

**SOP**

**Prescription Writing**

**Department of Pharmacology**

**Faculty of Medicine**

**UWUSL**

# **STANDARD OPERATING PROCEDURE (SOP) ON PRESCRIPTION WRITING**

## **Title**

Prescription Writing for Undergraduate Pharmacology Teaching

## **Issued by**

Department of Pharmacology  
Faculty of Medicine, Uva Wellassa University

## **(1) PURPOSE**

To establish a standardized procedure for accurate, safe, legal, and effective prescription writing for undergraduate pharmacology teaching and clinical practice.

## **(2) SCOPE**

Applicable to:

- Lecturers
- Medical students
- Temporary demonstrators of Pharmacology
- Healthcare professionals involved in prescribing and dispensing medicines

## **(3) RESPONSIBILITIES**

### **(3.1) Lecturer**

- Teach principles of rational prescription writing
- Supervise prescription writing exercises
- Ensure adherence to prescribing guidelines and legal requirements

### **(3.2) Medical Students / Healthcare Personnel**

- Write clear, accurate, and legible prescriptions
- Use generic names whenever possible
- Ensure patient safety during prescribing
- Monitor for drug interactions and adverse effects

### **(3.3) Prescriber**

- Ensure prescriptions comply with national laws and Sri Lanka Medical Council regulations
- Verify patient identity and clinical details before prescribing
- Prescribe using generic names unless clinically justified otherwise
- Check for contraindications, allergies, and potential drug interactions
- Clearly state dose, route, frequency, and duration
- Avoid ambiguous abbreviations and ensure legibility
- Provide adequate patient education on drug use, side effects, and adherence
- Maintain confidentiality and proper documentation
- Take responsibility for monitoring treatment outcomes and adverse effects

#### **(4) DEFINITIONS**

- Prescription: A written set of instructions given to a pharmacist or healthcare personnel to dispense/administer medicines to a patient.
- Generic name: International Non-proprietary Name (INN) accepted worldwide for a drug.
- Brand name: Trade name given by the manufacturer for a drug product.
- Dose: The quantity of medicine prescribed at one time or over a specified period.
- Route of administration: The method by which a drug is administered (oral, intravenous, intramuscular, etc.).
- Frequency: How often a medicine should be administered.

#### **(5) LEGAL AND PROFESSIONAL ASPECTS OF PRESCRIPTION WRITING**

- A prescription is a legal document
- Prescriptions should be precise, accurate, clear, and legible
- Generic prescribing is mandatory in Sri Lanka
- Only authorized professionals registered with the Sri Lanka Medical Council can prescribe medicines

Authorized prescribers include:

- Medical doctors
- Dental surgeons
- Veterinary surgeons
- Apothecaries
- Homeopathy and Ayurvedic physicians
- Optometrists (spectacles and contact lenses)

#### **(6) COMPONENTS OF A PRESCRIPTION**

##### **(6.1) Date**

- Indicates the date of issue
- Important for repeated prescriptions and medico-legal purposes

##### **(6.2) Patient Information**

- Name
- Age
- Gender
- Address
- In ward settings: BHT number and ward number

##### **(6.3) Prescription Symbol**

- “Rx” originates from the Latin word “Recipe” meaning “Take”

##### **(6.4) Drug Information**

**Name of the Drug**

- Use generic names whenever possible
- Ensure correct spelling
- Selection should be based on efficacy, safety, quality, and cost

**Dose**

- Avoid unnecessary decimal points
- Use:
  - g for 1 gram or more
  - mg for less than 1 gram
  - microgram for less than 1 mg
  - Write 0.5 instead of .5

**Route of Administration**

Examples include:

- Oral
- Sublingual
- Intravenous (IV)
- Intramuscular (IM)
- Subcutaneous (SC)
- Intradermal (ID)
- Topical
- Suppository
- Enema
- Inhalational

**Frequency**

- Use accepted abbreviations when appropriate
- Prefer hourly intervals (e.g., 6 hourly, 12 hourly)
- Specify timing in relation to meals if necessary
- PRN/SOS medications should include:
  - Minimum dosing interval
  - Maximum daily dose

**Duration / Quantity**

- Specify duration of treatment
- Mention total quantity to be dispensed

**(7) ADVANTAGES OF GENERIC PRESCRIBING**

- More scientific
- Reduces confusion
- Easier identification of drug groups
- Helpful in identifying drug allergies
- Reduces treatment cost

## **(8) ACCEPTED ABBREVIATIONS**

OD – Once daily  
BD – Twice daily  
TDS – Three times daily  
QDS – Four times daily  
Mane – Morning  
Nocte – Night  
Stat – Immediately  
SOS / PRN – When necessary  
IM – Intramuscular  
IV – Intravenous  
ID – Intradermal  
SC – Subcutaneous

## **(9) GENERAL PRECAUTIONS**

- Ensure correct patient identification
- Write clearly and legibly
- Avoid ambiguous abbreviations
- Avoid prescribing errors
- Check for allergies and contraindications
- Ensure appropriate dose, route, and duration
- Monitor for drug interactions and adverse effects

## **(10) Pharmacoeconomic and Patient-Centered Considerations**

- Assess the patient's socioeconomic background and ability to afford prescribed medicines
- Prefer cost-effective options such as generics and biosimilars where clinically appropriate
- Balance efficacy, safety, and affordability when selecting drugs
- Discuss alternative therapies or formulations if cost is a barrier
- Promote rational use of medicines to reduce unnecessary financial burden on patients and the healthcare system

## **(11) Prescriber Safety and Professional Indemnity**

- Prescribers should be aware that prescription writing is a legal and professional responsibility.
- To safeguard against medico-legal risks, prescribers are encouraged to obtain Professional Indemnity Insurance or membership in a recognized medical defense association.
- Such coverage provides protection in cases of alleged negligence, prescription errors, or adverse drug reactions.
- Institutions may provide group coverage, but prescribers should verify whether this adequately protects them individually.
- Maintaining clear, accurate, and compliant documentation is essential, as it serves as the first line of defense in any legal inquiry.

- Prescribers should also stay updated on Sri Lanka Medical Council regulations and institutional policies regarding liability and insurance.

## **(12) PROCEDURE FOR WRITING A PRESCRIPTION**

### **Step 1 – Write the Date**

- Mention the current date clearly

# PRESCRIPTION

Date: 24/05/2024

**Step 2 – Enter Patient Information**

- Name
- Age
- Gender
- Address

**PRESCRIPTION**

Date: 24/05/2024

Name: \_\_\_\_\_

Age: \_\_\_\_\_

Gender: \_\_\_\_\_

Address: \_\_\_\_\_

**Step 3 – Write the Prescription Symbol**

- Use “Rx”

**PRESCRIPTION**

Date: 24/05/2024

Name: \_\_\_\_\_

Age: \_\_\_\_\_

Gender: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

**R<sub>x</sub>**

**Step 4 – Prescribe Medicines**

Include:

- Generic name
- Dose
- Route
- Frequency
- Duration
- Quantity

**Step 5 – Add Prescriber Information**

- Name
- SLMC registration number
- Address
- Telephone number
- Signature and official stamp



**(13) SAMPLE PRESCRIPTION**

Date: 22/09/2010

Name: Kanthi Perera

Age: 19 years

Gender: Female

Address: No. 50, Saman Mawatha, Rathmalana

Rx

- Phenoxyethyl penicillin 500 mg 6 hourly × 5 days (40 tablets)
- Paracetamol 1 g 6 hourly × 3 days (24 tablets)

Prescriber:

Dr. Shane Bandaranayake

SLMC Registration No: 45084

Address: No. 71, Cross Lane, Negombo

Signature: \_\_\_\_\_

- **Date-** 22/9/10
- **Name:-** Kanthi Perera **Age:-** 19 yrs
- **Gender :** F
- **Address:** NO 50, Saman Mawatha, Rathmalana

**Rx**

Phenoxyethyl penicillin 500mg 6hrly × 5days  
(40 tabs)

Paracetamol 2 tabs 6hrly ×3days (24tabs)

**Name:** Dr. Shane Bandaranayake

**SLMC Reg No:** 45084

**Address:** No. 71, Cross Lane, Negombo.

**T phone no** .....

.....  
Signature of Prescriber

#### **(14) COMMON ERRORS IN PRESCRIPTION WRITING**

- Illegible handwriting
- Incorrect drug spelling
- Missing dose or duration
- Incorrect abbreviations
- Omission of patient details
- Brand prescribing instead of generic prescribing
- Incomplete prescriber details

#### **(15) PATIENT EDUCATION**

- Explain drug dosage and timing clearly
- Emphasize adherence to treatment
- Inform regarding adverse effects
- Educate regarding storage of medicines
- Advise when to seek medical attention

#### **(16) DOCUMENTATION AND RECORD KEEPING**

- Maintain copies when required
- Ensure confidentiality of patient information
- Follow institutional and legal documentation standards

#### **(17) REFERENCES**

- British National Formulary (BNF)
- WHO Guide to Good Prescribing
- Guidelines on Ethical Conduct for Medical & Dental Practitioners Registered with the Sri Lanka Medical Council.
- Standard Pharmacology Textbooks

**Prepared by:**

Dr. Kumara Kaluarachchi  
Head of the Department of Pharmacology  
Faculty of Medicine and Allied Sciences  
Rajarata University of Sri Lanka.

Dr. Gayathri Rathnayake  
Head of the Department (Acting)  
Department of Pharmacology  
Faculty of Medicine  
Uva Wellassa University of Sri Lanka.

Snr. Prof. Muditha Vidanapathirana  
Dean  
Faculty of Medicine  
Uva Wellassa University of Sri Lanka.

Dr. Shane Bandaranayake  
Lecturer (Probationary)  
Department of Pharmacology  
Faculty of Medicine  
Uva Wellassa University of Sri Lanka.

Dr. Minoli Edirisinghe  
Temporary Demonstrator  
Department of Pharmacology  
Faculty of Medicine  
Uva Wellassa University of Sri Lanka

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