



Brandi

How to Register for an Epocrates Account

Objective: Register for Epocrates.com

User Security Access Requirements: Available to all staff

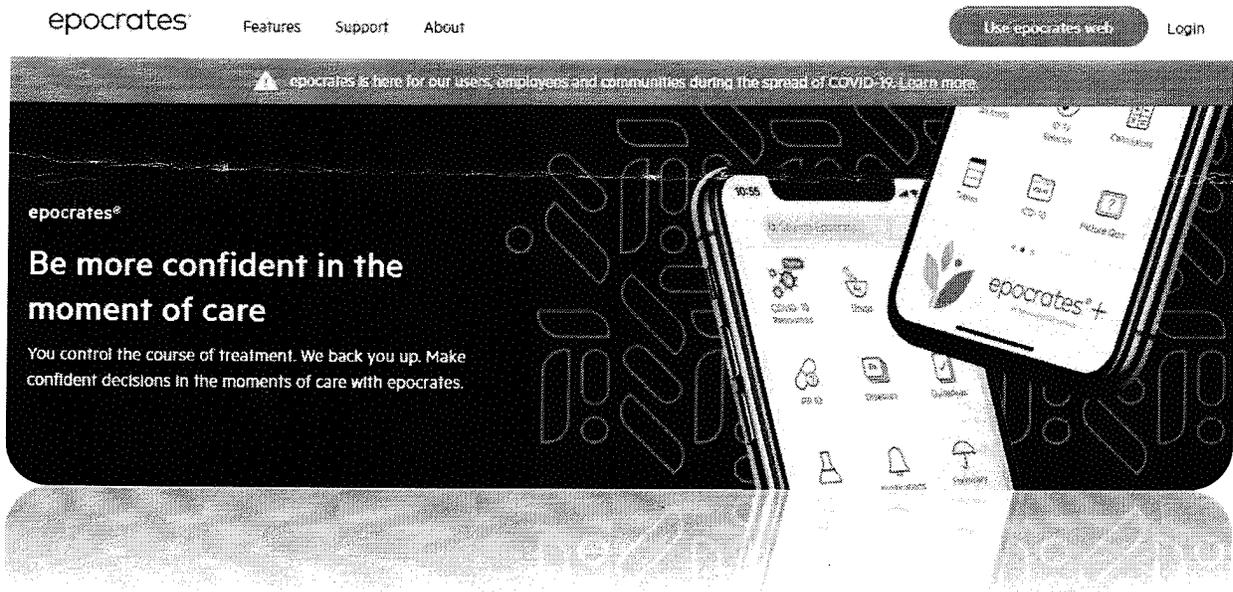
Beacon User Role: Available to all staff

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

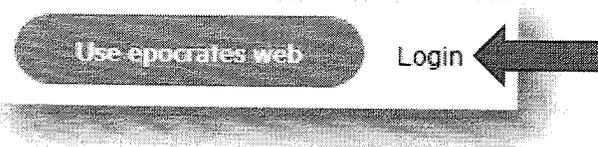
How to Register:

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.



Category: Medical/Field
Ops
System: Epocrates
Date Originated:
08/25/2020



A login box/registration box will pop-up.

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.

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 _____

DMA Code #2 _____

DMA Code #3 _____

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DRUG NAME	Abilify
GENERIC NAME	Aripiprazole
DOSAGE RANGE	2mg - 30mg
HOW TO TAKE	Pill - by mouth, injection
USES	mood disorders, schizophrenia, tics, bipolar
SIDE EFFECTS	weight gain, restlessness, injection site pain, sleepiness
WARNINGS	uncontrollable urge to gamble, binge eat, shop, have sex etc

DRUG NAME	Seroquel
GENERIC NAME	Quetiapine
DOSAGE RANGE	25mg - 400mg
HOW TO TAKE	Pill
USES	Schizophrenia, bipolar, manic-depressive anxiety
SIDE EFFECTS	constipation, drowsy, blurry vision, dry mouth weight gain
WARNINGS	having trouble dizziness, vomiting

DRUG NAME	Lipitor 10mg - 80mg
GENERIC NAME	atorvastatin
DOSAGE RANGE	10mg - 80mg
HOW TO TAKE	Pill
USES	regulate cholesterol
SIDE EFFECTS	constipation, gas headache
WARNINGS	memory problems, loss of appetite

DRUG NAME	Flovent Flovent
GENERIC NAME	fluticasone propionate inhaled
DOSAGE RANGE	100mcg - 250mcg
HOW TO TAKE	Inhale
USES	treatment for asthma
SIDE EFFECTS	upper resp tract inf. throat irritation
WARNINGS	reduced adrenal function, bone thinning

DRUG NAME	Apidra
GENERIC NAME	insulin glulisine
DOSAGE RANGE	100 units per mL
HOW TO TAKE	insulin - inject
USES	treat diabetes I&II symptoms
SIDE EFFECTS	fluid retention, low potassium
WARNINGS	no sharing needles, low blood sugar

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DRUG NAME	NORCO
GENERIC NAME	hydrocodone/acetaminophen
DOSAGE RANGE	5mg/325mg - 10mg/325mg
HOW TO TAKE	tablet
USES	relieve moderate to severe pain
SIDE EFFECTS	nausea, drowsiness, vomiting
WARNINGS	lightheadness, drowsiness

DRUG NAME	Miralax
GENERIC NAME	polyethylene glycol
DOSAGE RANGE	1 cap or 1 PKT
HOW TO TAKE	mouth
USES	treat constipation
SIDE EFFECTS	stomach cramps, bloating, gas
WARNINGS	increased sweating, upset stomach

DRUG NAME	WATSON ZOCOR
GENERIC NAME	atorvastatin simvastatin
DOSAGE RANGE	5mg - 80mg
HOW TO TAKE	Pill
USES	regulate cholesterol
SIDE EFFECTS	weight gain, fever, hunger, thirst
WARNINGS	jaundice, muscle pain

DRUG NAME	Neurontin
GENERIC NAME	gabapentin
DOSAGE RANGE	100mg - 800mg
HOW TO TAKE	pill
USES	help manage seizures → relieve pain
SIDE EFFECTS	dizziness, drowsiness
WARNINGS	memory loss, unsteadiness, difficulty speaking

DRUG NAME	Lantus
GENERIC NAME	insulin glargine
DOSAGE RANGE	100 pen - 100 units per mL
HOW TO TAKE	injection
USES	helps treat diabetes
SIDE EFFECTS	headache, hunger, tremors
WARNINGS	swelling, weight gain, low blood sugar



Medication Administration In-Service and Evaluation

Name of Facility/Home: Anchor Point

Employee Receiving In-Service: Brandi Stewart

Date of 1st In-Service: 9 / 16 / 2021 Time: 7 : 00 ~~am~~ pm Trainer: Learning and Development

Date of 2nd In-Service: 9 / 16 / 2021 Time: 11 : 00 ~~am~~ pm Trainer: Learning and Development

Date of 3rd In-Service: 10 / 2 / 21 Time: 12 : 00 am / pm Trainer: Therence Lawson

Date of 4th In-Service: 10 / 6 / 21 Time: 1 : 30 am / pm Trainer: Kelly Bree

Date of 5th In-Service: 10 / 6 / 21 Time: 1 : 35 am / pm Trainer: Kelly Bree

Date of 6th In-Service: 10 / 22 / 21 Time: 2 : 00 am / pm Trainer: Therence Lawson

Date of Final Evaluation: 10 / 24 / 21 Time: 8 : 00 am / pm Trainer: Therence Lawson

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	<input checked="" type="checkbox"/>							
	a. Location of ample supplies prior to administration	<input checked="" type="checkbox"/>							
	b. Area is clean and organized	<input checked="" type="checkbox"/>							
	c. Area is always locked	<input checked="" type="checkbox"/>							
	d. Location of all medication: Internal, External, Refrigerated, Controlled Drugs (narcotics)	<input checked="" type="checkbox"/>							
2	DMA washes hands prior to administering medications and between each Resident	<input checked="" type="checkbox"/>							
3	Medication keys are retained by DMA	<input checked="" type="checkbox"/>							
4	Resident is identified per facility policy and procedure prior	<input checked="" type="checkbox"/>							
5	Vital signs are taken per facility policy prior to administering medications (if applicable), always on cardiac and BP medications	<input checked="" type="checkbox"/>							
	a. If Pulse and BP are required, hands and equipment are washed per facility policy	<input checked="" type="checkbox"/>							
	b. If Apical Pulse is required, privacy is provided	<input checked="" type="checkbox"/>							
6	Medications Administration per facility policy and procedure: to include review of the '6 Rights'	<input checked="" type="checkbox"/>							
	a. Medications are properly removed from container/blister pack and (.) dot is placed in appropriate box on MAR	<input checked="" type="checkbox"/>							
	b. Liquid medication is poured at eye level, with palm covering label of stock bottle	<input checked="" type="checkbox"/>							



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

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.

Brandi Stewart
Employee Signature

10-24-2021
Date

[Signature]
Home Manager Signature

10-25-21
Date