



Certificate of Completion
IS HEREBY GRANTED TO

NAME Amber Fowler

TO CERTIFY THAT THEY HAVE COMPLETED TO SATISFACTION IN

DMA Certification - Train the Trainer
TYPE OF TRAINING

COMPLETION DATE 2/3/21
TRAINER SIGNATURE [Handwritten Signature]

Medication Administration In-Service and Evaluation

Name of Facility/Home: DMA Train the Trainer - Mission Point

Employee Receiving In-Service: Amber Cowley

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: <u>1 / 25 / 21</u>	Time: <u>5 : 00</u> am / pm	Trainer: <u>CD</u>
Date of 5th In-Service: <u>2 / 3 / 21</u>	Time: <u>8 : 00</u> am / pm	Trainer: <u>CD</u>
Date of 6th In-Service: <u>02 / 3 / 21</u>	Time: <u>1 : 00</u> am / pm	Trainer: <u>Training Dept. SG, CD, DS</u>
Date of Final Evaluation: <u>02 / 3 / 21</u>	Time: <u>5 : 00</u> am / pm	Trainer: <u>Training Dept. SG, DS, CD</u>

All staff must complete all three (6) In-Services and Final Evaluation

Instructions: Check (✓) the appropriate box after Employee has been in-serviced.

	1st	2nd	3rd	4th	5th	6th	Eval.	Comments
1 Medication Area	<input checked="" type="checkbox"/>							
a. Location of ample supplies prior to administration	<input checked="" type="checkbox"/>							
b. Area is clean and organized	<input checked="" type="checkbox"/>							
c. Area is always locked	<input checked="" type="checkbox"/>							
d. Location of all medication: Internal, External, Refrigerated, Controlled Drugs (narcotics)	<input checked="" type="checkbox"/>							
2 DMA washes hands prior to administering medications and between each Resident	<input checked="" type="checkbox"/>							
3 Medication keys are retained by DMA	<input checked="" type="checkbox"/>							
4 Resident is identified per facility policy and procedure prior	<input checked="" type="checkbox"/>							
5 Vital signs are taken per facility policy prior to administering medications (if applicable), always on cardiac and BP medications	<input checked="" type="checkbox"/>							
a. If Pulse and BP are required, hands and equipment are washed per facility policy	<input checked="" type="checkbox"/>							
b. If Apical Pulse is required, privacy is provided	<input checked="" type="checkbox"/>							
6 Medications Administration per facility policy and procedure: to include review of the '6 Rights'	<input checked="" type="checkbox"/>							
a. Medications are properly removed from container/blister pack and () dot is placed in appropriate box on MAR	<input checked="" type="checkbox"/>							
b. Liquid medication is poured at eye level, with palm covering label of stock bottle	<input checked="" type="checkbox"/>							

Medication Administration In-Service and Evaluation

In-Service #	1st	2nd	3rd	4th	5th	6th	Eval.	Comments
6	<input type="checkbox"/>	<input checked="" type="checkbox"/>	c. DMA verifies medication and strength with order as transcribed on medication record per facility policy and procedure					
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
7	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Infection control technique is reviewed					
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
8	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Medication via gastric tube administered per facility policy and procedure (if applicable)					
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
9	<input type="checkbox"/>	<input checked="" type="checkbox"/>	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 c. Tube is flushed before, between and after medications are administered d. Injections are administered by the Resident or a DMA if there is a doctor's order present, per facility policy and procedure e. Residual is properly positioned, at a 45° sitting angle f. Tube is checked for placement and patency g. Tube is flushed before, between and after medications are administered					
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
10	<input type="checkbox"/>	<input checked="" type="checkbox"/>	DMA crushes medication according to facility policy and procedure ONLY with physician's orders.					
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
11	<input type="checkbox"/>	<input checked="" type="checkbox"/>	DMA administers eye and ear medication according to facility policies and procedures					
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
12	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Side effects of psychoactive medication are noted (lethargy, hallucinations) and reported.					
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
13	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Medication administration should not be interrupted. DO NOT RUSH					
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
14	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Controlled drugs are stored (Double Locked) according to facility policy and procedure					
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
15	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Residents' rights are observed					
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
16	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Location, Procedures and Documenting for administering PRN					
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
17	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Designated Medication Administrator follows facility policy and procedure for medications refused or withheld. (MER & IR written)					
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
18	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Medications are administered within time frame per facility policy					
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
	<input type="checkbox"/>	<input checked="" type="checkbox"/>						

Amber Fowler
Employee Signature
2/3/21
Date

Chassidy Dettelle-Operations Trainer
Home Manager Signature
2/3/21
Date

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.

Specify time frame for completion: N/A

FOLLOW UP CONCERNS

In-Service #	1st	2nd	3rd	4th	5th	6th	Eval.	Comments
19	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Medication errors are reported to Site Supervisor and RN teaching medication classes
20	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Medication area is cleaned and locked after completion of medication administration
21	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Designated Medication Administrator can identify action and common side effects of medications administered
22	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Approved Abbreviations List is reviewed
23	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Seizure precautions and documentation
24	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	After hour procedures, procedures for found/spilled medication, location of Guide to Drugs Book
25	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	2nd Staff Verification, what it is, when it is needed, and how to document it
26	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Refusal of Medication procedures (prompt 3 times, then write appropriate documentation)

Medication Administration In-Service and Evaluation

