

Proctored ATI Remediation Template

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Assessment Name: RN Fundamentals
Semester: Spring 2025 (1st 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 Sickle 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: Physiological Adaptation

Subcategory: Client Safety

Topic: Seizure Precautions

- Make sure rescue equipment is at the bedside. Includes oxygen, oral airway, suction, and padding.
- Maintain airway patency and suction PRN.
- After a seizure, determine mental status and measure oxygenation saturation and vital signs.

Subcategory: Airway Management

Topic: Positioning for Postural Drainage

- The use of various positions allows secretions to drain by gravity.
- Have client remain in each position for 10 to 15 minutes to allow time for percussion, vibration, and postural drainage.
- Chest physiotherapy involves the use of chest percussion, vibration, and postural drainage to help mobilize secretions.

Subcategory: Adverse Effects, Interactions, and Contraindications

Topic: Identifying Manifestations of an Anaphylactic Reaction

- Manifestations include GI cramping and apprehension, with itching and hives following.
- Respiratory manifestations follow inflammation and mucous production.
- Allergic asthma can have a similar progression following exposure to an allergen.

Main Category: Health Promotion and Maintenance

Subcategory: Middle Adults (35 to 65 years)

Topic: Identifying Risk Factors for Cardiovascular Disease

- Clients who have obesity and/or type 2 diabetes.
- Clients who have psychosocial stressors.
- Cancer can play a part in cardiovascular disease.

Subcategory: Health Promotion and Disease Prevention

Topic: Recommendations for Osteoporosis Prevention

- Reduce environmental factors such as water quality, pesticide exposure and air pollution.
- Get routine physical exams.
- Join an exercise program.

Subcategory: Older Adults (65 years and Older)

Topic: Reducing the Risk for Osteoporosis

- Annual screening of a DXA scan.
- Client is recommended to take a low-dose multivitamin along with a mineral supplementation.
- Promote physical activity.

Main Category: Reduction of Risk Potential

Subcategory: Vital Signs

Topic: Nursing Actions for Elevated Blood Pressure

- Encourage lifestyle modifications including stress reduction, and dietary modifications.
- Administer pharmacological therapy.
- Assess and monitor for tachycardia, bradycardia, pain, and anxiety. Primary hypertension is usually without manifestations.

Subcategory: Airway Management

Topic: Changing Tracheostomy Ties

- Replace tracheostomy ties if they are wet or soiled. Secure new ties before removing the soiled ones to prevent accidental decannulation.
- Ties are used around the neck to stabilize the tracheostomy tube.

Topic: Tracheostomy Care

- Use surgical asepsis to remove and clean the inner cannula. Use a new inner cannula if it is disposable.

- Clean the stoma site and then the tracheostomy tube.
- Place a fresh split-gauze tracheostomy dressing of nonraveling material under and around the tracheostomy holder and plate.

Subcategory: Intravenous Therapy

Topic: Actions to Take for Fluid Overload

- Decrease the IV flow rate and notify the provider of the change.
- Adjust the rate after correcting fluid overload.
- Raise the head of the head.

Main Category: Pharmacological and Parenteral Therapies

Subcategory: Safe Medication Administration and Error Reduction

Topic: Preparing to Administer a Medication for the First Time

- Determine what the client already knows about the medication, needs to know about the medication, and wants to know about the medication.
- Collect any essential data before and after administering any medication.
- Ask another nurse to verify the dose if uncertain of the calculation or to confirm the calculation is correct.

Topic: Teaching a Client About Self-Administering Heparin

- Check labels carefully.
- Measure doses accurately and double-check dosages.
- Follow correct procedures for all routes of administration.

Subcategory: Pharmacokinetics and Routes of Administration

Topic: Enteral Administration of Medications

- For liquids, suspension, and elixirs, follow directions for dilution and shaking. To prepare the medication, place a medicine cup on a flat surface before pouring, and ensure the base of the meniscus is at the level of the dose.
- Have client sit upright at a 90-degree angle to facilitate swallowing.
- Do not mix with large amounts of food or beverages in case clients cannot consume the entire quantity.

Main Category: Management of Care

Subcategory: Pressure Injury, Wounds, and Wound Management

Topic: Evaluating Performance of a Wound Irrigation Procedure

- Use a piston syringe or a sterile straight catheter for deep wounds with small openings.
- Do not use cotton balls and other products that shed fibers.
- Never use the same gauze to cleanse across an incision or wound more than once.

Subcategory: Legal Responsibilities

Topic: Obtaining Informed Consent for a Client Who Is Unconscious

- A competent adult must sign the form for informed consent.
- Individuals who can grant consent for another person include the following: parent of a minor, legal guardian, court-specified representative, and an individual who has durable power of attorney authority for health care.
- The nurse must verify that consent is informed and witness the client signing the consent form.

Topic: Identifying Negligence

- Students should not perform tasks for which they are not prepared, and they should have supervision as they learn new procedures.
- Follow standards of care.
- Communicate effectively and thoroughly with clients.

Main Category: Clinical Judgement

Subcategory: Infection Control

Topic: Priority Care for a Client Who Has Tuberculosis

- Negative pressure airflow exchange in the room of at least six to 12 exchanges per hour, depending

on the age of the structure.

- If splashing or spraying is a possibility, wear full eye wear.
- Clients who have an airborne infection should wear a mask while outside of the room/home.

Subcategory: Pressure Injury, Wound, and Wound Management

Topic: Identifying Risks for Delayed Wound Healing

- Decrease in absorption of nutrients.
- Dehydration due to decreased thirst sensation.
- Decrease in peripheral circulation and oxygenation.

Subcategory: Client Safety

Topic: Priority Risk for a Client Who Takes Multiple Medications

- Older adult clients can be at an increased risk for falls.
- Adverse effects of medications can also increase the risk for falls.
- Nurses must evaluate all clients in health care facilities for risk factors for falls and implement preventative measures accordingly.

Subcategory: Home Safety

Topic: Providing Discharge Teaching for a Client Who Is Recovering From Pneumonia

- Increase ambulating in home environment to help promote mobility of secretions.
- Be sure to watch out for excessive shortness of breath.
- Take things slow at first.

Main Category: Basic Care and Comfort

Subcategory: Mobility and Immobility

Topic: Identifying Appropriate Crutch Gait for a Client

- Use assistance with ambulation.
- Support body weight at the hand grips with elbows flexed at 20 to 30 degrees.
- The tripod position is the basic crutch stance.

Topic: Planning Care for Client Who is Immobile

- Turn and reposition every 2 hours.
- Decreased cardiac output, leading to poor cardiac effectiveness, which results in increased cardiac workload.
- Stasis of secretions and decreased and weakened respiratory muscles, resulting in atelectasis and hypostatic pneumonia.

Main Category: Psychosocial Integrity

Subcategory: Therapeutic Communication

Topic: Responding to a Client Who Has Depression

- The tone of voice can communicate a variety of feelings.
- Knowing when to communicate makes the receiver more attentive to the message.
- Body language and posture can demonstrate comfort and ease in the situation. The first impression is very important.

Main Category: Safety and Infection Control

Subcategory: Home Safety

Topic: Evaluating Discharge Teaching for an Older Adult Client

- A home hazard evaluation should be conducted by a nurse, physical therapist, and/or occupational therapist.
- A decrease in tactile sensitivity can place the client at risk for burns and other types of tissue injury.
- Client is aware of the environmental factors that can pose a risk to safety and suggestion modifications to be made.

Subcategory: Medical and Surgical Asepsis

Topic: Technique for Setting Up a Sterile Field

- Touch sterile materials only with sterile gloves.
- Consider any object held below the waist or above the chest contaminated.

- Sterile materials can touch other sterile surfaces or materials; however, contact with non-sterile materials at any time contaminates a sterile area, no matter how short the contact.

