

N431 Adult Health II
Proctored ATI Remediation Template

Student Name: Xitlally Bonilla
Assessment Name: RN Adult Medical Surgical 2023
Semester: Fall 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:

SAMPLE Main Category: Management of Care
SAMPLE Subcategory: Case Management
SAMPLE Topic: Anemias: Discharge Teaching for a Client Who is Recovering from Sick 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: Management of Care

Subcategory: NONE

Main Category: Safety and Infection Control

Subcategory: Accident/Error/Injury Prevention

Topic: Anemias: Manifestations of Pernicious Anemia

- Pernicious anemia is caused due to a deficiency of vitamin B12.
- This anemia can manifest as weakness and fatigue.
- Patients with Vitamin B12 deficiency will need monthly injections for the rest of their lives.

Topic: Preoperative Nursing Care: Identifying Risk for Propofol Reaction

- **An allergy to soybean oil is contraindicated for someone who wants to use propofol for anesthesia.**
- **An allergy to eggs is contraindicated in the use of propofol as anesthesia.**
- **To reduce risk the client should give a full allergy list to the nurse at admission.**

Subcategory: Handling Hazardous and Infectious Materials

Topic: Cancer Treatment Options: Caring for a Client Who Has a Sealed Radiation Implant

- The patient should be placed in a private room with the door closed as much as possible.
- A lead container should be kept in the patient's room in case of spontaneous loss of radioactive material.
- A lead apron should be worn while taking care of the patient.

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

Topic: Infection Control: Caring for a Client Who Requires Protective Isolation

- Proper protective personal equipment includes gloves, masks, gowns, and goggles.
- If contact with large amounts of blood and bodily fluids the nurse should change their personal equipment even if they're still with the same client.
- A client placed in isolation are at a higher risk for depression and loneliness. The nurse should assess them and their mental status.

Main Category: Health Promotion and Maintenance

Subcategory: NONE

Main Category: Psychosocial Integrity

Subcategory: Support Systems

Topic: Delirium and Dementia: Providing a Family With Home-Care Instructions

- Scatter rugs and any loose objects on the floor should be removed.
- There should be good lighting all over the house, especially on the stairs.
- Door locks should be installed and alarms should also be placed on doors.

Main Category: Basic Care and Comfort

Subcategory: Mobility/Immobility

Topic: Musculoskeletal Trauma: Planning Care for a Client Who Has a Halo Traction Device

- Frequent pin site care and assessment should be done to prevent any infections.
- A patient with a halo should be moved as a unit without applying any pressure to the rods.
- The nurse should also monitor and assess skin integrity.

Subcategory: Nutrition and Oral Hydration

Topic: Fluid Imbalances: Assessing a Client Who is Experiencing Dehydration

- A patient who is experiencing dehydration can have an elevated temperature.
- Flattened neck veins, slow capillary refill, and poor skin turgor are all signs of dehydration.
- Dehydration will affect older adults more drastically.

Main Category: Pharmacological and Parenteral Therapies

Subcategory: Adverse Effects/Contraindications/Side Effects/Interactions

Topic: Pain Management: Monitoring Effects of Long-Term NSAID Use

- The nurse will want to run blood clotting and coagulation labs.
- The nurse will also want to check liver labs and liver function.
- There is a risk of bleeding when taking NSAIDS long-term.

Subcategory: Blood and Blood Products

Topic: Blood and Blood Product Transfusions: Administering Fresh Frozen Plasma

- Fresh frozen plasma should be transfused as soon as the unit is thawed.
- Blood typing and matching should be done so a reaction to the plasma does not happen.
- Plasma should be transfused rapidly over 15 to 30 minutes.

Subcategory: Expected Actions/Outcomes

Topic: Hypertension: Therapeutic Effect of Telmisartan

- Telmisartan is used to treat high blood pressure.
- Telmisartan can also increase the amount of blood and oxygen to the heart.
- **Patients with risk of cardiovascular disease can use telmisartan to reduce the chances of heart attack and stroke.**

Main Category: Reduction of Risk Potential

Subcategory: Therapeutic Procedures

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

- The patient should drink plenty of fluids to flush out the bladder.
- Bladder spasms are a sign of occlusion.
- **The nurse should watch out for any hemorrhaging.**

Main Category: Physiological Adaptation

Subcategory: Hemodynamics

Topic: Heart Failure and Pulmonary Edema: Findings of Decreased Cardiac Output

- Decreased cardiac output is when the heart is not delivering enough blood to meet what the body needs. This can happen because of right or left sided heart failure.
- Left sided heart failure can be caused by hypertension, coronary artery disease, or smoking.
- Right sided heart failure can be caused by a myocardial infarction or other pulmonary problems.

Topic: Systemic Lupus Erythematosus: Client Findings Associated with Raynaud's Disease

- **Raynaud's disease is caused by arteriolar vasospasm due to cold or stress.**
- **In Raynaud's disease the person's fingers will pale and whiten due to cold or stress.**
- **Raynaud's disease is classified as an autoimmune disease.**

Subcategory: Illness Management

Topic: Complications of Diabetes Mellitus: Priority Intervention for a Client Who Develops a Hyperglycemic Hyperosmolar State

- The nurse should check vital signs every 15 minutes until the patient is stable, then the nurse should check vital signs every 4 hours.
- The nurse should always make sure to treat the underlying cause.
- The nurse should give isotonic fluids to replace lost fluids and perfuse to important organs.

Topic: Heart Failure and Pulmonary Edema: Identifying Manifestations of Left-Sided Heart Failure

- **The New York Heart Association has a classification scale for when manifestations of heart failure are present.**
- **Left sided heart failure manifestations include shortness of breath, fatigue, and pulmonary congestion.**
- **Other common manifestations of left sided heart failure are altered mental status, frothy sputum, and nocturia.**

Subcategory: Medical Emergencies

Topic: Burns: Priority Action for a Client Who Has a Burn Injury

- There are many types of burns like chemical, contact, electrical, or moist heat, so the nursing care depends on what type of burn the client has.
- The most important part of taking care of a client with a burn is fluid resuscitation.
- **Some of the other priorities include securing the airway, supporting circulation, and managing pain.**

Main Category: Clinical Judgment

Subcategory: Recognize Cues

Topic: Complications of Diabetes Mellitus: Identifying Manifestations of Diabetic Ketoacidosis or

Hyperglycemic-Hyperosmolar State

- Both diabetic ketoacidosis and hyperglycemic-hyperosmolar states have polyuria as manifestations.
- Only diabetic ketoacidosis will have a fruity odor to the breath because of elevated ketones.
- **Seizures and myoclonic jerking are manifestations only for hyperglycemic-hyperosmolar states.**

Subcategory: Prioritize Hypothesis

Topic: Complications of Diabetes Mellitus: Prescriptions for a Client Experiencing DKA

- If a patient reaches severe acidosis, a pH less than 7.0, sodium bicarbonate should be infused.
- Regular insulin should be infused via IV for immediate treatment.
- **5% dextrose should be infused to minimize cerebral edema.**

Subcategory: Generate Solutions

Topic: Angina and Myocardial Infarction: Planning Care for a Client

- The nurse should have continuous telemetry monitoring for a patient who suffered a myocardial infarction.
- The nurse should obtain and maintain IV access in case the patient begins to experience another myocardial infarction.
- The patient should be receiving oxygen via a nasal cannula or face mask.

Topic: Stroke: Managing Increased Intracranial Pressure

- **The nurse should be monitoring if the ICP increases even more. Signs of increased ICP are changes in the level of consciousness, raising BP, and lower RR and HR.**
- **The head of the bed should be raised to 30 degrees to promote venous drainage.**
- **The nurse needs to avoid extreme flexion or extension of the neck and also maintain the head in a midline neutral position.**

Subcategory: Take Action

Topic: Angina and Myocardial Infarction: Actions to Take for Client Experiencing Myocardial Infarction

- The nurse should be assessing for changes on the EKG.
- The nurse should administer nitroglycerin if the patient is experiencing a myocardial infarction.
- **The nurse should also administer morphine to relieve the chest pain of the myocardial infarction.**

Subcategory: Evaluate Outcomes

Topic: Angina and Myocardial Infarction: Evaluating a Client's Condition

- The nurse should frequently monitor the patient's telemetry to see how the patient's heart is functioning.
- The nurse should check the patient's troponin levels.
- A cardiac catheterization can be used to determine the degree of coronary artery blockage.

Topic: Hepatitis and Cirrhosis: Evaluating Client Response to Treatment

- **The nurse should be monitoring the patient's skin integrity, if there is less yellowing of the skin then that means the treatment is most likely working.**
- **The nurse should measure the patient's waist circumference. If the circumference is shrinking that means, there is lessening of the ascites.**
- **Monitor the patient's neurologic status to see if there is any hepatic encephalopathy.**

Topic: Infections of the Renal and Urinary System: Monitoring Changes in Client Status

- **In older adults changes in the level of consciousness as well as increasing confusion are potential signs that they have a urinary tract infection.**
- **Increased WBC in a urinalysis is a sign of a urinary tract infection.**
- **Urinary frequency, urgency, and foul smelling urine are all signs that the patient may be expecting a urinary tract infection.**

Topic: Lupus Erythematosus, Gout, and Fibromyalgia: Identifying Manifestations of Systemic Lupus Erythematosus

- **There are three different classifications of lupus and it depends on how the disease manifests.**

- **The most common sign that someone has lupus is a butterfly rash developing on the person's face.**
- **The patient can also have depression, joint pain, weakness, and alopecia.**