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Medication Management & Pharmacy

Sr. No.	Objective Element	Requirements	Yes	No
1	MOM.1.a	Is there written guidance for pharmacy services and medication usage (Pharmacy Manual)?		
2	MOM.1.a	Is the Pharmacy Manual updated and available to relevant staff?		
3	MOM.1.b	Is the hospital formulary reviewed annually?		
4	MOM.1.b	Is the approved formulary available to prescribing clinicians?		
5	MOM.2.a	Are medications stored as per manufacturer's instructions?		
6	MOM.2.a	Are temperature-sensitive medications/vaccines stored with temperature monitoring records maintained?		
7	MOM.2.a	Is access to medication storage areas restricted to authorized personnel?		
8	MOM.2.a	Are medication carts/trolleys secured appropriately?		
9	MOM.2.a	Are expired medications identified, segregated, and prevented from use?		
10	MOM.2.a	Are medication inventory/stock audits conducted at defined intervals?		
11	MOM.2.b	Is there a defined list of high-risk medications?		
12	MOM.2.b	Is there a defined list of LASA (Look-Alike Sound-Alike) medications?		
13	MOM.2.b	Are LASA and high-risk medications stored safely with appropriate segregation and identification?		
14	MOM.2.d	Is there a defined list of emergency medications standardized across the hospital?		
15	MOM.2.d	Are department-specific emergency drug lists available where applicable (e.g., ICU, ER, Cath Lab)?		
16	MOM.2.d	Are crash carts/emergency medications standardized and checked routinely?		
17	MOM.2.d	Are emergency medications stored separately and readily accessible?		
18	MOM.3.a,b,c	Is there a defined list of authorized personnel permitted to prescribe medications?		
19	MOM.3.a,b,c	Are medication prescriptions documented in a uniform location in medical records?		
20	MOM.3.a,b,c	Do prescriptions include patient identifiers, drug name, dose, strength, duration, quantity, and instructions for use?		
21	MOM.3.a,b,c	Are drug allergies/food allergies documented in the medical record?		
22	MOM.3.d	Is there an approved list of abbreviations for medication orders?		
23	MOM.3.d	Are verbal medication orders implemented as per defined policy?		
24	MOM.3.d	Is medication order documentation compliant with defined requirements?		
25	MOM.3.e	Is there a defined medication reconciliation process?		
26	MOM.3.e	Is medication reconciliation documented during patient transfer within the hospital?		
27	MOM.3.f	Are prescription/medication audits conducted at defined intervals?		
28	MOM.4.a	Are high-risk medications verified prior to dispensing/administration?		
29	MOM.4.b	Are dispensed medications appropriately labelled?		
30	MOM.4.b	Do labels on cut strips/reconstituted drugs include drug name, strength, dosage instructions, and expiry date?		
31	MOM.4.b	Is technology (e.g., barcode/QR code) used for medication identification, where applicable?		
32	MOM.5.a	Is there a defined list of personnel authorized to administer medications?		
33	MOM.5.b	Are at least two patient identifiers used prior to medication administration?		
34	MOM.5.b	Are high-risk medications independently verified before administration?		
35	MOM.5.c	Are prepared medications appropriately labelled in areas such as OT/Chemotherapy?		
36	MOM.5.d	Are measures implemented to prevent tubing misconnections?		

37	MOM.5.d	Are staff aware of tubing misconnection prevention practices?
38	MOM.5.e	Are medication administration records maintained with complete documentation?
39	MOM.5.f	Are patients monitored for medication effects and adverse events after administration?
40	MOM.5.g	Are ADR (Adverse Drug Reaction) forms and records maintained?
41	MOM.5.g	Are RCA and CAPA conducted for adverse drug reactions, where applicable?
42	MOM.6.a	Is there written guidance for safe handling and use of narcotic and chemotherapeutic drugs?
43	MOM.6.b	Are narcotic medications stored securely with restricted access?
44	MOM.6.b	Are only authorized personnel permitted to prescribe/administer narcotic or chemotherapeutic drugs?
45	MOM.6.c	Are narcotic/chemotherapeutic/radiopharmaceutical drugs prepared and administered by qualified personnel?
46	MOM.6.c	Is a biosafety cabinet available and used for preparation of chemotherapy drugs, where applicable?
47	MOM.6.d	Are records maintained for narcotic inventory, administration, wastage, and disposal?
48	MOM.6.d	Is disposal of narcotic drugs carried out as per statutory requirements?
49	MOM.7.a	Is there a defined implant management policy?
50	MOM.7.b	Are counselling records related to implant usage and precautions maintained?
51	MOM.7.c	Are implant batch/serial numbers documented in patient records, discharge summary, and implant log?

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