



Medication Administration In-Service and Evaluation

Name of Facility/Home: Kayla Cummins Meadowland

Employee Receiving In-Service: Kayla Cummins

Date of 1st In-Service*: / / Time: : am / pm Trainer:

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: 8/12/20 Time: 8:00 am (pm) Trainer: Laura Weber

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								n/a	
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)							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.

Kayla Cummins
Employee Signature

10/12/20
Date

Laura Weber
Home Manager Signature

10/12/2020
Date

Kayla
ummins

ANNUAL DMA RECERTIFICATION TEST

1. List the six patient rights:

Right Medication Right date & time
Right dosage Right route
Right person Right Documentation

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

Yes No Explain:

Liquid meds are poured at eye level
on a flat surface

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

Yes No Explain:

They are signed at shift change and
everytime a narcotic is passed

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

Yes No Explain:

Meds are only allowed to be
crushed if there is a doctors order.

ANNUAL DMA RECERTIFICATION TEST

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

Yes No Explain:

Controlled substances are stored
double locked

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

Yes No Explain:

All medications error's need to
be reported immediately.

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

Yes No Explain:

Med keys are to be on the DMA
at all times

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 give a resident another
residents meds.

ANNUAL DMA RECERTIFICATION TEST

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

Yes No Explain:

Medical on call would need to be contacted if glucose level is low

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

Yes No Explain:

the above named medications are all blood pressure medications. blood pressures are also taken for a number of other things.

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

Yes No Explain:

8:00pm meds can be passed at 7:00pm, 8:00pm, 9pm

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

Yes No Explain:

The medications need to be disposed of.

ANNUAL DMA RECERTIFICATION TEST

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

Yes No Explain:

all medications have to have a
order.

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:

they have to be refused on EMAR
and the nurse has to be called to
pass them late

15. OTC means other than called for?

Yes No Explain:

OTC means Over the Counter.

16. One Tablespoon is equal to 30ml?

Yes No Explain:

1 tablespoon is only 15ml

ANNUAL DMA RECERTIFICATION TEST

17. NPO means para oral?

Yes

No

Explain:

NPO means non para oral

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

Yes

No

Explain:

They are destroyed in the proper location

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

Yes

No

Explain:

its a common problem.

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

Yes

No

Explain:

it is a very common side effect