## **BLOQUE IV - GENERAL HEALTH II**

# **UNIT 12**

## **"FEVER"**

Fever is an elevation of body temperature above normal which accompanies many diseases and infections. The cause of fever is the production by the body of endogenous pyrogen which acts on the thermo-regulatory centre in the hypothalamus of the brain. This responds by promoting mechanisms which increase heat generation and lessen heat loss leading to a rise in temperature. Fever is the main factor in many infections caused by bacteria or viruses. Examples of these primary or specific fevers are diphtheria, scarlet fever and typhoid fever.

Treatment of fever depends upon the underlying cause. However, it may be necessary to reduce the temperature by direct methods such as undressing the patient or sponging the body with tepid water, or by indirect methods like giving drugs such as paracetamol, ibuprofen or aspirin.

As well as an increase in body temperature, symptoms of fever include headache, shivering, nausea, diarrhoea or constipation. Above 105°F, there may be delirium or convulsions, especially in young children.

To convert degrees Fahrenheit into degrees Centigrade, we subtract 32, multiply by 5, and divide by 9.

## ANSWER THE FOLLOWING QUESTIONS.

- 1. Why is high temperature especially dangerous in young children?
- 2. Which direct methods should we use to treat high temperature?
- 3. Which indirect methods should we use to treat high temperature?
- 4. What are some of the symptoms of 'fevers'?

## **UNIT 13**

### "THE POST – OPERATIVE PATIENT"

Soon after an operation has been performed, the unconscious patient is moved to a recovery room situated near the operating theatre. He is moved slowly and carefully so that no strain or pressure is put upon the wound. The recovery room contains all the equipment and drugs which may be necessary if difficulties occur.

A nurse remains with the patient all the time while he recovers from the effects of anaesthesia. It is his/her duty to follow these instructions:

- Ensure that the patient's respiratory tract is not obstructed. Carry out orders from the doctor immediately: for example, to administer oxygen or drugs.

- Help the patient if he/she vomits, and note the amount and kind of vomitus.

- Notice signs of shock or haemorrhage. This is done by checking the patient's blood pressure, pulse, temperature and observing the appearance of the skin.

- A temperature of above 38°C or below 35°C must be reported as it could be a sign of infection or hypothermia.

- Place the patient in a suitable position in order to keep him/her safe, quiet and comfortable.

- Carry out any post-operative treatment, such as checking the drainage, if the patient has one.

- Inspect dressings in case there is excessive haemorrhage or drainage.

- Report any unusual signs or symptoms.

As the patient regains consciousness he begins to feel pain and to worry about the operation. The pain can be relieved by giving analgesia. He may also be given a drink of water at this stage, especially if he does not complain of nausea. He should be encouraged to breathe deeply and to change his position in the bed from time to time.

# ANSWER THE FOLLOWING QUESTIONS.

- 1. Where does the patient recover from anaesthesia?
- 2. Why must a nurse be with the patient constantly while he recovers?
- 3. What should we check to ensure that the patient is not shocked?
- 4. What can temperature tells us about the patient's condition?
- 5. What should the nurse do if he/she notices any unusual or dangerous signs or symptoms in the patient?
- 6. How does the patient usually feel when he/she regains consciousness?
- 7. Synonyms of analgesia
- 8. Have you ever undergone an operation? Explain your experience. If you have not, how do you think a patient feels when they wake up from the anaesthesia?

# UNIT 14

#### **"BURNS"**

A person who has received burns passes through four stages. They are 1 - the stage of neurogenic shock, 2 - the stage of fluid loss shock, 3 - the stage of slough of burned tissue and infection, 4 - the stage of repair.

The patient with severe burns will certainly be badly shocked, and this stage may kill him, especially if he is very young or old. It is possible for fright and pain to produce a fatal fall in blood pressure.

Burns cause plasma to escape from blood vessels to the tissues, where it produces oedema and blisters. Loss of fluid makes the blood thicker and circulation less efficient. The blood pressure falls, causing shock.

In the third stage, the dead tissue separates from the living tissue below it. This leaves a wound which will almost certainly be infected. Antibiotics are usually given to the patient.

New skin slowly replaces the old. Skin grafts are often used to cover the wound before the new skin has grown. The badly burned patient always develops anaemia at this stage, and is given blood transfusions and a high protein, high calorie diet.

# **ANSWER THE FOLLOWING QUESTIONS**

- 1. What may happen to the patient during the first stage of suffering from burns?
- 2. Is it possible to die of shock?
- 3. What happens to the burned tissue during the third stage?
- 4. What almost happens to the wound below the burned tissue?

- 5. At which stage does the badly burned patient always develop anaemia?
- 6. What treatment is given to the patient with anaemia?
- 7. Why do burns produce oedema and blisters?
- 8. What are skin grafts used for?

# IN WHAT HOSPITAL WARD OR DEPARTMENT WOULD YOU EXPECT TO FIND...

- 1. A patient who has had his appendix removed?
- 2. A patient who has had his tonsils out?
- 3. A patient with a broken leg?
- 4. Someone who has just had an accident?
- 5. A patient with cerebral haemorrhage?
- 6. An elderly patient?
- 7. Someone who is having an operation?
- 8. A patient with a skin disease?
- 9. A patient who is being admitted?
- 10. A radiographer?
- 11. A lady who is giving birth?
- 12. A child with asthma?
- 13. A critically ill patient?
- 14. A patient with prostate problems?
- 15. A gentleman with pneumonia?