



Medication Administration In-Service and Evaluation

Name of Facility/Home: Red Mill

Employee Receiving In-Service: Tony Giancaspro

Date of 1st In-Service*: 8/21/20 Time: 4:45 am / pm Trainer: Kim
*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: / / Time: : am / pm Trainer:

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 (.) dose is placed in appropriate box on MAR		✓							
	b. Liquid medication is poured at eye level, with palm covering label of stock bottle		✓							



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	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)	N/A							
	a. Resident is properly positioned, at a 45° sitting angle	N/A							
	b. Tube is checked for placement and patency	N/A							
	c. Tube is flushed before, between and after medications are administered	N/A							
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	✓							



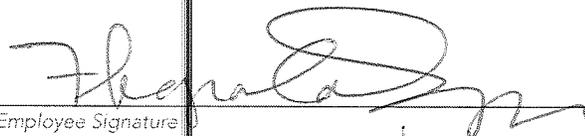
Medication Administration In-Service and Evaluation

	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)	✓							

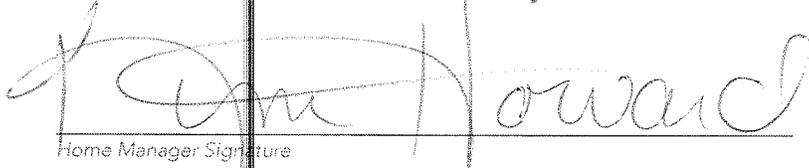
FOLLOW UP CONCERNS

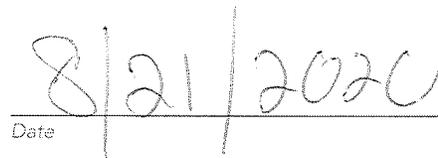
Specify time frame for completion: _____ N/A

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

ANNUAL DMA RECERTIFICATION TEST

1 List the six patient rights:

<u>Right documentation</u>	<u>Right dosage</u>
<u>Right person</u>	<u>Right routine</u>
<u>Right time</u>	<u>Right medication</u>

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

Yes No Explain:

Liquid medication is poured at eye level
when the cup set on the table.

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

Yes No Explain:

Controlled substance log is signed every
shift change and everytime medication
sign off

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

Yes No Explain:

The DMA only crush tablet when physicians
prescribed.

ANNUAL DMA RECERTIFICATION TEST

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

Yes No Explain:

Controlled substance are double lock

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

Yes No Explain:

Medication error always report to the medical to prevent harm.

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

Yes No Explain:

The medication room keys remain on the DMA at all time.

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 use other resident medication

ANNUAL DMA RECERTIFICATION TEST

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

Yes No Explain:

Always giving

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:

One hour before and one hour after

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

Yes No Explain:

If the resident refuses the medication staff disposal the medications

ANNUAL DMA RECERTIFICATION TEST

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

Yes

No

Explain:

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:

If they ask to take medication, we contact medical

15. OTC means other than called for?

Yes

No

Explain:

Over the counter

16. One Tablespoon is equal to 30ml?

Yes

No

Explain:

Ans: 1 tablespoon = to 15ml

ANNUAL DMA RECERTIFICATION TEST

17. NPO means nothing para oral?

Yes No Explain:

Nothing by mouth

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

Yes No Explain:

It must destroy by Becan nurse and documented it by registrant ~~then~~ inventory of drugs surrendered form and destroy the medication.

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

Yes No Explain:

It can happen to anybody who on psychotropic medication.

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

Yes No Explain:

Psychotropic medications can cause constipation.