

# **S05: Assessment of legibility and completeness of prescriptions dispensed at State Pharmaceutical Cooperation, Anuradhapura**

Rathish D<sup>1</sup>, Bahini S<sup>1</sup>, Sivakumar T<sup>1</sup>,  
Thiranagama T<sup>1</sup>, Abarajithan T<sup>2</sup>, Wijerathne B<sup>3</sup>,  
Jayasumana C<sup>1</sup>, Siribaddana S<sup>4</sup>

<sup>1</sup> Department of Pharmacology, Faculty of Medicine and Allied Sciences, Rajarata University of Sri Lanka;

<sup>2</sup> Department of Physiology, Faculty of Medicine and Allied Sciences, Rajarata University of Sri Lanka;

<sup>3</sup> Department of Forensic Medicine, Faculty of Medicine and Allied Sciences, Rajarata University of Sri Lanka

<sup>4</sup> Department of Medicine, Faculty of Medicine and Allied Sciences, Rajarata University of Sri Lanka

DOI: <http://dx.doi.org/10.4038/amj.v9i2Suppl.7554>

**Background:** Illegibility and incompleteness of drug prescription leads to medical error. We assessed legibility and completeness of prescriptions dispensed at State Pharmaceutical Cooperation (SPC), Anuradhapura.

**Methods:** A cross sectional study was conducted at SPC, Anuradhapura. Ethical clearance was obtained from the Faculty of Medicine and Allied Sciences, Rajarata University of Sri Lanka. A 3-point Likert scale and a checklist (developed from WHO manual and BNF) were used to assess legibility and completeness respectively.

**Results:** Thousand prescriptions over a period of four months were collected. Number of drugs per prescription was 3.95 (SD 2.2). Most of the prescriptions were hand written (99.8%) and from the private sector (72%). However, 16% of the prescriptions were from government sector and the rest were unclassified. Greater proportion of the prescriptions was legible with effort (65%). Illegible prescriptions were 9%. Name (94%), age (79%), gender (70%), name of prescriber (90%), signature of prescriber (84%), place of prescribing (76%), contact details of prescriber (53%), qualifications of the prescriber (86%), prescriber's rubber-stamp (89%), dose (93%), frequency (97%), duration (92%), and date (88%) were present in more than half of the prescriptions. Address (5%), SLMC registration number (35%), route of administration (7%), generic name (16%), treatment symbol (48%), diagnosis (41%) and refill information (6%) were seen in less than half of the prescriptions. Drug duplications were found in 0.3% of the prescriptions. Route of administration (90%), generic name (87%), frequency (68%) and duration (84%) were correct in most. Dose (67%) and prescriber's rubber-stamp (64%) were incorrect and incomplete respectively in most.

**Conclusion:** Absence of route of administration and generic name, incorrect dose and incomplete rubber-stamp of the prescriber were common findings. Prescribers' behavior and motives in the above mentioned issues might need to be probed in more detailed manner (e.g. root cause analysis).