



INODAYA Hospitals - Kakinada

Documentation code:

INH/MOM.Doc.No:15

Policy on Management of Administration

Prepared date: 11/11/2025

Reference: MOM.5d.NABH Standards – 6th Edition

Issue Date:11/11/2025

Issue no: 01

Review No: 0

Review date: 10/11/2026

1.0 Purpose:

To delineate policy for planning and providing uniform, patient specific care, in the areas of medication management and usage.

2.0 Scope:

This policy and procedure is applicable to all medications administered to patients by authorized personnel at INODAYA Hospitals, Kakinada.

3.0 DEFINITIONS:

Medication - Any prescription medications; pharmaceutical formulations; vitamins; nutraceuticals; over – the – counter drugs; vaccines; diagnostic and contrast agents used on or administered to persons to diagnose, treat, or prevent disease or other abnormal conditions; radioactive medications; respiratory therapy treatments; parenteral nutrition; blood derivatives; and intravenous solutions (plain, with electrolytes and / or drugs).

Attending Consultant - Consultant who is responsible for care of a patient for every treatment / care given during hospitalization.

4.0 Responsibilities:

Attending Physician or his / her team member, Duty Medical Officer (DMO) are responsible to prescribe / write the medications (to be administered to patients) in Medication Chart of Inpatient Record.

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| Mr.Naresh | Dr.Gowtham Krishna | Mrs.Lakshmi Lavanya |
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Duty Medical Officer (DMO) and nurses are responsible to receive / accept Verbal and telephonic orders from attending physician or his / her team member and to read back medication orders to ensure accuracy of information communicated.

Ward Pharmacist / Nurses are responsible to indent and receive medications from IP Pharmacy as per doctor's medication order and to provide education on medication to patient or patient's family and to document the same in Inpatient Record.

5.0 Policy:

Medications are administered to patients by qualified personnel in compliance with applicable laws and standards of professional practice.

To administer Right Medication of Right Dose to the Right Patient at Right Route and Right Time with Right Documentation.

Self administration of medications by patients is prohibited at **Inodaya Hospital**. All medications are to be administered by authorized personnel only.

No medication is allowed to be brought from outside the Hospital except for financial reasons and patients on long standing medication for diseases like Hypertension / Diabetes Mellitus etc. If allowed clearance to be obtained from Billing department and Treating doctor and appropriate entry to be made in the Inpatient record.

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6.0 PROCEDURE

6.1 Authorized Personnel

6.1.1 Attending Physician or his / her team member, DMO and Nurses are authorized to administer Medications to patients.

6.2 Labeling Of Medications

6.2.1 Medications should be labeled for the following conditions,

- Any time, one or more medications are prepared but are not administered immediately; the medication container must be appropriately labeled.
- Note: The medication container can be any storage device such as a plastic bag, syringe, bottle, or box which can be labeled and secured in such a way that it can be readily determined that the contents are intact and have not expired.
- All medications, medication containers (e.g. syringes, medicine cups, basins), or other solutions on and off the sterile field and other procedural settings must be labeled.
- Labeling should be done when any medication or solution is transferred from the original packaging to another container.

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- At shift change or break relief, all medications and solutions both on and off the sterile field and their labels are reviewed by entering and exiting personnel.
- Any medication or solution found unlabeled is immediately discarded.
- Original containers of medications or solutions remain available for reference in the operative or procedure area until the conclusion of the procedure. All labeled containers on the sterile field are discarded at the conclusion of the procedure.
- All labels are verified both verbally and visually. Not more than one medication or solution is labeled at one time.
- At a minimum, all medication are labeled with:- Drug name, Strength and Amount (if not apparent from the container)
- Expiration date when not used in 24 hours.
- For all compounded IV admixtures and parenteral nutrition solutions, the date prepared and the diluents.

6.3 Patient Identification

- 6.3.1 Always cross check the Patient identification with minimum of 'TWO IDENTIFIERS' – Patient Name (with initials) and IP number /UHID throughout Hospitalization.

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6.3.2 Call the patient by name (if hearing impaired) or confirm with the attender or senior staff.

6.3.3 Identify the patient through the staff who has accurate knowledge of the patient's identity. (When necessary)

6.4 Preparation Of Medication

6.4.1 Check for allergies and confirm that the patient is not allergic to the medication to be administered.

6.4.2 Wash hands prior to preparing medications

6.4.3 Prepare medications in a clean, uncluttered, well-lit area

6.4.4 Read doctor's order clearly.

6.4.5 If order is not clear, confirm with DMO/Sr. Nurse / Sis. Incharge / Nursing Supervisor.

6.4.6 Check with pharmacy whether medicine is available or not.

6.4.7 If same brand is not available, check with doctor whether to give alternative brand or not.

6.4.8 Check for Dose, Route, Frequency and Doctor Signature.

6.4.9 Incompatible medications are not to be mixed.

6.5 Verification - Implement **the "Six Rights"** of medication administration. Assess for:

6.5.1 Right 'PATIENT'

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6.5.2 Right 'MEDICATION'

6.5.3 Right 'DOSE'

6.5.4 Right 'ROUTE'

6.5.5 Right 'TIME' and 'FREQUENCY'

6.5.6 Right 'Documentation'

6.6 Medication Administration

6.6.1 Medications are only administered by the authorized personnel (Doctor / Nurse) who have prepared them. All Medications are to be administered within the time period as follows,

6.6.2 Time within one hour prior to the prescribed time (or)

6.6.2.1 Within one hour after the prescribed time. (e.g. If doctor has ordered to administered a drug at 12:00 pm, it should be administered between 11:00 am and 1:00 pm)

6.6.3 Provide privacy to patient as necessary or when indicated.

6.6.4 Wear personal protective equipment when there is potential exposure to blood, body fluids, chemotherapeutic agents etc.,

6.6.5 Observe the patient to ensure that the patient swallows the medication following oral administration.

6.7 Documentation of Medication Administration

6.7.1 Write the time of drug administered and sign in the specified column (Refer Medication Chart and SOS / STAT Medication)

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