

DMA TRAINING PROCESS

1. SHADOW SHIFT MED ROOM TOUR WITH MANAGER OR ASSISTANT MANAGER
 - EXPLAIN INTERNAL/EXTERNAL/CONTROL/PRN
 - STOCK MEDS
 - FIRST AIDE/BIOHAZARD SUPPLIES
 - DEAD DRUG BOX/DESTROYER JUG
 - SHOW HOW TO GET INTO EPOCRATES
2. DMA TRAINING CLASS WITH REGIONAL NURSE
3. CLASS ROOM TRAINING WITH HOME MANAGER OR ASSISTANT MANAGER
 - NAVIGATE QUICKMAR AND LOGIN
 - TEST GUY RESIDENT MED PASSES
 - MEDICATION REFUSALS AND DOCUMENTATION PROCESS
 - EXCEPTIONS AND WHEN TO USE THEM
 - EXPLAIN PRN PROCESS DOCUMENTATION AND FOLLOW UP
 - WORK ON DMA MEDICATION LISTS
 - PASSING AND COUNTING CONTROLS
 - SHOW INSULIN TRAY PROCESS
4. 5 SEPARATE DAYS OF MEDICATION PASSES WITH A DMA MENTOR
5. FINAL EVALUATION WITH HOME MANAGER OR ASSISTANT MANAGER

Staff Signature Alissa Evans Date 4/6/20
Home Manager Signature Mullencue RN Date 4/10/2020
Nurse Signature Mullencue RN Date 4/6/20

Hands on Medical Training for all new DCS

Vital Signs: Pulse, respirations, blood pressure, temperature, pulse oximeter, weight-Licensing requirements

Hand washing

Proper gloving

Universal precautions

Prevention of communicable diseases (MRSA, Influenza, respiratory infections)

Transferring: Gait belt use, wheelchair, shower chair, in or out of vehicles

Fall prevention: walker use, no throw rugs, hand rails, well lit hallways

Eating disorders: dysphasia and choking, positioning, special feeding equipment

Special Diets: pureed, thickit, mechanical soft

Hands on DMA Introductory

Blood pressure and pulse

Glucose testing and procedure

Hypoglycemic/Hyperglycemic protocols

Insulin: Expiration, pens, syringes, administration, storage

Liquid medications

Bubble packs

Reading labels

EMAR and paper MAR

Controlled substance sheets

Advanced directives, DNR status, Hospice

Staff Signature Alissa Evans Date 4/6/20

Nurse Signature Millicene RN Date 4/6/20

Allissa Evans

INITIAL MEDICAL TRAINING TEST

1. T F ___ It is important to report and record any change in physical condition or behavior of a resident.
2. If a person has a seizure, you should:
 - a) keep the person safe and free from injury by laying them down with something soft
 - b) time the seizure and provide first aid as necessary once the seizure is over
 - c) loosen restrictive clothing
 - d) all of the above
3. T ___ F The circulatory system is made up of the blood, heart, and the brain.
4. The primary purpose of the respiratory system is to:
 - a) supply oxygen to the tissue cells and eliminate carbon dioxide waste from the cells
 - b) bring food and nutrients to the tissue cells
 - c) both a and b
 - d) none of the above
5. T F ___ People with dysphagia have difficulty swallowing and may experience pain while swallowing.
6. T F ___ Food pieces that are too large for swallowing may enter the throat and block the passage of air, causing a person with dysphagia to not be able to swallow safely.
7. T F ___ If a resident is choking you should call 911.
8. T ___ F You can modify a diet without a physician's order or a behavior plan.
9. T F ___ Food or liquid that stays in the airway may enter the lungs and allow harmful bacteria to grow, resulting in a lung infection called aspiration pneumonia.
10. T ___ F Dysphagia is not serious. An individual with dysphagia will still be able to take in enough of the right foods to stay healthy.
11. T F ___ A regular diet is not subject to dietary restrictions.
12. T F ___ A mechanical soft diet is used for individuals who have difficulty chewing regular textured foods.
13. T F ___ Foods that are difficult for the individual to chew are chopped, ground, shredded and/or soft cooked to facilitate chewing and ease of swallowing, this is called a mechanical soft diet.

14. The musculoskeletal system is comprised of:
- sclera, retina, and cornea
 - bones, ligaments, joints, and muscles, and tendons
 - both a and b
 - none of the above
15. The endocrine system regulates the function of the
- central nervous system
 - the entire body
 - the respiratory system
 - none of the above
16. T F ___ Diabetes comes in two forms, Type I and Type II.
17. One of the most common diseases of the endocrine system is:
- diabetes
 - phlebitis
 - endocarditis
 - myocarditis
18. T F ___ It is important to wear gloves when coming in contact with blood or body fluids.
19. T F ___ After removing disposable gloves it is important to wash your hands.
20. What are the parameters for vital signs?
- Temp: 96 - 99
 - Pulse: 50 - 100
 - Respirations: 12 - 20
 - Blood pressure 90/50 - 160/90
21. T F ___ Behavioral changes can be due to a medical issue.
22. T ___ F If a seizure lasts 3 minutes long and the resident does not have a history of seizures there is no need to follow up with a physician at this time.
23. T F ___ It is a resident's right to refuse medical treatment, but if you as a staff feel that it is a medical emergency you should call 911 and let the resident refuse to the paramedics.

DMA CLASSROOM TRAINING TEST

NAME: Allissa Evans DATE: 4/16/20 SCORE: _____

1. Where should medication keys be kept?

on the person who is DMA

2. T F PRN is an abbreviation for as needed or whenever necessary.
3. T F NPO is an abbreviation for by mouth.
4. T F Prescription medication, including dietary supplements, or individual special medical procedures, do not need to have a physician or dentist order.
5. T F Prescription medications are to be kept in the original pharmacy container which is labeled for a specific resident, and locked and refrigerated if required.
6. T F You should preset each resident's medication in order to save time.
7. If a resident can't swallow their medications and needs to be crushed, we need:
- a pill crusher
 - the resident to chew the pill
 - a physician's order
8. The medication administration record (MAR) contains the following information:
- the medication, the side effects, and time to be administered.
 - the medication, the dosage, the side effects
 - the medication, the dosage, label instructions for use, and time to be administered
 - the medication, dosage
9. The following information about each medication must be obtained before it is given:
- purpose of medication and therapeutic effect
 - unwanted side effects
 - any known drug interactions with drugs the resident is currently taking
 - a and c
 - All of the above

DMA CLASSROOM TRAINING TEST

10. T F When medication is removed from the pharmacy-labeled container, it must be administered to the resident immediately by the person removing the medication from the container.

11. T F The initials of the person who administers the medication, must be entered at the time the medication is given.

12. List the 6 rights of Medication Administration:

med

documentation

time - date

resident

route

dose

13. T F If the MAR is missing the initials of the staff who administered a medication and you cannot verify the medication was given, Medical must be notified. This is a med error.

14. T F If the resident refuses to take their medication, you should record the refusal on EMAR and complete the Event report.

15. T F When a resident is going on a LOA (Leave of Absence), you should remove the meds from the bubble pack and place in another container and label the new container for the resident to take with him or her.

16. T F If a PRN medication is prescribed, you need to know what it is prescribed for, and the PRN medication can only be given for the reason it is prescribed.

17. T F When giving a PRN medication, record the reason for giving the PRN medication, follow-up with effectiveness one hour later, write a note that describes in detail what was observed.

18. T F Medication errors must be reported to the nurse and to the home manager. An event report must be completed.

19. T F It is important for the DMA to be familiar with the medications that are being administered to the residents. The DMA should also be familiar with common side effects.

20. T F It is not important for the DMA to be able to educate the resident about his or her medications.

DMA CLASSROOM TRAINING TEST

21. T F It is important to avoid distractions when preparing and or passing medications.
22. Prior to administering medications to a resident you should:
- ask the resident to tell you his or her name
 - identify the resident with his or her photo on EMAR
 - hand them a glass of water
 - All of the above
23. What is the medication administration time frame?
- half hour before and half hour after the correct administration time.
 - one hour before and one hour after the correct administration time
 - whenever the resident decides to take his or her medication
24. T F Good hand-washing technique is not important when you are passing medications.
25. T F When assisting a resident to apply a topical medication, it is alright to use your fingers to remove the medication from the jar.
26. T F Liquid medication is poured at eye level, on a flat surface.
27. T F The resident has the right to refuse medication, but also has the right to know the consequences of refusing the medications.
28. T F Controlled substances must be counted by the on-coming shift (DMA) and the going shift (DMA).
29. T F It is alright to store internal and external medications together.
30. T F When a blood sugar on a diabetic client is below 70, you should treat them with the hypoglycemic protocol, call the medical staff or on call personnel, and retest their blood sugar in 20 minutes.



Certificate of Completion

Is hereby granted to:

Allissa J Evans

To certify that they have complete to satisfaction in
"DMA, Medical, & Blood Borne Pathogens Training"

Date: 4/6/20

Marci Kullerhaus RN

Trainer Signature



Certificate of Completion

THIS HEREBY CERTIFIES THAT

Allissa Evans

HAS SUCCESSFULLY MET ALL REQUIREMENTS OF

DMA CERTIFICATION

INCLUDING: GLUCOSE MONITORING, SIX RIGHTS AND INSULIN ADMINISTRATION

April Villaverde RN

4/10/2020

SIGNED

DMA TRAINING

LIST OF MEDICATIONS TO COMPLETE FOR DMA TRAINING

Use the attached forms to look up each of the medications listed below. Each line must be completed and turned in the day that you do your final DMA Evaluation with your ROM (Regional Operation Manager) for your area. You will not be able to become DMA certified until all of the forms are completed [48]
See slide 65 in DMA Packette

Mental Illness Anxiety Disorders	Inhalers Allergy / Asthma	Hyperlipidemia Statins	Diabetes Endocrine & Metabolic
Abilify Ativan Clozaril Depakote Haldol Invega Klonopin Lamictal Lithium Risperdal Seroquel Tripleptal Zyprexa	Advair Discus Atrovent Flonase Flovent Loratadine Proventil	Crestor Lipitor Zocor	Apidra Byetta Glucophage Glyburide Lantus Levemir Levothyroxine Novolog Synthroid
Seizures	Gastrointestinal Disorder Constipation	Blood Pressure Meds	Pain & Inflammation
Dilantin Keppra Neurontin Topamax	Colace Miralax Prilosec Protonix Zantac	HCTZ (hydrochlorothiazide) Lisinopril Toprol Tenormin	Flexeril Motrin Norco Tylenol with Codeine Ultram

DRUG NAME	Lamictap
GENERIC NAME	Lamotrigine
DOSAGE RANGE	500mg a day, 2 doses
HOW TO TAKE	by mouth
USES	epileptic seizures, mood stabilizer
SIDE EFFECTS	dizzy, vomiting
WARNINGS	more medical history

DRUG NAME	Seroquel
GENERIC NAME	Quetiapine
DOSAGE RANGE	25mg - 400mg
HOW TO TAKE	by mouth
USES	Bi-polar, depression
SIDE EFFECTS	dry mouth, dizzy, pain in abdomen
WARNINGS	

DRUG NAME	Neurontin
GENERIC NAME	Gabapentin
DOSAGE RANGE	300mg - 600 3x/day
HOW TO TAKE	by mouth
USES	Seizures
SIDE EFFECTS	unsteady, dry mouth, diarrhea
WARNINGS	

DRUG NAME	Colace
GENERIC NAME	docusate Sodium
DOSAGE RANGE	50-300mg per day
HOW TO TAKE	oral
USES	Stool softener
SIDE EFFECTS	bitter taste, bloating
WARNINGS	

DRUG NAME	Toprol
GENERIC NAME	Metoprolol
DOSAGE RANGE	100mg
HOW TO TAKE	oral
USES	high BP, heart failure
SIDE EFFECTS	tired, confused, itch, dry mouth
WARNINGS	

DRUG NAME	Ativan
GENERIC NAME	Lorazepam
DOSAGE RANGE	2-6 mg a day
HOW TO TAKE	PO with or w/o food
USES	anxiety, sedation
SIDE EFFECTS	drowsiness, dizzy, weariness
WARNINGS	allergic,

DRUG NAME	Depakote
GENERIC NAME	Matproex sodium / divalproex sodium
DOSAGE RANGE	50-100 mg
HOW TO TAKE	capsul, oral liquid, PO
USES	anti-convulsant
SIDE EFFECTS	depression, abnormal thinking
WARNINGS	damage to pancreas

DRUG NAME	Motrin
GENERIC NAME	Ibuprofen
DOSAGE RANGE	10mg for kids 200mg adults up to 400mg
HOW TO TAKE	by mouth
USES	pain, swelling
SIDE EFFECTS	upset stomach, dizzy, headache
WARNINGS	don't exceed over certain amount

DRUG NAME	Haldol
GENERIC NAME	Haloperidol
DOSAGE RANGE	
HOW TO TAKE	by mouth
USES	Schizophrenia, tics/tourette
SIDE EFFECTS	nausea, vomiting
WARNINGS	

DRUG NAME	Lantus
GENERIC NAME	Insulin Glargine
DOSAGE RANGE	2 units - 10 units starting
HOW TO TAKE	injection
USES	control diabetes
SIDE EFFECTS	chills, cold sweats, tingling
WARNINGS	low BS