

Facility _____ Pass _____

Staff _____ Date _____

Station _____ Observer _____

Technique Observed

Code	Criteria	Met	Not Met	N/A
1	Med cart: no missing supplies, clean visible or locked			
2	Fluid and adjunctive food covered and dated			
3	Resident Properly identified before administration			
4	Resident privacy maintained and positioned properly			
5	For meds with parameters, V/S taken before admin			
6	Correct medication verified by visual check of med, label, MAR			
7	Liquid Med Measured accurately, Shaken/diluted PRN			
8	Proper crushing technique Non crushable meds have MD order			
9	AC or PC with meals/food orders administered correctly			
10	Resident observed to ensure medications are swallowed			
11	Med recorded is charted consistently and properly			
12	Meds are not left on top of cart or at residents bedside			
13	Refused or withheld meds are properly noted			
14	PRN meds administered/documentated appropriately			
15	Proper hand cleansing technique at all times			
16	Ophthalmic products administered properly			
17	Transdermal patches rotated, removed, dated and initialed			
18	Inhalers properly administrated; mouth piece cleaned			
19	Injections properly prepared, administered and documented			
20	Controlled Drugs documented properly at time of admin.			
21	Medications via feeding tube properly administered			
22	Medications administered per manufacturer specifications			
23	Medications administered per facility Policy & Procedure			

In-Service
Notes

Reminder:

Totals			
---------------	--	--	--

Opportunities Noted	
----------------------------	--

Percent Compliance	
---------------------------	--