

BARCODE MEDICATION ADMINISTRATION (BCMA): FAQ'S AND TALKING POINTS

MEDICATION ADMINISTRATION

Q: Can I waste a medication from a vial or pre-filled syringe at the RxStation before scanning and administering the med to the patient?

A: No, medications are to be wasted after the medication has been administered.
Refer to [Standard Process: Medication Management: BCMA Wasting Medications](#).

Q: If I drop a portion of the dosage of a Scheduled medication can I still administer the remaining portion while waiting for the replacement dose?

A: No, if a portion of a **SCHEDULED** medication is dropped, do not administer the remaining portion *until* the replacement dose has been obtained from the RxStation.

[To obtain a replacement dose:](#) Submit a **Med Request** from the **MAR** for a dropped medication. When the replacement order has been placed by pharmacy, obtain the dose from RxStation.

Document '**Not Given: Duplicate Task**' on the replacement order on the **MAR** (or **MAW**) and administer entire dose to patient.

If the replacement order has not been documented as '**Not Given**' before scanning the medication, the **Filtered Task window** will display both the original order and the replacement dose order.

Select the original order to administer the medication and then document '**Not Given**' on the replacement order.

Filtered Tasks

SDU, Three MRN: 9114040003 DOB: 01/15/1974
Female FIN#: 99999882 Age: 37 years

Scanned:

Medication	Strength	Volume
	325 mg	1 tab(s)

Qualified Tasks:

Scheduled	Mnemonic	
09/16/2011 15:00	acetaminophen	325 mg, 1 tab(s), tab, PO, ONCE, Start 09/16/11 15:00:00, Sto... Exact match Replacement dose
09/16/2011 15:00	acetaminophen acetaminophen (acetaminophen oral tablet)	325 mg, tab, PO, Start: 09/16/11 15:00:00, Note: MAX 4 g/da... Exact match

Select Original Order

Q: What if the medication does not scan?

A: Continue to give the medication following the 5 Rights of medication administration. Place the empty, non-scannable medication packaging in the envelope labeled "Non Scannable Med" located at the RxStation. Put the envelope/med in the "Rx Station Room Specific Return Bin" for pharmacy to pick-up.
Refer to [Policy & Procedure: Medication Management BCMA](#).

Q: What if I drop a medication and have already documented it on the MAW?

A: If a medication is dropped or not taken by the patient and the **MAW** has already been signed, go to the **MAR** and '**unchart**' the dose. The **MAW** is to be signed after all meds have been administered.
Refer to [Standard Process; Medication Management: BCMA: Simple Medication Pass](#).

Q: Do I need to scan medications during a MET call?

A: No, MET calls or Code situations do not require scanning of medications prior to administration. Refer to [Policy & Procedure: Medication Management BCMA](#).

Q: How do I 'unchart' a medication that was not given?

A: Go to the **MAR** and right click on the charted dose and select **Unchart**.

Q: Do I need to scan irrigation solutions (e.g. Normal Saline for a CBI)?

A: Yes, all ordered medications should be scanned before administration, with the exception of medications administered during a MET call or in a Code situation.

Q: I have an order for 500mL Normal Saline bolus and I scanned a 1000mL Normal Saline bag and received an alert? Why?

A: The *Overdose alert* will display indicating the dose scanned is more than the ordered dose. Click on the overdose icon and change the chart details to the actual amount to be infused/ administered to the patient.

Q: I have a medication order for regular insulin 10 units, do I need to scan the label 10 times?

A: No, scan *once* to identify the insulin product (drawn up in the med room) to the patient and the med order and document the actual # of units to be administered in the chart details.

Q: When administering high-risk medications, do I need a witness if I already scanned the patient?

A: Yes, the BCMA process does not include the verification of the medication pump settings and tracing of infusion lines to the patient. The MAW will also display the required 'Witnessed By' window for all high-risk medications that are scanned.

Q: Why can't I chart my meds from the PAL?

A: Medications should NOT be charted from the Task ("Pill icon") on the *Patient Access List (PAL)*. Charting from the Task on the PAL does not show the view of other medications ordered and/or previously administered. Reports/audits will be performed routinely to identify those staff bypassing the **MAW** and scanning process.

DEVICES / MISCELLANEOUS

Q: My patient was transferred from an inpatient unit to RHU. When scanning the patient's armband, I receive the following alert: "The wristband scanned could not be identified." However, the patient and the information on the armband appear correct?

A: Verify that the patient does not have an old armband with an inpatient visit number (FIN#). If the patient was transferred from an inpatient unit to rehab, a new armband must be printed with a new visit number (FIN#).



Q: How do I know if the barcode scanner actually synched to the COW?

A: A successful sync is indicated when the light on the modem turns a solid blue. The barcode scanner will also lightly chirp and vibrate twice.

Q: Why do I need to use a med tray to transport medications to the patient's room?

A: To minimize dropping meds and to ensure all necessary supplies med trays should be used to transport 4 or more medications from the Med Room/Rx Station.

Q: Is the barcode scanner light harmful to patient/staff?

A: No, according to the manufacturer, the scanner uses a non-laser, LED light and is NOT harmful to patients/staff.

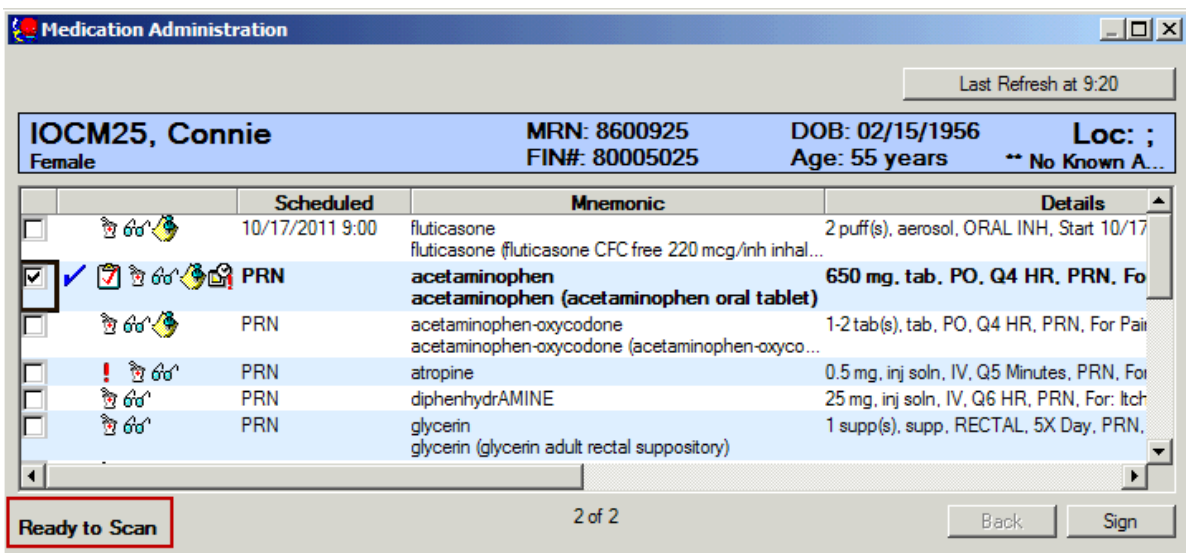
Refer to [Standard Process: BCMA Simple Medication Pass](#)

Q: Can I scan and administer medications without an order (e.g. override meds)?

A: No, an order is needed to scan/document all medications from the MAW.

Q: I attempt to scan a medication but the barcode scanner is not responding (or slow to respond)?

A: "Ready to Scan" should appear at the bottom left corner of the MAW. If scanning meds sequentially, a blue checkmark must appear next to the completed med task before scanning the next medication.



Q: After changing the battery do I need to press the red button(s) or dock the scanner in the base?

A: After changing the battery, press either red button to wake up the scanner. This will take 5-10 seconds. The scanner lights will 'dance' or flash in different colors, and then you must scan the modem for your computer again before scanning the patient.

Q: If the barcode scanner is not working, can I use the 5 rights to administer medications and document on the MAR?

A: No, if the CIS/Cerner is up and operational and other barcode scanners are functional, the nurse must continue with the BCMA process. The barcode scanner should be swapped out for one that is functioning and non-working barcode scanner should be labeled "Defective" and reported to the Help Desk.

Q: Can I still place a patient label on the top of a PCA/PCEA bag?

A: Yes, the PCA/PCEA medication barcode will display in the bottom right hand corner of the bag's label, so placing the patient label at the top of the label will not cover the barcode.