

# (IMPERFORATE ANUS) NURSING CARE PLAN

## Medical Diagnosis: Imperforate Anus

Subjective Data:	Nursing Intervention (ADPIE)	Rationale
<ul style="list-style-type: none"> <li>• Reports of passing stool from the vagina, scrotum, urethra or other abnormal location (may indicate a fistula has formed)</li> <li>• Report of no bowel movement after birth</li> </ul>	Perform complete physical assessment	This condition is usually diagnosed within the first 24 hours of life. Note if the patient has anal opening and if it appears to be located in the anatomically correct location.
	Observe for passage of meconium stools	Patients with imperforate anus are either unable to pass stool (meconium) at all, or it is passed from an inappropriate location. For female infants, carefully note if the meconium is passed from anus, vagina or urethra. For male patients, the anal opening may be located below the penis or the scrotum.
	Monitor vital signs	Patients will often have other congenital malformations. Monitor heart rate and rhythm, respiratory effort and rate and temperature. Axillary temperature may be more appropriate instead of rectal.
<b>Objective Data:</b> <ul style="list-style-type: none"> <li>• No anal opening</li> <li>• Anal opening in the wrong place</li> <li>• Abdominal distention</li> <li>• Failure to pass stool (meconium)</li> </ul>	Prepare patient for diagnostic tests and surgery.	Patient will likely undergo several tests including imaging and labs prior to the determination for surgery. Ultimately, the patient may require a colostomy to be placed.
	Provide colostomy care if appropriate	Provide colostomy care per facility protocol and as needed. Educate parents to care for patient with colostomy. Assess the stoma for bleeding or signs of infection.

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	Nursing Intervention (ADPIE)	Rationale
	Monitor skin integrity and provide wound care following surgery.	The passage of stool from incorrect locations can lead to rapid skin breakdown. Following surgery, assess the incision site and provide wound care per facility protocol. Observe for signs of infection.
	Provide education for parents	<ul style="list-style-type: none"><li>• Parents will often be very anxious about their baby's condition. Help by providing resources and information or contacts for support groups.</li><li>• Educate parents on how to care for the patient post-surgery and at home.</li><li>• As the child grows, constipation may be an issue and a longer period may be required for toilet training.</li><li>• Encourage good nutrition with high fiber foods.</li></ul>