

N202 Unit VI Part 2

Class Preparation Assignment – Trauma Case Study

Patient Profile:

J.B. is a 78-year-old male who was found by his neighbor laying on the ground in his garden. It is unknown how long he has been lying there. It appears he has fallen off the roof while fixing the shingles on his house. His left femur is protruding through the skin. The paramedics report that he was found in a large pool of blood. Additional visible wounds include scattered bruising to the head and abdomen.

Subjective Data:

- N/A – unresponsive, no family at bedside

Objective Data:

- Unresponsive
- BP 60/42, HR 168, RR 14, SpO2 88% on RA, Temperature 94.7 F
- Left femur protruding through skin
- Scattered bruising to abdomen and head
- Scattered abrasions

Questions:

1. What potentially life-threatening injuries does J.B. have? Why did you come to this conclusion? Potentially a compound fracture due to the left femur protruding through the skin. Then intracranial and abdominal hemorrhage as evidenced by scattered bruising, low BP, high HR and Spo2 and temp. = blood loss externally and internally
2. What is the priority of care for this patient? Priority of care is to stop the bleeding and start transfusing the blood, maintaining C spine precautions until r/o, then realign the fracture and close it.
3. What diagnostic studies (images & labs) do you anticipate being ordered for this client? A CT of head and abd., A FAST at the bedside, X-ray of the whole body to identify any additional fx, CBC, type and screen, Coag. Studies and basic chemistry.
4. Once the client is initially stabilized, the nurse begins to consider additional injuries. What other potential complications/syndromes/injuries may this client be experiencing? Rhabdomyolysis due to not being able to determine how long he was down, internal bleeding, chest trauma, increased ICP
5. For the identified injury/illness above, what clinical manifestations should the nurse assess for? Assess for dark urine, CK lvls, fatigue, and overall muscle weakness, Assess H&H, and Cullens sign, monitor for hypertension with widening pulse pressures, bradycardia, and abnormal respirations, assess for breath sounds and the quality of them
6. What treatment measures and nursing interventions does the nurse anticipate for this client?

I would anticipate giving PRBC, preparing for surgery, chest decompression, or chest tube if any trauma to the chest is present, maintaining a C-collar, to decrease ICP immediately is Burr holes and then if kidneys are okay then diuretics can be used, and VS monitoring.