

WAC 246-841-589 Medication administration and performing prescriber ordered treatments. (1) A medication assistant working in a nursing home shall only accept direction to perform medication administration and prescriber ordered treatments from a designated registered nurse within the medication assistant's scope of practice, education, and demonstrated competency.

(2) It is the responsibility of the designated registered nurse to assess the individual needs of each resident and determine that the direction of medication administration or selected treatment tasks poses minimal risks to each resident. The designated registered nurse determines the frequency of resident assessments and decides the number and types of medications to be administered.

(3) The medication assistant under the direct supervision of a registered nurse in a nursing home, may:

(a) Administer over-the-counter medications;

(b) Administer legend drugs, with the exception of chemotherapeutic agents and experimental drugs;

(c) Administer schedule IV and V medications orally, topically, and through inhalation;

(d) Perform simple prescriber-ordered treatments which include blood glucose monitoring, noncomplex clean dressing changes, pulse oximetry readings, and oxygen administration. "Prescriber ordered treatment" means an order for drugs or treatments issued by a practitioner authorized by law or rule in the state of Washington to prescribe drugs or treatments in the course of his or her professional practice for a legitimate medical purpose.

(4) The medication assistant shall document accurately the administration of medication and performance of resident treatments that he or she undertakes into the resident's medical records on facility-approved forms.

(5) Performance of the tasks identified in subsection (1) of this section will be the sole work assignment to the medication assistant.

(6) A medication assistant may not perform the following tasks:

(a) Assessment of resident need for, or response to medication;

(b) Acceptance of telephone or verbal orders from prescribers;

(c) Conversion or calculation of drug dosages;

(d) Injection of any medications;

(e) Administration of chemotherapeutic agents and experimental drugs;

(f) Performance of any sterile task or treatment;

(g) Medication administration through a tube;

(h) Administration or participation in the handling, including counting or disposal, of any schedule I, II, or III controlled substances;

(i) Participation in any handling, including counting or disposal, of schedule IV and V controlled substances other than when administering these substances as authorized by subsection (3)(c) of this section;

(j) Performance of any task requiring nursing judgment, such as administration of **as necessary or as needed (prn)** medications.

[Statutory Authority: 2012 c 208 and RCW 18.88A.060. WSR 13-15-012, § 246-841-589, filed 7/8/13, effective 7/8/13.]