

Features of general patient care

- Arrangement of examination and small discussion about it , is good method of communication for it is time-saving
- Discussion about examination will have three equation :
 1. The actual nature of examination
 2. The skill and experience of the staff
 3. The condition of the patient

General preliminaries to examination

- In the moment of contact , when the first impression is to be made upon the patient , he must be greeted by name with a smile as if the R.T were pleased to see him.
- An explanation should be given to the patient of the procedure in which he is to play so important a part. This will reassure him and make his co-operation easier.

- It must be ascertained that the right patient has been found and his full name and the examination to be under taken should be checked carefully with the patient and request form.

Moving the patient

- A patient who is not ambulant requires special study . He will reach the X-ray department in any of three forms of transport :
 1. A wheel-chair
 2. A stretcher
 3. The bed which occupies on the ward

Patient on wheel-chair

- The patient on wheel-chair will require assistance . The chair should be brought close to the X-ray table and parallel to it . In controlling wheel-chair there are two points to watch :
 1. It does not slide away from the patient as he rises
 2. He does not tip the whole things forwards by standing on the foot rest



... .. stopped back and turn



Patient on stretcher

- The stretcher patient can be moved on to the X-ray table from the stretcher in a variety of ways according to the patient condition and circumstances
- If he can co-operate well he may be able to move himself if the stretcher placed parallel to X-ray table or if it is of the same height.

- In moving and turning patients , in picking them up and in putting them down , and in assisting them to move themselves, it is important to be as smooth and as gentle in action as possible

- Whenever the X-ray examination is likely to be prolonged in time it is kindness to the patient to make the table a softer bed by the use of radio lucent mattresses .
- before moving the patient it is wise to find out if there is any particular part of the patient which is painful or tender

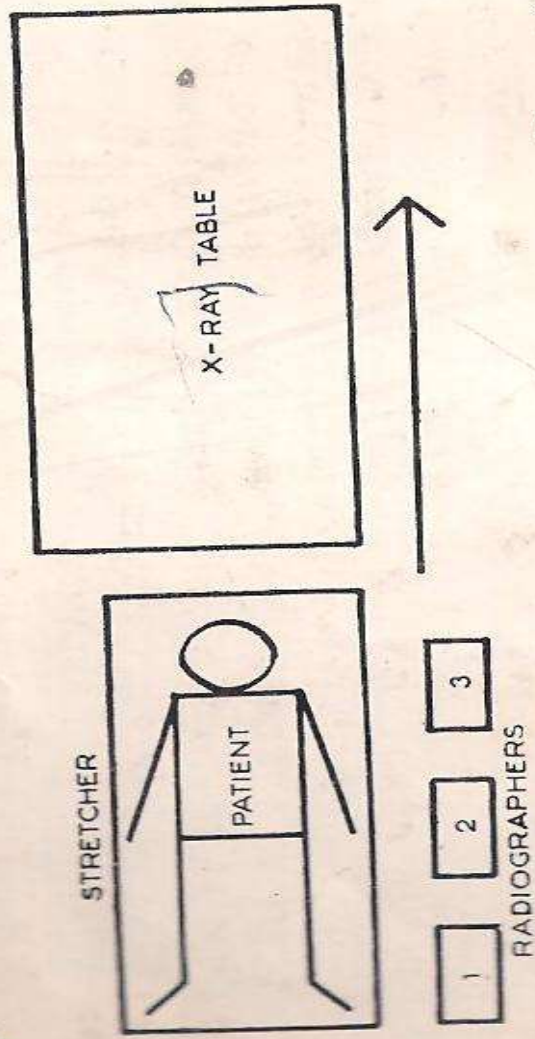
- Tube housing above radiographic tables should be moved out of the way when patients are being moved to protect both patient and R.T from pumping into them.



Patient on bed

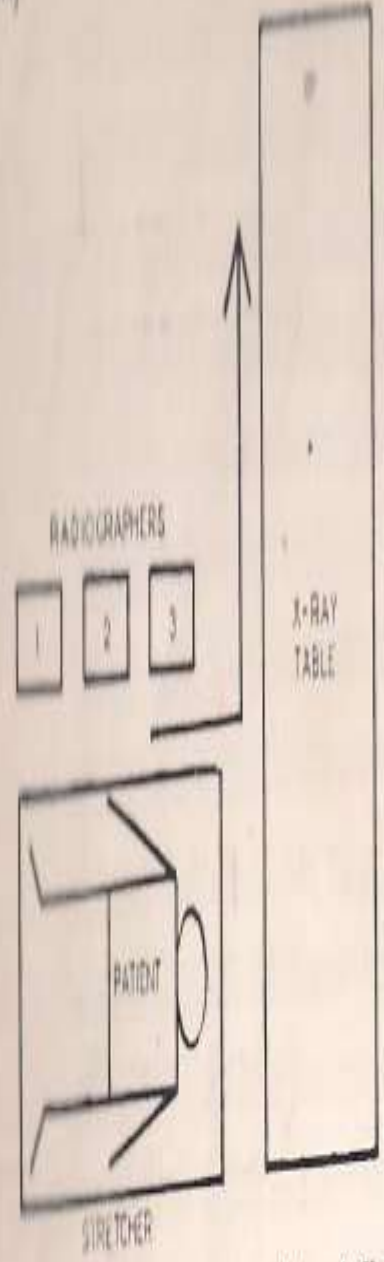
- In some hospitals the working method is to move the patient from the ward to other departments on his bed , unless he is fully ambulated . The patient is often well enough to transfer himself from bed to X-ray table with small measure of supervision and assistance . Several of the methods used for stretcher patient are clearly applicable but it is not practical to use any in which technologists have to stretch across the bed in moving the patient .

2.7)

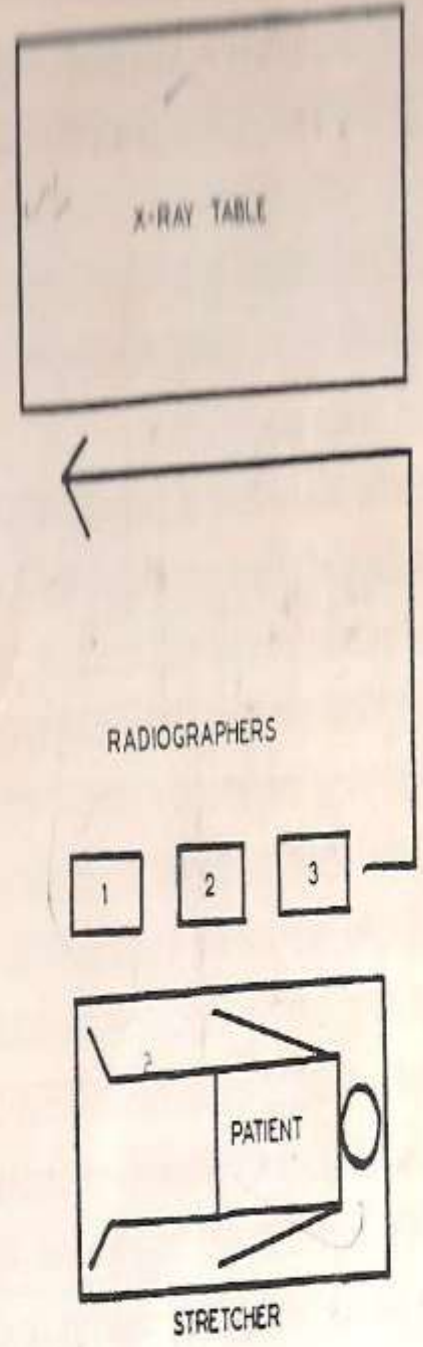


Initial setup of stretcher relative to the X-ray table.

(Figure 2.6)



Stretcher moved towards X-ray table.



Stretcher moved past X-ray table.

Rule to remember when moving patient

- **Give only the assistance that patient needs for comfort and safety.**
- **Always transfer a patient across the shortest distance .**
- **Lock all wheels on beds and wheel-chairs .**
- **Generally it is better to move a patient towards his strong side while R.T assist at his weak side.**
- **The patient should be informed of the plan of the move and his help encouraged**

Care of the skin

- The R.T will have to assume responsibility for protection of the patient skin while he is in the X-ray table , because it is a hard surface and the patient may spend a long period of time .
- The rule of R.T is to help patient to change his position or should change it for him if he is unable to do this . Pressure should be kept off hips , knees and heels

Care of the cast

- Patient will often arrive at the radiology department in a plaster cast of some sort . A fresh cast that is still damp can be compressed and the compression may produced pressure on the patient skin . A cast can also cause circulatory impairment. The care should be as follows :
 1. Handle the cast with the hands opened
 2. Avoid grasping a wet cast with the fingers
 3. Move the extremity of the patient as a whole unit
 4. Check the signs of impaired circulation every fifteen minutes.

The anaesthetized patient

- Some procedures in X-ray department need to use general anesthesia , care of the unconscious patient becoming more frequently part of technologist responsibility . Lack of knowledge can result in a disaster which may occur very quickly .

- **If the patient wishes to talk , reply gently , briefly and reassuringly**
- **Remain with the patient**

Following general anesthesia:

- **Keep the patient in period observation**
- **Check that a clear airways is maintained**
- **If the patient has to lie in supine position , his lower jaw should be held forward**
- **Put the patient in a tilting table and tipped a few degrees head downwards**
- **Check that the patient in semi-prone position, not laying on his arms**
- **The patient color should be observed for cyanosis**

Before anesthesia :

- **Greet the patient by name , give him some word of comfort and confidence**
- **Check carefully the patient identification**
- **Check with the nurse ,the case notes and observation**
- **Be quite , avoid unnecessary noise and conversation**