

### **Accident/Error/Injury Prevention - (1)**

- o Spinal Cord Injury: Caring for a Client Who Has a Spinal Cord Injury (Active Learning Template - System Disorder, RM AMS RN 11.0 Chp 16 Spinal Cord Injury )
  - Baclofen can be used therapeutically for patients who suffered a spinal cord injury
  - The four complications of a spinal cord injury are: spinal shock, orthostatic hypotension, neurogenic shock, and autonomic dysreflexia
  - Glucocorticoids help spinal cord injury by decreasing edema of the spinal cord (spinal shock), which can cause spinal cord compression and areas of ischemia.

### **Handling Hazardous and Infectious Materials - (3)**

- o Cancer Treatment Options: Caring for a Client Who Has a Sealed Radiation Implant(Active Learning Template - Therapeutic Procedure, RM AMS RN 11.0 Chp 91 Cancer Treatment Options )
  - When a patient has a sealed radiation implant you should: Wear a lead apron when providing care, limit each visitor to 30 minutes per day, place “Caution: Radioactive Material” sign on door, and restrict children who are under 16 years of age from visiting
  - As a nurse, time at a patient’s bedside should be limited
  - Pregnant or nurses that are trying to conceive should not be exposed to patients with radiation implants.
- o Cancer Treatment Options: Caring for a Client Who Is Receiving Brachytherapy(Active Learning Template - Therapeutic Procedure, RM AMS RN 11.0 Chp 91 Cancer Treatment Options )
  - Brachytherapy is a form of radiotherapy where a sealed radiation source is placed inside or next to the area requiring treatment
  - “Seeds” are placed and guided via an ultrasound probe
  - No radiation is left in a patient’s body after temporary brachytherapy, so risk is very limited
- o Pharmacokinetics and Routes of Administration: Teaching About Proper Needle Disposal(Active Learning Template - Basic Concept, RM Fund 10.0 Chp 46 Pharmacokinetics and Routes of Administration )
  - Discard all sharps in leak and puncture proof containers
  - Use the Z-track technique when administering an IM injection
  - Needle size and length should be appropriate for the client’s size and volume of medication.

### **Coping Mechanisms - (1)**

Amputations: Providing Support Following an Alteration in Body Image(Active Learning Template - Therapeutic Procedure, RM AMS RN 11.0 Chp 69 Amputations )

- Appropriate care for distorted body image is a significant step to recovery
- Cognitive behavioral therapy is a treatment approach to patients with disturbed body image
- Allow patients to voice their concerns and validate their feelings by showing empathy towards their new body post amputation.

### **Mobility/Immobility - (1)**

Stroke: Caring for a Client Who Has Left-Sided Hemiplegia(Active Learning Template - System Disorder, RM AMS RN 11.0 Chp 15 Stroke )

- Patients who has left-sided hemiplegia often ignore left side of body

- Left-sided hemiplegia is a stroke of the right cerebral hemisphere which is responsible for visual and spatial awareness
- Patients with left-sided hemiplegia may be experiencing reading, writing, and speaking difficulties and need referral to speech therapy

### **Non-Pharmacological Comfort Interventions - (1)**

Pain Management: Use of Nonpharmacological Methods of Pain Relief(Active Learning Template - Basic Concept, RM AMS RN 11.0 Chp 4 Pain Management )

- Massage is a nonpharmacological method of pain relief that involves deep tissue rubbing
- Use of distraction can comfort patients when they are experiencing pain
- Some patients prefer nonpharmacological pain relief to avoid getting addicted to pain medication or over the counter medications

### **Adverse Effects/Contraindications/Side Effects/Interactions - (1)**

Medications Affecting Blood Pressure: Client Teaching Regarding ACE Inhibitors(Active Learning Template - Medication, RM Pharm RN 8.0 Chp 20 Medications Affecting Blood Pressure )

- If a patient develops a dry-constant cough, the nurse should inform the provider
- Patients should avoid salt substitutes (containing potassium) due to chance of further elevating potassium levels
- ACE inhibitors work by blocking conversion of angiotensin I to angiotensin II, causing vasodilation, excretion of sodium and water, and retain potassium

### **Blood and Blood Products - (1)**

Blood and Blood Product Transfusions: Preparing to Administer a Blood Transfusion(Active Learning Template - Therapeutic Procedure, RM AMS RN 11.0 Chp 40 Blood and Blood Product Transfusions )

- Must have 2 registered nurses verify the blood transfusion
- Nurse must remain with the client for the first 15-30 minutes of initial transfusion once the blood hits the patient's IV into the skin
- IV must be 18 or 20 gauge to avoid hemolysis

### **Central Venous Access Devices - (1)**

Cardiovascular Diagnostic and Therapeutic Procedures: Maintaining a Central Venous Access Device(Active Learning Template - Nursing Skill, RM AMS RN 11.0 Chp 27 Cardiovascular Diagnostic and Therapeutic Procedures )

- Central venous access devices are inserted into the body through a vein to enable the administration of fluids, blood products, medication and other therapies to the bloodstream
- Dressings should be changed every 48 hours or earlier if evidence of blood or drainage
- Strict sterile technique must be used when changing or administering medication via central venous access device or lines

### **Medication Administration - (1)**

Cancer Treatment Options: Intervention to Prevent Chemotherapy-Induced Nausea and Vomiting(Active Learning Template - Basic Concept, RM AMS RN 11.0 Chp 91 Cancer Treatment Options )

- Patients may be prescribed antiemetics prior to chemotherapy session
- Patients can chew on a breath mint to decrease symptoms of nausea after chemotherapy
- Ondansetron is a drug of choice at treating chemotherapy induced nausea and vomiting

### **Pharmacological Pain Management - (1)**

Osteoarthritis and Low-Back Pain: Planning Pain Relief for a Client Who Has Osteoarthritis(Active Learning Template - System Disorder, RM AMS RN 11.0 Chp 72 Osteoarthritis and Low-Back Pain )

- Often patients with osteoarthritis have increased pain upon physical activity
- Pain associated with osteoarthritis decreases at rest
- Apply heat 2 or 3 times a day for 20 to 30 minutes, using a heating pad, hot shower, or hot pack

### **Total Parenteral Nutrition (TPN) - (1)**

Gastrointestinal Therapeutic Procedures: Shortage of TPN Solution(Active Learning Template - Therapeutic Procedure, RM AMS RN 11.0 Chp 47 Gastrointestinal Therapeutic Procedures )

- TPN is a way of supplying all the nutritional needs of the body by bypassing the digestive system and dripping nutrient solution directly into a vein
- Keep dextrose 10% in water at the bedside in case the solution is unexpectedly ruined, or the next bag is not available
- If a bag is unavailable and administered late, do not attempt to catch up by increasing the infusion rate because the client can develop hyperglycemia

### **Laboratory Values - (1)**

Pancreatitis: Expected Laboratory Findings(Active Learning Template - System Disorder, RM AMS RN 11.0 Chp 54 Pancreatitis )

- amylase or lipase levels are typically elevated 3 times the normal level during acute pancreatitis
- many patients develop fruity breath, a sign of hyperglycemia
- Serum calcium and magnesium: decreased due to fat necrosis with pancreatitis

### **Potential for Complications of Diagnostic Tests/Treatments/Procedures - (2)**

Cardiovascular Diagnostic and Therapeutic Procedures: Cardiac Catheterization (Active Learning Template - Diagnostic Procedure, RM AMS RN 11.0 Chp 27 Cardiovascular Diagnostic and Therapeutic Procedures )

- Cardiac catheterization is a procedure used to diagnose and treat certain cardiovascular conditions
- Have the patient fast for 6-8 hours before the procedure
- Monitor puncture site for signs of infection or bleeding

Postoperative Nursing Care: Assessment of Postoperative Dressing(Active Learning Template - Nursing Skill, RM AMS RN 11.0 Chp 96 Postoperative Nursing Care )

- Advise patients that they may shower 48 hours after surgery
- Monitor dressing for any evidence of bleeding or abnormal drainage
- Change the dressing every 48 hours or earlier if evidence of drainage or infection

### **System Specific Assessments - (2)**

Diabetes Mellitus Management: Clinical Findings of Hypoglycemia(Active Learning Template - System Disorder, RM AMS RN 11.0 Chp 82 Diabetes Mellitus Management )

- Hypoglycemia is a condition in which your blood sugar (glucose) level is lower than normal
- Signs of hypoglycemia usually are hunger, trembling, heart racing, nausea, and sweating
- Hypoglycemia is a blood level less than 70mg/dL

Hemodialysis and Peritoneal Dialysis: Monitoring Patency of an Arteriovenous Graft(Active Learning Template - Therapeutic Procedure, RM AMS RN 11.0 Chp 57 Hemodialysis and Peritoneal Dialysis )

- Assess for patency every 8 hours
- Palpate the vascular access to feel for a thrill or vibration that indicates arterial and venous blood flow and patency
- Auscultate the vascular access with a stethoscope to detect a bruit or "swishing" sound that indicates patency

### **Therapeutic Procedures - (1)**

Postoperative Nursing Care: Priority Assessments Following a Coronary Artery Bypass Grafting(Active Learning Template - Therapeutic Procedure, RM AMS RN 11.0 Chp 96 Postoperative Nursing Care )

- Monitor patient for bleeding tendencies after a CABG
- Maintain adequate fluid and electrolyte levels
- Keep CABG patient on heart monitor to assess for heart dysrhythmias

### **Alterations in Body Systems - (2)**

Airway Management: Evaluating Client Understanding of Tracheostomy Care(Active Learning Template - Therapeutic Procedure, RM Fund 10.0 Chp 53 Airway Management )

- Make sure the patient's head of bed is at least 90 degrees for tracheostomy care
- The three components of a trach are outer cannula, inner cannula, obturator
- The tube should never be plugged if inflated, it can cause suffocation due to no air access

Postoperative Nursing Care: Priority Findings Following General Anesthesia(Active Learning Template - Therapeutic Procedure, RM AMS RN 11.0 Chp 96 Postoperative Nursing Care )

- Hypothermia is an expected finding in a client following general anesthesia
- Expectoration of thick, clear sputum is an expected finding due to intubation for general anesthesia
- Absent bowel sounds is an expected finding in a client following general anesthesia

### **Hemodynamics - (2)**

Hemodynamic Shock: Client Positioning(Active Learning Template - Therapeutic Procedure, RM AMS RN 11.0 Chp 37 Hemodynamic Shock )

- Hemodynamic shock symptoms can be: hypotension, tachycardia, decreased cardiac output, and fluid replacement
- place the client flat with his legs elevated to increase venous return
- Be prepared to intubate the client, have emergency resuscitation equipment ready

Systemic Lupus Erythematosus: Client Findings Associated with Raynaud's Disease(Active Learning Template - System Disorder, RM AMS RN 11.0 Chp 87 Lupus Erythematosus, Gout, and Fibromyalgia )

- Pallor may occur in response to the collapse of the arteries in an affected body part
- Cyanosis appears because the fingers or toes are not getting enough oxygen-rich blood
- Patient may experience feeling cold with numbness in the fingertips

### **Medical Emergencies - (2)**

Emergency Nursing Principles and Management: Priority Action for Abdominal Trauma(Active Learning Template - System Disorder, RM AMS RN 11.0 Chp 2 Emergency Nursing Principles and Management )

- Maintain the patient's airway, breathing, and circulation
- Perform a rapid neurologic examination and assess him head to toe to identify obvious injuries and signs of prolonged exposure to heat or cold
- Cover the exposed viscera with a sterile dressing

Intravenous Therapy: Priority Action for Central Venous Access Device Complication(Active Learning Template - Therapeutic Procedure, RM Fund 10.0 Chp 49 Intravenous Therapy )

- Allow intermittent or continuous central access to a blood vessel
- At the time of insertion, x-ray is done to confirm proper tip location and catheter position and to make sure that there is no pneumothorax
- Blood samples can be taken from any port not being used for fluid administration

### Unexpected Response to Therapies - (1)

Hemodialysis and Peritoneal Dialysis: Assessment of an Arteriovenous Fistula(Active Learning Template - Therapeutic Procedure, RM AMS RN 11.0 Chp 57 Hemodialysis and Peritoneal Dialysis )

- Assess for patency at least every 8 hours
- Palpate the vascular access to feel for a thrill or vibration that indicates arterial and venous blood flow and patency
- Auscultate the vascular access with a stethoscope to detect a bruit or "swishing" sound that indicates patency



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