



**Certificate of Completion**  
IS HEREBY GRANTED TO

NAME Ashtonia Sewell

TO CERTIFY THAT THEY HAVE COMPLETED TO SATISFACTION IN

TYPE OF TRAINING DMR In-Services/Eval

COMPLETION DATE 2.25.2020

TRAINER SIGNATURE M. Colman-Fisher



**Medication Administration In-Service and Evaluation**

Name of Facility/Home: Walver

Employee Receiving In-Service: Ashantee Sowell

Date of 1st In-Service\*: 02/03/2020 Time: 9:00 am/pm Trainer: Cathryn Strahan-RN  
\*This is done by a regional nurse

Date of 2nd In-Service: 02/03/2020 Time: 12:00 am/pm Trainer: David Schmitz

Date of 3rd In-Service: 2/18/2020 Time: 4:00 am/pm Trainer: Melba Fisher

Date of 4th In-Service: 2/19/2020 Time: 4:00 am/pm Trainer: Melba C. Fisher

Date of 5th In-Service: 2/20/2020 Time: 4:00 am/pm Trainer: Melba C. Fisher

Date of 6th In-Service: 1/1 Time:    :    am/pm Trainer:    

Date of Final Evaluation: 2/25/2020 Time: 4:00 am/pm Trainer: Melba C. Fisher

**All staff must complete all three (6) In-Services and Final Evaluation**

Instructions: Check (✓) the appropriate box after Employee has been in-serviced.

	In-Service #	1st	2nd	3rd	4th	5th	6th	Eval.	Comments
1	Medication Area	✓	✓	/	/	/		/	
	a. Location of ample supplies prior to administration	✓	✓	/	/	/		/	
	b. Area is clean and organized	✓	✓	/	/	/		/	
	c. Area is always locked	✓	✓	/	/	/		/	
	d. Location of all medication: Internal, External, Refrigerated, Controlled Drugs (narcotics)	✓	✓	/	/	/		/	
2	DMA washes hands prior to administering medications and between each Resident	✓	✓	/	/	/		/	
3	Medication keys are retained by DMA	✓	✓	/	/	/		/	
4	Resident is identified per facility policy and procedure prior	✓	✓	/	/	/		/	
5	Vital signs are taken per facility policy prior to administering medications (if applicable), always on cardiac and BP medications	✓	✓	/	/	/		/	
	a. If Pulse and BP are required, hands and equipment are washed per facility policy	✓	✓	/	/	/		/	
	b. If Apical Pulse is required, privacy is provided	✓	✓	/	/	/		/	
6	Medications Administration per facility policy and procedure: to include review of the '6 Rights'	✓	✓	/	/	/		/	
	a. Medications are properly removed from container/blister pack and (.) dot is placed in appropriate box on MAR	✓	✓	/	/	/		/	
	b. Liquid medication is poured at eye level, with palm covering label of stock bottle	✓	✓	/	/	/		/	





Medication Administration In-Service and Evaluation

	In-Service #	1st	2nd	3rd	4th	5th	6th	Eval.	Comments
6	c. DMA verifies medication and strength with order as transcribed on medication record per facility policy and procedure	✓	✓	/	/	/		/	
	d. Observe Resident to ensure medication is swallowed	✓	✓	/	/	/		/	
	e. Offer adequate and appropriate fluid with medication	✓	✓	/	/	/		/	
	f. Medication record is signed immediately after administration of same	✓	✓	/	/	/		/	
	g. Controlled substance record is signed immediately after administration of same	✓	✓	/	/	/		/	
	h. Correct dose is administered	✓	✓	/	/	/		/	
	i. Medication is administered at correct time	✓	✓	/	/	/		/	
	j. Verify no additional MAR pages have been added	✓	✓	/	/	/		/	
7	Infection control technique is reviewed	✓	✓	/	/	/		/	
8	Medication via gastric tube administered per facility policy and procedure (if applicable)	✓	✓	/	/	/		/	
	a. Resident is properly positioned, at a 45° sitting angle	✓	✓	/	/	/		/	
	b. Tube is checked for placement and patency	✓	✓	/	/	/		/	
	c. Tube is flushed before, between and after medications are administered	✓	✓	/	/	/		/	
9	Injections are administered by the Resident or a DMA if there is a doctor's order present, per facility policy and procedure	✓	✓	/	/	/		/	
	a. Syringes and needles are disposed of in sharps container, by person giving the injection without recapping	✓	✓	/	/	/		/	
	b. Proper glucometer testing is observed. Determination of competence re: accurately perform and read glucometer testing results	✓	✓	/	/	/		/	
10	DMA crushes medication according to facility policy and procedure ONLY with physician's orders.	✓	✓	/	/	/		/	
11	DMA administers eye and ear medication according to facility policies and procedures	✓	✓	/	/	/		/	
12	Side effects of psychoactive medication are noted (lethargy, hallucinations) and reported.	✓	✓	/	/	/		/	
13	Medication administration should not interrupted. <u>DO NOT RUSH</u>	✓	✓	/	/	/		/	
14	Controlled drugs are stored (Double Locked) according to facility policy and procedure	✓	✓	/	/	/		/	
15	Residents' rights are observed	✓	✓	/	/	/		/	
16	Location, Procedures and Documenting for administering PRN	✓	✓	/	/	/		/	
17	Designated Medication Administrator follows facility policy and procedure for medications refused or withheld. (MER & IR written)	✓	✓	/	/	/		/	
18	Medications are administered within time frame per facility policy	✓	✓	/	/	/		/	



Medication Administration In-Service and Evaluation

	In-Service #	1st	2nd	3rd	4th	5th	6th	Eval.	Comments
19	Medication errors are reported to Home Manager and RN teaching medication classes	✓	✓	✓	/				
20	Medication area is cleaned and locked after completion of medication administration	✓	✓	✓	/				
21	Designated Medication Administrator can identify action and common side effects of medications administered	✓	✓	✓	/				
22	Approved Abbreviations List is reviewed	✓	✓	✓	/				
23	Seizure precautions and documentation	✓	✓	✓	/				
24	After hour procedures, procedures for found/spilled medication, location of Epocrates link on staff computer	✓	✓	✓	/				
25	2nd Staff Verification, what it is, when it is needed, and how to document it	✓	✓	✓	/				
26	Refusal of Medication procedures (prompt 3 times, then write appropriate documentation)	✓	✓	✓	/				

**FOLLOW UP CONCERNS**

Specify time frame for completion: \_\_\_\_\_  N/A

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

I have received the above In-service and have read the Organizations **Medical Policies**. I understand what is expected of me as a Designated Medication Administrator. I also understand that any immediate medical questions or concerns should be directed to the Coordinator of Care at my Site during open office hours and to the On-Call person after hours.

*A. Dowell*  
 \_\_\_\_\_  
 Employee Signature

*2.25.20*  
 \_\_\_\_\_  
 Date

*M. Coleman-Fisher*  
 \_\_\_\_\_  
 Home Manager Signature

*2.25.2020*  
 \_\_\_\_\_  
 Date

# ANNUAL DMA RECERTIFICATION TEST

-3

1. List the six patient rights:

<u>Person</u>	<u>Time</u>
<u>Documentation</u>	<u>Route</u>
<u>Medication</u>	<u>Dose</u>

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

Yes  No Explain:

~~Hold the cup~~ Pour at eye level  
on Flat surface

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

Yes  No Explain:

Anytime you pass DMA  
keys

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

Yes  No Explain:

only if doctor orders  
with doctors Name.

# ANNUAL DMA RECERTIFICATION TEST

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

Yes

No

Explain:

Controlled substances are  
double locked.

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

Yes

No

Explain:

All medication errors  
need to be reported.

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

Yes

No

Explain:

DMA keys stay on DMA  
at all times.

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

Yes

No

Explain:

Never share medication  
it can cause harm.

# ANNUAL DMA RECERTIFICATION TEST

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

Yes  No

Explain:

1/2  
only if its low  
follow doctor's order

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

Yes  No

Explain:

Because they are  
Blood pressure meds

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

Yes  No

Explain:

~~it can be giving a hour  
before and a hour after~~

7, 8, 9

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

Yes  No

Explain:

They must be destroyed.

# ANNUAL DMA RECERTIFICATION TEST

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

Yes  No

Explain:

All medication Have to be  
On record.

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:

NA Always give resident  
Medication during recommended  
time. After extra 1/2 hour document Refusal  
exception - if on-call medical  
gives permission - document  
on paper  
MAR + misc  
note

15. OTC means other than called for?

Yes  No

Explain:

over the counter

on paper  
MAR + misc  
note

16. One Tablespoon is equal to 30ml?

Yes  No

Explain:

yes

15mls

# ANNUAL DMA RECERTIFICATION TEST

17. NPO means para oral?

Yes

No

Explain:

Nothing by mouth.

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

Yes

No

Explain:

Yes. Destroyed by nurse

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

Yes

No

Explain:

Yes because ~~the~~ Psych Meds causes Swallowing problem

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

Yes

No

Explain:

its is a side effect.