Administering Rectal or Vaginal Medications

Level III

Purpose

The purpose of this procedure is to provide guidelines for the safe administration of rectal and vaginal medications.

Preparation

1. Verify that there is a physician's medication order for this procedure.
2. Review the resident's care plan to assess for any special needs of the resident.
3. Assemble the equipment and supplies as needed.

General Guidelines

1. Follow the medication administration guidelines in the policy entitled *Administering Medications*.

Equipment and Supplies

The following equipment and supplies will be necessary when performing this procedure.

1. Medication Administration Record;
2. Medication cart or tray;
3. Suppositories (rectal or vaginal);
4. Cream, gel, or ointment (vaginal);
5. Lubricant;
6. Applicator, as indicated; and
7. Personal protective equipment (e.g., gowns, gloves, mask, etc., as needed).

Steps in the Procedure

1. Perform hand antisepsis.
2. Arrange supplies in the medication room or move the medication cart outside the resident's room.
3. Place the MAR within easy viewing distance.
4. Unlock the medication cart.
5. Select the drug from the unit dose drawer or stock supply.
6. Check the label on the medication and confirm the medication name and dose with the MAR.
7. Check the expiration date on the medication. Return any expired medications to the pharmacy.
8. Check the medication dose. Re-check the dose.
9. Prepare the correct dose of medication.
10. Confirm identity of the resident.
11. Explain the procedure to the resident.
12. Place medications on the bedside table or tray.
13. Provide for privacy of the resident.
14. Insert medication:

Rectal Suppositories

a. Assist the resident to a lateral position with the leg flexed at the hip and knee, if possible.
b. Fold bed sheets back so that only the buttocks are exposed.
c. Unwrap the suppository and place it on the open wrapper.
d. Put on clean gloves.

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Steps in the Procedure (continued)

e. Lubricate the insertion point of the suppository. (**Note**: The smooth, rounded tip of the suppository is the insertion point.)
f. Lubricate gloved index finger.
g. Gently insert the suppository into the anus with the lubricated, gloved index finger. Insert approximately 10 cm (4 inches) deep along the wall of the rectum.
h. Instruct resident to remain in a left lateral or lying position for at least five (5) minutes.
i. Remove gloves and turn inside out to contain rectal bacteria. Wash and dry hands thoroughly.

Vaginal Suppositories

a. Ask the resident to void.
b. Help her to a lithotomy position.
c. Expose the perineum.
d. Remove suppository from the wrapper and lubricate the tip.
e. Put on gloves.
f. With applicator or gloved index finger, insert the medication approximately 5 cm (2 inches). When the suppository reaches the distal wall of the vagina, depress the applicator plunger.
g. Remove the applicator with plunger still depressed.
h. Remove gloves. Wash and dry hands thoroughly.

Vaginal Creams, Ointments, Gels

i. Insert plunger into applicator.
j. Attach the applicator to the medication tube.
k. Squeeze the tube to inject prescribed amount of medication into the applicator.
l. Detach from tube and lubricate applicator end.
m. Put on gloves.
n. Assist resident to lithotomy position and expose the perineum.
o. Insert the applicator approximately 5 cm (2 inches) into the vagina or until applicator touches the distal wall of the vagina.
p. Administer the medication by depressing the plunger. Remove applicator from the vagina with the plunger still depressed.
q. Remove gloves. Wash and dry hands thoroughly.

15. Discard all disposable items into designated containers.
16. Perform hand antisepsis.
17. Reposition the bed covers. Make the resident comfortable.
18. Place the call light within easy reach of the resident.
19. If the resident desires, return the door and curtains to the open position and if visitors are waiting, tell them that they may now enter the room.

Documentation

Follow documentation guidelines in the procedure entitled *Documentation of Medication Administration*.

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Reporting

1. Notify the supervisor if the resident refuses the procedure.
2. Report other information in accordance with facility policy and professional standards of practice.

References	
MDS (RAPs)	I1; I2; I3; J1; J2; J4; J5; O1; O2; O4; P8
Survey Tag Numbers	F329–F333; F425
Related Documents	Administering Medications Documentation of Medication Administration
Risk of Exposure	Blood–Body Fluids–Infectious Diseases–Air Contaminants–Hazardous Chemicals
Procedure Revised	Date:_____ By:_____ Date:_____ By:_____ Date:_____ By:_____ Date:_____ By:_____