

N444 Concept Synthesis
Proctored ATI Remediation Template

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

Semester: Spring

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: Basic Care and Comfort

Subcategory: Nutrition and Oral Hydration

Topic: Bowel Elimination: Identifying an Expected Finding With Dehydration

- Monitor for manifestations of dehydration (weak, rapid pulse; hypotension; poor skin turgor; elevated body temperature) (Holman et al., 2019).
- Hyponatremia: Muscle weakness, lethargy, swollen red tongue (Holman et al., 2019).
- Hypokalemia: Leg cramps, muscle weakness, nausea, vomiting, cardiac dysrhythmias (Holman et al., 2019).

Topic: Gastrointestinal Disorders: Dietary Recommendations for a Preschooler Who Has Celiac Disease

- Eat foods that are gluten-free (milk, cheese, rice, corn, eggs, potatoes, fruits, vegetables, fresh meats and fish, dried beans) (Holman et al., 2019).
- Read labels on processed products. Gravy mixes, sauces, cold cuts, soups, and many other products have gluten as an ingredient (Holman et al., 2019).
- Read labels and research nonfood products (lipstick, communion wafers, vitamin supplements), which also can have gluten as an ingredient (Holman et al., 2019).

Topic: Gastrointestinal Disorders: Evaluating Client Understanding of Dietary Restrictions for GERD

- Avoid trigger foods (citrus fruits and juices, spicy foods, carbonated beverages) (Holman et al., 2019).
- Elevate the body on pillows instead of lying flat and avoid large meals and bedtime snacks (Holman et al., 2019).
- Avoid items that reduce lower esophageal sphincter pressure (fatty foods, caffeine, chocolate, alcohol, cigarette smoke, all nicotine products, peppermint and spearmint flavors) (Holman et al., 2019).

Topic: Modified Diets: Selecting Foods for a Client Who Has Dysphagia

- Foods are totally pureed to a smooth consistency with a pudding-like texture (pureed fruits, vegetables, meats, soups, scrambled eggs, pudding, custard, applesauce) (Holman et al., 2019).
- Mechanically altered. Soft-textured, moist, semi-solid foods that are easily chewed and swallowed (ground meat served with gravy, chicken or tuna salad, well-moistened pancakes with syrup, poached eggs, soft canned or cooked fruit) (Holman et al., 2019).
- Non-restrictive. Consists of all unthickened beverages and supplements (clear juices, frozen yogurt, ice cream, milk, soda, and broth) (Holman et al., 2019).

Subcategory: Assistive Devices

Topic: Sensory Perception: Evaluating Understanding of Hearing Aid Care

- To clean the ear mold, use mild soap and water while keeping the hearing aid dry (Holman et al., 2019).
- When the hearing aid is not in use for an extended period of time, turn it off and remove the battery to conserve battery power and avoid corrosion of the hearing aid. Keep replacement batteries on hand (Holman et al., 2019).
- Use the lowest setting that allows hearing without feedback (Holman et al., 2019).

Subcategory: Non-Pharmacological Comfort Interventions

Topic: Pain Management: Nursing Intervention for Pain During the Latent Phase of Labor

- Epidural block anesthesia (Holman et al., 2019).
- Opioid agonist analgesics (Holman et al., 2019).
- Opioid agonist-antagonist analgesics (Holman et al., 2019).

Main Category #2: Reduction of Risk Potential

Subcategory: Therapeutic Procedures

Topic: Diagnostic and Therapeutic Procedures for Female Reproductive Disorders: Preparing a Client for a Pelvic Examination

- Have the client empty the bladder (Holman et al., 2019).
- Explain to the client how the procedure will be carried out (Holman et al., 2019).
- Place the client in the lithotomy position and drape appropriately (Holman et al., 2019).

Topic: Fractures: Planning Care for a Child Who Is in Skeletal Traction (Active Learning Template - Therapeutic Procedure)

- Maintain body alignment (Holman et al., 2019).
- Assess and monitor neurovascular status (Holman et al., 2019).
- Assess pin sites for pain, redness, swelling, drainage, or odor. Provide pin care per facility protocol (Holman et al., 2019).

Topic: Acute and Infectious Respiratory Illnesses: Priority Finding Following a Tonsillectomy

- Assess for evidence of bleeding, which includes frequent swallowing, clearing the throat, restlessness, bright red emesis, tachycardia, and/or pallor (Holman et al., 2019).
- Assess the airway and vital signs (Holman et al., 2019).
- Monitor for difficulty breathing related to oral secretions, edema, and/or bleeding (Holman et al., 2019).

Subcategory: System Specific Assessments

Topic: Diabetes Mellitus Management: Manifestations of Hypoglycemia

- manifestations of hypoglycemia (mild shakiness, mental confusion, sweating, palpitations, headache, lack of coordination, blurred vision, seizures, and coma) (Holman et al., 2019).
- When glucose declines slowly, manifestations relate to the central nervous system (headache, confusion, fatigue, drowsiness) (Holman et al., 2019).
- With rapid glucose decline, the sympathetic nervous system is affected (tachycardia, diaphoresis, nervousness) (Holman et al., 2019).

Topic: Hematologic Disorders: Interpreting Laboratory Data

- CBC: Decreased RBC count, Hgb, and Hct (Holman et al., 2019).
- RBC indices: Decreased, indicating microcytic/hypochromic RBCs (Holman et al., 2019).
- Reticulocyte count: Can be decreased (indicates bone marrow production of RBCs (Holman et al., 2019).

Topic: Nutrition Assessment/Data Collection: Laboratory Results to Report

- With starvation or chronic disease, weight loss indicating severe malnutrition: greater than 5%/month, greater than 7.5%/3 months, greater than 10%/6 months, greater than 20%/year (Holman et al., 2019).
- With acute disease or injury, weight loss indicating severe malnutrition: greater than 2%/week, greater than 5%/month, greater than 7.5%/3 months (Holman et al., 2019).
- BMI measurements compare the weight to height to estimate the effect of the

individual's body weight. Client factors should be considered when determining the value of BMI measurement (Holman et al., 2019).

Subcategory:

Main Category #3: Physiological Adaptation

Subcategory: Alterations in Body Systems

Topic: Amputations: Postoperative Interventions

- The nurse should assess the psychosocial well-being of the client. Assess for feelings of altered self-concept and self-esteem, and willingness and motivation for rehabilitation (Holman et al., 2019).
- Wrap the residual limb, using elastic bandages (figure-eight wrap) to prevent restriction of blood flow and decrease edema (Holman et al., 2019).
- Use an air splint (plastic inflatable device) inflated to protect and shape the residual limb and for easy access to inspect the wound (Holman et al., 2019).

Topic: Chest Tube Insertion and Monitoring: Caring for Client Who Has a Chest Tube

- Assess vital signs, breath sounds, SaO₂, color, and respiratory effort as indicated by the status of the client and at least every 4 hr (Holman et al., 2019).
- Keep the drainage system below the client's chest level, including during ambulation (Holman et al., 2019).
- Encourage coughing and deep breathing every 2 hr (Holman et al., 2019).

Topic: Postpartum Disorders: Interventions for a Client Who Has Deep-Vein Thrombosis

- Do NOT massage the affected limb to prevent thrombus from dislodging and becoming an embolus (Holman et al., 2019).
- Provide thigh-high antiembolism stockings for the client at high risk for venous insufficiency (Holman et al., 2019).
- Facilitate bed rest and elevation of the client's extremity above the level of the heart. (Avoid using a knee gatch or pillow under knees.) Encourage the client to change positions frequently (Holman et al., 2019).

Topic: Respiratory Diagnostic Procedures: Planning Care for a Client Who Is Scheduled for a Thoracentesis

- Auscultate lungs for reduced breath sounds on side of thoracentesis (Holman et al., 2019).
- Encourage the client to deep breathe to assist with lung expansion (Holman et al., 2019).
- Obtain a post procedure chest x-ray (check resolution of effusions, rule out pneumothorax) (Holman et al., 2019).

Subcategory: Hemodynamics

Topic: Electrocardiography and Dysrhythmia Monitoring: Identifying Atrial Fibrillation

- Attach one electrode to each of the client's extremities by applying electrodes to flat surfaces above the wrists and ankles and the other six electrodes to the chest, avoiding chest hair (Holman et al., 2019).
- Effect on the rate and rhythm of the heart: bradycardia, tachycardia, heart block, premature beat, flutter, fibrillation, or asystole (Holman et al., 2019).
- Inform clients receiving continuous ECG monitoring that the monitoring will not detect shortness of breath, chest pain, or other manifestations of acute coronary syndrome. The client should be instructed to report new or worsening manifestations (Holman et al., 2019).

Subcategory: Pathophysiology

Topic: Esophageal Disorders: Manifestations of a Sliding Hiatal Hernia

- Sliding: heartburn, reflux, chest pain, dysphagia, belching (Holman et al., 2019).
- Pharyngitis (Holman et al., 2019).
- Inspiratory/expiratory wheeze (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.