

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



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:

<u>Name</u>	<u>Rate</u>
<u>Medications</u>	<u>Time</u>
<u>Dosage</u>	<u>Documentation</u>

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

Yes No Explain:

Liquid medication is poured on flat surface at eye level w/ label covered to preserve label for later reading.

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

Yes No Explain:

Controlled is signed AFTER each controlled is taken by resident and then documented.

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

Yes No Explain:

Have to have a medical note to crush any medications for resident.

ANNUAL DMA RECERTIFICATION TEST

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

Yes No Explain:

All medications are always double locked

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

Yes No Explain:

Medication errors have to be reported as soon as resident takes medication and always take time to read before passing and do 6 RIGHTS 3 TIMES

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

Yes No Explain:

Medication keys are to always remain on DMA no matter what on each 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:

Resident runs out of psychotropic medications call management and on call never take medications from other residents No matter what

ANNUAL DMA RECERTIFICATION TEST

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

Yes No Explain:

~~Always check glucose before giving medication in~~
~~case it's too low or too high~~ Always check and only
follow prescription in eMAR

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

Yes No Explain:

All 3 are Blood pressure medications

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

Yes No Explain:

Medication can only be given a Hour ahead and a
Hour after scheduled time

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

Yes No Explain:

Medications Popped and Refused are to Be 2 Staffed
and Put in medication destroyer.

ANNUAL DMA RECERTIFICATION TEST

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

Yes No Explain:

insulin injections ^{orders} have to be on record to be able to
pass

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:

Always make a misc note and always call on call ^{to get} ^{clearing} and on
call management to make pass

15. OTC means other than called for?

Yes No Explain:

over the counter

16. One Tablespoon is equal to 30ml?

Yes No Explain:

one table spoon is only half

ANNUAL DMA RECERTIFICATION TEST

17. NPO means nothing para oral?

Yes No Explain:

Nothing By mouth

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

Yes No Explain:

controlled substances are ^{put in dead BOX and Took in By NARSE} ~~to be reported to pharmacy~~

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

Yes No Explain:

Choking and aspiration is a common side effect of residents
on PSYCHOTROPIC medications.

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

Yes No Explain:

IT is one of side effects.