



Medication Administration In-Service and Evaluation

Name of Facility/Home: Sand/Saunders Point

Employee receiving In-Service: Jasmine

Santoscoy

Date of 1st In-Service: 11 / 11 / 2021 Time: 1 : 00 am pm L&D:

Date of 2nd In-Service: 11 / 11 / 21 Time: 5 : 00 am / pm Medical:

Date of 3rd In-Service: 11 / 27 / 21 Time: 7 : 30 am / pm DMA TTT:

Jammy
Date of 4th In-Service: 12 / 03 / 21 Time: 7 : 00 am / pm DMA TTT: Jammy

Date of 5th In-Service: 12 / 05 / 21 Time: 7 : 30 am / pm DMA TTT: Jammy

Date of 6th In-Service: 12 / 08 / 21 Time: 7 : 00 am / pm HM:

Date of Final Evaluation: 12 / 11 / 21 Time: 8 : 00 am / pm DMA TTT:

Jammy

All staff must complete DMA class, Medical class, Homework and DMA Test in LMS along with In-Services and Final Evaluation for certification.

Code #1 0978

Code #2 0439

Code #3 0501

In-Service #	1st	2nd	3rd	4th	5th	6th	Eval.	Comments
1. MEDICATION AREA- a. Location of ample supplies before administration.	X	X	✓	✓	✓	✓	✓	
b. Report medication that is 10 days or less. Check expiration dates on all medication (special attention to epi-pen, prn medication not commonly used). If a medication is not available contact management and medical to obtain medication or further direction. This	X	X	✓	✓	✓	✓	✓	



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	must also be reported to recipient rights as medication error verbally and then followed up with an event report								
	d. Location of all medication: Internal, External, Refrigerated, Controlled Substances, PRN's. Medications are separated. Location of: High Alert Board, Sharp's container, Medication posting binder, Prescription Book, Medication Book.	X	X	/	/	✓	✓	✓	
	c. Area is clean, organized, and locked.	X	X	✓	✓	✓	✓	✓	
2	DMA washes hands before administering medications and between each Resident when a sink is in the medication room. If not, wash hands before and between each 3 rd person, always sanitizing between each. Sanitizing and wearing gloves is never a substitute for handwashing. Masks should be worn at all times when out of the medication room when required	X	X	✓	/	/	✓	✓	
3	Medication keys are retained by DMA. When completing DMA change complete appropriate documentation. This is to be completed at shift change and the staff must attest that all medications and event reports written, when applicable	X	X	✓	✓	✓	✓	✓	
4	A resident is identified per facility policy and procedure before administering meds. At least 2 patient identifiers per Joint Commission National Patient Safety Goals.	X	X	✓	✓	✓	✓	✓	
5	All medications require a prescription including lotions, creams, powders, and OTC medication.	X	X	✓	/	/	✓	✓	
6	Vital signs are taken per facility policy before administering medications (if applicable), always on cardiac and BP medications	X	X	✓	✓	✓	✓	✓	
	a. If Pulse and BP are required, hands and equipment are washed per facility policy	X	X	✓	/	✓	✓	✓	
	b. Follow vital range guidelines unless otherwise specified with a written prescription by the prescribing physician.	X	X	✓	✓	✓	✓	✓	
7	c. Beacon vital sign ranges are as follows: Temperature 96-99, Pulse 50-100, Respirations 12-20, Low blood pressure 90/50 or below, High blood pressure 160/90 or higher	X	X	✓	✓	✓	✓	✓	
8	Medications Administration per facility policy and procedure: to include a review of the '6 Rights'. Right, Resident, Right Route/Method, Right Medication, Right Time/Date, Right Dose, Right Documentation. Medication administration should not be interrupted, do NOT rush.	X	X	✓	✓	✓	✓	✓	
	a. Medications are properly removed from container/blister pack and (.) dot is placed in the appropriate box on MAR. If on EMAR a check (☑) is placed in the appropriate box.	X	X	✓	✓	✓	✓	✓	



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	b. Liquid medication is poured at eye level on a flat surface, with palm covering label of the stock bottle	X	X	✓	✓	✓	✓	✓	
	c. DMA verifies medication and strength with an order as transcribed on medication record per facility policy and procedure. Note: Strength and dose are not always the same.	X	X	✓	✓	✓	✓	✓	
	d. Observe Resident to ensure medication is swallowed. If (ODT) disintegrating medication is given, place in a separate cup and ensure medication dissolves.	X	X	✓	✓	✓	✓	✓	
	e. Offer adequate and appropriate fluid with medication, full glass of water unless otherwise ordered. Note: Any fluid restrictions, special instructions (nectar thick, etc.), or potential adverse fluid interactions (grapefruit juice)	X	X	✓	✓	✓	✓	✓	
	f. DMA should initial the medication the first time they use it at the top of the bubble pack. Initial and date in back.	X	X	✓	✓	✓	✓	✓	
	g. Medication record is signed immediately after administration of same. Add initials to box on MAR and complete back page or on EMAR choose Pass selected. Choose exceptions if needed and document. Check for any blanks on MAR or EMAR and utilize a Late med pass or proper documentation. Any exception requires a misc. note to be completed. This should be completed at every shift change	X	X	✓	✓	✓	✓	✓	
	h. Controlled substance record is signed immediately after administration of same. The controlled count is done at DMA change and when administering medication.	X	X	✓	✓	✓	✓	✓	
	i. Verify no additional MAR pages have been added, check the high alert board and shift change agenda.	X	X	✓	✓	✓	✓	✓	
	j. Infection control technique is reviewed, Handwashing and Universal Precautions.	X	X	✓	✓	✓	✓	✓	
9	Medication via gastric tube administered per facility policy and procedure. If applicable Medical will provide hands-on education, support, and training. <ul style="list-style-type: none"> ▪ Resident is properly positioned, at a 45° sitting angle ▪ Tube is checked for placement and patency ▪ Tube is flushed before between and after medications are administered 	X	X	✓	✓	✓	✓	✓	
10	Injections are administered by the Resident if there is a physician and psychiatrist order present, or DMA, per facility policy and procedure	X	X	✓	✓	✓	✓	✓	
	a. Syringes and needles are disposed of in a sharps container, by the person giving the injection (should be the resident, unless otherwise ordered by PCP) without recapping. Sharp's container must be dated 90 days out for expiration once you begin using.	X	X	✓	✓	✓	✓	✓	
	b. Proper glucometer testing is observed. Determination of competence re: accurately perform and read glucometer testing results. Still must remain with resident and verify accurate information and document.	X	X	✓	✓	✓	✓	✓	



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	c. Insulin Pen and vials are to be dated 28 days out once they are open or used. Pay special attention to storage instructions. Pens are refrigerated before first use. Vials are refrigerated. Bottles and pens must be labeled with the expiration dates	X	X	✓	✓	✓	✓	✓	
11	DMA crushes medication according to facility policy and procedure ONLY with written physician's orders. Note: Does it specify in pudding, yogurt, applesauce, and follow orders.	X	X	✓	✓	✓	✓	✓	
12	DMA administers eye and ear medication according to facility policies and procedures.	X	X	✓	✓	✓	✓	✓	
13	Inhalers should be disinfected between use. If multiple inhalers are used separately by 5 minutes. Always swish and spit after steroid inhalers to prevent infection.	X	X	✓	✓	✓	✓	✓	
14	Medication prescription, label, and MAR should all match. Generic and Brand Names should be on the label. Prescriptions can be verified in the binder in the medication room and/or NextStep.	X	X	✓	✓	✓	✓	✓	
15	When a resident is leaving for an LOA ensure you are completing the Release of Responsibility for Medication, if 2 nd staff is available best practice would be to have both staff count medication being released. This would be the same process upon return. Ensure staff and party it was released to sign upon leave and return. *Send all medication including PRN's	X	X	✓	✓	✓	✓	✓	
16	When a resident is leaving on an outing or signing out, ensure they are taking their epi-pen, rescue inhaler, and any other applicable medication and completing appropriate documentation. *Sunblock if applicable	X	X	✓	✓	✓	✓	✓	
17	Residents' rights are observed. Residents have the right to privacy. Rights to receive their medication as prescribed and right to refuse medication.	X	X	✓	✓	✓	✓	✓	
18		X	X	✓	✓	✓	✓	✓	
19	DMA follows facility policy and procedure for medications refused or withheld. (ER/ IR written as applicable along with misc. note)	X	X	✓	✓	✓	✓	✓	
20	Medications are administered within the time frame per facility policy and procedure. There is a 1 hour before and 1 hour after the time frame for medication administration. Once outside the time frame, there is an additional 30 minutes before you must contact medical to receive approval to administer medication.	X	X	✓	✓	✓	✓	✓	
21	Medication errors are reported to Home Manager, Regional Nurse, and prescribing physician. An IR/ER and misc. note must be completed before the end of the shift. If medication is given to the wrong resident contact poison control immediately followed by medical.	X	X	✓	✓	✓	✓	✓	
22	The medication area is cleaned and locked after the completion of medication administration. All medication is double locked.	X	X	✓	✓	✓	✓	✓	



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23	DMA can identify the action and common side effects of medications administered. Side effects of psychoactive medication are noted (lethargy, hallucinations) and reported.	X	X	✓	✓	✓	✓	✓	
24	Approved Abbreviations List is reviewed	X	X	✓	✓	✓	✓	✓	
25	Seizure precautions and documentation. Follow Beacon's policy unless someone has their medical protocol prescription.	X	X	✓	✓	✓	✓	✓	
26	After-hour procedures and protocol for found/spilled medication. Location of Epocrates link on staff computer. All medication disposed of must have second staff verification and a complete disposal log. Controlled substances are disposed of in the Dead drug box, all other medication is disposed of in the Rx destroyer jug.	X	X	✓	✓	✓	✓	✓	
27	2nd Staff Verification, what it is, when it is needed, and how to document it. (Med disposal, Insulin verification, Med reconciliation, controlled substance count)	X	X	✓	✓	✓	✓	✓	
28	Refusal of Medication procedures (prompt 3 times, then complete IR/ER as applicable) If medication has been popped, store in a sealed baggie labeled with their initial, time, and date in their medication folder. If medication is not administered per approval as applicable dispose at end of shift.	X	X	✓	✓	✓	✓	✓	
29	For questions or concerns contact your Regional Nurse during business hours. Follow After hours On-Call procedure as applicable. If a medical emergency contact 911 before Medical. Must know the on-call process and the phone numbers	X	X	✓	✓	✓	✓	✓	

FOLLOW UP CONCERNS

Specify the time frame for completion: _____ N/A

I have received the above In-services 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 Home Manager or Regional Nurse at my Site during open office hours and to the On-Call person after hours.



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[Handwritten Signature]

Employee Signature

12/11/21

Date

[Handwritten Signature]

Home Manager Signature or DMA TTT

12/14/21

Date

DRUG NAME	Abilify
GENERIC NAME	Aripiprazole
DOSAGE RANGE	2 to 15 mg/Day
HOW TO TAKE	With or without food. Swallow whole tablet. do not crush
USES	treat certain mental / mood disorders
SIDE EFFECTS	Dizziness, lightheadness, drowsiness, anxiety, insomnia, constipation
WARNINGS	ONE WARNING OF suicidal thoughts among children, adolescents and young adults.

DRUG NAME	gabapentin Neurontin
GENERIC NAME	Gabapentin
DOSAGE RANGE	300 mg to 600 mg / Day (3 times a day)
HOW TO TAKE	with or without food.
USES	help manage certain epileptic seizures and relieve pain
SIDE EFFECTS	Drowsiness, dizziness, loss of coordination, tiredness, visual eye movement
WARNINGS	Can cause life-threatening breathing problems.

DRUG NAME	Atrovent
GENERIC NAME	Ipratropium Bromide
DOSAGE RANGE	17 mcg
HOW TO TAKE	Spray into nose.
USES	to control and prevent symptoms (wheezing and
SIDE EFFECTS	headache, dry mouth, cough, slow nose shortness of
WARNINGS	wheezing, chest tightness, trouble breathing, eye pain. Breath

DRUG NAME	Miralax
GENERIC NAME	Polyethylene glycol
DOSAGE RANGE	17g (diluted in 8 fluid ounces water)
HOW TO TAKE	Mix into fluid and drink.
USES	Treat occasional constipation
SIDE EFFECTS	Nausea, abdominal cramping or gas
WARNINGS	Use Tell your DR if you are allergic to any of these.

DRUG NAME	ZOCOR
GENERIC NAME	Simvastatin
DOSAGE RANGE	5-40mg PO qday
HOW TO TAKE	by mouth directed by your DR.
USES	w/ a proper diet to help lower "bad" cholesterol and
SIDE EFFECTS	tiredness, itching, dark urine, loss of appetite. <u>FATS.</u>
WARNINGS	Yellowing to skin and eyes, clay-colored stools

DRUG NAME	Lisinopril
GENERIC NAME	Qbrelis, Prinivil, Zestril
DOSAGE RANGE	Subsequent doses (5mg orally after 24 hours, then 10mg after 48 hours)
HOW TO TAKE	by mouth
USES	Treat high blood pressure (Hypertension)
SIDE EFFECTS	Cough, dizziness, headache, nausea, sneezing
WARNINGS	Excessive tiredness, diarrhea, weakness.

DRUG NAME	Levo Levothyroxine
GENERIC NAME	Synthroid, triosint, Levoxyl
DOSAGE RANGE	1.7mcg/kg or 100-125 100-125mcg PO qday
HOW TO TAKE	taken once a day on an empty stomach
USES	Treat an underactive thyroid gland (Hypothyroidism)
SIDE EFFECTS	weight loss, headaches, vomiting, diarrhea
WARNINGS	Change in appetite, fever, changes in menstrual cycle.

DRUG NAME	Flexeril
GENERIC NAME	Cyclobenzaprine
DOSAGE RANGE	5mg orally every 8 hours
HOW TO TAKE	by mouth. w/ or w/out food, 3 times a day
USES	by blocking nerve impulses that are sent to the brain
SIDE EFFECTS	Dry mouth, blurred vision, loss of appetite, fatigue
WARNINGS	Stomach pain drowsiness, Dry throat

DRUG NAME	Lithium
GENERIC NAME	Lithium compounds
DOSAGE RANGE	600 milligrams 2 times a day or 3 times a day up to 1200mg
HOW TO TAKE	Swallow tablet by mouth
USES	To treat mania that is part of bipolar disorder
SIDE EFFECTS	headache, nausea / vomiting, Diarrhea, Dry mouth
WARNINGS	dizziness or drowsiness, change in appetite.

DRUG NAME	NOVOLOG
GENERIC NAME	Insulin aspart
DOSAGE RANGE	only 1 med a day (take every 5/10 minutes)
HOW TO TAKE	with meal
USES	helps lower mealtime blood sugar spikes in adults
SIDE EFFECTS	LOW potassium in your blood, insect site reactions
WARNINGS	

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 0978

DMA Code #2 0439

DMA Code #3 0501