

## Medication Provision Audit Form

Facility: \_\_\_\_\_ Apartment: \_\_\_\_\_ Date: \_\_\_\_\_

Inspection Items	S	U	Notes
<b>MED ROOM:</b>			
1. Medication room door closed and locked			
2. General cleanliness of med room			
3. No drugs in sight, accessible to the residents			
4. Keys to med room, cabinets, and carts in possession of authorized personnel			
5. Drugs separated from non-drug supplies			
6. Bulk supply of internal/external supplies stored separately			
7. No outdated or deteriorated meds present			
8. Labels are clear, clean, and firmly fixed to containers			
9. Temperature in storage area is appropriate			
10. Narcotic cabinet is secured under double lock			
11. Medications for return are in designated area			
12. No excessive medications for return			
13. Miscellaneous:			
<b>REFRIGERATOR:</b>			
14. Drugs requiring refrigeration stored in refrigerator			
15. Only drugs requiring refrigeration stored in refrigerator			
16. Refrigerator thermometer reading _____ °F (35-36°F)			
17. No outdated or deteriorated medication present			
18. Discontinued medications removed			
19. Food in refrigerator limited to adjuncts to medication			
20. All medications properly labeled			
21. Multi-dose vials/containers dated and initialed upon first use			
22. Labels are clear, clean, and firmly fixed to containers			
23. Food not in original containers properly labeled and dated			
24. Miscellaneous:			

**NOTES:** \_\_\_\_\_

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Inspection Items	S	U	Notes
<b>MEDICATION CARTS:</b>			
25. Medication cart is locked and secured			
26. Med cart is neat and clean			
27. Medication is separated from non-medication supply			
28. Medication for external use separated from internal and injectable medications			
29. Residents' medications are labeled properly			
30. Labels are clean, clear, and firmly fixed to containers			
31. Residents' medications in cart are current			
32. Multi-dose vials/containers are dated and initialed upon first use – kept to a minimum			
33. No outdated or deteriorated medication present			
34. Medication requiring refrigeration not present			
35. No medication in excess quantities, extra cards stored in designated area separate from med cart			
36. Narcotic drawer under double lock			
37. Narcotic audit being maintained each shift			
38. Individual narcotic log being accurately maintained			
39. Miscellaneous:			
<b>TREATMENT CART: (If appropriate)</b>			
40. Treatment cart locked and secured			
41. Treatment cart neat and clean			
42. Medications separated from non-medication supplies			
43. Residents' medications are labeled properly			
44. Labels are clear, clean, and firmly fixed to containers			
45. House stock items are properly labeled as stock			
46. No outdated or deteriorated medication present			
47. Miscellaneous:			
<b>MAR/POS:</b>			
48. MAR books neat and clean			
49. Patient identification present (i.e. photo)			
50. Blood pressure, weights, and accu-checks documented on MAR – if ordered			
51. All doses documented as given			
52. Reasons documented for doses missed			
53. All results and responses for PRN meds documented on MAR			
54. Miscellaneous:			

**NOTES:** \_\_\_\_\_  
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**Acknowledged By:** \_\_\_\_\_ **Inspector:** \_\_\_\_\_