

Perioperative Services Competency Assessment - Vanderbilt University Medical Center

Medication Safety	Interpretation	Rationale
A. Verbalizes the five rights of medication administration.	<ol style="list-style-type: none"> 1. Right patient 2. Right medication 3. Right dose 4. Right time 5. Right route 	<ol style="list-style-type: none"> 1. Patient safety. 2. Policy – Medication Administration
B. Verbalizes process for confirming verbal medication orders.	<ol style="list-style-type: none"> 1. Repeat the entire order using digit-by-digit technique (five- zero instead of fifty). 2. Document the order as soon as possible in the patient’s chart. 3. Verbalizes understanding of the importance of miss and near miss medication errors. 4. Identifies, reports and documents adverse drug reactions. 	<ol style="list-style-type: none"> 1. Reduces the chance for error.
C. Verbalizes process for verifying that the correct medication has been selected for use.	<ol style="list-style-type: none"> 1. Medication labels should be checked 3 times to verify that the correct medication (including dose and concentration) has been selected for the correct patient. Check the label at the following times: <ol style="list-style-type: none"> a. Upon procurement of the medication from Acudose and/or pharmacy b. When preparing and drawing the medication into a syringe or other device for administration c. When placing the medication on the sterile field or transferring it to the anesthesia care provider for administration 	<ol style="list-style-type: none"> 1. Patient safety.
D. Verbalizes medication labeling process and all information that must be included on medications and solutions placed onto the sterile field.	<ol style="list-style-type: none"> 1. All labeling of items removed from their original container/package occurs at the time the medication is being prepared. 2. Label one medication at a time. 3. All labels are verified both verbally and visually by two qualified individuals when the person preparing the medication is not the person administering the medication. 4. Upon shift change or break relief, all medications/solutions and their labels are reviewed by both entering and exiting staff. 5. Attaching the original container (vial/amp, etc.) to the final container is unacceptable. 6. Any unlabeled or partially labeled medication or solution is immediately discarded. 7. All medications and solutions placed onto the sterile field must be labeled with the following information: <ol style="list-style-type: none"> a. Drug name b. Drug concentration 8. Medications must be discarded at the completion of the procedure. All original medication/solution containers must remain available until the conclusion of the procedure. 	<ol style="list-style-type: none"> 1. Patient safety.
E. Verbalizes process for delivering medications to the sterile field in an aseptic manner.	<ol style="list-style-type: none"> 1. Confirm all medication with the surgeon before delivery to the sterile field. 2. Actively communicate the medication name, strength, dosage, and expiration date as the medication is passed to the sterile field. 3. Medication should be verified concurrently by the circulating nurse and scrub person. 4. Deliver one medication at a time onto the sterile field. 5. Do not remove stoppers from vials for the purpose of pouring medications. 6. Use commercially available sterile transfer devices when possible (e.g., sterile vial spike). 	<ol style="list-style-type: none"> 1. Patient Safety.