

ADMINISTERING MEDICATIONS TO STUDENTS

SIX RIGHTS OF MEDICATION ADMINISTRATION CHECKLIST

School staff authorized to administer medications to students will follow the six rights to safe medication administration.

RIGHT STUDENT:

BEFORE ADMINISTERING THE MEDICATION, the individual administering the medication should:

- Verify student identity by two different means (i.e., “What is your name?” and photo identification).
- Do not prepare medication (i.e., set out, measured) for administration at a later time or to be administered by another individual.

RIGHT MEDICATION:

UPON RECEIPT OF MEDICATION the school nurse should:

- Review a newly prescribed medication order and verify it matches the delivered drug.
- Check the medication and the licensed prescriber order twice to ensure they match.
- Verify the newly prescribed medication is appropriate for the student and prescribed purpose.
- Ensure the medication is in original pharmacy container with a pharmacy label or the manufacturer’s original container.
- Check medication’s expiration date.
- Review student’s allergies to verify no contraindications.

BEFORE ADMINISTERING THE MEDICATION, the individual administering the medication should:

- Review medication label and medication administration record (MAR) twice to ensure they match.
- Check medication’s expiration date.
- Review student’s allergies to verify no contraindications.

RIGHT DOSE:

UPON RECEIPT OF MEDICATION the school nurse should:

- Transcribe the dose to the MAR, using leading zeros before a decimal amount of less than one, and do not use trailing zeros after a decimal.
- Transcribe the medication on the MAR; use metric units whenever possible.

- Avoid using mls or cc abbreviation; use the preferred abbreviation mL.
- Obtain the student's weight in kilograms on a kilogram scale.
- Avoid conversions from pounds to kilograms.
- The medication record should indicate the weight should be entered in kilograms; if an EHR, the EHR should prompt for weight to be recorded in kilograms.
- The school nurse should calculate the safe dose range:
 - The prescribed dose should be checked using an approved pediatric drug reference to determine if the dose falls within the recommended dose over 24 hours for the student's weight and age.
 - If the dose prescribed exceeds the recommended safe daily dose range the pharmacy may be consulted for assistance.
 - Notify the parents and the licensed prescriber.
- The professional registered nurse should review documentation for dose to be administered (check twice).
 - Calculate the amount of medication for the correct dose.
 - Clarify dosage in mL if prescriber uses terms that are not recommended: tablespoon (15mL) versus teaspoon (5mL).

BEFORE ADMINISTERING THE MEDICATION, the individual administering the medication should:

- Review the medication label and MAR to ensure that the dose matches.
- For liquid medication: use standard medication dosing instruments (oral metric syringes, not cups or droppers) that only display metric scale volume. Do not use kitchen utensils (tablespoons and teaspoons).

UPON CHANGE IN MEDICATION DOSE, a new prescription container label should be requested to replace the outdated dosage label.

RIGHT ROUTE:

UPON RECEIPT OF MEDICATION the school nurse should:

- Review the licensed prescriber's order to ensure that a route is indicated.

BEFORE ADMINISTERING THE MEDICATION

- Review documentation for route of administration.

RIGHT TIME:

UPON RECEIPT OF MEDICATION the school nurse should:

- Review the licensed prescriber's order to ensure that the medication administration time is indicated.

BEFORE ADMINISTERING THE MEDICATION, the individual administering the medication should:

- Do not prepare medication (i.e., set out, measured) for administration at a later time or to be administered by another individual.
- Verify that they are giving the medication at the correct time by checking the time indicated in the MAR.
 - Medication ordered every four hours or more often may be administered 30 minutes before or after the scheduled time. Medications ordered less frequently than every four hours AND the administration schedule is not deemed critical may be administered an hour before or an hour after the scheduled time.

- If the time is outside of the time parameter, the individual should contact the school nurse. The school nurse should use nursing judgement as to whether to administer the drug or not, documenting the actual time and reason for variance. If there is a need for change, the school nurse may need to develop a plan to accommodate the student and facilitate future schedule adherence.
- Locate a student who does not report for medication administration.
 - If a student chronically does not report for medication at the scheduled time, a plan for reminders should be instituted.

RIGHT DOCUMENTATION:

UPON RECEIPT OF MEDICATION the school nurse should:

- Ensure the medication administrative documentation includes:
 - medication administration record,
 - up to date medication list,
 - up to date list of allergies (including description of the adverse reaction),
 - indication for use, adverse reactions,
 - actual current weight in kilograms,
 - permission for self-administration of medication,
 - licensed prescriber order and parent consent forms,
 - IHCP, IEP, Individual Action Plans, 504 plans, if pertinent.

AFTER ADMINISTERING THE MEDICATION, the individual who administered the medication should:

- Promptly and legibly document medication administration on the MAR.
- Medication administered to the wrong student, or wrong medication dose (including missed dose), time, or route are medication errors and are recorded in the student record and on an incident report form.
- Student refusal of the medication should be documented, and the parent notified.
- If a prescribed medication to be administered at school is taken at home or prior to school, it should be documented on the MAR.
- If an error has occurred, the individual who was involved in the error documents and reports medication errors to the school nurse.
- The school nurse reports and documents the report of medication errors to the building principal, school administrator, parents, and school district risk manager.
- Lost, wasted, dropped, stolen medications are recorded on incident forms and reported to the school nurse, building principal, school administrator, parents, and school district risk manager. The licensed prescriber may be notified if warranted.