**Consent for Self-Administration of Medication By Resident**

Upon admission, the Resident will be advised of their right to self administer medication and also be cautioned on the risks of self administration. It shall be made clear that when the nurse issues the medications, methods are followed to properly monitor the drug, dosage, route and regimen.

In compliance with OBRA regulations, resident is to indicate choice of medication administered.

ADMINISTRATION BY NURSE

or

SELF ADMINISTRATION

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Name or Resident)

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Facility Nurse)

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_