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| Competency Evaluation Tool for ‘General Knowledge’ of Medication Administration via a Gastrostomy (G) or Jejunostomy (J) Tube |
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| **Trainer’s Printed Name:**       | **Date:**       |
| **Trainer’s Signature**:       | **Trainer’s Contact Information:**       |

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**General Knowledge Medication Administration via a G or J Tube****Training Guidelines***The ‘General Knowledge’ Medication Administration via a G or J Tube Training* *must be completed by a Qualified Trainer.* |

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|  | Comments | General Knowledge |
| At the conclusion of this training, the Certified staff: |
| 1. |       | Knows that only Certified staff, who have successfully completed Specialized Gastrostomy (G) or Jejunostomy (J) Tube Medication Administration Training, and licensed nurses may administer medications via the G or J Tube route. |
| 2. |       | Knows that only Certified staff who are proficient (i.e., experienced in the process of medication administration via the oral route) may be trained to administer medication via the G or J Tube route. |
| 3. |       | Knows that trained Certified staff must follow all procedures for the preparation and administration of medication via the G or J Tube route, according to MAP Regulations, Policies, and Curriculum. |
| 4. |       | Knows that proper hand hygiene and the cleanliness of the G or J Tube equipment are essential in the safe administration of Medication, Water Flushes and/or Tube Feedings. |
| 5. |       | Knows that a repeat Competency Evaluation will need to be completed if a trained Certified staff does not administer medication to the individual via the individual’s G or J Tube for six (6) or more months. |
| 6. |       | Knows what G and J Tubes are and knows some reasons why an individual may have one. |
| 7. |       | Knows that a Certified staff must follow all Health Care Provider (HCP) Orders and/or Protocols when administering Medication, Water Flushes, and Tube Feedings via the G or J Tube route.  |
| 8. |       | Knows that any changes in administration require an HCP Order, including a change in the brand of formula. |
| 9. |       | Knows that there are three (3) different methods (i.e., Bolus, Continuous, and Intermittent) of Tube Feeding administration.  |
| 10. |       | Knows that the method of administration of a Tube Feeding, including the infusion rate and time, may not be changed without an HCP Order.  |
| 11. |       | Knows that individuals receiving Tube Feedings need to be weighed recurrently, as ordered by the HCP. |
| 12. |       | Knows the importance of water flushes for an individual with a G or J Tube. |
| 13. |       | Knows the importance of following the HCP Order and/or Protocol for the position of the individual during the administration of Medication, Water Flushes, and Tube Feedings. |
| 14. |       | Knows the importance of preventing the G or J Tube from being pulled, dislodged, or removed. |
| 15. |       | Knows who should be notified if the G or J Tube becomes dislodged or if it appears to have moved in or out of its intended position ‘within’ the first eight (8) weeks (when the tract is not yet well established) of original placement of the Tube (when medications are ‘only’ being administered by licensed nurses).  |
| 16. |       | Knows who should be notified if the G or J Tube becomes dislodged or appears to have moved in or out of its intended position, ‘after’ the first eight (8) weeks (when the tract is well established) of the original placement of the Tube. |
| 17. |       | Knows what they should do and who they should notify if an individual vomits while the nutritional supplement is being administered. |
| 18. |       | Knows what they should do and who they should notify if the individual has breathing difficulty. |
| 19. |       | Knows what they should do and who they should notify if the individual has diarrhea. |
| 20. |       | Knows some of the causes of vomiting and/or diarrhea. |
| 21. |       | Knows what they should do and who they should notify if the stoma site is observed to be red, swollen, or has purulent (yellowish or greenish fluid produced by infection) drainage. |
| 22. |       | Knows what they should do if the feeding pump alarm indicates that the feeding is completed. |
| 23. |       | Knows what they should do and who they should notify if the feeding pump alarm indicates that the Tube has an occlusion (i.e., is blocked). |
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| Based on the General Knowledge Training Guidelines for Administering Medication via a Gastrostomy (G) or Jejunostomy (J) Tube, I, as Trainer, have determined that the Certified staff named below have the general knowledge regarding medication administration via the G or J Tube route. |

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|  | Certified Staff’s Printed Name: | Certified Staff’s Signature: |
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**The Trainer should close empty signature spaces upon completion of the training.**

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