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| CONTRACTURE PREVENTION | | | | NO. | |
| POLICY:  All residents will be encouraged to maintain the highest level of physical functioning.  PROCEDURE:   1. Upon admission, all residents will be assessed by nursing staff to determine the amount of mobility of each joint. Any limitations will be noted on the Contracture Potential Assessment. 2. Any resident that is determined to have a contracture or the potential for a contracture will be referred to the licensed physical therapist for assessment and development of a program. It is the responsibility of nursing staff to obtain a physician’s order for physical therapy assessment. 3. An evaluation may be done by a Registered Occupational Therapist when the upper extremity is involved and the physician orders an OT evaluation. 4. A plan of care will be established by Physical Therapy and Nursing when a contracture is present or the resident is at risk for developing one. The plan of care may include goals, positioning aids, treatment plans and potential for improvement. Physician orders will be obtained for any treatment that is recommended prior to its implementation. 5. Those individuals who currently have limited range of motion and have fair to good potential for resolution may be placed in an intensive P.T. or rehab program. 6. If it is determined that the resident has little or no potential for restoration of movement of one or more joints, this individual will be maintained on a restorative Nursing Program. 7. Any current resident that is beginning to show signs of join stiffness may be brought to the attention of nursing staff for possible referral to the therapist or physiatrist and development of an appropriate program. 8. Programs for exercises, PROMS, AAROMS, Activities, positioning changes will be carried out per established schedule. 9. PT and/or OT staff are responsible to document evaluation and progress notes for any residents currently enrolled in a rehabilitation program. 10. Care plans for the resident shall include the goal for improvement or maintenance and the approaches that will be used to achieve that goal. 11. Nursing summaries shall reflect response to a program and progress toward the goal whenever a resident is in a restorative nursing program. 12. Inservices shall be held at regular intervals to provide training to staff in safety factors and principles and practices of contracture treatment and prevention. Nursing assistants will be regularly monitored to evaluate knowledge and correct procedures being carried out. | | | | | |
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| CONTRACTURE PREVENTION | | | | NO. | |
| 1. Contractures prevention program may include:    1. Position the resident in accordance with the principles of good body mechanics, to prevent muscle contractures and loss of joint function.    2. Place the resident on an appropriate mattress (i.e. pressure relieving / reduction).    3. Avoid semi-recumbent position for long periods. This promotes flexion deformities of the hip.    4. Encourage and assist the resident to perform passive and active exercises to maintain and improve strength, maintain and restore optimal joint function, prevent deformities, stimulate circulation and build endurance.    5. Support any painful affected areas appropriately.    6. With physician’s orders use moist hot compresses to increase blood flow to help relax resident and spastic muscles, paraffin baths when appropriate.    7. Contractures can often be prevented by frequent changes in position and exercise. | | | | | |
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