



MEDICATION ADMINISTRATION INSTRUCTIONS

You have up to **one hour before or after** the actual dosage time to give an individual his or her medication. Assist one person at a time with their medication. **DO NOT** pour all individual's medications at the same time.

1. Wash hands
2. **Read** the **MAR** then read the medication bottle/bubble pack **label** and make sure they match and include ALL 5 RIGHTS OF MEDICATION ADMINISTRATION.
3. If they **do not match**, **do not give** the medication. Call your supervisor or for in-home supports, contact the individual's primary caregiver to consult with physician.
4. If they do match, first pour the appropriate dose into the cap of the medication bottle and then pour it into the cup, bowl, applesauce etc. You must have an order to crush the medication.
5. Immediately initial the appropriate block on the MAR.
6. Repeat steps 2-5 for each medication until all meds have been dispensed for that time for that individual.
7. Give the individual his/her medications.
8. If the individual refuses his/her medication, then lock the medications up in the medication box and **try again later** within the allowed time frame. This is the **only** time you are allowed to lock poured medication.
9. If the individual still refuses to take the medications, follow policy for disposal of medications. Go to the MAR and **circle** all of your **initials** for that dosage time and go to **back of MAR—Date/Time/reason medication not provided/initial** (one sentence). If further documentation required to describe behavior, you may go to medical support log to further explain, **AFTER** you have provided the one sentence on the back of the MAR.
10. If you do not administer the medication, but send it with the individual to day support, home, or community outing, per policy (labeled bottle or bubble pack), put an **"O"** in the box indicating that you did not give the medication, but provided it to responsible party to provide it in one of these settings. On **back of MAR—Date/Time/whom you sent it with/initials** in one sentence.
11. If you do not have the medication to give or need to hold the medicine for doctor's appointment, place **"S"** in the box for support log. Go to **back of MAR—Date/Time/situation or why not available/initials** in one sentence.
12. **PRN** doses can only be given within prescribed time frame. If administered, initial the block for the date given. Then go to back of **MAR—Date/Time/what was given and why/initials**. Within **one hour return** to back of **MAR—Date/Time/Was it effective (if not what was done?/initials**.
13. **Must notify Supervisor or LAR/Gaurdian or Primary Caregiver of individual prior to administering PRN Medication.**

ALL SCHEDULED MEDICATION BLOCKS SHOULD BE FILLED IN