

Medication Administration

Medication administration is the preparation, administration, evaluation and documentation of ordered medications in the process of providing patient care.

Medication administration is a mandatory competency, legislatively required for licensure of Licensed Practical Nurses in the province of Saskatchewan. This means an LPN will have the integrated knowledge, skills, abilities, behaviors, attitude, critical thinking and judgements required to administer medication safely, competently, and ethically within the individuals nursing practice. The LPN is responsible to ensure, obtain and maintain competence.

The LPN must ensure medication administration meets the SALPN regulatory requirements. The SALPN Regulatory Bylaws provide the following:

20. All members shall ensure that they work within their educational preparation, level of competence and scope of practice and comply with the standards of practice set out in the *Standards of Practice for Licensed Practical Nurses* approved and adopted by Canadian regulatory agencies as of April 1, 2013.

21. All members shall conduct themselves in an honorable and ethical manner, upholding the values of truth, honesty, and trustworthiness, and shall observe the standards of conduct set out in the *Code of Ethics for Licensed Practical Nurses in Canada* approved and adopted by Canadian Regulatory Agencies as of April 1, 2013.

The LPN is accountable for all actions or inactions regarding medication administration. The LPN must ensure the nursing process of assessment, planning, implementation, and evaluation is applied in all aspects of medication administration. The “passing” of the medication is a very small and only technical portion of the medication administration process.

Prior to Medication Administration

Before attempting medication administration, an LPN must first consider the following questions:

a. Self

Am I confident in my knowledge, skills, and ability to safely administer medication?

Am I prepared to be accountable for all aspects of medication administration?

Am I knowledgeable regarding the specific medication required? (included but not limited to)

- Intended use and desired effect of the medication
- Dosage
- Route
- Side effects
- Adverse reactions

- Indications and contraindications
- Unsafe interactions
- Over dosage information
- Unconventional uses
- Absorption
- Patient circumstances to consider
- Risks to the patient

Is my supporting knowledge of anatomy, physiology, and pathophysiology adequate to perform medication administration?

Am I knowledgeable of all policies and procedures in place that may affect medication administration?

b. Patient

Have I performed an assessment to establish appropriate baseline information about the patient?

Am I aware of the patients' pertinent medical history and allergies?

Do I know why the medication has been prescribed?

c. Environment

Does the environment provide the resources needed to perform assessments required prior to, during, and following medication administration?

Are there resources available to seek further information regarding medications required?

Are there other professionals available for support in both emergent or non-emergent situations?

Does policy clearly outline procedures for the administration of medication, management of adverse reaction, and handling of error?

Medication Orders:

All medications require an order from an appropriate prescriber. In most settings, the prescriber will be a physician or RN (NP). However dentists, and optometrists, midwives and pharmacists are also authorized to prescribe certain medications in identified circumstances in Saskatchewan.

ROUTINE ORDER:

An appropriate order must include:

- Patient identification (name and diagnosis) on employer approved forms
- Name of medication
- Dosage
- Route

- Frequency / Duration
- Signature of physician or RN (NP) or other authorized prescribers

B. VERBAL ORDER

Written orders are best practice when the authorized prescriber is present; however, in trauma and emergent situations, verbal orders are acceptable. When accepting verbal orders in the presence of the authorized prescriber, the LPN must:

- Verify the patient
- Repeat, verify and confirm the components of the order
- Date, time, signature is required when documenting the order on employer approved forms.
- Obtain the signature of the authorized prescriber.

D. TELEPHONE ORDER

Telephone orders are received from an authorized prescriber via the telephone. In this case, the authorized prescriber is not present and is unable to provide a signature at that time. The risk of error increases with a telephone order and the LPN must take extra caution to prevent error. A telephone order must include all the components required of routine orders and, in addition, the LPN must indicate “telephone order”. The LPN is accountable for:

- Recording the medication order accurately
- Repeat-verify-confirm the order
- Providing to the authorized prescriber or seeking any other information affecting the order
- Obtaining the signature of the authorized prescriber when appropriate

Administering Medication

The act of administering medication goes beyond transferring the medication from the nurse to the client. It, like all aspects of nursing, is inclusive of the nursing process. Assessment, planning, implementation, and evaluation are paramount to safe medication administration. Medication must be prepared at the time of administration. Pre-pouring or preparing medications for another provider to administer is not appropriate.

The LPN is accountable to

- Verify the transcribed order is correct according to the medication system used
- Assess the patient to determine appropriateness for the medication
- Identify and clarify any concerns or discrepancies with the order
- Accurately prepare dosage and reconstitutions
- Prepare, label, store, and or dispose of medication or related products appropriately
- Apply the “rights” of medication administration:

1. right client
 2. right medication
 3. right dose
 4. right route
 5. right frequency / time
 6. right technique
 7. right evaluation
 8. right documentation
 9. right policy
- Monitor and evaluate patient for effectiveness of medication, side effects, adverse reactions and manage and document appropriately.
 - Adhere to agency policy regarding medication administration, error reporting, count of controlled substances, co-signage and medication wastage.
 - Sign for all medications given or withheld; d
 - Correctly use and interpret policy approved abbreviations.

Although there is not a specified list of medication an LPN can or cannot give, the LPN must ensure he or she meets all standards of practice for each individual medication administered.

References:

- College of Licensed Practical Nurses of British Columbia. (2010) Practice Guideline: Medication Administration. Burnaby*
- College of Licensed Practical Nurses of British Columbia. (2010) Professional Standards of Practice for Licensed Practical Nurses. Burnaby*
- College of Nurses of Ontario. (2008) Practice Standard: Medication, Revised 2008. Toronto*
- Perry, M. & Potter, J. (2009) Medication Administration. Canadian Fundamentals of Nursing (677-699) Toronto.*
- Saskatchewan Association of Licensed Practical Nurses. (2012) Standards of Practice Code of Ethics. Regina*
- Saskatchewan Registered Nurses Association. (2007) Medication Administration: Guidelines for Registered Nurses. Regina*