**DRUG ADMINISTRATION**

**GREETINGS and ASKING FOR HELP**

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| Nurse 1 | : | Good morning, Linda. |
| Nurse 2 | : | Good morning, Tom.  |
| Nurse 1 | : | Can you help me? |
| Nurse 2 | : | Sure. What can I do for you? |
| Nurse 1 | : | I’m going to administer this medication to Mr. William Jamison. I need your help. |
| Nurse 2 | : | Okay. Let’s begin. |

**RIGHT PATIENT: Name, bed number, ID band/bracelet, date of birth**

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| Nurse 1 | : | Let’s start with the name. The name is William Jamison in Bed 2. ID bracelet is 005012. |
| Nurse 2 | : | Patient’s name, William Jamison, Bed 2 and ID bracelet 005012. Ok. Confirmed. |
| Nurse 1 | : | Good. His date of birth is July 10, 1965. |
| Nurse 2 | : | William Jamison’s date of birth is July 10, 1965. Correct. |
| Nurse 1 | : | Let’s look at the medication order. Does it match the patient’s ID? |
| Nurse 2 | : | Let me check. Yes. The medication order matches the patient’s ID. |
| Nurse 1 | : | Good. Let’s continue. |

**RIGHT MEDICATION: Drug name/label**

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| Nurse 1 | : | The drug name is paracetamol. |
| Nurse 2 | : | Yes. It’s paracetamol. P-A-R-A-C-E-T-A-M-O-L.  |
| Nurse 1 | : | Paracetamol. Confirmed. Let’s check the medication order. Does it match the drug? |
| Nurse 2 | : | Here is the medication order and here is the drug. They match. |

**RIGHT DOSE: Dose**

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| Nurse 1 | : | Next, let’s check the dose. The dose is 500 mg. |
| Nurse 2 | : | The label on the drug says 500 mg. |
| Nurse 1 | : | Now, let’s check the medication order. It says 500 mg. |
| Nurse 2 | : | Yes, they match: 500 mg. |

**RIGHT TIME: Drug administration time and frequency**

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| Nurse 1 | : | The paracetamol should be administered three times a day, after meal. Can you check with the label? |
| Nurse 2 | : | The label says three times a day after meal. Checked. |
| Nurse 1 | : | Let’s check the medication order. Okay, three times a day after meal. Confirmed. |

**RIGHT ROUTE: Oral, topical, parenteral, rectal**

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| Nurse 1 | : | Next, we will check the route.  |
| Nurse 2 | : | According to the medication order, it should be administered per oral. |
| Nurse 1 | : | Per oral. Checked. |

**RIGHT DOCUMENTATION**

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| Nurse 1 | : | We have completed the preparation. I will sign here. Now, it’s your turn. Can you sign there? |
| Nurse 2 | : | Okay. I will sign here. There you go. |

**CLOSING**

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| Nurse 1 | : | Thank you, Linda. Appreciate your help. |
| Nurse 2 | : | You’re welcome. It’s my pleasure. |