

Assistance with Medications for Unlicensed Assistive Personnel Student Study Guide

2013

October 2017 Update

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Online Resources

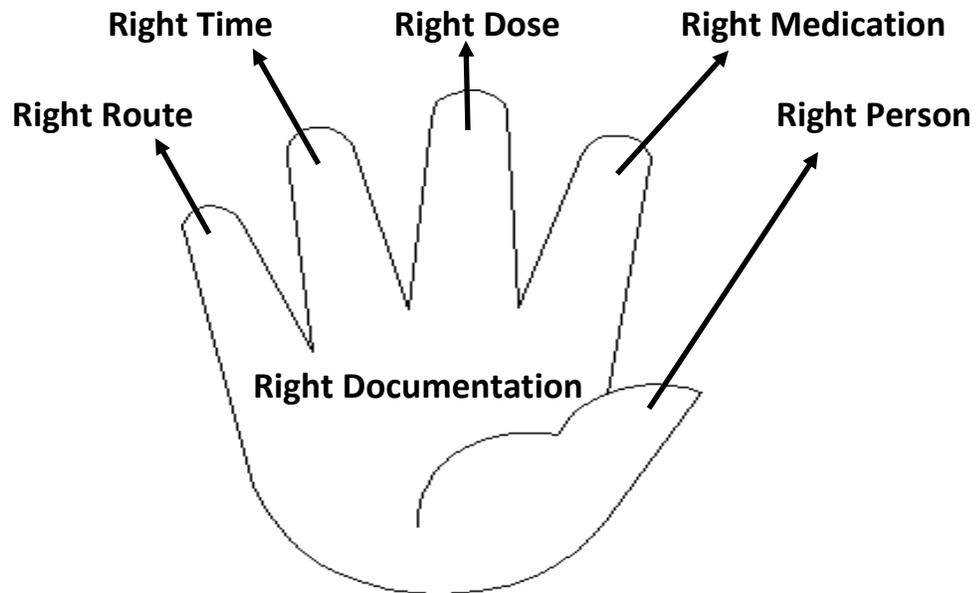
Board of Nursing Rules Governing Unlicensed Assistive Personnel (UAP)

- <http://adminrules.idaho.gov/rules/current/23/0101.pdf>
- Section 490 Unlicensed Assistive Personnel

Idaho Career & Technical Education

- <https://cte.idaho.gov/wp-content/uploads/2016/01/Postsecondary-Assistance-with-Medications-for-Unlicensed-Assistive-Personnel.pdf>

THE SIX RIGHTS OF MEDICATION ASSISTANCE



Legal Considerations - Administrative Rules of the Idaho State Board of Nursing:

- ***What is an Unlicensed Assistive Personnel (UAP)?***
 - This is a person who is employed to perform basic nursing care services. Care of the client must be **delegated through the direction and supervision of licensed nurses.**
 - UAPs may not delegate to anyone else
- ***What is Assistance with Medications (AWM)?***
 - Nurses delegate assistance with medications for individuals who cannot take medications by themselves.

Assistance with medications may include:

- Breaking a scored tablet or crushing
- Instilling eye, ear or nose drops
- Assisting with medication through pre-mixed nebulizer
- Assisting with medication through a gastric tube
- Assisting with oral medications
- Assisting with topical medications
- Assisting with insertion of suppositories

Assistance with medications does NOT include:

- Mixing a medication
- AWM by injection or IV – (Epi Pen ok with additional training)
- AWM through a positive pressure nebulizer
- AWM through nasogastric tube (nose to stomach)
- Sterile Procedures

Why is it important for the UAP to know and follow agency/facility policy and procedures?

-

What must be in place for the UAP to accept delegation of assistance with medications?

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.

What is the responsibility of the UAP in accepting delegation?

Patient/Client Rights

- In the United States, we have the right to make decisions about our health care, even if the decision is not one that the care provider recommends.
- Under the Federal Bill of Rights, patients have the right to refuse any treatment or medication.
- Your responsibility is to give the medication as ordered **unless the patient refuses.**

What does a UAP do when the patient refuses to take meds?

- 1.
- 2.

Safety Measures - Preventing the Spread of Infections:

The common paths of infection are:

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

Why is the prevention of any infection important to the UAP?

-

How can infections best be prevented?

-

When does the UAP use Standard Precautions?

-

What are the steps of Standard Precaution?

- 1.
- 2.

Causes of Drug-resistant Organisms such as:

- MRSA (Methicillin-Resistant Staphylococcus Aureus)
 - C-diff (Clostridium difficile)
1. Over prescribing
 2. Prescribing for a viral infection
 3. Not taking all doses

Safety Measures - *Dangers associated with Medications:*

Properly prescribed & administered medications rank 4th or 5th as cause of death in U.S.

Always check your medication sheet to see if the patient/client has a known allergy before giving a new med.

Side Effect

(Unintended effects of medication)

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

Allergic Reaction

(Immune system reacts to an allergen- histamine released)

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.

Anaphylaxis/Anaphylactic Shock

- This is a severe allergic reaction causing swelling and breathing difficulties. This can lead to death if emergency treatment is not available.
- Call 9-1-1 if you suspect an anaphylactic reaction. Then call your supervisor.
- Provide CPR as needed until the emergency medical personnel arrive.
- Have the name of the medications and the dose taken ready for the emergency medical personnel

When do Allergic Reactions/Side Effects appear?

- Allergic reactions may have many symptoms that may appear immediately or not until several days/weeks or even months/years have passed.
- REMEMBER: Any medication can have an adverse or unexpected effect anytime.

Safety Measures - Diabetic Hyperglycemia and Hypoglycemia

- Diabetes is chronic illness that occurs when a person’s body cannot produce or utilize insulin.
- Requires insulin injections or oral medication
- Hyperglycemia (high blood sugar) or Hypoglycemia (low blood sugar) can be life threatening

Hyperglycemia	Hypoglycemia
<ul style="list-style-type: none"> • Blood glucose above 130mg/dl (above 400mg/dl* is life threatening) • Increased thirst • Increased urination • Fruity breath odor • Fatigue • Confusion* • Agitation* • Weight loss 	<ul style="list-style-type: none"> • Blood glucose below 60mg/dl (below 50mg/dl* is life threatening) • Cool, clammy skin* • Nervousness, trembling • Poor coordination* • Fatigue • Confusion* • Irritability* • Dizziness, blurred vision • Nausea • Loss of consciousness*

*Serious signs and symptoms requiring immediate notification of RN or a physician
 These complications can resemble other conditions in the elderly.

Basic Understanding of Medications

Safe Storage of Medication

- Locked up at all times
 - Controlled Substances:**
 - Require two (2) locks
 - Accurate count at shift change by 2 persons
 - Count is documented in a log book
- Out of direct sunlight
- At room temperature (Refrigeration may be required for some medications)
- Out of reach of children

Medications

Prescription Label Information

- | | |
|----|-----|
| 1. | 6. |
| 2. | 7. |
| 3. | 8. |
| 4. | 9. |
| 5. | 10. |

Recording and Reporting

- A medication record is a legal document where the assisting of medications is recorded

What is the correct way of writing/documenting in the patient records?

- | | |
|----|----|
| 1. | 4. |
| 2. | 5. |
| 3. | 6. |

What are important aspects of a medication record?

- | | |
|-------------------------|----------------------------|
| 1. Name of patient | 4. Times of administration |
| 2. Name of medication | 5. Route of administration |
| 3. Dosage of medication | 6. Initials/Signature |

MEDICATION ADMINISTRATION RECORD (MAR)

PATIENT NAME: Happy Does

DATE: (month/year)

PHYSICIAN: Dr. Do Good

ALLERGIES:

MEDICATION	Time	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
Lasix 40 mg po daily	8 am																	

Notes: _____

Initial	Signature

Missed or refused doses – chart according to agency policy

Medication Error - When any of the 6 rights is violated

- What should a UAP do if a medication error happens?
- How soon?
- Are charting errors of the same legal importance as medication errors?

PRN Medication – Remember, before assisting with PRN medication

- Client cannot have it any sooner than prescribed by physician
- Must call nurse for permission to assist with medication
- Must document reason and effectiveness

OTC Medications --- can be purchased by anyone “over the counter” at a store.

- Before the client can have an OTC medicine there must be
 - 1.
 - 2.
 - 3.

Medication Abuse

- When a medication is taken for the prescribed purpose but in the wrong amount/times or if it is taken for the wrong purpose.
- Abuse of medications may develop intentionally or unintentionally.
- Any concerns should be reported to the nurse supervisor.

How would you recognize medication abuse?

- Dependence on the drug (even laxatives)
- No signs of pain, but asks for pain med

Some of the signs and symptoms of medication abuse that you may see are:

- Demanding their PRN medication at inappropriate times.
- Unusual flare-ups or outbreaks of temper.
- General changes in overall attitude.
- Deterioration of physical appearance and grooming.

When do medications need to be destroyed?

- | | |
|----|----|
| 1. | 4. |
| 2. | 5. |
| 3. | 6. |

What should a UAP do if medication needs to be destroyed?

- 1.
- 2.

Why aren't medications thrown away in the garbage can or flushed down the toilet?

- 1.
- 2.

Problem Solving (Critical Thinking):

- | | |
|----|----|
| 1. | 4. |
| 2. | 5. |
| 3. | 6. |