

Revised Fundamentals of Caregiving – Addendum Packet

Hearing Loss, Foot Care, and Medication Assistance Activities

Instructor Guide



Hearing Loss or Impairment

Facilitator's instructions: The following content on the identification of potential hearing loss in a client and how to seek assistance if hearing loss is suspected must be incorporated into the 70-hour Core Basic Training via this addendum until it can be included in the next edition of the DSHS Revised Fundamentals of Caregiving publication (planned for 2019). Include this material when presenting the communication module (module 6, lesson 2). This addition is a result of enacted legislation (Chapter 216, Laws of 2017).

Hearing Loss

According to researchers, nearly two thirds of adults aged 70 years and older in the U.S. population experience hearing loss.¹ Studies have linked this loss of hearing in elders to conditions, amongst other declines, like walking difficulties,² falls,^{3,4} and social isolation⁵ making it very important for caregivers to identify when a client might be experiencing hearing loss, and may need to be assessed by a medical professional.

Reporting Guidelines

To effectively observe changes in a client, compare what you know of the client's baseline to what you currently see. Good sources of baseline information include the client, the client's care plan, other care team members, and a client's health care provider. You should report to the client's case manager or your supervisor what you observed when you have worries or questions about changes in a client's condition. You should also report when the client develops a new problem and has personal care needs that are not being met. Afterwards, document what you have reported and to whom.

What are possible signs of Hearing Loss or a Change in Condition from baseline?

The client may be experiencing hearing loss when you observe the below listed behaviors, such as the client:

- Increases volume level on audio/video devices;
- Reports ringing in their ears;
- Speaks loudly;
- Is non-responsive to sound;
- Is unable to hear your voice, or has trouble hearing high-pitched sounds;
- Is unable to distinguish sound with background noise, or when two people are talking at once;
- Misunderstands communication, especially if mobility challenged; i.e., unable to turn to the speaker while seated in a wheelchair;
- Requires speaker to repeat the same thing multiple times;
- Asks you to speak more slowly, clearly and loudly;
- Acts withdrawn;
- Misses part or whole words;
- Tries to bluff when spoken to;
- Unable to hear the caller on the phone;
- Misses alerts, such as a kitchen timer;
- Is unable to hear another person in a different room;
- Struggles to follow what is being said;
- Reports missing phone calls;
- Reports that people are saying they've been outside their door knocking for an extended period of time.

¹ [J Gerontol A Biol Sci Med Sci](#). 2011 May; 66A(5): 582–590

² [J Am Geriatr Soc](#). 2009;57(12):2282–2286

³ [J Gerontol A Biol Sci Med Sci](#). 2009;64(2):312–317

⁴ [Gerontologist](#). 2000;40(3):320–326

⁵ [J Aging Health](#). 2002;14(1):122–137

The following are general tips when problem solving and helping a client identify that they may be experiencing hearing loss.

- Note if the client wears a hearing aid -- check to see that it is on, is clean, is operating, and that it has batteries.
- Review the care plan to learn of any temporary loss or permanent loss of client's hearing.
- Check when client was last examined by medical provider; discuss with client whether they would like for you to arrange a medical provider examination (e.g. primary care physician, audiologist). Depending upon the caregiver's work environment, there may be different ways of arranging for a medical provider examination.
- Discuss your observations with:
 - Client
 - Legal guardian
 - Supervisor
 - Case manager

What are ways to assist clients with hearing loss or impairment?

- Use hearing assistive technology; i.e., hearing aids (these allow for arm-range effectiveness in noisy environments);
- Refer client to captions on phones, TV;
- Slow down the conversation, focusing on one topic at a time;
- Identify background sounds, working with client to reduce or eliminate distractions; and
- Encourage client to request others to change behavior (e.g. ask speaker to face client).

Resource Directory

Deaf and Hard of Hearing Resources & Organizations:

- Washington State Department of Social and Health Services - Office of the Deaf and Hard of Hearing: <https://www.dshs.wa.gov/altsa/office-deaf-and-hard-hearing>
- Hearing Loss Association of America - Washington State Association (HLA-WA): www.hearingloss-wa.org
4820 156th Place SW, Edmonds, WA 98026-4846
E-mail: info@hearingloss-wa.org
- Hearing Loss Association of America: www.hearingloss.org
7910 Woodmont Avenue, Suite 1200, Bethesda, MD 20814
301-657-2248
E-mail: info@hearingloss.org
- Loop Washington: <http://www.hearingloop.org/Campaigns.pdf> *Get in the Hearing Loop!* An educational campaign to increase awareness about hearing loss, hearing aids, benefits of telecoils, hearing loops and public hearing access accommodations.
E-mail: cheripz@gmail.com
- Benefits of Early Hearing Loss Treatment: <http://www.betterhearing.org/news/addressing-hearing-loss-sooner-brings-many-benefits>
- Identifying Symptoms of Hearing Loss: <http://www.hearingloss.org/content/symptoms-hearing-loss>
- How to Communicate with Someone Who Has Hearing Loss: <https://www.agingcare.com/articles/hearing-loss-communication-techniques-144762.htm>

- **It Takes Two to Communicate: Two-Way Communication Tip Cards:**
<http://hearingloss.org/content/brochuresdvds>
- **Hearing Assistive Technology.** Hearing assistive technology can assist a person to hear better in situations where a hearing aid is insufficient. Also assisted listening devices, such as pocket talkers, enable one to communicate with a person with a hearing loss who does not have a hearing aid.
 - ✓ Harris Communications: <https://www.harriscomm.com/equipment/personal-listening.html>
 - ✓ Washington State Office of Deaf & Hard of Hearing Services
<https://www.dshs.wa.gov/altsa/odhh/telecommunication-equipment-distribution>
 (Distributes amplified and captioned telephones to persons who are deaf or hard of hearing.)
- **Hearing Professionals, Hearing Aids, and Hearing Centers Near You**
 - ✓ <https://www.hearingtracker.com/hearing-aids/usa/washington>
 - ✓ Hearing Speech and Deaf Center: <https://www.hsdh.org/> (Provides case management, advocacy and information to individuals who are deaf and hard of hearing)
- **Financial Assistance for Hearing Aids**
 - ✓ Northwest Access Fund: <http://washingtonaccessfund.org/hearing-aid-funding-resources/>
 - ✓ Hearing Speech and Deaf Center <https://www.hsdh.org/>
 - ✓ University of Washington Speech and Hearing Clinic: <https://sphsc.washington.edu/hearing-aid-assistance-program>
 - ✓ Veterans! Hard of hearing? VA can help. - Veterans Health:
<https://www.va.gov/HEALTH/NewsFeatures/2015/September/Veterans-Hard-of-Hearing-VA-Can-Help.asp>
 - ✓ Hearing Health Research: <https://hearinghealthfoundation.org/research>

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Foot Care

Instructor Guide



Foot Care Correction

DSHS staff and subject matter experts reviewed the RFOC foot care material in order to help reduce the high failure rate at the home care aide certification exam when students receive the foot care skill. It is important that students must be aware that they should be prepared to perform the foot care skill at the exam, if this is one of their test items. Therefore, it is very important that students practice this skill during your training, using water and all supplies that are needed. Please highlight for your students the importance of practicing this skill.

The RFOC content on foot care currently includes nail trimming, which generally is permissible for a caregiver to perform after reviewing the client's care plan to confirm that step is indicated. However, please be aware that nail trimming is NOT a step that occurs during the skills exam, and students should be prepared to clean and file the nails only at the exam.

The below changes to curriculum are intended to clarify how the caregivers verify nail care for clients in Module 3, Lesson 1, page 10, and what is expected at the certification exam in Module 7, Lesson 2, page 124.

Changes to text on page 40, Module 3, Lesson 1 Providing Personal Care (text that has been added is in red).

Body care: includes passive range of motion, applications of dressings and ointments or lotions to the body, pedicure to file or trim toenails and apply lotion to feet.

[New paragraph] Please be aware that body care **excludes** foot care for clients who are diabetic or have poor circulation and changing bandages or dressings when sterile procedures are required.

Changes to text on page 124, Module 7, Lesson 2 Skill Demonstration Checklist (additions are in red).

Remind your students that they should be prepared to perform the foot care skill at the exam, if this is one of their test items. Therefore, it is very important that students practice this skill during your training, using water and all supplies that are needed. Please highlight for your students the importance of practicing this skill.

Please be aware that at the certification exam, nail trimming is not a performed step. Students are expected to demonstrate proper foot care procedures during skills training.

- 1) S.W.I.P.E.S.
- 2) Put on gloves (follow proper procedures for placement and removal on pages 66-67).
- 3) Inspect the client's foot carefully before starting the procedure by checking between the toes and the heels of the foot. Inquire whether the client has any pain or sensitive areas before beginning.
- 4) Put water in basin, filling it no less than halfway full. Test water temperature and ensure it is safe and comfortable before placing client's feet in water. Adjust if necessary.
- 5) Ask client if water temperature is comfortable before foot is completely submerged. Adjust if necessary.
- 6) Put the client's foot completely in the water.
- 7) Supporting foot and ankle properly throughout procedure, remove foot from water, wash entire foot, including between toes, with soapy washcloth. Keep water in basin soap-free for use as rinse water by: (1) washing foot with washcloth with soap applied directly to the washcloth instead of adding soap into basin of water; or (2) using two separate basins of water: one for washing and

one for rinsing.

- 8) Be sure to add the soap to the wet washcloth rather than directly in the water.
- 9) Rinse and then dry entire foot, including between toes. Pat, don't rub dry.
- 10) Gently clean dirt out from under nails using orangestick. Wipe the orange stick clean on the towel after cleaning each nail.
- 11) File (or cut) nails straight across as needed to ensure smoothness with (clippers or) an emery board.
[Note: Always verify the client's care plan prior to performing foot care to determine whether the client's foot care includes nail trimming. Nail trimming is not performed during the certification exam.]
- 12) Ask if client would like lotion applied. If so, put lotion in your hand and ~~massage~~ apply lotion to the client's entire foot making sure to not put lotion in-between the toes. Remove excess lotion (if any) with towel.
- 13) Assist client to replace socks and shoes.
- 14) Empty, rinse, wipe bath basin, and return to proper storage.
- 15) Remove gloves and wash hands.

Changes to text on page 124, Module 7, Lesson 2 Body Care general tips (additions are in red).

Remind your students that they will not be trimming nails during their certification exam.

The following are **general tips** when helping a client with **foot care**.

- Inspect your client's feet regularly for changes in color (especially redness), temperature, blisters, cuts or scratches, cracks between the toes, or other changes. Document and report any swelling or redness you notice around the area.
- Monitor minor cuts and keep them clean.
- Do not put lotion in-between the toes - the lotion causes moisture that promotes fungal growth.
- For most clients, you will only be filing nails, and not trimming nails. Always verify the client's care plan prior to performing foot care to determine whether the client's foot care includes nail trimming.
- If the care plan indicates nail trimming, do not cut down the corners of a client's toenails or dig around the nail with a sharp instrument for any client.
- If the care plan indicates nail trimming, never cut the nails too short as this may cause ingrown toenails. After cutting, file the nails downward.
- Cuticles act as a barrier to infection. Do not clip them.

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Medication Assistance Challenge

Instructor Guide – Small Group Role-Play



Activity Description

This is a small group activity. Each group is comprised of three students with distinct roles as caregiver, client and evaluator. Group members will take turns participating in each role as they act out medication assistance scenarios and demonstrate the required steps to perform the skills.

Learning Goal

The goals of this activity are to:

- Reinforce the student's understanding of the caregiver role in the medication assistance process.
- Ensure that the student is better prepared to take the Prometric skills exam.

Materials

- Prescription Label Sheet 1
- Empty medication bottles (or similar shaped item)
- Scenarios list
- Prometric Medication Checklist

Preparation

- Prior to the role-play, print prescription medication labels in color or manually color black and white labels to correspond with the identified colors. Cut out labels and tape or glue them on empty medication bottles or similar. Cardboard toilet paper or paper towel holders can be used if one end is enclosed.
- To simulate medication during the role-play, you will also need small edible objects such as raisins, candies, or cereal for each bottle or container.
- Place six (6) medication bottles in a small box or basket by grouping three (3) similar colors with three (3) random colors for an appropriate level of challenge.

Instructions

1. Divide students into groups of three (3). Confirm that the bottles that are in play correspond with the scenarios that are read.
2. Review the Five Rights of medication with the students.

① Right medication ② Right client ③ Right amount ④ Right route ⑤ Right time
3. Introduce the three roles performed in this small group activity as caregiver, client and evaluator.
4. Group members will take turns participating in each role as they act out the specific medication assistance scenarios while following the steps that are required to perform the skills.
5. Read the scenarios while group members take turns participating in each role.
6. The student evaluator provides feedback on medication assistance, technique and caregiver understanding using the Prometric Home Care Aide Skills Checklist as guidance. This role is different than the role performed by the evaluator during testing.
7. For the most current Prometric checklist follow the link provided below:
<https://www.prometric.com/en-us/clients/WADOH/Documents/WAHCACHECKLISTWITHHEAVIESTWEIGHTCHECKPOINTS20130529.pdf>.

Medication Assistance Challenge

Instructor Guide – Small Group Role-Play Scenarios – Green and Blue Labels

Medications and Other Treatments

■ Scenario #1) Christine M. Percival

It is time to assist Christine with her medication.

Which medication is she scheduled to take at 9:00 a.m.?

What time of day is it---morning, noon, or night?

How many tablets will she take?

ANSWER: She should take **Donepezil** at **9:00 a.m.**; the time of day is **morning**; she will take **one** tablet.

■ Scenario #2) Christopher M. Percival

It is time for Christopher's dose of medication.

What time of day should you be assisting him?

How many tablets should he take?

ANSWER: The time of day for him to take his dose is **8:00 p.m., night time**; he should take **two** tablets.

■ Scenario #3) Christine M. Percival

It is morning and time for you to assist Christine with her dose of Levaquin.

How many tablets does she need to take of this medication right now?

ANSWER: She will need to take **two** tablets.

■ Scenario #1) Janice M. Lee

It is time for you to assist Janice with her dose of medication.

What is the name of her medication?

What time of day is it---morning, noon, or night?

ANSWER: The name of her medication is **Doxepin**; the time of day is **noon**.

■ Scenario #2) Jacob M. Lee

Locate Jacob's medication labeled Doxepin.

It is morning time. How many tablets does he need to take at this time?

ANSWER: He needs to take **one** capsule of Doxepin at **8:00 a.m.**

■ Scenario #3) Jacob M. Lee

Jacob is experiencing some pain and is asking you to assist him with his medication. He took one dose two hours ago.

Can he take another tablet right now?

Why or why not?

ANSWER: **No**, he cannot take another dose; it has **only been two hours** since his last dose and the label indicates that **he must wait four hours** between doses.

Medication Assistance Challenge

Instructor Guide – Small Group Role-Play Scenarios – Red and Purple Labels

▪ Scenario #1) Michelle R. Poulos

Michelle is very tired and wants to go to bed earlier than normal. It is now 7:30 p.m. She has taken two tablets of Levaquin today.

Can you assist her with another dose of medication before she goes to sleep?

If so, how many tablets?

ANSWER: Yes, she should take **two** tablets before going to bed since the label indicates that she needs to take **two tablets twice daily**, and she has already taken her first dose. **It is appropriate to offer medication 30 minutes before or 30 minutes after the indicated time. It is now 7:30 p.m. and the label notes that she should take her medication at 8:00 p.m., so it is within the time allocated.**

▪ Scenario #2) Michael R. Poulos

Michael needs assistance from you to take his Levaquin medication.

What time of day is it---morning, noon, or night?

ANSWER: It is **morning** time; he needs to take **one** tablet.

▪ Scenario #3) Michael R. Poulos

Michael is getting ready for bed.

Should you be assisting him with any medication at this time?

If so, what is the medication and how much should he take?

ANSWER: Yes, he should be taking **one tablet of Triazolam one hour before going to bed.**

▪ Scenario #1) Maria J. Anderson

Maria just woke up in the morning.

Should you be assisting her with any medication?

Why or why not?

ANSWER: **No.** The label indicates that she should be taking her medication **at night time before bed.**

▪ Scenario #2) Maria J. Anders

It is 30 minutes before Maria's bedtime.

How many tablets of Triazolam should you be assisting her to take?

ANSWER: You will be assisting her with **two** tablets.

▪ Scenario #3) Maria J. Anders

Maria needs your assistance with her dose of Levaquin.

What time is it?

What time of day is it---morning, noon, or night?

ANSWER: It is **6:00 p.m.**; the time of day is **night** time.

Medication Assistance Challenge

Instructor Guide – Small Group Role-Play Scenarios – Orange and Brown Labels

▪ Scenario #1) Terrence J. Kranitz

What type of medication has been prescribed for Terrence?

How many tablets should you be assisting him to take in one dose?

ANSWER: He has been prescribed **pain medication, Demerol**; he should take **one** tablet per dose.

▪ Scenario #2) Teresa J. Kranitz

How many capsules should you assist Teresa with for each dose of Doxepin?

How many times per day does she need to take Doxepin?

ANSWER: She should take **two** capsules for each dose; she needs to take her dose **two times** per day at 8:00 a.m. and 7:00 p.m.

▪ Scenario #3) Teresa J. Kranitz

Which medication requires Teresa to take her dose at 6:00 a.m. daily?

How many tablets will you assist her with at this time?

ANSWER: She is required to take **Levaquin** at 6:00 a.m. daily; she will take **one** tablet at this time.

▪ Scenario #1) Elena R. Valez

Elena just woke up in the morning and you are providing medication assistance.

How many capsules does she need to take at this time?

When should you provide medication assistance for her next dose?

ANSWER: She needs to take **one** capsule in the morning at **7:00 a.m.**; she will be taking **one** capsule in the evening at **6:00 p.m.** as well.

▪ Scenario #2) Erica R. Valez

It is 8:00 p.m. and bed time for Erica.

Does she need medication assistance before she goes to bed?

If so, which type of medication? How many capsules?

ANSWER: **Yes**, she needs medication assistance at **8:00 p.m.**; she needs to take her dose of **Doxepin**; she needs to take **two** capsules **before she goes to bed**.

▪ Scenario #3) Erica R. Valez

Erica is eating her lunch and needs you to offer medication assistance for her dose of Levaquin.

What time of day is it---morning, noon, or night?

How many tablets should she take of this medication?

ANSWER: It is **noon**; she should take **one** tablet of Levaquin.

Prometric Home Care Aide Skills Checklist – Medication Assistance

The client is sitting at a table while this care is provided. The client is unable to open the medication bottle or pour his/her medication. The medication bottles contain candies or other small edible substances that the students will pretend are medication pills for the test. The role of the client is played by another student. The evaluator is played by the third student, using the Prometric Home Care Aide Skills Checklist as guidance to provide peer feedback. If any bolded checklist steps, are missed while taking the Prometric exam the student will fail the test.

Does the student:

1	Identify self to the client when beginning care?
2	Check client's medication schedule?
3	Advise client it is time to take medicine?
4	Select the medication labeled with the client's name?
5	Select the correct medication bottle?
6	Review the medication label before removing medication from bottle?
7	Pour pill(s) into cap of medicine bottle without touching medication?
8	Give client correct medication dose placed into hand from the cap of the medicine bottle without the candidate touching the medication?
9	Cue client to take medication?
10	Assist client to take medication without having the candidate's hand over the client's hand, or tipping client's hand to place pill(s) into mouth, or placing the pill(s) directly into the client's mouth?
11	Provide client cup of water to use for swallowing medication?
12	Cue client to drink full cup of water?
13	Ask client or check if medication is swallowed or check that swallowed?
14	Close medication bottle and return to box before ending procedure?
15	Use infection control measures and Standard Precautions to protect the client and the HCA throughout procedure?
16	Promote client's social and human needs throughout procedure?
17	Promote client's rights throughout procedure
18	Promote client's safety throughout procedure
19	Promote client's comfort throughout procedure?
20	Leave common use items within client's reach at end of care (e.g., phone, glasses, remote, tissues, glass of water)?

This checklist is current as of 5/29/2013. It is the instructor's responsibility to update this checklist as needed.

Additional Resource:

This time table can be used as a guide in the classroom to teach students how to convert 24 hour time to 12 hour time. During the Prometric test only the 12 hour clock is used.

	24 hour	12 hour
Morning (AM)	1:00	1:00am
	2:00	2:00am
	3:00	3:00am
	4:00	4:00am
	5:00	5:00am
	6:00	6:00am
	7:00	7:00am
	8:00	8:00am
	9:00	9:00am
	10:00	10:00am
	11:00	11:00am
Afternoon/Evening (PM)	12:00	12:00pm
	13:00	1:00pm
	14:00	2:00pm
	15:00	3:00pm
	16:00	4:00pm
	17:00	5:00pm
	18:00	6:00pm
	19:00	7:00pm
	20:00	8:00pm
	21:00	9:00pm
	22:00	10:00pm
	23:00	11:00pm
	24:00	12:00am

A.M./AM/a.m.

P.M./PM/p.m.

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Medication Assistance Challenge

Instructor Guide – Tic Tac Toe

Activity Description

This activity is based on the simple game of Tic Tac Toe and it can be used as a warm-up exercise for the Role Playing Group Activity or as a stand-alone activity.

Materials

- Medication Label Sheets
- Medication List

Learning Goal

The goals of this activity are to:

- Reinforce the student's understanding of the caregiver role in the medication assistance process.
- Ensure that the student is better prepared to take the Prometric skills exam.

Instructions

1. Provide each student with a medication label sheet (9 prescription labels per sheet).
2. Instruct students to place the sheet in front of them face up. Explain that to win the game of Tic Tac Toe, the student must have three medication labels in a row.
3. Read a description from the Medication Label List. The students will look for a prescription label that matches the description.
4. If the student hears a description that matches one of their cards, the student will put an X on that card or use an alternate way to track their matches if you intend to use the labels repeatedly.

BEFORE CHART: PRESCRIPTION INFORMATION PRESCRIPTION INFORMATION NAME: JANE DOE DOB: 1/1/1980 ADDRESS: 1234 MAIN ST, SEASIDE, WA 98138 PHONE: (206) 555-1234 ALLERGENS: PENICILLIN, SULFONAMIDES CURRENT MEDICATIONS: LIPITOR, ZOLARON, VALIUM PRESCRIPTION INFORMATION NAME: JANE DOE DOB: 1/1/1980 ADDRESS: 1234 MAIN ST, SEASIDE, WA 98138 PHONE: (206) 555-1234 ALLERGENS: PENICILLIN, SULFONAMIDES CURRENT MEDICATIONS: LIPITOR, ZOLARON, VALIUM	BEFORE CHART: PRESCRIPTION INFORMATION PRESCRIPTION INFORMATION NAME: JANE DOE DOB: 1/1/1980 ADDRESS: 1234 MAIN ST, SEASIDE, WA 98138 PHONE: (206) 555-1234 ALLERGENS: PENICILLIN, SULFONAMIDES CURRENT MEDICATIONS: LIPITOR, ZOLARON, VALIUM PRESCRIPTION INFORMATION NAME: JANE DOE DOB: 1/1/1980 ADDRESS: 1234 MAIN ST, SEASIDE, WA 98138 PHONE: (206) 555-1234 ALLERGENS: PENICILLIN, SULFONAMIDES CURRENT MEDICATIONS: LIPITOR, ZOLARON, VALIUM	BEFORE CHART: PRESCRIPTION INFORMATION PRESCRIPTION INFORMATION NAME: JANE DOE DOB: 1/1/1980 ADDRESS: 1234 MAIN ST, SEASIDE, WA 98138 PHONE: (206) 555-1234 ALLERGENS: PENICILLIN, SULFONAMIDES CURRENT MEDICATIONS: LIPITOR, ZOLARON, VALIUM PRESCRIPTION INFORMATION NAME: JANE DOE DOB: 1/1/1980 ADDRESS: 1234 MAIN ST, SEASIDE, WA 98138 PHONE: (206) 555-1234 ALLERGENS: PENICILLIN, SULFONAMIDES CURRENT MEDICATIONS: LIPITOR, ZOLARON, VALIUM
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Medication Label List

5. When a student has three in a row (horizontally, vertically, or diagonally), they notify the instructor who will verify if the correct labels were selected.

Tip: Medication prescription labels are intentionally similar to make the game more challenging for the learner and promote paying attention to small details. Check winning cards carefully!

Medication Assistance Challenge

Instructor Guide – Tic Tac Toe Scenarios

Medication Label List

- 1) Locate the medication for Christopher M. Percival
2.5 MG Donepezil
2 tablets taken at 8:00 p.m.
Sheet #: 1, 3, 6
- 2) Locate the medication for Janice M. Lee
50 MG Doxepin
1 capsule daily at 12:00 p.m.
Sheet #: 5, 7, 10
- 3) Locate the medication for Jacob M. Lee
250 MG Demerol
1 tablet every 4 hours as needed for pain
Sheet #: 5, 6, 10
- 4) Locate the medication for Michael R. Poulos
100 MG Levaquin
1 tablet daily at 8:00 a.m.
Sheet #: 7, 8
- 5) Locate the medication for Christine M. Percival
50 MG Levaquin
2 tablets twice daily at 9:00 a.m. and 6:00 p.m.
Sheet #: 7, 8, 9
- 6) Locate the medication for Michael R. Poulos
0.125 MG Triazolam
1 tablet one hour before bedtime
Sheet #: 1, 6
- 7) Locate the medication for Michael L. Poulos
25 MG Levaquin
1 tablet one hour before bedtime
Sheet #: 9, 2
- 8) Locate the medication for Maria J. Anderson
0.125 MG Triazolam
1 tablet 30 minutes before bedtime
Sheet #: 1, 6
- 9) Locate the medication for Christine M. Percival
100 MG Levaquin
1 tablet twice daily at 6:00 a.m. and 6:00 p.m.
Sheet #: 8, 9

- 10) Locate the medication for Maria J. Anders
50 MG Levaquin
2 tablets at 6:00 p.m. daily
Sheet #: 4, 7, 8
- 11) Locate the medication for Terrence J. Kranitz
250 MG Demerol
1 tablet every 4 hours as needed for pain
Sheet #: 4, 5, 7
- 12) Locate the medication for Maria I. Anders
25 MG Triazolam
1 tablet 30 minutes before bedtime
Sheet #: 6, 2
- 13) Locate the medication for Teresa J. Kranitz
25 MG Doxepin
2 capsules twice daily at 8:00 a.m. and 7:00 p.m.
Sheet #: 2, 6, 8,
- 14) Locate the medication for Michael N. Poulos
50 MG Levaquin
2 tablets once daily at 7:00 a.m.
Sheet #: 1, 10
- 15) Locate the medication for Teresa J. Kranitz
50 MG Levaquin
1 tablet at 6:00 a.m. daily
Sheet #: 1, 8
- 16) Locate the medication for Maria J Anderson
1 MG Triazolam
1 tablet 30 minutes before bedtime
Sheet #: 7, 3
- 17) Locate the medication for Elena R. Valez
50 MG Doxepin
1 capsule twice daily at 7:00 a.m. and 6:00 p.m.
Sheet #: 8, 9
- 18) Locate the medication for Michelle R. Poulos
25 MG Levaquin
2 tablets twice daily at 7:00 a.m. and 8:00 p.m.
Sheet #: 1, 3, 5
- 19) Locate the medication for Erica R. Valez
25 MG Doxepin
2 capsules twice daily at 9:00 a.m. and 8:00 p.m.
Sheet #: 5, 8, 10

- 20) Locate the medication for Jacob M. Lee
50 MG Doxepin
1 capsule twice daily at 8:00 a.m. and 8:00 p.m.
Sheet #: 2, 3, 7
- 21) Locate the medication for Erica R. Valez
100 MG Levaquin
1 tablet daily at 12:00 p.m.
Sheet #: 1, 4, 7
- 22) Locate the medication for Maria J. Anders
0.0625 MG Triazolam
2 tablets 30 minutes before bedtime
Sheet #: 2, 3
- 23) Locate the medication for Christopher M. Percival
25 MG Donepezil
1 tablet daily at 8:00 p.m.
Sheet #: 1, 4, 6
- 24) Locate the medication for Jacob W. Lee
10 MG Doxepin
2 capsules once daily at 12:00 p.m.
Sheet #: 5, 9, 10
- 25) Locate the medication for Christine M. Percival
100 MG Levaquin
1 tablet twice daily at 10:00 a.m. and 8:00 p.m.
Sheet #: 5, 8
- 26) Locate the medication for Christine M. Percival
5 MG Donepezil
1 tablet taken at 9:00 a.m.
Sheet #: 2, 4, 5
- 27) Locate the medication for Janice W. Lee
20 MG Doxepin
2 capsules daily at 12:00 p.m.
Sheet #: 4, 10
- 28) Locate the medication for Elena R. Valez
10 MG Doxepin
2 capsules twice daily at 9:00 a.m. and 7:00 p.m.
Sheet #: 3, 10
- 29) Locate the medication for Jacob W. Lee
50 MG Demerol
2 tablets every 4 hours as needed for pain
Sheet #: 5, 6

- 30) Locate the medication for Michelle L. Poulos
250 MG Levaquin
1 tablet once daily at 5:00 p.m.
Sheet #: 3, 4
- 31) Locate the medication for Maria I. Anderson
25 MG Triazolam
2 tablets 30 minutes before bedtime
Sheet #: 1, 2, 9
- 32) Locate the medication for Marie J. Anders
500 MG Levaquin
1 tablet at 5:00 p.m. daily
Sheet #: 2, 9, 10
- 33) Locate the medication for Erica R. Valez
50 MG Levaquin
2 tablets daily at 12:00 p.m.
Sheet #: 2, 3, 4
- 34) Locate the medication for Jacob W Lee
Demerol 100 MG Tablets
Take 2 tablets by mouth every 4 hours as needed for pain
Sheet #: 4, 9
- 35) Locate the medication for Erica R. Valez
20 MG Doxepin
1 capsule twice daily at 6:00 a.m. and 5:00 p.m.
Sheet #: 9, 10
- 36) Locate the medication for Michael Poulos
Triazolam 25 MG
Take 1 tablet one hour before bedtime
Sheet #: 3, 6, 7