

Introduction to Hospital Store Procedures

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(A quick-reference guide for new staff, interns, and anyone needing a clear overview of how a hospital's central supply operates.)

1. Purpose of the Hospital Store

Goal	Why It Matters
Ensure continuous availability of clinical supplies	Prevents treatment delays, reduces patient risk.
Maintain inventory accuracy & cost control	Minimizes waste, supports budgeting, complies with regulations.
Support infection-control standards	Proper storage and handling reduce contamination.
Facilitate rapid response to emergencies	Quick pull-through of critical items (e.g., blood products, PPE).

2. Core Functional Areas

1. Receiving & Inspection

- Verify purchase orders (POs) against deliveries.
- Check product integrity, expiry dates, lot numbers, and temperature requirements.
- Record discrepancies (shortage, damage, over-ship) in the inventory system.

2. Storage & Segregation

- **General supplies** – dry, ambient temperature, organized by category (e.g., wound care, IV sets).
- **Temperature-sensitive items** – refrigerated ($4^{\circ}\text{C} \pm 2^{\circ}\text{C}$) or frozen ($-20^{\circ}\text{C} \pm 5^{\circ}\text{C}$) units with continuous monitoring.
- **Controlled substances & high-value items** – locked cabinets, limited access, dual-authorization logs.

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3. Inventory Management

- **Cycle counting** – regular partial counts (daily/weekly) to reconcile stock.
- **Par levels & re-order points** – predefined minimum quantities that trigger automatic PO generation.
- **First-expire-first-out (FEFO)** – ensures older lots are used before newer ones.

4. Distribution & Issue

- **Request processing** – electronic requisitions from nursing, OR, labs, etc.
- **Pick-pack-ship** – accurate picking, verification of item, lot, and expiry; labeling for traceability.
- **Documentation** – issue tickets, barcode scans, and updates to the central inventory system.

5. Returns & Disposal

- **Return to vendor** – for unopened, unexpired items with proper paperwork.
- **Internal returns** – items sent back to the store for redistribution.
- **Disposal** – regulated waste (e.g., expired meds, contaminated supplies) handled per hospital policy and local law.

6. Quality & Compliance

- **Audits** – internal (monthly) and external (regulatory) audits of processes and records.
- **Traceability** – ability to track any item from receipt to patient use.
- **Safety checks** – routine temperature logs, equipment calibration, and infection control inspections.

3. Typical Workflow (Step-by-Step)

1. **Purchase Order (PO) Generation** – Clinical department submits request ? Materials Management creates PO.
2. **Receiving** – Delivery arrives ? Verify PO, inspect, log into system.
3. **Put-away** – Assign storage location ? Apply barcode labels (if not pre-labeled).
4. **Stock Maintenance** – Perform cycle counts, adjust records, replenish par levels.

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5. **Requisition** – Department places electronic request ? Store clerk pulls items, scans, and updates inventory.
6. **Delivery** – Items delivered to point of use (e.g., OR cart, ward supply room).
7. **Documentation** – Issue record generated; any variances flagged for review.
8. **Monitoring** – Continuous temperature monitoring,