input type="checkbox"/> PEA or Refractory VT/VF <input type="checkbox"/> Hypotensive w/max support
<b>A Modifier</b>	<input type="checkbox"/> Any Cardiac Arrest		

Stage: \_\_\_\_\_