

What is the difference between “**Medication Administration**” and the task of “**Assisting with Medication**”, or providing “**Assistance**” to a client who takes their medication independently?

- A. **Medication Administration**, is to be completed by a licensed Nurse. It is a **12 step** process that requires specialized knowledge and clinical reasoning. The typical steps are:
1. Receipt of order
 - a. if a telephone order use the “read back” method
 - b. verify this is a licensed prescriber
 - c. verify no drug/drug or drug/food interactions
 - d. verify against known allergies
 - e. communicate with others on the healthcare team (if the order is from a specialist, need to inform Primary care provider)
 - f. process order to MAR
 - g. add any appropriate intervention to care-plan (increase fluids, extra BP check, mobilize slowly)
 2. Confirm appropriateness of the dose using a current drug reference. If necessary, calculate the dose and have another nurse calculate the dose as well.
 3. Check the order and appropriateness of the route ordered. Confirm that the patient can take or receive the medication by the ordered route.
 4. Check the frequency of the ordered medication. Double-check that you are giving the ordered dose at the correct time. Accommodate need for food etc. Indicate any Time Critical meds on the MAR (insulin, acid Inhibitors, antibiotics, anti-coagulants, anti-Parkinson’s etc.).
 5. Confirm when the last dose was given, if started in another location, i.e. a transfer back from the hospital.
 6. Confirm the rationale for the ordered medication. What is the patient’s history? Why is he/she taking this medication? Beware of look-alike or sound-alike medications—products that can be confused because their names look alike or sound alike. Does it appear duplicative with another current medication? Revisit the reasons for long-term medication use.
 7. Obtain the correct medication from multiple sources, including floor stock. Re-package as appropriate.
 8. Administer (this is where the delegation may occur with “administration” to patient)
 9. Provide appropriate education to the patient, and all other caregivers on the new medication. Include handouts to be kept readily available.
 10. Make sure that the drug led to the desired effect. If an antihypertensive was given, has his/her blood pressure improved? Does the patient verbalize improvement in depression while on an antidepressant?
 11. Document your monitoring of the patient and any other nursing interventions that are applicable.
 12. Update care-plan, or communicate with prescriber based on patient response.

- B. **Assisting with Medications** is a delegated nursing care activity, and may be completed by a UAP that has met the Board of Nursing requirements, and received delegated approval to perform the task based on the Board of Nursing's standards of delegation. Only **step 8** is appropriate for delegation. All other steps are licensed nurse functions. The 6 rights are the basis for safe med administration/assist to patients.

Note: Medications should be identified on the specific patient level i.e. a blister pack, a med cassette, in the patient's room in a secure location. No stock medications.

1. Right patient

- Use 2 identifiers.
- Ask patient to identify himself/herself.

2. Right medication

- Check the medication label.
- Check the MAR.

3. Right dose

- Check the medication label.
- Check the MAR.

4. Right route

*Refer to written instructions provided by the nurse, involve patient if appropriate.

5. Right time

- Double-check that you are giving the ordered dose at the correct time.
- Confirm when the last dose was given.

6. Right documentation

- Document administration AFTER giving the ordered medication. Document any Vital signs or blood glucose levels per policy.

If the patient has a change in condition, always call the nurse prior to assisting the patient to take their meds. If a patient questions what you are doing, re-verify everything prior to proceeding.

- C. **Cueing** a client to take their medications, or providing some **Physical Assistance** to enable a client to independently take their medications is a customary activity for UAPs, who are competent to do so.