

FOREIGN BODY IN EYE (Penetrating)

30 Second Review Foreign Body in Eye (Penetrating)

RN, LPN

DEF: Foreign body is impaled and often protrudes from the eye.

S/S: Protruding foreign body, laceration or hyphema. Check for fluid or blood, rupture of the globe, loss of vision or additional facial and head trauma.

RX: Cover both eyes, **do not remove impaled object**, transport to emergency room, notify practitioner.

SKILL LEVEL: RN, LPN

DEFINITION: A condition in which a foreign body such as a piece of wood, glass, metal, or other matter is impaled and often protrudes from the eye.

DATA BASE:

Subjective: Obtain history with specific attention to mechanism of injury. Patient will often complain of visual loss or blurriness.

Objective: May have obvious protruding foreign body or laceration of eye, or ****hyphema****. If no obvious protruding object, observe for leakage of fluid or blood from the eyeball, ruptured globe (ocular rupture), and other facial & head trauma.

****Hyphema is blood in the front (anterior) chamber of the eye. It may appear as a reddish tinge, or it may appear as a small pool of blood at the bottom of the iris or in the cornea.****

Assessment: Eye injury due to PENETRATING foreign object.

Plan:

1. DO NOT attempt to remove object. DO NOT apply pressure.
2. Place patient in position of comfort, patient should not bend over.

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- 3. Protect injured eye with an inverted paper cup, if possible. Do not remove impaled object if present.
- 4. Cover uninjured eye with dressing to decrease ocular movement.
- 5. Transport to Emergency Room or off-site specialist.
- 6. Notify practitioner.

Patient Teaching:

Explain importance of remaining calm to minimize further injury.

APPROVED:

Medical Services Manager

Date

Chief Medical Officer

Date

Steve Shelton M.D.

Medical Director

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Date

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