



## Medication Administration In-Service and Evaluation

Name of Facility/Home: STANTON - THE COTTAGE

Employee Receiving In-Service: JAMES WERSTINE

Date of 1st In-Service\*: 12/30/2019 Time: 9:00 (am) pm Trainer: CATHERYN STRAHAN, RN  
\*This is done by a regional nurse

Date of 2nd In-Service: 12/30/2019 Time: 9:00 (am) pm Trainer: DAVID SCHMITZ

Date of 3rd In-Service: 1/15/20 Time: 8:00 (am) pm Trainer: Bianca Ritter

Date of 4th In-Service: 2/17/20 Time: 8:00 (am) pm Trainer: [Signature]

Date of 5th In-Service: 2/21/20 Time: 8:00 (am) pm Trainer: [Signature]

Date of 6th In-Service: 2/25/20 Time: 8:00 (am) pm Trainer: [Signature]

Date of Final Evaluation: 3/3/20 Time: 8:00 (am) pm Trainer: [Signature]

### 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

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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

3-3-20  
Date

  
Home Manager Signature

3-3-20  
Date

# ANNUAL DMA RECERTIFICATION TEST

1 List the six patient rights:

PERSON                      TIME  
MEDICATION              ROUTE  
DOSE                        DOCUMENTATION

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

Yes     No    Explain:

POURED AT EYE LEVEL, CUP ON FLAT  
SURFACE, HAND OVER LABEL WEARING GLOVE,

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

Yes     No    Explain:

AT MEDICATION PASS & ANYTIME DMA  
KEYS ARE PASSED TO ANOTHER STAFF

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

Yes     No    Explain:

MUST HAVE A DOCTOR'S "MAY CRUSH" ORDER

# ANNUAL DMA RECERTIFICATION TEST

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

Yes     No    Explain:

DOUBLE LOCKED

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

Yes     No    Explain:

ALL MEDICATION ERRORS NEED TO BE REPORTED

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

Yes     No    Explain:

ON DMA AT ALL TIME

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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:

CALL ON-CALL MEDICAL & MANAGER

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# ANNUAL DMA RECERTIFICATION TEST

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

Yes  No Explain:

ALWAYS CHECK GLUCOSE LEVEL FIRST.

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

Yes  No Explain:

BLOOD PRESSURE READING ARE USED TO

MAKE SURE MEDICATION IS WORKING

PROPERLY

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

Yes  No Explain:

7:00, 8:00, 9:00

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

Yes  No Explain:

THEY ARE DISTROYED WITH SECOND STAFF

# ANNUAL DMA RECERTIFICATION TEST

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

Yes     No    Explain:

DOCTORS ORDER HAS TO BE ON RECORD

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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:

POT RESIDENT REFUSE ~~THE~~ AND CALL ON CALL  
MEDICAL FOR APPROVAL AFTER NORMAL TIME,

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15. OTC means other than called for?

Yes     No    Explain:

OVER THE COUNTER

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16. One Tablespoon is equal to 30ml?

Yes     No    Explain:

15 ML

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# ANNUAL DMA RECERTIFICATION TEST

17. NPO means nothing para oral?

Yes  No Explain:

NOTHING BY MOUTH

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

Yes  No Explain:

NEVER

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

Yes  No Explain:

THEY ARE COMMON SIDE EFFECTS

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

Yes  No Explain:

CONSTIPATION IS A COMMON SIDE EFFECT

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