

N431 Adult Health II
Proctored ATI Remediation Template

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Assessment Name: RN Adult Medical Surgical 2019
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Instructions:

1. Download the report from your ATI product for the assessment you are completing this remediation template for
2. The report will be broken down into three (3) aspects:
 - a. Categories
 - i. These categories mimic the NCLEX-RN categories and include the following:
 1. Management of Care
 2. Safety and Infection Control
 3. Health Promotion and Maintenance
 4. Psychosocial Integrity
 5. Basic Care and Comfort
 6. Pharmacological and Parenteral Therapies
 7. Reduction of Risk Potential
 8. Physiological Adaptation
 - b. Subcategories
 - c. Topics
3. Complete the template on the following page by doing the following:
 - a. Main Category
 - 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 main categories listed under the “Topics to Review” section of the ATI report for this assessment.**
4. In the event you need additional space within the table, please add rows into the table to accommodate this
 - a. In the event, you need less space within the table than what is provided, you may delete those rows from the table to accommodate this OR put “N/A” → There may be main categories that you don’t have to remediate on and that is OK – you can either delete the table OR put “N/A”
5. 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.

6. 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 to the corresponding dropbox in E360.

Main Category: Management of Care

Subcategory: Case Management

Topic: Respiratory Failure: Recommending Equipment for a Client Who Has Cystic Fibrosis

- Mechanical ventilation is often required with positive-end expiratory pressure to prevent alveolar collapse.
- Oxygenate before suctioning secretions to prevent further hypoxemia.
- Position the client to facilitate ventilation and perfusion.

Subcategory: Referrals

Topic: Musculoskeletal Trauma: Identifying Need for a Referral for a Client Who Has Osteomyelitis

- Osteomyelitis is an infection of the bone that begins as an inflammation within the bone secondary to penetration by infectious organisms following trauma or surgical repair of a fracture.
- Leukocytosis and possible elevated sedimentation rate is a common manifestation.
- Long course (3 month) of IV and oral antibiotic therapy.

Main Category: Safety and Infection Control

Subcategory: Accident/Error/Injury Prevention

Topic: Spinal Cord Injury: Care of a Client Who Has a Halo Device

- The purpose of a halo fixation is to provide traction and/or immobilize the spinal column.
- Monitor skin integrity by providing pin care and assessing the skin under the halo fixation vest as appropriate.
- Maintain body alignment and ensure cervical tong weights hang freely.

Subcategory: Handling Hazardous and Infectious Materials

Topic: Cancer Treatment Options: Caring for a Client Who Is Receiving Brachytherapy

- Wear a lead apron while providing care, keeping the front of the apron facing the source of radiation.
- Place a sign on the door warning of the radiation source.
- Tongs are available for placing radioactive material into lead containers.

Main Category: Health Promotion and Maintenance

Subcategory: Health Promotion/Disease Prevention

Topic: Cancer Disorders: Risk Factors for Colorectal Cancer

- African American descent
- High-fat, low-fiber diet
- Age older than 50 years

Main Category: Psychosocial Integrity
Subcategory: Coping Mechanisms
Topic: Amputations: Providing Support Following an Alteration in Body Image
<ul style="list-style-type: none"> ● Allow the client and family to grieve for the loss of the body part and change in body image. ● The nurse should assess the psychosocial well-being of the client. ● The nurse should facilitate a supportive environment for the client and family so grief can be processed.
Subcategory: Support Systems
Topic: Alzheimer’s Disease: Providing a Family With Home-Care Instructions
<ul style="list-style-type: none"> ● Use a calendar to assist with orientation. ● Provide consistency by placing commonly used objects in the same location and using a routine schedule. ● Speak directly to the client in short, concise sentences.

Main Category: Basic Care and Comfort
Subcategory: Elimination
Topic: Benign Prostatic Hyperplasia, Erectile Dysfunction, and Prostatitis: Preventing Complications Following a Transurethral Resection of the Prostate
<ul style="list-style-type: none"> ● The rate of the CBI is adjusted to keep the irrigation return pink or lighter. ● Instruct the client not to void around the catheter as this causes bladder spasms. Avoid kinks in the tubing. ● Drink 12 or more 8-oz glasses of water each day unless contraindicated.
Subcategory: Mobility/Immobility
Topic: Mobility and Immobility: Complications of Immobility
<ul style="list-style-type: none"> ● Decreased respiratory movement resulting in decreased oxygenation and carbon dioxide exchange. ● Decreased circulation to tissue causing ischemia, which can lead to pressure injury. ● Decreased cardiac output, leading to poor cardiac effectiveness, which results in increased cardiac workload.
Subcategory: Nutrition and Oral Hydration
Topic: Heart Failure and Pulmonary Edema: Dietary Teaching About Sodium Restrictions
<ul style="list-style-type: none"> ● Regulate potassium intake as instructed and restrict fluid and sodium intake.

- Monitor daily weight.
- Monitor vital signs/

Main Category: Pharmacological and Parenteral Therapies

Subcategory: Adverse Effects/Contraindications/Side Effects/Interactions

Topic: Diabetes Mellitus Management: Medication to Withhold Prior to CT Scan with Contrast Media

- Metformin should be stopped for 24 to 48 hours before any type of elective radiography test with contrast dye.
- Metformin and contrast media can cause lactic acidosis due to acute kidney injury.
- Metformin reduces the production of glucose by the liver.

Subcategory: Expected Actions/Outcomes

Topic: Medications Affecting Blood Pressure: Administering Valsartan for Heart Failure

- Valsartan reduces mortality following an acute myocardial infarction.
- Monitor weight and edema.
- ACE inhibitors block the formation of angiotensin 2.

Subcategory: Medication Administration

Topic: Stroke: Administration of Tissue Plasminogen Activator (tPA)

- Give within 4.5 hours of initial manifestations for clients experiencing ischemic stroke.
- Support the client during periods of emotional lability and depression.
- Place on cardiac monitor to detect arrhythmias.

Subcategory: Parenteral/Intravenous Therapies

Topic: Intravenous Therapy: Priority Response to Infusion Pump Alarms

- Ensure the IV is patent prior to administration.
- Stop the infusion at signs of infiltration.
- Use the IV port closest to the client to administer the medication.

Subcategory: Total Parenteral Nutrition

Topic: Gastrointestinal Therapeutic Procedures: Assessing a Client for Complications of Total Parenteral Nutrition

- Follow sterile procedures to minimize the risk of sepsis.
- Check capillary glucose every 4 to 6 hours for at least the first 24 hours.
- Assess vital signs every 4 to 8 hours and weights daily.

Topic: Gastrointestinal Therapeutic Procedures: Findings to Report for Client Who is Receiving Total Parenteral Nutrition

- Report if the client is experiencing dyspnea, chest pain, anxiety, and hypoxia.

- Assess the lungs for crackles and monitor for respiratory distress.
- Report if the central line insertion site shows erythema, tenderness, and exudate.

Main Category: Reduction of Risk Potential

Subcategory: Diagnostic Tests

Topic: Hyperthyroidism: Assessing a Client for Chvostek's Sign Following a Thyroidectomy

- Chvostek's Sign can indicate hypocalcemia.
- Assess for percussion over the branches of the facial nerve over the temporal bone on both sides of the face.
- Ensure the IV calcium gluconate or calcium chloride are immediately available.

Subcategory: Laboratory Values

Topic: Postoperative Nursing Care: Caring for a Client Following an Appendectomy

- Monitor oxygen saturation and assist with coughing and deep breathing at least every 1 hour while awake.
- Encourage patient to ask for pain medication before pain gets severe.
- Monitor and report urinary output less than 30 mL/hr.

Subcategory: Potential for Alterations in Body Systems

Topic: Peptic Ulcer Disease: Monitoring Nasogastric Output

- Insert an NG tube for gastric decompression.
- GI bleeding shows up as coffee-ground emesis.
- Monitor fluid and electrolyte status.

Subcategory: Therapeutic Procedures

Topic: Legal Responsibilities: Witnessing Informed Consent

- Informed consent is a legal process by which a client or the client's legally appointed designee has given written permission for a procedure or treatment.
- For an invasive procedure or surgery, the client must provide written consent.
- The nurse must verify that consent is informed and witness the client signing the consent form.

Main Category: Physiological Adaptation

Subcategory: Alterations in Body Systems

Topic: Cancer Treatment Options: Precautions for Client Undergoing Radiation Therapy

- Keep the lead container in the client's room.
- Limit visitors to 30 min visits and remain 6 feet from the source.
- Place the client in a private room and keep the door closed as much as possible.

Topic: Hemodialysis and Peritoneal Dialysis: Proper Administration of Peritoneal Dialysis

- Warm the dialysate prior to instilling. Avoid the use of microwave ovens, which cause uneven heating.
- Keep the outflow bag lower than the client's abdomen.
- Maintain surgical asepsis of the catheter insertion site and when accessing the catheter.

Topic: Respiratory Diagnostic Procedures: Preparing a Client for a Thoracentesis

- Position the client sitting upright with arms and shoulders raised and supported on pillows and/or on an overbed table and with feet and legs well-supported.
- Auscultate lungs for reduced breath sounds on side of thoracentesis.
- Obtain a post procedure chest x-ray.

Subcategory: Fluid and Electrolytes Imbalances

Topic: Polycystic Kidney Disease, Acute Kidney Injury, and Chronic Kidney Disease: Findings to Report

- Cardiovascular findings include hypertension, fluid overload, and dysrhythmias from hyperkalemia.
- Respiratory findings include crackles, decreased oxygenation, and shortness of breath.
- Neurological findings include lethargy, muscle twitching, and seizures.

Subcategory: Hemodynamics

Topic: Electrocardiography and Dysrhythmia Monitoring: Priority Action for Sinus Bradycardia

- Medications like atropine can be used for sinus bradycardia.
- A pacemaker is used for sinus bradycardia.
- Monitor for client for pulmonary or systemic emboli following cardioversion.

Subcategory: Illness Management

Topic: Cardiovascular and Hematologic Disorders: Dietary Teaching with a Client Who Has Heart Failure

- Daily cholesterol intake should be less than 200 mg.
- Increasing fiber and carbohydrate intake, avoiding saturated fat, and decreasing red meat consumption can decrease the risk.
- Remove the skin from meats.

Subcategory: Medical Management

Topic: Electrocardiography and Dysrhythmia Monitoring: Identifying a Medical Emergency

- A pulmonary embolism is evidenced by dyspnea, chest pain, air hunger, and decreasing SaO₂.
- A cerebrovascular accident is evidenced by decreased level of consciousness, slurred speech, and muscle weakness/paralysis.
- An MI is evidenced by chest pain and ST segment depression or elevation.

Subcategory: Pathophysiology

Topic: Asthma: Identifying Pathophysiology

- Asthma is intermittent and reversible airflow obstruction of the bronchioles.
- The obstruction occurs either by inflammation or airway hyperresponsiveness.
- Manifestations of asthma include mucosal edema, bronchoconstriction, and excessive mucus production.