Administration of oral medication

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Administration of medication is more than a task to be done in compliance with a prescription (NMC, 2004). It requires nurses to understand the prescription and to have knowledge of common indications, dosages and side-effects of the medications.

Should any error occur during the procedure the practitioner has a professional responsibility to report this in accordance with local risk management procedures. Ultimately, the practitioner is responsible for ensuring the correct patient, dose, drug, time and route.

**Preparing to administer**

All equipment required to administer the medication should be gathered before the procedure. This may include:
- Any necessary keys;
- Prescription charts;
- Clean dispensing pots;
- Drug reference books.

Gathering equipment prior to the procedure reduces interruptions and the risk of error associated with these.

Thorough handwashing should be performed. Hands should be cleansed between patients to reduce the risk of cross-infection.

**The prescription**

Local policies vary slightly on the requirements for legitimate prescription. As a minimum the prescription should include:
- The generic name of the drug (not the trade name);
- The dose to be given;
- The time for administration;
- The route of administration.

The prescription should be legible and unambiguous and should be signed and dated by the prescribing practitioner.

The prescription chart should be labelled with the patient’s name, date of birth and hospital identification number. It should also clearly state whether the patient has any known allergies.

Good practice states that the patient’s weight be recorded on the prescription sheet for any weight-related dosages, such as therapeutic doses for low molecular weight heparin or for medicines for children.

**Checking the medication**

Policies regarding the appropriate practitioner and number of practitioners needed to check oral medication may vary. Exceptions to this include controlled drugs and medicines for children, both of which need to be checked by two registered nurses.

The nurse should check, as a minimum:
- The generic name of the drug;
- The dose required;
- The time for administration;
- That the drug has not already been given (or taken by the patient);
- That the prescription is legible, signed and dated;
- The expiry date of the drug;
- That the patient does not have any known allergy or sensitivity to the drug.

**Patient identity**

The practitioner must verify that the patient receiving the medicine is the patient for whom it is prescribed. The most common and convenient way to do this is to check that the details on the patient’s hospital identification...
band match those on the prescription chart.
If the patient does not have an identification band, or for patients in areas such as A&E, it is necessary to verbally confirm the identity of patients by asking them to state their name and date of birth.

**Administration**

Medicines should be dispensed into a clean, dry and preferably disposable container.
Where liquid preparations are used, these should be measured using syringes specifically designed for this purpose.
Informed consent should be sought and this will involve assessing the patient’s knowledge of the medication and providing information where necessary.
Patients have the right to refuse medication. If this occurs it should be correctly documented and reported to the prescribing health care professional.
The patient should be helped into a comfortable position and assisted if necessary.
If the patient is not present when the medication is due or does not wish to take it then, the practitioner should return later.
Medicines should never be left out for the patient to take later.
Medication must be given in the prescribed manner and tablets should not be crushed (Morris, 2005).

**Documentation**
The practitioner should sign the prescription to verify that the medication has been administered.
Only when the patient has taken the medication should the chart be signed. It is not acceptable to sign the chart when the medication is placed into the container.
The effectiveness of the medication should be documented.
Following the procedure, the practitioner should ensure that all equipment is replaced and that all medicines are stored in compliance with local policy.

**KEYWORDS**
- Medication
- Drug administration
- Risk management

**REFERENCES**


**PROFESSIONAL RESPONSIBILITIES**
All nurses who administer medication must have undertaken a programme of education and demonstrated competence under supervision.
The practitioner is responsible for ensuring that her or his practice is compliant with the NMC guidelines (NMC, 2004).
The practitioner should also ensure that she or he is familiar with local trust policies.