CHAPTER 54-07-05 MEDICATION ADMINISTRATION BY A MEDICATION ASSISTANT III

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54-07-05-01. Statement of intent.

North Dakota Century Code chapter 43-12.1 allows the licensed nurse to delegate and supervise nursing interventions to individuals authorized by the board to perform those functions. Medication administration is a nursing intervention. Medication administration is the responsibility of licensed nurses and requires the knowledge, skills, and abilities of the licensed nurse to ensure public safety and accountability. The medication assistant III may perform the intervention of administering medications to the client in an ambulatory health care setting. The licensed nurse must be available to monitor the client's progress and effectiveness of the prescribed medication regimen. Delegation of medication administration for individuals with unstable or changing nursing care needs is specifically precluded by these rules.

History: Effective September 1, 1994; amended effective February 1, 1998; May 1, 1999; April 1, 2004;

August 1, 2005; October 1, 2011; April 1, 2014.

General Authority: NDCC 43-12.1-08 **Law Implemented:** NDCC 43-12.1-08(1)

54-07-05-02. Definitions.

Repealed effective April 1, 2004.

54-07-05-03. Medication management regimen.

When the licensed nurse is responsible for the management of the medication regimen, then any delegation must conform to the provisions of this chapter.

History: Effective September 1, 1994; amended effective February 1, 1998.

General Authority: NDCC 43-12.1-08 **Law Implemented:** NDCC 43-12.1-08(1)

54-07-05-04. Requirements for supervision.

A licensed nurse who delegates medication administration to a medication assistant III must provide supervision as follows:

- 1. In a licensed nursing facility or acute care setting, the licensed nurse must be on the unit and available for immediate direction.
- 2. In an ambulatory health care setting where the licensed nurse delegates the intervention of giving medications to another individual, the licensed nurse must be available for direction.

In any other setting where the licensed nurse delegates the intervention of giving medications
to another individual, the licensed nurse must follow facility policy for providing the supervision
in order to provide the recipient of the medication appropriate safeguards.

History: Effective September 1, 1994; amended effective February 1, 1998; May 1, 1999; April 1, 2004;

August 1, 2005; October 1, 2011; April 1, 2014.

General Authority: NDCC 43-12.1-08 Law Implemented: NDCC 43-12.1-08(1)

54-07-05-05. Eligibility for medication assistant III registration.

An application for registration as a medication assistant III and a forty dollar fee must be submitted by the applicant to the board office. The applicant for medication assistant III registration must have registration on the unlicensed assistive person registry. Upon receipt of the required materials, a medication assistant III registration will be issued to correspond with the applicant's registration as an unlicensed assistive person. Unlicensed assistive persons may obtain initial medication assistant III registration by:

- 1. Submitting evidence of successful completion of a course which includes medication administration from an approved nursing education program, which must have included a clinical nursing component. The course must have included basic clinical skills, basic pharmacology, principles of medication administration, and mathematics competency; or
- 2. Submitting evidence of:
 - a. Successful completion of a board-recognized medical assistant program; and
 - b. Submit verification of current certification from one of the following examinations:
 - (1) Certified medical assistant examination through the American association of medical assistants;
 - (2) Registered medical assistant certification examination through the American medical technologists;
 - (3) Clinical medical assistant certification examination through the national health career association:
 - (4) National certified medical assistant examination through the national center for competency testing; or
 - (5) The successor organization.

History: Effective September 1, 1994; amended effective February 1, 1998; May 1, 1999; April 1, 2004;

August 1, 2005; October 1, 2011; April 1, 2014.

General Authority: NDCC 43-12.1-08 **Law Implemented:** NDCC 43-12.1-09(2)(e)

54-07-05-06. Medication assistant III registration renewal.

The medication assistant III registration expiration date must correspond to the individual's unlicensed assistive person registration expiration date and must be renewable at the same time that the unlicensed assistive person registration is renewed. The applicant for renewal must:

1. Submit a completed medication assistant III renewal application that includes the unlicensed assistant person registration.

- 2. Pay the unlicensed assistive person registry renewal fee of thirty dollars and the forty dollar renewal fee for medication assistant III.
- 3. Submit verification of current certification from one of the following examinations:
 - a. Certified medical assistant examination through the American association of medical assistants;
 - b. Registered medical assistant certification examination through the American medical technologists;
 - c. Clinical medical assistant certification examination through the national health career association;
 - d. National certified medical assistant examination through the national center for competency testing;
 - e. The successor organization; or
 - f. Provide evidence of the clinical practice hours in a nursing education program within the past two years.

History: Effective September 1, 1994; amended effective February 1, 1998; May 1, 1999; April 1, 2004;

August 1, 2005; October 1, 2011; April 1, 2014.

General Authority: NDCC 43-12.1-08 **Law Implemented:** NDCC 43-12.1-10(2)

54-07-05-07. Reactivation of a medication assistant III registration.

A medication assistant III previously registered in North Dakota who applies for reactivation must meet board requirements, including the following:

- 1. Complete the application and submit to a criminal history record check according to section 54-02.1-01.
- 2. Pay the nonrefundable renewal fee and thirty dollar reactivation fee.
- 3. Submit verification of current certification from one of the following examinations:
 - a. Certified medical assistant examination through the American association of medical assistants;
 - b. Registered medical assistant certification examination through the American medical technologists;
 - c. Clinical medical assistant certification examination through the national health career association;
 - d. National certified medical assistant examination through the national center for competency testing; or
 - e. The successor organization.

History: Effective September 1, 1994; amended effective May 1, 1999; April 1, 2004; August 1, 2005;

July 1, 2008; October 1, 2011; April 1, 2014.

General Authority: NDCC 43-12.1-08 **Law Implemented:** NDCC 43-12.1-10(2)

54-07-05-08. Medication assistant III registration disciplinary action.

The registration issued to an unlicensed assistive person, including the medication assistant III registration, may be revoked, suspended, encumbered, or denied based upon the provisions of chapter 54-02-07.

History: Effective September 1, 1994; amended effective February 1, 1998; April 1, 2004; October 1,

2011.

General Authority: NDCC 43-12.1-08 **Law Implemented:** NDCC 43-12.1-14

54-07-05-09. Routes or types of medication administration.

- 1. Administration of the initial dose of a medication that has not been previously administered to the client must be administered according to organization policy.
- 2. Conversion or calculation of a medication dosage must be verified with a licensed nurse.
- 3. Medication assistants III may administer medications by the following routes to individuals or groups of individuals with stable, predictable conditions according to organization policy:
 - a. Oral, sublingual, and buccal medications;
 - b. Eye medications;
 - c. Ear medications;
 - d. Nasal medications;
 - e. Rectal medications and enemas;
 - f. Vaginal medications;
 - g. Skin ointments, topical medications, including patches and transdermal medications;
 - h. Metered hand-held inhalants;
 - i. Unit dose nebulizers:
 - j. Intramuscular injections;
 - k. Subcutaneous injections;
 - I. Intradermal injections;
 - m. Gastrostomy;
 - n. Jejunostomy;
 - o. Nasogastric tube;
 - p. Nonmetered inhaler; and
 - q. Non-unit dose aerosol or nebulizer.
- 4. Medication assistants III may not administer medications by the following routes:
 - a. Central lines;
 - b. Colostomy;

- c. Intravenous;
- d. Intravenous lock; or
- e. Urethral catheter.
- 5. Medication assistants III may not administer the following kinds of medications:
 - a. Barium and other diagnostic contrast media;
 - b. Chemotherapeutic agents except oral maintenance chemotherapy; or
 - c. Through any medication pumps, nor assume responsibility for medication pumps, including client-controlled analgesia.

History: Effective May 1, 1999; amended effective April 1, 2004; August 1, 2005; July 1, 2008;

October 1, 2011; April 1, 2014.

General Authority: NDCC 43-12.1-08 **Law Implemented:** NDCC 43-12.1-08(1)

54-07-05-10. Pro re nata medications.

- 1. The decision to administer pro re nata medications cannot be delegated in situations where an onsite assessment of the client is required prior to administration.
- 2. Some situations allow the administering of pro re nata medications without directly involving the licensed nurse prior to each administration.
 - a. The decision regarding whether an onsite assessment is required is at the discretion of the licensed nurse.
 - b. Written parameters specific to an individual client's care must be written by the licensed nurse for use by the medication assistant III when an onsite assessment is not required prior to administration of a medication. These written parameters:
 - (1) Supplement the physician's pro re nata order; and
 - (2) Provide the medication assistant III with guidelines that are specific regarding the pro re nata medication.

History: Effective May 1, 1999; amended effective October 1, 2011.

General Authority: NDCC 43-12.1-08 **Law Implemented:** NDCC 43-12.1-08(1)

54-07-05-11. Medication interventions that may not be delegated.

The following acts shall not be delegated to a medication assistant III:

- 1. Assessment of client need for or response to medication. See section 54-07-03.1-05. Accountability and responsibility within the delegation process; and
- 2. Nursing judgment regarding the administration of PRN medication.

History: Effective July 1, 2008; amended effective October 1, 2011; April 1, 2014.

General Authority: NDCC 43-12.1-08 **Law Implemented:** NDCC 43-12.1-08(1)