



Medication Administration In-Service and Evaluation

Name of Facility/Home: Lantern Bay

Employee Receiving In-Service: Robert McCabe

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: 6/5/21 Time: 4:00 am pm Trainer: Heene Lawrie

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							✓	



Medication Administration In-Service and Evaluation

In-Service #	1st	2nd	3rd	4th	5th	6th	Eval.	Comments
6							✓	
							✓	
							✓	
							✓	
							✓	
							✓	
							✓	
							✓	
							✓	
7							✓	
8							N/A	
							N/A	
							N/A	
							N/A	
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.



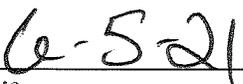
 Employee Signature



 Date



 Home Manager Signature



 Date

ANNUAL DMA RECERTIFICATION TEST

1. List the six patient rights:

Right Person
Right time
Right dosage

Right Route
Right medication
Right Documentation

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

Yes No Explain:

On flat surface

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

Yes No Explain:

Each pass and at beginning and end of shift

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

Yes No Explain:

Doctor's Order

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:

All med errors are to be reported to home manager and
on call nurse

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

Yes No Explain:

Keys are kept by DMA at all times until
Shift Change

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:

Resident's can only take medication that is prescribed
to them.

ANNUAL DMA RECERTIFICATION TEST

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

Yes No Explain:

According to range

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

Yes No Explain:

Used to treat people with high blood pressure

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

Yes No Explain:

hour before hour after

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

Yes No Explain:

Disposed of per procedure

ANNUAL DMA RECERTIFICATION TEST

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

Yes No Explain:

Need order 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:

Contact on call nurse to get permission

15. OTC means other than called for?

Yes No Explain:

Over Counter

16. One Tablespoon is equal to 30ml?

Yes No Explain:

One table spoon = 15ml

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:

Returned to medical dept.

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

Yes No Explain:

Can cause dry mouth

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

Yes No Explain:

Can cause Constipation

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 1980

DMA Code #2 2001

DMA Code #3 1949

DRUG NAME	Ativan
GENERIC NAME	Lorazepam
DOSAGE RANGE	Tab: 0.5mg to 4mg per ML
HOW TO TAKE	take 45 min bc chemo max 3mg
USES	to treat Anxiety symptoms.
SIDE EFFECTS	drowsiness, dizziness, weakness, confusion
WARNINGS	Ativan may increase the pressure inside the eyes, worsening glaucoma.

DRUG NAME	Klonopin
GENERIC NAME	Clonazepam
DOSAGE RANGE	up to 20mg
HOW TO TAKE	take by mouth
USES	to treat Panic Attacks.
SIDE EFFECTS	confusion, hallucinations, aggression,
WARNINGS	coma and death, respiratory depression

DRUG NAME	flonase
GENERIC NAME	fluticasone
DOSAGE RANGE	2 to 4 actuations in each nostril
HOW TO TAKE	once a day for two week.
USES	to treat allergy symptoms
SIDE EFFECTS	minor nosebleed, burning or itching in your nose.
WARNINGS	eye pain, severe nosebleeds, white patches in your nose.

DRUG NAME	lipitor
GENERIC NAME	Atorvastatin
DOSAGE RANGE	Tab: 10mg to 80mg
HOW TO TAKE	take once a day with food or without food.
USES	help lower your cholesterol.
SIDE EFFECTS	diarrhea, nausea, fatigue, heart burn.
WARNINGS	fever, dark urine, increased, thirst or hunger.

DRUG NAME	Lantus.
GENERIC NAME	Insulin glargine.
DOSAGE RANGE	3mL to 100
HOW TO TAKE	once daily just not in the same spot.
USES	to help with diabetes.
SIDE EFFECTS	low blood sugar, weight gain, edema.
WARNINGS	headache, blurred vision, slurred speech, fast heart rate.

DRUG NAME	topamax
GENERIC NAME	Topiramate.
DOSAGE RANGE	25 mg to 200 mg
HOW TO TAKE	25 mg as a single nightly dose for one week.
USES	treat and prevent seizures, prevent migrating headaches
SIDE EFFECTS	dizziness, diarrhea, weight loss, tiredness,
WARNINGS	very serious eye problems, rapid breathing.

DRUG NAME	Keppra
GENERIC NAME	Levetiracetam.
DOSAGE RANGE	200 mg to \$1000 mg.
HOW TO TAKE	take 500 mg twice daily every two weeks.
USES	to treat seizures.
SIDE EFFECTS	nausea, dizziness and headaches.
WARNINGS	some people have thoughts about suicide

DRUG NAME	Toprol
GENERIC NAME	metoprolol
DOSAGE RANGE	25 to 100 mg
HOW TO TAKE	take with meal or right after. by mouth
USES	treat Angina, Chest pain
SIDE EFFECTS	dizziness, depression, nightmares,
WARNINGS	Severe heart failure.

DRUG NAME	Norco
GENERIC NAME	hydrocodone
DOSAGE RANGE	5 mg to 300 mg.
HOW TO TAKE	1 to 2 tablets orally every 4 to 6 hours as needed
USES	to relieve pain.
SIDE EFFECTS	Light headed, seizure, confusion.
WARNINGS	can slow or stop your breathing.

DRUG NAME	Zantac
GENERIC NAME	ranitidine.
DOSAGE RANGE	50 mL to 150 mg.
HOW TO TAKE	using a dosing syringe
USES	treat gastroesophageal reflux disease.
SIDE EFFECTS	Stomach pain, dark urine,
WARNINGS	Chest pain, short of breath.