

Medications

fentanyl (Duragesic):

The patient is taking this medication to control pain.

Controls moderate/severe pain. Highly addictive controlled substance. Monitor bradycardia, respiratory depression prior to administration (Nurse's drug handbook, 2021).

acetaminophen/hydrocodone (Norco):

The patient is taking this medication to control pain.

Controls mild/moderate pain. Highly addictive. It can cause constipation—Monitor respiratory status before administering (Nurse's drug handbook, 2021).

Cefazolin (Ancef):

Patient taking prophylactically for infection. It is used to treat acute bacterial/skin structure infections: Monitor patient's temperature, respiration. Look for wheezing or rash present prior to administration (Nurse's drug handbook, 2021).

References:

Jones & Bartlett Learning, LLC. (2021). *2021 Nurse's drug handbook*.

Demographic Data Patient's Initials: B.W.

Admitting diagnosis: Left Arm Fracture

Psychosocial Developmental Stage:

Age of client: 7 years, 11 months Industry vs Inferiority

Sex: Male

Weight in kgs: 24.9kg Cognitive Development Stage:

Allergies: No known allergies Concrete Operational

Date of admission: 7/8/2021 @ 2300 to Carle via Carle Direct Transfer.

Admission History

The patient is a seven-year, 11-month-old Caucasian male who presented with his parents initially to OSF Sacred Heart Medical Center in Danville, IL, on July 8, 2021, after falling off a trampoline. After being assessed at OSF, the result was that the patient sustained an angulated fracture of the left arm and was transferred to Carle Foundation Hospital at 2300 on 7/8/2021 for corrective surgery.

Pathophysiology

Disease process: Bones can withstand many forces such as tension, compression, bending, and shear. A fracture is any disruption of the bone or the bone fragment. Identifying the mechanism of injury can help identify and diagnose the type of fracture and the type of treatment the patient may need (Capriotti & Frizzell, 2016). B.W.'s injury was identified by him jumping on a trampoline and falling off. He states he tried to catch his fall by placing his arm down during the fall.

S/S of disease: Signs and symptoms of a bone fracture include significant bleeding, tissue disruption, swelling, and pain. Some signs the patient may experience are fever, weight loss, and malaise which are often signs and symptoms of infection. Traumatic joint injuries include stiffness and limitation of movement, swelling, pain, redness, aching and may show unilateral or bilateral involvement (Capriotti & Frizzell, 2016). The patient states that when he fell, he quickly ran to his parents with his injured hand. He states the bone was protruding from the forearm, and he had severe pain which accompanied the injury.

Method of Diagnosis: Methods of diagnosis include X-rays that identify fractures, dislocations, tissues derangement, or bony abnormalities after a traumatic event such as a fall or a motor vehicle accident, to name an example (Capriotti & Frizzell, 2016). B.W.'s parents drove him to the local hospital, OSF Heart of Mary Medical Center in Danville, IL. X-rays were ordered and obtained of the fractures, and B.W. was transported to Carle for admission and surgery.

Treatment of disease: Treatment includes surgery to realign bones and ancillary structures for healing and restoration, which is called reduction (Capriotti & Frizzell, 2016). There are two types of reduction; however, the patient, B.W., had an open reduction internal fixation of his left radius and a closed reduction fixation of the left ulna. His left arm was splinted, wrapped in gauze, and placed in a sling for healing purposes. The patient's arm needed to be elevated and placed in the splint for around 8-10 weeks per

Assessment									
General	Integument	HEENT	Cardiovascular	Respiratory	Genitourinary	Musculoskeletal	Neurological	Most recent VS (highlight if abnormal)	Pain and Pain Scale Used
A&O X 4 The patient	Skin color is pale but normal	Head is normocephalic,	S1, S2 Carotid	<p align="center">Medical History</p> <p>Previous Medical History: The previous history of femur fracture at age two did not require an overnight hospital stay, only a spica cast. The patient also has a previous history of a right radial fracture when he was six years old, splinted and placed in a sling until it was healed.</p> <p>Prior Hospitalizations: None</p> <p>Chronic Medical Issues: None</p> <p>Social needs: Family lives in Maryland. They are here in Illinois visiting family and planned to drive back to Maryland on Sunday, July 11, 2021.</p>			atient is ed x 4, and sgow scores a 15. n shows no oration, no g, no hess. The t's speech opriate for he p yake the mer er, he ed f in atio	<p>Time: 0815</p> <p>Temperature: 99.3 F</p> <p>Route: Oral</p> <p>RR: 23</p>	FACES Pain Scale used. The patient states his pain is minimal at a two according to the FACES pain scale.
<p align="center">Relevant Lab Values/Diagnostics</p> <p>ABG: (Standing Order) - Obtain if temperature higher than 99.8 degrees F.</p> <p>Potassium: (Standing Order) - Obtain if temperature greater than 99.8 degrees F.</p> <p>COVID 19 Screen - In Process</p> <p>C-ARM - Reason: Left Arm ORIF (open reduction internal fixation). Surgical site imaged after surgery to show internal fixation device.</p> <p>Initial X.R. obtained at the previous hospital (OSF Sacred Heart, Danville, IL. No Report available)</p>			<p align="center">Active Orders</p> <p>Q4 Vitals; notify the provider if temperature increases above 99.8 F</p> <p>Advance diet as tolerated - Regular diet but begin with clear.</p> <p>IV access and IV Antibiotics twice today, 8 hours apart.</p> <p>Elevate arm above heart, keep the arm in a sling for the duration of treatment.</p> <p>Non-weight bearing left arm.</p> <p>IV Pain Medications which admitted: oral pain medications at discharge every 4 hours.</p>				<p>96% Room Air</p> <p>Oxygen needs: None.</p>		

Nursing Diagnosis 1	Nursing Diagnosis 2	Nursing Diagnosis 3
Acute pain related to fracture as evidenced by recent surgery	Impaired tissue integrity related to fracture as evidenced by recent ORIF and closed reduction surgery and non-weight bearing status	Risk for surgical site infection related to fracture as evidenced by surgical incision and non-weight bearing status.
Rationale	Rationale	Rationale
Due to recent surgery and fracture, the patient may experience pain in the left arm ulnar/ radial area.	Redness, swelling, and pain are indications of inflammation and the body's immune system response to impaired tissue integrity. Fever is an early warning sign of infection.	Since the patient does have an incision in the arm, he will need to perform hand hygiene regularly before eating and using the restroom to decrease germs on his hands. He will also want to frequently

		change positions to decrease any fluid build-up in the lungs.
<p style="text-align: center;">Interventions</p> <p>Intervention 1: Administer pain medications around the clock</p> <p>Intervention 2: Place patient's arm in a sling always while in motion to decrease pain.</p>	<p style="text-align: center;">Interventions</p> <p>Intervention 1: Assess changes in body temperature, increased explicitly in body temperature.</p> <p>Intervention 2: Assess the site of impaired tissue integrity and its condition.</p>	<p style="text-align: center;">Interventions</p> <p>Intervention 1: Wash hands or perform hand hygiene before having contact with the patient.</p> <p>Intervention 2: Encourage coughing and deep breathing exercises; frequent position changes.</p>
<p style="text-align: center;">Evaluation of Interventions</p> <ul style="list-style-type: none"> • The patient will reach a tolerable pain level. • The patient will verbalize non-pharmacological strategies to relieve pain • The patient will show an increased comfort level 	<p style="text-align: center;">Evaluation of Interventions</p> <ul style="list-style-type: none"> • Patients with limited mobility should be evaluated by using a risk assessment tool to assess immobility-related risk factors systematically. • Encourage the use of pillows, foam wedges, and pressure-reducing devices. 	<p style="text-align: center;">Evaluation of Interventions</p> <ul style="list-style-type: none"> • Wash hands with antiseptic soap and water for at least 20 seconds. Alcohol-based hand sanitizer also is effective in eliminating germs. • Frequent position changes will help keep the lungs clear of any mucus or build-up, leading to pneumonia and ultimately infection.

Nursing Diagnosis References:

Swearingen, P. L., & Wright, J. (2018). *All-in-one nursing care planning resource: Medical-surgical, pediatric, maternity, and psychiatric-mental health* (5th ed.). Mosby.