

Medication Administering Record

All service user information is detailed in their placement plan

SU Name: D.O.B. Carer(s) Name:

GP Surgery: Start Date (DD/MM/YY): End Date: Start Date: End Date:

Please initial each box when you administer medication or enter the code if not | *R = Refused M = Missed D = Discontinued A for Away V = Vomiting or Diarrhoea P = Returned to Pharmacist/Destroyed*

Medication Name	Time	Dose	Days																																		
			1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31				
	In:	Out:	In:	Out:																																	
	In:	Out:	In:	Out:																																	
	In:	Out:	In:	Out:																																	

Put Date, Initials and any comments or actions in the notes below.

Date	Initials	Code	Reasons/Action Taken

Medication name and Dose	Reason Administered

R = Refused M = Missed D = Discontinued A = Away, V = Vomiting or Diarrhoea P = Returned to Pharmacist/Destroyed