

N441 Adult Health III  
Proctored ATI Remediation Template

Student Name: Jayda Davis  
Assessment Name: **RN Adult Medical Surgical 2023**  
Semester: Spring 2024

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	5. Basic Care and Comfort
2. Safety and Infection Control	6. Pharmacological and Parenteral Therapies
3. Health Promotion and Maintenance	7. Reduction of Risk Potential
4. Psychosocial Integrity	8. Physiological Adaptation
	9. Clinical Judgment
  - 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:

<b>SAMPLE Main Category: Management of Care</b>
<b>SAMPLE Subcategory: Case Management</b>
<b>SAMPLE Topic: Anemias: Discharge Teaching for a Client Who is Recovering from Sickle Cell Crisis</b> <ul style="list-style-type: none"><li>• SAMPLE Critical Point #1: Anemia is the abnormally low amount of circulation RB, Hgb concentration, or both.</li><li>• 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.</li><li>• SAMPLE Critical Point #3: A patient should have their hemoglobin checking in 4 to 6 weeks to determine efficacy.</li></ul>

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: Safety and Infection Control

### Subcategory: Accident/Error/Injury Prevention

#### Topic: Arthroplasty: Safety Considerations for Continuous Passive Motion Machine

- Turn machine off during meals.
- Avoid placing pillows behind the knee or positioning the mattress to create a knee gatch.
- Place one pillow under the lower calf and foot to cause a slight extension of the knee joint and to prevent flexion contractures.

#### Topic: Head injury: Making room assignments for a group of clients.

- A contusion occurs when the brain is bruised, and the client has a period of unconsciousness associated with stupor and or confusion.
- Diffuse axonal injury is a widespread injury to the brain that results in coma and is seen in severe head trauma.
- A concussion occurs after head trauma that results in a change in the client's neurologic function but no identified brain damage and usually resolves within 72 hours.

#### Topic: Seizures and Epilepsy: Priority intervention for a client experiencing a seizure.

- Move client away from objects or things that could cause injury.
- Position the client to provide a patent airway.
- Loosen restrictive clothing.

### Subcategory: Handling Hazardous and Infectious Materials

#### Topic: Cancer Treatment Options: Nursing care for a client who is receiving internal radiation therapy.

- Place the client in a private room. Keep the door closed as much as possible.
- Wear a dosimeter film badge that records personal amount of radiation exposure.
- Keep all linens and dressings in room until the radiation source is removed, to ensure it is not lost in the trash or laundry.

### Subcategory: Standard Precautions/Transmission-Based Precautions/Surgical Asepsis

#### Topic: HIV/Aids: Teaching home care

- Avoid raw foods and undercooked foods.
- Adhere to the antiretroviral dosing schedules.
- Bathe daily using antimicrobial soap.

## Main Category: Health Promotion and Maintenance

### Subcategory: Health Promotion and Disease Prevention

#### Topic: Cardiovascular and Hematologic Disorders: Dietary Teaching for a Client Who Has Cardiovascular Disease.

- Limit foods high in saturated fats.
- Cut down on sodium intake.
- Provide education on a fibrous diet including vegetables, fruits, beans, and whole grains.

## Main Category: Basic Care and Comfort

### Subcategory: Mobility/Immobility

#### Topic: Stroke: Evaluating Clients Mobility with Use of Quad Cane

- Helps provide extra support to allow the person to walk independently and safely.
- Provide assistance and extra help with ambulation with quad cane.
- Consult to physical therapy to help provide reestablishment of ambulation with an assistive device.

### Subcategory: Nonpharmacological Interventions

#### Topic: Cancer Treatment Options: Planning Teaching for Client with Mucositis.

- Discourage consumption of salty, acidic, or spicy foods.
- Avoid using glycerin-based mouthwashes or mouth swabs for client care.
- Administer a topical anesthetic prior to meals.

## Main Category: Pharmacological and Parenteral Therapies

### Subcategory: Medication Administration

#### Topic: Heart failure and pulmonary edema: Client teaching about furosemide

- Ensure adequate diet of foods and drinks high in potassium.
- Furosemide is a rapid-acting diuretic to promote fluid excretion.
- Education to patient that taking furosemide can help improve cardiac output.

## Main Category: Reduction of Risk Potential

### Subcategory: Changes/Abnormalities in Vital Signs

#### Topic: Head Injury: Early manifestations of increased intracranial pressure

- Severe headache, nausea, vomiting.
- Deteriorating level of consciousness, restlessness, and irritability.
- Deterioration in motor function and abnormal posturing.

### Subcategory: Potential for Alterations in Body Systems

#### Topic: Hyperthyroidism: Assessing a client for Chvostek's sign following a thyroidectomy

- For a positive Chvostek's sign there with tingling and muscle twitching.
- A positive Chvostek's sign indicates hypocalcemia.
- Assess and observe sign underneath eyes.

### Subcategory: Therapeutic Procedures

#### Topic: Chest tube insertion and monitoring: Teaching about water seal drainage

- Always keep the chamber upright and below the chest tube insertion.
- Water seals are created by adding sterile fluids to a chamber up to the 2 cm line.
- Continuous bubbling in the water seal chamber indicates an air leak in the system.

## Main Category: Physiological Adaptation

### Subcategory: Hemodynamics

#### Topic: Angina and Myocardial Infarction: Priority interventions for Acute Angina

- Administer oxygen via cannula or face mask.
- Establish cardiac monitoring and get an EKG.
- Administer up to 3 tablets of nitroglycerin to see if chest pain stops.

### Subcategory: Illness Management

#### Topic: Chronic Obstructive Pulmonary Disease: Caring for a client who has emphysema

- Encourage deep breathing and use of an incentive spirometer.
- Position the client to maximize ventilation.
- Promote adequate nutrition.

#### Topic: Hemodialysis and peritoneal dialysis: indications of peritonitis

- Fever, redness, and swelling may be seen.
- Purulent drainage or cloudy/discolored drained dialysate could also be a sign of peritonitis.
- To prevent this, maintain surgical asepsis during the procedure.

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### Subcategory: Pathophysiology

#### Topic: Asthma: Identifying pathophysiology

- Chronic disorder of the airways that can result into intermittent and reversible airflow obstruction of the bronchioles.
- Manifestations include mucosal edema, excessive mucus production, and bronchoconstriction.
- Can be triggered through pollutants, odors, stress, chemicals, or seasonal allergies.

#### Topic: Burns: Expected findings following full thickness burns

- Severe edema and eschar are noted.
- Sensation is minimal or absent.
- Color could be red, black, brown, yellow, or white.

## Main Category: Clinical Judgment

### Subcategory: Recognize Cues

#### Topic: Complications of diabetes mellitus: identifying manifestations of DKA or HHS

- DKA & HHS: Polyuria, polydipsia, and polyphagia.
- HHS: Orthostatic hypotension, blurred vision, headache, and weakness.
- DKA: fruity breath, kussmaul respirations, and metabolic acidosis.

#### Topic: Complications of diabetes mellitus: Priority treatments for a client experiencing DKA

- Provide isotonic fluid replacement to maintain perfusion to vital organs.
- Administer regular insulin as an IV bolus dose and then follow with a continuous IV infusion of regular insulin.
- Administer sodium bicarbonate by slow IV infusion for severe acidosis.

### Subcategory: Analyze cues

#### Topic: Heart failure and pulmonary edema: Caring for a client who has heart failure.

- Monitor daily weight and intake and output.
- Assess for shortness of breath and dyspnea on exertion.
- Restrict fluid and sodium intake.

**Topic: Complications of diabetes mellitus: complications of DKA.**

- Mild to moderate hyperkalemia can be common in patients with DKA.
- Monitor for and report changes in neurologic status.
- Monitor for high or low sodium levels.

**Subcategory: Prioritize hypothesis**

**Topic: Complications of diabetes mellitus: prescriptions for a client experiencing DKA**

- Short term insulin will be used in treatment for DKA.
- Regular insulin is the medication that will be used.
- Patients will have a continuous drip of regular insulin if they're in DKA.

**Subcategory: Generate Solutions**

**Topic: Angina and myocardial infarction: evaluating a client's condition**

- Watch for manifestations of respiratory depression.
- Assess for nausea and vomiting.
- Monitor and assess for neuro changes.

**Topic: Angina and myocardial infarction: Actions to take for a client experiencing myocardial infarction**

- Assess for changes on serials ECGs.
- Assess lab levels myoglobin, CKMB, and Troponin I or T.
- Administer morphine, oxygen, nitrate, and aspirin.

**Topic: Gastrointestinal therapeutic procedures: Caring for a client receiving TPN**

- Keeping dextrose 10% in water at the bed side in case the solution is unexpectedly ruined, or the next bag is not available.
- Check capillary glucose every 4 to 6 hours.
- Older adult clients have an increased incidence of glucose intolerance.

**Topic: Heart failure and pulmonary edema: monitoring changes in client status**

- Monitor heart sounds and breath sounds.
- Maintain a patent airway.
- Continuously monitor vital signs.

**Topic: Angina and Myocardial infarction: Evaluating a client's condition**

- Monitor urine output hourly to ensure kidney perfusion.
- Assess pain level frequently alongside vital signs.
- Monitor for decreased level of consciousness.

ADJUSTED INDIVIDUAL  
TOTAL SCORE

68.2%

TIME SPENT

47:42

**Individual Name:** Jayda Davis

**Student Number:** 7414857

**Institution:** Lakeview CON

**Program Type:** BSN

**Test Completed Date:** 4/15/2024 **# of Points:** 141

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### Focused Review Progress

View missed topics and launch study materials below.

**Last accessed:** 4/19/2024    **Time spent:** 03:55:25

Review