

## Administration of Medication Via Percutaneous Endoscopic Gastrostomy (PEG) Tube

Student Name: \_\_\_\_\_

Student Signature: \_\_\_\_\_

Evaluator Signature: 1<sup>st</sup> attempt \_\_\_\_\_ Date: \_\_\_\_\_  Satisfactory\*  Unsatisfactory^

Evaluator Signature: 2<sup>nd</sup> attempt \_\_\_\_\_ Date: \_\_\_\_\_  Satisfactory\*  Unsatisfactory^

Evaluator Signature: 3<sup>rd</sup> attempt \_\_\_\_\_ Date: \_\_\_\_\_  Satisfactory\*  Unsatisfactory^

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

PERFORMANCE BEHAVIORS	S*	U^	COMMENTS
<p><b><u>Assessment</u></b></p> <p>1. Avoid distractions</p> <p>2. Check patient's chart for</p> <ol style="list-style-type: none"> <li>a. **Allergies</li> <li>b. Parameters for holding medication (e.g. labs, Apical HR, BP, physical assessment)</li> <li>c. Diet, NPO status</li> <li>d. Fluid restrictions</li> </ol>			
<p>3. Check Medication Administration Record (MAR)</p> <ol style="list-style-type: none"> <li>a. Date</li> <li>b. Patient name</li> <li>c. Drug name and dosage</li> <li>d. Time for administration</li> <li>e. Route of administration</li> </ol>			
<p><b><u>Planning</u></b></p> <p>4</p> <ol style="list-style-type: none"> <li>e. Identify expected outcomes: know actions, special nursing considerations, safe dose ranges, purpose of administration, and adverse effects of medications to be administered.</li> <li>f. Check with pharmacist regarding substituting tablets, gel caps, capsules or sustained release medications for liquid form. Ensure that contents of capsules can be expressed from the covering.</li> </ol>			
<p>5. Identify what teaching you might need to provide to the patient.</p>			
<p>6. Gather equipment</p> <ol style="list-style-type: none"> <li>a. Gather supplies: gloves, tongue depressor, blue pad, irrigation syringe, irrigation bottle with tap water, source of water (pitcher or cup) for dissolving medication, pill crusher, medication cups, med tray, EHR and stethoscope</li> <li>b. Deliver supplies to patient's room</li> <li>c. Identify self and purpose for delivery when placing items on bedside table.</li> </ol>			
<p><b><u>Implementation</u></b></p> <p>7. Go to med cart</p> <ol style="list-style-type: none"> <li>a. **Perform hand hygiene</li> </ol>			
<p>8. Prepare medication for only one patient at a time.</p> <ol style="list-style-type: none"> <li>a. Read MAR and select correct medication</li> <li>b. State the **6 rights of medication administration comparing the medication to the MAR <b>** (First Check)</b></li> <li>c. Check expiration date. Repeat if more than one medication is to be administered</li> </ol>			
<p>9. Compare MAR to label on medication container (Long Term Care Card, Pyxis, unit dose package, bottle...), verifying correct medication.</p> <ol style="list-style-type: none"> <li>a. State the **6 rights of medication administration comparing the medication to the MAR <b>** (Second Check)</b>. Repeat as necessary for each medication to be administered.</li> </ol>			
<p>10. Verbalize that you will calculate correct amount of drug to be given.</p>			

PERFORMANCE BEHAVIORS	*S	*U	COMMENTS
11. Verify medication <ul style="list-style-type: none"> <li>a. Verify that medications to be administered do not include any sublingual, enteric-coated, or sustained release medication.</li> <li>b. Put each <u>unopened</u> medication in a separate medication cup.</li> <li>c. Carry medications on a tray, and bring MAR to patient's room.</li> </ul>			
12. Upon entering room <ul style="list-style-type: none"> <li>a. ** Perform hand hygiene</li> <li>b. Be aware of your spatial safety, have call light within reach</li> <li>c. Identify self</li> <li>d. **Identify patient using two forms of identification (i.e., name, birth date, medical record number) while comparing EHR to patient wrist band</li> <li>e. ** Ask patient if he or she has any allergies and check for allergy band</li> <li>f. Ensure privacy</li> <li>g. Explain what is about to occur and what medications will be administered</li> <li>h. Allow for patient questions</li> <li>i. Raise bed to comfortable working height.</li> <li>j. **Perform necessary assessments (i.e. apical heart rate, blood pressure, pain). Determine if medication should be held.</li> <li>i. Asses for abdominal distention, tenderness, bowel sounds</li> </ul>			
13. ** <b>Position</b> patient with head of bed elevated 45-90 degrees (High Fowler's).			
14. Check placement of feeding tube <ul style="list-style-type: none"> <li>a. Don Gloves and protect patient with blue pad</li> <li>b. Draw up 30 ml air in irrigation syringe</li> <li>c. **Position stethoscope just below costal margin, slightly left of midline</li> <li>d. **Instill air into tube while listening through stethoscope ** for bubbling in stomach</li> </ul>			
15. Check for residual <ul style="list-style-type: none"> <li>a. Aspirate <b>all</b> stomach contents, determine volume with irrigation syringe and re-instill into patient</li> <li>b. Return aspirated contents to stomach unless volume exceeds 250ml. Then check agency policy and notify prescriber.</li> <li>c. Follow facility policy for medication administration via PEG-tube.</li> </ul>			
16. Prepare for administration <ul style="list-style-type: none"> <li>a. Scan patient ID band</li> <li>b. Scan medication</li> <li>c. State the **6 rights of medication administration comparing the medication to the MAR ** (<b>Third Check</b>).</li> </ul> 17. Correctly record medication on MAR <ul style="list-style-type: none"> <li>a. Any pertinent collected data such as residual, pain level, BP, pulse</li> <li>b. Medication given and dose</li> <li>c. Time and route</li> </ul> 18. Prepare medication for instillation in feeding tube <ul style="list-style-type: none"> <li>a. <u>Tablets</u>: Crush pill with pill-crusher. Dissolve the powder in 15 ml. water. Clean crusher when done.</li> <li>b. <u>Capsules</u>: Open capsule or pierce gel cap with sterile needles and empty contents into 15 ml. water</li> <li>c. <u>Liquids</u>: When pouring liquid medication, set the cup on flat surface and read the level of liquid at the lowest point of meniscus. Palm the label of the bottle.</li> </ul>			

<p>19. Administer medication</p> <ol style="list-style-type: none"> <li>a. Remove syringe and plug feeding tube OR clamp feeding tube and remove syringe.</li> <li>b. Remove plunger from syringe and replace syringe back into feeding tube as a funnel.</li> <li>c. Pour 15 ml of water into syringe in order to flush tubing.</li> <li>d. Repeat procedure as necessary to prevent blockage of tube.</li> <li>e. Stir and pour first dissolved medication into syringes and allow to flow by gravity into feeding tube (trouble shoot as necessary).</li> <li>f. To administer more than one medication, give each separately and flush between medications with 15 ml. water</li> <li>g. Follow last medication with 15 to 30 ml.</li> <li>h. Resume tube feeding, if not contraindicated.</li> <li>i. Remove gloves and dispose of waste properly</li> <li>j. Record fluid intake in I&amp;O</li> </ol>			
<p>20. Prior to leaving room</p> <ol style="list-style-type: none"> <li>a. <b>**Maintain the HOB 30 degrees or higher</b></li> <li>b. <b>**Reposition patient for comfort and safety</b></li> <li>c. <b>** Lower bed</b></li> <li>d. <b>**Raise appropriate side rails</b></li> <li>e. <b>**Leave call light and belongings in reach</b></li> <li>f. <b>** Perform hand hygiene</b></li> <li>g. Dispose of used equipment</li> </ol>			
<b><u>Evaluation</u></b>			
<p>21. Verbalize need to follow up on therapeutic effects on medication (BP, pulse, pain rating, fluid status, blood glucose, etc.) in timely manner.</p>			

**\*S = Satisfactory, ^U = Unsatisfactory**

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