

Kaylah
Dumont

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 Ativan Clozaril Depakote Haldol Invega Klonopin Lamictal Lithium Risperdal Seroquel Tripleptal Zyprexa	Advair Discus Atrovent Flonase Flovent Loratadine Proventil	Crestor Lipitor Zocor	Apidra Byetta Glucophage Glyburide Lantus Levemir Levothyroxine Novolog Synthroid
Seizures	Gastrointestinal Disorder Constipation	Blood Pressure Meds	Pain & Inflammation
Dilantin Keppra Neurontin Topamax	Colace Miralax Prilosec Protonix Zantac	HCTZ (hydrochlorothiazide) Lisinopril Toprol Tenormin	Flexeril Motrin Norco Tylenol with Codeine Ultram

App/Website: Epocrates

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

DMA Code #1 7821

DMA Code #2 2221

DMA Code #3 3482

DMA CLASSROOM TRAINING TEST

NAME: Kaylah Dumont DATE: 5/21/21 SCORE: _____

1. Where should medication keys be kept?

ON DMA person 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

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:

medication

Documentation

route

time

Dose

person

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, the resident's physician 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?
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 is 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:
- ask the resident to tell you his or her name
 - identify the resident with his or her photo on EMAR
 - hand them a glass of water
 - All of the above
23. What is the medication administration time frame?
- half hour before and half hour after the correct administration time.
 - one hour before and one hour after the correct administration time
 - 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.
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: _____

Medical Training Test

1. What are the ranges for vital signs?
 - a. Blood Pressure: systemic (90-100) Diastolic (50-90)
 - b. Pulse: 50-100
 - c. Temperature: 96-99°F
 - d. Respirations: 17-20
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 difficulties
 - 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.
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:
- Supply oxygen to the tissue cells and eliminate carbon dioxide waste from the cells.
 - Bring food and nutrients to the tissue cells.
 - Both a and b.
 - 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:
- Only liquids.
 - Foods that are dry and sticky.
 - All types of foods and liquids.
 - Only what is on the menu.
15. The musculoskeletal system is comprised of:
- Sclera, retina, and cornea.
 - Bones, ligaments, joints, muscles and tendons.
 - Both a and b.
 - None of the above.
16. What does the acronym RICE stand for?
- R: REST
 - I: ICE
 - C: COMPRESS
 - 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?
- Urinary frequency, low abdominal/back pain
 - Diarrhea, blood in the stool
 - Burning or pain when urinating, blood in the urine
 - Confusion
 - a, c, and d
19. T F ____ : The hormones produced by the endocrine system regulate the entire body.
20. Uncontrolled diabetes can lead to:
- Heart disease.
 - Dental disease.
 - Nerve damage.
 - 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?
- Clean site well with soap and water then notify supervisor immediately.
 - Use hand sanitizer and call 911.
 - Do not tell anyone.
 - 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:
- Know how many people need to assist.
 - Make the resident do it themselves.
 - Communicate with your partner and the resident.
 - 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?
- Take their vitals.
 - Check for obvious signs of injury.
 - Report to home manager and medical.
 - All of the above.

DRUG NAME	aripiprazole
GENERIC NAME	aripiprazole
DOSE RANGE	2mg, 5mg, 10mg, 15mg, 20mg, 30mg; 2mg-30mg/day
HOW TO TAKE	oral
USES	schizophrenia; bipolar I disorder, manic/mixed; major depression
SIDE EFFECTS	headache, weight gain, anxiety, insomnia, nausea/vomiting, dizziness
WARNINGS	not approved for dementia-related psychosis; increased suicide risk in pts. under 24

DRUG NAME	Ativan
GENERIC NAME	lorazepam
DOSE RANGE	Tablet: 0.5mg, 1mg, 2mg IV: 2mg/mL, 4mg/mL; 2-10mg/day
HOW TO TAKE	oral, injection
USES	anxiety, insomnia, status epilepticus, nausea/vomiting, preoperative sedation
SIDE EFFECTS	sedation, dizziness, asthenia, ataxia, respiratory depression, fatigue
WARNINGS	concomitant benzodiazepine use w/ opioids may result in profound sedation, resp. depression, coma + death

DRUG NAME	Clozaril
GENERIC NAME	clozapine
DOSE RANGE	25mg, 100mg; 12.5mg-900mg/day
HOW TO TAKE	oral
USES	schizophrenia, treatment resistant; suicide prevention, schizophrenia-assoc.
SIDE EFFECTS	dyslipidemia, hyperglycemia, weight gain, drowsiness, headache
WARNINGS	restricted distribution program r/t severe neutropenia risk; risk of orthostatic hypotension, bradycardia, syncope

DRUG NAME	Depakote
GENERIC NAME	divalproex sodium
DOSE RANGE	125mg, 250mg, 500mg; 30mg-500mg/day
HOW TO TAKE	oral
USES	partial seizures; absence seizures; bipolar disorder, acute manic
SIDE EFFECTS	headache, nausea/vomiting, asthenia, dizziness, diarrhea, depression
WARNINGS	Hepatotoxicity, fetal risk, pancreatitis

DRUG NAME	Haldol
GENERIC NAME	haloperidol
DOSE RANGE	0.5mg, 1mg, 2mg, 5mg, 10mg, 20mg; Max 100mg/day
HOW TO TAKE	oral
USES	psychosis, Tourette syndrome, agitation, acute
SIDE EFFECTS	tardive dyskinesia, insomnia, anxiety, gynecostasia
WARNINGS	Not approved for dementia related psychosis

DRUG NAME	Invega
GENERIC NAME	paliperidone
DOSAGE RANGE	1.5mg, 3mg, 6mg, 9mg; Max 12mg/day
HOW TO TAKE	oral
USES	schizophrenia, schizoaffective disorder
SIDE EFFECTS	parkinsonism, tachycardia, insomnia, headache, nausea, somnolence
WARNINGS	not approved for dementia related psychosis

DRUG NAME	Klonopin
GENERIC NAME	clobazepam
DOSAGE RANGE	0.5mg, 1mg, 2mg; Max 4mg-20mg/day
HOW TO TAKE	oral
USES	seizure disorder, panic disorder, anxiety, restless leg syndrome
SIDE EFFECTS	drowsiness, dizziness, impaired coordination, disinhibition, irritability
WARNINGS	Risks from concomitant opioid use.

DRUG NAME	Lamictal
GENERIC NAME	lamotrigine
DOSAGE RANGE	25mg-200mg; Max 400mg/day
HOW TO TAKE	oral
USES	bipolar I disorder; partial seizures; seizures, Lennox-Gastaut syndrome
SIDE EFFECTS	dizziness/vertigo, headache, ataxia, nausea/vomiting, diarrhea, insomnia
WARNINGS	Risk of serious rash requiring hospitalization

DRUG NAME	Lithium
GENERIC NAME	Lithium carbonate
DOSAGE RANGE	cap: 150mg-600mg, tab+er tab: 300mg, solution: 8mEq/5mL; Max 1800mg
HOW TO TAKE	oral
USES	bipolar I disorder, schizoaffective disorder
SIDE EFFECTS	tremor, polyuria, polydipsia, weight gain, diarrhea, vomiting, dizziness
WARNINGS	Lithium toxicity

DRUG NAME	Risperdal
GENERIC NAME	risperidone
DOSAGE RANGE	tab: 25mg, 0.5mg, 1mg, 2mg, 3mg, 4mg; sol: 1mg/mL; Max 16mg/day
HOW TO TAKE	oral
USES	schizophrenia, bipolar I disorder, Tourette syndrome
SIDE EFFECTS	fatigue, insomnia, somnolence, nausea/vomiting, cough, constipation
WARNINGS	not approved for dementia related psychosis

GENERIC NAME	quetiapine
DOSE RANGE	25mg, 50mg, 100mg, 200mg, 300mg, 400mg; Max 800mg/day
HOW TO TAKE	oral
USES	schizophrenia, bipolar I disorder, MDD; generalized anxiety disorder
SIDE EFFECTS	sedation, tremor, dizziness, hypotension, weight gain, anemina, back pain
WARNINGS	Not approved for dementia related psychosis; increased risk of suicide in pts ^{under} 24

DRUG NAME	Triptolol Trileptal
GENERIC NAME	oxcarbazepine
DOSE RANGE	150mg, 300mg, 600mg; susp: 300mg/5mL; Max 2400 mg/day
HOW TO TAKE	oral
USES	partial seizures, trigeminal neuralgia, bipolar disorder
SIDE EFFECTS	dizziness, headache, nausea/vomiting, fatigue, ataxia, confusion
WARNINGS	Avoid abrupt withdrawal; caution in elderly pts.

DRUG NAME	Zyprexa
GENERIC NAME	olanzapine
DOSE RANGE	tab: 2.5mg, 5mg, 7.5mg, 10mg, 15mg, 20mg; inj: 5mg per mL; Max 20mg/day
HOW TO TAKE	oral, injection
USES	schizophrenia, bipolar I disorder, major depressive disorder
SIDE EFFECTS	weight gain, insomnia, headache, tremor, constipation, abnormal gait
WARNINGS	Not approved for dementia related psychosis

DRUG NAME	Advair discus
GENERIC NAME	fluticasone propionate/salmeterol inhaled
DOSE RANGE	100mcg, 250mcg + 500mcg ALL 50 mcg per blister; Max 1000mcg/100 mcg/day
HOW TO TAKE	inhaled / oral
USES	asthma, COPD
SIDE EFFECTS	headache, cough, sinusitis, nausea/vomiting, dizziness, bronchitis
WARNINGS	caution if hypertension or TB infection

DRUG NAME	Atrovent
GENERIC NAME	ipratropium bromide inhaled
DOSE RANGE	17 mcg per activation; Max 12 puffs/day
HOW TO TAKE	inhaled / oral
USES	COPD, asthma exacerbation
SIDE EFFECTS	bronchitis, dyspnea, nausea, sinusitis, dizziness, UTI
WARNINGS	caution if glaucoma, prostatic hypertrophy

DRUG NAME	FloNase
GENERIC NAME	fluticasone propionate nasal
DOSAGE RANGE	1-2 actuations/nostril; max 4 actuations in each nostril/day.
HOW TO TAKE	nasal spray
USES	allergy symptoms, nasal polyp
SIDE EFFECTS	headache, cough, nasal burning/irritation, dizziness, bronchitis
WARNINGS	caution if glaucoma, cataracts or TB infection

DRUG NAME	Flovent
GENERIC NAME	fluticasone propionate inhaled
DOSAGE RANGE	100 mcg / blister, 250 mcg / blister; max 1000 mcg/day
HOW TO TAKE	inhaled/oral
USES	asthma, maintenance
SIDE EFFECTS	headache, throat irritation, candidiasis, oral, cough, rash
WARNINGS	avoid abrupt withdrawal, caution if TB infection

DRUG NAME	Loratadine
GENERIC NAME	loratadine
DOSAGE RANGE	tab: 10mg Sol: 1mg/mL
HOW TO TAKE	oral
USES	allergy symptoms, chronic idiopathic urticaria
SIDE EFFECTS	drowsiness, fatigue, abdominal pain, headache, diarrhea
WARNINGS	caution if hepatic or renal impairment

DRUG NAME	Proventil
GENERIC NAME	albuterol inhaled
DOSAGE RANGE	90 mcg per actuation
HOW TO TAKE	inhaled/oral
USES	bronchospasm
SIDE EFFECTS	throat irritation, cough, tremor, nausea/vomiting, dizziness
WARNINGS	caution if diabetes or seizure disorder

DRUG NAME	Crestor
GENERIC NAME	rosuvastatin
DOSAGE RANGE	5mg, 10mg, 20mg, 40mg; max 40mg/day
HOW TO TAKE	oral
USES	hypercholesterolemia, hypertriglyceridemia
SIDE EFFECTS	headache, nausea, myalgia, stomach pain, constipation, photosensitivity
WARNINGS	caution if diabetes mellitus, hypothyroidism, or alcohol abuse

DRUG NAME	Lipitor
GENERIC NAME	atorvastatin
DOSE RANGE	10mg, 20mg, 40mg, 80mg; Max 80mg/day
HOW TO TAKE	oral
USES	hypercholesterolemia, mixed dyslipidemia, hypertriglyceridemia
SIDE EFFECTS	headache, diarrhea, diabetes mellitus, flatulence, nausea
WARNINGS	caution if diabetes mellitus, pt. < 65 yr old, or hypothyroidism

DRUG NAME	Zocor
GENERIC NAME	simvastatin
DOSE RANGE	5mg, 10mg, 20mg, 40mg, 80mg; Max 40mg/day
HOW TO TAKE	oral
USES	hypercholesterolemia, mixed dyslipidemia, hypertriglyceridemia
SIDE EFFECTS	headache, diabetes mellitus, diarrhea, nausea, constipation
WARNINGS	caution if diabetes mellitus or hypothyroidism

DRUG NAME	Apidra
GENERIC NAME	insulin glulisine
DOSE RANGE	inj. pen: 100 units per mL, inj. vial: 100 units per mL
HOW TO TAKE	injection
USES	diabetes mellitus
SIDE EFFECTS	hypoglycemia, weight gain, injection site reaction, headache
WARNINGS	caution if renal or hepatic impairment

DRUG NAME	Byetta
GENERIC NAME	exenatide
DOSE RANGE	inj. pen: 5mcg per injection, 10mcg per injection
HOW TO TAKE	injection
USES	diabetes mellitus, type 2
SIDE EFFECTS	nausea, vomiting, headache, hypoglycemia, constipation, diarrhea
WARNINGS	caution if diabetes mellitus, type 1, severe GI disease

DRUG NAME	Glucophage
GENERIC NAME	metformin
DOSE RANGE	500mg, 850mg, 1000mg; Max 2550mg/day
HOW TO TAKE	oral
USES	diabetes mellitus, type 2, polycystic ovary syndrome
SIDE EFFECTS	diarrhea, nausea/vomiting, flatulence, metallic taste, indigestion
WARNINGS	may cause lactic acidosis