Section 10

Appendix E

Testing MATERIALS

Initial Authorization Medication Test
Test Question Bank
Competency Based Training Assessment (CBTA) for Medication Administration

RN PRESENTER’S GUIDE
for
Training Program
for
Authorized Non-licensed Direct Care Staff
INITIAL AUTHORIZATION MEDICATION TEST

KEEP THIS COMPLETE TEST ON FILE

Staff: ____________________________ Test Date: ________ 20______ Score: ________/45

This staff member has successfully completed the didactic portion of Medication Administration in the Community training and has passed the written test by at least 80%. See the completed CBTA form for successful medication task proficiency, medication administration authorization and a list of individuals to whom s/he can administer medication according to Administrative Rule 116 and _____________________________________________ Policies and Procedures.

(Agency/Provider Name)

__________________________________ RN Nurse-Trainer Date: ___________ 20___

(Signature)

DIRECTIONS: Choose the BEST answer and circle its letter.

1. Authorized Direct Care Staff are responsible for _______________ when giving medications.
   A. initialing the box on the individual’s Medication Administration Record (MAR) indicating the individual has taken the medication
   B. notifying the doctor that the medication was given after administering medication to the individual
   C. instructing the individual to tell the RN Nurse-Trainer that the medication was given
   D. calling the RN Nurse-Trainer to complete the medical record

2. Authorized Direct Care Staff should only perform those medication administration tasks:
   E. that the RN Nurse-Trainer has trained them to do.
   F. that the doctor asked them to do.
   G. they feel is necessary.
   H. all the above

3. Forgetting to administer a medication on time is an example of:
   a. Malpractice    B. unethical behavior    C. slander    D. neglect

4. What is the FIRST thing you should do if you make a medication error?
   a. Isolate the individual.    C. Call 911.
   b. Page/call the RN Nurse-Trainer    D. Just watch the individual closely.
5. Medication errors must be documented in:
   a. a medication error report form.  
   b. the individual’s clinical record.  
   C. the Medication Administration Record.  
   D. All the above

6. **ALL** medication may be crushed.
   a. True  
   B. False

7. You should sign off the medication that you administer:
   a. whenever you have the time.  
   b. soon after successfully administering the medication.  
   c. at the end of the shift.  
   d. before giving them to the individual.

8. Your co-worker asks you to give the medications she has prepared.  You should:
   a. go ahead and administer the medications.  
   b. ask the RN Nurse-Trainee to give the medications.  
   c. Ask your co-worker what the medications are.  
   d. Refuse to give the medications.

9. You accidentally mark the **Medication Administration Record (MAR)** for a medication for the wrong time of the day.  You should:
   a. erase or “white out” the error.  
   b. leave it alone but chart it was done in the individual’s record.  
   c. throw out the MAR and make up a new one.  
   d. follow agency-specific procedures for error documentation.

10. While administering medications on the evening shift, you discover a medication error.  You did not make the error.  You report the error to the RN Nurse-Trainee.  What would be in the agency policy and procedure concerning completion of the error report form?
   a. You complete a medication error form before the end of the shift.  
   b. Determine who made the error and leave a note for her or him to complete the error form.  
   c. Leave a note for the RN Nurse-Trainee to complete the error form.  
   d. Complete a medication error report form if you have the time.  If not, leave a note for the Nurse-Trainee.

11. Topical medication should be stored:
   a. with the oral medications.  
   b. Separately from the oral medications.  
   C. in a warm place.  
   D. on the shelf in the closet.
The identity of an individual receiving medications must have a positive method for identification (such as a current picture) displayed:

a. with the Medication Administration Record.
b. on the door of the cabinet containing the medications.
c. on the refrigerator.
d. on a identification badge clipped to the individual’s clothing.

Which of the following is NOT one of the seven rights of medication administration?

a. Right physician  B. right medication  C. right route  D. right time

You discover that the 4:00 pm medications were not administered. You should:

a. Give two doses of each medication the next time the individual get medications.
b. Call the doctor.
c. Immediately give the missed doses.
d. Report the omission to the RN Nurse- Trainer and follow his/her instructions.

How often must controlled substance (narcotics, barbiturates, etc.) be counted:

a. every week.
b. only when they are administered.
c. by the end of every shift.
d. when the RN Nurse-Trainer assesses the individual.

An individual you are caring for complains of a headache. You should:

a. check the MAR to see if the individual has a PRN medication ordered for a headache.
b. page or call the house manager and follow his/her instructions.
c. give Motrin even if it is not ordered because you know it helps your headaches.
d. ignore the individual because s/he is always having headaches.

You notice that one of the PRN medications has EXPIRED. You should:

a. use it anyway. Medications are expensive.
b. follow agency policy and procedures for reorder.
c. ignore it. It’s the RN Nurse- Trainer’s job.
d. send it back to the pharmacy for relabeling.
18. You have been assigned to a new home but have not received medication training for the individuals in that home.
   a. You can administer medications under the supervision of another authorized person until the RN Nurse-Trainer can train you.
   b. You cannot administer any medications until the RN Nurse-Trainer trains and authorizes you to do so.
   c. The house manager must be notified and s/he will watch you pass the medications to assure accuracy and safety.
   d. You cannot be authorized to administer medications until you spend at least a month with the new individuals.

19. You notice that a medication in the individual’s medication container/lock box does not match any of the medications listed on the MAR. You should
   a. give the medication anyway.  
   b. call the case manager.  
   C. not give the medication.  
   D. get instructions from other authorized staff.

20. The initials PRN are part of the directions for a medication on the MAR. This means to give the medication:
   a. orally.  
   b. as needed.  
   C. immediately.  
   D. by injection.

21. One of the individuals started a new medication and you notice that he is sleeping more than he did before. You should
   a. page/call the RN Nurse-Trainer and tell him/her what you have observed.
   b. stop giving the medication.
   c. do nothing, it should get better in a few days.
   d. call the case manager.

22. You notice that an individual no longer has a rash for which s/he has a medicated ointment prescribed to be applied every evening. You should
   a. stop applying the ointment.
   b. apply the ointment until you run out of it and then stop.
   c. continue to apply the ointment.
   d. tell the RN Nurse-Trainer so that s/he may assess the individual.

23. HS means you should administer the medication at:
   a. 8:00 am.  
   b. the individual’s request.  
   C. 4:00 pm.  
   D. bedtime.
24. What type of medication action affects the entire body?
   a. local       B. primary       C. systemic       D. cumulative

25. A tablespoon of liquid equals approximately ________ ml.
   a. 5           B. 10           C. 15           D. 25

26. An 8 fluid ounce water glass equals approximately ________ cc.
   a. 100         B. 240         C. 350         D. 1000

27. The abbreviation for before meals is:
   a. AC          B. OS          C. OD          D. QID

28. A medication placed under the tongue to remain there until it dissolves is delivered by what route?
   a. Oral        B. topical      C. salivary     D. sublingual

29. The physician prescribes a topical medication.
   a. The RN Nurse-Trainer administers all topical medications.
   b. The medication is administered orally.
   c. The medication is applied to the individual’s skin.
   d. A and C.

30. Bulk-producing laxatives must be given with sufficient:

31. When administering a medication for which you must first take the pulse, you know you are checking for a side effect to what body organ?

32. All blood passes through the ___________ several times each day to remove waste.
   a. kidneys     B. liver       C. pancreas     D. heart
33. The respiratory system functions to provide ________________ to the body.
   a. Nitrogen   b. oxygen   c. carbon dioxide   d. energy

34. ________________ is a serious adverse/side effect of some psychotropic medications.
   a. Fast heart rate.   b. Fast breathing rate   c. Tardive dyskinesia   d. Skin rashes or eruptions

35. ________________ are medications used to treat bacterial infections
   A. Antacids   B. Antibiotics   C. Anti-inflammatory steroids   D. Anabolic steroids

36. All medications given by mouth, regardless of drug category, have the very common side-adverse effect of:

37. Two tablets of acetaminophen (Tylenol) by mouth has been prescribed for an individual when she complains of a headache. You notice that this individual is sweating and warm to touch. You find that her body temperature is 101.5°F. What should you do?
   a. Give two Tylenol since it treats fever as well as headaches.
   b. Follow your policy and procedures for an individual that has an elevated temperature.
   c. Do not give the Tylenol, put her to bed and cover her with several blankets.
   d. Only give one Tylenol, see if the fever breaks. If not, give another one 4 hours later.

38. Medications, when not being administered, must be stored in a locked cabinet/container. The best location conditions for the cabinet/container is:
   a. cool, moist and well lighted.   b. warm, dry and well lighted.   c. cool, dry and dark.   d. warm, moist and dark.

39. The mother of an individual asks you to start giving an herbal medicine, garlic, to her son to decrease his cholesterol blood level. What should you do?
   a. Do not give the garlic. The Nurse-Trainer will give any unprescribed medications.
   b. Go ahead and give the garlic. It’s in lots of foods anyway.
   c. Do not give the garlic. All medications must be prescribed.
   d. Write the garlic order on the MAR and start it if the son agrees to take it.
40. The accepted method of administering eye drops, after retracting the eye lids is:
   a. put the eye drop solution on a Q-tip and gently swab it onto the eye.
   b. gently position the eye dropper directly over the eye ball and squeeze the dropper.
   c. Gently place the eye dropper on the inside corner of the eye and squeeze the dropper.
   d. Gently draw the lower lid down and place the drops on the inside of the lower lid.

41. The accepted method of administering eye ointment, after retracting the eye lid is:
   a. put the eye ointment on a Q-tip and gently swab it onto the eye.
   b. gently position the eye ointment container directly over the eye ball and squeeze the container.
   c. gently place the eye ointment container on the inside corner of the eye and squeeze the container.
   d. Gently draw the lower lid down and place the ointment on the inside of the lower lid.

42. To help individuals served learn how to self-administer their medications, an authorized staff member should:
   a. develop a self-medication program alone and then teach the individual.
   b. do nothing. Teaching individuals how to take their own medications is the Nurse-Trainer’s job.
   c. use the self-medication program that is written by the state.
   d. be authorized to administer medications and use the program developed by the Nurse-Trainer and provider.

43. Authorized Direct Care Staff can take a verbal or telephone order from the doctor if:
   a. she or he are provided with a verbal or telephone order from by the provider.
   b. she or he have received special training from the Nurse-Trainer.
   c. she or he have two or more years experience caring for the Developmentally Disabled.
   d. You can’t take verbal or telephone orders from the doctor unless your are licensed.

44. The individual’s clinical record is:
   a. confidential and can only be looked at by staff caring for the individual or State regulatory agencies.
   b. restricted and can only be looked at or written in by licensed personnel and the house manager.
   c. owned by the individual who must give permission for staff to use. (Permission can be given by the guardian.)
   d. only used by authorized staff. Licensed personnel keep their own progress notes.
45. The drug name that does not change regardless of the drug's maker is the ______ name.

a. generic        B. trade        C. common        D. federal
DO NOT PASS OUT THIS ANSWER SHEET WITH THE TEST WHEN ADMINISTERING THE TEST!

READ THIS BEFORE USING THIS TEST BANK

Administrative Rule 116.40 e) states: “Authorized direct care staff shall be re-evaluated by the Nurse-Trainer at least annually or more frequently at the discretion of the registered professional nurse. Any retraining shall be to the extent that is necessary to ensure competency of the authorized direct care staff to administer medication, [20 ILCS 1705/15.4 (c)] as judged by the nurse-trainer.”

This test question bank is available to you to author a written examination for annual re-evaluation or any other evaluation of authorized staff EXCEPT for the initial authorization testing. The use of this test question bank is VOLUNTARY for the nurse-trainer. Any re-evaluation method is acceptable that follows Administrative Rule 116’s direction to ensure competency.

It is recommended that for any test that the questions be appropriately divided among the four Skill Standards. For example, 65% related to Skill Standard A, 10% to Skill Standard B, 15% to Skill Standard C, and 10% to Skill Standard D. Syntax changes may be made in the questions to prevention confusion in testing or if different terms for an item are used at your facility. You are encouraged to write your own test questions using these questions as “templates”.

For specific medication questions, an “open book test” with your agency’s drug information resource should be considered.

Questions – Skill Standard A

1. Staff authorized to administer (give) medications should only perform which of these medication administration duties.
   A. Any medication related activity requested by the physician.
   B. Any medication related activity requested by the individual served.
   C. Medication tasks she or he has been trained to do by the Nurse-Trainer.
   D. Medication tasks she or he has been trained to do by another unlicensed staff person.

2. You may have to monitor an individual’s _________________ before administering some medications.
   A. pulse       B. blood pressure       C. respiratory rate       D. any of the above

3. What must be monitored when an individual is a diabetic?
   A. blood sugar levels       C. circulation in the feet.
   B. food intake (amount and kind)       D. all the above.
4. Another authorized direct care staff member asks you to administer a medication they have prepared. You should:

A. give the medication.  
B. ask the nurse to given the medication.  
C. ask what the medication is.  
D. not give the medication.

5. When sending individuals home for a home visit, you must:

A. review with the individual how to take his medication correctly before she or he leaves.  
B. punch out the medications into timed envelopes and send them home with him/her.  
C. send home all the required medications as packaged from the pharmacy and the MAR.  
D. notify the family what medications the individuals must have so they can go to the pharmacy.

6. If an individual is going on an outing or activity that would make him/her miss a medication, you, as the authorized direct care staff person assigned to administer the medications to this individual will:

A. take the individual’s Medication Administration Record (MAR) and labeled medication vial/bubble pack with you to give the medication as scheduled.  
B. make a note on the MAR that the person is on an outing/activity and skip the dose.  
C. change the schedule on the MAR so the person can take it when he/she returns from the outing/activity.  
D. give the medication just before you leave on the outing and watch the individual closely.

7. If the PRN you administered does not seem to be working, you should:

A. notify your nurse about it before the next dose is due.  
B. discuss it with other authorized direct care staff and decide whether to give another dose.  
C. given the next dose of the PRN earlier than scheduled.  
D. double the next dose.

8. If you find that you are giving a PRN medication regularly (at least every day), you should:

A. ask the nurse to ask the physician to increase the medication dose.  
B. continue to administer the medication as ordered.  
C. stop the medication because it is isn’t working anyway.  
D. inform the nurse so the medication effectiveness can be evaluated.
9. Systemic medications:
   A. effect a single organ or tissue.  
   B. effect the whole body.  
   C. are only found in ointment form.  
   D. are only found in oral medications.

10. It is important to know any dietary restrictions so you can monitor the individual’s food intake.
   A. True  
   B. False

11. Your individual (person served) complains of a headache. You should:
   A. give the aspirin he/she has order even though it is only ordered for fever.  
   B. ask the individual to describe the headache and then page the nurse and see what she/he says to do.  
   C. give Motrin (form another individual’s supply if necessary) even if it is not ordered because you know it helps your headaches.  
   D. ignore the individual because he/she is always having headaches and is just looking for attention.

12. You have been assigned to a new house but you have not received medication training for the individuals in that home. However, since most of the medications are the same you have administered before, it is okay to administer the medications.
   A. True  
   B. False

13. You notice that an individual no longer has a rash on his abdomen but still has a topical ointment prescribed for the rash every HS. You should:
   A. stop the treatment.  
   B. have the nurse assess the individual.  
   C. continue to apply the ointment.  
   D. change the medication to a cream.

14. You receive a phone call from your home manager telling you not to give a prescribed medication to an individual. You should:
   A. do what he/she says.  
   B. give the medication anyway.  
   C. page the RN trainer for clarification.  
   D. give the medication but mark D/C on the MAR.
15. Thiazide and Thiazide-like diuretics are often used to treat hypertension (high blood pressure) and are used with other antihypertensives. Thiazide and Thiazide-like diuretics should be taken:

A. on a full stomach.  
B. in the morning.  
C. with fruit juice but not milk.  
D. 30 minutes before breakfast.

16. Which of the following is typically done when a person is taking insulin for diabetes?

A. upper arm circumference.  
B. arterial blood pressure.  
C. blood sure levels.  
D. rectal body temperature.

17. When a woman is taking birth control pills, it is best to:

A. check the pulse rate weekly.  
B. quit smoking.  
C. take estrogen blood levels weekly.  
D. exercise regularly.

18. Medication that is placed under the tongue to dissolve is delivered by what route?

A. buccal  
B. injection  
C. subcutaneous  
D. sublingual

19. Medication placed in the cheek to be absorbed is delivered by what route?

A. buccal  
B. injection  
C. subcutaneous  
D. sublingual

20. When nitroglycerin has to be taken for chest pain, the route is:

A. oral  
B. buccal  
C. sublingual  
D. rectally

21. Many medication trade names have extra initials at the end of the name such as SR, SA, CR, or EC. Why are they important?

A. The initials indicate the appropriate medication route.  
B. They stand for Greek or Latin words that indicate their strength.  
C. These initials show a special form of the medication that can’t be crushed.  
D. They aren’t important; they are just there to help sell the medication.
22. You notice the medication(s) you are administering to one of the individuals you are authorized to medicate are different in size, shape or color from what you are familiar with for this individual. What should you do?

A. Match the required information on the medication container against the MAR and then call the nurse for direction before administering the medication.
B. Look up the medication on the provided medication information sheets or book to make sure you have the right medication and then administer it.
C. Give the medication and make a note of the difference in size, shape, or color for the nurse to review when she or he next visits.
D. Talk to one of the other authorized direct care staff to see if the medication is the right one.

23. What type of medication action affect the entire body?

A. local  B. primary  C. systemic  D. cumulative

24. Hypertension means.

A. extreme hunger.  C. high blood pressure.
B. high body temperature.  D. slow breathing.

25. Which of the following is a medication that “fights” bacterial infection?

A. Erythromycin  B. Phenytoin  C. Ramipril  D. Atropine

26. Which of the following is given for mental depression?

A. Levodopa  B. Hydrochlorothiazide  C. Niacin  D. Amitriptyline

27. Carbamazepine, Gabapentin, and Phenytoin can all be used to treat:


28. Many medications can be used for more than one problem. For instance, aspirin can be used for headaches, high body temperature and:

29. A psychotropic medication such as Clozapine (Clozaril) and Risperidone (Risperdal) are used to treat:

30. Antiacids (Amphogel, Tums, Maalox) are used to treat:
   A. diarrhea.  B. gas.  C. stomach infection.  D. stomach inflammation/ulcers

31. Oral hypoglycemics (medications to treat diabetes mellitus) include:

32. Medications used for hypertension include:
   A. Aminophylline.  C. Ibuprofen (Tylenol)
   B. Ziprasidone (Geodon).  D. Quinapril (Accupril)

33. Which of the following is a antilepemic (lowers blood cholesterol levels) medication?
   A. Aspirin  B. Phenytoin (Dialntin)  C. Baclofen (Lioresal)  D. Gemifibrozil (Lopid)

34. An adverse drug reaction is different from a medication side effect in that:
   A. An adverse effect has a greater possibility of causing harm.
   B. An adverse effect always happens, a side effect only happens every once in awhile.
   C. Adverse effects only occur with injections, not with oral medications.
   D. There is no difference between an adverse effect and a side effect.

35. A serious adverse effect of many “typical” psychotropic medications is:

36. Medications that are used to treat infection are:
37. The symptoms of heat, swelling, redness and pain indicate:

A. inflammation.   C. slowed metabolism.
B. indigestion.    D. subcutaneous bleeding.

38. One of your individuals has started a new medication and you notice that he is sleeping more than he did before. You should:

A. page the nurse and let him/her know what you observed.
B. do nothing, it should stop in a few days.
C. only give half the medication and see if he sleeps less.
D. tell the case manager the individual is sleeping more.

39. If an individual is taking an antihypertensive (medication to lower blood pressure), advise them to:

A. only use a salt substitute to “salt” their food.
B. get up a laying or sitting position slowly.
C. have their respiratory rate check before administering the medication.
D. rest every afternoon for a couple of hours.

40. When a medication upsets an individual’s stomach you:

A. can, on your own, start giving the medication with food.
B. need to check with the house manager to see if the medication needs to be stopped.
C. should check with the Nurse-Trainer for guidance before you give the next dose.
D. should give Milk of Magnesia (MOM) or other designated medication to calm the stomach.

41. Sedatives may be given for:


42. Medications such as Chlorpromazine (Thorazine) and Haloperidol (Haldol) often cause what is called **ExtraPyramidal Symptoms (EPS)**. This group of symptoms includes:

43. Bulk-Forming Laxatives such as Psyllium (Metamucil) and Methylcellulose (Citruce1) have side effects such as:


44. Insulin is used to treat diabetes mellitus. A major side effect to watch for is low blood sugar. Symptoms of low blood sugar *hypoglycemia* include:

   A. very slow heart rate and leg pain.  C. headache and confusion.
   B. insomnia and anorexia.  D. dry, pale skin and slow respiratory rate.

45. Lithium (Eskalith, Lithobid) is used for mental depression. It is important to:

   A. avoid sweets for a couple of hours after taking the medication.
   B. NOT restrict dietary salt intake.
   C. avoid excessive sun exposure.
   D. administer the lithium an hour before or two hours after a meal.

46. A harmless side effect of iron preparations for anemia (low red blood cell count) is:

   A. dark stool color  B. diarrhea  C. drowsiness  D. temporary blurred vision

47. Side effects of medications used for hypertension include:

   A. orthostatic hypotension  B. photophobia  C. fever  D. psychosis

48. Anticonvulsants are used to decrease the incidence of seizures. All of them have negative side effects in which of the following body systems?

   A. Digestive  B. Nervous  C. Cardiovascular  D. Pulmonary

49. **Common** side/adverse effects of the anticonvulsants include:

   A. diarrhea, change in taste, tooth infection.
   B. ataxia, dizziness, drowsiness.
   C. increased potassium, chloride and carbon dioxide blood levels.
   D. excessive saliva production, urinary retention and lack of taste.
50. **Common** side/adverse effects of Baclofen (Lioresal), Benztropin (Congentin) and Carisoprodol (Soma) include:

A. nervousness and intestinal bleeding.  
B. skin rash and hair loss.  
C. dizziness and constipation.  
D. dry mouth and visual disturbances.

51. Some PRN cough syrups may increase cough frequency, especially if they are:

A. congestants.  
B. antihistamines.  
C. expectorants.  
D. suppressants.

52. When a asthma “attack” occurs, the tubes leading to the lungs narrow. The medications used to treat this are called “Bronchodilators”. A commonly used medication of this type is:

A. Aminophyllin  
B. Hydromorphone (Dilaudid)  
C. Dextroamphetamine (Dexedrine)  
D. Nafcillin

53. Often an asthma “attack” occurs because of something a person inhales (pollen, smoke) that inflames the tubes leading to the lungs. A medication that treats this inflammation is:

A. Cyclobenzaprine (Flexeril)  
B. Fluphenazine (Prolixin)  
C. Beclomethasone (Vanceril)  
D. Losartan (Cozaar)

54. What kind of medication is an “Antitussive”?

A. Antibiotic  
B. Cough suppressant  
C. Birth Control  
D. Diuretic

55. Which of the following is commonly used to treat a cough?

A. Dextromethorphan (Benylin DM)  
B. Foxphenytoin (Cerebyx)  
C. Entacopone (Comtan)  
D. Thiamine

56. Aluminum carbonate, calcium carbonate and magnesium hydroxide are all used to treat:

A. upset stomach  
B. skin rash  
C. heart disease  
D. sleeplessness

57. Which of the following is an “Over-the-Counter” (OTC) medication used to prevent or treat “upset stomach” or “heartburn”?

A. Chlorpromazine (Thorazine)  
B. Donepezil (Aricept)  
C. Lamotrigine (Lamictal)  
D. Omeprazole (Prilosec)
58. "Bulk-forming" laxatives are used to prevent or treat constipation. Which of the following special instructions are necessary to increase the effectiveness of “Bulk-forming” laxatives?

A. Take with meals.  
B. Take at least two hours after meals.  
C. Take with plenty of fluid (water).  
D. Take at bedtime.

59. Bismuth subsalicylate (Pepto-Bismol), Calcium polycarbophil (Fibercon) and the combination of Diphenoxylate and Atropine (Lomotil) are all used to treat:

A. heart disease.  
B. bacterial infection.  
C. insomnia.  
D. diarrhea.

60. Insulin is used to treat:

A. diabetes mellitus.  
B. mental illness.  
C. overactive thyroid glands.  
D. emphysema.

61. Which of the following is an oral hypoglycemic used to treat diabetes mellitus?

A. Glipizide (Glucotrol)  
B. Nicardipine (Cardene)  
C. Levothyroxine (Synthroid)  
D. Potassium Chloride (K-Dur)

62. “NSAID” stands for “NonSteroidal Anti-Inflammatory Drugs. These are used to:

A. treat mild pain.  
B. build muscle.  
C. treat tuberculosis.  
D. increase appetite.

63. Opioids such as condeine, morphine and oxycodone are used to treat:

A. pain.  
B. muscle spasms  
C. infection.  
D. diarrhea.

64. Baclofen (Lioresal), Benztropin (Cogentin), and Carisoprodol (Soma) are used to treat:

A. muscle spasms.  
B. mental illness.  
C. constipation  
D. heart disease

65. What is a “controlled substance”? A medication that:

A. doesn’t have to be locked in the medication cabinet/room.  
B. must be counted at the end of each shift.  
C. has no side or adverse effects.  
D. is given with another medication to “control” the side effects.
66. Medications such as codeine, morphine and oxycodone (all are considered opioids) are controlled (counted every shift to assure that the medications are not “diverted” [stolen and used illegally]) because they:

A. always cause nausea and vomiting.  C. are physically and emotionally addictive.
B. can permanently destroy muscles.  D. depress the body’s resistance to infection.

67. PRN cough syrups are usually ordered:

A. every day as needed.  C. every other day at bedtime.
B. every 4 hours as needed for cough.  D. whenever the individual asks.

68. One ounce equals approximately ___________ cc’s.:

A. 15  B. 30  C. 50  D. 100

69. The measure of 2 teaspoons is often not printed on the medication cups. An equivalent volume is:

A. 15 cc’s.  B. 10 ml.  C. ½ Tablespoon.  D. ½ capful

70. One-half ounce equals:

A. 16 cc’s.  B. 7 ml.  C. 3 teaspoons.  D. ¾ Tablespoon.

71. Topical medications are stored:

A. with the oral medications.  C. in a refrigerator.
B. separately from oral medications.  D. in a double locked cabinet.

72. The ______________ is responsible for correctly “filling” a prescription ordered by a licensed medical professional.

A. physician’s assistant  B. pharmacist  C. Registered Nurse  D. authorized staff

73. The physician may order a drug by its ________________ name.

A. trade  B. brand  C. generic  D. any of the above
74. Who of the following may NOT take a verbal or telephone order from a physician?

   A. the LPN    B. the Nurse-Trainer    C. an RN    D. authorized direct care staff

75. A physician has order Tylenol, 1 or 2 tablets PRN for headache pain for Sam. Sam is complaining of a severe headache. You should:

   A. give 2 Tylenol because the pain is severe.
   B. check with the nurse to see how many tablets to administer.
   C. have Sam lie down for awhile and check later to see if he still needs the Tylenol.
   D. only give Sam one Tylenol and give the second one an hour later if the first one doesn't help.

76. You had to take an individual to the Emergency Room and you have just returned to the home. The individual was prescribed a new medication by the nursing office is closed. You should:

   A. bring the new prescription to the nursing office the next day.
   B. call the family to get the prescription filled.
   C. page or call the nurse for instructions.
   D. call the physician for instructions.

77. The “trade” name of a medication is one that:

   A. can be used by anyone to name the medication.
   B. is the name the manufacturer of the medication gave the drug.
   C. chemically defines the structure of the medication.
   D. is determined by the federal government.

78. A PRN medication is ordered for constipation. PRN means the medication is given:

   A. every night before bed.
   B. as needed and can be repeated.
   C. without needing to notify the nurse.
   D. anytime the individual desires.

79. PRN medications require:

   A. a physician's order stating the drug, dose amount, drug schedule and reason for use.
   B. documentation by staff on/in the appropriate document why the medication was given.
   C. documentation of the effectiveness of the drug a few hours after its administration.
   D. clarification of the order, if there is a choice in dosage, by the nurse.
   E. All of the above.
80. The abbreviation for kilograms is
   A. Ks.     B. Kg.     C. NKA.     D. D/C.

81. The abbreviation for milligrams is

82. The abbreviation for as needed or as necessary is
   A. PRN or prn.     B. ac.     C. tsp.     D. ml.

83. The abbreviation for three times daily is
   A. AID.     B. BID.     C. TID.     D. QID.

84. The abbreviation for every hour is
   A. qd or QD.     B. qh or QH.     C. ehr or EHR.     D. qod or QOD.

85. The abbreviation for every other day is
   A. qod or QOD.     B. eod or EOD.     C. NKA.     D. D/C.

86. The abbreviation for milliliters is
   A. gtt.     B. ml or ml.     C. oz.     D. none of these choices.

87. The abbreviation for teaspoon is
   A. tas.     B. gtt.     C. tsp.     D. tbsp or TBSP.

88. The abbreviation for left eye is
   A. LE.     B. OU.     C. OS.     D. OD.

89. The abbreviation for right eye is
   A. LE.     B. OU.     C. OS.     D. OD.
90. The abbreviation for cubic centimeters is
   A. cc.   B. kc.   C. kg.   D. OD.

91. The abbreviation for G. or gm. is

92. The abbreviation for p.o. or po is
   A. by mouth.   B. peri-operative.   C. every day.   D. suppository.

93. The abbreviation for STAT is
   A. as needed.   B. every other day.   C. stable.   D. immediately or at once.

94. The abbreviation for ac is
   A. active.   B. before meals.   C. as needed.   D. immediate or at once.

95. The abbreviation for D/C is
   A. discontinued.   B. right eye.   C. don’t complete.   D. twice a day.

96. The abbreviation for QID is
   A. as needed.   B. 4 times a day.   C. all extremities.   D. quickly.

97. The abbreviation for tab is

98. The abbreviation for tbsp or TBSP is
   A. 3 times per day.   B. every other day.   C. tablespoon.   D. take by suppository.
99. The abbreviation for pc is
   A. as desired.  B. after meals.  C. morning.  D. immediately or at once.

100. The abbreviation for qd or QD is
   A. every day.  B. after meals.  C. left eye.  D. four times a day.

101. PRN means “whenever you feel like it.
   A. True  B. False

102. You see on the MAR for time of medication administration HS (or h.s. or hs). This means you should administer the medication:
   A. in the morning.  B. when the individual asks.  C. at supper.  D. at bedtime.

103. Authorized direct care staff are responsible for which of the following when administering medications?
   A. Initialing the medication administration record immediately after administering the drug.
   B. Notifying the physician that the medication was administered.
   C. Instructing the individual to tell the nurse that the medication was taken.
   D. Calling the Nurse-Trainer to sign the medication administration record (MAR).

104. The generic name of a medication is one that:
   A. is the same drug name regardless of the drug manufacturer.
   B. is the commercial name the drug.
   C. is the easiest to pronounce of the drug names.
   D. is the drug name that chemically.

105. You should document each individual’s medications that you administer:
   A. before administering them to the individual.  C. at the end of the shift.
   B. immediately after giving them to the individual.  D. as soon as you have a chance.
106. To make sure you have the right medication, you must:

A. check the color and size against the medication information sheets or drug book.
B. check the vial/bubble pack information against the Medication Administration Record (MAR).
C. ask the individual if she or he recognizes the medication for shape and size.
D. have the individual tell you what the side/adverse effect are for the medication.

107. You should place your initials in the appropriate “box” of the Medication Administration Record (MAR) when charting _________ medications.

A. stat       B. prn; PRN   C. routine   D. all

108. The nurse has changed the medication dosage on the MAR, per physician’s direction, from 500 mg. to 1000 mg. at 9:00 am. There are two 500 mg. tablets of the medication in the individual’s medication drawer in the “bubble” of the bubble pack. What should you do?

A. Administer the two tablets.
B. Call the pharmacy to get a 1000 mg tablet.
C. Call the physician to clarify the changed order.
D. Administer one tablet now and the other at 10:00 am

109. The Nurse-Trainer has crossed out a medication on the MAR and written D/C over the top of the medication information “box” on the MAR. When you are administering medications that evening, you find that the medication that has been crossed out is still in the drawer. You should.

A. administer the medication as it was left in the drawer to be given.
B. follow agency policies/procedures that determine what to do with discontinued medications.
C. rewrite the medication information in the first blank box on the MAR and administer the medication.
D. leave a note for the morning shift to give the medication in the morning since the medication was discontinued.

110. Surfak (Docusate calcium), is a laxative that softens the stool. To help the medication work, you should encourage the individual to

A. drink plenty of fluids.       C. eat 6 small meals instead of 3 regular meals.
B. not eat for at least 6 hours  D. all the above.
111. If an individual does not like or will not drink water with medications, you can:

A. insert a tube into his/her nose and administer the medication through it.
B. use their beverage of choice as long as it doesn’t interfere with medication’s action.
C. state that they cannot go on the next outing unless they drink the water with the medication.
D. withhold all fluid until they are thirsty enough to drink.

112. Any medication being administered must be checked to make sure the:

A. tablets are the right size, shape, and color.
B. “7 rights” of medication administration are followed.
C. medication’s expiration date is no more than 30 past.
D. individual’s have at least a 30 day supply available.

113. The “7 Rights of medication administration are the right individual, medication, dose:

A. time, color, place, size. 
B. size, time, color, hand.
C. time, route, consistency, MAR.
D. time, size, color, MAR.

114. To make sure you have the “right individual”, you it is best to have the individual:

A. have them wear a name tag. 
B. have their picture with the MAR. 
C. tell you what medications he or she takes. 
D. tell you their name.

115. To check the “right dose” you must make sure:

A. the medications are taken out of the right section of the bubble pack.
B. the medication is measured in milligrams instead of grains.
C. the amount printed on the medication package matches the amount on the MAR.
D. the amount of medication is not more than the drug’s therapeutic range.

116. If any of the “7 rights of Medication Administration” don’t match, you will:

A. administer the medication if 6 out of 7 “rights” are match.
B. immediately notify the nurse and follow his/her direction.
C. discuss the problem with an experienced authorized direct care staff person. 
D. not give the medication and leave a message for the Nurse-Trainer.
117. The individual tells you that what you are administering to him is not right. You should:

A. give it to him anyway.
B. tell him that it is new medication.
C. recheck the “7 rights” to make sure it is the right medication and then administer if it is right
D. put the medication aside until you get a chance to check with the nurse.

The following questions deal with Skill Standard B

118. Heat, swelling, redness, and pain indicate ______________ and should be reported to the nurse right away.

A. immunity  B. inflammation  C. metabolism  D. digestion

MATCHING: Match the component/organ name with the letter indicating the system listed.

119. Kidney  A. Skeletal  F. Reproductive
120. Vagina  B. Muscular  G. Urinary (Excretory)
121. Cartilage  C. Nervous  H. Gastrointestinal (Alimentary)
122. Skin and Hair  D. Circulatory (Cardiovascular)  I. Endocrine
123. Trachea  E. Respiratory  J. Integumentary

MATCHING: Match the function with the letter indicating the system listed.

124. Coordinates bodily activities  A. Skeletal  F. Reproductive
125. Urine production & excretion  B. Muscular  G. Urinary (Excretory)
126. Digests food  C. Nervous  H. Gastrointestinal
127. Makes hormones to regulate the body  D. Circulatory  I. Endocrine
128. Protects against infection  E. Respiratory  J. Integumentary

129. The cerebellum is part of the:

130. The pituitary gland is found:
   A. on top of the kidney.  
   B. just to the left of the stomach.  
   C. in the skull under the brain.  
   D. everywhere on the skin.

131. The stomach is located:
   A. just below the sternum in the abdomen. 
   B. directly under the umbilicus ("belly button") abdomen.  
   C. on the far left of the abdomen.  
   D. lower right quadrant of the abdomen.

132. Which order (from where the food is taken in to where wastes are eliminated) of the organs of the digestive system is correct?
   A. mouth-stomach-esophagus-large intestine-small intestine  
   B. mouth-esophagus-stomach-small intestine-large intestine  
   C. mouth-small intestine-stomach-esophagus-large intestine  
   D. mouth-large intestine-esophagus-stomach-small intestine

133. The spinal cord is protected by the:
   A. spinal nerves.  
   B. spinal column.  
   C. spinal muscles.  
   D. brain.

134. Veins carry blood TO:
   A. the arms and legs.  
   B. the heart.  
   C. the lungs.  
   D. all body organs.

135. The function of the heart is to:
   A. pump blood to all the body.  
   B. make red and white blood cells.  
   C. prevent infections from spreading.  
   D. act as a blood reservoir.

136. The femoral, popliteal and iliac arteries all direct blood to the:
   A. head.  
   B. arms.  
   C. digestive system.  
   D. legs.

137. The hepatic artery and vein, direct blood to and drain blood from the:
   A. small intestine.  
   B. liver.  
   C. kidney.  
   D. lungs.
138. The coronary arteries direct blood to the:
   A. arms and legs   B. heart.   C. lungs.   D. stomach

139. Which order (from where air is inhaled) of the parts of the pulmonary system is correct?
   A. larynx-esophagus-bronchi-trachea-lungs   C. pharynx-larynx-trachea-bronchi-lungs
   B. bronchi-lungs-trachea-larynx-lungs   D. esophagus-pharynx-bronchi-trachea

140. The function of the pulmonary system is to:
   A. provide oxygen to the body.   C. produce energy for body functions.
   B. provide carbon dioxide to the body.   D. produce enzymes for nervous impulses.

141. The function of the ovaries is to:
   A. produce female hormones and eggs.   C. absorb salt and water for pregnancy.
   B. decrease the amount of uterine muscle.   D. block excess blood flow to the uterus.

142. The function of the testes is to:
   A. produce very concentrated urine.   C. send nerve impulses to the penis.
   B. produce sperm.   D. prevent urinary retention.

143. The vas deferens is part of the ________________ system.
   A. female reproductive   B. male reproductive   C. digestive   D. urinary

144. The ureter leads from the ________________ to the ________________.
   A. ovary; bladder.   C. kidney; bladder
   B. adrenal gland; kidney.   D. abdominal aorta; kidney.

145. The function of the kidney is to:
   A. produce white blood cells.   C. store protein metabolism waste.
   B. store fat metabolism waste.   D. produce urine.
146. The endocrine gland found on top of the kidney is the:

147. The bladder is located:
   A. just under the pubic bone.  B. directly under the umbilicus (“belly button”).
   C. lower left quadrant of the abdomen.  D. lower right quadrant of the abdomen.

148. Which of the following organs produces bile to help the digestive system to break up fats?
   A. stomach  B. pancreas.  C. large intestine  D. liver

149. The pancreas is located on the _________________ side of the abdomen.
   A. upper right  B. lower right  C. upper left  D. upper middle and left

150. Where are the semicircular canals (for balance) located?
   A. in the brain’s cerebrum.  B. in the middle ear.  C. just behind the eyes.
   D. in the bone joints.

151. The “sense” of taste is located:
   A. on the inner cheeks of the mouth.  B. on the tongue.
   C. on the roof of the mouth.  D. in the pharynx.

152. The function of the eye’s lacrimal gland is to:
   A. produce vitreous humor fluid.  B. destroy bacteria in the vitreous humor.
   C. stimulate the cones to improve night vision.  D. keep the surface of the eye moist.

153. Which of the following give a person color vision?
The function of saliva is to:

A. help food move through the esophagus.  
B. start the digestion of fats.  
C. prevent tooth decay.  
D. prevent digestive track infection.

Which of the following digestive system organs produces hydrochloric acid?

A. liver  
B. stomach  
C. pancreas  
D. large intestine

Which of the following organs contains the Islets of Langerhans that produce insulin?

A. pancreas  
B. spleen  
C. small intestine  
D. adrenal gland

The rectum is:

A. at the beginning of the small intestine.  
B. part of the renal system.  
C. attached to the appendix.  
D. at the very end of the large intestine.

The function of the Renal System includes:

A. sex hormone production.  
B. stimulation of the heart beat.  
C. maintaining body water balance.  
D. reservoir for adrenaline.

The function of the prostate gland of the male reproductive system is to:

A. produce male sex hormones.  
B. add fluid to the sperm to produce semen.  
C. control the emptying of the bladder.  
D. pull water out of the urine.

The following questions deal with Skill Standard C

A topical medication is ordered. How is it administered?

A. It is applied with a dropper under the lower eyelid.  
B. The individual places in his/her cheek to dissolve.  
C. The individual places it under his/her tongue to dissolve.  
D. The individual applies it to his/her skin.
161. If necessary, ANY medication can be crushed before administration.

A. True  B. False

162. When administering a powdered medication with a measuring scoop in the canister container, you must:

A. use a level scoop of medication to mix into the correct amount of water.
B. wash your hands before using the scoop and returning it to the canister.
C. wear a clean glove to obtain the scoop from the medication canister.
D. throw the scoop away and use a clean spoon to measure the medication.

163. When mixing powdered medications into water for administration, you must:

A. use a new separate spoon for each individual’s medications.
B. use the same spoon to mix any individual’s medications.
C. mix all individuals’ powdered medications at once using the same spoon.
D. rinse the spoon off between uses.

164. When crushing medications in a pill crusher you must:

A. wash the pill crusher between medication passes.
B. wash the pill crusher between each medication.
C. wash the pill crusher after each individual’s medication use.
D. provide a separate pill crusher for each medication.

165. When applying a topical medication to the skin you must apply the medication:

A. on top of the last medication application.
B. just before the shower or bath has occurred
C. after washing the area with soap and water, rinsing well and drying.
D. after pre-moistening the effected area with Vaseline.

166. After administering inhalers of any type, you must:

A. recap the inhaler immediately after use and store it properly.
B. wipe the mouth or nose piece with alcohol before recapping.
C. leave the cap off to allow drying and store it in a plastic bag
D. wipe the mouth or nose piece with soap solution before recapping.
167. Nebulizer kits for medication administration must be changed:

A. after each medication administration.  
B. every 72 hours after proper cleaning.  
C. every 24 hours.  
D. weekly.

168. A physician ordered spacer or aerochamber for an inhaler. It must be:

A. washed in hot soapy water, rinsed and dried whenever soiled.  
B. rinsed thoroughly every other day in an isopropyl alcohol solution.  
C. stored in an airtight plastic after each use.  
D. only used for one month and then returned to the pharmacy for refund.

169. When opening capsules to mix medication into a vehicle such as apple sauce, you must:

A. wear clean gloves to open the capsule and then sprinkle it on the food.  
B. use a knife to open the capsule before sprinkling it on the food.  
C. use scissors to cut the end of the capsule before sprinkling it on the food.  
D. crush the capsule in a pill crusher and then sprinkle it on the food.

170. If you pour more liquid medication into the measuring cup than is needed, you:

A. carefully pour the excess medication back into the original bottle.  
B. give all the poured medication to the individual and decrease the next dose by the extra amount.  
C. carefully dispose of the excess medication liquid on a paper towel and throw it away.  
D. throw away all of the poured medication, document the disposal and start over.

171. When administering eye drops:

A. carefully pull the lower eyelid downward and administer the medication into it.  
B. have the individual keep their eye open without using their hands.  
C. hold the dropper approximately 2 to 2½ inches above the eye and drop it directly onto the cornea.  
D. lay the dropper directly on top of the upper eyelid and let the medication run onto the eye.
172. When administering ear drops properly:
   A. place the dropper directly into the ear canal and quickly squeeze the bulb.
   B. lay the dropper on the outer ear and drop the medication on the outer ear so it runs into the ear.
   C. apply the medication to a Q-tip and use the Q-tip to swab the it into the ear canal.
   D. clean the canal of any excess blood or crusty skin with a warm cloth and instill the medication in the canal.

173. Some medications must be mixed into an appropriate editable “vehicle” for consumption. Which of the following are appropriate “vehicle” use methods?
   A. stirred into apple sauce
   B. sprinkled onto a hamburger before cooking
   C. added to a condiment
   D. dissolved in a soft drink

174. The contents of an opened capsule or crushed medication is mixed into a “vehicle” to prevent:
   A. medication from laying on the bottom of the medication cup.
   B. help the individual to consume the medication.
   C. chemical changes to the medication when it comes in contact with air.
   D. vomiting.

175. If you find that a client chews their medications that shouldn’t be chewed, you should:
   A. notify the nurse so the route or medication type can be changed.
   B. hide the medication in something soft such as pudding or applesauce.
   C. notify the physician immediately for direction.
   D. just not give the medication.

176. If a tube of topical medication is discolored:
   A. use it anyway, it’s normal oxidation that doesn’t effect the medication potency.
   B. squeeze out and discard the medication this is discolored.
   C. squeeze out and save the discolored medication to return to the pharmacy and use the rest.
   D. don’t use the medication at all as it may no longer be safe.

177. When using a salve or body cream from a multidose container, to place it in a medication cup, remove the medication needed by:
   A. letting the client scoop out the medication needed.
   B. using a clean tongue blade to scoop out the medication.
   C. using the medication cup to scoop the medication out.
   D. shaking out some of the medication into the individual’s hand.
178. You have applied a cream or ointment to an individual’s effected skin surface and find you have “extra” cream/ointment. You should:

A. dispose of the “extra” in a paper towel and throw it away.
B. apply the “extra” cream/ointment to other skin areas that look like they need it.
C. return the “extra” to the original container with a clean plastic glove.
D. call the nurse-trainer immediately for direction.

179. Topical medications are to be applied:

A. with a bare hand.  
B. in a thin layer.  
C. heavily to cover the margins of the effected surface.  
D. only by the individual requiring the medication.

180. If an individual is able to apply his own topical medication, you must make sure he or she:

A. knows what the medication is and why he or she is using it.
B. knows both the trade and generic names.
C. knows all the side effect “by heart”.
D. applies it with a tongue blade instead of a plastic glove.

181. When mixing a medication into a vehicle such as food and part of it spills on you:

A. administer the rest of it to the individual and complete a medication error report.
B. add just a little more medication to make up the difference and administer it.
C. discard the mixture and start over with new medications and vehicle.
D. do not give the medication at all and initiate a medication error report.

182. If you are administering female hormones/birth control pills for a 28 day cycle, you will:

A. administer the medication from the 1st to the 28th day of the month and start over on the 1st of the next month.
B. administer the medications only in months with 28 days.
C. initiate the medication as directed by the nurse-trainer and then every day from then on regardless of the dates of the month.
D. skip enough Sundays of the month so that the 28 medications will cover the month.

183. To properly administer ear drops, the client’s head must remain tilted for:

A. 3 minutes for each ear.  
B. 1 minute on each side.  
C. 3 minutes for 1 ear, 5 minutes for both ears.  
D. however long the individual will hold still.
184. The proper way to administer more than one eye medication (drops) scheduled at the same time is to:

   A. give the eye drops right after one another.
   B. mix the eye drops up in a dropper and administer them at the same time.
   C. give the eye drops of the different medications five minutes apart.
   D. let the client decide how the eye drops should be administered.

185. The proper method to administer two puffs of an inhaler is to:

   A. administer one puff on inhalation and one puff on exhalation.
   B. space the puffs apart by one minute and have them hold their breath for ten seconds before exhaling.
   C. press twice on the inhaler immediately after the individual’s lips are sealed around the mouthpiece.
   D. have the individual breath deeply for three minutes before using the inhaler to administer the two puffs.

186. Before administering any medication, which of the following must be checked?

   A. Medication schedule (time to be given)
   B. Medication route (whether it is by mouth, applied to skin, etc)
   C. Special instructions
   D. Medication name on the MAR against the medication name on the medication package
   E. all the above

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The following questions deal with Skill Standard D

187. You are administering 100 mg of Dilantin at 9:00 pm to one of the individuals to whom you have been authorized to administer medications and you discover that the 9:00 am Dilantin has not been initialed as given. What should you do?

   A. Don't administer the 9:00 pm Dilantin and call the Nurse-Trainer at the end of the shift for direction.
   B. Administer both your Dilantin dose and the Dilantin not given in the morning.
   C. Administer the 9:00 pm dose and immediately call the Nurse-Trainer for direction.
   D. Administer the 9:00 pm dose and write a note for the Nurse-Trainer for the next morning.
188. What do you do FIRST if you make an error when administering a medication?

A. Isolate the developmentally disabled individual involved.
B. Call the Nurse-Trainer for direction.
C. Complete an medication error report form.
D. Call the Department of Human Services Hot Line.

189. What should you do if a medication error occurs?

A. Isolate the developmentally disabled individual involved.
B. Follow the Nurse-Trainer instructions she gave you when you called her about the error.
C. Take him or her to the physician’s office as soon as possible.
D. Immediately transport the developmentally disabled individual to the emergency room.

190. Medication errors may be documented in:

A. an individual’s clinical record.  
B. an agency-specific incident or negligence report.  
C. a medication error report form.  
D. any of the above.

191. You are administering the 4:00 pm medications and discover the 8:00 am dose of Depakote is still in the drawer/bubble pack. You should:

A. immediately administer the Depakote. 
B. give two doses the next time the Depakote is scheduled. 
C. before administering the Depakote, report the omission to your house manager. 
D. report the omission to the Nurse-Trainer immediately for direction.

192. You make a documentation error on the Medication Administration Record (MAR). You should:

A. erase or “white out” the error and correct the error. 
B. leave a note for the Nurse-Trainer to correct the error. 
C. ask another direct care staff person to witness your correction. 
D. follow the agency’s procedure for error documentation.

193. During medication administration, you find a medication individual’s medication container that is not listed on the Medication Administration Record (MAR). What should you do?

A. Administer the medication, write it on the MAR and notify your supervisor the next morning. 
B. Administer the medication, make a note (NOT on the MAR) and notify the nurse on her next visit. 
C. Call the physician so it can be properly written on the MAR and follow his instructions. 
D. Don’t administer the medication and call the Nurse-Trainer immediately for direction.
194. If you have a medication listed on the Medication Administration Record (MAR) but it is not in the medication cart/drawer/bubble pack, what should you do?

A. Notify the next shift of the problem.
B. Make a note on the MAR that the medication was unavailable.
C. Notify the Nurse-Trainer and follow his/her instruction.
D. Write D/C (discontinued) on the MAR for the medication since it was most likely stopped.

195. You are giving medications on the day shift at 9:00 am. You note that one of the medications you are to administer has been initialed as given. In addition, that same medication that was to be administered the previous evening is not initialed as given. You should:

A. assume it was given and initial the “square” for the scheduled evening medication.
B. notify your Nurse-Trainer and initiate a medication error report.
C. first call the physician and then call the guardian to inform them of a possible problem.
D. administer a double dose of the medication immediately.

196. You are administering medications on the evening shift and find a medication still in the bubble pack/medication container that, according to the Medication Administration Record (MAR), was scheduled to be given at 9:00 am that day. You should:

A. give the medication immediately and sign off on the MAR.
B. call the authorized direct care staff that was to administer the medication to see if it was administered.
C. call the Nurse-Trainer for guidance.
D. check to see if the person is having any negative effects from not receiving the medication.

197. The length of time to administer medications can still be considered to have been given on time is:

A. 1 to 1½ hours before the scheduled time.
B. 1 hour after the individual refuses.
C. ½ hour before and ½ hour after the scheduled time.
D. all medications must be administered within five minutes of the scheduled time.
198. When can individuals share each others medications?
   A. Any time.
   B. Only when one of the individuals shows a need for the medication.
   C. Any time a medication is missing for an individual and another individual has extra medications.
   D. Individuals can’t share medications.

199. You have discovered a medication error. How soon must you complete a medication error form?
   A. Within 24 hours.
   B. Within 48 hours.
   C. Before the end of the shift.
   D. Before you start your next day’s shift.

200. Which of the following would be considered a medication error?
   A. A Dilantin (Phenytoin) is given at 7:30 am when it is scheduled for 7:00.
   B. One hundred mg of Sinequan (Doxepin hydrochloride) is prescribed. You administer two 50 mg tablets.
   C. You discover that you have given both the morning and evening dose of Abilify (Aripiprazol).
   D. You are administering a medication in mashed potatoes. It is sticky so you add milk.
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<th>Training Program</th>
<th>Medication Administration Module</th>
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Competency Based Training Assessment (CBTA) for Medication Administration by Non-licensed Direct Care Staff in the Community for those with a Developmental Disability

**Signature** of Staff to be Authorized to Pass Medications: ____________________________________________________________

Date(s) of **initial** Authorization training & testing ___________________, ___________________, ___________________, ____________

RN Nurse-Trainer Name: ____________________________________________ IL License # 041- ___________________

Provider Name: ____________________________________________________________

Directions: To successfully complete the tasks of medication administration for authorization to administer medications, non-licensed direct care staff must, under the direct supervision of a RN Nurse-Trainer, pour, administer and record **ERRORLESSLY**. This will be done by the staff member named above, for the individuals identified on this form. This evaluation includes demonstrating knowledge of each individual's disability, medication, dose, schedule, route, and expected effects and possible side effects. A list of the medications administered to the individuals identified on this form, such as a Medication Administration Record (MAR), must be attached. There must be a documenting procedure that reflects new medications (including dosage changes) the staff member is authorized to administer.

**Scoring Key:**

+   = Successful Completion  - = Unsuccessful Completion  NA = Not Applicable

**General Requirements/Preparation** (If necessary, attach additional sheets for additional comments.)

(   ) 1. Chooses appropriate place to dispense medications and makes sure the dispensing area is clean.

(   ) 2. Focuses on preparing and administering medications regardless of unavoidable distractions/interruptions.

(   ) 3. Assembles equipment necessary for pouring, administering and recording medications to be given (paper & medicine cups, measuring devices, vehicles such as applesauce/pudding, etc.

(   ) 4. Procures appropriate MARS and medications from locked storage.

(   ) 5. Matches individual's name on MAR with label on medication containers.

(   ) 6. Shakes liquid medications and or mixes crushed/liquids with appropriate fluids or foods.

(   ) 7. Cleans up the medication area after each individual as necessary to prevent possibility of contamination.

**INDIVIDUALS**

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<td>Reviews the MAR for allergies &amp; medication changes or any conflicts</td>
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<td>Identifies individual. Checks and matches individual's name/face</td>
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<td>Washes/disinfects hands before pouring medications for each individual</td>
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<td>(2) before pour/punching out an accurate dose.</td>
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<td>Selects correct medication, dose, date, time, route &amp; consistency</td>
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<td>Assists individuals to receive/consume medication as necessary</td>
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<td>Follow ISP/Self-Medication Program to maximize self-med independencia</td>
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N-02-01-11
Comments: _________________________________________

(PASSED) Medication Administration CBTA with 100% Accurate Performance ______/______/20_____
(date)

(DID NOT PASS) Medication Administration CBTA with 100% Accurate Performance ____/_____/20_____
(date)

____________________________________, has successfully completed the classroom and CBTA components
(Name of non-licensed staff – print legibly or type)

for Authorization of Non-Licensed Direct Care Staff. He/She is authorized to administer medications to the clients/
(individuals identifies below. ___________________________ _____/_____ 20_____  
(Signature of Nurse-Trainer)

<table>
<thead>
<tr>
<th>Individual’s Name or Identification</th>
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