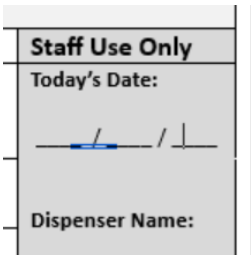
Dispensing Tool for Handwritten Forms

Prepare

1. Write your name and today's date in the **Staff Use Only** area on the right side of the form.

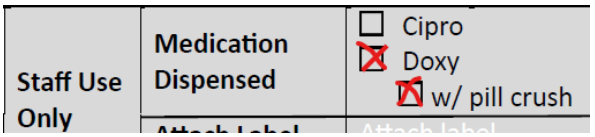


Determine Medication or Consult

2. Use the Dispensing Guide on the next page to determine each person's medication.

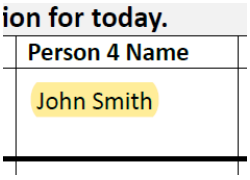
Tip: Hold the Dispensing Guide next to each person's column on the screening form

3. For each person listed on the form, find the column matching their answers; Use the bottom row of the Dispensing Guide to identify their medication.



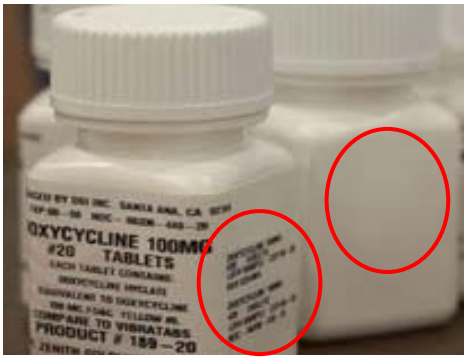
4. In the **Staff Use Only** section at the bottom of the form, mark which medication each person should receive.

5. If someone needs to go to the Consult Station:
   - Highlight their name; Do not check a medication box.
   - The family goes to the Consult Station together AFTER all other family members receive their medication.



Label Medication and Provide Information

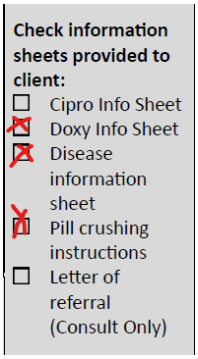
6. Use a permanent marker to write each person's name on the blank side of their bottle of medication.



7. Place one bottle label onto the Screening Form for each person. If bottle has no pre-printed label, write the lot numbers on the information sheets.

8. Place a second label on the medication information sheet; multiple labels may go on one sheet. If no labels, write the lot numbers.

9. Provide the information sheet for each type of medication given to the family and mark the right side of the form.



10. Provide pill crushing instructions as indicated on the form and mark the right side of the form

(Continued on next page/reverse)

Dispense Medication and Finish

11. Give the client the medication bottles.

12. If no one needs to visit Consult, keep the Screening Form and direct the family to exit the POD.

13. If someone needs Consult, send the whole family together with the form and the dispense medication.

Dispensing Guide for Handwritten Forms

Hold Dispending Guide next to Screening Form
Screen one person at a time

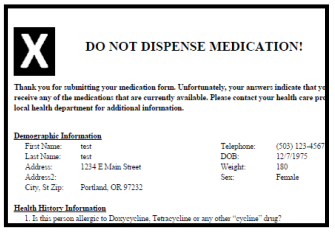
Dispensing Guide					
*Allergic to doxycycline or other "cycline" drugs?	**All NO**	**No**	**No**	**Yes**	**Yes**
*Allergic to ciprofloxacin or other "floxacin" drugs?		**+ At least one YES**	**+ Any Answer**	**+ All NO**	**+ At least one YES**
Currently taking Tizanadine (Zanaflex)					
Has Myasthenia Gravis?					
Currently has kidney disease?					
Ever had seizures or epilepsy?					
Weighs less than 99 pounds?		**+ All NO**	**+ At least one YES**		
Trouble swallowing pills?					
Dispense:	**Doxy or Cipro**	**Doxy Only**	**Doxy w/ Pill Crushing**	**Cipro Only**	**Send to Consult**

***In this case, allergic means this person experienced respiratory (breathing) or cardiac (heart) arrest after taking this medication.**
"Cycline" Drug List: demeclocycline (Declomycin); doxycycline (Adoxa, Alodox, Aritox, Avidoxy, Doryx, Doxy, Monodox, Morgidox, Ocudox, Oracea, Oraxyl, Periostat, Vibramycin); tetracycline, minocycline (Arestin, Dynacin, Minocin, Solodyn, Ximino)
"**Floxacin"** (**Quinolone) Drug List:** ciprofloxacin (Cipro); gatifloxacin (Tequin); levofloxacin (Levaquin); moxifloxacin (Avelox); nadifloxacin (Acuatim); norfloxacin (Noroxin); ofloxacin (Floxin)

Dispensing Tool for Vouchers

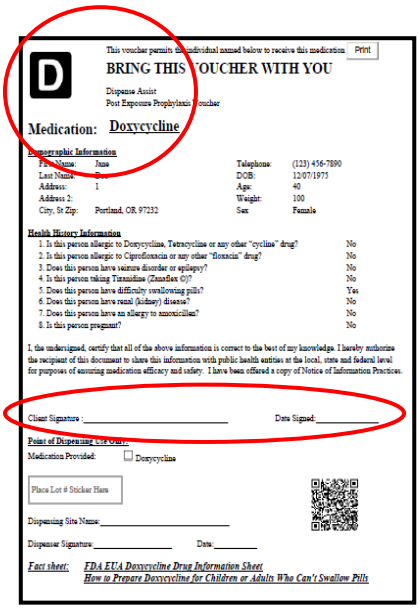
People with "X" Vouchers

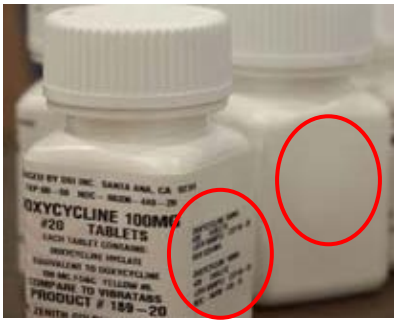
Have the person fill out a handwritten screening form for just the person named on the "X" voucher. Once complete, highlight the column on the form that contains their answers. Let them know that once you are done dispensing to the others in their family they will need to go on to Consult.



People with C, D or C/D Vouchers

Follow these steps:





1. Have client sign and date each voucher.
2. Dispense appropriate medication according to the top of their voucher:
    2. C : Dispense Cipro
    3. D: Dispense Doxy
    4. C/D: Dispense either Cipro or Doxy
3. With a permanent marker, write the person's name on the blank side of their medication bottle.
4. Place one bottle label onto the Voucher in the *Place Lot # Sticker Here bo*x at the bottom of the voucher. If bottle does not have a pre-printed label, write the lot number in the box on the voucher.
5. Place a second label on medication information sheet; multiple labels may go on one sheet. If no labels, write the lot numbers.
6. Write your name and today's date at the bottom of the voucher.
7. Give the family the medication bottles, information sheets and pill-crushing instructions (if indicated).
8. If no one needs to visit Consult, keep the vouchers and direct the family to exit the POD.
9. If someone needs to visit Consult, send the whole family together with the form and the dispensed medication.

Note: If applicable, the final step is to scan the QR code as instructed in your Just-in-Time training. This task can also be done at a separate station.