



- Electronic copy is controlled under document control procedure. Hard copy is uncontrolled & under responsibility of beholder. • النسخة الإلكترونية هي النسخة المضبوطة وفق إجراء ضبط الوثائق. النسخ الورقية غير مضبوطة وتقع على مسؤولية حاملها.
- It is allowed ONLY to access and keep this document with who issued, who is responsible and to whom it is applicable. • يسمح بالوصول وباحتفاظ بهذه الوثيقة مع مصدرها أو مع المسؤول عن تطبيقها أو مع المطبق عليهم.
- Information security code: • تصنيف امن المعلومات:
 - Open Shared -Confidential Shared-Sensitive Shared-Secret بيانات مفتوحة مشارك -خاص مشارك -حساس مشارك -سري

قائمة التحقق النهائي
Checklist Random
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. **				
3.2.6	Adequate lighting and ventilation for drug preparation and dispensing*				
12.6.4	Secured stores for accountable drugs, refrigerated stores and flammable goods storage**				
12.6.5	Dispatch area for deliveries to inpatient units. **				
18.5.4.	The Person in-charge is a DHA licensed Clinical Pharmacist or Pharmacist.				
5.7.1	Taps to Hand Basins in pharmacies should be either elbow-action taps or automatic taps*				
18.6.4.	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: 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.				
18.6.5.	Narcotic drugs stored outside the pharmacy (medication room) should be placed in a double locked steel cabinet inside a secured medication room.				

ID	Issue#	Issue Date	Effective Date	Revision Date	Page#
MP_0.0.0_F00	01	Jan 01, 2024	Jan 01, 2024	Jan 01, 2027	1/2



14.2.13. b	A secured lockable steel cabinet(s) for Controlled Drugs.				
18.6.7.	The cabinet should be designated by a label and the key(s) must be kept in the custody of the Person in charge or the authorized Deputy in-charge.				
5.7.2	Antiseptic Hand Rubs should be located so they are readily available for use. *				
22.3.4.	Providing an easy access to soap and water or hand sanitizer for staff.				
4.2	Foot operated or other hands-free operated clinical and normal waste bins*				
5.4.1	First aid kit, Fire services and egress/ exit signs will be 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.				
7.2.6.	Pharmacist supervises pharmacy technicians and pharmacy trainees.				
7.3.4.	Pharmacy trainees and Technician shall NOT dispense any Narcotics, Controlled and Semi Controlled medications.				
7.4.1.	Training pharmacists should have a valid DHA license.				
17.3.	Health facilities are authorized to apply for MOHAP nonregistered medicine approval through the issuance of an import permit.				
15.3.1	Medical waste should not be disposed via the routine garbage collection system.				
15.3.2.	All expired/unusable medications, except the Narcotics, needs to be returned to the drug stores from which they were purchased.				
13	MEDICATION PREPARATION, COMPOUNDING AND LABELLING				
13.1.2.	Medication preparation takes place in a clean and safe area.				
13.1.5.	All medications are properly prepared, labeled, checked and recorded.				
13.1.6.	The product label must include all necessary information for appropriate administration and the initials of the persons who prepared and checked the product.				
13.1.7.	The final product may also include any necessary auxiliary labels, storage requirements and expiration date.				
12.7.3.2	The room kept on positive pressure and be accessed via an anteroom. **				

ID	Issue#	Issue Date	Effective Date	Revision Date	Page#
MP_0.0.0_F00	01	Jan 01, 2024	Jan 01, 2024	Jan 01, 2027	2/2



12.7.3.4	Electronic door management system to prevent the opening of both doors in the anteroom at the same time. **				
12.7.3.5	Hand washing settings provided immediate outside the aseptic (clean) rooms in adjoining anteroom; hand basins are not to be located within the aseptic (clean) rooms. **				
12.7.3.6	An intercom system provided between aseptic (clean) rooms and anteroom. **				
13.2.8.	The Aseptic Room and the Cytotoxic Room are Clean Rooms for the manufacturing of medications in a sterile 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 positive pressure or negative pressure will be required in sterile medication preparation.				
13.2.10.	The Cytotoxic room should have a negative pressure while any other clean room may have a positive pressure.				
13.2.18.	Nonessential material (e.g., labels, calculators, excess syringes or needles, pens, pencils, etc.) should not be placed near the preparation/buffering area.				
13.2.35. g	Visual confirmation that compounding personnel are properly wearing appropriate items and types of protective garments, including eye protective and face mask.				
13.2.35. i	Visual inspection to ensure the absence of particulate matter in solutions.				
13.2.36.	Documentation and records should be kept and maintained for all compounded products.				
14.2.	Storage:				
14.2.2.	All Drug Storage Areas is to be fitted with temperature and humidity controls.				
14.2.3.	Medications should be stored within an adequate storage area in the pharmacy, inpatient care units or the nursing station in the clinical unit, if applicable.				
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). • All stored goods and materials are kept off the floor. • Suitable spaces to permit cleaning and inspection. • Pallets are to be kept in a good state of cleanliness and repair.				

ID	Issue#	Issue Date	Effective Date	Revision Date	Page#
MP_0.0.0_F00	01	Jan 01, 2024	Jan 01, 2024	Jan 01, 2027	3/2



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. e	For medications and pharmaceutical products that require storage in a freezer; temperature should not exceed 0 degree 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.				
14.2.8.	Food and drink are not to be stored in the medication refrigerator or in areas for medication storage.				
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 out.				
14.2.11.	A digital thermometer is required to be available in the pharmacy, storage area and medication refrigerator to ensure the validity and stability of the products.				
14.2.12.	Temperature and humidity monitoring charts readings should be logged on a separate sheet at least twice daily.				
14.2.15	Expiry/Recall:				
14.3.6.	Any medication with an unknown expiration date may be treated as an expired medication and disposed.				
14.3.7.	All expired and outdated medications have to be collected, labeled clearly as expired or outdated, and isolated from usable stock in a designated area in the pharmacy. Refer to the DHA policy for Medications Disposal and Waste Management.				
14.4.5.	All recalled batch medications have to be returned to the drug stores from which they were purchased.				
18	NARCOTIC, CONTROLLED AND SEMI CONTROLLED DRUGS				
18.3.2.	Health facilities conduct regular educational and training for Health Professional (HP) regarding handling and dispensing of Narcotics, CD and SCD to ensure quality of handling and practice.				
18.4.1.	Assign an appropriately qualified and trained DHA licensed healthcare professional (Anesthesiologist, Clinical Pharmacist or Pharmacist)				

ID	Issue#	Issue Date	Effective Date	Revision Date	Page#
MP_0.0.0_F00	01	Jan 01, 2024	Jan 01, 2024	Jan 01, 2027	4/2



18.4.2.	An experienced licensed nurse(s) (head or in-charge nurse) should be responsible for the Narcotics, CD and SCD in the health facility's medication rooms e.g. in-patient units, emergency room.				
18.4.4.	The Person in-charge for each setting is set out below: • In Hospital/Inpatient pharmacy: DHA licensed Clinical Pharmacist or Pharmacist. • In Day Surgical Centers (DSC) /Ambulatory pharmacies: DHA licensed Clinical Pharmacist, Pharmacist, or Anesthesiologist.				
18.4.6.	The Narcotics, CDs and SCDs In-Charge seeking annual leave/emergency leave resignation or others are expected to notify HRS using Narcotics, CDs and SCDs Stock				
18.6.4.	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: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.				
18.6.5.	Narcotic drugs stored outside the pharmacy (medication room) should be placed in a double locked steel cabinet inside a secured medication room.				
18.6.6.	CD and SCD register book should be stored in separate cabinet in a special secured lockable cabinet made of steel with a single locking system.				
18.6.7.	The cabinet should be designated by a label and the key(s) must be kept in the custody of the Person in-charge or the authorized Deputy in-charge.				
18.7.2.	If the physician or dentist prescribe Narcotics, CD and SCD for incompetent patients, dispensing shall be limited to the patient's parents or legal guardian.				
18.7.3. d	Each Narcotic dose shall be prescribed on a separate prescription (for Inpatient Units).				
18.7.3. e	Refill prescriptions for Narcotics is prohibited.				
18.8.1. b	After administration of the Narcotic drug, the dose should be recorded and signed by DHA licensed treating physician and another member of clinical staff in the Narcotic prescription form. The form shall be stamped and filled completely.				
18.8.1.c	All dispensed quantities in the pharmacy needs to be recorded in the Narcotic register book by the Person in charge, and the authorized personnel in the inpatient units/clinical areas.				
18.8.1.d	Each entry into the Narcotics register book must be accurate, legible, with clear handwriting and includes the prescription number and patient name and their health record number.				

ID	Issue#	Issue Date	Effective Date	Revision Date	Page#
MP_0.0.0_F00	01	Jan 01, 2024	Jan 01, 2024	Jan 01, 2027	5/2



18.8.1.e	In the inpatient units and other clinical areas, the Narcotic nurse in-charge shall dispense Narcotics to the patient through a formal Narcotic prescription.				
18.8.1.f	In the pharmacy, the Pharmacist in-charge shall reconcile the Narcotic order with the Narcotic prescription and check the authorized personnel signature prior to dispensing the drug.				
18.8.1.h	The validity of the Narcotic drug prescription shall not be more than three (3) days from the date of issuing the prescription by the treating physician.				
18.8.1.k	Discarding all unused Narcotic shall be recorded and signed on the Narcotic prescription form and counter-signed by a witness on the same day.				
18.8.1.n	The dose shall be recorded in the Narcotics register book.				
18.8.2.c	Pharmacist shall retain all the Electronic prescription records in the health facility for a minimum of five (5) years.				
18.8.2. d	All dispensed quantities of CD shall be recorded in the CD register book by the Person in-charge.				
18.8.3.c	SCD Electronic prescriptions shall be retained in the health facility for a minimum of two (2) years.				
18.8.3.d	The dispensed drugs shall be recorded in the SCD register book by the Person in-charge.				
18.9.3.	Narcotics, CD and SCD register books shall be used only by the authorized persons.				
18.9.4.	Entries into the register books should be maintained as per applicable UAE laws and regulations				
18.9.5.	The Narcotic, CD and SCD register books should be stored in the health facility for five (5) years after completion.				
18.11.3.	Any drug discrepancies are to be reported to HRS as an incident using the Drug Incident Report Form				
18.13.1.	All inpatient units and clinical areas within the Hospital setting shall return any expired/damaged/unusable stock of Narcotic, CD and SCD to the hospital pharmacy.				

ID	Issue#	Issue Date	Effective Date	Revision Date	Page#
MP_0.0.0_F00	01	Jan 01, 2024	Jan 01, 2024	Jan 01, 2027	6/2



قائمة التحقق النهائي

Checklist Random

Inpatient Pharmacies

Clinical Audit Staff	Name	Signature Date	Date
Team Leader			
Inspection Member			
Summary of Findings and Recommendations for the Facility:			
Date of Next Visit:			
Summary of Findings and Recommendations to DHA Management:			

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.

ID	Issue#	Issue Date	Effective Date	Revision Date	Page#
MP_0.0.0_F00	01	Jan 01, 2024	Jan 01, 2024	Jan 01, 2027	7/2