

N444 Concept Synthesis
Proctored ATI Remediation Template

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Assessment Name: **ATI Capstone Comprehensive Assessment Form A**

Semester: Spring 2023

Instructions:

1. Download the report from your ATI product for the assessment you are completing this remediation template for
2. Determine your three (3) ***weakest or lowest scoring*** main categories as these are the areas you will be remediating on in the chart below. These categories mimic the NCLEX-RN categories and include the following:
 - a. **Management of Care**
 - b. Safety and Infection Control
 - c. Health Promotion and Maintenance
 - d. Psychosocial Integrity
 - e. Basic Care and Comfort
 - f. **Pharmacological and Parenteral Therapies**
 - g. **Reduction of Risk Potential**
 - h. Physiological Adaptation
3. Complete the template on the following page by doing the following:
 - a. Main Category #1, 2, and 3
 - 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
 - NOTE: You must remediate on all subcategories and topics within the three (3) main categories you are completing the remediation for.***
4. In the event you need additional space within the table, please add columns into the table to accommodate this
5. In the event, you need less space within the table than what is provided, you may delete those columns from the table to accommodate this OR put “N/A”
6. 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 Sickle 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.

7. 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 using the instructions provided by the Course Coordinator (dropbox, discussion post, etc.)

Main Category #1: Pharmacological and Parenteral Therapies

Subcategory: Adverse Effects/Contraindications/Side Effects/Interaction

Topic: Antilipemic Agents: Contraindications for Receiving Niacin.

- Contraindicated in patients with an active peptic ulcer disease (Djadjo et al., 2022).
- Contraindicated in patients with active liver disease (Djadjo et al., 2022).
- Contraindicated with atrial bleeding (Djadjo et al., 2022).

Topic: Substance Use and Addictive Disorders: Reversing an Opioid Overdose.

- Naloxone is used to reverse opioid overdose (NIH 2023).
- Naloxone only stays in the body for 30-90 minutes, and one can still experience overdose effects after taking this medication (NIH 2023).
- The FDA approved two forms: nasal spray and injectable (NIH 2023).

Subcategory: Blood and Blood Products

Topic: Identifying Types of Reactions.

- Acute hemolytic transfusion reactions occur immediately or can manifest during the transfusion. Hallmark signs are lower back pain, fever, and chills. Nursing actions are to stop the infusion, avoid infusing other blood products, infuse 0.9% sodium chloride, monitor vitals, and send the blood bag back to the lab (Holman et al., 2019a).
- Febrile transfusion reactions occur within 2 hours of the transfusion. Hallmark signs include chills and increased temperature with an increase of 1 degree Celsius or 2 degrees Fahrenheit. Nursing actions are to stop the infusion, administer antipyretics, and infuse 0.9% sodium chloride (Holman et al., 2019a).
- Allergic transfusion reactions occur during or within 24 hours of the transfusion. Hallmark signs are itching, urticaria, and flushing. Nursing actions are to stop the infusion, infuse 0.9% sodium chloride with new tubing, and administer an antihistamine. If the provider wants to continue infusion, do so slowly (Holman et al., 2019a).

Topic: Transfusing Blood for an Older Adult Client.

- Monitor vitals every 15 minutes while transfusing due to the risk of fluid overload (Holman et al., 2019a).
- Administer the blood transfusion over 2-4 hours for older adult clients (Holman et al., 2019a).
- Older adults with cardiac or renal dysfunctions are at higher risk for heart failure and fluid-volume excess during blood transfusions (Holman et al., 2019a).

Subcategory: Medication Administration

Topic: Medications for Depressive Disorders: Reporting Manifestations of Serotonin Syndrome.

- Manifestations can begin between 2-72 hours after serotonin treatment (Holman et al., 2019e).
- Manifestations of serotonin syndrome include mental confusion, difficulty concentrating, abdominal pain, diarrhea, agitation, fever, anxiety, hallucinations, hyperreflexia, incoordination, diaphoresis, and tremors (Holman et al., 2019e).
- The nursing action is to start symptomatic treatment for the client (Holman et al., 2019e).

Topic: Therapeutic Procedures to Assist with Labor and Delivery: Contraindication for Administration of Misoprostol.

- Caution must be used in patients with glaucoma, asthma, and cardiovascular or renal diseases when given Misoprostol (Holman et al., 2019d).
- Complication of Misoprostol includes tachysystole, which requires the administration of terbutaline (Holman et al., 2019d).
- Fetal distress can occur with the administration of Misoprostol (Holman et al., 2019d).

Main Category #2: Management of Care

Subcategory: Advance Directives/Self-Determination/Life Planning

Topic: Legal Responsibilities: Documenting Admission Data.

- The nurse must follow all stands of care when documenting (Holman et al., 2019c).
- The nurse must fully document assessments, interventions, and evaluations (Holman et al., 2019c).
- On admission, the nurse should be sure that the patient has an advance directive in their chart (Holman et al., 2019c).

Subcategory: Case Management

Topic: Cancer Disorders: Planning Discharge Teaching for a Client Who Is Postoperative Following a Modified Radical Mastectomy.

- Avoid wearing constrictive clothing and avoid cuts and injuries to the affected arm (Holman et al., 2019a).
- Avoid placing the arm on the surgical side in a dependent position. This will interfere with wound healing (Holman et al., 2019a).
- Report any numbness, pain, heaviness, or impaired motor function of the affected side to the doctor (Holman et al., 2019a).

Topic: Continuity of Care: Interventions to Promote Client Independence in a Rural Community.

- Assist with identifying and applying for assistance programs (Holman et al., 2019b).
- Use cultural competence when planning the interventions for the client (Holman et al., 2019b).
- Help establish a trusting partnership with key individuals in the client's community (Holman et al., 2019b).

Subcategory: Referrals

Topic: Care of Specific Populations: Recommending Appropriate Referrals.

- Referrals in acute care settings are based on medical diagnosis or other relevant clinical information (Holman et al., 2019b).
- The nurse should use knowledge of different assistances that the client will accept based on their beliefs and values (Holman et al., 2019b).
- The nurse helps assist the client with community resources that can serve the client as a resource (Holman et al., 2019b).

Topic: The Interprofessional Team: Referral for a Client Who Has Sciatica.

- A physical therapist helps assess and plan the care for the patient to increase musculoskeletal function to maintain mobility (Holman et al., 2019c).
- A social worker gets involved in helping the client coordinate inpatient and community resources to help with recovery and any home supplies the patient may need (Holman et al., 2019c).
- A referral to a specialty provider to help assess and treat the disease may be needed to monitor the progression and continue the ongoing care for the client (Holman et al., 2019c).

Main Category #3: Reduction of Risk Potential

Subcategory: Laboratory Values

Topic: Diabetes Mellitus Management: Evaluating Laboratory Values.

- A diagnostic find of diabetes is a blood glucose level greater than 200mg/dL (Holman et al., 2019a).
- A fasting glucose greater than 126mg/dL is diagnostic for diabetes (Holman et al., 2019a).
- A A1C greater than 6.5% is another diagnostic criterion for diabetes (Holman et al., 2019a).

Subcategory: System Specific Assessments**Topic: Chronic Obstructive Pulmonary Disease: Findings to Report for a Client Who Has COPD.**

- A client with COPD's respiratory rate can reach 40-50rpm during an acute exacerbation (Holman et al., 2019a).
- The respiratory assessment will include crackles and wheezes upon auscultation, hypoxemia, rapid and shallow respirations, irregular breathing patterns, and dyspnea upon exertion (Holman et al., 2019a).
- Physical characteristics include barrel chest, use of accessory muscles, thin extremities, enlarged neck muscles, clubbing of the finger and toenails, and pallor and cyanosis of nail beds and mucous membranes (Holman et al., 2019a).

Subcategory: Therapeutic Procedures**Topic: Disorders of the Eye: Evaluating a Client's Understanding of Cataract Removal.**

- Cataract removal involves the removal of the patient's lens and replacing it with a new lens (Holman et al., 2019a).
- Postoperative care includes preventing infection, instilling ophthalmic medications, providing pain relief, and teaching the patient about self-care at home and fall prevention (Holman et al., 2019a).
- Client education includes wearing sunglasses outside, reporting manifestations of infection, and avoiding activities that increase IOP. These include bending over at the waist, sneezing, blowing nose, coughing, straining, head hyperflexion, restrictive clothing, and sexual intercourse (Holman et al., 2019a).

Topic: Gastrointestinal Disorders: Teaching About Home Management of GERD.

- The patient should avoid eating 3 hours before bedtime (Holman et al., 2019f).
- Avoid foods such as citrus fruits and juices, spicy foods, and carbonated beverages (Holman et al., 2019f).
- The patient should also avoid items that reduce lower esophageal sphincter pressure. These include fatty foods, caffeine, chocolate, alcohol, cigarette smoke, all nicotine products, peppermint, and spearmint flavors (Holman et al., 2019f).

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