



Certificate of Completion
IS HEREBY GRANTED TO

Amy Johnson
NAME

TO CERTIFY THAT THEY HAVE COMPLETED TO SATISFACTION IN

DMA and Medical Training
TYPE OF TRAINING

10/27/2020
COMPLETION DATE

Kaitlyn RN
TRAINER SIGNATURE

Hands on Medical Training for all new DCS

Vital Signs: Pulse, respirations, blood pressure, temperature, pulse oximeter, weight-Licensing requirements

Hand washing

Proper gloving

Universal precautions

Prevention of communicable diseases (MRSA, Influenza, respiratory infections)

Transferring: Gait belt use, wheelchair, shower chair, in or out of vehicles

Fall prevention: walker use, no throw rugs, hand rails, well lit hallways

Eating disorders: dysphasia and choking, positioning, special feeding equipment

Special Diets: pureed, thickit, mechanical soft

Hands on DMA Introductory

Blood pressure and pulse

Glucose testing and procedure

Hypoglycemic/Hyperglycemic protocols

Insulin: Expiration, pens, syringes, administration, storage

Liquid medications

Bubble packs

Reading labels

EMAR and paper MAR

Controlled substance sheets

Advanced directives, DNR status, Hospice

Staff Signature

S. Johnson

Date

10/27/2020

Nurse Signature

K. Kauter

Date

10/27/2020

Name: Amy Johnson

Medical Training Test

1. What are the ranges for vital signs?
 - a. Blood Pressure: ≤ 180 ≤ 90 90-140 50-90
 - b. Pulse: 50-100
 - c. Temperature: 2 99 96-99
 - d. Respirations: 12-20
2. When are vital signs taken on a resident?
 - a. When a resident shows signs of infection or reports not feeling well.
 - b. At the beginning of each month and as needed.
 - c. As indicated on the MAR.
 - d. All of the above
3. When is it okay to call 911 before contacting anyone else?
 - a. When the resident tells you to.
 - b. When the resident has chest pain, shortness of breath/breathing difficulties, seriously high or low vital signs, signs of a stroke, sudden change in condition or is non-responsive.
 - c. When the resident is experiencing coughing, sneezing and runny nose.
 - d. When the resident is experiencing nausea vomiting and diarrhea.
4. T F : When a resident leaves the home, staff does not have to bring their Epi Pen with them if they don't want to.
5. What does the stroke acronym FAST stand for?
 - F: facial drooping
 - A: asymmetry (arm)
 - S: speech slurring
 - T: time
6. If a resident has an incident of choking, when is it okay not to call 911?
 - a. When the resident says they are okay.
 - b. When the Heimlich technique was used.
 - c. When the regional nurse is on-site, completes an assessment and approves that 911 does not need to be called.
 - d. When vital signs are normal.
7. T F : It is important to report and record any change in physical condition or behavior of a resident.
8. T F : Behavioral changes can be due to a medical issue.
9. T F : If a seizure lasts 3 minutes long and the resident does not have a history of seizures there is no need to call 911 immediately.
10. T F : The circulatory system is made up of the blood, heart, and the brain.

11. The primary purpose of the respiratory system is to:
- a. Supply oxygen to the tissue cells and eliminate carbon dioxide waste from the cells.
 - b. Bring food and nutrients to the tissue cells.
 - c. Both a and b.
 - d. None of the above.
12. T F: Foods that are difficult for someone to chew are chopped, ground, shredded and/or soft cooked to facilitate chewing and ease of swallowing, this is called a mechanical soft diet.
13. T F: When a resident is eating and they are gagging, coughing, drooling, sticking their fingers into the back of their throat, or food is pooling in their mouth, it is not important to contact medical.
14. If a resident has a physician's order for a regular diet, the resident can consume:
- a. Only liquids.
 - b. Foods that are dry and sticky.
 - c. All types of foods and liquids.
 - d. Only what is on the menu.
15. The musculoskeletal system is comprised of:
- a. Sclera, retina, and cornea.
 - b. Bones, ligaments, joints, muscles and tendons.
 - c. Both a and b.
 - d. None of the above.
16. What does the acronym RICE stand for?
- R: rest
 - I: ice
 - C: compression
 - E: elevate
17. T F: The skin is the largest organ in the human body.
18. What are the signs and symptoms of a urinary tract infection?
- a. Urinary frequency, low abdominal/back pain
 - b. Diarrhea, blood in the stool
 - c. Burning or pain when urinating, blood in the urine
 - d. Confusion
 - e. a, c, and d
19. T F: The hormones produced by the endocrine system regulate the entire body.
20. Uncontrolled diabetes can lead to:
- a. Heart disease.
 - b. Dental disease.
 - c. Nerve damage.
 - d. All of the above.

21. T F : In type 1 diabetes, the pancreas continues to produce insulin normally.
22. T F : In type 2 diabetes, some people can control their blood sugar levels with healthy eating and exercise.
23. If a resident has a blood sugar of 61 you should:
- Call 911.
 - Give them insulin.
 - Treat with hypoglycemic kit then recheck blood sugar 20 minutes later.
 - All of the above.
24. T F : If a resident has a blood sugar of 350, you should treat with sugar or carbohydrates.
25. After an insulin vial or pen is opened it has an expiration date of:
- 28 days later.
 - There is no expiration date.
 - 60 days later.
 - The manufacturer's expiration date.
26. T F : Communicable diseases are only transmitted by direct contact.
27. The best way to prevent the flu is by:
- Staying at home.
 - Getting a flu vaccine each year.
 - Washing your hands after going to the bathroom.
 - Wearing a mask and gloves at all times.
28. T F : You can get the flu by getting a flu shot.
29. The best prevention to the spread of infection is:
- Washing your hands.
 - Washing your hands.
 - Washing your hands.
 - All of the above.
30. If a resident has a seizure you should:
- Keep the person safe and free from injury by laying them down with something soft.
 - Time the seizure and provide first aid as necessary once the seizure is over.
 - Loosen restrictive clothing.
 - All of the above.
31. T F : You can limit a resident's diet without a behavior plan or physician's order.
32. T F : It is important to wear gloves when there is the potential to come into contact with blood or bodily fluids.

33. T F : After removing disposable gloves you do not need to wash your hands.
34. T F : It is a resident's right to refuse medical treatment, but if you as a staff feel that it is a medical emergency you should call 911 and let the resident refuse to the paramedics.
35. If you accidentally poke yourself with a used insulin needle, what should you do next?
- a. Clean site well with soap and water then notify supervisor immediately.
 - b. Use hand sanitizer and call 911.
 - c. Do not tell anyone.
 - d. Clean site well with soap and water and notify your supervisor at the end of your shift.
36. T F : It is acceptable to operate a lifting device by yourself.
37. When lifting or transferring a client you must:
- a. Know how many people need to assist.
 - b. Make the resident do it themselves.
 - c. Communicate with your partner and the resident.
 - d. Both a and c.
38. T F : Assistive devices do not need a physician's order.
39. T F : It is not necessary to report a fall to medical if no one was hurt.
40. What should you do if a resident experiences a fall?
- a. Take their vitals.
 - b. Check for obvious signs of injury.
 - c. Report to home manager and medical.
 - d. All of the above.

DMA CLASSROOM TRAINING TEST

NAME: Amy Johnson DATE: 11/27/20 SCORE: _____

1. Where should medication keys be kept?

on your person

2. T F PRN is an abbreviation for as needed or whenever necessary.

3. T F NPO is an abbreviation for by mouth.

4. T F Prescription medication, including dietary supplements, or individual special medical procedures, do not need to have a physician or dentist order.

5. T F Prescription medications are to be kept in the original pharmacy container which is labeled for a specific resident, and locked and refrigerated if required.

6. T F You should preset each resident's medication in order to save time.

7. If a resident can't swallow their medications and needs to be crushed, we need:

- a. a pill crusher
- b. the resident to chew the pill
- c. a physician's order

8. The medication administration record (MAR) contains the following information:

- a. the medication, the side effects, and time to be administered.
- b. the medication, the dosage, the side effects
- c. the medication, the dosage, label instructions for use, and time to be administered
- d. the medication, dosage

9. The following information about each medication must be obtained before it is given:

- a. purpose of medication and therapeutic effect
- b. unwanted side effects
- c. any known drug interactions with drugs the resident is currently taking
- d. a and c
- e. All of the above

DMA CLASSROOM TRAINING TEST

10. T F ___ When medication is removed from the pharmacy-labeled container, it must be administered to the resident immediately by the person removing the medication from the container.

11. T F ___ The initials of the person who administers the medication, must be entered at the time the medication is given.

12. List the 6 rights of Medication Administration:

<u>Resident</u>	<u>route</u>
<u>med</u>	<u>time/date</u>
<u>dose</u>	<u>documentation</u>

13. T F ___ If the MAR is missing the initials of the staff who administered a medication and you cannot verify the medication was given, Medical must be notified. This is a med error.

14. T F ___ If the resident refuses to take their medication, you should record the refusal on EMAR and complete the Event report. = different reason taught

15. T ___ F ___ When a resident is going on a LOA (Leave of Absence), you should remove the meds from the bubble pack and place in another container and label the new container for the resident to take with him or her.

16. T F ___ If a PRN medication is prescribed, you need to know what it is prescribed for, and the PRN medication can only be given for the reason it is prescribed.

17. T F ___ When giving a PRN medication, record the reason for giving the PRN medication, follow-up with effectiveness one hour later, write a note that describes in detail what was observed.

18. T F ___ Medication errors must be reported to the nurse and to the home manager. An event report must be completed.

19. T F ___ It is important for the DMA to be familiar with the medications that are being administered to the residents. The DMA should also be familiar with common side effects.

20. T ___ F ___ It is not important for the DMA to be able to educate the resident about his or her medications.

DMA CLASSROOM TRAINING TEST

21. T F It is important to avoid distractions when preparing and or passing medications.

22. Prior to administering medications to a resident you should:

- a. ask the resident to tell you his or her name
- b. identify the resident with his or her photo on EMAR
- c. hand them a glass of water
- d. All of the above

23. What is the medication administration time frame?

- a. half hour before and half hour after the correct administration time.
- b. one hour before and one hour after the correct administration time
- c. whenever the resident decides to take his or her medication

24. T F Good hand-washing technique is not important when you are passing medications.

25. T F When assisting a resident to apply a topical medication, it is alright to use your fingers to remove the medication from the jar.

26. T F Liquid medication is poured at eye level, on a flat surface.

27. T F The resident has the right to refuse medication, but also has the right to know the consequences of refusing the medications.

28. T F Controlled substances must be counted by the on-coming shift (DMA) and the going shift (DMA).

29. T F It is alright to store internal and external medications together.

30. T F When a blood sugar on a diabetic client is below 70, you should treat them with the hypoglycemic protocol, call the medical staff or on call personnel, and retest their blood sugar in 20 minutes.