BEACON
Specialized Living

Medication Administration In-Service and Evaluation

Name of Facility/Home: Trolley Center

Employee Receiving In-Service: Hatle Holmes

Date of 1st In-Service: 1 /27 /21   Time: 1 :00 am / pm   Trainer: Training Department

Date of 2nd In-Service: 1 /27 /21   Time: 3 :00 am / pm   Trainer: Training Department

Date of 3rd In-Service: 2 /3 /21   Time: 4 :00 am /(pm)   Trainer: Felisha Battice

Date of 4th In-Service: 2 /3 /21   Time: 8 :00 am /(pm)   Trainer: Felisha Battice

Date of 5th In-Service: 2 /4 /21   Time: 4 :00 am /(pm)   Trainer: Felisha Battice

Date of 6th In-Service: 2 /5 /21   Time: 7 :00 am /(pm)   Trainer: Felisha Battice

Date of Final Evaluation: 2 /10 /21   Time: 4 :00 am /(pm)   Trainer: Felisha Battice

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	✔	✔	√	√	√	√	√	

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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 Site Supervisor 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 Guide to Drugs Book	✔	✔	✓	✓	✓	✓	✓	
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 <u>Coordinator of Care at my Site during open office hours and to the On-Call person after hours</u>.

Halle E. Holmes
Employee Signature

2-10-21
Date

(signature)
Home Manager Signature

2-10-21
Date

DMA CLASSROOM TRAINING TEST

NAME: Halle Holmes   DATE: 2/6/21   SCORE: _____

1. Where should medication keys be kept?

   Kept on the DMA at all times.

   _____

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 is taking
   d. a and c
   (e.) All of the above

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 form the jar. w/ gloves

26. T __✓__ F ____   Liquid medication is poured at eye level.

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 call the medical staff or on call personnel, and treat them with the hypoglycemic protocol and retest their blood sugar in 20 minutes?

Name: Halle Holmes

Medical Training Test

1. What are the ranges for vital signs?
   a. Blood Pressure: 90-160
   b. Pulse: 600 50-100 BPM
   c. Temperature: 96-99° F
   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: face drooping
   - A: arm weakness
   - S: speech difficulty
   - T: time to call 911

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. *5 mins*

10. T ✓ F____ : The circulatory system is made up of the blood, heart, and the brain.

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 accidently 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 TRAINING
LIST OF MEDICATIONS TO COMPLETE FOR DMA TRAINING

Use the attached forms to look up each of the medications listed below. Each line must be completed and turned in the day that you do your final DMA Evaluation with your ROM (Regional Operation Manager) for your area. You will not be able to become DMA certified until all of the forms are completed [48] See slide 65 in DMA Packette

Mental Illness Anxiety Disorders	Inhalers Allergy / Asthma	Hyperlipidemia Statins	Diabetes Endocrine & Metabolic
Abilify	Advair Discus	Crestor ✓	Apidra
Ativan ✓	Atrovent	Lipitor	Byetta
Clozaril	Flonase	Zocor	Glucophage
Depakote	Flovent		Glyburide
Haldol ✓	Loratadine		Lantus ✓
Invega ✓	Proventil		Levemir
Klonopin ✓			Levothyroxine
Lamictal			Novolog
Lithium			Synthroid
Risperdal			
Seroquel			
Tripleptal			
Zyprexa			

Seizures	Gastrointestinal Disorder Constipation	Blood Pressure Meds	Pain & Inflammation
Dilantin	Colace ✓	HCTZ (hydorchlorothiazide)	Flexeril ✓
Keppra	Miralax	Lisinopril	Motrin
Neurontin	Prilosec	Toprol	Norco ✓
Topamax ✓	Protonix	Tenormin	Tylenol with Codeine
	Zantac		Ultram

App/Website: Epocrates

Please complete 10 of the above medications prior to attending DMA class.

DMA Code #1 _____   DMA Code #2_____   DMA Code #3_____

DRUG NAME	Flexeril
GENERIC NAME	cyclobenzaprine
DOSAGE RANGE	5 mg. 10mg
HOW TO TAKE	oral
USES	pain
SIDE EFFECTS	fast/irregular heartbeats, chest pain, numbness
WARNINGS	not for anyone under the age of 15

DRUG NAME	norco
GENERIC NAME	hydrocodone/acetaminophen
DOSAGE RANGE	5mg/325 mg. 7.5 mg/325mg, 10 mg/325 mg
HOW TO TAKE	oral
USES	pain
SIDE EFFECTS	depression, seizures, abuse
WARNINGS	addiction, abuse, and misuse

DRUG NAME	Ativan
GENERIC NAME	lorazepam
DOSAGE RANGE	0.5mg. 1mg. 2mg INJ: 2mg per mL. 4mg per mL
HOW TO TAKE	oral
USES	anxiety
SIDE EFFECTS	syncope, jaundice, apnea
WARNINGS	concomitant opioid use

DRUG NAME	Topamax
GENERIC NAME	topiramate
DOSAGE RANGE	15 mg. 25 mg - tab. 15 mg. 25 mg. 100 mg. 200mg
HOW TO TAKE	oral
USES	treat seizure & prevent migrains
SIDE EFFECTS	signs of kidney stones, abnormal vision, nervousness
WARNINGS	birth control could affect topamax

DRUG NAME	Klonopin
GENERIC NAME	clonazepam
DOSAGE RANGE	0.5 mg. 1mg. 2mg
HOW TO TAKE	oral
USES	treat panic disorders & seizures
SIDE EFFECTS	new or worsening seizures, confusion, aggitation
WARNINGS	you should not use this medicine if you have narrow-angle glaucoma.

DRUG NAME	Lantus
GENERIC NAME	insulin glargine
DOSAGE RANGE	(Solostar U-100 pen):100 units per mL (U-100 vial) 100 units per mL
HOW TO TAKE	injection
USES	helps improve blood sugar in people with diabetes type 1 & 2
SIDE EFFECTS	rapid weight gain, swelling in feet & ankles, shortness of breath
WARNINGS	should not use this medicine if you're allergic to insulin

DRUG NAME	colace
GENERIC NAME	docusate sodium
DOSAGE RANGE	2-11 years 50-150 mg/day - 12 years & older 50-300 mg/day
HOW TO TAKE	oral
USES	emollient laxative for softening stool
SIDE EFFECTS	diarrhea, abnormal cramps, throat irritation, bitter taste
WARNINGS	caution if nausea/vomiting

DRUG NAME	haldol
GENERIC NAME	haloperidol
DOSAGE RANGE	0.5 mg, 1 mg, 2 mg, 5 mg, 10 mg, 20 mg
HOW TO TAKE	oral
USES	treat schizophrenia, antipsycotic, tourette's
SIDE EFFECTS	sleep problems, anxiousness, headache
WARNINGS	should not use this medicine if you have Parkinson's disease.

DRUG NAME	Invega
GENERIC NAME	paliperidone
DOSAGE RANGE	1.5 mg, 3 mg, 6 mg, 9 mg
HOW TO TAKE	oral
USES	treat schizophrenia in adults & teenagers
SIDE EFFECTS	tremors, uncontrolled muscle movement in your face
WARNINGS	not approved for use in older adults with dementia related psychosis

DRUG NAME	crestor
GENERIC NAME	rosuvastatin
DOSAGE RANGE	5 mg, 10 mg, 20 mg, 40 mg
HOW TO TAKE	oral
USES	lower blood levels, treat hereditary types of ↑ cholesterol
SIDE EFFECTS	unexplained muscle pain, weakness, headaches, nausea
WARNINGS	do not take if you are pregnant