# Georgia Medication Aide Practice Exam (Sample)

**Study Guide** 



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### **Questions**



- 1. Who should be contacted when there is a significant change in a resident's behavior?
  - A. The resident's family
  - B. The supervisor, nurse, or the resident's physician
  - C. A fellow staff member
  - D. The medication aide on duty
- 2. What does the abbreviation OD stand for in medication administration?
  - A. Both eyes
  - B. Left eye
  - C. Right eye
  - D. Right ear
- 3. Which abbreviation is used for the left ear?
  - A. OU
  - B. AD
  - C. AS
  - D. AU
- 4. What does NKA stand for in a medical context?
  - A. No Known Adverse effects
  - **B.** No Known Allergies
  - C. Notable Known Anxieties
  - D. No Known Abnormalities
- 5. What should be done if a medication arrives but there is no order on the MAR?
  - A. Administer the medication if you think it's needed.
  - B. Look in the resident's record for an order and/or notify the appropriate staff.
  - C. Return the medication to the pharmacy.
  - D. Consider it a clerical error and proceed with administration.

- 6. What is the distinction of non-controlled medications?
  - A. They require no prescription
  - B. They cannot be purchased over the counter
  - C. They are excluded from any regulations
  - D. They are not considered prescription drugs
- 7. Who is considered a dispensing practitioner?
  - A. Any licensed health professional
  - B. A pharmacist and only a pharmacist
  - C. A certified medication aide
  - D. A nurse practitioner
- 8. What is a troche?
  - A. A tablet that must be swallowed
  - B. A lozenge-like delivery form that dissolves in the mouth
  - C. A type of injection
  - D. A liquid medication
- 9. If you receive an order for Nitroglycerin to be given sublingually, how should it be administered?
  - A. Through the skin
  - B. Under the tongue
  - C. Intravenously
  - D. Orally
- 10. When should the medication label and the MAR be compared?
  - A. When selecting or removing the medication
  - B. Before pouring the medication
  - C. After pouring before returning the medication
  - D. All of the above

### **Answers**



- 1. B 2. C 3. C 4. B 5. B 6. A 7. B 8. B 9. B 10. D



### **Explanations**



## 1. Who should be contacted when there is a significant change in a resident's behavior?

- A. The resident's family
- B. The supervisor, nurse, or the resident's physician
- C. A fellow staff member
- D. The medication aide on duty

When there is a significant change in a resident's behavior, it is crucial to contact the supervisor, nurse, or the resident's physician. This is because these individuals have the professional training and authority to assess the situation accurately and determine the necessary interventions or care adjustments that may be required. They can evaluate the changes in the context of the resident's overall health status, make clinical decisions, and ensure that appropriate measures are taken. The involvement of a healthcare professional is essential not only for determining the cause of the behavior change but also for implementing any necessary treatments or modifications to the care plan. This structured approach helps maintain the safety and well-being of the resident while adhering to the protocols and regulations governing medication administration and resident care in a healthcare facility.

### 2. What does the abbreviation OD stand for in medication administration?

- A. Both eyes
- B. Left eye
- C. Right eve
- D. Right ear

The abbreviation OD in medication administration stands for "Right Eye." This term originates from the Latin phrase "oculus dexter," which directly translates to "right eye." Understanding this abbreviation is particularly important in contexts such as ophthalmology or when prescribing eye medications, ensuring that medications are administered to the correct eye as intended. In the realm of medication guidance, accuracy in such terminology supports proper treatment and can prevent mix-ups that may lead to ineffective treatment or adverse effects. Awareness of common abbreviations, like OD for Right Eye, is essential for anyone involved in medication administration, including medication aides, healthcare professionals, and patients, to ensure clarity and safety in medication management.

#### 3. Which abbreviation is used for the left ear?

- A. OU
- B. AD
- C. AS
- D. AU

The abbreviation used for the left ear is "AS," which stands for "auris sinistra." This is derived from Latin, where "auris" means ear and "sinistra" refers to the left side. In medical contexts, precise communication is essential, especially regarding medication administration or treatments related to the ears. Using the correct abbreviation ensures that healthcare providers convey accurate information about which ear is being referenced, thus minimizing the risk of errors in treatment. In contrast, "OU" refers to both eyes (oculus uterque), "AD" signifies the right ear (auris dextra), and "AU" indicates both ears (auris utera). Understanding these abbreviations is crucial for effective communication in healthcare settings, particularly when dealing with medications or assessments that engage the auditory system.

#### 4. What does NKA stand for in a medical context?

- A. No Known Adverse effects
- **B. No Known Allergies**
- C. Notable Known Anxieties
- D. No Known Abnormalities

In a medical context, NKA stands for "No Known Allergies." This term is commonly used in patient medical histories and charts to indicate that the patient has not reported or is not known to have any allergies to medications, foods, or other substances. Knowing a patient's allergy status is crucial for healthcare providers as it helps in preventing allergic reactions, which can be potentially serious when administering treatments. The other options do not accurately reflect the standard use of the acronym NKA in healthcare. While adverse effects, anxieties, and abnormalities are important aspects of medical assessments, they are not typically abbreviated as NKA. Therefore, recognizing NKA as "No Known Allergies" is essential for ensuring patient safety and effective treatment planning.

- 5. What should be done if a medication arrives but there is no order on the MAR?
  - A. Administer the medication if you think it's needed.
  - B. Look in the resident's record for an order and/or notify the appropriate staff.
  - C. Return the medication to the pharmacy.
  - D. Consider it a clerical error and proceed with administration.

When a medication arrives without an order on the Medication Administration Record (MAR), the proper course of action is to check the resident's record for a valid order and notify the appropriate staff. This process ensures that the medication is given safely and in accordance with established protocols. Having an order is crucial because it verifies that the medication is necessary for the resident's treatment and that the dosage and timing are appropriate. If no order is present, administering the medication based on personal judgment could lead to serious consequences, including potential harm to the resident. By looking into the resident's record, you confirm whether there is a written order that may have been missed or if further action needs to be taken. Notifying the appropriate staff ensures that the issue is addressed promptly and allows for confirmation or correction of any discrepancies. This approach adheres to safety protocols and maintains the integrity of the medication administration process.

- 6. What is the distinction of non-controlled medications?
  - A. They require no prescription
  - B. They cannot be purchased over the counter
  - C. They are excluded from any regulations
  - D. They are not considered prescription drugs

Non-controlled medications are distinct in that they typically do not require a prescription for a patient to obtain them. This means that individuals can purchase these medications directly from pharmacies or other authorized retailers without needing a doctor's authorization. This accessibility is a key feature of non-controlled medications, as it facilitates easier management of common health issues, allowing for self-care and prompt treatment without the barrier of obtaining a prescription. The other options do not accurately characterize non-controlled medications. While some non-controlled medications may not be available over the counter-usually only those considered safe and effective for self-medication can be purchased without a prescription-there are certainly many that can be bought OTC. Furthermore, non-controlled medications are still subject to various regulations to ensure safety, effectiveness, and proper labeling. Lastly, although they are not typically considered prescription drugs in the same manner as controlled substances, the term "prescription drugs" can encompass a broader category that includes non-controlled medications that require prescriptions. Hence, the distinction that they require no prescription best captures the essence of non-controlled medications.

### 7. Who is considered a dispensing practitioner?

- A. Any licensed health professional
- B. A pharmacist and only a pharmacist
- C. A certified medication aide
- D. A nurse practitioner

The correct answer is that a dispensing practitioner is a pharmacist and only a pharmacist. This designation is specific to individuals who are legally authorized to prepare and distribute medications to patients. Pharmacists undergo extensive training and education focused on pharmacology, medication management, and patient safety, making them the key health professionals responsible for ensuring that medications are dispensed accurately and safely. Other health professionals, such as nurses or medication aides, may administer medications but do not have the authority to dispense them in the same manner that pharmacists do. Their roles are generally limited to following existing prescriptions rather than preparing medications themselves. Therefore, the role of a dispensing practitioner is strictly associated with pharmacists, emphasizing their critical role in the healthcare system concerning medication distribution.

#### 8. What is a troche?

- A. A tablet that must be swallowed
- B. A lozenge-like delivery form that dissolves in the mouth
- C. A type of injection
- D. A liquid medication

A troche is indeed best defined as a lozenge-like delivery form that dissolves in the mouth. This form of medication is designed to dissolve slowly, allowing the active ingredients to be absorbed through the mucous membranes in the mouth or throat. This method can be beneficial for localized treatment in the oral cavity, such as providing relief from sore throats or delivering specific medications that need to act quickly without having to be absorbed through the gastrointestinal tract. Unlike a tablet that must be swallowed, a troche is intended to be held in the mouth until it dissolves, enabling its active components to enter the bloodstream more directly. This distinguishes it from other forms of medications like injections or liquids, which are administered differently and serve different purposes in pharmacology.

- 9. If you receive an order for Nitroglycerin to be given sublingually, how should it be administered?
  - A. Through the skin
  - B. Under the tongue
  - C. Intravenously
  - **D.** Orally

When administering Nitroglycerin sublingually, the correct method involves placing the medication under the tongue. This route allows the drug to dissolve directly into the bloodstream through the mucous membranes, providing rapid relief for conditions such as angina. The sublingual route bypasses the digestive system, allowing for faster onset of action compared to other administration methods. Other routes, such as through the skin or intravenously, are not appropriate for sublingual medications like Nitroglycerin, as they would negate the intended rapid absorption through the oral cavity. Oral administration typically refers to taking a medication by mouth, which is not suitable for sublingual drugs that are designed to act quickly through mucosal absorption. This makes administering Nitroglycerin under the tongue crucial for effectiveness in emergency situations.

- 10. When should the medication label and the MAR be compared?
  - A. When selecting or removing the medication
  - B. Before pouring the medication
  - C. After pouring before returning the medication
  - D. All of the above

The practice of comparing the medication label with the Medication Administration Record (MAR) at various stages is essential for ensuring patient safety and medication accuracy. This process is a critical part of the "five rights" of medication administration: the right patient, right medication, right dose, right route, and right time. When selecting or removing the medication, it's crucial to verify that the medication matches what is documented on the MAR. This initial check helps prevent any errors that could occur if the wrong medication is selected. Before pouring the medication, another comparison is necessary. This step ensures that no mistakes have occurred after the selection phase and confirms the right medication, dose, and form are being prepared for administration. Finally, after pouring but before returning the medication, it's again important to check. This final verification helps catch any potential discrepancies that may arise during the handling process, ensuring that the medication given to the patient reflects what is documented on the MAR accurately. By comparing the label and the MAR at all these stages, caregivers reduce the risk of medication errors significantly, which is why this thorough approach is critical in medication administration protocols.