




Department of
Developmental
Disabilities

MEDICATION ADMINISTRATION COMMUNICATION BOARD

 DOCTOR	 NURSE	 YES	 NO	 MAKE A PHONE CALL	 MEDICATION	 PILLS	 LIQUID
 CREAM	 ALLERGY	 MORNING	 EVENING /NIGHT	 OXYGEN	 INHALER	 CPAP/BIPAP MACHINE	 BREATHING
 THERMOMETER	 SUCTION	 CATHETER	 OSTOMY	 BLOOD SUGAR	 SHOT (INSULIN)	 BLOOD PRESSURE	 PULSE
 BANDAGE	 FOOD	 DRINK	 G-TUBE	 FACE	 HEAD	 EARS	 NOSE
 EYES	 STOMACH	 ARM	 HAND	 LEG	 FEET	 SICK	 PAINSCALE

					
0	2	4	6	8	10
No hurt	Hurts Little Bit	Hurts Little More	Hurts Even More	Hurts Whole Lot	Hurts Worst

0	1	2	3	4	5	6	7	8	9
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