



# Teacher Resource Guide

## 3. Medication Management



### Cautionary Statement

The material in this module is not intended to be medical advice on personal health matters. Medical advice should be obtained from a licensed physician. This module highlights medication. This module does not cover all situations, precautions, interactions, adverse reactions, or other side effects. A pharmacist can assist you and the doctor with questions about medications. We urge you to talk with pharmacist, nurses and other professionals (e.g. dietitians) as well, to broaden your understanding of the fundamentals covered in this module.

# TEACHER'S GUIDE

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## Materials:

- Overhead Projector or LCD Projector with compatible laptop computer and PowerPoint application;
  - Hard copy of overheads or disk with PowerPoint presentation.
  - The Five Rights for Assisting with Self-Administration of Medication video.
  - DSP TV video, Year 2
  - Easel and paper, or white board, and markers; and
  - Pencils for writing.
- .....

## Skill Check Materials

- Labels for medication containers are in Appendix 3-F.
  - Work with a local pharmacist to gather necessary supplies including:
    - Properly labeled bubble packs, and capsule or tablet containers for each student which should include the appropriate number of “jelly bean medications” to match the label.
    - Properly labeled liquid containers with colored liquid.
  - Calibrated plastic cups or spoons.
  - Small paper cups for capsules
  - Water
  - Pens
  - Tissues
- .....

## Review Practice and Share, Session 2

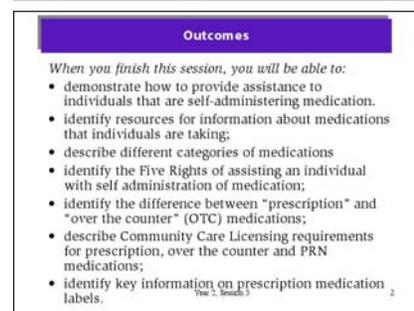
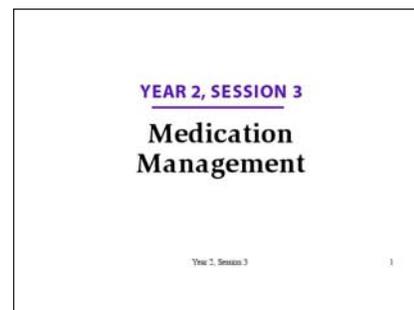
- Remind students of the assignment: Think of an individual that you support. Tell how you know that what you responded to the questions about the quality of services from page S-9.
  - Ask for volunteers who would like to share their stories.
  - Write down some of the responses to use as examples in future sessions.
  - Thank students for the contributions.
  - **Show Overhead #1: Medication Management**
- .....

## Outcomes

- **Show Overhead #2: Outcomes.**
  - Review outcomes for the session.
- .....

## Key Words

- Review key words for the session.



## Student Resource Guide: SESSION 3

# Medication Management

### OUTCOMES

When you finish this session you will be able to:

- ▶ Demonstrate how to provide assistance to individuals who self-administer medication.
- ▶ Identify resources about medications that individuals are taking.
- ▶ Describe different categories of medications.
- ▶ Identify the Five Rights of assisting an individual with self-administration of medication.
- ▶ Identify the difference between “prescription” and “over-the-counter” medications.
- ▶ Identify key information on prescription medication labels.

### KEY WORDS

**Allergic Reaction:** A reaction caused by an unusual hypersensitivity to a medication (or insect stings or certain foods).

**Anti-Convulsant Medication:** Medications prescribed to control seizure activity in individuals with epilepsy.

**Documentation:** The written recording of events, observations, and care provided.

**Drug:** A word often used interchangeably with the word medication.

**Generic Name:** The name given to a drug by the federal government.

**Medications:** Substances taken into the body (or applied to) for the purpose of prevention, treatment, relief of symptoms, or cure.

**Medication Error:** Any time the right medication is not taken as prescribed.

**Medication (Drug) Interactions:** The result, either desirable or undesirable, of drugs interacting with themselves, other drugs, foods, alcohol, or other substances such as herbs or other nutrients.

### KEY WORDS

**Ophthalmic:** Referring to the eyes.

**Otic:** Referring to the ears.

**Over-the-Counter (OTC) Medications:** Includes all non-prescription medications such as aspirin, antihistamines, vitamin supplements, or herbal remedies.

**Pharmacy:** The practice of preparing and dispensing drugs. The physical building where drugs are dispensed is also referred to as a pharmacy or drug store.

**Pharmacist:** A licensed individual who prepares and dispenses drugs and is knowledgeable about a drug’s contents.

**Physician/Doctor:** An individual licensed to practice medicine. For the purpose of prescribing medications only, the term is interpreted to mean any health care professional authorized by law to prescribe drugs: physician, dentist, optometrist, podiatrist, nurse practitioner, physician’s assistant. A nurse practitioner or physician’s assistant that write prescriptions are acting under the supervision of the individual’s physician.

**Prescription Medications:** Medications that must be ordered by a physician or other licensed health care professional with authority to write prescriptions such as a dentist or nurse practitioner.

**PRN Medication:** An abbreviation (pro re nata) that means “as needed.” A PRN medication is any prescription or non-prescription medication that is to be taken as needed.

**Psychotropic Medication:** Central nervous system drugs, which affect a person’s thinking or feeling.

**Side Effects:** Effects produced by a medication other than the effect for which it was prescribed. Side effects may be desirable or undesirable, predictable or unpredictable, or harmless or dangerous. Sometimes side effects, such as a severe allergic reaction, can be deadly.

**Trade/Brand Name:** The name given to a medication by the manufacturer.

## TEACHER'S GUIDE

### The Benefits and Risks of Medications

- All medications, both prescription and over-the-counter, have risks as well as benefits.
- The benefits of medicines are the helpful effects you get when you use them,
- The risks of medicines include the chance that something unwanted or unexpected could happen to the person taking the medication.

Following are several types of risks from medicine use:

- The possibility of harmful interaction between the medicine and a food, beverage, vitamins and herbal supplements, or another medicine.
- The chance that the medicine may not work as expected and that it may cause additional problems or have a side effect.
- The possibility that there may be a medication error.
- The most common types of errors involved administering an improper dose (41%), giving the wrong drug (16%), and using the wrong route of administration (16%).
- Errors were caused by a lack of skill and/or knowledge and communication errors

### Specific Ways to Lower Risks and Help People Obtain Benefits of Medication

#### Show overhead #3 Specific Ways to Lower Risks and Help and Review Each Topic

When preparing to assist with medication, there are several things the DSP should do to minimize medication errors:

#### Talk with the Doctor and Pharmacist

- Make sure that doctor knows all of the drugs that the individual is taking.
- Tell the doctor about any allergies or sensitivities that the individual has.
- Tell him or her about anything that could affect the person's ability to take medication; for example, difficulty swallowing.
- Using the Medication Safety Questionnaire (Appendix 3-C), ask questions and write down the answers.
- Find out what drug is being ordered and why.
- Find out how the drug should be taken, make sure you understand directions.

**Specific Ways to Lower Risks and Help Individuals Obtain Benefits of Medication**

- Talk with the doctor and pharmacist about the medication
- **Know** about Medications being taken - both prescription and over-the-counter
- **Read** the Label and follow the FIVE RIGHTS
- **Record** each medication dose
- **Avoid** Interactions
- **Observe** for both intended and unintended effects (side effects) and know what to do
- **Know** what to do if you observe a side effect and when to get help.

Year 2, Session 3 1

## The Benefits and Risks of Medications

**A**lthough medications can make you feel better and help you get well, it is important to know that all medications, both prescription and over-the-counter, have risks as well as benefits.

The benefits of medicines are the helpful effects you get when you use them, such as controlling seizures, lowering blood pressure, curing infection, or relieving pain. The risks of medicines include the chance that something unwanted or unexpected could happen to the person taking the medication. Following are several types of medication risks:

- ▶ The possibility of harmful interactions between the medicine and a food, beverage, vitamins and herbal supplements, or another medicine.
- ▶ The chance that the medicine may not work as expected (have the intended effect) and that it may cause additional problems or have a side effect.
- ▶ The possibility that there may be a medication error. Medication errors are preventable events that may cause or lead to inappropriate medication use or harm to the user.

The Food and Drug Administration evaluated nationwide reports of fatal medication errors that it received during a five-year period and found that the most common types of errors involved administering an improper dose (41%), giving the wrong drug (16%), and using the wrong route of administration (16%). Errors were caused by a lack of skill and/or knowledge and communication errors.

### Ways to Lower Risks and Help People Obtain Benefits of Medication

There are many things that you can do to lower the risks of medications for the individuals you are assisting, including talking to the doctor and pharmacist, learning about the medication, reading the

label and following the doctor's orders, being aware of and avoiding possible drug or food interactions, monitoring for side effects and knowing and practicing medication safety when assisting with self administration.

### Talk to the Doctor and Pharmacist

Before the doctor writes the order for a medication, make sure that he or she knows about other medications being taken by the individual and any allergies or sensitivities. Tell him or her about anything that could affect the person's ability to take medication; for example, difficulty swallowing.

Rather than simply letting the doctor write the order and send you and the individual on your way, ask questions and write down the answers. Find out what drug is being ordered and why. Find out how the drug should be taken and make sure you understand the directions. For example:

- ▶ Does three times a day mean eight hours apart or at meal times?
- ▶ Are there any medications, foods, or beverages that the individual should avoid?
- ▶ Are there any side effects that might occur and what should you do about them?

Ask the pharmacist all of the same questions. Check those answers against the ones you wrote down when you talked to the doctor. If anything is unclear, ask again. Ask the pharmacist for a copy of the medication information sheet and have him or her go over it with you (Appendix 3-B, Sample Medication Sheet). If you still have questions when you get home, don't hesitate to call the doctor or pharmacist. It is best to be cautious if you are unsure about anything.

## TEACHER'S GUIDE

### Specific Ways to Lower Risks and Help People obtain Benefits of Medication (cont.)

#### Know about Prescription and Over-the-Counter Medications

- All medications, prescription and over-the-counter, must be ordered by a doctor, dentist, or nurse practitioner or physician's assistant.

#### Read the label and follow the five rights.

- Only one DSP should be assisting an individual with medications at any given time.
- Allow plenty of time (to avoid rushing) and stay focused.
- Prepare and assist in a clean, well-lighted, quiet place.
- Make sure labels are readable.
- Stay focused, do not allow for distractions.
- Put out all the necessary items, for example, water and glass or any other necessary items.
- Always wash your hands before assisting with medications.

#### Record each Medication Dose

- Get the Medication Log for the individual you are assisting.
- Document after supporting person with self-administration - not before and not hours later.

#### Specific Ways to Lower Risks and Help Individuals Obtain Benefits of Medication

- Talk with the doctor and pharmacist about the medication
- Know about Medications being taken – both prescription and over-the-counter
- Read the Label and follow the FIVE RIGHTS
- Record each medication dose
- Avoid Interactions
- Observe for both intended and unintended effects (side effects) and know what to do
- Know what to do if you observe a side effect and when to get help.

Year 2, Session 3

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## The Benefits and Risks of Medications (continued)

When talking to the doctor and the pharmacist, use the Medication Safety Questionnaire (Appendix 3-C) and make sure that you get all the questions answered. Write down the answers and keep the information in the individual's record.

### Know About Prescription and Over-the-Counter Medications

Remember that in a licensed community care facility, all medications—including prescription and over-the-counter—must be ordered by a doctor.

Make sure you know

- ▶ The brand name and the generic names of each medication.
- ▶ What the medication looks like; how to store it properly; and when, how, and how long to use it.
- ▶ How and under what conditions you should stop using it.
- ▶ What to do if a dose is missed.
- ▶ What the medicine is supposed to do, any side effects or interactions, and if any tests or monitoring is needed. Again, using the Medication Safety Questionnaire will help you get answers to all of your questions. Other sources of information include medication reference books from your local library or book store. Web sites such as [Safemedication .com](http://Safemedication.com) or [rxlist.com](http://rxlist.com) also provide medication information.

### Read the Label and Follow the Five Rights When Assisting

When preparing to assist with medication, there are several things the DSP should do to minimize medication risks:

- ▶ Always prepare medication in a clean and well lighted area.
- ▶ Allow plenty of time (to avoid rushing) and stay focused.

- ▶ Prepare and assist in a quiet place, to minimize distractions.

When assisting with self-administration of medication, make sure you

- ▶ Understand the directions on the label.
- ▶ Check, double check, and triple check that you have the right person, right medication, right dose, right time, and right route (the “Five Rights”).
- ▶ Always keep medications in their original, labeled container.

*Only one DSP should be assisting an individual with medications at any given time and that DSP should be allowed to focus only on the medications.*

### Record Each Medication Dose

Record each dose at the time the medication is taken by the individual—not before and not hours later.

Use a Medication Log (Appendix 3-G) to document the date and time, and to initial for each dose of medication the DSP assisted with. Also record any medication errors; for example, a missed dose.

The DSP can use the sample Medication Log provided in this Session (or ask the pharmacist to provide a medication administration record form). The Medication Log includes key information about the individual, including any known drug allergies, and information about the individual's medications, including the name of the medication, dose, times to take the medication, and how it should be taken. It is advised that pre-made pharmacy labels containing all of the medication information be placed on the Medication Log, along with pre-made warning labels. Whenever a prescription is changed, you must update the Medication Log.

## TEACHER'S GUIDE

**Specific Ways to Lower Risks and Help People obtain Benefits of Medication (cont.)****Avoid Interactions**

- Know the medication and any possible interactions before assisting with a medication.

**Observe for Intended and Unintended Effects**

- Again, know the medication. Know both intended and unintended effects.

**Know When to Get Help**

- Signs of a severe allergic reaction that requires a call to 911 include:
  - Wheezing or difficulty breathing.
  - Swelling around the lips, tongue or face.
  - Skin rash, itching, or feeling of warmth or hives.

**Requirements for Assisting with Medication**

- In California, community care licensing regulations are very specific regarding requirements for assisting with medications.
- Some of the regulations are different based on the age of people living in the home and the home's licensing category; for example, Adult Residential Facility or Small Family Home.
- Specific information on these regulatory requirements is included in the Community Care Licensing Division's Self-Assessment Guide, Medications Booklet published in September 2002 and found in Appendix 4-E, Year 1, Session 4.

**Show DSP TV Scene 6: Mitigating Medication Risk**

Discussion questions and answers:

**1. What does April do to lower the risk for David?**

- *Obtains information about the new medication and possible side effects, makes sure Mike and other DSPs are familiar with the new medication and its side effects, Makes sure Mike knows what to do if he observes a side effect.*

**2. How does April know when to call the Doctor?**

- *Doctor's instructions to call if a rash occurred.*

**3. What did April report to the Doctor?**

- *Her name, the name of the individual, the name of the medication, what was observed, when, for how long.*

**Additional discussion questions:** How did April and Mikes' response to the observed side effects mitigate David's risk of taking the new medication? Does this require a Special Incident Report to the regional center? A report to Community Care Licensing? Why or Why not?

**Specific Ways to Lower Risks and Help Individuals  
Obtain Benefits of Medication**

- Talk with the doctor and pharmacist about the medication
- **Know** about Medications being taken – both prescription and over-the-counter
- **Read** the Label and follow the FIVE RIGHTS
- **Record** each medication dose
- **Avoid** Interactions
- **Observe** for both intended and unintended effects (side effects) and know what to do
- **Know** what to do if you observe a side effect and when to get help.

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## The Benefits and Risks of Medications (continued)

### Avoid Interactions

Before starting any new medications, determine if interactions are possible with other medications, vitamins, herbal supplements, beverages, or foods. It is not uncommon for two or more medications to interact causing unwanted side effects. An example of this would be when iron or penicillin is given with an antacid. The antacid prevents the iron or penicillin from being absorbed in the stomach. Follow the doctor's instructions for use.

It is a good idea to use the same pharmacy for all of your medication needs. In this way the pharmacist who fills each prescription will have a record of all medications prescribed for the individual and be able to more readily identify any possible drug interactions.

### Observe for Intended and Unintended Effects

Examples of unintended effects, often called side effects, are when a medication makes an individual feel nauseated, confused, dizzy, or anxious; causes a rash; or causes a change in a bodily function such as appetite, sleep pattern, or elimination. Your responsibility is to know the medications; intended and unintended side effects of medication(s) each individual is taking; and to consistently and accurately observe, report, and record any change in the normal daily routine, behavior, ways of communicating, appearance, physical health, and general manner, or mood of the individual. Physical and behavioral changes that are due to possible side effects of a medication are often difficult to sort out. Interpretation (deciding the meaning) of an observed side effect is the responsibility of the individual's doctor.

### Know When to Get Help

Some individuals have severe, life-threatening allergies to medications,

especially penicillin. The allergic reaction is sudden and severe and may cause difficulty breathing and a drop in blood pressure (anaphylactic shock). If an individual has had a severe allergic reaction to a medication (or insect stings or food), he or she should wear an identification bracelet that will tell health professionals about the allergy.

Call 911 immediately to get emergency medical care if signs of a severe allergic reaction develop, especially soon after taking a medication. Signs of an allergic reaction include:

- ▶ Wheezing or difficulty breathing.
- ▶ Swelling around the lips, tongue, or face.
- ▶ Skin rash, itching, feeling of warmth, or hives.

Some individuals have a severe allergy to insect stings or certain foods. If an individual shows any of these same signs of a severe allergic reaction soon after eating a food or being stung by an insect, call 911 immediately to get emergency medical care. When in doubt, always err on the side of caution and report the incident.

### Know Safe Medication Practices and Requirements for Assisting with Medication

In California, Community Care Licensing regulations are very specific regarding requirements for assisting with medications. Some regulations are different based on the age of people living in the home and the home's licensing category; for example, Adult Residential Facility or Small Family Home. Specific information on these regulatory requirements is included in the Community Care Licensing Division's *Self-Assessment Guide, Medications Booklet*, September 2002, found in Appendix 4-E, Year 1, Session 4.

## TEACHER'S GUIDE

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### Medication Labels

- Medications have both a generic name and a trade name.
- A drug's generic name is given by the federal government.
- A medication's trade or brand name is given by the manufacturer.
- For example, acetaminophen is the generic name for Tylenol. Tylenol is the trade name.
- The prescribing doctor may order the medication by either name.
- The pharmacy label may have either name as well.

### Review medication label information from student guide:

Each prescribed medication must be kept in its original container with the pharmacy label affixed. Careful reading of the label is critical to ensuring medication safety.

### Review medication label warnings

Medication containers may also have separate warning labels affixed by the pharmacist that provide additional information on the use of the medication.

## Medication Labels

The following information will help you to correctly read a medication label.

Medications have both a generic name and a trade name. A drug's generic name is given by the federal government. A medication's trade or brand name is given by the manufacturer. For example, acetaminophen is the generic name for Tylenol; Tylenol is the trade name. The prescribing doctor may order the medication by either name. The pharmacy label may show either name as well.

Each prescribed medication must be kept in its original container with the pharmacy label affixed. Careful reading of the label is critical to ensuring medication safety. The information on the pharmacy medication label includes

- ▶ Pharmacy/pharmacist name and address
- ▶ Prescription number or other means of identifying the prescriber (used in requesting refills)
- ▶ Individual's name
- ▶ Prescriber's name (doctor)
- ▶ Name of medication
- ▶ Strength (Dose)
- ▶ Directions for how to use the medication
- ▶ Manufacturer
- ▶ Quantity (for example, number of pills or other measurement of the amount of the prescription)
- ▶ Date the prescription was filled
- ▶ Expiration or discard date
- ▶ Number of refills remaining

The following is an example of a typical medication label:

<b>ABC Pharmacy</b>	
1017 25th St., Sacramento, CA	
Dr. Diaz	
<b>RX 10387</b>	6/15/05
<b>JACOB SMITH</b>	
TAKE 1 TABLET ORALLY AM FOR SEIZURES (8AM)	
TEGRETOL 400 MG	
#30 TABLETS	
EXPIRES: 06/02/06	REFILLS: 2
MFG: MANY MEDICATIONS, INC	
FILLED BY: BRS	

### Label Warnings

Medication containers may also have separate warning labels affixed by the pharmacist that provide additional information on the use of the medication; for example, "Medication should be taken with plenty of water." Other warnings include

- ▶ For external use only.
- ▶ Do not take dairy products, antacids, or iron preparations within one hour of this medication.
- ▶ Finish all medication unless otherwise directed by prescriber.
- ▶ May cause discoloration of the urine or feces.
- ▶ May cause drowsiness or dizziness.
- ▶ Take medication on an empty stomach one hour before or two hours after a meal unless otherwise directed by your doctor.
- ▶ It may be advisable to drink a full glass of orange juice or eat a banana daily.

Never "scratch out," write over, or change a drug label in any way. Instead, return to the pharmacy to have the container relabeled. Any change to a prescription required a doctor's written order that must be filled by a pharmacist.

# TEACHER'S GUIDE

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## Medication Label Abbreviations

- The following abbreviations and symbols are commonly used on medication labels. To read and understand medication labels, the DSP must be familiar with these abbreviations and symbols.
- Review with students:

### Medication Label Abbreviations

The following abbreviations and symbols are commonly used on medication labels. To read and understand medication labels, the DSP must be familiar with these abbreviations and symbols.

- Rx = Prescription
- OTC = Over-the-Counter
- PRN = when necessary, or as needed
- Qty = quantity
- q (Q) = every
- qd = daily
- b.i.d. (BID) = twice a day
- t.i.d. (TID) = three times a day
- q.i.d. (QID) = four times a day
- h. = hour
- h.s. (HS) = hour of sleep (bedtime)
- tsp. = teaspoon (or 5 ml)
- Tbsp. = tablespoon (3 tsps or 15 ml)
- oz = ounce
- gr. = grains
- mg. = milligrams
- GM, gm. = grams (1,000 mg)
- gr. = grains
- Cap = capsule
- Tab = tablet
- A.M. = morning
- P.M. = afternoon/evening
- D/C or d/c = discontinue

## TEACHER'S GUIDE

**ACTIVITY: Filling in a Medication Safety Questionnaire**

Directions:

**Show the three Medication Safety Questionnaire overheads (#4-6)**

**Review Each Topic**

- Refer the students to the Sample Tegretol Medication label on S-7 and the Medication Safety Questionnaire on page S-8.
- Divide the class into small groups. Using the sample Tegretol medication label on page S-7 and the Tegretol information sheet found in the Appendix 3-B on page S-19 and S-20 for additional information on the medicine.
- Have each group fill in the answers on the Medication Safety Questionnaire on page S-8.
- Give groups about 20 minutes to complete the exercise.
- Share answers and correct as a class.

Medication Safety Questionnaire
What is the name of my medication?
Brand Name: _____
Generic Name: _____
Dose: _____
When to take each dose?
For how long?
1. What is the medication supposed to do?
2. How long before I will know it is working or not working?
3. What about serum (blood) levels? Other laboratory work? How Often? Standing order?

**Medication Safety Questionnaire**

Have students use the sample label on page S-7 and refer to the information sheet on pages S-19 and S-20 for additional information about the drug.

**Answers to Questionnaire:**

**Name:**

**Brand:** Tegretol, Tegretol-XR, Carbatrol

**Generic:** Carbamazepine

**Dose:** One 400MG tablet

**When to take each dose:** AM (8AM)

**For how long?**

- 1. What is the medication supposed to do?**  
*Anticonvulsant - It is used to treat seizures.*
- 2. How long before I will know it is working or not working?**  
*It may take a few weeks or longer before you feel the full benefit of carbamazepine.*
- 3. What about serum (blood) levels? Other laboratory work?**  
*Doctor will want you to have complete blood tests to test blood count and liver function 1-2 months after starting and every 6 months thereafter.*
- 4. If the individual misses a dose, what should I do?**  
*Take the missed dose as soon as you remember. However, if it is almost time for the next dose, skip the missed dose and take only the next regularly scheduled dose. **Do not** take a double dose of this medication.*
- 5. Should this medication be taken with food?**  
*Yes, and with a full glass of water.*

## ACTIVITY

### Filling in a Medication Safety Questionnaire

*Directions: Split into small groups. Using the sample Tegretol® medication label below and the medication Information sheet (Appendix 3-B) to fill in the answers on the Medication Safety Questionnaire. on page S-8.*

ABC Pharmacy  
1017 25th St, Sacramento, CA  
Phone: 000-000-0000, Fax: 000-000-0000  
Dr. Diaz  
Rx: 10387  
JACOB SMITH                      06-15-05  
TAKE ONE TABLET ORALLY AM FOR SEIZURES (8AM)  
TEGRETOL 400 MG  
#30 TABLETS  
EXPIRES: 06/02/06    Refills: 2  
MFG: MANY MEDICATIONS, INC.  
Filled by: BRS

## TEACHER'S GUIDE

**Answers to Medication Safety Questionnaire (cont.)****6. Are there any foods, supplements....**

*Grapefruit juice may interact with the carbamazepine and could lead to potentially adverse effects. Do not drink alcohol as it may increase drowsiness and risk of seizures. Avoid prolonged exposure to sunlight as it may increase sensitivity.*

**7. Are there any prescription or over-the-counter medications....**

*May decrease the effectiveness of birth control medications.*

*Do not take carbamazepine without first talking to your doctor if you have ever had an allergic reaction to a tricyclic antidepressant such as amitriptyline (Elavil), clomipramine (Anafranil), doxepin (Sinequan), desipramine (Norpramin), amoxapine (Asendin), imipramine (Tofranil), or nortriptyline (Pamelor); have taken a monoamine oxidase (MAO) inhibitor such as isocarboxazid (Marplan), tranylcypromine (Parnate), or phenelzine (Nardil) in the past 14 days; or have a bone marrow disease or a history of bone marrow suppression*

**8. What are common side effects?**

*Any of the following symptoms, which may be signs of potential blood problems: fever, sore throat, rash, sores in the mouth, easy bruising, or red or purple bruising, call the doctor immediately.*

*Less serious side effects may be more likely to occur. Continue to take carbamazepine and talk to your doctor if you experience*

- *mild nausea, vomiting, diarrhea, constipation, or decreased appetite;*
- *dry mouth;*
- *impotence; or*
- *joint or muscle aches or pains.*

**9. If there are any side effects, what should I do? And****10. Any long term effects?**

*If you experience any of the following serious side effects, contact your doctor immediately or seek emergency medical attention:*

- *an allergic reaction (difficulty breathing; closing of your throat; swelling of your lips, tongue, or face; or hives);*
- *liver damage (yellowing of the skin or eyes, nausea, abdominal pain or discomfort, severe fatigue);*
- *chest pain, high blood pressure (headache, flushing), or congestive heart failure (shortness of breath, swelling of ankles);*
- *numbness or tingling in the hands, feet, arms, or legs;*
- *body or muscle jerks;*
- *confusion, slurred speech, or fainting;*
- *continuing headache, hallucinations, or depression;*
- *severe nausea or vomiting;*
- *back- and- forth movements of the eyes;*
- *blurred or double vision; or*
- *decreased urination.*
- *Rarely, carbamazepine may cause serious blood problems. Notify your doctor*

*immediately if you develop any of the following symptoms, which may be early signs of potential blood problems: fever, sore throat, rash, sores in the mouth, easy bruising, or red or purple bruising.*

*Side effects other than those listed here may also occur. Talk to your doctor about any side effect that seems unusual or that is especially bothersome.*

**ACTIVITY**

**Medication Safety Questionnaire**

Name _____			
Brand: _____	Dose (e.g., mg) and form (e.g., tabs)	When to take each dose?	For how long?
Generic: _____			

1. What is the medication supposed to do?
2. How long before I will know it is working or not working?
3. What about serum (blood) levels? Other laboratory work? How often? Where? Standing order?
4. If the individual misses a dose, what should I do?

.....  
*INTERACTIONS?*

5. Should this medication be taken with food?  Yes  No  
 At least one hour before or two hours after a meal?  Yes  No
6. Are there any foods, supplements (such as, herbs, vitamins, minerals), drinks (alcoholic, for example), or activities that should be avoided while taking this medication?  
 Yes (Which ones?) \_\_\_\_\_  
 No
7. Are there any other prescription or over-the-counter medications that should be avoided?  
 Yes (Which ones?) \_\_\_\_\_  
 No

.....  
*SIDE EFFECTS? IF SO, RESPONSE?*

8. What are common side effects?
9. If there are any side effects, what should I do? How do I know whether to take the individual to emergency, call the doctor right away, or make an appointment to see the doctor?
10. If the drug is being prescribed for a long period of time, are there any long-term effects?

## TEACHER'S GUIDE

### Common Categories of Medication

- Drugs are classified into categories or classes with other medications that affect the body in similar ways.
- Some common categories of medications used by individuals with developmental disabilities include:
  - anti-convulsants
  - antibiotics
  - pain medications
  - topical ointments or creams
  - psychotropic medications, which include antidepressants and anti-psychotics

There are also medicines prescribed for seizures. The most common anti-seizure medications (for example, Dilantin, Tegretol) can help people control completely or decrease different types of seizure activity.

### Anti-convulsants or Anti-Seizure Medications

- Seizures can be treated by medications.
- Medications prescribed to control seizure activity in individuals with epilepsy are often referred to as anti-convulsants.

### Anti-convulsants or Anti-Seizure Medications

#### Review:

- The type of seizures the individual has determines which anticonvulsant the physician will prescribe.
- DSP needs to provide accurate information to the physician on the symptoms of the person's seizure so that the most appropriate medication can be prescribed.
- Many anti-convulsants, when taken with other drugs in the same or different categories, affect the amount and usefulness, or impact each other.
- Some anti-convulsants deplete vitamins so the person may need a multivitamin supplement and extra folic acid. Be sure to ask the physician or pharmacist. The physician may not think about this nutritional issue until you bring it up.
- A number of prescription and over-the-counter medications, such as antipsychotics, Ibuprofen, as well as alcohol and illicit drugs such as cocaine and amphetamines, may lower the "seizure threshold," or increase the likelihood of a seizure.

## Common Categories of Medication

Drugs are classified into categories or classes with other medications that affect the body in similar ways. Thousands of medications are available on the market. Many drugs, because of their multiple uses, can be found in more than one category. Some common categories of medications used by individuals with developmental disabilities include:

- ▶ Anti-convulsants
- ▶ Antibiotics
- ▶ Pain medications
- ▶ Topical ointments or creams
- ▶ Psychotropic medications, which include anti-depressants and anti-psychotics

### Anti-Convulsants or Anti-Seizure Medications

Seizures can be treated by medications. Medications prescribed to control seizure activity in individuals with epilepsy are often referred to as anti-convulsants.

The type of seizures an individual has determines which anticonvulsant the physician prescribes. It is very important for you to provide accurate information to the physician on the symptoms of the person's seizure so that the most appropriate medication can be prescribed.

Prior to the discovery of Dilantin in 1938, bromides and barbiturates, such as Phenobarbital, were about the only drugs available to treat seizures. Today many less sedating medications are used to treat epilepsy. Some of the more common anti-

convulsants are Depakene, Tegretol, Neurontin, Lamictal, Topamax, and Keppra.

According to a 1995 study cited by McGowan and McGowan in *Assessing Health Risk in Developmental Disabilities*, one anti-convulsant drug controls seizures acceptably in about 70% of new cases; two-drug therapy controls seizures in another 10% of individuals, and three-drug therapy controls seizures in another 5%.

Many anti-convulsants, when taken with other drugs in the same or different categories, interact; that is, affect the amount and usefulness or impact each other.

Some anti-convulsants deplete vitamins so the person may need a multi-vitamin supplement and extra folic acid. Be sure to ask the physician or pharmacist. The physician may not think about this nutritional issue unless you bring it up.

A number of prescription and OTC medications, such as anti-psychotics, Ibuprofen, as well as alcohol and illicit drugs such as cocaine and amphetamines, may lower the "seizure threshold," or increase the likelihood of a seizure.

Most anti-convulsants have central nervous system effects including effects on thinking (especially Phenobarbital). Effects include dizziness, sedation, mood changes, nervousness, or fatigue.

## TEACHER'S GUIDE

### Common Side Effects

#### Show overhead #7 Common Side Effects and review

- Sleepiness, lethargy, cognitive impairment, altered gait, seizure breakthrough, and memory loss are typically related to the dosage.
- Stomach upset (especially with Tegretol and Depakote), diarrhea, gum growth and swelling (with Dilantin), weight gain, and hair loss or growth.
- Liver or kidney dysfunction, hyperactivity, aplastic anemia, allergic response.
- To obtain this information, talk to the prescribing doctor and the pharmacist who fills the doctor's order.
- Also ask the pharmacist for a copy of the medication information sheet and have him or her go over it with you.
- Other sources of information include medication reference books from your local library or bookstore.
- Web sites such as Safemedication.com or rxlist.com also provide medication information.
- Make sure that you know the answers to all of these questions before you assist an individual in taking a medication.

**Common Side Effects**

- Sleepiness, lethargy, cognitive impairment, altered gait, seizure breakthrough, and memory loss. These side effects are typically related to the amount of the dose.
- Stomach upset (especially with Tegretol, and Depakote), diarrhea; gum growth and swelling with Dilantin; weight gain; and hair loss or growth.
- Liver or kidney dysfunction, hyperactivity, aplastic anemia, allergic response.

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### Psychotropics and Psychiatric Disorders

#### Review

- Psychiatric disorders can involve serious impairments in mental or emotional functioning, which affect a person's ability to perform normal activities and to relate effectively to others.
- Many individuals with developmental disabilities who also have a psychiatric disorder are treated with psychotropics alongside other interventions.
- Psychotropic medications are central nervous system drugs, which affect a person's thinking or feeling.

#### Review the 3 types of psychiatric disorders found in student guide:

##### 1. Mood Disorders

- a. *Depression* (lasting two or more weeks), which can mean feelings of hopelessness or even self-destruction; for example, not wanting to eat or get out of bed in the morning.

## Common Categories of Medication (continued)

### Common Side Effects

- ▶ Sleepiness, lethargy, cognitive impairment, altered gait, seizure breakthrough, and memory loss are typically related to the dosage.
- ▶ Stomach upset (especially with Tegretol and Depakote), diarrhea, gum growth and swelling (with Dilantin), weight gain, and hair loss or growth.
- ▶ Liver or kidney dysfunction, hyperactivity, aplastic anemia, allergic response.

To obtain this information, talk to the prescribing doctor and the pharmacist who fills the doctor's order. Also ask the pharmacist for a copy of the medication information sheet and have him or her review it with you. Other sources of information include medication reference books from your local library or bookstore. Web sites such as [Safemedication.com](http://Safemedication.com) or [drugconsult.com](http://drugconsult.com) also provide medication information. Make sure that you know the answers to all of these questions before you assist an individual in taking a medication.

### Psychotropics and Psychiatric Disorders and Medications Used for Treatment

Psychiatric disorders may involve serious impairments in mental or emotional functioning, which affect a person's ability to perform normal activities and to relate effectively to others.

Many individuals with developmental disabilities who also have a psychiatric disorder are treated with psychotropic medications alongside other interventions.

Psychotropic medications are central nervous system drugs that affect a person's thinking or feeling. Following is information on three classifications of psychiatric disorders for which individuals might take medication.

### 1. Mood Disorders

Two main types of mood disorders are

- a. *Depression* (lasting two or more weeks), which can mean feelings of hopelessness or even self-destruction; for example, not wanting to eat or get out of bed in the morning.

Anti-depressants are used to treat depression. Anti-depressant medications include

- Tofranil
- Norpramin
- Wellbutrin
- SSRIs (selective serotonin reuptake inhibitors—a new class of medications) include
  - Luvox (fluvoxamine)
  - Paxil (paroxetine)
  - Prozac (fluoxetine)
  - Zoloft (sertraline)

- b. *Bi-polar Disorder*, also called Manic Depression, is often marked by extremes in mood, from elation to deep despair and/or manic periods consisting of excessive excitement, delusions of grandeur, or mood elevation.

Lithium is used to treat bipolar disorders. Taking this drug requires close monitoring with frequent blood tests.

### 2. Schizophrenia

Schizophrenia can mean hallucinations and sensory misperceptions; delusions (strange ideas or false beliefs, including paranoia); distorted misinterpretation and retreat from reality; ambivalence; inappropriate affect; and bizarre, withdrawn, or aggressive behavior.

**TEACHER'S GUIDE**

**Psychotropics and Psychiatric Disorders**

1. **Mood Disorders** (continued)

b. *Bi-polar Disorder*, also called Manic Depression, is often marked by extremes in mood, from elation to deep despair and/or manic periods consisting of excessive excitement, delusions of grandeur, or mood elevation.

2. **Schizophrenia**

Schizophrenia can mean hallucinations and sensory misperceptions; delusions (strange ideas or false beliefs, including paranoia); distorted misinterpretation and retreat from reality; ambivalence; inappropriate affect; and bizarre, withdrawn, or aggressive behavior.

3. **Anxiety Disorders**

Anxiety disorders are typified by tension, fear, apprehension, discomfort, and distress. There are two main types of anxiety disorders:

- a. Generalized Anxiety Disorder
- b. Obsessive-Compulsive Disorder

Review Psychotropic Medication chart:

- There are a number of psychotropic medicines prescribes for mental health challenges.
- Psychotropics are intended to affect thinking or feeling, and are taken by people with developmental disabilities.
- Some of these medications (for example, Thoazine, Haldol), alone or alongside other treatments (for example, talk therapy), are used to treat psychiatric disorders, which can involve serious impairments in mental or emotional function that affects an individual's ability to perform normal activities and to relate effectively to others.

**Common Side Effects Associated With Psychotropic Medications**

<b>Medication</b>	<b>Examples</b>	<b>Side Effects</b>
<b>SSRIs selective serotonin reuptake inhibitors</b>	Prozac, Paxil, Zoloft, Luvox, Celexa	Stomach upset, sleeping problems, behavioral problems
<b>Tricyclic antidepressants</b>	Anafranil, Elavil, Tofranil, and Norpramin	Constipation, dry mouth, dizziness
<b>Other antidepressants</b>	Desyrel, Serzone, Remeron	Sleepiness, dizziness, dry mouth
<b>Stimulants</b>	Ritalin, Dexedrine, Cylert	Insomnia, loss of appetite, mood changes
<b>Neuroleptics/antipsychotics</b>	Haldol, Risperdal, Mellaril	Sedation, weight gain, movement problems, restlessness
<b>Mood Stabilizers</b>	Lithium	Memory problems, thirstiness, shakiness
<b>Anxiolytics</b>	Valium, Xanax, Ativan	Sedation, unsteadiness, disinhibition

Source: "Psychotropic Medications in Person with Developmental Disabilities," by Dr. Bryan King.

**Common Categories of Medication (continued)**

Major Tranquilizers are used for schizophrenia, anxiety, and severe behavior problems.

These include

- Haldol (haloperidol)
- Mellaril (thioridazine)
- Proloxin (fluphenazine)
- Risperdal (risperidone)
- Serentil (mesoridazine)
- Thorazine (chlorpromazine)

**3. Anxiety Disorders**

Anxiety disorders are typified by tension, fear, apprehension, discomfort, and distress. Two main types of anxiety disorders are

- a. Generalized Anxiety Disorder
- b. Obsessive-Compulsive Disorder

Anti-anxiety medications are used to treat anxiety disorders and include

- Buspar (buspirone)
- Librium (chlordiazepoxide)
- Valium (diazepam)
- Xanax (alprazolam)

**Common Side Effects Associated With Psychotropic Medications**

<i>Medication</i>	<i>Examples</i>	<i>Side Effects</i>
SSRIs (selective serotonin reuptake inhibitors)	Prozac, Paxil, Zoloft, Luvox, Celexa	Stomach upset, sleeping problems, behavioral problems
Tricyclic anti-depressants	Anafranil, Elavil, Tofranil, and Norpramin	Constipation, dry mouth, dizziness
Other anti-depressants	Desyrel, Serzone, Remeron	Sleepiness, dizziness, dry mouth
Stimulants	Ritalin, Dexedrine, Cylert	Insomnia, loss of appetite, mood changes
Neuroleptics/antipsychotics	Haldol, Risperdal, Mellaril	Sedation, weight gain, movement problems, restlessness
Mood Stabilizers	Lithium	Memory problems, thirstiness, shakiness
Anxiolytics	Valium, Xanax, Ativan	Sedation, unsteadiness, disinhibition

Source: *Psychotropic Medications in Person with Developmental Disabilities*, by Dr. Bryan King.

## TEACHER'S GUIDE

**Five Rights****Show overhead #8 The Five Rights and review****Review the five rights:**

Following the Five Rights is basic to medication safety.

The DSP needs to be sure he or she has the:

1. Right person
2. Right medication
3. Right dose
4. Right time
5. Right route

**Following the Five Rights is Basic to Medication Safety.**

You must be sure that you have the:

- Right person
- Right medication
- Right dose
- Right time
- Right route

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Check the Five Rights **three** times by reading the medication label and comparing it to the information on the medication log as follows:

**Show overhead #9 and review**

- **First Check** - When you remove the medication from the storage area.
- **Second Check** - When you remove the medication from the original labeled container.
- **Third Check** - Just before you assist the individual to take the medication.

**Check the Five Rights Three Times**

- **First Check** when you remove the medication from the locked storage area.
- **Second Check** when you remove the medication from the original labeled container.
- **Third Check** just before you assist the individual to take the medication.

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**1. Right Person**

Read the name of the person for whom the medication is prescribed on the medication (pharmacy) label.

## Five Rights

Following the Five Rights is basic to medication safety. The DSP needs to be sure he or she has the

1. Right person
2. Right medication
3. Right dose
4. Right time
5. Right route

When assisting an individual to take medication, you must read and compare the information on the medication label to the information on the medication log three times before the person takes the medication. By doing so, you are helping to ensure that you are assisting the right person with the right medication and dose at the right time and in the right way (route). Never assist a person with medication if the container has no label!

If, at any time, you discover that any of the information does not match, stop. You may have the wrong person; you may be preparing the wrong medication in the wrong dose at the wrong time; or the person may be about to take the medication in the wrong way. Think through

each of these possibilities and decide what to do. If you are unsure, you may need to get help. Ask another DSP or the administrator. In some situations, you may need to call the doctor or pharmacist.

Check the Five Rights three times by reading the medication label and comparing it to the information on the medication log as follows:

✓ **First Check**

When you remove the medication from the storage area.

✓ **Second Check**

When you remove the medication from the original labeled container.

✓ **Third Check**

Just before you assist the individual to take the medication.

► **1. Right Person**

Read the name of the person for whom the medication is prescribed on the medication (pharmacy) label. When assisting an individual with any medication, it is essential that you know the person. If uncertain of an individual's name or identity, consult another staff member who knows the individual before assisting with self-administration of any medication. Stay with the individual until you are certain that he or she has taken the medication.

## TEACHER'S GUIDE

### 2. Right Medication

To make sure that you have the right medication for the right person, read the label *three times* and compare it to the information on the individual's medication log.

### 3. Right Dose

Read the medication label for the correct dosage. Be alert to any changes in the dosage.

- Question the use of multiple tablets providing a single dose of medicine.
- Question any change in the color, size, or form of medication.
- Be suspicious of any sudden large increases in medication doses.

### 4. Right Time

Read the medication label for directions about when and how often the medication should be taken. Medication must be taken at a specific time or times of the day.

### 5. Right Route

Read the medication label for the appropriate route or way to take the medication.

- In some cases, an individual living in an Adult Residential Facility may take their own medication without assistance.
- If an adult is to self-administer an injectable medication (for example, insulin for diabetes), a physician must provide a written statement that this individual is capable of doing so and there must be a health care plan specific to that individual.
- In all cases, the medication must be properly stored in a locked cabinet. We will talk more about proper storage later.

### Teacher Preparation for Assisting with Self-Administration of Medication Skill Check

1. Before class, the teacher needs to gather enough supplies for several practice sessions and up to three skill checks for each student. Supplies include:

- Labeled storage units for medications (e.g., plastic basket)
- Medications in a properly labeled containers and bubble packs
- Liquid medication in properly labeled containers
- Plastic calibrated medicine cups and medication spoons
- Small paper cups for tablets or capsules
- Paper cups for water
- Water
- Tissues
- Medication Logs
- Pens
- Assisting with Self-Administration of Medication Skill Check
- Skill Check Worksheets

2. Place labeled medication containers and bubble pack in the labeled storage unit – one for each student and put all storage units and supplies in a central area in the classroom.. Try to make the materials and the setting as much like they might be in the home environment as possible.–

## Five Rights (continued)

### ► 2. Right Medication

After you have verified that you have the right person, read the name of the medication on the medication label. To make sure you have the right medication for the right person, read the label three times and compare it to the information on the individual's medication log.

### ► 3. Right Dose

Read the medication label for the correct dosage. Be alert to any changes in the dosage.

- Question the use of multiple tablets providing a single dose of medicine.
- Question any change in the color, size, or form of medication.
- Be suspicious of any sudden large increases in medication doses.

### ► 4. Right Time

Read the medication label for directions about when and how often the medication should be taken. Medication must be taken at a specific time or times of the day.

You need to know:

- How long has it been since the individual took the last dose of medication?
- Are foods or liquids to be taken with the medication?
- Are there certain foods or liquids to avoid when taking the medication?
- Is there a certain period of time to take the medication in relation to foods or liquids?
- Is it the right time of day, such as a.m. or p.m.?
- What time is a medication to be taken that is ordered for once a day? In the morning? At noon? At dinner time?

This can be confusing. Usually when a medication is ordered only once a day, it is given in the morning. It is best to check with the doctor or pharmacist for instructions.

### ► 5. Right Route

Read the medication label for the appropriate route or way to take the medication. In the case of pills (tablets, capsules, etc.), liquids, under the tongue (sublingual), or between the teeth and cheek (buccal), the right route is "oral." This means that the medication enters the body through the mouth. Other routes include oral inhalers; nasal sprays; topical, which includes dermal patches or ointments to be applied to the skin; eye drops (ophthalmic); and ear (otic) drops.

Note: Other more intrusive routes, such as intravenous administrations, intramuscular or subcutaneous injections, rectal and vaginal suppositories, or enemas are only to be administered by a licensed health care professional.

In some cases, an individual living in an Adult Residential Facility may take their own medication without assistance. If an adult is to self-administer an injectable medication (for example, insulin for diabetes), a physician must provide a written statement that the individual is capable of doing so and there must be a health care plan specific to that individual. In all cases, the medication must be properly stored in a locked cabinet.

If you have any doubt as to whether the medication is in the correct form as ordered or can be self-administered as directed, consult with the prescribing physician or your pharmacist.

## TEACHER'S GUIDE

### Additional Pointers When Assisting with Tablets and Capsules

1. Pour (or punch out if bubble pack) the correct dose into the bottle cap and then into the container used for holding the tablets or capsules.
2. Always provide a glass of water and recommend to the person that he or she tilt their head forward slightly and take a small sip of water before placing the pill in the mouth.

Some medications must be taken with food and other special instructions may be required. Once again, ask the doctor or pharmacist and read any warning labels.

### Additional Pointers for Assisting With Medication in Liquid Form

Review additional pointers from student guide

### Other Types of Medications

When assisting an individual with other types of medications such as topical creams and ointments, eardrops, nose drops, or eye drops, consult with the prescribing physician and the pharmacist for specific self-administration procedures.

### *Show the video The Five Rights for Assisting with Self Administration of Medication.*

Have the students pay close attention to the demonstration of the correct steps for assisting with self administration of medications.

### Skill Check Directions

Skill Check #1: Assisting Individuals with Self-Administration of Tablets, Capsules, and Liquid Medications

- All students must pass the skill check for assisting with self-administration of medication.
- Assure students that they will have time to practice the skill check with other students until they are comfortable demonstrating the skill, and that you are available to help them if they need it.
- Refer students to Skill Check Worksheet, Appendix 3-E.
- Read the directions aloud and assist students in finding partners.
- Demonstrate the process for assisting with self-administration using the materials supplied and the Skill Check worksheet.
- Hand out materials to students to practice the skill check, and instruct them to begin practicing.
- Walk around the room to observe the partners and provide assistance if needed.
- Schedule times for students to complete the skill check before the end of the Year two training.
- When students indicate they are ready for the Teacher Check, check off each step that is correctly completed, and fill out the Certification for those who pass the skill check.

### Additional Pointers When Assisting with Tablets and Capsules

1. Pour (or punch out if bubble pack) the correct dose into the bottle cap and then into the container used for holding the tablets or capsules. It is recommended that you use a separate disposable paper cup as the container for each medication. If too many pills pour out, return the pills from the bottle cap into the container. If using a bubble pack, punch out the covered dose. It's important for you to work with only one person at a time and complete the task with that person before assisting another.
2. Always provide a glass of water and recommend to the person that he or she tilt their head forward slightly and take a small sip of water before placing the pill in the mouth. This might make swallowing easier as throwing the head back may increase the risk of choking. If pills are not taken with liquids the medication can irritate the throat and intestinal tract and may not be correctly absorbed.

Some medications must be taken with food and other special instructions may be required. Once again, ask the doctor or pharmacist and read any warning labels.

### Additional Pointers for Assisting With Medication in Liquid Form

1. Check the label to see if the medication should be shaken.
2. Remove the cap from the bottle and place it upside down on the work surface.
3. Be sure to use a calibrated cup or spoon when assisting individuals with taking teaspoons or tablespoons of a liquid medication. Regular eating spoons (metal or plastic) are not accurate and should never be used. If no measuring device is available, check with your pharmacist or physician to determine exactly how the medication should be measured.

4. Locate the marking on your calibrated medicine cup or other measuring device for the ordered amount. Keeping your thumbnail on the mark, hold the cup at eye level and pour the correct amount of medication.
5. Place the cup on a flat surface to pour and measure.
6. Pour the medication away from the label to prevent staining same with any spills.
7. If too much liquid is poured, do not return it to the bottle—discard it.
8. Double check that the amount matches the amount indicated on the label.
9. Wipe the lip of the bottle with a clean, damp paper towel before replacing the cap.
10. If any liquid spills on the outside of the bottle, wipe with a clean paper towel.
11. Provide water after the liquid has been swallowed. Again, check the pharmacy label for any special instructions.
12. Wash the calibrated measuring device with warm water and air dry on a paper towel.
13. If the person has difficulty taking liquid medications, give the individual a straw to use to decrease spillage and bad taste.
14. If the individual has difficulty drinking an adequate amount of water or swallowing liquids, ask the doctor if he or she can take the medication with
  - Jell-O that is semi-liquid or jellied.
  - Apple juice or other “medication-compatible” juice thickened with cornstarch or other thickening agent.

### Other Types of Medications

When assisting an individual with other types of medications such as topical creams and ointments, eardrops, nose drops, or eye drops, consult with the prescribing physician and the pharmacist for specific self-administration procedures.

**TEACHER'S GUIDE****Practice and Share**

Direct students to page S-15 and describe the Practice and Share.

Make sure that students understand the directions and where to find the information.

**Quiz**

Directions: The quiz consists of 10 questions. You will be given 20 minutes to answer them. Remember to fill in the oval that corresponds to the correct answer. We will review the answers as a class. As we review, mark the correct answers so that you can use them to study for the Test After Training.

Answers:

1. B
2. A
3. C
4. B
5. D
6. B
7. C
8. B
9. A
10. A

**End of Session 3**

## PRACTICE AND SHARE

Think about the individuals you support and the medications they take. Pick one medication and learn about the possible side effects.

### Session 3 Quiz

#### Medication Management

<b>1</b>	<input type="checkbox"/> <b>A</b>	<input type="checkbox"/> <b>B</b>	<input type="checkbox"/> <b>C</b>	<input type="checkbox"/> <b>D</b>
<b>2</b>	<input type="checkbox"/> <b>A</b>	<input type="checkbox"/> <b>B</b>	<input type="checkbox"/> <b>C</b>	<input type="checkbox"/> <b>D</b>
<b>3</b>	<input type="checkbox"/> <b>A</b>	<input type="checkbox"/> <b>B</b>	<input type="checkbox"/> <b>C</b>	<input type="checkbox"/> <b>D</b>
<b>4</b>	<input type="checkbox"/> <b>A</b>	<input type="checkbox"/> <b>B</b>	<input type="checkbox"/> <b>C</b>	<input type="checkbox"/> <b>D</b>
<b>5</b>	<input type="checkbox"/> <b>A</b>	<input type="checkbox"/> <b>B</b>	<input type="checkbox"/> <b>C</b>	<input type="checkbox"/> <b>D</b>
<b>6</b>	<input type="checkbox"/> <b>A</b>	<input type="checkbox"/> <b>B</b>	<input type="checkbox"/> <b>C</b>	<input type="checkbox"/> <b>D</b>
<b>7</b>	<input type="checkbox"/> <b>A</b>	<input type="checkbox"/> <b>B</b>	<input type="checkbox"/> <b>C</b>	<input type="checkbox"/> <b>D</b>
<b>8</b>	<input type="checkbox"/> <b>A</b>	<input type="checkbox"/> <b>B</b>	<input type="checkbox"/> <b>C</b>	<input type="checkbox"/> <b>D</b>
<b>9</b>	<input type="checkbox"/> <b>A</b>	<input type="checkbox"/> <b>B</b>	<input type="checkbox"/> <b>C</b>	<input type="checkbox"/> <b>D</b>
<b>10</b>	<input type="checkbox"/> <b>A</b>	<input type="checkbox"/> <b>B</b>	<input type="checkbox"/> <b>C</b>	<input type="checkbox"/> <b>D</b>

1. **Aspirin, vitamin supplements, and herbal remedies are examples of:**
  - A) Under-the-Table Medications.
  - B) Over-the-Counter Medications.
  - C) Prescription Medications.
  - D) Transcendental Medications.
2. **“PRN” Medications:**
  - A) May be prescription or non-prescription medications.
  - B) Have few or no side effects.
  - C) Are stored away from other drugs to prevent dangerous drug interactions.
  - D) Have to be recorded in the Medication Log only the first time they are used.
3. **Most medications have two names because one name is given by the company making the medication and the other name is given by the:**
  - A) Pharmacist.
  - B) Physician, Dentist, or Nurse Practitioner.
  - C) Federal government.
  - D) Community Care Licensing.
4. **When the DSP gives the right dose of the right medication to the right person at the right time and through the right route:**
  - A) Side effects that harm the individual will not occur.
  - B) The DSP is aware of and observes all of the “Five Rights.”
  - C) The medication will work exactly as the doctor expects it to.
  - D) There is still a good chance the DSP had made a medication error.
5. **Medication errors are reported on the medication log:**
  - A) Only if they are very serious.
  - B) At the end of the workday.
  - C) Before they occur, if time permits.
  - D) Not before they occur, but not hours later.

6. **An individual with a seizure disorder should always or usually avoid all of the following, except:**
- A) Amphetamines.
  - B) Multivitamin supplement.
  - C) Alcohol.
  - D) Cocaine.
7. **It is okay to disguise or hide medications in the person's food:**
- A) Only if the DSP is certain the person will never notice.
  - B) As a special fun activity, such as on Halloween or April Fool's Day.
  - C) At no time.
  - D) Only after making sure tablets are completely crushed to a fine powder.
8. **Aspirin, vitamin supplements, and herbal remedies are examples of:**
- A) Under-the-Table medications.
  - B) Over-the-Counter medications.
  - C) Prescription medications.
  - D) Transcendental medications.
9. **What should a DSP do if a person takes medications that were not prescribed for them?**
- A) Immediately notify the doctor of the person who took the wrong medication.
  - B) Wait until the next time before giving the medications to the right person, so that the medications will not be used up before they should be.
  - C) Get the person who took the wrong medication to vomit (throw up) as soon as possible.
  - D) Do a one-time switch by giving the person who did not get their medications the other person's medications.
10. **When packaging a dose of medication for the person to take when away from the facility, the DSP must make sure the following information is written on or contained in the package:**
- A) The person's name and the name of the medication.
  - B) The DSP's name and the phone number of the facility.
  - C) The doctor's name and the address of the pharmacist.
  - D) The "Five Rights."



## Appendices



## Appendix 3-A

## Guidelines for Assisting with Self-Administration of Medication

1. There must be a written, dated, and signed **physician's order** in the individual's record **before a DSP can assist** the individual with self-administration of any medication, prescription, or over-the-counter medication.
2. **Only one DSP** should assist an individual with medications at any given time. That DSP should complete the entire process. Never hand a medication to one individual to pass on to another.
3. **Always wash your hands** before assisting an individual with self-administration.
4. The DSP should **always prepare medication in a clean, well-lit, quiet area.** Allow plenty of time, avoid rushing, and stay focused. Check the Five Rights by reading the Medication Label and comparing to the Medication Log three times before the individual takes the medication.
5. **To avoid errors, it is recommended that the medications be set up immediately before assisting an individual with self-administration of medications.** While Community Care Licensing regulations permit the set up of medications up to 24 hours in advance, there are many potential problems with this practice, including the possibility of the wrong individual taking the wrong medication and wrong dose at the wrong time.
6. **DSPs should ask for help from the prescribing doctor or pharmacist** if he or she is unsure about any step in the preparation of, assistance with, or documentation of medications.
7. **Medication should never be disguised** by putting it in food or liquid.
8. **The DSP should always ask the physician (and pharmacist) to give the medicine in the proper form for the individual based on the individual's needs and preferences.**  
For example, one individual may have difficulty swallowing capsules and prefer liquid medication, while another may prefer capsules.
9. **Tablets should never be crushed** unless the prescribing physician has given specific directions to do so. **Capsules should not be opened** and their contents emptied out. Controlled release tablets can deliver dangerous immediate doses if they are crushed. Altering the form of capsules or tablets may have an impact on their effectiveness by changing the way an individual's body absorbs them.
10. **Read the medicine warning label, if any. It will give you important information about how the medication should be taken.**

ASK! ASK! ASK!

CHECK! CHECK! CHECK!

### Tegretol (Carbamazepin) Information Sheet

#### *What is carbamazepine?*

- Carbamazepine is a drug that affects the nerves and brain. It works by decreasing impulses in nerves that cause seizures and pain.
- Carbamazepine is used to treat seizures and nerve pain such as trigeminal neuralgia and diabetic neuropathy.
- Carbamazepine may also be used for purposes other than those listed in this medication guide.

#### *Who should not take carbamazepine?*

- Do not take carbamazepine without first talking to your doctor if you have ever had an allergic reaction to a tricyclic antidepressant; have taken a monoamine oxidase (MAO) inhibitor in the past 14 days; or have a bone marrow disease or a history of bone marrow suppression.

#### *Before taking carbamazepine, tell your doctor if you have:*

- kidney disease;
- liver disease;
- heart disease;
- a low level of red blood cells in your body (anemia); or
- glaucoma.

You may not be able to take carbamazepine, or you may require a dosage adjustment or special monitoring during treatment if you have any of the conditions listed above.

- Do not take this medication without first talking to your doctor if you are pregnant or breast-feeding a baby.

#### *How should I take carbamazepine?*

- Take carbamazepine exactly as directed by your doctor.
- Take each dose with a full glass of water.
- The Tegretol, Tegretol XR, and Epitol brands of carbamazepine should be taken with food.

- Do not crush, break, or chew any extended-release (Tegretol XR) formulations of carbamazepine. Swallow them whole. They are specially formulated to release slowly in the body.
- The tablet coating of the Tegretol XR formulation is not absorbed in the body and may be found in the stool.
- Your doctor may want you to have blood tests during treatment with carbamazepine. It is important for your doctor to know how much carbamazepine is in your blood and how well your liver is working. A complete blood count (CBC) and liver function (SGOT) should be checked 1-2 months after Tegretol is started. Thereafter levels should be checked every six months or so.
- It may take a few weeks or longer before you feel the full benefit of carbamazepine.
- Carry or wear a medical identification tag to let others know that you are taking this medicine in the case of an emergency.
- Do not stop taking carbamazepine even if you feel better. It is important to continue taking carbamazepine to prevent your seizures from recurring.
- Grapefruit and grapefruit juice may interact with carbamazepine. The interaction could lead to potentially adverse effects. You should discuss the use of grapefruit and grapefruit juice with your doctor. Do not increase or decrease the amount of grapefruit products in your diet without first talking to your doctor.
- Avoid prolonged exposure to sunlight. Use sunscreen and wear protective clothing
- Store carbamazepine at room temperature away from moisture and heat.

## Appendix 3-B (continued)

### *What happens if I miss a dose?*

Take the missed dose as soon as you remember. However, if it is almost time for the next dose, skip the missed dose and take only the next regularly scheduled dose. Do not take a double dose of this medication.

### *What happens if I overdose?*

- Seek emergency medical treatment.
- Symptoms of a carbamazepine overdose include irregular or decreased breathing, muscle twitches, restlessness, seizures, tremors, slurred speech, staggering walk, dizziness, large pupils, back- and- forth motion of the eyes, nausea, vomiting, and decreased urine production.

### *What are the possible side effects of carbamazepine?*

If you experience any of the following serious side effects, contact your doctor immediately or seek emergency medical attention:

- an allergic reaction (difficulty breathing; closing of your throat; swelling of your lips, tongue, or face; or hives);
- liver damage (yellowing of the skin or eyes, nausea, abdominal pain or discomfort, severe fatigue);
- chest pain, high blood pressure (headache, flushing), or congestive heart failure (shortness of breath, swelling of ankles);
- numbness or tingling in the hands, feet, arms, or legs;
- body or muscle jerks;
- confusion, slurred speech, or fainting;
- continuing headache, hallucinations, or depression;
- severe nausea or vomiting;
- back- and- forth movements of the eyes;
- blurred or double vision; or
- decreased urination.

- Rarely, carbamazepine may cause serious blood problems. Notify your doctor immediately if you develop any of the following symptoms, which may be early signs of potential blood problems: fever, sore throat, rash, sores in the mouth, easy bruising, or red or purple bruising.

Other, less serious side effects may be more likely to occur. Continue to take carbamazepine and talk to your doctor if you experience

- mild nausea, vomiting, diarrhea, constipation, or decreased appetite;
- dry mouth;
- impotence; or
- joint or muscle aches or pains.

Side effects other than those listed here may also occur. Talk to your doctor about any side effect that seems unusual or that is especially bothersome.

### *What other drugs will affect carbamazepine?*

- Carbamazepine can interact with many other medicines and many medications may affect your condition. Do not take any other prescription or over-the-counter medicines or herbal products without first talking to your doctor or pharmacist.

### *Where can I get more information?*

Your pharmacist has additional information about carbamazepine written for health professionals that you may read.

(c) Cerner Multum 2000. Version: 5.03. Revision date: 7 / 31 / 02.

### Medication Safety Questionnaire

Name _____			
Brand: _____	Dose (e.g., mg) and form (e.g., tabs)	When to take each dose?	For how long?
Generic: _____			

1. What is the medication supposed to do?
2. How long before I will know it is working or not working?
3. What about serum (blood) levels? Other laboratory work? How often? Where? Standing order?
4. If the individual misses a dose, what should I do?

.....  
*INTERACTIONS?*

5. Should this medication be taken with food?  Yes  No  
 At least one hour before or two hours after a meal?  Yes  No
6. Are there any foods, supplements (such as, herbs, vitamins, minerals), drinks (alcoholic, for example), or activities that should be avoided while taking this medication?  
 Yes (Which ones?) \_\_\_\_\_  
 No
7. Are there any other prescription or over-the-counter medications that should be avoided?  
 Yes (Which ones?) \_\_\_\_\_  
 No

.....  
*SIDE EFFECTS? IF SO, RESPONSE?*

8. What are common side effects?
9. If there are any side effects, what should I do?
10. If the drug is being prescribed for a long period of time, are there any long-term effects?



## Assisting Individuals with Self-Administration of Tablets, Capsules, and Liquid Medications

### SKILL CHECK #1

#### Directions

Partner with another member of the class. Each partner should have a Skill Check #1 Worksheet. Using the Worksheet, practice all the steps in this skill. Have your partner check off each step you correctly complete (PARTNER CHECK). When you are comfortable that you are able to correctly complete all the steps without using the Worksheet, ask the teacher to complete the Teacher Check.

#### Reminders for Assisting With Self-Administration

- ▶ **Always** store medication in a locked cabinet and/or refrigerator.
- ▶ **Never** leave medication unattended once it has been removed from the locked storage area.
- ▶ **Always** check for known allergies.
- ▶ **Always** read the medication label carefully and note any warning labels.
- ▶ Assist only with medication from labeled containers.
- ▶ Assist only with medication that you have prepared.

#### HELPFUL HINT

- ▶ When completing this skill check, remember that you are checking the **Five Rights three times** by reading the medication label and comparing it to the Medication Log.
- ▶ The first check is when you remove the medication from the locked storage area or storage container.
- ▶ The second check is when you remove the medication from its original labeled container.
- ▶ The third check is just before you assist the individual with self-administration.

*COMPETENCY: Each student is required to complete Skill Check #1 Worksheet, Assisting Individuals With Self-Administration of Tablets, Capsules, and Liquid Medications, with no errors.*

---

 TEACHER

---

 STUDENT

---

 DATE

## Appendix 3-E

### Assisting Individuals with Self-Administration of Tablets, Capsules, and Liquid Medications

*Scenario: The time is 8:00 a.m. The date is the day of the class. The DSP is assisting Jacob Smith with self-administration of medication.*

*Please initial each step when completed correctly*

<b>STEPS</b>	Teacher Check			
	Partner Check	Attempt #1 Date	Attempt #2 Date	Attempt #3 Date
1. Help the individual whom you are assisting to wash his or her hands.	.	.	.	.
2. Wash your hands.	.	.	.	.
3. Get the Medication Log for the individual you are assisting.	.	.	.	.
4. Gather supplies:	.	.	.	.
▶ The labeled medication storage unit with the medication containers	.	.	.	.
▶ Paper cups for tablets and capsules, plastic calibrated measuring cup, or medication spoon for liquid	.	.	.	.
▶ Glass of water	.	.	.	.
▶ Tissues	.	.	.	.
▶ Pen	.	.	.	.
5. As you take each medication container from the individual's storage unit, read the medication label and compare to the Medication Log for the:	.	.	.	.
▶ Right individual	.	.	.	.
▶ Right medication	.	.	.	.
▶ Right dose	.	.	.	.
▶ Right time (check the time on your watch or clock)	.	.	.	.
▶ Right route	.	.	.	.

## Appendix 3-E (continued)

### Assisting Individuals with Self-Administration of Tablets, Capsules, and Liquid Medications

*Please initial each step  
when completed correctly*

<b>STEPS</b>	Teacher Check			
	Partner Check	Attempt #1 Date	Attempt #2 Date	Attempt #3 Date
6. Again, as you prepare the medications, read the medication label and compare to the Medication Log for the:				
▶ Right individual				
▶ Right medication				
▶ Right dose				
▶ Right time (check the time on your watch/clock)				
▶ Right route				
7. For tablets or capsules, pour the correct dose into the lid of the container and then into a small paper cup.				
8. For bubble packs, push tablets/capsules from the bubble pack into a small paper cup.				
9. For liquid medication, pour the correct dose into the plastic measuring cup held at eye level.				
▶ View the medication in the cup on a flat surface.				
▶ Pour away from the medication label to avoid spills.				
▶ If any spills on the bottle, wipe away.				
<b>or</b>				
When using a measuring spoon:				
▶ Locate the marking for the dose.				
▶ Hold the device at eye level and fill to the correct dosage marking.				
▶ Pour away from the medication label to avoid spills.				
▶ If any spills on the bottle, wipe away				

## Appendix 3-E (continued)

### Assisting Individuals with Self-Administration of Tablets, Capsules, and Liquid Medications

*Please initial each step  
when completed correctly*

<b>STEPS</b>	Partner Check	Teacher Check		
		Attempt #1 Date	Attempt #2 Date	Attempt #3 Date
10. Talk with the individual you are assisting about what you are doing and about why he or she is taking each medication.	.	.	.	.
11. Again, just before putting the medication within the individual's reach, read the medication label and compare to the Medication Log for the:	.	.	.	.
▶ Right individual	.	.	.	.
▶ Right medication	.	.	.	.
▶ Right dose	.	.	.	.
▶ Right time (check the time on your watch/clock)	.	.	.	.
▶ Right route	.	.	.	.
12. Place the medication within the individual's reach.	.	.	.	.
13. Offer a glass of water.	.	.	.	.
14. Make sure that the individual takes the medication and drinks water.	.	.	.	.
15. Record that the individual took his or her medication by initialing the date and time in the proper box on the Medication Log.	.	.	.	.
16. Return the medication containers and bubble pack to the individual's storage unit. As you do so, read the labels to check that the individual's name on the medication container label is the same as the name on the storage unit.	.	.	.	.

# Certification



*This is to certify that*

---

(Name of student)

*correctly completed all of the steps for  
Assisting Individuals with Self-Administration of  
Tablets, Capsules, and Liquids.*

---

Teacher Signature

Date

Comments

---

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---

---

---

## **When Assisting with Self-Administration of Medications, You Must Ensure That:**

- The Right person
- Receives the Right medication...
- In the Right dose...
- At the Right time...
- By the Right route...



## Appendix 3-F

### ABC Pharmacy

1017 25<sup>th</sup> St., Sacramento, CA  
Phone 123-456-0789 Fax 123-456-0780

Rx: 10387      Dr. Diaz      Patient: Jacob Smith      6/15/05  
Tegretol 400 mg    #30 tablets  
Take 1 tablet orally every AM for seizures  
(8 am)

Expires: 6/02/06      Filled by: BRS  
Mfg: Many Medications      Refills: 2

### ABC Pharmacy

1017 25<sup>th</sup> St., Sacramento, CA  
Phone 123-456-0789 Fax 123-456-0780

Rx: 10387      Dr. Diaz      Patient: Jacob Smith      6/15/05  
Tegretol 400 mg    #30 tablets  
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(8 am)

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Mfg: Many Medications      Refills: 2

## Appendix 3-F

### ABC Pharmacy

1017 25<sup>th</sup> St., Sacramento, CA  
Phone 123-456-0789 Fax 123-456-0780

Rx: 10484 Dr. Anderson Patient: Jacob Smith 6/04/05  
Amoxicillin 250 mg #30 capsules  
Take 1 tablet orally every 8 hours for 10 days for bronchitis  
(8 am, 4pm, 12 am)

Expires: 7/01/06 Filled by: BRS  
1 Mfg: Many Medications Refills: 0

### ABC Pharmacy

1017 25<sup>th</sup> St., Sacramento, CA  
Phone 123-456-0789 Fax 123-456-0780

Rx: 10484 Dr. Anderson Patient: Jacob Smith 6/04/05  
Amoxicillin 250 mg #30 capsules  
Take 1 tablet orally every 8 hours for 10 days for bronchitis  
(8 am, 4pm, 12 am)

Expires: 7/01/06 Filled by: BRS  
1 Mfg: Many Medications Refills: 0

### ABC Pharmacy

1017 25<sup>th</sup> St., Sacramento, CA  
Phone 123-456-0789 Fax 123-456-0780

Rx: 10484 Dr. Anderson Patient: Jacob Smith 6/04/05  
Amoxicillin 250 mg #30 capsules  
Take 1 tablet orally every 8 hours for 10 days for bronchitis  
(8 am, 4pm, 12 am)

Expires: 7/01/06 Filled by: BRS  
1 Mfg: Many Medications Refills: 0

### ABC Pharmacy

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Phone 123-456-0789 Fax 123-456-0780

Rx: 10484 Dr. Anderson Patient: Jacob Smith 6/04/05  
Amoxicillin 250 mg #30 capsules  
Take 1 tablet orally every 8 hours for 10 days for bronchitis  
(8 am, 4pm, 12 am)

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Rx: 10484 Dr. Anderson Patient: Jacob Smith 6/04/05  
Amoxicillin 250 mg #30 capsules  
Take 1 tablet orally every 8 hours for 10 days for bronchitis  
(8 am, 4pm, 12 am)

Expires: 7/01/06 Filled by: BRS  
1 Mfg: Many Medications Refills: 0

## Appendix 3-F

### ABC Pharmacy

1017 25th St., Sacramento, CA  
Phone: 000-000-0000 Fax: 000-000-0000  
Rx: 10484 Dr. Anderson  
Patient: Jacob Smith 06/04/05  
Liquid: TAKE 5cc EVERY SIX HOURS FOR COUGH  
(2AM, 8AM, 2PM, 8PM)  
Discard by: 07/01/06 Filled by: BRS  
QTY: 100CC  
Refills: 0 RUBYTUSSIN

### ABC Pharmacy

1017 25th St., Sacramento, CA  
Phone: 000-000-0000 Fax: 000-000-0000  
Rx: 10484 Dr. Anderson  
Patient: Jacob Smith 06/04/05  
Liquid: TAKE 5cc EVERY SIX HOURS FOR COUGH  
(2AM, 8AM, 2PM, 8PM)  
Discard by: 07/01/06 Filled by: BRS  
QTY: 100CC  
Refills: 0 RUBYTUSSIN

### ABC Pharmacy

1017 25th St., Sacramento, CA  
Phone: 000-000-0000 Fax: 000-000-0000  
Rx: 10484 Dr. Anderson  
Patient: Jacob Smith 06/04/05  
Liquid: TAKE 5cc EVERY SIX HOURS FOR COUGH  
(2AM, 8AM, 2PM, 8PM)  
Discard by: 07/01/06 Filled by: BRS  
QTY: 100CC  
Refills: 0 RUBYTUSSIN

### ABC Pharmacy

1017 25th St., Sacramento, CA  
Phone: 000-000-0000 Fax: 000-000-0000  
Rx: 10484 Dr. Anderson  
Patient: Jacob Smith 06/04/05  
Liquid: TAKE 5cc EVERY SIX HOURS FOR COUGH  
(2AM, 8AM, 2PM, 8PM)  
Discard by: 07/01/06 Filled by: BRS  
QTY: 100CC  
Refills: 0 RUBYTUSSIN

### ABC Pharmacy

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Rx: 10484 Dr. Anderson  
Patient: Jacob Smith 06/04/05  
Liquid: TAKE 5cc EVERY SIX HOURS FOR COUGH  
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Refills: 0 RUBYTUSSIN

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Liquid: TAKE 5cc EVERY SIX HOURS FOR COUGH  
(2AM, 8AM, 2PM, 8PM)  
Discard by: 07/01/06 Filled by: BRS  
QTY: 100CC  
Refills: 0 RUBYTUSSIN



**Errors and Omissions**

Date	Time	Medication Involved	Description of what happened (How discovered, effect upon person, sequence of events and individuals)	Who was notified, e.g. Doctor, Administrator, Emergency Services, etc.	Initials

**INSTRUCTIONS FOR USE:** Circle the date and time of error or omission on reverse side. Complete report on each error or omission indicated on this page.