

N322 Pharmacology  
Proctored ATI Remediation Template

Student Name: Jaidi Davis  
Assessment Name: RN Pharmacology 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
      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:

<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>
<b>Proctored ATI Grading Scale – RN Pediatric Health 2023</b>

**Level 3= 90 points**

- **Remediation = 10 points:**
- *Minimum 1-hour Focused Review*
- *For each topic missed, complete an active learning template and/ or identify three critical points to remember. Must be a full sentence, not just bullet points.*

**Level 2 = 80 points**

- **Remediation = 10 points:**
- *Minimum 2-hour Focused Review*
- *For each topic missed, complete an active learning template and/ or identify three critical points to remember. Must be a full sentence, not just bullet points.*

**Level 1 = 70 points**

- **Remediation = 10 points:**
- *Minimum 3-hour Focused Review*
- *For each topic missed, complete an active learning template and/ or identify three critical points to remember. Must be a full sentence, not just bullet points.*

**Below Level 1 = 60 points**

- **Remediation = 10 points:**
- *Minimum 4-hour Focused Review*
- *For each topic missed, complete an active learning template and/ or identify three critical points to remember. Must be a full sentence, not just bullet points.*

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.

<b>Main Category: Safety and Infection Control</b>
<b>Subcategory: Reporting of Incident/Event/Irregular Occurrence/Variance</b>
<b>Topic: Safe Medication Administration and Error Reduction: Action for Incorrect Medication Dispensed by the Pharmacy</b>
<ul style="list-style-type: none"><li>• Always double check the order and the medication to be sure they are the exact same.</li><li>• Each facility's policies for which providers can write, receive, etc. are all different.</li><li>• Complete an incident report within at least 24 hours of administering the wrong med.</li></ul>

<b>Main Category: Psychosocial Integrity</b>
<b>Subcategory: Chemical and Other Dependencies/Substance Use Disorder</b>
<b>Topic: Substance Use Disorders: Teaching About Nicotine Gum</b>
<ul style="list-style-type: none"><li>• Nicotine gum should not be used for longer than 6 months.</li><li>• Gum should be chewed slowly over 30 minutes.</li><li>• Avoid eating/drinking 15 minutes prior to administration of gum.</li></ul>


**Main Category: Clinical Judgment**

**Subcategory: Analyze Cues**

**Topic: Endocrine Disorders: Identifying Potential Complications for a Client Taking Levothyroxine**

- Overmedication of Levothyroxine can cause thyrotoxicosis.
- Thyrotoxicosis can appear as anxiety, tachycardia, chest pain, nervousness, weight loss, and palpitations.
- TSH levels should be monitored at least once a year while on Levothyroxine.

**Topic: Medications Affecting Urinary Output**

- High-ceiling loop diuretics, thiazide diuretics, potassium-sparing diuretics, and osmotic diuretics all affect urinary output.
- Indications for use for medications that affect urinary output are management of BP, prevention of kidney failure, and excretion of edematous fluid related to HF and kidney/liver disease.
- Almost all diuretics will increase urinary output.

**Subcategory: Generate Solutions**

**Topic: Vitamins and Minerals: Caring for a Client Who Has Iron Deficiency**

- Instruct the client to avoid using antacids within 1 hour of iron.
- Vitamin C increases the absorption of iron.
- Growing children and pregnant women often times have an iron deficiency.

**Subcategory: Take Actions**

**Topic: Chronic Neurologic Disorders: Teaching About Levodopa/Carbidopa**

- This combination is the most effective for Parkinson’s treatment.
- The effect that the medication is “wearing off” may happen at the end of the dosing interval.
- The patient should eat protein in several small portions during the day while taking this medication.

**Topic: Medications Affecting Urinary Output: Caring for a Client Who is Taking Hydrochlorothiazide**

- HCTZ blocks the reabsorption of Na and Cl.
- Dehydration and hyponatremia are complications of hydrochlorothiazide.
- Thiazide diuretics are contraindicated in patients who have renal impairment.

**Subcategory: Evaluate Outcomes**

**Topic: Chemotherapy Agents: Educating on Adverse Effects of Medication**

- Common adverse effects are nausea, vomiting, and alopecia.
- The client should always be warned about adverse effects of medications.
- WBC, absolute neutrophil, platelets, Hgb, and Hct should be monitored.

**Main Category: Pharmacological and Parenteral Therapies**

**Subcategory: Adverse Effects/Contraindications/Side Effects/Interactions**

**Topic: Antibiotics Affecting the Bacterial Cell Wall: Adverse Reactions**

- Adverse reactions for antibiotics include rash, nausea, and dizziness.
- GI upset can also be caused from taking the medication on an empty stomach.
- Hyperkalemia and hyponatremia are also adverse reactions of antibiotics.

**Topic: Antibiotics Affecting the Bacterial Cell Wall: Recognizing Manifestations of an Allergic Reaction**

- The patient should be observed for 30 minutes after administration to observe for allergic reactions.
- The patient should always be asked if they have any allergies upon admission.
- Allergic reactions do not always present the same way patient to patient.

**Topic: Connective Tissue Disorders: Contraindications to Prednisone Therapy**

- Prednisone should not be used for clients who have systemic fungal infections.
- While taking prednisone, you should not receive live vaccines.
- Prednisone should not be stopped abruptly.

**Topic: Medications Affecting Coagulation: Teaching About Adverse Effects of Clopidogrel**

- Avoid concurrent use of medications that enhance bleeding.
- Clopidogrel can cause GI upset, take this medication with food.
- Contact your provider if there is blood in your urine.

**Topic: Miscellaneous Pain Medications: Priority Adverse Effect of Epidural Anesthesia**

- During recovery, the patient should be in a comfortable position, so that monitoring can be effectively tracked.
- The site of epidural anesthesia should be monitored for hematoma and signs of infection.
- The provider should be notified if the client has not voided within 8 hours.

**Topic: Opioid Agonists and Antagonists: Documenting Adverse Effects of a Transdermal Fentanyl Patch**

- Patients can go into respiratory depression, while using fentanyl.
- A patient who is using a fentanyl patch should have their intake and output monitored.
- During the respiratory examination the patient may have crackles, which is a complication of using the fentanyl patch.

**Subcategory: Expected Actions/Outcomes**

**Topic: Medications Affecting Blood Pressure: Hypertensive Crisis**

- A hypertensive crisis can be avoided by regularly checking blood pressure at home.
- A hypertensive crisis is a rapid rise in blood pressure, to where the body can not regulate it.
- A hypertensive crisis can be caused by not compiling to your prescribed medication regimen.

**Topic: Safe Medication Administration and Error Reduction: Recognizing Need to Consult Pharmacist**

- The nurse should identify social determinants of health to implement safe med admin and error prevention.
- The pharmacist should have access to the client's home medication, which they will use to figure out contraindications.
- The pharmacist and nurse should work together to perform the highest level of care for every patient.

**Subcategory: Medication Administration**

**Topic: Adverse Effects, Interactions, and Contraindications: Priority Teaching for Use of Epinephrine Auto-Injector**

- The client should know where the epinephrine auto-injector is at all times.
- The client should keep the injector in a safe, secure place.
- Seek medical attention after the use of epinephrine.

**Topic: Depressive Disorders: Dietary Teaching about Phenelzine**

- Alcohol should be avoided for a patient taking phenelzine.
- The patient should avoid dietary tyramine
- Phenelzine is used less commonly than other antidepressants because of the food interactions.

**Subcategory: Parenteral/Intravenous Therapies**

**Topic: Intravenous Therapy: Action to Take When Administering an Intermittent IV Bolus**

- Medications that can cause serious adverse reactions should be administered by a pump, not by an IV bolus.
- Always double check the route of administration for all orders.
- Ensure the patient knows what medication they are receiving via IV bolus.

**Topic: Mycobacterial, Fungal, and Parasitic Infections: Indications for Administration of Metronidazole**

- Metronidazole is the med of choice for parasitic infections.
- Metronidazole is an antifungal medication.
- Antifungals are used to treat systemic and superficial mycoses.

**Subcategory: Pharmacological Pain Management**

**Topic: Pain Management: Identifying the Quality of a Client's Pain**

- Quality refers to how the pain feels to the patient.
- Quality may be sharp, dull, achy, burning, or stabbing.
- You can ask the patient, "What does the pain feel like?" to identify the quality.

**Main Category: Reduction of Risk Potential**

**Subcategory: Changes/Abnormalities in Vital Signs**

**Topic: Medications Affecting Cardiac Rhythm: Adverse Effects of Amiodarone**

- Amiodarone can be administered orally, or IV.
- Pulmonary toxicity can happen when on Amiodarone.
- Pulmonary function should be monitored throughout the course of drug therapy.

**Subcategory: Therapeutic Procedures**

**Topic: Sedative-Hypnotics: Monitoring for Adverse Reaction to Midazolam**

- IV or oral are the only routes of administration for Midazolam.
- Pregnancy and Lactation are contraindication for Midazolam.
- CNS depression can happen with Midazolam.

**Main Category: Physiological Adaptation**

**Subcategory: Fluid and Electrolyte Imbalances**

**Topic: Medications Affecting Urinary Output: Identifying Adverse Effects of Furosemide**

- Patients taking diuretics may experience dehydration, hypotension, and hypokalemia.
- Cardiac status and potassium levels should be monitored for the patient on diuretics with hypokalemia.
- Report urine output of less than 30 mL/hr.

**Subcategory: Medical Emergencies**

**Topic: Cardiac Glycosides and Heart Failure: Reporting Adverse Effects of Epinephrine**

- Epinephrine is an Alpha 1 receptor.
- The therapeutic use for Epi is anaphylactic shock and increased BP, along with a couple others.
- Adverse Effects of Epi are hypertensive crisis, dysrhythmias, and necrosis.