



Medication Administration In-Service and Evaluation

Name of Facility/Home: Lantern Bay / Anchor Point

Employee Receiving In-Service: Anthon London

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: 7 / 29 / 21 Time: 6:00 am / pm Trainer: J. McDonald

Date of 4th In-Service: 7 / 29 / 21 Time: 8:00 am / pm Trainer: J. McDonald

Date of 5th In-Service: 7 / 30 / 21 Time: 10:00 am / pm Trainer: J. McDonald

Date of 6th In-Service: 8 / 12 / 21 Time: 8:00 am / pm Trainer: J. McDonald

Date of Final Evaluation: 8 / 13 / 21 Time: 8:00 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	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"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<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

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

8/13/21
Date


Home Manager Signature

8-13-21
Date

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:

Document mistake

on call nurse I

contact A
position
control

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

Yes No Explain:

keys accounted for hand over to
certified dma must do a count

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 meds
from another client

ANNUAL DMA RECERTIFICATION TEST

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

Yes No Explain:

350 or Greater
it is used to Lower blood sugar Level water and walking

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

Yes No Explain:

These are blood pressure meds to ensure they are working

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

Yes No Explain:

On time
30 min window 1 hour before than after

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

Yes No Explain:

pharmacist only
second staff
save for your shift
dispose with

Pull bubble
Start
at top left

ANNUAL DMA RECERTIFICATION TEST

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

Yes No Explain:

~~yes~~ every 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:

1. before / after Contact nurse
30 min window
Document they did not take them

15. OTC means other than called for?

Yes No Explain:

over the counter
non pers prescription
Aspirin

16. One Tablespoon is equal to 30ml? 15mL

Yes No Explain:

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:

In black box 2 person present

Destroyed

Double locked

Double locked

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

Yes

No

Explain:

if not treated correctly

it can cause aspiration

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

Yes

No

Explain:

~~Common~~ Common side effect

Anthony London

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.

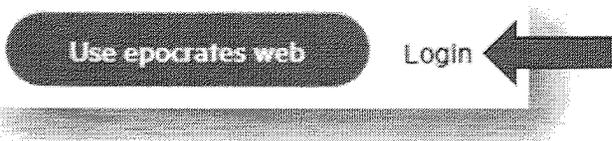
How to Register:

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.



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 0630

DMA Code #2 1001

DMA Code #3 7607

DRUG NAME	Lithium
GENERIC NAME	Lithium
DOSAGE RANGE	Qd 150mg - 600mg Tab 300mg Ertab 300mg ⁴⁵⁰
HOW TO TAKE	Bipolar disorder 600-1800 mg/day po divided
USES	Bipolar disorder
SIDE EFFECTS	Tremor blurred vision
WARNINGS	coma Lithium toxicity

DRUG NAME	Seroquel
GENERIC NAME	quetiapine
DOSAGE RANGE	25mg - 400mg
HOW TO TAKE	Schizophrenia 150-750mg/day po divided
USES	Antipsychotics / anxiolytic
SIDE EFFECTS	prolapse, syncope
WARNINGS	dementia / suicidality

DRUG NAME	Haldol (discontinued in USA)
GENERIC NAME	Haloperidol
DOSAGE RANGE	0.5mg - 20mg
HOW TO TAKE	psychosis 0.5-5mg po bid TID
USES	antipsychotics
SIDE EFFECTS	heat stroke, anxiety
WARNINGS	Dementia Related psychosis

DRUG NAME	Advair Discus
GENERIC NAME	Salmeter Salmeterol inhaled
DOSAGE RANGE	Dpi 100mcg / 50mcg per Dister
HOW TO TAKE	asthma 1 puff inhaled q 12hr
USES	Corticosteroids
SIDE EFFECTS	Tremors / taste change
WARNINGS	growth suppression / glaucoma

DRUG NAME	Proventil
GENERIC NAME	Albuterol inhaled
DOSAGE RANGE	90mcg per actuation
HOW TO TAKE	beta 2 bronchospasm 2 puffs inhaled q 4-6h _{prn}
USES	Beta 2 Agonists
SIDE EFFECTS	paran headache
WARNINGS	angina hypotension

DRUG NAME	Lipitor
GENERIC NAME	Atorvastatin
DOSAGE RANGE	10 mg - 80 mg po qd
HOW TO TAKE	Tablet mixed dyslipidemia 10-20 mg po qd
USES	③ a Dyslipidemia 40 mg CO max Increase
SIDE EFFECTS	headache diarrhea Reductase Inhibitors
WARNINGS	myopathy Tendon Rupture

DRUG NAME	Novolog
GENERIC NAME	Fiasp
DOSAGE RANGE	(pen fill u-100 Cartridge) 100 units per ml INT
HOW TO TAKE	0.5 - 1 units/kg/day basal basal / prandial
USES	Insulin (prandial) Diabetes
SIDE EFFECTS	weight gain head ache
WARNINGS	hypoglycemia hypokalemia

DRUG NAME	flexeril (discontinued in USA) Cyclobenzaprine
GENERIC NAME	amrix, flexmid
DOSAGE RANGE	5 mg - 30 mg
HOW TO TAKE	Fibromyalgia 5-40 mg / po divided qd-tid
USES	pain / inflammation muscle Relaxants
SIDE EFFECTS	Confusion, Blurred vision, fatigue
WARNINGS	psoriasis anaphylaxis

DRUG NAME	Lisinopril
GENERIC NAME	Zestril / Prinivil
DOSAGE RANGE	2.5 mg - 40 mg
HOW TO TAKE	heart failure start 2.5-5 mg po qd max 40 mg/day
USES	controls blood pressure ACE inhibitors
SIDE EFFECTS	hyperkalemia, uric, cough
WARNINGS	fetal toxicity

DRUG NAME	Toprol
GENERIC NAME	metoprolol succinate
DOSAGE RANGE	25 mg - 200 mg
HOW TO TAKE	1-2 mg/kg/dose po qd start 1mg dose up to 50mg
USES	To control blood pressure (adrenergic Receptors)
SIDE EFFECTS	fatigue / Rash / depression
WARNINGS	Avoid abrupt Cessation (severe ang.