

N321 Adult Health I  
Proctored ATI Remediation

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**Main Category: Management of Care**

**Subcategory: Advance Directives/Self-Determination/Life Planning**

**Topic:** Legal Responsibilities: Actions to Take Upon Client Admission

- The PSDA requires asking all clients on admission to a health care facility whether they have advance directives.
- Staff should give clients who do not have advance directives written information that outlines their rights related to healthcare decisions and how to formulate advance directives.
- A health care representative should be available to help with this process.

**Subcategory: Client Rights**

**Topic:** Ethical Responsibilities: Responding to a Client's Decision to Stop Treatment

- The PSDA stipulates that staff must inform clients they admit to a health care facility of their right to accept or refuse care.
- Competent adults have the right to refuse treatment, including the right to leave a facility without a discharge prescription from the provider.
- The nurse asks the client to sign an Against Medical Advice form and documents the incident.

**Subcategory: Legal Rights and Responsibilities**

**Topic:** Legal Responsibilities: Teaching About Examples of Negligence

- A nurse fails to implement safety measures for a client at risk for falls.
- A nurse administers a large dose of medication due to a calculation error. The client has a cardiac arrest and dies.
- Failure to give the standard of care.

**Main Category: Safety and Infection Control**

**Subcategory: Accident/Error/Injury Prevention**

**Topic:** Client Safety: Discussing Fire Safety with a Newly Licensed Nurse

- To use a fire extinguisher, use the PASS sequence.
- Know the location of exits, alarms, fire extinguisher, and oxygen shut-off valves.
- Make sure equipment does not block fire doors

**Topic:** Mobility and Immobility: Planning Care for a Client Who Has Hemiplegia

- Orthostatic hypotension
- Decreased respiratory movement resulting in decreased oxygenation and carbon dioxide exchange
- Decreased urinary elimination of calcium, resulting in hypercalcemia.

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

**Topic:** Infection Control: Identifying When to Use a Face Shield for Performing Client Care

- Measles, varicella, SARS-CoV2, Pulmonary or laryngeal tuberculosis
- Face shields are required when care might cause splashing or spraying of body fluids
- Properly clean all equipment for client care; dispose of one-time use items according to facility policy.

**Topic:** Infection Control: Teaching About Protective Environment

- Change personal equipment after contact with each client and between procedures with the same clients if in contact with large amounts of blood and body fluids.
- The precautions apply to every client, regardless of the diagnosis, and implementation of them must occur whenever there's anticipation of meeting a potentially infectious material
- Remove gloves and complete hand hygiene between each client.

**Subcategory: Home Safety****Topic:** Home Safety: Teaching a Client About Fire Safety at Home

- Ensure home safety with smoke and carbon monoxide detectors, fire alarms, well-lit and uncluttered staircases.
- Keep emergency numbers near the phone for prompt use in the event of an emergency of any type.
- Use and store oxygen equipment according to the manufacture's recommendations.

**Main Category: Psychosocial Integrity****Subcategory: Cultural Awareness/Cultural Influences on Health****Topic:** Cultural and Spiritual Nursing Care: Effective Communication with a Client Who Speaks a Different Language Than the Nurse

- Informing clients of language services verbally and in writing.
- Give the client learning materials in their preferred language and having instructional sign written in all languages common among members of the population in the area the facility serves.
- Providing language assistance to clients who have communication needs.

**Subcategory: Family Dynamics****Topic:** Cultural and Spiritual Nursing Care: Recognizing Risks for Family

- Plan and implement appropriate interventions with knowledge of cultural differences and respect for the client and family.
- Improve nurse-client communication when cultural variations exist by establishing rapport with the client and family.
- Communicate with and include the person who has the authority to make decisions in the family. Ask about the roles of members of the family.

**Subcategory: Grief and Loss****Topic:** Grief, Loss, and Palliative Care: Identifying Types of Grief

- Denial: The client has difficulty believing in an expected or actual loss.
- Anger: The client directs anger toward the self, others, a deity, objects, or the current circumstances.
- Bargaining: The client negotiates for more time or a cure.

**Main Category: Basic Care and Comfort****Subcategory: Assistive Devices****Topic:** Mobility and Immobility: Evaluating Client Understanding of Cane Use

- Always maintain two points of support on the ground.
- Keep the cane on the stronger side of the body.
- Support body weight on both legs.

**Subcategory: Elimination****Topic:** Urinary Elimination: Techniques for Promoting Urination

- Drink 2000 to 3000 mL of fluid daily unless contraindicated.
- Take complete course of prescribed antibiotics.
- Avoid wearing tight-fitting pants.

**Subcategory: Nutrition and Oral Hydration****Topic:** Fluid Imbalances: Calculating a Client's Net Fluid Intake and Output

- Add all fluid intake (oral, IV, tube feeds) and all output (urine, drains, emesis).
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**Topic:** Nasogastric Intubation and Enteral Feedings: Preparing to Administer Intermittent Tube Feeding to a

Client

- Catheter-tipped syringe, usually 30 to 60 mL
- pH test strip or meter to measure gastric secretions for acidity.
- Suction apparatus if attaching the tube to continuous or intermittent suction.

**Main Category: Pharmacological and Parenteral Therapies**

**Subcategory: Pharmacological Pain Management**

**Topic: Pain Management: Assessing a Client's Pain Level**

- Where are you when the symptoms occur?
- Is it constant or intermittent?
- Rate your pain on a scale of 0 to 10.

**Subcategory: Parenteral/Intravenous Therapies**

**Topic: Intravenous Therapy: Actions to Take When Initiating IV Therapy**

- Ask the client to slowly open and close their fist.
- Pull the skin taut and hold it.
- Anchor the vein below the site of insertion.

**Main Category: Reduction of Risk Potential**

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

**Topic: Intravenous Therapy: Actions to Take for Fluid Overload**

- Administer diuretics.
- Adjust the rate after correcting fluid overload.
- Measure vital signs and oxygen saturation.

**Topic: Vital Signs: Assessing a Client for Manifestations of Bleeding**

- Hypotension from fluid volume loss.
- Tachycardia as the body compensates.
- Increase respiratory rate and cool, clammy skin from decreased perfusion.

**Subcategory: System-Specific Assessments**

**Topic: Head and Neck: Assessment of the Thyroid Gland**

- 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.
- If the client's head size appears abnormal, compare the circumference to a chart, considering the client's gender, age, and race.

**Subcategory: Potential for Alterations in Body Systems**

**Topic: Rest and Sleep: Identifying Complications of Obstructive Sleep Apnea**

- Mouth and throat relax during sleep and occlude the upper airway.
- More than five breathing cessations lasting longer than 10 seconds per hour during sleep.
- Decrease in arterial oxygen saturation levels.

**Main Category: Physiological Adaptation**

**Subcategory: Alterations in Body Systems**

**Topic: Airway Management: Nasotracheal Suctioning Technique**

- Use a flexible catheter and lubricate the distal 6 to 8 cm with water-soluble lubricant.
- Insert the catheter into the nares during inhalation.
- Do not apply suction while inserting the catheter.

**Topic: Pressure Injury, Wounds, and Wound Management: Assessment of Wound Healing**

- Note the color of open wounds.
- Assess the length, width, and depth, and any undermining, sinus tracts or tunnels, and redness or swelling.
- Closed wounds: Skin edges should be well-approximated.

### **Subcategory: Fluid and Electrolyte Imbalances**

**Topic:** Electrolyte Imbalances: Expected Findings for a Client Who Has Hypocalcemia

- Numbness and tingling (fingers and around mouth).
- Frequent, painful muscle spasms at rest that can progress to tetany.
- Hyperactive DTRs.

## **Main Category: Clinical Judgement**

### **Subcategory: Analyze cues**

**Topic:** Postoperative Nursing Care: Caring for a Client Who is Postoperative

- Older adults might be at risk for delayed wound healing because of possible compromised nutrition.
- Older adults perspire less, which leads to dry, itchy skin that becomes fragile and easily abraded.
- Responses to medications and anesthetics can delay return of orientation postoperatively.

### **Subcategory: Take Actions**

**Topic:** Fluid Imbalances: Nursing Actions for a Client Who Reports Abdominal Pain

- Use a abdominal binder as prescribed for clients who have an abdominal incision and are obese or debilitated.
- Monitor bowel sounds.
- Encourage ambulation.

### **Subcategory: Recognize Cues**

**Topic:** Airway Management: Priority Concerns for a Postoperative Client

- Monitor breath sounds. Snoring or stridor can indicate poor oxygen exchange.
- Assess for hypervolemia and hypovolemia.
- Evaluate and treat hypertension and potential causes.

### **Subcategory: Evaluate Outcomes**

**Topic:** Pain Management: Evaluating Client Response to Morphine

- Recheck pain score and observe for decreased distress.
- Monitor vital signs: Look for respiratory depression, sedation level, and stable BP/HR.
- Check for adverse effects: Nausea, constipation, itching, or altered LOC.