

**STRAINS, SPRAINS, MINOR TRAUMA OF
BACK, NECK & TRUNK**
Level II

Skill Level: RN

Definition: Contusion, strain, over-stretching or tearing of the supportive ligaments, tendons, muscles, or disk fibers of the spinous and paraspinous area which may be chronic, acute or recurrent and is causing the patient some mild to moderate difficulty with work or activities of daily living.

<p>Subjective:</p> <ul style="list-style-type: none">• Neck or back pain primarily with use usually not at rest.• Pain may be focal or radiating.• There can be focal or radiating numbness.• No bowel or bladder problems associated with injury.• Usually there will be a recent trauma.• Sometimes a chronic condition that is made worse with or without a new episode of trauma.	<p>Assessment: "Alteration in Comfort"</p> <ul style="list-style-type: none">• Pain complaint related to recent trauma• Impaired physical mobility related to musculoskeletal impairment/recent trauma
<p>Objective:</p> <ul style="list-style-type: none">• Obvious signs of discomfort, dysfunction, or abnormal stance when walking, sitting, bending or moving about.• Muscle tightness and decreased range of motion are common.• Patient ratchets up in extension splinting injured area of back.• There may be area(s) of tenderness, muscle tightness, and/or obvious spasm. (Document)• Findings of neurological impairment may be present, including decreased motor strength or tone or loss of sensation in a certain areas. (Document)• Focal numbness or tingling may be present.	<p>Plan: Provide Level I treatment plan plus:</p> <ul style="list-style-type: none">• After checking for allergies to medications may suggest: --Ibuprofen 200mg 1-2 QID prn from unit. --Tylenol or ASA 2 QID prn from unit if intolerant to Ibuprofen.• <u>Naprosyn, Aspirin, and Ibuprofen are not recommended for pain management for pregnant patients, please instruct all pregnant patients to use Acetaminophen (available in housing units) for minor pain management.</u>• If available meds not effective, may use Naprosyn 500 mg BID prn for pain for 5 days instead. (Always second line)• Ice for the first 24 hours then heat.• Back or neck care instruction sheet. May

	<p>start range of motion stretches in 24-48 hours.</p> <ul style="list-style-type: none">• Instruct patient to return if not resolved in one (1) week.• Consider provider visit if not improving.• If pain seems severe, may contact provider for additional orders.• Sports/Work restrictions as indicated short term.• Provider appointment next available time if neurological signs or symptoms. Call medical provider to discuss.• <u>NEW LOSS OF BOWEL/ BLADDER CONTROL or urinary retention in the setting of a back injury is potentially a SURGICAL EMERGENCY. Transport patient to an emergency facility. Call provider if questions.</u>
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Nursing Education:

1. Any bowel or bladder problems associated with back or neck injury requires immediate attention of a medical provider.
2. Mechanism of injury will dictate assessment and management of patient. Falls from height, for example, would usually require x-rays to rule out a fracture. If there is no direct trauma, an x-ray is usually not needed immediately.
3. Medical problems such as Gall Bladder Disease, Kidney Stones, Pancreatitis, and Aortic Aneurysm may present with an initial complaint of back pain. Consider further evaluation such as abdominal exam, urinalysis, etc.
4. Absent or diminished peripheral pulse distal to the injury requires immediate physician attention.
5. Frequently the complaints of pain are worse a few days after the initial trauma.
6. Sometimes there may be muscle tightness. This is different from muscle spasm which is a sudden, sometimes violent involuntary and abnormal muscular contraction.
7. Establish consistency (or lack of consistency) between mechanism of injury, objective findings, and pain complaints if possible. Look for objective indicators of pain such as elevated blood pressure, tachycardia, sweating, and consistency in movement patterns.
8. Contusions: unbroken skin with pain, swelling and bruising need time to heal. Use ice/heat and over the counter pain meds. Does not require physician referral unless symptoms of neurological or circulatory impairment.

APPROVED:

Medical Services Manager

Date

Chief Medical Officer

Date

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2/24/2015

Medical Director

Date

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