NEUROLOGICAL DISORDERS

P = pathophysiology

Da a Diagnosis

R . Risk Factors Sisk is Signs + Symptoms N = Faussing management C * Complications



Traumatic Head Injury

A trauma or blunt force hits the skull causing damage to the brain

Sisk: Confusion, agriculture, visible head injury, simpless blown pwpis/S

N: Assess for neurological Changes or Change in level of considuaness amonitor vital signs

· assess pt. for headache, nausea traming. · Check for CSF drawings · Assess supic size



Selzures

P. Approximat, sudden exercical accurry in the brain.

SING Uncontrollable involuntary music movements (convesions) Gaze off into the distance with no response to stimuli May lose conclousness for seconds or Minutes. Usually the person will not recar the event's leading up to it

N -Assess selewe his tory - Note time + duration - prevent Havry, but don't restrain - monitor behavior before t after episode turn pt. on Side OH end of Stigue to drain secretions

C: Stadus epimptious - epimptic spasms without any rest perious which can result in brain damage

R. Genetic inheritance, Brain trauma, tumors, toxicity, metabolic disorders or infection

Parkinsons

Decreased dopamine levels in the brain Chase nourological + musculosalectal SA

· Manitor Swallawing activity + neuroactivity . assist w ambulation

* Promote PT * OT to present function · Increase fluid incase by 2L/day

Falls, Self-care deficies, depression, Constipation, and poor posture

Stroke,

Neurological deficit caused by a block of blood flow to the brain P

One sided weakness, facial drooping, confusion, Surred speech, or aprilusia. Sisk

CT Scan or MRI confirms tidentifies Dx type of Strate which determines treatment

Atheroscieroscierosis, hypertension, diabetes, stress Obesity, Oral Contraceptives, Amiconquestion therapy

· Airway is priority . Monitor VS, LOC, pupils + serious · position client on side to prevent aspirution.

Types of Stycke

Ischemic

is an obstruction of a blood vessel 87% of stroke cases

Hemorrhagic

h a webscened blood vessel suptures Risk Factor = Hypertension

TIA (Transiene Ischemic Attack)

La temporary Clot that resolves on its a A warning sign for stroke

ultiple Sclerosis

a central nervous system disease Characterized by demyelination of axons

Fatigue, weakness, ataxia, vertigo, tremovs, S/SAL blurred vision, emotional changes, & secretion, bladder + bowel disturbances, @Babinski reflex

Requires extensive neurological hesting over DA many years of a slow onser of distance

Provide energy preservation measures Encourage independence white providing surfery Monitor for urinary + bowel dysturction

Fails, psychological problems, 4 mobility

eningitis

inflammation of the practions + pia maser of the central nervous system. Usually course by becerries or a virus.

CSF is tested for the partneyen and used to determine the treatment

SISK 4 LDC, Red macular rath, pain with new freedom Monitor for sciences. Assess cranial nerves

Study Guide For Medsurg

Donna D. Ignatavicius,Linda A. LaCharity,M. Linda Workman

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