

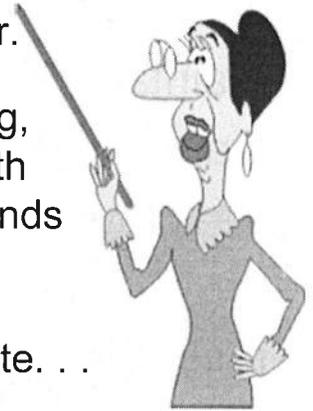
MEDICATION ADMINISTRATION FOR UNLICENSED PERSONNEL

Tennessee
Department of Intellectual and Developmental Disabilities

Training Curriculum

Expectations

- Act in a professional manner.
- Disruptive behavior, cheating, lying, or failure to comply with class requirements are grounds for dismissal from class.
- Classroom rules and etiquette. . .

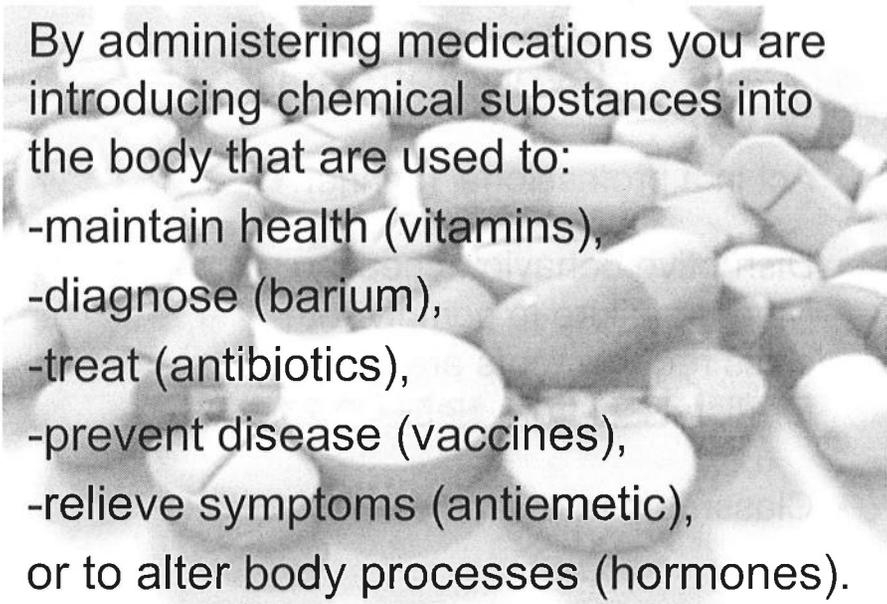


Rules

- Requirements apply to the training, approval, and monitoring of unlicensed personnel to administer medications to any person who is enrolled in a DIDD home and community based waiver program and any person served by an agency that is both licensed under Title 33 and under contract with DIDD to provide residential or day services for people with intellectual and/or developmental disabilities, including persons served in the CHOICES program.
- Administration shall mean giving medication according to the written practitioner order and making a written record of each medication administered, including the time and amount taken.
- **Administration does not include evaluation, assessment, or judgment.**

Certification

- 20 hours of classroom instruction.
- A minimum score of 80% is required for written test.
- A minimum score of 80% is required for skills test.
- The certified staff is responsible for maintaining current certification.
- The employing agency is responsible for maintaining current certification of staff.



By administering medications you are introducing chemical substances into the body that are used to:

- maintain health (vitamins),
 - diagnose (barium),
 - treat (antibiotics),
 - prevent disease (vaccines),
 - relieve symptoms (antiemetic),
- or to alter body processes (hormones).

Administration by the oral route is the slowest way for medication to reach the body's cells.

The oral route may be referred to as PO or by mouth.

It is very important for you to understand your limitations of authority and responsibility:

You must **NEVER** attempt to perform tasks for which you are not trained.

If your employer asks you to perform tasks, which are beyond the scope of your training, you must refuse.

Your role and your scope of practice as unlicensed personnel administering medication includes:

1. Administration of medications by the following routes: oral, eye, ear, inhaler, nasal, topical, vaginal and rectal in accordance with the safe standards of practice.
2. Following practitioner orders for administering medications.
3. As a certified staff you **CANNOT TAKE VERBAL OR PHONE ORDERS.**
Only licensed staff (RN or LPN) can take orders.

Medication Administration

Administer – To give medication to a person.

Each agency must have specific policies and procedures for the administration of medications and has an obligation to educate employed unlicensed personnel to these policies and procedures.

In your career your top priority should be promoting and providing the highest quality of care for the persons you serve.

The time they spend with you should be positive, enjoyable and safe.

Your job is very important!

As front line staff, you are the eyes, ears and voice for those you support.

Thank you for choosing this profession and making a difference in someone's life.

Legal and Ethical Issues

Each person has a right to expect the medications that they receive are the same as those prescribed by their practitioner and that certified staff who administer medication are qualified to perform that function.

It is the obligation of everyone administering medication to know and respect the rights of people.

These rights include the right to refuse medications and or treatments and the right to be informed of any consequences that may occur from their refusal.

These rights include the right to know what the medication is for and common side effects.

Communication

Communication is defined as an exchange of information using both verbal and nonverbal skills.

Communication is important in order to provide continuity of care and report significant observations to their health care provider.

- Address the person in terms they understand.

- Respect person's rights at all times.

- Observe and report ANYTHING out of the ordinary for the person.

- unusual sign/symptom or change
- change in behavior
- accident or injury



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Side Effect – Any action/reaction other than the intended effect of a drug.

By recognizing and reporting anything that is different or unusual for the person, you could be identifying a side effect of a drug.

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Additionally, agency training includes recognizing a medical emergency including:

- that a 911 call must not be delayed
- initiation of first aid procedures
- providing information to medical staff
- notification of provider supervisory staff

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MAR

used for

Transcription – The process of transferring a practitioner's order to the MAR.

Always transcribe order exactly as it is written by the practitioner.

Documentation – Creating an immediate record of medications administered or actions taken.

Never document that the medication has been taken before it is given.

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Medication Administration Record

- The person administering medications must accurately document meds that were given on the MAR.
- Remember that the MAR is confidential and its contents should neither be shown nor discussed with anyone not administering care to the person. (HIPAA)
- The MAR lists all medications that have been administered to the person during a particular month.
- Listed medications are copied from the practitioner orders to the MAR; this process is known as “transcribing”.

Practitioner orders may be received in many different forms:

- prescription pad
- office printout
- consult form
- ER record
- fax
- pharmacy generated order (e-script)

Medications are:

Prescribed – by the practitioner

Dispensed – by the pharmacist

Administered – by certified staff or nurses

Guiding Principles for Medication Administration

- Knowledge of safe, clean and proper storage of various types of medications.
 - Internal (medication taken by mouth)
must be stored separately from
 - External (medication administered topically)
- Knowledge that **all** Over-the-Counter (OTC) drugs must be ordered by treating practitioner,

• Knowledge that **all** medications must be labeled by a pharmacist.

- Exception: An OTC that falls within the parameters of the manufacturer's label.

Example:

Ordered - Tylenol 325 milligrams (mg) 2 tablets every 4 hours as needed temperature above 101°F.

Package Label –
325 milligrams (mg) 2 tablets every 4-6 hrs.

- Refer to agency policy for specific rules regarding labels.

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Additional Information:

STAT – now

PRN – as needed

H or h - hour

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• Any OTC that is ordered with specific times, dosages, etc., that do **not** correspond with the manufacturer's label, indicates that labeling by the pharmacy is necessary.

• The practitioner must label "Sample" medications with instructions regarding use.

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EIGHT RIGHTS

- right PERSON
- right DRUG/MEDICATION
- right DOSE
- right ROUTE
- right TIME
- right DOCUMENTATION
- right POSITION
- right TEXTURE

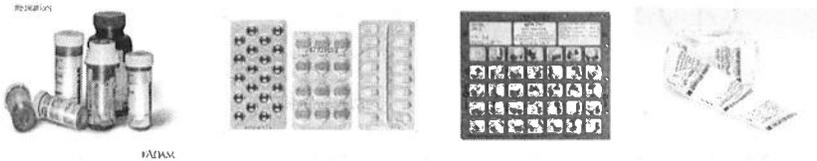
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Medications may be packaged in bottles, bubble packs or other containers but **MUST** have 3 checks **PRIOR** to administration.

Medications must remain in original packaging until administered.



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**AS AN UNLICENSED PERSON
ADMINISTERING MEDICATION
ALWAYS SEEK PROFESSIONAL
ASSISTANCE WHEN IN DOUBT**

**Including abbreviations that you
are unfamiliar with**

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Common Dosages of Medication

mg – milligram

mcg – microgram

ml – milliliter (liquid measure)

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Standard Precautions

Always maintain Standard Precautions during medication administration.

- Proper **Hand Washing** – is the MOST effective method to prevent and control the spread of disease.
- Use gloves when contact with medication, blood or other body fluids is anticipated. Change gloves and wash hands between individual contacts, before and after administering medications.

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Safe Practice of Medication Administration

- Order, MAR and medication label **MUST** match.
- Medication, dose, route, time, (texture and position if indicated) must be ordered by the practitioner and be transcribed to the MAR.
- **Medication must remain in original container.**
- Meds must be identifiable up to the point of administration.
- **AVOID DISTRACTIONS.**

- Never give a medication unless label is present and clearly readable, including any warnings.
- Never give a medication past its expiration date.
- Keep containers tightly closed. Report any change in color, consistency or odor.
- Do not touch pills, capsules, or patches without gloves.
- Pour liquids away from the label side of bottle. (label up – palm of hand)
- Pour liquid meds at eye level.
- Do not prepare medications until ready to give.

- Tell the person receiving the med about the purpose and expected effects.
- Read each MAR carefully. If not clear, refer to the practitioner order or call for clarity.
- Read the med label carefully checking to see that the MAR and label are exactly the same.
- Perform '3 Checks'.

PRIOR TO ADMINISTRATION

1. Compare MAR to label **when taking from supply**
2. Compare MAR to label **when preparing medication**
3. Compare MAR to label **just prior to administration**



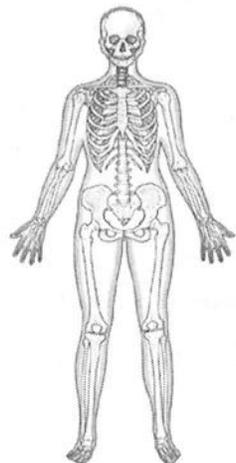
- Do not mix liquid meds with other meds.
- Always identify person by picture.
- Provide privacy as appropriate for the situation.
- Give medications one at a time.
- Give only medications which you have prepared yourself.
- Do not leave medications unattended.
- Stay with the person while taking medications.
- Check that the person swallowed the medication.
- Document only the medications which you give.
- Always check on the person within 30 minutes of administering medications.

- Know the purpose of the med being given, any reactions, warnings, usual dose and specific directions.
- Be familiar with the condition/diagnosis and allergies of the person receiving meds.
- Medications are not to be placed in foods or beverages unless specified by practitioner orders.
- Medications are not to be crushed unless specified by practitioner orders.
- Medications that are expired or no longer needed are to be destroyed. (Refer to agency medication policy)
- Meds prepared and not given must never be returned to the container.

Skeletal System

Consists of bones and cartilage to support and protect the body.

Skeletal System



Common diagnoses/conditions

- Fracture
- Osteoporosis
- Arthritis

Associated medications

- Analgesics
- Non-steroidal Anti-inflammatory Drugs (NSAIDS)
- Steroids
- Narcotic Analgesics

REGULATORY AGENCY

DEA

(Drug Enforcement Agency)

Regulates the importation, use, sale, manufacture and distribution of **controlled substances** which are habit forming and are assigned a Schedule classification.

CONTROLLED SUBSTANCES

➤ MUST be double locked

➤ MUST be counted

includes pills and liquids

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Warning labels/stickers

May be printed on medication label or applied as sticker indicating generic substitution, side effects, or specific instructions.



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REGULATORY AGENCY

FDA

(Food and Drug Administration)

Regulates the importation, use, sale, manufacture and distribution of all **non-controlled drugs** in the U.S.A.

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Medication preparations

Cap - Capsule: Small container made from gelatin.

Tab - Tablet: Most common form used. Pressed in molds.

- Coated or Enteric Coated: Because of bitter taste or to prevent irritation of the lining of the stomach.
- **May not be broken, crushed or chewed.**

Additional Information:

Buccal – Route of administration in which the drug is placed and held in the pocket of the cheek until dissolved.

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Documentation Rules

- Always use **BLACK** ballpoint pens (**never pencil, felt tip pen, gel pen or colored ink**).
- Always write neatly.
- Documentation must include your

INITIALS

FULL SIGNATURE (FIRST & LAST NAME)

TITLE

MUST BE LEGIBLE (READABLE)

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- Refusal – Three (3) attempts should be made within the designated time frame before recording as refused.
- Refusals must be documented on the MAR and reported in accordance with agency policy.

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- Do not erase or use “white-out”;
 - line through the error, initial and date.
- Always document as soon as possible after administering the medication.
- Do not document for another employee.
- Lines are drawn to prevent illegal entry.

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Disposal of Medications

The federal government provides guidelines related to proper disposal of medications.
(e.g., coffee grounds, kitty litter, flushing, etc.)

Follow agency policy regarding medication disposal.

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Endocrine System

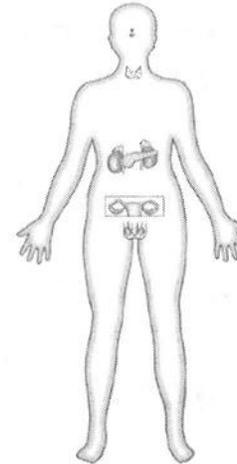
Consists of glands which secrete chemicals called hormones; e.g., thyroid, pancreas.

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Endocrine System



Common diagnoses/conditions

- Diabetes
- Thyroid (hyper/hypo)

Associated medications

- Hormones
- Antidiabetic agents
- Steroids

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Additional info:

- x or X – abbreviation for **times**
- SL - Sublingual – route of administration in which a drug is placed and held under the tongue until dissolved; **should always be administered last.** Do not immediately follow SL med with water.
- Mucous Membrane – Moist membrane lining body cavities and canals that may allow substances to pass through into the body tissues.

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Roman Numerals

ROMAN NUMERALS		ARABIC NUMBERS
Upper Case	Lower Case	
I	i	1
II	ii	2
III	iii	3
IV	iv	4
V	v	5
VI	vi	6
VII	vii	7
VIII	viii	8
IX	ix	9
X	x	10
XI	xi	11
XII	xii	12

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Order/Prescription

CLINIC
000 S. Justen Lane
Anywhere, TN 33333
Phone 000-000-0000
Dr. Bob Jones

Jane Smith Month 4, YYYY

Metformin 500 mg 1 tab po bid for diabetes

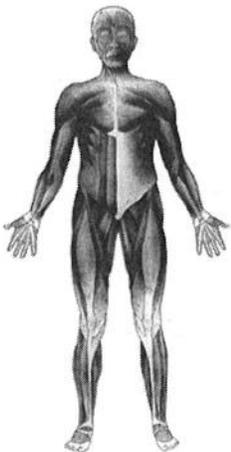
Vitamin B12 500 mcg ii tabs SL q day as supplement

Bob Jones, MD

Muscular System

Consists of muscles which shape the body and allows the joints to move.

Muscular System



Common diagnoses/conditions

- Muscle Spasm
- Muscle Strain
- Muscular Arthritis (Myositis)

Associated medications

- Analgesic
- Non-steroidal Anti-inflammatory Drugs (NSAIDS)
- Muscle relaxants

Order/Prescription

CLINIC
000 S. Justen Lane
Anywhere, TN 33333
Phone 000-000-0000
Dr. Bob Jones

Jane Smith Month 4, YYYY

Indocin 25 mg 1 cap po tid for tendonitis

Ibuprofen 200 mg 2 tabs po qid for pain right shoulder

Bob Jones, MD

Nervous System

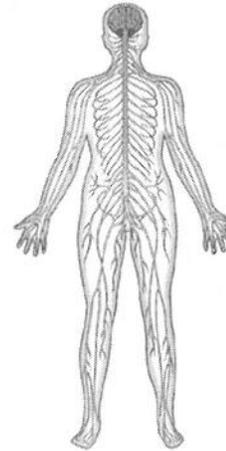
Consists of the brain, spinal cord and nerves to control and coordinate body activities.

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Nervous System



Common diagnoses/conditions

- Seizures
- Stroke
- Trauma (Concussion, Contusion)
- Dementia/Alheimers

Associated medications

- Anticonvulsants/antiepileptics
- Psychotropics
- Antidepressants
- Antianxiety/Sedatives

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Cumulative Effect

Many medications associated with the nervous system may take several days or weeks for the drug to reach an effective level.

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TD (Tardive Dyskinesia)

- Tardive Dyskinesia is a side effect of psychotropic medications.
- Usually occurs after the person has taken the medication for a long period of time.
- Person has involuntary and constant movements of the tongue, jaw, lips or eyes.

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Neuroleptic Malignant Syndrome/ Serotonin Syndrome

- Life threatening reaction to **psychotropic** medications.
- May begin within hours of administration or can happen at any time the person is on the drug.
- High fever, stiff muscles, irregular heart rate, excessive sweating, excessive saliva and unstable consciousness along with other abnormal signs.

Liquid medications

Drugs that have been dissolved in water or alcohol.

Suspensions: Fine undissolved particles of drug mixed with liquid.

Must be shaken vigorously before giving.

Sprays: Drugs prepared for administration by reducing a liquid to a fine spray.

Common Liquid Medication Measurements

- 5 ml - 1 tsp (teaspoon)
- 15 ml - 1 tbsp (tablespoon)
- 30 ml - 1 oz (ounce)

Never use ordinary kitchen spoons

Transcription Notes

- Medications may be ordered that are the same drug but may have a different dose or a different time indicated for administration.
- Transcription must be in 2 boxes to show the different dose.
 - One dose to be given two times a day and a different dose given one time a day.
 - One dose given certain days of the week and a different dose given on other days.

Order/Prescription

Neurology
000 16th Street
Anywhere, TN 33333
Phone 000-000-0000
Dr. Thomas Frent

Jane Smith Month 8, YYYY

Dilantin 125mg/5ml suspension 5 ml po bid and 10 ml po
at 2 pm for seizures

Thomas Frent, MD

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Integumentary System

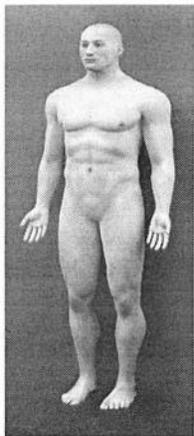
Consists of skin, sweat and oil glands to protect the body from harmful germs and helps regulate body temperature.

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Integumentary System



Common diagnoses/conditions

- Cellulitis
- Scabies/Lice/Bed bugs
- Rash
- Burns
- Decubitus

Associated medications

- Anti-itch creams
- Medicated ointments
- Topical anti-infectives
- Anti-fungals

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Topical medications:

Creams/Ointments are applied locally to the skin or mucous membrane.

Suppository: Drug in a base that melts at body temperature, molded for insertion into the rectum or vagina. May need refrigeration.

Additional Info:

Stop Date – Date last dose of medication is to be given

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Order/Prescription

Clinic
000 S. Justen Lane
Anywhere, TN 33333
Phone 000-000-0000
Dr. Bob Jones

Jane Smith Month 9, YYYY

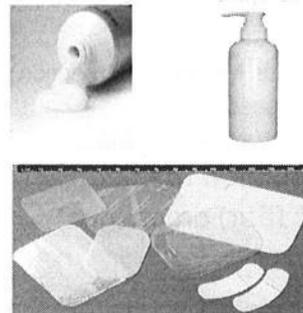
Keflex 250 mg i cap po qid x VII d for cellulitis

Hydrocortisone cream 2.5% apply thin layer to rash on left arm bid

Bob Jones, MD

Topical (skin) Administration

Route of administration in which a drug is placed on the skin or mucous membrane.



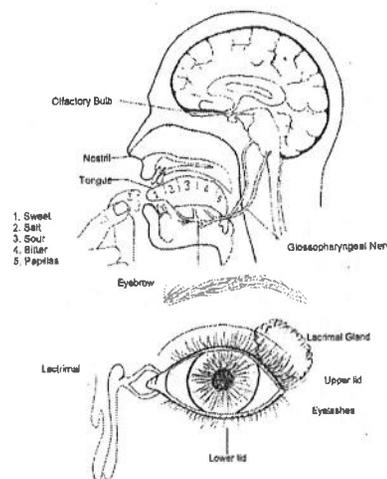
- Maintain guidelines and safety factors for med administration.

- Position so the area to be medicated is exposed.
- Note significant observations, document and report.
- Clean the area if indicated (clean away from the affected area). Do not double wipe.
- If using applicator, do not 'double dip'.
- Use gloves if applying directly.
- Spread medication on affected area.
- Do not let tip of container touch affected area.
- Cover affected area if indicated.

Sensory System

Consists of eyes, ears, nose mouth and skin to provide sight, hearing, taste, smell and touch.

Sensory System



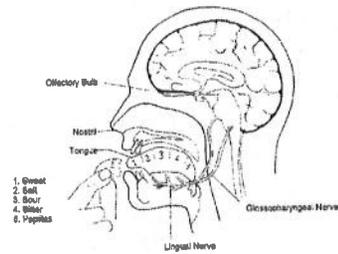
Common diagnoses

- Eye
 - Conjunctivitis
 - Cataracts
 - Glaucoma
 - Dry eyes

Associated medications

- Ophthalmic (Eye) drop (gtt)

Sensory System

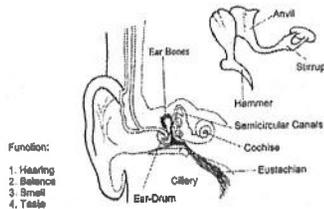


Common diagnoses

- Ear
 - Otitis Media (Ear Infection)
 - Excess ear wax

Associated medications

- Otic (Ear) drops (gtts)



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Order/Prescription

Clinic
000 S. Justen Lane
Anywhere, TN 33333
Phone 000-000-0000
Dr. Ann Lents

Jane Smith

Month 10, YYYY

Artificial Tears 2 gtts both eyes bid for dry eyes

Ann Lents, OD

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Topical (eye) Administration



- Maintain guidelines and safety factors for med administration.
- If cleansing eye. Wipe from inner corner outward.
- Use clean wipe for each wipe.

- Note significant observations and report.
- Shake the medication.
- Position with head back and looking upward.
- Separate lids using forefinger for upper and thumb for lower.
- Approach eye from below.
- Instill drops as ordered. Avoid contact with eye.
- Apply near the center of lower lid.

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Order/Prescription

Clinic
000 S. Justen Lane
Anywhere, TN 33333
Phone 000-000-0000
Dr. Bob Jones

Jane Smith

Month 10, YYYY

Debrox 2 gtts both ears bid X 3 days for excess ear wax

Bob Jones, MD

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Topical (ear) Administration



- Maintain guidelines and safety factors for medication administration.

- Tilt head until ear is as horizontal as possible.
- Note significant observations and report.
- Shake the medication.
- Administer by pulling the ear gently backward and upward (for adult).
- Instill drops as ordered. Do not touch ear canal with dropper/container.
- Maintain position for 2 or 3 minutes.
- If to be instilled in both ears, wait at least 5 min before putting in other ear.

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Respiratory System

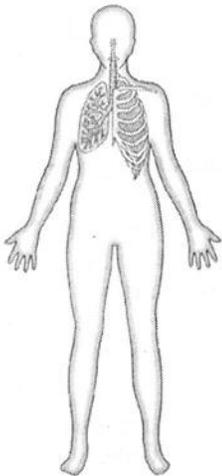
Consists of the mouth, nose, trachea and lungs to provide air (oxygen) to the body's cells.

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Respiratory System



Common diagnoses/conditions

- Pneumonia
- Upper Respiratory Infection (URI)
- Allergies
- Chronic Obstructive Pulmonary Disease (COPD)
- Sinus/Common Cold
- Asthma
- Bronchitis

Associated medications

- Bronchodilators
- Antibiotics
- Antihistamines
- Anti-inflammatories

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Aspiration Pneumonia

Infection in the lungs
caused by
breathing in liquids or food.

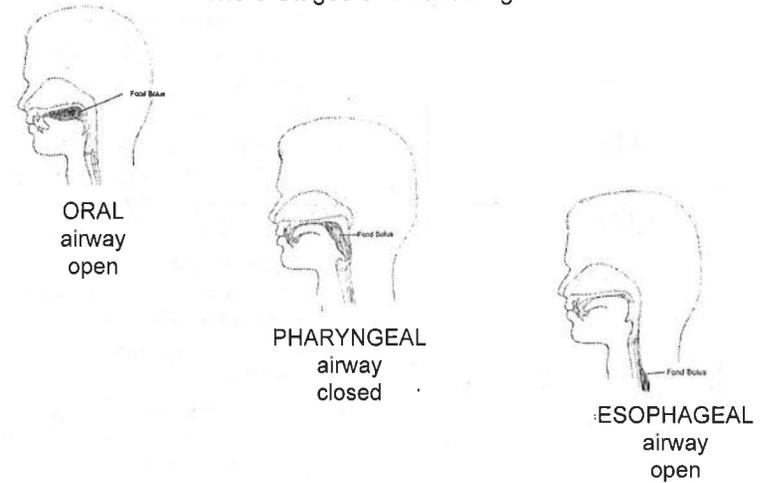
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Swallowing Mechanism

The 3 Stages of Swallowing



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Order/Prescription

Clinic
000 S. Justen Lane
Anywhere, TN 33333
Phone 000-000-0000
Dr. Bob Jones

Jane Smith Month 11, YYYY

Flonase 50 mcg 2 sprays each nostril q day for allergies

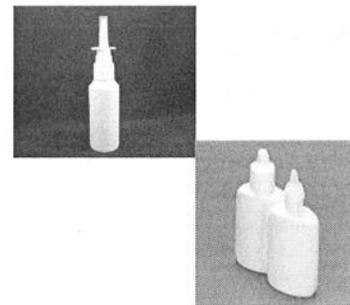
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Nasal Administration



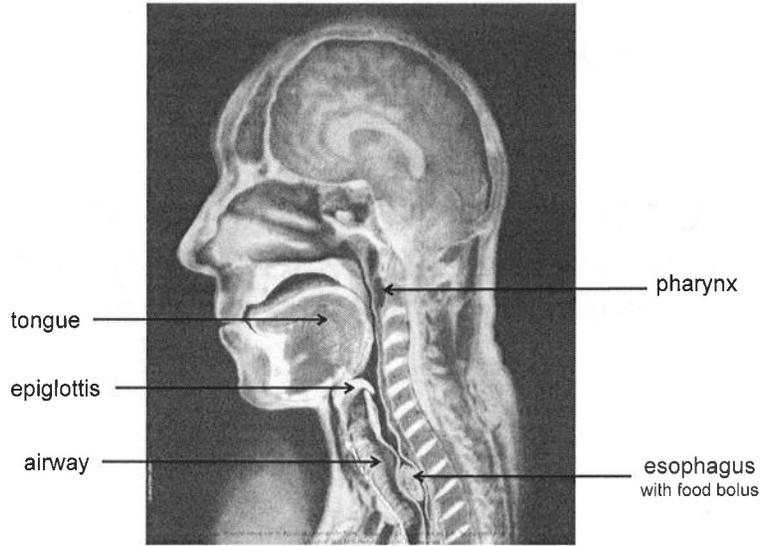
- Maintain guidelines and safety factors for med administration.

- Instruct to blow nose.
- Position sitting with head tilted down.
- Note significant observations and report.
- Shake the medication.
- Place tip of container just inside the nostril. Occlude the other nostril. Instruct to sniff as the container is squeezed.
- Repeat in other nostril if ordered.
- Wipe tip between nostrils and after administration.

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Order/Prescription

Clinic
000 S. Justen Lane
Anywhere, TN 33333
Phone 000-000-0000
Dr. Bob Jones

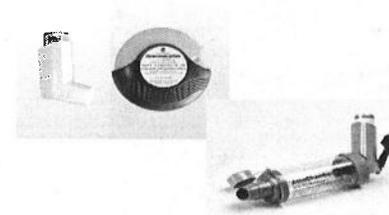
Jane Smith Month 11, YYYY

Proventil 90 mcg 2 puffs inhalation q day for asthma

Bob Jones, MD

Inhalation Administration

Aerosol – Particles suspended in a gas; usually inhaled or sprayed.

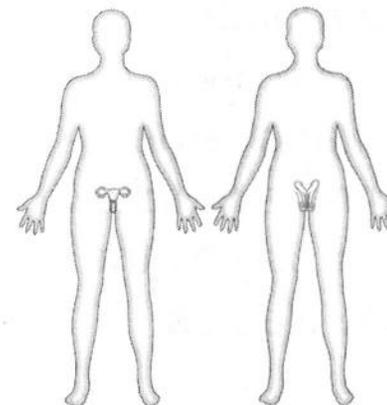


- Maintain guidelines and safety factors for med administration.
- Shake the canister.
- Instruct to slowly breathe out through pursed lips.
- Instruct to seal lips around mouthpiece.
- Compress canister between the thumb and fingers and instruct to breathe in deeply at the same time.
- Release pressure on the canister.
- Withdraw mouthpiece and instruct to hold breath for a few seconds.
- Instruct to breathe normally.
- If more than one inhalation is ordered wait one minute between administrations.
- Wipe mouthpiece following administration.

Reproductive System

Consists of ovaries and uterus in females, testicles in males and allows the creation of a new human being.

Reproductive System



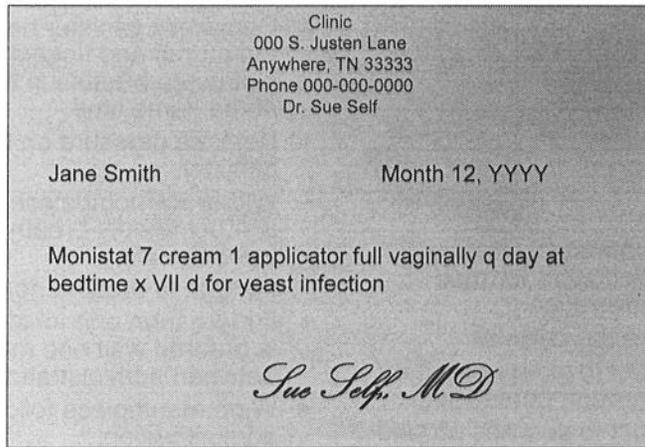
Common diagnoses/conditions

- Female
 - Yeast infection
 - Menopause
- Male
 - BPH (Benign Prostatic Hypertrophy)

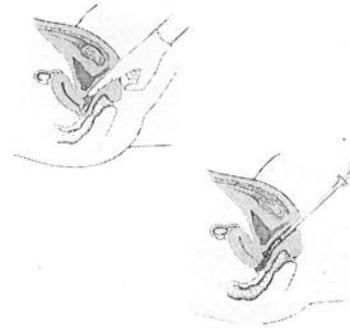
Associated medications

- Antifungal
- Hormone therapy

Order/Prescription



Vaginal Administration



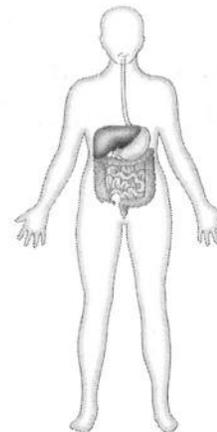
- Maintain guidelines and safety factors for med administration.

- Instill vaginal med before the person retires for sleep, unless otherwise ordered.
- Instruct to empty bladder.
- Position on back with knees bent and legs spread.
- Encourage to relax by breathing through mouth.
- Separate labia and insert suppository with double gloved finger
- or
- Insert applicator with double gloved hand to recommended length and depress plunger.
- Have person remain lying down for at least 10 to 30 minutes.

Gastrointestinal System

Consists of the mouth, esophagus, stomach, liver, gallbladder, small and large intestines and pancreas to take in food, prepare it for use by the body and excrete wastes.

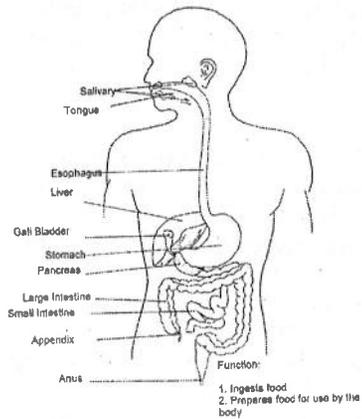
Gastrointestinal System



Common diagnoses/conditions

- Constipation
- Reflux/Heartburn (GERD)
- Gallbladder disease
- Pancreatitis
- Diarrhea
- Hernia
- Appendicitis
- Hemorrhoids
- Ulcers
- Hepatitis

Gastrointestinal System



Associated medications

- Antacids
- Antidiarrheal agents
- Antiemetics
- Antiulcer agents
- Laxatives
- Enemas
- Stool Softeners

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GERD

GastroEsophageal Reflux Disease

The backflow of stomach contents into the esophagus.

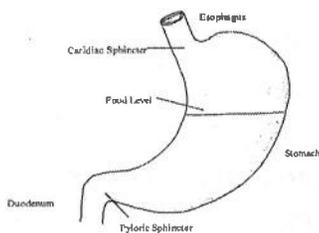
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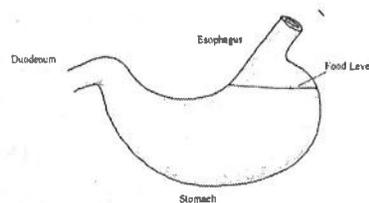
157

Positioning

Upright Position



Lying Position



Additional Information:

-R or r – rectal

-Supp – suppository

-Enteral route is administration by way of the stomach or intestines (by tube) and is **NOT covered by the exemption (you cannot administer enteral meds)**

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Order/Prescription

Clinic
000 S. Justen Lane
Anywhere, TN 33333
Phone 000-000-0000
Dr. Bob Jones

Jane Smith Month 14, YYYY

Amoxil 250 mg 2 caps po stat and 1 cap po tid X 10 days
for UTI

Bob Jones, MD

Order/Prescription

Clinic
000 S. Justen Lane
Anywhere, TN 33333
Phone 000-000-0000
Dr. Bob Jones

Jane Smith Month 14, YYYY

Tylenol 325 mg 2 tabs po q4h prn for temp above 101

Bob Jones, MD

Additional Information

The '30 minute before' rule does not apply to PRN medications

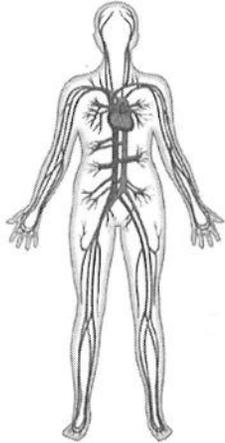
- A medication ordered q 4 hours prn given at 6 pm may not be administered again until 10 pm

PRN medications may not be administered 30 min before time due.

Circulatory System (or Cardiovascular System)

Consists of the heart, blood vessels, blood and lymph system and carries nutrients and oxygen to the body's cells.

Circulatory System



Common diagnoses/conditions

- Hypertension (high blood pressure)
- High Cholesterol
- Excess fluid (edema)
- Angina
- Blood Clots

Associated medications

- Antihypertensives
- Diuretics
- Antiarrhythmics
- Antihyperlipidemics
- Nitrates
- Anticoagulants

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Order/Prescription

Clinic
000 S. Justen Lane
Anywhere, TN 33333
Phone 000-000-0000
Dr. Bob Jones

Jane Smith Month 16, YYYY

Nitroglycerin patch 0.2 mg 1 topically q day for angina

Coumadin 2.5 mg PO 1 tab q day X 2 days alternate with 2 tabs PO q day X 3 days for blood clots

Bob Jones, MD

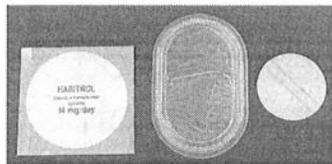
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Transdermal Administration

Route of administration in which a drug is absorbed continuously through the skin into the bloodstream.



- Area must be clean and free of hair for new patch.
- Place directly on the skin at the specified area.
- Gloves must be worn.
- Patch must be labeled with date, time and initials.
- Patch should not be placed in the same spot each application.
- Maintain guidelines and safety factors for med administration.
- Remove old patch, clean area to remove residue.

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Injectable Epinephrine (EpiPen, Auvi-Q)

Life saving measure covered under exemption for severe allergic reaction.



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Routine Insulin Administration

- Allowed by exemption but requires additional specialized individual specific training.
- Does not include drawing up of insulin.
- Does not include sliding scale insulin.

Medication Variance

- Medication variances and omissions can occur during transcribing, preparing, administering or in the documentation of a medication. A medication variance occurs at any time that a medication is given in a way that is inconsistent with how it was ordered by the prescribing practitioner and in accordance with the “Eight Rights” (i.e., right dose, right drug, right route, right time, right position, right texture, right person and right documentation).

- Medication variances and omissions are to be reported on the medication variance form and are categorized according to severity (Categories A-I).
- POTENTIAL - Categories A and B have the potential to cause harm but the medication did not reach the person.
- ACTUAL - In categories C to I, the medication actually reached the person and has the capacity to cause harm, therefore the prescribing practitioner or hospital emergency room shall be contacted.

- Categories E-I require a Reportable Incident Form, with a copy of the Medication Variance Form.
- In all cases, medication administration by someone who was not certified requires investigator notification.

IMPORTANCE OF REPORTING A MEDICATION VARIANCE

- to recognize trends
- to improve safe medication administration

DIDD MEDICATION VARIANCE REPORT

NAME _____ **SS#** _____ **AGE** _____ **M** **F** **AGENCY** _____

DATE VARIANCE OCCURRED _____ **DAY OF WEEK** Sun Mon Tue Wed Thu Fri Sat **WEEKEND/HOLIDAY** Y N

TIME 6a 7a 8a 9a 10a 11a 12n 1p 2p 3p 4p 5p 6p 7p 8p 9p 10p 11p 12a 1a 2a 3a 4a 5a

LOCATION Home Day Program Community Work Other _____

STAFF CLASSIFICATION Nurse Pharm Physician DSS Other **STAFF STATUS** Regular Agency/Contract Float/PRN *Not Certified/Unlicensed

DRUG/DOSE Ordered _____ **DRUG/DOSE** Administered _____ **HIGH ALERT MEDICATION** Y N

ALLERGIC Y N

WRONG Person Med/Drug Time Position Texture/Formulation Documentation Dose extra omitted Route PO SC IM IV Topical Rectal Vaginal Tube Trach Other

DATE VARIANCE DISCOVERED _____ **FACTORS** Product Med Use System Communication Other _____

DESCRIPTION Prescribing Dispensing Transcribing Administering Procurement/Storage Monitoring

COMMENTS _____

CATEGORY

Potential

- A Could result in a variance
- B Identified prior to actual administration

Actual

- *C No harm or unlikely to cause harm
- *D Additional monitoring

Actual

- *E Intervention (practitioner/ER)
- *F Hospitalization
- *G Permanent harm
- *H Near death event
- *I Death

PRACTITIONER NOTIFIED Y N
* Required for C-I

REPORTABLE INCIDENT FORM COMPLETED Y N
* Required for E-I
* Required for Not Certified/Unlicensed

INVESTIGATOR NOTIFIED Y N
* Required for Not Certified/Unlicensed

Signature/Title _____ Date _____

OUTCOME _____

Signature/Title _____ Date _____

MEDICATION ADMINISTRATION RECORD

Month:	Year:	HR	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31		
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MEDICATION ADMINISTRATION RECORD

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PRACTICE MAR

MEDICATION ADMINISTRATION RECORD

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DOB:

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Diagnoses:

