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MEDICATION MANAGEMENT CURRICULUM TOPICS

Below is a list of topics that must be included in the curriculum. The course coordinator or curriculum developer may or may not follow the same order of topics to be presented. This list will be used for evaluating the curriculum submitted for approval.

- A. NRS and NAC concerning medication management in detail (NRS. 449.0304 (6) and NAC 449.2742 - NAC 449.2748). The regulations may be imbedded throughout the training relevant to the topic being presented.
- B. Medication Technician:
 - 1. Duties and responsibilities
 - 2. Can and cannot do
- C. General Information:
 - 1. Common abbreviations used by physicians and pharmacists for medication prescription/instructions.
 - 2. Facility's Medication Plan – protocols, policies and procedures for:
 - a) ordering new prescriptions
 - b) re-ordering current prescriptions,
 - c) requesting refills,
 - d) medication safe storage and handling – oral, topical, suppositories, ophthalmic
 - e) medication destruction
 - f) medication delivery log
 - 3. Common medication types and what they are for; generic and brand name: statin drugs, blood thinners, nitroglycerin, laxatives, antihistamines, antibiotics, bronchodilators, diuretics, anti-hypertensives, analgesics, anti-depressant, anti-anxiety, sedative/hypnotic, anti-psychotic, anti-ulcer, anti-osteoporosis, eye drops, ear drops, etc.
 - 4. Commonly prescribed controlled substances/medications (in residential care).
 - 5. Types of orders a physician may give – routine, PRN, single (one-time), STAT, hold, change, discontinue.
 - 6. Different routes medication can be administered – Allowed; not allowed
 - a) Oral
 - b) Sublingual
 - c) Transdermal
 - d) Topical
 - e) Otic (ear)
 - f) Ophthalmic (ocular)
 - 7. Medication packaging types – bottles, bubble packs, blister packs, patches, etc.
 - 8. Medication forms – tablet, capsule, cream, elixir, enteric coated tablet, fast-dissolving tablet, gelcap, powdered, inhaler, ointment, solution, suspension, transdermal patch.

9. Allergies, drug interactions, contraindications, side-effects, adverse reaction and toxicity.
- D. How to read the label on medications.
- E. Doctor's Order:
1. Importance of following the instructions as they are written on a label of medication.
 2. Importance of administering medications as prescribed, as it relates to the therapeutic medication levels in the bloodstream.
 3. Importance of having over-the-counter medications, dietary supplements and any other substances approved by the physician prior to the resident receiving them.
 4. How to determine the schedule of administration based on physician's instructions.
- F. Medication Administration:
1. Ultimate User Agreement
 2. Resident's rights concerning medication administration
 3. Six Rights of medication administration – right resident, right drug, right dosage, right time, right route, and right record/documentation
 4. Three checks prior to administration
 5. When a pill can be cut and the proper way to cut a pill
 6. When a pill can be crushed and how to crush a pill properly
 7. When a liquid medication can be given and how to measure liquid medication accurately
 8. Antibiotic therapy and therapeutic serum levels
 9. Situation when a caregiver can provide treatments such as antibiotic cream and other topical solutions to a resident without a physician's order
 10. How to determine a resident's need for "as needed/PRN" medications.
- G. Medication Administration Record (MAR) - Documentation of...
1. Routine medication administration
 2. PRN medication administration
 3. Change order of medications
 4. Discontinued medications
 5. Medication refusals; necessary notifications to physician, family, guardian, etc.
 6. Resident out of the facility (hospital, with family member, etc.)
 7. What to do if/when a mistake is made in administration of medication.
- H. Changes in a resident's condition that should be reported to a physician; signs and symptoms of allergic reaction.
- I. What constitutes an emergency that warrants a 911 call.
- J. Caring for residents with special needs:
- 1) How to assist residents with oxygen – concentrator, portable O2 tanks
 - 2) Residents with two types of diabetes as related to medications
 - 3) Residents with dementia, its various symptoms, types and treatments; i.e., Alzheimer's disease, vascular dementia, as they relate to medications
 - 4) Residents with Parkinson's disease and treatments as related to medications
 - 5) Dealing with "troubling behavior" of residents and noting behavior changes as related to medications
 - 6) Residents with renal dialysis, as related to medications and diet
 - 7) How to assist residents with asthma and treatments such as nebulizer
 - 8) Managing and assisting residents in self-administering medications.
- K. How to prevent disease transmission, hand washing, appropriate actions when exposed to blood borne pathogens.

- L. Finding information about medications.

COMPETENCY DEMONSTRATION:

1. Hand washing
2. Putting on and taking off gloves
3. Pouring medication and passing to a “dummy” resident while practicing the 3 Checks and 6 Rights.
4. Assisting with oral, sublingual, topical (patches, creams/lotions/other solutions)
5. Assisting with eye drops, ear drops, nose drops/spray, inhalers
6. Cutting, crushing medications
7. Reading/interpreting a prescription label
8. Labeling OTC meds and nutrition supplements
9. Controlled substances counts
10. Storing external properly
11. Documenting on MAR – routine and PRN
12. Documenting a “DC” order
13. Completing an Incident Report documenting a medication error
14. Filling out Medication Destruction Log/Form
15. Filling out Medication Delivery Log
16. Filling out Resident Missed/Refused Form to be sent to the physician
17. Changing the order on MAR and bottle
18. How to discard unused medications.