Student RN-Administering Medications
Lesson Plan

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Agenda

The following is a breakdown of time for each major part of the lesson.

<table>
<thead>
<tr>
<th>Time (min)</th>
<th>Topics</th>
</tr>
</thead>
<tbody>
<tr>
<td>10</td>
<td>Administering Meds with a Scanner</td>
</tr>
<tr>
<td>10</td>
<td>Administering Meds without a Scanner</td>
</tr>
<tr>
<td>15</td>
<td>Administering Different Types of Meds</td>
</tr>
<tr>
<td>10</td>
<td>Administering IV Medications</td>
</tr>
<tr>
<td>45</td>
<td>TOTAL TIME</td>
</tr>
</tbody>
</table>
Class Activities

- **QSGs**: Pages 26-29

We all hear the stories about medication errors and the adverse effects from those errors.

- ProHealth Care uses barcode scanning for medications
- While using these scanners makes medication administration safer, this does not replace critical thinking and the five “rights” of medication administration
- Molly is our medication patient, so her medications will not make sense clinically
- The focus is to help us learn how to administer different medications within the Epic system

**Reviewing a Patient’s Current Meds**

- Highlight your Molly patient on your Patient List screen
- Molly reports having some pain-she rates it a 3/10
- Click the Due Meds report button
- Scroll down and find her PRN medications

<table>
<thead>
<tr>
<th>?</th>
<th>What pain medications does Molly have ordered?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tylenol and Morphine</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>?</th>
<th>What’s the frequency of the Tylenol?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Every 6 hours PRN</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>?</th>
<th>When was her last dose?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Last night at 2200</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>?</th>
<th>How many tablets should we remove from the medication dispensing cabinet?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Two 325 mg tablets</td>
<td></td>
</tr>
</tbody>
</table>
We were able to see this information without opening her chart.

Administering a PRN Med with Barcoding

1. We went to the medication dispensing cabinet (Omnicell).
2. We removed two tabs of Tylenol.
3. We are now in Molly’s room.

What’s the first “right” of safe medication administration?

Right patient

By scanning the barcode on the patient’s wristband, EPIC can ID the patient.
Per policy, you will also ask the patient their name and birthdate to complete the two patient identifiers.
Scan Molly’s wristband located on the bottom of your tent card.
Molly’s MAR opens.

Notice the various tabs on the top; use the tabs to find a medication quickly.
Notice the Overdue button-click on it to see what is overdue.
Hover over the “legend” icon to see the different color codes.

Click on the Details button.
This expands the details of all the medications ordered.
Click the Details button again to collapse.

Click the Tylenol summary bar (after the blue hyperlink) to expand the order details of this medication only.
Reclick to hide the details.
Hover over the yellow mortar icon to review administration details

The next “right” of safe medication administration is to make sure we have the right medication.

1. Scan the Tylenol 325 mg tablet once on your medication handout.
2. The order is for 650 mg, but we just scanned a 325 mg tablet. So the system is giving us an administration dose warning (pink icon).
3. The system also makes sure we have the right medication and the right dose.
4. When a dose involves more than one pill, you need to scan EACH pill.
5. Pretend it’s a different package, but scan the Tylenol 325 mg tablet barcode again.

**Administration Window**

- All medication information appears on the left
- Notice the blue Micromedex hyperlink
- Click on the hyperlink to bring up the medication information
- You can also print this information
- All fields for documentation appears on the right

- Let’s confirm our five rights
- Pain medications will have these flowsheet rows embedded within the Administration window
- Select “3” (This pain number will also show up under Pain in Doc Flowsheets)
- Click Accept
- Give Molly the Tylenol and verify she swallowed it
- Back on the MAR, the Tylenol is charted as Given with the time and dose
• Hover over the green to see who gave this medication

• Click on Molly’s WorkList activity
• A new task is added for “re-assess pain”
• Since it is orally, we need to re-assess in one hour

Troubleshooting with Barcode Scanning

1. Close Molly’s chart.
2. For training purposes, six hours has past.
3. Double-click Molly to open her chart, then click on the MAR activity
4. (or highlight Molly’s name and click on the MAR button)
5. Notice the “Patient Not Scanned” at the top.
6. Scan the Tylenol.

What happens? (System is telling you to scan the patient)

7. You will always need to scan the patient first. (The system needs to know what medication record to look for)
8. Keep this warning box open. Using your neighbor’s tent card and scan their Molly patient.

What happened?
It is indicating “incorrect patient ID” in yellow

9. Click Cancel.
10. At this point, you would close the wrong patient’s chart and open the correct chart.
There may be times when you cannot scan the patient’s wristband or medication.

- You will need to override the warning boxes

11. In this scenario, our scanner is broken.
12. Click in the current time column for the Tylenol.
13. For the Override, click the magnifying glass and double click on “Scanner Broken”
14. Click Accept.
15. Select the same override reason for the medication and click Accept. Notice that the system automatically enters the dose as 650mg.
16. Check your five rights and Click Accept.

- Notice the Given action appears on the MAR
- You can’t tell the difference between the “Givens”
- But behind the scenes, the system DID track the fact that you didn’t scan the patient or medication
- It is important to remember that although it is sometimes necessary, you are bypassing an important safety check

In addition:

- In the live environment, you will get a Best Practice Advisory warning when a medication is given too early (this advisory is turned off in training)
- The system reads the frequency of the medication order (Q6H PRN)

- Scan the Cefazolin barcode on the second page of handout
- What happens? (Patient does not have an order for this med)
• Click OK  (another safety feature)

INSTRUCTOR:

Scan the free-floating 9999-9999-99 barcode on the bottom-right corner of your barcode handout. (Don’t have the trainees do this.)

You may also see this “Product barcode Not Recognized” message when scanning barcodes.

• Some medications may have several barcodes on them
• You must scan the proper barcode for it to be recognized within the system
• For pills, scan the barcode closest to the medication
• We will go through IVs in the next lesson

What questions do you have so far?

Administering Different Types of Medications

■ Administering from a Syringe

Molly is feeling anxious so you would like to give her a dose of Lorazepam. She has a PRN order for this med. For training purposes, you already wasted the unused Lorazepam with another RN at the Omnicell machine. You are in Molly’s room.

• Select the PRN tab on the MAR
• Find the order for the Lorazepam
• What’s the frequency of this order?  Q4H prn
• Her last dose?  none
• What is the appropriate administration amount?  0.5mg
- Route?  IV  
- We have already scanned Molly’s wristband  
- Scan the barcode for the Lorazepam injection (first page)  

The administration warning box appears telling us the dose entered is more than the dose ordered.

- Click Partial Package  
- Link the line by highlighting the PIV and clicking Link  
- The linked line appears in the bottom left corner  
- Since this is a partial dose, you need to manually enter the dose (enter 0.5mg)  
- Check the remaining “rights” and click Accept  
- You can see the green Given tab  

- Administering Meds with Ranged Doses  

(Instructor-use the Tips sheet handout)  

1. (Again, for this section, Molly’s wristband has already been scanned) Scan the Humolog on your medication handout.  
2. This order has a ranged dose.  
3. Look at the administration instructions on the left side of the screen.  
4. Molly’s blood sugar level is 160. How many units should we give her? (2 units)  
5. Change the ranged dose to 2  
6. Site: Abdominal Tissue  
7. (Instructor - Depending on the time of your training class, you may need to indicate an Off Schedule Reason-Not given at scheduled time)  
8. Hover over the two red exclamation points. Insulin is a high risk medication and requires a dual sign-off (triple sign off for a student RN).  
9. Student Nurses giving insulin must have two verifiers present at the time of administration.
10. The instructor as the cosigner and the floor nurse you are working with is the main verifier.

11. As the student, you complete the MAR information (check your five rights) and click Accept with the instructor and floor nurse observing.

12. The Dual Signoff Summary screen appears.

13. The Co-signer and the Verifying nurse will review this summary screen for accuracy.

14. The verifying nurse will click Sign Off and enter his/her User ID and password.

15. For training, use trn19120 and train.

- On the MAR, hover over the Insulin “Given”
- This shows the nurse as the dual sign off and the instructor as the cosigner

As soon as this documentation is completed, the Instructor must log into a computer, open Molly’s chart, and co-sign the insulin.

(Instructor-log in as the co-signer and cosign the Insulin)

Oral Review

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>When you administer a medication, what’s the first step?</td>
<td>Scan the patient.</td>
</tr>
<tr>
<td>And after you scan the patient, you scan the…?</td>
<td>Medication.</td>
</tr>
<tr>
<td>And if the dose is two or three tablets, then scan…?</td>
<td>Each tablet.</td>
</tr>
</tbody>
</table>
What if a med has two exclamation points on it: what does that mean?
It needs dual sign-off. (as a student, it means triple sign off)

What questions do you have?

**IV Medications**

- Molly’s IV pump is beeping; her IV bag is empty
- What does she have for a **Continuous Medication** (use the MAR tabs)? (D5 and NaCl)

1. We grab a bag of D5-NaCl from floor stock and head into Molly’s room.
2. (Scan Molly’s wristband if needed) Scan the barcode for 5% Dextrose with 0.9 % Sodium Chloride (on the second page of barcode sheet)
3. Since her IV was already linked to the previous bag given last night, we do not need to Link the Line.
4. Check your five rights and notice the differences.
5. The **Action** is a New Bag
6. There is no Dose; only a **Rate**.
7. Click Accept.
8. Program the infusion pump and start the infusion.
9. Back on the MAR, notice the green “New Bag”

- Turn to the last page of your medication handout
- Notice that the Ampicillin-Sulbactrim has two barcodes
- A manufacturers barcode and a medication label from pharmacy
• The manufacturer’s barcode is the BASE of the IV
• This is an exception to the “Closest to the Med” rule
• You need to scan the PHARMACY medication barcode label
• Scan the Amoxicillin-Sulbactrim barcode
• Check your five rights--notice the action, dose, rate, and infusion time
• Depending on your training time, you might need to give an Off Schedule Reason. Select “Not Given at Scheduled Time” and click Accept
• Click Accept and start the infusion

**Additional Key Point:** Pharmacy barcodes are specific to a patient.
• You can’t “borrow” a mixture from another patient, even if it’s the exact same medication & concentration.

**Documenting IV Fluids**

• Let’s go through some basic information about the Plum infusion pumps that ProHealth Care uses for IV medications
• The pumps have two volume lines:

(Instructor—may be beneficial to draw example):

<table>
<thead>
<tr>
<th>Line A</th>
<th>750ml (continuous infusions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Line B</td>
<td>100ml (Piggybacks/K+ riders)</td>
</tr>
<tr>
<td>Total</td>
<td>850ml</td>
</tr>
</tbody>
</table>

➢ Line A is the primary line (for continuous/maintenance infusions)
➢ Line B is the secondary line (for Piggyback medications/K+ riders)

******These volumes need to be separated in EPIC******
Documenting IV Intake

- QSG-Page 29
- Click on the Doc Flowsheet activity
- Click on the Intake/Output flowsheet tab
- Click Add Column

- Click on the Dextrose 5% and 0.9% NaCl Infusion Group in the table of contents
- Click the Volume (mL) row
- Click the calculator to see what the system is recommending
- The volume suggested by the system does not match Line A on the infusion pump
- Click Cancel and manually enter the volume from the IV pump (use 750 mL)

- We also need to document the volume from the Antibiotic
- Click on Ampicillin-Sulbactam in the table of contents
- Click in the Volume row
- Click the calculator button
- The volume EPIC is recommending does not match Line B on the infusion pump
- Click Cancel and manually enter 100 mL for the volume
- These volume totals will be included under the Intake/Output Activity

What questions do you have?