## (CLUBFOOT) NURSING CARE PLAN

Medical Diagnosis: Clubfoot		
Subjective Data:	Nursing Intervention (ADPIE)	Rationale
• Soreness of leg (post-treatment)	Perform complete assessment, noting the severity of the defect	Note: inward vs outward. Severity of the foot. Color, calf size bilaterally.
	Provide education to parents on condition	Provide information from what the defect is, causes, and treatments. Helps alleviate any anxiety or worry they may have
	Apply casting or braces as required for non-surgical treatment	This type of treatment (Ponseti method) helps realign the joints and stretch the tendons gradually over time. Ensure perfusion is intact distal to the cast/brace. Also assess for any skin breakdown (blisters/open sores) could could indicate an improper fit and need to be adjusted
Objective Data: • Top of foot is twisted downward • Foot twisted inward • Inability to walk properly	Provide range of motion exercises routinely per protocol and treatment orders	Improve range of motion, flexibility, and prevent contractures.
	Provide non-pharmacological methods of pain relief for older children experiencing leg pain	Massage Heat / cold Following treatment, the calf muscles will be smaller and may have pain and soreness with activity. Over time, this discomfort will lessen.
	Provide pre- and post-operative care.	Maintain NPO status prior to surgery Initiate and maintain IV access Administer IV fluids and medications for nausea, sedation and pain appropriately Monitor vitals pre- and post-op Perform dressing changes and wraps per protocol and as needed
	In cases of severe deformity and when other treatments have failed, corrective surgery may be the best option.	Ensure surgical sites remain clean, dry, and free from infection. Monitor for signs of post-op complication such as pneumonia, bleeding, and blood clots.



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