



HEALTH HOLDING

HAFER ALBATIN HEALTH  
CLUSTER  
MATERNITY AND  
CHILDREN HOSPITAL

<b>Department:</b>	Pharmaceutical Care Department		
<b>Document:</b>	Multidisciplinary Policy And Procedure (MPP)		
<b>Title:</b>	Out-Of-Stock, Shortage of Medications		
<b>Applies To:</b>	Pharmacists, Physicians & Nurses		
<b>Preparation Date:</b>	November 18,2024	<b>Index No:</b>	MM-MPP-002
<b>Approval Date:</b>	December 01, 2024	<b>Version:</b>	2
<b>Effective Date:</b>	January 01, 2025	<b>Replacement No.:</b>	MM-MPP-002 (1)
<b>Review Date:</b>	January 01, 2028	<b>No. of Pages:</b>	04

## 1. PURPOSE:

- 1.1 To establish an acceptable response arrangement for the pharmacists/physicians to follow in dealing with out-of-stock situations of pharmaceutical supplies, including a chain-of command delineation of appropriate contact personnel of the Pharmacy department and Medical departments.

## 2. DEFINITONS:

- 2.1 Out of Stock Medications: Items, which are not available in Pharmacy, Pharmaceutical store, or Hospital warehouse.
- 2.2 Wasfaty program: an electronic prescribing program that allows patients to dispense their medicines free of charge from different community pharmacies around the kingdom if the medicine is not available in governmental hospitals.
- 2.3 Critical/Life-Saving Item: Any drug that is required to be given within 24 hours for a life-threatening situation, without which the patient would suffer adverse consequences.

## 3. POLICY:

- 3.1 The Pharmacy Department has an effective policy defining steps for the Pharmacy staff to follow when attempting to resolve pharmaceutical stock shortages for hospitalized and ambulatory care patients.
- 3.2 This policy applies to all out-of-stock items (except non-formulary medications); the response shall differ based on the severity of the clinical situation.
- 3.3 Pharmacist shall contact the physician, if the medication is out of stock and offer a substitute medications within the approved respective MOH formulary.
- 3.4 If there is no substitute medication in hospital's pharmacy, the pharmacist shall send the patient to his/her physician for the following:
  - 3.4.1 Prescribing Wasfaty medication order dispensed from related community pharmacies if the needed medicines available in Wasfaty list.
  - 3.4.2 OR reassessment and possible modification of therapy.
- 3.5 Pharmacy should never allow essential and lifesaving medications to reach Zero- Stock if possible.
- 3.6 The pharmacy department will update prescribers with the available, out of stock and withdrawn medications regularly through memos and approved medications substitutions lists by P&T Committee.

## 4. PROCEDURE:

- 4.1 Response to out-of-stock medication
  - 4.1.1 The pharmacist shall first determine that the medication is, in fact, out-of-stock after checking in pharmacy, pharmacy store and hospital warehouse, when applicable.
  - 4.1.2 If the item is determined to be out of stock, the pharmacist shall check other pharmacy areas (as ward stock) for possible supply before informing the requestor or the patient that the item is out of stock.

- 4.1.3 If no supply can be located, the pharmacist shall contact supply chain in the hospital to deal with the situation by borrowing, or exchanging from different facilities or requesting item from regional warehouse or centrally.
- 4.1.4 For community pharmacies enrolled in Wasfaty program
- 4.1.5 If all the above results in inability to secure the medication, pharmacist shall contact the physician, and offer a substitute within the approved respective MOH formulary e.g. PHC sub-formulary.
- 4.1.6 If there is no substitute medication, pharmacist shall send the patient to his/her physician for reassessment and possible modification of therapy

4.2 Medications are requested by the Pharmacy store once a week from Medical Supply Stores and in accordance with an approved annual MOH budget.

## 5. MATERIAL AND EQUIPMENT:

- 5.1 **Forms and Records:**
  - 5.1.1 Electronic Request by Mawared System
- 5.2 **Materials and Equipment:**
  - 5.2.1 NA

## 6. RESPONSIBILITIES:

- 6.1 Pharmacy Department Director
- 6.2 Attending Physician
- 6.3 Medical Supply Director
- 6.4 Staff Nurses

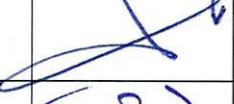
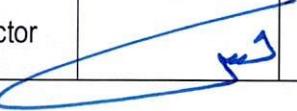
## 7. APPENDICES:

- 7.1 Appendix (A): out of stock workflow

## 8. REFERENCES:

- 8.1 [www.moh.gov.sa](http://www.moh.gov.sa)

9. APPROVALS:

	Name	Title	Signature	Date
<b>Prepared by:</b>	Ph. Reem Al Dhafeeri	Medication Safety Officer		November 17, 2024
<b>Reviewed by:</b>	Ph. Mutlaq Al Dhafeeri	Pharmaceutical Care Director		November 19, 2024
<b>Reviewed by:</b>	Mr. Sabah Turayhib Al Harbi	Nursing Director		November 20, 2024
<b>Reviewed by:</b>	Dr. Tamer Mohamed Naguib	Medical Director		November 21, 2024
<b>Reviewed by:</b>	Mr. Abdulelah Ayed Al Mutairi	QM & PS Director		November 21, 2024
<b>Reviewed by:</b>	Mr. Thamer Nasser Al Anizi	Assistant for Administrative and Operating Service		November 24, 2024
<b>Approved by:</b>	Mr. Fahad Hazam Alshammari	Hospital Director		December 01, 2024

## Appendix A

### Out – Of – Stock Medication Workflow

