

N441 Adult Health III  
Proctored ATI Remediation Template

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Assessment Name: ATI Remediation  
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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	5. Basic Care and Comfort
2. Safety and Infection Control	6. Pharmacological and Parenteral Therapies
3. Health Promotion and Maintenance	7. Reduction of Risk Potential
4. Psychosocial Integrity	8. Physiological Adaptation
	9. Clinical Judgment
  - 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>Main Category: Safety and Infection Control</b>
<b>Subcategory: Heart failure and pulmonary edema</b>

**Topic: Low-output heart failure**

- Low-output heart failure can initially occur on either the left or right side of the heart.
- Left-sided heart (ventricular) failure results in inadequate left ventricle (cardiac) output and consequently in inadequate tissue perfusion.
- Right-sided heart (ventricular) failure results in inadequate right ventricle output and systemic venous congestion (peripheral edema).

**Topic: Health promotion and disease prevention**

- Maintain an exercise routine to remain physically active, and consult with the provider before starting any exercise regimen.
- Consume a diet low in sodium, along with fluid restrictions, and consult with the provider regarding diet specifications.
- Refrain from smoking

**Topic: Social determinants of health factors**

- Less access to health care in vulnerable populations
- Cost of health care and medications compete with the need of food and housing
- Unemployment is associated with alcohol use disorders, smoking, and depression

**Main Category: Management of Care****Subcategory: Infection Control****Topic: Types of pathogens**

- Bacteria (Staphylococcus aureus, Escherichia coli, Mycobacterium tuberculosis)
- Viruses Organisms that use the host's genetic machinery to reproduce (HIV, hepatitis, herpes zoster, herpes simplex virus [HSV], SARS-CoV-2 [COVID-19])
- Parasites Protozoa (malaria, toxoplasmosis) and helminths (worms [flatworms, roundworms], flukes [Schistosoma])

**Topic: Immune Defenses**

- Native immunity restricts entry or immediately responds to a foreign organism through the activation of phagocytic cells, complement, and inflammation.
- Passive: antibodies are produced by external source.
- Specific adaptive immunity allows the body to make antibodies in response to a foreign organism.

**Topic: Risk factors**

- Inadequate hand hygiene
- Individuals who have compromised health or defenses against infection
- Caregivers using medical or surgical asepsis that does not follow the established standards.

**Main Category: Health Promotion and Maintenance****Subcategory: Middle and Inner ear disorders****Topic: Risk factors**

- Recurrent colds and otitis media
- Enlarged adenoids
- Trauma

**Topic: Expected findings**

- Hearing loss, feeling of fullness and/or pain in the ear
- Red, inflamed ear canal and tympanic membrane, bulging TM
- Fluid and/or bubbles behind TM, fever

**Topic: Diagnostic procedures**

- Audiometry

- Tympanogram
- Weber and Rinne tests

## Main Category: Basic Care and Comfort

### Subcategory: Polycystic Kidney Disease

#### Topic: Classes

- Stage 1 (risk stage): blood creatinine 1.5 to 1.9 times baseline and urine output less than 0.5 mL/dk/hr for 6 hr or more
- Stage 2 (injury stage): blood creatinine 2 to 2.9 times baseline and urine output less than 0.5 mL/kg/hr for 12 hr or more
- Stage 2 (failure stage): Blood creatinine 3 times baseline and urine output less than 0.3 for 12 hr or more.

#### Topic: Types

- Prerenal: Occurs as a result of volume depletion and prolonged reduction of blood flow to the kidneys, which leads to ischemia of the nephrons. Occurs before damage to the kidney. Early intervention restoring fluid volume deficit can reverse AKI and prevent chronic kidney disease (CKD).
- Intrarenal: occurs as a result of direct damage to the kidney from lack of oxygen, indicating damage to the glomeruli, nephrons, or tubules.
- Postrenal: occurs as a result of bilateral obstruction of structures leaving the kidney.

#### Topic: Disease prevention

- Drink at least 2 L daily. Stop smoking
- Maintain a healthy weight, use NSAIDs and other prescribed medications cautiously
- Control diabetes and hypertension to prevent complications, take all antibiotic prescribed for infection.

### Subcategory: Musculoskeletal trauma

#### Topic: Disease prevention

- Ensure recommended intake of calcium for developmental stage in life
- Ensure adequate intake of vitamin D and/or exposure to sunlight
- Monitor for development of osteoporosis

#### Topic: Risk Factors

- Osteoporosis, falls, MVC
- Substance use disorder, disease, contact sports
- Physical abuse, lactose intolerance or malnutrition, age

#### Topic: Physical assessment findings

- Crepitus
- Deformity
- Subcutaneous emphysema

### Subcategory: Grief, Loss, and Palliative Care

#### Topic: Types of loss

- Necessary loss
- Actual loss, perceived loss
- Maturational or developmental loss, situation loss, anticipatory loss

#### Topic: Kubler-Ross Model

- Denial, anger
- Bargaining, depression
- Acceptance

#### Topic: Nursing interventions

- Allow time for grieving process
- Use therapeutic communication related to the client's stage of grief
- Use active listening, open-ended questions, paraphrasing, clarifying, and summarizing, while using therapeutic communication



## Main Category: Pharmacological and Parenteral Therapies

### Subcategory: Gastrointestinal Therapeutic Procedures: enteral feedings

#### Topic: Potential diagnosis

- Inability to eat due to medical condition
- Pathologies that cause difficulty swallowing or increase risk of aspiration
- Inability to maintain adequate oral nutrition intake and need for supplementation due to increased metabolic demands.

#### Topic: Complications

- Overfeeding: results in abdominal distention, nausea, and vomiting
- Diarrhea: secondary to cold formula, rapid infusion or concentration of feeding or its constituents
- Constipation: secondary to inactivity, lack of free water, or lack of fiber

#### Topic: Client presentation

- Malnutrition (decreased prealbumin, decreased transferrin or total iron-binding capacity)
- Aspiration pneumonia

### Subcategory: Angina and Myocardial Infarction

#### Topic: Angina Pectoris

- Stable (exertional angina): occurs with exercise or emotional stress and is relieved by rest or nitroglycerin
- Unstable (preinfarction) angina occurs with exercise or at rest, but increases in occurrence, severity, and duration over time
- Variant (prinzmetal/vasoplastic) angina is due to a coronary artery spasm, often occurring during periods of rest.

#### Topic: Mis are classified based on

- Affected area of the heart: anterior, lateral, inferior, or posterior
- ECG changes produced: ST elevation myocardial infarction (STEMI) vs. non-ST elevation myocardial infarction (NSTEMI)

#### Topic: Disease prevention

- Maintain an exercise routine to remain physically active.
- Have cholesterol level and blood pressure checked regularly
- Consume a diet low in saturated fats and sodium.

### Subcategory: Diabetes Mellitus

#### Topic: Expected pharmacological action

- Promotes cellular uptake of glucose
- Converts glucose into glycogen and promotes energy storage
- Moves potassium into cells

#### Topic: Contraindications

- Pregnancy: use with caution; the requirements for insulin can be increased
- Lactation: Use with caution; can inhibit milk production
- Reproductive: notify the provider if pregnancy is planned or suspected.

#### Topic: Nursing administration

- Adjust the insulin dosage to meet insulin needs.
- Ensure adequate glucose is available at the time of onset of insulin and during all peak times.
- When mixing short-acting insulin with longer-acting insulin, draw the short-acting insulin up into the syringe first, then the longer-acting insulin. This prevents the possibility of accidentally infecting some of the longer-acting insulin into the shorter-acting insulin vial.

## Main Category: Reduction of Risk Potential

### Subcategory: Complications of Diabetes Mellitus

#### Topic: Diabetic ketoacidosis

- Lack of sufficient insulin related to undiagnosed or untreated type 1 diabetes mellitus or nonadherence to a diabetic regimen
- Reduced or missed dose of insulin
- Any condition that increases carbohydrate metabolism (physical or emotional stress, illness).

#### Topic: Expected findings

- Polyuria: osmotic diuresis resulting in excess urine production
- Polydipsia: osmotic diuresis causing excess loss of fluids resulting in dehydration and increased thirst
- Polyphagia: cell starvation due to inability to receive glucose resulting in increased appetite

#### Topic: DKA

- Na<sup>+</sup>: below, within, or above the expected reference range
- K<sup>+</sup>: elevated initially due to potassium leaving the cells. Following treatment with fluids and insulin, potassium re-enters cells causing hypokalemia.

### Subcategory: Electrocardiography and Dysrhythmia Monitoring

#### Topic: Electrocardiography

- Continuous cardiac monitoring requires the client to be in close proximity to the monitoring system
- Telemetry allows the client to ambulate while maintaining proximity to the monitoring system
- Inform clients receiving continuous ECG monitoring that the monitoring will not detect shortness of breath, chest pain, or other manifestations of acute coronary syndrome. The client should be instructed to report new or worsening manifestations.

#### Topic: Dysrhythmias

- Sinus bradycardia and tachycardia, Atrioventricular (AV) blocks, Atrial fibrillation
- Ventricular asystole, premature atrial complexes (PACs) and premature ventricular complexes (PVCs)
- Supraventricular tachycardia, ventricular tachycardia, ventricular fibrillation

#### Topic: Client presentation

- Cardiovascular disease, myocardial infarction, hypoxia
- Acid-base imbalances, electrolyte disturbances, kidney failure, liver, or lung disease
- Pericarditis, drug or alcohol use, hypovolemia, shock

### Subcategory: Pulmonary Embolism

#### Topic: Disease prevention

- Promote smoking cessation
- Encourage maintenance of appropriate weight for height and body frame
- Prevent DVT by encouraging clients to do leg exercises, wear compression stockings, and avoid sitting for long periods of time.

#### Topic: Expected findings

- Anxiety, feelings of impending doom, sudden onset of chest pressure
- Pain upon inspiration and chest wall tenderness
- Dyspnea and air hunger, cough, hemoptysis (less common)

#### Topic: ABG analysis

- PaCO<sub>2</sub> levels are low (expected reference range is 35 to 45 mm Hg) due to initial hyperventilation (respiratory alkalosis)
- As hypoxemia progresses, respiratory acidosis occurs
- Further progression leads to metabolic acidosis due to buildup of lactic acid from tissue hypoxia.

## Main Category: Physiological Adaptation

### Subcategory: Hypothyroidism

#### Topic: Classifications by etiology

- Primary hypothyroidism: stems from dysfunction of the thyroid gland.
- Secondary hypothyroidism: caused by failure of the anterior pituitary gland to stimulate the thyroid gland or failure of the target tissues to respond to the thyroid hormones.
- Tertiary hypothyroidism: caused by failure of the hypothalamus to produce thyroid-releasing hormone.

#### Topic: Risk factors

- Females 30-60 years old are affected 7 to 10 times more often than males.
- Use of certain medications such as lithium, amiodarone, thalidomide, rifampin, phenobarbital, phenytoin, carbamazepine.
- Inadequate intake of iodine and radiation therapy to the head and neck

#### Topic: Nursing Care

- Monitor for cardiovascular changes, chest pain for clients who have chronic hypothyroidism because it can lead to cardiovascular disease.
- If mental status is compromised, orient the client periodically, and provide safety measures
- Apply anti-embolism stockings and elevate the client's legs to assist venous return.

### Subcategory: Shock

#### Topic: Types of Shock

- Cardiogenic: failure of the heart to pump effectively due to cardiac factor
- Hypovolemic: A decrease in intravascular volume of at least 15% to 30%
- Obstructive: Impairment of the heart to pump effectively as a result of a noncardiac factor.
- Distributive: Widespread vasodilation and increased capillary permeability, including neurogenic, septic, and anaphylactic shock

#### Topic: Stages

- **Initial:** Minimal changes in client parameters; changes on the cellular level
- **Compensatory (non-progressive):** Measures to increase cardiac output to restore tissue perfusion and oxygenation
- **Progressive:** Compensatory mechanisms beginning to fail
- **Refractory:** Irreversible shock and total body failure

#### Topic: Disease prevention: septic shock

- Advise the client to obtain early medical attention with evidence of an infection
- Advise the client to complete the entire course of antibiotics as directed
- SOFA- sequential organ failure assessment- recommended tool for all hospitalized clients who have infections.

### Subcategory: Pacemakers and Implantable Cardioverter/Defibrillators

#### Topic: temporary Pacemakers

- External (transcutaneous)
- Epicardial
- Endocardial (transvenous)

#### Topic: Permanent Pacemakers

- Contain an internal pacing unit, indicated for chronic or recurrent dysrhythmias due to sinus or atrioventricular node malfunction
- Can be programmed to pace the atrial or ventricular chamber, or both
- Leadless pacemakers: small, single unit that is attached transvenously into right ventricle. Consists of a combination generator and electrodes. Limited to single-chamber ventricular pacing.

#### Topic: Pacemaker Modes

- Fixed rate (asynchronous): fires at a constant rate without regard for the heart's electrical activity.
- Demand mode (synchronous): Detects the heart's electrical impulses and fires at a present rate only if the heart's intrinsic rate is below a certain level.

- Tachydysrhythmia function: can over-pace a tachydysrhythmia and/or deliver an electrical shock.

## Main Category: Clinical Judgment

### Subcategory: Anemias

#### Topic: Disease prevention

- Clients who are pregnant or menstruating should ensure that their diet contains adequate amounts of iron-rich foods.
- Individual who are iron-deficient and have elevated cholesterol levels should integrate iron-rich foods that are not red or organ meats into their diets.
- Clients should regularly consume foods high in folate and folic fortified grains and juices.

#### Topic: Physical assessment findings

- Shortness of breath/fatigue, especially upon exertion
- Tachycardia and palpitations, orthostatic hypotension
- Paresthesia in hands and feet with possible loss of balance.

#### Topic: Iron studies

- Total iron-binding capacity reflects an indirect measurement of all proteins that bind with iron and transports it for storage. Transferrin represents the largest amount of iron-binding proteins
- Ferritin is an indicator of total iron stores in the body.
- Low blood iron levels and elevated TIBC indicate iron-deficiency anemia.

### Subcategory: Inflammatory Bowel Disease

#### Topic: Ulcerative Colitis

- In severe cases, it can involve the entire length of the colon. Mucosa and submucosa become hyperemic and the colon will become edematous and reddened. It can lead to abscess formation.
- Edema and thickened bowel mucosa can cause partial bowel obstruction. Intestinal mucosal cell changes can lead to colon cancer or insufficient production of intrinsic factor, resulting in insufficient absorption of vitamin B12
- Classified as either mild, moderate, severe, and fulminant.

#### Topic: Crohn's Disease

- All bowel layers can become involved; lesions are sporadic. Fistulas are common.
- Can involve the entire GI tract from the mouth to the anus.
- Malabsorption and malnutrition can develop when the jejunum and ileum become involved. Requires supplemental vitamins and minerals, possibly including vitamin B12 injections.

#### Topic: Diverticulitis

- Inflammation and infection of the bowel mucosa caused by bacteria, food, or fecal matter trapped in one or more diverticula.
- Not all clients who have diverticulosis develop diverticulitis
- Diverticula can perforate and cause peritonitis, and/or severe bleeding.

### Subcategory: Rheumatoid Arthritis

#### Topic: Disease Prevention

- Use adaptive devices that prevent development of deformity of inflamed joints during ADLs
- Continue using affected joints and ambulating to maintain function and range of motion.

#### Topic: Risk factors

- Female sex, age 30-60, genetic predisposition
- Bacterial or viral infection, particularly Epstein-Barr virus
- Stress and smoking, environmental factors, older age

**Topic: Nursing Care**

- Assist with and encourage physical activity to maintain joint mobility (within the capabilities of the client)
- Monitor for indications of fatigue
- Teach the client measures to maximize functional activity, minimize pain, and monitor skin closely.