

N322 Introduction to Pharmacology  
Proctored ATI Remediation Template

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Assessment Name: RN Pharmacology 2023  
Semester: Spring 2024 (2<sup>nd</sup> 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 to 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 Sick 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: Psychosocial Integrity**

**Subcategory: Chemical and Other Dependencies/Substance Use Disorder**

**Topic: Opioid Agonists and Antagonists: Priority Assessment Following Naloxone Administration**

- After administering naloxone to reverse the effects of opioid toxicity, the nurse should closely monitor the patient's heart rate and rhythm as naloxone can cause ventricular tachycardia.
- It is also crucial to have resuscitative equipment, including oxygen, on standby during the administration of naloxone.
- The nurse should be aware that following the administration of naloxone the patient may experience cramping, hypertension, vomiting, and the reversal of analgesia which may cause them to become agitated.

**Topic: N/A**

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**Topic: N/A**

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**Subcategory: N/A**

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**Subcategory: N/A**

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## Main Category: Pharmacological and Parenteral Therapies

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

#### Topic: Chronic Neurologic Disorders: Adverse Effects of Carbamazepine

- Carbamazepine is a traditional anti-epileptic medication, but it promotes secretion of ADH and therefore places clients who have heart failure at risk for fluid overload.
- Carbamazepine also causes a decrease in the effects of oral contraceptives so clients should use additional methods of contraceptives such as condoms.
- Occasionally carbamazepine can also cause double vision, vertigo, and headaches.

#### Topic: Chronic Neurologic Disorders: Contraindications of Anticholinergic Medication

- Anticholinergic medications work by blocking muscarinic receptors, which assist in maintaining balance between dopamine and acetylcholine receptors in the brain and this in turn helps control involuntary movements and bodily functions.
- People who have glaucoma should not take anticholinergic medications.
- Anticholinergic medications are also contraindicated in people with hyperthyroidism.

#### Topic: Medications Affecting Coagulation: Herbal Supplements Contraindicated for a Client Who Is Taking Warfarin

- St. John's Wort should not be taken alongside warfarin as it can cause warfarin to be less effective.
- Taking ginkgo biloba and warfarin together puts a patient at increased risk of bleeding.
- In rare cases, ginger has been shown to interact with warfarin and put patients at an increased risk for bleeding as well. In general, patients should always consult their provider before starting any new medications or supplements because warfarin interacts with so many things.

#### Topic: Opioid Agonists and Antagonists: Priority Finding for a Client Who Is Receiving Morphine IV

- Urinary retention is a side effect that nurses should be on the lookout for after administering morphine.
- Nurses should also closely monitor a client's heart rate, respiratory rate, and blood pressure as morphine is a central nervous system depressant.
- The nurse should also frequently reassess the pain level of a patient after they receive morphine to monitor its effectiveness.

### Subcategory: Medication Administration

#### Topic: Medications Affecting Coagulation: Reviewing Laboratory Tests Before Administering Warfarin

- Before giving warfarin, the nurse should obtain baseline P and monitor levels of PT and INR periodically to ensure they are within the therapeutic range.
- The nurse should also educate the patient to be on the look out for signs of bleeding such as black tarry stools.
- Warfarin is contraindicated for pregnant people and therefore women of reproductive age should have a pregnancy test before starting the medication.

#### Topic: Medications Affecting Coagulation: Subcutaneous Administration of Heparin

- When giving heparin subcutaneously the nurse should administer it in the abdomen, ensuring a distance of 2 inches from the umbilicus.
- The nurse should remember not to aspirate the injection prior to administration.
- The nurse should also apply gentle pressure for 1 to 2 min after the injection and rotate and record injection sites.

#### Topic: Opioid Agonists and Antagonists: Evaluating Medication Prescriptions

- The nurse should always perform thorough medication reconciliations with patients, especially those prescribed opioids due to the increased risk of drug-drug interactions.
- The nurse should be aware that dosages of opioid medications may need to be adjusted for older adult patients who are at greater risk for CNS depressant effects of such medications.
- The nurse should always clarify with the provider any uncertainties concerning a medication

prescription and ensure that the full medication name, dose, route, and frequency are listed in the prescription.

**Subcategory: Parenteral/Intravenous Therapies**

**Topic: Intravenous Therapy: Actions for an IV Infusion Infiltration**

- The nurse should know that signs and symptoms of IV infiltration include the skin appearing edematous and taut around the IV, cool to the touch, and a slowed IV infusion rate.
- When infiltration is noticed, the nurse should stop the infusion right away and remove the IV.
- The nurse should then elevate the extremity and encourage active range of motion.

**Topic: N/A**

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**Topic: N/A**

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**Main Category: Clinical Judgement**

**Subcategory: Analyze Cues**

**Topic: Chronic Neurologic Disorders: Identifying Findings That Require Follow Up**

- The nurse should be aware that cholinergic crisis can occur in patients taking cholinesterase inhibitors to help treat chronic neurologic disorders. Symptoms of cholinergic crisis include increased salivation, lacrimation sweating, GI cramping, vomiting, and bradycardia.
- The nurse should know that atropine should be used to reverse the excessive muscarinic stimulation.
- The nurse should also know that dopamine agonists can cause sleepiness and they should educate their patients to alert their provider right away if they have the sudden inability to stay asleep.

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**Topic: N/A**

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**Subcategory: Generate Solutions**

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

- The nurse should instruct the patient to drink the liquid form of iron supplementation through a straw and rinse their mouth out afterward to avoid staining the teeth. The nurse should also have the patient take their iron an hour before meals for the best absorption if possible.
- The nurse should tell the patient that iron supplements can cause their stools to become dark and that this is normal.
- The nurse should educate the patient that taking iron alongside vitamin C can boost its absorption and that other dietary sources of iron include meat, spinach, and whole grains.

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**Subcategory: Take Actions**

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

- The nurse should educate the patient that levodopa/carbidopa is the most effective treatment for Parkinson's but that the beneficial effects will diminish by the end of the 5<sup>th</sup> year of taking it.
- The nurse should educate the patient to avoid taking levodopa/carbidopa with large amounts of protein and vitamin B6 as these can reduce the effects of the medication.
- The nurse should also teach the patient common adverse effects of levodopa/carbidopa such as orthostatic hypotension, tachycardia, palpitations, visual hallucinations, and nightmares.

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**Topic: N/A**

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**Subcategory: Evaluate Outcomes**

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

- The nurse should tell the patient that chemotherapy agents can cause low WBCs and neutropenia so they must be extra cautious to avoid infections.
- Chemotherapy agents can also cause lower platelet counts and anemia so the nurse should educate the client about being on the look out for easy bleeding and bruising and to alert the doctor if this occurs.
- The nurse should also educate the patient that many chemotherapy agents can cause congenital abnormalities and that the patient should avoid becoming pregnant for at least 6 months after stopping the medications.

**Topic: N/A**

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**Topic: N/A**

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**Reference**

ATI Nursing. (2023). *RN pharmacology for nursing* (9<sup>th</sup> ed.). Assessment Technologies Institute.