

	<b>INODAYA Hospitals - Kakinada</b>		Documentation code: <b>INH/MOM.Doc.No:03</b>
	<b>Policy On Medications procure when pharmacy is closed and incase of stock outs</b>		Prepared date: 11/11/2025
	Reference: MOM.01.d.NABH Standards – 6 <sup>th</sup> Edition		Issue Date: 11/11/2025
	Issue no: 01	Review No: 0	Review date: 10/11/2026

### 1. Purpose

To ensure safe, timely, and uninterrupted access to essential medications for patient care when the pharmacy department is closed or when medications are temporarily unavailable due to stock-outs.

- OP Pharmacy -24/7
- IP pharmacy 24/7

### 2. Scope

This policy applies to all clinical staff, nursing staff, on-call pharmacists, and administrators involved in medication management within the facility.

### 3. Definitions

- **After-hours pharmacy closure:** Periods when the pharmacy is not physically staffed.
- **Stock-out:** A situation where a required medication is unavailable in pharmacy inventory.
- **Emergency medication:** Medications necessary for urgent or life-saving treatment.

### 4. Policy Statements

#### 4.1 After-Hours Medication Access

1. IP and OP pharmacy will be open 24/7.
2. Formulary has been maintained by the Pharmacy, In case of stock out slip will be raised and local purchase

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Mr.Naresh	Dr.Gowtham Krishna	Mrs.Lakshmi Lavanya
Incharge - Pharmacy	Medical Director	Chief Executive Officer

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#### 4.2 Use of Emergency Drug Kits

1. Emergency kits (e.g., crash carts, anesthesia kits) may be accessed without prior authorization during life-threatening situations.
2. All items used must be documented and the pharmacy notified to restock within 24 hours.

#### 4.3 Medication Procurement During Stock-Outs

1. The pharmacy shall notify clinical areas immediately upon identifying a stock-out or low-stock risk.
2. If the stock-out occurs during pharmacy working hours:
  - Pharmacist must suggest **therapeutic alternatives** compliant with facility protocols.
  - Prescribing clinician must approve any substitution.
3. If the stock-out occurs after hours:
  - Charge nurse or on-call clinical leader must contact the **on-call pharmacist**.
  - The on-call pharmacist may:
    - Recommend an approved alternative,
    - Authorize procurement from neighboring facilities (if part of mutual aid agreements), or
    - Advise use of the after-hours cabinet if available.

#### 4.4 Borrowing Medications from Other Facilities

If permitted by regional policies:

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1. Borrowing can only occur during urgent clinical need.
2. Documentation must include:
  - Medication name, strength, and quantity borrowed,
  - Facility borrowed from,
  - Reason for borrowing,
  - Date and staff member involved.
3. Items must be replaced as soon as stock becomes available.

## 4.5 Documentation Requirements

All medication retrievals outside routine pharmacy dispensing must be documented in:

- Patient's medication chart,
- Pharmacy discrepancy or variance report (if applicable),
- Stock-out notification form.

Failure to document appropriately is a policy violation.

## 4.6 Safety and Accountability Measures

1. Monthly audits will be conducted to ensure compliance.
2. Any discrepancies, misuse, or missing medications must be reported immediately to pharmacy management and administration.

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