

N444 Concept Synthesis  
Proctored ATI Remediation Template

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**Main Category: Management of Care**

**Subcategory: Advance Directives/Self-Determination/Life Planning**

**Topic:** Professional Responsibilities: Evaluating Understanding of Advance Directives

- The purpose of advance directives is to communicate a client's wishes regarding end-of-life care should the client become unable to do so.
- A client who does not have advanced directives must be given written information that outlines their rights related to health care decisions and how to formulate advanced directives.
- Two components of an advance directive are the living will and the durable power of attorney for healthcare.

(Holman, Williams, Sommer, Johnson, & Ball et al., 2019)

**Subcategory: Advocacy**

**Topic:** Ethical Responsibilities: Supporting a Client's Right to Autonomy

- Ethics is the study of conduct and character, and the code of ethics is a guide for the expectations and standards of a profession.
- Ethical theories examine principles, ideas, systems, and philosophies that affect judgments about what is right and wrong, and good and bad.
- Common ethical theories are utilitarianism, deontology, consensus in bioethics, and ethics of care.

**Topic:** Professional Responsibilities: Client Advocacy

- Advocacy refers to nurses' role in supporting clients by ensuring that they are properly informed, that their rights are respected, and that they are receiving the proper level of care.
- Advocacy is one of the most important roles of the nurse, especially when clients are unable to speak or act for themselves.
- As advocates, nurses must ensure that clients are informed of their rights and have adequate information on which to base health care decisions.

(Holman, Williams, Sommer, Johnson, & Ball et al., 2019)

**Subcategory: Client Rights**

**Topic:** Legal Responsibilities: Caring for a Client Who Requests the Creation of a Living Will

- A living will is a legal document that expresses the client's wishes regarding medical treatment in the event the client becomes incapacitated and facing end-of-life issues.
- Most state laws include provisions that protect health care providers who follow a living will from liability.
- The nurse's responsibility is to provide written information about advance directives.

(Holman, Williams, Sommer, Johnson, & Ball et al., 2019)

**Subcategory: Information Technology**

**Topic:** Safe Medication Administration and Error Reduction: Identifying Electronic Databases for Research

- Having knowledge of federal, state (nurse practice acts), and local laws, and facilities' policies that govern the prescribing, dispensing, and administration of medications.
- Preparing and administering medications and evaluating clients' responses to medications.
- Developing and maintaining an up-to-date knowledge base of medications they administer, including uses, mechanisms of action, routes of administration, safe dosage ranges, adverse effects, precautions, contraindications, and interactions.

**Topic:** Factors Influencing Community Health: Developing a Plan to Improve Environmental Health

- Cultural preservation: Assisting the client maintain traditional values and practices.
- Cultural Accommodation: Supporting and facilitating the client's use of cultural practices that are beneficial to the client's health.
- Cultural repatterning: Assisting the client to modify cultural practices that are not beneficial to the client's health.

(Holman, Williams, Sommer, Johnson, & Ball et al., 2019)

**Subcategory: Referrals**

**Topic:** The Interprofessional Team: Identify a Client Who Is a Candidate for Occupational Therapy

- Occupational Therapist: Assesses and plans for clients to regain activities of daily living (ADL) skills, especially motor skills of the upper extremities.
- Example of when to refer: A client has difficulties using an eating utensil with their dominant hand following a stroke.
- The RN is the lead team member, soliciting input from all nursing team members and setting priorities for the coordination of client care.

(Holman, Williams, Sommer, Johnson, & Ball et al., 2019)

**Main Category: Safety and Infection Control**

**Subcategory: Accident/Error/Injury Prevention**

**Topic:** Mobility and Immobility: Pressure Injuries

- The nurse's role is to identify clients at risk for pressure injury.
- The Nurse should use a pressure injury scale (Norton or Braden)
- Decreased circulation to tissue causing ischemia can lead to pressure injury.

**Topic:** Safe Medication Administration and Error Reduction: Identifying Complete Medication Prescriptions

- Read medication labels and compare them with the MAR three times; before removing the container, when removing the amount from the container, and in the presence of the client before administering the medication.
- Leave unit-dose medication in its package until administration.
- When using automated medication dispensing systems, perform the same checks and adapt them as necessary.

(Holman, Williams, Sommer, Johnson, Ball, Wheless, Wilford, & McMichael et al., 2019)

**Subcategory: Ergonomic Principles**

**Topic:** Mobility and Immobility: Evaluating Client Understanding of Crutch Safety

- Do not alter crutches after fitting.
- Follow the prescribed crutch gait.
- Hold the crutches in one hand and grasp the arm of the chair with the other hand for balance while sitting and rising from a chair.

**Topic:** Musculoskeletal Trauma: Prevention of Carpal Tunnel Syndrome

- Risk factors include occupational injury from repetitive stress of hand activities (pinching or grasping during wrist flexion [computer users]).
- Risk factor is repetitive sports injury (tennis)
- Risk factor is growth of a space occupying lesion (a ganglia or lipoma).

(Holman, Williams, Sommer, Johnson, Ball, Wheless, Wilford, & McMichael et al., 2019)

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

**Topic:** Infection Control: Identifying Need for Sterile Gloves

- Clean gloves are worn when touching anything that has the potential to contaminate the hands of the nurse.
- Remove gloves and complete hand hygiene between each client.
- Gloves and gowns worn by the caregivers and visitors.

### **Subcategory: Use of Restraints/Safety Devices**

**Topic: Client Safety: Reason for the use of restraints**

- Restraints should never interfere with treatment.
- Restraints should restrict movement as little as is necessary.
- Restraints should fit properly and be as discreet as possible.

(Holman, Williams, Sommer, Johnson, Ball, Wheless, Wilford, & McMichael et al., 2019)

## **Main Category: Health Promotion and Maintenance**

### **Subcategory: Aging Process**

**Topic:** Newborn Assessment: Expected Findings

- Expected weight 2500-4000g.
- Expected length 45-55cm.
- Expected Head circumference 32-36.8cm

(Holman, Williams, Sommer, Johnson, Ball, Wheless, Wilford, & McMichael et al., 2019)

### **Subcategory: Ante/Intra/Postpartum and Newborn Care**

**Topic:** Medical Conditions: Prioritizing Care of Multiple Clients

- 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.

**Topic:** Nutrition During Pregnancy: Teaching About Folic Acid

- Folic Acid is crucial for neurologic development and the prevention of fetal neural tube defects.
- Folate found naturally in foods is converted to folic acid.
- Foods high in folate include leafy vegetables, dried peas and beans, seeds, and orange juice.

(Holman, Williams, Sommer, Johnson, Ball, Wheless, Wilford, & McMichael et al., 2019)

### **Subcategory: Developmental Stages and Transitions**

**Topic:** Health Promotion of Toddlers (1 to 3 years): Assessing Developmental Milestones

- 1 year: using one-word sentences, or holophrases.
- 2 years: using multiword sentences by combining two to three words.
- 3 years: combining several words to create simple sentences using grammatical rules.

(Holman, Williams, Sommer, Johnson, Ball, Wheless, Wilford, & McMichael et al., 2019)

### **Subcategory: Health Promotion/Disease Prevention**

**Topic:** Heart Failure and Pulmonary Edema: Risk Factors for Heart Failure

- Older adults have an increased risk for heart failure and can have worse manifestations due to increased systolic blood pressure and some medications.

- Coronary artery disease is a risk factor for heart failure.
- Prolonged alcohol use and genetics are risk factors for heart failure.

**Topic:** Neurocognitive Disorders: Risk Factors for Alzheimer's Disease

- Advanced age is a risk factor for AD.
- Prior head trauma, cardiovascular disease, lifestyle factors, and family history are all risk factors for AD.
- There is a strong genetic link in early-onset familial AD.

(Holman, Williams, Sommer, Johnson, Ball, Wheless, Wilford, & McMichael et al., 2019)

**Subcategory: Health Screening**

**Topic:** Medical Conditions: Risk Factors for Gestational Diabetes Mellitus

- Obesity is a risk factor for GDM.
- Hypertension is a risk factor for GDM.
- Maternal age older than 25 years, family history of DM, previous delivery of infant that was large or stillborn are risk factors for GDM.

**Topic:** Musculoskeletal Congenital Disorders: Screening for Idiopathic Scoliosis

- Observe the child, who should be wearing only underwear, from the back.
- Have the child bend over at the waist with arms hanging down and observe for asymmetry of ribs and flank.
- Measure spinal curvature with a scoliometer.

(Holman, Williams, Sommer, Johnson, Ball, Wheless, Wilford, & McMichael et al., 2019)

**Subcategory: High Risk Behaviors**

**Topic:** Overview of Community Health Nursing: Identifying the Stage of Change

- Nurses act as advocates for communities and populations through efforts to change health care systems and improve quality of life.
- Advocating for clients requires assertiveness, placing priority on the client's values, and willingness to progress through the chain of command for resolution.
- Client advocate is one role of the community health nurse.

(Holman, Williams, Sommer, Johnson, Ball, Wheless, Wilford, & McMichael et al., 2019)

**Subcategory: Lifestyle Changes**

**Topic:** Contraception: Contraindication for Oral Contraceptives

- Oral contraceptive effectiveness decreases when taking medications that affect liver enzymes (anticonvulsants, some antibiotics).
- Contraindications include bariatric surgery, lupus, and severe cirrhosis.
- Other contraindications include liver tumors and current or past breast cancer.

(Holman, Williams, Sommer, Johnson, Ball, Wheless, Wilford, & McMichael et al., 2019)

## Main Category: Psychosocial Integrity

### Subcategory: Abuse/Neglect

**Topic:** Family and Community Violence: Priority Intervention for Intimate Partner Violence

- Document subjective and objective data obtained during assessment.
- Provide basic care to treat injuries.
- Make appropriate referrals.

(Holman, Williams, Sommer, Johnson, Ball, Wheless, Wilford, & McMichael et al., 2019)

### Subcategory: Behavioral Interventions

**Topic:** Group and Family Therapy: Identifying Characteristics of a Therapeutic Group

- Use of open and clear communication.
- Cohesiveness and guidelines for the therapy session.
- Opportunities for development of interpersonal skills; resolution of personal and family issues; and development of appropriate, satisfying relationships.

(Holman, Williams, Sommer, Johnson, Ball, Wheless, Wilford, & McMichael et al., 2019)

### Subcategory: Cultural Awareness/Cultural Influences on Health

**Topic:** Cultural, Ethnic, and Religious Influences: Planning Client Care During Passover

- Obtaining the client's preferences related to nutrition is vital.
- The information on cultural and religious influences on nutrition is so vast that the nurse should focus more on the needs of the individual clients for whom the nurse is assigned care.
- Seek further information about the client's preferred dietary practices from reputable sources, as needed, to guide nutritional counseling.

(Holman, Williams, Sommer, Johnson, Ball, Wheless, Wilford, & McMichael et al., 2019)

### Subcategory: Substance Use and Other Disorders and Dependencies

**Topic:** Assessment and Management of Newborn Complications: Manifestations of Cocaine Exposure During Pregnancy

- CNS: High-pitched, shrill cry; incessant crying; irritability; tremors; hyperactivity with an increased Moro reflex; increased deep-tendon reflexes; increased muscle tone; disturbed sleep pattern; hypertonicity; convulsions.
- Metabolic, vasomotor, and respiratory findings: Nasal congestion with flaring, frequent yawning, skin mottling, retractions, apnea, tachypnea greater than 60/min, sweating, temperature greater than 37.2 C (99 degrees F)
- Gastrointestinal: Poor feeding; regurgitation (projectile vomiting); diarrhea; excessive, uncoordinated, constant sucking.

(Holman, Williams, Sommer, Johnson, Ball, Wheless, Wilford, & McMichael et al., 2019)

### Subcategory: Therapeutic Communication

**Topic:** Effective Communication: Responding to a Client Who Has Major Depressive Disorder

- Elicit and attend to the client's thoughts, feelings, concerns, and needs.
- Express empathy and genuine concern for the client's and family's issues.
- Obtain information and give feedback about the client's condition.

(Holman, Williams, Sommer, Johnson, Ball, Wheless, Wilford, & McMichael et al., 2019)

## Main Category: Basic Care and Comfort

### Subcategory: Assistive Devices

**Topic:** Sensory Perception: Caring for a Client Who Has Hearing Loss

- Check for communication deficits and adjust care accordingly.
- Collect equipment necessary to care for any assistive devices clients have (corrective lenses, hearing aids). Make sure these devices are available for use.
- Make every effort to communicate with clients who have sensoriperceptual losses because they tend to withdraw from interactions with others.

(Holman, Williams, Sommer, Johnson, Ball, Wheless, Wilford, McMichael, 2019)

### Subcategory: Non-Pharmacological Comfort Interventions

**Topic:** Benign Prostatic Hyperplasia, Erectile Dysfunction, and Prostatitis: Identifying Medication Interactions with Saw Palmetto

- Avoid nonsteroidal anti-inflammatory medications due to increased risk for bleeding.
- Avoid bladder stimulants (caffeine, alcohol).
- Avoid medications that cause decreased bladder tone (anticholinergics, decongestants, and antihistamines).

**Topic:** Pain Management: Caring for a Client Who Is in Active Labor

- Help the client maintain the proper position during administration of pharmacological interventions.
- Assist the client with positioning for comfort during labor and birth and following pharmacological interventions.
- Assess level, quality, frequency, duration, intensity, and location of pain through verbal and nonverbal cues. Use an appropriate pain scale allowing the client to indicate the severity of their pain on a scale of 0-10, with 10 representing the most severe pain.

(Holman, Williams, Sommer, Johnson, Ball, Wheless, Wilford, McMichael, 2019)

### Subcategory: Nutrition and Oral Hydration

**Topic:** Hemodynamic Shock: Findings to Report

- Altered Mental State
- Low blood pressure
- Cold, moist skin.

**Topic:** Nasogastric Intubation and Enteral Feedings: Nursing Actions for Continuous Enteral Feeding

- Review the prescription and purpose, plan for drainage or suction, and understand the need for placement for diagnostic purposes.
- Identify the client and explain the procedure.
- Review the client's history (nasal problems, anticoagulants, previous trauma, past history of aspiration).

**Topic:** Sources of Nutrition: Best Source of Vitamin C

- Vitamin C is found in citrus fruits (oranges, lemons), tomatoes, peppers, green leafy vegetables, and strawberries.
- Vitamin C (ascorbic acid) aids in tissue building and metabolic reactions (healing, collagen formation, iron absorption, immune system function).
- Stress and illness, as well as cigarette smoking, increases the need for vitamin C.

(Holman, Williams, Sommer, Johnson, Ball, Wheless, Wilford, & McMichael et al., 2019)

### Subcategory Personal Hygiene

**Topic:** Grief, Loss, and Palliative Care: Performing Postmortem Care Prior to a Family Visit

- Provide care with respect and compassion while attending to the desires of the client and family per their cultural, religious, and social practices.
- Recognize that the provider certifies death by pronouncing the time and documenting therapies used, and actions taken prior to the death.
- Elevate the client's head to prevent facial discoloration by raising the head of the bed and placing a pillow under the head and shoulders.

(Holman, Williams, Sommer, Johnson, Ball, Wheless, Wilford, McMichael, 2019)



## Main Category: Pharmacological and Parenteral Therapies

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

**Topic:** Medications Affecting Coagulation: Medication Interactions with Warfarin

- Coenzyme Q-10 (CoQ-10) can decrease warfarin effectiveness due to a similar structure to vitamin K.
- Feverfew, garlic, ginger, glucosamine, or ginkgo biloba can increase the risk of bleeding while taking warfarin.
- Foods high in vitamin K (dark green leafy vegetables [lettuce, cooked spinach], cabbage, broccoli, Brussels sprouts, mayonnaise, and canola and soybean oil) can decrease anticoagulant effects.

(Holman, Williams, Sommer, Johnson, Ball, Wheless, Wilford, & McMichael et al., 2019)

### Subcategory: Expected Actions/Outcomes

**Topic:** Pain Management: Pudendal Block

- Pudendal block consists of a local anesthetic (lidocaine, bupivacaine) administered transvaginally into the space in front of the pudendal nerve.
- Pudendal has no maternal or fetal systemic effects, but it does provide local anesthesia to the perineum, vulva, and rectal areas during delivery, episiotomy, and episiotomy repair.
- Pudendal is administered during the late second stage of labor 10 to 20 min before delivery, providing analgesia prior to spontaneous expulsion of the fetus or forceps-assisted or vacuum-assisted birth.

(Holman, Williams, Sommer, Johnson, Ball, Wheless, Wilford, & McMichael et al., 2019)

### Subcategory: Medication Administration

**Topic:** Disorders of the Eye: Teaching a Client About Timolol

- Timolol is the first-line drug therapy for glaucoma and decreases IOP by reducing aqueous humor production.
- Timolol can be absorbed systemically and cause bronchoconstriction and hypoglycemia.
- Timolol should be used with caution in clients who have asthma, COPD, and DM.

**Topic:** Neurocognitive Disorders: Providing Teaching About Memantine

- Memantine can be used concurrently with a cholinesterase inhibitor.
- Administer the medication with or without food.
- Monitor for common adverse effects, including dizziness, headache, confusion, and constipation.

**Topic:** Pharmacokinetics and Routes of Administration: Intradermal Injection

- Used for tuberculin testing or checking for medication or allergy sensitivities.
- Insert the needle with the bevel up. A small bleb should appear.
- Do not massage the site after the injection.

(Holman, Williams, Sommer, Johnson, Ball, Wheless, Wilford, & McMichael et al., 2019)

### Subcategory: Parenteral/ Intravenous Therapies

**Topic:** Hospitalization, Illness, and Play: Preparing a School-Age Child for IV Catheter Insertion

- Use dolls or stuffed animals to demonstrate a procedure before it is performed.
- Encourage parents to bring one toy from home.
- Observe the child's play for clues to the child's fears or anxieties.

(Holman, Williams, Sommer, Johnson, Ball, Wheless, Wilford, & McMichael et al., 2019)

### Subcategory: Pharmacological Pain Management

**Topic:** Opioid Agonists and Antagonists: Medication to Treat Moderate Acute Pain

- Nalbuphine is used to treat moderate acute pain.
- Buprenorphine is used to treat moderate acute pain.
- Pentazocine is used to treat moderate acute pain.

(Holman, Williams, Sommer, Johnson, Ball, Wheless, Wilford, & McMichael et al., 2019)

## Main Category: Reduction of Risk Potential

### Subcategory: Laboratory Values

**Topic:** Electrolyte Imbalances: Nursing Interventions for Hypocalcemia

- Provide rapid treatment with calcium gluconate or calcium chloride.
- Encourage foods high in calcium, including dairy products, canned salmon, sardines, fresh oysters, and dark leafy green vegetables.
- Have emergency equipment on standby.

(Holman, Williams, Sommer, Johnson, Ball, Wheless, Wilford, & McMichael et al., 2019)

### Subcategory: Potential for Alterations in Body Systems

**Topic:** Acute and Infectious Respiratory Illnesses: Assessing a Child Who Has Moderate Dehydration

- The nurse should encourage oral fluids.
- The nurse should monitor intake and output.
- The nurse should observe for manifestations of dehydration.

**Topic:** Benign Prostatic Hyperplasia, Erectile Dysfunction, and Prostatitis: Postoperative Care Following a Transurethral Resection of the Prostate

- The nurse should monitor vital signs and urinary output.
- The nurse should administer/provide increased fluids.
- The nurse should assist the client to ambulate as soon as possible to reduce the risk of deep-vein thrombosis and other complications that occur due to immobility.

(Holman, Williams, Sommer, Johnson, Ball, Wheless et al., 2019)

### Subcategory: Potential for Complications of Diagnostic Tests/ Treatments/ Procedures

**Topic:** Gastrointestinal Therapeutic Procedures: Priority Finding to Report Following a Paracentesis

- Document color, odor, consistency, and amount of fluid removed; location of insertion site; evidence of leakage at the insertion site; manifestations of hypovolemia; and changes in mental status.
- Assist the client into a position of comfort with the head of the bed elevated to promote lung expansion.
- The nurse should continue monitoring blood albumin, protein, glucose, amylase, electrolytes, BUN, and creatinine levels.

(Holman, Williams, Sommer, Johnson, Ball, Wheless et al., 2019)

### Subcategory: Potential for Complications from Surgical Procedures and Health Alterations

**Topic:** Postoperative Nursing Care: Evaluating Readiness for Discharge From the PACU

- The patient must have an Aldrete score of 8 to 10.
- The patient must have stable vital signs.
- The patient must not have any evidence of bleeding.

### Subcategory: Therapeutic Procedures

**Topic:** Arthroplasty: Planning to Position a Client Following Total Hip Arthroplasty

- The flexion of the knee is limited to avoid flexion contractures.
- To prevent pressure injury on the heels, place a small blanket or pillow slightly above the ankle area to keep heels off the bed.
- A continuous passive motion machine can be prescribed to promote motion in the knee, promote circulation, and prevent scar tissue formation.

(Holman, Williams, Sommer, Johnson, Ball, Wheless et al., 2019)

## Main Category: Physiological Adaptation

### Subcategory: Alterations in Body Systems

**Topic:** Gastrointestinal Therapeutic Procedures: Expected Findings for a Client Who Is Postoperative Following Gastric Banding

- Monitor the client's tolerance of increasing amounts of food and fluids.
- Refer the client for dietary management.
- Encourage the client to consume meals in a low-fowler's position and to remain in this position for 30 mins after eating to delay stomach emptying and minimize dumping syndrome.

(Holman, Williams, Sommer, Johnson, Ball, Wheless et al., 2019)

### Subcategory: Illness Management

**Topic:** Cancer and Immunosuppression Disorders: Teaching About Food Safety and Preparation for a Client Who Has AIDS

- Increased caloric needs ranges from 37-55 Cal/kg.
- A high-protein diet is recommended with amounts varying from 12-2.0/kg/day.
- Intake of a multivitamin that meets 100% of the recommended daily servings is sufficient unless a specific deficiency is identified.

(Holman, Williams, Sommer, Johnson, Ball, Wheless et al., 2019)

### Subcategory: Medical Emergencies

**Topic:** Burns: Priority Action for a Toddler Who Has Burn

- Stop the burning process: place the child in a horizontal position and roll him in a blanket to extinguish the fire.
- Remove clothing or jewelry that can conduct heat.
- Flush chemical burns with large amounts of water.

**Topic:** Emergency Nursing Principles and Management: Controlling an External Hemorrhage

- Apply direct pressure to visible, significant external bleeding.
- Obtain IV access using large-bore IV catheters inserted into the antecubital fossa of both arms, unless there is obvious injury to the extremity.
- Infuse isotonic IV fluids such as lactated ringer's and 0.9% sodium chloride, and /or blood products.

(Holman, Williams, Sommer, Johnson, Ball, Wheless et al., 2019)

## Main Category: Clinical Judgment

### Subcategory: Recognize Cues

**Topic:** Fractures: Identifying Findings Requiring Follow-up for a Child Who Has Arm Pain

- Teach the parents and client to report pain that is extremely severe or is not relieved 1 hr. after the administration of pain medication.
- Teach the parents and clients how to perform neurovascular checks and when to contact the providers.
- Teach the client and parents that when the cast is applied it will feel warm, but it will not burn.

(Holman, Williams, Sommer, Johnson, Ball, Wheless, Wilford, & McMichael et al., 2019)

### Subcategory: Analyze Cues

**Topic:** Fractures: Analyzing Assessment Findings for a Child Who Has Arm Pain

- Obtain a history of how the injury occurred.
- Maintain ABCs
- Monitor vital signs, pain, and neurologic status.

(Holman, Williams, Sommer, Johnson, Ball, Wheless, Wilford, & McMichael et al., 2019)

**Subcategory: Prioritize Hypotheses****Topic:** Fractures: Determining Potential Complications for a Child Who Has Arm Pain

- Teach the client to be aware of the need for adequate pain relief.
- Fat embolism: fat breaks away from the bone marrow of the injured one and enters the blood stream.
- Pulmonary embolism: Clot develops and forms at the injury site and travels to the lungs.

(Holman, Williams, Sommer, Johnson, Ball, Wheless, Wilford, & McMichael et al., 2019)

**Subcategory: Generate Solutions****Topic:** Fractures: Anticipating Potential Provider Prescriptions for a Child Who Has Arm Pain

- Administer analgesics as prescribed.
- Administer tetanus for open fractures.
- Administer antibiotics for open fractures.

(Holman, Williams, Sommer, Johnson, Ball, Wheless, Wilford, & McMichael et al., 2019)

**Subcategory: Evaluate Outcomes****Topic:** Fractures: Evaluating Discharge Teaching for a Child Who Has a Fracture

- Perform proper cast care, as well as pin care if indicated.
- Perform neurovascular checks and teach when to call or return to the provider.
- Use antipruritic medications if prescribed.

(Holman, Williams, Sommer, Johnson, Ball, Wheless, Wilford, & McMichael et al., 2019)

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