

Administration of Medication Via Parenteral Injection

Student Name: _____

Student Signature: _____

Evaluator Signature: 1st attempt _____ Date: _____

Satisfactory*

Unsatisfactory^

Evaluator Signature: 2nd attempt _____ Date: _____

Satisfactory*

Unsatisfactory^

Evaluator Signature: 3rd attempt _____ Date: _____

Satisfactory*

Unsatisfactory^

**** Critical Behaviors that need to be stated or done in order to pass the skill.**

PERFORMANCE BEHAVIORS	S*	U^	COMMENTS
<u>Assessment</u>			
1. Avoid distractions			
2. Check Medication Administration Record (MAR) <ul style="list-style-type: none"> a. Date b. Patient name c. Drug name and dosage d. Time for administration e. Route of administration 			
3. Check patient's chart for <ul style="list-style-type: none"> a. **Allergies b. Parameters for holding medication (e.g. labs, Apical HR, BP, physical assessment) 			
<u>Planning</u>			
5. Identify expected outcomes: know actions, special nursing considerations, safe dose ranges, purpose of administration, and adverse effects of medications to be administered.			
6. Identify what teaching you might need to provide to the patient.			
7. Gather equipment <ul style="list-style-type: none"> a. EHR b. **Proper size syringe and needle (IM: 22-25gauge 1-1.5inch; SQ 25-27gauge 3/8-5/8inch) d. Alcohol swabs and 2x2 gauze e. Gloves 			
<u>Implementation</u>			
8. **Perform hand hygiene			
9. Prepare medication for only one patient at a time. <ul style="list-style-type: none"> a. State the ** 6 rights of medication administration using the MAR. b. Read MAR and select correct medication ** (First Check). c. Check expiration date. Repeat if more than one medication is to be administered. 			
10. Compare MAR to label on medication container, verifying correct medication ** (Second Check) . Repeat as necessary for each medication to be administered.			
11. Verbalize that you will calculate correct amount of drug to be given.			
12. Prepare medication in syringe <ul style="list-style-type: none"> a. Visually inspect medication for color, clarity, sediment. b. Alcohol swab rubber stopper of vial c. **Inject air into vial in quantity of desired volume to be drawn into syringe d. **Withdraw correct dose (tap syringe to clear air from syringe and needle) e. **Recap syringe using scoop method for transport to patient's room f. If not administered immediately, clearly label syringe. 			
13. Check label of vial, ampule, or prefilled syringe, compare it to MAR ** (Third Check) . Check expiration date.			
14. Carry prepared medication, vial, gauze, alcohol swab, and MAR to patient's room.			

PERFORMANCE BEHAVIORS	*S	*U	COMMENTS
15. Upon entering room <ol style="list-style-type: none"> a. **Perform hand hygiene b. Be aware of your spatial safety, have call light within reach c. Identify self d. **Identify patient using two forms of identification (i.e., Name, birth date, medical record number) while comparing EHR to patient wrist band e. **Ask patient if he or she has any allergies and check for allergy band f. Ensure privacy g. Explain what is about to occur and what medications will be administered h. Allow for patient questions i. Raise bed to comfortable working height. j. **Don gloves k. Scan patient wrist band l. Scan medication 16. **Correctly record medication on MAR <ol style="list-style-type: none"> a. Injection site b. Any pertinent collected data such as pain level, BP, pulse. c. Medication given and dose d. Time and route 			
17. Prepare site for injection <ol style="list-style-type: none"> a. Choose appropriate injection site. <ol style="list-style-type: none"> i. IM: Deltoid, vastus lateralis, ventrogluteal ii. SQ: outer posterior aspect of the upper arms, abdomen, anterior aspects of the thighs b. Cleanse site with alcohol swab in circular motion from center of site outward. Allow alcohol to dry. c. Place gauze pad on patient with corner aimed at intended injection site 			
18. Administer injection <ol style="list-style-type: none"> a. Hold syringe between thumb and forefinger as if grasping a dart. b. Inject: <ul style="list-style-type: none"> • Subcutaneous: Pinch cleansed skin with non-dominant hand. Insert needle quickly and firmly at 90 degree angle, release skin, do not aspirate. With dominant hand, inject medication slowly but continuously. Withdraw quickly while gently placing gauze pad over site. Do not rub the injection site. • Intramuscular: (Identify proper injection location) Displace skin in a Z-track manner using non-dominant hand. Position syringe at 90 degree angle to skin surface. Insert needle into skin quickly and firmly at a 90 degree angle. **Aspirate slowly for 5 seconds. If blood is aspirated, discard. With dominant hand, inject medication slowly and continuously. Wait 10 seconds, withdraw at a 90 degree angle, release skin. Cover injection site immediately with gauze pad. Applying gentle pressure. Examine for active bleeding or bruising. 			
19. Discard used syringe <ol style="list-style-type: none"> a. **Engage safety device if available b. **Never recap a used needle c. Place in sharps container 			
20. Before leaving room <ol style="list-style-type: none"> a. **Reposition patient for comfort and safety b. ** Lower bed c. **Raise appropriate side rails d. **Leave call light and belongings in reach e. ** Perform hand hygiene f. Dispose of used equipment 			
<u>Evaluation</u> 21. Tolerance: Verbalize tolerance of injection and any adverse response. Effects: Verbalize need to follow up on therapeutic effects of medication (i.e. pain, blood pressure, heart rate, fluid status, blood sugar, etc.,) in a timely manner.			

*S = Satisfactory, ^U = Unsatisfactory

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