

Standard Intent:

Prescribing drugs is a standard component of most physicians' practices. It is an important area of practice that requires appropriate knowledge, skill and professional judgment. To improve patient safety when prescribing, the legal requirements of Narcotic and Psychotropic medications by the ministry of health (MOH) and Saudi FDA need to be followed and respected by healthcare institutions. These medications are considered high-alert medications. The main objective of these legal requirements is to protect patient and society from the consequences of misuse and/abuse of these medications. Prescribing privileges and supply quantities are clearly stated in the Saudi FDA narcotic manual. Chemotherapy agents, radioactive pharmaceuticals and other high-alert medications or investigational agents have narrow therapeutic window and error with these medications can lead to devastating consequences. The pharmacy and therapeutics committee should clearly define prescribing privileges for each of these medications in order to improve medication safety. A list of physicians' prescribing privileges shall be made accessible to all healthcare professionals. The list shall be updated as new prescribers join the hospital or when changes of privileges are made.

MM.20 Safe prescribing, ordering, and transcribing of medication orders are guided by a clear policy and procedure.

- MM.20.1 There is a multidisciplinary policy and procedure that clearly defines a complete prescription.
- MM.20.2 All currently prescribed or ordered medications are written in a uniform location in the patient's medical record.
- MM.20.3 Medication reconciliation is conducted at the time of admission and discharge.
- MM.20.4 Patient identification, diagnosis, indication, or clinical condition are made available with each medication order.
- MM.20.5 Medications are prescribed by generic name except when brand names are acceptable or required.
- MM.20.6 Staff comply with the proper use of approved and prohibited prescribing abbreviations.
- MM.20.7 The pharmaceutical care team conducts corrective actions when medication order is incomplete, illegible, or unclear.
- MM.20.8 All medications are accurately transcribed into the medication administration record (MAR) after being verified against the original physician order or prescription.

Standard Intent:

The medication use process is very complex and safe use process is warranted. Hospital staff need to know what constitute complete prescription. Studies shown that medication errors occur predominantly during the prescribing (39%). Nearly half of all

prescribing errors are intercepted by pharmacists and nurses. Prescribers usually include multiple different abbreviations in their prescription. Abbreviations, symbols, or designations have been shown to cause errors and compromise patient safety and should not be used. Medication reconciliation is a standardized process designed to provide the most complete and accurate list possible of all medications at the time of admission and discharge. Medication orders are written in a unified location in the medical record and in the generic name unless the brand name is recommended (such as combination products) or indicated for safety reasons (such as look-alike and sound-alike drug names). A prescription is not considered complete unless patient name, diagnosis, indication, or clinical condition are made available with each order. Studies shown that medication errors occur during drug administration (38%). Accurate transcription of orders into the medication administration record should be verified by a qualified nurse.

MM.21 The hospital ensures safe prescribing, ordering and transcribing of specific types of medication orders.

- MM.21.1 The hospital implements a policy and procedure on specific types of medication orders including as needed (PRN), standing, automatic stop (ASO), titrating, tapering, range, weight-based, body surface area-based medication orders, and discharge or transfer orders.
 - MM.21.2 The hospital prohibits blanket orders (e.g., resume pre-op medications).
 - MM.21.3 Prescribing controlled drugs is according to laws and regulations of the Saudi Food and Drug Authority and other relevant authorities.
 - MM.21.4 The transcription of medication order into the medication administration record (MAR) clearly reflects the type of order.
-

Standard Intent:

To reduce the variation and improve patient safety, the hospital defines in a policy the required elements for processing specific type of medication orders that include: writing indications for use with any PRN order; standing, automatic stop (ASO), titrating, tapering, range, weight-based, body surface area-based medication orders, and discharge or transfer orders. Blanket order such as resume pre-operative medication should be prohibited in order to improve patient safety. New and complete drug orders post-surgery should be encouraged. The legal requirements of Narcotic and Psychotropic medications by the ministry of health (MOH) and Saudi FDA need to be followed and respected by healthcare institutions. Patient specific medication administration record should have a list of all medications ordered and the dosage, frequency, route, and time the medication was administered. This should include PRN and STAT orders.