Section N
Medications

Objectives

At the conclusion of this lesson, the student will be able to:

- State the intent of Section N Medications.
- Describe the information required to complete Section N.
- Code Section N correctly and accurately.
Methodology

This lesson utilizes lecture and scenario-based practice.

Training Resources

- Instructor Guide
- Slides 1 to 31

Instructor Preparation

- Review the Instructor Guide.
- Review the learning objectives for the lesson.
- Rehearse with slide presentation.
I. Introduction/ Objectives

A. Section N documents medications received by the resident during the look-back period.

B. Objectives

- State the intent of Section N Medications.
- Describe the information required to complete Section N.
- Code Section N correctly and accurately.
C. Section N Intent

1. The intent of the items in this section is to record the number of days during the past 7 days (or since admission/ reentry if less than 7 days) that any type of injection, insulin, and/or select oral medications were received by the resident.

2. Section N does not document the number of injections received by the resident.

3. Section N focuses on the number of days during the look-back period that the resident received injections as well as the type of medications received.

II. Item N0300 Injections

A. This item documents the number of days that injections of any type were received by the resident during the look-back period.
B. N0300 Importance

1. Frequency of administration of medication via injection can be an indication of stability of a resident’s health status and/or complexity of care needs.

C. N0300 Conduct the Assessment

1. Review the resident’s medication administration records for the 7-day look-back period or since admission/reentry if less than 7 days.

2. Review documentation from other health care locations where the resident may have received injections while a resident of the nursing home.
   a. E.g., flu vaccine in a physician’s office

3. Determine if any medications were received by the resident via injection.

4. If received, determine the number of days during the look-back period that injections were received.
D. N0300 Assessment Guidelines

1. The look-back period is **7 days** or **since admission or reentry** if less than 7 days.

2. This includes any type of medication, antigen, vaccine, etc.
   a. Include any insulin injections although these are also documented separately in N0350.

3. May be administered by subcutaneous, intramuscular, or intradermal injection.
   a. This includes subcutaneous pumps (for example, insulin pump only count the days when resident actually required a subcutaneous injection to start/ restart the pump).

4. Record the number of days injections were received by the resident.

5. Do not record the number of injections the resident received.

E. N0300 Coding Instructions

1. Count the number of days that the resident received any type of injection while a resident of the nursing home.

2. Record the number of days that any type of injection was received in Item N0300.

3. Skip to N0400 if the resident did not receive any injections during the look-back period.
Point out the example provided in the graphic.

This indicates that the resident received injections on 2 days during the look-back period.

This does not necessarily mean the resident received only 2 injections. The resident may have received more than 2 injections.

This indicates that however many injections the resident received occurred on 2 days during the look-back period.

Emphasize the skip pattern for this item.

F. N0300 Scenario #1

1. During the 7-day look-back period, Mr. T. received:
   a. Flu shot on Monday
   b. Administered PPD test on Tuesday
   c. Vitamin B12 injection on Wednesday

2. N0300 Scenario #1 Coding
   a. N0300 would be coded 3.
   b. The resident received injections on 3 days during the 7-day look-back period.
G. N0300 Scenario #2

1. During the 7-day look-back period, Miss C. received both an influenza shot and her vitamin B₁₂ injection on Thursday.

2. N0300 Scenario #2 Coding
   a. N0300 would be coded 1.

   \textit{Point out coding in graphic.}

   b. The resident received injections on one day during the 7-day look-back period.

   \textit{Remember that coding does not reflect the number of injections but the number of days that the resident received injections.}

III. Item N0350 Insulin

A. This item documents the number of days that insulin injections were received by the resident and the number of days that a resident’s insulin orders were changed during the look-back period.

B. This item does not account for insulin delivered by any other method. Only consider insulin injection.
C. N0350 Insulin Overview
   1. Section N0350 consists of two items.
   2. Insulin Injections
      Indicate the number of days insulin injections were received by the resident during the look-back period.
   3. Orders for Insulin
      Indicate the number of days in the look-back period that orders for insulin were changed by a physician or other authorized, licensed staff as permitted by state law.

D. N0350 Importance
   1. Insulin is a medication used to treat diabetes mellitus (DM).
   2. Tracking the frequency of insulin injections and changes to insulin orders can highlight both positive and negative trends in diabetes management.
      a. Individualized meal plans should be created with the resident’s input to ensure appropriate meal intake.
      b. Residents are more likely to be compliant with their DM diet if they have input related to food choices.
E. N0350 Conduct the Assessment

1. Review the resident’s medication administration records for the look-back period.

2. Determine if the resident received insulin injections during the look-back period.

3. Determine if the physician or other authorized, licensed staff as permitted under state law changed the resident’s insulin orders during the look-back period.

4. Count the number of days insulin injections were received and/or changed.
   a. For subcutaneous insulin pumps, code only the number of days the resident actually required a subcutaneous injection to start/restart the pump.

5. Count the number of days that insulin orders were changed.

6. The look-back period is 7 days or since admission/reentry if less than 7 days.

F. N0350A Coding Instructions

1. Enter the number of days during the look-back period that insulin injections were received by the resident.

Point out the example in this graphic.

In this example, a coding of 4 indicates that the resident received insulin by injection on 4 days during the look-back period.
Section N Medications

SLIDES

N0350B Orders for Insulin Assessment Guidelines

- The look-back period is 7 days or since admission/reentry if less than 7 days.
- A sliding scale dosage schedule does not count as an order change.
- These days can be counted and coded if:
  - This is the first sliding scale order for the resident.
  - Sliding scale order is discontinued.
  - Sliding scale order is new or revised.

INSTRUCTIONAL GUIDANCE

G. N0350B Assessment Guidelines

1. Remember that N0350B documents the number of times that a resident’s insulin orders were changed during the look-back period.

2. The look-back period is 7 days or since admission/reentry if less than 7 days.

3. Implementing a sliding scale dosage schedule that is written to cover different dosages depending on lab values does not count as an order change simply because a different dose is administered based on the sliding scale guidelines.

4. These days can be counted and coded if:
   a. This is the first sliding scale order for the resident.
   b. The order for the sliding scale is discontinued.
   c. The order for the sliding scale is new or revised.

H. N0350B Coding Instructions

1. Enter the number of days during the look-back period that the physician or other authorized, licensed staff as permitted under state law changed the resident’s insulin orders.

   Point out the example in this graphic.

   In this example, the resident’s insulin orders were changed on one day during the look-back period.
IV. Item N0400 Medications Received

A. This item documents selected types of medications that a resident received during the look-back period.

B. N0400 Medications Received Overview

1. Documents the types of medications that were received by the resident during the look-back period.

Review the type of medications documented in this item as illustrated by the graphic.

C. N0400 Importance

1. Medications are an integral part of the care provided to residents of nursing homes.

2. They are administered to try to achieve various outcomes:
   a. Curing an illness
   b. Arresting or slowing a disease’s progress
   c. Reducing or eliminating symptoms
   d. Preventing a disease or symptom
3. Residents taking medications in these drug classes are at risk of side effects that can adversely affect health, safety, and quality of life.

4. While assuring that only those medications required to treat the resident’s assessed condition are being used, it is important to reduce the need for, or maximize the effectiveness of, medications for all residents.

5. Therefore, as part of all medication management, it is important for the interdisciplinary team to consider non-pharmacological approaches.

6. Educating the nursing home staff and providers about non-pharmacological approaches in addition to and/or in conjunction with the use of medication may minimize the need for medications or reduce the dose and duration of those medications.

Adverse Consequence

An unpleasant symptom or event that is due to or associated with a medication, such as impairment or decline in an individual’s mental or physical condition or functional or psycho-social status. It may include various types of adverse drug reactions and interactions (e.g., medication – medication, medication – food, and medication – disease.)
Non-Pharmacological Intervention

Approaches to care that do not involve medication generally directed towards stabilizing or improving a resident’s mental, physical, or psycho-social well-being.

Dose

The total amount/strength/concentration of a medication given at one time or over a period of time. The individual dose is the amount/strength/concentration received at each administration. The amount received over a 24-hour period may be referred to as the “daily dose.”

D. N0400 Conduct the Assessment

1. Review the resident’s medical record for documentation that any of these medications were received by the resident during the look-back period.

2. Review documentation from other health care settings where the resident may have received any of these medications while a resident of the nursing home.
   a. E.g., diazepam given in the emergency room

E. N0400 Assessment Guidelines

1. The look-back period is:
   a. 7-days
   b. Since admission/reentry if less than 7 days

2. Code medications according to a drug’s pharmacological classification, not how it is used.
a. For example, Oxazepam may be used as a hypnotic, but it is classified as an antianxiety medication.

3. Include any of these medications given to the resident by any route (e.g., PO, IM, or IV) in any setting (e.g., at the nursing home, in a hospital emergency room) while a resident of the nursing home.

4. Code a medication even if it was given only once during the look-back period.

5. Count long-acting medications, such as fluphenazine deconoate or haloperidol deconoate, that are given every few weeks or monthly only if they are given during the look-back period (7 days or since admission/reentry if less than 7 days).

6. Combination medications should be coded in all categories that constitute the combination.
   a. For example, if the resident receives a single tablet that combines an antipsychotic and an antidepressant, then both antipsychotic and antidepressant should be coded.

7. Over-the-counter sleeping medications (e.g., diphenhydramine, melatonin, etc.) are not coded as hypnotics, as they are not classified as hypnotic drugs.
F. N0400 Coding Instructions
   1. Check all medications received by the resident during the look-back period.
   2. Do not code antiplatelet medications such as aspirin/extended release, dipyridamole, or clopidogrel under option E. Anticoagulant.

   Review the example illustrated here.
   This coding indicates that the resident received an antidepressant and an antibiotic during the look-back period.

G. N0400 Scenario
   1. The Medication Administration Record for Mrs. P. reflects the following:
      a. Risperidone 0.5 mg PO BID PRN: Received once a day on Monday, Wednesday, and Thursday.
      b. Lorazepam 1 mg PO QAM: Received every day.
      c. Temazepam 15 mg PO QHS PRN: Received at HS on Tuesday and Wednesday only.

H. N0400 Scenario Coding
   1. Check
      - A. Antipsychotic
      - B. Antianxiety
      - D. Hypnotic
   2. Risperidone is an antipsychotic drug.
   3. Lorazepam is an antianxiety drug.
   4. Temazepam is a hypnotic drug.
Note: If a resident is receiving drugs in all of these three classes simultaneously, there must be a clear clinical indication for the use of these drugs.

Administration of these types of drugs, particularly in this combination, could be interpreted as chemically restraining the resident.

Adequate documentation is essential in justifying their use.

V. Section N Summary

A. Section N focuses on the frequency that residents receive injections and the types of selected medications that residents receive.

B. Document the number of days that the resident received injections during the look-back period.

C. Document the number of days that the resident received insulin injections and changes to insulin orders.

D. Document whether the resident received the specific categories of medications listed.