

**N444 Concept Synthesis
Proctored ATI Remediation Template**

Student Name: Justin Munoz

Assessment Name: RN Comprehensive Predictor 2019

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:

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 <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: Safety and Infection Control

Subcategory: Anxiety Disorders

Topic: Anxiety Assessment

- Clients can experience anxiety due to an acute medical condition, (hyperthyroidism or pulmonary embolism). It is important to assess the manifestations of anxiety in a medical facility to rule out a physical cause
- Adverse effects of many medications can mimic anxiety disorders.
- Substance-induced anxiety is related to current use of a chemical substance or to withdrawal effects from a substance (alcohol).

Topic: Anxiety Expected Findings

- The client exhibits uncontrollable, excessive worry for the majority of days over at least 6 months.
- The client might experience behavior changes and/or persistent worries about when the next attack will occur.
- The client might report physical manifestations (actual or factitious) in an attempt to avoid the social situation or need to perform.

Topic: Anxiety Screening Tools

- Hamilton Rating Scale for Anxiety
- Panic Disorder Severity Scale
- Yale-Brown Obsessive Compulsive Scale

Subcategory: Cultural and Spiritual Nursing Care

Topic: Culture

- Culture involves the similarities shared among members of a group. These similarities include ways of thinking (values, norms, beliefs about health and illness), language and communication, and customs (art, dress, music).
- Culture is transmitted generationally (heritage) or across groups
- Ethnicity (the shared identity, bond, or kinship people feel with their country of birth or place of ancestral origin) affects culture

Topic: Culturally Responsive Nursing Care

- Culturally responsive nursing care involves the delivery of care that transcends cultural boundaries and considers a client's cultural beliefs as they affect health, illness, and lifestyle
- Cultural awareness involves self-awareness for the nurse, examining personal attitudes related to various aspects of culture, to identify possible bias
- Cultural sensitivity means that nurses are knowledgeable about the cultures prevalent in their area of practice.

Topic: Barrier to Culturally Responsive Nurse Care

- Language, communication, and perception of time differences.
- Culturally inappropriate tests and tools that lead to misdiagnosis.
- Ethnocentrism is the belief that one's culture is superior to others. Ethnocentric ideas interfere with the provision of cultural nursing care.

Subcategory: Spirituality

Topic: Spirituality

- Spirituality can play an important role to achieve balance in life, maintain health, seek health care,

and deal with illness and injury

- Connectedness helps clients find comfort and empowerment despite life's stressors.
- Faith is a belief in something or a relationship with a higher power. Faith can be defined by a culture or a religion.
- Hope is a concept that includes anticipation and optimism and provides comfort during times of crisis.

Topic: Religion

- Religion is a system of beliefs practiced outwardly to express one's spirituality, typically related to a particular form of worship, sect, or spiritual denomination
- Religious practice can include reading sacred texts, having sacred symbols, prayer, meditation, connecting with spiritual leaders and a community of other followers, and observing holy days.
- Religions often dictate guidelines related to dress, diet, modesty, birth, and death, although individuals from the same religion might adhere to different practices from each other.

Topic: Rituals and Observances

- Illness can be the result of nonhuman spirits invading the body.
- Death is seen as a stage of life and can advocate withdrawal of life sustaining measures.
- There is a common belief in faith healing; can use "laying on of hands" during prayer.

Main Category: Management of Care

Subcategory: Chapter 2 Coordinating Client Care

Topic: Collaboration with the Interprofessional Team

- Collaboration involves discussion of client care issues in making health care decisions, especially for clients who have multiple problems
- The Nurses role is to Coordinate the interprofessional team.
- The nurse also provides the opportunity for care to be provided with continuity over time and across disciplines

Topic: Lewin's Change Theory

- Unfreezing: Need for change is identified or created.
- Change/Movement: Strategies (driving forces) that overcome resistance to change (restraining forces) are identified and implemented.
- Refreezing: The change is integrated and the system is re-stabilized.

Topic: Critical Pathways

- A critical or clinical pathway or care map can be used to support the implementation of clinical guidelines and protocols
- Case managers often initiate critical pathways, but they are used by many members of the interprofessional team.
- Critical pathways are often specific to a diagnosis type and outline the typical length of stay and treatments.

Subcategory: Information Technology

Topic: Documentation

- Purposes for medical records include communication, legal documentation, financial billing, education, research, and auditing.

- The purpose of reporting is to provide continuity of care and enhance communication among all team members who provide care to the same clients, thus promoting client safety.
- Nurses should conduct reporting in a confidential manner

Topic: Elements of Documentation

- Documentation should be factual with subjective and objective data.
- Nurses should document subjective data as direct quotes, within quotation marks, or summarize and identify the information as the client's statement
- Objective data should be descriptive and should include what the nurse sees, hears, feels, and smells.

Topic: Reporting Formats

- Change of shift reports involve giving formats of conclusions of each shifts to the next nurse assuming responsibility for the client.
- Reports should include significant events that occur during the previous shift.
- Other details to include in the report related changes in medication, treatments, procedures, and discharge planning.

Subcategory: Practice Settings and Nursing Roles in the Community

Topic: Exposure to Hazards

- Work can be frustrating and contribute to stress, resulting in aggression and violence against others.
- Identify jobs that are repetitive, boring, or physically and psychologically draining, which can help to identify workers who might feel tired, angry, and generally inadequate.
- Nurses can refer such workers to employee-assistance programs that provide confidential counseling and referrals to other professional services if needed

Topic: Occupational Health and Legislation

- **Occupational Health and Safety Administration (OSHA):** Develops and enforces workplace health regulations to protect the safety and health of workers.
- **National Institute for Occupational Safety and Health (NIOSH):** A part of the Centers for Disease Control and prevention, it focuses on identification of workplace hazards and research for prevention of work-related injury and illness.
- **National Advisory Committee on Occupational Safety and Health (NACOSH):** The committee's purpose is to advise the secretaries of labor and health and human services on policies and programs that affect occupational safety and health

Topic: Living Environment

- The home health nurse must evaluate the living environment for safety, paying close attention to nonsecure rugs, electrical outlets, and extension cords; the use of oxygen; low lighting; the need for safety devices in the bathroom; and other potential environmental hazards
- Older adults are at a particular risk for falls
- Providing education encourages clients to be independent and involved in their own care.

Subcategory: Client Education and Discharge Teaching

Topic: Assessing a Client's Knowledge of post partum care

- Inquire about the client's current knowledge regarding self-care.
- Assess the client's home support system and who will be there to assist. Include support persons in the educational process.
- Determine the client's readiness for learning and their ability to verbalize or demonstrate the information that has been given

Topic: Nursing Interventions for Postpartum Care

- Postpartum includes client teaching on self-care
- The client also includes perineal care in cleansing the area from front to back with warm water.
- Breast care include emphasize the importance of hand hygiene prior to breastfeeding to prevent infection

Topic: Indications of Potential Complications

- Postpartum complications include hemorrhage, infection of the breasts, wounds, incisions, and postpartum depression
- Ensure the client has an appointment set for a postpartum follow-up visit or a number to call and schedule an appointment
- Inform that the client should set the follow-up visit should take place in 4 to 6 weeks; following a cesarean birth, the visit should take place in 2 weeks.

Subcategory: Client Education

Topic: Patient Education

- Teaching is goal-driven and interactive. It involves purposeful actions to help individuals acquire knowledge, modify attitudes and behavior, and learn new skills
- Motivation influences how much and how quickly a person learns.
- The desire to learn and the ability to learn and understand the content affect motivation

Topic: Nurse and Client Education

- Nurses provide health education to individuals, families, and communities
- Some of the most common factors influencing clients' educational needs are health, education level, socioeconomic status, and cultural and family influences.
- Emotional status, spiritual factors, health perception, willingness to participate, and developmental level are also important to consider when providing client education.

Topic: Adult Learners

- Adults are often able to identify what they need to learn.
- Adults learn well by building on prior information and life experiences.
- Adults' learning abilities can be influenced by other life factors

Subcategory: Health Promotion of Infants (2 days to 1 year)

Topic: General Measurements of full-term Newborn

- The head circumference averages between 33 and 35 cm (13 and 14 in).
- The crown to rump length is 31 to 35 cm (12.5 to 14 in), approximately equal to head circumference.
- Head to heel length averages 48 to 53 cm (19 to 21 in)

Topic: Physical Development

- Infant size is tracked using weight, height, and head circumference measurements.
- Posterior fontanel closes by 2 to 3 months of age and Anterior fontanel closes by 12 to 18 months of age.
- Six to eight teeth should erupt in infants' mouths by the end of the first year of age. The first teeth typically erupt between the ages of 6 and 10 months (average age 8 months)

Topic: Cognitive Development

- Infants progress from reflexive to simple repetitive to imitative activities.
- Separation, object permanence, and mental representation are the three important tasks accomplished in this stage
- Separation: Infants learn to separate themselves from other objects, object permanence: The process by which infants learn that an object still exists when it is out of view (about 9 to 10 months of age this occurs), and mental representation: The ability to recognize and use symbols.

Main Category: Psychosocial Integrity

Subcategory: Anxiety Disorders

Topic: Anxiety Disorders

- Normal anxiety is a healthy response to stress that is essential for survival. When anxiety is elevated or persistent, behavior changes and impairment of function can occur.
- Anxiety levels can be mild (restlessness, increased motivation, irritability), moderate (agitation, muscle tightness), severe (inability to function, ritualistic behavior, unresponsive), or panic (distorted perception, loss of rational thought, immobility).
- Most anxiety disorders are more likely to occur in females.

Topic: Anxiety Risk Factors

- Obsessive-compulsive and related disorders also affect females more than males with the exception of hoarding disorder, which has a higher prevalence rate among males
- Clients can experience anxiety due to an acute medical condition, (hyperthyroidism or pulmonary embolism). It is important to assess the manifestations
- Substance-induced anxiety is related to current use of a chemical substance or to withdrawal effects from a substance (alcohol).

Topic: Specific Phobias

- The client reports a fear of specific objects (spiders, snakes, or strangers).
- The client reports a fear of specific experiences, (flying, being in the dark, riding in an elevator, or being in an enclosed space).
- The client might experience anxiety manifestations just by thinking of the feared object or situation and might attempt to decrease the anxiety through the use of alcohol or other substances.

Subcategory: Cultural and Spiritual Nursing Care

Topic: Cultural competence

- Cultural competence is a skill the nurse develops in learning to respect individual dignity and preferences, as well as acknowledging cultural differences.
- The provision of culturally competent care requires nurses to be responsive to the needs of clients

from various cultures.

- Cultural humility is appreciating, understanding, and partnering with clients from cultures different than the nurse's culture.

Topic: Culture of safety

- A culture of safety is one that promotes openness and error reporting.
- Facilities should have a risk management department to help identify hazards, prevent adverse events, track the occurrence of negative client incidents, and manage hazards.
- Developing a culture of safety often results in a lower number of adverse events.

Topic: Culturally Responsive Nursing Care

- Culturally responsive nursing care involves the delivery of care that transcends cultural boundaries and considers a client's cultural beliefs as they affect health, illness, and lifestyle
- Cultural awareness involves self-awareness for the nurse, examining personal attitudes related to various aspects of culture, to identify possible bias.
- Accommodate each client's cultural beliefs and values whenever possible, unless they are in direct conflict with essential health practices but the overall goal is to provide culturally competent care.

Subcategory: Psychotic Disorders

Topic: Types of Disorders

- **Schizophrenia is like the** client has psychotic thinking or behavior present for at least 6 months. This affects overall functioning (such as school or work, self-care, and interpersonal relationships) are significantly impaired.
- **Schizotypal personality disorder:** The client has impairments of personality (self and interpersonal) functioning (impairment is not as severe as with schizophrenia).
- **Delusional disorder:** The client experiences delusional thinking for at least 1 month with self or interpersonal functioning is not markedly impaired.

Topic: Assessments

- Positive symptoms include manifestation of things that are not normally present such as hallucinations, delusions, alterations in speech, and bizarre behavior.
- Negative symptoms include the absence of things that are normally present (more difficult to treat successfully than positive symptoms) which include affect, alogia, anergia, anhedonia, and avolition's.
- Affective findings of emotions include hopelessness, suicidal ideation, and/or unstable or rapidly changing mood.

Topic: Alterations of thought (delusions)

- Ideas of reference includes misconstrues trivial events and attaches personal significance to them, such as believing that others, who are discussing the next meal, are talking about him
- Persecution is when the individual feels singled out for harm by others, such as being hunted down by the FBI.
- Grandeur is when the client believes that they are all powerful and important, like a god.

Subcategory: Gastrointestinal Disorders

Topic: Assessment/Data Collection

- Determine if the client is experiencing any difficulty chewing/swallowing, nausea/vomiting, or bloating or excessive flatus.
- Assess if the patient uses any tobacco, alcohol, caffeine, or over the counter medication to treat GI conditions.
- Always assess any herbal supplement due to patients not considering them medications.

Topic: General GI Considerations

- Monitor for any weight changes, lab values, elimination patterns, and I/O.
- Low-fiber diets avoid foods that are high in residue content (whole-grain breads and cereals, raw fruits and vegetables)
- High-fiber diets focus on foods containing more than 5 g of fiber per serving

Topic: Nursing Actions

- Promote good oral hygiene with tooth brushing, mouth swabs, mouthwash, and ice chips.
- Elevate the head of the bed.
- Serve foods at room temperature or chilled.

Subcategory: Grief, Loss, and Palliative Care

Topic: Grief and Palliative Care

- Grief is the inner emotional response to loss and is exhibited through thoughts, feelings, and behaviors.
- Bereavement includes both grief and mourning (the outward display of loss) as the individual deals with the death of a significant individual
- Palliative or end-of-life care is an important aspect of nursing care and attempts to meet the client's physical, spiritual, and psychosocial needs.

Topic: Advance Directives

- **Advance directives:** Legal documents that direct end-of-life issues
- **Living will:** Directive documents for medical treatment per clients' wishes
- **Health care proxy** (also known as durable power of attorney for health care): A document that appoints someone to make medical decisions when clients are no longer able to do so on their own behalf

Topic: Types of Loss

- **Actual loss:** Any loss of a valued person, item, or status (loss of a job) that others can recognize.
- **Perceived loss:** Anything clients define as loss but that is not obvious or verifiable to others
- **Situational loss:** Any unanticipated loss caused by an external event (a family loses their home during tornado)

Subcategory: Parkinson's Disease

Topic: Parkinson's disease

- Parkinson's disease (PD) is a progressively debilitating disease that grossly affects motor function.
- It is characterized by four primary findings: tremor, muscle rigidity, bradykinesia (slow movement), and postural instability.
- The secretion of dopamine and acetylcholine in the body produce inhibitory and excitatory effects on the muscles respectively.

Topic: Laboratory Test

- Diagnosis is made based on manifestations, their progression, and by ruling out other diseases
- There are no definitive diagnostic procedures
- N/A

Topic: Patient-Centered Care

- Administer medications at prescribed times. Monitor medication effectiveness, and make recommendations for changes in dosage and time of administration to provide best coverage
- Monitor swallowing, and maintain adequate nutrition and weight
- Maintain client mobility for as long as possible.

Main Category: Pharmacological and Parenteral Therapies**Subcategory: Medications for Depressive Disorders****Topic: Tricyclic Antidepressants**

- Prototype is Amitriptyline
- These medications block reuptake of norepinephrine and serotonin in the synaptic space, thereby intensifying the effects of these neurotransmitters
- Therapeutic use: Depressive Disorders

Topic: Complication

- Monitor blood pressure and heart rate for orthostatic changes.
- If a significant decrease in blood pressure or increase in heart rate is noted, do not administer the medication
- Monitor for indications of postural hypotension (lightheadedness, dizziness)

Topic: Anticholinergic effects

- Effects include dry mouth, blurred vision, and photophobia
- Other effects are urinary hesitancy or retention, constipation, and tachycardia
- Minimize effects by chewing gum, eating food high in fiber, and wearing sunglasses when outdoors.

Subcategory: Diabetic Mellitus**Topic: Diabetic medication**

- Oral antidiabetic medications work in various ways to increase available insulin or modify carbohydrate metabolism
- Intermediate-acting: NPH insulin Onset is 1 to 2 hr, Peak is 4 to 14 hr, and it last about 14 to 24 hr
- Long-acting: Insulin glargine U-100 onset is 1 to 4 hr, peak is None, and it lasts for 24 hr

Topic: Pharmacological Actions

- Promotes cellular uptake of glucose (decreases glucose levels)
- Converts glucose into glycogen and promotes energy storage
- Moves potassium into cells (along with glucose)

Topic: Complications

- Hypoglycemia occurs when blood glucose is less than 70 mg/dL

- Monitor clients for hypoglycemia
- If the client is not fully conscious, do not risk aspiration. Administer glucose parenterally (IV glucose) or subcutaneous/IM glucagon.

Subcategory: Disorder of the Eye

Topic: Macular Degeneration

- Macular Degeneration is the central loss of vision that affects the macula of the eye
- There is no cure for macular degeneration
- AMD is a common cause of vision loss in older adults

Topic: Assessment

- Assess for risk factors such as smoking, hypertension, and female sex
- Other assessment includes family history and a diet lacking in carotene and vitamin E
- Wet macular degeneration can occur at any age

Topic: Health Promotion and Disease Prevention

- Teach clients to wear sunglasses while outside.
- Educate clients to wear protective eyewear while playing sports and performing hazardous activities, such as welding and yard work
- Encourage annual eye examinations and good eye health, especially in adults over the age of 40

Main Category: Reduction of Risk Potential

Subcategory: Arthroplasty

Topic: Arthroplasty

- Arthroplasty refers to the surgical removal of a diseased joint due to osteoarthritis, osteonecrosis, rheumatoid arthritis, trauma, or congenital anomalies, and replacement with prosthetics or artificial components made of metal (stainless steel, titanium) and/or plastic
- Total knee arthroplasty involves the replacement of the distal femoral component, the tibia plate, and the patellar button
- Total knee arthroplasty is a surgical option when conservative measures fail

Topic: Client Presentation

- Pain when bearing weight on the joint (walking, running)
- Joint crepitus and stiffness
- Joint swelling (primarily occurs in the knees)

Topic: Client Education – Knee Arthroplasty

- Provide postoperative care, and prevent postoperative complications (anemia, infection, neurovascular compromise or a venous thromboembolism, which manifests as deep vein thrombosis [DVT] or pulmonary embolism).
- Older adult clients are at a higher risk for medical complications related to chronic conditions, including hypertension, diabetes mellitus, coronary artery disease, and obstructive pulmonary disease
- Provide medications as prescribed. Focus needs to be about pain medications

Subcategory: Bacterial, Fungal, and Viral Infections**Topic: Pathogens**

- **Bacteria:** Most common type of pathogen (*Staphylococcus aureus*, *Escherichia coli*, *Mycobacterium tuberculosis*)
- **Viruses:** Organisms that use the host's genetic machinery to reproduce (rhinovirus, HIV, hepatitis, herpes zoster, herpes simplex)
- **Fungi:** Molds and yeasts (*Candida albicans*, *Aspergillus*)

Topic: Nonspecific Innate-Native Immunity

- Nonspecific innate-native immunity provides temporary immunity but does not have memory of past exposures.
- Intact skin is the body's first line of defense against microbial invasion.
- The skin, mucous membranes, secretions, enzymes, phagocytic cells, and protective proteins work in concert to prevent infections

Topic: Nursing Care - Assessing

- Ask any presence of risk factors for infection
- Question of any recent travel or exposure to an infectious disease
- Assess behaviors that can put the client at increased risk

Subcategory: No other listed topic within this category**Topic:**

- N/a

Topic:

- N/a

Topic:

- N/a

Main Category: Physiological Adaptation

Subcategory: Cancer and Immunosuppression

Topic: Assessment/Data Collection

- Current illness and presence of other medical diagnoses
- Nutritional habits, food preferences, and restrictions
- Food allergies
- Height, weight, body mass index (BMI), weight trends

Topic: Nutritional Guidelines and Nursing Interventions

- Monitor the effectiveness of nutrition (weight, BMI, laboratory findings).
- Assist the client to set realistic goals for nutrition and food consumption.
- Instruct the client on strategies to manage adverse effects of treatment

Topic: Client Education

- Eat more on days when feeling better (on “good” days).
- Consume nutritional supplements that are high in protein and/or calories as between-meal snacks. When necessary, use as a meal replacement.
- Increase protein and caloric content of foods

Subcategory: Electrolyte Imbalances

Topic: Sodium Imbalances

- Sodium (Na^+) is the major electrolyte (cation) found in ECF, and maintains ECF osmolarity.
- Hyponatremia delays and slows the depolarization of membranes.
- Water moves from the ECF into the ICF, causing cells to swell (cellular edema)

Topic: Severe Hyponatremia

- The goal is to elevate the blood sodium level enough to decrease neurologic manifestations associated with hyponatremia (lethargy, confusion, seizures).
- Maintain an open airway, and monitor vital signs.
- Implement seizure precautions, and take appropriate action if seizures occur

Topic: Potassium Imbalances

- Potassium plays a vital role in cell metabolism; transmission of nerve impulses; functioning of cardiac, lung, and muscle tissues; and acid-base balance.
- Findings include decreased blood pressure, thready weak pulse, orthostatic hypotension.
- Other findings include altered mental status, anxiety, and lethargy that progresses to acute confusion and coma.

Subcategory: Medication Conditions

Topic: Cervical Insufficiency

- Cervical insufficiency is a variable condition whereby expulsion of the products of conception occurs
- Risk Factors include History of cervical trauma (cervical tears from previous deliveries, excessive dilations, curettage for biopsy, and surgical procedures involving the cervix), short labors, pregnancy

loss in early gestation, or advanced cervical dilation at earlier weeks of gestation

- Congenital structural defects of the uterus or cervix are other risk factors for cervical insufficiency.

Topic: Nursing care of Cervical Insufficiency

- Evaluate the client's support systems and availability of assistance if activity restrictions or bed rest are prescribed.
- Assess vaginal discharge.
- Monitor client reports of pressure and contractions

Topic: Hyperemesis Gravidarum

- Hyperemesis gravidarum is excessive nausea and vomiting (related to elevated hCG levels) that is prolonged past 16 weeks of gestation or is excessive and causes weight loss, dehydration, nutritional deficiencies, electrolyte imbalances, and ketonuria.
- There is a risk to the fetus for intrauterine growth restriction, small for gestational age, or preterm birth if the condition persists
- Other Risk Factors include Maternal Age Younger than 30 years old, Multifetal Gestation, Gestational trophoblastic disease, and diabetes.

Main Category: Clinical Judgment

Subcategory: Medical Conditions

Topic: Unexpected Medical conditions

- Unexpected medical conditions can occur during pregnancy. Awareness, early detection, and interventions are crucial components to ensure fetal well-being and maternal health.
- Unexpected medical conditions include cervical insufficiency, hyperemesis gravidarum, anemia, gestational diabetes mellitus, and gestational hypertension
- N/a

Topic: Iron Deficiency Anemia

- Iron-deficiency anemia occurs during pregnancy due to inadequacy in maternal iron stores.
- Risk factors include consuming insufficient amounts of dietary iron
- Other risk factors include less than 2 years between pregnancies, heavy menses, diet low in iron, and unhealthy weight loss programs

Topic: Iron Deficiency Anemia - Nursing Care

- The recommended iron intake for pregnant clients is 27 mg/day. Prenatal vitamins typically contain 30 mg iron.
- Increase dietary intake of foods rich in iron (legumes, dried fruit, dark green leafy vegetables, and meat).
- Educate the client about ways to minimize gastrointestinal adverse effects

Subcategory: Gestational Diabetes Mellitus

Topic: Gestational Diabetes Mellitus

- Gestational diabetes mellitus (GDM) is an impaired tolerance to glucose with the first onset or recognition during pregnancy
- The ideal blood glucose level during pregnancy should range between 60 and 99 mg/dL before meals or fasting, and less than or equal to 120 mg/dL 2 hr after meals
- Findings of diabetes mellitus can disappear a few weeks following delivery

Topic: Gestational Diabetes Mellitus - Expected findings

- Hypoglycemia: nervousness, headache, weakness, irritability, hunger, blurred vision
- Hyperglycemia: polydipsia, polyphagia, polyuria, nausea, abdominal pain, flushed dry skin, fruity breath
- Other findings include: hypoglycemia, shaking, and clammy pale skin, hyperglycemia, and vomiting.

Topic: Gestational Diabetes Mellitus - Laboratory Test

- Glucola screening test/1-hr glucose tolerance test: 50 g oral glucose load, followed by plasma glucose analysis 1 hr. later performed at 24 to 28 weeks of gestation with fasting not necessary.
- Oral glucose tolerance test following overnight fasting, avoidance of caffeine, and abstinence from smoking for 12 hr. prior to testing; a fasting glucose is obtained, a 100 g glucose load is given, and serum glucose levels are determined at 1, 2, and 3 hr following glucose ingestion
- Presence of ketones in urine to assess severity of ketoacidosis.

Subcategory: No other listed topic within this category

Topic:

- - N/a

Topic:

- - N/a

Topic:

- - N/a