



Medication Administration In-Service and Evaluation

Name of Facility/Home: Ludington

Employee Receiving In-Service: Keri O'Brien

Date of 1st In-Service*: 09/17/2019 Time: 9:00 am/pm Trainer: Cathryn Strahan, RN.
*This is done by a regional nurse

Date of 2nd In-Service: 09/17/2019 Time: 12:00 am/pm Trainer: David Schmitz

Date of 3rd In-Service: 9/30/19 Time: 8:00 am/pm Trainer: Felisha Balthre

Date of 4th In-Service: 10/1/19 Time: 12:00 am/pm Trainer: Ashley Kelsey

Date of 5th In-Service: 10/1/19 Time: 4:00 am/pm Trainer: Ashley Kelsey

Date of 6th In-Service: 10/2/19 Time: 7:00 am/pm Trainer: Ashley Kelsey

Date of Final Evaluation: 10/3/19 Time: 7:00 am/pm Trainer: Felisha Balthre

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. DO NOT RUSH	✓	✓	✓	✓	✓	✓	✓	
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)	✓	✓	✓	✓	✓	✓	✓	

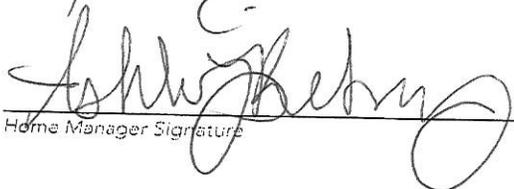
FOLLOW UP CONCERNS

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.


Employee Signature

_____ Date


Home Manager Signature

_____ Date



Certificate of Completion

Is hereby granted to:

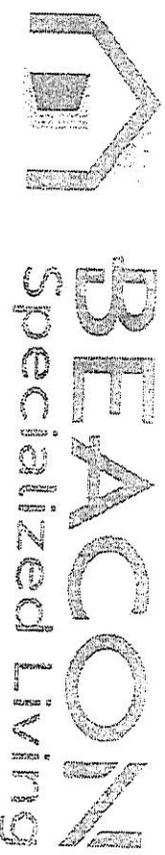
Keeri O'Brien

To certify that they have complete to satisfaction in

"DMA, Medical, & Blood Borne Pathogens Training"

Date: 09/14/2019

Cathryn Strahan RN
Trainer Signature



Certificate of Completion

THIS HEREBY CERTIFIES THAT

Keri O'Brien

HAS SUCCESSFULLY MET ALL REQUIREMENTS OF
DMA CERTIFICATION

INCLUDING: GLUCOSE MONITORING, SIX RIGHTS AND INSULIN ADMINISTRATION

A handwritten signature in black ink, appearing to read "David Schwartz".

DAVID SCHWARTZ

SIGNED

09/17/2019

DMA CLASSROOM TRAINING TEST

NAME: Heri O'Brien

DATE: 09/17/2019

SCORE: 100%

1. Where should medication keys be kept?

On the 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. a pill crusher
 - b. the resident to chew the pill
 - c. a physician's order
8. The medication administration record (MAR) contains the following information:
- a. the medication, the side effects, and time to be administered.
 - b. the medication, the dosage, the side effects
 - c. the medication, the dosage, label instructions for use, and time to be administered
 - d. the medication, dosage
9. The following information about each medication must be obtained before it is given:
- a. purpose of medication and therapeutic effect
 - b. unwanted side effects
 - c. any known drug interactions with drugs the resident is currently taking
 - d. a and c
 - e. 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:
- | | |
|-------------------|-----------------|
| <u>Person</u> | <u>Route</u> |
| <u>Medication</u> | <u>Time</u> |
| <u>Dosage</u> | <u>Document</u> |
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.

Bloodborne Pathogens Training Video— Pretest

Administer this test prior to showing the *Bloodborne Pathogens Training Video* to new employees and during annual bloodborne pathogens training sessions.

Name: Keri O'Brien

Department: _____ Date: 09/17/2019

1. (T) (F) Routine duties in a medical facility will not expose you to bloodborne pathogens.
2. (T) (F) A single drop of infectious blood is too small an amount to be an exposure hazard.
3. (T) (F) Hepatitis B and C and HIV are bloodborne pathogens.
4. (T) (F) Universal precautions can be an effective approach to preventing exposure to bloodborne pathogens.
5. (T) (F) If you wash your hands before putting on gloves, you don't have to wash your hands after taking the gloves off.
6. (T) (F) Employers can charge employees for personal protective equipment.
7. (T) (F) Contaminated environmental surfaces can transmit bloodborne pathogens.
8. (T) (F) Contaminated medical equipment must be labeled so employees can take appropriate precautions to prevent exposure.
9. (T) (F) If you have an incident involving an exposure, report it at the end of your shift or workday.
10. (T) (F) The employee is entitled to free medical evaluation and treatment if he or she has been exposed to a bloodborne pathogen.

Bloodborne Pathogens Training Video—Posttest

Administer this test after showing the *Bloodborne Pathogens Training Video* to new employees and during annual bloodborne pathogens training sessions.

Name: Keri O'Brien

Department: _____ Date: 09/17/2019

1. (T) (F) A needlestick is the only way to become infected with bloodborne pathogens in a medical facility.
2. (F) Four conditions necessary for bloodborne pathogen infection transmission are
 - a. sufficient amount of infectious material
 - b. sufficient virulence of disease
 - c. absence of universal precautions
 - d. lowered resistance levels of workers
3. (T) (F) Hepatitis B virus cannot survive in dried blood on environmental surfaces.
4. (T) (F) Employers must offer the hepatitis B vaccine to employees who are occupationally exposed to blood.
5. (T) (F) Hepatitis C is a bloodborne pathogen, and there is an effective vaccine that prevents infection.
6. (T) (F) Your facility's exposure control plan lists the job positions that are at risk to bloodborne pathogen exposure.
7. (T) (F) Under universal precautions, employees need to assume that the blood and certain body fluids of only very sick patients are infectious.
8. (T) (F) Universal precautions do not apply to feces, nasal secretions, sputum, sweat, tears, urine, and vomitus unless they contain visible blood.
9. (T) (F) Engineering controls isolate or remove hazards from the workplace; work practice controls reduce the likelihood of exposures by changing the way a task is performed.
10. (T) (F) Selecting safety needles and establishing handwashing procedures are both examples of engineering controls.
11. (T) (F) Employees must wash their hands with soap and running water immediately after using alcohol-based gel products or antiseptic towelettes to clean their hands after possible bloodborne contaminations.
12. (T) (F) You may eat and drink in areas where bloodborne pathogens exist if you are careful.
13. (T) (F) Examination gloves and sterile gloves may not be reused.
14. (T) (F) Employees must not wear bloodborne pathogen-contaminated protective clothing such as scrubs outside the workplace area, nor should they take them home for laundering.
15. (T) (F) After activating the safety feature on a disposable sharp, it is acceptable to dispose of it in a regular trash bag.
16. (T) (F) A written cleaning schedule for environmental surfaces is necessary only until all staff undergo training.
17. (T) (F) Always use a mechanical means, such as tongs, forceps, or a brush and dustpan to pick up broken glassware contaminated with blood.
18. (T) (F) After exposures from a needlestick, immediately wash the injury site with soap and water.
19. (T) (F) Immediate intervention after a bloodborne pathogen exposure can prevent the development of hepatitis B.
20. (T) (F) Promptly reporting an exposure incident is important so that arrangements can be made to quickly test the source patient's blood for HIV, hepatitis B, and hepatitis C.

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:
- a) sclera, retina, and cornea
 - b) bones, ligaments, joints, and muscles, and tendons
 - c) both a and b
 - d) none of the above

15. The endocrine system regulates the function of the
- a) central nervous system
 - b) the entire body
 - c) the respiratory system
 - d) 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:
- a) diabetes
 - b) phlebitis
 - c) endocarditis
 - d) 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?

- a) Temp: 96-99
- b) Pulse: 50-100
- c) Respirations: 12-20
- d) Blood pressure $\frac{90}{60} - \frac{160}{90}$

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.

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

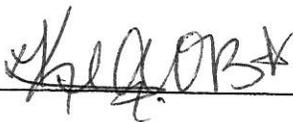
Reading labels

EMAR and paper MAR

Controlled substance sheets

Advanced directives, DNR status, Hospice

Staff Signature



Date

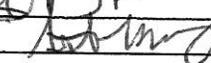
10/16/19

Nurse Signature

Date

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  Date 10/16/19
Home Manager Signature  Date 10/16/19
Nurse Signature _____ Date _____

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
<ul style="list-style-type: none"> ✓ Abilify ✓ Ativan ✓ Clozaril ✓ Depakote ✓ Haldol ✓ Invega ✓ Klonopin ✓ Lamictal ✓ Lithium ✓ Risperdal ✓ Seroquel ✓ Tripleptal ✓ Zyprexa 	<ul style="list-style-type: none"> ✓ Advair Discus ✓ Atrovent ✓ Flonase ✓ Flovent ✓ Loratadine ✓ Proventil 	<ul style="list-style-type: none"> ✓ Crestor ✓ Lipitor ✓ Zocor 	<ul style="list-style-type: none"> ✓ Apidra ✓ Byetta ✓ Glucophage ✓ Glyburide ✓ Lantus ✓ Levemir ✓ Levothyroxine ✓ Novolog ✓ Synthroid
Seizures	Gastrointestinal Disorder Constipation	Blood Pressure Meds	Pain & Inflammation
<ul style="list-style-type: none"> ✓ Dilantin ✓ Keppra ✓ Neurontin ✓ Topamax 	<ul style="list-style-type: none"> ✓ Colace ✓ Miralax ✓ Prilosec ✓ Protonix ✓ Zantac 	<ul style="list-style-type: none"> ✓ HCTZ (hydorchlorothiazide) ✓ Lisinopril ✓ Toprol ✓ Tenormin 	<ul style="list-style-type: none"> ✓ Flexeril ✓ Motrin ✓ Norco ✓ Tylenol with Codeine ✓ Ultram

DRUG NAME	Abilify
GENERIC NAME	aripiprazole
DOSAGE RANGE	2mg, 5mg, 10mg, 15mg, 20mg, 30mg (TAB)
HOW TO TAKE	Take by mouth mouth (tablet)
USES	Antipsychotics, 2 generation; Bipolar & Tic Disorder / Tourette Syndrome
SIDE EFFECTS	Headache, anxiety, weight gain, nausea/vomiting, insomnia & dizziness
WARNINGS	Dementia-Related Psychosis, Suicidality

DRUG NAME	Ativan
GENERIC NAME	lorazepam
DOSAGE RANGE	^{TAB:} 0.5mg, 1mg, 2mg; Injection: 2mg per mL, 4mg per mL
HOW TO TAKE	Tablet or Injection
USES	Benzodiazepines (BZDs), Intermediate acting, Insomnia, sedation, seizure disorder
SIDE EFFECTS	Sedation, dizziness, fatigue, irritability, libido change, respiratory depression
WARNINGS	Concomitant benzodiazepine, use w/opioids may cause profound sedation, coma & death

DRUG NAME	Clozaril
GENERIC NAME	clozapine
DOSAGE RANGE	TAB: 25mg-100mg
HOW TO TAKE	Take by mouth (tablet)
USES	Antipsychotic, 2 generation
SIDE EFFECTS	Weight gain, dizziness, drowsiness, constipation, headache, nausea/vomiting
WARNINGS	Severe Neutropenia, Orthostatic Hypotension, Bradycardia, Syncope, Seizures

DRUG NAME	Depakote
GENERIC NAME	divalproex sodium
DOSAGE RANGE	125mg, 250mg, 500mg
HOW TO TAKE	Take by mouth (tablet)
USES	Bipolar disorder; Head/Migraines; Seizure disorders
SIDE EFFECTS	headache, nausea/vomiting, dizziness, abdominal pain, tremor, depression
WARNINGS	hepatotoxicity, pancreatitis, SIADH, hyponatremia, hypothermia, bleeding, hallucinations

DRUG NAME	Haldol
GENERIC NAME	haloperidol
DOSAGE RANGE	0.5mg, 1mg, 2mg, 5mg, 10mg, 20mg
HOW TO TAKE	Take by mouth (tablet)
USES	Antipsychotics, 1st generation
SIDE EFFECTS	Anxiety, drowsiness, insomnia, lethargy, gynecomastia, weight changes
WARNINGS	Seizures, leukopenia, heat stroke, Hypotension, HTN, dystonia, sudden death

DRUG NAME	Invega
GENERIC NAME	paliperidone
DOSAGE RANGE	1.5mg, 3mg, 6mg, 9mg
HOW TO TAKE	Take by mouth (Extended Release Tablet)
USES	Antipsychotics, 2nd generation, schizophrenia, schizoaffective disorder, renal dosing & hepatic dosing
SIDE EFFECTS	Headache, anxiety, nausea, dizziness, dysprosia, URI, cough, fatigue, sleep disorder
WARNINGS	Dementia-Related Psychosis, hyperglycemia, seizures, AV block, leukopenia, priapism

DRUG NAME	Klonopin
GENERIC NAME	clonazepam
DOSAGE RANGE	0.5mg, 1mg, 2mg
HOW TO TAKE	Take by mouth (tablet)
USES	Seizure disorder, panic disorder, anxiety, restless leg syndrome, sleep walking, Tourette syndrome, confusional arousals, sleep terrors
SIDE EFFECTS	Drowsiness, dizziness, depressed, fatigue, confusion, impaired coordination, hypotension, rash
WARNINGS	Risks from Concomitant Opioid Use because may result in profound sedation, depression, coma, death

DRUG NAME	Lamictal
GENERIC NAME	lamotrigine
DOSAGE RANGE	25mg Tablets: 25mg, 100mg, 150mg, 200mg; ODT: 25mg, 50mg, 100mg, 200mg; CHEWABLE: 2mg, 5mg, 25mg
HOW TO TAKE	By mouth either by swallowing tablet, dissolving ODT in your mouth or chew the chewable tablets
USES	Bipolar I disorder, maintenance tx, Partial seizures, Seizures/Lennox-Gastaut syndrome, aura prophylaxis, migraine headache with
SIDE EFFECTS	dizziness/vertigo, headache, back pain, blurred vision, ataxia, impaired coordination, anxiety, aseptic
WARNINGS	Serious life threatening rash, Stevens-Johnson syndrome, blood dyscrasias, hepatic failure, meningitis

DRUG NAME	Lithium
GENERIC NAME	Lithobid, Eskalith
DOSAGE RANGE	CAPSULES: 150mg, 300mg, 600mg; TABLETS: 300mg; ER TABLETS: 300mg, 450mg; SOL: 8mEq/5mL
HOW TO TAKE	By mouth either by capsule, tablet, Extended Release tablet or SOL
USES	Bipolar I disorder, maintenance tx, Bipolar I disorder, acute manic/mixed, schizoaffective disorder
SIDE EFFECTS	Tremor, Polyuria, weight gain, diarrhea, vomiting, dizziness, fatigue, nausea, rash, drowsiness, muscle weakness, blurred vision,
WARNINGS	Lithium Toxicity- closely related to serum lithium levels and can occur at doses close to therapeutic levels.

DRUG NAME	Risperdal
GENERIC NAME	risperidone
DOSAGE RANGE	Tablet: 0.25mg, 0.5mg, 1mg, 2mg, 3mg, 4mg; SOL: 1mg/mL
HOW TO TAKE	By mouth either swallowing tablet or swallowing SOL liquid medication.
USES	Schizophrenia, Bipolar I disorder, acute manic/mixed, Tourette syndrome, renal dosing, hepatic dosing
SIDE EFFECTS	Fatigue, insomnia, nausea/vomiting, cough, fever, headache, dizziness, anxiety, abdominal pain, constipation,
WARNINGS	Dementia-Related Psychosis, Stroke, Seizure, Priapism, diabetes mellitus, severe hypotension, Leukopenia, neutropenia, syncope

DRUG NAME	Seroquel
GENERIC NAME	quetiapine
DOSAGE RANGE	TABLETS: 25mg, 50mg, 100mg, 200mg, 300mg, 400mg
HOW TO TAKE	By mouth by swallowing tablet with water
USES	Schizophrenia, Bipolar I disorder (manic), bipolar disorder (acute depressive), anxiety disorder (generalized (tx-resistant)), renal dosing
SIDE EFFECTS	Somnolence, dizziness, hypotense, tremor, blurring vision, back pain, abdominal pain, rash, headaches, anemia, fatigue, hepatic dosing
WARNINGS	Dementia-Related Psychosis, Suicidality, TIA, Stroke, depression exacerbation, seizures

DRUG NAME	ripiprazole
GENERIC NAME	ripiprazole
DOSAGE RANGE	
HOW TO TAKE	
USES	
SIDE EFFECTS	
WARNINGS	

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DRUG NAME	Zyprexa
GENERIC NAME	olanzapine
DOSAGE RANGE	TABLETS: 2.5mg, 5mg, 7.5mg, 10mg, 15mg, 20mg; INJECTION: 5mg/mL
HOW TO TAKE	Take by mouth either swallow tablet or get the liquid injection shot.
USES	Schizophrenia, bipolar I disorder (manic/mixed), agitated, bipolar I disorder (acute depressive), Major depressive disorder.
SIDE EFFECTS	Weight gain, somnolence, xerostomia, headache, asthenia, insomnia, dizziness, tremor, fever.
WARNINGS	Dementia Related Psychosis, severe hypotense, dystonia, stroke, seizures, anemia, leukopenia

DRUG NAME	Dilantin
GENERIC NAME	phenytoin
DOSAGE RANGE	Extended Release Capsule: 30mg, 100mg; CHEWABLE: 50mg; SUSP INJECTION: 125mg/5mL
HOW TO TAKE	Take ER capsules by mouth and swallow. Chew the chewable medication. Medication correct
USES	Status epilepticus, seizure disorder, seizure prophylaxis, renal dosing, hepatic dosing
SIDE EFFECTS	Nausea, vomiting, rash, nystagmus, ataxia, slurred speech, dizziness, confusion, headaches
WARNINGS	Cardiovascular Risk with Rapid Infusion, cardiac arrest, leukopenia, anemia/megaloblastic

DRUG NAME	Keppra
GENERIC NAME	levetiracetam
DOSAGE RANGE	TABLET: 250mg, 500mg, 750mg, 1000mg; SOL: 100mg/mL; INJECTION: Various
HOW TO TAKE	Take tablet of medication by mouth. Inject Keppra as prescribed.
USES	Partial seizures (adjunct tx), juvenile myoclonic epilepsy (adjunct tx), clonic seizures (adjunct tx), primary generalized tonic
SIDE EFFECTS	Headache, vomiting, infection, fatigue, aggressive behavior, dizziness, irritability, pain, anxiety
WARNINGS	Depression, hostility, leukopenia, aggressive behavior, neutropenia

DRUG NAME	Neurontin
GENERIC NAME	gabapentin
DOSAGE RANGE	Capsules: 100mg, 300mg, 400mg; Tablets: 600mg, 800mg; SOL: 50 mg/mL
HOW TO TAKE	Take by mouth (capsule/tablet) or injection
USES	partial seizures, post-herpetic neuralgia, neuropathic pain, fibromyalgia
SIDE EFFECTS	Dizziness, nausea, vomiting, infection, fatigue, fever, tremor, headache
WARNINGS	Depression, suicidality, withdrawal seizures if discontinued suddenly

DRUG NAME	Topamax
GENERIC NAME	topiramate
DOSAGE RANGE	SPRINKLE CAPSULE: 15mg, 25mg; TABLET: 25mg, 50mg, 100mg, 200mg
HOW TO TAKE	By mouth
USES	Partial seizures, seizures, primary generalized tonic clonic, Migraines, PTSD
SIDE EFFECTS	UTI, dizziness, mood disturbance, fatigue, weight loss
WARNINGS	Leukopenia, anemia, osteoporosis, glaucoma, hemorrhage

DRUG NAME	Advair Diskus Atrovent
GENERIC NAME	fluticasone propionate/salmeterol inhaled ipratropium bromide inhaled
DOSAGE RANGE	MDI: 17mcg per actuation
HOW TO TAKE	Inhale
USES	COPD, maintenance tx, asthma exacerbation, mod-severe, renal dosing, hepatic dosing
SIDE EFFECTS	bronchitis, dyspnea, back pain, UTI, dizziness, sinusitis, xerostomia, nausea
WARNINGS	hypersensitivity rxn, anaphylaxis, bronchospasm, glaucoma

DRUG NAME	Atrovent Advair Diskus
GENERIC NAME	fluticasone propionate/salmeterol inhaled
DOSAGE RANGE	DPI: 100mcg/50mcg per blister, 250mcg/50mcg per blister, 500mcg/50mcg ^{per} blister
HOW TO TAKE	Inhale
USES	Asthma, maintenance tx, COPD, maintenance tx, renal dosing, hepatic dosing
SIDE EFFECTS	URI, headache, pharyngitis, bronchitis, dizziness, tremor, hoarseness
WARNINGS	bronchospasm, paradoxical, laryngospasm, hypercorticism, pneumonia

DRUG NAME	Flonase
GENERIC NAME	fluticasone propionate nasal
DOSAGE RANGE	1-2 actuations in each nostril qd; Start: 2 actuations in each nostril qd x 1wk; ^{Max: 2 actuations in} each nostril
HOW TO TAKE	Actuation (inhale nasal)
USES	Allergy sx, nasal polyp tx, renal dosing, hepatic dosing
SIDE EFFECTS	Headache, URI sx, nausea/vomiting, cough, dizziness, bronchitis
WARNINGS	Hypersensitivity rxn, anaphylaxis, glaucoma, cataracts, hypercorticism

DRUG NAME	Flovent (Flovent Diskus)
GENERIC NAME	fluticasone propionate inhaled
DOSAGE RANGE	DPI: 100 mcg per blister, 250 mcg per blister
HOW TO TAKE	Inhale
USES	Asthma, maintenance tx
SIDE EFFECTS	Headache, cough, throat irritation, nausea/vomiting, rash
WARNINGS	Hypersensitivity, bronchospasm, adrenal suppression, cataracts

DRUG NAME	Loratadine
GENERIC NAME	Loratadine
DOSAGE RANGE	TAB: 10 mg; GDT: 10 mg; SOL: 1 mg per mL
HOW TO TAKE	By mouth
USES	Allergy sx, chronic idiopathic urticaria
SIDE EFFECTS	Drowsiness, fatigue, headache, abdominal pain, diarrhea
WARNINGS	Bronchospasm, hepatotoxicity, syncope, seizures

DRUG NAME	Proventil
GENERIC NAME	albuterol inhaled
DOSAGE RANGE	MDI: 90 mcg per actuation
HOW TO TAKE	Inhale
USES	Bronchospasm, bronchospasm (exercise-induced)
SIDE EFFECTS	throat irritation, cough, bad taste, dizziness, headache
WARNINGS	anaphylaxis, bronchospasm (paradoxical), hypersensitivity, angina

DRUG NAME	Colace
GENERIC NAME	docusate sodium
DOSAGE RANGE	2-11 yo: 50-150 mg/day; 12 yo & older: 50-300 mg/day
HOW TO TAKE	By mouth
USES	Laxative for softening stool
SIDE EFFECTS	Diarrhea, abdominal cramps, throat irritation, rash, bitter taste
WARNINGS	May occur but none reported

DRUG NAME	Miralax
GENERIC NAME	polyethylene glycol 3350
DOSAGE RANGE	1 capful/day in 4-8 oz of liquid
HOW TO TAKE	Oral powder by mouth
USES	Laxative for relieving constipation
SIDE EFFECTS	Nausea, abdominal pain, cramping, flatulence, diarrhea
WARNINGS	Electrolyte disorders (prolonged use); laxative dependence (prolonged use)

DRUG NAME	Prilosec
GENERIC NAME	omeprazole
DOSAGE RANGE	DR CAPSULE: 10mg, 20mg, 40mg; DR GRANULE: 10 mg per pkt
HOW TO TAKE	By mouth
USES	GERD, gastric ulcer, duodenal ulcer, ^{H. pylori infection, gastric ulcer prophylaxis} hypersecretory conditions, NSAID _{ASAC}
SIDE EFFECTS	headache, abdominal pain, nausea, diarrhea, vomiting, flatulence
WARNINGS	hypersensitivity rxn, anaphylaxis, Stevens-Johnson syndrome, pancreatitis

DRUG NAME	Protonix
GENERIC NAME	pantoprazole
DOSAGE RANGE	DR TAB: 20mg, 40mg; DR GRANULE: 40 mg per pkt; INJ: various
HOW TO TAKE	By mouth, injection
USES	GERD, hypersecretory conditions, upper GI bleeding, H. pylori infection
SIDE EFFECTS	headache, diarrhea, abdominal pain, nausea/vomiting, fever, rash
WARNINGS	hypersensitivity rxn, anaphylaxis, erythema multiforme, pancreatitis

DRUG NAME	Zantac
GENERIC NAME	ranitidine
DOSAGE RANGE	TAB: 150 mg, 300 mg; SOL: 15 mg per mL; INJ: 25 mg per mL
HOW TO TAKE	By mouth, injection
USES	GERD, duodenal ulcer (active), duodenal ulcer (maintenance tx), gastric ulcer
SIDE EFFECTS	headache, diarrhea, constipation, myalgia, vertigo, malaise, dizziness
WARNINGS	hepatotoxicity, pneumonia, interstitial nephritis, thrombocytopenia

DRUG NAME	Crestor
GENERIC NAME	rosuvastatin
DOSAGE RANGE	TAB: 5mg, 10mg, 20 mg, 40 mg
HOW TO TAKE	By mouth
USES	hypercholesterolemia, mixed dyslipidemia, hypertriglyceridemia (type IV)
SIDE EFFECTS	headache, myalgia, abdominal pain, asthenia, nausea, arthralgia
WARNINGS	tendon rupture, hepatotoxicity, pancreatitis, angioedema, thrombocytopenia

DRUG NAME	Lipitor
GENERIC NAME	atorvastatin
DOSAGE RANGE	TAB: 10mg, 20 mg, 40 mg, 80 mg
HOW TO TAKE	By mouth
USES	hypercholesterolemia, mixed dyslipidemia, hypertriglyceridemia (type IV)
SIDE EFFECTS	URI, headache, arthralgia, diarrhea, UTI, extremity pain, nausea
WARNINGS	myopathy (incl. immune-mediated), tendon rupture, acute renal failure

DRUG NAME	Zocor
GENERIC NAME	simvastatin
DOSAGE RANGE	TAB: 5mg, 10 mg, 20 mg, 40 mg, 80 mg
HOW TO TAKE	By mouth
USES	hypercholesterolemia, mixed dyslipidemia, hypertriglyceridemia (type IV)
SIDE EFFECTS	URI, headache, abdominal pain, constipation, nausea, gastritis, vertigo
WARNINGS	Tendon rupture, pancreatitis, photosensitivity, leukopenia, anaphylaxis

DRUG NAME	HCTZ (hydrochlorothiazide)
GENERIC NAME	hydro hydrochlorothiazide
DOSAGE RANGE	CAP: 12.5 mg; TAB: 12.5 mg, 25 mg, 50 mg
HOW TO TAKE	By mouth
USES	HTN, peripheral edema
SIDE EFFECTS	hypokalemia, hypochloremia, hyponatremia, hypercalcemia, dizziness, diarrhea
WARNINGS	Electrolyte imbalance, pancreatitis, renal failure, photosensitivity

DRUG NAME	Lisinopril
GENERIC NAME	lisinopril
DOSAGE RANGE	TAB: 2.5mg, 5mg, 10mg, 20mg, 30mg, 40mg
HOW TO TAKE	By mouth
USES	HTN, CHF, MI (acute)
SIDE EFFECTS	Dizziness, hypotension, BUN (Cr elevated), headache, URI, cough, fatigue
WARNINGS	Fetal toxicity, SIADH, pancreatitis, agranulocytosis, renal failure

DRUG NAME	Toprol
GENERIC NAME	metoprolol succinate
DOSAGE RANGE	ER TAB: 25 mg, 50 mg, 100 mg, 200 mg
HOW TO TAKE	By mouth
USES	HTN, angina, CHF, migraine headache prophylaxis
SIDE EFFECTS	fatigue, dizziness, diarrhea, rash, depression, nightmares, dyspnea
WARNINGS	Avoid Abrupt Cessation, CHF, heart block, gangrene, hepatitis

DRUG NAME	Tenormin
GENERIC NAME	atenolol
DOSAGE RANGE	TAB: 25 mg, 50 mg, 100 mg
HOW TO TAKE	By mouth
USES	HTN, angina, cardiovascular event prevention, migraine headache prophylaxis
SIDE EFFECTS	hypotension, fatigue, dizziness, depression, leg pain, bradycardia
WARNINGS	Avoid Abrupt Cessation, CHF, heart block, bronchospasm

DRUG NAME	Apidra
GENERIC NAME	insulin glulisine
DOSAGE RANGE	INJ (pen): 100 units per mL; INJ (vial): 100 units per mL
HOW TO TAKE	Injection
USES	Diabetes mellitus
SIDE EFFECTS	hypoglycemia, myalgia, rash, URI, weight gain, headache
WARNINGS	hypoglycemia, seizures, hypokalemia, anaphylaxis

DRUG NAME	Byetta
GENERIC NAME	exenatide
DOSAGE RANGE	INJ (pen): 5 mcg per injection, 10 mcg per injection
HOW TO TAKE	Injection
USES	Diabetes mellitus (type 2)
SIDE EFFECTS	nausea, vomiting, diarrhea, hypoglycemia, headache
WARNINGS	hypersensitivity rxn, anaphylaxis, angioedema, pancreatitis

DRUG NAME	Glucophage
GENERIC NAME	meta metformin
DOSAGE RANGE	TAB: 500 mg, 850 mg, 1000 mg
HOW TO TAKE	By mouth
USES	Diabetes mellitus (type 2), polycystic ovary syndrome
SIDE EFFECTS	diarrhea, nausea/vomiting, flatulence, indigestion
WARNINGS	Lactic Acidosis, lactic anemia, hepatotoxicity

DRUG NAME	Glyburide
GENERIC NAME	glyburide
DOSAGE RANGE	TAB: 1.25 mg, 2.5 mg, 5 mg
HOW TO TAKE	By mouth
USES	Diabetes mellitus (type 2)
SIDE EFFECTS	nausea, epigastric discomfort, dyspepsia, blurred vision, weight gain
WARNINGS	hepatitis, hypoglycemia, aplastic anemia, leukopenia

DRUG NAME	Lantus
GENERIC NAME	insulin glargine
DOSAGE RANGE	INJ (pen): 100 units per mL; INJ (vial): 100 units per mL
HOW TO TAKE	Injection
USES	Diabetes mellitus (type 1 & type 2)
SIDE EFFECTS	hypoglycemia, myalgia, pruritus, rash, URI, weight gain
WARNINGS	hypersensitivity rxn, anaphylaxis, hypoglycemia, hypokalemia

DRUG NAME	Levemir
GENERIC NAME	insulin detemir
DOSAGE RANGE	INJ (pen): 100 units per mL; INJ (vial): 100 units per mL
HOW TO TAKE	Injection
USES	Diabetes (type 1 & type 2)
SIDE EFFECTS	hypoglycemia, myalgia, pruritus, rash, URI, weight gain
WARNINGS	hypoglycemia, hypokalemia, hypersensitivity rxn, anaphylaxis

DRUG NAME	Levothyroxine
GENERIC NAME	levothyroxine
DOSAGE RANGE	200 mcg, 300 mcg; INJ: various TAB: 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg
HOW TO TAKE	By mouth, injection
USES	hypothyroidism, TSH suppression, myxedema coma
SIDE EFFECTS	palpitations, tachycardia, nervousness, tremor, weight loss, insomnia
WARNINGS	Not for Obesity/Weight Loss, seizures, hypersensitivity rxn, CHF, HTN

DRUG NAME	Novolog
GENERIC NAME	insulin aspart
DOSAGE RANGE	INJ (Pen cartridge): 100 units per mL; INJ (pen): 100 units per mL; INJ (vial) 100 units per mL
HOW TO TAKE	Injection
USES	Diabetes mellitus
SIDE EFFECTS	hypoglycemia, myalgia, pruritus, rash, URI, weight gain, headache
WARNINGS	hypoglycemia, hypokalemia, hypersensitivity rxn, anaphylaxis

DRUG NAME	Synthroid
GENERIC NAME	levothyroxine
DOSAGE RANGE	TAB: 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 300 mcg
HOW TO TAKE	By mouth
USES	hypothyroidism, TSH suppression
SIDE EFFECTS	palpitations, nervousness, fever, insomnia, headache, alopecia
WARNINGS	Not for Obesity/Weight Loss, seizures, angina, hypersensitivity rxn

DRUG NAME	Flexeril (discontinued)
GENERIC NAME	cyclobenzaprine
DOSAGE RANGE	TAB: 5 mg, 7.5 mg, 10 mg; ER CAP: 15 mg, 30 mg
HOW TO TAKE	By mouth
USES	Muscle spasm, fibromyalgia
SIDE EFFECTS	drowsiness, dizziness, fatigue, headache, nausea nausea, confusion
WARNINGS	Seizures, Stroke, heat stroke, cardiac conduction disturbance

DRUG NAME	Motrin
GENERIC NAME	ibuprofen
DOSAGE RANGE	1-2 capsules every 4 to 6 hours (do not exceed 2400 mg/day)
HOW TO TAKE	By mouth
USES	NSAID for reducing pain/inflammation, fever
SIDE EFFECTS	dyspepsia, nausea, abdominal pain, headache, dizziness, drowsiness
WARNINGS	GI bleeding, MI, Stroke, HTN, CHF, bronchospasm, GI perforation/ulcer

DRUG NAME	Norco
GENERIC NAME	hydrocodone/acetaminophen
DOSAGE RANGE	TAB: 5mg/325mg, 7.5mg/325mg, 10mg/325mg
HOW TO TAKE	By mouth
USES	pain (moderate-severe)
SIDE EFFECTS	lightheadedness, dizziness, sedation, nausea/vomiting, constipation
WARNINGS	Medication error risk, Addiction, Abuse, misuse, opioid Analgesic REMS

DRUG NAME	Tylenol with Codeine
GENERIC NAME	acetaminophen/codeine
DOSAGE RANGE	TAB: 300 mg/30 mg
HOW TO TAKE	pain (mild-moderate), cough By mouth
USES	pain (mild-moderate), cough
SIDE EFFECTS	drowsiness, lightheadedness, dizziness, sedation, nausea, vomiting
WARNINGS	Medication error risk, Addiction, Abuse, misuse, opioid analgesic REMS

DRUG NAME	Ultram
GENERIC NAME	tramadol
DOSAGE RANGE	TAB: 50 mg
HOW TO TAKE	By mouth
USES	pain (moderate-severe)
SIDE EFFECTS	dizziness, nausea, constipation, headache, somnolence, vomiting
WARNINGS	Addiction, Abuse, Misuse, opioid analgesic REMS, Respiratory depression

DRUG NAME	Trileptal
GENERIC NAME	oxcarbazepine
DOSAGE RANGE	Tablets: 150mg, 300mg, 600mg; SUSP: 300mg/5ml
HOW TO TAKE	By mouth either swallowing tablet or swallowing SUSP liquid.
USES	Partial seizures, trigeminal neuralgia, bipolar disorder, renal dosing, hepatic dosing
SIDE EFFECTS	Confusion, acne, nervousness, rash, gastritis, abdominal pain, headache, dizziness, tremor
WARNINGS	Leukopenia, suicidality, SIADH, pancreatitis, aplastic anemia, hyponatremia, anaphylaxis