

Beebe Healthcare
Margaret H. Rollins School of Nursing
N101 – Foundations of Nursing

	OA (Osteoarthritis)	RA (Rheumatoid Arthritis)
Patho	Breakdown of the cartilage at the epiphysis of the bones and change in joint structure. It is a non-inflammatory disorder that essentially results in “wear and tear.”	The body activating immune cells such as T-cells and B-cells that attack joint fluid (synovial fluid) inflammation to the lining of the joint cavity and breakdown of cartilage and tissue surrounding.
Risk Factors	Age (risk increases with age), female, obesity, joint injury, repeated stress on joint, genetics, bone deformities, and certain metabolic diseases.	Female, middle-aged, genetics, smoking, and obesity or excess weight.
S&S	Pain, stiffness, tenderness, loss of flexibility/mobility, grating sensation, bone spurs, and swelling.	Fatigue, fever, loss of appetite, tender/warm/edematous joints, joint stiffness that is worse in the mornings.
Dx	X-ray, MRI, DEXA Scan (gold standard for Dx of OA), blood test (to r/o RA), and joint fluid analysis.	Sed. Rate blood test, CRP, MRI.
Tx	Cannot be reversed, but medications can reduce pain and inflammation: Acetaminophen, NSAIDs. PT/OT, TENS unit. Cortisone injections, lubrication injections, joint replacements, realigning bones.	NSAIDs and steroids, PT/OT, joint replacement.
NI	Medication management of pain, education on Dx, performing ROM exercises.	Medication management of pain/Sx, education on Dx, performing ROM exercises.