

ANNUAL DMA RECERTIFICATION TEST

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Codes: 1980, 2001, 1949

1 List the six patient rights:

right person right time
right medication right route
right dosage documentation

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

Yes No Explain:

the container must be on a flat level surface

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

Yes No Explain:

the controlled substance log is signed at the time
med is passed, and at the end of my shift when the
next shift is ready to begin their shift (shift change)

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

Yes No Explain:

A doctor order is obtained in order for
us to crush medication for our residents.

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

Yes No Explain:

Controlled substances must be stored in a
locked box, behind a locked door
(2 locks)

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

Yes No Explain:

We must report all errors - to medical on call
whether we think it'll cause harm or not. It is part of
the 6 rights

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

Yes No Explain:

We do not leave med room keys to hang anywhere.
We pass the med key off and sign them out and
back in at the end of our 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:

We never "borrow" medication from others bubble
packs. We contact on call, we order another
bubblepack, then if out of the med window, we get
permission to pass before hand.

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

Yes No Explain:

A low glucose level and added insulin can cause illness or death. We follow the policy if glucose levels are 70 or less.

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

Yes No Explain:

We measure blood pressures on residents using BP medications. At times we may have to measure BP before administering the medication.

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

Yes No Explain:

8:00 medication may be given between 7 and 9, not before 7, not after 9, without unless we have permission from medical on-call.

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

Yes No Explain:

We dispose of all medications that are refused, and documented as such. We have a witness verify the disposal process.

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

Yes No Explain:

We need orders on record for All medications.

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:

We prompt for residents to take meds, I believe 3 times, we get permission before passing meds outside of the window

15. OTC means other than called for?

Yes No Explain:

OTC means over the counter

16. One Tablespoon is equal to 30ml?

Yes No Explain:

One tablespoon is 15 ml.

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17. NPO means nothing para oral?

Yes

Yes No

Explain:

Nothing by mouth

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

Yes No

Explain:

Medication can be returned to the pharmacy only if it is NOT a controlled substance.

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

Yes No

Explain:

This is a neurological effect caused by the meds

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

Yes No

Explain:

These meds can cause constipation, as well as other side effects.