MEDICATION ADMINISTRATION

Policy:
Medications shall be administered only by persons authorized by and within the guidelines of the respective licensing agencies of the State of Louisiana and who are on the staff of LSUHSC-Shreveport.

Procedure:

1. Nurses
   a. Registered nurses currently licensed by the Louisiana State Board of Nursing and licensed practical nurses licensed by the Louisiana State Board of Practical Nurse Examiners or possessing current permits are permitted to administer medications. Parameters are further defined in Nursing Policies, Pharmacy and Therapeutics Committee Policies and other Departmental Policies (such as Anesthesiology, etc.).
   b. Nursing students are permitted to administer medications under the supervision of an instructor/staff nurse as part of their educational experience. (See Nursing Policy N-60)

2. Medical Staff
   a. Medications may be administered by licensed practitioners of medicine and dentistry that have been granted clinical privileges by LSUHSC-Shreveport. This includes physician house staff and foreign graduates with permits for institutional practice approved by LSUHSC-Shreveport.
   b. Medical students may administer medications under supervision of a licensed physician. Administration is documented in the patient’s medical record in the appropriate section; i.e.: progress notes, treatment record.
   c. Physician’s Assistants may administer medications delegated to them by their supervising physicians and defined in the Practice Act.
   d. Nurse practitioners may administer medications as established by LSUHSC-Shreveport protocols.

3. Other staff
Medications may be administered only by persons authorized by their respective licensing agency within the State of Louisiana and approved departmental policy. These persons include:
   a. Pharmacists
   b. Respiratory therapists and technicians,
   c. Radiology technologist,
   d. Physical therapist,
   e. EEG technicians
4. The following information shall be available to all clinical staff involved in the medication management process:
   a. Patient’s age,
   b. Patient’s sex,
   c. Patient’s current medications,
   d. Patient’s diagnosis, co-morbidities and concurrently occurring conditions,
   e. Patient’s relevant laboratory values, and
   f. Patient’s allergies and past sensitivities.

As appropriate to the patient, the following information should also be accessible:
   g. Weight and height,
   h. Pregnancy and lactation status, and
   i. Any other information required by the hospital for safe medication administration.

5. Before administering a medication staff shall:
   a. Verify that the medication selected is the correct one based on the medication order and product label,
   b. Verifies that the medication is stable based on visual exam for particulates or discoloration and that the medication has not expired,
   c. Verifies that there is no contraindication,
   d. Verifies that the medication is being given at the proper time, in the prescribed dose and by the correct route,
   e. Educates the patient, or if appropriate, the patient’s family about any potential significant adverse reaction and other concerns about administering a new medication, and documents the same,
   f. Discusses unresolved significant concerns about the medication with the patient’s physician, prescriber, and/or relevant staff, and
   g. Verifies patient name and medical record number or birth date.

6. Medication labeling
   Medications shall be labeled according to the following guidelines.
   a. Any time one or more medications are prepared but are not administered immediately, the medication container must be appropriately labeled. The medication container can be any storage device such as a plastic bag, syringe, bottle, or box which can be labeled and secured in such a way that it can be readily determined that the contents are intact and have not expired.
   b. All medications, medication containers (e.g. syringes, medicine cups, basins), or other solutions on and off the sterile field in perioperative and other procedural settings must be labeled. Labeling occurs when any medication or solution is transferred from the original packaging to another container.
   c. Department specific procedures are instituted ensuring compliance with the following:
1) Labels include the name and strength of the medication or solution, the date, and the initials of the person preparing the label.

2) All labels are verified both verbally and visually by two qualified individuals. No more than one medication or solution is labeled at one time.

3) Any medication or solution found unlabeled is immediately discarded.

4) Original containers from medications or solutions remain available for reference in the perioperative or procedure area until the conclusion of the procedure. All labeled containers on the sterile field are discarded at the conclusion of the procedure.

5) At shift change or break relief, all medications and solutions both on and off the sterile field and their labels are reviewed by entering and exiting personnel.

d. At a minimum, all medications are labeled with:
   1) Drug name, strength and amount (if not apparent from the container),
   2) Expiration date when not used in 24 hours,
   3) Expiration time when expiration occurs in less than 24 hours
   4) For all compounded IV admixtures and parenteral nutrition solutions, the date prepared and the diluents

7. Qualified staff member documents medication administration in the medical record including, but not limited to:
   a. Date of time of administration
   b. Medication name, dose, and route of administration,
   c. Legal signature and title of person administering the medication.

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