

SPECIFIC INFORMATION ABOUT VARIOUS ROUTES OF MEDICATION DELIVERY

You can anticipate getting this Individual-Specific Training from your agency nurse.

Remember to explain each step to the person, so he/she knows what you are doing, and ensure that you take all safety precautions recommended by the IDT (e.g., how to support the person to rotate his/her head).

OPHTHALMIC (EYE) MEDICATIONS/OINTMENTS

- Make sure that you are wearing gloves.
- Have the person look upward or tilt his/her head.
- Clean around the person's eye (e.g., if it is draining) with a wet washcloth. Make one swipe and rotate washcloth to prevent spread of infection. Continue wiping and rotating washcloth until eye is clean. Use a separate washcloth for the other eye.
- Pull down the lower eyelid and instill the correct number of eye drops inside the lower lid. Or apply a thin "string" of ointment just inside the lower lid. If it is safe to do so, steady your hand by gently resting it against the person's face. Do not touch the dropper or ointment tube to the eye or lashes of the eye.
- Have the person close his/her eyes gently and apply light finger pressure over the lacrimal sac (inside lower corner of eye) for one minute.
- Hand the person a tissue to blot excess medication if it drips out of eye.
- Explain that the person may experience blurred vision for a short time, so safety precautions should be taken.
- If the person has more than one eye medication, wait five (5) minutes before assisting with the next one.

OTIC (EAR) MEDICATIONS

- Make sure that you are wearing gloves.
- Warm the medication to body temperature by rubbing the bottle between your hands. However, to prevent loss of potency, avoid heating it above body temperature.
- Position the person properly (e.g., lying down on his/her side, sitting in a chair with his/her head tilted) so that the affected ear is facing upwards.
- Use a wet washcloth to clean around the outer ear if it has visible drainage. If this drainage is new, contact the agency nurse or health care provider. To clean, make one swipe and rotate washcloth to prevent spread of infection. Continue wiping and rotating washcloth until outer ear is clean. If needed, use a separate washcloth for the other ear. Do not insert cotton swabs or Q-tips deeply in the ear canal.
- Gently pull the person's ear to straighten the canal. Note: The ear canal in adults is at a slight angle. In order to place drops in the ear, grasp the upper outer ear and gently lift up and back—this straightens the ear canal in adults. For infants and children younger than 3, gently pull the outer ear slightly down and back.
- Instill the medication into the person's ear without touching anything with the dropper. If it is safe to do so, steady your hand by gently resting it on the person's head.
- Have the person remain in position for several minutes so that the medication can be absorbed.
- Putting a cotton ball inside of the person's ear can prevent excess medication from leaking onto the person's clothing.
- If the person has more than one ear medication, wait five (5) minutes before assisting with the next one.

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NASAL MEDICATIONS

Dropper

- Make sure that you are wearing gloves.
- Have the person gently blow his/her nose. Have the person lay down on his/her back with his/her head tilted back
- Using a dropper, instill the correct amount of medication into the person's nostril.
- Ask the person to turn his/her head slightly and repeat for the other nostril (if ordered).
 - Note: The medication order may state to keep the head tilted back for several minutes. Remind the person to breathe through his/her mouth. Observe for difficulty breathing or discomfort. Assist to sit up, as needed.
- Give the person tissue to wipe his/her face (as necessary). The person may need to spit out medication that has drained into his/her mouth.

Spray

- Make sure that you are wearing gloves.
- Shake the solution, and have the person sit upright.
- Cover one nostril. Insert the tip into the other nostril and squeeze a puff into the nostril or both nostrils (as ordered). Depending on the medication, the order will state to hold the breath or to inhale deeply. Do not use excessive force, as it that may cause a headache.
- Give the person tissue to wipe his/her face (as necessary).
 - Note: If the person has more than one nasal medication, wait five (5) minutes before assisting with the next one.

VAGINAL SUPPOSITORIES AND CREAMS

- Have the person use the restroom.
- Position the person comfortably on back with knees and legs apart. Cover the person so exposure is as minimal as possible.
- Make sure that you are wearing gloves.
- Prepare medication.
- Insert medication.
- By hand: apply the ordered amount of medication on a gloved finger. Gently insert the medication 2-3 inches into the vagina along the vaginal wall.
- By applicator: gently insert the applicator 2-3 inches into vagina, push the plunger, releasing the medication along the back of the vagina.
- Wipe vaginal opening (if necessary).
- Encourage the person to stay lying down for 20 minutes to increase medication absorption.
- Clean the applicator (if applicable).

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RECTAL SUPPOSITORIES

- Position the person in a bed on his/her left side (with as little exposure as possible).
- Make sure that you are wearing gloves.
- Remove wrapper from medication.
- Lubricate suppository as directed on package or on suppository tip.
- Gently insert pointed end into the person's rectum. Have the person breathe during the procedure to help him/her relax the anal sphincter. Make sure the suppository is pressed against the wall of the rectum and not lodged in feces.
- If the person feels weak or debilitated, have him/her compress buttocks together for several minutes to keep the medication from being expelled.
- The person should avoid a bowel movement for 20 minutes so that the medication can be absorbed through the rectal wall.

PENILE CREAMS

- Have the person use the restroom.
- Position the person comfortably on back.
- Make sure that you are wearing gloves.
- Cover the person so exposure is as minimal as possible.
- Prepare the skin area to be treated. Usually, the previous medication should be washed away, and the area should be rinsed and patted dry.
- Gloves should be changed after cleaning the area.
- Apply cream to affected area following directions on medication label.

TOPICAL MEDICATIONS

- Make sure that you are wearing gloves.
- Prepare the skin area to be treated. Usually, the previous medication should be washed away, and the area should be rinsed and patted dry.
- Gloves should be changed after cleaning the area.
- Apply a thin coat of medication to affected area, as ordered.

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METERED DOSE INHALANTS

- Assist the person to an upright position (e.g., in a chair).
- Shake the medication as directed on inhaler package.
- Make sure that you are wearing gloves.
- Instruct the person to breathe out fully.
- Remove top to inhaler and place mouthpiece into the person's mouth. Encourage the person to cover the mouthpiece with his/her lips. Assist the person to hold onto the inhaler.
- As the person inhales, ask him/her to activate the inhaler and continue inhaling as deeply and as long as possible.
- The person needs to hold his/her breath as long as comfortable to allow absorption of the medication into the lung tissues.
- Repeat at one-minute intervals if the physician order is for more than one "puff."

TRANSDERMAL PATCHES

- Assist the person to the appropriate position.
- Make sure that you are wearing gloves.
- Locate the old patch and remove it.
- Identify the correct site for the new patch, using a standard rotation pattern.
- Carefully remove the clear plastic backing from the patch, exposing the medication. The medication side is then pressed firmly onto the skin.
- Place old patch inside hand and roll glove off over patch. Discard.
- Additional guidelines are as follows:
 - Always remove the old patch before you apply the new patch.
 - Most orders for patches will say what days and times to apply new patches.
 - Apply the patches to an area that is normally covered by clothing. Sometimes the order will state where to place the patch.
 - Most patches can be worn while bathing, showering or swimming and will not come off.
 - If possible, patches should be applied after bathing.
 - Patches should be replaced if they become partially dislodged. Notify the doctor or health care provider if this is a frequent problem.
 - The outside of the patch is adhesive and will hold the patch tightly to the skin after it is pressed onto the skin.
 - Remember not to touch the medication. If you do, wash your hands thoroughly.