

# SOP: Medication Administration and Documentation

This SOP details the procedures for **medication administration and documentation** to ensure accurate, safe, and effective delivery of medications to patients. It covers proper medication preparation, dosage verification, administration techniques, monitoring patient responses, and timely, precise record-keeping to maintain compliance with regulatory standards and promote patient safety.

## 1. Purpose

To provide standardized procedures for the preparation, administration, and documentation of medications, ensuring the safety, accuracy, and well-being of patients.

## 2. Scope

This SOP applies to all clinical staff authorized to administer medications, including registered nurses, licensed practical nurses, and other healthcare professionals, in all clinical settings.

## 3. Responsibilities

- All staff must adhere to this SOP at all times.
- Managers are responsible for ensuring that staff are properly trained in medication administration and documentation.
- Clinical staff are responsible for accurate administration and record-keeping.

## 4. Definitions

Term	Definition
Medication Administration	The process of preparing and delivering a prescribed drug to a patient.
Documentation	The accurate and timely recording of all relevant information related to medication administration.

## 5. Procedures

### 5.1 Preparation

1. Verify the medication order for accuracy and completeness.
2. Wash hands and assemble necessary equipment and supplies.
3. Confirm the patient identity using at least two identifiers (e.g., name and date of birth).
4. Check for any patient allergies.
5. Collect and prepare the correct medication and dosage as prescribed.
6. Review medication expiration dates and integrity of packaging.

### 5.2 Dosage Verification

- Confirm the five rights of medication administration:
  - a. Right patient
  - b. Right medication
  - c. Right dose
  - d. Right route
  - e. Right time
- Double-check calculations for high-alert or pediatric medications.

### 5.3 Administration Techniques

1. Explain the procedure and medication purpose to the patient.
2. Administer the medication using the correct technique and route (oral, IV, IM, SC, etc.).
3. Monitor the patient for immediate adverse reactions.
4. Dispose of used materials safely and according to facility protocol.

## 5.4 Monitoring Patient Response

1. Observe the patient for expected therapeutic effects and adverse reactions.
2. Report any adverse effects to the prescriber promptly.
3. Document observations as required.

## 5.5 Documentation

1. Document the following in the patient's medication record immediately after administration:
  - Date and time of administration
  - Medication name, dose, and route
  - Site of administration (if applicable)
  - Any observed effects or adverse reactions
  - Initials and signature of administering staff
2. If medication was omitted or refused, document the reason and notify the prescriber as necessary.
3. Record any incidents or unusual outcomes according to the facility's incident reporting policy.

## 6. Compliance & References

- This SOP conforms with relevant federal, state, and local regulations and organizational policies.
- Refer to institutional protocols, the current Medication Administration Policy, and state nursing board guidelines.

**Review Date:** \_\_\_\_\_ **Approved By:** \_\_\_\_\_