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| **1. Is the person’s name & DOB clearly identified on the MAR chart?** |  |  |  |  |  |  |
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| **2. Is there a pharmacy MAR chart in place?** |  |  |  |  |  |  |
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| **3. Are medication allergies clearly identified?** |  |  |  |  |  |  |
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| **4. Is the name of the GP / Surgery clear?** |  |  |  |  |  |  |
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| **5. Does the MAR chart show the date including the year?** |  |  |  |  |  |  |
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| **6. Have medication changes been cross-referenced in the service user’s communication record?** |  |  |  |  |  |  |
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| **7. Are handwritten entries legible?** |  |  |  |  |  |  |
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| **8. When a key code has been entered onto the MAR chart, has the reason been documented on the reverse and recorded in the communication records?** |  |  |  |  |  |  |
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| **9. Where PRN medication has been administered; has this been recorded on both the MAR chart and the PRN recording form?** |  |  |  |  |  |  |
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| **10. Are there any missed signatures on the MAR charts?** |  |  |  |  |  |  |
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**Extra Care Senior / Supervisor Signature: Date:**

**Manager Signature Date:**