

Annal
DMA



Medication Administration In-Service and Evaluation

Name of Facility/Home: Liaden

Employee Receiving In-Service: Carmela Johnson

Date of 1st In-Service*: / / Time: : am / pm Trainer:
*This is done by a regional nurse

Date of 2nd In-Service: / / Time: : am / pm Trainer:

Date of 3rd In-Service: / / Time: : am / pm Trainer:

Date of 4th In-Service: / / Time: : am / pm Trainer:

Date of 5th In-Service: / / Time: : am / pm Trainer:

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

Date of Final Evaluation: 8/21/20 Time: 8:00 am / pm Trainer: J. Johnson

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							✓	
							✓	
							✓	
							✓	
							✓	
							✓	
							✓	
							✓	
7							✓	
8							X	
							X	
							X	
							X	
9							X	
							✓	
							✓	
10							✓	
11							✓	
12							✓	
13							✓	
14							✓	
15							✓	
16							✓	
17							✓	
18							X	



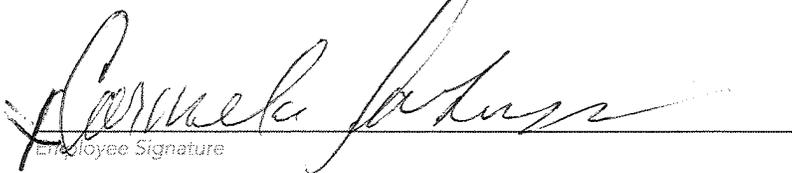
Medication Administration In-Service and Evaluation

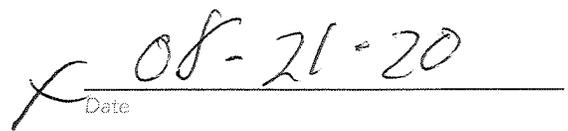
In-Service #	1st	2nd	3rd	4th	5th	6th	Eval.	Comments
19							✓	
20							✓	
21							✓	
22							✓	
23							✓	
24							✓	
25							✓	
26							✓	

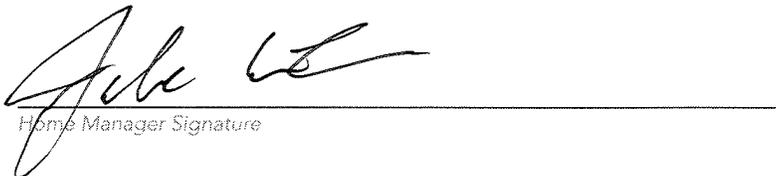
FOLLOW UP CONCERNS

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

ANNUAL DMA RECERTIFICATION TEST

1 List the six patient rights:

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

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

Yes No Explain:

You must get down at eye level
When pouring liquid medication to get the
exact measurement and dosage

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

Yes No Explain:

During the shift the controlled
substance log should be signed

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

Yes No Explain:

Medication is never suppose to be crushed
unless its a doctor's order

ANNUAL DMA RECERTIFICATION TEST

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

Yes No Explain:

Controlled substances are kept locked up

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

Yes No Explain:

Error must be reported even if it does not cause harm

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

Yes No Explain:

on the DMA at all times while on shift

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:

no you must never use another Resident medication to give to another Resident never at anytime

ANNUAL DMA RECERTIFICATION TEST

17. NPO means nothing para oral?

Yes No Explain:

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

Yes No Explain:

no never

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

Yes No Explain:

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

Yes No Explain:

Constipation is a side effect on psychotropic medication

ANNUAL DMA RECERTIFICATION TEST

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

Yes No Explain:

Record
there must be an ~~order~~ ^{Record} for Insulin
injection

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:

15. OTC means other than called for?

Yes No Explain:

over the counter

16. One Tablespoon is equal to 30ml?

Yes No Explain:

ANNUAL DMA RECERTIFICATION TEST

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

Yes No Explain:

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

Yes No Explain:

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

Yes No Explain:

7 and 9 medication can be given

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

Yes No Explain:

If the resident refuse medication then the medication must be DISCARDED
