

	Hypovolemia	Hypervolemia
Clinical examinations	Sensation of thirst	Shortness of breath
	dry mucous membranes, tongue, oral cavity	swelling of dependent areas (including the lumbar region, sacrum and hands when supine)
	skin turgor – persistence of skin folds – dehydration	stagnation of jugular veins
	pallor (conjunctiva) – anemia	auscultative finding of wet changes in the lungs
	prolongation of capillary return	
	Marbling on the lower extremities	
	Oliguria – concentrated urine	
Basic monitoring	tachycardia	tachycardia, rhythm disturbances (atrial fibrillation)
	hypotension shock index ≥ 0.9	High CVP
	tachypnea (satisfactory SpO ₂)	tachypnea, hypoxemia
Laboratory markers	hemoconcentration, hypernatremia, higher protein/albumin	hypoalbuminemia
	high urea value	high BNP, NT-proBNP
Chest X-ray		interstitial (alveolar edema), Kerley lines
		cardiomegaly, thickening of pulmonary arteries
ECHO	kissing ventricles	volume overload of both chambers, restrictive filling (expert ECHO)
		Hypercontractile left ventricle
US IVC	≤ 1.5 cm; variability with respiratory cycle	≥ 2.5 cm; absence of respiratory variability
US Lung	absence of B lines (max. 2) symmetrically at all points	presence of more than 3 B lines in more than 2 quadrants of the lungs symmetrically
Fluid tests Reactivity*	positive	negative
	dynamic variability of flow parameters with ventilation – over 15–20%	
	Passive leg lift test – increase in cardiac output (or equivalent parameters) $\geq 10\%$	
	Fluid mini-challenge (100 ml IV) – increase $\geq 5\text{--}6\%$	
	fluid challenge (500 ml IV) – increase $\geq 10\%$	