

ability to administer the correct dose, the parent should give a return demonstration. This is essential when the drug has potentially serious consequences from incorrect dosage, such as insulin or digoxin, or when more complex administration is required, such as parenteral injections. When teaching a parent to give an injection, the nurse must allot adequate time for instruction and practice.

Home modifications are often necessary because the availability of equipment or assistance can differ from the hospital setting. For example, the parent may need guidance in devising methods that allow one person to hold the child and safely give the drug.

Nursing Tip

To administer oral, nasal, or optic medication when only one person is available to hold the child, use the following procedure:

- Place child supine on a flat surface (bed, couch, floor).
- Sit facing child so child's head is between operator's thighs and child's arms are under operator's legs.
- Place lower legs over child's legs to restrain lower body, if necessary.
- To administer oral medication, place a small pillow under child's head to reduce risk of aspiration.
- To administer nasal medication, place a small pillow under child's shoulders to aid flow of liquid through nasal passages.

The nurse should clarify with parents the time that the drug is to be administered. For instance, when a drug is prescribed in association with meals, the number of meals that the family is accustomed to eating influences the amount of drug the child receives. Does the family have meals twice a day or five times a day? When a drug is to be given several times during the day, together the nurse and parents can work out a schedule that accommodates the family's routine. This is particularly significant if a drug must be given at equal intervals throughout a 24-hour