

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 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: Management of Care

Subcategory: Collaboration with Multidisciplinary Team

Topic: Pressure injury wounds and Wound Management

- Wounds are a result of injury to the skin. Although there are many different methods and degrees of injury, the basic phases of healing are essentially the same for most wounds.
- A pressure injury is a specific type of tissue injury from unrelieved pressure, usually over bony prominences, that results in ischemia and damage to the underlying tissue.
- Occurs on or about day 21 and involves the strengthening of the collagen scar and the restoration of a more normal appearance. It can take more than 1 year to complete, depending on the extent of the original wound.

Subcategory: Concept of management

Topic: Health Care Delivery Systems

- Health care delivery systems incorporate interactions between health care providers and clients within the constraints of financing mechanisms and regulatory agencies.
- Health care systems include the clients who participate, the settings in which health care takes place, the agencies that regulate health care, and the mechanisms that provide financial support.

Subcategory: Continuity of Care (1)

Topic: Admissions, transfers and discharge

- Responsibilities of nurses include ensuring continuity of care and information sharing throughout the processes of admission, transfers, and discharge.
- The admission assessment provides baseline data to use in the development of the nursing care plan.
- Prior to arrival of the client, bring necessary equipment into the room. This should include appropriate documentation forms, equipment to measure vital signs, a pulse oximeter, and hospital attire for the client.

Subcategory: Informed Consent)1_

Topic: Legal Responsibility

- Understanding the laws governing nursing practice helps nurses protect clients' rights and reduce the risk of nursing liability.

Subcategory: Legal Rights and Responsibilities (2)

Topic: Legal responsibilities Identifying an intention TORT

- Nurses are accountable for protecting the rights of clients. Examples include informed consent, refusal of treatment, advance directives, confidentiality, and information security.
- The nurse's role in the informed consent process is to witness the client's signature on the informed consent form and to ensure that the provider has obtained the informed consent responsibly.

Topic: Legal Responsibilities: Identifying Negligence

- Professional negligence is the failure of a person who has professional training to act in a reasonable and prudent manner. The terms "reasonable" and "prudent" generally describe a person who has the average judgment, intelligence, foresight, and skill that a person with similar training and experience would have.
- Nursing students face liability if they harm clients as a result of their direct actions or inaction. They should not perform tasks for which they are not prepared, and they should have supervision as they learn new procedures. If a student harms a client, then the student, instructor, educational institution, and facility share liability for the wrong action or inaction.
- Negligence issues that prompt most malpractice suits include failure to:
 - Follow professional and facility-established standards of care.
 - Use equipment in a responsible and knowledgeable manner. QS
 - Communicate effectively and thoroughly with clients.

Document care the nurse provided.
Notify the provider of a change in the client's condition.
Complete a prescribed procedure.

Main Category: Safety and Infection

Subcategory: Accident/Error/Injury Prevention (2)

Topic: Musculoskeletal and Neurologic Systems:

- Examination of the musculoskeletal system includes assessing both its structure and function.
- Assess passive ROM by moving the client's joints through their full range of movements. Do not move a joint past the point of pain or resistance.
- Assess active ROM by having the client repeat the movements the nurse demonstrates.
- Muscles should be firm, symmetric, and have equal strength bilaterally. The dominant side is usually slightly larger; less than a 1 cm difference is not significant.

Topic: Nutrition and Oral Hydration:

- Nutrients provide energy for cellular metabolism; tissue maintenance and repair; organ function, growth and development; and physical activity. Water, the most basic of all nutrients, is crucial for all body fluid and cellular functions.
- The proper balance of nutrients and fluid along with consideration of energy intake and requirements is essential for ensuring adequate nutritional status. Early recognition and treatment of clients who are malnourished or at risk can have a positive influence on client outcomes.
- Carbohydrates provide most of the body's energy and fiber. Each gram produces 4 kcal. They provide glucose, which burns completely and efficiently without end products to excrete. Sources include whole grain breads, baked potatoes, brown rice, and other plant foods.

Subcategory: Home Safety

Topic: Home Safety: Evaluating Client Understanding of Home Safety Teaching

- In addition to taking measures to prevent injury of clients in a health care setting, nurses play a pivotal role in promoting safety in the client's home and community. Nurses often collaborate with the client, family, and members of the interprofessional team (social workers, occupational therapists, and physical therapists) to promote the safety of the client.
- The age and developmental status of the client create specific safety risks.
- Infants and toddlers are at risk for injury due to a tendency to put objects in their mouth and from hazards encountered while exploring their environment.

Topic: Home Safety: Evaluating Discharge Teaching for an Older Adult Client

- The rate at which age-related changes occur varies greatly among older adults.
- Many older adults are able to maintain a lifestyle that promotes independence and the ability to protect themselves from safety hazards.
- Prevention is important because elderly clients can have longer recovery times from injuries and the risk of complications.

Subcategory: Standard Precautions/transmission-Based Precautions/Surgical Asepsis (2)

Topic: Infection Control: Isolation Precautions While Caring for a Client Who Has Influenza

- An infection occurs when the presence of a pathogen leads to a chain of events. All components of the chain must be present and intact for the infection to occur. A nurse uses infection control practices (medical asepsis, surgical asepsis, standard precautions) to break the chain and thus stop the spread of infection.

Topic: Medical and Surgical Asepsis: Technique for Setting Up a Sterile Field

- Medical asepsis refers to the use of precise practices to reduce the number, growth, and spread of micro-organisms (“clean technique”). It applies to administering oral medication, managing nasogastric tubes, providing personal hygiene, and performing many other common nursing tasks.
- Surgical asepsis refers to the use of precise practices to eliminate all micro-organisms from an object or area and prevent contamination (“sterile technique”). It applies to parenteral medication administration, insertion of urinary catheters, surgical procedures, sterile dressing changes, and many other common nursing procedures.

Subcategory: Use of Restraints/Safety Devices

Topic: Client Safety: Planning Care for a Client Who Has a Prescription for Restraints

- Safety is freedom from injury. Providing for safety and preventing injury are major nursing responsibilities.
- Many factors affect clients’ ability to protect themselves. Those factors include the client’s age, with the young and old at greater risk; mobility; cognitive and sensory awareness; emotional state; ability to communicate; and lifestyle and safety awareness.
- It is the provider’s responsibility to assess, report, and document clients’ allergies and to provide care that avoids exposure to allergens.

Main Category: Health Promotion and Maintenance

Subcategory: Health Promotion/Disease Prevention (1)

Topic: Middle Adults (35 to 65 Years): Identifying Risk Factors for Cardiovascular Disease

- According to Erikson, middle adults must achieve generativity vs. stagnation.
- Sex drive can decrease as a result of declining hormones, chronic disorders, or medications.
- Decreased chest wall movement, vital capacity, and cilia, which increases the risk for respiratory infections
- Reduced cardiac output
- Decreased peripheral circulation
- Increased blood pressure

Subcategory: Health Screening (1)

Topic: Nutrition Assessment/Data Collection: Obtaining Anthropometric Measurements

- Weigh at the same time of day wearing similar clothing to ensure accurate

weight readings.

- Daily fluctuations generally are indicative of water weight changes.
- Percentage weight change calculation (weight change over a specified time):

Subcategory: High Risk Behaviors (1)

Topic: Older Adults (65 years and Older): Reducing the Risk for Osteoporosis

- Decreased production of antibodies by B cells
- Increased production of autoantibodies (antibodies against the host's body) with increased autoimmune response
- Decreased core body temperature.

Subcategory: Self Care

Topic: Home Safety: Assessing the Home Environment of a Client Who Has Osteoporosis

- To initiate a plan of care, the nurse must identify risk factors using a risk assessment tool and complete a nursing history, physical examination, and home hazard appraisal
- Carbon monoxide is a very dangerous gas because it binds with hemoglobin and ultimately reduces the oxygen supplied to the tissues in the body.

Subcategory: Techniques of Physical Assessment

Topic: Head and Neck: Expected Eye Assessment Findings

- This examination includes the skull, face, hair, neck, shoulders, lymph nodes, thyroid gland, trachea position, carotid arteries, and jugular veins.
- Use the techniques of inspection, palpation, and auscultation to examine the head and neck.
- Unexpected findings include palpation of a mass, limited range of motion of the neck, and enlarged lymph nodes.

Main Category: Psychosocial Integrity

Subcategory: Therapeutic Communication (1)

Topic: Therapeutic Communication: Therapeutic Response to an Adolescent Client's Concerns

- Communication is a complex process of sending, receiving, and comprehending information being exchanged between two or more people. It is a dynamic and ongoing process that creates a unique experience for the participants. When communication breaks down, the result can be workplace errors and the loss of professional credibility.

Subcategory: Therapeutic environment (1)

Topic: Therapeutic Communication: Addressing Client Anxiety

- Knowing when to communicate makes the receiver more attentive to the message.
- When clients are uncomfortable or distracted, it can be difficult to convey the message.
- Limited vocabulary or use of a different language can make it difficult for nurses to communicate with clients. Using medical or nursing jargon can decrease clients' understanding. Children and adolescents tend to use words differently than adults do.

Main Category: Basic Care and Comfort

Subcategory: Assistive Devices

Topic: Mobility and Immobility: Identifying Appropriate Crutch Gait for a Client

- Mobility is freedom and independence in purposeful movement. Mobility refers to adapting to and having self-awareness of the environment. Functional musculoskeletal and nervous systems are essential for mobility.

Subcategory: Elimination (1)

Topic: Bowel Elimination: Caring for a Client Who Has a Colostomy

- Many factors can alter bowel function. Interventions (surgery, immobility, medications, therapeutic diets) can affect bowel elimination. Various disease processes necessitate the creation of bowel diversions to allow fecal elimination to continue.
- Certain foods can increase gas (cabbage, cauliflower, apples), have a laxative effect (figs, chocolate), or increase the risk for constipation (pasta, cheese, eggs).
- Some bowel disorders prevent the expected elimination of stool from the body. Bowel diversions through ostomies are temporary or permanent openings (stomas) surgically created in the abdominal wall to allow fecal matter to pass.

Subcategory: Nonpharmacological Comfort Interventions - (1)

Topic: Pain Management: Providing Nonpharmacological Care for a Client

- Effective pain management includes the use of pharmacological and nonpharmacological pain

management therapies. Invasive therapies (nerve ablation) can be appropriate for intractable cancer-related pain.

- Clients have a right to adequate assessment and management of pain. Nurses are accountable for the assessment of pain. The nurse's role is that of an advocate and educator for effective pain management.
- Nurses have a priority responsibility to measure the client's pain level on a continual basis and to provide individualized interventions. Depending on the setting and route of analgesia administration, the nurse might be required to reassess pain 10 to 60 min after administering medication.

Main Category: Pharmacological and Parenteral

• Subcategory: Expected Actions/Outcomes - (1)

Topic: Safe Medication Administration and Error Reduction: Preparing to Administer a Medication for the First Time

- Having knowledge of federal, state (nurse practice acts), and local laws, and facilities' policies that govern the prescribing, dispensing, and administration of medications
- Preparing and administering medications, and evaluating clients' responses to medications
- Developing and maintaining an up-to-date knowledge base of medications they administer, including uses, mechanisms of action, routes of administration, safe dosage range, adverse effects, precautions, contraindications, and interactions
- Maintaining knowledge of acceptable practice and skills competency
- Determining the accuracy of medication prescriptions
- Reporting all medication errors
- Safeguarding and storing medications

Subcategory: Medication Administration

Topic: Pharmacokinetics and Routes of Administration: Enteral Administration of Medications

- Pharmacokinetics refers to how medications travel through the body. Medications undergo a variety of biochemical processes that result in absorption, distribution, metabolism, and excretion.

Topic: Safe Medication Administration and Error Reduction: Teaching a Client About Self-Administering Heparin

- Nurses administer prescription medications under the supervision of providers. These medications can be habit-forming, have potential harmful effects, and require monitoring.
- Medications have a pharmacological action, therapeutic use, body system target, chemical makeup, and classification for use during pregnancy. For example, lisinopril is an angiotensin-converting enzyme inhibitor (pharmacological action) and an antihypertensive (therapeutic use).

Main Category: Reduction of risk Potention

• Subcategory: Changes/Abnormalities in Vital Signs - (1)

Topic: Vital Signs: Nursing Actions for Elevated Blood Pressure

- Vital signs are measurements of the body's most basic functions and include temperature, pulse, respiration, and blood pressure.

Subcategory: Potential for Complications of Diagnostic Test/Treatment/Procedures (1)

Topic: Airway Management: Changing Tracheostomy Ties

- Gently place the oral probe (with cover) of the thermometer under the tongue in the posterior sublingual pocket lateral to the center of the lower jaw.
- Leave it in place until the reading is complete.

Subcategory: Therapeutic Procedures (1)

Topic: Airway Management: Tracheostomy Care

- Oxygen helps maintain adequate cellular oxygenation for clients who have many acute and chronic

respiratory problems (bronchitis, cystic fibrosis, asthma) or are at risk for developing hypoxia (respiratory illness, circulatory impairment).

- Maintaining a patent airway is a nursing priority. It involves mobilizing secretions, suctioning the airway, and managing artificial airways (endotracheal tubes, tracheostomy tubes) to promote adequate gas exchange and lung expansion.

Main Category: Physiological Adaptation

Subcategory: Alteration in Body Systems (1)

Topic: Airway Management: Positioning for Postural Drainage

- Post “No Smoking” or “Oxygen in Use” signs to alert others of the fire hazard.
- Know where to find the closest fire extinguisher.
- Educate about the fire hazard of smoking with oxygen use.
- Have clients wear a cotton gown because synthetic or wool fabrics can generate static electricity.
- Ensure that all electric devices (razors, hearing aids, radios) are working well.
- Make sure all electric machinery (monitors, suction machines) is grounded.
- Do not use volatile, flammable materials (alcohol, acetone) near clients receiving oxygen

Subcategory: Pathophysiology (1)

Topic: Adverse Effects, Interactions, and Contraindications: Identifying Manifestations of an Anaphylactic Reaction

- Result from muscarinic receptor blockade and affect the eyes, smooth muscle tone, exocrine glands, and heart.