





Musculoskeletal

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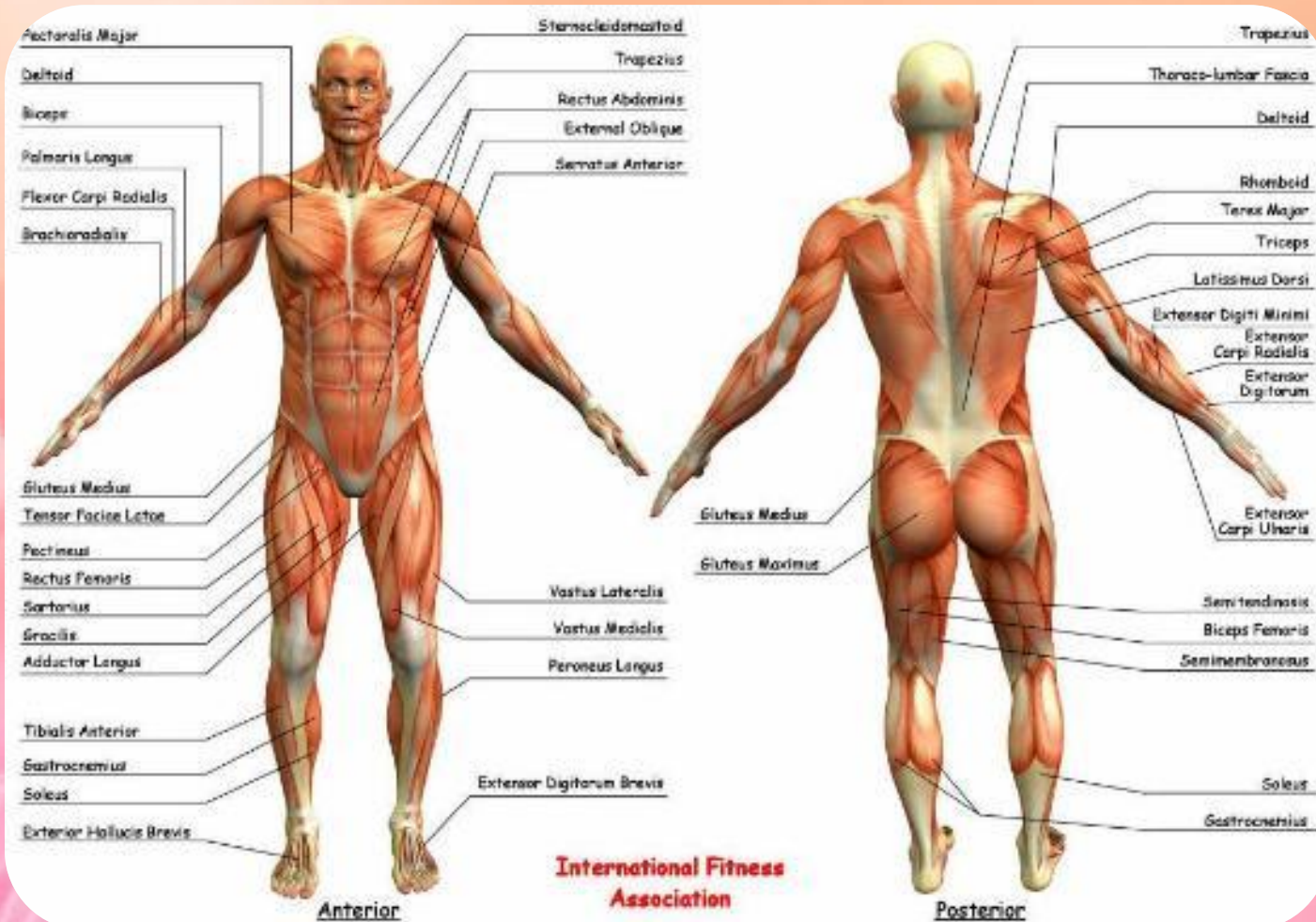
S

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Musculoskeletal



❖ Sistem organ yang membuat manusia mampu untuk bergerak dengan menggunakan sistem muscular dan skeletal

Sistem Muskuloskeletal



Skeletal



Muscular



**Joints, ligaments and
tendons**



Skeletal



Tulang

Struktur

Fungsi

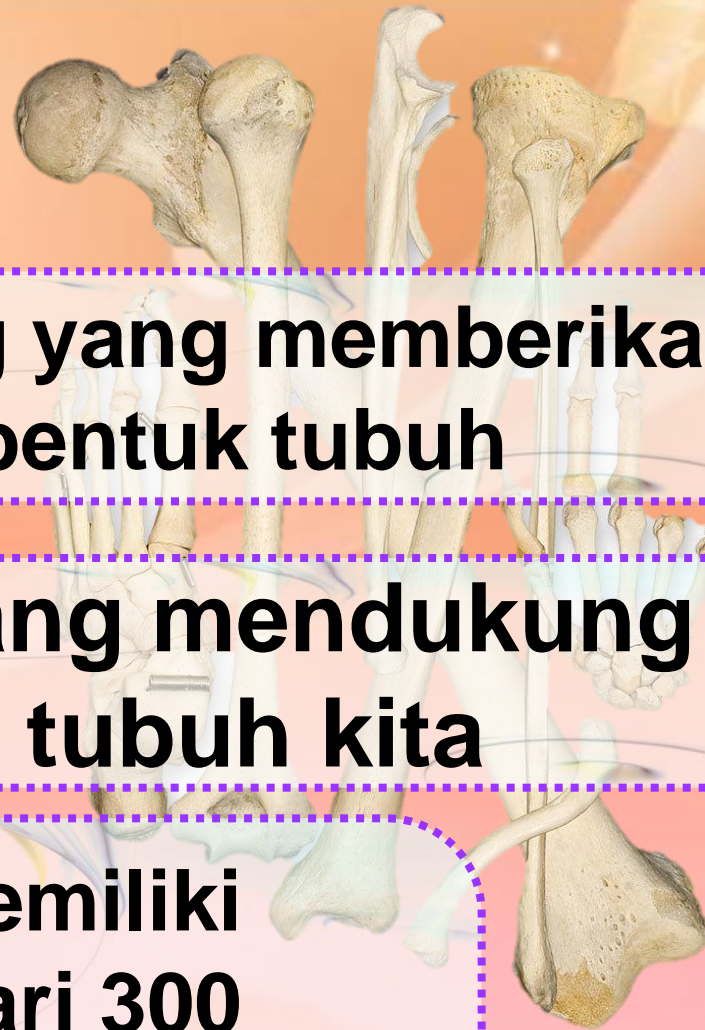
BONES



❖ Tulang yang memberikan bentuk tubuh

❖ Tulang mendukung tubuh kita

❖ Bayi memiliki lebih dari 300 tulang dan dewasa memiliki 206 tulang



Jenis tulang

Dibawah kulit, ada 5 jenis tulang dalam tubuh manusia. Mereka adalah . . .



Tulang Panjang



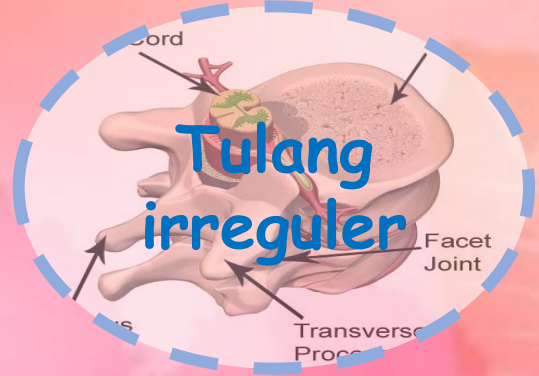
Tulang Pendek



Tulang datar



Tulang Irreguler



Tulang Sesamoid



- ❖ Includes having a body which is longer than it is wide.
- ❖ They are usually somewhat curved for strength.



The femur -
a long bone



**Tulang
Panjang**

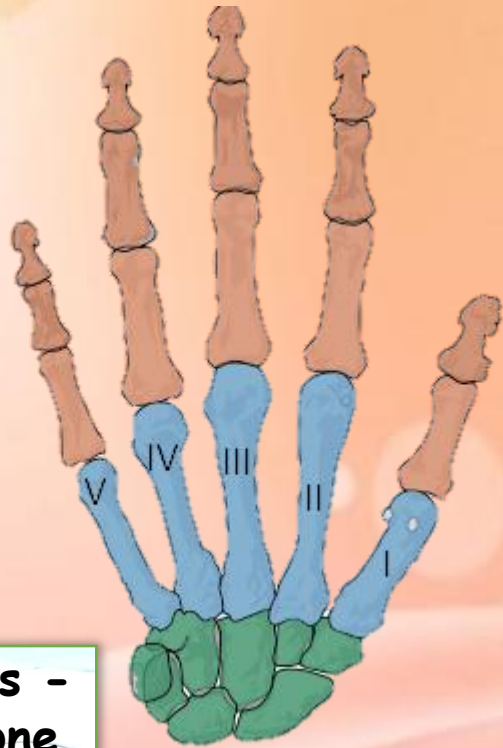


Tibia



Fibula

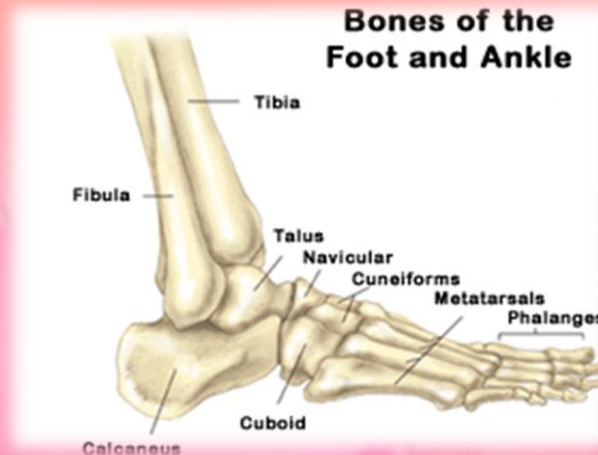
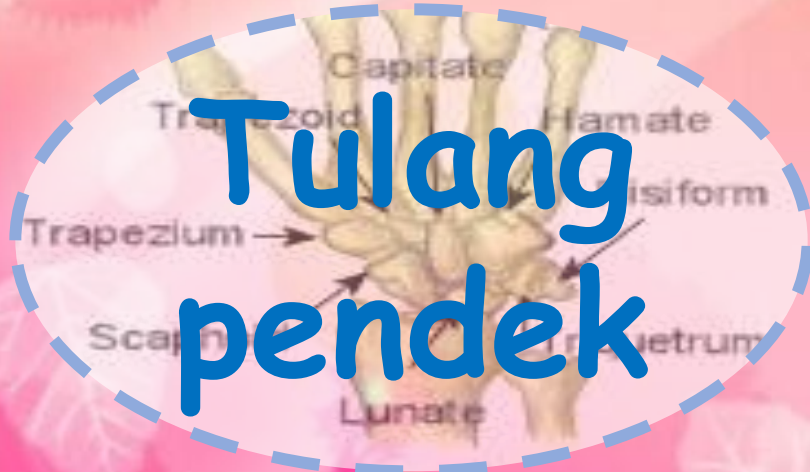
Yang termasuk
didalam tulang
panjang : femur,
tibia, fibula,
humerus, ulna
and radius



The carpals - a short bone

- ❖ Roughly cube-shaped and have approximately equal length and width
- ❖ Providing support and stability with little movement.

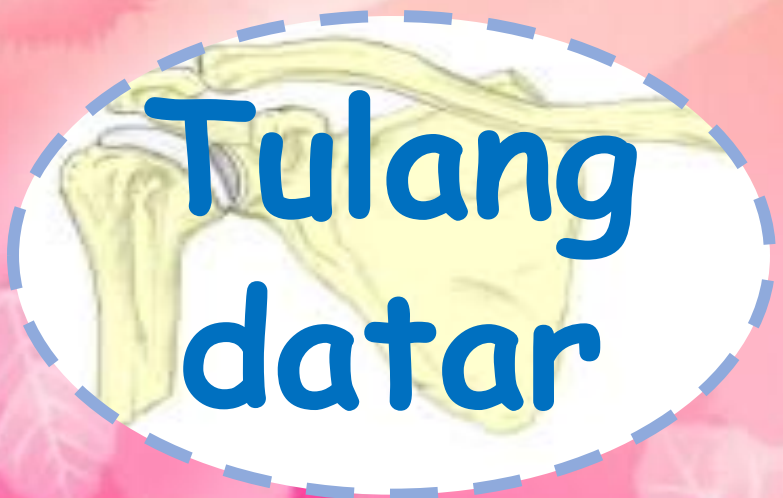
Yang termasuk :
ankle and wrist bones



❖ a thin shape/structure and provide considerable mechanical protection and extensive surfaces for muscle attachments.



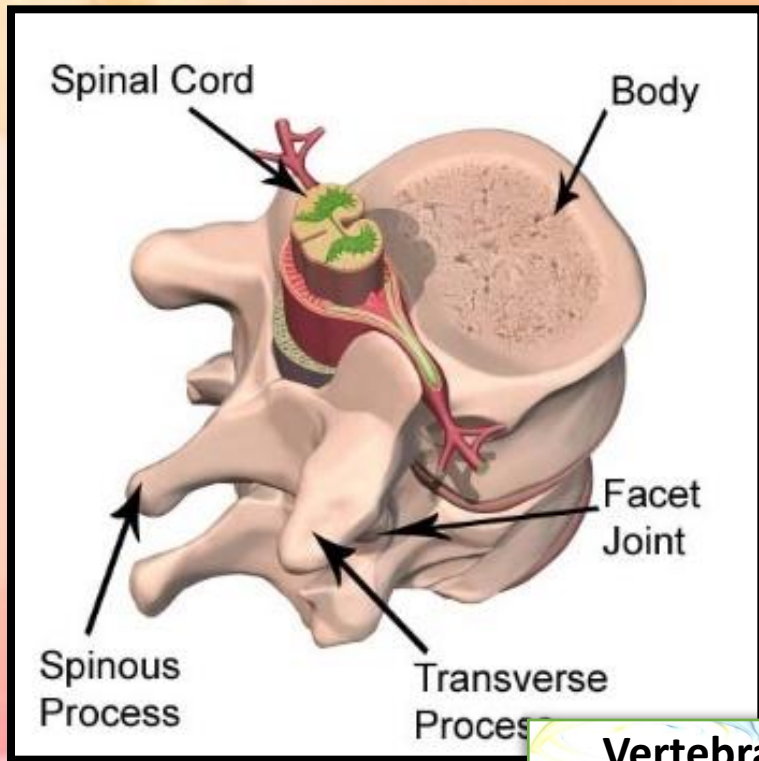
The scapula - a flat bone



Tulang datar

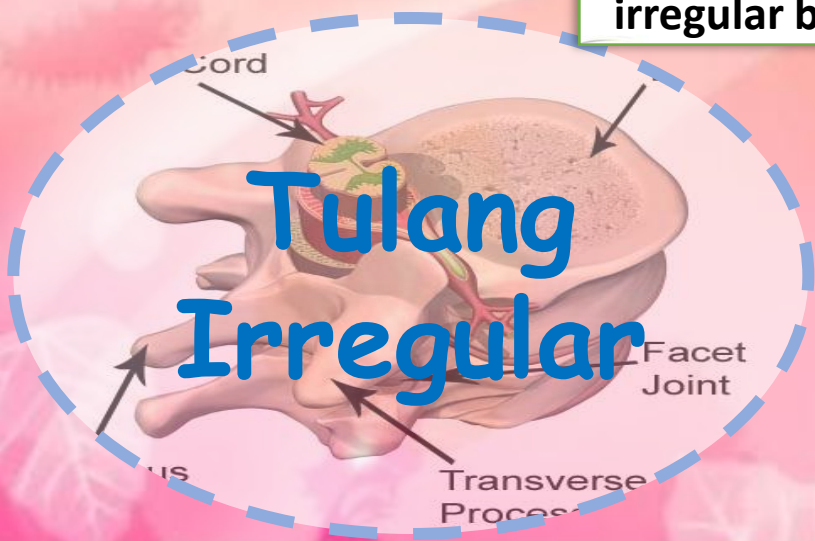


Yang termasuk didalamnya : cranium (skull), the ilium (pelvis), sternum and the rib cage

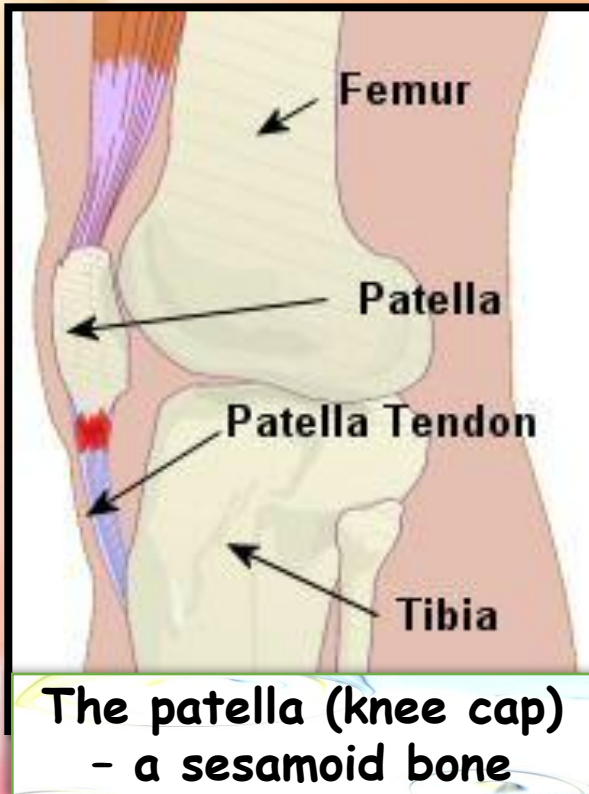


Vertebrae -
irregular bones

- ❖ Bones in the body which do not fall into any other category, due to their non-uniform shape.
- ❖ Consist of cancellous bone, with a thin outer layer of compact bone.



Yang termasuk:
Vertebrae, Sacrum
and Mandible (lower
jaw).



- ❖ Short or irregular bones, imbedded in a tendon.
- ❖ It passes over a joint which serves to protect the tendon.



Yang termasuk : the patellae (kneecaps).

FUNCTIONS

What do you think we

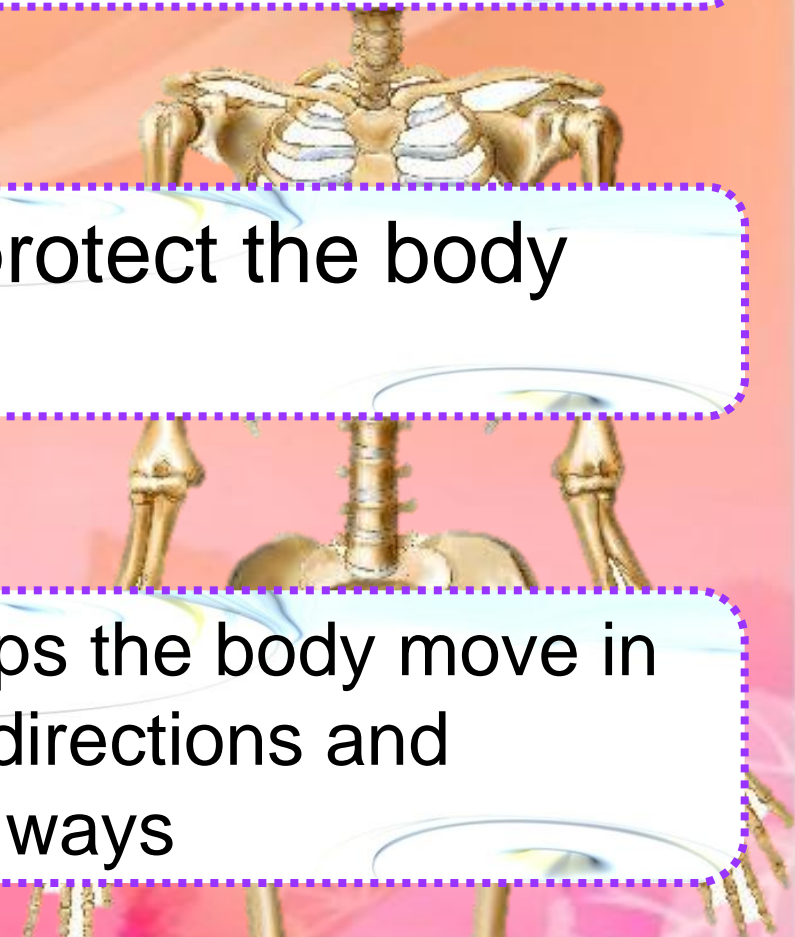
- ❖ Bones provide the framework for the body.



- ❖ Bones protect the body organs.

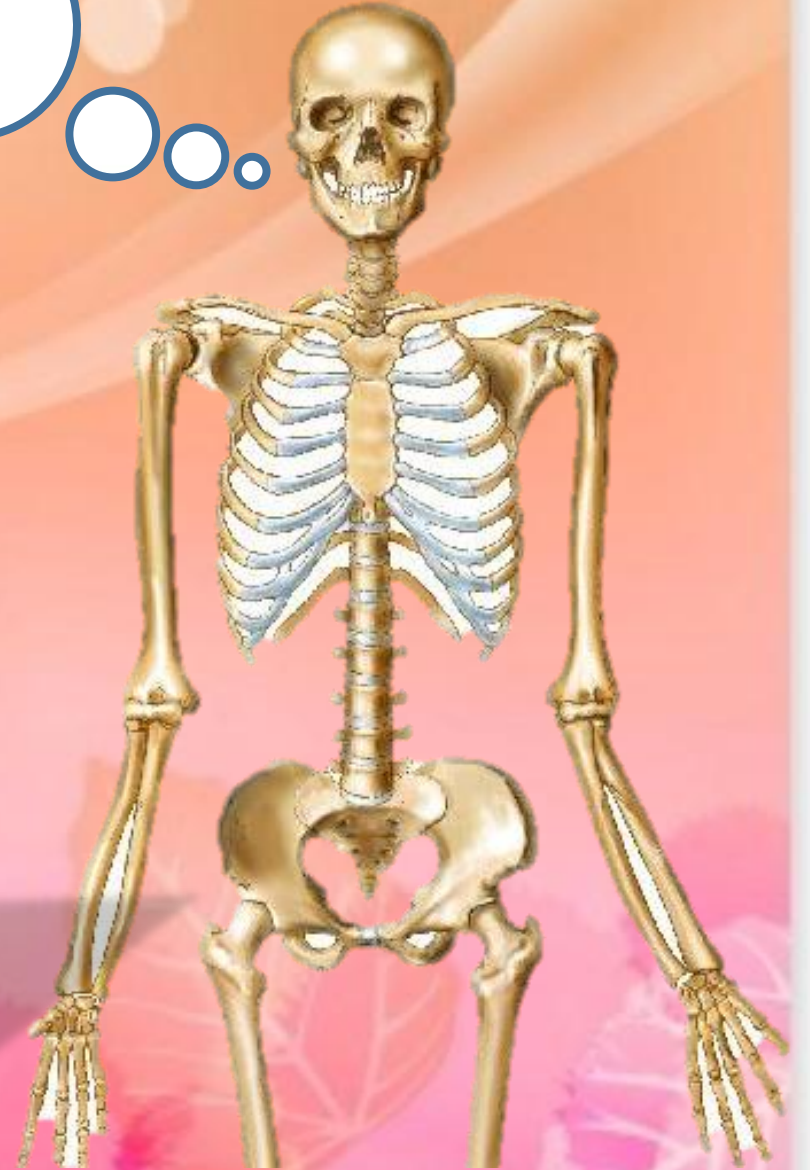
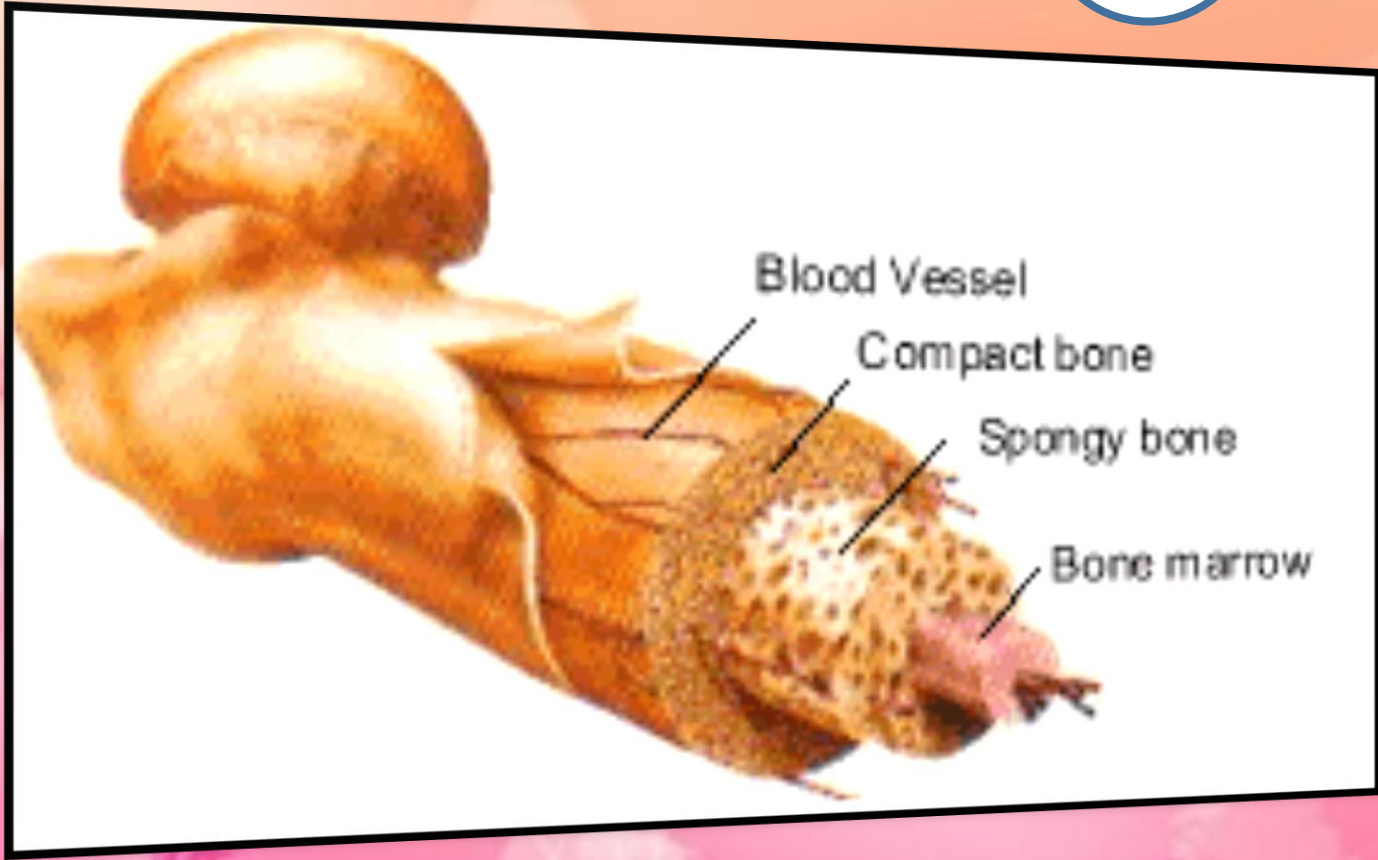



- ❖ Bone helps the body move in different directions and different ways



STRUCTURE

What is your bone made of?

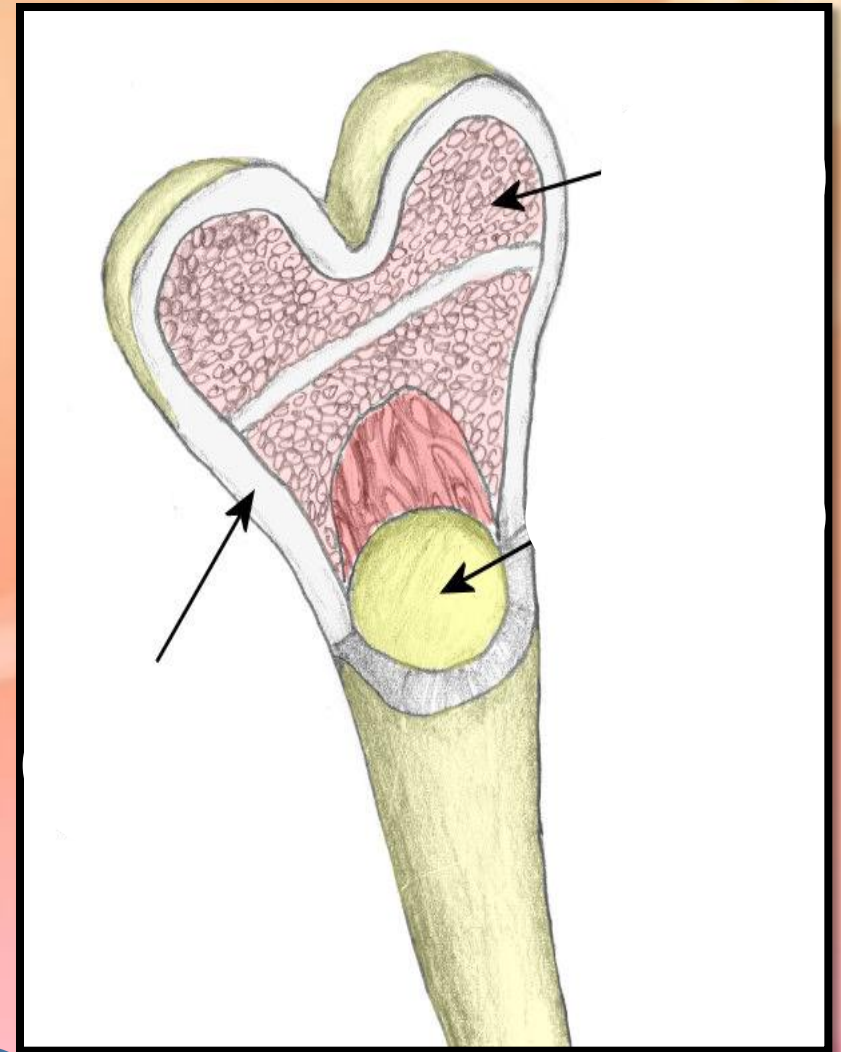




Tulang memiliki lapisan luar yang keras atau compact bone, yang sangat kuat, padat dan solid

Didalam terdapat lapisan spongy bone, yang seperti sarang lebah, ringan dan sedikit fleksibel.

Di tengah, terdapat beberapa tulang berbentuk jeli seperti bone marrow, dimana darah diproduksi di sini





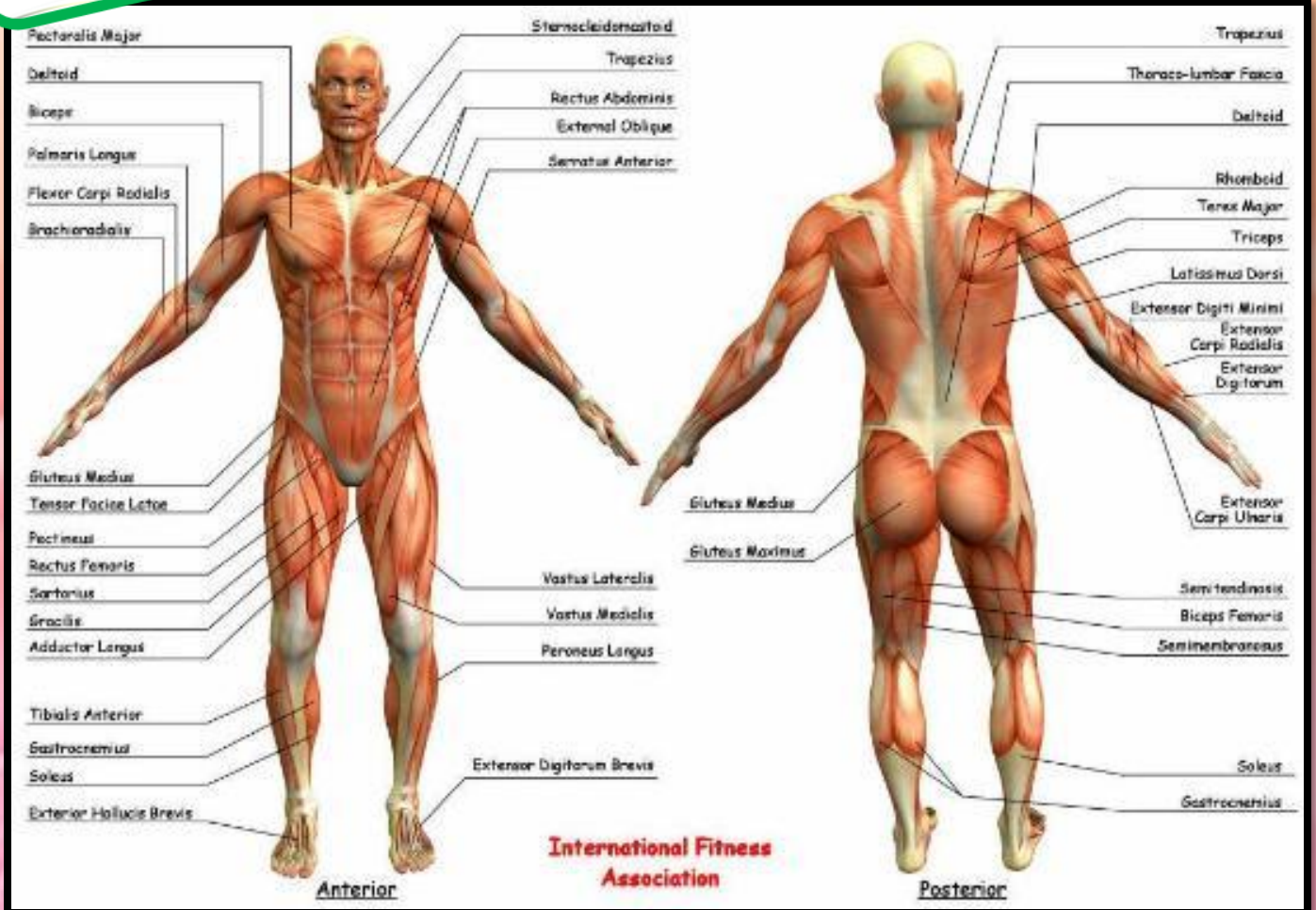
Muscular

MUSCLES

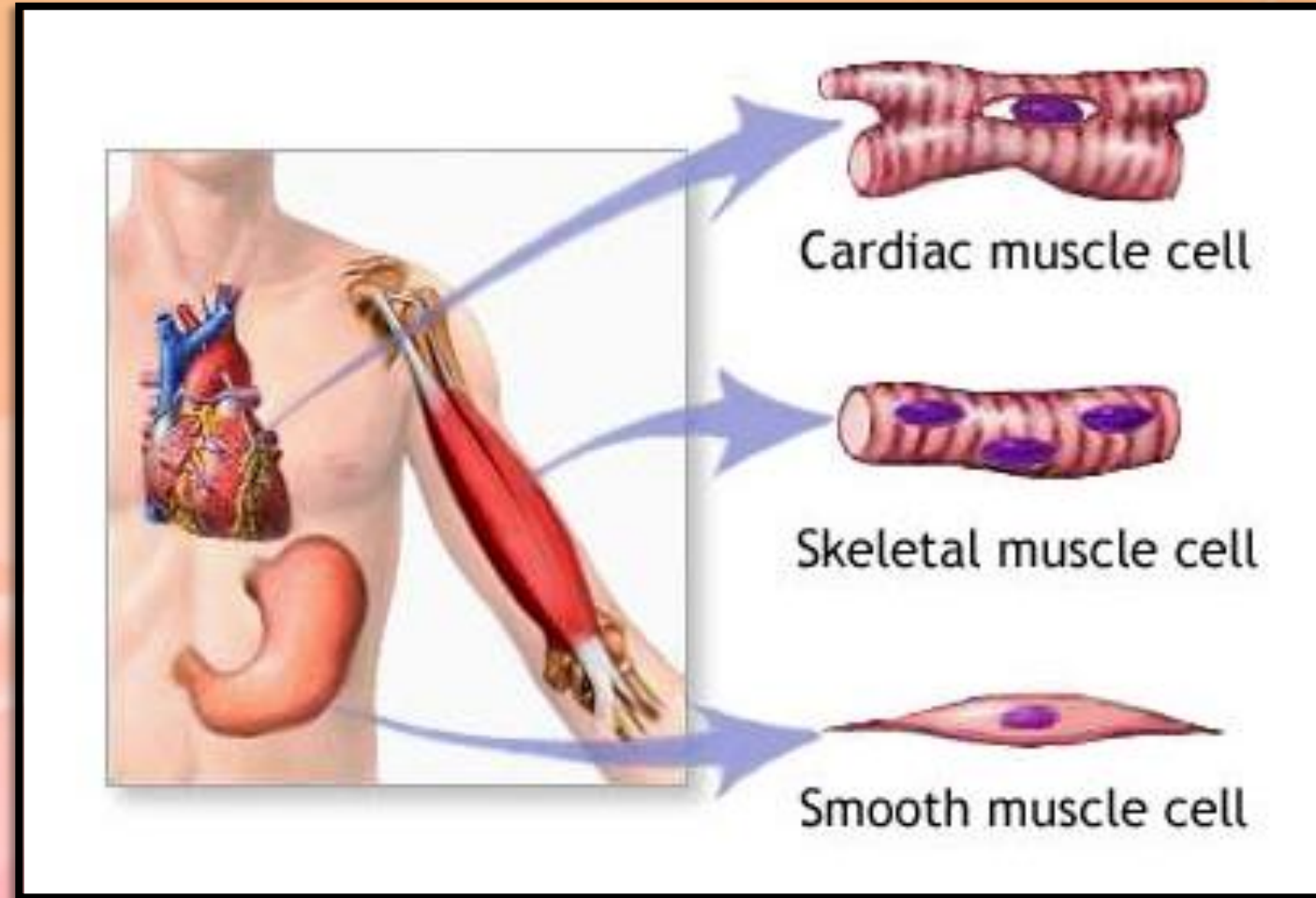


Otot juga dibutuhkan untuk pergerakan. Massa otot solid, jaringan elastis yang mendorong tulang kita ketika bergerak

TYPES



T Y P E S



Smooth

Cardiac

Skeletal

- ❖ Terlibat dalam pergerakan involunter seperti otot mata
- ❖ Tidak ada striasi dan memiliki sel yang digambarkan berbentuk spindel.

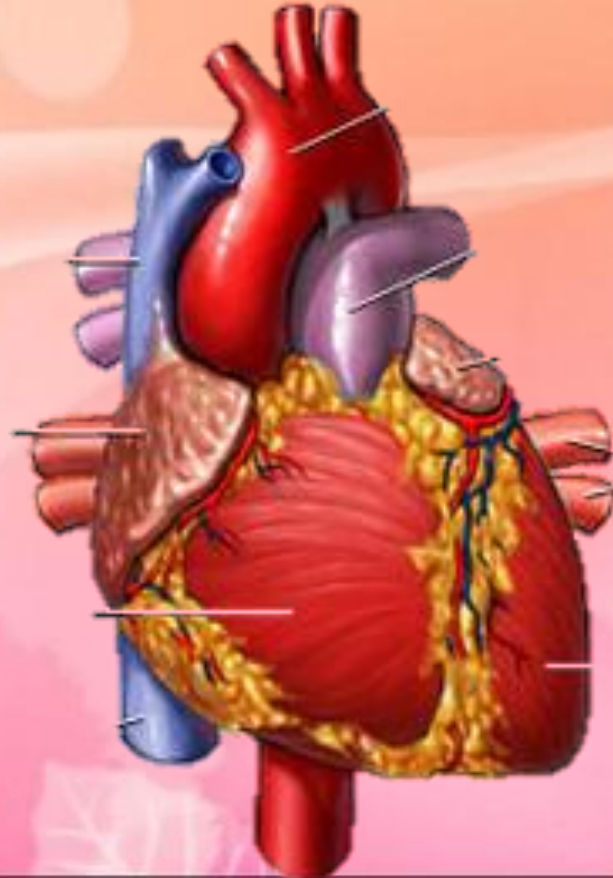


Yang termasuk :
stomach and
bladder



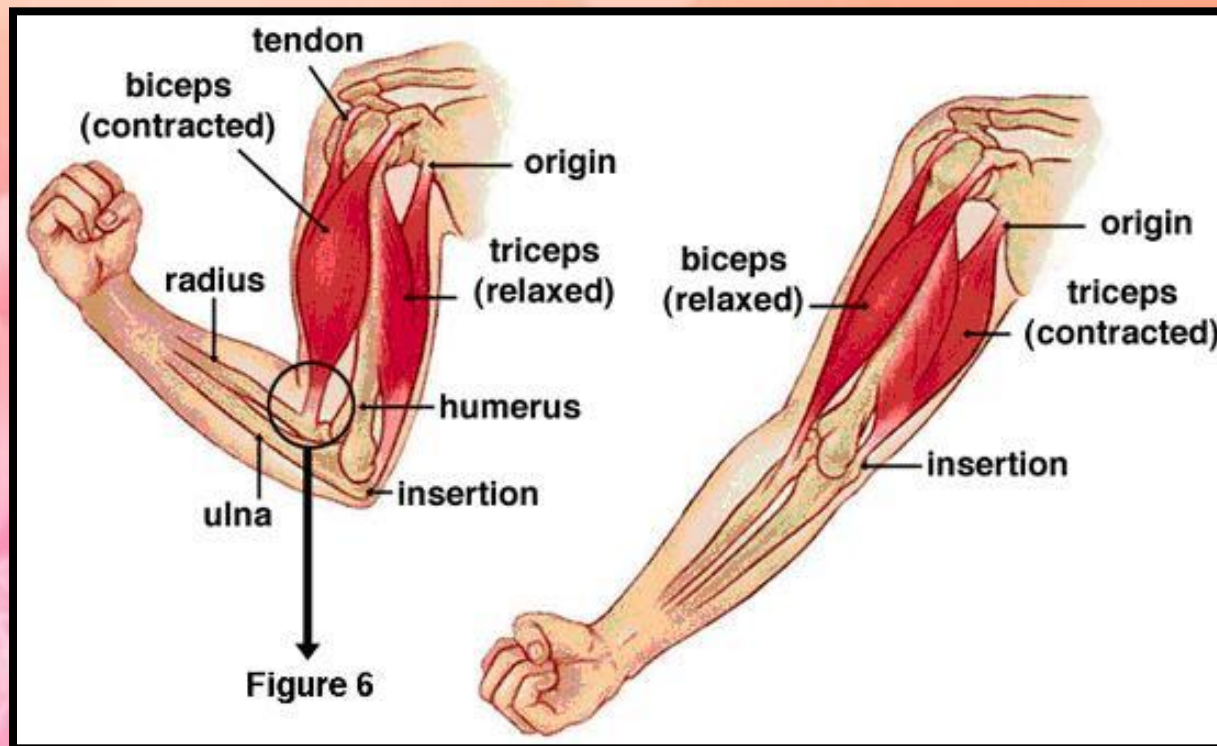
**Smooth
Muscle**

- ❖ Membuat lapisan jantung yang tebal dan dalam.
- ❖ Memungkinkan otot jantung untuk dipompa secara terus menerus tanpa pernah beristirahat.
- ❖ Meningkatkan sirkulasi yang diperlukan untuk menopang seluruh tubuh



**Cardiac
Muscle**

- ❖ Disebut otot lurik
- ❖ bagian dari sistem muskuloskeletal, yang menghubungkan otot dan tulang untuk gerakan tubuh.
- ❖ Terikat pada kedua ujung tulang oleh tendon.



**Skeletal
Muscle**

Joints, ligaments and tendons



Joints

Ligaments

Tendons

Back

GLIDING JOINTS

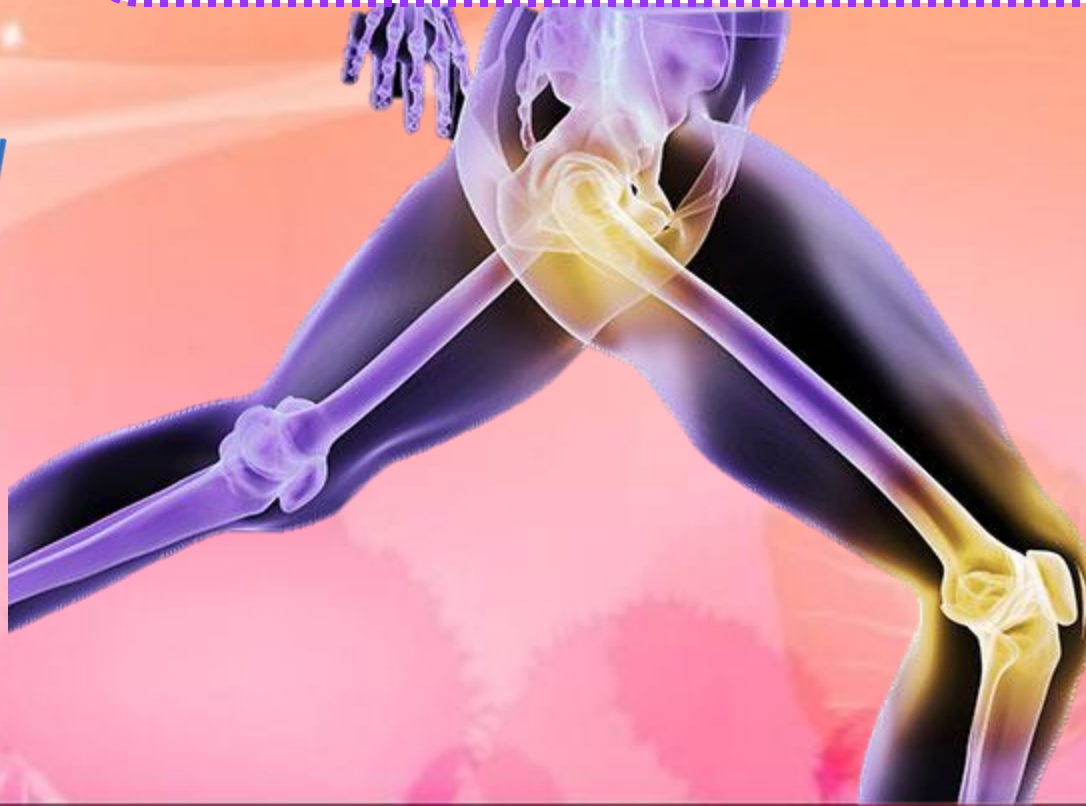


HINGE JOINTS

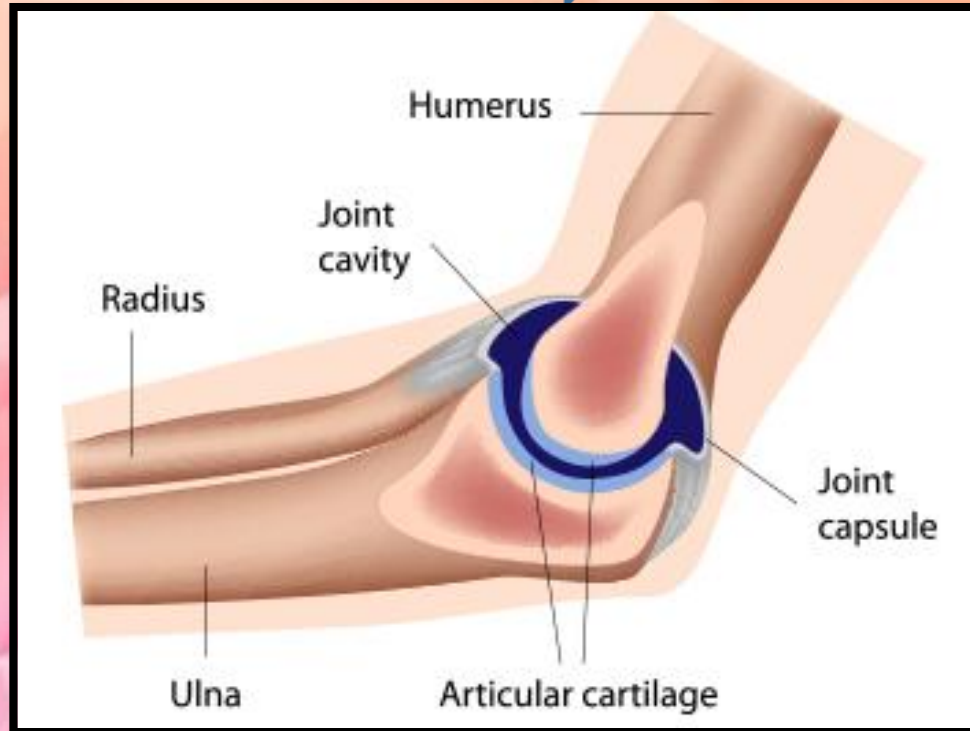
- ❖ Terletak di antara cThe ones between the carpals of the wrist, are found where bones meet as flat surfaces
 - ❖ Allow for the bones to glide past one
- SHOULDER and any
HIP Joint

Joints

❖ Are where two or more bones meet; They allow you to move.



SADDLE JOINTS

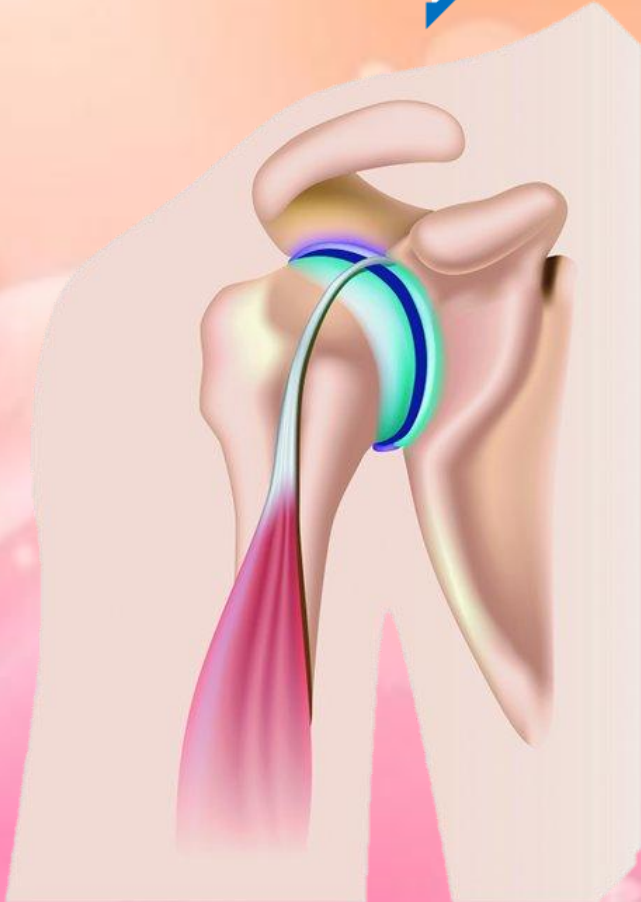


- ❖ Such as the elbow and knee, limit movement in only one direction so that the angle between bones can increase or decrease at the joint.

between the first and second metacarpals and the first metacarpal and the trapezium. This joint limits movement by allowing the bones to pivot along two axes.

HINGE JOINTS

SHOULDER and HIP Joint



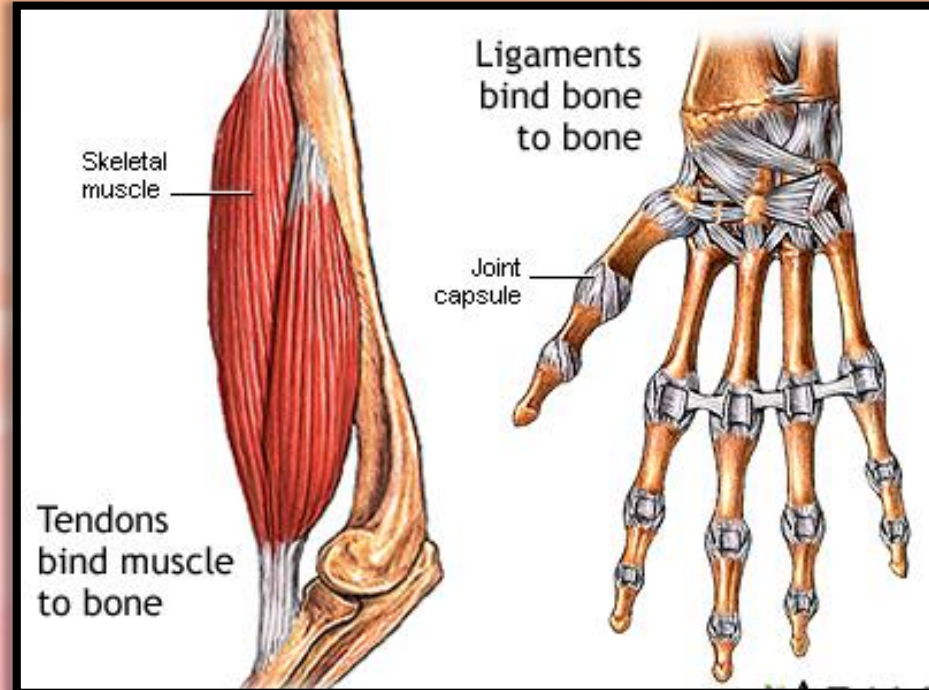
- ❖ Form the only ball and socket joints in the body.
- ❖ Have the freest range of motion of any joint in the body – they are the only joints that can move in a full circle and rotate around their axis.

Functional Classification of Joints

Type	Description	Examples
Synarthrosis	Immovable joint	Skull sutures Epiphyseal plates Joint between first rib and manubrium of sternum
Amphiarthrosis	Slightly movable joint	Vertebral joints Joint of the symphysis pubis
Diarthrosis	Freely movable joint	Joints of the extremities Shoulder joints Hip joints

Fibrous
connective
tissue
which
attaches
muscle to
bone.

Tendons



Ligaments

Fibrous
connective
tissue
which
attaches
bone to
bone

Test	Purpose	Nursing Interventions
Arthrocentesis	Obtain synovial fluid from a joint for diagnosis or to remove excess fluid.	After the procedure, apply a compression dressing and tell the patient to report any bleeding and leakage of fluid.



Test	Purpose	Nursing Interventions
Arthroscopy	<ul style="list-style-type: none"><li data-bbox="563 254 1319 896">✓ Used to perform surgery and diagnose diseases of the patella, meniscus, and synovial and extrasynovial membranes.<li data-bbox="563 925 1319 1353">✓ Fluid may be drained from the joint and tissue removed for biopsy.	<ul style="list-style-type: none"><li data-bbox="1386 254 2397 682">✓ If general anesthesia is used, tell the patient not to eat or drink fluids after midnight prior to the procedure.<li data-bbox="1386 711 2397 1353">✓ Following the procedure, assess for bleeding and swelling, apply ice to the area if prescribed, and instruct patient to avoid excessive use of the joint for 2 to 3 days.

Test

Purpose

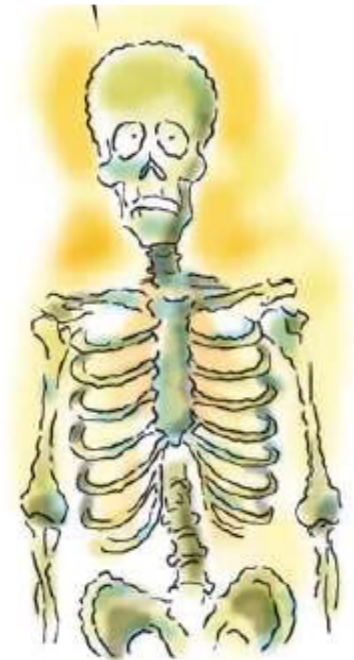
Nursing Interventions

Bone density (BD)

- Dual energy x-ray absorptiometry (DEXA)
- Quantitative ultrasound (QUS)
- Bone mineral density (BMD)
- Bone absorptiometry

- ✓ Evaluate bone mineral density and to evaluate degree of osteoporosis. DEXA can calculate the size and thickness of bone.
- ✓ **Normal Value: 1 standard deviation below peak bone mass.**

- ✓ Instruct patient to remove all metal objects from the area to be scanned.



Test

Purpose

Nursing Interventions

Bone scan

(Nuclear medicine scans)



- ✓ Uptake is increased in osteomyelitis, osteoporosis, cancers of the bone, and in some fractures.
- ✓ Uptake is decreased in avascular necrosis.

- ✓ No special preparation is needed; tell patient to increase oral fluids after the test to aid in excretion of the radioisotope.

Test	Purpose	Nursing Interventions
<p>Computed tomography (CT) scan—long bones and joints, spine</p>	<ul style="list-style-type: none"> ✓ Provides a three dimensional picture used to evaluate musculoskeletal trauma and bony abnormalities. ✓ CT of the spine can identify tumors, cysts, vascular malformations, and herniated intervertebral disk. 	<ul style="list-style-type: none"> ✓ If contrast dye is used, assess for allergy to iodine, seafood, or x-ray dye. ✓ Assess medications: oral hypoglycemic agents are contraindicated for use with iodinated contrast. ✓ Have spine x-rays available. If scheduling myelogram and spine CT, patient should have myelogram first.

Test	Purpose	Nursing Interventions
<p>Computed tomography (CT) scan—long bones and joints, spine</p>		<ul style="list-style-type: none"> ✓ If long-bone and joint CT, nuclear medicine tests to locate “hot spots” should be done before CT. ✓ After the test, if contrast dye was used, monitor for delayed allergic reaction (rash, itching, headache, vomiting) and instruct patient to increase fluid intake.

Test

Purpose

Nursing Interventions

Skeletal x-ray

- ✓ Identify and evaluate bone density and structure.

- ✓ Ask women if they are pregnant; x-rays should be avoided during the first trimester.
- ✓ No special preparation is needed for skeletal x-rays.



Test	Purpose	Normal Value
Alkaline phosphatase (ALP)	Identify bone diseases. Increased in bone cancer, Paget's disease, healing fractures, rheumatoid arthritis, osteoporosis.	42–136 unit/L ALP1 20–130 unit/L ALP2 <i>(increases slightly with aging)</i>
Calcium (Ca)	Monitor calcium levels and detect calcium imbalances. Decreased with lack of calcium and vitamin D intake, and malabsorption from the gastrointestinal tract. Increased in bone cancer and multiple fractures.	4.5–5.5 mEq/L or 9–11 mg/dL (serum)

Test	Purpose	Normal Value
Phosphorus (P), phosphate (PO ₄)	To assess phosphorus levels. Increased with bone tumors and healing fractures.	1.7–2.6 mEq/L or 2.5–4.5 mg/dL
Rheumatoid factor (RF)	To diagnose rheumatoid arthritis (RA) (positive for RA at > 1:80). Also increased in lupus erythematosus and scleroderma.	< 1:20 titer

Test	Purpose	Normal Value
Uric acid	Diagnose and monitor the treatment of gout. Panic level considered > 12 mg/dL.	Male: 3.5–8.0 mg/dL Female: 2.8–6.8 mg/dL
Human leukocyte antigen	Diagnose diseases such as juvenile RA or ankylosing spondylitis..	Match or no match; no normal values (HLA)
Creatine kinase (CK)	Diagnose muscle trauma or disease. Increased in muscular dystrophy and traumatic injuries (specifically, CPK-MM isoenzyme).	94%–100%

Category

What to Ask

Rationale

Physical Examination

Inspect, palpate, and observe range of motion (ROM) of affected areas.

Altered gait, tone, size, shape, posture, contractures, deformities, ROM, pain, and effects on ADLs can be determined.

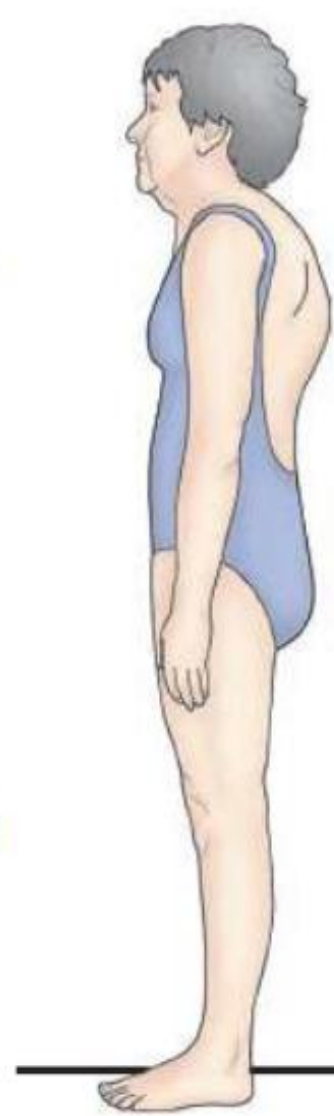
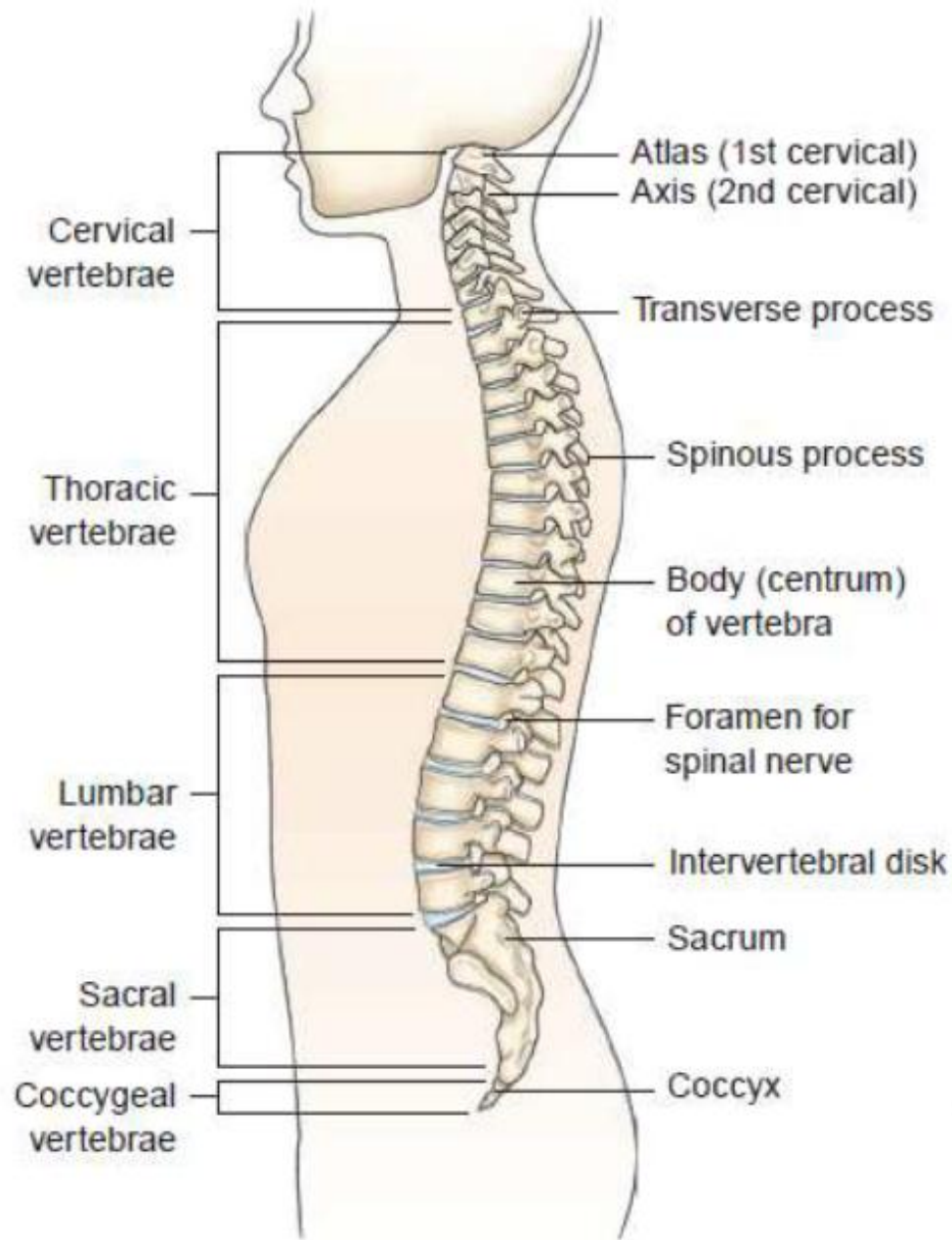
Assess color, warmth, circulation, and movement of affected areas.

Nerve function, sensation, movement, weakness, and the potential development of compartment syndrome can be determined.

Palpate all pulses below involved area.

Alterations may indicate altered vascular integrity of affected area or demonstrate developing compartment syndrome.





A Kyphosis



B Lordosis



C Scoliosis

MUSCLE GRADING SCALE

Scale	Assessment Description
0	(No visible) contraction; paralysis
1	Can feel contraction of muscle but there is no movement of limb
2	Passive ROM
3	Full ROM against gravity
4	Full ROM against some resistance
5	Full ROM against full resistance

NEUROVASCULAR ASSESSMENT

Monitor

Report

Color

Pallor, cyanosis, redness, or discoloration

Temperature

Unusual coolness or warmth

Pain

Pain that is worse on passive motion; pain that no longer responds to analgesics

Movement

Alterations in movement

Sensation

Alterations in feeling; tingling or paresthesias

Pulses

Diminished or absent distal pulses

Capillary refill

Nail bed that does not blanch in 3–5 seconds

