

N431 Adult Health II
Proctored ATI Remediation Template

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Assessment Name: ATI remediation Adult Medical Surgical
Semester: Summer

Instructions:

1. Download the report from your ATI product for the assessment you are completing this remediation template for
2. The report will be broken down into three (3) aspects:
 - a. Categories
 - i. These categories mimic the NCLEX-RN categories and include the following:
 1. Management of Care
 2. Safety and Infection Control
 3. Health Promotion and Maintenance
 4. Psychosocial Integrity
 5. Basic Care and Comfort
 6. Pharmacological and Parenteral Therapies
 7. Reduction of Risk Potential
 8. Physiological Adaptation
 - b. Subcategories
 - c. Topics
3. Complete the template on the following page by doing the following:
 - a. Main Category
 - i. Subcategories for each main category
 1. Topics for each subcategory → these will be the content areas you will be remediating on
 - a. Provide three (3) critical points to remember for each topic → these will come from the Focused Review module(s) within your ATI product
 - b. **NOTE: You must remediate on all subcategories AND topics within the main categories listed under the “Topics to Review” section of the ATI report for this assessment.**
4. In the event you need additional space within the table, please add rows into the table to accommodate this
 - a. In the event, you need less space within the table than what is provided, you may delete those rows from the table to accommodate this OR put “N/A” → There may be main categories that you don’t have to remediate on and that is OK – you can either delete the table OR put “N/A”
5. An example is provided below:

SAMPLE Main Category: Management of Care
SAMPLE Subcategory: Case Management
SAMPLE Topic: Anemias: Discharge Teaching for a Client Who is Recovering from Sick Cell Crisis <ul style="list-style-type: none">• SAMPLE Critical Point #1: Anemia is the abnormally low amount of circulation RB, Hgb concentration, or both.• SAMPLE Critical Point #2: When a patient is going through sickle crisis, the nurse should monitor oxygen saturation to determine a need for oxygen therapy.• SAMPLE Critical Point #3: A patient should have their hemoglobin checking in 4 to 6 weeks to determine efficacy.

6. Once the template is completed **and** at least the minimum remediation time has been completed within the Focused Review module(s) in ATI, upload the template to the corresponding dropbox in E360.

Main Category: Management of Care

Subcategory: Case management

Topic: Anticoagulant case management

- Educate clients who are on warfarin to avoid foods containing vitamin K because it will reduce the medications therapeutic effect
- Educate the client that they be on bleeding precautions with anticoagulation medications and call their provider if they experience bleeding and bruising.
- Routine PT and PTT are needed to monitor medications and make adjustments

Topic: Cancer long-term treatment

- **Ensure client has support**
- **Client is provided all information for treatment options**
- **Providing psychosocial and emotional care through the stages of grief**

Topic: Palliative care

- **Care for the family and the client through emotional changes of grief**
- **The client makes their own decisions on care**
- **Listen to the client and provide them with what they need**

Main Category: Safety and Infection Control

Subcategory: handling hazardous and infectious materials

Topic: Radioactive cancer treatment intrauterine/prostate

- No one under the age of 16 is able to visit
- A lead container is in the room to place radioactive device
- When providing care wear a radioactive dosimeter badge

Topic: Hazardous material handling

- Identify hazardous material
- Follow company protocol for disposal and storage of material
- Use red biohazard containers and bags

Topic: Needle management and handling

- Dispose needles in sharps container
- Do not recap needles
- Do not reuse needles and apply safety after use

Subcategory: Standard precautions/transmission-based precautions/Surgical asepsis

Topic: Neutropenic precautions

- Private room to protect the client
- No live plants or stagnant water that has been sitting for more than 4 hours
- Restrict the client from having visitors who do not feel well or have recently been sick

Topic: Thrombocytopenia

- Bleeding precautions
- Limit the number of needle sticks
- Apply pressure to site of injection or IV removal site for ten min until bleeding stops

Topic: Contact precautions

- Place signs on patient doors for contact precautions

- Perform good hand hygiene
- Wear gloves and gown entering the room

Main Category: Health Promotion and Maintenance

Subcategory: Health promotion/Disease prevention

Topic: UTI

- Encourage adequate hydration while monitoring I&O
- Daily care of catheter to ensure it is clean and functioning properly
- Educate client to void after sexual intercourse

Topic: Pyelonephritis

- Educate the client to wipe from front to back after voiding
- Increase fluid intake to 2L per day
- Educate the client on the importance of completing antibiotic medications

Topic: Chronic kidney disease

- Drink at least 2 L per day
- Limit alcohol consumption
- Limit the use of NSAIDS that are hard on the kidneys

Main Category: Pharmacological and Parenteral Therapies

Subcategory: Central venous access device

Topic: Cardiac enzymes and lipid panels

- Lipid profile includes cholesterol, HDL, LDL, and triglycerides
- Cardiac enzymes are troponin, CK, and myoglobin
- Elevated Cardiac enzymes indicate heart muscle injury

Topic: Care of central line

- Sterile procedure
- Use chlorhexidine wipes to clean the area
- Client and nurse must wear masks during central line care

Topic: PICC line

- Placed in a peripheral vein and ends in atrium
- Monitor for signs of infection (redness, warmth, pain)
- Keep the dressing clean and dry

Subcategory: Parenteral/Intravenous therapies

Topic: Nutrition

- Used for individuals who are unable to meet nutrient requirements
- Too fast of a rate the client will get diarrhea
- Check residual for proper tube placement

Topic: Prevent aspiration

- HOB elevated 30 degrees
- Remain upright for 1 hour after feedings
- Monitor vital signs and lung sounds for complications

Topic: TPN administration and care

- Loss of 10% or more of body weight in a short time frame
- Assess client for hyperglycemia and hypoglycemia
- If run out and waiting for more administer 10% dextrose in water

Main Category: Reduction of Risk Potential

Subcategory: Laboratory values

Topic: Cardiac complications

- Troponin 1 cardiac muscle protein when elevated indicates heart muscle injury
- Creatine kinase-MB isoenzymes is an enzyme in heart muscles when found in the blood indicates heart injury
- Myoglobin is released when heart muscle is injured

Topic: Kidney Function

- BUN is related to hydration
- Creatinine is related to kidney function
- GFR is related to how well the kidneys are filtering blood

Topic: Liver function

- ALT released when liver is damaged
- AST released when liver is damaged
- Serum albumin is low when accumulated in the peritoneal area with ascites

Subcategory: Potential for complications from surgical procedures and Health Alterations

Topic: Post GI surgery TPN

- Hyperglycemia with over feeding and Hypoglycemia with sudden stopping
- Always gradually start and stop enteral feedings to avoid complications
- Dumping syndrome results in abdominal pain/distension, increase HR, and decrease BP

Topic: Bariatric surgery

- Metabolic complication with TPN feeding
- Peritonitis
- Bowel obstruction

Topic: Risk for complications

- Pneumothorax with thoracentesis
- Risk for infection with a surgical opening
- Bleeding or hemorrhaging

Subcategory: System specific Assessments

Topic: Focused assessment liver complications

- Signs and symptoms of bleeding
- Abdominal assessment for hepatomegaly
- Maintain airway with esophageal varices

Topic: Kidney function focused assessment

- Visual assessment
- I&O measurement
- Frequency, color, dysuria, urgency with urination

Topic: Neurological issues

- PERRLA
- Slurred speech or facial drooping
- May need a lumbar puncture to rule out bleeding or infection

Subcategory: Therapeutic Procedures

Topic: Diabetes

- Insulin checks before meals to prevent hyper or hypoglycemia
- Education on diabetic diet to keep balanced sugars
- Continue to check glucose even when sick

Topic: Asthma

- Have a plan of action in place for when peak flow is 50% or less
- Identify aggravating triggers to asthma and avoid them
- Always carry a rescue inhaler

Topic: ICP elevation

- Lumbar puncture instruct client lay on side with chin to chest and knees to chest
- Monitor for changes in LOC
- Seizure precautions by padding rails

Main Category: Physiological Adaptation

Subcategory: Alterations in body systems

Topic: hemodialysis and peritoneal dialysis

- Monitor for complications during dialysis such as cloudy dialysate, elevated temperature, hypotension
- Educate client to notify if they have a headache, nauseous, or dizzy
- Monitor creatinine, BUN, electrolytes, Hgb, Hct

Topic: Thoracentesis

- Have the client in an upright position with arms supported by pillows
- Monitor vital signs and lung sounds for aspiration or pneumothorax
- Measure and record amount of fluid withdrawn

Topic: Cancer treatment

- Lifelong fatigue with radiation
- Immunosuppression precautions put in place when receiving chemo and radiation
- Educate the client of eventual alopecia with treatment

Subcategory: Fluid and electrolyte imbalances

Topic: Normal laboratory ranges

- Sodium 136 to 145
- Potassium 3.5 to 5.0
- Calcium 9.0 to 10.5

Topic: Sodium imbalance

- Caused from excessive sweating, diuretics, hyperglycemia, NPO
- Hyponatremia causes dehydration of cells increasing thirst
- Hyponatremia will manifest muscle weakness and irritability while hyponatremia causes muscle cramps

Topic: Potassium

- Blood pressure decreases and clients develop orthostatic hypotension
- Muscle weakness in hyponatremia
- EKG will show a flattened T wave and prolonged PR interval with hyponatremia

Subcategory: Hemodynamics

Topic: Hemodialysis

- Blood goes through a dialyzer to eliminate waste products
- Intended for acute or chronic kidney disease
- The nurse will monitor for disequilibrium syndrome from decreased BUN

Topic: Peritoneal dialysis

- Hypertonic dialysate solution drainage
- If the dialysate drainage is cloudy indicates infection
- Antibiotics can be mixed in the dialysate solution

Topic: Dialysate solution

- If there is poor inflow of the drainage assess for kinks in the tubing
- The dialysate bag can be lowered or raised to improve flow
- Client should be lying supine with the head of bed elevated during treatment

Subcategory: Illness management

Topic: Pain Assessment

- Use the numeric pain scale for adults and the FACES for children to determine severity of pain
- Have the client describe the characteristics of the pain to better treat and document
- Assess pain again after intervention to determine effectiveness

Topic: Monitor Vital Signs

- Assess the heart rate, respiration, O2 saturation, temperature, blood pressure and pain Q4 hours regularly for potential complications
- Head-to-toe assessment to determine any other missed or associating factors
- Vital signs outside of normal ranges should be reported and assessed promptly

Topic: Antibiotics

- Complete the full prescription of antibiotics do not stop when feeling better
- Culture and sensitivity are done to acquire the most appropriate antibiotic
- Oral contraceptive are ineffective on most antibiotic medications and will need to use another form of protection

Subcategory: Pathophysiology**Topic: Acute or chronic conditions**

- Acute is severe and sudden such as a few days or months
- Chronic is characterized as present for months to years
- Acute complications are more of an emergent issue and take priority

Topic: Diabetes

- Clients are educated on how to measure blood glucose and to get blood from the finger tip
- Insulin is drawn up based on a sliding scale and injected 2 inches from the belly button or back of the arm usually
- Type one diabetes the pancreas is not producing insulin and the glucose cannot enter the cells

Topic: COPD

- Irreversible inflammation of the pulmonary system effecting older adults that are smokers
- Bronchitis is the inflammation of the bronchioles and bronchi
- Emphysema is the destruction of alveoli from hyperinflation of the lungs