Medication Administration Test

1. Informed Consent is:
2. given when the foster parents is distracted
3. something that only a CPS worker can give
4. given voluntarily and without undue influence
5. No clue
6. When a doctor prescribes a psychotropic medication, the foster parent(s) should do the following:
7. Absolutely nothing.
8. The doctor and yourself fill out the psychotropic medication treatment consent (form 4526) and send a copy of it into Anchor Family Services as well as CPS
9. Ignore what the doctor says
10. Just put the new medication on the medication log. Anchor Family Services and CPS will see a psychotropic medication has been added when you send in the monthly notes.
11. When storing a child’s medication, you need to:
12. Get one of those cute pill organizers
13. Put the child’s medication in a little baggie in your purse when out and about for the day
14. Store all medication in the original container
15. Every child is different. Do whatever works!
16. One of my foster children has tested positive for strep throat and was prescribed medication. Another foster child is showing the exact same symptoms and I am pretty positive this child also has strep throat. I should do the following:
17. Go ahead and give the foster child I suspect having strep throat medication from the child with confirmed strep throat. There is no harm in sharing
18. Call doctor’s office to discuss symptoms and treatment options for child with suspected strep throat. Most likely they will want you to set up an appointment for suspected child to come in and get tested
19. Nothing because its probably nothing
20. Give all the foster child in the home the medication that was prescribed to the child with strep throat. It is better to prevent everyone in the home getting strep.

1. I am giving a child a medication that I just do not think is working: I should do the following:
2. Stop giving the medication. It is not working.
3. Keep giving the medication and speak to the healthcare professional about your concerns. Only stop giving the medication if the healthcare professional tells you to.
4. Stop giving the medication and try a more holistic approach
5. Try for a few more days and if the medication is still not working then quit giving the medication.
6. A older child wants to give him/herself their own medication. Before that can happen which of the following should take place:
7. The child’s birth parent must give written authorization for the child to be apart of the program
8. Child’s service plan must include self medication program and any requirements for care-giver’s supervision
9. The healthcare professional (HCP) must be consulted and any correspondence from the HCP documented in the child’s record
10. All of the above.
11. Medication should be stored:
12. In a locked container.
13. In a medicine cabinet
14. On the countertop
15. In the child’s room
16. Controlled Substances should be stored:
17. Double locked in a locked container inside another locked place (behind a locked door, locked file cabinet, etc)
18. A locked container is good enough
19. Can not even have them in the house
20. In the foster parent’s bedroom.
21. When I administer medication to a child, it should be recorded on the medication log:
22. Best practice is immediately but no later than 24 hours.
23. At the end of the month before I turn everything in.
24. Just as I can because my life is busy
25. I don’t have to record medication administration on a medication log.
26. Please list the 7 things in the video that are considered a medication error:
27. If find a label error on the child medication, you should do the following:
28. Nothing. You are not a trained pharmacist or the doctor
29. Contact the pharmacist immediately
30. Have the label on the container corrected immediately, but no later than the next business day.
31. Both B & C
32. When documenting about the medication and the child the following is a best practice:
33. Any desired or undesired effect
34. Any changes you notice in the child’s behavior or physical symptoms
35. Any orders or instructions the healthcare professional tells you
36. How the child responds to taking the medication (i.e. refusal, mood, etc)
37. All of the above