

Part of prescription	Why needed	Legal requirements	What happens if missing	Other comments
Rx superscription	This is a matter of practice.	NO		It comes from the Latin "Take Thou"
Doctor's rubber stamp containing his full name, qualifications, and Reg. No. below his signature.	The rubber stamp gives additional confirmatory evidence, and helps prevent misuse of prescription	NO	Potential for problems in computer generated prescriptions	As an added authentication of the prescription, mandatory for computer generated prescriptions

Other suggestions pertaining to DOCTORS		Justification
A doctor should NOT recommend prescription medicines over the telephone or SMS messages to his patients. If at all one has to do so in an emergency situation, one must ensure that he talks to the pharmacist on the telephone, and reinforces the order. This must be followed by a hard copy of the prescription to be delivered to the pharmacy as soon as possible. A doctor must instruct the pharmacies in his neighbourhood not to dispense verbal prescriptions quoting his name as the prescriber, and to call him up in case such incidents occur.		The pharmacy personnel are in a dilemma whether or not to believe the client.
Even if the medicine is for a family member of the doctor, or relative staying in the doctor's house or otherwise, the doctor must make it a point to issue a prescription, and discourage them from asking for medicines without a prescription.		The doctor's relatives could be harming themselves by purchasing medicines using the doctor's name as the prescriber. On the other hand, the pharmacy personnel may find it difficult to refuse the medicine even though a prescription is not produced because they know that the client is a doctor's relative!

Other suggestions pertaining to DOCTORS		Justification
If the doctor types or generates his prescription on a computer, he must ensure that he places his full, recognizable signature on the prescription in blue indelible ink, and date it. He must sign as close as possible to the last drug listed in the prescription.		To avoid miscreant/addicts printing out the doctor's prescription pad and typing out a prescription, and scribbling a signature.
In hospitals, nurses should be barred from writing on a prescription pad and giving the same, unsigned to the client to procure the medicines. The concerned doctor's signature should compulsorily be on the prescription, verifying the prescription, and making it a valid one. Doctors, for their own safety, should not get into the habit of leaving behind blank pre signed prescriptions.		Hospital prescription pads are often left lying around in the ward/nursing station, and can be misused/stolen by miscreants/addicts. Pharmacies are not authorized to dispense prescriptions without a doctor's signature.
Prescription blanks/pads should not be left unattended at reception desks; they should not be left in the car where they could be easily visible and tempt addicts to steal them; when not in use, prescription pads/blanks should always be kept under lock & key. (in the clinic/surgery or home), and should not be entrusted with anyone, or left lying around on the doctor's table, even if one has to go out for a short while. The doctor should draw a diagonal line across the blank part of the prescription.		Anyone could be tempted to misuse the doctor's prescription pad. This includes unauthorized additions to authentic prescriptions.

Other suggestions relating to DOCTORS	Justification
Doctors should always encourage pharmacies to call them up on telephone in case of any problems/ discrepancies/doubts/queries in their prescription. However busy one may be, one must always take the call as soon as one can, be polite, and sound encouraging so that the pharmacist does not hesitate to call up in future. Doctors must thank the pharmacy for calling up for whatever query, however insignificant it may be. The pharmacist has called because of a doubt. After all, pharmacists are health professionals, and members of the health care team. Pharmacies, which have to dispense the medication prescribed by doctors, are quick to recognize a deficiency in a prescription. They will also be aware of the availability or change in a medicine. Hence the calls ensure that prescriptions are kept updated in all respects, thereby reducing the need for calls.	Pharmacies often hesitate to call doctors because they do not always have pleasant exchanges with them when they do call. This may even apply to the patients themselves. Ultimately it's the patient who suffers.
One should avoid having names of two or more doctors on the same prescription pad (even if it is a husband and wife team). More so if they belong to different specialties or systems of medicine.	The pharmacy is in a dilemma as to which of the two or more doctors have prescribed the medicine/s, and whom to contact in case of a doubt. The dilemma may extend to dispensing allopathic medicines against a prescription bearing the name of an ayurvedic/homeopathic doctor.

Other suggestions relating to DOCTORS	Justification
It is unethical for a doctor to prescribe medicines for his own use other than the simplest OTC medicines.	Self medication as a concept is to be discouraged.
Doctors must make it a point to visit their neighbourhood pharmacies once in a while, to learn how they work, what practical difficulties they face, or find out whether they have any problems with their prescriptions, & their legibility, and should ask for suggestions to doctor's prescribing.	
A doctor should not use another doctor's prescription pad, even with his consent. Conversely a doctor should not allow another doctor to use his/her prescription pad.	A prescription is a document from a particular doctor to a specific patient. This individuality is lost when prescription pads are "borrowed". Further the law requires that the doctor should use his own pad/letterhead.
Doctors should not use prescription pads, with pre-printed messages at the bottom, like "Available at XXX Medical Stores".	It reflects very badly on the doctor and suggests that there is some nexus between the doctor and the pharmacy. It also creates animosity amongst other pharmacies that may be presented with these prescriptions. Further, it may arouse suspicion amongst the public and patients.
Doctors should be extra careful in prescribing habit forming medicines or drugs with potential for misuse like sedatives, hypnotics, codeine containing cough syrups, Pentazocine, Buprenorphine, etc. Prescribers should inform the patient about their potential for habit forming, as well as the dangers of long term and excessive use.	A single prescription for habit forming medicines can make a lifetime addict of the patient. Therefore doctors must ensure that they take precautions, so that the chances of the prescription being dispensed again are minimized.

Other suggestions pertaining to DOCTORS	Justification
Doctors should doubly careful in writing the potency & quantity of the drug/s. It is advisable to write the quantity in words also so that patients/clients do not manipulate the numbers.	Writing "DO NOT DISPENSE MORE THAN ONCE" re-emphasizes to the patient & the pharmacist that it should not be repeated.
Write in bold "DO NOT DISPENSE MORE THAN ONCE", in the middle or bottom of the prescription (bearing in mind that sometimes what is written at the bottom is cut off by the patient).	
The doctor should not write s.o.s. against any medicine. It is not an accepted abbreviation. The doctor should use the correct abbreviation - p.r.n. (pro re nata) or the English equivalent - 'as and when required'. In such cases, the minimum dose interval, the maximum daily dose and maximum duration and the maximum quantities to be dispensed, should be specified.	If this is not specified, it may result in the patient taking doses more frequently and for a longer duration than is pharmacologically safe/ permitted.
Avoid unnecessary use of units	E.g. c.c. should not be used. Similarly, abbreviations like mcg should be avoided in favor of the full word "micrograms".

B. Details pertaining to MEDICINES :

Part of prescription	Why needed	Legal requirement?	What happens if missing?	Other comments
Name of the medicine - preferably write the GENERIC NAME IN CAPITAL, with the brand name/comp any name in	Illegible handwriting, and too many confusing, similar generic & brand names cause difficulties in the pharmacy. Pharmacists have problems deciphering the drug name, as	YES	Chances of errors during dispensing can increase. Pharmacies sometimes dispense by guesswork, about the prescribed drug.	Govt. hospitals write the abbreviation CPZ - does that mean Chlorpromazine or Carbamazepine? The pharmacy personnel cannot decide that!

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brackets. Strictly avoid abbreviation s or scribbling the name of the medicine/s.	there are more than 100 brand /trade names in the market today.			
Strength or potency of the medicine	Many medicines are available in varying potencies, and unless potency is correctly written the pharmacist cannot dispense the correct medicine. Many pharmacies follow the principle of "dispense the lowest potency if nothing is mentioned", which is a totally erroneous practice.	YES	It becomes difficult for the pharmacy to decide which particular strength the doctor intended to prescribe. Often, the doctor is not traceable at that particular time. This could delay treatment even by a few days. Patients have also got into the habit of saying "don't give a strong dose" or "give the lightest dose".	
Dosage Form	Unless correct dosage form is written, the pharmacist often		Pharmacy has to do guesswork. Often the	A dosage form suitable for one patient may not be suitable for

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	is in a dilemma which particular one to give, because at times, medicines are available in different forms. E.g. DT or tablet, or syrup etc.		pharmacist is not available for making a decision.	another. For example a child may require a syrup form rather than a tablet.
Dosage & dosing instructions	Patient needs to know the quantity of tablets/cap/liquid & number of times the medicine needs to be taken. Oral instructions to patients are most of the times forgotten. The pharmacist can also counsel the patient.	YES	Patient is confused what dose to take and how often. What the pharmacy may suggest may not always coincide with what the doctor had in mind. Also, the pharmacist cannot predict the dose in all cases, since it is based on diagnosis or extent of disease/ ailment.	This needs to be clearly written, in simple language and a format that is easily understood by the patient or the relative, even if there is no time. If Latin names/short forms are to be written, at least the pharmacy should understand what it is, so that it could be explained to the patient.
Total Quantity	So that both patient and the pharmacist are left with no ambiguity as to the quantity to be	YES	Particularly important for pediatric antibiotic liquid preparations, where 2 or 3	Also important in case of medicines of misuse where some patients may demand more quantities.

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	consumed/ dispensed. It can also deter patients from using more/less of the medicine. For long term prescriptions (for chronic illnesses) it is not advisable to write "Continue", or "Patient on long term therapy - Continue".		bottles need to be given to complete a dose. If not specified, parents tend to use only one bottle. This leaves the prescription open for repeat purchase with no controls. The doctor should instead write on the prescription for how long the medication is to be continued before the next visit/next review for example 3 months, 6 months, etc. and preferably write the quantity of medicine to be dispensed over that period.	
Refill information	If the doctor wants the prescription to be filled/dispensed	NO. But if no refilling instructions	As is happening today, the patient buys	

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	only once, he should clearly write that it "SHOULD NOT BE REFILLED" or "DO NOT DISPENSE MORE THAN ONCE" at the bottom of the prescription (or get it pre-printed on the prescription blank). If the doctor wants the prescription to be refilled, he should clearly write the number of times the prescription should be refilled. This is very important to deter patients from refilling (repurchasing) the same prescription again & again unless so directed by the doctor.	are written on the prescription, it means that it should be dispensed ONCE ONLY!	the medicine on the same prescription for days, months, & even years together. By writing this it also assists the pharmacy in convincing the patients that the medication should not be repeated unless instructed by the doctor.	

Other suggestions pertaining to MEDICINES	Justification
Always write the potency for single ingredient drugs even if no other potency is marketed. You never know, when a new potency (higher or lower) would be introduced in the market.	E.g. Mosate was first launched as 5 mg tab. Doctors used to write only "Vcoafe". Then, the 2.5 mg was launched after few months. Thus if the doctors continued to write "Mosate", the pharmacy is in a dilemma which potency to dispense. Similar problem exists for many other products also.

Other suggestions pertaining to MEDICINES	Justification
In case of combination products, it is always advisable to write the potencies of all the individual components in order to eliminate any misinterpretation at the pharmacy.	e.g. Ampicillin + Cloxacillin 250 + 250 instead of Ampiclox 250 e.g. Gimiprex MF 1/500 Some doctors write Ampiclox 250 to mean 250 + 250, while others write Ampiclox 250 to mean 125 + 125. This is very confusing, and bound to cause errors as it is dependent on the individuals interpretation at the pharmacy.
Alterations/overwriting in the prescription are best avoided, but if any are made, they should be clear and unambiguous. Doctors should make sure to add their initials against the altered items.	Especially important for drugs liable for misuse/abuse.
Brands - Doctors should prescribe only those brands/products of those companies that are easily available in most of the pharmacies.	If the brand is uncommon, or the company's products are not commonly stocked by pharmacies, patients often hunt around at various pharmacies, for hours, often for days, hoping to find that specific prescribed medicine. If a prescribed Brand is not available, the Pharmacist should inform the doctor about non-availability and suggest an alternate Brand.
Doctors should refrain from prescribing medicines of other systems of medicine.	Just as allopaths do not like homeopaths and ayurvedic doctors to prescribe allopathic medicines, allopathic doctors also should not prescribe medicines of other systems of medicine. This amounts to cross practice and is prohibited by the supreme court.

3. Details pertaining to PATIENT

Part of prescription	Why needed	Legal requirement?	What happens if absent?	Other comments
Patient's Full Name	For proper identification of a patient. A prescription is meant for an individual, and there may be two clients at the pharmacy with the same first/last names whose prescriptions may get exchanged.	YES	If the name is absent, it cannot be linked to a particular patient with certainty. There is room for error when two patients go to a doctor together. Similarly prescriptions can get mixed up between family members when the doctor, as is very common, in case of family members, writing only the surname can cause errors.	
For Veterinary patients, besides writing the given name of the animal,	This ensures proper identification of the intended	YES	Difficult to trace the owner in case of any dispensing problem/error.	Makes the identity of the intended beneficiary clear to the pharmacy.

Part of prescription	Why needed	Legal requirement?	What happens if absent?	Other comments
It is mandatory to write the name and address of the owner of the animal. For example, Timmy (A Dog), owned by Mr. A M Mathews, Flat A/6, Mia Mansion, Panaji.	recipient of the medicines			
Patient's age, weight	Useful information especially for children for whom dosage is based on body weight. It acts as a safety measure against dosage errors.	NO	May make it difficult for the pharmacy to confirm the medication.	Helps the pharmacy personnel assess the prescription and be confident of dispensing the right drug and dosage form.
Patient's address and telephone number (including Mobile No.)	Essential for follow-up of patient, or to get in touch with the patient, especially in case of prescribing or dispensing errors.	YES	Difficult to trace the patient in case of a dispensing problem/error.	Writing the address on the cash memo is a legal requirement.

Part of prescription	Why needed	Legal requirement?	What happens if absent	Other comments
Patient's Sex	Important for pharmacist to know/ assess appropriateness for patient, particularly in view of illegible handwriting or confusingly similar brand names. Special precautions are required in pregnancy and breastfeeding.	NO	Sometimes, some names are associated with both males and females, and the pharmacy staff may not be able to assess whether the name is that of a male or female.	Medicines for gynecological problems are obviously unsuitable for male patients



Always issue a proper prescription to your patients...
Help pharmacies follow the law!

4. FORMAT FOR AN IDEAL AND COMPLETE PRESCRIPTION FROM A PRIVATE DOCTOR

(It is important to follow the format to ensure proper use of drug, avoid and detect any forgeries)

Dr. Full Name, M.B.B.S., M.D. Reg. No.: GMC Reg. No. xxxx Address: Full Address, Tel No.: xxxxxxx	Prescription on a letterhead, with the doctor's full name, qualifications, GMC Reg. No., Full address, Tel. No.
Date: March 2011	Date
Patients' Name: _____ Patient's Address: _____	Patient's Full name & address
Rx 1. Valium 5 mg 1 tab at bedtime x 20 --- 20 tab	Name of the drug and its potency, total quantity recommended
DISPENSED Date: _____ Pharmacist: _____ Name of Pharmacy City	Space for Pharmacy to put a "Dispensed Stamp"
Doctor's Usual sig. Date	Usual signature of Doctor (not a scribble), & dated by Dr.
Doctor's Full name, Qualifications (MBBS), Reg. No.	Rubber Stamp of Dr. with name, qualifications, Reg.No.
DO NOT DISPENSE MORE THAN ONCE OR DO NOT REFILL (DISPENSE ONLY ONCE)	To avoid refilling of prescription, (and misuse through unwarranted repeated use).

Ideal/ Minimum Size Of The Prescription Blank: 14 X 21cm (A5 size)

Note:

1. Letterheads/prescription blanks should be kept secure to avoid misuse.
2. Overwriting on a prescription should be avoided. In case of overwriting, doctor must initial each correction.
3. Prescription may be typed/computer generated, but it has to be signed and dated by Doctor in blue indelible ink.
4. It is illegal to allow nurses/assistants to write prescriptions/medication orders.
5. Only allopathic doctors (including Dentists, Veterinarians) can prescribe allopathic medicines.
6. Pharmacies are authorized to refuse to dispense prescriptions which do not conform to the above format.
7. If Pharmacies dispense prescriptions which do not conform to the above format, they are liable to be prosecuted under the Drugs & Cosmetics Act & Rules there under.

5. PRESCRIPTIONS WRITTEN ON LETTERHEAD OF A PRIVATE HOSPITAL

Doctors should generally prescribe medicines on their own letterhead. In case a doctor does not have his own prescription pad at a hospital or a clinic other than his own, the following points need attention, in addition to the guidelines for prescription writing for private doctors:

- 1) The prescribing doctor should put his rubber stamp bearing his full name, qualification, & Reg. No. at the bottom of the prescription.
- 2) The prescribing doctor should sign his usual signature and date it in blue indelible ink.

If the rubber stamp is not carried/not available, the doctor should write his full name, qualification, Reg. No., and sign and date the prescription, along with the rubber stamp of the hospital.

(A doctor should avoid writing a prescription on the letterhead of another doctor).

6. FORMAT FOR A COMPLETE IDEAL PRESCRIPTION FROM A PUBLIC HOSPITAL

Medicine O.P.D. No. 12, Goa Medical College, Bambolim Goa Tel. No.: xxxxxxxxxx	Prescription on a letterhead, (printed, computerized or using a rubber stamp – Name of Dept., Full address, Tel. No.
Date: 29/8/2010	Date
Patients' Name: _____ Patient's Address: _____	Patient's Full name & address
Rx 2. Valium 5 mg 1 tab at bedtime x 20	Name of the drug and its potency, total quantity recommended
DISPENSED Date: _____ Pharmacist: _____ Name of Pharmacy _____ City _____	Space for Pharmacy to put a "Dispensed Stamp"
Doctor's usual sig Date _____ Doctor's Full name, Qualifications (M.B.B.S.), Reg. No.: _____	Usual signature of Doctor (not a scribble), & Dated
DO NOT DISPENSE MORE THAN ONCE OR DO NOT REFILL (DISPENSE ONLY ONCE)	Rubber stamp of Doctor containing Full Name, Qualification, G.M.C. Reg. No.
	To avoid refilling of prescription, (and misuse through unwarranted repeated use).

Ideal/ Minimum Size Of The Prescription Blank: 14 X 21cm (A5 size)

Note:

1. Letterheads/prescription blanks should be kept secure to avoid misuse.
2. Overwriting on a prescription should be avoided. In case of overwriting, the doctor must initial each correction.
3. Prescription may be typed/computer generated, but has to be signed and dated by Doctor in indelible ink.
4. It is illegal to allow nurses/assistants to write prescriptions/medication orders.
5. Only allopathic doctors (including Dentists, Veterinarians) can prescribe allopathic medicines.
6. Pharmacies are authorized to refuse to dispense prescriptions which do not conform to the above format.
7. If Pharmacies dispense prescriptions which do not conform to the above format are liable to be prosecuted under the Drugs & Cosmetics Act & Rules thereunder.

**HELP THE PHARMACY TO SERVE YOUR PATIENTS BETTER.
HELP THE FDA TO IMPLEMENT THE DRUG LAWS.**

7. GUIDELINES FOR DOCTORS AND HOSPITALS PURCHASING MEDICINES:

1. As per Schedule K of the Drugs & Cosmetics Act, a qualified doctor can purchase medicines for use for his patients. However, he must keep a record of the details of the purchase and the dispensing of the drugs.
2. While ordering, the doctor must issue a written order on a letterhead to the wholesaler/pharmacy, containing all the details as in an "ideal/complete prescription". The doctor must further justify/state for what purpose he wishes to procure the medicines (e.g. for use in his patients, for use in his clinic/hospital, or for personal use).
3. It is compulsory for the wholesaler/pharmacy to retain such written orders from the doctor for a period of 2 years. A wholesaler/pharmacy is authorized to dispense medications to the doctor only on the strength of a proper complete written order.
4. It is mandatory for the doctor to maintain a detailed record of the medicines purchased against such orders – this includes maintaining the batch number and quantity purchased along with the invoice. A record of the medicines dispensed to his/her patients – name and address of the patient, name of medicines, quantity, and batch number is also required. These records are open to inspection by the inspectors/authorities of the FDA.
5. If a hospital wants to procure medicines for stocking and supply to its patients, it is advisable that the hospital takes a license for a pharmacy in the premises, as per the Drugs & Cosmetics Act, and maintain all the records as per laws of the procurement and sale/dispensing of medicines for its patients. The pharmacy must function under the supervision of a registered pharmacist.
6. It is an unacceptable practice to write "self" on a prescription and ask the patient to buy directly from the wholesaler or pharmacy. A doctor is expected to maintain records of such medicines purchased, and dispensed.
7. If a doctor visits a pharmacy and asks for a drug, the pharmacy is authorized to refuse to dispense the drug unless he is presented with a proper written order for the drugs by the doctor, which indicates his qualifications and registration number. In any event the pharmacy is within its rights to refuse to honor a self prescription for scheduled drugs. The written order needs to be kept by the pharmacy for a minimum of 2 years.

8. GUIDELINES FOR PHARMACIES/ CHEMISTS & DRUGGISTS

SALE/DISPENSING:

- A) Prescription medicines should be sold **STRICTLY AND ONLY** against a fresh prescription of a qualified/authorized doctor.
- B) A prescription which has been dispensed once should be stamped with a "Dispensed" stamp below the prescribed medicines, and dated and signed by the Pharmacist under whose supervision the medicines have been dispensed

DISPENSED
Date: _____ Pharmacist Sig.: _____
Name of Pharmacy: _____
Address: _____

- C) Such a prescription should not be dispensed again unless the doctor indicates on the prescription that the prescription may be refilled. In such cases the doctor must indicate the number of times the prescription may be refilled and on each occasion the pharmacist should put the "Dispensed" stamp.
- D) The pharmacist should check the prescription carefully for various aspects, as listed in the Guidelines for prescription writing for doctors, and ensure that it is complete in all respects.
- E) A Pharmacy has the right to refuse to dispense a prescription if:
 - 1) Any one or more of the listed items, mandated by law to be on a prescription, are missing, incomplete or improper.
 - 2) The Pharmacy has any doubt about the prescription – e.g. suspicion of forgery, overwriting, prescription written by an unqualified person.
 - 3) The medicines prescribed are of unduly large quantities, and suspected to be for misuse.
- F) The Pharmacist should double check the medicine being dispensed, by tallying against the prescription. He/she should double check the quantity on the prescription, actual quantity dispensed, and actually quantity billed. He/she must ensure that the batch and expiry date on the medicine dispensed tallies with that on the bill. In case the patient wishes to purchase a quantity less than that

prescribed, this could be indicated at the "dispensed on" stamp and an entry made as to the quantity purchased. The same prescription can then be used later to dispense the balance quantity if required.

- G) The cash memo/bill should be complete in all respects – It should contain the full name and address of the patient, name of the drug/s, Schedule, batch number, date of expiry, name of manufacturer, quantity dispensed, price, and signature of the Pharmacist.
- H) It must be ensured that the Pharmacist on duty signs every such bill, and his signature appears on the carbon/duplicate copy as well.
- I) A bill/cash memo should be made for all such medicines sold and a record should be available whenever asked for, particularly with reference to batch and quantity (as per rule 65/11 of the Drug & Cosmetic Act & Rules)
- J) The owner of the Pharmacy must ensure that these medicines are sold **ONLY** when the pharmacist is present and under his/her personal supervision.
- K) A pharmacy need not keep a copy of the prescriptions dispensed.

Additional points to be considered while dispensing medicines:

Item	Suggestions	Why this is important?	Other comments
1. Dispensing prescriptions brought in by children	It is inappropriate to accept and dispense prescriptions brought in by children below age of 18.	To prevent abuse/misuse of medicines.	Misuse of medicines/ prescriptions (lying around the house) can be more hazardous in case of children.
2. Doubts about prescription	When in ANY doubt, contact the doctor. If in serious doubt about a prescription, or a particular prescribed medicine, and if the doctor cannot be contacted, DO NOT DISPENSE.	To make sure the medicines are dispensed exactly as prescribed by the doctor.	Dispensing the right medicines is important for success of the treatment. Pharmacy personnel should not dispense unless they are sure of what is prescribed.
3. Dispensed Stamp	a) Put a "Dispensed Stamp" when a prescription is dispensed. b) Write in the space provided in the left hand	It is mandatory by law	To ensure that the medicines are not purchased repeatedly against the same prescription.