

N433 ATI Remediation

Management of Care

Case Management

Hematologic Disorders: Immunizations for a Client Who Has Sickle Cell Anemia (ch 21)

- Pneumococcal conjugate vaccine
- Meningococcal vaccine
- Haemophilus influenzae type B

Legal Rights and Responsibilities

Epidemiology and Communicable Diseases: Nationally Notifiable Sexually Transmitted Infections (ch 3)

- Chlamydia
- Gonorrhea
- Syphilis

Safety and Infection Control

Accident/Error/Injury Prevention

Health Promotion of School-Age Children (6-12): Teaching About Bicycle Safety (ch 6)

- Wear helmet
- 3 feet from the curb
- Do not leave child unattended

Standard Precautions/Transmission-Based Precautions/Surgical Asepsis

Acute Neurologic Disorders: Indications to Discontinue Droplet Precautions (ch 12)

- Patient has received their medications
- Patient is negative for the organism
- Patient is no longer contagious

Professional Responsibilities: Caring for a Child Who Has Pertussis (ch 3)

- Administer medication as prescribed

- Avoid smoke and dust
- Keep away from other people

Health Promotion and Maintenance

Aging Process

Psychosocial Issues of Infants, Children, and Adolescents: Planning Care for a Child Who Has Autism Spectrum Disorder (ch 44)

- Promote positive reinforcement
- Increase social awareness
- Teach verbal communication

Health Promotion/Disease Prevention

Immunizations: Teaching About Initial Immunization for a 12-Month Old Infant (ch 35)

- Hepatitis B
- DTaP
- Hib

Psychosocial Integrity

Abuse/Neglect

Psychosocial Issues of Infants, Children, and Adolescents: Indicators of Child Abuse (ch 44)

- Physical evidence
- Vague explanation of injury
- Delay in seeking care

Basic Care and Comfort

Nutrition and Oral Hydration

Complications of Infants: Teaching About Meal Planning for a Toddler Who Has Phenylketonuria (ch 42)

- Monitor infants who breastfeed because breast milk has phenylalanine
- Consult with a registered dietitian

- Provide referrals to support groups

Rest and Sleep

Health Promotion of the Preschoolers (3 to 6): Teaching About Home Interventions for Night Terrors (ch 5)

- Keep a consistent bedtime routine
- Use a night-light in the room
- Provide the child with a favorite toy

Pharmacological and Parenteral Therapies

Expected Actions/Outcomes

Cardiovascular Disorders: Priority Finding for an Infant Who Is Receiving Furosemide (ch 20)

- Offer small amounts of fluids in small cups or containers
- Observe for adverse effects including NVD
- Observe blood potassium level imbalances

Medication Administration

Immunizations: Contraindication for Receiving the Measles, Mumps, and Rubella Vaccine (ch 35)

- Pregnancy
- Immunodeficiency
- Allergy to eggs

Parenteral/Intravenous Therapies

Intravenous Therapy: Planning Antibiotic Therapy for an Infant (ch 49)

- 7 days or less
- Indicated if bacterial infection is suspected
- Infections in newborns can be very serious, IV treatment is a quick and effective way to administer antibiotics

Reduction of Risk Potential

Changes/Abnormalities in Vital Signs

Physical Assessment Findings: Identifying Reportable Findings (ch 2)

- Vital signs that are out of normal range
- Signs of distress
- Abnormal physical findings

Potential for Complications of Diagnostic Tests/Treatments/Procedures

Oxygen and Inhalation Therapy: Performing Tracheostomy Care (ch 16)

- Provide care Q8 hours
- Keep emergency tracheostomy tube at the bedside
- Assess skin for drainage or breakdown

System Specific Assessments

Health Promotion of Preschoolers (3 to 6): Assessing for Lead Poisoning (ch 5)

- Small blood sample from a vein
- There are no safe blood level of lead
- <5mcg is possible unsafe level for children

Physiological Adaptation

Alterations in Body Systems

Cardiovascular Disorders: Identifying the Location of a Patent Ductus Arteriosus (ch 20)

- Circulation between the pulmonary artery and the aorta fails to close
- Normal in fetal circulation, not in infants
- Increased pulmonary blood flow (left-to-right shunt)

Illness Management

Communicable Diseases: Varicella Management (ch 36)

- Contact/Droplet precaution
- 2-3 weeks incubation
- Communicable 1 day before lesions appear until they have crusted

HIV/AIDS: Evaluating Parent Understanding (ch 38)

- Infants can become infected through birth or ingesting breast milk
- Exposure to blood can infect your child
- Lack of awareness of risk factors and modes of transmission can infect your child

Pathophysiology

Cancer Disorders: Manifestations of Hodgkin's Lymphoma (ch 92)

- Painless swelling of lymph nodes
- Persistent fatigue
- Night sweats