

MEDICATION PASS AUDIT
Quality Assurance Training

Worksheet #1

General Medication Procedures

1. List the "Six Rights": _____

2. Medication can be administered _____ minutes before and after the prescribed time.
3. The medication label should be read 3 times. List the 3 times: _____

4. Medications should _____ be left at the bedside.
5. Medications (may)(may not) be pre-poured.
6. PRN medications should be noted on the front & back of the MAR. The record should reflect:
 - a. _____
 - b. _____
 - c. _____
 - d. _____
7. How should the nurse document a medication that was withheld, refused or spit out?

8. What system does your facility use to flag the MAR for missed residents? _____

9. The medcart should be _____ at all times when unattended.
10. Alcohol-based cleanser may be used to wash hands _____ times. Then the nurse must wash with soap and water before resuming the use of the cleanser.
11. The resident must be correctly _____ before administering medications.

12. Name three instances when soap and water must be used to wash hands during medication administration: 1) _____ 2) _____ 3) _____

13. Nurses must _____ and _____ for a response before entering a resident's room.

14. "AC" means _____

15. "On empty stomach" means _____

16. "PC" means _____

17. When may medications be administered in the dining room? _____

18. What medications **may not** be administered in the dining room? _____

19. What is your facility's policy for medication refusal? (how often can the resident refuse?, when is the MD and family notified?, are there any exceptions to the basic policy?) _____

20. Supplements given in less than full can amounts must be _____ before administering.

21. Spoons and cups must be stored _____ on the med cart.

22. Failure to follow manufacturer's guidelines in preparing a medication for administration is considered a medication _____

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Worksheet #2

Administration of Tablets, Capsules and Liquids:

1. In order to crush a medication, the nurse first needs to determine _____

2. Name the 4 classes of medications that should not be crushed:
a) _____ b) _____
c) _____ d) _____

3. When opening a medication package, the nurse must be careful not to _____
the pills or capsules.

4. A wasted or unused medication must be disposed of safely. What is your facility's policy?

5. Some medications must be given with food. Other than meals, what food choices does your facility offer? _____

6. Permitting a resident to chew or swallow a medication that is to be given sublingually is consider a medication _____

7. Liquids should be poured at _____ at assure accuracy of measure.

8. If a liquid cannot be measured precisely in the standard medication cup, the nurse could use to following: _____

9. Excess liquid medication may be poured back into the bottle. (True) (False)

10. Volume of measured liquid medication should be read at the _____ level of the meniscus.

11. Certain medications require dilution with water or juice because they are irritating to the stomach. Failure to do this is considered a _____

12. Excess medication that may have run down the side of the bottle should be _____
13. Liquid iron may discolor teeth. Best practice is to _____ the medication and administer with a straw if the resident capable.
14. Failure to _____ a liquid medication according to manufacturer's guidelines is considered a medication preparation error.
15. _____ may interfere with the absorption of other medications. The nurse should check with the consultant pharmacist for contraindications.
16. When preparing a crushed medication, the _____ goes in the cup first; then the _____

MEDICATION PASS AUDIT
Quality Assurance Training

Worksheet #3

Administration of Eye, Ear, & Nasal Medications:

1. It is OK to use alcohol-based gel to wash your hands before administering eye drops.
(True) (False)

2. When administering both an eye drop and eye ointment, the _____ should be administered first.
3. The resident should be instructed to look _____ before administering an eye drop.
4. Hands must be washed with _____ and _____ and _____ administering an eye drop.
5. Position the resident by tilting head _____
6. _____ must be worn to administer eye drops.
7. Describe the procedure for administering eye drops to both eyes when one eye is infected.

8. Do not let the _____ touch the eye or eye lashes.
9. The resident should _____ eyes after instillation of eye drops to evenly distribute the medication.
10. Eye drop containers should be _____ when first opened.
11. When administering multiple eye drop medications, the nurse should wait at least _____ minutes between medications.
12. If the nurse gives more than the prescribed _____ of drops or instills the drops in the _____ eye it is considered a medication error.
13. Before instilling the eye medication, the nurse should gently pull down the resident's _____ to expose the conjunctiva.
14. Eye drops should always be administered in a _____ area.

15. Resident should be positioned in one of two acceptable ways in order to administered ear (otic) medications. Describe both positions. _____

16. Before instilling otic solutions, the nurse should gently _____
_____ to straighten the ear canal.
17. Allow _____ minutes for the otic solution to penetrate the ear canal.
18. The nurse must _____ before instilling otic medications.
19. If the nurse thinks the otic solution may leak out of the ear, he/she may place a _____
_____ in the outer ear.
20. Otic drops should be stored _____ from other medications.
21. A resident should be position with _____ to tilt the head back far enough to prevent nasal medication from running down the back of the throat.
22. The nurse must _____ before and after administering nasal meds.
23. To measure the correct amount of nasal medication, the nurse uses the _____ on the dropper.
24. The nurse should _____ the resident's nose before instilling the nasal drops.
25. The dropper should be positioned _____ of the nose.
26. The resident should keep head tilted back for _____ minutes after administration of nasal medication.
27. When administering nasal drops do not let _____ the nostril.
28. Occlude the opposite nostril when administering _____
29. The nurse should _____ the nasal aerosol before administering
30. A resident should not _____ his nose after receiving nasal spray.

MEDICATION PASS AUDIT
Quality Assurance Training

Worksheet #4

Administration of Metered Dose Inhalers (MDIs)

1. It is important to first _____ the inhaler before administering.
2. The resident should have his _____ tilted back and _____ out before using a MDI.
3. The use of a _____ can be beneficial when administering a steriodal MDI to an elderly person.
4. The resident should breathe in _____seconds after receiving a "puff" from the MDI.
5. In order to allow the medication to reach deeply into the lungs, the resident should hold his breath for _____seconds.
6. If the resident receives 2 or puffs of MDI, the nurse should wait _____minute between puffs.
7. The inhaler should be held 1-2 _____from the resident's mouth.
8. If the resident is prescribed more than one inhaler at the same time, allow _____minutes between inhalers.
9. If a resident is receiving a steroid MDI and a bronchodialator MDI, which inhaler should be administered first.
10. Name 3 serious side effects of bronchodialator inhalers:
a) _____,
b) _____ and c) _____
11. Name 3 overdose symptoms of MDI usage: a) _____
b) _____ and c) _____
12. Describe your facility's procedure for cleaning and storage of inhalation equipment (MDIs and nebulizers). _____

13. It is good practice to wear _____ when administering MDIs.

MEDICATION PASS AUDIT
Quality Assurance Training

Worksheet #5

Administration of Medication via Feeding Tube:

1. When possible use the _____ form of the medication for TF administration.
2. The feeding must be flushed with the minimum of _____ cc's before and after administration.
3. _____ must be worn when delivering medication via feeding tube.
4. Best practice procedure is to administer each medication _____
5. What is your facility's procedure for checking placement of a feeding tube? _____

6. Head of the resident's head should be elevated _____ degrees to prevent aspiration.
7. Careful attention must be given to the resident's _____ during medication administration via feeding tube.
8. It is OK to flush a feeding tube with more than 30cc's of water. When is it not OK?

9. The amount of water used for flushing should be carefully _____ and documented on the resident's I&O record.
10. Enteric coated drugs may be crushed for feeding tube administration. (True) (False)
11. _____ may not be administered on a full stomach. Therefore, residents receiving continuous feeding must have their feeding held _____ minutes before giving this drug.
(drug)
12. If it is necessary to crush a medication for administration via feeding tube, the medication should be _____ in a small amount of tap water.
13. Failure to check placement and patency of a G-tube is not a medication error but a _____ error.

Administration of Medication via Feeding Tube (cont):

14. If there are several medications to be administered, it is a good idea to take them to the room on a _____ so as not to spill.
15. A _____ surface is needed at the bedside on which the feeding equipment may be placed during medication administration. This can be accomplished with a cloth or paper towel.
16. The nurse must be sure to _____ to the resident before beginning the medication administration.
17. The nurse must _____ before and after putting on his/her gloves.

MEDICATION PASS AUDIT
Quality Assurance Training

Worksheet #6

Administration of Medication via Injection:

1. The gauge of needle should be selected according to the _____ of the drug.
2. The _____ of the needle should be selected based on the site to be used, the weight and tissue turgor of the resident and the drug to be given.
3. The syringe is to be disposed of immediately after administering the drug. Therefore, a _____ container should be taken to the resident's room or be made available on the medcart.
4. If daily injections are prescribed for a resident, _____ must be rotated and noted on the MAR.
5. When preparing to draw up insulin, the nurse should shake the vial first. (True) (False).
6. Common insulin injection sites are: _____

7. Sometimes it is necessary to combine two types of insulin in the same syringe. Which type of insulin should drawn up first? _____
8. Best practice procedure is to have the insulin in the syringe verified for correctness by _____.
9. Heparin injections are given _____
10. The preferred site for an heparin injection is the _____
11. It's OK to massage the site of a heparin injection. (True) (False).
12. The nurse should aspirate insulin and heparin injections. (True) (False).
13. Multi-dose vials should be _____ when opened.

MEDICATION PASS AUDIT

Quality Assurance Training

Worksheet #1

ANSWERS

General Medication Procedures

1. Right Drug, Right Dose, Right Dose Form, Right Route, Right Time, Right Resident
2. 60 minutes
3. When taking the drug from the shelf or drawer, before removing or pouring the drug from the package, and before discarding the package or returning the bottle to the drawer or shelf.
4. Never
5. May not
6. Resident's symptoms; dose, time and route; results or effects of the drug; and the nurse's initials
7. The nurse should circle his/her initials next to the medication not received. An explanatory note should be written on the reverse side of the MAR.
8. *This answer is facility specific*
9. Locked
10. Five
11. Identified
12. After contact with a resident, when administering eye drops and when administering medications via enteral route.
13. knock and wait
14. Before meals
15. One hour before meals and two hours after.
16. After meals
17. Only oral medications may be administered in the dining room. The medpass should not interrupt the meal to the point that the resident quits eating. Medication should be delivered discretely.
18. All routes except orals.
19. *This answer is facility specific*
20. Measured
21. Upside down
22. Error

MEDICATION PASS AUDIT

Quality Assurance Training

Worksheet #2

ANSWERS

Administration of Tablets, Capsules and Liquids:

1. If there is a physician's order to crush the medication, then determine if the drug can be crushed.
2. Enteric coated, time-released, effervescence, and sublingual
3. Touch
4. *This answer is facility specific.* However, *ALL* medications should be flushed or disposed of in a secure container. No open trash receptacles.
5. *This answer is facility specific.* Common choices are food items from a scheduled meal or cheese and crackers, pudding, peanut butter sandwich, fruit cup or bread and butter. "With food" means something substantial, not just a spoon of applesauce.
6. *Error*
7. Eye level
8. A Baxa cap syringe or needle-less syringe to draw up the exact amount.
9. False
10. Thumb
11. Preparation Error
12. Wiped off
13. Dilute
14. Shake Well
15. Antacids
16. Applesauce, pudding or jelly.....medications.

MEDICATION PASS AUDIT
Quality Assurance Training

Worksheet #3
ANSWERS

Administration of Eye, Ear, & Nasal Medications:

1. False
2. Eye drop
3. up
4. Soap & water; before and after
5. Back and slightly to the side
6. Gloves
7. Wash hands with soap & water, put on gloves, administer drops in non-infected eye first, then administer to infected eye. If both eyes are infected, change the gloves between administering drops in each eye.
8. Tip of the applicator
9. Close, not blink
10. Dated
11. Five
12. Number...wrong
13. Lower lid
14. Private
15. Lying down with affected ear facing up OR head tilted to side with affected ear facing up
16. Pull the earlobe up and back
17. Five
18. Wash hands and put on gloves, if the ear is draining.
19. Cotton ball
20. Separate
21. A large pillow
22. Wash hands
23. Calibrations
24. Push up the tip
25. Just above the nostril directed toward the midline of the nose.
26. Five
27. the dropper touch
28. Nasal spray
29. Shake well
30. Blow his nose

MEDICATION PASS AUDIT
Quality Assurance Training

Worksheet #4
ANSWERS

Administration of Metered Dose Inhalers (MDIs)

1. Shake Well
2. Head...breathe
3. Spacer
4. Three-five seconds
5. Ten
6. One
7. Inches
8. Five
9. Bronchodialator
10. Dizziness, Cyanosis, Wheezing, Flushing, Swelling of Face & Eyes, Rash
11. , Chest pain, sudden increase or decrease in pulse (continuing, chills, fever, paleness, coldness of skin, convulsions, dizziness, severe headache, muscle cramps (severe), nausea and vomiting (continuing), unusual anxiety, very large dilated pupils
12. *This is facility-specific*
13. Gloves

MEDICATION PASS AUDIT
Quality Assurance Training

Worksheet #5
ANSWERS

Administration of Medication via Feeding Tube:

1. Liquid
2. 30'cc
3. Gloves
4. Separately
5. *This is facility-specific* However, auscultation is recommended
6. 30
7. Privacy
8. If the resident has a fluid restriction OR if there is no order for more fluid.
9. Measured
10. False
11. Dilantin...60 minutes
12. Diluted
13. Standard of practice
14. Tray
15. Clean
16. Explain the procedure
17. Wash hands with soap and water

MEDICATION PASS AUDIT
Quality Assurance Training

Worksheet #6
ANSWERS

Administration of Medication via Injection:

1. Consistency or viscosity
2. Length
3. Sharps
4. Injection site
5. False. Roll the vial between the hands.
6. Abdomen, thigh and upper arm
7. Regular
8. Another nurse
9. Subcutaneously
10. .Abdomen
11. False. May cause the site to bruise
12. False
13. Dated

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Quality Assurance Training

Task	Standard	Med Error	Security	Inf. Con.	R R
Washes hands prior to administering eye drops				X	
Closes door when giving G tube meds					X
Prepares/supplies cart prior to pass	X				
Medications discarded correctly in secured container OR flushed			X		
Medications administered as directed		X			
Privacy provided for apical pulses					X
VS taken prior to giving med	X				
Medcart always locked			X		
Medication & alcohol secured			X		
Inhaler shaken prior to administration		X			
Syringes/needles disposed of in sharps container				X	
Resident position at 30 degrees for G tube administration	X				
Resident identified prior to giving med	X				
Washes hands between residents				X	
Medications delivered systemically	X				
Medication given at correct time		X			
Liquids measured exactly in correct cc's	X				
Liquids painod at eye level		X			
Medication passed not interrupted			X		
PRN meds documented after administration	X				
Medcart clean & organized				X	
Nurse waits 5 min. between types of eyedrops		X			
MAR closed when nurse away from cart					X
Fluids, applesauce, supplements, etc. labeled, covered & dated				X	
Meds removed from packaging without touching				X	
Nurse verifies drug, dose strength, freq. & route with order on MAR	X				
Site for daily injections are rotated	X				

MEDICATION PASS AUDIT Quality Assurance Training

Task	Standard	Med Error	Security	Inf. Con.	R R
Medications crushed correctly		X			
Tube checked for placement & patency	X				
Nurse waits 1 minute between inhaler puffs		X			
Controlled substances record signed at time of removal of drug.	X				
Injectable med drawn up correctly.		X			
Liquid medications shaken as directed		X			
Tube flushed w/30ml water before & after wads administered	X				
Hands washed & gloved prior to giving an injection.				X	
Nurse waits 5 minutes between different types of inhalers.		X			
MAR flagged for missed residents.	X				
Privacy provided when administering inhalers					X
Inside of med cup not touched.				X	
Injectable medication administered correctly	X				
Nurse knocks on resident's door before enters					X
Resident is identified before administration of medication	X				
Nurse not interrupted during med pass	X				
Privacy provided when administering aka drops					X
Medications not left at bedside			X		
Prescribed supplements measured exactly in cc's		X			
Refused medications un downawawad on MAR	X				
Excess liquid medications are not poured back into bottle				X	
Gloves are worn when administering eye drops				X	

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