

# ANNUAL DMA RECERTIFICATION TEST

1 List the six patient rights:

- |                   |                      |
|-------------------|----------------------|
| <u>Person</u>     | <u>Route</u>         |
| <u>Medication</u> | <u>Time</u>          |
| <u>Dosage</u>     | <u>Documentation</u> |

2. Liquid medication is poured at eye level holding the cup with your hand?

Yes     No    Explain:

Ensures proper/level dosing of  
medication

3. Controlled substance log is signed after the shift is over?

Yes     No    Explain:

Controlled substance log is signed  
after each medication pass AND at  
shift change (by both staff members)

4. The DMA may crush tablets if resident does not want to swallow whole?

Yes     No    Explain:

Tablets may only be crushed if  
a physician's order is present.

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5. Controlled substances are stored ( single locked ) according to policy and procedures?

Yes  No Explain:

Controlled substances are double locked at all times per policy.

6. Medication errors only need to be reported if the error causes harm?

Yes  No Explain:

All medication errors need to be reported as soon as the error is discovered to the H.M. and nurse.

7. The medication room keys are left hanging on a special hook in the office area?

Yes  No Explain:

Medication room keys are always kept on the designated DMA's person at all times.

8. If a resident runs out of a psychotropic medication and another bottle pack is not in the house, you can use one from another resident?

Yes  No Explain:

Medications can only be given to the resident to which they are prescribed.

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9. Always give Lantus insulin irregardless of the glucose level?

Yes  No Explain:

Glucose level is always checked  
prior to the administration of  
insulin.

10. Blood pressure readings are used to monitor the treatment results of Lisinopril, Tenormin, or Norvasc?

Yes  No Explain:

All listed medications are used to treat  
hypertension and so blood pressure  
readings are necessary to monitor effectiveness.

11. Eight o'clock medication may be given at 8:00, 9:00, or 10:00?

Yes  No Explain:

Medications may only be given  
up to one hour before (7:00) or  
one hour after (9:00) the scheduled time.

12. Medications that have been popped and then the resident refuses are put back in the bubble packs?

Yes  No Explain:

Medication must never be put  
back into a bubble pack - if it is  
refused / dropped, it must be disposed of.

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13. Orders do not have to be on record for insulin injections?

Yes  No Explain:

All medications, including insulin injections, must have written orders from a physician.

14. When a resident gets up late for a medication pass, just enter in the quickMAR, resident not in house for the med pass, and give the medication whenever they get up?

Yes  No Explain:

Medication must always be passed within the approved timeframe (+/- 1 hr); permission from nursing staff is required to pass outside of timeframe.

15. OTC means other than called for?

Yes  No Explain:

OTC stands for over-the-counter.

16. One Tablespoon is equal to 30ml?

Yes  No Explain:

One tablespoon = 15ml

Two tablespoons = 30ml

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17. NPO means nothing para oral?

Yes    No   Explain:

NPO/nothing para oral means "nothing  
by mouth"

18. All controlled substances are returned to the pharmacy to be repackaged?

Yes    No   Explain:

Controlled substances are not accepted  
for return at pharmacies - they must  
be used or disposed of on-site

19. Choking and aspiration is a rare problem among residents on psychotropic medications?

Yes    No   Explain:

Psychotropic medications can often cause  
dysmotility - choking and aspiration are  
known side effects. May also be caused  
from drowsiness/sedation.

20. Constipation is never a side effect of psychotropic medications?

Yes    No   Explain:

Constipation is also a side effect of  
psychotropic medications.