N433 Infant, Child, and Adolescent Health
Proctored ATI Remediation Template

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Assessment Name: ATI Remeediation
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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 • 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: Bone and Soft Tissue Cancers

Topic: LABORATORY TESTS

- **CBC**
- **Ruling out infection.**
- **Iron deficiency anemia.**

Topic: DIAGNOSTIC PROCEDURES

- **X-rays, computed tomography (CT) scans, or magnetic resonance imaging (MRI) of the primary site**
- **Bone marrow biopsy**
- **CT of the chest and bone scans to evaluate metastasis.**

Topic: NURSING CARE

- **Provide emotional support for the child and family.**
- **Explain the possibility of sterilization to adolescents and caregivers, if indicated**
- **Use developmentally appropriate language when explaining the diagnosis and treatment.**

Subcategory: Complications of Infants

Topic: COMPLICATION

- **Disorientation**
- **Spasticity or catatonic-like positions**
- **Seizures**

Topic: EXPECTED FINDINGS

- **Growth failure**
- **Frequent vomiting**
- **Irritability**

Topic: NURSING CARE

- **Monitor phenylalanine levels in newborns who are breastfeeding. Breast milk contains phenylalanine, so exclusively breastfeeding might not be possible.**
- **Monitor the newborn for findings of PKU.**
- **Provide referrals to support groups.**

Subcategory: Pediatric Emergencies

Topic: RISK FACTORS

- **Primary inefficient gas exchange due to cerebral trauma, brain tumor, toxicity, asphyxia, or CNS infection**
- **Obstructive lung disease caused by aspiration, infection, tumor, anaphylaxis, laryngospasm, or asthma.**
- **Restrictive lung disease resulting from cystic fibrosis, pneumonia, or respiratory distress syndrome.**

Topic: EARLY INDICATIONS OF RESPIRATORY DISTRESS

- **Grunting**
- **Dyspnea**
- **Wheezing**

Topic: LABORATORY TESTS

- **ABGs**
- **Chest x-rays**

Main Category: Safety and Infection Control

Subcategory: Seizures

Topic: RISK FACTORS FOR EPILEPSY

- **Trauma**
- **Hemorrhage**
- **Congenital defects**

Topic: NURSING CARE

- **Maintain a position to provide a patent airway.**
- **Be prepared to suction oral secretions.**
- **Turn child to a side-lying position.**

Topic: CLIENT EDUCATION

- **Take medications at the same time every day to enhance effectiveness.**
- **Be aware of medication and food interactions that are specific to each medication.**
- **Observe for adverse effects of the medications.**

Subcategory: Head Injury

Topic: RISK FACTORS

- **Lack of supervision**
- **Inappropriate/absent safety practices**
- **Improper use of safety devices.**

Topic: EXPECTED FINDINGS

- **History of events leading up to the injury, including any reports of dizziness, headache, diplopia, and/or vomiting.**
- **Amnesia before or after injury.**
- **Alcohol or ingestion of controlled substances.**

Topic: LABORATORY TESTS

- **Arterial blood gases**
- **CBC with differential**
- **Liver function tests**

Subcategory: Cognitive and Sensory Impairments

Topic: DIAGNOSTIC PROCEDURES

- **Partial visual impairment**
- **Legal blindness**
- **Visual screening**

Topic: NURSING CARE

- **Maintain normal to bright lighting for the child when reading, writing, or participating in any activity that requires close vision.**
- **Assess infants and children for visual impairments and identify children that are high-risk.**
- **Observe for behaviors that suggest a decrease or loss of vision.**

Topic: RISK FACTORS

- **Exposure to loud environmental sounds.**
- **Chronic ear infection or ototoxic medications.**
- **Chronic conditions.**

Main Category: Health Promotion and Maintenance

Subcategory: Health Promotion of Adolescents (12 to 20 Years

Topic: COGNITIVE DEVELOPMENT

- **Able to think through more than two categories of variables concurrently.**
- **Capable of evaluating the quality of their own thinking.**
- **Able to maintain attention for longer periods of time.**

Topic: PSYCHOSOCIAL DEVELOPMENT

- **Swings or variations in emotions are common during early adolescence, with outward expressions of emotions.**
- **During middle adolescence, introspection is increased.**
- **Stability of emotions and anger management are usually developed by the later adolescent years.**

Topic: AGE-APPROPRIATE ACTIVITIES

- **Nonviolent music**
- **Sports**
- **Caring for a pet**

Subcategory: HEALTH PROMOTION

Topic: IMMUNIZATIONS

- **Centers for Disease Control and Prevention (CDC) recommendations for healthy adolescents 13 to 18 years old include catch-up doses of any recommended immunizations not received at 11 to 12 years old.**
- **Yearly seasonal influenza vaccine: Trivalent inactivated influenza vaccine or live, attenuated influenza vaccine by nasal spray. Recommendation can be season-specific.**
- **16 to 18 years: Meningococcal (MCV4) booster is recommended if first dose was received between the ages of 13 and 15 years. A booster dose is not needed if the first dose is received at age 16 or older.**

Topic: NUTRITION

- **Avoid using food as a reward.**
- **Emphasize physical activity.**
- **Encourage adolescents to make healthy food selections for meals and snacks.**

Topic: DENTAL HEALTH

- **Corrective appliances are most common with this age group.**
- **Adolescents should brush after meals and snacks, and at bedtime.**
- **Adolescents should floss daily.**

Subcategory: INJURY PREVENTION

Topic: Bodily harm

- **Keep firearms unloaded and in a locked cabinet or box.**
- **Teach proper use of sporting equipment prior to use.**
- **Insist on helmet use and/or pads when roller skating, skateboarding, bicycling, riding scooters, skiing, and snowboarding.**

Topic: Burns

- **Teach fire safety.**
- **Adolescents should apply sunscreen when outside.**
- **Adolescents should avoid tanning beds.**

Topic: Motor-vehicle injuries

- **Discourage use of cell phones while driving and enforce laws regarding use.**
- **Teach the dangers of combining substance use with driving.**
- **Role model desired behavior.**

Main Category: Psychosocial Integrity

Subcategory: Death and Dying

Topic: FACTORS INFLUENCING LOSS, GRIEF, AND COPING ABILITY

- **Type and significance of loss**
- **Culture and ethnicity**
- **Spiritual and religious beliefs and practices.**

Topic: GRIEF AND MOURNING

- **Intense thoughts**
- **Distressing yearning**
- **Feelings of loneliness.**

Topic: CURRENT STAGE OF DEVELOPMENT

- **Have little to no concept of death.**
- **Egocentric thinking prevents their understanding death.**
- **Mirror parental emotions.**

Subcategory: Acute Neurologic Disorders

Topic: EXPECTED FINDINGS

- **Photophobia**
- **Vomiting**
- **Irritability**

Topic: LABORATORY TESTS

- **Blood cultures are sometimes positive when the CSF culture is negative.**
- **Collect complete blood counts.**
- **CSF analysis indicative of meningitis.**

Topic: NURSING ACTIONS

- **Have the client void prior to the procedure.**
- **Assist the provider with the procedure.**
- **A topical anesthetic cream can be applied over the biopsy area 45 min to 1 hr prior to the procedure.**

Subcategory: Oxygen and Inhalation Therapy

Topic: POSTPROCEDURE NURSING ACTIONS

- **Encourage deep breathing.**
- **Report significant findings to the provider.**
- **Remain with the child and provide emotional support to decrease anxiety.**

Topic: PREPARATION OF THE CLIENT

- **Determine if the child should use a mouthpiece, mask, or blow-by.**
- **Perform a preprocedural assessment, including vital signs and oxygen saturation.**
- **Pour the medication into the small container and attach the device to an air or oxygen source.**

Topic: CLIENT EDUCATION

- **Teach the family how to operate a home nebulizer.**
- **Teach the family about adverse effects of the prescribed medications.**

Main Category: Basic Care and Comfort

Subcategory: Musculoskeletal Congenital Disorders

Topic: CLUBFOOT

- **A complex deformity of the ankle and foot.**
- **Can affect one or both feet, occur as an isolated defect, or in association with other disorders.**
- **Categorized as positional clubfoot, syndromic, and congenital.**

Topic: EXPECTED FINDINGS

- **Talipes varus: inversion.**
- **Talipes valgus: eversion.**
- **Talipes calcaneus: dorsiflexion (toes are higher than the heels.**

Topic: NURSING CARE

- **Encourage parents to hold and cuddle the child.**
- **Encourage parents to meet the developmental needs of the child.**
- **Perform neurovascular and skin integrity checks.**

Subcategory: Chronic Neuromusculoskeletal Disorders

Topic: CEREBRALALSY

- **Cerebral palsy (CP) is a nonprogressive impairment of motor function, especially that of muscle control, coordination, and posture.**
- **CP can cause abnormal perception and sensation; visual, hearing, and speech impairments; seizures; and cognitive disabilities.**
- **CP manifests differently in each child. Developmental outcomes vary and are dependent on the severity of the injury.**

Topic: RISK FACTORS

- **Maternal infection**
- **Premature birth**
- **Multiple births**

Topic: PHYSICAL ASSESSMENT FINDINGS

- **Gagging or choking with feeding, poor suck reflex.**
- **Tongue thrust.**
- **Poor head control.**

Subcategory: Skin Infections and Infestations

Topic: SKIN INFIONS

- **Bacterial infections include impetigo contagiosa, pyoderma, folliculitis, furuncle, carbuncle, cellulitis, and staphylococcal scalded skin syndrome.**
- **Viral infections include verruca, verruca plantaris, herpes simplex virus, varicella zoster virus, and molluscum contagiosum.**
- **Fungal infections include tinea capitis, tinea corporis, tinea cruris, tinea pedis, and candidiasis.**

Topic: NURSING CARE

- **Assess the general condition of the affected area.**
- **Assess for evidence of associated infection.**
- **Assist in preventing the child to itch or touch the affected areas.**

Topic: CLIENT EDUCATION

- **Do not squeeze vesicles.**
- **Apply topical medications as prescribed.**
- **Administer oral medications as prescribed.**

Main Category: Pharmacological and Parenteral Therapies

Subcategory: Cardiovascular Disorders

Topic: CONGENITAL HEART DISCONGEASE

- **Increased pulmonary blood flow: ASD, VSD, PDA.**
- **Decreased pulmonary blood flow: Tetralogy of Fallot, tricuspid atresia.**
- **Obstruction to blood flow: Coarctation of the aorta, pulmonary stenosis, aortic stenosis.**

Topic: MATERNAL FACTORS

- **Infection**
- **Alcohol or other substance use disorder during pregnancy.**
- **Diabetes mellitus.**

Topic: EXPECTED FINDINGS

- **Increased pulmonary blood volume on the right side of the heart increases pulmonary blood flow.**
- **These defects include manifestations and findings of heart failure.**

Subcategory: Hematologic Disorders

Topic: EPISTAXI

- Short, isolated occurrences of epistaxis (nosebleeds) are common in childhood.
- Although epistaxis is rarely an emergency, it causes anxiety for the child and the child's caregivers.

Topic: RISK FACTORS

- **Trauma (picking or rubbing the nose) can cause mucous membranes in the nose, which are vascular and fragile, to tear and bleed.**
- **Low humidity, allergic rhinitis, upper respiratory infection, blunt injury, or a foreign body in the nose can precipitate a nosebleed.**
- **Medications that affect clotting factors can increase bleeding.**

Topic: NURSING CARE

- **If needed, pack cotton or tissue into the side of the nose that is bleeding.**
- **Encourage the child to breathe through their mouth while pressure is being applied to their nose to control the bleeding.**
- **Apply ice across the bridge of the nose if bleeding continues.**

Subcategory: Acute Infectious Gastrointestinal Disorders

Topic: LABORATORY TESTS

- **Hct, Hgb, BUN, creatinine, and urine-specific gravity levels are usually elevated with dehydration.**
- **Stool test for occult blood.**
- **Urinalysis if dehydration is suspected.**

Topic: CLIENT EDUCATION

- **Parents should place transparent tape over the child's anus at bedtime, preferably after the child is asleep. The caregiver should remove the tape just prior to the child awaking, if possible, prior to the child toileting or bathing.**
- **The specimen should be brought to the laboratory for microscopic evaluation for the presence of pinworm ova.**
- **Parents should use good hand hygiene during this procedure.**

Topic: NURSING CARE

- **Assess and monitor I&O.**
- **Initiate IV fluids as ordered.**
- **Administer antibiotic as prescribed.**

Main Category: Reduction of Risk Potential

Subcategory: Renal Disorders

Topic: ACUTE GLOMERULONEPHRITIS

- **Benign inflammation of the glomeruli which causes intravascular coagulation that lasts about 1 to 2 weeks.**
- **Common features are oliguria, edema, hypertension and circulatory congestion, hematuria, and proteinuria.**
- **Acute post-streptococcal glomerulonephritis (APSGN) is an antibody-antigen disease that occurs as a result of certain strains of the group A beta-hemolytic streptococcal infection and is most commonly seen in children between the ages of 5 and 8 years.**

Topic: EXPECTED FINDINGS

- **Hematuria**
- **Proteinuria**
- **Irritability**

Topic: NURSING CARE

- **Monitor urine volume and character.**
- **Weigh the child on the same scale with the same amount of clothing daily.**
- **Monitor vital signs.**

Subcategory: Fractures

Topic: RISK FACTORS

- **Obesity**
- **Poor nutrition**
- **Developmental characteristics, ordinary play activities, and recreation that place children at risk for injury.**

Topic: EXPECTED FINDINGS

- **Crepitus**
- **Deformity**
- **Edema**

Topic: NURSING CARE

- **Remove jewelry or objects that can cause constriction on the affected extremity.**
- **Stabilize the injured area, avoiding unnecessary movement.**
- **Provide splinting at the joint above and below the injured area.**

Subcategory: Dermatitis and Acne

Topic: Diaper dermatitis

- **Bright red rash that extends gradually**
- **Fiery red and scaly areas on the scrotum and penis**
- **Red or scaly areas on the labia**

Topic: NURSING CARE

- **Promptly remove the soiled diaper.**
- **Clean urine the perineal area with a nonirritating cleanser.**
- **Expose the affected area to air.**

Topic: MEDICATIONS

- **Hydroxyzine or diphenhydramine**
- **Antibiotics**
- **Antifungal ointments**

Main Category: Physiological Adaptation

Subcategory: Acute and Infectious Respiratory Illnesses

Topic: PHYSICAL ASSESSMENT FINDINGS

- **Mouth odor**
- **Mouth breathing**
- **Snoring**

Topic: LABORATORY TESTS

- **Throat culture**
- **CBC**

Topic: RISK FACTORS

- **Exposure to a viral or bacterial agent**
- **Immature immune systems**

Subcategory: Asthma

Topic: RISK FACTORS

- **Family history of asthma or allergies.**
- **Sex (boys)**
- **Exposure to tobacco smoke**

Topic: TRIGGERS TO ASTHMA

- **Indoor: mold, cockroach antigen, dust, dust mites**
- **Outdoor: grasses, pollen, trees, shrubs, molds, spores, air pollution, weeds**
- **Irritants: Tobacco smoke, wood smoke, odors, sprays**

Topic: EXPECTED FINDINGS

- **Restlessness, irritability**
- **Anxiety**
- **Sweating**

Subcategory: Cystic Fibrosis

Topic: EXPECTED FINDINGS

- **Family history of cystic fibrosis.**
- **Medical history of respiratory infections, growth failure.**
- **Meconium ileus at birth manifested as distention of the abdomen, vomiting, and inability to pass stool. Meconium ileus is the earliest indication of cystic fibrosis in the newborn.**

Topic: ENDOCRINE AND REPRODUCTIVE SYSTEM FINDINGS

- **Viscous cervical mucus**
- **Decreased or absent sperm**
- **Decreased insulin production.**

Topic: LABORATORY TESTS

- **Blood specimen**
- **Sputum culture for detection of infection**