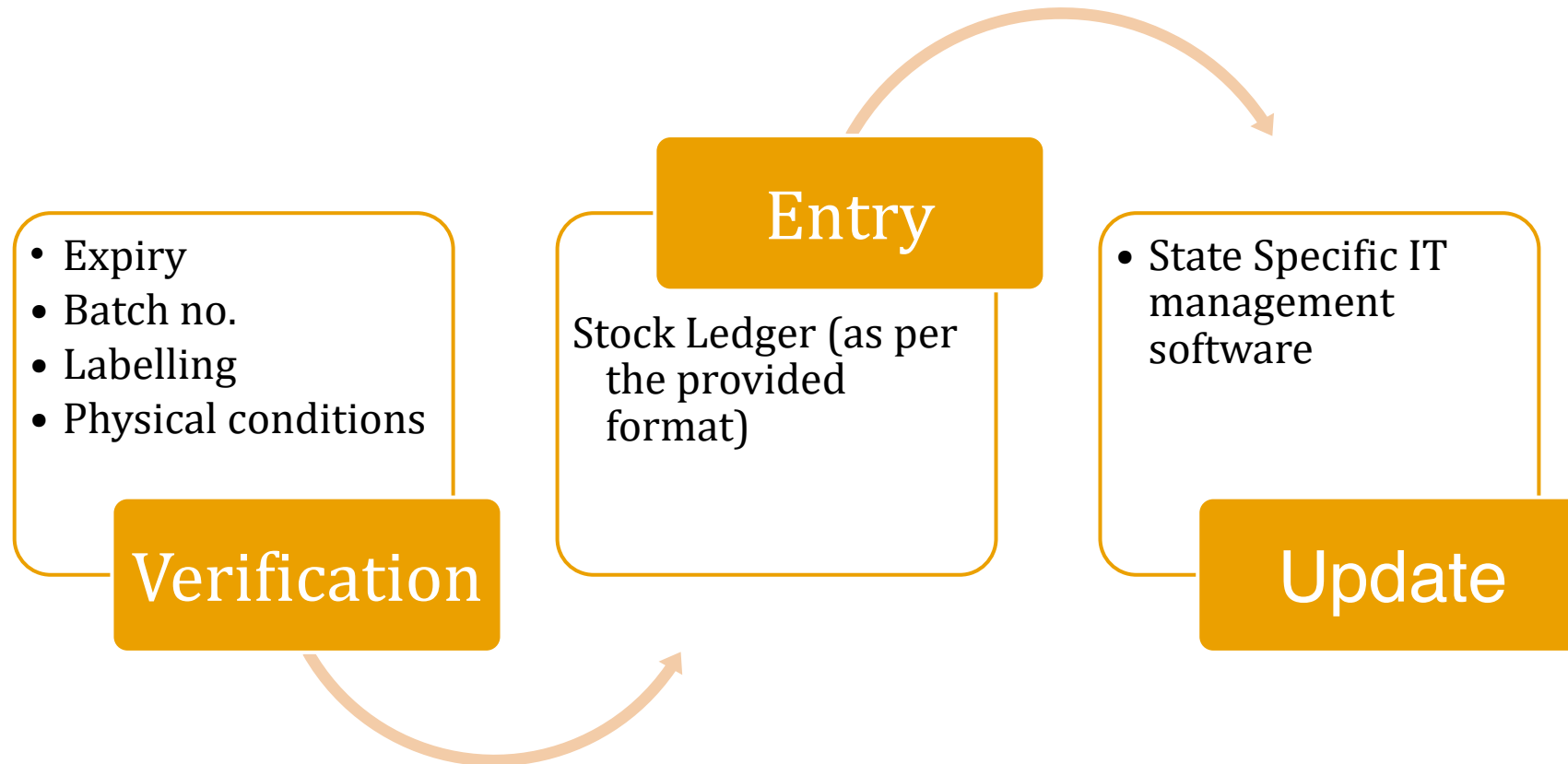




Receiving of Medicines

- Activities to be conducted after Receipt of Medicines:



Storage Requirements at AAM



Temperature Specific
Storage Requirements



Physical Storage
Requirements



Storage of Pediatric
Medication



Management of LASA
Drugs

Introduction: Safe Medication Practices and Safe Dispensing

- Medication errors are a leading cause of patient harm globally. WHO launched the Global Patient Safety Challenge: Medication Without Harm, with the objective of preventing severe medication related patient harm.
- Look-alike, Sound alike errors

Location in the Name	Letters	Example of Medicines
Beginning	AM	Amlodipine, Amiodarone, Amitriptyline
	AZ	Azathioprine, Azithromycin
Middle	gaba	Pregabalin, Gabapentin
End	azole	Metronidazole, omeprazole



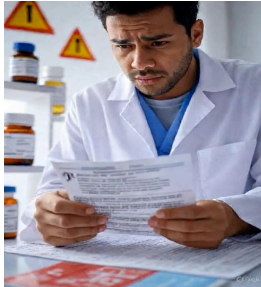
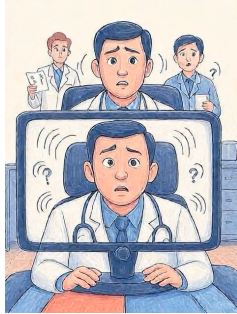
Ciprofloxacin, levofloxacin (antibiotics) and several other medicines with similar appearance kept for dispensing

Stages of Medication use at which LASA errors can occur

1. Prescription:



2. Transcribing or Documenting:



3. Distribution errors:

- Selection of products according to where they are stored or according to the packaging rather than the name and strength of the product
- Storage of LASA medicines on the same shelf next to each other

4. Administering

5. Monitoring

Clinical Impact of LASA errors on Vulnerable Populations:

Toxicity

ADR

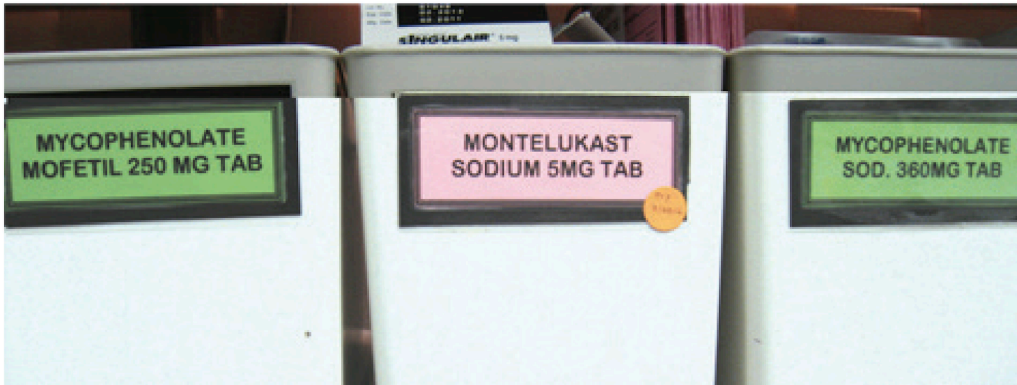
Extended illness

Vulnerable Populations:



Strategies for Storage and Usage of LASA

Established name	Recommended "tall man" lettering
Acetohexamide Acetazolamide	acetoHEXAMIDE acetaZOLAMIDE
Bupropion Buspirone	buPROPion busPIRone
Chlorpromazine Chlorpropamide	chlorproMAZINE chlorproPAMIDE



- Creating and updating list of LASA medicines
- Widescale IEC of LASA list and Concept for improving Awareness
- Tall man lettering
- Clear Labelling, Segregating and Storage as per color coding
- Training of Health care workers
- Report Medication error incidents to strengthen and improve current system.

Storage and Temperature

Recommended limits for descriptive storage conditions		
Sl. No.	Label description	Recommended limits
1	Store at controlled room temperature/ room temperature	15 to 25 °C
2	Store in a cold or cool place	8 to 15 °C
3	Store in a refrigerator	5 ± 3 °C
4	Store in a freezer/ frozen	-20 ± 5 °C
5	Store in deep freezer	-70 ± 10 °C
6	Store in a dry place	No more than 60% relative humidity
7	Protect from moisture	No more than 60% relative humidity
8	Store under ambient conditions	Store in well-ventilated premises at temperatures of between 15 °C and 30 °C and no more than 60% relative humidity. Extraneous odours, other indications of contamination and intense light must be excluded.
9	Protect from light	To be maintained in the original manufacturer's light-resistant containers.

Periodic Checking Of Temperature And Humidity



Cleaning Of Refrigerators And Defrosting



Storage And Dispensing Of Narcotic And Psychotropic Drugs



Drugs must be stored under double lock and key in a secure area accessible only to authorized staff.



Dispensing requires a proper prescription from a Registered Medical Practitioner, and only selected, registered patients may receive these drugs.



Each prescription must contain specific details, and only one narcotic per prescription is allowed; triplicate prescription pads are used as per regulations.



Prescriptions must be legible, current, and not modified; multiple narcotic drugs require separate prescriptions

Narcotic & Psychotropic Medicines

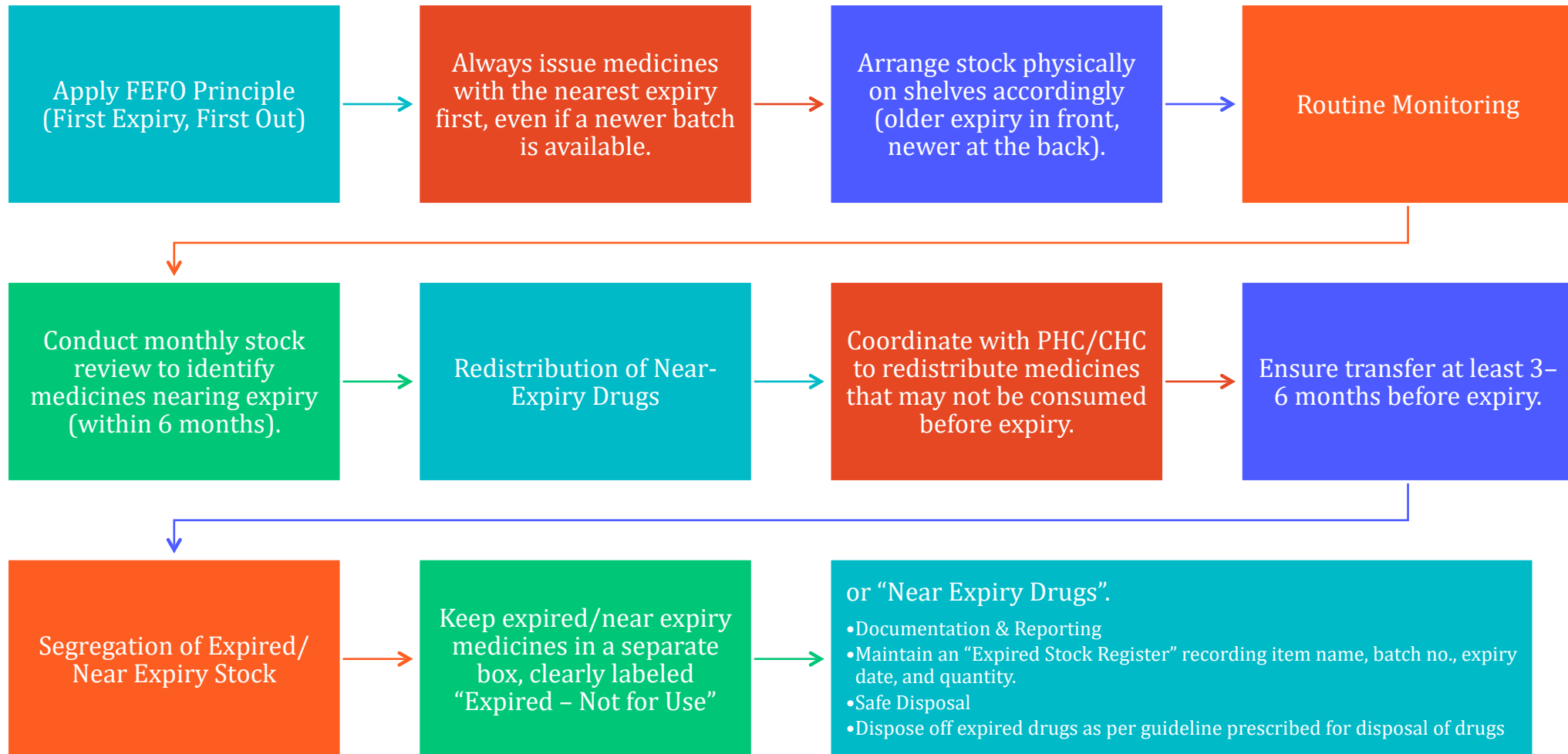
A narcotic drug is typically a substance that induces sleep, reduces pain, or dulls the senses and is often associated with opiates like opium, morphine, and heroin, though legal definitions sometimes include other drugs like cannabis and cocaine as well.

E.g., Opium, Morphine, Heroin, Codeine, Methadone.

A psychotropic drug refers to compounds that alter the mind or behavior, including those that affect perception, consciousness, cognition, or mood, such as LSD, MDMA (Ecstasy), barbiturates, amphetamines, and designer drugs.

E.g., Fluoxetine, Risperidone, Diazepam, Lithium, Adderall, LSD

Expiry/Near Expiry Stock Management



Medicine Distribution

Medicines distribution should be in accordance with operational guidelines and relevant program divisions.



Strip Cutting and Medicine Handling

While cutting the strips consider maintaining the readability of following

- Name
- Expiry details
- Batch No.

While handing the Medicines to the Patients, ensure the following

- Hand out medicines in Paper bags
- Label the instructions on how to take medicines on the paper bag and mark on strips as well.

Patient Counselling

Patient History
and Social
History

Explaining the
use of each
medicines

Explaining how
and when to
consume each
medicine

Counsel and
segregate LASA
medicines (if
applicable)

Brief and Caution
about ADRs

Adverse Drug Reaction Identification and Reporting

Unintended, harmful reactions to medicines (known as adverse drug reactions)
Adverse Event: Any harmful occurrence during treatment

The majority of adverse drug reactions (ADR) are preventable

Causality: The relationship between the drug and the event

Severity: The intensity of the ADR

ADR reporting form

1. PATIENT INFORMATION

Age

Sex

2. INCIDENT TIME

3. INCIDENT LOCATION

4. AGENT(S) INVOLVED

(Suspected) cause?

Contributing factor?

Mitigating factor?

5. INCIDENT TYPE

6. INCIDENT OUTCOME(S)

7. RESULTING ACTION(S)

8. REPORTER'S ROLE