



Medication Administration In-Service and Evaluation

Name of Facility/Home: Leguhl

Employee Receiving In-Service: Priscella Hanson

Date of 1st In-Service*: 1/14/21 Time: 8:00 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: / / 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 (.) 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)							
	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	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							



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	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.

R. Billafer
Employee Signature

1-14-21
Date

Anne Stiles
Home Manager Signature

1-14-21
Date

ANNUAL DMA RECERTIFICATION TEST

Priscilla
Hansen

1 List the six patient rights:

Right Medication

right client

right time or date

right documentation

right dose

right route

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

Yes No Explain:

Liquid medication is poured on flat surface to
ensure correct dose is poured

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

Yes No Explain:

Controlled substance log is signed anytime DMA
keys are switched to another DMA

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

Yes No Explain:

Must have a Dr order to crush meds

ANNUAL DMA RECERTIFICATION TEST

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

Yes No Explain:

Controlled medications must be stored double
locked according to all policies, and procedures

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

Yes No Explain:

All med errors must be reported & recorded

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

Yes No Explain:

Dma must always retain med room keys
for entire shift

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 borrow medications from
another client

ANNUAL DMA RECERTIFICATION TEST

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

Yes No Explain:

Lantus or any other insulin must be given to the clients individual prescription written by the Dr.

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

Yes No Explain:

These medications are used to treat hypertension

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

Yes No Explain:

Hour before or an hour after per policy

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

Yes No Explain:

Popped medications that a client refuses must be placed in Dead drug box. Meds can never be put back in bubble packs

ANNUAL DMA RECERTIFICATION TEST

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

Yes No Explain:

All medications have to have written Drs orders whether prescription or OTC

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 a patient gets up late for medications, it has to be recorded as a refusal and a misc note written to assure proper documentation

15. OTC means other than called for?

Yes No Explain:

Over the counter

16. One Tablespoon is equal to 30ml?

Yes No Explain:

One tablespoon is ~~30~~ 15 mL

ANNUAL DMA RECERTIFICATION TEST

17. NPO means nothing para oral?

Yes No Explain:

NPO means nothing by mouth

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

Yes No Explain:

All controlled substances must be counted and destroyed by a nurse and witness

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

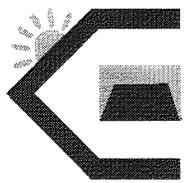
Yes No Explain:

Choking and aspiration is often a side effect of psychotropic medications

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

Yes No Explain:

psychotropic medications often cause ~~the~~ constipation



BEACON
Specialized Living

Certificate of Completion

IS HEREBY GRANTED TO

Priscilla Hansen

NAME

TO CERTIFY THAT THEY HAVE COMPLETED TO SATISFACTION IN

Annual DMA Certification

TYPE OF TRAINING

1/14/21

COMPLETION DATE

TRAINER SIGNATURE