MedPro Group
a Berkshire Hathaway company

Checklist

Medication Inventory Management for Healthcare Practices

Healthcare practices maintain various types of medications, vaccines, and supplies (collectively referred to as “medication inventory” in this checklist) depending on their patient population and the services they provide. Some offices have minimal medication inventories (due to limited demand, state regulations, or other factors), while others maintain substantial inventories.

Regardless of inventory scale, healthcare practices should have functional, well-maintained, and well-documented systems and processes to ensure patient safety and prevent errors. Systems and processes should account for issues related to storage, security, documentation, and safety processes and auditing.

The following checklist offers strategies to address key safety precautions for medication inventory management in healthcare practices — as well as opportunities to identify areas for improvement.

	Yes	No
Storage		
Is a designated staff member (role) responsible for ensuring that the practice’s medication storage areas are organized and maintained?	☐	☐
Are medication storage areas well-lit and temperature controlled, and do they have adequate space to accommodate the inventory without being cramped?	☐	☐
Are medications, vaccines, and products that require refrigeration or freezing stored at the appropriate temperatures (per manufacturers’ guidance) in purpose-built storage units?	☐	☐
Do refrigerators and freezers that store medications and vaccines have temperature monitoring devices, and does monitoring occur according to Centers for Disease Control and Prevention (CDC) guidance?	☐	☐

	Yes	No
Storage (continued)		
Are staff members prohibited from storing any other items (e.g., food and beverages) in refrigerators and freezers used for medication inventory storage?	☐	☐
Are efforts made to protect the power supply to medication storage units (e.g., plugging in only one storage unit per outlet, using safety lock plugs or outlet covers, and posting “Do Not Unplug” warning signs to alert staff, the cleaning crew, electricians, etc.)?	☐	☐
Is a procedure in place for handling temperature excursions, and are staff members trained to identify excursions quickly and take action?	☐	☐
Do emergency preparedness plans include protocols for protecting the medication inventory during an emergency (e.g., power loss, flooding, etc.), including guidance for handling emergencies outside of standard business hours?	☐	☐
Are staff members trained on all medication inventory storage and handling protocols, including emergency procedures?	☐	☐
Are medication samples, controlled substances, high-alert drugs, and vaccines kept separate from each other and the rest of the medication inventory?	☐	☐
As much as possible, are products shelved at eye level with their labels facing forward for easy identification?	☐	☐
Are products in the inventory separated if they (a) have names that sound similar, (b) have similar packaging, or (c) are the same product but have different routes of administration?	☐	☐
When new medications are added to the inventory, are they compared with the existing inventory to identify potential “look-alike, sound-alike” issues?	☐	☐
Are storage trays/bins/containers clearly labeled, and do they each hold only one type of product?	☐	☐
Does the medication inventory storage method account for which products providers should use first based on expiration dates?	☐	☐

	Yes	No
Security		
Are specific and measurable procedures in place to safeguard the medication inventory?	☐	☐
Are all medication storage areas, including the cabinet or closet for samples, kept locked?	☐	☐
Are controlled substances, high-alert medications, syringes, needles, and prescription pads secured in restricted areas?	☐	☐
Is access to restricted areas limited to designated and appropriately trained and credentialed staff members?	☐	☐
Are employees who leave the practice required to return all keys and facility-issued identification or access badges? (Note: Employees who are fired should turn in their keys and badges immediately upon termination.)	☐	☐
Do staff members take precautions to prevent the unauthorized use of discarded medications?	☐	☐
Is the facility manager and/or building security team aware of the practice's after-hours emergency response protocol, and do designated staff members know the appropriate procedures for accessing the building after hours?	☐	☐
Documentation		
Are detailed guidance and written policies available for logging, storing, and monitoring the medication inventory (including samples)?	☐	☐
Are medication storage unit temperatures documented according to CDC guidance and the organization's required frequency?	☐	☐
Does a designated individual (role) maintain an accurate, current list of high-alert medications and products with potential "look-alike, sound-alike" issues?	☐	☐
Are "look-alike, sound-alike" issues communicated to practitioners and appropriate staff members routinely and when new products are introduced into the inventory?	☐	☐
Are pediatric and adult versions of the same medication or vaccine clearly labeled to avoid confusion?	☐	☐

	Yes	No
Documentation (continued)		
When medications and samples are received, administered, or dispensed, is all pertinent information documented electronically or in hard copy?*	☐	☐
Do healthcare providers in the practice document the provision of samples in patients' health records, as well as patient education and discussions about benefits, risks, alternatives, and potential side effects?	☐	☐
Does the practice have a process for tracking patients on high-risk medications and documenting their dosages, prescriptions, refills, and lab orders/results?	☐	☐
Do all dispensed medications (including samples) have detailed labels that include the drug name, patient's name, date, strength, dosage, frequency, quantity, and expiration date?	☐	☐
Are warning or label enhancements used for products with potentially confusing names or packaging?	☐	☐
Are multidose vials labeled with an open date and properly discarded according to manufacturers' requirements?	☐	☐
Is staff training related to medication inventory storage and handling, including training on emergency procedures, documented in employees' personnel files?	☐	☐
Are policies in place for documenting the destruction or disposal of items from the medication inventory?	☐	☐
Safety Processes and Auditing		
Has a staff member (role) been assigned to routinely evaluate the medication inventory, including items kept in procedural areas and exam rooms, to identify safety issues or damaged/expired items?	☐	☐
Are damaged or expired medications and products removed from the inventory and disposed of according to drug class and local/state regulations?	☐	☐

* Documentation should include, as applicable, the name of the drug/product; the date it was received, administered, or dispensed; the patient's name; the strength, dosage, frequency, and quantity; the manufacturer and lot number; the expiration date; and the healthcare provider's name.

	Yes	No
Safety Processes and Auditing (continued)		
If a medication inventory management system is in use, does it help detect low inventory levels for ordering purposes and to alert staff about possible medication and supply shortages?	☐	☐
Are providers aware of any mandatory inventory reporting requirements related to medications or vaccines?	☐	☐
In the event of medication or supply shortages, are processes in place to ensure ethical decisions about resource allocation, identify the safest alternatives, and educate practitioners about alternative products?	☐	☐
Are procedures in place for interacting with pharmaceutical representatives and accepting sample medications?†	☐	☐
Are controlled substances routinely audited, and are staff members aware of the appropriate procedures for reporting loss or theft of drugs to appropriate local, state, and federal authorities?	☐	☐

Resources

For additional information and more detailed guidance about medication safety and inventory management, visit the Institute for Safe Medication Practices for a variety of tools and resources. Additionally, see the CDC's Vaccines and Immunizations webpage for recommendations related to vaccine storage and handling.

† Licensed providers should request medication samples in writing from pharmaceutical representatives. These representatives should not provide samples without a provider's written request per the Federal Food, Drug, and Cosmetic Act (21 U.S.C. § 353[d][2][A][i]).