

N322 Pharmacology
Proctored ATI Remediation Template

Student Name:
Assessment Name:
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 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

- 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.

**Proctored ATI Grading Scale –
RN Pediatric Health 2023**

Level 3= 90 points

- **Remediation = 10 points:**
- *Minimum 1-hour Focused Review*
- *For each topic missed, complete an active learning template and/ or identify three critical points to remember. Must be a full sentence, not just bullet points.*

Level 2 = 80 points

- **Remediation = 10 points:**
- *Minimum 2-hour Focused Review*
- *For each topic missed, complete an active learning template and/ or identify three critical points to remember. Must be a full sentence, not just bullet points.*

Level 1 = 70 points

- **Remediation = 10 points:**
- *Minimum 3-hour Focused Review*
- *For each topic missed, complete an active learning template and/ or identify three critical points to remember. Must be a full sentence, not just bullet points.*

Below Level 1 = 60 points

- **Remediation = 10 points:**
- *Minimum 4-hour Focused Review*
- *For each topic missed, complete an active learning template and/ or identify three critical points to remember. Must be a full sentence, not just bullet points.*

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.
- 7.

Main Category: Management of Care

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Main Category: Safety and Infection Control

Subcategory: Safe medication administration and error reduction:

Topic: Documenting a near miss event

- Immediately record the medication that was administered, dose, and route.
- Record the time the provider was notified.
- Record any adverse reactions noted and the time they were noted.

Topic: Nursing actions following a medication error

- Immediately assess the patient's vital signs and record them.
- Monitor the patient for adverse reactions.
- The nurse manager on shift should be notified as soon as possible.

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Main Category: Clinical Judgement

Subcategory: Medications affecting blood pressure

Topic: Identifying adverse effects of medication

- Treatment with diuretics should begin at the lowest dose possible.
- Diuretic use can cause orthostatic hypotension, and the patient should be told to change positions slowly.
- Blood pressure should be monitored for several hours after administration.

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Subcategory: Medications affecting urinary output

Topic: Caring for the client with heart failure

- High-ceiling loop diuretics work in the loop of Henle to block the reabsorption of sodium and chloride and prevent reabsorption of water.
- Loop diuretics can cause dehydration, and the patient should be closely monitored for signs of dehydration.
- The patient's blood pressure should be closely monitored when utilizing loop diuretics.

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Subcategory: Immunizations

Topic: Evaluating client understanding of teaching about HPV immunization

- This immunization is recommended for adolescents between 11-12 years old, but can be given as early as 9.
- Watch for adverse effects such as redness, swelling, tenderness at the injection site, fainting, mild fever, and headache.
- There are different types of HPV; 16, 18, 31, 33, 45, 52, and 58 can cause cancer of the anus, vagina, vulva, and cervix.

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Main Category: Pharmacological and Parenteral Therapies

Subcategory: Heart Failure and Pulmonary Edema

Topic: Priority actions for a client who has heart failure

- The nurse should monitor I&O daily.
- Dyspnea and shortness of breath upon exertion should be assessed for.
- Oxygen should be administered as prescribed.

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Subcategory: Endocrine Disorders

Topic: Identifying need for dosage adjustment of methimazole

- Monitor vitals, weight, and I&O at baseline periodically.
- Monitor thyroid hormone levels before, during, and after therapy.
- Monitor for symptoms of hypothyroidisms such as drowsiness, depression, weight gain, edema, cold intolerance, anorexia, and dry skin.

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Subcategory: Intravenous Therapy

Topic: Insertion of a short peripheral venous catheter

- Clean the insertion site with an alcohol swab prior to insertion.
- Do not touch the tip of the needle or syringe being used.
- Stop the infusion and remove the catheter if signs of infiltration are noted.

Topic: Nursing interventions for IV infiltration

- The nurse should stop the IV and notify the provider.
- The nurse should follow the facilities protocol for removal.
- The nurse should find an alternate insertion site for the new IV site instead of trying to use the same one.

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Main Category: Pharmacological and Parenteral Therapies

Subcategory: Angina and Antilipemic Agents

Topic: Adverse effects of statins

- Statins lower cholesterol to lower a patient's chances of having a heart attack or stroke.
- Statins are known to cause muscle pain, liver damage, increase blood sugar, memory loss, and confusion.
- Statins should not be taken with grapefruit juice because it negatively affects their absorption.

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Subcategory: Opioid Agonists and Antagonists

Topic: Monitor for anticipated interactions among clients prescribed medications

- Opioids can cause respiratory depression, and respiratory rate is a priority assessment for patients who are prescribed opioids.
- Opioids can cause urinary retention, and urinary output should be monitored every four hours.
- Patients taking opioids should avoid hazardous activities.

Topic: Responding to breakthrough pain

- A fentanyl patch can take up to 24 hours to kick in, short acting opioids should be given in the meantime.
- Do not start placing multiple patches at once to try to make them kick in faster.
- Do not apply heat to a fentanyl patch.

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Subcategory: Diabetes Mellitus

Topic: Evaluating understanding of self-administration of two types of insulin

- Clean the site with an alcohol swab.
- Pinch the skin of the abdomen and insert the needle at a 45-degree angle.
- Insert the medication and apply pressure to the injection site after the needle has been removed from the body.

Topic: Mixing insulins

- Inject air into the vial of the slower acting insulin first.
- Do NOT use insulin that appears cloudy.
- Roll the insulin between the palms, don't shake it.

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Main Category: Pharmacological and Parenteral Therapies

Subcategory: Pharmacokinetics and Routes of Administration

Topic: Parenteral medications

- IV has no barriers to absorption and absorbs very quickly.
- Blood perfusion affects IM injections.
- Oral administration has the slowest absorption rate.

Topic: Administering an IM injection to an infant

- The anterolateral thigh is the preferred IM injection site for infants.
- An IM injection should never be given to an infant in the buttocks.
- The nurse should be sure to use the correct length and gauge of needle when giving an IM injection to an infant.

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Subcategory: Gastrointestinal disorders

Topic: Teaching about total parenteral nutrition

- Parenteral nutrition is used to provide nutrition to patient's who can't use their digestive tract to absorb nutrients.
- The nurse should always check residuals before administering parenteral feeding.
- Parenteral feedings are highly specialized. The nurse should make sure she is using the correct feeding just as she would with a medication.

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Main Category: Reduction of Risk Potential

Subcategory: Sedative Hypnotics

Topic: Priority assessment for a client who received midazolam

- The nurse should closely monitor the patient's vital signs.
- Resuscitation equipment should be readily available in the event of an overdose.
- Midazolam can cause lightheadedness, drowsiness, and incoordination. The patient should proceed with great caution when ambulating or operating machinery until it is know how the medication will affect them.

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Subcategory: Miscellaneous Pain Medications

Topic: Monitoring adverse effects of anesthesia

- The nurse should monitor the patient's vital signs and respiratory status.
- The nurse should monitor the patient for signs of seizure activity.
- The nurse should monitor the patient for signs of hypothermia.

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Subcategory: Medications Affecting Labor and Delivery

Topic: Assessment findings to report

- Respirations below 12 per minute should be closet monitored.
- If the client is not producing urine this needs to be reported.
- High blood pressure above the patients baseline should always be reported to a provider.

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Main Category: Physiological Adaptation

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