N321 Adult Health I
Proctored ATI Remediation Template

Student Name:
Assessment Name:
Semester:

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: Assignment, Delegation, and Supervision
Topic: Delegation and Supervision: Delegating Tasks to an Assistive Personnel • Delegation is the process of transferring the performance of a task to another member of the health care team • Nurses are responsible for supervising the performance of client care tasks they delegate to others • Nurses should provide clear directions **Topic:** • • • **Topic:** • • •
Subcategory: Client Rights
Topic: Legal and Ethical Issues: Client Right to Refuse Treatment • Mental health nurses are responsible for practicing ethically, competently, and safely • Clients have the right to refuse treatment • Nurses are responsible for understanding and protecting client rights **Topic:** • • • **Topic:** • • •
Subcategory: Establishing Priorities
Topic: Eating Disorders: Manifestations of Anorexia Nervosa • Clients are preoccupied with food and rituals of eating • Onset can be associated with a stressful life event • Have higher rates of impulsivity and are more likely to abuse drugs and alcohol **Topic:** • • • **Topic:** • • •

Main Category: Safety and Infection Control
Subcategory: Acciedent/Error/Injury Prevention
Topic: Neurocognitive Disorders: Making Room Assignments • Assign delirium clients to a room close to nurses' station for close observation • Have clients sit in rooms with windows to help with time orientation • Provide a room with low visual and auditory stimuli **Topic: Neurocognitive Disorders: Priority Assessment for a Client Who Has Delirium** • **Delirium is short-term and reversible** • **Delirium and neurocognitive disorder have some similarities and distinct differences** • **Treatment of clients who have neurocognitive disorders requires compassionate understanding of both client and family** **Topic:** • • •
Subcategory:
Topic: • • • **Topic:** • • • **Topic:** • • •
Subcategory:
Topic: • • • **Topic:** • • • **Topic:** • • •

Main Category: Health Promotion and Maintenance
Subcategory: Health Promotion/Disease Prevention
Topic: Mental Health Issues of Children and Adolescents: Contributing Factors to Development of Conduct Disorder • Manifestations generally worsen in situations that require sustained attention and unstructured group situations • Oppositional defiant disorder can develop into conduct disorder • Clients who have conduct disorder demonstrate a persistent pattern of behavior that violates the rights of others or rules and norms of society **Topic: Neurocognitive Disorders: Risk Factors for Delirium** • **Psychosocial changes is a risk factor for delirium** • **Other risk factors include older age, aphasia, restraint use, and change in client environment** • **Advance age is the primary risk factor** **Topic:** • • •
Subcategory:
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Subcategory:
Topic: • • • **Topic:** • • • **Topic:** • • •

Main Category: Psychosocial Integrity

Subcategory: Abuse/Neglect

Topic: Family and Community Violence: Priority Nursing Action for Suspected Child Abuse

- Violence from one person toward another is a social act involving a serious abuse of power
- Risk factors for abuse toward a child includes age under 4
- Spiral fractures are common in child abuse

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Subcategory: Behavioral Interventions

Topic: Personality Disorders: Establishing Client Goals

- Maladaptive behaviors of a personality disorder are not always perceived by the individual as dysfunctional
- Personality disorders often co-occur with other mental health diagnoses
- Clients who have personality disorders often have comorbid substance use disorders

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Subcategory: Coping Mechanisms

Topic: Creating and Maintaining a Therapeutic and Safe Environment: Assessing for Transference

- Therapeutic encounters can occur in any nursing setting if a nurse is sensitive to a client's needs and uses effective communication skills
- The therapeutic nurse-client relationship differs from social and intimate relationships
- One of the nurses' roles is to consistently focus on the client's ideas experiences and feelings

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Subcategory: End-of-Life Care

Topic: Care of Those Who are Dying and/or Grieving: Identifying Indications of Clinical Depression

- **Clients experience loss in many aspects of their lives**
- **Grief is the inner emotional response to loss and is exhibited in as many ways as there are individuals**
- **End-of-life care can include palliative interventions which promote comfort**

Subcategory: Family Dynamics

Topic: Personality Disorders: Recommended Therapy

- **Therapeutic communication and intervention are promoted when client behaviors are**

anticipated

- **A firm yet supportive approach will help build a therapeutic nurse client relationship**
- **Psychotherapy can help improve the client's ability to respond to social cues from others**

Subcategory: Mental Health Concepts

Topic: Eating Disorders: Evaluating the Effectiveness of Treatment for a Client Who Has Anorexia Nervosa

- **The mortality rate for eating disorders is high and suicide is also a risk**
- **Comorbidities include depression, personality disorders, substance use disorder, and anxiety**
- **Onset can be associated with a stressful life event such as college**

Topic: Eating Disorders: Identifying Manifestations of Anorexia Nervosa

- **There are two types**
- **One type is restricting which the individual restricts food intake**
- **The other is purging/binge-eating, where they engage in those behaviors**

Topic: Eating Disorders: Planning Care for a Client Who Has Anorexia Nervosa

- **Encourage client decision making to allow for a sense of control**
- **Provide a highly structured milieu**
- **Develop and maintain a trusting nurse/client relationship through consistency and therapeutic communication**

Subcategory: Substance Use and Other Disorders and Dependencies

Topic: Substance Use and Addictive Disorders: Caring for a Client Who Has Opioid Use Disorder

- **Meds for opioid withdrawal include clonidine**
- **Nurses should monitor vital signs**
- **Encourage client to adhere to treatment plan**

Topic: Substance Use and Addictive Disorders: Identifying Manifestations of Alcohol Use Withdrawal

- **Dementia manifestations are an indication of alcohol use in older adults**
- **Older adults can show effects of alcohol use at lower doses than younger adults**
- **Alcohol withdrawal delirium can occur 2 to 3 days after alcohol cessation**

Subcategory: Therapeutic Communication

Topic: Effective Communication: Encouraging Expression of Feelings

- **Communication is a complex process of sending, receiving, and comprehending messages between two or more people**
- **Communicating effectively is a skill that the nurse develops**
- **Nurses should be aware of how they communicate nonverbally**

Main Category: Basic Care and Comfort
Subcategory: Non-pharmacological comfort interventions
Topic: Depressive Disorders: Recommendations to Decrease Social Isolation • Assess client's risk for suicide • Make time to be with the client, even if they don't speak • Do not discontinue medications suddenly **Topic:** • • • **Topic:** • • •
Subcategory:
Topic: • • • **Topic:** • • • **Topic:** • • •
Subcategory:
Topic: • • • **Topic:** • • • **Topic:** • • •

Main Category: Pharmacological and Parenteral Therapies

Subcategory: Adverse Effects/Contraindications/Side Effects/Interactions

Topic: Medications for Depressive Disorders: Contraindications for Selegiline

- Depressive disorders affect many clients and are a leading cause of disability
- Manifestations of anticholinergic effects include dry mouth and blurred vision
- Medications treat both positive and negative symptoms

Topic: Medications for Psychotic Disorders: Contraindications for Aripiprazole

- **Suppression of acute episodes is a goal of treatment**
- **Positive symptoms include flight of ideas**
- **Negative symptoms include social withdrawal and lack of energy**

Topic:

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Subcategory: Expected Actions/Outcomes

Topic: Medications for Bipolar Disorders: Evaluating Effectiveness of Mood Stabilizers

- Lithium is used in the treatment of bipolar disorders
- Lithium controls episodes of acute mania
- Lithium prevents the return of mania or depression and decreased incidence of suicide

Topic: Medications for Children and Adolescents Who Have Mental Health Issues: Evaluating Client Understanding of Methylphenidate

- **It is a medical used to raise dopamine and norepinephrine**
- **Therapeutic use is in ADHD**
- **Nurses should administer last dose of the day before 4 pm**

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Subcategory:

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Main Category: Reduction of Risk Potential
Subcategory: Laboratory Values
Topic: Medications for Anxiety and Trauma- and Stressor-Related Disorders: Reportable Laboratory Results • Busipirone is a medication used to treat anxiety disorders • Benzodiazepines enhance the inhibitory effects of gamma-aminobutyric acid • Benzodiazepines are a term treatment for generalized anxiety disorder **Topic: Medications for Bipolar Disorders: Monitoring Laboratory Results** • **Bipolar disorder is primarily managed with mood stabilizing medications** • **Bipolar disorder can be treated with antiepileptic medications** • **Lithium produces neurochemical changes in the brain** **Topic:** • • •
Subcategory:
Topic: • • • **Topic:** • • • **Topic:** • • •
Subcategory:
Topic: • • • **Topic:** • • • **Topic:** • • •

Main Category: Clinical Judgement
Subcategory: Analyze Cues
Topic: Family and Community Violence: Evaluating Data for a Client Who Reports Partner Violence • Violence from one person toward another is a social act involving a serious abuse of power • Partner violence follows a predictable cycle • Nurses must prepare to deal with various types of violence **Topic:** • • • **Topic:** • • •
Subcategory: Take Actions
Topic: Psychotic Disorders: Providing Client Education to Prevent Relapse • Clients should practice self-care to prevent relapse • Nurse should teach the importance of compliance • Clients should keep a log/journal of feelings to monitor medication effectiveness **Topic:** • • • **Topic:** • • •
Subcategory:
Topic: • • • **Topic:** • • • **Topic:** • • •