

Impaired physical mobility

Nr.	Nursing Diagnosis	Date	Nursing Intervention/s and tasks	Sign.
	<p><b>Impaired physical mobility</b></p> <p><b>Related factors:</b></p> <p>Altered cellular metabolism                      Body mass index above 75th age-appropriate percentile                      Cognitive impairment                      Decreased muscle strength, control and/or mass                      Deformities                      Depressive mood state or anxiety                      Developmental delay                      Discomfort, pain                      Fractures                      Intolerance to activity/decreased strength and endurance                      Joint stiffness or contractures                      Lack of knowledge regarding value of physical activity                      Lack of physical or social environmental supports                      Limited cardiovascular endurance                      Loss of a limb                      Loss of integrity of bone structures                      Medications                      Musculoskeletal, neuromuscular impairment                      Neuromuscular impairment                      Prescribed movement restrictions                      Reluctance to initiate movement                      Sedentary lifestyle, disuse, deconditioning                      Selective or generalized malnutrition                      Sensoriperceptual impairments                      Surgical procedure</p> <p><b>Symptoms / Risk factors:</b></p> <p>Decreased muscle strength and control                      Decreased reaction time                      Difficulty turning                      Engages in substitutions for movement (e.g., increased atten                      Gait changes (e.g., decreased walking speed, difficulty init                      Limited ability to ambulate or move in bed                      Limited ability to perform fine motor skills                      Limited ability to perform gross motor skills                      Movement induced shortness of breath                      Postural instability during performance of routine activitie                      Reluctance to attempt movement                      Slowed movement                      Tremors                      Uncoordinated or jerky movements                      Verbal or coded report of pain</p> <p><b>Outcome / Goal:</b></p> <p>Ability to maintain ADL                      Ability to move within prescribet limits (while in bed)                      Demonstrate techniques that enable resumption of activites                      Patient maintains optimal mobility within limitations</p>		<p><b>Activity Therapy</b>                      Assist with ADL as needed                      Implement activy program with patient and personel(therapist</p> <p><b>Amputation Care</b>                      Assist with specified range-of-motion (ROM)                      Demonstrate/assist with transfer techniques and use of mobility aids</p> <p><b>Body Mechanics Promotion</b>                      Assist with activity or progressive ambulation                      Encourage participation in ADLs within individual limitadions</p> <p><b>Energy Management</b>                      Administer Whole blood as indicated                      Allow for rest periods between care</p> <p><b>Environmental Management</b>                      Adjust environment to promote patients comfort                      Ascertain and validate client's perceptions</p> <p><b>Exercise Promotion: Strength Training</b>                      Encourage ambulation as tolerated without causing exhaustion                      Explain the purpose and activity program</p> <p><b>Exercise Therapy: Ambulation</b>                      Assess enviromental factors for safety                      Assess the patient's previous level of physical activity</p> <p><b>Exercise Therapy: Joint Mobility</b>                      Assess the patient's previous level of physical activity                      Consider administrating pain medication before exercise                      Encourage exercise as prescribed to affected joint                      Encourage participation in ADLs.</p> <p><b>Pain Management</b>                      Acknowledge reality of residual limb pain and phantom pain                      Administer medication as prescribet                      Administer O2 as orderd                      Asses cardiac status during pain occurrence: vital signs, skin changes and EC</p> <p><b>Positioning</b>                      Demonstrate and assist with transfer techniques                      Determine upper body strength and need for equipment to assist with ADLs                      Encourage use of analgesic before position change                      Have the patient sit on the side of the bed for several min. before out of bed                      Inspect skin; observe for reddened areas.                      Maintain affected joint in prescribed position and body in alignment when in be                      Protect operative heel, elevating whole length of leg with pillow                      Use trapeze in bed to assist in mobility</p> <p><b>Teaching: Prescribed Activity/Exercise</b>                      Assist patient in performing self-care activities                      Do "Carpal Tunnel Syndrome Exercises" :                      Encourage activity as tolerated, rest as needed                      Encourage participation in ADLs within individual limitadions                      Encourage patient to perform range of motion to all joints daily                      Encourage the patient to dress daily                      Encourage the family to supervise and assist with ambulation as needed                      Extend and stretch both wrists and fingers acutely (as hand-stand ). Count for 5                      Implement activy program with patient and personel(therapist</p>	