Section I

Administering Medications
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Objectives:

At the completion of this section, the student should:

1. Use the Six Rights to administer oral, sublingual, topical, transdermal, eye, ear, inhalant, and nasal medications – right resident, right medication, right dose, right route, right time, and right documentation.
2. Identify proper action to take when crushing or cutting medications in relation to medication administration.

Advance Preparation – In General

- Review curriculum
- Add examples or comments
- Make copies of student manual for each student or handouts
- Make copies of each skills checklist for each student

Supplies

- Handouts
  - I-1 – Review of Measuring Devices
  - I-2 – Always and Never Measuring Tips
  - I-3 – Measuring Tips
  - I-4 – Technique and Use of Meter Dose Inhalers
- Supplies for cutting or crushing medications
- Supplies for cleaning equipment used for cutting and crushing medications
- Supplies for demonstrating medication administration skills of each route in section
### Administering Oral (Solid) Medications

#### Overview and Concepts

- Some residents take multiple oral medications at once
  - Ask them how they like to take their pills, one at a time or several at a time
  - If they prefer only a few at a time, assist them to take 1-2 pills at a time

- Remember to pour a cup (8 oz.) of water for the resident to drink with medications
  - When all the medications have been swallowed, encourage resident to drink another cup of water to make sure all the medications were swallowed and moved into the stomach
  - Encouraging the resident to drink water also helps them stay hydrated
  - Oftentimes residents do not drink enough water and encouraging resident to drink water at the time of medication administration will assist them in getting the amount of water they need each day
  - Giving the resident a sip of water beforehand may make it easier to swallow the medication

#### Types of Oral (Solid) Medications

- **Tablet**
  - Hard, compressed medication in round, oval, or square shape
  - Some have enteric coating or other types of coatings, which delay release of the drug and cannot be crushed or chewed

- **Capsule**
  - In a gelatin container that may be hard or soft
  - Dissolves quickly in stomach

#### Absorption Rates

- When administering oral medications, it is important to administer at the time prescribed or scheduled

- Oral medications are absorbed (used by the body) at different rates depending on various factors such as if the contents of the resident’s stomach (empty or full)
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#### TEACHING TIP: Cutting Medications

Review the procedure for cutting medications and teach/demonstrate the procedure using appropriate equipment.

**Cutting Medications**

- Sometimes medications have to be cut in half to get the correct dose
- This should be clear on the MAR
- Use a pill cutter to divide a pill into half for the dose
- If the pill cuts unevenly, then the pill is to be thrown away and a new pill is cut (a replacement pill will need to be ordered)
- Always clean the pill cutter with an alcohol wipe after using it so that the next Medication Aide using it will not be mixing medications
- Be careful not to cut self on the razor sharp blade
- Discuss with supervisor if medication needs to halved
- When the prescribed dose is for only half a pill
- Follow the facility’s policy on disposal of the other half of medication

#### TEACHING TIP: Crushing Medications and Mixing in Food

Locate the device used for crushing medications, review the procedures with crushing medications and mixing medications in food, and discuss various policies at adult care homes for crushing medications.

Demonstrate one of more methods for crushing a medication. If the device for crushing medication is used for more than one resident, demonstrate cleaning procedure and prevention of cross-contamination of residents’ medications.
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☑ TEACHING TIP: Current List of Medication that Should not be Crushed

The facility should have a current list of medications that should not be crushed. Show students what a list may look like.

A DO NOT CRUSH list is available from the Institute for Safe Medication Practice at: www.ismp.org/tools/DoNotCrush.pdf.

Crushing Medications

- Medication may need to be crushed if no liquid form of a medication is available and resident cannot swallow an oral solid medication

- MAR should state if a medication is to be crushed; Medication Aide will not make the decision whether to crush a tablet or not

- If it is not clear on the MAR, ask supervisor to provide clear instructions

- Several methods to crush a pill
  - Mortar and pestle or a pill-crushing device
  - Crushed in its package if only one pill is in the package
  - Placed between two clean small paper medication soufflé cups and crushed with a pestle or other crushing device

- After crushing medication, clean tools that come in contact with the medication with alcohol or soap and water, being sure to dry them before returning them to storage

- When a medication is crushed it will taste bitter and is common to mix medication with small amount of food to help the resident tolerate the taste as they take the now bitter medication
  - Example, applesauce or pudding
  - Mix the crushed medication with as little applesauce or pudding as possible because if too much applesauce or pudding is used, the resident may not be able to eat it all or refuse to eat it all and thus not get all the medication
  - Never leave medication in food unattended, because another resident may come by and eat the food, accidentally taking the medication, which will be a medication error and can be very dangerous

- Offer resident sufficient fluids following the administration of oral medications even if the medication is administered in a food substance

- Observe the resident taking the medication to assure the medication is swallowed before documenting the administration of the medications
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- Not all medications can be cut or crushed; do not ever cut or crush a pill that has an enteric (hard shell) coating, a capsule, or a pill that is sustained release or time released
  - Enteric-coated pill has a protective hard shell coating that allows it to pass through the stomach, without dissolving, to be absorbed in the small intestines
  - Enteric-coated medications designed to be swallowed whole and if cut or crushed, could burn a hole in the esophagus, stain the teeth, or not be absorbed because the stomach destroys the medication before it begins working
  - Capsules and sustained release medications are made to be absorbed over time and if cut open, lose that feature.
  - Cutting or crushing time-released medications can result in the resident getting an overdose of the medication because it is absorbed all at once instead of being released over a longer period of time
  - There is an extensive list of medications that cannot be crushed; however, Medication Aides are not to have to make a decision about cutting or crushing a medication because instructions should be clear on the MAR

### Administering Liquid Medications

#### Overview and Concepts

- A common way to administer medications
- Come in many forms – solutions, suspensions, syrups and elixirs
- Need to be aware extra care needs to be taken when measuring liquids and that Medication Aide should plan on taking more time
- Liquids may have administration requirements such as Shake Well or Requires Dilution prior to administration
  - Examples of these liquids are Dilantin Suspension, which must be shaken thoroughly because the medication settles and gives inconsistent dosing; liquid Potassium and bulk laxatives must be mixed with sufficient fluids to decrease side effects

#### Types of Liquid Medications

- Solution – a liquid containing dissolved medication
- Suspension – a liquid holding un-dissolved particles of medication and must be shaken before measuring and administering to resident
- Syrup – a liquid medication dissolved in a sugar water to disguise its taste
- Elixir – a sweet alcohol based solution in which medications are dissolved
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**✓ HANDOUT I-1: Review of Measuring Devices; I-2 Always and Never; I-3 Measuring Tips**
Distribute a copy of the handouts to each student or locate handouts in Student Manual

**✓ TEACHING TIP: Common Measuring Devices**
Referring to the handouts, compare and contrast the different measuring devices used to administer oral, liquid medications. Pay special attention to ml versus mg. Use visual aids if available. Referring to the handouts, discuss/demonstrate if applicable the concepts included.

**✓ TEACHING TIP: Metered Medication Cup**
Obtain enough metered medication cups for each student and distribute; and a bottle of water with the label on half of the bottle. Demonstrate the following as you teach the content:
- Measurements on the side of the medication cup, viewing eye level on a flat surface, and pouring water from the bottle while covering the label with the palm.

### Administering Liquid Medication Using a Medication Cup

- Do not mix liquid medications together

- Never approximate the amount of medication to be administered, such as liquids
  - Always use the correct measuring device when measuring liquid medications
  - Never use household measurements or spoons such as a teaspoon or tablespoon to measure medication doses because of inaccuracy
  - To administer liquid medications, use a small, clear, graduated medicine cup with measurements on the side
  - Use a calibrated syringe for measuring liquids in amounts less than 5 mL and unequal amounts

- Measure liquid medications on a flat, level surface at eye level to make sure that amount is correct

- When pouring liquid medications, hold the label under the hand so that the medication flows from the side opposite the label preventing the liquid from running down the container and stain or obscure label

- Liquids are prepared in separate cups from pills and tablets

- To prevent contaminating the remaining medication, never pour excess medication back into the bottle
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- Dispose of the excess medication per facility policy
- Ensure resident is sitting upright before administering liquid medication to a resident

#### Administering Liquid Medication Using a Medication Dropper

- Some medications come packaged with a medication dropper with measurements on the side
- If a medication comes with a special dropper, use that dropper only when giving that medication
- Keep dropper with the medication
- Some manufacturers have you replace the cap with the dropper/cap so that it is always ready for use to prepare the correct dose of medication.
- Liquid medications may have an oral dropper/syringe specifically for measurement of dose; the name of the medication and the strength of the medication will be printed on the dropper / syringe and should be used to only measure the medication identified on the dropper/syringe
- Be careful and note measurements on dropper are in mg or ml and prepare resident’s dose appropriately
- Increase chances of making a dosing error if a different measuring device is used
- When using a special dropper to administer liquid medicine
  - Draw up the accurate dose of medication and put it into a medication cup to deliver it to the resident
  - Do not use the dropper to give the resident the oral medication because that will contaminate the dropper and in turn contaminate the remaining liquid medication

☑ **TEACHING TIP: Administering Oral (Solid and Liquid) Medications**

Refer to the skill sheet on how to administer oral (solid and liquid) medications as you review the process of administering oral medications with the students.
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✅ **TEACHING TIP: Administering Sublingual Medications**

Refer to the skill sheet on how to administer a sublingual medication as you review the process of administering sublingual medications with the students.

**Sublingual Medications**

- Place the medication under the resident’s tongue
- Instruct resident not to chew or swallow the medication
- Do not follow with liquid, which might cause the tablet to be swallowed

✅ **TEACHING TIP: Administering Medication Using an Oral Inhaler**

Refer to the skill sheet on how to administer medication using an oral inhaler as you review the process of administering medication using an oral inhaler with the students.

**Oral Inhalers**

- Spacing and proper sequence of the different inhalers is important for maximal drug effectiveness
- The prescribing practitioner may specifically order the sequence of administration if multiple inhalers are prescribed or the pharmacy may provide instruction on the medication label or MAR
- Shake all meter dose inhalers or inhaler canisters before use and shake between puffs.
- Wait at least one minute between puffs for multiple inhalations

✅ **HANDBOOK I-4: Oral Inhalers**

Distribute copies of the handout, Technique and Use of Meter Dose Inhalers. Review with students.

✅ **TEACHING TIP: Administering Eye Drops and Ointment**

Refer to the skill sheet on how to administer eye drops and ointment as you review the process of administering eye drops and ointment with the students.
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### Eye Drops and Ointments

- Wash hands prior to and after administration of eye drops and ointments
- Follow standard precautions
- Wear gloves as indicated
- Always wear gloves when there is redness, drainage or possibility of infection
- Wait a 3- to 5-minute period between medication when two or more different eye drops must be administered at the same time
- Do not touch eyes with dropper or medication container

### TEACHING TIP: Administering Ear Drops

Refer to the skill sheet on how to administer ear drops as you review the process of administering ear drops with the students.

### Ear Drops

- Wash hands before and after administration of medication
- Gloves are to be worn as indicated
- By gently pulling on the ear, straighten the ear canal (Adult)
- Request the resident to remain in same position for 5 minutes to allow medication to penetrate
- Gently plug the ear with cotton to prevent excessive leakage if necessary

### TEACHING TIP: Administering Nose Drops and Nasal Sprays/Inhalants

Refer to the skill sheet on how to administer nose drops and nasal sprays/inhalants as you review the process of administering nose drops and nasal sprays/inhalants with the students.
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#### Nose Drops and Nasal Sprays/Inhalers

- Wash hands before and after
- Gloves are to be worn as indicated
- **For drops**
  - Resident should lie down on his/her back with head tilted
  - Request the resident to remain in the position for about 2 minutes to allow sufficient contact of medication with nasal tissue
- **For Sprays**
  - Hold head erect and spray quickly and forcefully while resident “sniffs” quickly
  - Have the resident tilt head back to aid penetration of the medication into the nasal cavity, if necessary
- Wipe dropper or sprayer with a tissue before replacing the cap

### TEACHING TIP: Administering Nasal Inhalants

Remind students to check manufacturer instructions before using inhalers because some require priming prior to administration.

### TEACHING TIP: Administering Medications Using Transdermal Products/Patches

Refer to the skill sheet on how to administer medications using transdermal products/patches as you review the process of administering medications using transdermal products/patches with the students.

#### Transdermal Products/Patches

- Rotate application sites for transdermal patches to prevent irritation
- Document application sites on the MAR
- If the patch is ordered to be worn for less than 24 hours, document on the medication administration record that the patch was removed and the time it was removed
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- Wear gloves and wash hands after patch is applied or removed
- When a patch is removed, clean the area to remove residual medication on the skin

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Refer to the skill sheet on how to administer topical medications as you review the process of administering topical medications with the students.

### Topical Medications

- Wear gloves and use tongue blade, gauze or cotton tipped applicator to apply medication
- Use a new applicator each time medication is removed from container to prevent contamination
- Provide privacy.
- Place the lid or cap of the container to prevent contamination of the inside surface
- Do not discard gloves and supplies in areas accessible to residents

### Injections

- Never recap syringes
- Dispose of syringes in appropriate sharps containers
- Wash hands before and after
- Wear gloves

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Demonstrate/allow for students to practice/perform skill check-off only if injections will be administered by Medication Aides at the adult care home. If administering injections will be taught/practiced/checked-off during class, a Registered Nurse must validate skills competency of injections.

Refer to the skill sheet on how to administer insulin injections as you review the process of administering injections with the students.

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Medication Administration – March 2021
10/15-Hour Training Course for Adult Care Homes