## ADDITIONAL DOCUMENTATION PRACTICE EXERCISES MARS
## ANSWER KEY - EXERCISE #1 (FRONT) MEDICATION ADMINISTRATION RECORD (MAR)

| MEDICATION | HOUR | 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 |
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| Prevacid 30 mg Take 1 tablet by mouth two times a day for reflux. | 8 am | | | | | | | | | | | | | | | O | / | - | | | | | | | | | | | | | | |
| | 8 pm | | | | | | | | | | | | | | | / | - | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | Discontinued. 5/15/07 QM | | | | | | | | | | | | | | | |
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| Methotrexate 1 mg Take 1 tablet by mouth once a day in the morning for arthritis. | 8 am | | | | | | | | | | | | | | | O | | | | | | | | | | | | | | | | |
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| Amoxicillin 250 mg Take 1 tablet by mouth three times a day for 7 days for strep throat. | 8 am | | - | | | | | | | | / | - | | | | | | | | | | | | | | | | | | | | |
| | 4 pm | | QM | | | | | | | / | - | | | | | | | | | | | | | | | | | | | | | |
| | 8 pm | | | | | | | | | / | - | | | | | | | | | | | | | | | | | | | | | |
| Prevacid 30 mg Take 1 ½ tablets by mouth two times a day for reflux. | 8 am | | | | | | | | | | | | | | | - | | | | | | | | | | | | | | | | |
| | 8 pm | | | | | | | | | | | | | | - | | | HV | | | | | ® | | | | | | | | | |
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| Methotrexate 1 mg Take 1 tablet by mouth once a day in the morning for arthritis. Give at 11 am today only | 11 am | | | | | | | | | | | | | | - | QM | / | - | | | | | | | | | | | | | | |
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| Ibuprophen 100 mg Take 2 tablets by mouth once per day for headache. | | | | | | | | | | | | | | | | | | | | | | | | | | 2pmQM | | | | | | |
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**Dates of administration from: May 1 to May 31 2007**

**ALLERGIES: None** | **DIAGNOSES: reflux, arthritis** | **PHYSICIAN(S): Burns, Howard**

| NAME: Chip Flowers | DOB 11/12/1948 | ID NUMBER: 0000-000-00 |
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**ANSWER KEY - EXERCISE #1 (BACK) MEDICATION ADMINISTRATION RECORD (MAR)**

| DATE | TIME GIVEN | MEDICATION & DOSE | ROUTE | REASON | RESPONSE | INITIALS |
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| 5/25/07 | 2 pm | Ibuprophen 200 mg | Po | Headache | resolved | QM |
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| INI-TIALS | ADMINISTRATOR'S SIGNATURE | INITIALS | ADMINISTRATOR'S SIGNATURE |
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| QM | Quimby McQuillin | | |
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LEGEND: O = Omission HV = Home Visit ® = Refusal

**ANSWER KEY - EXERCISE #2 (FRONT) MEDICATION ADMINISTRATION RECORD (MAR)**

| MEDICATION | HOUR | 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 |
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| D-CAL Vitamin Take one tablet by mouth one time a day for osteoporosis. | 8 am | | | | | | | | | | | | | | | | | | | | | | | | | O | | | | A | | |
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| Alendronate 5 mg Take one tablet by mouth once a day in the morning one half hour before eating with 8 ounces of water for osteoporosis. Keep upright for 30 minutes after taking. | 8 am | | | QM | | | | | | | | | | | | | | | | | ® | | | | | O | / | - | | | | |
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| D-CAL Vitamin Take one tablet by mouth one time a day for osteoporosis. | 12 noon | | | | | | | | | | | | | | | | | | | | | | | | - | QM | / | - | | | | |
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| Raloxifene hydrochloride 60 mg Take one tablet by mouth one time a day for osteoporosis. | 8 am | | | | | | | | | | | | | | | | | | | | | | | | | - | QM | | | A | | |
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**Dates of administration from: March 1 to March 31 2007**

**PHYSICIAN(S): Burns, Howard**

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| **ALLERGIES: None** | | |
| **DIAGNOSES: cerebral palsy, seizure disorder, Aicardi syndrome, scoliosis; monitor for swallowing** | | |
| **NAME: Melissa Sullivan** | **DOB 12-1-78** | **ID NUMBER: 0000-000-00** |

**ANSWER KEY - EXERCISE #2 (BACK) MEDICATION ADMINISTRATION RECORD (MAR)**

| DATE | TIME GIVEN | MEDICATION & DOSE | ROUTE | REASON | RESPONSE | INITIALS |
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| INI-TIALS | ADMINISTRATOR'S SIGNATURE | INITIALS | ADMINISTRATOR'S SIGNATURE |
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| QM | Quimby McQuillin | | |
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**LEGEND: O = Omission A = Absent ® = Refusal**

**ANSWER KEY - EXERCISE #3 (FRONT) MEDICATION ADMINISTRATION RECORD (MAR)**

| MEDICATION | HOUR | 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 |
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| Imipramine 75 mg Take one capsule by mouth one time per day at bedtime for 3 days for depression. | 10 pm | | | | - | | | QM | / | | | | | | | | | | | | | | | | | | | | | | | |
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| Imipramine 100 mg Take one capsule by mouth one time per day at bedtime beginning on January 8, 2007 for depression. | 10 pm | | | | | | | - | | X | | | | | | | | | | | | | | | | | | | | | | |
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| Imipramine 100 mg Take one capsule by mouth one time per day at bedtime beginning on January 8, 2007 for depression. | 8 am | | | | | | | | - | QM | / | - | | | | | | | | | | | | | | | | | | | | |
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| Atorvastatin calcium 10 mg Take one tablet by mouth once a day for high cholesterol. | 8 am | | | | | | | | | | | - | | | | | | | | | | | | | | | | | QM | QM | / | D/C'd ~~1/29/07~~ QM |
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| **Dates of administration from: January 1 to January 31 2007** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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| **PHYSICIAN(S): Burns, Howard** | | |
| **ALLERGIES: Sulfa drugs** | | |
| **DIAGNOSES: migraines, high blood pressure, bipolar disorder, high cholesterol** | | |
| **NAME: Frederick Smith** | **DOB 12-1-65** | **ID NUMBER: 0000-000-00** |

**ANSWER KEY - EXERCISE #3 (BACK) MEDICATION ADMINISTRATION RECORD (MAR)**

| DATE | TIME GIVEN | MEDICATION & DOSE | ROUTE | REASON | RESPONSE | INITIALS |
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| INI-TIALS | ADMINISTRATOR'S SIGNATURE | INITIALS | ADMINISTRATOR'S SIGNATURE |
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| QM | Quimby McQuillin | | |
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**LEGEND: X = Not given at this time**