

# N444 NCLEX Predictor Remediation

## Management of Care

### *Advance Directives/Self-Determination/Life Planning - (1)*

#### Professional Responsibilities: Evaluating Understanding of Advance Directives

1. An advance directive must be documented if there is one on file (Holman et al., 2019)
2. Provide written information regarding advance directives (Holman et al., 2019)
3. Inform all members of the healthcare team of the advance directive (Holman et al., 2019)

### *Assignment, Delegation and Supervision - (1)*

#### Managing Client Care: Planning to Follow Progressive Discipline

1. Follow up on tasks that are delegated (Holman et al., 2019)
2. First mistake, educate the nurse on their error (Holman et al., 2019)
3. Fire nurses that steal narcotics and harm patients (Holman et al., 2019)

### *Legal Rights and Responsibilities - (1)*

#### Cultural and Spiritual Nursing Care: Communicating With a Client Who Speaks a Language Different From the Nurse

1. Always use a medical translator (Holman et al., 2019)
2. Address the patient when speaking rather than the translator (Holman et al., 2019)
3. Do not use metaphors or difficult terms when speaking with the patient (Holman et al., 2019)

## Safety and Infection Control

### *Ergonomic Principles - (1)*

#### Ergonomic Principles: Evaluating Teaching

1. Intervene when an AP or other nurse is doing something incorrectly (Holman et al., 2019)
2. Teach them the correct way to do it (Holman et al., 2019)
3. Offer an in service, or evaluate them later on the task they were struggling with (Holman et al., 2019)

### *Standard Precautions/Transmission-Based Precautions/Surgical Asepsis - (1)*

#### Infection Control: Identifying Need for Sterile Gloves

1. Foley catheter requires sterile gloves (Holman et al., 2019)
2. Central line dressing changes (Holman et al., 2019)
3. Knowing difference between standard precautions and sterile is key (Holman et al., 2019)

## Health Promotion

### *Developmental Stages and Transitions - (1)*

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

1. Anterior fontanel closes by 18 months (Holman et al., 2019)
2. They grow about 3 inches a year (Holman et al., 2019)
3. Toddlers are unable to see things from other's perspectives (Holman et al., 2019)

### *Health Promotion/Disease Prevention - (2)*

#### Heart Failure and Pulmonary Edema: Risk Factors for Heart Failure

1. Smoking is a risk (Holman et al., 2019)
2. High cholesterol and high blood pressure (Holman et al., 2019)
3. Excessive sodium intake and fluid intake can cause pulmonary edema (Holman et al., 2019)

#### Neurocognitive Disorders: Risk Factors for Alzheimer's Disease

1. Genetic link (Holman et al., 2019)
2. Older age (Holman et al., 2019)
3. Predisposed metabolic disorders affecting liver, kidneys, etc. (Holman et al., 2019)

### *Health Screening - (1)*

#### Medical Conditions: Risk Factors for Gestational Diabetes Mellitus

1. Sedentary lifestyle while pregnant (Holman et al., 2019)
2. High carbohydrate and sugar intake (Holman et al., 2019)
3. High BMI and/or obesity (Holman et al., 2019)

### *Lifestyle Choices - (1)*

#### Contraception: Contraindication for Oral Contraceptives

1. Patients with estrogen dependent cancers like breast cancer should not take (Holman et al., 2019)
2. Patients with liver failure should not take (Holman et al., 2019)
3. Patients with coronary artery disease should also not take (Holman et al., 2019)

## Psychosocial Integrity

### *Behavioral Interventions - (2)*

#### Anxiety Disorders: Action for a Client Who Is Experiencing a Panic Level of Anxiety

1. Promote client safety (Holman et al., 2019)
2. Promote deep breathing (Holman et al., 2019)
3. Move to an environment with little stimuli (Holman et al., 2019)

#### Personality Disorders: Caring for a Client Who Has Antisocial Personality Disorder

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1. They will have little remorse (Holman et al., 2019)
2. Encourage group discussions (Holman et al., 2019)
3. Assess the client for thoughts of suicide or depression (Holman et al., 2019)

*Crisis Intervention - (1)*

Crisis Management: Sequence of Actions to Take for a Client Who Is Experiencing a Crisis

1. Place in a low stimuli environment (Holman et al., 2019)
2. Assess vital signs and reassure patient of safety (Holman et al., 2019)
3. Talk to patient using therapeutic communication to find problem and trigger of the crisis (Holman et al., 2019)

*Grief and Loss - (1)*

Death and Dying: Recognizing Preschool Responses to Death

1. They have egocentric thinking (Holman et al., 2019)
2. They have magical thinking that things they did caused the death (Holman et al., 2019)
3. View dying as temporary (Holman et al., 2019)

*Mental Health Concepts - (1)*

Neurocognitive Disorders: Interventions for a Client Who Has Dementia

1. Retain long term memory usually but struggles with short term (Holman et al., 2019)
2. Limit choices. Too many can confuse the client (Holman et al., 2019)
3. Limit stimuli in the evening to prevent/lessen sundowners (Holman et al., 2019)

*Therapeutic Communication - (1)*

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

1. Always assess for thoughts of self-harm and suicide (Holman et al., 2019)
2. Encourage patient to attend scheduled therapy and assess if they are able to maintain ADL's and self-care (Holman et al., 2019)
3. Monitor for medication side effects and adherence (Holman et al., 2019)

**Basic Care and Comfort**

*Nutrition and Oral Hydration - (2)*

Cancer and Immunosuppression Disorders: Teaching a Client Who Has Anorexia

1. Monitor the patient's intake (Holman et al., 2019)
2. Give therapy about body image and psychological issues relating to weight (Holman et al., 2019)
3. Provide dietary education and training (Holman et al., 2019)

Sources of Nutrition: Best Source of Vitamin C

1. Fruits are a great source (Holman et al., 2019)
2. Supplementation can be used in patients who cannot eat much fruit (Holman et al., 2019)

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3. Kiwis provide a high source of vitamin C (Holman et al., 2019)

#### *Personal Hygiene - (2)*

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

1. Clean body before family observes (Holman et al., 2019)
2. Do not remove any lines if it is a coroner's case or if they died unexpectedly (Holman et al., 2019)
3. Give the family time to grieve with their deceased loved one (Holman et al., 2019)

#### Mobility and Immobility: Evaluating Use of a Walker

1. Make sure the patient does not carry the walker (Holman et al., 2019)
2. Make sure they do not put all their weight onto the walker (Holman et al., 2019)
3. Ensure proper foot movement and ambulation technique with the walker (Holman et al., 2019)

### Pharm Therapies

#### *Expected Actions/Outcomes - (1)*

#### Pain Management: Pudendal Block

1. Provides relieve to perineal area (Holman et al., 2019)
2. May burn upon injection of the block (Holman et al., 2019)
3. Sterile technique must be used (Holman et al., 2019)

#### *Parenteral/Intravenous Therapies - (1)*

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

1. Explain the procedure to the child (Holman et al., 2019)
2. Use a doll to show the child what will be done (Holman et al., 2019)
3. Let the child observe and touch certain equipment regarding the insertion (Holman et al., 2019)

### Reduction of Risk

#### *Changes/Abnormalities in Vital Signs - (1)*

#### Vital Signs: Measuring Pulse Deficit

1. Pulses should be measured distally (Holman et al., 2019)
2. A doppler can be used to assess pulses (Holman et al., 2019)
3. No pulse indicates emergency and ultrasound or surgery may be needed (Holman et al., 2019)

#### *Therapeutic Procedures - (1)*

#### Gastrointestinal Therapeutic Procedures: Client Teaching for Colostomy Care

1. Use a clean technique when caring for the stoma (Holman et al., 2019)
2. Report any bloody discharge coming from the stoma (Holman et al., 2019)
3. You should empty the stoma bag when it is around  $\frac{1}{2}$  full (Holman et al., 2019)

## Physiological Adaptation

### *Alterations in Body Systems - (2)*

#### Medical Conditions: Hyperemesis Gravidarum

1. Administer antinausea medications (Holman et al., 2019)
2. Assess fluid and electrolyte status (Holman et al., 2019)
3. Encourage fluids and replenish electrolytes IV or PO if able to tolerate (Holman et al., 2019)

#### Nursing Care of Newborns: Preventing Heat Loss Through Conduction

1. Dry newborn off after delivery (Holman et al., 2019)
2. Assess temperature rectally since it is most accurate (Holman et al., 2019)
3. Use a heat warmer or lamp to keep the baby warm (Holman et al., 2019)
4. Encourage skin to skin contact with mother (Holman et al., 2019)

### *Medical Emergencies - (1)*

#### Musculoskeletal Trauma: Identifying Manifestations of a Fat Emboli

1. SOB will be present (Holman et al., 2019)
2. This typically can be followed by a long bone fracture (Holman et al., 2019)
3. Petechiae on chest is a common symptom (Holman et al., 2019)

## Clinical Judgement

### *Recognize Cues - (1)*

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

1. Immobilize the extremity (Holman et al., 2019)
2. If spiral fracture, report to DCFS (Holman et al., 2019)
3. Arrange follow up with ortho (Holman et al., 2019)

### *Analyze Cues - (1)*

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

1. Observe skin for any bruising, wounds, etc. (Holman et al., 2019)
2. Check peripheral pulses (Holman et al., 2019)
3. Child will keep the extremity guarded (Holman et al., 2019)

### *Prioritize Hypotheses - (1)*

#### Fractures: Determining Potential Complications for a Child Who Has Arm Pain

1. Compartment syndrome when splinted or casted (Holman et al., 2019)
2. Absent pulses in extremity (Holman et al., 2019)
3. Fat emboli following fracture (Holman et al., 2019)

### *Take Actions - (1)*

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#### Fractures: Priority Actions for a Child Who Has a Fracture

1. Check pulses and neurovascular status (Holman et al., 2019)
2. Get Xray on board, and assess the child's pain (Holman et al., 2019)
3. If surgery is not needed, follow up with ortho and splint the extremity (Holman et al., 2019)

#### *Evaluate Outcomes - (1)*

#### Fractures: Evaluating Discharge Teaching for a Child Who Has a Fracture

1. Rest and ice-affected extremity (Holman et al., 2019)
2. Follow up with ortho (Holman et al., 2019)
3. Reasons to come back, numbness, tingling, blue fingers, etc. (Holman et al., 2019)

## References

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