

Adult Health I: Remediation

Management of Care

1. Client Rights -

a. Legal Responsibilities:

i. Unintentional tort

1. Negligence: nurse fails to implement safety measures for a client at risk for falls
2. Malpractice: a nurse administers a large dose of medication due to a calculation error. The client goes into cardiac arrest and dies

ii. Intentional tort

1. Assault: conduct of one person to another that makes the other person uncomfortable or apprehensive (example: nurse threatens to place an NG tube in a client who refuses to eat)

iii. Federal laws affecting nursing practice

1. HIPAA- Health Insurance Portability and Accountability Act
2. ADA- Americans with Disabilities Act
3. MHPA- Mental Health Parity Act
4. PSDA- Patient Self Determination Act

2. Continuity of Care -

a. Information Technology: Commonly Used Abbreviations

- i. Only abbreviations and symbols approved by the Joint Commission and the facility are acceptable
- ii. Approved abbreviations: BID, TID, QID, mg, mL

- iii. Do not make up your own abbreviations

Safety and Infection Control

1. Standard Precautions/Transmission-Based Precautions/Surgical Asepsis -

- a. Infection Control:

- i. Modes of transmission

1. Contact: direct physical contact, person to person
2. Droplet: sneezing, coughing, and talking
3. Airborne: sneezing and coughing
4. Vector-borne: animals or insects as intermediaries

- ii. Essential components to hand hygiene

1. Soap
2. Water
3. friction

- iii. Use the appropriate technique to set up a sterile field and maintain asepsis

1. The outer wrapping and 1-inch edges of packaging are not sterile. Inner surfaces are sterile.
2. Touch sterile items with other sterile items
3. Do not reach across or above a sterile field
4. Hold items to add to a sterile field at a minimum of 6 inches above the field.

Health Promotion and Maintenance

2. Developmental Stages and Transitions -

- a. Stage 1: Trust vs. Mistrust: (0-1 years) Children develop a sense of trust when caregivers provide reliability, care, and affection. A lack of this will lead to mistrust.
- b. Stage 2: Autonomy vs. Shame and Doubt: (1-3 years) Children need to develop a sense of personal control over physical skills and a sense of independence. Success leads to feelings of autonomy, failure results in feelings of shame and doubt.
- c. Stage 3: Initiative vs. Guilt: (3-5 years) Children need to begin asserting control and power over the environment. Success in this stage leads to a sense of purpose. Children who try to exert too much power experience disapproval, resulting in a sense of guilt
- d. Stage 4: Industry vs. Inferiority: (6 to 11 years) Children need to cope with new social and academic demands. Success leads to a sense of competence, while failure results in feelings of inferiority.
- e. Stage 5: Identity vs. Confusion: (12-18 years) Teens need to develop a sense of self and personal identity. Success leads to an ability to stay true to yourself, while failure leads to role confusion and a weak sense of self.
- f. Stage 6: Intimacy vs. Isolation: (19-40 years) Young adults need to form intimate, loving relationships with other people. Success leads to strong relationships, while failure results in loneliness and isolation.
- g. Stage 7: Generativity vs. Stagnation: (40 – 65 years) Adults need to create or nurture things that will outlast them, often by having children or creating a positive change that benefits other people. Success leads to feelings of usefulness and accomplishment, while failure results in shallow involvement in the world.
- h. Stage 8: Integrity vs. Despair: (65 and older) Older adults need to look back on life and feel a sense of fulfillment. Success at this
- i. stage leads to feelings of wisdom, while failure results in regret, bitterness, and despair.

3. Health Promotion/Disease Prevention -

a. Hygiene: Bathing a Client Who Has Dementia

- i. Health promotion: includes activities to improve general health (exercise and good nutrition)
- ii. Disease prevention: activities aimed at preventing specific disorders (ex: flu vaccines)
- iii. Nurses may also use complementary therapies (ex: guided imagery, massage, and music) to help promote health and prevent disease

Basic Care and Comfort

1. Mobility/Immobility -

- a. Every body system has the potential to be affected by immobility
- b. Immobility
 - i. Temporary: following a knee surgery
 - ii. Permanent: paraplegia
 - iii. Sudden onset: fracture to extremities
 - iv. Slow onset: Multiple Sclerosis
- c. Mobility and Immobility: factors that affect mobility
 - i. Alterations in muscles
 - ii. Injury to the musculoskeletal system
 - iii. Impaired CNS
 - iv. Poor posture
 - v. Health status and age

2. Non-Pharmacological Comfort Interventions - (1)

a. Complementary and Alternative Therapies

i. Guided imagery

1. The use of words and music to evoke positive imaginary scenarios in a subject with a view to bringing about some beneficial effect.

ii. Acupuncture

1. Acupuncture points are believed to stimulate the central nervous system. This, in turn, releases chemicals into the muscles, spinal cord, and brain. These biochemical changes may stimulate the body's natural healing abilities and promote physical and emotional well-being.

iii. Herbal supplements

1. Gingko Biloba: can improve heart health
2. Ginger: can relieve nausea
3. Lavender: can help with sleep disturbances

3. Nutrition and Oral Hydration -

a. Fluid Imbalances: Assessment Findings of Extracellular Fluid Volume Deficit

- i. Hypertension
- ii. Bradycardia
- iii. Normal turgor
- iv. Weight loss
- v. Decreased urine output

b. Fluid Imbalances: Calculating a Client's Net Fluid Intake

- i. What to include when calculating intake
 1. Oral intake
 2. Tube feedings

3. Intravenous fluids
 4. Medications
 5. Parenteral nutrition
 6. Lipids
 7. Blood products, dialysis fluids, and flushes
- c. Nutrition and Oral Hydration: Full Liquid Diet
- i. When advancing a client's diet, call the provider for an order
 - ii. Full liquids are any food that return to liquid form at room temperature
 - iii. Full liquid diet: clear liquids plus liquid dairy products. Some facilities may include pureed veggies

Pharmacological and Parenteral Therapies

1. Medication Administration -
 - a. Safe Medication Administration and Error Reduction:
 - i. If a medication error occurs, assess the client first!
 1. Then notify the provider
 - ii. Common medication errors
 1. Wrong medication or IV fluid
 2. Incorrect dose
 3. Wrong client, wrong route
 4. Omission of a dose or extra doses
 - iii. Components of a prescription
 1. Client's full name
 2. The date and time of prescription

3. The name of medication
4. The strength and dosage
5. The route of transmission
6. The quantity to dispense
7. Signature of the provider

2. Parenteral/Intravenous Therapies -

- a. Half-life: the time it takes the medication in the body to drop by 50%. Liver and kidney function can affect half-life.
- b. Routes of transmission
 - i. Intramuscular: 90 degrees, z track
 - ii. Subcutaneous: 45 degrees, pinch
 - iii. Intradermal: 15 degrees
- c. Complications of parenteral or intravenous therapy
 - i. infection
 - ii. Infiltration
 - iii. Extravasation with vesicant medications
 - iv. Hematoma
 - v. Phlebitis
 - vi. Embolus formation
 - vii. Fluid overload

Reduction of Risk Potential

1. Laboratory Values -

- a. Airway Management: Collecting a Sputum Specimen

- i. Take a very deep breath and hold for 5 seconds
- ii. Slowly breathe out
- iii. Take another deep breath and cough hard until sputum comes up into your mouth
- iv. Spit sputum into specimen cup

2. Therapeutic Procedures -

- a. Bowel Elimination: Discharge Teaching About Ostomy
 - i. Gently remove pouch
 - ii. Cleanse the skin under the pouch with water
 - iii. Dry the skin
 - iv. Apply the new bag

Physiological Adaptation

1. Alterations in Body Systems -

- a. Primary intention
 - i. Little or no tissue loss
 - ii. Edges approximated
 - iii. Heals rapidly
 - iv. Low risk of infection
- b. Secondary intention
 - i. Loss of tissue
 - ii. Wound edges widely separated
 - iii. Longer healing time
 - iv. Increased risk of infection

- v. Scarring
 - vi. Heals by granulation
- c. Tertiary intention
- i. Widely separated
 - ii. Deep
 - iii. Spontaneous opening of a previously closed wound
 - iv. Closure of wounds occurs when they are free from infection and edema
 - v. Risk of infection
 - vi. Extensive drainage and tissue debris
 - vii. Closed later
 - viii. Longest healing time

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Individual Performance Profile

ADJUSTED INDIVIDUAL TOTAL SCORE: 70.0%

TIME SPENT: 45:37

Individual Name: Mary M Hyatt
 Student Number: 7199777
 Institution: Lakeview CON
 Program Type: BSN

Test Completed Date: 7/19/2022
 # of Points: 60 Attempt: 2

Focused Review Progress
 View missed topics and launch study materials below.
 Last accessed: 7/19/2022 Time spent: 02:01:57

Proficiency Level	Mean		Percentile Rank	
Level 2	National 64.6%	Program 64.2%	National 70	Program 71

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	3	13	66.1%	64.9%	83	84	76.9%

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