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COURSE TITLE: ADVANCED MEDICAL SURGICAL/ SURGICAL NURSING II

COURSE CODE: NSC 408

ASSIGNMENT

Identify/explain 4 more emergency nursing condition and their management

1. **Burns and Scalds:-**

Burns can be caused through dry heat such as fire or hot metal or contact with an object charged with a high tension electric current, or friction with a revolving wheel or fast-moving rope. Additionally, chemical burns occur with corrosive chemicals like acids and alkalis. A scald is an injury caused by moist heat, like boiling water, steam, hot oil or tar. The effects of a burn or a scald are the same. There may be reddening of the skin or blister formation or destruction of the skin, or of the deeper tissues. The areas of most burns and scalds, including the clothing are sterile for a short period, and efforts should be made to keep them so until medical aid is possible.

General rules for treatment:-

1. Avoid handling the affected area more than necessary. See that your hands are as clean as possible by washing them.

2. Do not apply lotions of any kind.

3. Reassure patient

4. Begin CPR if the person shows no signs of circulation, such as breathing, coughing or movement

5. Do not remove burned clothing and do not break blisters.

6. Cover the area (including burned clothing), with a dry sterile dressing if possible, or similar material such as clean lint, freshly-laundered linen.

7. Bandage firmly, except when blisters are present or suspected, in which case, bandage lightly.

8. Immobilize the area by suitable means.

9. Treat for shock.

In case of a major burn, move the patient to the hospital as quickly as possible. The patient will probably require an anaesthetic, so don’t give any oral medicines.

If the burns are caused by a corrosive chemical:-

For acids:-

1. Thoroughly flood the part with water.

2. Bathe the part freely with an alkaline solution made from two teaspoons of baking soda or washing soda in one pint of warm water.

For alkalis:-

1. If the burn is caused by quicklime, brush off any remains.

2. Bathe the part freely with a weak acid solution, such as vinegar or lemon juice, diluted with an equal quantity of warm water.

2. **Electrocution**

An electric shock requires immediate first aid. Caused by touching a live and naked wire, cable or rail, a shock may be relatively mild, or extremely severe. Burning is a result, and the burns may be severe or deep, especially with higher voltages.

In case of a shock, prompt action can aid the patient’s life. Perform the following steps;

1. Switch off the current, and if it cannot be put off, cut off supply by removing the plug, breaking the cable or wrenching it free. Never attempt to cut a cable with a knife or scissors.

2. Remove the patient from contact with the current with the greatest care, using dry insulating materials. With domestic apparatus, gloves are good; a folded garment or newspaper gives fair protection.

3. Begin CPR if the person shows no signs of circulation, such as breathing, coughing or movement

4. Reassure the patient.

5. Lay the patient down on their back, with the head low and turned to one side unless there is an injury to the head, abdomen or chest when the head and shoulders should be slightly raised and supported.

6. Loosen clothing around the neck, chest and waist.

7. Wrap them in a blanket or rug.

8. Give sips of water, coffee or any liquid but never alcohol.

9. Check for Other Injuries;

• If the person is bleeding, apply pressure and elevate the wound if it's in an arm or leg.

• There may be a fracture if the shock caused the person to fall.

• Apply a bandage. Cover any burned areas with a sterile gauze bandage, if available, or a clean cloth. Don't use a blanket or towel, because loose fibers can stick to the burns.

1. **Major Cuts**

For a cut, be sure to apply clean dressing after administering first aidMajor cuts, or wounds can be classified as follows:-

1. Incised wounds, caused by a sharp instrument like a razor.
2. Lacerated wounds, which have torn and irregular edges, caused by machinery, animal claws, etc.
3. Contused wounds, accompanied by bruising of the tissues, caused by a direct blow or by crushing.

4. Puncture wounds, which have comparatively small openings, but may be very deep, caused by a stab from any sharp-pointed instrument, like a needle, knife or bayonet.

The following steps should be used to manage the condition;

1. Place patient in a suitable position, elevating the bleeding part, unless it is a fractured limb.

2. Do not disturb any blood clots formed.

3. Reassure the patient

4. Removing as little clothing as possible, expose the wound.

5. Remove any foreign bodies which are visible, and can be easily picked out or wiped off with a clean dressing.

6. Apply and maintain both direct and indirect pressure.

7. Apply a clean dressing and bandage.

8. Immobilize the injured part. When the wound is near a joint, immobilise it using splints if needed.

Remember, that if there is a foreign body in the wound which cannot be removed easily, cover it with a dressing, and build up sufficient pads around the wound without applying pressure to the foreign body. If there is no foreign body in the wound, but the cut is deep, ensure that you use enough padding into the wound’s depths, and ensure pads project well above the level of the skin to ensure adequate pressure on the torn ends of the blood vessels.

1. **Seizure**

A seizure may be caused by epilepsy. The symptoms include unconsciousness, muscle contractions and convulsions, clouded awareness, weakness, loss of sensation, strange feelings in the stomach, fidgeting, confusion and sleepiness after the seizure.First aid for seizures aims at keeping the person safe until it stops on its own. Loosen any clothing around the person’s neck, do not restrain them or put anything into their mouth, clear the area around them and stay with them till the seizure stops.

The following steps should be used to manage the condition;

1. Prevent Choking

• Loosen clothing around the person's neck.

• Roll the person on his or her side to keep the airway open.

• Don't put anything into the person's mouth.

1. Protect From Injury

• Move sharp objects, such as glassware or furniture, away from the person.

• Ask bystanders to give the person room.

• Do not restrain or hold down the person.

1. Observe these items: length of seizure, type of movements, direction of any head or eye turning, amount of time to return to alertness and full consciousness.
2. Treatment; Anticonvulsant e.g carbamazepine
3. Follow Up

• Stay with the person until emergency help arrives