QHP802

PHARMACY
BUSINESS CONTINUITY PLAN

CERTIFIED
LR
ISO 9001 · ISO 14001
ISO 45001

JOINT COMMISSION INTERNATIONAL
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Pharmacy Business Continuity Plan
June 2022

QHP802
Version 3.0

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1. INTRODUCTION

As an emergency pre-hospital medical services provider, the continuous availability of National Ambulance's services is critical to the community and stakeholders. Potential disruptions need to be identified at the earliest opportunity in order to response efficiently and in a timely manner. This Business Continuity Plan for Pharmacy addresses all aspects of the organization's response from the detection of an incident through to returning to 'business as usual', including communication during the disruption between all participants.

Managing and responding to disruptions that may impact National Ambulance's operations is addressed in this Business Continuity Plan in alignment with NCEMA 7000:2021 Standard. This will ensure the delivery of prioritized activities within the predetermined timelines in the event of disruptions.

This plan addresses aspects of pharmacy operations that impact on the delivery of NA's prioritised activities, as per the business impact analysis following loss of the Pharmacy. It addresses the:

- Physical pharmacy premises;
- Pharmaceutical stock; and
- Pharmacist roles.

It includes the main steps required to initiate, implement and recover after pharmacy-related business critical interruptions. It does not address aspects of pharmacy or the pharmacists' duties that are ancillary to prioritised activities.

This plan is relevant to the Risk Evaluation and Management System Component.

2. SCOPE

The scope of this plan applies to Pharmacy and all supporting functions required to deliver these operations including Operations Department.

3. PURPOSE

The purpose of this BC Plan is to provide the information that the response team requires and the actions they need to take in order to ensure effective and timely response to disruptions. This BC Plan shall set the requirements needed for detecting potential incidents and responding to disruptions in order to shorten their duration, limit their impact, and protect those affected.

4. OBJECTIVES

The objectives of this BC Plan are to:
- Provide an overview of how Pharmacy will respond to a disruptive incident affecting its business continuity
- Set out how our business continuity plans will be invoked
- Define how decisions will be taken with regard to responding to an incident
- Explain how communication within National Ambulance and with external parties will be handled
- Provide contact details for key people and external parties

The key pharmacy-related obligations in the context of business continuity are to ensure an ongoing supply of medicines including narcotics to frontline services, and to enable emergency medical treatment, transport and response to mass casualty incidents to continue uninterrupted. Specifically, this requires:

- Storage of medicines
- Storage of narcotics (including controlled medications)
- Dispensing of medicines & narcotics (including controlled medications)
- Receiving of medicines & narcotics

5. ROLES AND RESPONSIBILITIES

Designation	Roles and Responsibilities	Contact Details
Executives (CEO, CAMO, CFO)	• Authorise initiation of the Pharmacy Backup Plan;	Ahmed Al Hajeri
Chief Administration & Medical Officer	• Ensure the Pharmacy BC plan is current and tested; • Allocate resources to ensure implementation of the plan when required; • Authorise emergency spending if and when required as part of contingency measures; • Mobilise to implement the Pharmacy Backup Plan immediately when required, and continue until return to normal operations; • Review the Pharmacy BC plan, in cooperation with the Pharmacist, Warehouse Manager and BC Team;	Dr. Ayman Ahmed
Chief Financial Officer	• Allocate resources to ensure implementation of the plan when required; • Authorise emergency spending if and when required as part of contingency measures;	Charles Arnestad
Pharmacist in Charge	• Act cooperatively with CAMO to authorise initiation of the Pharmacy Backup Plan; • Mobilise to implement the Pharmacy Backup Plan immediately when required, and continue until return to normal operations; • Identify resources required for successful implementation of Pharmacy BC Plan; • Key role in development of the Pharmacy BC Plan; • Review and update this Plan to ensure it reflects the current organisational status	Nada Mohammed
Warehouse supply Chain Manager	• Mobilise to implement the Pharmacy Backup Plan immediately when required, and continue until return to normal operations; • Contribute in reviewing the Pharmacy BC Plan, in cooperation with the Pharmacist, CAMO, and Business Continuity Team.	Tarek Alsabagh
Business Continuity team	• Assist in reviewing and updating this Plan to ensure it reflects the current organisational status. • Prepare training to support implementation of this Plan.	Ali Al Kharusi Maisan Al Wattar IT

6. REQUIRED RESOURCES

Details of the resources required for implementing this plan by the BC plan implementation team are listed below:

- People: Pharmacists, logistics team, procurement department and/or finance department IT Team
- Information / Communication / Data: Internet and electronic devices
- Buildings, work environment and associated utilities: Dispensing room and backup dispensing room.
- Facilities / equipment / consumables: Drug bags, bins for drug bags, dehumidifiers, fridge, thermometers, drug safe for the narcotics
- Systems: Oracle and OPIQ
- Transportation: Logistics vehicle
- Finance / Budget: Budget for emergency purchase
- Partners and Suppliers: DoH approved suppliers list is available on http://www.greenrain.biz/drugs/

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7.PRIMARY, SECONDARY, AND BACKUP LOCATIONS

Pharmacy – Primary Location

Physical address:
National Ambulance Warehouse – Pharmacy
Kizad, Abu Dhabi
Telephone: +971 2 596 8600

GPS Coordinates:
24.7100228, 54.7302306

Map:
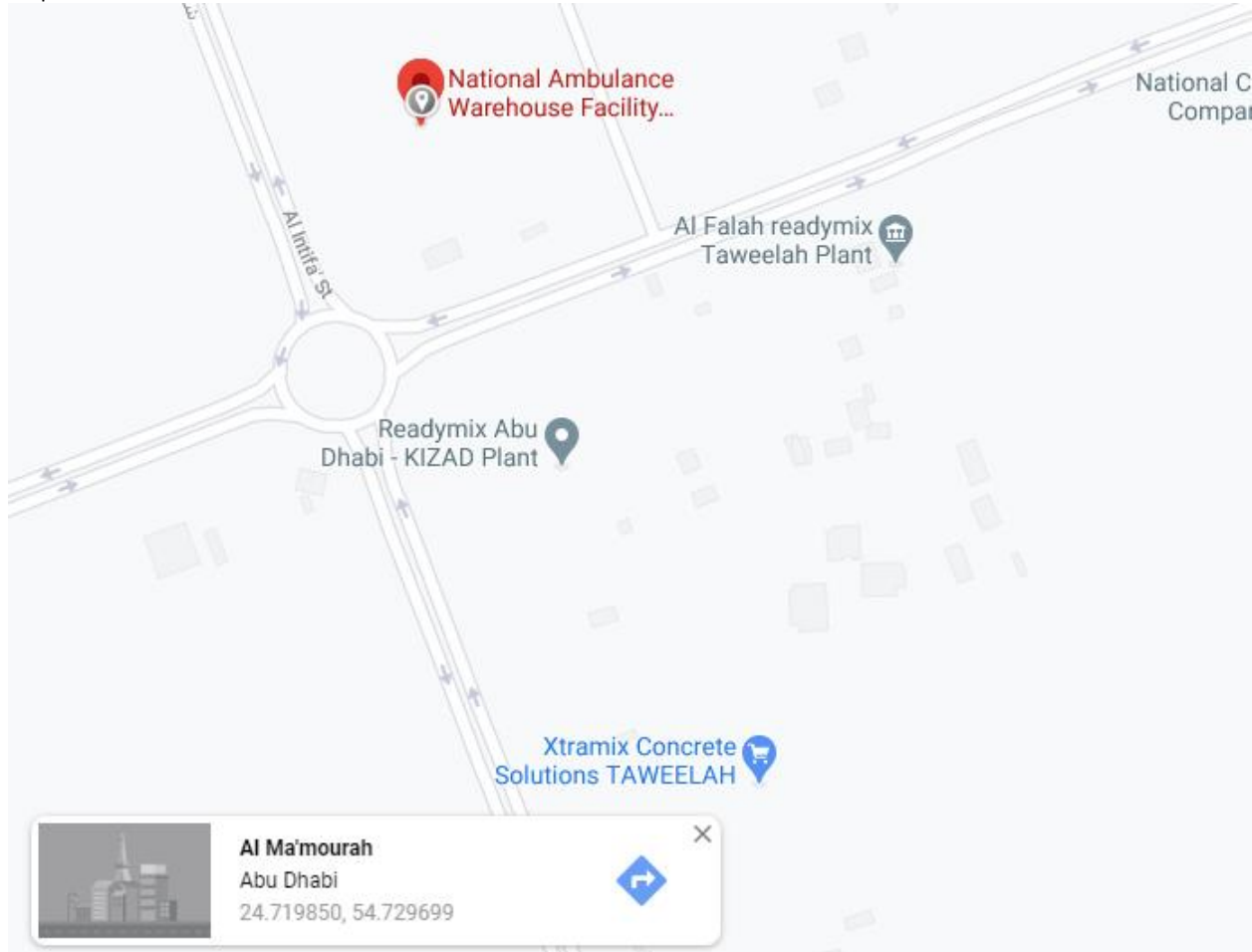
Pharmacy – Backup Location

Physical address:
National Ambulance Head Office - "Telephone Room"
13th Floor, Aldar Building
Al Raha Beach, Abu Dhabi
Telephone: direct +971 2 245 9802

GPS Coordinates:
N24°26'28", E 54°34'31"

Map

8. INTERESTED PARTIES

8.1. EXTERNAL INTERESTED PARTIES

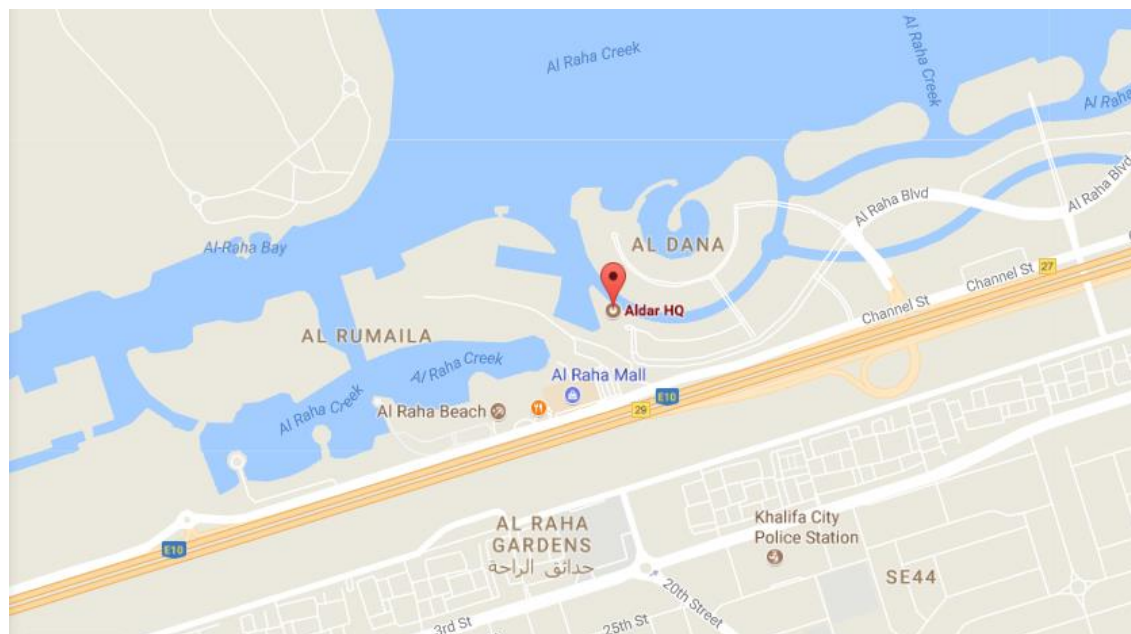| Interested Party	Supplier/ Stakeholder	Services/ Products Provided	Name & Contact Details	Response Time (if applicable)
Cofeley Besix Facility Management	Supplier	Aldar building - electricity, cooling, engineering services	02 679 6939	
Department of Health (DoH)	Regulatory body	Licensing of pharmacy and pharmacy staff	www.doh.ae (online application)	1-3 months based on individual cases
AD PORTS **Building owner**	**Rent and facility**	**02-6952000 / 02-6912348** customerservice@kizad.ae		

Suppliers – Pharmacy Equipment
Equipment required to fit-out the Pharmacy in case of major loss are listed in Appendix C.

Suppliers – Non Controlled, Controlled Medicines and Narcotics
Key suppliers (vendors) for resupply of the Pharmacy in case of major loss are listed in Appendix E.

Service Level Agreements
There are no current applicable service level agreements (SLAs), however, key suppliers of consumables are obligated under contract to keep a minimum of 3 months' worth of stock in their stores on our behalf.

8.2. INTERNAL INTERESTED PARTIES

Name	Role in Plan	Office Number	Phone Number	Email
NA IT Team (internal)	Biometric access to standby site Connection of desk computer & phone	678	056 417 3155 (24/7)	ithelpdesk@nationalambulance
Logistics – Supply Chain	Delivery of medication	544	055 243 9499	logistics@nationalambulance.ae

9. AUTHORITY TO ACTIVATE

- Any individual NA Executive may activate the Pharmacy Backup Plan, acting alone;
- Two or more individuals with the position of Director or Pharmacist in Charge may also activate the Pharmacy Backup Plan, should an Executive not be contactable at the time of a business critical incident.

Position	Responsibility	Contact
NA Executives	Authorise initiation of Pharmacy Backup Plan, acting alone	Ahmed Al Hajeri Charles Arnestad Ayman Ahmad:
Director, Pharmacist in Charge Pharmacist	2 or more required to authorise initiation of the Backup Plan; Mobilise Recovery Team once Plan has been triggered; Inform Executive that Pharmacy Backup Plan has been initiated	Operations Director Nada Mohammed Deema Massarwah
QHSE & BC Manager, Supply Chain Manager, Pharmacist in Charge Pharmacist	Mobilising Recovery Team on receipt of a pharmacy loss alert; Coordination of resource and communications.	Ali Al Kharusi Tarek Al Sabbagh Nada MohammedDeema Massarwah
Supply Chain Manager, Pharmacist in Charge Pharmacist ('Pharmacy Recovery Team'	Implementing Pharmacy Backup Plan and initiate recovery	Tarek Al Sabbagh Nada MohammedDeema Massarwah

10. CRITERIA FOR ACTIVATING

The Pharmacy Backup Plan should be activated due to:

Loss of Pharmacy.

The criteria for assessing the above is when any of the following conditions are met (or is confidently anticipated):

- Loss of Pharmacy physical premises – for example, fire, damage from fire suppression system,
- Loss of Pharmacy access – for example, Kizad Warehouse building access closed due to local road access closure or evacuation, fire elsewhere in building, beyond 1 week.
- Extended loss of critical services to Pharmacy – for example, power, cooling, security, beyond 1 week.- for activation criteria please refer to the BIA

11. PLAN ACTIVATION AND IMMEDIATE RESPONSE PROCEDURE

Pharmacy Backup Strategy

The overall strategy to achieve key pharmacy obligations is summarized as follows. Resources required for recovery are identified within each step of the strategy:

- **Existing Distributed Stock in Northern Emirates**

Existing stock levels in the Warehouse, standby safe in Manama with 20 BLS drug bags and at stations are managed on a business-as-usual basis such that they will support operations for a period of 1-2 weeks.

Each station has 2 extra medicine bags per ambulance, depending on location, which can be utilized for 1-2 weeks during initial resupply of pharmacy.

- **Relocate to Standby Pharmacy Site**

Pharmacy operations will relocate to the Standby Pharmacy site. Depending on nature of loss at Warehouse Pharmacy, operations from the standby site may be required for more than 12 months.

Location: the standby site will be the 'Telephone Room' in the National Ambulance head office ('HQ'), located on 13th floor of the Aldar Building.

Fall-back Procedure: the procedure to commence operating from NA Head Office 'Telephone Room' is provided below - Pharmacy Backup Plan. Access requirements are addressed in Appendix B.

Licensing & Approvals: the pharmacy must have:

- 'Facility license' – DoH license for the premises (NA Head Office)
- 'Pharmacy license' – DoH license for the pharmacy (Telephone Room/ Standby Pharmacy)
- Pharmacist/s licensed to work at the pharmacy location

Further details are listed in Appendix A.

Equipment: equipment needed to obtain a DoH pharmacy license and operate as a pharmacy is listed in Appendix C.

- **Rapid Re-ordering of Stock**

Bulk replacement of all pharmacy non-controlled, controlled and narcotics may be required. For vendors and contact details refer to Appendix E.

Emergency re-supply of medicines may be undertaken via suitable hospitals, if issues arise with vendor supply times. These hospitals are also listed in Appendix E.

Authority to Purchase – authority to purchase a bulk quantity of stock may be requested at short-notice. This will require approval from:

- Chief Financial Officer
- Chief Administration & Medical Officer

The current estimated budget for a month of re-supply of pharmacy (month) is AED 1,780,000.

Stage 1– Activation of Backup Plan

1. Notification of "Pharmacy loss" incident is received by Pharmacy.
2. Incident is assessed against criteria for activation of Backup Plan
   [by Executive or authorised group].
3. Instruction to initiate Pharmacy Backup Plan is given
   [by Executive or authorised group].
4. 'Pharmacy Recovery Team' mobilises to implement Pharmacy Backup Plan
   [by CAMO, Supply Chain Manager and Pharmacist in Charge/Pharmacist].

National
الإسعاف الوطني
Ambulance

وثيقة محظورة
Restricted
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Stage 2 – Implementation, RELOCATE to Standby Site (Al Dar)

1. Issue internal notification to all staff of pharmacy loss event as per 'COP113 Crisis Communication & Media Liaison Policy'
[by Senior Communications & Media Specialist or Executive, or QHSE team, or Operations Managers, or CAMO].
2. Notify DoH of pharmacy loss and immediate relocation to standby location. Request interim or urgent DoH license for standby pharmacy pending full application and approval process
[by Pharmacist in Charge, or CAMO, or Executive].
3. Conduct rapid assessment of loss at Warehouse pharmacy. If loss is total, commence full bulk reorder. If partial, assess items that are practically and legally salvageable items for use and cooperate with NA insurance policy provider on loss assessment
[by Pharmacy Response Team in liaison with DoH, Operations, Logistics].
4. Obtain approval for purchase of bulk pharmacy stock and equipment from CFO and/or CAMO
[by Pharmacy Response Team].
5. Commence reordering of pharmacy stock to required level by contacting key suppliers and hospitals – ongoing
[by Pharmacy Response Team].
6. Purchase required pharmacy equipment, as per Appendix A
[by Pharmacy Response Team].
7. Coordinate with IT to set up the IT equipment, as per Appendix C
[by Pharmacy Response Team and IT Team].
8. Pharmacist to liaise with Supply Chain to support delivery and storage of pharmacy stock and equipment – ongoing
[by Pharmacist in charge and Supply Chain Manager].
9. Issue ongoing updates of medicine and narcotic shortfalls, and updated re-supply schedule to:
   - CAMO
   - Managers– Operations (all),
   - Supply Chain Manager [by Pharmacy Response Team.]

12. PRIORITIZED ACTIVITIES

In order to reduce impact, the following are the critical activities that must be given the priority when recovering from disruptive events:
1. Licensing of Pharmacy
2. Licensing of Pharmacists
3. Dispensing of required medication
4. Delivering of drug bags to the field
5. Storage and safeguarding of controlled and non controlled medication
6. Purchasing the required stock of medication

13. IMPACT OF DISRUPTION ON PRIORITIZED ACTIVITIES OVER PREDETERMINED TIMEFRAME.

The impact of disruption on prioritised activities with respect to key pharmacy obligations identified previously is outlined in the tables below. Additionally, recovery of pharmacy stock following total loss scenario is also included.

Pharmacy Requirement	Availability	Timeframe To Recover	Impact of Non-Availability
Storage of medicines (including storage of narcotics and controlled medications)	Primary site - yes Standby site - yes	1 day; Full redundancy (standby site operated by NA)	Reduced potency of medication Health and safety hazards Theft and abuse Illegal use
Dispensing	Primary site - yes Standby site - yes	1 week; Full redundancy (standby site operated by NA)	lack of required medication in the field
Purchasing	Primary site - yes Standby site - yes	1 week; Full redundancy (standby site operated by NA)	Affected Par levels of pharmacy stock
Inventory control	Primary site - yes Standby site - yes	1 week;	lack of required medication in the field
Licensing of Pharmacy Staff	Primary site - yes Standby site - yes	1 day;	Illegal dispensing of medication
Delivering of drug bags to the field	Primary site - yes Standby site - yes	1 week; Full redundancy (standby site operated by NA)	lack of required medication in the field

14. RECOVERY AND STAND-DOWN

The following strategies and recovery procedures are needed to ensure that critical activities can be resumed within their RTOs following a disruption:

Strategy	Resources	Dependency	Action to resume	Prevention
Replenishment of the affected stock	Staff, pharmacists, logistics team Internet, electronic devices Dispensing room Drug bags OPIQ Logistics vehicle	Availability of the stock Availability of staff Availability of dispensing room Availability of logistics, technological devices/systems/communication	Follow dispensing procedure	Replenishment of extra drug bags to serve in emergencies
Sourcing of vendors and alternative vendors	Procurement and Finance departments, Pharmacists Internet, electronic devices Oracle and OPIQ	External: vendors, DoH/MoH regulations Internal: Procurement department (POs and purchasing process)	Follow procurement procedure or emergency procurement requirements	Keep a backup of extra stock Have an agreement of some vendors for accelerated emergency supply

	Budget for emergency purchase DoH approved suppliers list	Finance department (paying the invoices) Approval of Working Groups and PTC Availability of Pharmacists		
Back up dispensing room	Pharmacists, supply chain Internet, electronic devices Al Dar HQ Cabin for drug bags, new drug bags, dehumidifiers, fridge, thermometers, drug safe for the narcotics Oracle and OPIQ Budget for emergency purchase DoH approved suppliers list	Internal: finding a suitable room that best meets the pharmacy requirements e.g. locked, made up of concrete walls..etc	Setup of the dispensing room to meet dispensing and storage requirements	Nil
Emergency purchase from existing suppliers	Pharmacists, Finance, Procurement, Management Internet / Communication devices Alternative dispensing room OPIQ & Oracle Budget for emergency purchase DoH	Internal: emergency purchase approval External: availability of stock with suppliers and delivery time	Follow emergency purchase procedure	Nil

15. RETURN TO BUSINESS AS USUAL

RETURN TO NORMAL OPERATIONS
1. Assessment of primary site at the Warehouse to determine whether the Pharmacy can be resume operations from there, including physical suitability and pharmacy license
   [by CAMO, Pharmacist in Charge, QHSE, IT, Supply Chain Manager].
2. If "Yes" in Step 1:
3. Transfer stock back to the Warehouse [Pharmacy Response Team,] Supply Chain Manager and continue BAU
4. Notify DoH and NA staff of transfer of primary pharmacy location [Pharmacist in charge and Executive, Communications Specialist, QHSE].
5. Return standby site to routine function. Maintain capability of standby site in case of future need [Pharmacy Response Team, Supply chain Manager].
a. If "No" in Step 1:

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6. Standby pharmacy site is designated as new primary site, continue operations business as usual.
7. Communicate ongoing change of primary site to staff and relevant third parties: suppliers, DoH, Aldar management, NA insurance provider [Pharmacist in Charge Executive, Communications Specialist, BC].
8. Review completed Pharmacy Backup Plan implementation, business continuity risk assessment, and Pharmacy BC Plan, to update new risks, develop backup options based on lessons learned, and update backup plan [by Business Continuity Team, Pharmacist in Charge, CAMO, Supply Chain Manager, Communications Specialist, Operations Managers].

16. DOCUMENTATION AND RECORDS

Actions taken and decisions made will be recorded by all means of communications used, examples:
- Pharmacy and organization's forms
- Communication emails
- Stakeholders and suppliers' forms/ documents
- WhatsApp
- Recorded calls if available

17. RELEVANT LEGISLATION

International, federal or local legislation and circulars relevant to this Policy. Full detail on this legislation can be found in QHP109 Legal Register.

Code, Name of Legislation	Jurisdiction
NCEMA 7000:2021 Standard	UAE

18. RELATED POLICIES AND FORMS

List related policies and procedures to the created/updated policy.

Policy & Procedure /Form
CGP211 Medication Management Manual
OPP110 Crisis Communication & Media Liaison Policy
QHP103 QHSE and Business Continuity Management System Manual

19. FEEDBACK

Any feedback or suggestions for improvement to this Policy, Processes or Procedures can be submitted to qhse@nationalambulance.ae

20. DOCUMENT CONTROL AND OWNERSHIP

A review and update of this document will take place as necessary, when changes occur that identify the need to revise this Policy such as changes in roles and responsibilities, release of new legislative or technical guidance, or identification of a new policy area.

This document ownership for editing is identified as:
- QHSE & BC Manager

Change Brief

Version No.	Date	Change
1.0	April 2017	*New document*
2.0	November 2017	• *Backup procedures were updated to reflect move to Warehouse, and approval of standby site at Aldar Building;* • *Pharmacy vendor and equipment list added;* • *Sections were reordered;* • *Specific contact details added for NA staff* • *Refined overall step-wise plan to provide more clarity*
3.0	June 2022	*Rewrite of the document*

CEO Approval

Board Member Verification

APPENDIX A - Standby Pharmacy Resources & Requirements

REQUIREMENT	DETAILS
DoH Pharmacy license - Aldar HQ	Application to be submitted online to DoH by NA Clinical Services team. DoH online application link Documents required: Municipality Tawtheeq, Commercial License, Facility/branch License.
DoH Facility license - Aldar HQ	Licensing for NA to operate from Aldar 13th floor ('facility license') is being progressed. Once the facility license has been issued, it doesn't need to be applied for again in case of fallback of Pharmacy operations Copy of license available from NA Licensing Department
Pharmacist licensed to operate from Aldar HQ	NA's Pharmacists are able to practice under their existing pharmacist license from DoH
Pharmacy recovery team contacts	Chief Administrative Medical Officer, Dr Ayman Ahmad: 050 828 6797 Supply Chain Manager, Tarek Al Sabbagh: 056 406 9542 Pharmacist in Charge, Nada Mohammed: 050 115 7159 Pharmacist, Deema Massarwah: 050 937 6569

APPENDIX B – Standby Pharmacy Site Access

REQUIREMENT	DETAILS
Standby Pharmacy Location and Parking	Location map: refer Section 10 Address: 13th Floor, Aldar Building, Al Raha Beach, Abu Dhabi Coordinates: N24.34808, E054.4807 Street parking is available
Access into NA office, 24/7	Access to NA office: All NA staff have access passes to operate lift to 13th floor, 24/7; Access inside NA office: All NA staff have biometric access to open door into office from NA Reception, 24/7 Non-staff: must have Emirates ID, driving license or passport to submit to Aldar main reception desk and obtain lift access pass to 13th floor Reception, then wait for NA staff to provide entry inside offices
Access into Standby Pharmacy room, 24/7	The room designated as the Standby Pharmacy is kept unlocked when it is used as 'Telephone Booth'; Once standby pharmacy operations commence from this location, biometric entry control device will be activated by IT, enabling Pharmacists access only, and exit by push-button from inside the pharmacy

Pharmaceutical Fridge	Pharmaceutical fridge to be purchased as and when needed. Supply lead time: expected to be 1-4 weeks depending on availability. If required, as an interim measure a 'mini-bar' (small) fridge can be purchased or relocated from other NA offices. Delivery by vendor or NA Logistics van. Vendor/s: Bin Ali Medical Supplies Quantity: 1 Fridge Specific requirements: size 50Wx50Dx60H cm; 60-70 litres Expected cost: AED 1,200 each approximately
Drug Safe	Safe to be purchased as and when needed. Supply lead time: purchase from stock on hand, same day as purchase. Delivery by vendor. Vendor/s: Hartmann Tresore Specific requirements: size 150Hx50Wx50D cm Quantity: 2 safes Expected cost: AED 10,000 each approximately
Shelving	Ready-made shelves to be purchased as and when needed. Supply lead time: purchase from stock on hand. Expected to be same day as purchase. Delivery by vendor or NA Logistics van. Vendor/s: ACE Hardware store/IKEA. Size: 300x40cm Quantity: as required, dependent on style/size of shelving
Drug bags	100 BLS bags 100 ADB bags 50 ALS bags 50 ELS bags
Desk	Relocate desk as required from other area of NA office If required, purchase from stock on hand at local office furniture or hardware supplier
Computer	Reallocate laptop from IT department inventory to Pharmacy
Desk phone	Reallocate desk phone from IT department inventory to Pharmacy Pharmacist to use mobile phones in interim

APPENDIX D – Fit-out Specifications of NA Aldar Building, Telephone Room (Standby Pharmacy)*

CCTV	2 x CCTVs to operate inside Standby Pharmacy Network provision for 2 x CCTV cameras using CAT6 PoE Cameras to be supplied by NA
Solid walls	Security mesh to be installed (within walls or double skin gyprock on inner skin with security mesh secured from slab floor to slab ceiling)
Lockable/ Secure Room	Outside of room: biometric access device Inside of room: door release switch, and deadbolt electrical lock with key override
Temperature controlled room	Separate environmental control to maintain room temperature independently from surrounding spaces
Sufficient lighting	Lighting panels suitable for precise bench work with zoned switching
Separate area for storing expired medicines	A specific segregating area can be delegated within the pharmacy room.
Washable non-porous floors	Laminate floor
Electrical outlets	8 x electrical sockets distributed along the three walls without the door
Data connection	2 x CAT6 computer points (for phone and computer)
Walls painted with anti-bacterial paint	Walls to be painted with anti-bacterial paint Certificate that walls were painted with anti-bacterial paint to be issued by Main Contractor engaged to fit-out room Copy of certificate to be kept at Pharmacy N:Drive

* Specification provided to main contractor appointed to manage fit-out of Aldar headquarters.

APPENDIX E – KEY PHARMACY SUPPLIERS (VENDORS)

Vendor	Product / Service Category		Phone Number & Email
Al-Amir Est	Non-Controlled & Controlled		02 641 7120/ junaidalamerest@gmail.com
Al-Baker	Non-Controlled & Controlled		02 643 8900 dorothy.pereira@al-baker.com
City Pharmacy	Non-Controlled & Controlled		+971 2 506 7851Emad Ibrahim 055 610 4710 emaad.ibrahim@citypharmacy.com
Darwish Medical Store	Narcotic		+971 2 501 1111 mahmohamed@rafeduae.ae aalqubaisi@rafeduae.ae>
Gulf Drug	Non-Controlled & Controlled		02 621 2395/050 371 4025 notesadminauh@gulfdrug.com givin_thomas@gulfdrug.com (Mannitol 04 5014089) () sheryl_reyes@gulfdrug.com (mannitol)
Julphar	Non-Controlled & Controlled		02 622 2077/055 550 0764 tender.gov@julphar.net muhannad.qasim@julphar.net
Metromed	Non-Controlled & Controlled		02 644 9544/ 050 659 9348 Samer.Zaghir@metromed.me Mohammed.Ashraf@metromed.me
Pharmalink	Non-Controlled & Controlled		02 626 2665 quotations@pharmalink.ae binoy@pharmalink.ae
Modern Pharmaceutical Co	Non-Controlled & Controlled		02 443 5500 mpcad@mpchealthcare.com
Razi Pharmacy	Non-Controlled & Controlled		02 673 0057/sadiq@alrazi.com 055 420 6950
Unimed (Wholesaler)	Non-Controlled & Controlled		04 258 8441 vatok@unimed.ae
Pharma Solution	Non-Controlled & Controlled		www.pharmasolutions-int.com louis@pharmasolutions-int.com +971 56 115 1428
AL-Sheraa Drug Store	Non-Controlled & Controlled		alshiraa@alshiraa.net, sales@alshiraa.net 06 552 7191

Vendor	Product / Service Category		Phone Number & Email
Al Hayat Pharmaceuticals	Non-Controlled & Controlled		alhayat@eim.ae 02 245 9625 tarek.badran@alhayatuae.com 055 886 6920
Basle Pharmaceuticals	Non-Controlled & Controlled		varshal@baslepharma.com mustafa@baslepharma.com 055 107 0771
Muscat Pharmaceutical Trading L.L.C.	Non-Controlled & Controlled		harshal@mpdxb.ae +9714 3437070/ +971 52 7498257 hashim@mpdxb.ae
Sheikh Khalifa Medical Centre (SKMC)	Non-Controlled		02 819 0000
Cleveland Clinic Abu Dhabi (CCAD)	Non-Controlled		800 82223
SEHA	Non-Controlled		02 410 2000