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In-Patient Wards Checklist

Sr. No.	Objective Element	Requirements	Yes	No
1	IMS.2.a	Is UHID used consistently in ward medical records?		
2	IMS.2.b	Are ward medical records complete, up-to-date, and maintained in chronological order?		
3	IMS.2.c	Is every medical record entry signed, named, dated, and timed by authorized personnel?		
4	AAC.3.a	Is initial assessment conducted by a qualified person in a standardized manner within defined time frame?		
5	AAC.3.b	Is an individualized documented care plan available for each patient?		
6	AAC.4.b	Are patients reassessed regularly with documentation?		
7	AAC.4.c	Are early warning signs defined, monitored, and documented?		
8	AAC.4.d	Is standardized handover communication and referral process implemented and documented?		
9	AAC.7.b-d	Is discharge summary prepared and provided as per defined requirements?		
10	COP.1.b	Are nursing SOPs available and nursing care documented appropriately?		
11	COP.1.f	Is blood transfusion administered safely with monitoring and rational use documented?		
12	COP.1.g	Is informed consent obtained prior to blood transfusion?		
13	COP.2.c	Are CPR protocols implemented with availability of functional resuscitation equipment?		
14	COP.9.a	Are vulnerable patients identified and managed appropriately?		
15	COP.9.b	Are fall risk, pressure ulcer risk, DVT risk, and restraint assessments conducted and documented?		
16	COP.10.a	Is pain assessment and management documented?		
17	COP.10.c	Is nutritional risk assessment conducted and documented?		
18	MOM.2.a	Are medications stored safely in ward areas as per manufacturer's instructions?		
19	MOM.2.d	Are emergency medicines available at all times in wards?		
20	MOM.3.b	Do medication prescriptions meet minimum defined requirements?		
21	MOM.3.c	Are drug allergies ascertained and documented?		
22	MOM.3.d	Are verbal orders implemented and documented as per policy?		
23	MOM.3.e	Is medication reconciliation conducted during patient transfers?		
24	MOM.4.a	Are high-risk medications identified and independently verified?		
25	MOM.5.b	Are medication orders verified before administration using at least two patient identifiers?		
26	MOM.5.d	Are measures implemented to prevent catheter/tubing misconnections?		
27	MOM.5.e	Is medication administration documented appropriately?		
28	MOM.5.f	Are patients monitored after medication administration with documentation?		
29	MOM.5.g	Are adverse drug events analysed with RCA and CAPA documented?		
30	MOM.6.a-d	Are narcotic drugs stored, administered, and recorded as per policy?		
31	PRE.1.c	Are patient dignity and privacy maintained in wards?		
32	PRE.1.d	Are patients protected from neglect or abuse?		
33	PRE.1.g	Is informed consent obtained for high-risk procedures/investigations/treatment?		
34	PRE.2.d	Is counselling provided and documented for patients/families?		

35	IPC.1.b	Are hand hygiene facilities and PPE available and adhered to?
36	IPC.1.f	Is infection surveillance conducted including monitoring of hand hygiene compliance?
37	IPC.2.a	Is biomedical waste segregated and handled as per BMW Rules?
38	IPC.2.c	Are cleaning and disinfection protocols implemented in ward areas?
39	IPC.2.e	Is linen management process implemented as per policy?
40	PSQ.2.a	Are infection indicators such as CAUTI, CLABSI, and SSI monitored?
41	FMS.1.a	Are patient safety devices available in ward areas?
42	FMS.4.c	Are fire exit plans displayed and emergency preparedness ensured in wards?

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