USE BY CERTIFIED MEDICATION AIDES (CMA) of Pen Injector Devices (pen)

QUESTIONS & ANSWERS

ADMINISTRATION

Q. Should the CMA shake the pen to mix the medication?
A. Check the label or the manufacturer’s literature. Some medications need to be shaken or agitated others may not require shaking and some such as insulin could be damaged by severe shaking. NEVER SHAKE insulin. The CMA should mix insulin suspensions by gently rolling the insulin pen between his/her palms 10 times, then alternate pointing the insulin pen up and down 10 times. Vigorous shaking can break up insulin molecules and decrease the potency of insulin.

Q. Does the needle on all pens need to be primed before each dose or just the first time the pen is used?
A. All pens must be primed each time they are used.

Q. Can the type of medication in a pen be identified by the color of the label or the color of the pen?
A. No Always read the label. Never choose any item by the color. There is no standard color system. Manufacturers may use any color they want and can change the color system at any time.

Q. When using a pen must the injection sites be rotated?
A. Generally Yes. Injection site rotation is generally needed for medications that are injected on a regular basis such as daily or more often. Check with the delegating nurse for direction on site rotation and record it on the MAR.

Q. How long should the needle remain in the resident after the push button has been depressed?
A. Different brands of pens have different recommended times that vary from 5 to 10 seconds. Before initial use of a pen, the CMA must check the manufacturer’s literature for the correct amount of time. The CMA must note the time required on the MAR after verifying it from the literature.

Q. What should the CMA do if there is not enough medication for a complete dose; e.g. the order is for 40 units but there are only 30 units in the pen-in the resident's medication drawer?
A. If there is not enough medication in a pen to give the complete dose, the CMA must obtain a new pen and give the complete dose in one injection. The pen with the insufficient amount of medication should be removed from the medication cart according to the facility policy.
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Q. When using a pen are there any changes in infection control techniques?
A. No. Infection control techniques remain the same. The pen is an injection device. The aseptic technique used for a regular syringe is also used for the pen system. Hand washing is still required before and after administering the injection. Gloves must be worn. Alcohol swabbing of the pen is required before attaching the needle and the injection site must be clean and prepped with an alcohol wipe before injection.

Q. What should be done if a drop of liquid is noticed at the injection site after the pen is removed?
A. There are at least two reasons that a drop or more of liquid would be visible after an injection using a pen. If the pen has been primed pointing up some medication may have remained in the safety needle cover and then was left on the skin after the injection. Another reason could be that the needle was withdrawn before the entire amount of medication was injected into the resident and the remainder was deposited on the skin as the needle was withdrawn. (It can take up to 10 seconds for the entire amount of medication to pass through the needle.) If the latter reason was the cause, the resident did not receive the prescribed dose and should be monitored for signs of inadequate dosage. The registered nurse should be contacted and the resident monitored per the registered nurse's instructions.

It is important to keep the needle in the resident for the entire time that is required by the pen manufacturer.

CMA RESPONSIBILITIES

Q. Can the CMA label a pen with the resident name and date removed from refrigerator?
A. No. The Pharmacy must label the individual pens with the resident's name. Space must be provided for the date the pen is initially used. The CMA or Nurse who administers the initial dose from the pen fills in the date.

Q. Will CMAs be able to give injections with pens that use cartridge refills?
A. Yes
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NEEDLES / SAFETY / DISPOSAL

Q. Can a CMA attach a clean needle after disposing of the used needle to save time in preparing the next dose?
A. No. Needles should only be attached shortly before administering the injection. A pen should never be stored, even for a short time, with the needle attached.

Q. Can a pen be used on different residents if a new needle is used?
A. No. Sharing any medication is prohibited. This is especially dangerous with pens because they may become contaminated with cells and proteins from the residents upon whom they were used.

Q. If no safety needle is available, can a CMA or nurse use a regular needle with a pen?
A. No. In licensed Health Care Facilities, staff are required to use safety needles. Regular needles should not be available in the facility for use by staff.

Q. Can a resident administer his/her own medication using a regular needle on a pen?
A. Yes; NJAC 8:43E-7.1(a) requires "All facilities shall purchase, for use by health care workers only available sharp devices containing integrated safety features or available needleless devices designed to prevent needle stick injuries..." If needles are purchased and used by the resident, safety needles are not required because the resident is self-administering their medication.

Q. How is an empty pen disposed of?
A. Since the pen is considered a syringe and may contain blood cells & proteins from a resident, it should be disposed of in the sharps container or as regulated medical waste.

ORDERING

Q. When should pens be re-ordered?
A. A facility should always have at least one pen available in the facility (per resident who needs them) in case the active pen becomes unusable. Therefore, order more pens after administering the initial dose from the next to last pen in stock. Order earlier if use history is heavy.
STORAGE

Q. Is there any special place in the refrigerator for storing pens that require refrigeration?

A. The required refrigerator storage temperature is between 36 and 46 degrees Fahrenheit (F). If a refrigerator has a freezer or ice cube compartment the temperature next to it may be below freezing (32 degrees F). Therefore, do not store the pens next to the freezer or ice cube compartment since they may freeze in that area. Also, never place pens in the freezer or ice cube compartment of a refrigerator. If the medication freezes, it must be discarded since it may no longer be effective after it thaws.