

MEDICATION EXERCISE: Filling Out the MAR

Using the MARs below, answer the following questions for Resident: Patient Sample

- Which of Patient's medications require precaution when handling? Warfarin Sodium/Coumadin
 - What is the precaution on the drug label? Handle with Gloves
 - What is on the Medication Administration Record (MAR) to let you know a precaution is required? There are two asterisks ** before and after the precaution**
- Patient has a dermatitis rash flare up. There is a triamcinolone 0.1% cream with directions to apply to affected area(s) twice daily as needed for rash. This is a "PRN" order on their active MAR. You have been using this order twice daily every day for more than two weeks. What should you do? (choose one answer)
 - Call/fax the prescriber and ask for advice and change to routine order twice daily until rash is cleared.
 - Keep using it as a routine order; regularly twice daily even though it is written as a "PRN" order.
 - Stop logging the "PRN" doses because it is too much work.
 - Try to talk the resident into using it once daily instead of twice a day.
- Patient has a 3-day supply of hydrocodone/acetaminophen "PRN" order left. Patient has an appointment in 3 days with their Prescriber. Prescriber has denied a request for a prescription refill before the appointment as Patient's pain control needs to be re-evaluated. You should do all the following **except**:
 - Keep all documents from the pharmacy regarding the denial with your communication log
 - Make sure Patient keeps their appointment in 3 days to re-evaluate pain medication.
 - Discontinue medication today and stop giving the remaining doses.
 - If prescriber authorizes another prescription after the appointment, follow up with the pharmacy to make sure the medication is delivered as soon as possible.
- Patient has had diarrhea for a couple of days. Which actions should you take? (check all that apply)
 - Check the MAR to see which medications could be causing diarrhea and call the pharmacy to confirm your finding.
 - Stop giving docusate routine order prescribed for constipation.
 - Call the prescriber's office to ask for "hold for loose stool" parameter to be added to docusate order.
- A Prescriber sends you a "May Crush Meds" order. Review the medications below. Which ones cannot be crushed, and why? Choose all that apply:
 - ____ Citalopram 10mg tablet _____
 - ____ Cal-Gest (Tums) 500mg chewable tablet _____
 - ___ X ___ Docusate 250mg soft gel _It is a soft gel and cannot be crushed, broken open, or chewed
 - d. ___ X ___ Metoprolol Succ. ER (extended release) 50mg tablet___ It is an extended release meant to provide medication over time

6. You receive a "May Crush Meds" order for Patient. What should you do? (select all that apply)
([WAC 388-76-10465](#))
- a. Review all Patient's medications to see which ones can be crushed, start crushing the meds, and give them to Patient.
 - b. Call/Fax the prescriber's "May Crush Meds" order to the pharmacy and ask the pharmacist to review resident's med list for crushable meds and fax back a signed and timed/dated consult.
 - c. Call the pharmacy and verbally consult with a pharmacist regarding all crushable medications, keep written records all your answers and pharmacist's name/time/date of call in your communication binder or resident's binder.
 - d. Each time you give a crushed medication to Patient, let them know that their medications were crushed and added to their food/drink.
7. Patient has a Blood Pressure of 120/80 and a Pulse of 59 this morning.
- a. Which medication should be held this morning? Metoprolol
 - b. Why? Pulse is below 60
 - c. How would this be noted on the MAR?
Circle MAR for Metoprolol, put your initials in circle. On back of MAR Note: Date: Metoprolol held due to Pulse 59. Signature
8. Lorazepam is a psychopharmacological medication prescribed for anxiety. A new "PRN" order for Lorazepam (1mg tablet) was added for Patient starting at the first of the month. Select all actions you should take:
([WAC 388-76-10463](#))
- a. Add lorazepam to list of psychopharmacologic medications in the Negotiated Care Plan.
 - b. Make sure Patient's assessment indicates that a psychopharmacological medication is necessary to treat their medical symptoms.
 - c. Make sure Patient's negotiated care plan includes strategies and modifications of the environment and staff behavior to address the symptoms of anxiety for which lorazepam was prescribed.
 - d. Make sure Patient or Patient's representative is aware they are taking the psychopharmacologic medication and what they are taking it for.
9. Patient received an order from their prescriber that they can independently self-administer all their prescriptions and to make allowances for them to keep their medications securely locked in their room. How would you respond? (select all that apply)
([WAC 388-76-10445](#))
- a. A new lock is placed on Patient's door. Patient can keep their medications in an unlocked closet drawer since their room will be locked.
 - b. You must update Patient's assessment and negotiated care plan regarding this new order.
 - c. You should still initial the MAR after each medication is taken after verifying with Patient by asking if they took their medication.
 - d. Purchase a securely locked cabinet for Patient's room and set up all the medications in that cabinet for them.

10. Patient is refusing all medication this morning and says they don't feel well. What should you do? (select all which apply) ([WAC 388-6-10435](#))
- a. Tell Patient they have no right to refuse medications
 - b. Approach Patient in about 15 minutes to see if they feel better and are alright with taking their medications.
 - c. Patient asks for their medications 1 hour later you tell them it is too late to take their medications and refuse to give them to Patient.
 - d. After you approach Patient a couple of times, log medication refusal on the MAR and start doing vitals if Patient not feeling well.
 - e. After you approach Patient a couple of times, log medication refusal on the MAR and contact their prescriber
11. Patient dies this week, and their family member is at your house trying to pick up all Patient's medications. What do you do? (select all which apply) ([WAC 388-76-10490](#))
- a. You let the family member know you are required to safely dispose of all medications for resident who dies. They cannot be given away or returned to the pharmacy.
 - b. You let the family member take the medication after they promise to dispose all the medications in a safe manner.
 - c. You let the family member take the medication, after all, they are Patient's personal representative.
12. Cal-gest (Tums) has been discontinued for over a week. Patient is asking for Tums again because of heartburn. What **shouldn't** you do? (select all the **wrong answers**)
- a. Give Patient another tablet and call the prescriber.
 - b. You let Patient know you need to get a new prescription before you can give them Tums again and contact the prescriber via phone/fax.
 - c. You write a note of to re-activation the order on your MAR and start giving Patient the Tums daily again.
13. It is the middle of the month and prescriber added a new order for a 10-day antibiotic treatment. Which items would need to be added to the MAR to add the new order? (select all that apply)
- a. Drug name
 - b. Drug strength
 - c. Drug frequency
 - d. Treatment duration
 - e. Prescriber's name
 - f. Start date of the order
 - g. Initials of caregiver adding the order to the MAR

14. Prescriber called you and asked to hold Warfarin for 5 days prior to orthopedic surgery. What important steps should you take? (select all which apply)
- a. Ask prescriber to fax you this “hold order” with a signature
 - b. Fax over warfarin hold order to Patient’s pharmacy
 - c. Mark clearly on the MAR that warfarin is to be held for 5 days
 - d. Let all your caregivers know about the hold warfarin order.
 - e. Put a visible note on the warfarin package to hold for 5 days (with dates included)
 - f. You continue the daily dose of warfarin after Patient’s guardian calls and tells you not to hold warfarin since Patient will be at high risk for a blood clot.
15. Patient’s prescriber faxes you a new order for Prednisone which tapers the dosage over 20 days with the following directions: Prednisone 10mg daily for 5 days, then 7.5mg daily for 5 days, then 5mg daily for 5 days, then 2.5 mg daily for 5 days, then stop. How would you enter this order on the MAR?
- 4 separate lines on the MAR
- 1. Prednisone 10 mg daily 5 days (start/end date)
 - 2. Prednisone 7.5 mg daily 5 days (start/end date)
 - 3. Prednisone 5 mg daily for 5 days (start/end date)
 - 4. Prednisone 2.5 mg daily for 5 days (start/end date)