

# Balance Impairment

Setting: **Inpatient**    Population: **Pediatric**    Keywords: **upright, postural control, position, unsteady**

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## Clinical Description

Care of the hospitalized child experiencing an inability to safely or comfortably maintain upright control of the body's center of gravity relative to the base of support in the given environment.

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## Key Information

- Balance is a complex process involving interactions between multiple body systems, including musculoskeletal, neurologic and sensory systems, such as vestibular, visual and somatosensory systems. Assessment and treatment should address the multifactorial components of balance.
  - Deficits in attention, judgment, memory and cognition directly influence balance abilities, as well as hinder motor learning processes needed to learn or relearn balance skills.
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## Clinical Goals

By transition of care

A. The patient will demonstrate achievement of the following goals:

- Improved Balance and Postural Control

B. Patient, family or significant other will teach back or demonstrate education topics and points:

- Education: Overview
  - Education: Self Management
  - Education: When to Seek Medical Attention
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## Correlate Health Status

Correlate health status to:

- history, comorbidity, congenital anomaly
  - age, developmental level
  - sex, gender identity
  - baseline assessment data
  - physiologic status
  - response to medication and interventions
  - psychosocial status, social determinants of health
  - barriers to accessing care and services
  - child and family/caregiver:
    - health literacy
    - cultural and spiritual preferences
  - safety risks
  - family interaction
  - plan for transition of care
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## Balance Impairment

### Signs/Symptoms/Presentation

- dizziness
- hearing impairment
- history of fall
- postural control impaired
- stumbling
- unsteady gait
- vertigo
- visual impairment
- wide base of support for age

### Problem Intervention(s)

#### Optimize Balance and Safe Activity

- Evaluate functional balance skills including postural control, static and dynamic balance; consider child's age, developmental level and ability to follow directions.

- Screen for and address underlying impairments, such as muscle weakness, sensorimotor, cognitive and postural control deficits.
- Encourage independent functional status while providing level of assistance needed for safety.
- Recommend and facilitate environmental modifications to promote independence and safety, such as grab bars, bath seat; consider a home assessment.
- Train in and reinforce use of appropriate orthoses, adaptive equipment or assistive devices (e.g., ankle foot orthosis, adaptive seating system, scooter).
- Facilitate safe surroundings; keep needed items within reach, such as call light and personal belongings.
- Provide a safe, barrier-free, uncluttered environment that promotes optimal level of function; ensure adequate lighting, especially at night.
- Facilitate therapeutic interventions, such as balance training, muscle strengthening, structured play, trunk training, virtual reality and tai chi, yoga or Pilates exercise.
- Address sitting balance impairments with interventions, such as supportive seating, positioning devices and therapeutic exercise.

### Associated Documentation

- Activity Management
- Adaptive Equipment Use
- Safety Promotion/Fall Prevention
- Self-Care Promotion

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## General Education

- admission, transition of care
- orientation to care setting, routine
- advance care planning
- diagnostic tests/procedures
- opioid medication management
- oral health
- medication management
- pain assessment process
- safe medication disposal

- tobacco use, smoke exposure
  - treatment plan
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## Safety Education

- call light use
  - equipment/home supplies
  - fall prevention
  - harm prevention
  - infection prevention
  - MDRO (multidrug-resistant organism) care
  - personal health information
  - resources for support
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## Education: Overview

- description
  - signs/symptoms
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## Education: Self Management

- activity
  - assistive/adaptive devices
  - home safety
  - prevent skin breakdown
  - provider follow-up
  - rehabilitation therapy
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## Education: When to Seek Medical Attention

- unresolved/worsening symptoms

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## Population-Specific Considerations

### Age-Related

- Younger children have a stronger reliance on visual input to make postural corrections. Children with visual impairments may demonstrate greater balance impairment deficits.
  - The causes of balance problems can be difficult to identify in children; impairments are often overlooked, as symptoms might be attributed to developmental stage.
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