PRN Administration

Competency	Task
☒	Wash Hands
☒	Check Medication Administration Record to Medications to be Given
☒	Gather all supplies necessary for administration
☒	Check person served Allergies
☒	Take out medication from the supply and check against the MAR for accuracy
☒	Checked expiration date on medication label
☒	Compare medication label to MAR for the second time
☒	Compare medication label to MAR for the third time
☒	Documented medication administration correctly per BrightPath policy and procedure
☒	Wait 30 minutes and enter a follow up for medication results.

NARC Counts

Competency	Task
☒	Connect with the incoming staff.
☒	With that staff unlock the med cabinet and remove medication
☒	If med cabinet or NARC box is open please notify DC.
☒	Count NARCs together
☒	Document on the MAR in REAL TIME.

Date: 12.31.2024

Signed by:

Staff Signature:_____ Hal mo
181C43E354F14DD...

Signed by:

Supervisor Signature:_____ Ann Pearson
3A7DBFEF46E942D...

Confirm Medication Administration class completion:

Medication Administration Demonstration/Observation Training Form

Competency	Task
☒	Wash Hands
☒	Check Medication Administration Record to Medications to be Given
☒	Gather all supplies necessary for administration
☒	Check person served Allergies
☒	Name two sources for checking the purpose, side effects and warnings of medication
☒	Take out medication from the supply and check against the MAR for accuracy
☒	Right Medication X Right Dosage X Right Person X Right Date X
☒	Right Time X Right Route X Right Documentation X
☒	Checked expiration date on medication label
☒	Compare medication label to MAR for the second time
☒	Set up medication for administration (prepare medication cup, cup of water, etc.)
☒	Check the medication label against the MAR for the third time
☒	Return the remaining medication to the locked area (make sure it is locked back up)
☒	Identify Individual before administration of medication (Right Person) by verifying name
☒	Explain medication administration procedure to individual and answer any questions they may have
☒	Administer medication according to correct procedure
☒	Disposed of used supplies properly
☒	Documented medication administration correctly per BrightPath policy and procedure

Date: 12.31.2024

Staff Signature: _____

Supervisor Signature: _____

Confirm Medication Administration class completion: