

MED-PASS CHECKLIST

GENERAL INFORMATION:

- * ALWAYS READ MAR & MEDICATION LABEL DURING MED PASS
- * ALL INFORMATION ON DRUG LABEL, MAR & PHYSICIAN'S ORDER SHOULD ALWAYS MATCH
- * Medication Pass starts & ends on time (+/- 1hr)
- * Med-Carts are clean, stocked & clear of trash
- * Med-Carts are visible to nurse or locked @ all times
- * Med Keys are retained by nurse @ all times
- * MAR is always HIPPA protected while unattended
- * All Narcotics remain under double-lock
- * Narcotic Log is signed before any narcotic is given
- * Initial MAR after medication administration
- * Withheld or refused meds are documented per policy
- * NEVER pre-pour or pre-chart any medications
- * Hands are washed before direct resident contact & in between each patient;
Waterless hand cleansers used in 15 second wet rub
- * Resident is identified before any medication is administered (picture, armband, name)
- * Resident's rights & privacy are maintained
- * Nurse remains with resident until meds are swallowed
- * Take and document any necessary vital signs prior to preparing medication.

TIME-SPECIFIC ORDERS:

- * Give AC, PC & Time-Specific meds on time
- * AC means at least 30 minutes before meal
- * "With Food" means med is given while resident is eating a meal or after consuming an adequate snack (full serving of pudding, ice cream, ½ sandwich, or 4-6oz of healthshake)

- * "Empty Stomach" means 1 hr before or 2 hours after meal
- * 4-8 oz of water or juice is provided with administration of bulk laxatives, K+ supplements, NSAIDS, or as specified by manufacturer

EYE DROPS:

- * Wash hands before & after administration
- * Place eye drop into the conjunctival sac, ensuring no direct contact with the eye
- * Multiple drops to the same eye require a wait time of 3-5 minutes between drops; close eye for 3 mins or apply gentle pressure to tear duct for 1 min after**some manufacturers require more than 5 minutes between drops (Cosopt or Restasis)
- * Separate eye ointments by 10 minutes; close eye for 1-2 mins after
- * Use separate tissue for each eye (infection control issue)

METERED DOSE INHALERS & UPDRAFTS:

- * Shake inhaler well(10 seconds) prior to each puff
- * Separate multiple puffs by 1 minute
- * Administer bronchodilators first
- * Administer steroids last
- * Rinse mouth following use of steroid inhaler
- * Nurse to remain present until entire breathing treatment(s) are completed (includes updrafts)

LIQUIDS:

- * Suspensions are shaken well

- * Use syringe to measure liquid meds that can have lab drawn for evaluating levels (Dilantin Suspension)
- * Discard over-pours

INSULIN:

- * Insulin vial is dated when opened
- * Insulin suspensions should be mixed without creating air bubbles. May gently roll between hands to re-suspend.
- * Discard all insulin 28 days after date opened
- * Disinfect glucometer after EACH use (bleach wipe)
- * Store Unopened insulin vials in the refrigerator at all times.

INJECTIONS & PATCHES:

- * Wash hands before & after administration
- * Apply clean gloves before administration
- * Injection & patch sites are documented on MAR
- * Alternate sites

ENTERAL TUBES:

- * Enteral tubes are checked for placement prior to flushing
- * Enteral tubes are flushed before & after medication administration (at least 30cc of preferably warm water)
- * Ensure no compatibility problems exist prior to mixing medications together
- * Pill crusher is to be clean
- * Ensure medication is crushable before you crush (per manufacturer recommendations)
- * Wear gloves