



Medication Administration In-Service and Evaluation

Name of Facility/Home: Bay Harbor

Employee Receiving In-Service: Hazel Taft

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: 5 / 23 / 20 Time: 8:00 am / pm Trainer: S. Freislinger

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									Good
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'									Good
	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							✓	Good
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								
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								Great
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								Good
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							✓	
20							}	Good
21								
22								
23								
24								
25								
26								Good

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.

Hazel Toff
Employee Signature

5/23/20
Date

S. Freislinger
Home Manager Signature

5/23/20
Date

ANNUAL DMA RECERTIFICATION TEST

1. List the six patient rights:

Right Person

Right Documentation

Right Time

Right Dose

Right Route

Right Medication

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

Yes No Explain:

Pour all liquid on a flat surface at eye level.

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

Yes No Explain:

When the medication is passed and at the end of
Shift.

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

Yes No Explain:

Staff must have written doctors orders to crush meds

ANNUAL DMA RECERTIFICATION TEST

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

Yes No Explain:

Stored double locked

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

Yes No Explain:

All medication errors must be reported

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

Yes No Explain:

The keys remain on the designated medication staff.

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:

The medication needs to belong to that client

ANNUAL DMA RECERTIFICATION TEST

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

Yes No Explain:

Administer per the doctors orders

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:

2 hour window one hour before up to one hour after

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

Yes No Explain:

You must dispose of the medications

ANNUAL DMA RECERTIFICATION TEST

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

Yes No Explain:

There must be orders on file for all medications

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:

Document as a refusal, get permission to pass
late then document.

15. OTC means other than called for?

Yes No Explain:

Over the counter

16. One Tablespoon is equal to 30ml?

Yes No Explain:

30ml = 2 Tablespoons

ANNUAL DMA RECERTIFICATION TEST

17. NPO means para oral?

Yes No Explain:

Nothing by mouth

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

Yes No Explain:

They are destroyed by the designated individual

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

Yes No Explain:

Common side effect

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

Yes No Explain:

Constipation is common