

Spinal cord thinking exercise

The nurse is developing a plan of care for a 17-year-old who was admitted to the hospital following a complete severing of the spinal cord at T10 resulting in paraplegia and necessitating mechanical ventilation for 24 hours: the patient is now off the ventilator and breathing on his own. He was admitted to the neurosurgical unit after open reduction and internal fixation (ORIF) to stabilize his spine.

Use an X to indicate whether the nursing actions below are **Anticipated** (appropriate or likely Necessary), **Contraindicated** (could be harmful), or **Non-Essential** (make no difference or are not necessary) for the patient's postoperative care at this time.

Nursing Action	Anticipated	Contraindicated	Non-Essential
Monitor vital signs per facility standards	✓ ↓ BP = ↓ organ perfusion		
Encourage coughing and deep breathing exercises	✓ prevent atelectasis		
Administer analgesic as prescribed	✓ help w/ pain which could lead to further issues		
Reposition the patient every 4 hours		✓ every 2hrs	
Apply sequential compression devices	✓ prevent DVT in post-op pt		
Keep NPO until the patient voids and reports no nausea		✓ nutrition w/ in 24hrs	
Obtain an order for echocardiogram			✓ pt has no cardiac warning signs now
Consult clergy or social worker for family support	✓ depression		
Collaborate with respiratory therapy to maintain oxygenation as needed	✓ post vent + spinal cord injury can cause breathing difficulty		
Complete a dietary assessment			✓ post vent + spinal cord injury
Obtain an order for an indwelling urinary catheter		✓ possible retention	
Monitor the patient's level of sensory perception every 4 hours	✓ can lose sensory perception days after		
Collaborate with physical therapy to promote independence	✓ get pt moving + help w/ ADL's		

Rationales: Please document your rationales here.

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