



<input type="checkbox"/> ADMINISTRATE POLICY & PROCEDURE (APP)		<input type="checkbox"/> INSTITUTIONAL POLICY & PROCEDURE (IPP) <input type="checkbox"/> INTERDEPARTMENTAL <input type="checkbox"/> INTERNAL	
TITLE		POLICY NUMBER/V#	
Medication Storage Policy		MMC – MED – 03 (01)	
INITIATED DATE	EFFECTIVE DATE	REVISED DATE	
02/08/2025	01/09/2025	01/08/2028	
REPLACES NUMBER		NO. OF PAGES	
N/A		05	
APPLIES TO		RESPONSIBILITY	
Pharmacy, Nursing Staff, Maintenance		Pharmacy, Nursing, Bio-Medical Engineer, Maintenance	

1. PURPOSE

- 1.1 To provide an oversight mechanism for all locations where medications are stored.
- 1.2 To ensure medications are properly and safely stored at
- 1.3 To ensure medications under special categories are properly and safely stored all over

2. DEFINITION

- 2.1 High-Alert Medications:** Medications that bear a heightened risk of causing significant patient harm when they are used in error. Although mistakes may or may not be more common with these medications, the consequences of an error with these medications are clearly more devastating to patients.
- 2.2 Look-Alike Sound-Alike (LASA) Medications:** Medications with generic or proprietary names that look or sound like other medications.
- 2.3 Narcotic medications:** are those agents, which are classified and included in the list of such agents compiled by the World Health Organization (WHO) and recognized by the Saudi Ministry of Health (MOH).
- 2.4 P&TC:** Pharmacy and Therapeutics Committee.



3. POLICY

- 3.1 Medications will be stored in specialized compartments in the medication trolley or secured drawers always when not in use.
- 3.2 Storage areas must be accessible only to designated and authorized personnel.
- 3.3 The proper environmental control (i.e., proper temperature, light, and humidity, conditions of sanitation, ventilation, and segregation) must be maintained wherever medications and supplies are stored in patient care areas.
- 3.4 Medications will be stored in an orderly manner in medication drawers and in carts of sufficient size to prevent crowding or in separate compartments in the drug cabinet.
- 3.5 Medications bearing an expiration date will not be dispensed or distributed beyond the expiration date.
- 3.6 Nearly expired, discolored, damaged, or inappropriately labelled medications shall be returned to drug store/vendor for proper credit and/or disposal. (Refer to: For expired and nearly expired medication P&P)
- 3.7 Head nurse will perform monthly audits of patient care areas to ensure compliance with proper patient safety considerations regarding the storage of pharmaceuticals.

4. PROCEDURE

4.1 Nurse Responsibility:

- 4.1.1 Must observe proper storage and labelling requirements for all medications during performance of their daily tasks.
- 4.1.2 Must demonstrate safety regarding the potency of medications administered as evidenced by:
 - 4.1.2.1 Narcotics & Controlled Drugs: are stored in a double locked cabinet. The key to this cabinet must be with the assigned narcotic nurse always.
 - 4.1.2.2 Removal of expired medications from active stock, returning them to the drug store/vendor.
 - 4.1.2.3 Labelling of all medications prepared for IV administrations with patient's name, date, and time of preparation with employee initials, medication name and dose and solution base.
- 4.1.3 Limiting use of multi-dose containers for single patient use unless reasonably justified. Multiple Dose Vials must be discarded after it is opened when the manufacturer's expiration date is reached (Refer to: Multi Dose Vials P&P). Vials marked as single dose shall be discarded immediately after use.
- 4.1.4 Nitro-glycerine sublingual tablets readily deteriorate once exposed to light, air, and elevated temperatures. Once the bottle has been opened, it should be discarded within thirty days.
- 4.1.5 All drugs, which require light protection while in storage, remain in the original package, in closed drawers, or in a specially wrapped manner until the time of patient administration.
- 4.1.6 High alert medications are identified by special labels.



- 4.1.7** Medications that have the potential for confusion due to look-alike or sound-alike drug names or packaging are identified and treated with extra precautions to prevent error.

4.2 Storage of Medication:

- 4.2.1 All medications are stored in its original containers in well ventilated, air-conditioned areas, protected from sun light and under controlled levels of humidity. Room temperature is maintained between 18 to 25 °C.
- 4.2.2 Medications requiring refrigeration will be stored away from foods in designated "Medication Only" refrigerators.
- 4.2.3 In case thermometer readings show temperature is out of range, the nurse supervisor will report to the Bio - Medical Engineer in case of Medication Refrigerator or to the maintenance department in case of room -air temperature.
- 4.2.4 Temperature is checked, recorded, and signed, on the log sheet, at least twice daily for all medication's refrigerators and freezers.
- 4.2.5 Room Temperature will be monitored once daily for rooms containing medications and record are kept for 3 years.
- 4.2.6 Medications requiring Freezing will be stored in medications freezers maintaining a temperature between - 10 to -20° C while medications requiring refrigeration will be stored in refrigerators maintaining a temperature between 2 to 8 °C.
- 4.2.7 No medication should be left on the floor.
- 4.2.8 Shelved items should not block air vents, fire sprinkler heads, or electrical switches in main store area.
- 4.2.9 First Expiry First out (FEFO) rule to be utilized in issuing all medications all over areas.
- 4.2.10 Look alike sound alike medication in all drug storage areas shall be stored with proper separation to avoid confusion and inadvertent dispensing or administration (Refer to: list of look -alike sound alike medications, Refer to: High Alert and LASA Medication P&P)
- 4.2.11 Expired medications are not allowed to be brought into the medicine storage rooms or refrigerators

4.3 Warehouse: (If available)

- 4.3.1 Only authorized personnel are allowed in the warehouse.
- 4.3.2 The warehouse is closed, and a receiving area is the open one allowing vendors/drug companies to escort their items.
- 4.3.3 Security staff is present during the duty hours of the warehouse
- 4.3.4 Cameras are located inside and outside the warehouse area to with 24 -hour surveillance.



- 4.3.5 All the items in the warehouse are labeled, arranged, and stored as generic alphabetic.
- 4.3.6 The store/warehouse layout is designed in a way to optimize space utilization for efficient receiving, storing and distribution of supplies.
- 4.3.7 All items stored will have their location noted on inventory records.
- 4.3.8 Space is allocated for each item by the amount of inventory required allowing three to four inches between the item and the next shelf.
- 4.3.9 The lower shelves are reserved for heavy items, the middle shelves are for fast moving items for easy access, and the top shelves for overflow items.
- 4.3.10 The walk -in main refrigerator and freezer are maintained properly, temperature log sheets are maintained properly.
- 4.3.11 Expired medication area is well defined with proper sign "Expired Medicine" and separated from other storage areas. Records of returned expired goods to suppliers are maintained. Records of destructed expired & deteriorated items are maintained.
- 4.3.12 Nearly expired items are identified and acknowledged.
- 4.3.13 Monthly inspection of the warehouse is done by head nurse and the pharmacy manager.

4.4 Multi -Dose Vials & Containers:

- 4.4.1 All multi -dose vials should be labeled with the label should contain the following information: Date of opening, Beyond - use date and Initials of the person who opened the vial/container and stored according to the assigned storage requirements (Refer to: Multi Dose Vials P&P).
- 4.4.2 Expired opened multiple dose vial can be discarded in the same unit.
- 4.4.3 Multi dose vials stored according to manufacturer recommendations should be discarded if: suspected or visible contamination occurs or/and found opened and without a revised expiration date based on date opened.

4.5 High Alert Medications:

- 4.5.1 All high alert medications will be labeled with "High alert" auxiliary label. (Refer to: LASA & High Alert Medication P&P).

5. RESOURCES

N/A

6. CROSS REFERENCE

6.1 Medication Management P&P



6.2 Safe prescribing of medications P&P

6.3 Multi Dose Vials P&P

6.4 For expired and nearly expired medication P&P

6.5 High Alert and LASA Medication P&P

7. REFERENCES

7.1 CBAHI National Standards for Ambulatory Care Centers, Effective Jan,2020.

7.2 The Joint Commission International (JCI), 7th Edition, Effective Jan 2021.

8. FORMS & ATTACHMENT

1. Medication Refrigerator Temperature Log
2. Medication Room Air Temperature Log
3. Freezer Temperature Log

APPROVALS & REVIEWS:			
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