

# MEDICATION ADMINISTRATION ROUTES

01

## ORAL:

by mouth "PO"

- Most prevalent and least expensive
  - Before administration, clients should sit up 90 degrees.
- Sublingual: under tongue  
Buccal: between cheek and gum

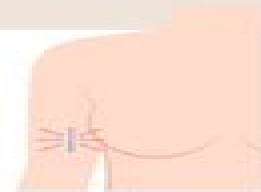


02

## TOPICAL:

by skin or mucous membranes

- Less negative consequences
  - Always use gloves when applying.
  - Wash your skin with soap and water and pat it dry.
- Transdermal: skin patch absorbs into skin



03

## OPHTHALMIC:

by eyes

- Maintain the sterility of medications.
- Dispense into conjunctival sac corner
- Wait at least 5 minutes between infusing each medication.

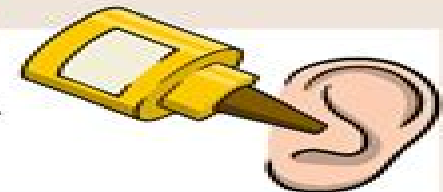


04

## OTIC:

by ears

- Allow the client to sit upright or lie on their side.
- Patient remain on side 2-3 min post admin
- < 3 yrs: Pinna DOWN & BACK
- >3 yrs: Pinna UP & OUTWARD

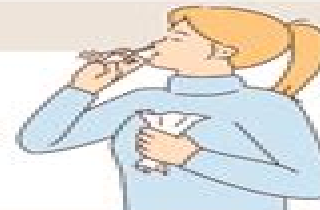


05

## NASAL:

by inhalation through nasal passage

- For Nasal Spray: Prime the tip, insert it into the nares, point it away from the center of the nose, and push down.



# Safe Medication Administration Nursing Cnet Study Guide

**Lingjun Ying**



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move 200 or 300 patients a day through the complicated and varying sequence of steps needed to sort out the many different problems that bring patients to our department These challenges are faced by hospitals and health services all over the world There are difficulties with patient flow congestion queues inefficient utilization of resources problems engaging clinical staff in improvement programs adverse incidents and budget constraints Lean thinking and value stream analysis gives hospitals and health services struggling with these issues the insights they need to help themselves This book provides a method that systematically turns those insights into working programs of service and system redesign The book is divided into two sections The first section gives the background to the approach and systematically works through the Process Redesign methodology step by step The second section is a series of case studies that show the methodology in action what worked and what didn't work The goal of any process redesign is simple the right care for the right person at the right time in the right place and right the first time This book helps the people who work in hospitals and health services realize these goals by working together

*Gerontologic Nursing - E-Book* Jennifer J. Yeager, Mary B. Winton, Sue E. Meiner, 2024-11-14 Prepare to compassionately care for the aging population with *Gerontologic Nursing* 7th Edition uniquely known for its comprehensive coverage of the most common medical surgical problems associated with older adults Organized by body system for easy retrieval of information it delves into health promotion and both basic and complex gerontologic concepts and issues A disorder focused approach addresses nursing management and care coordination across health care delivery settings This text emphasizes topics such as nutrition chronic illness emergency treatment patient teaching home care and end of life care and provides you with a solid foundation to meet the future challenges of providing nursing care for the vast and growing older adult population NEW Next Generation NCLEX NGN style cases and questions are included in select clinical chapters NEW Aging theory and nursing theory content promotes understanding of the relationship between theory and practice NEW Cultural content integrated throughout the text facilitates culturally congruent care practices UPDATED Completely revised chapters ensure content is relevant and practice related for the gerontologic nurse Body system chapters include an overview of age related changes in structure and function Current standards and guidelines are reflected throughout to ensure you are learning the most up to date information Essential nursing care guidelines are presented in each clinical chapter Psychologic and sociocultural issues and aspects of older adult care are integrated throughout the text Clinical judgment questions at the end of chapters challenge you to apply your knowledge and clinical judgment skills Helpful boxes throughout the text highlight key information including Nursing Care Plan Patient Family Teaching Health Promotion Illness Prevention Nutritional Considerations Evidence Based Practice Emergency Treatment Home Care Key points and summary sections at the end of chapters reinforce the most important concepts and information One Next Generation NCLEX NGN style case question added to each clinical chapter Adding content on culturally congruent care to Socioeconomic and Environmental Influences chapter Expanded content on Pressure Injuries Expanded content on Infection Inflammation

Resources in Education ,1981      Department of Defense Chemical, Biological, Radiological, and Nuclear Defense Program Annual Report to Congress 2004 ,2004 This Annual Report of the Department of Defense DoD Chemical Biological Radiological and Nuclear CBRN Defense Program or CBRNDP provides information in response to several reporting requirements First this report is provided in accordance with 50 USC 1523 The complete reporting requirement is detailed at annex K This report is intended to assess 1 the overall readiness of the Armed Forces to fight in a chemical biological warfare environment and steps taken and planned to be taken to improve such readiness and 2 requirements for the chemical and biological warfare defense program including requirements for training detection and protective equipment for medical prophylaxis and for treatment of casualties resulting from use of chemical and biological weapons This report supplements the DoD Chemical and Biological Defense Program FY05 President s budget February 2004 which has been submitted to Congress      **An Epidemic of Rumors** Jon D. Lee,2014-01-14 In An Epidemic of Rumors Jon D Lee examines the human response to epidemics through the lens of the 2003 SARS epidemic Societies usually respond to the eruption of disease by constructing stories jokes conspiracy theories legends and rumors but these narratives are often more damaging than the diseases they reference The information disseminated through them is often inaccurate incorporating xenophobic explanations of the disease s origins and questionable medical information about potential cures and treatment Folklore studies brings important and useful perspectives to understanding cultural responses to the outbreak of disease Through this etiological study Lee shows the similarities between the narratives of the SARS outbreak and the narratives of other contemporary disease outbreaks like AIDS and the H1N1 virus His analysis suggests that these disease narratives do not spring up with new outbreaks or diseases but are in continuous circulation and are recycled opportunistically Lee also explores whether this predictability of vernacular disease narratives presents the opportunity to create counter narratives released systematically from the government or medical science to stymie the negative effects of the fearful rumors that so often inflame humanity With potential for practical application to public health and health policy An Epidemic of Rumors will be of interest to students and scholars of health medicine and folklore      *Government Reports Annual Index* ,1988

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