



### Medication Administration In-Service and Evaluation

Name of Facility/Home: Lantern Bay/Anchor Point

Employee Receiving In-Service: Lupe Reyna

Date of 1st In-Service: 07 /15 /21 Time: 1 : 00p am / pm Trainer: Learning and Development

Date of 2nd In-Service: 07 /15 /21 Time: 3 : 00p am / pm Trainer: Learning and Development

Date of 3rd In-Service: 07 /21 /21 Time: 2 : 00 am / pm Trainer: Kelly Green

Date of 4th In-Service: 07 /21 /21 Time: 7 : 00 am / pm Trainer: Kelly Green

Date of 5th In-Service: 07 /22 /21 Time: 12 : 00 am / pm Trainer: Kelly Green

Date of 6th In-Service: 07 /22 /21 Time: 4 : 00 am / pm Trainer: Kelly Green

Date of Final Evaluation: 07 /22 /21 Time: 8 : 00 am / pm Trainer: Kelly Green

**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	c. DMA verifies medication and strength with order as transcribed on medication record per facility policy and procedure	<input checked="" type="checkbox"/>							
	d. Observe Resident to ensure medication is swallowed	<input checked="" type="checkbox"/>							
	e. Offer adequate and appropriate fluid with medication	<input checked="" type="checkbox"/>							
	f. Medication record is signed immediately after administration of same	<input checked="" type="checkbox"/>							
	g. Controlled substance record is signed immediately after administration of same	<input checked="" type="checkbox"/>							
	h. Correct dose is administered	<input checked="" type="checkbox"/>							
	i. Medication is administered at correct time	<input checked="" type="checkbox"/>							
	j. Verify no additional MAR pages have been added	<input checked="" type="checkbox"/>							
7	Infection control technique is reviewed	<input checked="" type="checkbox"/>							
8	Medication via gastric tube administered per facility policy and procedure (if applicable)	<input checked="" type="checkbox"/>							
	a. Resident is properly positioned, at a 45° sitting angle	<input checked="" type="checkbox"/>							
	b. Tube is checked for placement and patency	<input checked="" type="checkbox"/>							
	c. Tube is flushed before, between and after medications are administered	<input checked="" type="checkbox"/>							
9	Injections are administered by the Resident or a DMA if there is a doctor's order present, per facility policy and procedure	<input checked="" type="checkbox"/>							
	a. Syringes and needles are disposed of in sharps container, by person giving the injection without recapping	<input checked="" type="checkbox"/>							
	b. Proper glucometer testing is observed. Determination of competence re: accurately perform and read glucometer testing results	<input checked="" type="checkbox"/>							
10	DMA crushes medication according to facility policy and procedure ONLY with physician's orders.	<input checked="" type="checkbox"/>							
11	DMA administers eye and ear medication according to facility policies and procedures	<input checked="" type="checkbox"/>							
12	Side effects of psychoactive medication are noted (lethargy, hallucinations) and reported.	<input checked="" type="checkbox"/>							
13	Medication administration should not interrupted. DO NOT RUSH	<input checked="" type="checkbox"/>							
14	Controlled drugs are stored (Double Locked) according to facility policy and procedure	<input checked="" type="checkbox"/>							
15	Residents' rights are observed	<input checked="" type="checkbox"/>							
16	Location, Procedures and Documenting for administering PRN	<input checked="" type="checkbox"/>							
17	Designated Medication Administrator follows facility policy and procedure for medications refused or withheld. (MER & IR written)	<input checked="" type="checkbox"/>							
18	Medications are administered within time frame per facility policy	<input checked="" type="checkbox"/>							



## Medication Administration In-Service and Evaluation

	In-Service #	1st	2nd	3rd	4th	5th	6th	Eval.	Comments
19	Medication errors are reported to Site Supervisor and RN teaching medication classes	<input checked="" type="checkbox"/>							
20	Medication area is cleaned and locked after completion of medication administration	<input checked="" type="checkbox"/>							
21	Designated Medication Administrator can identify action and common side effects of medications administered	<input checked="" type="checkbox"/>							
22	Approved Abbreviations List is reviewed	<input checked="" type="checkbox"/>							
23	Seizure precautions and documentation	<input checked="" type="checkbox"/>							
24	After hour procedures, procedures for found/spilled medication, location of Guide to Drugs Book	<input checked="" type="checkbox"/>							
25	2nd Staff Verification, what it is, when it is needed, and how to document it	<input checked="" type="checkbox"/>							
26	Refusal of Medication procedures (prompt 3 times, then write appropriate documentation)	<input checked="" type="checkbox"/>							

### FOLLOW UP CONCERNS

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

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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

7-22-21  
\_\_\_\_\_  
Date

\_\_\_\_\_  
Home Manager Signature

7-22-21  
\_\_\_\_\_  
Date

# ANNUAL DMA RECERTIFICATION TEST

Lupe  
Reyna

1. List the six patient rights:

right resident  
right medicine  
right Dosage

right time/Date  
right Route/Method  
right Documentation

2. Liquid medication is poured at eye level holding the cup with your hand? <sup>not until</sup> the medication is taken.

Yes     No    Explain:

Yes, because you palm the label  
and wipe bottle

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

Yes     No    Explain:

controlled substance log is signed when  
passing medication and a DMA change.

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

Yes     No    Explain:

must have a doctors order

# ANNUAL DMA RECERTIFICATION TEST

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

Yes  No Explain:

NO, because ~~its~~ it has a double lock

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

Yes  No Explain:

report to the nurse <sup>call</sup> and poison control  
and need to document any medication  
errors

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

Yes  No Explain:

Med room keys should always be accounted for.  
must sign your keys over to another certified DMA  
at shift change. must complete controlled substance count  
any time keys change hands.

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:

Never borrow medications from  
another residents.

# ANNUAL DMA RECERTIFICATION TEST

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

Yes

No

Explain:

lantus is used ~~to~~ to ~~lower~~ lower  
blood sugar

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

Yes

No

Explain:

using it will help ~~the~~ the blood  
pressure to go down

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

Yes

No

Explain:

medication may be given at 8:00 on time,  
30 minute window

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

Yes

No

Explain:

so dispos with a second staff  
save for your own shift, dispos within  
the next shift.

# ANNUAL DMA RECERTIFICATION TEST

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

Yes  No Explain:

everything has to be documented

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 are going to contact the nurse and document when they took their medication, 30 minute window

15. OTC means other than called for?

Yes  No Explain:

means over the counter non-prescriptions

16. One Tablespoon is equal to 30ml?

Yes  No Explain:

a tablespoon is 15ml

# ANNUAL DMA RECERTIFICATION TEST

17. NPO means para oral?

Yes

No

Explain:

NPO means Nothing by mouth

mg = milli gram

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

Yes

No

Explain:

put all controlled substances into a black box with another staff present

double lock

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

Yes

No

Explain:

If not treated it can cause aspiration

problems

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

Yes

No

Explain:

it's a common side effect.

Lupe Reyna

## How to Register for an Epocrates Account

**Objective:** Register for Epocrates.com

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

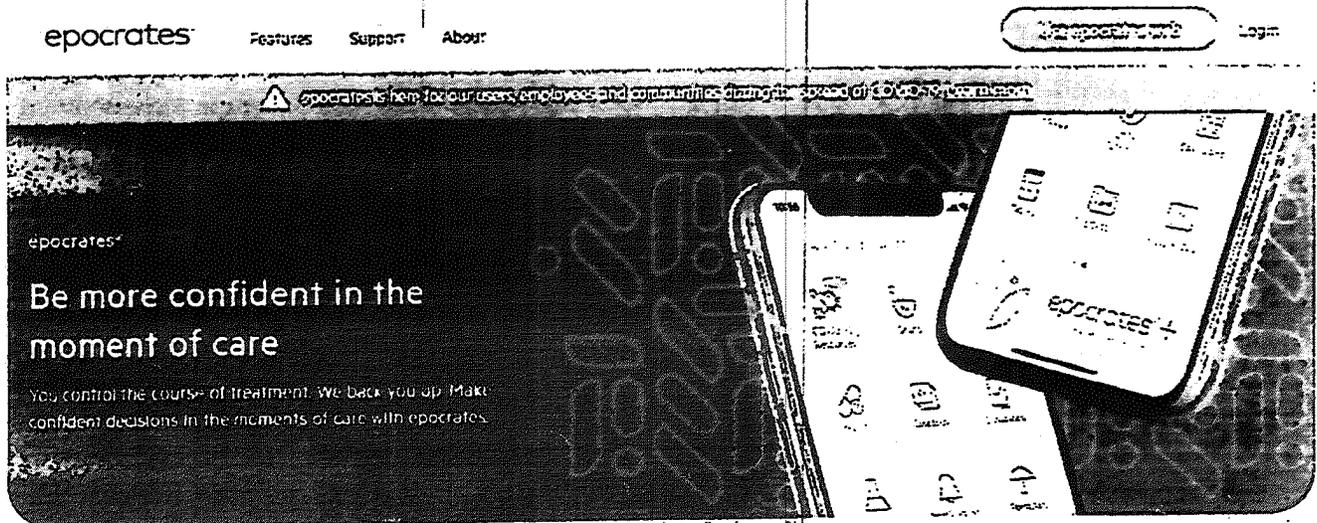
**Beacon User Role:** Available to all staff

**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.





A login box/registration box will pop-up.

The screenshot shows the epocrates logo at the top. Below it is a text input field containing the email address "khaas@beaconspecialized.org". Underneath the email field is a password field with a series of dots. A checkbox labeled "Remember Me" is checked. Below these fields is a "Login" button. Under the "Login" button are two links: "Forgot your login or password?" and "New User?". At the bottom of the form is a "Register Now" button.

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. It includes a header with the epocrates logo. The form contains several input fields for personal information, including name, address, phone number, and email. There are also dropdown menus for selecting "Occupation" and "Work Zip". A "Join" button is located at the bottom of the form.

W

~~Lupe~~ Lupe Reyna

## 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
<b>Seizures</b>	<b>Gastrointestinal Disorder Constipation</b>	<b>Blood Pressure Meds</b>	<b>Pain &amp; Inflammation</b>
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 0630

DMA Code #2 1001

DMA Code #3 7607

DRUG NAME	NOVOLOG
GENERIC NAME	Insulin aspart
DOSAGE RANGE	100 units/mL
HOW TO TAKE	Injection
USES	improve blood sugar
SIDE EFFECTS	weight gain
WARNINGS	hypoglycemia

DRUG NAME	Keppra
GENERIC NAME	levetiracetam
DOSAGE RANGE	Tab: 250mg - 1000mg Sol: 100mg
HOW TO TAKE	Oral
USES	partial onset seizures
SIDE EFFECTS	weakness, dizziness, stuffiness
WARNINGS	avoid abrupt withdrawal

DRUG NAME	NORCO
GENERIC NAME	hydrocortone/acetaminophen
DOSAGE RANGE	5mg/325mg/7.5mg/325mg <sup>10mg</sup> / <sub>325mg</sub>
HOW TO TAKE	oral
USES	relieve moderate to severe pain
SIDE EFFECTS	headaches, drowsiness
WARNINGS	caution if head injury medication error risk

DRUG NAME	Motrin
GENERIC NAME	Ibuprofen/diphenhydramine
DOSAGE RANGE	1-2 tabs
HOW TO TAKE	Oral
USES	reduce pain/inflammation
SIDE EFFECTS	nausea, headache, rash dizziness
WARNINGS	caution if asthma caution if dehydration

DRUG NAME	Neurontin
GENERIC NAME	gabapentin
DOSAGE RANGE	100mg/300mg/400mg/Tab: 600mg/800mg/Sol: 50mg
HOW TO TAKE	Oral
USES	Seizure disorders
SIDE EFFECTS	constipation depression
WARNINGS	avoid alcohol use caution if respiratory impairment

DRUG NAME	Tenormin	
GENERIC NAME	atenolol	
DOSAGE RANGE	Tab: 25mg/50mg/100mg	
HOW TO TAKE	Oral	
USES	Treat high blood pressure	
SIDE EFFECTS	depression/fatigue/	leg pain:
WARNINGS	caution if major surgery avoid abrupt cessation	caution if thyroid disorder

DRUG NAME	Abilify	
GENERIC NAME	aripiprazole	
DOSAGE RANGE	TAB: 2mg/5mg/10mg/15mg	/ 20mg / 30mg
HOW TO TAKE	Oral	
USES	mental/mood disorders	
SIDE EFFECTS	blurred vision	weight gain
WARNINGS	caution if heart failure Dementia related psychosis	caution if dehydration suicidal ideation

DRUG NAME	Toprol-XL	
GENERIC NAME	metoprolol succinate	
DOSAGE RANGE	ER TAB: 25mg/50mg/100mg	/ 200mg
HOW TO TAKE	Oral	
USES	beta blocker/headache/	<del>blood</del> reduce blood pressure
SIDE EFFECTS	nightmares/rash/fatigue/	diarrhea
WARNINGS	caution if major surgery avoid abrupt cessation	Thyroid disorder

DRUG NAME	Flonase	
GENERIC NAME	fluticasone propionate	nasal
DOSAGE RANGE	1-2 activations in	each nostril
HOW TO TAKE	Nasal Route	
USES	corticosteroid for relieving	allergic rhinitis
SIDE EFFECTS	nasal burning	vomiting
WARNINGS	unhealed nasal wound	caution if glaucoma risk

DRUG NAME	Dilantin	
GENERIC NAME	Phenytoin	
DOSAGE RANGE	ERCAP: 30mg/100mg/	chew: 50mg; SUSP: 125mg per 5L
HOW TO TAKE	Oral	
USES	Seizure Disorders	
SIDE EFFECTS	<del>caution if alcohol use</del>	taste changes/blurred vision
WARNINGS	caution if alcohol use cardiovascular risk with	avoid abrupt withdrawal