

# Agenda for Medication Administration Training Session

Date: [Insert Date]

Time: [Insert Time]

Location: [Insert Location]

## Training Objectives:

- Understand the principles of medication administration.
- Learn the types of medications and their classifications.
- Gain knowledge of safety protocols and procedures.
- Practice administering medications via different routes.

## Agenda:

- 09:00 AM - 09:15 AM: Registration and Welcome
- 09:15 AM - 10:00 AM: Introduction to Medication Administration
- 10:00 AM - 10:45 AM: Types of Medications
- 10:45 AM - 11:00 AM: Break
- 11:00 AM - 12:00 PM: Safety Protocols
- 12:00 PM - 12:45 PM: Lunch
- 12:45 PM - 02:00 PM: Hands-On Practice
- 02:00 PM - 02:30 PM: Q&A Session
- 02:30 PM - 03:00 PM: Closing Remarks

## Preparation:

Please bring a notepad and any questions you may have about medication administration. Materials will be provided.

Looking forward to your participation!

Best Regards,  
[Your Name]  
[Your Title]  
[Your Organization]