

Objectives

At the completion of this module, unlicensed assistive personnel (UAP) should be able to:

1. administer medications by Gastrostomy Tube (GT), Percutaneous Gastric (PEG) Tubes, and Gastrostomy Buttons (GB).
2. document medication administration in the client's healthcare record.

Gastrostomy tubes, percutaneous endoscopic gastrostomy tubes, and gastrostomy buttons are surgically or endoscopically inserted to provide a route whereby liquid food and medications are instilled directly into the stomach.

NOTE:

1) The RN or LPN is permitted to delegate **ONLY** after application of all components of the NC BON Decision Tree for Delegation to UAP and **after careful consideration that delegation is appropriate:**

- a) for **this** client,
- b) with **this** acuity level,
- c) with **this** individual UAP's knowledge and experience, and
- d) **now** (or in the time period being planned).

2) Successful completion of the "Infection Control" module by the UAP should be documented prior to instruction in medication administration by this or ANY route.

Procedures

1. Communicate to UAP any special information needed prior to the administration of the medications.
2. Cleanse hands and observe other appropriate * infection control procedures.
3. Gather appropriate materials.
 - Prepared medication (use liquid medications when possible)
 - Sterile water for dilution and flushing
 - 50 mL irrigating piston syringe
 - Clean gloves
4. Prepare work area to be clean and well lit.
5. Check for client allergies by:
 - asking the client about his/her allergies, and

- reviewing the Medication Administration Record (MAR), plan of care, and/or client medical record.
6. Verify the **SIX RIGHTS** of medication administration:
 - Right client and right MAR
 - Right medication
 - Right dose
 - Right time
 - Right route
 - Right documentation is performed after the medication administration
 7. Verify **RIGHT MEDICATION** by comparing the MAR against the label of the medication:
 - when it is taken from the medication cart/drawer,
 - before preparing the medication, and
 - after preparing the medication.
 8. Check the expiration date of the medication.
 9. Prepare the **RIGHT DOSE** of medication for the **RIGHT ROUTE**.

MEDICATION PREPARATION

- Ensure appropriateness of crushing tablets and/or capsule contents. Identify medications that cannot safely be crushed:
 - Enteric-coated tablets
 - Enteric-coated granules from extended-release capsules
 - Sustained release tablets
 - Buccal or sublingual medications
 - Medications with carcinogenic, teratogenic, or cytotoxic properties
- Crush separately each medication tablet and capsule contents.
- Dilute each crushed tablet and/or contents of each capsule in 15 - 30 mL of sterile water separately or as prescribed.
- Pour liquid medications into appropriate medication container and dilute as indicated.

NOTE: Use sterile water for dilution and flushes.

10. Identify the **RIGHT CLIENT** (client's identity) for medication administration using agency protocol.



11. Explain the procedure to the client.
12. Put on clean gloves.
13. Elevate client's head of bed at least 30 degrees or instruct client to sit in an upright position.
14. Administer the medication at the **RIGHT TIME**.

MEDICATION ADMINISTRATION

- Confirm GT, PEG, or GB for intactness and appropriate location.
 - Observe the skin around the tube/button exit site for irritation and leakage of gastric contents.
 - Remove the syringe plunger.
 - Clamp or pinch off the GT or PEG, remove tubing cap or plug, or remove GB cap and attach syringe to GT, PEG, or GB.
 - Release clamp or pinch.
 - Instill 10 mL or prescribed amount of sterile water into the tube to check for patency.
 - Administer each medication separately pouring up to 30 mL of medication mixture into the syringe.
 - Allow the medication to infuse by gravity into the GT, PEG, or GB.
 - Irrigate tube with 5-10 mL (or as prescribed) of sterile water between each medication.
 - At completion of medication administration, flush the tube with sterile water:
 - Pediatric client: 10 mL or prescribed amount.
 - Adult client: 30 – 60 mL or prescribed amount.
 - Remove the syringe, reclamp and recap or replug the GT, PEG, or GB.
 - Rinse the feeding apparatus with water at the completion of medication administration and allow to dry.
 - Cleanse and replace feeding apparatus as indicated by agency policies and procedures.
15. Maintain elevation of client's head of bed at least 30 degrees or instruct the client to remain upright for at least 30 minutes after medication administration is completed.
 16. Remove and discard gloves. Cleanse hands.

17. Implement the sixth right of medication administration, **RIGHT DOCUMENTATION**. Documentation of medication administration on the client's MAR and/or client record includes:

- a. Date and time of administration
- b. Medication and dosage
- c. Route of medication administration
- d. Site of administration
- e. Signature of person administering the medication.

NOTE: If the client refuses the medication, document this in the MAR and/or client chart. The UAP is responsible for reporting this to the person delegating and supervising the medication administration. Medications that are not administered within the agency approved time period for administration should be documented. Dispose of the medication according to agency policy.

18. Maintain security of medications during medication administration and insure the medication cart/cabinet/room is locked when not in direct attendance.

*** Information to support the teaching of hand hygiene and use of gloves is located in the teaching module "Principles of Infection Control".**

**Delegation of Medication
Administration to
Unlicensed Assistive Personnel (UAP)**

**Administering Medications by
GT, PEG, and GB
Module/Skill Checklist**

SKILL CHECKLIST

Student Name (print)

ID Number

<u>SKILL PERFORMANCE OBJECTIVES</u>	<div style="text-align: center;"> ✓ Pass x Not Yet </div>	<u>COMMENTS</u>
1. Obtain any special information needed prior to the administration of medication.		
2. Cleanse hands; observe infection control procedures.		
3. Gather materials and supplies.		
4. Prepare work area: clean and well lit.		
5. Check for client allergies: <ul style="list-style-type: none"> ▪ Ask client about allergies ▪ Review MAR for allergies 		
6. Verify Six Rights of medication administration: Client, medication, dose, time, route, documentation		
7. Verify right medication by comparing MAR against medication label: <ul style="list-style-type: none"> ▪ When taken from the medication cart/drawer ▪ Before withdrawing the medication ▪ After withdrawing the medication 		
8. Check expiration date of medication.		
9. Prepare the right dose of medication for the right route. <ul style="list-style-type: none"> ▪ Identify medications that cannot be crushed ▪ Crush separately each medication tablet and/or capsule contents ▪ Dilute separately each crushed medication in 15-30 mL sterile water (or as prescribed) ▪ Pour liquid medication into appropriate medication container; dilute as indicated 		
10. Identify the right client for medication administration.		
11. Explain the procedure to the client.		
12. Put on clean gloves.		
13. Elevate client's head of bed at least 30 degrees or		



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instruct client to sit in upright position		
<p>14. Administer the medication via GT, PEG, or GB at the right time.</p> <ul style="list-style-type: none"> ▪ Confirm GT, PEG or GB is intact and in appropriate location ▪ Observe skin around tube exit site for irritation and leakage of gastric contents ▪ Remove syringe plunger ▪ Clamp or pinch off GT or PEG, remove tube cap or plug, or remove GB cap, and attach syringe to GT, PEG, or GB. ▪ Release clamp or pinch ▪ Instill 10 mL or prescribed amount of sterile water into tube to check for patency ▪ Administer each medication separately pouring up to 30 mL of medication mixture into syringe ▪ Allow the medication to infuse by gravity into the GT, PEG or GB ▪ Irrigate tube with 5 – 10 mL (or as prescribed) of sterile water between each medication ▪ At completion of medication administration, flush tube with sterile water: <ul style="list-style-type: none"> ▲ Pediatric client: 10 mL or prescribed amount ▲ Adult client: 30 – 60 mL or prescribed amount ▪ Remove syringe, reclamp and recap or replug ▪ Rinse feeding apparatus with water after completion of medication administration ▪ Verbalizes procedure for cleansing and replacing feeding apparatus as indicated in policies and procedures 		
15. Maintain elevation of client’s head of bed at least 30 degrees or instruct client to remain upright; Maintain position for at least 30 minutes after medication administration		
16. Remove and discard gloves. Cleanse hands.		
<p>17. Right documentation – record the medication administration:</p> <ul style="list-style-type: none"> ▪ Date and time ▪ Medication and dosage ▪ Route ▪ Site ▪ Signature 		
18. Maintain security of medications and medication		



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cart/cabinet/room.		
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a. Pass b. Redo

Evaluator Name

Date



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