MEDICATION ADMINISTRATION COURSE
FOR NURSE AIDES IN LONG-TERM CARE FACILITIES

PURPOSE OF COURSE

To prepare the Medicaid Nurse Aide to administer specific medications in a long-term care facility, as delegated and supervised by a licensed nurse. Additional duties the employer may delegate are not covered in this course (KRS 314.011 and 201 KAR 20:400 Section 2).

COURSE CONTENT

The course shall include basic principles, techniques and procedures of medication administration in accordance with established guidelines and requirements that direct the limited functions of the Kentucky Medication Aide*.

LIMITATIONS TO PRACTICE

Kentucky Medication Aides DO NOT:

2. Administer injectable medications, including medications via subcutaneous, intradermal, intramuscular, or intravenous route.
3. Administer medications via tubes inserted into any body cavity.
4. Administer Antineoplastic drugs.
5. Accept verbal/phone orders from those with prescriptive authority.
6. Dispense medications for residents temporarily out of the facility.

COURSE LENGTH

The Kentucky Medication Administration Course will be a minimum of eighty (80) hours. A minimum twenty (20) hour clinical practicum supervised by the instructor or their designee in a long term care facility is required.

NOTE

* This course supercedes the :"State Approved Eighty Hour Course For Administration of Medications By Non-Licensed Personnel."
Student Qualifications

1. Any one of the following:
   High school diploma
   G.E.D
   Test of Adult Basic Education (TABE) or comparable test and score at tenth grade level in reading and math.

2. Any one of the following:
   Compass test and score a 34 or above in Math and a 76 or above in reading
   ACTE test and score a 16 or above

3. A minimum of six months of work experience as a nurse aide in a health care facility within the last two years. Verification is required.

4. For those nurse aides employed in health care facilities that may be exempt from OBRA nurse aide testing and training requirements, it is recommended that they meet all qualifications of the OBRA regulations prior to enrolling in the medication aide class.

Educational Program

1. A minimum of 80 hours total.
2. A minimum of 20 hours clinical in a long-term care facility with at least 2 of the 20 hours being a final practicum.
3. If a medication aide has not been employed as a medication aide within twenty four months, he/she must satisfactorily complete the state approved Medication Aide course in both theory and practice.

Training Facilities

1. Schools operated under the auspices of the Kentucky Community and Technical College System, (KCTCS) Technical Institutions Branch and the Department for Technical Education.

2. Classes may be held in off-campus classrooms, provided they are under the direction of the above-mentioned education agency and meet the minimum standards for facilities, equipment and supplies.

Challenge Examination for the Kentucky Medication Aide

1. The following individuals may challenge the course:
A. Individuals who have successfully completed the second semester of NURS courses in the practical nursing program, third semester of an associate degree nursing program, or completed senior standing in a baccalaureate nursing program. The examination must be scheduled within one year of the completion of the last nursing course.

B. Individuals who have successfully completed a professional or practical nursing program, but have not passed the RN or LPN state licensure exam.

2. Individuals who challenge the medication aide exam must take the Medicaid nurse aide exam and be placed on the registry within 4 months of employment.

3. Individuals who hold medication aide certificates from another state may take the KMA challenge exam after being placed on the Kentucky Nurse Aide registry by exam or reciprocity, or see exceptions in item 3 under “student qualifications.”

3. The challenge exam shall be administered under the auspices of the Kentucky Community and Technical College System, (KCTCS) Technical Institutions Branch.

Instructor Qualifications

1. An instructor shall be currently licensed as a registered nurse in the State of Kentucky with recent work/teaching experience in an inpatient health care facility.

2. A pharmacist, physician, or other qualified health care person may assist as a guest instructor in the areas of drug distribution systems, regulations governing drugs, drug actions, adverse reactions and drug interactions.

Testing for Medication Aides

1. Pretest (TABE or comparable) exam shall be administered by qualified testers designated by the sponsoring education agency.

2. Students shall achieve an average score of 70% or above on the written exams in the course to be eligible to take the state examination.

3. The state examination shall consist of a written and performance component.

   A. Written examination shall include questions based on course objectives. A score of 70% is required for passing the written component.

   B. The performance component shall include the preparation and administration of medications by all non-parenteral routes and include recording of medications given. Testing on medication routes not
available in the long-term care facility shall be done in a laboratory situation. Must successfully complete the performance component.

C. The state exam may be retaken only once. Failure of the retake state exam requires that the course be taken again. Kentucky Medication Aide testing must be completed within one year of training.

D. The state examination will be graded and results sent within 30 (thirty) days from the test date.

Records

1. A certificate documenting successful completion of the state-approved medication aide course shall be awarded by the Technical Institutions Branch of KCTCS.

2. The sponsoring education agency which administers the challenge exam to qualified applicants shall award a certificate documenting successful completion of the state-approved medication aide course by challenge exam.

3. A copy of the course record will be kept on file.

4. If the medication aide requests verification, a written, signed request must be made including name, address, telephone number, social security number and date of class. There may be a charge for verification documents.

5. The sponsoring education agency shall maintain a permanent record of individuals who have completed the medication aide program.

6. The sponsoring education agency shall submit to the Technical Institutions Branch of KCTCS, the Kentucky Medication Aide Registry Data Form and the written test form for all individuals who successfully complete the course and take the written exam.

A listing of completers’ names will be forwarded monthly to the Division of Licensing and Regulation in the Cabinet for Health Services.

Registry

Persons who are medication aides should be designated as such on the OBRA state nurse aide registry. Complaints of misuse of medications or questionable competency should be directed to the Cabinet for Health Services, Division of Licensing and Regulation.
COURSE OUTCOMES

Upon successful completion of the course, the individual shall demonstrate minimal entry level competency necessary to safely administer medications in a long term care facility.

1. Define the role of the Medication Aide as it relates to the health care team.
2. Identify legal and ethical responsibilities.
3. Demonstrate an awareness of legal implications in drug administration.
4. Demonstrate the ability to correctly interpret symbols, common abbreviations, and terminology used in administration of medications.
5. Acquire and apply basic knowledge of medications, their actions, uses, and desired and adverse effects.
6. Demonstrate knowledge of proper methods for drug storage, and procedures of ordering, receiving, disposing, and crediting drugs.
7. Identify correct procedures and responsibilities relative to drug expiration date and automatic stop orders.
8. Demonstrate the correct procedures for preparing and recording medications administered, refused, or withheld.
9. Describe the structure and function of the human body, commonly occurring conditions, and the relationship of drug effects of each system.
10. Demonstrate knowledge of the changes involved in the aging processes and the needs of the long term care resident.
11. Demonstrate an awareness of both expected and adverse effects of drugs most commonly prescribed for the long term care resident.
12. Demonstrate competency in measuring and reporting of vital signs.
13. Perform accurately and safely the techniques and procedures involved in administering medications within the prescribed scope of practice.

I have read the Kentucky Medication Aide Guidelines which includes the limitations of practice and expected course outcomes. I have had the opportunity to ask questions about the above and my signature indicates my full understanding.

_________________________________________  ____________________
Signature of Applicant                        Date

_________________________________________
Printed Name of Applicant

_________________________________________  ____________________
Signature of Witness                          Date
KENTUCKY MEDICATION AIDE
Application for Challenge Examination

SECTION I

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SECTION II -- Circle your responses.

1. Are you on the Kentucky Nurse Aide Registry? YES NO
   NOTE: If you are not on the Kentucky Nurse Aide Registry, see attached information sheet.

2. What qualifications do you have to take the Medication Aide Examination?
   Nursing School (complete section III) Medication Aide from another jurisdiction

   NOTE: Original documentation must be presented to test administrator.

SECTION III

Name of Nursing School:________________________________________________________

Name of Dean of Nursing:_________________________________ Phone:____________

Please attach an official transcript.

Circle the number that best describes your situation.

1. I have successfully completed the fourth quarter or first semester of NURS courses in the practical nursing program, third semester of an associate degree nursing program, or have reached senior standing in a baccalaureate nursing program. The examination is scheduled within one year of the
completion of my last nursing course. My last nursing course was completed on ____________________________.

2. I have successfully completed a professional or practical nursing program, but have not yet taken or passed the RN or PN state licensure exam or have not yet taken the state board exam.

3. I have taken/will take (circle the one that applies) the Medicaid nurse aide exam and will be placed on the registry within 4 months of employment.

4. I hold a medication aide certificate from another state and have been placed on the Kentucky Nurse Aide registry.