N431 Adult Health II
Proctored ATI Remediation Template

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Assessment Name: RN Adult Medical Surgical 2019
Semester: 3rd

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 • 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: Health Promotion and Maintenance
Subcategory: Health Promotion/Disease Prevention
Topic: Cancer Disorders: Risk Factors for Colorectal Cancer • CRC is a cancer of the rectum or colon. Most CRCs are adenocarcinoma, a tumor that arises from a gland in the epithelial layer of the colon. • Adenocarcinoma begins as a polyp and is benign in the early stages. If left untreated, the polyp will grow, and the risk of malignancy increases. • CRC can metastasize (through blood or lymph) to the liver (most common site), lungs, brain, or bones. Spreading can occur as a result of peritoneal seeding (during surgical resection of tumor).

Main Category: Psychosocial Integrity
Subcategory: Coping Mechanisms
Topic: Alzheimer's Disease: Providing a Family with Home-Care Instructions • Assess cognitive status, memory, judgment, and personality changes. • Encourage the client and family to participate in an AD support group. • Provide a safe environment: frequent monitoring/visual checks, keep clients from stairs, elevators, and exits; and remove or secure dangerous items in the client's environment.
Subcategory: Support Systems
Topic: Amputations: Providing Support Following an Alteration in Body Image • Allow for the client and family to grieve for the loss of the body part and change in body image. • Feelings can include depression, anger, withdrawal, and grief. • The nurse should assess the psychosocial well-being of the client. Assess for altered feelings of self-concept and self-esteem, and willingness and motivation for rehabilitation.

Main Category: Basic Care and Comfort
Subcategory: Elimination
Topic: Disorders of the Eye: Priority Action for eye irrigation • Instill one drop in each eye twice daily. • Wait 5-10 minutes between each eye drop if more than one is prescribed to prevent one medication from diluting one other. • Avoid touching the tip of the application bottle to the eye.

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

- Stop medications 24-48 hours before any type of elective radiographic test with iodinated contrast dye and restart 48 hours after.
- Metformin: slows carbohydrate absorption in the intestines
- Increases tissue sensitivity to insulin

Subcategory: Blood and Blood Products

Topic: Blood and Blood Product Transfusions: Priority Action for a Transfusion Reaction

- Stop the transfusion
- Remove the blood tubing from the IV access. Avoid infusing further blood products into the circulatory system.
- Monitor vital signs and fluid status.

Subcategory: Expected Actions/Outcomes

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

- Reduce mortality following an acute MI
- Heart failure
- Take at the same time daily and avoid high-fat foods at the time of administration

Subcategory: Medication Administration

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

- Place the client on a cardiac monitor to detect arrhythmias
- Monitor for changes in LOC indicates ICP
- Institute seizure precautions

Subcategory: Parenteral/Intravenous Therapies

Topic: Dosage Calculation: Calculating an IV Rate for Levofloxacin

- What is the unit of measurement the nurse should calculate?
- What is the dose the nurse should administer?
- What is the dose available and does units need to be converted?

Topic: Intravenous Therapy: Priority Response to Infusion Pump Alarms

- Assess the IV site for findings of infiltration
- Closely monitor the IV site and dressing
- Provide treatment according to facility protocol

Subcategory: Total Parenteral Nutrition (TPN)

Topic: Gastrointestinal Therapeutic Procedures: Findings to Report for Client Who is Receiving TPN

- Aspiration pneumonia: notify provider and obtain chest x-ray
- Refeeding syndrome: Monitor for new onset of confusion or seizures.
- Assess for shallow respirations.

Main Category: Reduction of Risk Potential

Subcategory: Laboratory Values

Topic: Acid-Base Imbalances: Interpreting Postoperative ABG Values

- Acid-base imbalances are a result of insufficient compensation.
- Respiratory acidosis: hypoventilation results from respiratory depression from opioids, poisons, and anesthetics.
- Metabolic acidosis results from excess production of hydrogen ions, diabetic ketoacidosis, and starvation.

Topic: Acute Respiratory Disorders: Expected Findings for a client who has pneumonia

- Anxiety, fatigue, weakness, and chest discomfort due to coughing
- Decreased oxygen levels
- Chills, flushed face, diaphoresis, shortness of breath, tachypnea, pleuritic chest pain, crackles and wheezes, and coughing.

Topic: Electrolyte Imbalances: Increasing the Risk for Digoxin Toxicity

- Hypokalemia increases the risk of digoxin toxicity
- Monitor cardiac rhythm
- Monitor level of consciousness and maintain safety

Subcategory: Potential for Alteration in Body Systems

Topic: Noninflammatory Bowel Disorders: Findings to Report

- Frequent vomiting
- Constant pain
- Significant abdominal distention

Topic: Peptic Ulcer Disease: Monitoring Nasogastric Output

- Monitor nasogastric tube drainage, scant blood can be seen within the first 12-24 hours
- Notify the provider before repositioning or irrigating the nasogastric tube
- Monitor bowel sounds and advance diet as tolerated

Subcategory: System Specific Assessments

Topic: Electrocardiography and Dysrhythmia Monitoring: Medications for Treating Bradycardia

- Atropine
- Dopamine or epinephrine infusion if unresponsive to atropine
- Pacemaker

Topic: Head Injury: Assessment of Cranial Nerve Function

- Eyeblink response
- Gag reflex
- Tongue and shoulder movement

Topic: Ingestion, Digestion, Absorption, and Metabolism: Findings of Malnutrition

- Pitting edema
- Hair loss
- Wasted appearance

Subcategory: Therapeutic Procedures

Topic: Gastrointestinal Therapeutic Procedures: Discharge Teaching for a client who has an ileostomy

- Watch for indications of stomal ischemia/necrosis
- Note indications of an intestinal obstruction following discharge
- Follow instructions regarding dietary changes, and use ostomy appliances that can help manage flatus and odor

Topic: Legal Responsibilities: Witnessing Informed Consent

- A competent adult must sign the form for informed consent
- When the person giving the informed consent is unable to communicate due to a language barrier or a hearing impairment, a trained medical interpreter must intervene.
- Individuals who can grant consent for another person include the following: parent of a minor, legal

guardian, court-supervised representative, and power of attorney over healthcare.

Main Category: Physiological Adaptation

Subcategory: Alterations in Body Systems

Topic: Chest Tube Insertion and Monitoring: Clarifying provider prescription

- Assess for allergies to local anesthetics
- Administer pain and sedation medications as prescribed
- Prep the insertion site with povidone-iodine

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

- Installation of hypertonic dialysate solution into the peritoneal cavity and subsequent dwell times
- Drain the dialysate solution that includes the waste products
- The peritoneum serves as the filtration membrane

Topic: Hyperthyroidism: Priority Finding Following Partial Thyroidectomy

- Monitoring for hemorrhage
- Monitoring for thyroid storm/crisis
- Maintain a patent airway

Topic: Postoperative Nursing Care: Identifying a Gravity Wound Drain

- Jackson-Pratt drain
- Penrose drain
- Hemovac drain

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

- Ensure the consent form has been signed by the patient
- Obtain X-ray pre-procedure to locate pleural effusion and determine the needle size needed
- Position the client upright, and make sure the patient doesn't talk, move, or cough during the procedure.

Topic: Respiratory Management and Mechanical Ventilation: Therapeutic Effect of Positive End-Expiratory Pressure

- Forced/enhanced lung expansion
- Improved gas exchange
- Decreased work of breathing

Subcategory: Fluid and Electrolyte Imbalances

Topic: Electrolyte Imbalances: Manifestations of Sodium Imbalance

- Excessive sweating
- Coma, seizure, and respiratory distress
- Tachycardia, rapid thready pulse, orthostatic hypotension, fatigue, confusion, and nausea

Subcategory: Hemodynamics

Topic: Anemias: Manifestations of Anemia

- Little to no manifestations in mild cases
- Pallor, fatigue, irritability, pain, sensitivity to cold, and dyspnea on exertion
- Tachycardia and palpitations, paresthesia in hands and feet, and shortness of breath

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

- Treat if the client is symptomatic
- Atropine
- Pacemaker

Subcategory: Illness Management

Topic: Cardiovascular and Hematologic Disorders: Dietary teaching with a client who has heart failure

- Encourage the client to consume a high-fiber diet
- Consume a diet that is limited in trans fats, saturated fats, and cholesterol
- Increase intake of omega-3 fatty acids found in fish, flaxseed, soybeans, canola, and walnuts

Topic: Heart Failure and Pulmonary Edema: Teaching about left-sided heart failure

- Ventricular failure

- Dyspnea, orthopnea, and fatigue
- Pulmonary congestion, frothy sputum, altered mental status, and nocturia

Topic: Preoperative Nursing Care: Recognizing Deviations in Laboratory Values

- Obtain preoperative cardiac history
- Monitor for electrolyte imbalances
- Monitor respiratory rate and oxygen saturation

Subcategory: Pathophysiology

Topic: Asthma: Identifying Pathophysiology

- A chronic disorder of the airways that results in intermittent and reversible airflow obstruction of the bronchioles
- The obstruction occurs by inflammation or airway hyperresponsiveness
- Manifestations include mucosal edema, bronchoconstriction, and excessive mucus production

Subcategory: Unexpected Response to Therapies

Topic: Blood and Blood Product Transfusions: Monitoring for Transfusion Reaction

- Assess vital signs and temperature frequently
- Initiate infusion of 0.9% sodium chloride using new tubing
- Stop the transfusion