



HEALTH HOLDING

HAFER ALBATIN HEALTH
CLUSTER
MATERNITY AND
CHILDREN HOSPITAL

Department:	Pharmaceutical Care Department		
Document:	Multidisciplinary Policy And Procedure (MPP)		
Title:	Appropriateness and Verification Of Prescription Orders		
Applies To:	Pharmacists, Physicians & Nurses		
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1. PURPOSE:

- 1.1 To provide a systematic approach in verifying the physician's order for admitted patients in the hospital.
- 1.2 To establish uniform guidelines for pharmacists and nurses to use when seeking verification of unclear physician order and/or practice of standard issues.

2. DEFINITONS:

- 2.1 Verification of Physician Order: Is the process of screening and clarifying unclear physician order by a qualified pharmacy staff.
- 2.2 Medication Clarification Form: Is a Form Pharmacy will use to clarify and make amendments/changes to a physician's order.
- 2.3 Generic Equivalent: using a drug that has the same scientific name but different brand name.
- 2.4 Medication-Errors: Any preventable event that may cause or lead to inappropriate medication use or patient harm while the medication is in the control of the healthcare professional, patient or consumer.

3. POLICY:

- 3.1 PMH hospital pharmacy has a policy for Verification of Drug related Orders that is consistent with MOH rules and CBAHI standards.
- 3.2 The pharmacy department will hold questionable orders until the pharmacist has conferred with the Most Responsible Physician to verify an order, to ensure optimal patient care through safe and appropriate use of drugs.
- 3.3 A trained pharmacist reviews all medication orders or prescriptions before dispensing (except in emergencies, life-saving situations, or diagnostic imaging where the prescriber is physically present).
- 3.4 All medication orders are reviewed for :
 - 3.4.1 Patient's allergies or sensitivities
 - 3.4.2 Approved indications for use.
 - 3.4.3 Therapeutic duplications.
 - 3.4.4 Existing or potential interactions (drug-drug and drug- food interactions).
 - 3.4.5 Appropriateness of the medication dose, frequency, and route of administration.
 - 3.4.6 Contraindications.
- 3.5 All issues, concerns, or questions regarding medication order or prescription are clarified with the prescriber and documented before medication dispensing.

4. PROCEDURE:

- 4.1 In-patient Physician Orders:
 - 4.1.1 Prior to preparing and dispensing medications, a qualified pharmacist will screen and verify all drug orders in terms of:
 - 4.1.1.1 Completeness, legibility, and adherence to CBAHI standards.
 - 4.1.1.2 Adherence to physician's scope of practice (specialties).

- 4.1.1.3 Adherence to the use of hospital approved abbreviations.
- 4.1.1.4 Therapeutic relevance.
- 4.1.1.5 Drug-drug interactions.
- 4.1.1.6 Drug-food interactions.
- 4.1.1.7 Allergic reactions.
- 4.1.1.8 Incompatibilities.
- 4.1.1.9 Evaluation of adverse drug reactions.
- 4.1.1.10 Appropriate time and route of administration.
- 4.1.2 He will also receive, screen, and verify STAT and New Orders and dispense them according to policy.
- 4.1.3 He will record all of these medication orders using the patient's profiles page in the computer (making sure that the profile contains all the required information including patient allergy).
- 4.1.4 The medication trolley will be filled by a pharmacist or technician according to the computer generated (dispensing list) pick-list or Patient Profile. Each patient cassette on the trolley is labelled with the patient information and should contain the patient medications on plastic bags (make sure the label on the plastic contains all the required information including expiration date of the drug).
- 4.1.5 All medications dispensed must be checked by another pharmacist& signed by the dispensing pharmacist. Then the receiving nurse must recheck the trolleys for completion and New orders & sign.
- 4.1.6 The pharmacist can dispense Generic Equivalents for a brand name drug for the same strength or concentration and dosage form.
- 4.1.7 Report any ADR (including allergy), Medication-Errors, or Clarification, using the appropriate forms for each case.
- 4.1.8 The Pharmacist will notify the physician or nurse (in the ward from which the prescription order was originated) and communicate the pharmacy query to the ordering physician.
- 4.1.9 The pharmacist will discuss with the physician the discrepancy and verify any changes that may be needed in the prescription to avoid any ADR or drug-drug interactions, drug food interactions, allergic reactions, and incompatibilities.
- 4.1.10 The department of pharmacy will hold all questionable orders until the pharmacist has conferred with the physician concerned and verified the order. Only then will the pharmacy generate a notice of Medication Clarification Form for the nursing unit to inform the physician of the decision.
- 4.1.11 The Pharmacist will then fill the "Pharmacy Clarification Form" and send it to the ordering physician to make the necessary correction / changes to the order.
- 4.1.12 If the query still exists, the physician who wrote the order should be contacted by the nursing supervisor or Head of Service and the query discussed with him/her:
 - 4.1.12.1 If the order was written by a junior resident and the issue is unresolved, the senior resident should be contacted for verification.
 - 4.1.12.2 If the order was written by the senior resident or remains unresolved after discussion, the consultant will be contacted for verification.
 - 4.1.12.3 If the order was written by the consultant, the nurse or head nurse should discuss the situation with the consultant and let him verify the order.
- 4.1.13 The nurse will check all medications received whether in the prepared trolley or new orders before leaving the pharmacy.
- 4.1.14 The nurse will apply the Ten Rights of medication administration before administering any medication to the patient which include:
 - 4.1.14.1 Right patient.
 - 4.1.14.2 Right drug.
 - 4.1.14.3 Right dose.
 - 4.1.14.4 Right route.
 - 4.1.14.5 Right time.
 - 4.1.14.6 Right reason.
 - 4.1.14.7 Right response.
 - 4.1.14.8 Right documentation.

- 4.1.14.9 Right to refuse
 - 4.1.14.10 Right education
- 4.2 Out-Patient Prescriptions:
 - 4.2.1 The pharmacist receiving and preparing OPD clinic prescriptions will follow the same procedure for screening and verifying physician orders as mentioned for in-patients.
 - 4.2.2 He will clarify any query with the physician by telephone or by using the Clarification Form if there is needs to be any changes in the prescription order.
 - 4.2.3 The pharmacist when dispensing the prepared medication to the patient he will verify the following:
 - 4.2.3.1 The patient name.
 - 4.2.3.2 The patient record number (OPD appointment card).
- 4.3 Medications are verified against the medication administration record (MAR) before administration.
- 4.4 Medications are administered in the prescribed dose and by the correct route.
- 4.5 Medications are administered at the correct time (the approved hospital standard administration time).
- 4.6 Medications are administered after verifying the expiry date.
- 4.7 Medications are administered after visual inspection for discoloration, particulate, or other clues of loss of integrity or instability.
- 4.8 Medications are administered after verifying that there are no contraindications.
- 4.9 Documentation:
 - 4.9.1 The pharmacist note should be completed by the ordering physician. If the pharmacist clarified the order with the physician through the telephone, then the pharmacist may fill the pharmacist note, collect all notes and transfer the information into the Medication Errors Form for further analysis and documentation of the data by the Medication Safety Officer, to be forwarded later to the Quality Management Department for action plan.

5. MATERIAL AND EQUIPMENT:

- 5.1 Pharmacist note.
- 5.2 Computerized Patient's profiles page.
- 5.3 Computer generated (dispensing list) pick-list.
- 5.4 ADR Report Form.
- 5.5 Medication-Errors Report Form.
- 5.6 Medication administration record.
- 5.7 Medication trolley and preparation check list.

6. RESPONSIBILITIES:

- 6.1 Pharmacist: is responsible for
 - 6.1.1 Screening and verifying all drug orders.
 - 6.1.2 Recording all medication orders using the patient's profiles.
 - 6.1.3 Reporting any ADR, Medication-Errors, or Clarifications.
- 6.2 Nurse: is responsible for
 - 6.2.1 Verifying filled medications orders.
 - 6.2.2 Verifying medications before administration to the patient.
- 6.3 Physicians

7. APPENDICES:

- 7.1 N/A

8. REFERENCES:

- 8.1 General Pharmaceutical Care Administration, MOH policy and procedures manual.

9. APPROVALS:

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