

Learner's Name: Janne Dowell

Hand Washing

Blood Pressure

Normal Blood Pressure Range: 120/80

Pulse

Normal Pulse Range: 60-100

Respirations

Normal Respiration Range: 12-20 breaths per minute

Temperature

Normal Temperature Range: 96°-99°

Weight

Measurement of Girth

Oxygen Saturation (Only to be completed per physician or nurse order)

Wong Baker Chart & FLACC Scale

Insulin Administration

SubQ Injections

Accu-Chek (Glucometer Testing)

Glucometer Use and Cleaning

Transfers (on an as-needed basis):

- Hoyer Lift
- Gait Belt
- Wheelchair Transfers

Feeding Tube

Foley Catheter Care

Colostomy

Janne Dowell

Nurse

Janne Dowell

Learner

2-23-22

Date

2-23-22

Date

This document is required to be uploaded into the Learner's LMS transcript as a component of DMA Certification.

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

DMA TRAINING PROCESS

1. SHADOW SHIFT MED ROOM TOUR WITH MANAGER OR ASSISTANT MANAGER
 - EXPLAIN INTERNAL/EXTERNAL/CONTROL/PRN
 - STOCK MEDS
 - FIRST AIDE/BIOHAZARD SUPPLIES
 - DEAD DRUG BOX/DESTROYER JUG
 - SHOW HOW TO GET INTO EPOCRATES
2. DMA TRAINING CLASS WITH REGIONAL NURSE
3. CLASS ROOM TRAINING WITH HOME MANAGER OR ASSISTANT MANAGER
 - NAVIGATE QUICKMAR AND LOGIN
 - TEST GUY RESIDENT MED PASSES
 - MEDICATION REFUSALS AND DOCUMENTATION PROCESS
 - EXCEPTIONS AND WHEN TO USE THEM
 - EXPLAIN PRN PROCESS DOCUMENTATION AND FOLLOW UP
 - WORK ON DMA MEDICATION LISTS
 - PASSING AND COUNTING CONTROLS
 - SHOW INSULIN TRAY PROCESS
4. 5 SEPARATE DAYS OF MEDICATION PASSES WITH A DMA MENTOR
5. FINAL EVALUATION WITH HOME MANAGER OR ASSISTANT MANAGER

Staff Signature Anne Dowell Date 2-23-22
Home Manager Signature _____ Date _____
Nurse Signature _____ Date _____

Bloodborne Pathogens Training Video—Posttest

Administer this test after showing the *Bloodborne Pathogens Training Video* to new employees and during annual bloodborne pathogens training sessions.

Name: Anne Dowell

Department: Beacon County Fire Home Date: 2-23-22

1. (T) (F) A needlestick is the only way to become infected with bloodborne pathogens in a medical facility.
2. (T) (F) Four conditions necessary for bloodborne pathogen infection transmission are
 - a. sufficient amount of infectious material
 - b. sufficient virulence of disease
 - c. absence of universal precautions
 - d. lowered resistance levels of workers
3. (T) (F) Hepatitis B virus cannot survive in dried blood on environmental surfaces.
4. (T) (F) Employers must offer the hepatitis B vaccine to employees who are occupationally exposed to blood.
5. (T) (F) Hepatitis C is a bloodborne pathogen, and there is an effective vaccine that prevents infection.
6. (T) (F) Your facility's exposure control plan lists the job positions that are at risk to bloodborne pathogen exposure.
7. (T) (F) Under universal precautions, employees need to assume that the blood and certain body fluids of only very sick patients are infectious.
8. (T) (F) Universal precautions do not apply to feces, nasal secretions, sputum, sweat, tears, urine, and vomitus unless they contain visible blood.
9. (T) (F) Engineering controls isolate or remove hazards from the workplace; work practice controls reduce the likelihood of exposures by changing the way a task is performed.
10. (T) (F) Selecting safety needles and establishing handwashing procedures are both examples of engineering controls.
11. (T) (F) Employees must wash their hands with soap and running water immediately after using alcohol-based gel products or antiseptic towelettes to clean their hands after possible bloodborne contaminations.
12. (T) (F) You may eat and drink in areas where bloodborne pathogens exist if you are careful.
13. (T) (F) Examination gloves and sterile gloves may not be reused.
14. (T) (F) Employees must not wear bloodborne pathogen-contaminated protective clothing such as scrubs outside the workplace area, nor should they take them home for laundering.
15. (T) (F) After activating the safety feature on a disposable sharp, it is acceptable to dispose of it in a regular trash bag.
16. (T) (F) A written cleaning schedule for environmental surfaces is necessary only until all staff undergo training.
17. (T) (F) Always use a mechanical means, such as tongs, forceps, or a brush and dustpan to pick up broken glassware contaminated with blood.
18. (T) (F) After exposures from a needlestick, immediately wash the injury site with soap and water.
19. (T) (F) Immediate intervention after a bloodborne pathogen exposure can prevent the development of hepatitis B.
20. (T) (F) Promptly reporting an exposure incident is important so that arrangements can be made to quickly test the source patient's blood for HIV, hepatitis B, and hepatitis C.

INITIAL MEDICAL TRAINING TEST

1. T F It is important to report and record any change in physical condition or behavior of a resident.
2. If a person has a seizure, you should:
 - a) keep the person safe and free from injury by laying them down with something soft
 - b) time the seizure and provide first aid necessary once the seizure is over.
 - c) loosen restrictive clothing
 - d) all of the above
3. T F The circulatory system is made up of the blood, heart, and the brain.
4. The primary purpose of the respiratory system is to:
 - a) supply oxygen to the tissue cells and eliminate carbon dioxide wastes from the cells
 - b) bring food and nutrients to the tissue cells
 - c) both a and b
 - d) none of the above
5. T F people with dysphagia have difficulty swallowing and may experience pain while swallowing
6. T F food pieces that are too large for swallowing may enter the throat and block the passage of air causing a person with dysphagia to not be able to swallow safely.
7. T F If a resident is choking you should call 911?
8. T F You can modify a diet without a physicians order or a behavior plan.
9. T F food or liquid that stays in the airway may enter the lungs and allow harmful bacteria to grow, resulting in a lung infection called aspiration pneumonia
10. T F dysphagia is not serious. An individual with dysphagia will still be able to take in enough of the right foods to stay healthy.
11. T F a regular diet is not subject to dietary restrictions
12. T F a mechanical soft diet is used for individuals who have difficulty chewing regular textured foods
13. T F foods that are difficult for the individual to chew are chopped, ground, shredded and/or soft cooked to facilitate chewing and ease of swallowing this is called a mechanical soft diet?

DMA CLASSROOM TRAINING TEST

NAME: Anne Dowell DATE: 2-23-22 SCORE: _____

1. Where should medication keys be kept?

ON DSP AT ALL TIMES

2. T F PRN is an abbreviation for as needed or whenever necessary.
3. T F NPO is an abbreviation for by mouth Nothing By mouth
4. T F Prescription medication, including dietary supplements, or individual special medical procedures do not need to have a physician or dentist order.
5. T F Prescription medications are to be kept in the original pharmacy container which is labeled for a specific resident, and locked and refrigerated if required.
6. T F You should preset each resident's medication in order to save time.
7. If a resident can't swallow their medications and needs to be crushed, we need:
- a pill crusher
 - the resident to chew the pill
 - a physician's order
8. The medication administration record (MAR) contains the following information:
- the medication, the side effects, and time to be administered.
 - the medication, the dosage, the side effects
 - the medication, the dosage, label instructions for use, and time to be administered
 - the medication, dosage
9. The following information about each medication must be obtained before it is given:
- purpose of medication and therapeutic effect
 - unwanted side effects
 - any known drug interactions with drugs the resident is currently is taking
 - a and c
 - All of the above

DMA CLASSROOM TRAINING TEST

21. T F It is important to avoid distractions when preparing and or passing medications?
22. Prior to administering medications to a resident you should:
- ask the resident to tell you his or her name
 - identify the resident with his or her photo on EMAR
 - hand them a glass of water
 - All of the above
23. What is the medication administration time frame?
- half hour before and half hour after the correct administration time.
 - one hour before and one hour after the correct administration time
 - whenever the resident decides to take his or her medication
24. T F Good hand-washing technique is not important when you are passing medications.
25. T F When assisting a resident to apply a topical medication, it is alright to use your fingers to remove the medication from the jar.
26. T F Liquid medication is poured at eye level.
27. T F The resident has the right to refuse medication, but also has the right to know the consequences of refusing the medications.
28. T F Controlled substances must be counted by the on-coming shift (DMA) and the-going shift (DMA).
29. T F It is alright to store internal and external medications together.
30. T F When a blood sugar on a diabetic client is below 70, you should call the medical staff or on call personnel, and treat them with the hypoglycemic protocol and retest their blood sugar in 20 minutes?

Hands on Medical Training for all new DCS

Vital Signs: Pulse, respirations, blood pressure, temperature, pulse oximeter, weight-Licensing requirements

Hand washing

Proper gloving

Universal precautions

Prevention of communicable diseases (MRSA, Influenza, respiratory infections)

Transferring: Gait belt use, wheelchair, shower chair, in or out of vehicles

Fall prevention: walker use, no throw rugs, hand rails, well lit hallways

Eating disorders: dysphasia and choking, positioning, special feeding equipment

Special Diets: pureed, thickit, mechanical soft

Hands on DMA Introductory

Blood pressure and pulse

Glucose testing and procedure

Hypoglycemic/Hyperglycemic protocols

Insulin: Expiration, pens, syringes, administration, storage

Liquid medications

Bubble packs

Reading labels

EMAR and paper MAR

Controlled substance sheets

Advanced directives, DNR status, Hospice

Staff Signature *Ann O'Neill* Date 2-23-22

Nurse Signature _____ Date _____

A. Dowell

Bloodborne Pathogens Training Video— Pretest

Administer this test prior to showing the *Bloodborne Pathogens Training Video* to new employees and during annual bloodborne pathogens training sessions.

Name: Anne Dowell

Department: Beacon County Line Rd - Date: 2-23-22

1. (T) (F) Routine duties in a medical facility will not expose you to bloodborne pathogens.
2. (T) (F) A single drop of infectious blood is too small an amount to be an exposure hazard.
3. (T) (F) Hepatitis B and C and HIV are bloodborne pathogens.
4. (T) (F) Universal precautions can be an effective approach to preventing exposure to bloodborne pathogens.
5. (T) (F) If you wash your hands before putting on gloves, you don't have to wash your hands after taking the gloves off.
6. (T) (F) Employers can charge employees for personal protective equipment.
7. (T) (F) Contaminated environmental surfaces can transmit bloodborne pathogens.
8. (T) (F) Contaminated medical equipment must be labeled so employees can take appropriate precautions to prevent exposure. ?
9. (T) (F) If you have an incident involving an exposure, report it at the end of your shift or workday.
10. (T) (F) The employee is entitled to free medical evaluation and treatment if he or she has been exposed to a bloodborne pathogen.