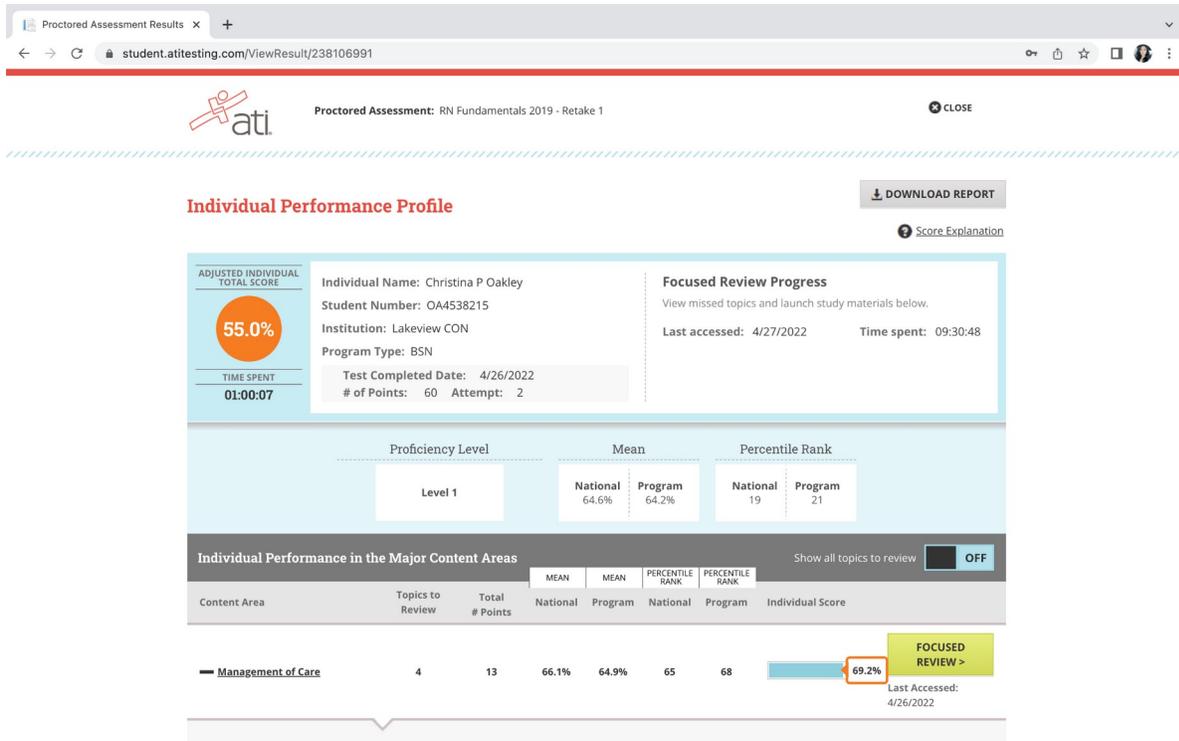


Christina Oakley
Adult Health ATI remediations



Management of Care:

- **Assignment, Delegation, and Supervision**
 - Delegation: The process of transferring the performance of a task to another member of the health care team while retaining accountability for the outcome.
 - Supervision: The process of directing, monitoring, and evaluating the performance of tasks by another team member.
 - Tasks can only be delegated for the appropriate skill and education level of the individual who is receiving the assignment.
- **Concepts of Management**
 - Only delegate tasks appropriate for the skin and education level of the individual.
 - Use the five rights of delegation to decide: Tasks to delegate, under what circumstances, to whom, what information to communicate, and how to oversee and appraise.
 - Provide supervision, either directly or indirectly. Make sure to monitor performance and intervene if necessary.
- **Continuity of Care:**
 - Prior to delegating client care, nurses should consider: predictability of the outcome, potential for harm, complexity of care, need for problem solving and innovation, and level of interaction with the client.
 - Match the complexity of care demands to the skill level of the delegate.

- Determine the health status and complexity of care the client requires.
- **Establishing Priorities**
 - Within the nursing process is a dynamic, continuous, client-centered, problem-solving, and decision-making framework.
 - Critical thinking involves prioritizing and exploring various courses of action while keeping ethics in mind.
 - Nurses should make inferences when making clinical decisions by pulling pieces of information together to determine a relationship between the data.

Safety and Infection Control:

- **Accident/Error/Injury Prevention**
 - All medication errors must be reported.
 - Use a unit-dose system to decrease errors. If not available, calculate the correct medication dose; check a drug reference to make sure the dose is within the usual range.
 - Interpret the medication prescription accurately. Refer to the ISMP lists for error-prone abbreviations, confused medication names, and high-alert medications.
- **Ergonomic Principles**
 - Make sure to use neutral posture, rotating tasks as well to avoid overworking the body.
 - Reduce excessive force and keep things easy to reach.
 - Maintain a wide and secure base of support. Keep feet apart.
- **Safe Use of Equipment**
 - All equipment that is even possibly unsafe or questionably safe must be immediately taken out of service.
 - Clients and staff must be educated about the safe use of equipment.
 - Equipment safety and the safe use of equipment is dependent upon both user safety and equipment safety.
- **Standard Precautions/Transmission-Based Precautions/Surgical Asepsis**
 - Failure to maintain surgical asepsis can lead to local and systemic infection.
 - Always practice hand hygiene preprocedure.
 - Use standard precautions in order to prevent iv infections.
- **Use of Restraints/Safety Devices:**
 - Used to prevent injury to self and/or others.
 - A “restraint” is any physical or chemical means or device that restricts a client’s freedom to and ability to move about and can’t easily be removed.
 - Nurses assess and determine the need for a client to be restrained or secluded.

Health Promotion and Maintenance:

- **Health Screening**
 - The examination of the head and neck includes the skull, face, hair, neck, shoulder, lymph nodes, thyroid gland, trachea position, carotid arteries, and jugular veins.
 - Ask questions regarding their health history that involves a review of systems.

- When assessing the integumentary system, this includes the skin, hair, scalp, and nails. Make sure to assess the peripheral vascular systems at the same time.
- **Techniques of Physical Assessment**
 - When assessing a client's breasts, for clients who have had a mastectomy, breast augmentation, or reconstruction, palpate the incisional lines.
 - When assessing the musculoskeletal system, make sure to assess both the structure and function.
 - Use the techniques of inspection and palpation to examine the ears, nose (sinuses), mouth, and throat.

Psychosocial Integrity:

- **End-of-Life Care**
 - Grief is the inner emotional response to loss and is exhibited through thoughts, feelings, and behaviors.
 - Normal grief is considered uncomplicated and the emotions can be negative but should change to acceptance with time.
 - Use therapeutic communication related to the client's stage of grief.

Basic Care and Comfort:

- **Elimination**
 - Urinary elimination is a precise system of filtration, reabsorption, and excretion.
 - Interventions like medications and therapeutic diets can affect urinary elimination.
 - Factors affecting urinary elimination: Poor abdominal and pelvic muscle tone, acute and chronic disorders, and spinal cord injury.
- **Mobility/Immobility**
 - Older adult clients have factors that interfere with mobility and dexterity.
 - Incontinence can occur because of impaired mobility. Patient's might have difficulty making it to the bathroom.
 - Arthritis or painful joints can cause immobility and can lead to delayed urination.
- **Personal Hygiene**
 - Personal hygiene has a profound effect on overall health, comfort, and well-being.
 - Provide perineal hygiene routinely and after soiling.
 - Bathe clients to cleanse the body, stimulate circulation, provide relaxation, and enhance healing.
- **Rest and Sleep**
 - Adequate amounts of sleep and rest promote health.
 - Chronic sleep loss can increase risks of obesity, depression, and hypertension.
 - Encourage voiding before sleep.

Pharmacological and Parenteral Therapies:

- ***Medication Administration***
 - The route of administration affects the rate and amount of absorption.
 - Nurses should consider the route of administration when monitoring for peak levels.
 - For trough levels, obtain a blood sample immediately before the next medication dose, regardless of the route of administration.
- ***Parenteral/Intravenous Therapies***
 - For the intravenous route, there are no barriers to absorption and it is directly entered into the bloodstream.
 - For intravenous, peripheral veins in the arm or hand are preferable.
 - For parenteral, the vastus lateralis is best for infants 1 year and younger.
- ***Pharmacological Pain Management***
 - Clients with cancer who have chronic severe pain usually take oral doses of morphine.
 - Administer medications directly into the peripheral IC or access port to achieve an immediate medication level into the bloodstream with pain medications.
 - Intravenous therapy offers constant therapeutic blood levels.

Reduction of Risk Potential:

- ***Changes/Abnormalities in Vital Signs***
 - Recent food or fluid intake and smoking can interfere with accurate oral measurement of body temperature.
 - Factors like fever and exercise can lead to tachycardia.
 - Smoking and anxiety can cause an abnormal amount of respirations.
- ***Potential for Complications of Diagnostic Tests/Treatments/Procedures***
 - Assess clients for an abnormal response following a diagnostic test or procedure.
 - Position the client to prevent complications following diagnostic tests/treatments/procedures.
 - Apply knowledge of nursing procedures and protocols when caring for a client with potential for complications.

Physiological Adaptation:

- ***Pathophysiology***
 - Nursing practice requires the application of knowledge from biological, social, and physical sciences; knowledge of pathophysiology.
 - Understanding pathophysiology helps nurses to evaluate a patient's health status.
 - Its vital for nurses to understand the general principles of pathophysiology.

