

UNIT 14 HOW TO COMMUNICATE WITH PATIENTS IN THE ORTHOPEDIC WARD

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English for Nursing Communication II

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OUTLINE

Concept of academic reading in nursing

 reading strategies and exercises applicable to
 answer news, research articles, commentaries,
 academic paper healthcare issues

- 2. Concept of active listening in nursing Part 1 -news related listening exercises
- 3. Concept of active listening Part 2 -conversation, lecture listening related exercises
- 4. Concept of writing in nursing Part 1 -narrative writing related activities
- 5. Concept of writing in nursing Part 2 -nurse' resume related writing activities
- 6. Concept of writing in nursing Part 3 -nurses' notes writing related activities
- 7. Concept of writing in nursing Part 4 -nursing care plan writing related activities
- 8. Concept of writing in nursing Part 5 -laboratory reports related activities

9. Concept of writing in nursing Part 6

- -hand over reports/nurses' endorsement reports
- 10. Concept of writing in nursing Part 7 -case study related activities
- 11. Concept of writing in nursing Part 8 -writing research papers
- 12. How to communicate with patients in the medical ward
- -listening, reading, writing related exercises 13. How to communicate with patients in the surgery ward
- -listening, reading, writing related exercises 14. How to communicate with patients in the orthopedic ward
- -listening, reading, writing related exercises 15. How to communicate with patients in the maternal and child ward
 - -listening, reading, writing related exercises

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OBJECTIVES



At the end of the course, each student nurses should be able to :

- 1. Identify the types of orthopedic surgeries.
- Apply the preoperative management and nursing care.
- Apply the post operative management and nursing care.
- Answer the practice test in a separate worksheet.

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OVERVIEW

Orthopedics aims to treat the
problems of the
musculoskeletal system that
includes bones, joints,
ligaments, tendons and
muscles.

Care involves a team approach performed by surgeons, nurses and physiotherapists.



1. TYPES OF ORTHOPEDIC SURGERIES

open reduction – reduction and alignment of the fracture through surgical incision closed reduction – manipulation of bone. fragments or joint dislocation without surgical incision. internal fixation – stabilization of the reduced fracture with use of metal screw, plates, nails, or pins bone graft – placement of autologous or homologous bone tissue to replace,

promote healing of, or stabilize diseased

bone



1. TYPES OF ORTHOPEDIC SURGERIES₂

arthroplasty – repair of a joint; may be done through arthroscope (arthroscopy) or open joint repair **int replacement** – type of arthroplasty that involves replacement of joint surfaces with metal or plastic materials total joint replacement – replacement of both articular surfaces within a joint meniscectomy – excision of damaged meniscus (fibrocartilage) of the knee



1. TYPES OF ORTHOPEDIC SURGERIES₃

 tendon transfer – movement of tendon insertion point to improve function
 fasciotomy – cutting muscle fascia to relieve constriction or contracture
 amputation – removal of a body part

2. PREOPERATIVE MANAGEMENT AND NURSING CARE

Hydration, protein, and caloric intake are assessed

GOAL: to maximize healing and reduce risk of complications by providing I.V. fluids, vitamins, and nutritional supplements as indicated



2. PREOPERATIVE MANAGEMENT AND NURSING CARE₂

GOAL:

If patient has had previous corticosteroid therapy, it could contribute to current orthopedic condition (aseptic necrosis of the femoral head, osteoporosis) as well as affect the patients response to anesthesia and the stress of surgery; may need corticotropin postoperatively

2. PREOPERATIVE MANAGEMENT AND NURSING CARE₃

EVALUATION:

- Evaluate for infection (cold, dental, skin, UTI), which could contribute to development of osteomyelitis after surgery
 - It is important to determine whether preoperative antibiotics will be necessary.
- Coughing and deep breathing, frequent
 vital sign and wound checks, repositioning
 are described to prepare patient.

2. PREOPERATIVE MANAGEMENT AND NURSING CARE₄

- The patient should practice voiding in bedpan or urinal in recumbent position before surgery
 - This helps reduce the need for postoperative catheterization
- The patient is acquainted with traction apparatus and the need for splint or cast, as indicated by type of surgery
- Review discharge and rehabilitation options post- surgery.

3. POST OPERATIVE MANAGEMENT AND NURSING CARE

- Neurovascular status is monitored, and swelling caused by edema and bleeding into tissues needs to be controlled
- The affected area is immobilized and activity limited to protect the operative site and stabilize musculoskeletal structures
- Hemorrhage and shock, which may result from significant bleeding and poor hemostasis of muscles that occur with orthopedic surgery, are monitored
- Complications of immobility are prevented through aggressive and vigilant postoperative

care





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CONCLUSION

Ultimately, perioperative lines are always challenged to provide optimal care for patients receiving bone surgeries or treatments and at some point, a complex intervention covering all stages of the patient pathway with the incorporation of patient choice and individualization of therapies.

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