

# Prescription Audit



**Audit Done By:**  
**Mrs. Shilpi Guryani**  
**Pharmacist**

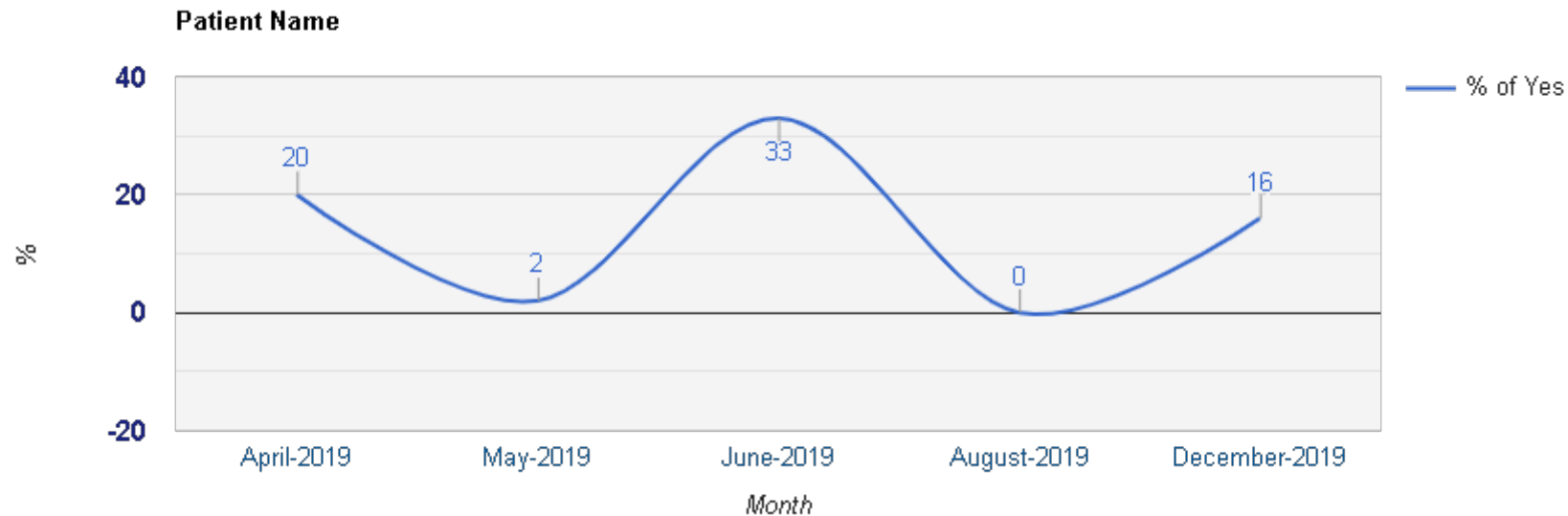
**Audit Reviewed By:**  
**Dr. Deepak Jeswani**  
**Medical Director**

# Prescription Audit

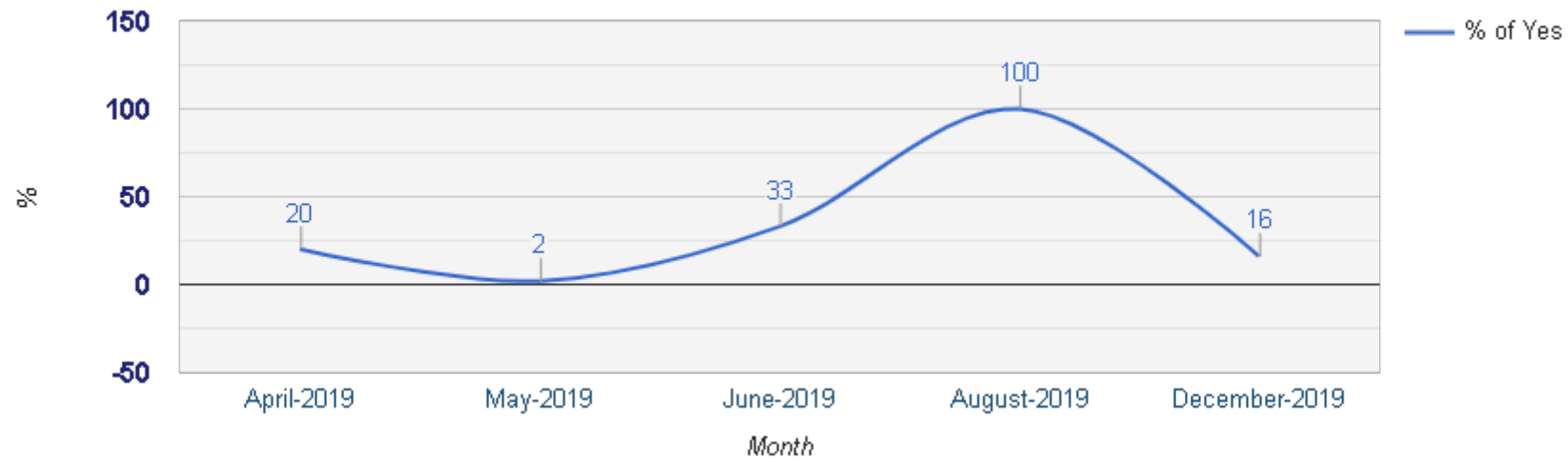
## Analysis

- The area of adherence and their compliance is shown below

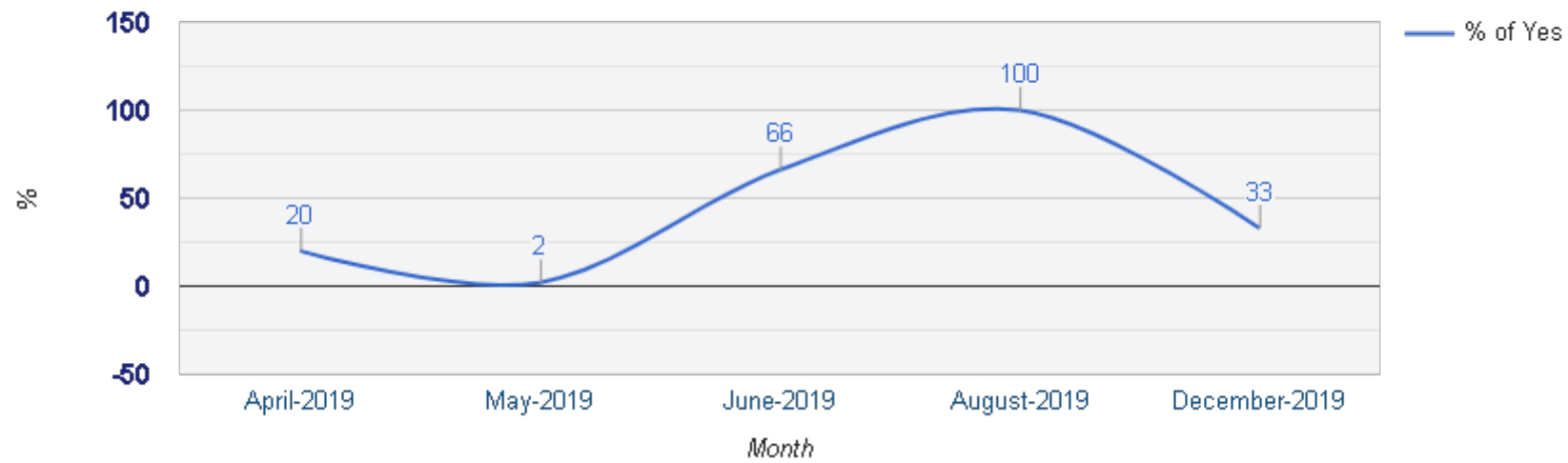
Sr. No.	Audit element in prescription	April-2019(10)	May-2019(69)	June-2019(3)	August-2019(1)	December-2019(12)
1	Patient Name	20.00	2.90	33.33	0.00	16.67
2	Medicatioy written in CAPS & Legible	20.00	2.90	33.33	100.00	16.67
3	Dose	20.00	2.90	66.67	100.00	33.33
4	Quantity	20.00	4.35	66.67	100.00	33.33
5	Date of prescription	20.00	4.35	66.67	100.00	33.33
6	High risk medication verified	20.00	4.35	66.67	0.00	33.33
7	Signature of Doctor	20.00	4.35	66.67	100.00	16.67



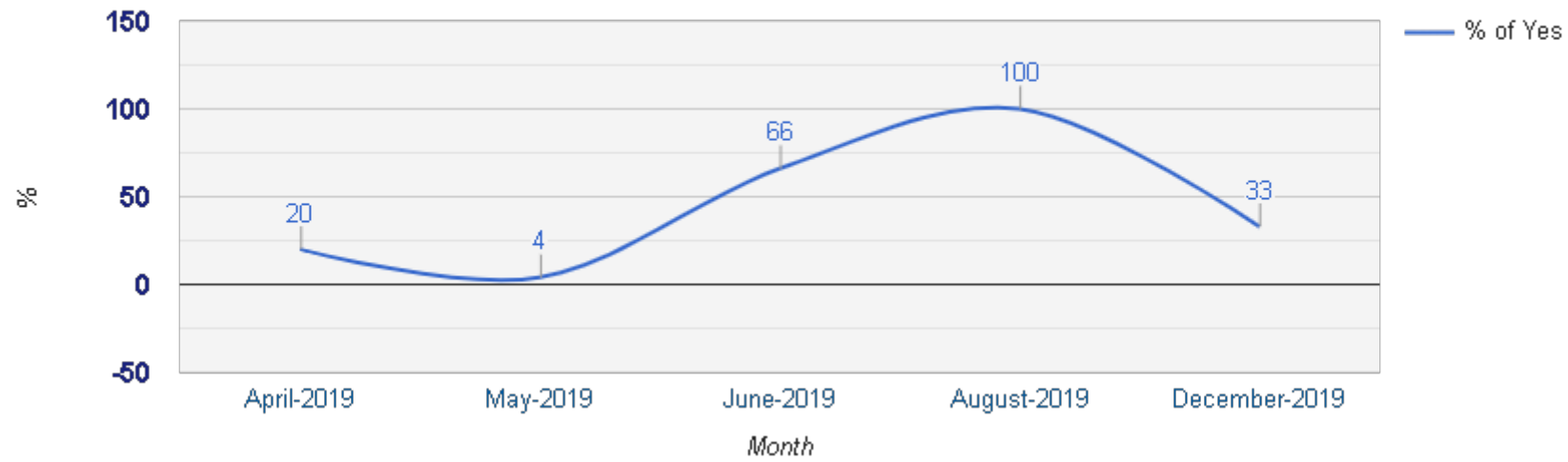
**Medication written in CAPS & Legible**



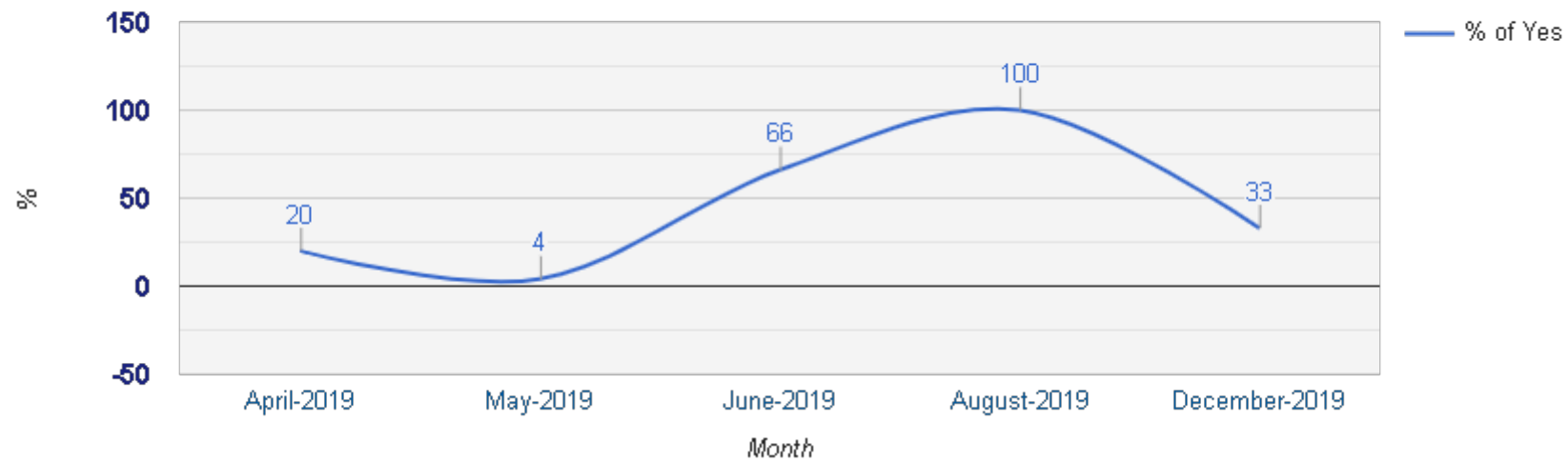
**Dose**



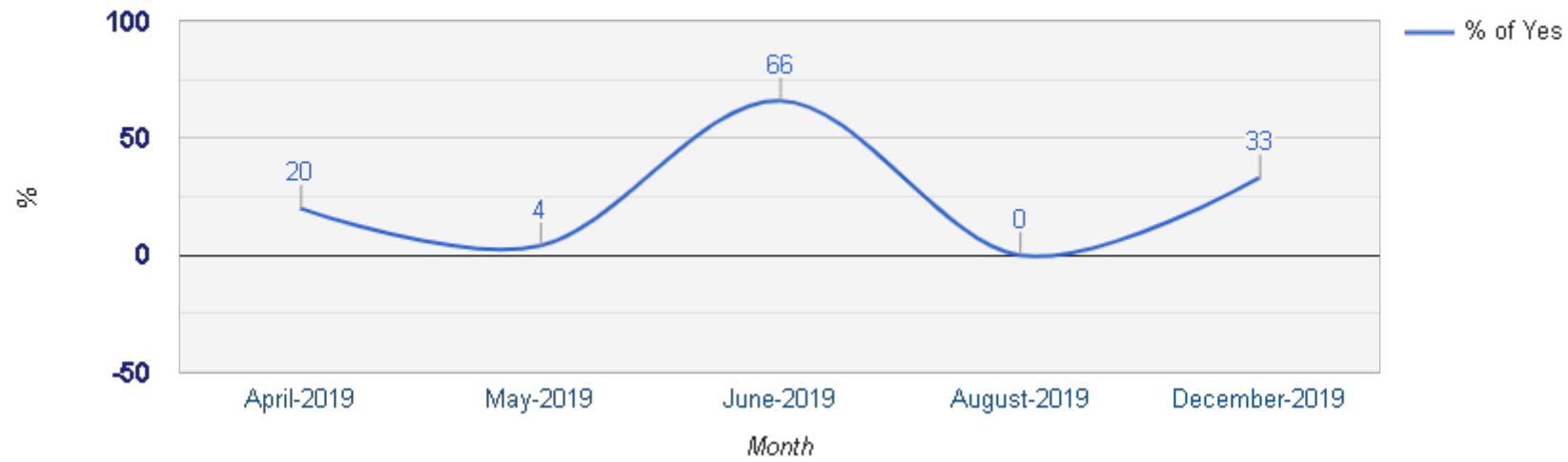
**Quantity**



**Date of prescription**



**High risk medication verified**



**Signature of Doctor**

