

INDICATIONS:

- A. Administration of medication is indicated in patients where there is an identified medical emergency and the following Five Patient Rights are found to be valid:
 - a. Right Patient
 - b. Right Medication
 - c. Right Dose
 - d. Right Route
 - e. Right Time
- B. This protocol offers organizational and situational best practices for reducing medication errors and increasing patient safety.

PROCEDURES & BEST PRACTICES:

1. PATIENT:

- A. Medications are packaged in multiple ways. Crews should always reference the medication by generic name and not by the color or shape of the packaging. Efforts should be made organizationally to purchase similar concentration and packaging.
- B. Medications ideally will be drawn up and administered by the same provider. In emergency medicine, it is recognized that this may not always be possible. In an effort to reduce the potential for medication errors, the following shall be done:
 - a. The person drawing up the medication should tape the empty vial to the syringe for identification by the person administering the medication or utilize department provided syringe labels.
 - b. The person drawing up the medication should verbalize visual identification of the drug and confirmation of the order.
 - c. In the event of a second crew member present during medication administration, verbalize the 5 rights to the second crew member.
- C. All medications added to saline bags for infusion will be labeled with a medication label.
- D. Side effects and common complications should be explained to the patient prior to administration.
- E. When possible, verification of known allergies shall be obtained prior to any medication administration.

2. MEDICATION

- A. Medications are often stored together in close proximity to one another in kits or compartments. It is recommended that medications that look similar not be stored next to one another.
- B. Binding of medications to syringes for storage can lead to missed steps in the 5 Patient rights. This requires hypervigilance on the providers to ensure the right medication is being administered.

3. DOSE

- A. All weight-based medications specifically in pediatric patients should be verified by a second provider.
- B. The patient's weight should be stated and documented in a location for all crew members to reference.
- C. Minimize distractions and conversation when calculating dosages and drawing medications.

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- D. Extreme caution in utilizing high concentration medications.
 - E. When possible and practical, all dosages should be referenced in protocol.
 - F. Utilization of calculators, verified reference materials, protocols are all acceptable and recommended methods to verify weight-based dosages.
4. ROUTE
- A. IV pumps shall be utilized for continuous infusions
 - B. Verify the patency of the IV/IO prior to medication administration.
5. TIME
- A. Utilization of a stopwatch, chronograph, or time keeping device for interval administration.
 - B. Utilization of event markers on the cardiac monitor are encouraged for accurate documentation of medication administrations.