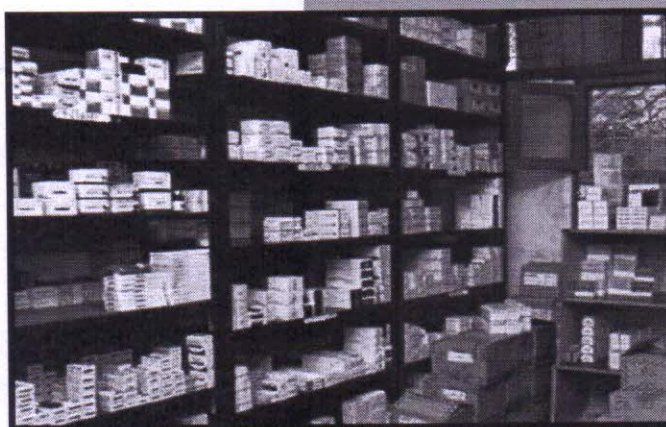




Standard Operating Procedures for Public Health Facilities- Uttar Pradesh

Pharmacy Department



**Quality Assurance Division
SPMU, NHM, Uttar Pradesh**

Name of Facility	Standard Operating Procedure
Pharmacy	SOP/NQAS/ /PHA - 1.0

SOP: Pharmacy Department

1. Purpose:

To establish a system for:

- Effective and efficient management of pharmacy services in the facility including storage and dispensing of drugs.
- These comply with the applicable laws and regulations.
- To ensure that patients receive medicines appropriate to their clinical needs, in doses that meet their individual requirements, for an adequate period of time.
- To ensure the selection, purchase, control, storage, dispensing and distribution of pharmaceutical items as per need of the beneficiary including women & Child and it should be in compliance with 'State Drug Policy'.

2. Scope:

It covers all activities related to medicine inventory management, storage and dispensing of drugs to the patients (OPD & IPD)

3. Responsibility:

Chief Pharmacist and Pharmacists

Storage- Chief Pharmacist /Pharmacist and Dispensary- Concerned pharmacists

4. Procedure:

Sl. No.	Activity	Responsibility	Reference Document/ Record
4.1	Based on EDL (Essential Drug list) of state, Drug and Therapeutic Committee develops "Drug Formulary" appropriate to Facility needs and scope of services. A copy of the formulary is available at Pharmacy and with all treating Physicians and departments.	Drug and Therapeutic committee MS / Pharmacist	Drug Formulary
	Indenting drugs from District Drug Warehouse: A bi-monthly check of drugs is done based on consumption. This is done through HMIS. If		

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	<p>any item falls short, it is indented to the District Drug Warehouse by putting an indent.</p> <p>Pharmacy department maintains a Minimum and Maximum stock of medication frequently used in the facility.</p> <p>These items are indented to District Drug Warehouse in an indent slip / register. The indent slip / register contains the name and signature of the department head of the indented department.</p>		
4.2	<p><u>Receipt of Drugs</u></p> <p>Drugs are received in the facility through DHS/ CMSD based on the requirement of the facility.</p> <p>The drugs are supplied on as and when available through DHS based on supplies from supplier. At times, the drugs are received in the central store and the same are collected by the Chief Pharmacist / In-charge Store.</p> <p>The drugs received are identified and their quantity checked. The drugs are received through acknowledgement on the counter slip. The items & quantity received are entered in the stock register.</p> <p>The drugs not received are noted and intimated to Facility In-charge especially the emergency drugs.</p> <p>A list is also prepared for the drugs received as damaged or expired. Such drugs are segregated and a detailed note put up through facility In-charge to DHS.</p>	Chief Pharmacist / Store In-Charge	<p>Challan or Related documents</p> <p>Stock Register</p> <p>Shortage note</p> <p>List of damaged & expired medicines</p>
4.3	<p><u>Storage of Drugs</u></p> <ul style="list-style-type: none"> Pharmacy follows the guidelines of Drugs & Cosmetic Act for storage of medicines. 	Chief Pharmacist	Stock Register

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	<p>Compliance with the Act is a license pre-requisite.</p> <ul style="list-style-type: none"> Medicines are stored under proper conditions in well-lit and ventilated room. Medicines are arranged alphabetically according to the classification of drugs I i.e. Drugs, Injections, I.V. Fluids, Syrups etc Stock is arranged neatly in alphabetical order with name facing the front. Products of similar name and different strength are stored separately. Heavy items are stored in lower shelves. Fragile items are not stored at the edges of the shelves. Near expiry drugs are segregated and stored separately. Items requiring refrigeration are stored appropriately. The medicines, which require 2* to 8* celsius temperature, are stored in the refrigerators. A list of all medications to be stored in refrigerator is maintained and displayed near the fridge. A temperature log book is maintained in the department for regular temperature control & monitoring. The temperature is recorded on daily basis at least twice a day. Any food item or Tiffin box of the employees is not kept in the refrigerator. Supervisor Pharmacy ensures the regular temperature monitoring & recording. In case of any variation found from the ideal temperature, it is immediately reported to the maintenance department. Look alike and sound alike drugs are stored separately. Medications that are considered light-sensitive, as labelled by their respective 		

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	<p>manufacturers, are stored in closed drawers.</p> <ul style="list-style-type: none"> The costly medicines are kept in a different storage and are checked every day in all units of Pharmacy and are monitored closely. Physical verification and regular audits are conducted to minimize pilferage. If discrepancy is detected suitable corrective and preventive actions are taken. Control of pests <ul style="list-style-type: none"> Pests control agencies empanelled with organization will be called for pest control activity on a monthly basis. Supervisor Pharmacy will be responsible for the periodic checkup of the effectiveness of this program. 		
4.4	<p><u>Disposal of Drugs</u></p> <p>Record of drugs expired during the month is maintained in the Expired medicine register. Expired drugs & damaged drugs are disposed off as per the state guidelines of the facility and the record of disposal are maintained in Expired Medicine Register. (i.e. date, quantity of expired drug etc)</p>	Chief Pharmacist	<p>Expired Drug Register</p> <p>List of drugs disposed off</p>
4.5	<p><u>Supply of drugs</u></p> <p>Drugs are supplied to the dispensary/ ward/ emergency/ NICU / SNCU etc. as per the Indent and the Indent duly, signed by the employee who receives the drug, is kept in record.</p> <p>The intimation for the replenishment of drugs is given to the Facility in charge.</p>	Chief Pharmacist	<p>Voucher/ Indent</p> <p>Signed Indent</p>
4.6	<p><u>At Store</u></p> <p>Drugs are issued to the dispensary against duly filled Indent form which is collected from the pharmacist or In-charge.</p> <p>The record of issued drugs is maintained in the daily expense/ drug issue register at the store.</p>	Chief Pharmacist	<p>Indent Form, Daily Expense. Drug Issue Register</p>

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	<p>A list of available drugs is prepared & intimated to the doctors. The list is periodically updated</p> <p><u>At Dispensary</u> List of available and non-available drugs are displayed outside the dispensary.</p> <p>Record of drug is maintained at the dispensary stock register along with the name, quantity, date of manufacture and expiry etc.</p> <p>Received drugs are kept in the marked location/slots for ease of identification.</p> <p>The strips of drug is cut into the small ones without cutting the expiry date and kept in marked boxes ready for dispensing.</p> <p>The drugs, which are to be kept at a controlled temperature, are either kept in dispensary store or in store in refrigerator.</p>	Pharmacist	<p>List of available drugs/ Updated stock of essential drug list</p> <p>Stock Register at dispensary</p>
4.7	<p><u>Dispensing of Drugs</u></p> <p>Dispensing of medication is done in a manner that ensures quick and efficient patient management with minimum errors.</p> <p><u>In-patient dispensing</u></p> <p>All the medicine requisition slip from the wards are sent to the pharmacy and are recorded in the register at the pharmacy counter.</p> <p>On receipt of requisitions from Wards received through medicine requisition slip (RO) following inputs are checked:</p> <ul style="list-style-type: none"> Patients Name, IPD, Room No. / Bed No. 	Pharmacist	<p>Registration Slip,</p> <p>Dispensary Register</p>

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	<ul style="list-style-type: none"> • Ward description, Date • Item description and quantity requested • Prescribed by Doctor • Signatures of Sister / sister in charge • Signature authorization of receiver ○ Pharmacy drugs are dispensed / issued only by a pharmacist. ○ Stat doses and discharge medications are given first priority for dispensing. ○ Prescriptions/ Indent are read carefully ○ It is ensured that the correct drug and dose is given for the specific patient ○ All items are checked for expiry dates before dispensing ○ Dispensed column are signed after dispensing ○ Dispensing / issue of items for department stocks is done against the indent ○ For narcotics prescription, nursing unit stock is used as per Narcotics policy. <p><u>Receipt of drugs in wards:</u></p> <ul style="list-style-type: none"> • Medicines are taken out from racks in the same quantity as mentioned on the indent with batch no. and expiry date. • The medicines are delivered to the concern ward. • On receiving the medicine, the receiving of the indent is signed by the receiving person. <p>In case of, any medicine not available in pharmacy, it is arranged by local purchase and for future requirement request is sent to purchase for arrangement.</p> <p><u>Outpatient Dispensing</u></p> <ul style="list-style-type: none"> ○ It is the policy of the facility that proper procedure for outpatient dispensing is followed and patient is counselled on the 		

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	<p>effective use of their medication.</p> <ul style="list-style-type: none"> ○ Prescription errors or any misunderstanding in any prescription is consulted with the concerned doctor. ○ Patient details, entered into dispensing register, are based on the patient registration number. ○ Drug ordered are entered with correct name, strength, dose form and quantity ordered. ○ All items are checked for expiry dates before dispensing ○ Name of patient is confirmed before issuing medicines ○ Only the pharmacist dispenses the medications ○ Patient is informed of the method of taking the medicine. ○ Drugs which are not available are informed to store. <p><u>Detection of Occurrences</u></p> <p>Dispensing is done intelligently to detect occurrences of</p> <ul style="list-style-type: none"> ○ Drug-Drug interactions ○ Drug- food interactions ○ Unintended dosage changes ○ Medication duplication ○ Possible misuse or abuse of a dangerous drug or psychotropic substance <p>In case of any occurrences detected patients are counselled to contact the doctor for the appropriate course of action and report it.</p>		
4.8	<p><u>Local Purchase:</u> Life saving medicines/ emergency medicines required for day to day functioning are purchased from local vendors selected by open tendering system after approval from MS and chairperson RKS.</p>		

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Pharmacy	SOP/NQAS/ /PHA - 1.0

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	<p>Storage and Use of Narcotics and Psychotropic drugs:</p> <ul style="list-style-type: none"> • The facility has a policy to treat the Narcotics and psychotropic drugs with extra precaution to prevent any misuse • A list of such drugs, used in the facility, is available at Pharmacy and user department, the Drugs & Therapeutics committee and at all locations where these drugs are stored. • Appropriate license is obtained and renewed every year before procuring and storing Narcotics drugs • The quantity of drug to be procured and stored every year is approved by the appropriate government authority. • All Narcotics and psychotropic drugs are stored under secured locks in OT. • Accessibility limited to approved personnel is maintained for such lockers • The OT Technician and the Sister posted in OT are the key holders and ultimately responsible for maintenance of the locker and inventory. <p>LIST OF NARCOTICS DRUGS</p> <ul style="list-style-type: none"> ○ Inj Morphine 10mg/ 1 ml ○ Inj Pethidine 100mg/2 ml ○ Inj Pethidine 50mg/1 ml ○ Inj fentanyl 100 mcg/2 ml ○ Inj fentanyl 10 ml <p><u>Storage of Narcotic Drugs in central pharmacy:</u></p> <ul style="list-style-type: none"> • All Narcotic drugs are stored in double lock & Key vault. Two keys are with two different people to ensure the safety of the drugs. • The drug is not dispensed from the area and is stored only for supply to the operation theatre. 		

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	<p><u>Storage of Narcotic Drugs at user department:</u></p> <ul style="list-style-type: none"> ▪ All drugs are to be handled very carefully & used under the supervision of doctors & nurse in charge ▪ All medicines are to be kept in separate almirah under double lock & keys. ▪ Separate register is to be maintained for all drugs in which transactions are recorded. ▪ All documents are submitted to excise department against register. ▪ Stock & documents are verified by excise department as and when they visit. <p>Documentation of Receipt</p> <p><u>Records for receipt & issue:</u> Separate records are maintained for receipt & issue of different Narcotics Drug. These records indicate the following information:</p> <ul style="list-style-type: none"> ○ Date ○ Invoice number ○ Invoice date ○ Drug description quantity ○ Batch number ○ Quantity issued ○ Manufacturer name ○ Name of the patient ○ IP number of the patient ○ Prescribed by ○ Ref number of prescription ○ Quantity balance ○ Sign of the Licenser <p>Documentation of prescription / request</p> <p>Separate records are maintained for prescription/request of different narcotics drugs record. These records shall indicate the following information</p>		

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Pharmacy	SOP/NQAS/ /PHA - 1.0

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	<ul style="list-style-type: none"> ○ Date of prescription ○ Patient name ○ IP Number ○ Doctor name ○ Regd. Number ○ Drug description, quantity ○ Doctor signature <p>Documentation at user department contains name of the drug, quantity, date, name of the patient etc. Such records are sent to the office of Drug Control Administration.</p> <p>All such logbooks must contain Seal of Government of Uttar Pradesh, Drug control Administration. After obtaining the seal such logbooks are used for documenting the receipts and issued.</p> <ul style="list-style-type: none"> ○ No outpatient is issued any Narcotics Drugs ○ The prescription contains name and signature of the prescribe physician. ○ Two copies of the prescription are obtained from physician – One copy is retained by the pharmacy for record purpose and other copy is issued to the patient along with the discharge summary. 		
	<p>Periodic checking:</p> <ul style="list-style-type: none"> • Random audit of physical arrangement of medicines in the pharmacy. • Regular audit for buffer stock availability in pharmacy as per reorder level. • Sales audit, HMIS entry audit & Documents audit as per policy. 		
	<p>Segregation of non-moving goods & near expiry goods:</p> <p>In normal circumstances items are not received with near / closer expiry date. However if</p>		

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	<p>received with closer expiry date, these are restored with near expiry dates.</p> <p>All items are checked for non-moving as well as those items whose expiry date is within 3 months, a list is prepared, segregation is done item wise & supplier wise.</p> <p>BUT THERE IS NO POLICY OF RETURN TO THE SUPPLIER.</p> <p>The items could be redistributed to other facilities where the consumption is higher than the current facility.</p>		
	<p>PRESCRIPTION/ MEDICATION ORDER AUDIT.</p> <p>The facility regularly carries out audit of medication orders and prescriptions in its facility. This is carried out to check for safe and rational prescription of medications.</p> <p>The audit is carried out at least once a month using a representative sample size. This is done by the multidisciplinary Drugs and Therapeutics Committee.</p> <p>The scope of such audit includes:</p> <ul style="list-style-type: none"> • Appropriateness of the drug, dose, frequency and route of administration. • Presence of therapeutic duplication. • Possibility of drug interaction and measures taken to avoid the same. • Possibility of food-drug interaction and measures taken to avoid the same • Minimum requirements of a prescription to be met: name of the patient, unique facility Id Number, name of the drug, dose of the drug, route of administration and frequency of administration of the medicine; name, 		

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Name of Facility	Standard Operating Procedure
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	<p>signature and registration number of the prescribing doctor</p> <ul style="list-style-type: none"> Whether the medication orders are written in a uniform location in the medical records/ patient case sheet. Treatment orders are written daily. Phrases like "CST all" "Continue same treatment" are not used. It is preferable that the prescription and medication administration record is on the same sheet to avoid / minimize medication errors. Whether the medication orders are clear, legible, dated, timed, named and signed. Whether the medication orders contain the name of the medicine, route of administration, dose to be administered and frequency/ time of administration. In case of a medicine having two or more drugs (tablets/ capsules/ injection) the dose of all the individual drugs are written. E.g. in a combination of Clopidogrel with Aspirin the dose of both the drugs are written as 75 mg + 75 mg or as 75 mg + 150 mg. This is however not necessary for preparations having a combination of vitamins and/ or minerals. Similarly, if the combination of medication comes only in one strength, it is not necessary. In case abbreviations are used, these are from a standardized list of approved abbreviations for medications and are same throughout the organization. Dangerous abbreviations are not used. 		
4.9	<p>Facility has a functional Drug and Therapeutic Committee comprising of:</p> <ol style="list-style-type: none"> SiC / CMS/ Head of Institution, Pharmacist HODs Matron 	MS	MOM.

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Pharmacy	SOP/NQAS/ /PHA - 1.0

5. Records:

Sl. No.	Name of Records	Record No.	Minimum Retention Period
1	Stock Register		
2	Daily Expense /Drug Issue Register		
3	Expired Drug Register		
4	Dispensary Register		
5	Available Drug List		

6. Process Efficiency Criteria:

Sl. No.	Activity	Process Efficiency Criteria	Benchmark/Standard/Target
A	Service provision	Proportion of drugs available against EDL	
B	Dispensing	Waiting time at pharmacy counter	

7. Reference Documents

1. State Essential Drug List
2. IPHS drug list.
3. State Guidelines for disposal of expired drugs.

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