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Guidance Note on the prescribing responsibilities for medicines administered using Medicines Authorisation Records (MARs) and Medicines Authorisation and Administration Records (MAARs)

This guidance note applies to all general practitioners and primary care prescribing clinicians in North East London (NEL). Recent changes in the provision of Medicines Authorisation Records (MAR) and Medicines Authorisation and Administration Records (MAAR) charts by GP practices in NEL for patients requiring medicines administered by community nursing teams e.g. those receiving palliative or end-of-life (EoL) care have prompted the development of this guidance note. It serves as a reminder of primary care prescribing responsibilities and supports the safe transcribing of medicines information and directions for use onto MARs and Pan-London MAARs for patients who require assistance with medicines administration.

Key safety and additional information:

- Where GP practices are no longer issuing MAR charts or Pan-London MAARs, it is essential that the FP10 prescription provided to the community pharmacy includes all necessary administration details. This ensures community nursing teams can accurately transcribe information onto MAR/MAAR charts for safe medicines administration.
- For palliative and end-of-life (EoL) care, interim pre-populated charts may be used in place of Pan-London MAARs; however, best practice remains to include full administration instructions on the FP10 prescription to maintain safety and consistency.
- The FP10 prescription serves as the legal Patient Specific Direction (PSD) under the Human Medicines Regulations 2012. It authorises the supply of prescription only medicines (POM) by a registered pharmacy to a named patient, provided all legal requirements are met. It also acts as an instruction from the prescriber for medicines to be administered to a named patient after the prescriber has individually assessed the patient.
- NHS England London regional team is working towards standardising prescribing instructions for commonly prescribed medications used in Palliative and EoL care. NEL ICB will communicate any developments on this workstream when they occur.

Actions for Healthcare Professionals

Primary care prescribing clinicians (e.g. general practitioners and non-medical prescribers) should:

1. Write prescriptions (electronic or printed) clearly and completely to satisfy legal requirements for labelling prescribed medicines, including directions for administration/use of the medicines and relevant precautions.
2. Always provide clear, complete instructions on every prescription to ensure timely and safe administration of medicines (in accordance with [British National Formulary Prescribing Requirements](#)) and state the:

- Approved name of the medicine.
- Dosage form (e.g. tablets, capsules, liquid).
- Route of administration (e.g. oral, subcutaneous, intravenous).
- Strength of medicine (e.g. 50mg, 250mg/5ml).
- Dose and frequency to be taken/given:
 - For “when required” (PRN) medication, it is important to specify the dose, frequency, maximum daily dose and indication.
 - For medications intended to be administered via syringe driver it is important to specify dose ranges, maximum doses for each medication and always prescribe the accompanying diluent (e.g. water for injection, or sodium chloride 0.9%). The infusion duration should always be specified.
- Quantity prescribed or the number of days’ treatment to dispense.

3. Please note for controlled drugs prescribers must:

- Comply with any specific restrictions (e.g. [controlled drug prescribing requirements](#)) where applicable.
- State the quantity prescribed in words and figures.

4. Be aware of additional prescription requirements for writing quantities and amounts as conveyed in the [British National Formulary](#).

5. Include the reason for prescribing medication as part of the dosage instructions.

6. Consult local hospice guidelines for prescribing advice for palliative and EoL medicines:

- [St Joseph's Hospice Clinical Guidelines](#)
- [St Francis Hospice EoL Quick Reference Guide](#)

7. Ensure EMIS or SystmOne prescribing records are up to date to ensure community nursing teams can access the latest dosing instruction information via Summary Care Record (SCR) or East London Patient Record (ELPR).

Counselling Points

If you or your relative has medicines administered by a community nurse and there is an issue with the Medicines Authorisation Record (MAR) or Medicines Authorisation and Administration Records (MAAR) chart:

Do NOT give any medication yourself

- Please do not attempt to administer any medicines that are usually given to you by a community nurse. This is to keep you safe.

Contact the right healthcare team immediately

- Call the community nursing team responsible for giving your medicines.
- If unsure who that is, then contact your GP or the community pharmacy that supplies your medicines.

Keep your medicines safe and ready

- Store your medicines securely and do not change doses until the MAR chart is corrected.

Report any concerns quickly

- If you notice missing doses or errors such as medicines not signed as given or medicines listed on the MAR/MAAR chart that have been changed or stopped by a healthcare professional, let the community nursing team or GP know straight away.

Please continue to record suspected adverse drug reactions to the [Yellow Card scheme](#).

Please continue to record medicine patient safety incidents to [Learning From Patient Safety Events](#).

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