

Visions Training Series  
State of Hawai'i Developmental Disabilities Division

# Medications

## COURSE WORKBOOK



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## Course Overview

Medication administration and management is a key component to a participant's health and safety. This course will cover common medication terminology, the recommended practices with management and administration, and documentation on the Medication Administration Record. The overall goal of the course is to decrease the chance of a medication error.

Proper medication management includes:

1. Medication administration,
2. Monitoring a participant to observe the effectiveness of the medication,
3. Monitoring and reporting any possible side effects of the medication,
4. Preparing, storing, and disposing of medications, and
5. Documenting completely and accurately in the Medication Administration Record (MAR).

Documentation includes the physician's orders, the MAR, the caregiver notes, and the Adverse Event Report (AER). The AER is used if and when a medication error occurs. Documentation is critical because it shows what medication was given and when it was given. Documentation shows that you followed the physician's orders. Medication errors often occur when documentation is inaccurate or incomplete. For example, if the documentation is not done properly, it could possibly lead to a medication error. For example, failure to document could possibly lead to accidentally giving a double dose. Remember, if you did not document, the medication is considered to have not been given.

## Course Objectives:

At the end of the course, you will:

### Lesson 1:

- Identify basic medication terminology in order to handle and make medications available to a participant.
- Distinguish between the different types, forms, and routes of medications.
- Identify common medication measurements, time schedules, and abbreviations.
- Understand that it is always your responsibility to clarify any medication orders or documentation you do not understand.

### Lesson 2:

- Identify the requirements for a physician's order and understand your responsibility to verify and clarify the information from the physician.
- Identify the recommendations for medication procurement (how medications are obtained).
- Locate and describe the information on a medication label and warning label.
- Identify how to store medications properly and safely.
- Identify how to dispose of medications properly and safely.

### Lesson 3:

- Describe the three medication support strategies: self-administration, medication assistance, and medication administration.
- Identify and apply the basic principles of medication administration.
- Identify and apply the "Three Checks" and "Eight Rights" of medication administration.
- Follow and apply the medication administration checklist and the medication administration process.

#### Lesson 4:

- ❑ Identify your responsibilities for administering and managing a participant's medications correctly and accurately.
- ❑ Understand and apply how to manage medications with the Circle of Support in different locations and times.
- ❑ Identify what a medication error is and how to report when a medication error occurs.

#### Lesson 5:

- ❑ Access and complete the medication log.
- ❑ Fill out a Medication Administration Record based on the physician's orders.
- ❑ Identify when and how to fill out an Adverse Event Report (AER).

## **Lesson 1: Medication Basics**

### **Topic 1: Terminology**

1. **Brand Name:**
2. **Dosage:**
3. **Generic Name:**
4. **Medication/Drug:**
5. **Medication (Drug) Interaction:**
6. **Over-The-Counter (OTC) Medication:**
7. **Pharmacist:**
8. **Physician/Doctor:**
9. **Prescription Medications:**
10. **Route:**
11. **Schedule:**
12. **Side (Adverse) Effect:**

## Topic 2: Types, Forms, and Routes

### Types of Medications



\_\_\_\_\_ are used to kill and prevent bacteria from growing.



\_\_\_\_\_ are used to treat pain.



\_\_\_\_\_ are used to affect the mind, emotions, or behavior.  
Psychotropic medications include antipsychotics, stimulants, mood stabilizers, antidepressants, anti-anxiety agents, anti-obsessive agents.



\_\_\_\_\_ are used to prevent seizures.



## Forms of Medications

1. **Capsules:**
2. **Drops/Sprays:**
3. **Implants/Patches:**
4. **Inhalers:**
5. **Injections:**
6. **Liquid Suspensions:**
7. **Lotions, Ointments, or Creams:**
8. **Suppositories:**
9. **Tablets:**

## Routes of Medications

1. **Buccal:**
2. **Intramuscular:**
3. **Nasal:**
4. **Ophthalmic:**
5. **Oral:**
6. **Otic:**
7. **Rectal:**
8. **Respiratory Inhalation:**
9. **Subcutaneous:**
10. **Sublingual:**
11. **Topical:**
12. **Transdermal:**

### Topic 3: Measurements, Time Schedules, and Abbreviations

It is important to know the difference between the units of measurement because it affects the amount of medication you are taking/giving. Some medications are poisonous in large amounts, but in small, prescribed amounts, they are effective and can relieve symptoms and treat health conditions. Other medications are useless unless taken in large amounts. It is essential for a person's safety to take medications in the quantity that is prescribed.

#### Measurements and Equivalentents:

Teaspoon (tsp)	Milliliter (ml)	Tablespoon (tbsp)	Ounces (oz)	Cup (c)	Quart (qt)
	5				
	15				
	30				
	120				
	240				
	1000				
	2000				

#### Time Schedules

Medications are ordered to be taken at specific \_\_\_\_\_. Medications should be taken at consistent \_\_\_\_\_ for each dose. A person's medication schedule is specific to that individual and should accommodate what is important \_\_\_\_\_ and \_\_\_\_\_ them.

## General Examples

The table below presents general examples of when to give medications based on whether it is taken once or multiple times daily. Keep in mind they are just examples. If you are unsure of the times that are best for the participant, discuss it with the participant and physician to find times which suit the activities in the participant's schedule, and also allows the medication to work effectively.

Frequency	Example 1	Example 2
	8 am	8pm
	5:30 am and 4 pm	7:30 am and 8 pm
	5:30 am, 3 pm, and 8 pm	6 am, 12 pm, and 6 pm
	5:30 am, 11:30 am, 3:30 pm, and 7:30 pm	6 am, 12 pm, 4 pm, and 8 pm

## Abbreviations

Abbreviations include \_\_\_\_\_ or \_\_\_\_\_ that are used in place of writing a word or a group of words related to your participant's medication administration and management. Medical terms and abbreviations are often used by physicians and healthcare professionals when prescribing medications.

Abbreviations may also be used to document medication administration and a participant's response to the medications. Only use standardized medical terms, words, symbols or abbreviations. Remember it is always your responsibility to clarify any medication orders or documentation you do not understand.

## Lesson 2: Medication Management

### Topic 1: Medication Orders

#### Physician's Orders

Each medication you manage for a participant must be prescribed by a \_\_\_\_\_ or healthcare professional with \_\_\_\_\_. All physician's orders must be signed by the physician in order to be considered \_\_\_\_\_. Examples of a physician's order include a prescription note given to the pharmacist or a medication listed on the physician's notes. You must have a \_\_\_\_\_ of all medication orders. If a physician's office sends a medication order directly to the pharmacy, it is your responsibility to ensure you have a hard copy to keep on file.

When receiving medication orders from the physician, it is advised that you request to have the \_\_\_\_\_ of the medication included on the prescription. This will help to clarify what the medication is prescribed for, especially since many medications have \_\_\_\_\_.

You must verify that the information on the physician's order is \_\_\_\_\_ for the \_\_\_\_\_. For example, if you know that the participant cannot take medication by mouth, but the medication is labeled "orally" or "PO," get clarification from the physician. You are responsible for providing \_\_\_\_\_ and \_\_\_\_\_ care. It is always best to ask for clarification when you are unsure. This protects the individual from any medication errors. Clarifying medication orders you are not clear about is also a way of \_\_\_\_\_ so you are not held \_\_\_\_\_ or \_\_\_\_\_ for a medication error you could have prevented.

Physician's orders come in many different formats. Many physicians use their own form to prescribe medications. Orders may look different from one doctor's office to another; regardless of what the order looks like, all prescriptions must include specific information.

It is essential to review all medication orders for completeness.

The physician's order must include:	
•	
•	
•	
•	
•	
•	
	○
	○

Do not be afraid to ask for written clarification on the physician's orders regarding the purpose/reason for the medication. If you do not know why a medication is prescribed, it is your responsibility to ask questions and understand the orders before you give the medication.

## Topic 2: Medication Procurement, Labels, and Storage

### Medication Procurement

\_\_\_\_\_ refers to how medications are obtained. It is advised that you obtain all prescriptions from a single pharmacy to reduce the risk of \_\_\_\_\_ or \_\_\_\_\_. Pharmacies keep profiles on each person's filled prescriptions and have systems that alert the pharmacist to \_\_\_\_\_. If a medication needs to be filled through another pharmacy, the reason should be documented in the person's record since the \_\_\_\_\_ cannot be followed.

Medications must be labeled by the dispensing pharmacy, manufacturer or prescribing physician.

### Medication Labels

The \_\_\_\_\_ must be accurate and should match the information on the physician's order exactly. When picking up medication from the pharmacy, check the \_\_\_\_\_ on the container for \_\_\_\_\_ before leaving. Double check to make sure you have the correct medication and the \_\_\_\_\_, \_\_\_\_\_, and \_\_\_\_\_ indicated on the label match up with the physician's orders. If it is the wrong medication or you find \_\_\_\_\_, seek clarification from the pharmacy. Remember, it is your responsibility to keep a copy of the physician's order and ensure the medications you receive from the pharmacy \_\_\_\_\_ the \_\_\_\_\_ from the physician.

## Warning Labels

Medication containers may have separate warning labels provided by the pharmacy which include additional information on the use of medication. You must follow the additional instructions provided unless otherwise directed by the physician. For example, a warning label may say “medication should be taken with food.”

The following are additional examples of warning labels:

- “For \_\_\_\_\_ use only.”
- “Finish all medication unless otherwise \_\_\_\_\_ by the prescriber.”
- “May cause \_\_\_\_\_ or \_\_\_\_\_.”
- “May cause \_\_\_\_\_ of the urine or feces.”
- “Do not take with dairy products, \_\_\_\_\_ or iron supplements within one hour of this medication.”
- “Take medication on an \_\_\_\_\_, \_\_\_\_\_, one hour before or two hours after a meal, unless otherwise directed by your doctor.”
- “It may be advisable to drink a full glass of \_\_\_\_\_ or eat a banana daily.”

## Storage

Medications must be stored properly in order to ensure health and safety.

The following are requirements for medication storage:

- 1.
- 2.
- 3.



### Topic 3: Medication Disposal

Expired, unwanted, or unused medications should be disposed of promptly to reduce the risk of others accidentally taking or intentionally misusing the medicine, and to help reduce drugs from entering the environment.

Dispose of medications when the medication is:
1.
2.
3.
4.
5.
6.

Your best choices for disposal of unused or expired medicines are:
1.
2.
3.

For proper disposal, follow the disposal instructions on the label, and do not flush unless the label instructs you to do so. Medication take back options are the preferred method to safely dispose of unneeded medications. Sometimes the pharmacy where you purchased the medications will let you return them for disposal. Periodically, there may be community take-back programs that allow the public to bring unused medications to a central location for proper disposal.

## Lesson 3: Medication Administration

### Topic 1: Levels of Medication Support

Participants may need varying degrees of support with medications. Medication support is generally divided into three support categories:



\_\_\_\_\_ - \_\_\_\_\_: The participant does not require assistance with their medications and takes their medication independently.



\_\_\_\_\_ \_\_\_\_\_: The participant is unable to take their medications independently and requires assistance (e.g. prompts to take the medication, placing medications in their hand).



\_\_\_\_\_ \_\_\_\_\_: The participant is dependent on others for their medication (e.g. placing the medication into their mouth, medication given via gastrostomy tube).

Medication support should be provided at levels appropriate to the participant's needs and allow participants to remain as independent as possible. Remember, how a medication is given should reflect what is important to and for the individual taking the medication. Medication administration should not be based on what is convenient for the person administering the medication. As with all other person-centered support, participants' choices and preferences with medication administration should be respected. For example, you could give the person the option to take the medication now or you can ask if they would like to take the medication in 10 minutes instead.

## Topic 2: Principles of Medication Administration

When administering medications to a participant, there are basic principles that must be followed.

1. \_\_\_\_\_ . The participant should know what medications are being given and why. It is important to talk to the person and explain what you are doing before you give the medication. You should answer any questions the person may have.
2. \_\_\_\_\_ . Support the individual to participate in the process to the extent they are able (e.g. putting the medication in their own mouth).
3. \_\_\_\_\_ . Some medication administration routes may require exposing areas of the body the individual may not be comfortable with others seeing. Administering medications in private ensures the dignity of the individual is respected.
4. \_\_\_\_\_ . Practicing good hygiene and using basic infection control techniques such as handwashing assure the health and safety of both you and the participant. You must wash your hands both before AND after giving medications.
5. \_\_\_\_\_ . You should be free from distractions in order to prevent medication errors. Giving medications in a quiet area minimizes the risk of making mistakes. Additionally, you may never leave medication unattended.
6. \_\_\_\_\_ . Medication errors pose dangerous risks for the individual and it is critical that medications be administered correctly. Following the tips and guidelines for ensuring accuracy will decrease the possibility for error.

### Topic 3: Tips and Guidelines for Ensuring Accuracy

There are three checks and eight rights that should be followed each time you administer a medication to ensure the individual's health and safety.

#### Three Checks

The "Three Checks" are three opportunities to verify the correct medication information and help ensure the participant's safety. Following these guidelines assures that you are triple checking for accuracy.

CHECK:
1.
2.
3.

#### Eight Rights

The "Eight Rights" outline best practices to assure the health and safety of a participant and avoid medication management mistakes. If medication errors are made, it can result in life threatening consequences.

Make sure you use/have the RIGHT:

1. \_\_\_\_\_: The correct medication should be made available to the participant. Contact the physician or pharmacist if you have any questions about the medication.
2. \_\_\_\_\_: Look for the participant's name on the medication container before making the medication available to the person.

3. \_\_\_\_\_: If you have any questions about the amount of medication to administer, call the physician or pharmacist.
4. \_\_\_\_\_: The route of the medication should match the physician's order. For example, oral medications should be taken orally and sublingual medications should be taken under the tongue.
5. \_\_\_\_\_: Many medications are most effective when the correct time interval is kept. Generally, medications should be administered within one hour before or after the scheduled time. Some medications such as insulin and anticonvulsants are more time-sensitive than other medications. Consult the prescribing physician about the proper timing of each medication.
6. \_\_\_\_\_. Document the medication administration immediately AFTER giving the ordered or over-the counter medication. Chart the time, route, and any other specific information as necessary.
7. \_\_\_\_\_: If you are unsure about the purpose of the medication, be sure to discuss with the physician or pharmacist before administering the medication. Some helpful questions to ask include the following questions: What is the person's medical history? Why is the person taking this medication? If long-term use is applicable, what are the reasons for long-term medication use?
8. \_\_\_\_\_: Make sure that the medication led to the desired effect (e.g. medications for fever lowered the participant's temperature). Be sure to observe and document if the participant had an adverse reaction to the medication. If the medication does not seem to be working or the participant has an allergic reaction, inform the physician right away.

## Other Tips and Guidelines for Ensuring Medication Accuracy

1. Never administer medication from a container that has no label! Stop if at any time you discover that the information does not match the MAR.

If the container has no label or the label is illegible, you might:

- 1.
- 2.
- 3.
- 4.
- 5.

Think through each of these possibilities and decide what to do. If you are unsure, call the participant's healthcare provider.

2. Never leave the medication container unattended or give it to someone else to return to the locked storage container or medication drawer.
3. When using other medications such as topical creams and ointments, ear drops, nose drops and eye drops, consult with the participant's healthcare provider for specific procedures for self-administration of the medication.
4. Don't be afraid to ask questions. If you have any doubt about whether the medication is in the correct form as ordered, or whether you can assist the participant with self-administration as directed, ask the participant's healthcare provider.

## Topic 4: Medication Administration Checklist

Being knowledgeable about medications is critical to prevent errors, to prevent the misuse of medications, and to monitor the effects of medications. In order to assure you are able to correctly follow the 3 Checks and 8 Rights, you should be able to answer the following ten questions before you make any medication(s) available to a participant:

1. \_\_\_\_\_: What is the name of the medication? This will be either a brand name or generic name.
2. \_\_\_\_\_: What is the purpose of the medication and what are the desired effects of the medication?
3. \_\_\_\_\_: How long will it take before the desired effect occurs? The amount of time needed for a medication to take effect varies with the particular medication and the method of administration. Approximate time ranges include: Oral: 30 to 60 minutes; Sublingual: Several minutes; Rectal: 15 to 30 minutes; and Topical: Within 60 minutes.
4. \_\_\_\_\_: What are the possible side effects of the medication? Side effects are other possible effects of the medication besides the main effect(s) and are generally expected to occur when taking the medication. Examples include dizziness, nausea, and fatigue.
5. \_\_\_\_\_: What are the possible toxic effects of the medication? Toxic effects are other outcomes of the medication besides the main effect and may be harmful and unpredictable. Examples of toxic effects include bleeding and high blood pressure.
6. \_\_\_\_\_: How much of the medication is to be made available? This is called the dose or dosage.
7. \_\_\_\_\_: What time(s) must the medication be made available?
8. \_\_\_\_\_: How is the medication to be taken? The form of a medication often affects the route that it is administered. For example,

capsule medications can be taken orally, suppositories are administered through the rectum, liquids are needed for injection, and lotions are administered topically to the skin.

9. \_\_\_\_\_: Are there foods and beverages that should be avoided? Some foods and beverages can alter the effects of certain medications. For example, acidic foods like tomatoes and beverages like orange juice should be avoided when taking antibiotics. This information is included with the medication label warnings.
10. \_\_\_\_\_: Are there special procedures to conduct before the medication is taken? PRN medications (given as needed) often have special procedures that are to be followed as part of the specific guidelines of when it is appropriate to administer them. For example, a physician may want the participant's blood pressure checked before providing particular medications.



## Topic 5: Medication Administration Process

1. Wash your hands using \_\_\_\_\_.
2. Inform the participant that it is time to take their medication.
3. Unlock the cabinet or drawer that contains the medications.
4. Complete **First CHECK** while retrieving the appropriate medications. Read the medication label to ensure all the information is correct. The label must match up with both the MAR and the \_\_\_\_\_.
5. Review the appropriate **RIGHTS of Medication** (Right Person, Right Medication, Right Dose, Right Time, Right Route, Right Reason).
6. Complete **Second CHECK** while preparing the medication. Remove the cap. Read the label again.
7. Place the correct amount of medication into a paper cup. Liquid medications should be properly measured with a calibrated spoon or cup. Make sure that the medication does not touch your hands.
8. Complete **Third CHECK** immediately before giving the medication to the participant. Check the medication label against the Medication Administration Record (MAR) again.
9. Administer medication to the participant.
10. Document on the MAR \_\_\_\_\_ after giving the medication. This is the "**RIGHT Documentation.**"
11. Check for the "**RIGHT Response**" of the medication for the participant. Follow proper protocol if participant has adverse reactions.
12. Properly return medications to the \_\_\_\_\_ and \_\_\_\_\_ storage.

## Lesson 4: Medication Responsibilities

You are responsible for administering and managing a participant's medications correctly and accurately to ensure the health and safety of the individual.

You are responsible for:

1. Ensuring the safety of the participant through proper \_\_\_\_\_.
2. Ensuring participants take their medications as ordered by the physician.
3. Encouraging and supporting participants to be responsible for taking their own medications whenever possible.
4. \_\_\_\_\_, \_\_\_\_\_, and \_\_\_\_\_ any effects of the medication including both desired and undesired effects. Undesired effects include side effects and toxic effects.
5. Communicating with the participant, nurses, physicians, case managers, and the Circle of Support about the medications prescribed.
6. Maintaining \_\_\_\_\_ and \_\_\_\_\_ of all medication related activities.

## Topic 1: Observation and Monitoring

Triple checking for \_\_\_\_\_ and understanding how to properly administer medications is a critical part of ensuring the health and safety of the participant. Do not forget the Eight Rights of Medication Administration. Right \_\_\_\_\_ (Right #8) requires you to observe the individual after administering the medication to ensure the participant did not have an adverse reaction to the medication. If the medication does not seem to be working or the participant has an allergic reaction, you must inform the physician right away.

The following are examples of what observations to make:

- 1.
- 2.
- 3.
- 4.

You should always monitor for any \_\_\_\_\_ or \_\_\_\_\_ changes, especially after giving a new medication. Examples of physical changes to health include hives or itching, trouble breathing, and sweating. Examples of behavioral changes include unexpected changes to a person's level of awareness or an increase in aggression. Physical and behavioral changes may indicate an adverse or allergic reaction to a medication.

A participant may refuse medications. You should use \_\_\_\_\_ and \_\_\_\_\_ to help discern why the person does not want to take medications as prescribed. A person may not want to take a particular medication because of difficulty swallowing, for example. Perhaps a participant would like more choice with their medication administration. Use person-centered approaches to find out what is working and not working with medication administration.

## Topic 2: Managing Medications within the Circle of Support

As a licensed or certified caregiver, you are responsible for supporting the individual to take their medications according to the prescribed medication schedule as ordered by the physician. This may sometimes mean the individual will self administer or have their medication administered by someone else while he/she is not in your home or is receiving services elsewhere (e.g. other waiver services such as Adult Day Health, Individual Employment Supports, Community Learning Service). When medication is given at the day program or workplace, you must work together to ensure the health and safety of the participant. Remember the day program or workplace also has regulations to follow.

If possible, work with the participant's physician to avoid medication administration during day program or work hours. Minimizing the number of medications taken outside the home will reduce the likelihood of medication errors or missed doses.

If medications are administered outside of the home, you must:

1.

2.

3.

## Topic 3: Proper Documentation and Reporting Medication Errors

### Maintaining Proper Documentation

You are required to document all medication administration activities. The MAR is the primary tool used by caregivers and service providers to fulfill medication documentation requirements. The MAR includes key information about the participant's medication and is considered a legal document. It is used to demonstrate the physician's orders were followed. Remember, a medication will not be considered administered unless it is documented.

### Reporting Medication Errors

**Preventing medication errors is a top priority.**

You have learned the best way to help the participant take medications safely and to reduce the risk of errors, but even in the best of situations, errors may occur. When they do, you need to know what to do.

Remember that a medication error occurs when any of the following happens:

1. **Wrong** \_\_\_\_\_
2. **Wrong** \_\_\_\_\_
3. **Wrong** \_\_\_\_\_
4. **Wrong** \_\_\_\_\_
5. **Wrong** \_\_\_\_\_
6. **Wrong** \_\_\_\_\_
7. **Wrong** \_\_\_\_\_
8. **Wrong** \_\_\_\_\_

## Lesson 5: Documentation

### Topic 1: Medication Log

Accurate documentation begins before writing the MAR itself. The MAR is just one part of having accurate documentation. Before even preparing the MAR, make sure that there are: (1) physician's order and (2) accurate medication label. A MAR can only be accurate if the medication label and the information transcribed on the MAR matches the physician's order exactly.

#### Medication Log

Keeping a log of all the medications is helpful to track all the medications for a participant. Participants may have multiple medications and it can be difficult to remember all of the medications. The medication log can assist you in keeping accurate records of all the medications for the participant.

Some participants may also have different healthcare providers that prescribe various medications. The doctors may not necessarily be aware of the other medications that are being prescribed. Keeping track of all the medications and sharing that information with the various physicians during visits, can help the physician from ordering a medication that is contraindicated with other medications the participant may be currently taking.

The Medication Log includes the following:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_ / \_\_\_\_\_
4. Physician/Nurse Practitioner (NP)'s Name and Phone number
5. Notes

## Topic 2: Medication Administration Record (MAR)

The MAR includes key information about the person's \_\_\_\_\_, including the name of the medication, the dose and the time(s) and the way the medication is to be taken. If available, premade medication labels from the pharmacy can be placed on the MAR. When possible, include the manufacturer's or pharmacy's additional instructions on how to take the medication.

Use the following guidelines to maintain and update the MAR:

1. Reference the physician's order when preparing the MAR. The information on the MAR should match the \_\_\_\_\_ accurately.
2. Whenever a prescription is changed, the MAR must be updated. Update the \_\_\_\_\_ with the changes as well.
3. To document that a medication has been taken, you must write down the \_\_\_\_\_ and \_\_\_\_\_ in the place provided and initial for each dose of medication. This must be done at the time the medication is taken by the person, not before and not hours later. Document immediately after administering the medication to avoid medication errors.
4. When assisting the participant, read the information on the medication label and compare it to the information on the MAR. Do this \_\_\_\_\_ times before your participant takes the medication. By checking this way, you ensure that you are assisting the right person with the right medication and dose at the right time with the right route.

## Preparing the MAR

Carefully prepare and document the medication administration process in your participant's MAR.

You will record the following in the MAR:

1. Record the participant's name, the current month and year, birthdate, as well as any allergies or whether they have a history of medication reactions. If there are no known allergies, write "no known allergies."
2. Record the name of the medication, the dosage, the number of capsules or tablets, or the amount of liquid, the number of times per day it is to be given (frequency), the specific time the medication is to be given and the mode or route by which it is to be given. Remember to reference the physician's order and check that the information written on the MAR matches the order accurately.
3. Record your full signature along with your initials.



## Documenting on the MAR

When and why you must document on your participant's MAR:

1. \_\_\_\_\_
  - Immediately initial the square for the correct date, time, and medication
  - Always check to make sure your full signature is on the MAR
  
2. \_\_\_\_\_
  - Initial the box for the correct medication, date and time
  - Circle your initials that are in the box. This matches the legend on the MAR.
  - If the participant did not receive a prescribed dose of medication, this is considered a missed dose. Anytime that a participant misses a dose, notify the prescribing physician and follow the physician's instructions regarding the appropriate action to take. Write an explanation as to why the medication was not given on the caregiver's notes and file an AER. Include the physician's instructions on the notes.
  
3. \_\_\_\_\_
  - Write in large letters "DISCONTINUE" or the abbreviation "DISC" or "DC," followed by the date, and your initials.
  - Remove the medication from the cabinet and properly dispose of the discontinued medication.
  
4. \_\_\_\_\_

Regardless of the reason for disposing the medication (refer to section above explaining situations that you would dispose of medication), document in the caregiver's notes MAR when a medication is discarded.

5. \_\_\_\_\_

Time limited medication should be recorded on the MAR like all other medications. Also include:

- The date and time the medication is to start
- The number of days or doses to be given
- The date and time the medication is to be stopped and your initials
- Line out the days the medication is NOT to be given

6. \_\_\_\_\_

PRN is the abbreviation of Pro re nata, Latin for as the circumstance arises.

- Check to be sure there is a current signed order for the PRN medication
- Administer the medication and document the reason the medication was given
- Later, document on the back of the MAR the effectiveness of the medication, and inform the physician if the medication is not effective for the individual

7. \_\_\_\_\_

Use an abbreviation or code with a definition for medications administered at the day program or workplace on the MAR.

8. \_\_\_\_\_

- Assess the situation. Is individual not feeling well? Can we try offering in a few minutes?
- Write "R" for Refused
- Document in the MAR, Caregiver Notes, and file AER (Missed Dose).
- Notify the physician, case manager, and RN service supervisor if there is one.

### **Topic 3: Adverse Event Reports (AER)**

An Adverse Event Report (AER) must be filed any time a medication \_\_\_\_\_ occurs. A medication error occurs when the right medication is not taken as prescribed. Be aware that every and any medication error is serious and could be life threatening for the participant. Your job is to safely assist the participant by properly \_\_\_\_\_ and \_\_\_\_\_ the medication to ensure that the person receives the benefits of the medications. If a medication error is made, document it in the MAR, the caregiver notes, and file an Adverse Event Report.

The record should include the date and time, the \_\_\_\_\_ involved, a description of what happened, who was \_\_\_\_\_, the physician's name, the \_\_\_\_\_ given, and the \_\_\_\_\_ taken.

For specific information on DDD's policy on medication errors and the AER, see Policy #3.07: Adverse Event Report for Participants.

## Lesson 6: MAR Practice Examples

### Documentation Importance

The \_\_\_\_\_ of the documentation is key. Initial immediately after giving the medication. To ensure individual safety, make sure it is not before or too long after.

If you do not document that the medication was given, there is no way to prove the medication was actually given. Remember that \_\_\_\_\_ or \_\_\_\_\_ documentation may lead to a medication error.

With that said, we will now practice to ensure you understand how to fill out MARs based on specific situations. Note that we are using the same participant name and caregiver name in all of these examples, but the combination and frequency of the medications is intended for practice purposes for this online module, not practical use.

### Practice Example #1

In this example, the physician indicated that the medication can be given at 8am. Note: This first example will give you step-by-step instructions on how to fill out the MAR.

Patient Name: **Brian Gays**  
Address: \_\_\_\_\_ Date: **2/1/20**

**R<sub>x</sub>**

**Furosemide 20 MG for  
high blood pressure.**

**Take 1 tablet, PO QD**

**Start medication  
February 3, 2020.**

**Dr. Carmen Dales**  
MD: \_\_\_\_\_  
Signature: *Carmen Dales*

### Take the following steps using the MAR:

1. Write the participant's name at the top left of the MAR: **Brian Cays**
2. Below the participant's name, indicate if the person has any allergies or a history of medication reactions. If there are no known allergies, write "none" or "no known allergies": **No known allergies**
3. Write the appropriate month and year on the line indicated "Month/Year":  
**February 2020**
4. Write the person's birth date: **02/02/1982**
5. Copy the medication, dose, frequency (e.g. once a day), and purpose in the "Medication/Dosage" column on the MAR. This information should match the physician's order accurately: **Medication - Furosemide. Dose - 20 mg. Frequency - QD (once a day). Purpose - High blood pressure (hypertension).**
6. Write the mode (route) of the medication in the "Mode" column: **Mouth.**
7. Write the time of the medication indicated by the physician in the "Time" column: **8am**
8. Refer to the effective date of the medication on the physician's order and cross out dates that have passed, if applicable. **Effective date is Feb. 3, 2020.**
9. Initial in the appropriate column immediately after giving the participant the first dose of the medication.

### Additional Notes

- Check that you wrote "February 2020" at the top of the MAR, based on the order. The numbers at the top of the MAR refer to the dates of the current month and year. Because this order starts on February 3, you will look for the column that has "3" (referring to the 3rd day of the month).
- Note that this person is taking furosemide for high blood pressure. Furosemide may also be used for edema, so it is important to write in the purpose of the medication that is being prescribed.



Completed MAR: Example #1

**MEDICATION RECORD**    **Brian Cays**    **February 2020**  
 No known allergies    **Birth Date: 02/02/1982**

MONTH/YEAR:    18 17 16 15 14 13 12 11 10 9 8 7 6 5 4 3 2 1

MEDICATION/DOSAGE	MODE	TIME	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
Furosemide 20 MG. Take 1 tablet. Once a day. For high blood pressure.	Mouth	8 AM																															

LEGEND:  
 + - Bowel Movement    H - Hospital  
 DP - Day Program    O - Not Given  
 HL - Home Leave    R - Refused; See Caregiver's Notes

## Practice Example #2:

Follow the prescription and fill out the MAR based on the following information:

- The physician indicated that the medication can be given at 8am.
- This is the third day Metformin has been given, and the caregiver administered and documented the medication daily.

Patient Name: **Brian Gays**  
Address: \_\_\_\_\_ Date: **2/1/20**

**R<sub>x</sub>**

**Metformin**  
**850mg PO for diabetes**  
**1 tab QD**  
**Start medication on**  
**February 17, 2020**

**Dr. Carmen Dales**  
MD: \_\_\_\_\_  
Signature: *Carmen Dales*

Additional Notes:

Metformin may also be used for polycystic ovary syndrome. Ensure that you specify that the medication is being used for diabetes.



**MEDICATION RECORD**

MONTH/YEAR: \_\_\_\_\_

MEDICATION/DOSAGE	MODE	TIME	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		

LEGEND:

- + - Bowel Movement
- DP - Day Program
- HL - Home Leave
- H - Hospital
- O - Not Given
- R - Refused; See Caregiver's Notes

Completed MAR: Example #2

MEDICATION/DOSAGE	MODE	TIME	MONTH/YEAR: <u>February 2020</u>																																
			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		
Metformin 850 mg PO for diabetes. 1 tab QD.	Mouth	8 AM																																	

**LEGEND:**  
 + - Bowel Movement  
 DP - Day Program  
 HL - Home Leave  
 H - Hospital  
 O - Not Given  
 R - Refused; See Caregiver's Notes

### Practice Example #3:

Follow the prescription and fill out the MAR based on the following information:

- The physician indicated that the medication can be given twice per day at 6am and 6pm.
- This is the second day Latanoprost Ophthalmic Solution has been given.
- The caregiver administered and documented on the first day for both doses.
- On the second day, the caregiver documented that the dose was not given in the morning.
- On the second day in the evening, the dose was administered at the day program.

Patient Name: **Brian Cays**  
Address: \_\_\_\_\_ Date: **2/1/20**

**R<sub>x</sub>**

**Latanoprost Ophthalmic  
Solution 0.005%.**

**One GTTS in each eye, BID  
for glaucoma.**

**Start medication on  
February 23, 2020**

MD: **Dr. Carmen Dales**  
Signature: *Carmen Dales*

**MEDICATION RECORD**

MONTH/YEAR: \_\_\_\_\_

MEDICATION/DOSAGE	MODE	TIME	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	

LEGEND:

- + - Bowel Movement
- DP - Day Program
- HL - Home Leave
- H - Hospital
- O - Not Given
- R - Refused; See Caregiver's Notes

# Completed MAR: Example #3

**MEDICATION RECORD**    **Brian Cays**    **February 2020**  
 No known allergies    **MONTH/YEAR:**    **Birth Date: 02/02/1982**

MEDICATION/DOSAGE	MODE	TIME	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						
Letanoprost		6 AM																																					
Ophthalmic Solution 0.005%. One GTTS in each eye, BID for glaucoma	Mouth	6 PM																																					

**LEGEND:**  
 + - Bowel Movement    H - Hospital  
 DP - Day Program    O - Not Given  
 HL - Home Leave    R - Refused; See Caregiver's Notes

### Practice Example #4:

The following is an example of a PRN medication for fever. When administering a PRN medication, double check to see if there is a current signed physician's order. Verify that it is within the parameters of the physician's order and if it is appropriate to administer the medication.

Follow the prescription and fill out the MAR based on the following information:

- The parameters are to give acetaminophen if a fever is over 100°F.
- Document that the medication was given at 7am and at 5pm on February 10.

Patient Name: **Brian Cays**  
Address: \_\_\_\_\_ Date: **2/1/20**

**R<sub>x</sub>**

**Acetaminophen 325 mg**  
**1 Tablet PO**  
**Q 4 hours PRN for fever**  
**over 100°F**

**Dr. Carmen Dales**  
MD: \_\_\_\_\_  
Signature: *Carmen Dales*

# MEDICATION RECORD

MONTH/YEAR: \_\_\_\_\_

MEDICATION/DOSAGE	MODE	TIME	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	

LEGEND:  
 + - Bowel Movement  
 DP - Day Program  
 HL - Home Leave  
 H - Hospital  
 O - Not Given  
 R - Refused; See Caregiver's Notes

Completed MAR: Example #4

**MEDICATION RECORD** **Brian Cays** **February 2020**  
 No known allergies **Birth Date: 02/02/1982**

MONTH/YEAR: **February 2020**  
 Birth Date: **02/02/1982**

MEDICATION/DOSAGE	MODE	TIME	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		
Acetaminophen 325 mg. Take 1 tablet every 4 hours as needed for fever over 100°F	Mouth	7 AM 5 PM																																	

LEGEND:  
 + - Bowel Movement  
 DP - Day Program  
 HL - Home Leave  
 H - Hospital  
 O - Not Given  
 R - Refused; See Caregiver's Notes



## Caregiver Notes

The following is an example of what Alena wrote in the Caregiver Notes form. It is recommended to provide the reason why the medication was given (e.g. participant had a fever over 100°F) and if the expected outcome was achieved (e.g. the fever decreased to lower than 100°F) or if there were any adverse reactions.

Caregiver Notes:

*2/10/2020*

*Brian had a fever of 100.8°F at 6:50AM. 1 tablet Acetaminophen given per PRN orders. At 8am, Brian's temperature was 98.9°F. Brian stated he felt "a lot better." Initialed AB. Took Brian's temperature every hour since first administration, and temperatures did not go above 100°F. At 4:45 PM, Brian complained he "wasn't feel too good again." Brian's temperature was 100.2°F at 4:50PM. Gave Brian 1 tablet at 5PM. Called Dr. Dales at 5:30PM to inform her about Brian's fever. Dr. Dales said to continue to follow the PRN Acetaminophen orders on file for fever, and to call her tomorrow morning if the fever persists. At 6PM, Brian's temperature was at 98.6°F. Initialed AB.*

## Practice Example #5

Follow the prescription and fill out the MAR based on the following information:

- The times the medication is to be given are: 6am, 12pm, and 6pm.
- The order was received in the morning and the physician instructed to give the first dose on the 2nd at 12pm.

Patient Name: **Brian Gays**  
Address: \_\_\_\_\_ Date: **2/1/20**

**R<sub>x</sub>**

**Amoxicillin 250 mg  
capsules for pharyngitis.**

**Take 1 capsule PO  
TID for 7 days  
Start medication on  
February 2, 2020**

**Dr. Carmen Dales**  
MD: \_\_\_\_\_  
Signature: *Carmen Dales*

Additional Information:

- The MAR documents the first two doses on that day.
- Note where the spaces are crossed out after seven days to help track how many more days the medication needs to be given.
- It is always critical to administer all of the doses as ordered by the physician.

**MEDICATION RECORD**

MONTH/YEAR: \_\_\_\_\_

MEDICATION/DOSAGE	MODE	TIME	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	

LEGEND:

- + - Bowel Movement
- - Hospital
- DP - Day Program
- O - Not Given
- HL - Home Leave
- R - Refused; See Caregiver's Notes

Completed MAR: Example #5

**MEDICATION RECORD** **Brian Cays** MONTH/YEAR: **February 2020**  
**No known allergies** Birth Date: **02/02/1982**

MEDICATION/DOSAGE	MODE	TIME	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									
Amoxicillin 250 mg cap. 1 capsule, 5 times a day for 7 days for pharyngitis	Mouth	6 AM 12 PM 6 PM																																								

LEGEND:  
+ - Bowel Movement      H - Hospital  
DP - Day Program        O - Not Given  
HL - Home Leave        R - Refused; See Caregiver's Notes

## Practice Example #6

When a medication is discontinued, document the discontinuation of the medication on the MAR by taking the following steps:

1. On the MAR, write "DISCONTINUED" or "DISC" or "DC" next to the specific medication the physician is discontinuing, followed by the date, time, and your initials.
2. Draw a line on the remaining days of the month to indicate that the medication will no longer be administered.
3. Remove the medication from the cabinet and properly dispose of it.
4. Document the disposal of the discontinued medication.

When there is a change in dose for a medication, document the discontinuation of the older dose by using the steps above first. Then write the updated dose as a new entry in a different box under the "Medication/Dose" column.

Follow the prescription and fill out the MAR based on the following information:

- The physician indicated that medication can be given at 8am and 8pm.
- First, document the discontinuation of the carbamazepine 200 mg on the MAR.
- Next, write the new order of the increased dose of 400mg as a new entry.
- Document that you administered both the morning and evening dose of the carbamazepine 400mg on 2/23/20.

Patient Name: **Brian Cays**  
Address: \_\_\_\_\_ Date: **2/16/20**

**R<sub>x</sub>**

**Carbamazepine**  
**200mg for seizures**  
**Take 1 tablet PO BID**  
**Start this medication**  
**February 16, 2020.**

**Dr. Carmen Dales**  
MD: \_\_\_\_\_  
Signature: *Carmen Dales*

Patient Name: **Brian Cays**  
Address: \_\_\_\_\_ Date: **2/23/20**

**R<sub>x</sub>**

**DISCONTINUE Carbamazepine,**  
**200mg for seizures effective**  
**2/23/20**  
**Start increased dose of**  
**Carbamazepine 400mg, 1 tab PO**  
**BID effective 2/23/20**

**Dr. Carmen Dales**  
MD: \_\_\_\_\_  
Signature: *Carmen Dales*

**MEDICATION RECORD**

MONTH/YEAR: \_\_\_\_\_

MEDICATION/DOSE	MODE	TIME	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			

- LEGEND:
- + - Bowel Movement
  - DP - Day Program
  - HL - Home Leave
  - H - Hospital
  - O - Not Given
  - R - Refused; See Caregiver's Notes

Completed MAR: Example #6

**MEDICATION RECORD** **Brian Cays** **January 2020**  
 No known allergies **Birth Date: 02/02/1982**

MEDICATION/DOSAGE	Mode	Time	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		
Carbamazepine 200mg for seizures. Take 1 tablet BID <b>DISC 02/23/2020 AB</b>	Mouth	8 AM																																	
		8 PM																																	
Carbamazepine 400mg for seizures. Take 1 tablet BID	Mouth	8 AM																																	
		8 PM																																	

**LEGEND:**  
 + - Bowel Movement  
 DP - Day Program  
 HL - Home Leave  
 H - Hospital  
 O - Not Given  
 R - Refused; See Caregiver's Notes



## Lesson 7: Summary

Documentation includes the physician's orders, the MAR, the caregiver notes and the Adverse Event Report (AER), if and when a medication error occurs.

Documentation is important because it shows what medication was given and when it was given. It shows that the care provider followed the physician's orders. Medication errors often occur when a care provider fails to document and additional doses are administered to the participant. Remember, if you did not document it, the medication is considered not have been given.

The MAR includes key information about the person's medications, including the name of the medication, the dose and the times and way the medication is to be taken. To avoid errors, premade medication labels from the pharmacy can be placed on the MAR. When possible, include the manufacturer's or pharmacy's additional instructions on how to take the medication.

The following are guidelines for medication procurement and storage.

- Medication must be kept in a secured locked container, including refrigerated medications
- Medications need to be stored based on the manufacturer's instructions
- If your participant uses self-administration, they must make sure the medications are not available to others and stored based on the manufacturer's instructions
- Best practice is to store oral and external medications separately
- Keep the medication storage area clean and orderly

When you dispose medication, both prescription and non-prescription, you cannot just throw it away or flush it down the toilet. All unused, discontinued, outdated, recalled and contaminated medications must be disposed of properly. Medications

in containers that have worn, illegible or missing labels must also be disposed of. Regardless of the reason for disposing the medication, you must document in the MAR when a medication is discarded.

To properly dispose of medication, crush all pills and mix the crushed pills with an absorbent material (e.g., cat litter, sawdust or used coffee grounds). Dispose the mixture into a plastic bag and secure it tightly. For liquid medications, fill a plastic bag with absorbent material, then pour the liquid in and tie the bag shut. Wrap the plastic bag in another bag and put it into the garbage bag. For more information, call Honolulu's Office of Household Hazardous Waste at (808) 768-3201.

A medication error occurs when the right medication is not taken as prescribed. Be aware that every and any medication error is serious and could be life threatening for your participant. Your job is to safely assist your participant by properly managing and administering the medication to ensure that the person receives the benefits of the medications. Preventing medication errors is a top priority.

You have learned the best way to help your participant take medications safely and to reduce the risk of errors, but even in the best of situations, errors may occur. When they do, you need to know what to do.

Remember that a medication error occurs when any of the following happens:

- The wrong person takes the medication
- The person takes the wrong medication
- The wrong dosage was taken
- The medication was taken at the wrong time
- The medication was taken by the wrong route
- The medication was not taken

If an error occurs, it must be reported immediately to the participant's physician. Follow the physician's instructions. The error must be recorded either in the MAR or, if applicable, another document specific to your agency. The record should include the date and time, the medication involved, a description of what happened, who was notified, the physician's name, the instructions given and the action taken.

Remember that preventing errors is the #1 priority. You will need to report all medication errors on the Adverse Event Report (AER) form.

Take these precautions to prevent errors:

- Stay alert
- Follow the "Eight Rights"
- Avoid distractions
- Know your participant and their specific medications
- Ask your participant's physician if you are unsure about any step in preparing, assisting or documenting medications