

# Medication Administration

Turn in this sheet to the Program Director when complete

Name: Ella Anderson

	Date	Trainee Initials	Lead Initials
Trainee observes House Lead administer medications	10-1	EA	JD
Trainee administers medications with House Lead observing	10-7	EA	JD
Trainee administers medications with House Lead observing	10-7	EA	JD
Trainee administers medications with House Lead observing	10-8	EA	JD
Trainee administers a PRN medication with House Lead observing	10-7	EA	JD

Trainee Signature: *Ella Anderson*

Lead Signature: *Heidi Doble*

Lead Signature: \_\_\_\_\_

100

100

100

100

100

100

100