Subcutaneous Medication Administration Skills Checklist

Student:	Validator	Date:

Medication: _____, _____,

Criteria		Not Met	Comment
1. Check the accuracy of the medication order. (check MAR w prescriber orders)			
2. Assess for any contraindications to client receiving medications (npo, hypotension, heart rate, allergies, labs, etc.)			
 3. Perform the 6 rights of medication administration a. patient (verbal, ID: name and mr#) b. drug/indication c. dose (including correct computation) d. route e. time f. documentation 			
 4. Med knowledge: a. Generic and trade names b. Classification (non critical) c. Indication including your patients d. Therapeutic dose range and your pt dose e. Significant side effects f. Nursing implications 			
 5. Prepare meds a. Wash hands b. Take medications/MAR to patient's room c. Check each medication against MAR d. Check medication expiration date e. Tell patient name, dose, indication as appropriate f. Prepare syringe for injection g. Dons gloves h. Chooses appropriate site i. Cleans skin appropriately w alcohol wipe j. Gently grasps tissue k. Injects at a 45 to 90 degree angle l. Release tissue/removes needle/wipes w alcohol as indicated/safely disposes needle and syringe 			
m. Remove gloves and wash hands6. Never leaves medication unattended			
7. Document according to policy and procedure	-		