

Answers

CHAPTER 45 MUSCULOSKELETAL FUNCTION AND DATA COLLECTION

AUDIO CASE STUDY

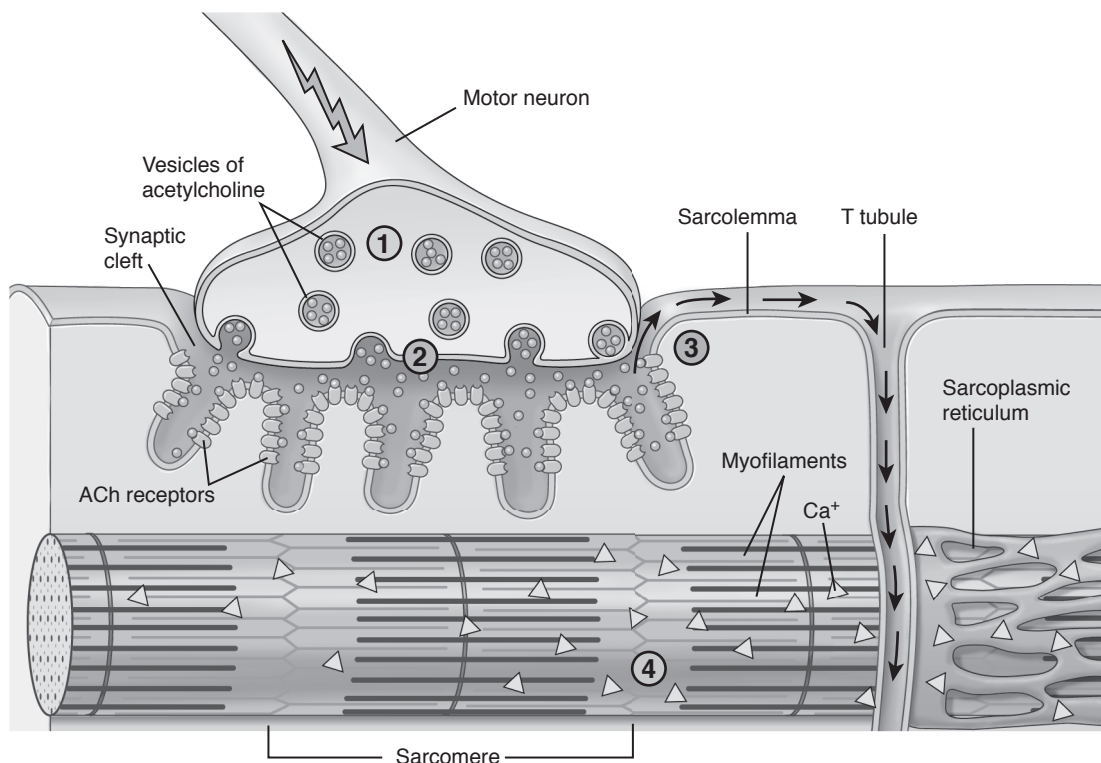
Tony and Fracture Care

1. It is a quick set of assessments using the ABCDs for organization. A primary survey conducts an initial

assessment of the patient's airway, breathing, circulation, and disability. (*E* can also be included for *exposure*). A secondary survey identifies medical problems or injuries that are not immediately life-threatening but require treatment.

2. Pneumothorax from a rib fracture or a cardiac contusion from a blow to the chest.
3. There are six areas for a neurovascular check: (1) movement, (2) sensation, (3) color of extremity skin, (4) temperature, (5) pulses, and (6) capillary refill.

COMPONENTS OF NEUROMUSCULAR JUNCTION AND SARCOMERES



NEUROMUSCULAR JUNCTION

1. (3, 5)
2. (1, 6)
3. (2, 4)

SYNOVIAL JOINTS

1. (5)
2. (3)
3. (1)
4. (2)
5. (4)

VOCABULARY

Sample sentences will vary for the Vocabulary problems.

1. (3)
2. (1)
3. (4)
4. (5)
5. (2)
6. (9)
7. (8)
8. (7)
9. (10)
10. (6)

DIAGNOSTIC TESTS

1. (3)
2. (1)
3. (2)
4. (5)
5. (4)
6. (7)
7. (6)
8. (11)
9. (10)
10. (9)
11. (8)

CLINICAL JUDGMENT

1. Allergies, medical conditions, medications, surgeries, injury, cause and mechanism of injury (e.g., twisting, crushing, stretching; how the patient is injured will indicate other injuries to look for).
2. Inspection: area of injury, asymmetry, mobility and range of motion, swelling, deformity and limb length, ecchymosis. Palpation: skin temperature, crepitation, tenderness, sensation.
3. **C:** This is Janet, LVN in the emergency department. I am concerned about Mr. Allen's analgesic order. He has had a reaction to the medication in the past.
U: I am uncomfortable with him receiving this analgesic.
S: I believe it could be unsafe for him to receive it.
4. The frequency of pain-level evaluation is based on the patient's pain severity, duration of action of analgesics

administered, and agency policy. Pain level is reevaluated based on the administered analgesic's onset of action: For intravenous analgesics, reevaluation is in 15–30 minutes; oral analgesics are reevaluated in 45–60 minutes.

5. Explanation of pain management and procedures and tests to be performed, the importance of reporting symptoms.
6. The nurse notifies the HCP immediately.
7. The HCP and physical therapy.

REVIEW QUESTIONS

*The correct answers are in **boldface**.*

1. **(1, 6)** are correct. The patient often is nil per os (NPO) after midnight the night before surgery, although plain toast may be allowed 6 hours before surgery and clear liquids up to 2 hours before surgery. Patients having general anesthesia are taught coughing and deep-breathing exercises to promote lung expansion and prevent lung complications before surgery so they understand them when prompted to do them after surgery. (2) No food is usually allowed 6 hours prior to surgical time. (3, 4) are the responsibilities of the HCP. (5) Straight-leg raises are not taught when surgical repair is performed because activity restrictions may be ordered.
2. **(1)** is correct. Notify the surgeon because circulation in the extremity may be compromised and require immediate treatment. (2, 4) Temperature and a dressing change have no relevance at this time. (3) This is an emergency situation in order to restore circulation and preserve function in the leg so it cannot wait for 30 minutes.
3. **(4, 5)** are correct. Pallor of an extremity is not a normal finding and may indicate circulatory problems, so the HCP is notified. Capillary refill is typically less than 2 to 3 seconds. A longer time indicates that the circulation is compromised or possibly that the patient is dehydrated so the HCP is notified. (1, 2, 3) are normal findings.
4. **(1, 3, 5, 6)** are correct. History of bone health, activity, exercise, and diet are important to maintain bone health. Collecting data about them is the first step in planning interventions for a bone disease. (2) Exercise is important to maintain bone density. (4) A spouse's health history does not affect the patient's medical conditions.
5. **(2)** is correct. A prior reaction to contrast media provides the best information to determine if the patient may have an issue with the contrast media. (1) This is a question for an MRI. (3, 4) Allergies to food do not create a higher risk of allergy to contrast media. Guidelines indicate there is no reason to even ask about a seafood allergy since iodine is not an allergen as it occurs naturally in the body. This is a common misunderstanding related to contrast media.
6. **(1, 2, 3, 4, 5)** are correct. They are not elevated in gout, so further teaching would be needed. (6) Uric acid is elevated in gout.

7. (1) is correct. Crepitation is the term used for a grating sound heard in a joint. (2) An effusion is a collection of fluid in a space. (3) A friction rub is associated with either pleural or pericardial inflammation or fluid accumulation. (4) Subcutaneous emphysema is leaking air that is felt under the skin.
8. (4, 5, 6) are correct. Joint movement should immediately be stopped to prevent further joint injury, the joint should be protected from further injury, and immobilization of the joint should be maintained to prevent joint damage. (1, 2, 3) would move the joint, causing possible injury.
9. (1, 3, 5) are correct. Feeding, bathing, and dressing oneself are activities of daily living, which are parts of a functional assessment. (2, 4, 6) are not items evaluated in a functional assessment.
10. (2) is correct. A hematoma may develop after a biopsy. (1) Crepitation is heard in a joint which the iliac crest is not. (3) An infection would not develop immediately. (4) The iliac crest is not a joint so it cannot dislocate.