OSCE checklist for prescription writing

An OSCE checklist for prescription writing covers checking the patient, allergies and the medicine, writing a clear legible order with the dose, units, route, frequency and dates, and checking the prescription again before signing.

OSCE checklist for prescription writing: steps to practise

1. If the patient is present, clean your hands, introduce yourself and confirm their full name and date of birth against the wristband.
2. Check and complete the allergy section first, including the reaction, before you prescribe anything. If allergy status is unknown, find out.
3. Check weight where relevant, kidney and liver function, pregnancy or breastfeeding, and the current medicines.
4. Check why the medicine is needed and whether it is the right choice, following local guidelines.
5. Look up the medicine in your national formulary, such as the BNF, and check the dose, route, interactions and contraindications.
6. Write the patient's name, date of birth and hospital number clearly on the chart, with the weight if needed.
7. Write the generic name, in capitals if your hospital requires, unless the brand matters for safety as the formulary advises.
8. Write the dose with its unit, the route, the frequency and times, the start date and the stop or review date.
9. Write units and micrograms in full, avoid other abbreviations that can be misread, never add a trailing zero after a decimal point and always put a zero before a decimal point.
10. For an as-required medicine, write the reason and the maximum amount in 24 hours.
11. Check the whole prescription again, sign and date it, and print your name and contact details.
12. Explain the medicine to the patient, including how to take it, the main side effects and what to report, and document the decision.

What candidates commonly forget

- Not checking and recording allergies first
- Not checking kidney function, weight or pregnancy
- Not looking up the dose
- Abbreviating units or micrograms
- Not writing the stop or review date
- Not signing, dating or printing the name

Local policy comes first

This is our own practice checklist. Your college, hospital or country may do some steps differently. Where local policy and this list disagree, follow local policy. Prescription layout differs between countries, so use the format your own hospital teaches.

Practise the hands-on steps with a classmate or in a skills lab, because an AI patient cannot watch your technique. You can practise the talking part with an AI patient, and try one station free with no sign-up. Next, try Reviewing an older patient's drug chart on admission. Back to the OSCE stations for medical finals page: OSCE stations for medical finals, or see the full OSCE checklist list.

Common questions

What is the OSCE checklist for prescription writing?

Confirm the patient, check allergies, kidney function and current medicines, choose the medicine, check the formulary, write the generic name, dose with units, route, frequency and dates clearly, check again, sign, explain and document.

Do I need to know doses by heart?

No. Always check a formulary and say that you would check.

Why write the generic name?

It reduces confusion between brand names. Some medicines are prescribed by brand for safety, as the formulary advises.

Sources

- BNF: British National Formulary
- NICE NG5: medicines optimisation

Checked 2026-11-13. Fees and rules change, so confirm them with the regulator before you book.