

Cues	Nursing Diagnosis	Inference	Objective	Nursing Intervention	Rationale	Evaluation
<p><i>Subjective</i></p> <ul style="list-style-type: none"> <li>• "Sumasakit at kumikirot ang inoperahan sa kin," as verbalized.</li> </ul> <p><i>Objective</i></p> <ul style="list-style-type: none"> <li>• c incision on the L arm (ORIF-treated D/3 radius L with bone grafting)</li> <li>• c posterior cast &amp; bandage on L arm</li> <li>• c swelling on the L arm</li> <li>• c pale pink nail beds @ L hand</li> <li>• BP = 140/90mmHg</li> </ul>	<ul style="list-style-type: none"> <li>• Acute Pain r/t surgery AMB incision on L arm</li> </ul>	<ul style="list-style-type: none"> <li>• Acute pain is described as an unpleasant sensory or emotional experience associated with actual or potential tissue damage or injury as lasting from seconds to 6 months. In cases of fracture, pain is continuous &amp; increasing in severity until bone fragments are immobilized. In this type of fracture, the main medical management is open reduction with internal fixation (ORIF), wherein the fracture fragments are reduced &amp; internal fixation devices are used to hold the bone fragment in position until solid bone healing occurs.</li> </ul>	<p><i>Short-term Goal</i></p> <p>After 6 days of nursing intervention, the patient:</p> <ul style="list-style-type: none"> <li>• verbalizes minimized or controlled feeling of pain</li> <li>• verbalizes methods that provide relief</li> <li>• demonstrates use of relaxation skills &amp; diversional activities as indicated for his situation</li> </ul> <p><i>Long-term Goal</i></p> <p>After months of nursing intervention, the patient:</p> <ul style="list-style-type: none"> <li>• is free of pain on the surgical site</li> </ul>	<p><i>Independent</i></p> <ul style="list-style-type: none"> <li>• Vital signs were monitored q 15 minutes until stable &amp; dressing was checked.</li> <li>• Assessed LOC &amp; turned q 2 hours, to unoperative side only.</li> <li>• Adjusted constricting bandage &amp; advised to elevate L arm.</li> <li>• Instructed to do activities such as deep breathing exercise, coughing exercise, dorsiflexion of foot &amp; sitting exercises.</li> <li>• Noted to avoid weight bearing until allowed.</li> </ul>	<ul style="list-style-type: none"> <li>• Alterations from normal may be signs of infection. Moistened dressings are favorable site for microorganism to culture.</li> <li>• One must be conscious &amp; awake in order to feel pain. Turning of position prevent bed sores.</li> <li>• This is to prevent diminished circulatory &amp; nerve function &amp; control swelling of the site.</li> <li>• To reduce swelling &amp; prevent stiffness the stated activities must be done. Decreased lung capacity &amp; decreased cough efficiency are predisposing factors to respiratory infections.</li> <li>• To prevent from complications on the incision site, activities that may extend the cut must be avoided.</li> </ul>	<ul style="list-style-type: none"> <li>• Pain is reduced/controlled to a tolerable extent as verbalized. Relieving methods &amp; relaxation techniques are understood &amp; demonstrated</li> </ul>

- Encouraged to void freely.
- Enough rest & sleep was also advised.

*Dependent*

- Intake of pain reliever such as mefenamic acid & antibacterial medications such as amoxicillin as per doctor's order & advise.

- This is advised in order to prevent constipation & fecal impaction.
- This promotes healing by reducing basal metabolic rate & allowing oxygen & nutrients to be utilized for tissue growth, healing & regeneration.

- NSAID activity includes modulation of T-cell function, inhibition of inflammatory cell chemotaxis, decreased release of superoxide radicals, or increased scavenging of these compounds at inflammatory sites. Antibiotics are used to treat & prevent infections caused by susceptible pathogens in skin structure infections.



# Nursing Care Plan

(NCM 202 - RLE)

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