

INSULIN ADMINISTRATION FOR QUALIFIED MEDICATION AIDE (QMA)

COMPETENCY CHECKLIST

Instruction: The QMA must perform the procedure with 100% accuracy for competency. The QMA may attempt the procedure until 100% accuracy is achieved. (S= Successful U= Unsuccessful)

Name: _____ Date: _____

WITHDRAWING INSULIN FROM A VIAL & ADMINISTERING INSULIN SUBQ	S	U
1. Gather the needed equipment & supplies. (Supplies include insulin syringe with needle, alcohol wipes, medication, gloves & sharps container.) (NOTE: Needle – 25-27 gauge, ¼ to 5/8 inch; insulin syringe marked in units)		
2. Check Medication Administration Record (MAR) for the insulin order. (1 st check)		
3. Wash & dry hands thoroughly or use alcohol based hand rub (ABHR)		
4. Prepare insulin for injection:		
a. Check date insulin vial opened. (follow facility policy for dating insulin vial)		
b. Check insulin carefully. (Rapid & short-acting insulin should look clear and long-acting insulin should look cloudy with no clumps or crystals. Insulin that looks different from usual could be too old or spoiled and should never be used.		
c. If using clear intermediate or long-acting (cloudy) insulin, roll the insulin vial between your hands 3-4 times to mix the insulin evenly. Do not shake the vial. Rapid & short-acting (clear) insulin does not need to be mixed. Be certain you are using an insulin syringe with the unit scale on the syringe that matches the type of insulin you are giving. (U- 100 or U-50)		
d. Remove cap of vial if new. Wipe the top of the insulin vial with an alcohol wipe.		
e. Check the MAR for how many units of insulin you need to inject. (2 nd check)		
f. Pull back the plunger to draw the amount of air into the syringe that matches the ordered dose of insulin. Hold the insulin vial upright. Insert through the rubber stopper of the vial. Push the plunger to put the air in the vial. Keep the needle in the vial.		
g. Holding the needle in the vial, turn the vial upside down. Pull out the plunger to measure out an amount of insulin slightly more than you actually need. (Approximately 2 units more).		
h. Complete a check to make sure you have the right amount of insulin. Take the needle out of the vial, recap the needle with one hand. (3 rd check)		
5. Return medication to storage and secure other medications. Always keep the prepared syringe in your possession.		
6. Choose the injection site according to the medication plan for the resident, facility procedure, and rotation plan or physician direction.		
7. Take the medication and supplies to the resident.		
8. Knock, ask permission to enter resident room,		
identify resident,		
provide privacy,		
wash & dry hand thoroughly or use ABHR		
9. Position the equipment on a clean barrier within reach.		
10. Put on gloves.		
11. Clean the injection site with an alcohol wipe in a circular motion, starting at center and moving in an outward direction, and allow to dry.		
12. Remove the needle cover (cap).		
13. With on hand gently pinch skin between forefinger and thumb. You will inject into the pinched skin. Instruct the resident that they will feel a prick. With you other hand, hold the syringe like a pencil or dart. Gently insert the needle quickly and firmly at a 45-90° angle.		
14. Release the skin. Do not let go or move the syringe. Press the plunger in a gentle, steady motion until the medication is gone. Keep the needle in place for a count of five.		

15. When the syringe is empty, pull out the needle at the same angle you put it in. Press the injection site gently for a few seconds using an alcohol wipe or cotton ball to prevent the medication from leaking out.		
16. Do NOT massage the area. Do NOT recap the syringe. Pull the protective guard over the needle.		
17. Dispose of the syringe in a container designated for used sharps.		
18. Dispose of supplies, remove gloves, wash hands or use ABHR		
19. Record the insulin administration.		
20. Observe & report any concerns you or the resident have to the licensed nurse..		

NOTE: Throughout the procedure the student should also be observed for proper infection control and safety practices in addition to resident rights and dignity.

Program Director Signature: _____ Date: _____

Student Signature: _____ Date: _____

Additional comments or instructions:
