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, intraosseus, 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.