



Medication Administration In-Service and Evaluation

Name of Facility/Home: Lantern Bay - Bay View

Employee Receiving In-Service: Ginger Muniz

Date of 1st In-Service*: / / Time: : 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: 4/29/21 Time: 5:00 am / pm Trainer: Roberta Clemens

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							✓	<i>discussed</i>
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							✓	
							✓	
							✓	
							✓	
							✓	
							✓	
							✓	
							✓	
7							✓	
8							✓	<i>discussed</i>
							✓	<i>discussed</i>
							✓	<i>discussed</i>
							✓	<i>discussed</i>
9							✓	
							✓	
							✓	
10							✓	
11							✓	
12							✓	
13							✓	
14							✓	
15							✓	
16							✓	
17							✓	
18							✓	



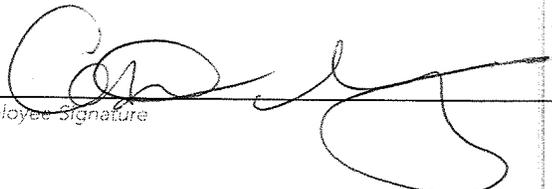
Medication Administration In-Service and Evaluation

	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.



 Employee Signature

4-29-21

 Date

Roberta Clemens

 Home Manager Signature

4-29-21

 Date

ANNUAL DMA RECERTIFICATION TEST

1. List the six patient rights:

Resident

Medication

Dosage

Documentation

Date + Time

Route / Method

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

Yes No Explain:

Cup has to sit level on counter eye level

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

Yes No Explain:

Before each shift or changing DMA's

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

Yes No Explain:

Need Rx from doctor

ANNUAL DMA RECERTIFICATION TEST

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

Yes No Explain:

Double locked

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

Yes No Explain:

Report if Do misc note

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

Yes No Explain:

keep in your pocket 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:

Need to be that resident's name on it, can't use some one else's medication

ANNUAL DMA RECERTIFICATION TEST

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

Yes No Explain:

IF Below 70 give snack check every 15 minutes until
it comes back up. IF its scheduled or sliding scale
depends.

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

Yes No Explain:

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

Yes No Explain:

one hour before or one hour after

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

Yes No Explain:

put in dead drop box with author. Staff as
witness & fill out Disposal Sheet.

Orger Muniz

ANNUAL DMA RECERTIFICATION TEST

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

Yes No Explain:

need Rx for all medications from doctor

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 medical first

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 15mL, Two Tablespoon is 30ml

ANNUAL DMA RECERTIFICATION TEST

17. NPO means para oral?

Yes No Explain:

nothing by mouth

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

Yes No Explain:

Destroyed

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

~~Yes~~ No Explain:

It is a common problem with psych meds - Dysphagia

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

Yes No Explain:

It is a side effect. Common & serious