

## Medication Administration Settings

The NDoc Medication Administration Record (MAR) functionality provides agencies a method to schedule, track, and document medication administration events. Details of how to work with the function are found within the Medication Administration Record FASTForm. To further control the MAR options, agencies can use the settings page described below.

To access the settings for the NDoc MAR, go to the Medication Administration Settings page within the Administration>System>Settings.

### General

Schedule events on the MAR ☒ Yes ☐ No

**General - Schedule Events on the MAR:** If yes, then meds with *Show in MAR* checked and advanced schedule data are automatically scheduled on the MAR Calendar. When MAR scheduling is enabled, events begin to be scheduled on the MAR calendar from that point forward (within about five minutes). Note: PRN meds are not scheduled. These settings apply to the scheduled time for recurring med administration events.

### Patient Medications Entry

Select *Show in MAR* when *To be administered by* is Agency ☐ Yes ☒ No

Display *Show in MAR* within ☒ Basic/Advanced ☐ Advanced ☐ None

#### Patient Medications Entry:

- **Select *Show in MAR* when *To be administered by* is Agency Y/N:** If yes, then when Agency is selected during med entry for the *To Be Administered* field, the *Show in MAR* field is checked automatically.
- **Display *Show in MAR* within: Basic/Advanced or Advanced or None:** This determines if the *Show in MAR* field is displayed or not in Patient medications.

|                             |                  |      |    |     |
|-----------------------------|------------------|------|----|-----|
| BID:                        |                  | 0000 | ▲▼ | Add |
| TID:                        |                  | 0000 | ▲▼ | Add |
| QID:                        |                  | 0000 | ▲▼ | Add |
| QAM:                        | 0800             | 0000 | ▲▼ | Add |
| QPM:                        | 2000             | 0000 | ▲▼ | Add |
| QSHIFT:                     | 0800, 1600, 0000 | 0000 | ▲▼ | Add |
| QHS:                        | 2000             | 0000 | ▲▼ | Add |
| <b>Meal Related Timings</b> |                  |      |    |     |
| Breakfast:                  | 0700             | 0000 | ▲▼ | Add |
| Lunch:                      | 1200             | 0000 | ▲▼ | Add |
| Dinner:                     | 1700             | 0000 | ▲▼ | Add |

#### Repeat Pattern Default Times:

- These settings apply to the scheduled time for recurring med administration events.
- Agencies may enter times to auto-populate the Explicit Times fields.
- If no times are entered, the explicit times field is required for users to enter as needed.
- Times that are entered can be overwritten within MAR function.

**BID:**

Events are upcoming for 60 minutes before the scheduled time  
 Early administration allowed up to 65 minutes before the scheduled time  
 Events are overdue for 60 minutes after the scheduled time  
 Late administration allowed up to 65 minutes after the scheduled time

**TID:**

Events are upcoming for 60 minutes before the scheduled time  
 Early administration allowed up to 65 minutes before the scheduled time  
 Events are overdue for 60 minutes after the scheduled time  
 Late administration allowed up to 65 minutes after the scheduled time

**QID:**

Events are upcoming for 60 minutes before the scheduled time  
 Early administration allowed up to 65 minutes before the scheduled time  
 Events are overdue for 60 minutes after the scheduled time  
 Late administration allowed up to 65 minutes after the scheduled time

**xD:**

Events are upcoming for 60 minutes before the scheduled time  
 Early administration allowed up to 65 minutes before the scheduled time  
 Events are overdue for 60 minutes after the scheduled time  
 Late administration allowed up to 65 minutes after the scheduled time

**QAM:**

Events are upcoming for 240 minutes before the scheduled time  
 Early administration allowed up to 245 minutes before the scheduled time  
 Events are overdue for 480 minutes after the scheduled time  
 Late administration allowed up to 485 minutes after the scheduled time

**QPM:**

Events are upcoming for 240 minutes before the scheduled time  
 Early administration allowed up to 245 minutes before the scheduled time  
 Events are overdue for 480 minutes after the scheduled time  
 Late administration allowed up to 485 minutes after the scheduled time

**QHS:**

Events are upcoming for 60 minutes before the scheduled time  
 Early administration allowed up to 65 minutes before the scheduled time  
 Events are overdue for 60 minutes after the scheduled time  
 Late administration allowed up to 65 minutes after the scheduled time

**User scheduled events:**

Events are upcoming for 30 minutes before the scheduled time  
 Early administration allowed up to 35 minutes before the scheduled time  
 Events are overdue for 30 minutes after the scheduled time  
 Late administration allowed up to 35 minutes after the scheduled time

**All other events:**

Events are upcoming for 30 minutes before the scheduled time  
 Early administration allowed up to 35 minutes before the scheduled time  
 Events are overdue for 30 minutes after the scheduled time  
 Late administration allowed up to 35 minutes after the scheduled time

**Scheduled/Recurring Event Time Offsets:**

- These settings affect when an event is considered Upcoming, Overdue, or Missed.
- An event is considered Missed once it has gone past the designated overdue time.
- If an event is administered outside of the schedule window of upcoming or overdue, messaging is triggered providing users guidance on how to proceed.
- Agencies can choose to also designate a window of time before the upcoming or after the overdue times that medications can be administered early or late. In that case, the messaging on the screen prompts users to note that the administration is occurring within this window of time (i.e., early or late) and allows the user to proceed and reconciles the scheduled event time with what is entered as the administration event.
- For example, if a medication administration event is scheduled for 1500, the normal administration window can be between 1415 and 1545. Depending on the early/late administration settings, a user could attempt the administration between 1330 and 1415 and be prompted to complete the administration early. Conversely, based on the agency's settings, an administration could be attempted between 1545 and 1700 and the user would be prompted to complete the administration late. The early or late administration is linked to the scheduled event and reconciles the administration schedule.

**Carry Forward:** This setting controls the fields to be carried forward from previous administrations. In the case of Med Given, the following logic applies:

- If no, the medication as set in the order is always carried forward and not accessible for edit (i.e., cannot be changed to reflect a different brand or generic, etc.).
- If yes, the Med Given field may be accessible and can be edited, but ONLY if they Allow substitution for generic? field in the medication entry is set to Yes.

Carry forward the following fields from the most recent administration event.

Med Given ☒ Yes ☐ No

## Missed Events:

This setting allows agencies to manage missed administration events and apply selected Not Given Reasons based on the options in the Med Not Given Reason Table based on a set number of minutes.

After  minutes automatically change Missed event status to Not Given with a **Not Given Reason** of (Select Item) ▼

When a new event is saved as Given, change all prior Missed events for the medication to Not Given with **Not Given Reason** of (Select Item) ▼

## In Progress Events:

This setting allows agencies to manage situations involving a med administration event that is In Progress, but the scheduled event time is approaching or overlaps.

For scheduled events overlapping the time of an In Progress event, change the status to Not Given with a **Not Given Reason** of (Select Item) ▼

## Display

Default view ☒ Meds ☐ Schedule ☐ Detail

## Display:

This setting allows agencies to control the Default View when the Medication Administration function opens. The Default is set to Meds, but can be changed based on agency preference. Setting this default option controls the display for

## Field Requirements:

This setting allows agencies to set field requirements for certain events. Specifically, the current option is to set the Comment field as required for rescheduled events.

**Field** **Require**  
Comment For rescheduled events ☐ Yes ☒ No

## Medication Tables related to Patient Medications and the MAR

Several tables are available to further customize the available options for charting medications and documenting medication administration. The tables are all found under Administration>System>Tables and include in alphabetical order within the navigation menu:

- **Med Administration Not Given Reason** [linked to the MAR] – This table populates the reason drop down within the MAR to explain why a medication was not administered.

- **Med Administration Patient Reaction** [*linked to the MAR*] - This table allows users to establish pre-defined entries for the Patient Reaction field documented within the administration charting screens.
- **Medication Reason** - This table controls the Medication Reason field found within the med entry screens. The information is designed to provide an explanation of why the user is taking or having the medication administered (e.g., pain, managing blood sugar, etc.). The reason is then included in a variety of reports.
- **Meds Discontinue Reason** – This table controls the Discontinue Reason field set to required when a Discontinue Date is entered.
- **Medication Frequency** - The table populates the Frequency field found within the Basic view of the med entry screens. Note the table contains a checkbox to apply custom PRN logic to the entry. Specifically, when a frequency with this PRN logic is selected, the Priority field is set to "PRN" automatically.
- **Medication Route** – The table controls the available options for the Route field. Note the table contains a checkbox to apply custom IV logic to the entry. Specifically, when an existing route contains the text "IV" or "intravenous" or new entries are added related to IV meds, the logic should be applied. When a route entry is selected that has been linked to this IV logic, the IV checkbox within the med entry screen is automatically checked and edits to the units are restricted.

## Special Consideration for the MAR

In general, agencies wishing to configure their system in order to utilize the MAR should take the following steps:

### Configure Medication Administration Settings

- Under General select **Yes** for *Schedule events on the MAR*. This is the auto-scheduling master switch.
- Select either **Basic/Advanced** or **Advanced** for *Display Show in MAR within*.
- Based on agency needs, configure any other settings within the MAR settings page.

### Configure Medication Settings

- Select **Yes** for *To be administered by: required? – Y/N*. This setting is optional, but since only "Agency" administered meds are chartable on the MAR, it is recommended to make this required
- Select **Both** for *Schedule: allow schedule details to be entered in Basic or Advanced view?*
- Based on agency needs, also choose values for the following settings:
  - *Generic: default for 'Allow substitution for generic'?*
  - *Schedule: default to which view for new medications?*
  - *Frequency: always require frequency for medications with PRN priority?*

### When Charting a Med to Appear in the MAR

- Choose **Agency** for *To be administered by* and check **Show in MAR**

### When Charting a Medication to be Auto-Scheduled by the MAR

- Choose **Agency** for *To be administered by* and check **Show in MAR**
- Use the tools in Advanced schedule view to enter timing information. Note the parameters for the med and patient:
  - The med must be active (completed, not awaiting review, and not currently on-hold, discontinued, errored, or paused for MAR scheduling)
  - The patient must be in ADM status
  - The schedule must not be PRN. PRN med schedules are not auto-scheduled on the MAR