SOP · DRM-SOP-003 · Version 1.0 · Approved by the ASF Expert Committee

Supports: 54.4

At a glance

- Systemic drugs with monitoring needs (for example isotretinoin) are prescribed under a written protocol (HOS-POL-001).
- Pregnancy prevention and the required blood tests are set before the first dose (DRM-FRM-002).
- Monitoring tests are repeated at the interval in the protocol, and the results are reviewed.
- A result outside the limit stops or changes the treatment until reviewed.
- Stop and get help straight away if: a systemic drug with monitoring needs is started without the required tests and pregnancy prevention checks.

1. Purpose

To make sure systemic dermatology drugs are monitored and safe to continue (54.4).

2. Scope

Applies to	Clinical and support staff in the hospital
Locations	All wards, clinics and departments of the facility
When	Whenever the activity described is carried out
Does not apply to	Activities covered by another document listed in section 15

3. Definitions

Term	Meaning
Clinical lead	The doctor or nurse in charge of the area at the time

4. Background

To make sure systemic dermatology drugs are monitored and safe to continue (54.4).

5. Responsibilities

Role	Responsibility	Competence
Dermatologist	Prescribes and reviews each monitoring result	Clinical lead
Ward pharmacist or nurse	Schedules the tests and tracks their results	Dermatologist

6. Materials and equipment

Item	Requirement	Condition
Records and forms named in this document	Current version	Checked before use

7. Safety

- Stop and call for help if a patient is at immediate risk. Do not delay urgent care to complete paperwork.

8. Before you start

- Confirm the forms and equipment named in this document are available and current.

9. Procedure

Step 1. Set up.

- Set the required tests and the pregnancy prevention plan before the first dose.

Key point: Set up.

Step 2. Monitor.

- Repeat the tests at the protocol interval and record the results (DRM-FRM-002).

Key point: Monitored.

Step 3. Act.

- Stop or change the treatment when a result is outside the limit, until reviewed.

Key point: Acted.

10. Decision points

- No decision points in this procedure.

11. Special situations

Situation	Action
Out of hours	Follow the same steps. Use the on-call contact on the wall of the area.

12. Escalation

- Any serious problem goes to the duty clinical lead at once and to the clinical director the same day.

13. Monitoring

Measure	Target	Frequency	Owner	If not met
Patients with tests and pregnancy prevention recorded before the first dose	100%	Monthly	Clinical lead	Hold the first dose
Monitoring tests done on schedule	100%	Monthly	Ward pharmacist	Escalate to the dermatologist

14. Records

Record	Kept in	Retention
Record named in this document	Patient record or the area file	the period set by the facility’s records policy years

15. Training

- Staff are trained in this document at induction and refreshed each year, with a recorded competency check.

16. Related documents

ID	Title	Use
DRM-FRM-002	Systemic drug monitoring and pregnancy prevention record	Record
HOS-POL-001	Medicines management policy (existing, reused)	Policy

17. Evidence

Reference	Note
E-006	ASF Policy Framework v1.2. Adapted.
E-009	ASF Expert Committee consensus.

18. Change history

Version	Date	What changed	Approval
1.0	the date of approval	First version	set Expert Committee approval

E-learning for this document

- **Dermatology Safety & Accreditation Standards** (AMB-17)

References

- Accréditation Sans Frontières (2026). ASF Policy Framework v1.2. (E-006)
- Accréditation Sans Frontières (2026). ASF Expert Committee consensus on Standard 1. (E-009)

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