

Safe prescribing learning resources for International Recruitment

Background

Prescribing is an integral part of work as a GP with over one billion prescription items being issued each year. However, prescribing errors in both primary and secondary care have the potential to cause significant morbidity and mortality. The GMC PRACTiCe study identified prescribing errors in around one in twenty prescriptions (Avery et al., 2012). Hence safe prescribing is essential for all practitioners and good practice involves:

Safe Prescribing	Areas to consider
Right Drug	<ul style="list-style-type: none"> • Evidence for use in the indication • Allergies • Contra-indications/Cautions • Interactions with co-prescribed medication • Local and national prescribing guidelines • Local formulary • Social issues (e.g. carers, inclusion in a monitored dosage system) • Formulation • Duplication or omissions in therapy. • Correct use of brand prescribing for safety reasons
Right Dose	<ul style="list-style-type: none"> • Renal or hepatic function • Age / weight • Local and national prescribing guidance (including MHRA) • Is the dose correct for the indication? • Has increasing or reducing dosing been done appropriately? • Most appropriate strength of tablet prescribed for the required dose.
Right Dosage Instructions	<ul style="list-style-type: none"> • Clear and unambiguous (avoiding “as directed”) • Up to date (with current usage/latest letters from secondary care) • Include route of administration/area of application/treatment eye or ear • Are the instructions able to be read and understood by the patient?
Right Follow-up	<ul style="list-style-type: none"> • Has the necessary monitoring has been planned/taken/acted upon e.g. blood tests, BP. • Has the item been placed on repeat appropriately so that it cannot be continued without a necessary review?
Right Documentation	<ul style="list-style-type: none"> • Is the indication for prescribing clear? • If prescribing does not follow normal guidance is the reason documented? • Is the plan for any necessary monitoring or follow up documented?
Right Review	<ul style="list-style-type: none"> • Where the medication has been used before has under or over-ordering been addressed resupplying (adherence to therapy)? • Have any necessary discussions taken place before continuing medications with risks e.g. HRT
Good prescribing	<ul style="list-style-type: none"> • Does prescribing show that local guidelines have been referred to e.g. antimicrobial guidelines? • Is the prescribing plan in the notes and thought process excellent and clear for the next clinician to follow? • Is the OTC advice that has been given very clear with regards to medication dosage and further advice?

Practical Resources

There are a variety of practical resources that can be used to support safe prescribing. These include:

- [BNF](#) and [Children's BNF](#)
- Local protocols and clinical guidelines
- [e learning for Health modules](#):

[Clinical Pharmacology and Prescribing](#)

1. Prescription Writing
2. Dose Calculations
3. Reviewing Prescriptions
4. Medication History-taking
5. Communication
6. Drug Administration
7. Reporting Adverse Drug Reactions
8. Using the BNF, Toxbase and Other Resources to Support Rational Prescribing

[Safe prescribing](#)

1. Prescription Writing
2. BNF Usage and Other Prescribing Information Sources
3. Safe Use of Injectable Medicines (Part 1)
4. Safe Use of Injectable Medicines (Part 2)
5. Safe Anticoagulation
6. Safe Prescribing in Renal Impairment
7. Safe Prescribing of Insulin
8. Adverse Drug Effects
9. Safer Medicine Use Through Concordance
10. Prudent Use of Antibiotics (Part 1)
11. Prudent Use of Antibiotics (Part 2)
12. Prudent Use of Antibiotics (Part 3)