



MM.34.4 The hospital informs patients that their medication has been recalled or discontinued for safety reasons.

MM.34.5 The hospital complies with handling recalled, discontinued, and damaged medications guidelines.

Standard Intent:

Recalled, discontinued and damaged medications constitute patient safety risk. Hospitals should have a process for identifying, retrieving, and returning or destroying these medications. Medications may be recalled by the manufacturer, local supplier, ministry of health (MOH), or Saudi FDA. It is the responsibility of the pharmacy director to ensure that recalled, discontinued, and damaged medications are not available for dispensing in the pharmacy or any patient care area and the treating physician should always be informed. All related records and memorandums should be maintained. In case recalled medication is dispensed to outpatients, hospitals must have a mechanism to contact and retrieve the recalled medication.

MM.35 The pharmaceutical care department has a system for provision of outpatient education and counseling.

MM.35.1 The pharmaceutical care department has a system for provision of outpatient education and counseling that includes verbal explanation and instructions by a pharmacist to patients and their families on the safe and effective use, administration, and storage condition of medications.

MM.35.2 Written educational information is given in a language and form the patient can understand.

MM.35.3 Patient privacy is maintained during education and counseling.

Standard Intent:

Lack of sufficient knowledge about their health problems and medications is one cause of patients' nonadherence to their therapeutic regimens and monitoring plans. Without adequate knowledge, patients cannot be effective partners in managing their own care. Providing pharmaceutical care entails accepting responsibility for patients' therapeutic outcomes. Pharmacists can contribute to positive outcomes by educating and counseling patients to prepare and motivate them to follow their therapeutic regimens and monitoring plans.

Pharmacists should encourage patients to seek education and counseling and should eliminate barriers to providing it. Patient education and counseling usually occur at the time prescriptions are dispensed. The techniques and the content should be adjusted to meet the specific needs of the patient. Drug counseling must be offered to all patients before going home. This includes all patients seen in the outpatient clinics and emergency room. Patient and family education includes drug indication, dosing,