1.0 PURPOSE
1.1 The purpose of this guidelines is to ensure proper control of all medications provided by pharmacy department as floor stock in patient care areas, and proper procedure is established for safe and efficient floor stock requisition for nursing units and other concerned departments.

2.0 DEFINITION

2.1 Floor Stock Medications: Are medications stored in the specialized nursing areas based on an approved list, customized accordingly to the urgent need of the unit concerned.

2.2 Types of Floor Stock Medications:
   2.2.1 Controlled medications.
   2.2.2 Regular medications:
      2.2.2.1 Medications used in emergency situations (Stat).
      2.2.2.2 Routinely used medications that do not need pharmacy intervention (PRN).

2.3 P&T Committee: Pharmacy & Therapeutics Committee.

3.0 RESPONSIBILITY

3.1 The Pharmacy Department: Is responsible for
   3.1.1 Determining the appropriate level of floor stock supply in each unit.
   3.1.2 Monthly inspection of floor stock medications.

3.2 Nursing Units: Request floor stock medications according to an approved list and in a scheduled time.

4.0 CROSS REFERENCES POLICY
   4.1 Narcotic and Controlled Drugs.
   4.2 High-Alert Medications.
5.0 POLICY

5.1 The hospital pharmacy ensures that proper steps are followed when requesting, stocking, and using medications in the wards or clinics according to an approved list.

5.2 Each nursing unit should have its approved list, posted on all floor stocks cabinets.

5.3 The number of items and their quantities should be kept at a bare minimum. It is also the responsibility of the individual nursing unit staff to maintain stock levels to minimize wastage.

5.4 The floor stock supply in each unit should not be accessible to patients or visitors.

5.5 A floor stock file with listed medications specific to each nursing unit is available and maintained in the unit dose area that can be used to request approved stock medication.

5.6 Items not included on the floor stock list are not authorized to be issued through floor stock request; it should be requested through the unit-dose dispensing system.

5.7 Any addition or deletion in the floor stock’s list needs approval from the nursing and pharmacy departments.

5.8 High-Alert medications (e.g. concentrated electrolytes) are not allowed as Floor Stocks except in critical care areas (ICU, OR, ED) or as part of Crash Cart medications.

5.9 Floor stock medications should be well separated and properly labeled and stored in locked cabinets under proper storage conditions, in a clean and organized area with proper temperature and light protection.

6.0 PROCEDURE

6.1 The pharmacy department in coordination with physicians and the nursing units in the wards/clinics will develop a list of drugs to be supplied to each ward or clinic as floor stocks.

6.2 The type of medications supplied to the wards or clinics as floor stocks may differ from one ward/clinic to another depending on the services provided, and in limited quantities according to the needs of each service unit.

6.3 The pharmacy department will make available anesthesia reversal agents in operating rooms where moderate or deep sedation is performed, and also make available benzodiazepine and narcotic antagonists in all patient care areas where benzodiazepine and narcotics are stocked.

6.4 Narcotic and Controlled Drugs: Stocks are stored as follows:

6.4.1 All Narcotic and Psychotropic drugs should be stored only in the approved Narcotic Cabinet.

6.4.2 Keys are kept in chain around charge-nurse's neck or in her/his pocket.
6.4.3 Audit the stocks every shift with proper documentation.
6.4.4 Tight control on blank prescriptions.
6.4.5 The nurse should not keep valuables or personal items inside Narcotic cabinets.

6.5 **High-Alert Medications:** Are stocked Only in some critical care areas (ICU, OR, ED) in limited quantities or as part of Crash Cart medications. They must be properly labeled with Red warning stickers “High-Alert” and locked separately away from regular ward medications.

6.6 Nursing units replenish weekly floor stock medications directly from the inpatient pharmacy through a computerized request.

6.7 Drugs requiring refrigeration should be stored in the refrigerator.

6.8 It is the head nurse's responsibility to return all discontinued, patient’s own medications, or left over medications to the inpatient pharmacy and not to be used as floor stock.

6.9 Any expired medications or medications whose expiration date will fall before the time of the next inspection must be removed by the nursing unit and returned to the inpatient pharmacy.

6.10 It is the pharmacy’s responsibility to inspect all nursing care areas on a monthly basis to ensure that all medications are in-date and not over-stocked well separated and properly labeled, and no expired medications are available.

6.11 Furthermore, pharmacy will check antiseptics, disinfectants and all other drugs for external use, and ensure they are stored separately from the internal and injectable drugs.

6.12 The nursing unit shall request large volume solutions (Normal Saline, Dextrose, Ringer Lactate, etc.) directly from the pharmacy store which will be inspected accordingly by the in-patient pharmacy.

6.13 No medications should be stocked on the nursing unit except those approved on the unit’s “Floor Stock list”. All non-approved floor stock medications will be collected during the monthly nursing-unit inspection.

6.1 The inspection report is signed by the Head Nurse and the inspecting Pharmacist. The original copy is kept in the pharmacy and the copy is sent to the nursing unit to correct the deficiencies.

6.14 Floor Stock Update/Deletion request should be done by the Head Nurse of the requesting Floor (or Unit) and signed by the physician (Head of service) for any addition/deletion of the floor stock list. This request should be submitted to and approved by the Head of the Pharmacy Department.
7.0 FORMS

   7.1 Computerized Floor Stock Requisition Form.
   7.2 Nursing-Unit Inspection Guide.

8.0 EQUIPMENT

   8.1 Floor Stock Medications Booklet.

9.0 REFERENCES