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Medication Administration Record (MAR) Sheet

Client Name:	Month/Year:

This sheet is to be used to document the administration of all medications provided to the client. Separate sheets should be used for S2 (nurse-initiated) and S4 (prescription-required) medications.

Date	Time	Medication Name	Dose	Route	Reason for Administration (PRN only)	Administered By (Name & Signature)	Comments

NOTE:

- **S2 medications** (e.g., Paracetamol, Microlax, Glycerol) can be nurse-initiated but must be documented.
- **S4 medications** (e.g., Olanzapine) require a current prescription and specific instruction from the GP or prescriber.
- If no record of previous administration is available, the medication should not be given.