

Remediation: each topic missed do 3 key points

Screenshot of time:

Individual Performance Profile

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Program Type: BSN
Test Completed Date: 12/7/2021
of Points: 60 Attempt: 1

Focused Review Progress
View missed topics and launch study materials below.
Last accessed: 12/7/2021 Time spent: 03:01:15

Proficiency Level	Mean		Percentile Rank	
Level 1	National 66.7%	Program 66.9%	National 38	Program 38

Individual Performance in the Major Content Areas

Content Area	Topics to Review	Total # Points	MEAN		PERCENTILE RANK		Individual Score
			National	Program	National	Program	
+ Management of Care	1	2	n/a	n/a	n/a	n/a	50.0%

Management of Care: 50.0% (Focused Review)

Management of care:

- Client Rights - (1)

- Complementary, Alternative, and Integrative Therapies: Alternative Therapy for Benign Prostate Hypertrophy (Active Learning Template - System Disorder)
 - 1. Saw palmetto decreases prostate manifestations of hyperplasia.
 - 2. Drinking tea like green tea can help prostate health.
 - 3. Pygeum is part of a tree (bark) that is used for medicine and can help with an enlarged prostate.

Psychosocial Integrity:

• Substance Use and Other Disorders and Dependencies - (1)

- Substance Use Disorders: Client Teaching About Nicotine Replacement Options (Active Learning Template - Medication)
- 1. Allow the lozenge to slowly dissolve in the mouth for 20-30 minutes.
- 2. Avoid oral intake 15 minutes prior to or during lozenge use.
- 3. Follow product directions for the use, dosage strength, and recommended titration.

Pharmacological and parenteral therapies:

- **Adverse Effects/Contraindications/Side Effects/Interactions - (2)**

- Antibiotics Affecting the Bacterial Cell Wall: Adverse Reactions (Active Learning Template - Medication)
 - 1. Penicillins - Adverse reactions: anaphylaxis
 - 2. Cephalosporins - Adverse reactions: possible cross sensitivity to penicillin or anaphylaxis.
 - 3. Carbapenems - Adverse reactions: Allergy, possible cross sensitivity to penicillin or anaphylaxis.
- Chronic Neurologic Disorders: Medications That Interact With Carbamazepine (Active Learning Template - Medication)
 - 1. Verapamil can interact with carbamazepine and cause toxicity concentration.
 - 2. Stiripentol can interact and cause toxicity.
 - 3. Macrolide antibiotics can interact with carbamazepine.

- **Expected Actions/Outcomes - (4)**

- Antilipemic Agents: Medications for High Cholesterol (Active Learning Template - Basic Concept, RM Pharm RN 8.0 Chp 24)
 - 1. Atorvastatin decreases cholesterol levels in the blood.
 - 2. Simvastatin decreases LDL levels and is used with diet changes.
 - 3. Rosuvastatin calcium decreases cholesterol made by the liver.

- Bone Disorders: Identifying Therapeutic Uses of Raloxifene (Active Learning Template - Medication, RM Pharm RN 8.0 Chp 34 Bone Disorders v2)
 - 1. Prevents and treats postmenopausal osteoporosis.
 - 2. Protects against breast cancer.
 - 3. Works as endogenous estrogen in the bone, lipid metabolism, and blood coagulation.
- Heart Failure and Pulmonary Edema: Priority Actions for a Client Who Has Heart Failure (Active Learning Template - System Disorder, RM AMS RN 11.0 Chp 32 Heart Failure and Pulmonary Edema)
 - 1. Monitoring the client's vital signs, daily weight, and I&O's.
 - 2. Assess for shortness of breath and dyspnea on exertion.
 - 3. Positions client for maximum ventilation.
- Mycobacterial, Fungal, and Parasitic Infections: Evaluating Use of Anti-Infective Medications (Active Learning Template - Medication, RM Pharm RN 8.0 Chp 47)
 - 1. Making sure to do a culture and sensitivity.
 - 2. Signs and symptoms of infection: fever, redness, chills, sweating, pain.
 - 3. Making sure that the medication is working to get rid of the infective agent and if not, changing the medication.

- **Medication Administration - (6)**

- Airflow Disorders: Teaching About Fluticasone Metered-Dose Inhaler (Active Learning Template - Medication, RM Pharm RN 8.0 Chp 17 Airflow Disorders v2)
 - 1. This is not a rescue medication for asthma attacks.
 - 2. Rinse mouth out with water after use.
 - 3. Do not overuse the medication, take as prescribed per manufacturer.
- Angina: Teaching About a Nitroglycerin Transdermal Patch (Active Learning Template - Medication, RM Pharm RN 8.0 Chp 22 Angina v2)
 - 1. Patches should not be cut and should be used as directed.

- 2. Place patches on hairless skin (chest, abdomen, and back). Rotate sites.
- 3. Remove the old patch, wash skin with soap and water, and dry thoroughly before applying patch.
- Medications Affecting Coagulation: Safe Administration of Enoxaparin (Active Learning Template - Medication, RM Pharm RN 8.0 Chp 25 Medications Affecting Coagulation v2)
- 1. Monitor vitals signs (increased heart rate, decreased blood pressure) and monitor platelet count.
- 2. Observe bleeding (bruising, petechiae, black tarry stools, bleeding gums, GI bleeds).
- 3. Avoid aspirin because it's a blood thinning agent.
- Safe Medication Administration and Error Reduction: Indications for Medication Reconciliation (Active Learning Template - Basic Concept, RM Pharm RN 8.0 Chp 2 Safe Medication Administration and Error Reduction v2)
- 1. This process should be done upon admission, when a client is being transferred, and discharged.
- 2. Compare the medication orders to the new prescriptions and reconcile it with the provider to make sure there is no error.
- 3. The nurse should compile a list of all the medications with their doses, frequencies, and find if they have any drug to drug interactions.
- Safe Medication Administration and Error Reduction: Preparing to Administer Digoxin (Active Learning Template - Nursing Skill, RM Pharm RN 8.0 Chp 2 Safe Medication Administration and Error Reduction v2)
- 1. 5 rights of medication administration: right client, right dose, right route, right medication, and right time.
- 2. Monitor apical pulse for one minute before administering!
- 3. Dose should be given IV infusion over 10-20 minutes.

- Vitamins and Minerals: Verifying a Prescription for a Potassium Infusion (Active Learning Template - Medication)
 - 1. Since there are many prescription medications for potassium, make sure that the nurse has the right medication and always double check in MAR.
 - 2. Double check the providers order for the potassium infusion for the right rate of infusion.
 - 3. Obtain the client's potassium levels to be verified before potassium infusion starts.
- **Parenteral/Intravenous Therapies - (3)**
 - Intravenous Therapy: Actions for an IV Infusion Infiltration (Active Learning Template - Nursing Skill)
 - 1. Closely monitor the IV site and dressing. Take medications for symptoms.
 - 2. If burning, redness, swelling, and pain occur, stop the infusion and notify the provider.
 - 3. Always use an infusion pump and make sure the infusion rate is right to prevent infiltration.
 - Intravenous Therapy: Expected Finding Following Albumin Administration (Active Learning Template - Therapeutic Procedure)
 - 1. Mild reactions are expected to be flushing, urticaria, hypotension, and fever.
 - 2. After administration of albumin, lab values should be monitored to make sure it is working properly.
 - 3. Expected ranges of albumin are 3.4 - 5.4.
 - Intravenous Therapy: Nursing Actions for IV Infiltration (Active Learning Template - Nursing Skill, RM Pharm RN 8.0 Chp 4)
 - 1. Applying a warm compress to IV infiltration sites.
 - 2. Elevating the patient's arm.
 - 3. Discontinue the site and relocate the IV to a different area.
- **Pharmacological Pain Management - (3)**

- Individual Considerations of Medication Administration: Risk Factors for Adverse Reactions in Older Adult Clients (Active Learning Template - Growth and Development, RM Pharm RN 8.0 Chp 6)
- 1. Polypharmacy is a risk factor for older adults because they often have a lot of medications they are taking which can cause many different adverse effects.
- 2. The risk of anticholinergic effects in elderly from many medications.
- 3. How the body consumes the medications. Liver and kidneys decrease with age and therefore decrease in metabolism and to clear out drugs from the body.
- Opioid Agonists and Antagonists: Administering Medication for Breakthrough Pain (Active Learning Template - Medication, RM Pharm RN 8.0 Chp 36 Opioid Agonists and Antagonists v2)
- 1. Fast acting morphine will have a quicker effect for breakthrough pain management.
- 2. Immediate release fentanyl can be used for breakthrough pain management,
- 3. Using a transdermal form of opioid for breakthrough pain can also be a form of pain management.
- Opioid Agonists and Antagonists: Adverse Effects of Epidural Morphine (Active Learning Template - Basic Concept, RM Pharm RN 8.0 Chp 36 Opioid Agonists and Antagonists v2)
- 1. Respiratory depression should be a priority when taking Morphine and should be stopped if less than 12 rpm.
- 2. Constipation is an adverse effect and should be avoided by drinking plenty of fluids and eating plenty of fiber.
- 3. Orthostatic hypotension is another adverse effect and should be monitored and should provide assistance when ambulating.

Reduction of risk potential:

- **Changes/Abnormalities in Vital Signs - (1)**

- Medications Affecting Coagulation: Monitoring for Adverse Effects of Heparin (Active Learning Template - Medication, RM Pharm RN 8.0 Chp 25)
- 1. Patients taking heparin subcutaneously can bruise very easily and should monitor for bleeding.
- 2. Monitor for bleeding such as nose bleeds, gums bleeding, periods heavier than normal, and dark tarry stools.
- 3. Lab values to monitor are aPTT.

- **Laboratory Values - (1)**

- Depressive Disorders: Laboratory Values to Report (Active Learning Template - Basic Concept)
- 1. Hyponatremia which is a lab value less than 136.
- 2. When taking lithium, sodium should be within expected range and should not be decreased or added because it can interact with lithium.
- 3. Monitoring the client's weight for weight gain or weight loss depending on the medication.