Case Study
Trauma
Marty Dickerson

Marty Dickerson is a 35 year old married father of two. He is driving home from work on the interstate at 65 mph when a car crosses the median and strikes his vehicle head on. Marty, not wearing a seat belt, is thrown forward against the steering wheel. The front of the car is crushed, the steering wheel traps his torso, and the dashboard traps his lower extremities. Extrication takes 45 minutes; he is then flown to a level I trauma center. He has two IV lines in place with #14 angiocath and is immobilized on a backboard with a cervical collar. His knees are flexed. The flight nurse notes that he has severe abdominal pain and is unable to lay with his legs flat. Vital signs during the flight are BP 90/60, P 120, R36, oxygen saturation 88%. Supplemental oxygen is administered at 15 L/m via non-rebreather facemask. Other obvious injuries include contusions and edema in both knees. Distal pulses in the lower extremities are present.

1. What should Marty’s initial physical assessment include? Identify specific problems you are looking for and immediate actions?
2. Assessment secondary survey is completed. Which diagnostic tests should be prepared for to be obtained immediately and why?
3. In addition to actual assessments being completed, what additional information regarding the mechanism of injuries and the accident is important to your data collection? Where would the information be obtained?
4. Identify and prioritize nursing diagnoses, with independent nursing interventions for Marty.

Despite fluid resuscitation, Marty’s hemodynamic status continues to deteriorate and he is transferred to the OR for an exploratory laparotomy. Marty is transferred in stable condition to the post-anesthesia care unit (PACU) following a laparotomy with repairs to lacerations of the spleen and mesenteric vasculature. The urinary tract was free of injury. There is no repair needed to the knees.

5. The goals of care in the PACU are to identify actual and potential problems that may occur as a result of anesthetic administration and surgical intervention and to intervene appropriately. What critical assessments are required? Include specifics for each identified area.
6. What are the criteria that indicate the patient is stable and eligible for discharge for the PACU?
Marty is transferred to the medical surgical unit in stable condition. He is awake and continues to have oxygen by mask. His surgical site is a midline, incision closed with staples and covered with a dry sterile dressing (DSD). His family is waiting on the unit. Assessment findings on arrival:

**VS:**
- T: 100.1, BP: 100/70, P: 102, R: 24

**Airway:**
- Patent, breath sounds present bilaterally

**Circulation:**
- Skin cool, pale, good capillary refill, radial and pedal pulses present & equal

**Neurological:**
- Awake, responds to questions, denies pain, received Morphine Sulfate 4mg in PACU,
  - Moves all extremities on command,
  - Pupils are equal and responsive to light

**Renal:**
- Foley catheter in place draining amber urine

**Surg site:**
- Abdominal incision with DSD, dry and intact, no drainage noted
  - Jackson Pratt (JP) drain bulb from stab wound in LUQ
  - Abdomen is soft without tenderness except around the incision site

**Other:**
- IV fluids lactated ringers at 150cc/hr; infusing into the right forearm with # 16 angiocath
  - NG: to suction, no drainage

7. Prioritize nursing diagnoses for Marty related to the his post operative care for abdominal surgery. Identify appropriate nursing interventions for each diagnoses.

Marty is being discharged after an unremarkable postoperative course. His Foley catheter, IV and NG tube were removed previously. Today his staples were replaced with steri-strips, and the JP was removed. He is to follow up with his surgeon in 5 days. His diet is now as tolerated. He ambulates without assistance.

8. What information would assist the health care team in planning for Marty’s discharge?
9. What discharge instructions should Marty receive?
10. How would you implement a trauma prevention educational program to reduce the incidence of injuries similar to Marty’s? Include some age-related strategies.