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قائمة التحقق النهائي

# **Inpatient Pharmacies**

Name of the Facility: _			-
Date of Inspection:	/	/	

Ref.	General Requirements	Yes	No	N/A	Remarks
12.3	The pharmacy unit located for convenient access, staff				
	control, and security. Direct access to loading dock and				
	bulk storage is required if not located within the main				
	pharmacy unit. **				
F 2 0	Pharmacy space requirements:				
5.3.9.	Inpatient Pharmacy (minimum 15 m2).				
5.3.10.	The minimum ceiling height is not less than 2.70 m (8				
5.5.10.	feet 8 inches).				
3.2.6	Adequate lighting and ventilation for drug preparation				
3.2.0	and dispensing.*				
5.4	Wall finish treatments do not create ledges or crevices				
5.4	that can harbour dust & dirt.*				
	Floor and walls should be anti-static, heat resistant, anti-				
5.4	bacterial, anti-fungal and chemical resistant. All joints in				
5.4	flooring must be sealed and coved at the edges (against				
	walls or fixed joinery) where possible.*				
12.6.4	Secured stores for accountable drugs, refrigerated				
12.0.4	stores and flammable goods storage**				
12.6.5	Dispatch area for deliveries to inpatient units. **				
14.2.2.	All Drug Storage Areas is to be fitted with temperature				
14.2.2.	and humidity controls.				





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# **Inpatient Pharmacies**

14.2.6.	Storage areas are designed to ensure the following good storage conditions:  Proper cleanliness and hygiene.  Dryness (relative humidity not more than 60%).  Temperature within acceptable limits (8-25 degrees Celsius).  Suitable spaces to permit cleaning and inspection.  Pallets are to be kept in a good state of cleanliness and repair.		
14.2.7.a	For medications and pharmaceutical products that require be stored at room temperature; the temperature should be maintained between 15-25 degrees Celsius.		
14.2.7.d	For medications and pharmaceutical products that require storage in a refrigerator; the refrigerator temperature should be maintained between 2-8 degrees Celsius.		
14.2.7.f	Vaccines should be stored in a separate refrigerator where temperature control is between 2 and 8 degrees Celsius. Refer to DHA Immunization Guidelines for further details.		
14.2.9.	A temperature monitoring system may be installed and connected to a centralized alarm/ warning system.		
14.2.10.	A sufficient back-up emergency power supply for the refrigerator should be available to ensure protection and safety of medication in the event of an emergency power cut.		
14.2.11.	A digital thermometer is required to be available in the		

No. HRS/HPSD/PG/01/2021





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# **Inpatient Pharmacies**

	pharmacy, storage area and medication refrigerator to		
	ensure the validity and stability of the products.		
11.010	Temperature and humidity monitoring charts readings		
14.2.12.	should be logged on a separate sheet at least twice daily.		
	A dedicated and labeled cabinet(s)/area for the storage		
14.2.13.a	of expired medications or returned/withdrawn		
	medications		
18.5.4.	The Person in-charge is a DHA licensed Clinical		
10.5.4.	Pharmacist or Pharmacist.		
	The main storage area for Narcotic drugs, Narcotic		
	register books and Narcotic prescription books are		
	stored in a special secured lockable cabinet(s) with		
	the following features:		
18.6.4.	a. Made of steel with internal hinges.		
	b. Have a double locking system.		
	c. Be securely fixed to the wall or floor.		
	d. Non-duplicable keys.		
	e. Security/alarm system and/or security camera.		
	Narcotic drugs stored outside the pharmacy		
18.6.5.	<del>(</del> medication room) should be placed in a double		
10.0.3.	locked steel cabinet inside a secured medication		
	room.		
14.2.13.b	A secured lockable steel cabinet(s) for Controlled Drugs.		
	The cabinet should be designated by a label and the		
18.6.7.	key(s) must be kept in the custody of the Person in-		
	charge or the authorized Deputy in-charge.		
23.3	All DHA Pharmacy Circulars are required to be		

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# **Inpatient Pharmacies**

	maintained and available in the pharmacy either soft or		
	hard copies.		
5.7.1	Taps to Hand Basins in pharmacies should be either		
5.7.1	elbow-action taps or automatic taps*		
5.7.2	Antiseptic Hand Rubs should be located so they are		
J.1 .Z	readily available for use.*		
22.3.4.	Providing and easy access to soap and water or hand		
22.3.4.	sanitizer for staff.		
4.2	Foot operated or other hands-free operated clinical and		
7.2	normal waste bins*		
	First aid kit, Fire services and egress/ exit signs will be		
5.4.1	installed in accordance with the UAE Fire and Life Safety		
	Code, Dubai Universal Design Code.*		
8.6.	It is recommended to have a scientific pharmaceutical		
	reference in the pharmacy either as hard copy or		
	electronic format, such as but not limited to: BNF,		
	Martindale: The Complete Drug Reference.		
13	Medication Preparation & Compounding		
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13.2.3.	It is recommended that all inpatient pharmacies dealing		
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13.2.3.	It is recommended that all inpatient pharmacies dealing		
13.2.3.	It is recommended that all inpatient pharmacies dealing with medications compounding to develop and		
13.2.3.	It is recommended that all inpatient pharmacies dealing with medications compounding to develop and implement internal policies and procedures based on		
13.2.3.	It is recommended that all inpatient pharmacies dealing with medications compounding to develop and implement internal policies and procedures based on UAE federal laws, local regulations, and MOHAP		
	It is recommended that all inpatient pharmacies dealing with medications compounding to develop and implement internal policies and procedures based on UAE federal laws, local regulations, and MOHAP ministerial decrees.		
	It is recommended that all inpatient pharmacies dealing with medications compounding to develop and implement internal policies and procedures based on UAE federal laws, local regulations, and MOHAP ministerial decrees.  All significant procedures performed in the compounding		





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# **Inpatient Pharmacies**

	space for drug preparation**		
	A comprehensive pharmacy computer system employed,		
12.5.6	such as but not limited to: computerized provider order-		
12.5.0	entry, medication administration, electronic health		
	record, and patient billing systems. **		
12.7.3.2	The room kept on positive pressure and be accessed via		
12.7.3.2	an anteroom. **		
	Electronic door management system to prevent the		
12.7.3.4	opening of both doors in the anteroom at the same time.		
	**		
	Hand washing settings provided immediate outside the		
12.7.3.5	aseptic (clean) rooms in adjoining anteroom; hand basins		
12.7.3.3	are not to be located within the aseptic (clean) rooms.		
	**		
12.7.3.6	An intercom system provided between aseptic (clean)		
12.7.5.0	rooms and anteroom. **		
12.7.3.7	High-resolution Close Circuit Television (CCTV) cameras		
12.7.3.7	for remote monitoring. **		
	Medications must be prepared in clean and safe areas		
13.2.7.	(Clean Room/Aseptic Room) with appropriate medical		
	technology, equipment, and supplies.		
	The Aseptic Room and the Cytotoxic Room are Clean		
	Rooms for the manufacturing of medications in a sterile		
13.2.8.	environment. The room will contain laminar flow		
	cabinets and/ or isolators for sterile preparation, and		
	must be accessed via an Anteroom.		
13.2.9.	Special air-conditioning systems that provide either		





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13.2.10.	_	oom should have a negative pressure lean room may have a positive pressure.					
Clinica	l Audit Staff	Name	Signati	ure	Date		
Team Lead	er						
Inspection	Member						
Inspection	Member						
Inspection	Member						
Inspection	Member						
Summary o	of Findings and R	ecommendations for the Facility:	<u> </u>				
Date of Next Visit:							
Summary o	Summary of Findings and Recommendations to DHA Management:						





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### **Inpatient Pharmacies**

### References:

- 1- DHA Pharmacy Guideline 2021
- 2- \*DHA Health Facility Guidelines 2019, Part B Health Facility Briefing & Design, 370 -Pharmacy Unit
- 3- \*\* Cabinet Decision no. (47) of 2018 adopting the unified national standards for hospitals

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