Section V

When you are finished with this section, you will be able to:

- Describe the most common routes of medication administration (p 2)
- Describe the approaches taken for medication refusals (p 15)
- Describe what to do if you make a mistake (p 18)
- Describe what to do for a poisoning or accidental overdose (p 19)

Routes of Medication Administration

When giving medications by mouth such as pills or liquids, there are some basic things to remember:

Make sure that the individual is in an upright and sitting position. Never give pills or liquids to an individual lying down.

Many individuals can only swallow one pill at a time. Be careful to give only the number of pills that the individual can swallow safely and easily.

If an individual is having trouble swallowing pills or liquids, notify the nurse or the prescribing practitioner immediately.

Make sure that the individual is completely alert when giving medications. Never give medication to an individual who is drowsy or not fully awake.

Stay with the individual to make sure that all medication has been taken and swallowed.

Some individuals need to have their medication put into food or liquid to help them to swallow it. Always check with the pharmacist before crushing or mixing a medication with food or liquid.

If you have been given permission to mix a medication with food or liquid, stay with the individual until they have finished the food or liquid to make sure that they have taken all of the medication.

Never leave medications lying around and be especially careful when medications are mixed in food or liquid: other individuals could mistake them for a snack and take the medication. This is a poisoning and is a very serious issue.

Liquid Medications

When giving liquid medications, always:

Shake the bottle well before giving liquid medications.

Measure carefully using an approved measuring device. This could be a small clear plastic measuring cup, a syringe, a dropper or a specially designed measuring spoon.

Hold the measuring device at eye level, fill to the right level using the markings on the device as a guide and then re-check on a level surface.

Wipe off the bottle with a damp cloth after pouring to prevent the label from becoming soiled.

Sublingual Medications

Sublingual medications are also given orally. They are different from other oral medications because they must not be swallowed.

Sublingual medications are placed under the tongue where they are left until they dissolve.

Eye Medications

When giving eye medications, such as eye drops or eye ointment, there are some basic things to remember:

Check the label: eye medications should always be labeled as "ophthalmic" drops, solutions or ointments.

Wear gloves.

Use a warm moist facecloth to remove any crusting around the eye. Wipe from the inside part of the eye to the outer part of the eye. Use a separate facecloth for each eye and use only warm water on the face cloth.

Ask the individual to sit with their head tilted back, looking “up” or lying down on their back.

Use your finger to gently pull the lower lid down to form a “pocket”.

Hold the drops or the ointment container between your thumb and index finger and rest your hand against the individual’s forehead to steady your hand.

Do not touch the dropper to the eyeball.

For eye drops, gently squeeze the drop(s) into the “pocket” that you have made with the lower lid.

For eye ointment, gently squeeze the ointment from the inner part of the “pocket” toward the outer part of the “pocket”.

Ear Medications

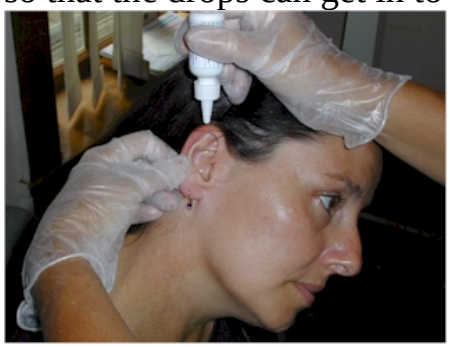
When giving ear medication, there are some basic things to remember:
Check the label: ear medications should always be labeled as "otic" solutions or "otic" drops.

Wear gloves.

Ask the individual to tilt their head to the side or to lie down on their side with the ear that you will be putting the ear drops into facing up.

Use a warm moist facecloth to remove any crusting within or around the ear and use a separate facecloth for each ear.

Gently grasp the ear lobe and lift it slightly up and outward. This helps to straighten the ear canal so that the drops can get in to do their work.



Do not touch the ear with the dropper. Gently squeeze the dropper and allow the medication to flow into the ear canal.

Ask the individual to keep their head tilted or to remain lying on their side for 1-2 minutes to keep the medication from draining back out of the ear.

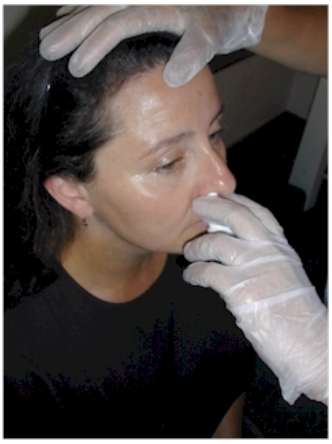
Nasal Medications

When giving nasal medications, there are some basic things to remember:

Wear gloves.

When giving nasal medications, ask the individual to blow their nose to clear the nostrils. Using a warm, moist facecloth, remove any crusting or debris within or around the nose.

When giving nasal sprays or a nasal inhaler, ask the individual to sit up with their head in an upright position.



Gently insert the rounded spray nozzle or the inhaler nozzle into the nostril. Ask the individual to “sniff” as you gently squeeze the bottle or pull down on the spray nozzle.

Inhalers

When giving medications by inhaler, there are some basic things to remember:

Always shake the inhaler well.

Ask the individual to exhale deeply just before placing the device into the mouth.

Place the inhaler in the individual's mouth and ask the individual to breath in slowly and deeply as you push down on the top of the inhaler canister to deliver a "puff" of medication. Ask the individual to hold the medication in for 5-10 seconds with each puff.

You may be using a device called a "spacer". This helps to make sure that the medication gets into the lungs and also helps if the individual is unable to follow directions about inhaling or holding the medicine in.

If you are using a spacer, connect the inhaler to the spacer and place the spacer mouthpiece in the individual's mouth. Squeeze the inhaler to deliver a "puff" or inhalation. Ask the individual to breathe in deeply after each "puff" has been squeezed into the spacer.

If you are giving more than one "puff" or if you are giving more than one medication by inhaler, wait at least 1 minute between each puff and between each medication.

Assist the person to rinse out their mouth with water after giving medications by inhaler.

Although inhalers are a very common way of giving medications by this route, there are also other types of inhaled medications, including dry powder inhalers and nebulizers that you might be giving.

You will be provided with specific education and training in order to understand how to give different types of inhaled medications.

(Inhaler picture reference: http://www.caritas.ab.ca/ther/images/**)**

Topical Medications

When giving topical medications, there are some basic things to remember:

Wear gloves.

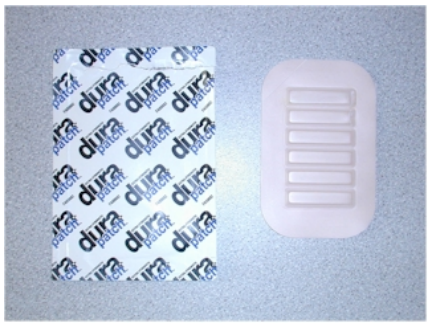
Gently clean the skin with a warm moist facecloth and pat dry before applying a topical medication unless you have been specifically instructed not to. You can use warm water or warm water with a mild soap.

Gently apply the topical medication.
Do not touch the medication container to the individual's skin.

Do not rub or massage or cover the area with a band-aid or gauze unless you have been instructed to.

Apply topical medications in a thin layer (unless otherwise ordered) and only to the area(s) of the body indicated in the medication order.

Transdermal Patches



When applying a Transdermal patch, there are some basic things to remember:

Do not allow the medication from the patch to touch your skin. Always wear gloves when applying and removing Transdermal patches.

Gently clean the skin with a warm moist facecloth and pat dry before applying a Transdermal patch unless you have been specifically instructed not to. You can use warm water or warm water with a mild soap.

Apply Transdermal patches in areas where there is minimal body hair. If you have been instructed to apply the patch to a specific body part, do so.

Do not apply a Transdermal patch to an area of skin that is scabbed, scratched or has a rash.

To apply the patch, carefully peel the backing off the patch.

Apply the patch and peel off the covering that is on top of the patch. Press down on the patch or cover it with your hand gently for 30-60 seconds to help the patch stick.

Keep the patch clean and dry.

Don't forget to remove the patch according to the medication order. When you put the next patch on, put it in a slightly different place.

If a patch falls off before it is time to remove it, report this immediately according to your agency's policy for medication occurrences.

Do not re apply a new patch until you have been specifically instructed to do so.

Rectal Medications

When giving a rectal suppository there are some basic things to remember:

Provide privacy for the individual. Think about how you would like to be assisted if you needed a suppository. Be sensitive to the individual's sense of modesty.

Be careful to fully explain what you are doing.

Wear gloves.

Unwrap the suppository. Most suppositories are wrapped in a foil or plastic wrap: you must unwrap the suppository before you insert it into the rectum.

Lubricate the suppository with K-Y Jelly or another water-based lubricant (not Vaseline).

Assist the person to lie on their side.

Gently lift up the top cheek of the buttocks and locate the rectum.

Gently insert the suppository into the rectum and push it in gently but as far as you can (the length of your index finger). Tuck the suppository up against the rectal wall.
Ask the individual to hold the suppository in for as long as possible.

When giving an enema, there are some basic things to remember:

Follow the same guidelines regarding privacy, wearing gloves and positioning. In most (if not all) cases you will be giving a pre-filled, lubricated and measured enema. Remove the cover on the tip of the enema and gently insert the enema into the rectum as far as you can (the length of the enema tip). Squeeze the enema until all of the liquid goes into the rectum.
Ask the individual to hold the enema contents in for as long as possible.

Vaginal Suppositories

When giving a vaginal suppository there are some basic things to remember:

Provide privacy for the individual. Think about how you would like to be assisted if you needed a suppository. Be sensitive to the individual's sense of modesty.

Be careful to fully explain what you are doing.

Wear gloves.

Unwrap the suppository. Most suppositories are wrapped in a foil or plastic wrap: you must unwrap the suppository before you insert it into the vagina.

Lubricate the suppository with K-Y Jelly or another water- based lubricant (not Vaseline).

Assist the individual to lie on her back with her legs open, or if she is more comfortable, on her side with the top leg bent and forward.

If the individual is lying on her back, gently spread open the labia. If the individual is lying on her side, gently lift up the top cheek of the buttocks and locate the vagina.

The rectum is farther back. Sometimes it is helpful to use the rectum as a guideline: locate the rectum first and move forward. The vagina is located closer to the front.

Gently insert the suppository into the vagina and push it in gently but as far as you can by using your forefinger. Tuck the suppository up against the vaginal wall.

Medication Refusal

Individuals have the right to refuse medications.

Individuals may tell you or show you that they do not want to take medication.

There are many reasons why an individual might refuse to take medication.

The effects and side effects of medication can cause resistance to taking medication. So can the feelings that the individual associates with medication. The feelings may sometimes be connected with the individual's religious, cultural, ethnic, moral or individual beliefs.

Careful listening and attention may help us to better understand the reasons why individuals don't want to take particular medications and to better explain why a medication is needed and how it works.

Some of the reasons why people may not want to take medication are:

Our society sometimes gives people the message that medication should not be taken as a way to solve problems.

People are concerned about the possibility of becoming "addicted" or "dependent" on a drug.

Side effects of the medication are making them feel sick

Lack of information or understanding about an illness can lead people to think they don't need medication – even when the illness is very serious.

Inability to communicate effectively.

If an individual refuses a medication, first try to find out why:

Is the individual experiencing an unpleasant side effect?

Does the individual dislike the taste, smell or feel of the medication?

Is the individual having problems swallowing the medication?

Is the individual afraid of the medication for some reason? Why?

Is refusing medication part of a behavioral pattern of resisting medical care? For example, does the individual have difficulty participating in health care exams or appointments?

Some ways to help solve problems of refusing to take medication are:

Give the individual as much choice and control as possible:

Invite the individual to work with you in learning how to take their medications. Develop an educational plan to help the person become more independent with medications. Invite the individual politely to take the medication. Never dictate or command.

Whenever possible, give a choice of the type of liquid or other substance that the medication is given with.

Schedule medication administration, whenever possible, at the most convenient time(s) of day for the individual.

Observe and report any side effects of medication. Report any possible side effects to the prescribing practitioner.

Educate the individual about the reason for taking the medication and the consequences of not taking the medication.

Consider whether a change in the method of giving medication might help. For example, might changing from a pill to a liquid make a difference?

Consult with the individual's team to see if a formal behavioral approach is needed.

If an individual refuses medication, offer the medication again in 15 or 20 minutes. If the individual refuses again, try one more time, in another 15 or 20 minutes before considering this a final refusal.

Follow your agency's policy for reporting medication occurrences.

Make sure that the health care provider is informed of medication refusals. It is very important that the health care provider knows when a medication is not being taken as ordered.

Document all medication refusals according to your agency's policy.

1. List two reasons why an individual might refuse medications:

1.

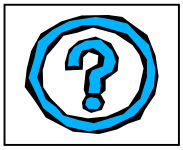
2.

2. List three things that you could do to solve the problem of medication refusal:

1.

2.

3.



Mistakes

Sometimes, even when you try your best, mistakes happen.

Mistakes in medication administration are also referred to as medication "occurrences".

If a mistake involves a poisoning or an overdose, follow the procedure for poisoning/accidental overdose.

The most important thing to do when you make a mistake or discover a mistake is to report it immediately by following your agency's policy for reporting medication occurrences.

By reporting mistakes, you can get advice about corrective action that helps to minimize the effect of the mistake on the individual. This is the most important thing.

Your agency will have a form that you must fill out when a medication occurrence happens. Be sure to complete the form immediately and forward it to the nurse trainer following your agency's policy.

It is understandable to feel bad or embarrassed when you make a mistake. We all hope to provide the best possible medication administration to individuals and try hard not to make mistakes. Don't let your feelings hold you back from reporting.

After you have followed your agency's policy for reporting and responding to medication occurrences, take some time to think about ways that the mistake could be avoided in the future.

Most mistakes happen because of a variety of factors. You can help to prevent future mistakes by carefully evaluating each mistake and taking steps to avoid the factors that lead to mistakes.

Poisoning and Accidental Overdose

By following the procedures that you have been taught to administer medications, you will have the best possible chance of avoiding accidental overdose (when the individual receives more of a medication than they should have) or poisoning (when an individual receives another individual's medication).

If a poisoning or accidental overdose happens, remember to follow three important steps:

1. Stay calm.
2. Stay in control.
3. Act immediately to get advice and treatment.

ALWAYS call The **Poison Control Center or** The **Emergency Medical Service** (EMS) by calling **911**.

Do Not:

Give the individual anything to eat or drink unless told to do so by a health care professional.

Give fluids or food if the victim is unconscious, having a seizure, or very drowsy. (If the person can't swallow well, they could choke and the food and fluid may enter the lungs.)

Do:

Post emergency numbers (poison control, EMS (911), police, fire department, pharmacist, physician, hospital emergency department, etc.) next to all of your telephones. This saves valuable time in life-threatening situations.

There are other types of poisonings, such as when an individual eats or drinks something that is supposed to be used for cleaning. Follow the same procedure for all types of poisoning: call the Poison Control Center or EMS (911) immediately.

Reference: 1997 - 2003 The United States Pharmacopeial Convention, Inc., http://www.usp.org, accessed 6.15.03