

ORAL MEDICATION OBSERVATION CHECKLIST

SITE ORIENTATION

**X = successfully completed
demonstrated or verbalized**

**O = unsuccessfully completed
not observed or verbalized**

Upon completion of the TMP program, the facility nurse is to determine staff readiness to administer medications. At a minimum, the following should be covered with the TMP:

- Review location and content of Physician Orders and Standing Order lists
- Explanation of pharmacy system
- Location of facility drug reference
- Medication storage issues
- Medications administration records used in the facility
- Documentation including prescribed and PRN
- Medication error forms and procedure

The following steps have been evaluated:

- 1. Medication knowledgeable (indications, side effects, checks for allergies)
- 2. Washes hands
- 3. Assembles necessary equipment
- 4. Compares medication label to MAR x3
- 5. Checks expiration date
- 6. Prepares the dose using aseptic technique
- 7. Secures medication supply
- 8. Identifies consumer
- 9. Administers medication using aseptic technique
- 10. Ensures medication is swallowed
- 11. Washes hands
- 12. Documents medication given in the MAR
- 13. Returns to observe and documents effects of PRN medications

COMMENTS: _____

Med trainee-print Doug Kopsong Date 2-24-20

Med trainee-sign Doug Kopsong Date: 2-24-20

PASS: Needs Re-Training:
Nurses Signature/Date: J. Andersen RW Date 2-24-20

EAR MEDICATION OBSERVATION CHECKLIST

SITE ORIENTATION

**X = successfully completed
demonstrated or verbalized**

**O = unsuccessfully completed
not observed or verbalized**

Upon completion of the (Trained Medication Passer) TMP program, the facility nurse is to determine staff readiness to administer medications. At a minimum, the following should be covered with the TMP:

- Review location and content of Physician Orders and Standing Order lists
- Explanation of pharmacy system
- Location of facility drug reference
- Medication storage issues
- Medications administration records used in the facility
- Documentation including prescribed and PRN
- Medication error forms and procedure

The following steps have been evaluated:

- 1. Medication knowledgeable (indications, side effects, expiration date, allergies)
- 2. Compare medication sheet with the medication label x3
- 3. Wash hands
- 4. *Identifies the individual*
- 5. *Puts on gloves*
- 6. Assemble equipment necessary for administration of ear drops
- 7. Position
 - a. If lying, put flat and turn head to opposite side
 - b. If sitting in chair, tilt head sideways until ear is as horizontal as possible
- 8. Clean entry to ear canal with a clean wipe
- 9. Observe affected ear for any unusual condition prior to ear drop administration which should be reported to the licensed nurse.
- 10. Do not contaminate the dropper by touching any part of the ear canal to the ear.
- 11. Administer the ear drops by pulling the ear gently backward and upward
- 12. Administer the number of drops prescribed into the ear canal
- 13. Client to maintain the required position for two or three minutes.
- 14. If drops ordered for both ears wait at least five minutes before putting drops in second ear, repeat same procedure.
- 15. *Removed gloves, washes hands, disposes of gloves and waste according to policy*
- 16. Document the ear drops administered
- 17. Return to observe client if ear drops instilled for specific results. Observe and chart the results.

COMMENTS: _____

Med trainee-print Doug Kapseng

Date: 2.24.20

Med trainee: Rod Moore

Date: 2.24.20

PASS: Needs re-training: _____ Nurses signature/Date [Signature] RN 2.24.20

S:\Nurse\Medication Administration Packet

EYE DROPS/OINTMENT OBSERVATION CHECKLIST

SITE ORIENTATION

**X = successfully completed
demonstrated or verbalized**

**O = unsuccessfully completed
not observed or verbalized**

Upon completion of the (Trained Medication Passer) TMP program, the facility nurse is to determine staff readiness to administer medications. At a minimum, the following should be covered with the TMP:

- Review location and content of Physician Orders and Standing Order lists
- Explanation of pharmacy system
- Location of facility drug reference
- Medication storage issues
- Medications administration records used in the facility
- Documentation including prescribed and PRN
- Medication error forms and procedure

The following steps have been evaluated:

- 1. Medication knowledgeable (indications, side effects, expiration date, allergies)
- 2. Assemble equipment necessary for administration of eye drops
- 3. Check that the label on the medication container corresponds with the medication listed on the med card three times.
- 4. *Identifies the individual*
- 5. *Wash hands. Put on gloves*
- 6. Have client sit or lie down
- 7. Observe affected eyes for any unusual condition which should be reported to the nurse
- 8. *Cleaned eye with a gauze/tissue.*
- 9. Position with head back and looking upward
- 10. Separate lids of the affected eye, approach eye from below and outside the clients field of vision. Avoid contact with the eye/eye lid.
- 11. Apply drops/ointment gently near center of lower lid (not allowing drops to fall more than one inch before striking eye) with prescribed amount.
- 12. Close eyes gently. Ask client to keep eyes closed for a few minutes.
- 13. Dab excess medication with a clean wipe using a separate clean wipe for each eye, if drug is administered to both eyes.
- 14. Position comfortably
- 15. Wash hands
- 16. Document the medication administered
- 17. *Removed gloves, washed hands, disposed of gloves and waste according to policy*
- 18. Return to observe eyes, if ointment or drops applied for specific results.
Observe and document the results

COMMENTS: _____

Med trainee-print Doug Kopsong Date: 2.24.20
 Med trainee-sign Doug Kopsong Date: 2.24.20

PASS: Needs Re-training: _____ Nurses Signature/Date J. Anderson RN 2/24/20

TOPICAL MEDICATION OBSERVATION CHECKLIST

SITE ORIENTATION

X = successfully completed
demonstrated or verbalized

O = unsuccessfully completed
not observed or verbalized

Upon completion of the TMP program, the facility nurse is to determine staff readiness to administer medications. At a minimum, the following should be covered with the TMP:

- Review location and content of Physician Orders and Standing Order lists
- Explanation of pharmacy system
- Location of facility drug reference
- Medication storage issues
- Medications administration records used in the facility
- Documentation including prescribed and PRN
- Medication error forms and procedure

The following steps have been evaluated:

- 1. Medication knowledgeable (indications for use, side effects, allergies, expiration date)
- 2. Compare medication card with the physicians order on the medication sheet x3
- 3. *Identifies individual*
- 4. *Explained the procedure and provided privacy*
- 5. Wash hands and use aseptic technique throughout procedure
- 6. *Put on gloves*
- 7. Administer the medication according to prescribed directions
- 8. *Removed gloves, washed hands, discarded gloves and waste according to policy*
- 9. Document the medication administered, if a PRN include results

COMMENTS: _____

Med trainee-print Doug Kopsong Date: 2.24.20
Med trainee-sign Doug Kopsong Date: 2.24.20
PASS: Needs Re-Training: _____
Nurses Signature/Date J. Anderson RN Date 2/24/20

SMELLING SALTS ADMINISTRATION

STAFF TRAINING CHECKLIST

X = Successfully completed step
(Demonstrated skill/Verbalized correct information)

O = Unsuccessfully completed step
(Did not demonstrate skill/Verbalized incorrect information)

PAI Nurse will provide staff with an overview of the individual's seizure protocol and specific information about the signs and symptoms of their seizures. To demonstrate competency, the staff will complete all steps or verbally indicate what they would do.

- Wash hands and put on gloves.
- Hold smelling salt inhalant away from your face with gloved hand.
- Crush the inhalant between the thumb and forefinger.
- Carefully bring the crushed inhalant to the nostril area of the individual.
- Once the individual regains clarity and focus, discard the inhalant by placing it within the gloves and place in trash.
- Document the use of the smelling salt inhalant in the individual's Medication Administration Record (MAR).

Passed:

Needs Re-Training: _____

Date for Re-Training: _____

COMMENTS: _____

Staff Name (Print) Doug Kopsong

Date: 2.24.20

Staff Signature [Signature]

Date: 2.24.20

Nurse Signature [Signature]

Date: 2.24.20

INHALER ADMINISTRATION OBSERVATION CHECKLIST

SITE ORIENTATION

**X = successfully completed
demonstrated or verbalized**

**O = unsuccessfully completed
not observed or verbalized**

Upon completion of the TMP program, the facility nurse is to determine staff readiness to administer medications. At a minimum, the following should be covered with the TMP:

- Review location and content of Physician Orders and Standing Order lists
- Explanation of pharmacy system
- Location of facility drug reference
- Medication storage issues
- Medications administration records used in the facility
- Documentation including prescribed and PRN
- Medication error forms and procedure

The following steps have been evaluated:

- 1. Medication knowledgeable (indications, side effects, protocol for use, allergies)
- 2. Identify individual.
- 3. Wash hands, put on gloves.
- 4. Assemble necessary equipment
- 5. Shake the inhaler, remove the cap and inspect mouthpiece, check expiration date
- 6. Hold the inhaler upright
- 7. Attach spacer or mask/flexible tubing to mouth
- 8. Client to exhale, when inhales press down on the canister, administer dose per order
- 9. Instruct client to hold breath
- 10. If mask worn with spacer, leave mask on until mist is inhaled.
- 11. Wait one (1) minute between puffs five (5) minutes between different medications
- 12. Document medication given on medication sheet, if PRN document results.
- 13. Wash hands.

COMMENTS: _____

Med trainee-print Deug Kapseng

Date: 2.24.20

Medtraine-sign [Signature]

Date: 2.24.20

PASS: Needs retraining: _____ Nurses Signature/Date: [Signature] 2.24.20

S:\Nurse\Medication Administration Packet

EPIPEN ADMINISTRATION OBSERVATION CHECKLIST

STAFF: Doug Kapsang

PAI NURSING STAFF: _____

X = Correctly completed step (Demonstrated or completely described required actions)

O = Incorrectly completed (Committed errors in the demonstration or incorrectly described required actions)

When any treatment is prescribed by a physician, the following general protocol will be reviewed with the staff as a part of the administration training:

- Review the location of physician's orders and/or standing orders list.
- Provide an explanation of why the treatment being trained on would be needed.
- Give information about the location of the PAI site's drug reference book and/or web-based resources.
- Provide a review of the storage of the medication, supplies, etc. needed for the treatment being trained.
- Review the location of the Medications Administration Record (MAR) forms.
- Review the documentation practices for both routinely administered and PRN medications.
- Review the steps to take to identify and report a medication error.

The following training steps have been demonstrated and/or reviewed and competency achieved:

- * **CALL 911 – THE USE OF AN EPIPEN WILL REQUIRE EMERGENCY MEDICAL SERVICES (EMS) EVALUATION.**
- 1. Assess the individual for signs and symptoms of a severe allergic reaction.
- 2. If the cause of the allergic reaction is an insect bite, remove the stinger if possible.
- 3. Remove the blue protective cap on the EpiPen.
- 4. Firmly hold the individual's thigh.
- 5. Place the orange tip of the EpiPen on the lateral thigh.
- 6. Press the EpiPen into the thigh until auto-injector discharges (you will feel the click as the needle ejects).
- 7. Hold the EpiPen in place for **10-15 seconds**.
- 8. Remove the injector and give to the EMS for disposal.
- 9. Massage the injection site for **10 seconds** with gloved hands.
- 10. Stay with the individual, assessing respiration rates and pulse. Initiate CPR if needed.

PASSED:

FAILED: _____

RETRAINING DATE: _____

COMMENTS: _____

Staff Signature Doug Kapsang

Date: 2-24-20

PAI Nursing Staff Signature: J. Andersen RN

Date: 2-24-20

GLUCAGON INJECTION

STAFF TRAINING CHECKLIST

X = Successfully completed step

O = Unsuccessfully completed step

(Demonstrated skill/Verbalized correct information)

(Did not demonstrate skill/Verbalized incorrect information)

PAI staff will review the PAI Glucagon (rDNA origin) Injection Standard of Operation prior to meeting with the nurse. PAI Nurse will review signs and symptoms of low blood sugar with the staff during the meeting. To demonstrate competency, the staff will complete all steps or verbally indicate what they would do.

Notify PAI Nursing staff as soon as the individual begins to present symptoms of low blood sugar and follow their instructions.

If a PAI nurse is unavailable and the individual meets the physician's criteria for requiring an injection of glucagon: Call 911. (If possible, designate another staff to gather the individual's emergency information and meet the first responders.)

Follow the individual's glucagon medication order per PAI's Medication Administration Policy.

Put on gloves.

Preparing the Glucagon: Remove the flip-off seal from the bottle of glucagon.

Wipe the rubber stopper on the bottle with an alcohol swab.

Remove the needle protector from the syringe and inject the entire contents of the syringe into the bottle of glucagon.

DO NOT REMOVE THE PLASTIC CLIP FROM THE SYRINGE. Remove syringe from the bottle.

Swirl bottle gently until glucagon dissolves completely. GLUCAGON SHOULD NOT BE USED UNLESS THE SOLUTION IS CLEAR AND OF A WATER-LIKE CONSISTENCY.

To Inject Glucagon: Using the same syringe, hold the bottle upside down and, making sure the needle tip remains in solution, gently withdraw all of the solution (1 mg mark on syringe) from the bottle. The plastic clip on the syringe will prevent the rubber stopper from being pulled out of the syringe; however, if the plastic plunger rod separates from the rubber stopper, simply reinsert the rod by turning it clockwise. The usual adult dose is 1 mg (1 unit). DISCARD UNUSED PORTION.

USING THE FOLLOWING DIRECTIONS, INJECT GLUCAGON IMMEDIATELY AFTER MIXING

Cleanse injection site per order, e.g., on the stomach, buttock, arm, or thigh with an alcohol swab.

Insert the needle into the loose tissue under the cleansed injection site and inject all of the prescribed glucagon solution.

Apply light pressure at the injection site, and withdraw the needle. Press an alcohol swab against the injection site.

Turn the individual on his/her side as when an unconscious individual awakens, he/she may vomit. Turning the individual on his/her side will prevent him/her from choking.

FEED THE INDIVIDUAL AS SOON AS HE/SHE AWAKENS AND IS ABLE TO SWALLOW. Give the individual a fast-acting source of sugar (such as a regular soft drink or fruit juice) and a long-acting source of sugar tolerated by the individual (such as crackers, cheese etc.) if possible.

If within 15 minutes, emergency medical personnel have not arrived and the individual has not awoken, administer another dose of glucagon following the above steps if a second dose is prescribed.

Review: Possible Problems/Issues with Glucagon Treatment -- Severe side effects are very rare, although nausea and vomiting may occur occasionally and a few people may be allergic to glucagon or to one of the inactive ingredients in glucagon, or may experience rapid heartbeat for a short while.

Document on MAR and complete a PAI Minor Injury or Illness Report.

Passed: X

Needs Re-Training: _____

Date for Re-Training: _____

COMMENTS: _____

Staff Name (Print)

Deug Kapsang

Date: 2.24.20

Staff Signature

Dyke/Kova

Date: 2.24.20

Nurse Signature

J. Anderson RN

Date: 2-24-20

PRINCIPLES OF MEDICATION ADMINISTRATION

As a trained medication passer, I understand and adhere to the following:

1. I always pass medications under the delegation and supervision of a licensed nurse.
2. Before preparing and administering medication I must have the:
 - Knowledge about the medication(s) to be administered. Being medication knowledgeable means knowing intended purpose, common side effects, life threatening effects, knowledge of what to do should a life threatening effect occur and proper route of administration.
 - Knowledge about the individual's general health and condition that is receiving the medication.
 - Skills necessary to administer medication(s).
 - Knowledge that "no drug is harmless."
 - Knowledge of my own limitations and the line of responsibility related to medication administration.
 - Knowledge and ability to practice ethical behavior relating to medication administration: to pass medications to one client at a time and to pass those medications that I set up. I realize that I must set a good example to my co-workers and that others will learn from my demonstration of administration techniques.
 - Skills to properly document the medication administration process.
 - Knowledge and ability to practice cleanliness skills including proper hand washing and infection control techniques.
 - Knowledge and ability to practice organizational skills including giving medications accurately and safely.
 - Knowledge to pass any medication only with a physician order.
 - Knowledge that some medication administration procedures are very individualized for a person.
 - Understanding that constant practice and continuing education about medications is important.
 - Knowledge that a medication passer may not give PRN medications without involving the assessment of a nurse.

Signature Douglas Kory

Date 2/24/20