

N444 Concept Synthesis
Proctored ATI Remediation Template

Student Name: Nick Pontes

Assessment Name: RN Comprehensive Predictor 2019

Semester: 4/4

Main Category: Management of Care

Subcategory: Advocacy - (1)

Topic: Professional Responsibilities: Client Advocacy

- Uphold ethical principles, respect values and beliefs, and promote well-being of clients through advocacy for autonomy, beneficence, non-maleficence, and justice.
- Communicate, collaborate, and protect clients' rights, preferences, and decisions, ensuring timely and appropriate care, access to information, and informed consent.
- Navigate ethical dilemmas, seek guidance, and use effective communication and problem-solving skills to advocate for ethical care practices and address barriers to client-centered care.

Subcategory: Assignment, Delegation and Supervision - (2)

Topic: Managing Client Care: Assigning Client Care Tasks to an RN

- Assess the competency, scope of practice, and workload of the RN, ensuring that the assigned tasks are within their knowledge, skills, and abilities, and complying with legal and regulatory requirements, policies, and standards.
- Communicate effectively with the RN, providing clear and concise instructions, expectations, and guidelines for the assigned tasks, and allowing opportunities for questions, feedback, and clarification.
- Monitor and evaluate the progress, outcomes, and quality of the assigned tasks, providing feedback, support, and resources as needed, and addressing any concerns or issues that may arise in a timely and appropriate manner.

Topic: Managing Client Care: Planning to Follow Progressive Discipline

- Review and understand the facility's policies and procedures related to progressive discipline, including the steps, timeline, and documentation requirements.
- Identify the performance or behavior issues of the staff member that warrant progressive discipline, ensuring that they are clearly defined, measurable, and documented with supporting evidence.
- Develop a plan for progressive discipline, including the specific interventions, expectations, and consequences at each step, and communicate it effectively with the staff member, ensuring confidentiality, fairness, and respect, while maintaining a focus on performance improvement and client safety

Subcategory: Legal Rights and Responsibilities - (1)

Topic: Cultural and Spiritual Nursing Care: Communicating With a Client Who Speaks a Language Different From the Nurse

- Assess the client's preferred language and communication needs using interpreters, or bilingual staff, and respect the client's cultural and spiritual beliefs and practices related to language and communication.
- Use effective communication strategies, such as active listening, non-verbal cues, and visual aids, to establish rapport, build trust, and promote understanding with the client who speaks a different

language.

- Collaborate with the interdisciplinary team, including interpreters, to provide culturally sensitive care that respects the client's autonomy, values, and preferences, while addressing their physical, emotional, and spiritual needs.

Main Category: Safety and Infection Control

Subcategory: Accident/Error/Injury Prevention - (1)

Topic: Mobility and Immobility: Pressure Injuries

- Perform regular and thorough skin assessments, paying special attention to bony prominences, areas under medical devices, and other at-risk areas, to identify any signs of pressure injury development or existing pressure injuries.
- Implement appropriate preventive measures, such as repositioning the patient at regular intervals, using pressure-relieving devices, maintaining clean and dry skin, and providing proper nutrition and hydration, to reduce the risk of pressure injury formation.
- Provide education and training to patients, caregivers, and interdisciplinary team members on the importance of pressure injury prevention, as well as reporting any changes in skin condition promptly to the nursing team for further assessment and intervention.

Subcategory: Ergonomic Principles - (1)

Topic: Mobility and Immobility: Evaluating Client Understanding of Crutch Safety

- Demonstrate and provide hands-on practice to the client on proper crutch use, including proper fit, weight-bearing status, and gait pattern, to ensure safe and effective use of crutches.
- Assess the client's ability to use crutches safely and independently, including their ability to maintain balance, coordinate movements, and negotiate obstacles, and provide feedback and reinforcement as needed.
- Involve the interdisciplinary team, such as physical therapists, to evaluate the client's proficiency in using crutches safely and provide additional education and training as necessary.

Subcategory: Standard Precautions/Transmission-Based Precautions/Surgical Asepsis - (1)

Topic: Infection Control: Identifying Need for Sterile Gloves

- Invasive procedures, wound care, or insertion of invasive devices, require the use of sterile gloves according to facility policies and procedures.
- Verify the client's medical condition, such as having an open wound, compromised immune system, or history of infections, to determine if sterile gloves are necessary to prevent the risk of infection.
- While using sterile gloves, follow standard precautions and adhere to infection control protocols.

Subcategory: Use of Restraints/Safety Devices - (2)

Topic: Client Safety: Reason for the Use of Restraints

- Perform a thorough assessment of the client's condition and behavior to identify the underlying cause of the need for restraints, such as agitation, confusion, aggression, risk of falls, or harm to self or others.
- First implement less strict alternative measures, such as de-escalation techniques, diversion, frequent checks, or environmental modifications, to address the underlying cause of the need for restraints and attempt to avoid their use whenever possible.

- Follow facility policies and procedures regarding the use of restraints, including obtaining informed consent, obtaining orders from a healthcare provider, using the least restrictive restraint method, monitoring the client's physical and emotional well-being, and documenting the rationale for and ongoing assessment of the use of restraints.

Topic: Gastrointestinal Structural and Inflammatory Disorders: Appropriate Use of Restraint Devices

- Use of restraint devices should be ordered based on a thorough assessment of the client's condition, behavior, and risk factors for complications related to the gastrointestinal disorder.
- Ensure proper fit, positioning, and comfort for the client, while avoiding any pressure or damage to the affected gastrointestinal area.
- Regularly (Q15) assess the client's physical and emotional well-being, including skin integrity, circulation, comfort, and signs of distress or agitation, and document the rationale for and ongoing assessment of the use of restraint devices in the client's medical record.

Main Category: Health Promotion and Maintenance

Subcategory: Aging Process - (1)

Topic: Newborn Assessment: Expected Findings

- Normal findings include vital signs within normal newborn ranges, including heart rate, respiratory rate, temperature, and blood pressure.
- Active and strong cry, good muscle tone, and vigorous movements are expected findings.
- Symmetrical and well-formed head, with palpable and soft fontanel.

Subcategory: Ante/Intra/Postpartum and Newborn Care - (1)

Topic: Nutrition During Pregnancy: Teaching About Folic Acid

- Educate the pregnant client about the importance of folic acid supplementation during pregnancy to prevent neural tube defects in the developing fetus.
- Provide information on the appropriate dosage of folic acid recommended for pregnant women, typically 400-800 micrograms daily.
- Emphasize the need to start taking folic acid supplements before pregnancy, if possible, and to continue taking them throughout pregnancy as per healthcare provider's guidance.

Subcategory: Health Promotion/Disease Prevention - (1)

Topic: Pediatric Emergencies: Planning Education About Sudden Infant Death Syndrome

- Develop a comprehensive educational plan for parents and caregivers about the risk factors, prevention strategies, and safe sleep practices related to sudden infant death syndrome (SIDS).
- Provide education about safe sleep practices, including placing infants on their backs to sleep, avoiding co-sleeping or bed sharing, and keeping the sleep environment free from hazards.
- Other factors for a safe sleep environment, such as using a firm crib mattress, removing soft bedding, and avoiding exposure to tobacco smoke during pregnancy and after birth, as these are known risk factors for SIDS.

Subcategory: Lifestyle Choices - (1)

Topic: Contraception: Contraindication for Oral Contraceptives

- Because of the complications for contraceptives, obtain a thorough health history, including a history

of thromboembolic disorders, history of estrogen-dependent tumor, liver disease, history of migraines with aura, or known hypersensitivity to oral contraceptives.

- Regularly monitor risk for clotting, as estrogen contraceptives increase the risk.
- Review and educate the client about alternative contraceptive options that may be safe and appropriate considering their specific health history and contraindications.

Main Category: Psychosocial Integrity

Subcategory: Abuse/Neglect - (1)

Topic: Family and Community Violence: Priority Intervention for Intimate Partner Violence

- Provide a safe and supportive environment for the victim to disclose their experiences and offer non-judgmental, empathetic listening.
- Assess for immediate safety concerns, including the presence of weapons, imminent threat of harm, and availability of a safe place to go.
- Collaborate with appropriate interdisciplinary team members, such as social workers or domestic violence advocates, to provide resources and referrals for the victim, including emergency shelter, counseling, legal support, and safety planning.

Subcategory: Behavioral Interventions - (1)

Topic: Anxiety Disorders: Action for a Client Who Is Experiencing a Panic Level of Anxiety

- Stay calm and approach the client in a non-threatening, non-judgmental manner.
- Provide a safe and quiet environment, removing any potential triggers or stressors.
- Use therapeutic communication techniques, such as deep breathing exercises, guided imagery, or grounding techniques, to help the client regain a sense of control and calmness.

Subcategory: Crisis Intervention - (1)

Topic: Crisis Management: Sequence of Actions to Take for a Client Who Is Experiencing a Crisis

- A foundational action is to establish rapport and provide a supportive presence.
- Ensure privacy and confidentiality to protect the client's dignity and maintain trust.
- Create a calm and safe environment by reducing stimuli, such as loud noises or bright lights, that may exacerbate the client's anxiety.

Main Category: Basic Care and Comfort

Subcategory: Non-Pharmacological Comfort Interventions - (1)

Topic: Pain Management: Caring for a Client Who Is in Active Labor (Active Learning Template - Basic Concept, RM MN RN 11.0 Chp 12 Pain Management)

- Monitor vital signs, including blood pressure, heart rate, and temperature, to assess the client's condition and detect any changes that may require intervention.
- Assist the client with pain management techniques, such as breathing exercises, relaxation techniques, or administering analgesic medications as ordered.
- Monitor fetal heart rate and uterine contractions to assess the progress of labor and the well-being of the baby.

Subcategory: Personal Hygiene - (1)

Topic: Mobility and Immobility: Evaluating Use of a Walker (Active Learning Template - Basic Concept, RM Fund 10.0 Chp 40 Mobility and Immobility)

- Evaluate the fit and condition of the walker to ensure it is appropriately adjusted to the client's height, weight, and body proportions, and that it is in good working condition.
- Observe the client's gait and movement while using the walker to determine if they are using it correctly, maintaining stability, and navigating obstacles safely. With a standard gait, the client advances the walker first, followed by the weaker or affected leg, and then the stronger leg. This is the most common gait used with a walker and provides maximum stability.
- Evaluate the client's understanding of proper walker use, including how to safely navigate uneven surfaces, stairs, and obstacles, as well as how to correctly adjust and lock the walker.

Main Category: Pharmacological and Parenteral Therapies

Subcategory: Adverse Effects/Contraindications/Side Effects/Interactions - (1)

Topic: Therapeutic Procedures to Assist with Labor and Delivery: Identifying a Contraindication to Oxytocin Administration (Active Learning Template - Medication, RM MN RN 11.0 Chp 15 Therapeutic Procedures to Assist with Labor and Delivery)

- History of uterine rupture or previous cesarean section with a classical uterine incision, as oxytocin can increase uterine contractions and may pose a risk of uterine rupture.
- Abnormal fetal heart rate patterns or non-reassuring fetal status, as oxytocin can further stress the fetus and worsen fetal distress.
- Placenta previa, as oxytocin-induced uterine contractions can lead to placental abruption and severe maternal hemorrhage.

Subcategory: Expected Actions/Outcomes - (1)

Topic: Pain Management: Pudendal Block (Active Learning Template - Basic Concept, RM MN RN 11.0 Chp 12 Pain Management)

- Pudendal block is a local anesthesia technique used to relieve pain during the second stage of labor by blocking the pudendal nerve that innervates the perineum and genital area.
- The nurse should ensure that the patient is informed about the procedure, including its purpose, potential benefits, risks, and alternatives, and obtain informed consent.
- The nurse should monitor the patient closely for signs of adverse reactions, such as local anesthetic toxicity, and provide appropriate care and support during and after the procedure.

Subcategory: Medication Administration - (2)

Topic: Diabetes Mellitus: First Action When Mixing NPH and Regular Insulin (Active Learning Template - Medication, RM Pharm RN 8.0 Chp 39 Diabetes Mellitus v2)

- Inject air into the regular insulin vial first, followed by injecting air into the NPH insulin vial, to prevent negative pressure in the vials and facilitate easier withdrawal of the insulin. Then, draw up the regular insulin (clear) first, followed by the NPH insulin (cloudy), to prevent contamination of the regular insulin vial with NPH insulin, as NPH insulin is typically denser and can sink to the bottom of the vial.
- First, always perform hand hygiene and gather all necessary supplies, including NPH insulin vial, regular insulin vial, syringe, and alcohol swabs, in a clean and organized manner.

- Use aseptic technique to clean the rubber stoppers of both insulin vials with alcohol swabs before drawing up insulin, preventing contamination and ensuring sterility.

Topic: Therapeutic Procedures to Assist with Labor and Delivery: Indications for Increasing the Rate of Oxytocin Infusion (Active Learning Template - Medication, RM MN RN 11.0 Chp 15 Therapeutic Procedures to Assist with Labor and Delivery)

- If the laboring client is not experiencing sufficient and regular uterine contractions, increasing the oxytocin infusion rate may be indicated to help promote effective labor progress.
- If the labor is prolonged and not progressing as expected, increasing the oxytocin infusion rate may be considered to help augment uterine contractions and facilitate labor progress.
- In some cases, oxytocin may be used to augment labor, which involves increasing the infusion rate to help promote regular contractions and facilitate labor progress in clients with slow or stalled labor.

Subcategory: Parenteral/Intravenous Therapies - (1)

Topic: Hospitalization, Illness, and Play: Preparing a School-Age Child for IV Catheter Insertion (Active Learning Template - Growth and Development, RM NCC RN 11.0 Chp 10 Hospitalization, Illness, and Play)

- Provide age-appropriate and developmentally sensitive explanations about the purpose of the IV and why it may be necessary for their care. Use simple language and visual aids if needed to help the child understand.
- Show the child a demonstration of the IV procedure using age-appropriate teaching aids, such as dolls or pictures, to help them understand what to expect and reduce anxiety.
- Provide encouragement and reassurance to the child, emphasizing that the procedure is temporary and for their well-being. Encourage them to express their feelings and concerns, and address any questions or fears they may have.

Subcategory: Pharmacological Pain Management - (1)

Topic: Opioid Agonists and Antagonists: Medication to Treat Moderate Acute Pain (Active Learning Template - Basic Concept, RM Pharm RN 8.0 Chp 36 Opioid Agonists and Antagonists v2)

- NSAIDs such as ibuprofen and naproxen are often used in combination with opioids to manage moderate acute pain. NSAIDs provide anti-inflammatory effects and can help reduce pain and swelling.
- Medications such as hydrocodone/acetaminophen and oxycodone/acetaminophen are commonly prescribed for moderate acute pain. They contain an opioid agonist along with acetaminophen, which provides additional pain relief.
- Tramadol and Codeine are opioid agonists that are commonly used to treat moderate acute pain. They work by binding to opioid receptors in the brain and blocking pain signals

Main Category: Reduction of Risk Potential

Subcategory: Potential for Complications of Diagnostic Tests/Treatments/Procedures - (1)

Topic: Gastrointestinal Therapeutic Procedures: Priority Finding to Report Following a Paracentesis (Active Learning Template - Therapeutic Procedure, RM AMS RN 11.0 Chp 47 Gastrointestinal Therapeutic Procedures)

- Any signs of infection, such as increased pain, redness, warmth, or drainage at the site of paracentesis, should be reported immediately to the healthcare provider.

- If the patient experiences excessive continuous or profuse bleeding, it should be reported immediately. Bleeding can occur due to trauma to blood vessels during the procedure and may require intervention to stop or control the bleeding.
- Persistent or worsening abdominal pain after paracentesis, especially if accompanied by other symptoms such as tenderness, distention, or guarding, should be reported. It may indicate a complication such as organ perforation, bleeding, or infection.

Subcategory: Therapeutic Procedures - (1)

Topic: Arthroplasty: Planning to Position a Client Following Total Hip Arthroplasty (Active Learning Template - Therapeutic Procedure, RM AMS RN 11.0 Chp 68 Arthroplasty)

- After total hip arthroplasty, the client should avoid hip flexion beyond 90 degrees to prevent dislocation of the prosthetic hip joint. Nurses should plan to position the client with the affected hip in slight abduction.
- Placing an abduction pillow or wedge between the client's legs can help maintain proper positioning and prevent hip adduction.
- Ensuring that the client's body is properly aligned during positioning is important to maintain stability and prevent strain on the hip joint.

Main Category: Physiological Adaptation

Subcategory: Alterations in Body Systems - (2)

Topic: Acute and Infectious Respiratory Illnesses: Caring for an Infant Who Has Respiratory Syncytial Virus (Active Learning Template - System Disorder, RM NCC RN 11.0 Chp 17 Acute and Infections Respiratory Illnesses)

- Nurses should assess the infant's respiratory rate, depth, and effort, as well as oxygen saturation levels, and report any signs of respiratory distress such as increased work of breathing, nasal flaring, retractions, or cyanosis.
- Provide supportive care to maintain their respiratory function. This may include providing humidified oxygen, suctioning of nasal secretions, and positioning the infant with their head elevated to promote easier breathing. Nurses should also ensure that the infant is adequately hydrated and monitor their temperature and overall comfort.
- RSV is highly contagious, and infection control precautions should be strictly followed to prevent the spread of the virus.

Topic: Medical Conditions: Hyperemesis Gravidarum (Active Learning Template - System Disorder, RM MN RN 11.0 Chp 9 Medical Conditions)

- Hyperemesis gravidarum is a severe form of nausea and vomiting during pregnancy that can result in dehydration, weight loss, and electrolyte imbalances.
- Nurses should closely monitor the pregnant woman's vital signs, weight, and symptoms of hyperemesis gravidarum, such as persistent vomiting, inability to tolerate oral fluids, and signs of dehydration.
- Intravenous (IV) fluids and antiemetic medications may be administered as prescribed to manage symptoms and prevent complications.

Subcategory: Illness Management - (1)

Topic: Cancer and Immunosuppression Disorders: Teaching About Food Safety and Preparation for a Client Who Has AIDS (Active Learning Template - System Disorder, RM Nutrition 7.0 Chp 16 Cancer

and Immunosuppression Disorders)

- Avoid raw fruits and vegetables, as they can carry harmful bacteria that may pose a risk of infection for individuals with AIDS. Encourage the client to consume only cooked fruits and vegetables to minimize the risk of foodborne illness.
- Educate the client about proper food storage practices, including refrigerating perishable foods promptly, avoiding expired or moldy food items, and using separate cutting boards and utensils for raw and cooked foods to prevent cross-contamination.
- Emphasize the importance of thorough handwashing before handling food.

Subcategory: Medical Emergencies - (1)

Topic: Emergency Nursing Principles and Management: Controlling an External Hemorrhage (Active Learning Template - Basic Concept, RM AMS RN 11.0 Chp 2 Emergency Nursing Principles and Management)

- Direct pressure is the first and most important step in controlling an external hemorrhage. Apply firm, continuous pressure with a clean cloth or your gloved hand directly on the bleeding site to help stop or slow down the bleeding. If direct pressure is not effective, apply a tourniquet proximal to the bleeding site.
- Elevate the bleeding limb above the level of the heart. This can help reduce blood flow to the area and minimize bleeding.
- Continuously monitor the patient's vital signs, level of consciousness, and perfusion status. Reassess the bleeding site and the effectiveness of the interventions frequently.