



HEB

Journal of Hospital Pharmacy An Official Publication of Bureau for Health & Education Status Upliftment (Constitutionally Entitled As Health-Education, Bureau)

JOHP

A Prospective Study on Prescription Audit in Tertiary Care Teaching Hospital in Kolkata

Dr Arpan Dutta Roy¹, Dr Sayantan Ghosh², Dr Subhrojyoti Bhowmick³, Dr Prolay Paul⁴, Dr Mohammed Zuber⁵, Dr SujoyRanjan Deb⁶, &Dr. Debkishore Gupta⁷

¹Chief Clinical Pharmacologist, NABH Assessor (QCI) HOPE, Ruby General Hospital, Kolkata
²Pharm D Intern, Department of Pharmacy Practice, SAC College of Pharmacy, Karnataka
³Clinical Director, NABH Assessor (QCI), Peerless Hospital, Kolkata
⁴Pharm D Intern, Department of Pharmacy Practice, SAC College of Pharmacy, Karnataka
⁵Pharm D Intern, Department of Pharmacy Practice, SAC College of Pharmacy, Karnataka
⁶Dy. Medical Director, Ruby General Hospital, Kolkata
⁷MBBS, MD, PGDipID, PDF(USA), FCMID(Netherlands), Consultant & Head- ClinicalMicrobiology & Infectious Diseases.
Head- Infection Prevention & Control, Ruby General Hospital, Faculty, DNB Microbiology

Assessor-NABL,NABH,WHO Patient Safety

Email Id: editorjohp@gmail.com

ABSTRACT

Introduction: Prescription audit is a quality improvement process that will ensure and improve patient care. The primary focus is always to provide optimal therapeutic effect by maintaining patient's safety and improve the quality of life⁸. India has established the National institute of patient safety (NIPS) role of "Registration of Doctors and Regulating medical education", and to "Protect patients and Guiding Doctors"³. Medical Audit is defined as a process with the aim of making improvements in patient care and proper use of resources.

Methodology:

It was a prospective observational study, conducted in a tertiary care teaching hospital of east India, from the period of April 2019 to June 2019. A total number of 240 patients were included in this study. The sample was taken in randomizedmanner from admitted patients except OPD patients. Data collection was performed according to hospital regulations after getting approval from hospital ethics committee. Data was randomly collected by daily auditing of in patients medication cards (Prescriptions). A standard checklist was used for the audit process. Each and every parameter audited by compliance and non-compliance level of documentations.

Results:

Out of 240 prescription it was found that maximum number of prescription ie, 96.25% of prescription compliance for age of the patient. It was encountered that all the prescription which was audited has no diet instructions. Only the selected prescriptions included the height and weight, 76.67% and 77.5% respectively. It was also found that non compliance of a vital a vital parameter was quite high, that is documentation of hypersensitivity. Based on the audit it was found that documentation compliance of medicine card is better compare to documentation of ward.

Access this Article Online	Quick Response Code:
Website:http://www.journalofhospitalpharmacy.in	
Received on 22/10/2020	
Accepted on 12/11/2020 © HEB All rights reserved	