



## Medication Administration In-Service and Evaluation

Name of Facility/Home: Anchor Pointe

Employee Receiving In-Service: S. Williams

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: 6/29/21 Time: 10:00 am / pm Trainer: J. McDonald

**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							✓	
							✓	
							✓	
							✓	
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							✓	
20							✓	
21							✓	
22							✓	
23							✓	
24							✓	
25							✓	
26							✓	

### FOLLOW UP CONCERNS

Specify time frame for completion: \_\_\_\_\_  N/A

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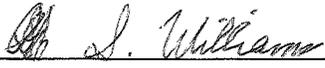


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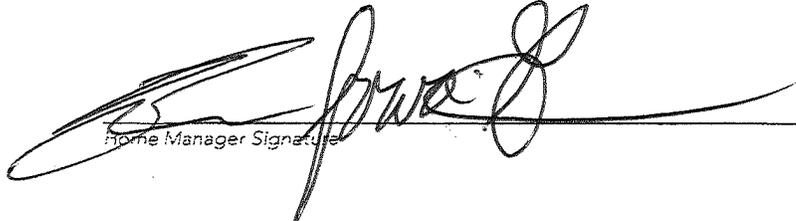


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I have received the above In-service and have read the Organizations **Medical Policies**. I understand what is expected of me as a Designated Medication Administrator. I also understand that any immediate medical questions or concerns should be directed to the Coordinator of Care at my Site during open office hours and to the On-Call person after hours.

  
Employee Signature

6-29-21  
Date

  
Home Manager Signature

6-29-21  
Date

# ANNUAL DMA RECERTIFICATION TEST

1. List the six patient rights:

Right Medication

Right dose

Right Person

Right time + Date

Right <sup>documentation</sup> ~~documentation~~

Right ~~agent~~ route

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

Yes  No Explain:

Must be on flat surface / eye level

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

Yes  No Explain:

Any time you pass narcotics and every time you change DMA'S at end of shift.

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

Yes  No Explain:

Must be given as is (by prescription)

# 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 must be reported*

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

Yes

No

Explain:

*on the DMA 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:

*Only can use what is prescribed*

*to clients*

# ANNUAL DMA RECERTIFICATION TEST

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

Yes  No Explain:

*If has to be on a sliding scale*

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:

*has to be an hour before or after.*

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

Yes  No Explain:

*Must be disposed of.*

# ANNUAL DMA RECERTIFICATION TEST

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

Yes     No

Explain:

*Must always be recorded*

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:

*Put refused, the call nurse to see if its okay to*

*pass meds*

15. OTC means other than called for?

Yes     No

Explain:

*over the counter*

16. One Tablespoon is equal to 30ml?

Yes     No

Explain:

*30ml is 2 tbs*

# 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:

*They get disposed of*

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

Yes

No

Explain:

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

Yes

No

Explain:

*It is a side effect*

## How to Register for an Epocrates Account

**Objective:** Register for Epocrates.com

**User Security Access Requirements:** Available to all staff

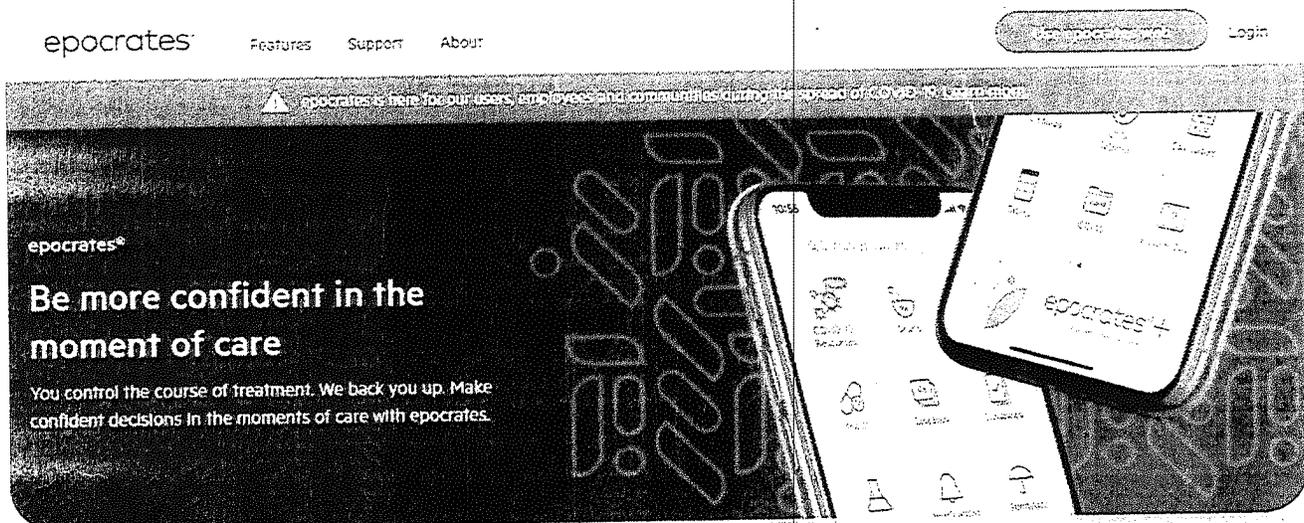
**Beacon User Role:** Available to all staff

**Timeline:** Should create an account upon initiating DMA certification training process.

### How to Register:

Pull up Google Chrome or any other web browser and go to <https://www.epocrates.com/>

You will now be the Epocrates home page.



Click on "Login" in the upper right-hand corner of the page.





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Specialized Living

A login box/registration box will pop-up.

The screenshot shows the epocrates login and registration page. At the top, the epocrates logo is displayed with the tagline "an athenahealth service". Below the logo, there is a text input field containing the email address "khaas@beaconspecialized.org". Underneath the email field is a password field represented by a series of dots. A checkbox labeled "Remember Me" is checked. Below the password field is a dark button labeled "Login". Underneath the "Login" button, there are two links: "Forgot your login or password?" and "New User?". At the bottom of the form is a dark button labeled "Register Now".

Click on "Register Now" to register for an account. *(Enter credential if you have already registered to access the program.)*

Fill out the form below and click "Join". Use "Other Health Professional" for Occupation and use "49009" for your work zip. Be sure to use your Beacon e-mail.

The screenshot shows the "Create an Account" registration form on the epocrates website. The form includes several input fields: "First Name", "Last Name", "Email", "Phone", "Address", "City", "State", "Zip", "Work Zip", "Occupation", and "Country". There are also checkboxes for "I am a new user" and "I am an existing user". A "Join" button is located at the bottom of the form.

DRUG NAME	Klonopin
GENERIC NAME	Clonazepam
DOSAGE RANGE	0.5mg - 2mg
HOW TO TAKE	oral
USES	Drowsiness, dizziness, Tiredness, Increased Saliva
SIDE EFFECTS	Prevent and control seizures / Treats panic attacks
WARNINGS	⚠ Don't take with opioid medications

DRUG NAME	Haldol
GENERIC NAME	Haloperidol
DOSAGE RANGE	0.5 - 3mg
HOW TO TAKE	oral
USES	Antipsychotic, Mood stabilizer, Schizophrenia
SIDE EFFECTS	dry mouth, blurred vision, loss of appetite, diarrhea, heartburn
WARNINGS	High risk in death in older adults with dementia

DRUG NAME	Zocor
GENERIC NAME	Simvastatin
DOSAGE RANGE	<del>10, 20, 40, 80 mg</del> 5, 10, 20, 40, 80 mg Tablets
HOW TO TAKE	oral
USES	Treats high cholesterol and triglyceride levels.
SIDE EFFECTS	mild memory problems or confusion, heart burn, Gas, Stomach pain.
WARNINGS	Fever, Painful urination, weight loss, weakness

DRUG NAME	Keppra
GENERIC NAME	Levetiracetam
DOSAGE RANGE	250 mg, 500 mg, 750 mg, 1000 mg
HOW TO TAKE	oral
USES	Anticonvulsant, Treats seizures
SIDE EFFECTS	dizziness, drowsiness, feeling irritable, loss of appetite, infection
WARNINGS	Rashy, difficulty walking or moving.

DRUG NAME	Colace
GENERIC NAME	Colace
DOSAGE RANGE	50 mg, 100 mg <sup>mg</sup>
HOW TO TAKE	Oral
USES	Stool softener Treats constipation
SIDE EFFECTS	Stomach pain, Diarrhea or cramping
WARNINGS	Discontinue if rectal bleeding or no bowel movement occurs

DRUG NAME	Motrin
GENERIC NAME	Ibuprofen
DOSAGE RANGE	200-400mg 4-6 hours as needed
HOW TO TAKE	Oral
USES	Nonsteroidal anti-inflammatory. Treats fever and Mild pain.
SIDE EFFECTS	feeling sick, stomach pain, feeling tired, black poo, blood in vomit, ringing in ears
WARNINGS	higher risk of heart attack or stroke. Can cause death.

DRUG NAME	Norco
GENERIC NAME	Hydrocodone / acetaminophen
DOSAGE RANGE	7.5mg - 10mg
HOW TO TAKE	Oral
USES	relieves moderate to severe pain.
SIDE EFFECTS	Nausea, vomiting, constipation, light headedness, dizziness.
WARNINGS	Sleep apnea, mood changes, weight loss

DRUG NAME	Lantus
GENERIC NAME	Insulin glargine
DOSAGE RANGE	100 units.
HOW TO TAKE	Injection
USES	For type 1 and 2 diabetes (controlling blood sugar)
SIDE EFFECTS	weight gain, low blood sugar, diarrhea
WARNINGS	Common Cold, Infection, headache

DRUG NAME	Toprol
GENERIC NAME	Metoprolol
DOSAGE RANGE	25-100mg a day
HOW TO TAKE	Oral
USES	Treats high blood pressure, chest pain and heart failure
SIDE EFFECTS	vomiting, dry mouth, GAS, depression
WARNINGS	Problems breathing, rash

DRUG NAME	Flexeril
GENERIC NAME	Cyclobenzaprine
DOSAGE RANGE	5-10mg
HOW TO TAKE	Oral
USES	Treats stiffness caused by muscle spasms.
SIDE EFFECTS	Blurred vision, dizziness, dry mouth
WARNINGS	Convulsions, Fast heartbeat, increased body temp