IMPORTANT

As of Sept. 4, 2018, the following nursing colleges merged together to become the British Columbia College of Nursing Professionals (BCCNP):

- College of Licensed Practical Nurses of British Columbia (CLPNBC)
- College of Registered Nurses of British Columbia (CRNBC)
- College of Registered Psychiatric Nurses of British Columbia (CRPNBC)

Although the information in the document you are about to access reflects our most current information about this topic, you'll notice the content refers to the previous nursing college that published this document prior to Sept. 4, 2018.

We appreciate your patience while we work towards updating all of our documents to reflect our new name and brand.
Medication Administration

Practice standards set out requirements for specific aspects of LPN practice. They link with other BCCNP standards, policies and bylaws and all legislation relevant to LPN practice.

What is Medication Administration?

Medication administration involves preparing and giving scheduled and unscheduled drugs to a client and evaluating the effect of the drugs on the client.

The Nurses (Licensed Practical) Regulation authorizes licensed practical nurses (LPNs) to compound, dispense and administer medications. LPNs dispense medications with a client-specific order from an authorized health professional\(^1\). Although most drugs require an order from an authorized health professional, there are some exceptions, which are identified in BCCNP’s Scope of Practice for Licensed Practical Nurses.

Employers provide the organizational supports and systems necessary for LPNs to meet BCCNP LPN Standards of Practice.

Principles

1. LPNs administer medications within the Regulation, BCCNP standards, limits and conditions, employer policy and their individual competence.
2. LPNs understand and recognize effects, side effects and interactions of medications and take action as necessary.
3. LPNs adhere to the ‘rights’ of medication administration. These include Right Medication, Right Client, Right Dose, Right Time, Right Route, Right Reason and Right Documentation.
4. LPNs determine all client-specific orders are clear, complete, current, legible and clinically relevant for the client before administering any medication.
5. LPNs act on clinical order sets\(^2\) when the authorized health professional has made those orders client-specific by reviewing them, adding the client’s name and customizing, signing and dating them.
6. LPNs only act on verbal and telephone orders if there are no other reasonable options.
7. Except in an emergency, LPNs only administer medications they themselves or a pharmacist has prepared for a specific client.

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\(^1\) LPNs can carry out orders from nine health professionals in BC: dentists, medical doctors, midwives, naturopaths, nurse practitioners, pharmacists, podiatrists, registered nurses and registered psychiatric nurses. LPNs can also carry out orders from health professionals who hold an equivalent designation in Alberta, Yukon or the Northwest Territories.

\(^2\) Previously called pre-printed orders
8. LPNs verify that medication orders, pharmacy labels and medication administration records are complete and include:
- the name of the client
- the name of the medication
- the medication strength
- the dosage, route and frequency

9. LPNs educate clients about the medications the clients are receiving.

10. LPNs understand how medication errors and near misses can occur and take steps to prevent them.

11. When a medication error or near miss occurs at any point in the process of administering a medication, LPNs take appropriate steps to resolve and report it in a timely manner.

**Applying the Principles to Practice**

To manage medication administration in your nursing practice, consider the following.

- Read BCCNP’s Scope of Practice for Licensed Practical Nurses to understand the standards, limits and conditions related to administering medications. In particular, review the standards for acting with an order and the standards for acting without an order.

- Review employer policies as they may place further restrictions on medication administration than the Nurses (Licensed Practical) Regulation and BCCNP standards, limits and conditions.

- Be familiar with your employer’s official list of approved abbreviations, acronyms and symbols to help eliminate one source of medication error.

- Read back any verbal or telephone order to the prescriber to confirm you have accurately recorded it.

- Only act on electronic orders, such as faxes, emails and texts, if the authorized health professional giving the order can be authenticated by a unique identifier³ or signature.

- When preparing and administering medications, take steps to reduce interruptions that may lead to an error.

- Prepare medications in as close proximity to the client as possible. Avoid pre-pouring medication as it may lead to an error.

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³ Health Canada considers a unique electronic signature to be equivalent to a paper-and-pen signature.
• Be aware of medications that may cause serious injury or death if not used correctly. These ‘high alert” medications include heparin, warfarin, insulin, chemotherapeutic agents, concentrated electrolytes, opiate narcotics, neuromuscular blocking agents, thrombolytics and adrenergic agonists.

• If you receive an order for an "off-label" use of a medication, you need to be well informed about the medication and meet all the requirements for administering it.

• If you are administering an experimental medication, it needs to be part of a formal research program and include an order from the principal or co-investigator.

• If clients are administering their own medications, you are still responsible for the overall care related to their medications.

• If a client refuses a medication, document the reason and the action you took.

• Advocate for and participate in the development of system-wide approaches that support safe medication administration in your agency.

More Information

Email BCCNP Nursing Practice Advisors or call 1 877 373 2201.

BCCNP Bylaws
BCCNP LPN Practice Standards
BCCNP LPN Professional Standards
BCCNP LPN Scope of Practice Standards

Other Resources

Drug Schedules Regulation

Nurses (Licensed Practical) Regulation

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© British Columbia College of Nursing Professionals
900 – 200 Granville St.
Vancouver, BC V6C 1S4
www.bccnp.ca

4 "Off-label" use refers to using a Health Canada-approved drug for a purpose that may benefit the client, but is not indicated on the package insert. For example, Seroquel or Dramamine may be ordered as a hypnotic.