

N444 Concept Synthesis
Proctored ATI Remediation Template

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Assessment Name: Medical Surgical B
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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
 - b. 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: Reduction of Risk Potential

Subcategory: Reduction of Risk Potential

Topic: Cancer Treatment Options: Discharge Teaching Following Chemotherapy

- Avoid eating fresh fruits and vegetables and other food sources that may contain bacteria. Steer clear of raw seafood, eggs, and meat. Limit your intake of pepper and paprika (Holman et al., 2019).
- Do not garden, change a pet's litter box, or do yard maintenance. When working with indoor plants or performing outdoor gardening, be careful to put on disposable gloves (Holman et al., 2019).
- Inform the clinician right once if you experience any bacterial or viral illnesses symptoms. To reduce contact with ill people, make sure to avoid crowds (Holman et al., 2019).

Topic: Chronic Obstructive Pulmonary Disease: Teaching About Nutrition

- Soft, calorie-dense foods should be promoted since dyspnea reduces the amount of energy that can be used for eating (Holman et al., 2019).
- Caloric needs rise as a result of increased respiratory effort. Correctly read the food labels (Holman et al., 2019).
- Keep an eye on any weight variations brought on by nutritional requirements (Holman et al., 2019).

Topic: Gastrointestinal Diagnostic Procedures: Teaching About Fecal Occult Blood Testing

- Avoid red meat, inflammatory drugs, and vitamin C for 48 hours before testing; doing so could result in a false positive (Holman et al., 2019).
- Educate the patient on the importance of following the providers instructions thoroughly to ensure proper results (Holman et al., 2019).
- If unsure of what foods contain vitamin C be sure to ask the provider (Holman et al., 2019).

Topic: Head Injury: Priority Findings Requiring Intervention

- Acknowledge if there is an obstruction, assess the situation (Holman et al., 2019).
- Analyze how well you can breathe (apnea, depressed respiratory rate). If necessary, take action (Holman et al., 2019).
- Determine any circulation issues; hypotension, dysrhythmias, inadequate cardiac output, compartment syndrome (Holman et al., 2019).

Topic: Hepatitis and Cirrhosis: Client Instructions Following a Liver Biopsy

- Help the client lie on their right side and help them hold that position for several hours (Holman et al., 2019).
- Keep an eye on the patient's vital signs, check for abdominal pain, and look for bleeding at the puncture site (Holman et al., 2019).
- Check for signs of pneumothorax caused by an unintentional pleural or lung puncture (Holman et al., 2019).

Topic: Meningitis: Assessing for Kernig's Sign

- A positive Kernig's sign will resistance the patient's leg from extending in a flexed position (Holman et al., 2019).
- The patient's knee can only be extended to 135 degrees (Holman et al., 2019).
- Distracting the patient by talking to them while assessing for Kernig's sign will help the provider discover if the patient has a positive or negative Kernig's sign (Holman et al., 2019).

Topic: Neurologic Diagnostic Procedures: Teaching About Electroencephalography

- It will take between 45 and 120 minutes to complete the treatment while the patient is motionless (Holman et al., 2019).
- The patient will have electrodes inserted on their scalp to send electronic signals to their brain, which the system will record and document (Holman et al., 2019).
- Educate the patient that there are no risks while doing this procedure (Holman et al., 2019).

Main Category #2: Physiological Adaptions

Subcategory: Physiological Adaptions

Topic: Angina and Myocardial Infarction: Findings to Report

- The patient will notice being more anxious than normal (Holman et al., 2019).

- The patient may report tachypnea, dyspnea, or orthopnea (Holman et al., 2019).
- The patient may report chest tightness and an inability to sleep (Holman et al., 2019).

Topic: Diabetes Mellitus Management: Evaluating Client Understanding of Hypoglycemia Treatment

- The patient may experience tremors, nauseated, and lightheaded (Holman et al., 2019).
- When the patient has rapid hypoglycemia the patient may experience tachycardia, nervousness and diaphoresis (Holman et al., 2019).
- Educate the patient on proper insulin use and not to overuse insulin or take insulin while drinking alcohol (Holman et al., 2019).

Topic: Electrolyte Imbalances: Manifestations of Hyponatremia

- Coma, convulsions, and respiratory arrest are a few of the consequences that can result from hyponatremia (Holman et al., 2019).
- The patient may experience headache associated with nausea and vomiting (Holman et al., 2019).
- The patient may experience muscle weakness and severe fatigue (Holman et al., 2019).

Topic: Fluid Imbalances: Nursing Interventions for Dehydration

- Educate the patient on the proper oral rehydration methods if needed (Holman et al., 2019).
- Administer electrolyte replacement via IV if dehydration is causing cardiac arrhythmias or tachypnea (Holman et al., 2019).
- When unsure if the providers orders are valid double check with the provider to ensure proper care for dehydration (Holman et al., 2019).

Topic: Inflammatory Bowel Disease: Priority Findings to Report for a Client Who Has Suspected Appendicitis

- The patient may experience a rigid abdomen along with abdomen distention (Holman et al., 2019).
- The patient's respiratory status may decline including rapid, shallow breathing (Holman et al., 2019).
- The patient can experience an intense sign of relief if the appendix has perforated (Holman et al., 2019).

Topic: Middle and Inner Ear Disorders: Interventions for Meniere's Disease

- Reduce the consumption of salty and sodium-rich foods such processed meats and MSG (Holman et al., 2019).
- Educate the patient on avoiding alcohol and caffeine (Holman et al., 2019).
- Maintain a safe environment if vertigo continues (Holman et al., 2019).

Topic: Pituitary Disorders: Syndrome of Inappropriate Antidiuretic Hormone

- Experiencing an increase in specific gravity when obtaining a urine sample is expected with SIADH (Holman et al., 2019).
- A water deprivation test is used to determine SIADH (Holman et al., 2019).
- Low sodium and low chloride are expected with SIADH (Holman et al., 2019).

Topic: Pneumothorax, Hemothorax, and Flail Chest: Manifestations of Pulmonary Trauma

- Unequal chest expansion of the chest can be seen (Holman et al., 2019).
- The patient may experience tachycardia, hypotension, and dyspnea (Holman et al., 2019).
- Chest pain and anxiety is a sign of pulmonary trauma (Holman et al., 2019).

Main Category #3: Basic Care and Comfort

Subcategory: Basic Comfort and Care

Topic: Cholecystitis and Cholelithiasis: Teaching About Dietary Recommendations

- Educate the patient on limiting fat intake to reduce stimulate more enzymes from the pancreas and gallbladder (Holman et al., 2019).
- Educate the patient on choosing leaner meats like chicken, duck, and turkey without the skin (Holman et al., 2019).
- Choosing baked meats over fried foods (Holman et al., 2019).

Topic: Polycystic Kidney Disease, Acute Kidney Injury, and Chronic Kidney Disease: Anticipating Dietary Recommendations

- Restriction of sodium and potassium will be appropriate when dealing with a patient who is

experiencing different kidney diseases (Holman et al., 2019).

- Educating the patient on limiting the choices of meats per the providers orders, each individual will be different (Holman et al., 2019).
- Avoiding high-phosphorus foods when applicable (Holman et al., 2019).

References

Holman, H. C., Williams, D., Sommer, S., Johnson, J., Ball, B. S., Morris, C., Wheless, L. K., McMichael, M., Roland, P., Leehy, P., & Hertel, R. (2019). *RN adult medical surgical nursing: Review module*. Assessment Technologies Institute.