

N444 Concept Synthesis
Proctored ATI Remediation Template

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Assessment Name: RN Comprehensive Predictor 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 Sick 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: Advance Directives/Self-Determination/Life Planning

Topic: Therapeutic Communication: Responding to a Client Who Has Stage IV Metastatic Cancer

- The nurse should elicit and attend to the clients' thoughts, feelings, concerns, and needs.
- The nurse should express empathy and genuine concern for clients' and families' issues.
- The nurse should be client centered, not social or reciprocal.

Subcategory: Assignment, Delegation, and Supervision

Topic: Managing Client Care: Planning to Follow Progressive Discipline

- The first infraction in progressive discipline is informal reprimand, manager, and employee meet, discuss the issue, and suggestions for improvement/correction.
- The second infraction is a written warning, manager meets with employee to distribute written warning, review of specific rules/policy violations, and discussion of potential consequences if infractions continue.
- The third infraction is an employee placed on suspension with or without pay. The fourth infraction would be employee termination.

Subcategory: Client Rights

Topic: Professional Responsibilities: Informed Consent for Participating in a Research Study

- The nurse should be ready to advocate for the client when they are giving informed consent.
- The nurse's role in the informed consent process is to witness the clients signature on the informed consent form and to ensure that informed consent has been appropriately obtained.
- Nurses are responsible for knowing the laws in the state of practice.

Subcategory: Collaboration with Interdisciplinary Team

Topic: Cardiovascular Diagnostic and Therapeutic Procedures: Evaluating Understanding of PICC Therapy

- The nurse should practice hand hygiene before working with a CVC.
- The nurse should observe the site Q2hrs for infection and infiltration.
- The nurse should clean the site with chlorhexidine for 30 seconds and allow to air dry prior to insertion.

Main Category: Safety and Infection Control

Subcategory: Accident/Error/Injury Prevention

Topic: Adverse Effects, Interactions, and Contraindications: Identifying Treatment for Urticaria

- The nurse should administer diphenhydramine which is an antihistamine to decrease manifestations of urticaria.
- Treatment for urticaria could include a cold compress.
- Treatment for urticaria could also include ginger or aloe vera.

Topic: Safe Medication Administration and Error Reduction: Identifying Complete Medication Prescriptions

- The medication prescription should include the name of the medication, generic or brand.
- The medication prescription should include the strength and dosage of the medication.
- The medication prescription should include time and frequency of administration.

Subcategory: Use of Restraints/Safety Devices

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

- Elbow restraints are appropriate to use when an infant has just had a cleft lip repair, to keep the child

from injuring the repair site.

- Caregivers should follow instructions on the proper use of restraints.
- Restraints should be removed periodically to assess skin, allow limb movement, and provide comfort.

Main Category: Health Promotion and Maintenance

Subcategory: Aging Process

Topic: Newborn Assessment: Expected Findings

- The expected weight of a newborn is 5.5-8.8 lbs.
- The expected length of a newborn is 18-22 in.
- The expected head circumference is 12.6-14.5 in.

Subcategory: Ante/Intra/Postpartum and Newborn Care

Topic: Medical Conditions: Prioritizing Care of Multiple Clients

- The nurse needs to evaluate if the client has any other indications.
- The nurse should assess for bleeding from the client.
- The nurse should assess if there is an increase in pelvic pressure or urge to push.

Subcategory: Health Promotion/Disease Prevention

Topic: Heart Failure and Pulmonary Edema: Risk Factors for Heart Failure

- Older adults have an increased risk for heart failure and can have worse manifestations due to increased systolic blood pressure and some medications.
- Left sided heart failure risk factors could include hypertension, coronary artery disease, angina, MI, and valvular disease.
- Right sided heart failure risk factors could include left sided heart failure, right ventricular MI, and pulmonary problems.

Main Category: Psychosocial Integrity

Subcategory: Behavioral Interventions

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

- With this anxiety disorder the client will experience recurrent panic attacks.
- The panic attacks typically last 15 to 30 minutes.
- The client might experience behavior changes and/or persistent worries about when the next attack will occur.

Topic: Group and Family Therapy: Identifying Characteristics of a Therapeutic Group

- The therapeutic group will use open and clear communication.
- The therapeutic group will encourage the client to maximize positive interactions, feel empowered to make decisions, and strengthen feelings of self-worth.
- The therapeutic group will have opportunities for development of interpersonal issues.

Topic: Personality Disorders: Caring for a Client Who Has Antisocial Personality Disorder

- Antisocial personality disorder is in cluster B.
- Antisocial personality disorders are seen in clients with evidence of conduct disorder before age 15.
- Antisocial personality disorder is characterized by disregard for others with exploitation, lack of empathy, repeated unlawful actions, deceit, and failure to accept personal responsibility.

Subcategory: Cultural Awareness/Cultural Influences on Health

Topic: Cultural, Ethnic, and Religious Influences: Assessing a Client's Dietary Acculturation

- Nurses should take this into consideration when planning and communicating nutritional goals with clients.
- Considering the clients' foodway can be a helpful way to determine dietary preferences.
- Roles the nurse should include of foods are, food preparation, what foods are considered edible, timing of meals, and use of food for health or other benefits.

Topic: Cultural, Ethnic, and Religious Influences: Planning Client Care During Passover

- There are many variations and stipulations in eating on holy days.
- Some religions observe feasts on specific days such as Eastern Orthodox Christian, Judaism.
- During Passover, Judaism calls for consumption of unleavened bread only.

Subcategory: Mental Health Concepts

Topic: Neurocognitive Disorders: Interventions for a Client Who Has Dementia

- Nursing interventions are focused on protecting the client from injury, as well as promoting client dignity and quality of life.
- The nurse should use the Blessed Dementia Scale to get client behavioral information.
- The nurse should use the Functional Dementia Scale to get information regarding the client's ability to perform self-care, extent of the client's memory loss, mood changes, and the degree of danger to self and/or others.

Subcategory: Substance Use and Other Disorders and Dependencies

Topic: Assessment and Management of Newborn Complications: Manifestations of Cocaine Exposure During Pregnancy

- The newborn could have CNS issues.
- The newborn could have metabolic, vasomotor, and respiratory issues.
- The newborn could have gastrointestinal issues.

Main Category: Basic Care and Comfort

Subcategory: Assistive Devices

Topic: Sensory Perception: Caring for a Client Who Has Hearing Loss

- Collect equipment necessary to care for any assistive devices the client might have and make sure they are available for use.
- The nurse should sit and face the clients.
- The nurse should avoid covering their mouth while speaking.

Subcategory: Non-Pharmacological Comfort Interventions

Topic: Benign Prostatic Hyperplasia, Erectile Dysfunction, and Prostatitis: Identifying Medication Interactions With Saw Palmetto

- A medication interaction with Saw Palmetto could be birth control pills.
- A medication interaction with Saw Palmetto could be anticoagulants.
- A medication interaction with Saw Palmetto could be an NSAID.

Topic: Pain Management: Caring for a Client Who Is in Active Labor

- A client can do sensory stimulation strategies such as aromatherapy, breathing techniques, imagery, music, use of focal points, and subdued lighting.
- A client can do cutaneous stimulation strategies such as therapeutic touch and massage, walking, rocking, and effleurage.
- A client could be administered local/regional analgesics.

Topic: Pain Management: Promoting Comfort During a Heel Stick

- The nurse could initiate skin to skin contact with a parent.
- The nurse could have the mother breastfeed during the heel stick.
- The nurse could provide nonpharmacological effects to the newborn while performing the heel stick.

Subcategory: Nutrition and Oral Hydration

Topic: Cancer and Immunosuppression Disorders: Teaching a Client Who Has Anorexia

- The client should eat small amounts of high-protein foods loaded with calories and nutrients.
- The client should try to consume food in the morning when appetite is best.
- The client should try to avoid food odors.

Topic: Heart Failure and Pulmonary Edema: Priority Action for Fluid Overload

- A priority action for fluid overload is tracking fluid intake.
- A priority action for fluid overload is following the fluid intake guidelines from a doctor.
- A priority action for fluid overload is ensuring that they do not consume too much sodium.

Topic: Sources of Nutrition: Best Source of Vitamin C

- Vitamin C is found in citrus fruits such as oranges and lemons.
- Vitamin C can also be found in tomatoes, peppers, green leafy vegetables, and strawberries.
- If the client is a cigarette smoker, they are advised to increase vitamin C intake by 35 mg/day due to increased oxidative stress and metabolic turnover.

Subcategory: Personal Hygiene

Topic: Grief, Loss, and Palliative Care: Performing Postmortem Care Prior to a Family Visit

- The nurse should verify the correct patient using two identifiers.
- The nurse should perform hand hygiene and don gloves, gown, mask, and eye protection.
- The nurse should follow the organization's practice for care of the body if the organs and/or tissues are being donated.

Main Category: Pharmacological and Parenteral Therapies

Subcategory: Adverse Effects/Contraindications/Side Effects/Interactions

Topic: Eye and Ear Disorders: Teaching About Adverse Effects of Timolol

- The client should report stinging discomfort in the eye immediately after the drop is instilled.
- The client might have occasional conjunctivitis, blurred vision, photophobia, or dry eyes.
- The client might have systemic effects of beta blockade on heart and lungs.

Topic: Medications for Depressive Disorders: Monitoring for Interactions Between Citalopram and St. John's Wort

- The nurse should monitor PT and INR levels.
- The nurse should assess for indications of bleeding.
- The nurse should monitor for the need for dosage adjustment.

Topic: Therapeutic Procedures to Assist with Labor and Delivery: Identifying a Contraindication to Oxytocin Administration

- A contraindication could be significant cephalopelvic disproportion.
- A contraindication could be fetal prematurity where the lungs are not fully developed.
- A contraindication could be non-reassuring fetal status.

Subcategory: Blood and Blood Products

Topic: Anemias: Expected Laboratory Findings Following a Blood Transfusion

- The nurse should monitor for an increase in blood pressure.
- The nurse should monitor Hgb and Hct twice per week.
- The nurse should monitor for cardiovascular event if Hgb increases too rapidly, greater than 1 g/dL in 2 weeks.

Subcategory: Medication Administration

Topic: Diabetes Mellitus: First Action When Mixing NPH and Regular Insulin

- The nurse should first wash their hands.
- The nurse should inspect regular insulin for clarity.
- The nurse should gently rotate the NPH insulin.

Topic: Neurocognitive Disorders: Providing Teaching About Memantine

- Memantine blocks the entry of calcium into nerve cells, thus slowing down brain-cell death.
- Memantine can be used concurrently with a cholinesterase inhibitor.
- Memantine can be administered with or without food.

Subcategory: Parenteral/Intravenous Therapies

Topic: Hospitalization, Illness, and Play: Preparing a School-Age Child for IV Catheter Insertion

- The nurse should first determine the child's developmental stage.
- The nurse can use creative forms of distractions.
- The nurse should let the child be with their parents if wanting to do so.

Main Category: Reduction of Risk Potential

Subcategory: Changes/Abnormalities in Vital Signs

Topic: Vital signs: Measuring Pulse Deficit

- To determine the pulse deficit accurately there needs to be two clinicians that measure the apical and radial pulse rates simultaneously.
- With dysrhythmias the heart can contract ineffectively resulting in a beat at the apical site with no pulsation at the radial pulse point.
- It can also be determined by simultaneous palpation at the radial artery and auscultation at the PMI, near the heart apex.

Subcategory: Lab Values

Topic: Electrolyte Imbalances: Nursing Interventions for Hypocalcemia

- The nurse should administer oral or IV calcium supplements.
- The nurse should implement seizure and fall precautions.
- The nurse should encourage foods high in calcium, including dairy products, canned salmon, sardines, fresh oysters, and dark leafy green vegetables.

Subcategory: Potential for Alterations in Body Systems

Topic: Blood Neoplasms: Caring for a Child Who Has Neutropenia

- The nurse should provide emotional support to the child and family.
- The nurse should use pharmacological and nonpharmacological interventions to provide around the clock pain management.
- The nurse should notify the treatment team immediately if the child develops a fever.

Subcategory: Potential for Complications of Diagnostic Tests/Treatments/Procedures

Topic: Gastrointestinal Therapeutic Procedures: Priority Finding to Report Following a Paracentesis

- The nurse should report changes in mental and cognitive status due to change in fluid and electrolyte balance.
- If the insertion site continues to leak after holding pressure for several minutes, dry sterile gauze dressings should be applied and changed as often as necessary.
- The nurse should continue to monitor vital signs and insertion site per facility protocol.

Topic: Nasogastric Intubation and Enteral Feedings: Administering a Nasogastric Tube Feeding to a School-Age Child

- The nurse should auscultate for bowel sounds, and palpate the abdomen for distention, pain, and rigidity.
- The nurse should raise the bed to a level of comfort to work with.
- The nurse should use the correct procedure for tube insertion, wearing clean gloves, and evaluate the outcome.

Topic: Respiratory Diagnostic Procedures: Complications of Thoracentesis

- A complication of thoracentesis is mediastinal shift, the thoracic structures shift to one side of the body.
- A complication of thoracentesis is pneumothorax.
- A complication of thoracentesis is increased risk for bleeding.

Subcategory: System Specific Assessments

Topic: Postoperative Nursing Care: Caring for a Client Who Has Delayed Wound Healing

- The nurse should involve the client in therapy to reduce the swelling.
- The nurse should administer medications to improve blood flow.
- The nurse should give special skin ointments to help the wounds heal.

Subcategory: Therapeutic Procedures

Topic: Gastrointestinal Therapeutic Procedures: Client Teaching for Colostomy Care

- The client can clean the stoma with water, soap, or baby wipes.
- The client should make sure the stoma is completely dry before putting on a new pouch.
- The client should empty the pouch when it is 1/3 full.

Main Category: Physiological Adaptation

Subcategory: Alterations in Body Systems

Topic: Acute and Infectious Respiratory Illnesses: Caring for an Infant Who Has Respiratory Syncytial Virus

- The nurse should closely monitor progression of illness and ensuing respiratory distress by observing for increased heart and respiratory rate, retractions, nasal flaring, and restlessness.
- The nurse should make emergency equipment for intubation readily accessible.
- The nurse should position the child to have optimal ventilation without increasing distress that would contribute to increasing respiratory distress.

Topic: Medical Conditions: Hyperemesis Gravidarum

- Hyperemesis gravidarum is excessive nausea and vomiting that is prolonged past 16 weeks of gestation.
- Hyperemesis gravidarum can cause weight loss, dehydration, nutritional deficiencies, electrolyte imbalances, and ketonuria.
- Some risk factors would include maternal age younger than 30 years old, multifetal gestation, gestational trophoblastic disease, diabetes, and/or family history of hyperemesis.

Topic: Nursing Care of Newborns: Preventing Heat Loss Through Conduction

- Conduction is the loss of body heat resulting from direct contact with a cooler surface.
- The nurse should prevent this by preheating a radiant warmer, warming a stethoscope and other instruments, and pad a scale before weighing the newborn.
- The nurse should place the newborn directly on the parents' chest and cover it with a warm blanket.

Topics: Respiratory Management and Mechanical Ventilation: Nursing Action for a Low-Pressure Alarm

- Low pressure alarms can indicate a low exhaled volume due to a disconnection, cuff leak, and/or tube displacement.
- The nurse should have reintubation equipment at the bedside.
- The nurse should suction the oropharynx and trachea.

Subcategory: Fluid and Electrolyte Imbalances

Topic: Electrolyte Imbalances: Actions for Hypokalemia

- The nurse should administer prescribed potassium replacement, and make sure to never give potassium via IM or subcutaneous route which can then lead to tissue necrosis.
- The nurse should monitor and maintain adequate urine output.
- The nurse should observe for shallow ineffective respirations and diminished breath sounds.

Subcategory: Medical Emergencies

Topic: Burns: Priority Action for a Toddler Who Has Burns

- The nurse should cover the burn with a clean cloth to prevent contamination.
- The nurse should cleanse with mild soap and tepid water to avoid excess friction.
- The nurse should understand that removing blisters is controversial.

Topic: Musculoskeletal Trauma: Identifying Manifestations of a Fat Emboli

- Fat embolism can occur after the injury, usually within 12 to 48 hours following long bone fractures or with total joint arthroplasty.
- Some early manifestations could include dyspnea, headache, tachycardia, confusion, and chest pain.
- Some late manifestations could include cutaneous petechiae and hemorrhages.

Subcategory: Pathophysiology

Topic: Pressure Injury, Wounds, and Wound Management: Staging a Pressure Ulcer

- Stage one is a nonblanchable erythema of intact skin.
- Stage two is partial thickness skin loss with exposed dermis.
- Stage three is full-thickness skin loss.

Topic: Rest and Sleep: Expected Manifestations of Sleep Apnea

- A manifestation could be loud snoring.
- A manifestation could be episodes in which you stop breathing during sleep.
- A manifestation could be gasping for air during sleep.

Main Category: Clinical Judgement

Subcategory: Recognize Cues

Topic: Fractures: Identifying Findings Requiring Follow-up for a Child Who Has Arm Pain

- Edema should require follow-up.
- Warmth or redness should require follow-up.
- Deformity should require follow-up.

Subcategory: Analyze Cues

Topic: Fractures: Analyzing Assessment Findings for a Child Who Has Arm Pain

- The nurse should obtain a history of how the injury occurred.
- The nurse should monitor vital signs, pain, and neurologic status.
- The nurse should also assess the neurovascular status of the injured extremity.

Subcategory: Take Actions

Topic: Fractures: Priority Actions for a Child Who Has a Fracture

- The nurse should stop any bleeding immediately.
- The nurse should immobilize the injured area.
- The nurse should apply ice packs to limit swelling and to help relieve the pain.

Subcategory: Evaluate Outcomes

Topic: Fractures: Evaluating Discharge Teaching for a Child Who Has a Fracture

- The client should be aware of the need for adequate pain relief.
- The client should be able to identify manifestations of infection.
- The client should know how to report manifestations of compartment syndrome immediately.