



EHR Go Guide: Medication Administration

Introduction

Medication administration is one of the most important aspects of safe patient care. The EHR assists health care professionals with safety by providing up-to-date patient information. Some EHR systems have built-in error checking when medication orders are entered to verify there are not any conflicts with allergies or other medication orders. Even if there is error checking, it is important to always review the patient's identity, current condition, vital signs, other active medications, administration history, allergies, and other treatment orders when giving medications.

The term 'medication administration' generally refers to a health care professional administering a scheduled medication or infusion for someone who is considered an inpatient. This guide does not address outpatient medications which are typically self-administered by the patient.

The EHR provides details about the medication order, including the dosage, route, frequency, and additional information from the provider who created the order. Scheduled medications and infusions are administered individually in the EHR. In EHR Go, inpatient medications can be administered with or without a barcode scanner, as you may encounter in practice.

Additional resources

For additional information on entering or modifying medication orders, please refer to the *EHR Go Guide to Medication Orders*. This guide focuses on medication administration. If you're a faculty user and you'd like to add a past medication administration to a case patient, please see the *EHR Go Guide to Adding Medication History*.

FAQs about medication administration

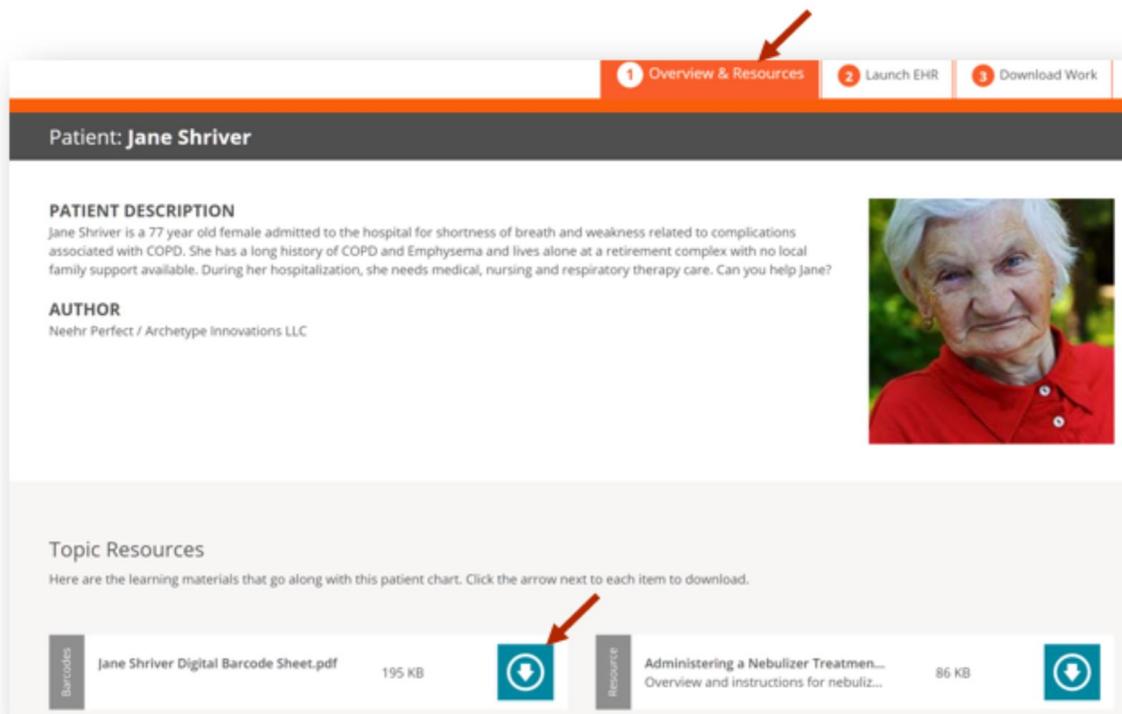
- 1. I don't have a scanner or barcodes. Can I still administer medications in a patient chart?**
 - a. Yes, medications can be administered without a scanner or barcodes. Please see *Administering Medications* section.
- 2. How do I know when the case patient last received a medication?**



- a. The administration history will be displayed on the Meds tab. It is also displayed within the order details after selecting a specific order.
- 3. The case patient refused the medication being administered. How is this documented?**
 - a. After scanning or entering the medication barcode number for the attempted medication, the Dispensed Status can be updated accordingly. See *Administration Exceptions* section. It is important to document this before selecting OK to confirm medication documentation, as it cannot be undone after doing so.

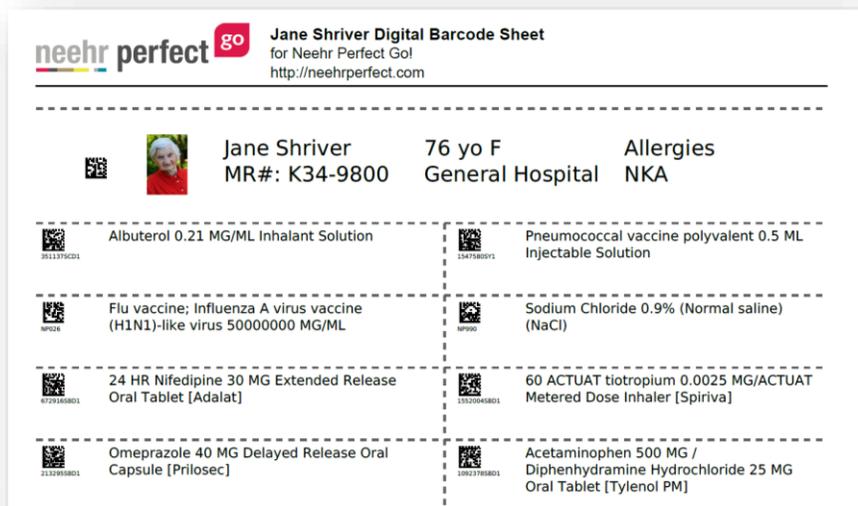
Locating patient barcodes

If you did not receive the patient barcodes from your instructor, you can locate them in Go for applicable inpatient activities. After clicking on an activity, select Step 1: **Overview & Resources**. Then click on the download icon for the file labeled 'Barcodes'.





A PDF file will download and, depending on your web browser, you may need to click the file to open it. The file may be saved or printed. Please note that you will need to print the barcodes in order to scan them (they cannot be scanned on the computer screen).



Accessing medication orders in the EHR

Medication orders can either be viewed from the Orders tab or the Meds tab. The Meds tab displays only medication orders for easier viewing and includes the administration history. However, new medication orders must be added from the Orders tab. Please see separate *EHR Go Guide to Medication Orders* for information on adding medication orders to a chart or editing an existing medication order. This guide focuses specifically on giving medications, not adding new medication orders.

After launching the EHR for any patient, select the Meds tab on the left side of the screen:



ehr go

Hello Student. EHR Orientation Session currently in progress. [Close Session](#)

Don't forget! Close your session to save your work.

Patient: Jane Shriver
General Hospital

DOB: 08/26/1941 76 yo F
Admit Date: 07/03/2018 07:06

MR#: K34-9800
Fall Risk

Discovery

Health

Overview

Alerts

Problems

Vitals

Orders

Meds

Notes

Care Plans

Labs

Pharmacy

Overview

Patient Info

NAME	CONTACT INFORMATION	PATIENT LANGUAGE	PATIENT RACE/ ETHNICITY
Shriver, Jane	218-555-1234 (Home)		White or Caucasian

Encounters

DATE	LOCATION	PROVIDER	STATUS	DESCRIPTION
07/03/2018 07:06	General Hospital	Richard Chertberlain, MD		Acute exacerbation COPD, Sinus tachycardia, Edema secondary to acute exacerbation of COPD, R/O Cor Pulmonale

Alerts

DATE & TIME	SUBJECT	STATUS	ALERT TYPE
07/03/2018 07:06	Fall Risk	Active	Clinical Warning

Problems

The summary view shown below provides the Category, Drug Description, Order Status, Frequency, and Admin History for all medication orders.

ehr go

Patient: Jane Shriver
General Hospital

DOB: 08/26/1939 76 yo F
Admit Date: 06/21/2016 06:28

MR#: K34-9800
Fall Risk

Discovery

Health

Overview

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Meds

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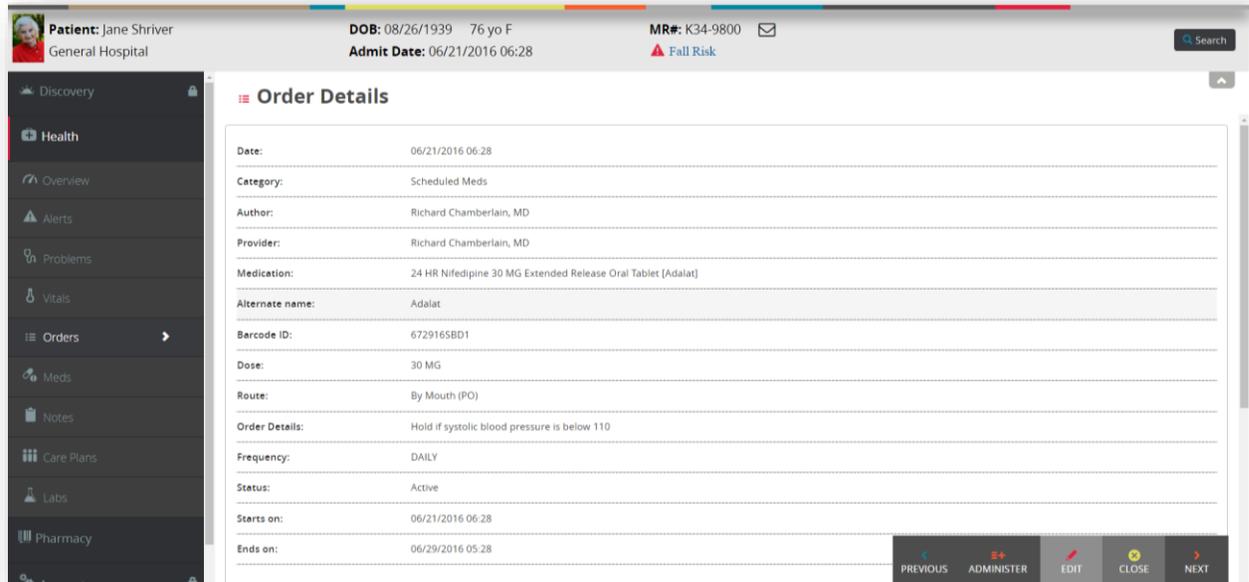
Meds & Administration History

CATEGORY	DRUG DESCRIPTION	ORDER STATUS	FREQUENCY	ADMIN HISTORY
Scheduled Meds	Albuterol 0.21 MG/ML Inhalant Solution - Dose: 1 ML in 5 ML saline neb	Active	AS DIRECTED PRN	No administrations.
Scheduled Meds	Pneumococcal vaccine polyvalent 0.5 ML Injectable Solution - Dose: 0.5 ML	Active	ONCE	06/21/2016 09:46 0.5 ML Given via Intramuscular (IM) by Kim Anderson, RN
Scheduled Meds	Flu vaccine; Influenza A virus vaccine (H1N1)-like virus 50000000 MG/ML - Dose: 1 ML	Active	ONCE	No administrations.
Scheduled Meds	Sodium Chloride 0.9% (Normal saline) (NaCl) - Dose: 1000 ML	Active	NOW	No administrations.
Scheduled Meds	24 HR Nifedipine 30 MG Extended Release Oral Tablet [Adalat] - Dose: 30 MG	Active	DAILY	06/21/2016 09:45 30 MG Given via By Mouth (PO) by Kim Anderson, RN
Scheduled Meds	60 ACTUAT tiotropium 0.0025 MG/ACTUAT Metered Dose Inhaler [Spiriva] - Dose: 2 puffs daily	Active	DAILY	No administrations.
Scheduled Meds	Omeprazole 40 MG Delayed Release Oral Capsule [Prilosec] - Dose: 40 MG	Active	DAILY	06/21/2016 09:44 Given via By Mouth (PO) by Kim Anderson, RN
Scheduled Meds	Acetaminophen 500 MG / Diphenhydramine Hydrochloride 25 MG Oral Tablet [Tylenol PM] - Dose: 1-2	Active	AS DIRECTED PRN	No administrations.
Scheduled Meds	A-MethaPred (as methylprednisolone sodium succinate) 62.5 MG/ML Injectable Solution - Dose: 125 MG	Active	Q6H	06/21/2016 09:47 125 MG Given via Intravenous (IV) by Kim Anderson, RN
Scheduled Meds	1 ML Morphine Sulfate 2 MG/ML Prefilled Syringe - Dose: 2 MG	Active	AS DIRECTED PRN	No administrations.

ADMINISTER



Click on any medication order in the listing to access the Order Details:



From this details view, you may select from the following menu options found in the bottom, right corner of the screen:

Previous: Brings you to the previous medication order in the list if you're not already looking at the first order.

Administer: This allows you to document the medication administration in the chart with or without a barcode and/or scanner. See *Administering Medications* section.

Delete: This option will appear only for medication orders that you have entered, allowing you to completely delete the order. Warning: Deleting the order permanently removes it from the chart and it cannot be recovered.

Edit: Allows you to modify an active order. Most often, an active order is edited to update the status to keep the order list up-to-date. However, you may edit an active order to modify any of the existing field entries and/or add a new comment to the



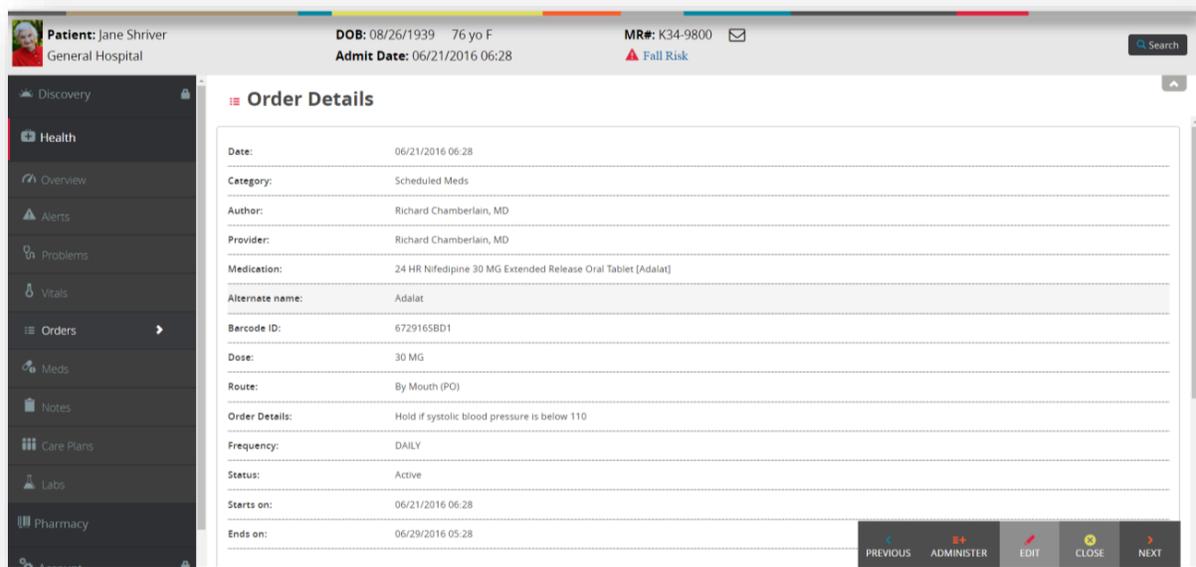
order. See separate *Go Guide to Medication Orders* for more information on editing orders or entering a new order.

Close: Exits the details view of the specific order and returns to the summary list.

Next: Brings you to the next medication order in the list if you're not already looking at the last order.

Medication details

After selecting a medication order, additional details are displayed.



The order details for Scheduled Medications include:

Date: Reflects the date the order was entered in the chart.



Category: Indicates type of order; in most cases this will indicate ‘Scheduled Meds’ of ‘Infusion Meds’ for inpatient medication orders. (Prescriptions and Home Meds are not administered in the EHR and are not described in this guide).

Author: Indicates the person who entered the order in the chart. The author may be different than the provider who may have called-in the order or is otherwise responsible for reviewing the patient’s orders. See **Provider** field.

Provider: The licensed provider who is the responsible party for the medication order.

Medication: The drug name as it appears in the formulary. The formulary in Go is from the National Drug File.

Alternate Name: The author of the order may choose to manually enter any alternate name(s) for the medication selected above. An example might be an order for aspirin. Aspirin is also sometimes referred to in practice as ASA. ASA is the Alternate Name.

Barcode ID: The number associated with the specific medication ordered. It is used for generating barcodes.

Dose/Dosage: The amount the patient should receive with each administration.

Route: How the drug is administered to the patient. For example, if the drug is taken orally, ‘By mouth (PO)’ will be displayed.

Order Details: Additional information the author may choose to add about the medication order.

Frequency: How often the medication is to be administered. Pre-defined options are provided including: As Directed, Now, Once, Daily, Q4H, etc. Refer to a medical terminology guide if you’re unsure what the frequency indicates. The frequency may or may not include specific administration times.

Status: Indicates if the medication order is currently valid. Only those with a status of Active or Changed may be administered. Status options include:

Expired: The Stop Date of the order has been reached and the order is no longer valid.



Discontinued: The order is no longer applicable and should no longer be completed.

Complete: This order was fulfilled and is no longer active.

Changed: This order has been modified from its original form.

Active: This order is active and should be completed per the ordered schedule.

Pending: This order is waiting for more information or other action from a member of the healthcare team before becoming active.

Unsigned: This order is waiting for the provider to review and sign before becoming active.

On Hold: This order is temporarily on hold and may become active again in the future.

Flagged: A member of the healthcare team indicated this order needs additional attention.

Non-Verified: This status is used for inpatient orders (Scheduled or Infusion) pending review by the pharmacist. This status must be selected if the order is to be verified in the Pharmacy section.

Not Filled: This status is used for Prescription orders pending review by the pharmacist. This status must be selected if the order is to be verified in the Pharmacy section.

Starts on: The date and time the order should take effect.

Ends on: The date the order expires and is no longer valid.

Administration History: Previous administrations of the medication are listed in this section.

Notes: Additional free-text comments the author or another user may add about the order including optional attachments.

Infusion medication orders also include:

Solution: The base solution, or primary fluid, of the IV.



Solution Volume: The total volume of the solution, typically 25 mL to 1000 mL.

Solution Rate: The rate, in mL/hour, the IV is infused to the patient.

of Bags: The number of IV bags needed to achieve the total volume or time of the infusion.

Additive: Additional components such as vitamins, medications, and/or electrolytes that need to be added to the solution (if the bag is not premixed). Multiple additives may be included.

Additive Quantity: Amount of additive included in the solution.

Prescription orders also include the following fields (and cannot be administered in the EHR):

Directions: How the patient should take the medication.

Dispense Quantity: How much is given to the patient when the prescription is filled at the pharmacy.

Days Supply: How long the dispense quantity is expected to last.

Refills: The number of times the patient can get the prescription dispensed to them by the pharmacist.

Substitution Allowed: If the pharmacist can substitute a generic or alternate version of the medication.

Administering a medication

Only scheduled medications and infusions with a status of Active or Changed can be administered in EHR Go. Prescription and Home Meds are intended to be self-administered by the patient and are not administered in the EHR.

To give an active medication, select the Meds tab then **Administer** in the bottom, right corner:



Patient: Jane Shriver
General Hospital

DOB: 08/26/1939 76 yo F
Admit Date: 06/21/2016 06:28

MR#: K34-9800
Fall Risk

Meds & Administration History

CATEGORY	DRUG DESCRIPTION	ORDER STATUS	FREQUENCY	ADMIN HISTORY
Scheduled Meds	Albuterol 0.21 MG/ML Inhalant Solution - Dose: 1 ML in 5 ML saline neb	Active	AS DIRECTED PRN	No administrations.
Scheduled Meds	Pneumococcal vaccine polyvalent 0.5 ML injectable Solution - Dose: 0.5 ML	Active	ONCE	06/21/2016 09:46 0.5 ML Given via Intramuscular (IM) by Kim Anderson, RN
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Scheduled Meds	Sodium Chloride 0.9% (Normal saline) (NaCl) - Dose: 1000 ML	Active	NOW	No administrations.
Scheduled Meds	24 HR Nifedipine 30 MG Extended Release Oral Tablet [Adalat] - Dose: 30 MG	Active	DAILY	06/21/2016 09:45 30 MG Given via By Mouth (PO) by Kim Anderson, RN
Scheduled Meds	60 ACTUAT tiotropium 0.0025 MG/ACTUAT Metered Dose Inhaler (Spirival) - Dose: 2 puffs daily	Active	DAILY	No administrations.
Scheduled Meds	Omeprazole 40 MG Delayed Release Oral Capsule (Prilosec) - Dose: 40 MG	Active	DAILY	06/21/2016 09:44 Given via By Mouth (PO) by Kim Anderson, RN
Scheduled Meds	Acetaminophen 500 MG / Diphenhydramine Hydrochloride 25 MG Oral Tablet (Tylenol PM) - Dose: 1-2	Active	AS DIRECTED PRN	No administrations.
Scheduled Meds	A-MethaPred (as methylprednisolone sodium succinate) 62.5 MG/ML Injectable Solution - Dose: 125 MG	Active	Q6H	06/21/2016 09:47 125 MG Given via Intravenous (IV) by Kim Anderson, RN
Scheduled Meds	1 ML Morphine Sulfate 2 MG/ML Prefilled Syringe - Dose: 2 MG	Active	AS DIRECTED PRN	No administrations.

ADMINISTER

Note: medications can also be administered from the Orders tab after selecting a specific medication order.

First, you will be prompted to enter the patient's medical record number (MR#).

Patient: Jane Shriver
General Hospital

DOB: 08/26/1939 76 yo F
Admit Date: 06/21/2016 06:28

MR#: K34-9800
Fall Risk

Meds & Administration History

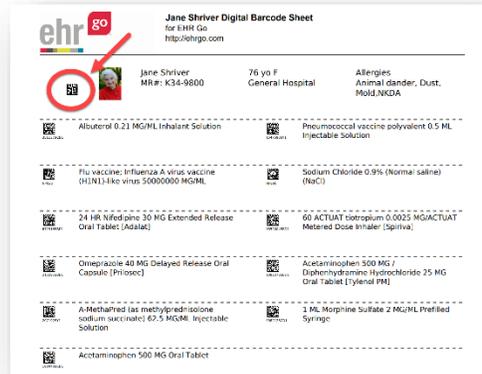
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Scheduled Meds	1 ML Morphine Sulfate 2 MG/ML Prefilled Syringe - Dose: 2 MG	Active	AS DIRECTED PRN	No administrations.

Enter Patient MR#

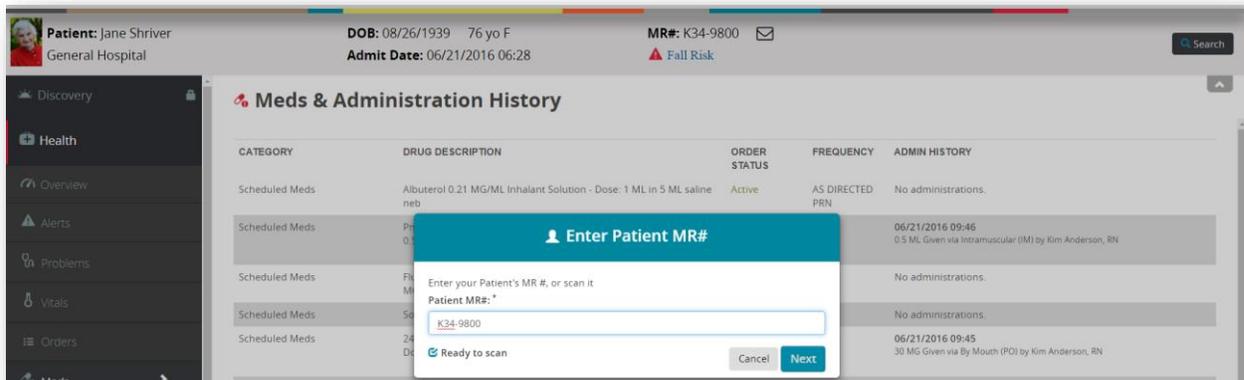
Enter your Patient's MR #, or scan it

Patient MR#: *

If you have a compatible barcode scanner, scan the patient wristband barcode. The wristband barcode is found on the top of the barcode sheet and includes the patient's name and MR#:

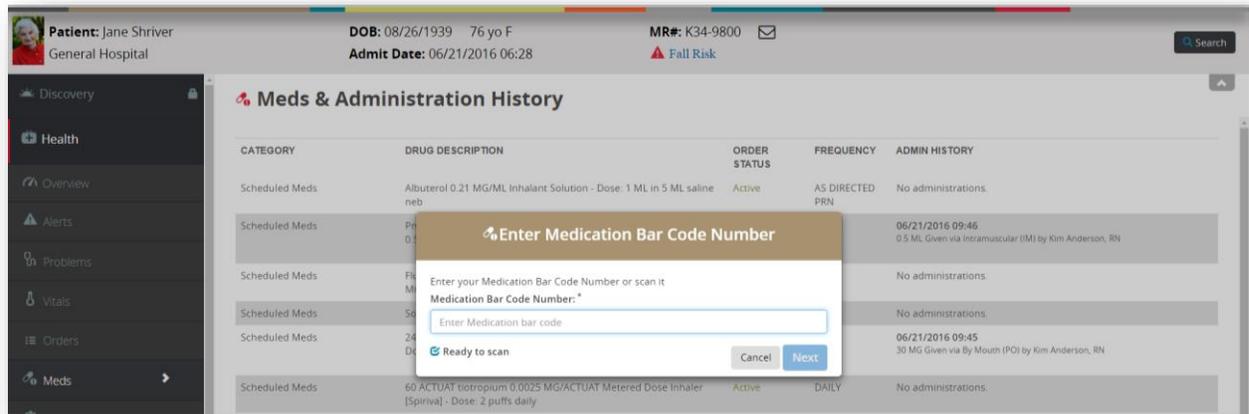


Or you may choose to manually enter the MR# without a scanner. Locate the MR# for the specific patient at the top of the screen and type the MR# exactly as it appears including capitalization and the dash (-).



After the MR# is scanned or typed, click **Next**.

After the MR# is verified, you will be prompted to enter the medication barcode number for the med you're administering.

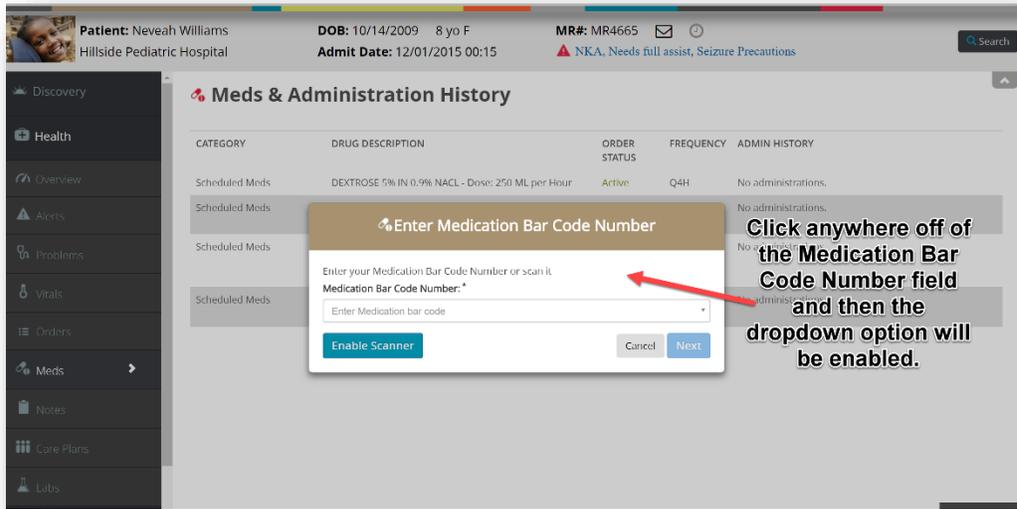


Again, this can either be scanned in or entered manually. When scanning the barcode, be sure to select the correct barcode. If you're manually entering the medication barcode number, you can find it as part of the barcode sheet or in the Order Details after selecting a medication order. However, the easiest option is just to select the medication from the dropdown menu.

Click anywhere outside of the text field. That indicates to the system that you're not using a scanner and then a dropdown list of the patient's existing med orders will appear. Simply select

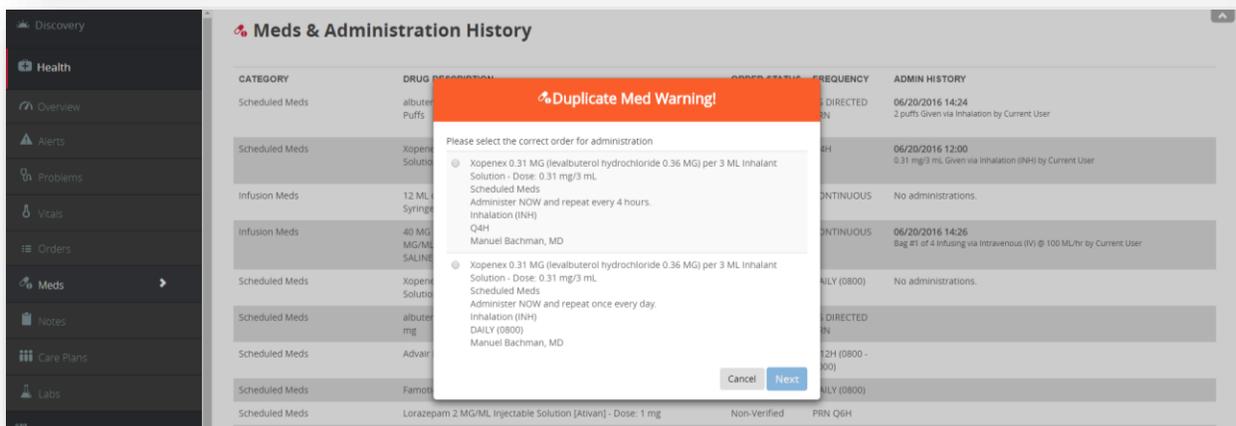


the medication being administered from the list rather than manually typing it in.



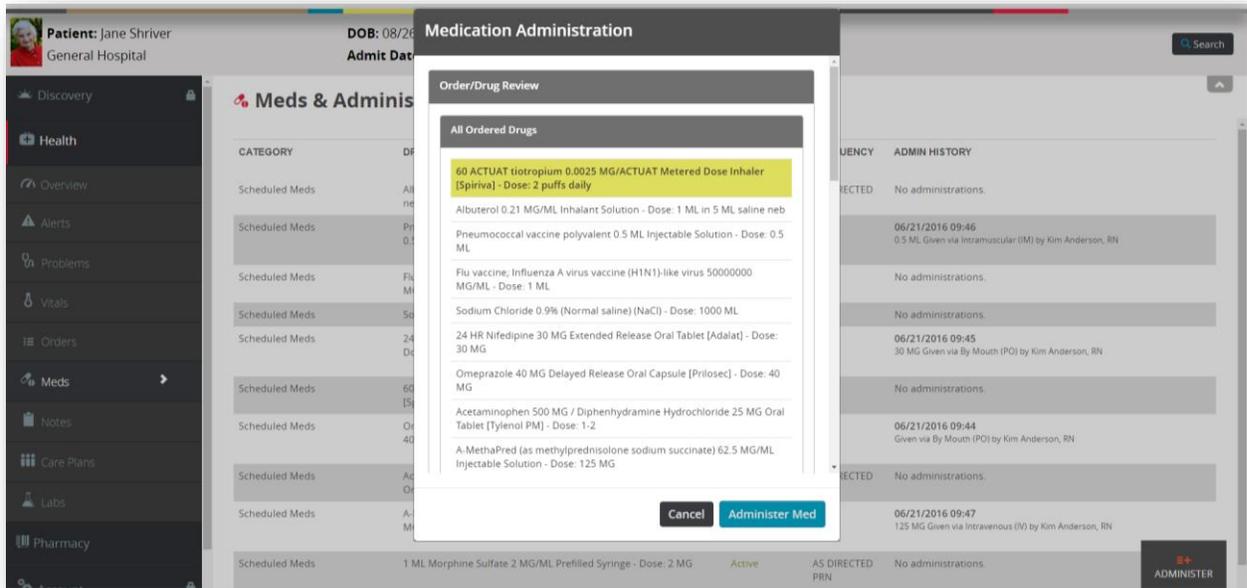
After the medication barcode is selected or scanned in, select **Next**.

If there is more than one order for the same medication, a Duplicate Med Warning will appear, prompting you to select the intended dosage.



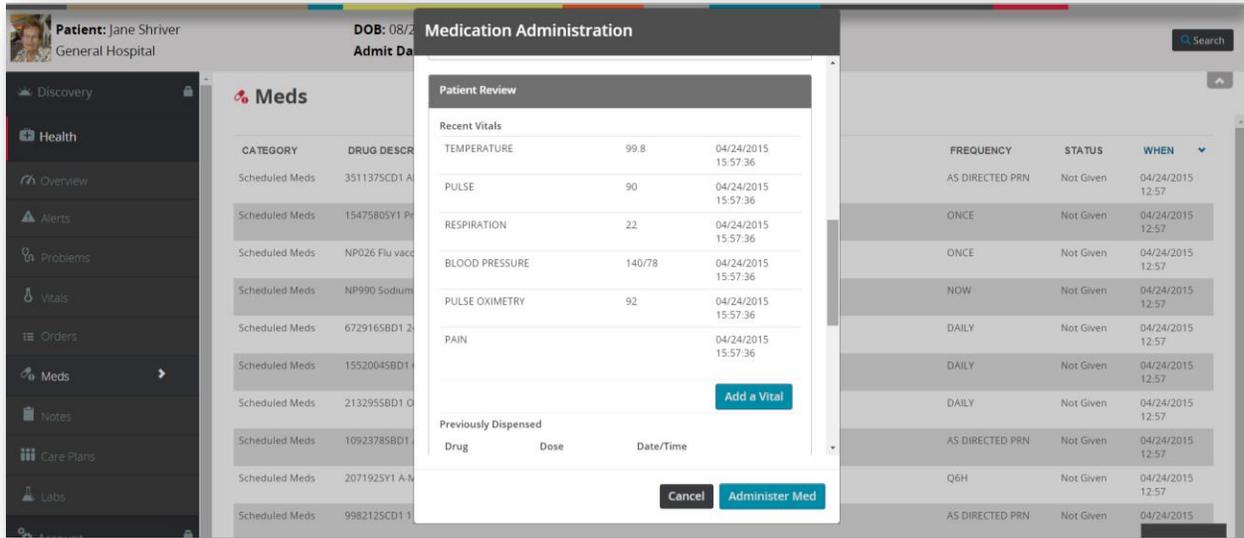


Otherwise, a Medication Administration window will appear and will first prompt you to review the scanned or entered drug and confirm it is the correct one you're planning to administer. Ensure the correct medication is selected.



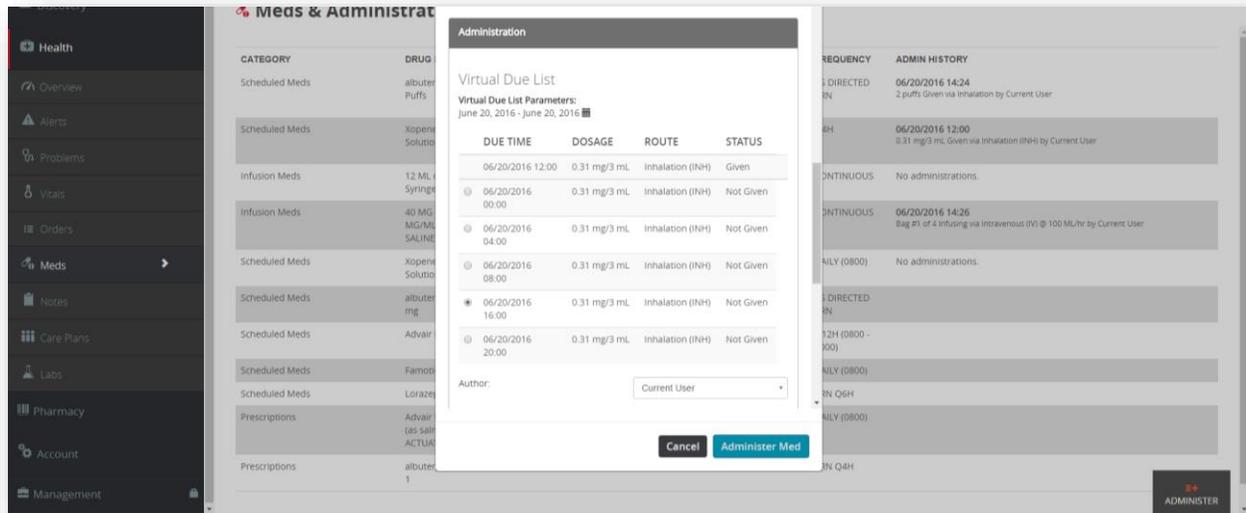
If the medication displayed does not match the drug you intended to administer, select **Cancel** and begin the process again, ensuring that you're using the correct barcode or manually selecting the correct medication.

Otherwise, **scroll down** in the Medication Administration window to review the patient's last entered vitals to confirm the medication can safely be administered:

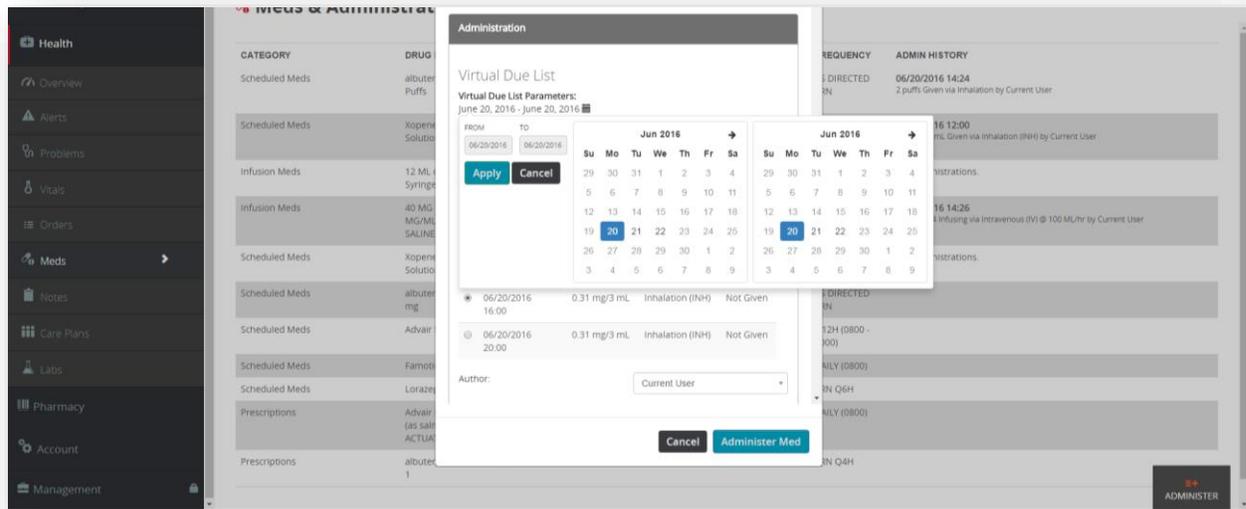


If desired, select **Add a Vital** to enter a new set of vitals. When administering sliding scale insulin, the blood glucose reading (Accucheck) can be documented by adding a vital. See the *Administering Sliding Scale Insulin* section of this guide.

Continue scrolling down the Order/Drug Review window. If the drug being administered has specific due times for that day, you'll see a Virtual Due List. Select the dosage you're administering. Dosages that have already been given will not appear on the list.

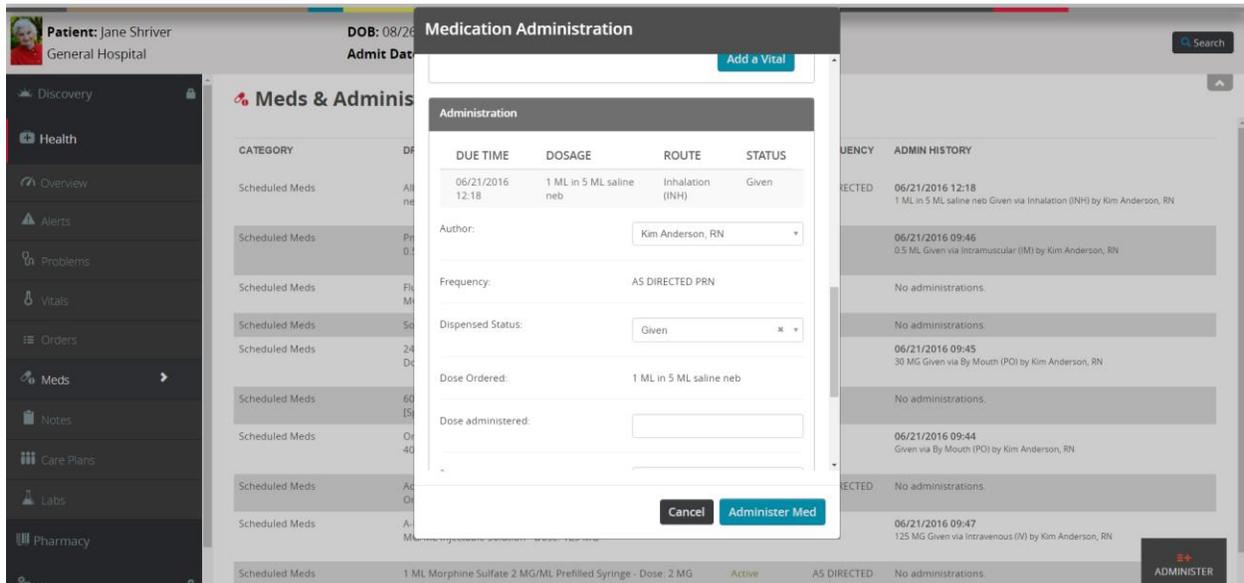


If you're trying to give a dose that is/was due on a different date, select the calendar icon to change the date of the Virtual Due List.





If you're administering a medication that doesn't have a pre-defined schedule or is a PRN medication, you will not see a Virtual Due List and the EHR will automatically select the current date/time for the administration time. Any previous administrations will be listed at the top of the Administration section.



Continue scrolling and populate any remaining fields, as applicable:

Author: By default, 'Current User' will be selected which will indicate you gave the med. Alternate authors may be selected from the dropdown list.

Dispensed Status: By default, 'Given' will be selected for scheduled meds and 'Infusing' will be selected for infusions. See next section, *Administration Exceptions*, if the medication was not given or refused.

Dose administered: Manually type the amount the patient received of the specific drug. This should match the quantity specified in the order unless otherwise noted.

Solution Volume (Infusion only): This field auto-populates with the volume that was ordered.



Solution Rate (Infusions only): This field auto-populates with the rate that was ordered.

Bag (Infusions only): Select which bag is being administered from the dropdown menu.

IV Flow Rate (Infusions only): Enter the flow rate of the IV. This is typically the same as the ordered solution rate unless otherwise noted.

Route: By default, the route specified in the original order will be indicated. If the medication was administered through another route, select it from the dropdown menu to select it.

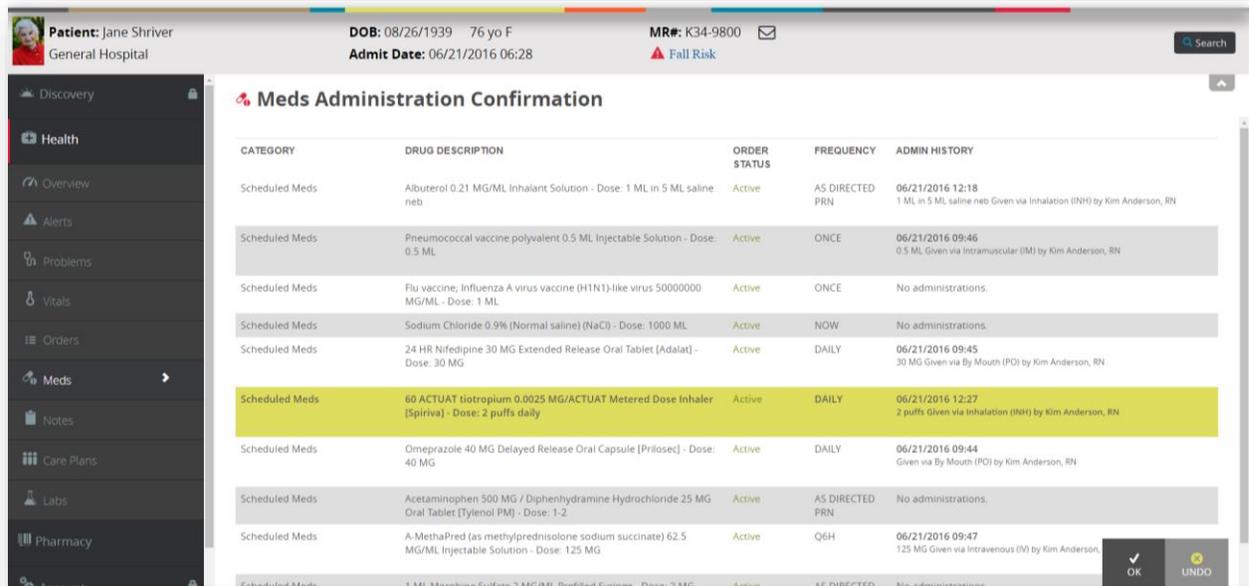
Site (if Applicable): Manually enter a site, or location, if applicable. For example, if the medication was given intramuscularly, indicate where the injection occurred.

Reason for Administration: Enter why the medication was administered. For example, it was given for nausea or blood pressure control.

Administration Details: Type any additional information relevant to this specific administration. For example, if a different dose than what was ordered was given, note the reason.

After completing the applicable fields, select **Administer Med.**

The Admin History column of the Meds tab will now display the administration information. Select **OK** if it is correct or select **Undo** if there was an error.



If Undo is selected, you'll be prompted to review the administration details and confirm Undo.

If OK is selected, the original medication order will remain active and may be given again. If no further doses of this medication are available to be given, the order status will change to Complete and cannot be administered again.

Repeat these steps to administer additional medications. As long as you remain on the Meds tab, you won't be prompted to enter the medical record number again.

Administering sliding scale insulin

Sliding scale insulin orders will appear as a scheduled medication along with the other medication orders for the patient. The sliding scale specifics are entered in the Order Details section found after selecting the order.



A screenshot of the EHR interface showing the 'Order Details' for a medication administration. The patient is Jane Shriver, 76 years old, admitted on 06/28/2018. The order is for 'Pulse Ox on admission to unit then per Oxygen Therapy guidelines' with a frequency of 'AS DIRECTED'. A red circle highlights the 'Order Details' field. The interface includes a sidebar with navigation options like Discovery, Health, Overview, Alerts, Problems, Vitals, Orders, Meds, Notes, Care Plans, Labs, Pharmacy, and Account. At the top, there is a notification: 'Hello Student. EHR Orientation Session currently in progress. Close Session. Don't forget Close your session to save your work.' The bottom of the window has buttons for PREVIOUS, EDIT, CLOSE, and NEXT.

Administer the medication following the same steps outlined in the previous section. When reviewing the details in the Medication Administration window, you may choose to **Add a Vital** to document the patient's capillary blood glucose reading (ex. Accucheck).

Patient: Emma Karson
Hillside Pediatric Hospital
DOB: 05/08/2011 5 yo F
Admit Date: 06/21/2016 16:15
MR#: MR49566
Penicillin, Full Code

Medication Administration

Patient Review

Vital	Value	Unit	Time
TEMPERATURE	36.8		06/22/2016 07:15:13
PULSE	90		06/22/2016 07:15:13
RESPIRATION	14		06/22/2016 07:15:13
BLOOD PRESSURE	110/72		06/22/2016 07:15:13
PULSE OXIMETRY	95		06/22/2016 07:15:13

[Add a Vital](#)

Administration

TIME	DOSE	ROUTE	STATUS

[Cancel](#) [Administer Med](#)

Vital Edit

Intake & Output

Vitals	Value	Unit	Qualifiers	Description
Intake:	<input type="text"/>	ml	Method	<input type="text"/>
Output:	<input type="text"/>	ml	Method	<input type="text"/>
Total:	<input type="text"/>	ml	Fluid Shift	Total Time <input type="text"/> <input type="text"/>

Glucose

Vitals	Value	Unit	Description
Capillary blood glucose reading:	155	mg/dL	<input type="text"/>

Quick Survey

Level of Consciousness and Orientation:

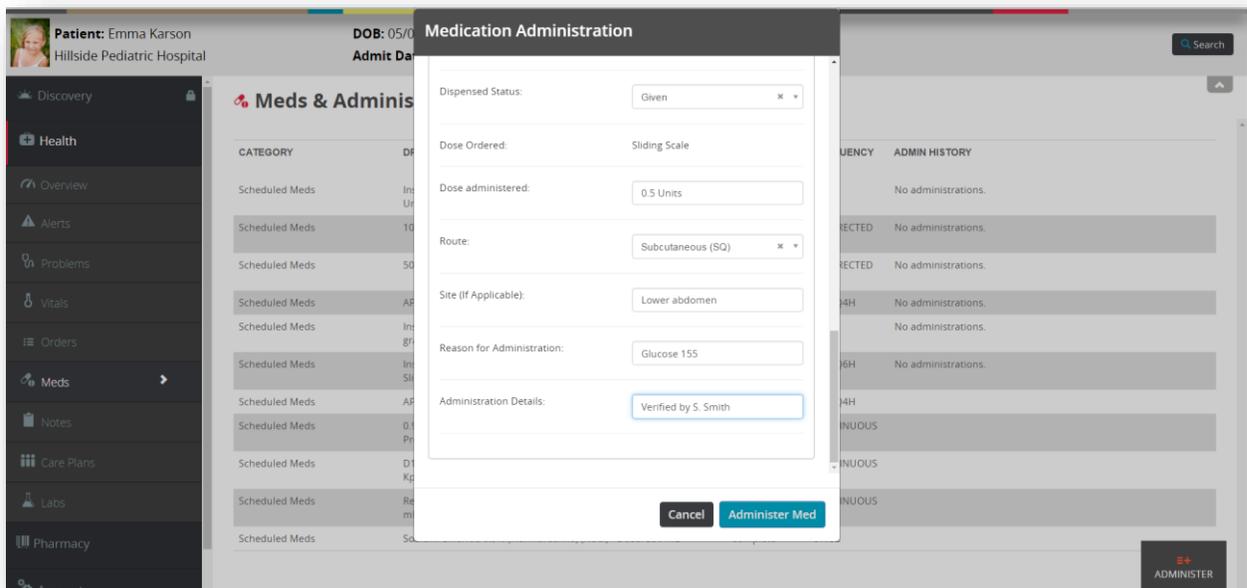
Person:	<input type="radio"/> Not Assessed	<input type="radio"/> WNL	<input type="radio"/> Abnormal	<input type="text"/>
Place:	<input type="radio"/> Not Assessed	<input type="radio"/> WNL	<input type="radio"/> Abnormal	<input type="text"/>
Time:	<input type="radio"/> Not Assessed	<input type="radio"/> WNL	<input type="radio"/> Abnormal	<input type="text"/>

[SAVE](#) [CANCEL](#)



Select **Save** when finished to return to the Medication Administration window.

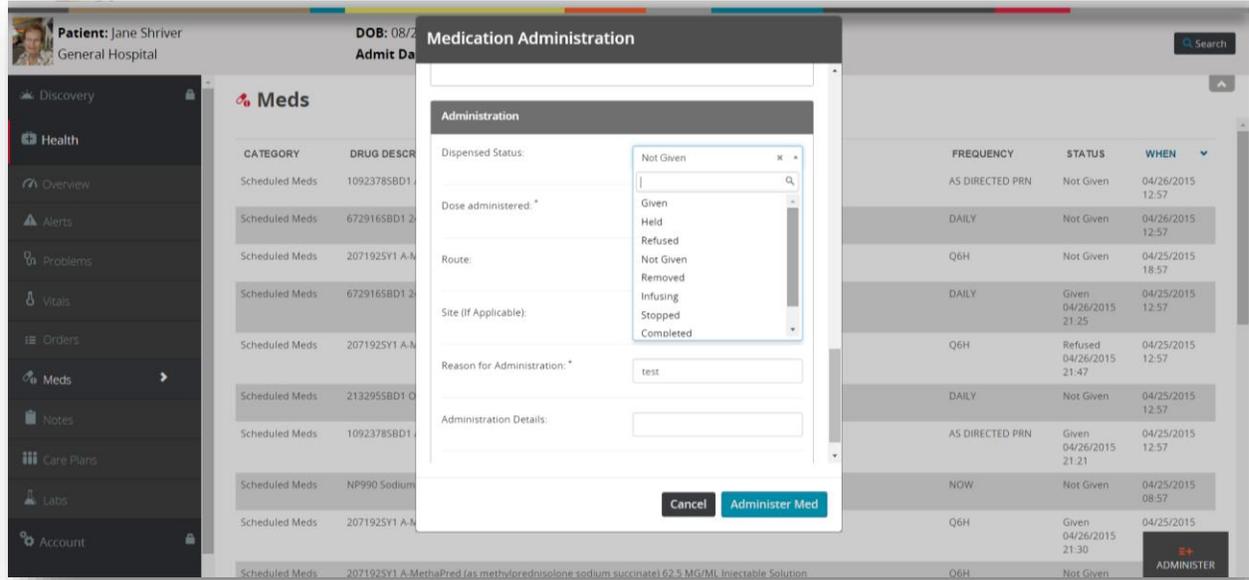
Continue entering data about the administration including Dose administered, Route, Site, and Reason for Administration. The Administration Details field may be used to document the nurse who verified the dose.



Then select **Administer Med** and confirm the administration by selecting **OK**.

Administration exceptions

Occasionally, medication administration does not go as planned. The patient may refuse to take a drug or it cannot be administered for various reasons. It is important to indicate in the EHR if a medication was refused or otherwise not administered before the medication documentation is finalized. This is achieved by changing the **Dispensed Status** field when reviewing the Medication Administration details for a particular medication.



Dispensed Status options include:

Given: The medication was successfully administered.

Held: The nurse or health care personnel decided not to give the medication.

Early: The medication was given ahead of schedule.

Late: The medication was given after the scheduled time.

Refused: The patient refused the medication and it was not administered.

Not Given: The medication was not administered.

Removed: This order has been removed and not started.

Infusing: An IV medication order was started.

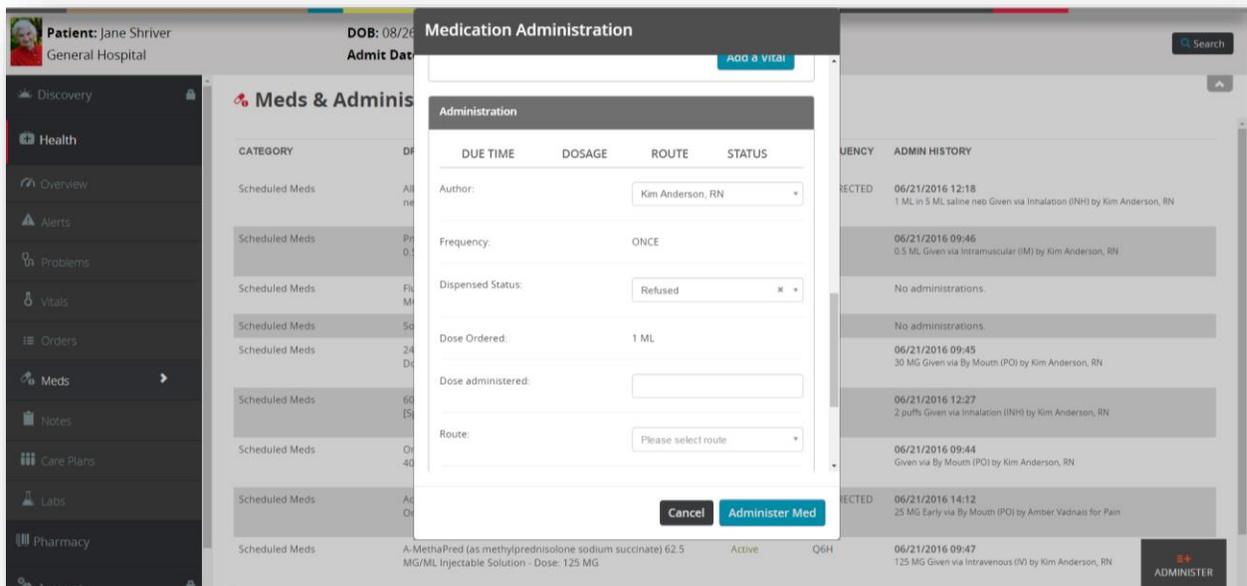
Stopped: An IV medication order was stopped by the health care team before the IV infusion was completed.



Completed: The medication order was completed successfully and there are no other scheduled doses. For example, if a medication is ordered as “Once”, it will automatically be marked as Completed by the EHR after it is given.

Missing Dose: A scheduled dose was missed for various reasons.

For example, to mark a medication as refused, scan or enter the medication barcode number when prompted. Then go through the Administration menu and select a Dispensed Status of “Refused”. You may want to document additional information in the Reason for Administration or Administration Details fields (even if the medication was not actually administered).



Then select **Administer Med** to document that it was refused. Review the highlighted order status for accuracy then select **OK** if it is correct. Select **Undo** if the order was not documented correctly.



Patient: Jane Shriver
 General Hospital
DOB: 08/26/1939 76 yo F
MR#: K34-9800
Admit Date: 06/21/2016 06:28
 Fall Risk

Meds Administration Confirmation

CATEGORY	DRUG DESCRIPTION	ORDER STATUS	FREQUENCY	ADMIN HISTORY
Scheduled Meds	Albuterol 0.21 MG/ML Inhalant Solution - Dose: 1 ML in 5 ML saline neb	Active	AS DIRECTED PRN	06/21/2016 12:18 1 ML in 5 ML saline neb Given via Inhalation (INH) by Kim Anderson, RN
Scheduled Meds	Pneumococcal vaccine polyvalent 0.5 ML Injectable Solution - Dose: 0.5 ML	Active	ONCE	06/21/2016 09:46 0.5 ML Given via Intramuscular (IM) by Kim Anderson, RN
Scheduled Meds	Flu vaccine; Influenza A virus vaccine (H1N1)-like virus 50000000 MG/ML - Dose: 1 ML	Complete	ONCE	06/21/2016 14:21 Refused by Kim Anderson, RN Patient does not want flu vaccine.
Scheduled Meds	Sodium Chloride 0.9% (Normal saline) (NaCl) - Dose: 1000 ML	Active	NOW	No administrations.
Scheduled Meds	24 HR Nifedipine 30 MG Extended Release Oral Tablet (Adalat) - Dose: 30 MG	Active	DAILY	06/21/2016 09:45 30 MG Given via By Mouth (PO) by Kim Anderson, RN
Scheduled Meds	60 ACTUAT tiotropium 0.0025 MG/ACTUAT Metered Dose Inhaler (Spiriva) - Dose: 2 puffs daily	Active	DAILY	06/21/2016 12:27 2 puffs Given via Inhalation (INH) by Kim Anderson, RN
Scheduled Meds	Omeprazole 40 MG Delayed Release Oral Capsule (Prilosec) - Dose: 40 MG	Active	DAILY	06/21/2016 09:44 Given via By Mouth (PO) by Kim Anderson, RN
Scheduled Meds	Acetaminophen 500 MG / Diphenhydramine Hydrochloride 25 MG Oral Tablet (Tylenol PM) - Dose: 1-2	Active	AS DIRECTED PRN	06/21/2016 14:12 25 MG Early via By Mouth (PO) by Amber Vadnais for Pain
Scheduled Meds	A MethaPred (as methylprednisolone sodium succinate) 62.5 MG/ML Injectable Solution - Dose: 125 MG	Active	QEH	06/21/2016 09:47 125 MG Given via Intravenous (IV) by Kim Anderson

OK UNDO

Once OK is selected, the medication documentation cannot be changed. So, it is important to confirm the patient accepted or did not accept the medication and the Dispensed Status is accurate before selecting OK.

Submitting your work

When you are finished in the patient chart, select **Close Session**. **Important!** This is how your work is saved. Do not close your browser window or tab without clicking Close Session.

Your medication administration documentation is tracked in the Progress Report for the EHR session. No one else can view your instance of the patient chart and medication activity. You must download the Progress Report for the specific EHR session and submit it to your instructor in order for them to review your work. Please see separate *Go Guide to Completing and Submitting Work* for more information.