

Nursing Service Guidelines General

Title: MY01: Continuous Compartment Pressure Monitoring

Responsibility: The trained and competent physician, Registered Nurse (RN), Licensed

Practical Nurse (LPN), Patient Care Technician (PCT), Nursing Assistant

(NA), Emergency Medical Technician (EMT)

Purpose of Guidelines: Acute compartment syndrome (ACS) most commonly occurs in the

extremities because of trauma, including fracture or crushing injury, or other conditions resulting in intercompartmental swelling. Continuous Compartment Pressure Monitoring remains the gold-standard for diagnosis if a fasciotomy is needed to treat the ACS. The MY01 device will be inserted

by a physician to continuously monitor the compartment pressure.

Procedure: The compartment pressure is monitored and measured in millimeters

of mercury (mm Hg) and is to be documented in the electronic medical

record as follows.

1) After the MY01 device has been inserted by a privileged physician, hourly pressure values will be documented in the electronic medical record.

- 2) If an increase of 5-10 mm Hg occurs within one hour, immediately contact the physician.
- 3) If the MY01 device stops working, stops displaying pressure values, or if the pressure probe becomes dislodged from the patient, contact the physician.
- 4) The MY01 device can be inserted for up to 18 hours. On the 17th hour, please contact the physician and inform them that the device has been inserted for 17 hours. At 18 hours, the MY01 device is to be discontinued by a physician.

Reviewed by: Nancy Gauger, MSN, RN, Staff Development Coordinator

Andrew P. Fox BBA, HCA, BSN, BS, RN Orthopedic Administrative Director

Approved: Reviewed: Revised:

Reviewed by Policy & Standard Committee,