

Medication Administration and Safety Standards

The medication administration and safety standards are listed below. For your convenience and future reference, you may wish to bookmark the Alabama Administrative Code Link [<http://www.abn.alabama.gov/Content.aspx?id=123>]. Medication Administration and Safety Standards are located in **Rule 610-X-6-.07**.

610-X-6-.07 Medication Administration and Safety

(1) The registered nurse or licensed practical nurse shall have applied knowledge of medication administration and safety, including but not limited to

- (a) Drug action.
- (b) Classifications.
- (c) Expected therapeutic benefit of medication.
- (d) Expected monitoring.
- (e) Indications based on existing patient illness or injury processes.
- (f) Contraindications based on presence of additional known patient illnesses, disease processes or pre-existing conditions.
- (g) Possible side effects and interventions for same.
- (h) Adverse reactions and interventions for same.
- (i) Emergency interventions for anaphylactic reactions.
- (j) Safety precautions including but not limited to:
 - (i) Right patient.
 - (ii) Right medication.
 - (iii) Right time.
 - (iv) Right dose
 - (v) Right route.
 - (vi) Right reason.
 - (vii) Right documentation.
- (k) Interactions with other drugs, foods or complementary therapies.
- (l) Calculation of drug dosages.
- (m) Federal and state legal requirements related to storage of controlled substances.
- (n) Patient education specific to medication.

(2) The registered nurse or licensed practical nurse shall exercise decision-making skills when administering medications, to include but not limited to:

- (a) If medications should be administered.
- (b) Assessment of patient's health status and complaint prior to and after administering medications including as needed (PRN) medications.
- (c) When to contact the prescriber.
- (d) Education of patient, family and caregiver medication.

(3) The registered nurse or licensed practical nurse shall exhibit skills when administering medications including but not limited to:

- (a) Physical ability to open medication packaging and access delivery systems.
- (b) Read, write, and comprehend English.
- (c) Read, write, and comprehend scientific phrases relevant to administration of medication.
- (d) Measuring medication dosages.
- (e) Math calculations.
- (f) Routes of administration.

- (g) Proper usage of technical equipment for medication administration.
- (4) Documentation of medication administration shall comply with the principles of documentation and include safety precautions of medication administration, controlled drug records per federal and state law, and facility policy.
- (5) Administration of medications by routes beyond basic educational preparation, including but not limited to intrathecal, intracavitary, intraosseous, require a standardized procedure.
- (6) The registered nurse may not administer the initial dose of any medication by intrathecal, epidural, intrapleural or peripheral nerve catheter.
- (7) The registered nurse is not authorized to administer bolus dosages via an epidural or brachial plexus catheter.
- (8) The topical, intradermal, subcutaneous, or intramuscular administration of a local anesthetic agent in a specified amount designated by order of a licensed physician or dentist and in compliance with the Food and Drug Administration regulations may be performed by a registered nurse or licensed practical nurse when they meet the requirements of Rule 610-X-6-.04 or 610-X-6-.05 respectively.
- (9) The monitoring and adjustment of local anesthetic agent(s) and analgesic agent(s) infusing via an epidural, brachial plexus, or femoral catheter placed by a qualified certified registered nurse anesthetist or qualified licensed physician may be performed by a registered nurse, with the use of an electronic pump or infusion reservoir, as ordered by a licensed prescriber.
 - (a) The registered nurse is authorized to replace and refill reservoirs with a solution prepared by a licensed registered pharmacist. The registered nurse is authorized to adjust infusion rates at the direction of a physician licensed to practice medicine or a certified registered nurse anesthetist.
 - (b) A standardized procedure is required for monitoring and adjustment of epidural, brachial plexus, and femoral catheter infusions of local anesthetics and analgesics.
 - (c) The organized program of study shall include:
 - (i) Advanced cardiac life support or other comparable certification.
 - (ii) Review of pertinent anatomy, physiology, and pathophysiology.
 - (iii) Electronic pump/reservoir management.
 - (iv) Theory of epidural analgesia.
 - (v) Neurological assessment.
 - (vi) Recognition and management of complications.
 - (vii) Pharmacokinetics and pharmacodynamics.
 - (viii) Annual review and competency evaluation.
- (10) Intravenous chemotherapeutic agents may be administered by registered nurses following participation in:
 - (a) An organized program of study.
 - (b) Supervised clinical practice.
 - (c) Demonstrated clinical competence.
 - (d) Annual evaluation of competence.