

## ABSTRACT

### **RESUSCITATION PROFILE of SHOCK PATIENT at RESUSCITATION ROOM in RSUD DR. SOETOMO SURABAYA AUGUST 2017-SEPTEMBER 2017**

**Background:** Shock is a very large and widespread condition in the ability of circulation to deliver oxygen and other nutrients effectively (Fitria, 2010). The assessment and implementation of shock should be done quickly (De Backer et al., 2010). The primary survey with an Airway, Breathing, Circulation assessment is a method for compiling and correcting rapidly the condition of vital organs that are threatened (Wirjoatmodjo et al., 2013).

**Method:** This study used descriptive prospective method that experienced resuscitation profile of technique to free the airway, oxygen administration technique, the most fluid type, the most vasoactive drug type. This study will also included sociodemography (sex and age) of patients.

**Results:** From 29 samples, 4 samples performed head tilt chin lift, jaw thrust, suction. In the oxygen delivery technique most common using O2 Jackson rees (58.6%). Position of shock patient most common positioned in line (75.86%). The type of fluid used is crystalloid, in patients with hemorrhagic shock (75%), dehydration (100%), sepsis (100%), anafilaktik (100%). Neurogenic shock patients use the same amount of crystalloids and colloids. The type of vasoactive agent used was NE, in patients with bleeding shock (80%), cardiogenic (50%), sepsis (57.1%), neurogenic (100%). In dehydrated a shock patients the same type of NE and dopamine use is used, whereas anaphylactic shock uses adrenaline.

**Conclusion:** It can be concluded that until this resuscitation action is done in patients with hemorrhagic shock due to bleeding and dehydration, cardiogenic, and distributive in the resuscitation room of RSUD Dr. Soetomo Surabaya most in accordance with existing resuscitation guidelines.

**Keywords:** *shock, resuscitation, resuscitation room*