

N441 Adult Health III
Proctored ATI Remediation Template

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Assessment Name: RN Adult Medical Surgical 2023 – Retake 2
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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
 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: Advocacy

Topic: Cancer Treatment Options: Responding to a client about chemotherapy

- The nurse should never telling the patient how they are suppose to feel or judging them. We are their support system and acknowledge their feels.
- If a patient is having fear or anxiety, we can try to give them medication to help take the edge off and help them relax.
- This is where therapeutic communication is key when communication with patients who has cancer. This is a very hard topic to communicate and process, but it we can show that we care and a shoulder to cry on, they might open up so that do not have to go through this by themselves.

Subcategory: Case Management

Topic: Respiratory Management and Mechanical Ventilation: Equipment Needs for Tracheostomy Suctioning

- Suction equipment: suction catheter, suction source (like the wall suction), connecting tubing, sterile normal saline.
- Airway equipment: trach tube, ambu bag, oxygen delivery setup with humidified.
- Sterile supplies: sterile field/tray, container/basin for the saline, and a drape.

Subcategory: Referrals

Topic: Heart Failure and Pulmonary Edema: Identifying Indications for a Referral for Cardiac Rehabilitation

- Cardiac rehabilitation services can be consulted if the client has prolonged weaknesses and needs assistance with increasing level of activity.
- If a patient was recent hospitalized for heart failure.
- If someone needs support with lifestyle modification and how demonstrates limited exercise tolerance.

Main Category: Safety and Infection Control

Subcategory: Accident/Error/Injury Prevention

Topic: Burns: Teaching a Client About Preventing Contractures

- This happens when the skin tightens as it healing that can lead to the joints becoming stiff and fixed.
- The patient will need to perform passive and active ROM. Active should be done every 2-4 hours when they are awake.
- If they are on bed rest or unable to get up to move, proper positioning is key. The nurse would want to avoid bending the joint. So, keep then in functional and extended position. Use a pillow, wedges, or rolled for support.

Subcategory: Handling Hazardous and Infection Materials

Topic: Pharmacokinetics and Routes of Administration: Teaching About Proper Needle Disposal

- Dispose needled after use in the appropriate sharp container. Seal and dispose the container when its $\frac{3}{4}$ full.
- Never throw a used needle in the regular trash or recycling bin.
- If a patient has to use a sharp container at home, make sure that it is out of the reach of young children.

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

Topic: Medical and Surgical Asepsis: Teaching About Hand Hygiene for Caring for a Client Who is Immunocompromised

- Clean their own hands before meals, after toileting, and after blowing their nose
- Wash hands before and after any client contact. Scrub for at least 20 seconds with soap and water. Use sanitizer if hands aren't visibly soiled.
- Keep nails short and avoid artificial nails. Remove jewelry before providing care.

Main Category: Basic Care and Comfort

Subcategory: Nonpharmacological Comfort Interventions

Topic: Pain Management: Use of Nonpharmacological Methods of Pain Relief

- Mind-body practices (yoga, chiropractic manipulation)
- Cognitive approaches (meditation or distraction)
- Natural products (herbs or oils)

Subcategory: Nutrition and Oral Hydration

Topic: Inflammatory Bowel Disease: Dietary Choices to Manage Diarrhea

- Choose low-residue, low-fiber foods during diarrhea flares, Eat small, frequent meals.
- Avoid high-fat, gas-producing, spicy, caffeinated, and high-sugar foods
- Stay hydrated with water and electrolyte solutions.

Main Category: Pharmacological and Parenteral Therapies

Subcategory: Adverse Effects/Contraindication/Side Effects/Interactions

Topic: Antibiotics Affecting the Bacterial Cell Wall: Monitoring for Adverse Effects of Cefaclor

- Allergic reaction: rash, hives, itching, wheezing, swelling of face/lips/throat, and anaphylaxis.
- GI issue: nausea, vomiting, abdominal pain, and diarrhea.
- Superinfection: oral thrush, vaginal yeast infection, and other new infections.

Subcategory: Expected Action/Outcomes

Topic: Medications Affecting Urinary Output: Expected Findings Indicating Medication

- Diuretics would increase the urine output. A normal range is at least 30 mL/hr for adults.
- Diuretics also would reduce peripheral edema, decrease pulmonary crackles, less SOB, and decrease jugular venous distention.
- Lastly, vital signs would improve (lower blood pressure, improved heart rate, and better oxygen saturation).

Subcategory: Pharmacological Pain Management

Topic: Pain Management: Interventions to Promote Postoperative Recovery

- Use multimodal pain therapy (opioids with NSAIDs with regional blocks)
- Support respiratory interventions: incentive spirometry, coughing, deep breathing, and splinting the incision with a pillow.
- Early ambulation to reduce stiffness and postoperative pain, improve circulation. Prevent DVT/pneumonia, and promotes bowel function.

Main Category: Reduction of Risk Potential

Subcategory: Potential for Complications of Diagnostic Tests/Treatments/Procedures

Topic: Electrocardiography and Dysrhythmia Monitoring: Indications for Pacemaker Insertion

- Symptomatic bradycardia.
- Sinus node dysfunction.
- Second-degree AV block and a complete third-degree heart block.

Topic: Ergonomic Principles: Preventing Footdrop for a Client Who Had a Cerebrovascular Accident

- Keep the foot at a 90 degree angle by using a footboard, or high-top shoe, or foot splint.
- Avoid using pillows directly under the calf or ankle.
- Place a physical and occupational therapy consult. They would be able to design strengthening programs, teach proper positioning, and provide custom orthotic devices.

Subcategory: System-Specific Assessment

Topic: Head Injury: Assessment of Cranial Nerve Function

- CN VII- Facial (have the patient smile, raise eyebrows, frown, puff cheeks)
- CN VIII- Vestibulocochlear (whisper test for hearing and Romberg test for balance)
- CN IX and X (checking for gag reflex, assess ability to swallow)

Subcategory: Therapeutic Procedures

Topic: Arthroplasty: Client Care Following Total Hip Arthroplasty

- Extensive physical therapy is required to regain mobility.

- Monitor for evidence of incisional infection (fever, increased redness, swelling, purulent drainage).
- Monitor for deep vein thrombosis (swelling, redness, pain in calf), pulmonary embolism (shortness of breath, chest pain), and bleeding (if taking an anticoagulant).

Topic: Disorders of Reproductive Tissue: Finding to Report Following Transurethral Resection of the Prostate

- Bright red blood or increase bleeding.
- Decrease urine output.
- Persistent hypotension or tachycardia.

Topic: Legal Responsibilities: Witnessing Informed Consent

- Witnesses the informed consent. Have the client sign the informed consent document
- Notify the provider if the client has more questions or appears not to understand any of the information. The provider is then responsible for giving clarification.
- Document questions the client has, notification of the provider, reinforcement of teaching, and use of an interpreter.

Main Category: Physiological Adaptation

Subcategory: Fluid and Electrolyte Imbalance

Topic: Fluid Imbalances: Clinical Manifestation of Hypervolemia

- Vital signs: hypothermia, tachycardia, hypotension, hypoxia.
- Renal: oliguria
- GI: thirst, dry furrowed tongue, nausea, vomiting, anorexia, acute weight loss.

Topic: Fluid Imbalances: Findings Indicating Fluid Volume Deficit

- Excessive gastrointestinal (GI) loss: vomiting, nasogastric suctioning, diarrhea
- Excessive skin loss: diaphoresis without sodium and water replacement
- Excessive renal system losses: diuretic therapy, kidney disease, adrenal insufficiency

Subcategory: Hemodynamics

Topic: Heart Failure and Pulmonary Edema: Teaching a Client Who Has Heart Failure

- Daily weight monitoring. Report if weight gain 2-3 lb in one day OR 5 lb in one week.
- Sodium restriction is limited to 2,000 mg/day
- Fluid restriction is limited to 1.5-2 L per day.

Topic: Pacemakers and Implantable Cardioverter/Defibrillators: Monitoring Client's Permanent Pacemaker Rhythm

- Provide the client with an identification card to carry at all time that including the manufacturer's name, model number, mode of function, rate parameters, and expected battery life.
- Take pulse daily at the same time for those with pacemakers or combination devices. Notify the provider if heart rate is less than the pacemaker rate
- If the ICD device delivers a shock, anyone touching the client will feel a slight electrical impulse, but the impulse is not harmful.

Subcategory: Illness Management

Topic: Diabetes Mellitus Management: Teaching About Foot Care

- Inspect feet daily. Wash feet daily with mild soap and warm water. Test water temperature with the arms or a thermometer before washing feet. Do not soak the feet.
- Avoid open-toe, open-heel shoes. Leather shoes are preferred to plastic. Wear shoes that fit correctly. Wear slippers with soles. Do not go barefoot.
- Cleanse cuts with warm water and mild soap, gently dry, and apply a dry dressing. Monitor healing and seek intervention promptly.

Main Category: Clinical Judgment

Subcategory: Evaluate Outcomes

Topic: Complications of Diabetes Mellitus: Evaluating a Client Who Is Experiencing DKA

- 3 Ps: Polyuria, polydipsia, and polyphagia

- Fruity odor of breath:
- Kussmaul respirations

Topic: Hyperthyroidism: Caring for a Client Who Is Experiencing Thyroid Storm

- ABCs: maintain airway and apply oxygen to keep it above 94%.
- Control hyperthermia.
- Administer Antithyroid Medications and Iodine Solutions After Antithyroid Drugs

Topic: Shock: Caring for a Client Who Has Hypovolemic Shock

- Priority Focus: ABCs
- Establish IV Access with 2 large-bore IVs.
- Rapid Fluid Replacement

Subcategory: Take Actions

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

- MONA protocol: Morphine, Oxygen, Nitrate, and Aspirin.
- Cleanse cuts with warm water and mild soap, gently dry, and apply a dry dressing. Monitor healing and seek intervention promptly.
- Cleanse cuts with warm water and mild soap, gently dry, and apply a dry dressing. Monitor healing and seek intervention promptly.

Topic: Inflammatory Bowel Disease: Caring for a Client Who Has Diverticulitis

- Inflammation and infection of the bowel mucosa caused by bacteria, food, or fecal matter trapped in one or more diverticula
- For severe manifestations (severe pain, high fever), the client is hospitalized, NPO, and receives nasogastric suctioning, IV fluids, IV antibiotics, and opioid analgesics for pain.
- Provide the client with instructions to promote normal bowel function and consistency. (Avoid laxatives and the use of enemas. Drink adequate fluids.)

Subcategory: Generate Solutions

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

- MONA protocol
- Apply continuous ECG monitoring
- Semi-Fowler's position with bed rest during acute chest pain.

Topic: Complications of Diabetes Mellitus Priority Treatment for a Client Experiencing DKA

- ABCs: assess/maintain airway patency AND apply oxygen as needed.
- Start 0.9% normal saline IV bolus.
- Begin Continuous IV Regular Insulin Infusion