

Chapter 44
Care of the Patient With a
Musculoskeletal Disorder

Lesson 44.1

- 1. List the five basic functions of the skeletal system.
- 2. List the two divisions of the skeleton.
- Describe the location of major bones and muscles of the body.
- List the types of body movements.
 Describe three vital functions muscles perform when they contract.
- 6. List diagnostic examinations for musculoskeletal function.
- Compare medical and nursing care for patients suffering from gouty arthritis, rheumatoid arthritis, and osteoarthritis.

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Basic Functions of the	9
Skeletal System	

- Support
- Protection
- Movement
- Mineral storage
- Hematopoiesis



Divisions of the Skeletal System

- Axial skeleton
 - Composed of the skull, hyoid bone in the neck, vertebral column, and thorax
- Appendicular skeleton
 - Composed of the upper extremities, lower extremities, shoulder girdle, and pelvic girdle

Structure of the Musculoskeletal System

- The bones and joints provide the framework of the body
- Muscles are necessary for movement

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Types of Body Mov	vements	
Flexion		
Extension		
Abduction		
Adduction		
Rotation		
Supination		
• Pronation		
Dorsiflexion		
 Plantar flexion 		
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Functions of the N	Auscular System	
ranctions of the iv	viascalar System	
 Muscles are necessary for 	movement	
 Three vital functions musc 	les perform when they contract	
 Motion 	,	-
 Maintenance of posture 		
 Production of heat 		
Contraction also assists in	return of venous blood and lymph to the	
right side of the heart	,,	
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Diameter For	-+:	
Diagnostic Examin	lations of the	
Musculoskeletal Sy	vstem	
	,	
• X-ray	Bone scan	
 Laminography 	Aspiration	
Scanography	Synovial fluid aspiration	
 Myelogram 	 Endoscopic examination 	
 Nuclear scanning 		
• MRI		
Computed tomography		
Computed tomographly		
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Rheumatoid Arthritis	
The most serious form of arthritis Leads to severe crippling	
Characterized by a chronic inflammation of the synovial membrane	
(synovitis) of the diarthrodial joints	
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Osteoarthritis	
(Degenerative Joint Disease)	
 Nonsystemic, noninflammatory disorder that causes bones and joints to degenerate 	
Most commonly affects the joints of the hand, knee, hip, and cervical	
and lumbar vertebrae • Symptoms include pain and stiffness in the joints (most frequently in	
the morning)	
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Gouty Arthritis (Gout)	
Godty Artifitis (Godt)	
Caused by an accumulation of uric acid in the blood	
Affects men eight times more frequently than women Onset usually occurs at night	
Excruciating pain and swelling in the affected joint	

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Lesson 44.2	
 List at least four healthy lifestyle measures people can practice to reduce the risk of developing osteoporosis. 	
Describe the medical and nursing care for the patient undergoing a	
total hip or knee replacement.	
 Discuss nursing interventions for a patient with a fractured hip after open reduction with internal fixation and bipolar hip prosthesis 	
(hemiarthroplasty).	
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Osteoporosis	
A discussion has according to a local of the control of the contro	
 A disorder that results in a loss of bone density Can interfere with the mechanical support function of the bone 	
Women between the ages of 55 and 65 years are identified as a high-	
risk group	
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Knee Arthroplasty	
(Total Knee Replacement)	
 Replacement of the knee joint to restore motion, relieve pain, or correct deformity 	
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Hip Arthroplasty	
(Total Hip Replacement)	
 Commonly performed when arthritis involves the head of the femur and acetabulum 	
May also be performed for fractures, tumors, and injuries	
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Open Reduction and Internal Fixation (ORIF)	
 Assess patient's ability to understand instructions and limitations Assist patient to dangle feet at bedside on first postoperative day 	
Turn patient every 2 hours Prop with pillows between legs or under the back to maintain position	
Assist with range-of-motion exercises to maintain muscle strength	
 If a stable plate and screw fixation is used to repair the fractured hip, the patient should not bear weight for 6 weeks to 3 months to protect the fracture site 	
 A telescoping nail fixation allows minimal to partial weight-bearing during the first 6 weeks to 3 months 	
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Hip Prostheti	c Impl	lant
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- Teaching for patients who had a fractured hip and received a hip prosthetic implant (hemiarthroplasty) includes the following:
 - Avoid hip flexion beyond 60 degrees for approximately 10 days
 Avoid hip flexion beyond 90 degrees for 2 to 3 months

 - Avoid adduction of the affected leg beyond midline for 2 to 3 months
 Maintain partial weight-bearing status for approximately 2 to 3 months
 - Avoid positioning on the operative side in bed
 - Maintain abduction of the hip by using a wedge-shaped foam bolster or pillows arranged in a wedge; this will require nursing assistance

Lesson 44.3

- 11. Discuss the physiology of fracture healing (hematoma, granulation tissue, and callus formation).
- 12. Describe the signs and symptoms of compartment syndrome.
- 13. List nursing interventions for a fat embolism.
- 14. List at least two types of skin and skeletal traction.
- 15. Compare methods for assessing circulation, nerve damage, and infection in a patient who has a traumatic insult to the musculoskeletal system.
- 16. List four nursing interventions for bone cancer.
- 17. Describe the phenomenon of phantom pain.
- 18. Define lordosis, scoliosis, and kyphosis.

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Physiology of Bone Healing

- When a fracture occurs, there is bleeding at the site
- A clot forms at the ends of the fractured bone
- The hematoma becomes organized and a fibrin network is created
- Osteoblasts enter the fibrous areas
- Collagen strengthens and calcium deposits increase
- Remodeling occurs

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Compartine	nt Syndrome	•	
5 11 1 1 11			
Pathologic condit	cion		
Caused by Arterial vessel of	nmaracsian.		
Arterial vessel co Reduced bloods	ompression supply to an extremity		
	a tight cast or dressing		
	le ischemia can occur within 6 hours		
Paralysis and sen			
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Fat Embolisr	n		
 Pulmonary fat en 	nbolism involves the embolization of fat tissue within		
the pulmonary ca			
 Fat embolism is r 		-	
 Can be life-threat 	tening, as fat occludes the pulmonary artery		
 This leads to brai 	n hypoxia and tissue death		
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Traction			
11400011			
Skeletal	• Skin		
• Femur	• Buck's		
• Tibia	• Russell's		
Humerus			
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Traumatic Injury	
• Contusion	
• Sprains	
Whiplash Strains	
• Dislocation	
Airbag injuries	
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Bone Cancer	
bone cancer	
Tumors of the bone may be primary or secondaryThey may be benign or malignant	
- They may be benigh of manghant	
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Phantom Pain	
Pain felt in the missing extremity as if it were still present	
May be frightening to the patient	
 Phantom pain occurs because the nerves that register pain in the amputated area continue to send a message to the brain 	
This is a common finding	
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Lordosis,	\mathcal{S}^{CO}	110515,	Νy	priosis

- Lordosis is an increase in the curve at the lumbar spine region that throws the shoulders back
- Scoliosis is a lateral (or S) curvature of the spine
- Kyphosis is a rounding of the thoracic spine

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