

 <b>مؤسسة مستشفى سرطان الأطفال - مصر</b> Children's Cancer Hospital Foundation - Egypt		Policy Name: <h2 style="text-align: center;">Floor Stock</h2>	
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## 1.0 Change of policy

### 1.1 No changes

## 2.0 Purpose

- 2.1** The purpose of this guideline is to ensure proper management and use of all medications provided by main store as floor stock in patient care areas, and proper procedure is established for safe and efficient floor stock requisition for nursing units and other concerned departments.

## 3.0 Policy

### 3.1 Policy statement:

- 3.1.1** It is the policy of CCHE to reduce the time taken to obtain the necessary or emergency medication if they were ordered directly from the pharmacy then delivered to the nurse whom administer them.

### 3.2 Scope:

- 3.2.1** All CCHE patient care areas are containing floor stocks.

### 3.3 Responsibilities

- 3.3.1** The Pharmacy Department and Supply Chain Department: are both responsible for determining the appropriate quantities of floor stock supply in each unit and perform a Monthly inspection of the floor stock medications.
- 3.3.2 Nursing Units:**

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3.3.2.1 When needed, Requests that are ordered for the floor stock medications should match an approved list and in a scheduled time.

## 4.0 Definitions /abbreviations:

- 4.1 **CCHE:** Children Cancer Hospital – 57357 Egypt
- 4.2 **CPID:** Continuous Performance Improvement Department
- 4.3 **MMU:** Medication Management & Use
- 4.4 **MMS:** Medication Management & Safety
- 4.5 **Floor Stock Medications:** medications that are stored in well-defined & secured nursing areas based on an approved list, customized according to the need of each unit.
- 4.6 **Stock Medication include:**
  - 4.6.1 Controlled medications: Narcotic medication.
  - 4.6.2 **Regular medications:**
    - 4.6.2.1 Medications used in emergency situations (Stat).
    - 4.6.2.2 Routinely used medications.
- 4.7 **High Alert medication:** medications that have high risk of causing significant patient harm when they are used in error.

## 5.0 Procedure:

- 5.1 The pharmacy department in coordination with the nursing units in the wards/clinics will develop a list of medications to be supplied to each ward or clinic as a floor stock.
- 5.2 The type of medications supplied to the wards or clinics as a floor stock may differ from one ward/clinic to another depending on the service provided, and in limited quantities according the needs of each service unit.
- 5.3 Any addition or deletion in the floor stock's list needs approval from the Pharmacy Department and PNT committee should be informed.
- 5.4 **The hospital pharmacy ensures that proper steps are followed when requesting, stocking, and using medications in the wards or clinics according to an approved list:**
  - 5.4.1 Each nursing unit should have its approved list, hanged on each floor stock cabinets.
  - 5.4.2 The number of items and their quantities should be kept at minimum. It is also the responsibility of the individual nursing unit staff to maintain stock levels at minimum level to decrease wastage.
  - 5.4.3 The floor stock supply in each unit should not be accessible to patients or visitors(secured).
  - 5.4.4 A floor stock file with a printed medications list designed specifically to each nursing unit, should be available and maintained.
  - 5.4.5 Items which are not included on the floor stock list, they are not authorized to be issued through floor stock requests; unless they are included in floor stock approved list.

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5.4.6 Floor stock medications should be well separated and properly labeled and stored in locked cabinets under proper storage conditions, in a clean and organized area with proper temperature and light protection.

## 5.5 Narcotic and Controlled Drugs':

5.5.1 Refer to narcotic management policy.

## 5.6 High-Alert Medications:

5.6.1 Refer to high alert medication policy.

## 5.7 Concentrated electrolyte:

5.7.1 Refer to management of concentrated electrolyte policy.

## 6.0 References:

6.1 N/A

## 7.0 Appendices:

### 7.1 Related Forms:

7.1.1 Floor stock list

### 7.2 Related Policy(S):

7.2.1 Medication Management Program

### 7.3 Related Standards:

7.3.1 Joint Commission Accreditation Standards – MMU Chapter. (MMU.3.1)

7.3.2 GAHAR Standards MMS. 05

### 7.4 Attachments

7.4.1 N/A