

Recording Sheet

The checking pharmacist must confirm that all checks have met the required criteria as listed

Criteria	Correct please sign	Incorrect please sign	Not applicable please sign
a) Appropriate prescription is valid and clarified			
b) Correct individual			
c) Correct medicine name			
d) Clinical check complete to confirm appropriate dosage			
e) Correct strength			
f) Correct quantity			
g) Correct medicine brand, where appropriate			
h) Formulary compliance (if applicable)			
i) Cost codes ensuring accurate financial reporting (if applicable)			