Orthopedic and Spine Bedside Nursing Education

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PALOMAR HEALTH

Reimagining Orthopedic & Spine Care

Conflict of Interest Disclaimer

- I have no conflicts of interest.
- I am admittedly biased to:
 - Nursing (31+years),
 - Palomar Medical Center (30+ years),
 - Orthopedic Nursing (since before nursing school caring for my grandpa after multiple hip surgeries, a BKA, a revision of a BKA, and an AKA before he passed in 1991... nope, he was not diabetic),
 - Advocate of Excellence in Patient Care and Education, and
 - Nurse Manager of 7E Orthopedics for 4+ years.





- Perception of received knowledge (Koivisto et al., 2020)
- Basic orthopedic or medical terms (Cosic & Kimmel, 2019)
- Family-based education (Rahmani, M., Bahraminejad, N., & Rezaei, M., 2020)



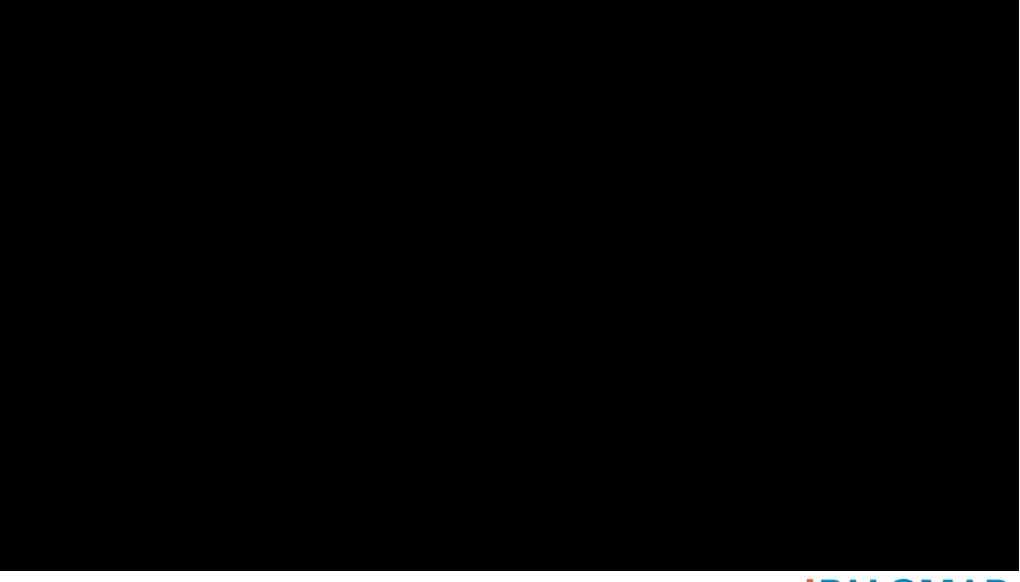
Cultural Biases

- Cognizant of cultural biases
- Contributes to health care disparities
- Treat everyone with courtesy and respect regardless of age, race, ethnicity, gender identity, sexual orientation, socioeconomic status, or other characteristics



Starting Education with Empathy







When Empathy Mixes with Reality

Is my mom going to be able to keep watching my kids now that dad is sick?

I'm scheduled to bring snack for Joey's soccer game TOMORROW & we'll attend Sally's birthday party

I forgot to set up the **water bill** payment

p My

My **CNA** is **busy** and Mr. Jones needs to be cleaned up

My **Supervisor** wants to review Documentation from the last time I worked.

Mr. Smith wants pain medication before therapy ... and the nurse is **busy** with another patient

Mrs. Gomez wants to discharge ... now ... And her **family** isn't here and I have so much to teach all of them



And then there is the PATIENT'S Reality

Is my mom going to be able to keep watching my kids now that dad is sick?

How am I going to PAY this bill?

I'm scheduled to bring snack for Joey's soccer game
TOMORROW & I may not make it to Sally's birthday party

I want to dischargenow... My doughter is picking me up on her lunch break. I don't want her to get in trouble at work.

Am I going to be able to do this for **my/elf** at home?

They want me to walk, but I need pain medication FIRST.

What was that doctor's name and when am I supposed to follow up?



Keeping it Simple ... 3 P's for Patient Education

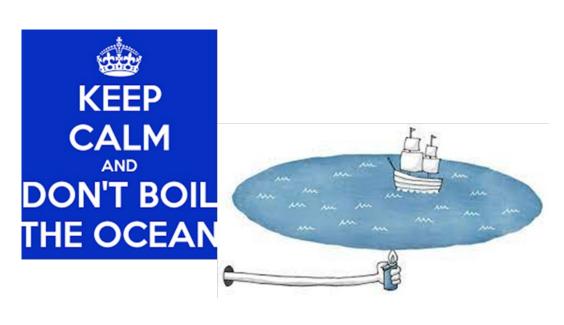
- 1. Proactive
- 2. Purposeful
- 3. Personable



Proactive

- Start early ... In Surgeon's office for elective cases Start early ... Upon arrival to your unit
- Each interaction is an opportunity to teach







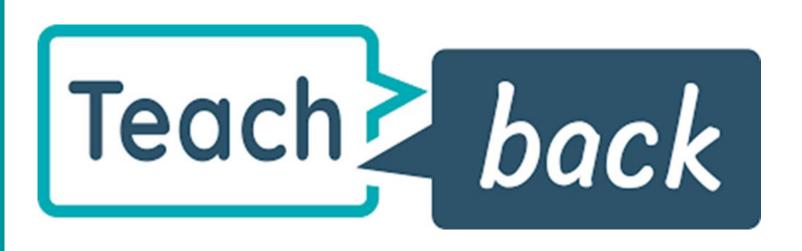
Purposeful

- Post-Operative "Life Skills"
 - Pain management—multi-modal approach, ice/iceman machine (use frozen water bottles without labels)
 - Diet and Hydration
 - Bowel and bladder—anesthesia and narcotics slow things down, sometimes we need extra help
 - Exercise/Therapy—walking to the bathroom is therapy
 - DME—FWW, crutches, braces
 - Respiratory—IS and TCDB



Validate Understanding Throughout

Knowledge should lead to independence







Personable

- Utilize AIDET and smile
- Upbeat steady, thoughtful tone
- Education that is part of our daily conversation/tasks will be better retained









References

- Cosic, F., Kimmel, L., & Edwards, E. (2019). Patient comprehension of common orthopedic terminology. *HLRP: Health Literacy Research and Practice*, *3*(3), e187-e193.
- Jaana-Maija Koivisto, Ira Saarinen, Antti Kaipia, Pauli Puukka, Katri Kivinen, Kirsi-Marja Laine, Elina Haavisto, Patient education in relation to informational needs and postoperative complications in surgical patients, *International Journal for Quality in Health Care*, Volume 32, Issue 1, February 2020, Pages 35–40, https://doi.org/10.1093/intqhc/mzz032
- Rahmani, M., Bahraminejad, N., & Rezaei, M. (2020). The effect of family-oriented educational intervention on postoperative pain after orthopedic surgery. *Iranian journal of nursing and midwifery research*, *25*(1), 47.





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