



## INODAYA Hospitals - Kakinada

Documentation code:

INH/MOM.Doc.No23

**Policy on Patient's own medications brought from outside the organization**

**Prepared date:** 11/11/2025

**Reference:** MOM.7K.NABH Standards –6<sup>th</sup> Edition

**Issue Date:** 11/11/2025

**Issue no:** 02

**Review No:** 1

**Review date:** 10/11/2026

### 1.0 POLICY:

Inodaya Hospital permits the use of patient-owned medications only after they are **verified, identified, documented, and approved** by a qualified pharmacist and treating physician. Unapproved medications must not be administered.

### 2.0 Purpose

To ensure safe, appropriate, and standardized management of medications that patients bring from home or outside sources, thereby minimizing medication errors and ensuring compliance with hospital medication management systems.

### 3.0 Scope

This policy applies to:

- All inpatients, day-care patients, and emergency patients of Inodaya Hospital
- All clinical staff, including doctors, nurses, and pharmacists
- Admission, emergency, and pharmacy departments

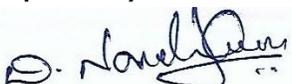
### 4.0 Definitions

- **Patient's Own Medications (POM):** Any medication (prescription, OTC, herbal, supplements) brought by a patient at the time of admission or during hospital stay.
- **Use of POM:** Allowing the patient to consume their own medicine ONLY after formal verification and approval by authorized hospital staff.

### 5.0 PROCEDURE:

Initial Screening at Admission

- At the time of admission, the admitting nurse shall:

<b>Prepared by:</b> 	<b>Verified by:</b> 	<b>Approved by :</b> 
Mr.Naresh	Dr.Gowtham Krishna	Mrs.Lakshmi Lavanya
Incharge - Pharmacy	Medical Director	Chief Executive Officer



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- Ask whether the patient has brought any medications.
- Collect and list all medications on the Medication Reconciliation Form.
- Label medications with the patient's name, UHID, and admission number.
- Send medications to the hospital pharmacy for verification

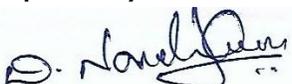
The treating physician must review the pharmacist-verified medication list and decide whether to continue or discontinue use of patients' own medications.

The physician documents the decision in:

- The medication chart, and
- The patient's medical record

Only after BOTH pharmacist verification and physician approval may the medication be administered.

1. Medicines brought from outside the organization are not accepted in the hospital
2. Patients own medications brought in by the patients who are on therapy for chronic disease condition (e.g. Hypertension, Diabetes mellitus, Cancer, TB) shall not be used in the hospital, however reconciliation by the primary consultant through medication reconciliation process in the admission record shall be done
3. Own medications and related formulation shall be reconciled in the prescription orders of the physician and medications ordered through the in-house pharmacy process.
4. Self administration of medication is not allowed in the hospital.
5. The patient shall disclose to his/ her physician the medications being taken by him before the treatment started.

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6. All medications shall be prescribed by the Physician in written and obtained from the hospital pharmacy requisition made by doctor/ nurse.
7. The nurse in charge shall administer the medication to the patient after consulting with the Senior Consultant / Consultant's note.
8. If required, the Senior Consultant / Consultant shall prescribe medications to the patients during discharge. The patient shall be educated on self-administration of medicine during discharge.
9. Patients shall be counseled and trained for self-administration of medications such as insulin before they are discharged from the hospital

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Medical Director

**Approved by :**

Mrs.Lakshmi Lavanya

Chief Executive Officer