Prerequisite: Trainees must score 85% or higher on the Medication module exam before they take the practicum. Trainees cannot administer or monitor medication administration until they have successfully completed both the medication module exam and practicum.

All trainees complete page 1 AND clinical checklists for each applicable route of administration.

It is highly recommended that medication certification be renewed each year.

Certification of Training in Medication Procedures

_ has successfully attained the competencies as they are outlined in the Medication Training Module (895.06) by obtaining a score of 85% or higher on the written examination.

Regional Staff Trainer

Date

The above named employee is deemed competent in maintaining, storing, retrieving, and controlling access to the medication as well as critically observing the effects on the person ingesting or applying medication.

Licensed Medical Practitioner

Date

	Key for Scoring:	S = Satisfactory;
Name		U = Unsatisfactory

- 1. _____ Follow proper procedures in preparing for medication administration.
- 2. _____ Use infection control procedures including thorough hand washing.
- 3. _____ Verify that the medication label and the physician's order are the same.
- 4. ____ Compare the medication records and medication labels.
- 5. ____ Describe techniques which can be used to achieve swallowing of medications.
- 6. ____ Demonstrate special procedures for controlled substances.
- 7. _____ Use appropriate techniques when positioning the person for medication administration.
- 8. _____ Apply normalization and least restrictive alternative principles during medication administration.
- 1. _____ Use techniques that promote positive interactions and cooperation:
 - a. ____ Demonstrate courtesy and respect in all interactions
- b. ____ Respect the individual's right to privacy
 - c. _____ Individualize techniques based on the unique needs of the individual
 - d. _____ Explain procedures to the individual
 - e. ____ Avoid rushing
 - f. _____ Encourage the person to take an active part in the procedure
- 2.

____Compensate for physiological changes which occur as a result of the aging process when interacting with individuals who are experiencing age related sensory losses.

- 3. ____Store medications and supplies properly.
- 4. ____Follow the principles of proper documentation and reporting.
- 5. ____Demonstrate correct procedures for:
 - a. _____ New medication/changes in medication
 - b. _____ When the individual is away from the agency
 - c. _____ Verbal orders
 - d. _____ PRN medication, standing orders
 - e. _____ Self-terminating orders
 - f. _____ Medication refusals
 - g. _____ Medication errors
- 14.____ Know and observe medication effects.
- 15.____ Observe and report abnormal symptoms of medications.
- 16.____ Observe for symptoms of breathing problems.
- 17.____ List the questions he/she should ask both the physician and pharmacist when accompanying an individual to a medical appointment.

Evaluator's Signature & Title	Date		
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Student Signature	Date	Pass	Fail

CLINICAL CHECKLIST FOR THE ADMINISTRATION OF EYE DROPS

Key for Scoring

S = Satisfactory

U = Unsatisfactory

When administering eye drops, the student :

- 1. Checked to see if eye medication requires dropper. If necessary, included a sterile dropper.
- 2. Prepared eye drops for delivery following directions on the label.
- 3. Had individual sit or lie down. Put on gloves.
- 4. Observed affected eye/s for unusual conditions which should be reported to licensed nurse prior to administration.
- 5. Cleansed eye/s with clean wipe, wiping from inner corner to outer ONCE. If more cleaning was needed, used clean wipe for each cleaning. If glove was soiled, changed to another glove before instilling medication.
 - 6. Positioned individual seated or standing with head back, looking upward.
 - _____ 7. Checked label on container, drawing up ordered amount into dropper.
 - 8. Administered correct dose using one of the following techniques;
 - a. gently separated lids of the affected eye by raising upper lid with forefinger and lower lid with thumb. Approached with dropper from below, outside the individual's line of vision. OR
 - b. gently drew lower lid down with forefinger, steadied hand on forehead and help dropper.
 - 9. Applied drop/s gently near center of lower lid not allowing drop/s to fall more than one inch before striking eye. AVOIDED ANY CONTACT WITH THE EYE
 - _____10. Closed eye gently. Asked individual to keep eye closed for a few minutes.
 - 11. Wiped excess medication with clean wipe using separate clean wipe for each eye if drug is administered to both eyes.
- 12. If multiple eye drops and/or ointments are used, wait 5 minutes in between each medication
 - 13. Removed gloves and replaced bottle cap.
 - 14. Repositioned individual.

Evaluator's Signature & Title_	Date	
2 _		

Student Signature _____ Date _____

Pass Fail

CLINICAL CHECKLIST FOR THE ADMINISTRATION OF MEDICATION VIA TRANSDERMAL PATCHES

Key for Scoring

S = Satisfactory

U = Unsatisfactory

When administering transdermal patch medication, the student :

- 1. Washed hands.
- 2. Checked medication labels with the MAR according to procedure _____
- Waited to remove the patch from the pouch till ready to use it. 3. _____
- _____ Dated and initialed the patch with a pen before applying 4.
- Put on gloves, tore open the pouch and removed the patch. 5.
- _____ 6. Removed the protective liner that covers the sticky side of the patch (the side that will be put on the person's skin), touching the sticky side as little as possible.
- 7. Applied the sticky side of the patch to a non-hairy, clean, dry area of the chest, back, flank, upper arm, behind the ear, abdomen, or hip area, as directed by the physician. If the area has hair, the student clipped the hair close to the skin with scissors prior to applying the patch.
- 8. If it was necessary to clean the skin where the patch is to be applied, the student used only clear water and dried the skin thoroughly before applying the patch.
- 9. Pressed the patch firmly on the skin with the palm of their hand for about 30 seconds.
- 10. Checked to see that the patch stuck securely, especially around the edges of the patch.
- 11. Discarded the used patch appropriately.
- Removed gloves and washed hands. 12.

Evaluator's Signature & Title Date

Student Signature _____ Date____

CLINICAL CHECKLIST FOR THE ADMINISTRATION OF RECTAL MEDICATIONS

Key for Scoring

S = Satisfactory

U = Unsatisfactory

When administering a rectal medication, the student:

- _____ 1. Prepared suppository following directions on the label.
- _____ 2. Provided privacy.
- 3. Positioned individual on his/her side with top leg flexed.
- 4. Checked label, donned gloves, removed suppository from wrapping, lubricated tip unless contraindicated.
- 5. Encouraged individual to relax by instructing him/her to breath through mouth or take deep breaths.
 - 6. Gently inserted suppository with index finger along the wall of the rectum to beyond the sphincter muscle.
- 7. Slowly withdrew finger, pressed tissue against anus till the urge to expel subsided.
 - 8. Removed and discarded glove according to aseptic technique.
 - 9. Repositioned individual giving necessary instructions and equipment.
 - _____10. Document results.

Evaluator's Signature & Title	Date
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Student Signature_____ Date_____

CLINICAL CHECKLIST FOR THE ADMINISTRATION OF ENEMAS

Key for Scoring

S = Satisfactory

U = Unsatisfactory

When administering an enema, the student:

- 1. Washed hands thoroughly. Applied Gloves.
- _____ 2. Provided privacy.
- 3. Assisted person to lay on left side with knee bent.
- 4. Made sure enema tip was lubricated.
- 5. Held fleets bottle upright and inserted with steady pressure into rectum with tip pointing to navel.
- 6. Squeezed bottle until entire contents were expelled into rectum.
- 7. Discontinued use if resistance was felt.
- 8. Asked person to try to hold contents of fleets as long as possible.
- 9. Assisted person on bedpan, commode, or toilet.
 - _____ 10. Removed and discarded gloves according to aseptic technique.
 - 11. Document results.

Evaluator's Signature & Title	Date
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Student Signature_____ Date_____

CLINICAL CHECKLIST FOR THE ADMINISTRATION OF **TOPICAL MEDICATIONS**

Key for Scoring

S = Satisfactory

U = Unsatisfactory

When administering a topical skin medication, the student:

- 1. Prepared topical skin medication following directions on the label.
- Positioned the individual. Put on gloves. 2.
- ___ Observed affected area for unusual conditions which should be reported 3. to licensed nurse prior to administration.
- ____ 4. Cleansed the area, if indicated.
 - Checked label of container, removed top avoiding contamination. 5.
 - Applied correct medication in one of the following manners: 6.
 - a. retrieve the amount needed with a tongue blade or clean dispensing spoon, spread on affected area.
 - b. donned gloves, removed correct amount from container, and spread on affected area.
 - spray the affected area as directed on the label
- 7. Removed excess with tissue, if indicated.
 - 8. Removed gloves before replacing container cover.

Evaluator's Signature & Title______Date _____

Student Signature _____ Date_____

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CLINICAL CHECKLIST FOR THE ADMINISTRATION OF ORAL MEDICATIONS

Key for Scoring

S = Satisfactory

U = Unsatisfactory

When administering oral medications, the student:

- _____ 1. Prepared dosage according to prescribed dosage following any instructions e.g. crush tablet.
- 2. Poured liquid medications correctly:
 - a) secured cap before shaking (if shaking is indicated.)
 - _____ b) set cap top side up
 - _____ c) poured correct dose away from label
 - _____ d) held med cup at eye level
 - e) wiped lip of bottle before replacing cap
- 3. Observed individual for any unusual conditions which should be reported to a licensed nurse prior to administration; e.g. drowsiness, difficulty swallowing.
- 4. Remained with person until they swallowed medication. Oral medications are given with beverage or food unless contraindicated.
- 5. Gave sublingual medications under the tongue with instruction to the individual to keep medication under tongue until dissolved.
- 6. Gave buccal medication with instructions to hold the medication in the mouth next to the cheek and to not eat or drink until the medication is dissolved.
 - 7. Gave a troche or lozenge with instructions to hold in mouth until dissolved before taking any liquids.

Evaluator's Signature & Title______Date _____

Student Signature _____ Date _____

CLINICAL CHECKLIST FOR THE ADMINISTRATION OF NASAL MEDICATIONS

Key for Scoring

S = Satisfactory

U = Unsatisfactory

When administering nasal medications, the student:

- 1. Observed individual for any unusual conditions which should be reported to the licensed nurse prior the administration; i.e. nasal secretions.
- 2. Positioned the individual sitting up for nasal sprays.
- 3. Inserted spray nozzle gently into nose and sprayed.
- _____ 4. Wiped away excess medication with tissue.
- 5. Instructed individual not to blow nose for a few minutes.
 - 6. Wiped nozzle of spray with alcohol wipe.

Evaluator's Signature & Title	Date	
2		
Student Signature	Date	

CLINICAL CHECKLIST FOR THE ADMINISTRATION OF INHALANT MEDICATIONS

Key for Scoring

S = Satisfactory

U = Unsatisfactory

When administering inhalant medications, the student:

- _____ 1. Positioned person in upright position.
- _____ 2. Shook inhaler.
- 3. Instructed individual to breathe out to empty lungs.
- 4. Placed mouthpiece on mouth and instructed individual to close lips tightly around mouthpiece.
- 5. Pressed down steadily on cartridge while instructing individual to breath in slowly and deeply through mouth only.
- 6. Instructed individual to hold breathe for approximately 10 seconds.
- 7. Waited at least 60 seconds between each puff.
- 8. Offered individual water to rinse mouth thoroughly.
- 9. Cleaned mouthpiece with alcohol swab.

Evaluator's Signature & Title	Date
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Student Signature _____ Date_____

CLINICAL CHECKLIST FOR THE ADMINISTRATION OF EYE OINTMENT

Key for Scoring

S = Satisfactory

U = Unsatisfactory

When administering eye ointments, the student :

- 1. Prepared eye ointment for delivery following directions on the label.
 - Position the person seated, standing or lying with their head back and up. 2.
- Observed affected eye/s for unusual conditions which should be reported 3. to licensed nurse prior to administration.
- 4. Put on gloves.
- Cleansed eye/s with clean wipe, wiping from inner corner to outer ONCE. 5. If more cleaning was needed, used clean wipe for each cleaning.
 - Positioned individual with head back, looking upward. 6.
- Changed gloves if soiled from cleaning. 7. _____
 - Checked label on container, removed top, avoided contamination. 8.
 - 9. Administered correct dose, using one of the following techniques;
 - gently retracted lower lid of eye to be medicated with forefinger, a. steadied hand on cheek, if necessary; OR
 - gently separated lids of the affected eye by raising upper lid with b. forefinger and lower lid with thumb.
- 10. Applied prescribed ointment to affected eye in a thin layer along inside of the lower lid. Used care to avoid the applicator coming in contact with the eye.
 - 11. Held lid open for few seconds
- 12. Closed eye gently. Asked individual to keep eye closed a few seconds.
- 13. If multiple eye drops or ointments are used, wait 5 minutes in between each.
- 14. Wiped excess medication with clean wipe using separate clean wipe for each eye if drug is administered to both eyes.
- 15. Removed gloves before replacing container cap.
- 16. If multiple eye drops or ointments are used, wait 5 minutes in between each.

Evaluator's Signature & Title	Date
8	

Student Signature _____ Date____

CLINICAL CHECKLIST FOR THE ADMINISTRATION OF EAR DROPS

Key for Scoring

S = Satisfactory U = Unsatisfactory

When administering ear drops, the student:

- _____ 1. Prepared ear drops following directions on the label. Included dropper, if one is required and not in the container.
- _____ 2. Positioned the individual:
 - a) if lying in a bed, put bed flat and turned head turned opposite side.
 - b) if sitting in chair, tilted the head sideways until ear was horizontal as possible.
- 3. Observed affected ear for any unusual conditions which should be reported to the nurse prior to administration.
- 4. Drew up prescribed medication in to dropper.
- 5. Gently pulled ear back and up for adult and down/back for child.
- 6. Administered the number of drops prescribed to the affected ear canal.
- 7. Did not contaminate the dropper by touching any part of ear or surrounding area during administration.
- 8. Instructed the individual to maintain their position for three minutes or as tolerated by the individual. If both ears, waited five minutes or as tolerated by individual before administering to second ear.

Evaluator's Signature & Title	Date	
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Student Signature_____ Date _____

CLINICAL CHECKLIST FOR THE ADMINISTRATION OF VAGINAL MEDICATIONS

Key for Scoring

S = Satisfactory

U = Unsatisfactory

When administering vaginal medications, the student :

- 1. Explained the procedure and ensured privacy.
- _____ 2. Asked the person to void before beginning..
- 3. Assisted the person to lie on her back, with her knees bent and legs spread apart to expose the perineum.
- _____ 4. Put on gloves, unwrap the suppository or prepare (lubricate) the medication applicator.
 - _____ 5. Spread the labia apart and locate the vaginal opening.
 - 6. Inserted the medication
 - a. By hand: gently inserted the suppository about 2-3 inches into the vagina OR
 - a. By applicator: Gently inserted the applicator about 2-3 inches into the vagina. Pushed the plunger to release the suppository and withdrew it. If ointment, cream, or jelly, slowly withdrew the applicator as s/he pushed the plunger.
- 7. Assisted the individual to wipe the vaginal opening if necessary.
- 8. Cleaned or discarded the applicator, and removed and discarded gloves.

Evaluator's Signature & Title	Date
6	

Student Signature _____ Date_____

CLINICAL CHECKLIST FOR THE ADMINISTRATION OF NEBULIZER TREATMENTS

Key for Scoring

S = Satisfactory

U = Unsatisfactory

When administering nebulizer treatments, the student :

- _____ 1. Washed hands.
- 2. Prepared needed supplies: nebulizer, nebulizer mask or mouthpiece, medication.
- 3. Set up the nebulizer machine and nebulizer cup.
- 4. Had the person sit upright.
- _____ 5. Checked and recorded heart rate and respirations.
- 6. Checked medication labels with the MAR according to procedure.
- 7. Placed the medication into the nebulizer cup and replaced the cover on the cup.
- 8. Attached the nebulizer cup to the nebulizer tubing and mouthpiece or mask.
- 9. Asked the person to place the mouthpiece in his/her mouth with lips closed tight around the mouthpiece.
 - OR

Placed mask over person's face.

- 10. Turned the machine on and observed for a steam-like vapor.
- _____ 11. Tapped the cup a few times to tap down solution clinging to the sides of the cup.
- 12. Checked the heart rate and respirations and recorded.
- _____ 13. Turned the machine off and removed the mask/mouthpiece when the cup was empty.
- 14. Washed the nebulizer cup, the tube to the mouthpiece, and the mouthpiece or mask in hot soapy water.

Evaluator's Signature & Title_____Date _____

Student Signature _____ Date_____

Monitoring for Side Effects: List the medications taken by individual(s) whom you support, possible side effects and or toxic effects of each medication.

Medication	Expected Effects/ Desired Effects: what did the doctor prescribe the medication for? What is it hoped the medication will do?	Potential Side Effects or Toxic Effects: what else may be experienced from taking this medication besides the expected effects?	Potential Drug Interactions and Other Information: is there anything this medication should not be taken with? Is there a "non-typical" use of this medication?
1.	a.	a.	a.
	b.	b.	b.
	с.	с.	с.
	d.	d.	d.
	е.	е.	е.
2.	а.	a.	a.
	b.	b.	b.
	с.	с.	с.
	d.	d.	d.
	е.	е.	е.
3.	а.	a.	a.
	b.	b.	b.
	с.	с.	с.
	d.	d.	d.
	е.	е.	е.
4.	а.	а.	a.
	b.	b.	b.
	с.	с.	с.
	d.	d.	d.
	е.	е.	е.