



Policy and Procedure of Effective  
Communication of Verbal Orders and  
Read Back Verification

AMRH/ADMIN/P&P/006/Vers.02  
Effective Date: July 2022  
Review Date: July 2025

<b>Institution Name:</b> Al Masarra Hospital					
<b>Document Title:</b> Policy and Procedure of Verbal Orders and Read Back Verification					
<b>Approval Process</b>					
	<b>Name</b>	<b>Title / Designation</b>	<b>Institution</b>	<b>Date</b>	<b>Signature</b>
<b>Written by</b>	Dr. Nada Al Tamtami	HOD of Laboratory	Al Masarra Hospital	July 2022	for [Signature]
<b>Reviewed by</b>	Ph. Najla Al Zadjali	HOD of Quality Department	Al Masarra Hospital	July 2022	[Signature]
	Athari Al Maskari	Pharmacist	Al Masarra Hospital	July 2022	Athari [Signature]
	Sheikha Al Mamari	Lab Technician	Al Masarra Hospital	July 2022	[Signature]
	Dr. Salim Al Huseini	Psychiatrist	Al Masarra Hospital	July 2022	for [Signature]
<b>Validated by</b>	Kunooz Al Balushi	Document Manager	Al Masarra Hospital	July 2022	[Signature]
<b>Approved by</b>	Dr. Bader Al Habsi	Hospital Director	Al Masarra Hospital	July 2022	for [Signature]





Policy and Procedure of Effective  
Communication of Verbal Orders and  
Read Back Verification

AMRH/ADMIN/P&P/006/Vers.02  
Effective Date: July 2022  
Review Date: July 2025

**Content Table:**

Acronyms .....	3
1. Introduction .....	4
2. Scope .....	4
3. Purpose .....	4
4. Definition .....	4
5. Policy .....	5
6. Procedure .....	6
7. Responsibilities .....	7-8
8. Document History and Version Control .....	8
9. Related Documents .....	9
10. References .....	9
Appendices .....	10-14
Appendix 1. Audit Tool.....	10-12
Appendix 2. Document Request Form .....	13
Appendix 3. Document Validation Checklist .....	14



Policy and Procedure of Effective  
Communication of Verbal Orders and  
Read Back Verification

AMRH/ADMIN/P&P/006/Vers.02  
Effective Date: July 2022  
Review Date: July 2025

**Acronyms:**

<b>AMRH</b>	Al Masarra Hospital
<b>P&amp;P</b>	Policy and Procedure
<b>SOP</b>	Standard Operating Procedure
<b>Vers.</b>	Version number



## Policy and Procedure of Effective Communication of Verbal Orders and Read Back Verification

### 1. Introduction

Verbal orders are common communication tools between health practitioners with aim for timely decision and intervention. However, these orders have an error potential due to many factors. Although they cannot be totally stopped, verbal orders can be minimized and used properly.

### 2. Scope

This policy is applicable to all healthcare professionals providing care to patients directly or indirectly in Al Masarra Hospital (AMRH).

### 3. Purpose

To reduce errors associated with misinterpreted verbal or telephone communications of Medication orders and laboratory test.

### 4. Definitions

- 4.1 Emergency situation:** is a situation that poses an immediate risk to health and life of a patient, to a property, or environment.
- 4.2 Sterile Procedure:** involves strategies/procedures used in patient care to reduce exposure to microorganisms and maintain objects and areas as free from microorganisms as possible.
- 4.3 Verbal Orders:** are those orders given by the physician or other providers with prescriptive authority to a licensed person who is authorized by the organization's/institution's policy to receive and record verbal orders in accordance with law and regulation.



## 5. Policy

- 5.1 Verbal communication of prescription or medication orders and laboratory test is limited to urgent situations in which immediate written or electronic communication is not feasible.
- 5.2 Verbal orders and laboratory test are not allowed when the prescriber is present and the patient's chart is available, except during a sterile procedure or in an emergency situation, in which case a read-back is acceptable.

## 6. Procedure

- 6.1 Verbal orders and laboratory test, when allowed, will be immediately written down by the recipient, read back by the recipient at the same time, and confirmed or corrected by the prescriber. The order must be written before it is read back.
- 6.2 Verbal orders for any medication are not acceptable, except under critical circumstances such as emergent care and life-threatening situation.
- 6.3 Both parties will pronounce numerical digits separately—saying, for example, “one six” instead of “sixteen”.
- 6.4 For medication orders
  - 6.4.1. The prescriber will spell the name of any unfamiliar medication, if either party feels this is necessary.
  - 6.4.2. Prescribers will include the purpose of the drug to ensure that the order makes sense in the context of the patient's condition.
  - 6.4.3. Both parties will express doses of medications by unit of weight (e.g., mg, g, mEq, mMol).
- 6.5 For medication orders, both parties will express doses of medications by unit of weight (e.g., mg, g, mEq, mMol).
- 6.6 For medication orders, both parties will include the **mg/kg** dose along with the patient's specific dose for all verbal pediatric medication orders.
- 6.7 The recipient will record each verbal order directly onto an order sheet in the patient's chart and will include phone or pager numbers in case it is necessary for follow-up questions.



Policy and Procedure of Effective  
Communication of Verbal Orders and  
Read Back Verification

AMRH/ADMIN/P&P/006/Vers.02  
Effective Date: July 2022  
Review Date: July 2025

- 6.8** Recipients of verbal orders will sign, date, time, and note the order at the time it is written on the order sheet or entered into the AI Shift 3+ system.
- 6.9** Prescribers will verify, sign, and date orders within **one (1) hour**.
- 6.10** Verbal orders, when spoken and when transcribed, will use only approved abbreviations.
- 6.11** Verbal medication orders will include the following information:
  - 6.11.1 Date and time order is received
  - 6.11.2 Patient name
  - 6.11.3 Drug name (brand or generic)
  - 6.11.4 Dosage form (e.g., tablets, capsules, inhalants, etc.)
  - 6.11.5 Strength or concentration
  - 6.11.6 Dose
  - 6.11.7 Frequency
  - 6.11.8 Route
  - 6.11.9 Quantity and/or duration
  - 6.11.10 Name of prescriber
  - 6.11.11 Signature of order recipient
- 6.12** For laboratory test, when additional test request is made through phone on previously received Sample, before accepting the request check the following:
  - 6.12.1 Date and time of collection, should within 24 hours.
  - 6.12.2 Sample quantity and availability.
  - 6.12.3 Sample appropriateness for the newly requested test.
  - 6.12.4 An on-line request test is made in to the AI Shifa 3+ before delivery of the sample.
- 6.13** Critical result are also communicated verbally with read back verification taken from responder (refer to policy of communicating of urgent critical result).



## **7. Responsibility**

### **7.1 Assigned Staff Nurse Shall:**

- 7.1.1 Be familiar and apply this policy in routine care of patients.

### **7.2 Ward Shift in-charge Nurse Shall:**

- 7.2.1 Ensure that the policy is clearly followed.
- 7.2.2 Ensure that all ward nurses are appropriately trained on effective communication and documentation.
- 7.2.3 Ensure that compliance to the policy is monitored and any non-compliance is reported.

### **7.3 Head of Nursing Shall:**

- 7.3.1 Ensure staff is advised of the policy and any of its revision and new development.
- 7.3.2 Ensure policy is implemented and monitored.

### **7.4 SHO of caring psychiatry unit / First on-call psychiatry / First on-call Physician Shall:**

- 7.4.1 Be approachable and answerable to the calls and respond properly on time.

### **7.5 Laboratory HOD**

- 7.5.1 Monitor the overall procedure and follow up the implementation of the policy.

### **7.6 Laboratory In charge**

- 7.4.2 Monitor the compliance to this SOP.

### **7.7 Laboratory staff**

- 7.7.1 Should adhere to this policy.
- 7.7.2 Report any non-conformity in the policy to lab-in charge



**7.8 Quality Assurance Department Shall:**

- 7.8.1 Follow up the compliance to the policy and guide in investigating occurrence with regards to effective communication.

**7.9 Hospital Administration Shall:**

- 7.9.1 Be the ultimate decision leader on action plans improvement measures.

**8 Document History and Version Control Table**

Document History and Version Control			
Version	Description of Amendment	Author	Review Date
1	Initial Release	Dr. Nada Al Tamtami	February 2021
2	Review	Dr. Nada Al Tamtami	July 2025
Written by		Reviewed by	Approved by
Dr. Nada Al Tamtami		Dr. Salim Al Huseini Ph. Najla Al Zadjali Athari Al Maskari Sheikha Al Mamari	Dr. Bader Al Habsi





Policy and Procedure of Effective  
Communication of Verbal Orders and  
Read Back Verification

AMRH/ADMIN/P&P/006/Vers.02  
Effective Date: July 2022  
Review Date: July 2025

## 9 Related Documents

9.7 Appendix 1. Audit Tool.

## 10 Reference

Title of book/journal/articles/website	Author	Year of Publication	Page
Improving the Safety of Telephone or Verbal Orders.	Pennsylvania Patient Safety Authority	2006	1-6
Recommendations to Reduce Medication Errors Associated with Verbal Medication Orders and Prescriptions.	National Coordinating Council for Medication Error Reporting and Prevention.	2019	--



Policy and Procedure of Effective  
Communication of Verbal Orders and  
Read Back Verification

AMRH/ADMIN/P&P/006/Vers.02  
Effective Date: July 2022  
Review Date: July 2025

## Appendices

### Appendix 1. Audit Tool

Department: \_\_\_\_\_

Date: \_\_\_\_\_

S.No	Audit Process	Description of Criteria	Yes	Partial	No	N/A	Comments
1	Observation  Interview	Is the verbal communication of prescription or medication orders and laboratory test only used to urgent situations in which immediate written or electronic communication is not feasible?					
2	Observation  Interview	Are verbal orders and laboratory test not used when the prescriber is present except during a sterile procedure or in an emergency situation in which case a read-back is acceptable?					
3	Observation  Interview  Document review	Are verbal orders and laboratory test, when allowed, are immediately written down by the recipient, read back by the recipient at the same time, and confirmed or corrected by the prescriber?					
4	Observation  Interview	Is the order written before it is read back?					
5	Observation	Do both parties pronounce numerical digits separately—saying, for example, “one six” instead of “sixteen”?					

6	Observation Interview	For medication orders, does the prescriber spell the name of any unfamiliar medication, if either party feels this is necessary?					
7	Observation Interview	For medication orders, do prescribers include the purpose of the drug to ensure that the order makes sense in the context of the patient's condition?					
8	Observation Interview	For medication orders, do both parties include the mg/kg dose along with the patient's specific dose for all verbal pediatric medication orders?					
9	Observation Interview	For medication orders, do both parties express doses of medications by unit of weight (e.g., mg, g, mEq, mMol)?					
10	Observation Interview Document review	Does the recipient record each verbal order directly onto an order sheet in the patient's chart and includes phone or pager numbers in case it is necessary for follow-up questions?					
11	Observation Document review	Do recipients of verbal orders sign, date, time, and note the order at the time it is written on the order sheet or entered into the AI Shift 3+ system?					



Policy and Procedure of Effective  
Communication of Verbal Orders and  
Read Back Verification

AMRH/ADMIN/P&P/006/Vers.02  
Effective Date: March 2022  
Review Date: March 2025

12	Observation  Interview  Document review	Do prescribers verify, sign, and date orders within one hour?					
13	Observation  Document review	Are verbal orders, when spoken and when transcribed, only used with approved abbreviations?					
14	Document review	Are verbal medication orders given with complete information?					

**Audit Process:**

1. Observation
2. Interview
3. Document Review



Policy and Procedure of Effective  
Communication of Verbal Orders and  
Read Back Verification

AMRH/ADMIN/P&P/006/Vers.02  
Effective Date: March 2022  
Review Date: March 2025

Appendix 2. Document Request Form

Document Request Form			
<b>Section A: Completed by Document Requester</b>			
1. Requester Details			
Name	Dr. Nada Al Tamtami	Date of Request	July 2022
Institute	Al Masarra Hospital	Mobile	-
Department	Laboratory Department	Email	-
The Purpose of Request			
<input type="checkbox"/> Develop New Document	<input checked="" type="checkbox"/> Modification of Document	<input type="checkbox"/> Cancelling of Document	
2. Document Information			
Document Title	Policy and Procedure of Effective Communication of Verbal Orders and Read Back Verification		
Document Code	AMRH/ADMIN/P&P/006/Vers.02		
<b>Section B: Completed by Document Controller</b>			
<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Cancelled	<input type="checkbox"/> Forward To:.....	
Comment and Recommendation:			
Name	Kunooz Al Balushi	Date	July 2022
Signature		Stamp	





Policy and Procedure of Effective  
Communication of Verbal Orders and  
Read Back Verification

AMRH/ADMIN/P&P/006/Vers.02  
Effective Date: March 2022  
Review Date: March 2025

### Appendix 3. Document Validation Checklist

Document Validation Checklist					
Document Title: Policy & Procedure of Effective Communication of Verbal Orders and Read Back Verification		Document Code: AMRH/ADMIN/P&P/006/Vers.02			
No	Criteria	Meets the Criteria			Comments
		Yes	No	N/A	
<b>1.</b>	<b>Approved format used</b>				
1.1	Clear title – Clear Applicability	✓			
1.2	Index number stated	✓			
1.3	Header/ Footer complete	✓			
1.4	Accurate page numbering	✓			
1.5	Involved departments contributed	✓			
1.6	Involved personnel signature /approval	✓			
1.7	Clear Stamp	✓			
<b>2.</b>	<b>Document Content</b>				
2.1	Clear purpose and scope	✓			
2.2	Clear definitions	✓			
2.3	Clear policy statements (if any)	✓			
<b>3.</b>	<b>Well defined procedures and steps</b>				
3.1	Procedures in orderly manner	✓			
3.2	Procedure define personnel to carry out step	✓			
3.3	Procedures define the use of relevant forms			✓	
3.4	Procedures to define flowchart		✓		
3.5	Responsibilities are clearly defined	✓			
3.6	Necessary forms and equipment are listed	✓			
3.7	Forms are numbered	✓			
3.8	References are clearly stated	✓			
<b>4.</b>	<b>General Criteria</b>				
4.1	Policy is adherent to MOH rules and regulations	✓			
4.2	Policy within hospital/department scope	✓			
4.3	Relevant policies are reviewed	✓			
4.4	Items numbering is well outlined	✓			
4.5	Used of approved font type and size	✓			
4.6	Language is clear, understood and well structured	✓			
Recommendations ..... For implementation ..... More revision ..... To be cancelled					
Reviewed by: <u>Kunooz Al Balushi</u>			Reviewed by: <u>Irwin S. Rio</u>		

