

## Individual Performance Profile

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<b>ADJUSTED INDIVIDUAL TOTAL SCORE</b> <b>60.0%</b> <b>TIME SPENT</b> <b>29:09</b>	<b>Individual Name:</b> Jayda Davis <b>Student Number:</b> 7414857 <b>Institution:</b> Lakeview CON <b>Program Type:</b> BSN <b>Test Completed Date:</b> 4/25/2023 <b># of Points:</b> 60 <b>Attempt:</b> 1	<b>Focused Review Progress</b> View missed topics and launch study materials below. <b>Last accessed:</b> 4/25/2023 <b>Time spent:</b> 03:00:06
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PROFICIENCY LEVEL	MEAN		PERCENTILE RANK	
Level 1	National 66.7%	Program 66.9%	National 29	Program 29

**Safety and Infection Control:****Medications Affecting Coagulation: Reviewing Laboratory Findings for a Client Receiving Heparin**

- While taking Heparin, obtain baseline and monitor aPTT, platelet count, and hematocrit levels.
- Administer deep subcutaneous injections in the abdomen, ensuring a distance of 2 inches from the umbilicus. Do not aspirate.
- Keep aPTT levels between 1.5 to 2 times the baseline.

**Safe Medication Administration and Error Reduction: Completing an Incident Report for a Medication Error**

- Ensure the rights of medication administration before administering medications to a patient.
- Notify the provider of all errors and implement corrective measures immediately.
- Report all errors to the facility's risk managers.

**Psychosocial Integrity:****Substance Use Disorders: Client Teaching About Nicotine Replacement Options**

- Nicotine replacement therapy approximately doubles the success rate of smoking cessation.
- Apply a nicotine patch to an area of clean, dry skin each day.
- Stop using patches and notify the provider if local skin reactions occur.

**Pharmacological and Parenteral Therapies:**

#### Angina: Teaching about a Nitroglycerin Transdermal Patch

- Place the patch on a hairless area of skin and rotate sites to prevent skin irritation.
- Remove the patch at night to reduce the risk of developing tolerance to nitroglycerin.
- Ensure appropriate dose, patches should not be cut.

#### Antibiotics Affecting the Bacterial Cell Wall: Priority Finding to Report to Provider

- Antibiotics that affect the cell wall are bactericidal.
- Report to the provider any findings of an allergic response (dyspnea, skin rash, itching, and hives).
- Antibiotics that affect the cell wall include penicillin, cephalosporins, carbapenems, and monobactams.

#### Antilipemic Agents: Medications for High Cholesterol

- Antilipemic agents work in different ways to help lower low-density lipoprotein cholesterol levels and raise high-density lipoprotein cholesterol levels.
- Some medications for high cholesterol include simvastatin, lovastatin, and pravastatin.
- Alongside the medications, lifestyle modifications like regular activity, diet, and weight control should be included in the treatment of high cholesterol.

#### Bipolar Disorders: Teaching About Lithium Carbonate

- Discourage clients from breastfeeding if lithium therapy is necessary.
- Educate the client on early indications of lithium toxicity which include nausea, vomiting, and diarrhea.
- Use cautiously in older adult clients and clients who have thyroid disease seizure disorder, or diabetes.

#### Bone Disorders: Identifying Therapeutic Uses of Raloxifene

- Protects against breast cancer.
- Prevent and treat postmenopausal osteoporosis to prevent spinal fractures in female clients.
- Can decrease plasma levels of cholesterol.

#### Cardiac Glycosides and Heart Failure: Risk Factors for Digoxin Toxicity

- Digoxin toxicity includes fatigue, weakness, vision changes, and GI effects.
- To manage digoxin toxicity, treat dysrhythmias with phenytoin or lidocaine.
- With digoxin toxicity, stop administration of digoxin and potassium-wasting diuretics immediately.

#### Chronic Neurologic Disorders: Medications That Interact With Carbamazepine

- Carbamazepine causes a decrease in the effects of oral contraceptives and warfarin.
- Phenytoin and phenobarbital decrease the effects of carbamazepine.
- Grapefruit juice inhibits metabolism and thus increases carbamazepine levels.

### Chronic Neurologic Disorders: Assessing a Client's Response to Phenytoin.

- Phenytoin doses must be individualized to the client.
- Phenytoin levels increase when administered with oxcarbazepine.
- Phenytoin has a narrow therapeutic range, and strict adherence to the medication regimen is imperative to prevent toxicity or therapeutic failure.

### Electrolyte Imbalances: Findings Indicating Effective Hypertonic Infusion

- Increased sodium causes hypertonicity of the blood.
- Hypertonic IV fluids can cause excessive sodium levels.
- In severe hyponatremia, administer hypertonic oral and IV fluids as prescribed.

### Intravenous Therapy: Actions for an IV Infusion Infiltration

- Elevate the extremity.
- Stop the infusion and remove the catheter.
- Apply a cold or warm compress depending on the type of solution that infiltrated the tissue.

### Intravenous Therapy: Nursing Actions for IV Infiltration

- Encourage range of motion.
- Check with the provider to determine whether the client still needs IV therapy.
- Elevate the extremity.

### Intravenous Therapy: Selecting a Site to Initiate IV Therapy

- Select a site that is not painful or bruised and will not interfere with activity.
- Try distal veins first on the non-dominant hand.
- Select the vein by using visualization, gravity, fist clenching, and friction.

### Medications Affecting Coagulation: Safe Administration of Enoxaparin

- Do not aspirate.
- Do not rub the site for 1 to 2 min after the injection.
- Rotate sites between right and left anterolateral and posterolateral abdominal walls at least 2 inches from the umbilicus.

### Mycobacterial, Fungal, and Parasitic Infections: Interpreting Adverse Effects of Rifampin

- Rifampin is bactericidal as a result of inhibition of protein synthesis.
- Adverse effects include discoloration of saliva, teeth, sweat, tears, etc...
- Rifampin is a broad-spectrum antibiotic effective for gram-positive and gram-negative bacteria.

### Nutrition and Oral Hydration: Administering Medications to a Client Who Has Dysphagia

- Mix pills that can be crushed in yogurt, pudding, or apple sauce.
- Elevate the head of bed before administering medication.

- Call the pharmacist for alternative routes of administration.

#### Opioid Agonists and Antagonists: Administering Medication for Breakthrough Pain

- Assess pain level before administering medication for breakthrough pain.
- Assess vitals to ensure safe administration.
- Contact the provider to see what extra medications can be given for breakthrough pain.

#### Total Parenteral Nutrition: Initiating Therapy

- Administer TPN in a port.
- It can only be administered in a central vein.
- If you run out of TPN, you can administer Dextrose to supplement the rest of the TPN feeding.

#### Reduction of Risk Potential

- Antibiotics Affecting Protein Synthesis: Laboratory Values to Report
- Report protein lab values.
- Report BUN and Creatinine levels.
- Report findings in a urinalysis.

#### Depressive Disorders: Laboratory Values to Report

- Report sodium lab values.
- Report potassium values.
- Report creatinine and BUN levels.

#### Medications Affecting Coagulation: Monitoring for Adverse Effects of Heparin

- Adverse effects can include bleeding, red or brown urine, black or bloody stool, and vomiting of blood.
- Educate clients on bleeding prevention.
- Record dosage, route, and time of warfarin administration on a daily basis.. Report this information to the provider during follow-ups.

#### Physiological Adaptation

##### Bipolar Disorders: Assessing a Client Who is Taking Lithium for an Electrolyte Imbalance

- Monitor lithium levels while on this medication.
- Monitor EKG, CBC, and weight.
- Monitor calcium levels.