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|  Medication Administration | NO.  |
| Purpose: To provide a safe method of delivering medication to residents.Statement: The facility will provide pharmaceutical services, including procedures that assure the accurate acquiring, receiving, dispensing, and administering of all medications, to meet the needs of each resident.Procedure:1. When getting the medication out of the resident’s drawer, check to make sure it is the:
2. Right Resident
3. Right medication
4. Right dose
5. Right time
6. Right route
7. Check that the name of the Medication Administration Record (MAR) matches the name of the resident’s slot and the name on the medication’s label.
8. Check the label of the medication against the order on the resident’s MAR, making sure that everything matches including the:
9. Name of the medication
10. Dose
11. Route
12. Times to be given
13. Scan the resident’s other medications orders to make sure there are no contraindications between the medications.
14. Check the resident’s allergies listed on the Mar to make sure the resident is not allergic to the medication.
15. If the Unit Nurse is unfamiliar with the medication, he should:
16. Look it up in the nurse’s drug handbook that is on the medication cart or at the nurses station.
17. Call the pharmacist and/or physician for clarification.
18. Look for the manufacture guidelines at the nurses’ station if it is a recently released medication.
19. Make sure the time for the medication is correct. Medication times must be adhered to, but there is a 1 hour leeway prior to and following the schedule and administration time.
20. Check to make sure the square in the MAR for the dose has not already been initialed as given.
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|  Medication Administration | NO.  |
| 1. Check what vital signs should be monitored or other assessments performed before the medication is to be given, perform the necessary assessments, and record the information on the MAR. Pre-administration assessments may include:
2. Blood pressure
3. Pulse
4. Blood glucose values
5. Check for any special instructions the medication has for administration, such as:
6. Flushing gastrostomy tubes
7. Crushing medications – A list of medications it is permissible to crush can be found at the back of the MAR.
8. Shaking
9. Rotating patch or injection sites
10. Giving medications with or between meals
11. Liquid medications should be measured at eye level.
12. Confirm the identity of the resident.
13. A photograph of the resident is in the MAR on the page before the resident’s medication orders.
14. Ask the resident to tell you his/her name. Do not ask, for example, “Are you Mrs. Jones?” A confused resident could give an incorrect response.
15. Check the room number and the bed number.
16. Check the resident’s arm band.
17. Make sure the resident is informed and educated about any new medication, including its benefits and potential side effects. Document in the resident’s chart that the resident was informed.
18. The Unit Nurse must watch the resident take the medication, and no medication must ever be left in the resident’s room.
19. After the resident has taken the medication, immediately initial its square in the MAR. Never delay this action.
20. Wash hands thoroughly between residents. The use of alcohol gel sanitizer is permitted during medication pass if a sink is not readily available.
21. Use Standard Precautions as needed when giving medications, such as for administering eye drops or putting medications in a gastrostomy tube.
22. Oral medications may be administered to the resident in the Dining Room if the resident is agreeable, but medications by any other route must not be given in the Dining Room. Resident privacy and dignity must be maintained when giving medications.
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|  Medication Administration | NO.  |
| 1. Whenever a PRN is administered, the Unit Nurse must document in the MAR and in the resident’s chart.
2. Why the medication was given
3. Date and time administered
4. Dose and route of administration
5. Effectiveness
6. For psychotropic medications, that other interventions were tried and failed before the medication was administered.
7. Whenever a Medication is not given, the Unit Nurse must initial and circle the medication’s square in the MAR, and document in the resident’s chart:
8. Date and time
9. Why the medication was not given, such as:
10. Refusal (it is the resident’s right to refuse, but it should be explained to the resident what the potential effect would be for not taking the medication)
11. NPO
12. Ordered to be held by the physician
13. The medication being unavailable is not a valid reason for not giving the medication, and should never be documented as the reason.
14. If the medication is not in the emergency supplies, it must be called in to the pharmacy so it can be administered as soon as possible.
15. The physician must be notified if the pharmacy cannot bring the dose by an acceptable time.
16. The resident’s physician must be notified of any withheld medications, and the Unit Nurse must document the notification and the physician’s response.
17. If a resident is NPO, the Unit Nurse must clarify with the resident’s physician which medications are to be given or withheld.
18. If medications are ordered to be withheld, the Unit Nurse must mark a straight line with ink through the squares for the medication in the MAR, and write by it:
19. Reason withheld
20. Start and stop dates for withholding the medication
21. Her Initials
22. If a medication is discontinued, the Unit Nurse must:
23. Mark through the entire medication order in the MAR.
24. Draw a line in ink through the medication’s unused MAR squares.
25. Write by the order in the MAR, “D/C”, initial, and date.
26. Pull the medication from the resident’s cart and supply drawers, and place them in the medication room.
27. Notify the pharmacy so this will be updated on the next month’s MARs.
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|  Medication Administration | NO.  |
| 1. The medication cart should always be locked unless it is in direct view of the Unit Nurse.
2. The unit Nurse should keep the medication cart clean and free of clutter, and at the end of the shift empty the cart’s garbage container, and restock the cart with:
3. Medication cups and containers
4. Water cups
5. Spoons
6. Straws
7. Applesauce and/or pudding

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