



**UNIVERSITY COLLEGE DUBLIN**  
*An Coláiste Ollscoile Baile Átha Cliath*  
**UCD SCHOOL OF NURSING, MIDWIFERY & HEALTH**  
**SYSTEMS**

Scoil na hAltrachta, an Cnáimhseachais agus na gCoras Slainte

In partnership with the  
National Maternity Hospital  
and  
Maternity services within the Ireland East  
Hospital Group  
at  
Regional Hospital Mullingar,  
St Luke's General Hospital Carlow/Kilkenny,  
Wexford General Hospital

**Medication Workbook for Year 4 (Supernumerary) BSc Midwifery**

Student Name:

Student Number:



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## Signature Bank

Each registered midwife/nurse who acts as a preceptor/co-preceptor for this student must sign this signature bank.

<b>Preceptors/Co-preceptor Name (Print)</b>	<b>Signature</b>	<b>Preceptors/Co- preceptor Initials</b>	<b>Ward/Area</b>


## Introduction

During your practice placement you will come across a large number and variety of medications. These medications may have many different routes of delivery, formulations, and variable actions. It is possible that some women are required to take multiple medications during their pregnancy. This increases the likelihood of drug interactions, side-effects, and mistakes in administration (WHO,2011). The complex role of medication management requires competent knowledge of pharmacology to maintain patient safety (Leufer and Cleary-Holdforth, 2013). This workbook has been developed as a tool to assist you in gaining an in-dept knowledge of some of the commonly used medications during your supernumerary practice placement in Stage 4 of the BSc Midwifery Programme. By working through four case studies, you will make sense of medications in relation to selected service users. Medication administration and professional practice is an important aspect of your Midwifery Competency Assessment (MCAT) and the principles and competencies specific to this area are detailed in table 1 below:

**Table 1: Principle and Assessment Criteria that pertain to Medication Management Stage 4 BSc Midwifery Supernumerary Practice Placement**

<p><b>3.9</b> Demonstrates the ability to safely manage drug administration, monitoring effects and documenting appropriately in accordance with Midwifery Board of Ireland (NMBI) medication administration guidance.</p>	<ul style="list-style-type: none"><li>• Participates with the midwife in the safe management of drug administration, monitoring the effects and documenting appropriately.</li><li>• Explains the importance of monitoring the actions and side-effects of the medication administered.</li><li>• Has knowledge of medication legislation and NMBI guidance on medication management.</li></ul>
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**Stage 4:** this level requires the undergraduate midwifery student to competently apply a systematic approach to the provision of person-centred care under the **indirect supervision** of a Registered Midwife/Nurse. Indirect supervision is defined as the Preceptor/Co-preceptor being accessible whenever the student is taking the lead in providing care to women and their babies. The student actively participates in the care of women and their babies and is able to demonstrate the requisite knowledge, skills and professional behaviours under the indirect supervision of the midwife. The student accepts responsibility for the provision of delegated care and recognises when the guidance and support of the preceptor and Registered Midwife is required and seeks such assistance in a timely manner.

**However, it is important to note that for a registered midwife/nurse to co-sign the administration of medications, the registered midwife must directly observe you carry out the administration (NMBI, 2020, pg 21).**

## Learning Outcomes

MCAT @UCD 2024/2025

In relation to medication management within your MCAT document during your Stage 4 Supernumerary Placement practice placement you will be expected to:

- Assist the Registered Midwife/Nurse in the safe administration, ordering, checking and management of medicines while following legislation and professional guidance
- Safely and accurately carry out medication calculations for medication management by diverse routes of delivery
- Integrate knowledge of pathophysiology and pharmacotherapeutics into the assessment of a person
- Think critically about the factors effecting the administration and pharmacotherapeutics of medication in selected cases
- Identify the midwifery considerations for the care of woman/baby in relation to medication administered

## Instructions for Use: Medication Case Study

You are expected to complete a total of 4 case studies. Please discuss the choice of person with your preceptor and/or your CPC. These case studies will assist you to link your knowledge of medications to the care that you deliver to individuals. Identify an individual who is receiving medication and explore their prescribed medications. A total of 4 case studies are required to be completed.

**The following explains the information required for each selected case study.**

<b>Medication Name</b>	This refers to the approved (Generic) name of the medication, which is the name that must be used when the medication is prescribed
<b>Brand/Trade Name</b>	It is common to hear or see medications referred to by their brand name e.g. Panadol for paracetamol. It is important to be aware of the brand and generic name of medications
<b>Medication Group</b>	What group does the medication belong to? Is it an analgesic, anti-hypertensive, anti-pyretic, antibiotic?
<b>Indication</b>	Why is this medication used and for which condition and/or symptoms?
<b>Dose</b>	Doses may vary depending on weight, age, route used or the indications for use.
<b>Route</b>	How should the medication be administered e.g. orally, rectally, intravenously, inhalation, intramuscularly, subcutaneously, intrathecal
<b>Frequency</b>	How often should this medication be administered? What is meant by a 'regular prescription' and a prescription that is 'PRN'? Where possible include the maximum dose in a 24-hour period or highlight the differences in frequency depending on route used.
<b>Form</b>	Confirm that the form of medicine that has been dispensed matches with the specified route of administration and that it is appropriate for your selected client/patient.
<b>Peak Action/Duration of Action</b>	For example, if analgesia has been administered, how long will it take to work and how long will it last in the patients/client's system?
<b>Contraindications/Cautions Midwifery Considerations</b>	Extremely important to identify, especially in relation to pregnancy & lactation.
<b>Side-Effects</b>	When you know the side-effects, you can identify the reason quickly and prevent or manage the side-effect in an effective manner.
<b>Important Information</b>	Consider the potential interaction with other medications that the person is prescribed, polypharmacy and other potential medication safety concerns.
<b>I have read and understand the above instructions</b>	<b>Student Signature:</b> _____ <b>Date:</b> _____

**The registered midwife/nurse who is administering medication must adhere to the Ten 'Rights' of medication administration when administering medications to women/babies/clients (NMBI, 2020, pg16).**

1. **Right Patient:** Be certain of the identity of the patient to whom the medicine is being administered by verifying the identification wristband, photograph or name and date of birth on the medicine chart.
2. **Right Reason:** Understand the intended purpose of the medicines to be administered.
3. **Right Drug:** Confirm that the name of the dispensed medicine to be administered corresponds with the generic or brand name of the prescribed medicine, and they must only administer a viable medicinal product – that is, properly packaged and within its expiry date. The nurse must also check, both by asking the patient and inspecting the allergy status box on the medicines chart, whether the patient has a known and recorded allergy to the prescribed drug or no known allergies. The allergy box must be completed.
4. **Right Route:** Administer the medicine via the prescribed anatomical route and site.
5. **Right Time:** Administer the medicine at the prescribed time and prescribed intervals.
6. **Right Dose:** Confirm, through arithmetical calculation that the dose of the medicine being administered concurs exactly with the dose prescribed. Where the local Policies, Procedures, Protocols and Guidelines (PPPGs) identify this process for high risk medicines, the dose must be independently verified.
7. **Right Form:** Confirm that the form of medicine that has been dispensed matches with the specified route of administration.
8. **Right Action:** Ensure the medicine is prescribed for the appropriate reason and state to the patient the action of the medicine and why it is prescribed.
9. **Right Documentation:** Sign, date and retain all documentation recording the administration of each medicine in the medicine's administration chart (or other document directing the administration of a medicine). The chart must only be signed to record a medicine has been administered once the medicine administration has been witnessed.
10. **Right Response:** Observe the patient for adverse effects and assess the patient to determine that the desired effect of the medicines has been achieved.

\*The information required can be obtained from a number of sources including: [www.medicines.ie](http://www.medicines.ie) which contains accurate, up to date, regulator approved information on medicines available in Ireland (Medicines.ie), The Irish Medicines Formulary, British National Formulary, Hospital Formulary, the hospital/community pharmacist, doctors, nursing/midwifery colleagues, articles, local policies and guidelines and NMBI guidelines. **Always refer to the local policy for Medication Administration and Management.**

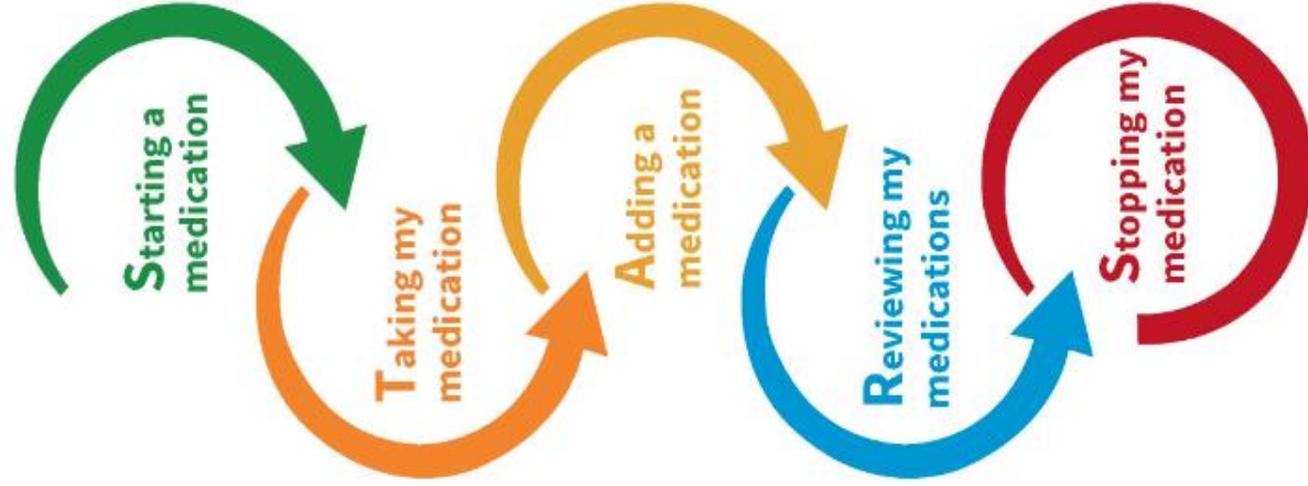


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# The Ten Rights of Medication Management

<p><b>RIGHT 1</b></p> <p>RIGHT PATIENT</p> 	<p><b>RIGHT 2</b></p> <p>RIGHT REASON</p> 	<p><b>RIGHT 3</b></p> <p>RIGHT DRUG</p> 	<p><b>RIGHT 4</b></p> <p>RIGHT ROUTE</p> 	<p><b>RIGHT 5</b></p> <p>RIGHT TIME</p> 
<p><b>RIGHT 6</b></p> <p>RIGHT DOSE</p> 	<p><b>RIGHT 7</b></p> <p>RIGHT FORM</p> 	<p><b>RIGHT 8</b></p> <p>RIGHT ACTION</p> 	<p><b>RIGHT 9</b></p> <p>RIGHT DOCUMENTATION</p> 	<p><b>RIGHT 10</b></p> <p>RIGHT RESPONSE</p> 

# 5 Moments for Medication Safety



- ▶ What is the name of this medication and what is it for?
- ▶ What are the risks and possible side-effects?
- ▶ Is there another way of treating my condition?
- ▶ Have I told my health professional about my allergies and other health conditions?
- ▶ How should I store this medication?
- ▶ When should I take this medication and how much should I take each time?
- ▶ How should I take the medication?
- ▶ Is there anything related to food and drink that I should know while taking this medication?
- ▶ What should I do if I miss a dose of this medication?
- ▶ What should I do if I have side-effects?
- ▶ Do I really need any other medication?
- ▶ Have I told my health professional about the medications I am already taking?
- ▶ Can this medication interact with my other medications?
- ▶ What should I do if I suspect an interaction?
- ▶ Will I be able to manage multiple medications correctly?
- ▶ Do I keep a list of all my medications?
- ▶ How long should I take each medication?
- ▶ Am I taking any medications I no longer need?
- ▶ Does a health professional check my medications regularly?
- ▶ How often should my medications be reviewed?
- ▶ When should I stop each medication?
- ▶ Should any of my medications not be stopped suddenly?
- ▶ What should I do if I run out of medication?
- ▶ If I have to stop my medication due to an unwanted effect, where should I report this?
- ▶ What should I do with leftover or expired medications?



## Medication Case Study 1

Age:		Weight:			Parity and Gestation (if appropriate)				
Previous medical/surgical history:									
Previous obstetric history:									
Any other relevant history:									
Present Diagnosis:									
Medication Name: (Brand and Trade Name)	Indication	Route	Frequency	Times	Form	Dose (Calculate)	Action	Side Effects	Midwifery Considerations
<b>Important Information:</b> Consider potential interactions with the medications, polypharmacy and other potential medication safety concerns:									

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Preceptor Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## Medication Case Study 2

Age:		Weight:			Parity and Gestation (if appropriate)				
Previous medical/surgical history:									
Previous obstetric history:									
Any other relevant history:									
Present Diagnosis:									
Medication Name: (Brand and Trade Name)	Indication	Route	Frequency	Times	Form	Dose (Calculate)	Action	Side Effects	Midwifery Considerations
<b>Important Information:</b> Consider potential interactions with the medications, polypharmacy and other potential medication safety concerns:   									

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Preceptor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Medication Case Study 3

Age:		Weight:			Parity and Gestation (if appropriate)				
Previous medical/surgical history:									
Previous obstetric history:									
Any other relevant history:									
Present Diagnosis:									
Medication Name: (Brand and Trade Name)	Indication	Route	Frequency	Times	Form	Dose (Calculate)	Action	Side Effects	Midwifery Considerations
<b>Important Information:</b> Consider potential interactions with the medications, polypharmacy and other potential medication safety concerns:  									

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Preceptor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Medication Case Study 4

Age:		Weight:			Parity and Gestation (if appropriate)				
Previous medical/surgical history:									
Previous obstetric history:									
Any other relevant history:									
Present Diagnosis:									
Medication Name: (Brand and Trade Name)	Indication	Route	Frequency	Times	Form	Dose (Calculate)	Action	Side Effects	Midwifery Considerations
<b>Important Information:</b> Consider potential interactions with the medications, polypharmacy and other potential medication safety concerns:									

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Preceptor Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## Reference List and Further Resources

Leufer, T., & Cleary-Holdforth, J. (2013) "Let's do no harm: Medication errors in nursing: Part 1." *Nurse Education in Practice*, 13(3), 213–216.  
<http://doi.org/10.1016/j.nepr.2013.01.013>

Nursing and Midwifery Board of Ireland (2020) *Guidance for Registered Nurses and Midwives on Medication Administration*. Available at:  
<https://www.nmbi.ie/Standards-Guidance/Medicines-Management>

World Health Organisation (2011) *Patient Safety Curriculum Guide: Multi-professional Edition*. WHO: Malta

## **Additional Notes**



