



Medication Administration In-Service and Evaluation

Name of Facility/Home: Meadowland Home Manager

Employee Receiving In-Service: Laura Weber

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: 10 / 13 / 20 Time: 2:00 am / pm Trainer: Kerr

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



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.

Sanna Weber
Employee Signature

10/13/2020
Date

Kim Howard
Home Manager Signature

10/13/2020
Date

Laura

ANNUAL DMA RECERTIFICATION TEST

1 List the six patient rights:

right person right route
right dose right medication
right time right documentation

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

Yes No Explain:

liquid medication is poured at eye level
with the palm of your hand covering
the label of the bottle

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

Yes No Explain:

at each DMA change and at every med pass

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

Yes No Explain:

Only with a doctor order

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 DMA must hold the keys 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:

You can never use another clients medication

ANNUAL DMA RECERTIFICATION TEST

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

Yes No Explain:

Always follow the protocol

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

Yes No Explain:

Those are all blood pressure medications

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

Yes No Explain:

can be given at 7 8 or 9 pm

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

Yes No Explain:

stored in the cup in a ziploc bag with date and clients name written on bag discard if not taken

ANNUAL DMA RECERTIFICATION TEST

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

Yes No Explain:

All medication needs an 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:

Call the nurse to receive permission to pass out of time frame and then document as such

15. OTC means other than called for?

Yes No Explain:

Over the counter

16. One Tablespoon is equal to 30ml?

Yes No Explain:

15 ml

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:

All controlled substances must be discarded by
Beacon nurse

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

Yes No Explain:

It is a common problem

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

Yes No Explain:

It is a common side effect