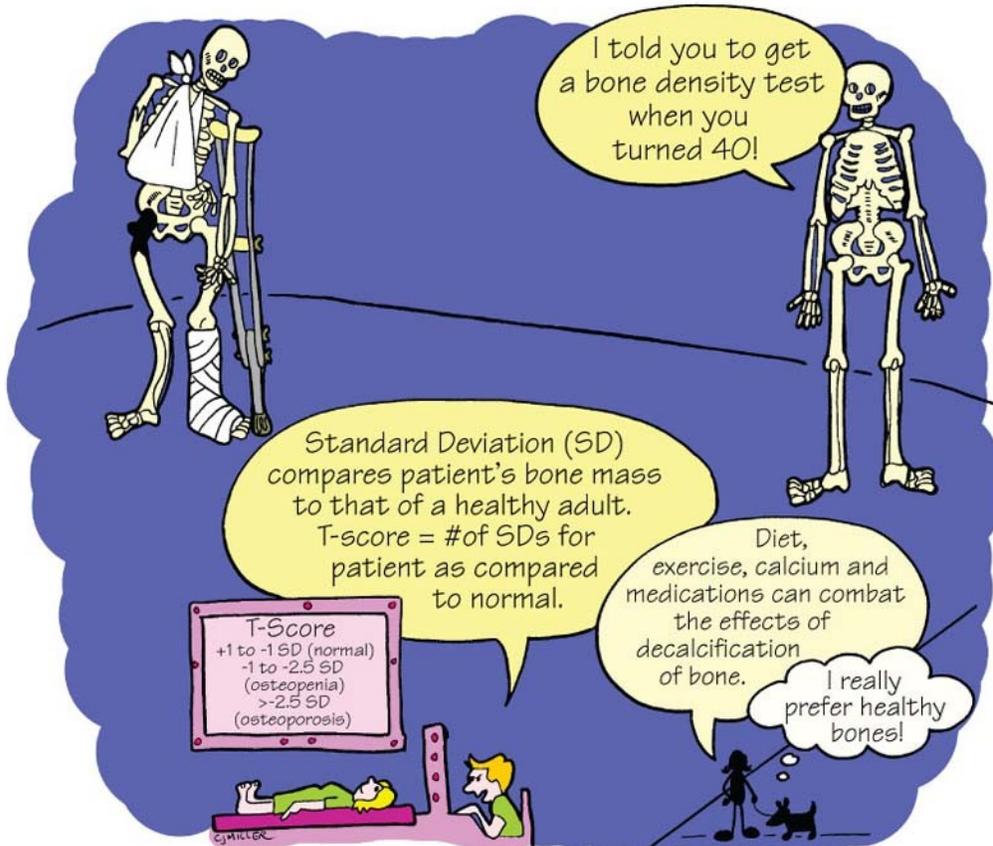


BONE DENSITOMETRY (BONE MINERAL DENSITY)



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CANES AND WALKERS



- C**. Cane
- O**. Opposite
- A**. Affected
- L**. Leg

Wandering Wilma's Always Late
 Walker With Affected Leg



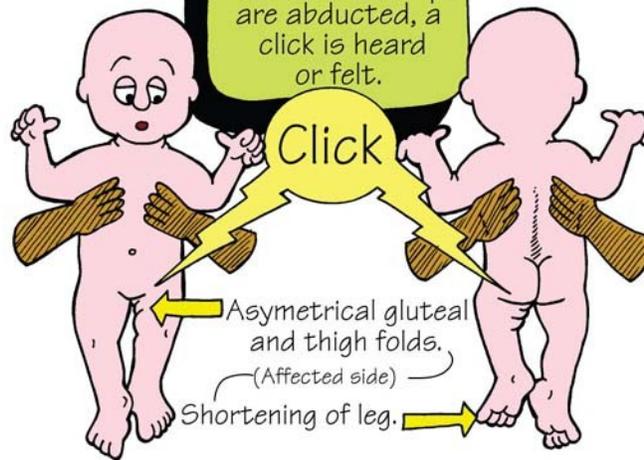
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DEVELOPMENTAL DYSPLASIA OF THE HIP

Malformation of the Hip Due to Imperfect Development of the Femoral Head, Acetabulum, or Both.
(Most often assessed at birth.)

Ortolani's Sign
When infant is supine and knees are flexed and hips are abducted, a click is heard or felt.

cjmiller



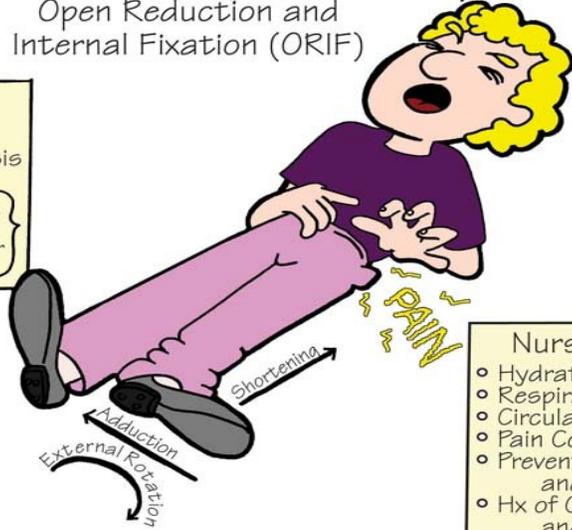
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HIP FRACTURE

Tx: Bucks Traction, Immobility (Trochanter Roll or Sand Bags) Open Reduction and Internal Fixation (ORIF)

I can't move my leg!

- o ↑ Age
- o Female
- o History of Osteoporosis
- o ↓ Estrogen
- o ↑ Falls { TIA's, Anemia, Medications, Cardiovascular Disease }



- Nursing Priorities**
- o Hydration
 - o Respiratory Support
 - o Circulation Checks
 - o Pain Control
 - o Prevention of Immobility and Complications
 - o Hx of Chronic Conditions and Medications

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CUMILLER

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The Joint Café

I can't sit up straight and I got this pillow between my legs!

Doing pretty good – can't cross my legs or stand too long – got to keep moving.

JOINT REPLACEMENTS

MAIN COURSE

- Low dose anticoagulants
- Pain meds
- Knee – CPM, neutral position
- Hip – Abduction of leg, do not bend hip > 90°
- OOB 1st post op day
- Incision care

COMPLICATIONS

- BLEEDING
- VENOUS THROMBOSIS
- INFECTION
- ANEMIA

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MULTIPLE SCLEROSIS

- * Autoimmune
- * Usually ♀
- * Familial



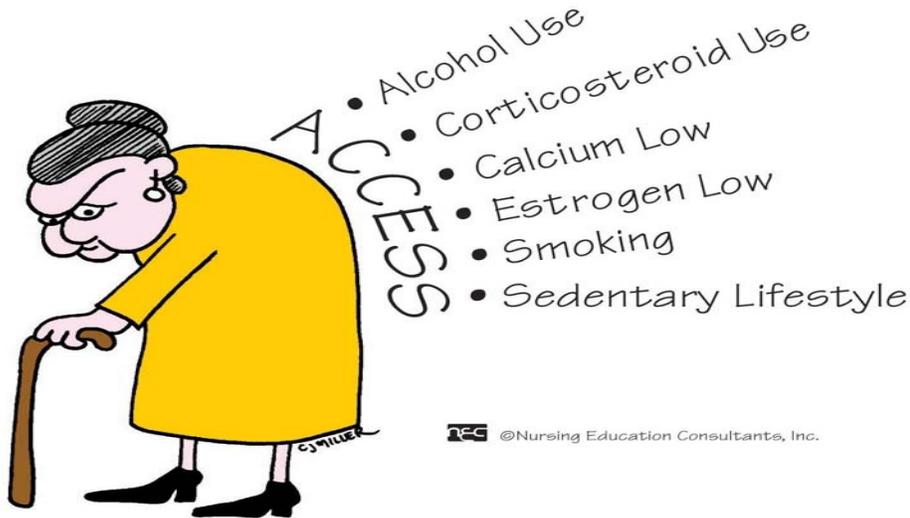
- * Nystagmus
- * BLURRED VISION
- * Dysarthria
- * Dysphagia

* Onset 40s to 50s
* Characterized by remissions and exacerbations

- * Urinary Retention
- * Spastic Bladder
- * Constipation
- * Weakness may progress to paralysis
- * Muscle Spasticity
- * Ataxia
- * Vertigo

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OSTEOPOROSIS RISK FACTORS



“Access” (leads to) Osteoporosis

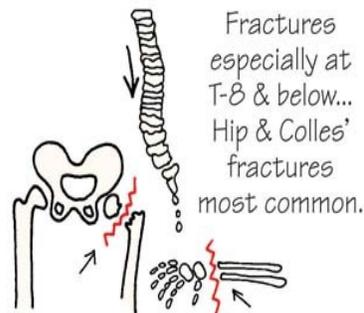
OSTEOPOROSIS

(After Menopause - ↓Estrogen)



Generalized progressive reduction of bone density, causing weakness of skeletal strength.

Slender, Female, Caucasian, Alcohol Users, Smokers, Steroid Users, Inactive Lifestyles, and Diets Low in Calcium or Vitamin D Deficiency... have the highest risk.



POST OP CARE HIP FRACTURES

Nursing Care

- Cough / Deep Breath Q 2^o
- Stockings & Compression Devices to ↓ DVT, Venous Stasis
- Turn q2h, Maintain Leg Abduction (Wedge Pillow)
- Circulation & Neuro Status ✓'s of Affected Leg
- Pain Control
- Out of the Bed First Postoperative Day
- ✓ Under Client/Dressing for Drainage



Complications

- Prosthesis Dislocation
- DVT
- Neurovascular Complications (Bleeding, Swelling, Compartment Syndrome)
- Pulmonary Complications (Atelectasis)
- Urinary Retention
- Delayed Complications (Infection, Nonunion)

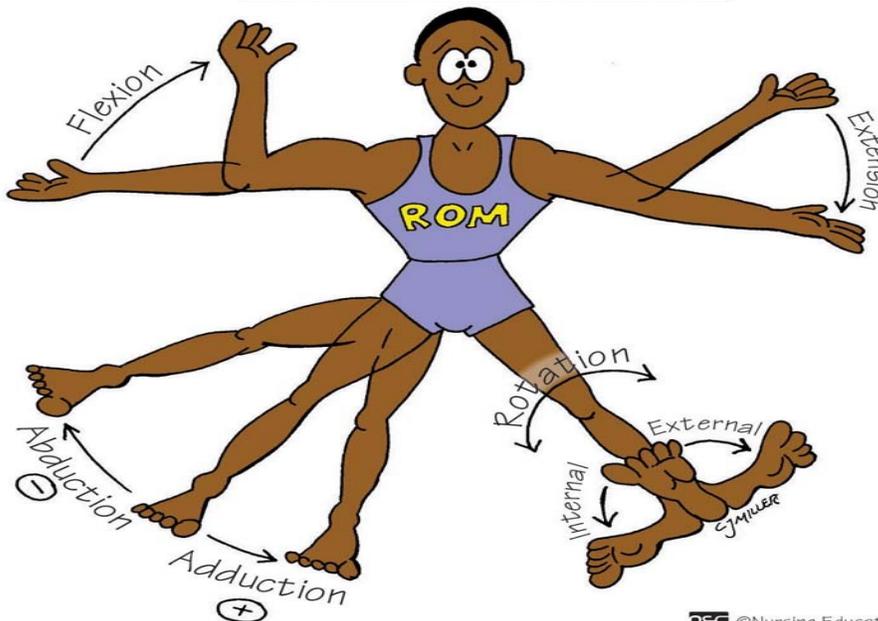


Watch For

- Severe Pain
- Inability to Move Leg & Lump in Buttock
- Limb Shortening & External Rotation

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RANGE OF MOTION



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