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REVIEW ON HOSPITAL FORMULARY: AN OVERVIEW

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Abstract

A hospital formulary represents a comprehensive and curated list of pharmaceutical preparations that have been specifically approved for administration within a healthcare facility. This systematic compilation functions as an indispensable instrument for maintaining medication safety standards, ensuring clinical efficacy in treatment protocols, and managing pharmaceutical expenditures responsibly. The development and maintenance of formularies falls under the purview of specialized committees—typically the Pharmacy and Therapeutics (P&T) Committee—which conducts rigorous evaluation of medicines across multiple parameters: therapeutic effectiveness, adverse effect profiles, manufacturing standards, and fiscal implications. The standardization of therapeutic agents through formulary implementation substantially diminishes the incidence of medication administration errors, promotes evidence-based prescribing methodologies, and ultimately enhances the quality of clinical outcomes for patients. Additionally, formularies serve as authoritative references for clinical decision-making, offering detailed information regarding therapeutic indications, appropriate dosage regimens, contraindications, and suitable pharmacological alternatives. The hospital formulary thus constitutes a cornerstone of institutional pharmaceutical governance, facilitating optimized medication regimens, fiscal prudence in resource allocation, and elevated standards of patient safety protocols.

Keywords: Hospital Formulary, Pharmaceutical Management, Clinical Governance, Drug Selection, Cost Control.

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INTRODUCTION

Within the healthcare system, a hospital formulary exists as an officially sanctioned inventory of medicinal preparations approved for utilization within a particular healthcare organization. This institutional tool serves as a fundamental mechanism for achieving the dual objectives of safe medication administration and cost-effective pharmaceutical management [1-3]. The formulary system is conceived, developed, and periodically revised by specialized committees comprising diverse healthcare professionals—physicians from multiple specialties, clinical pharmacists, and nursing representatives—who systematically evaluate each medication candidate using established criteria centered on clinical utility, safety documentation, product consistency, and economic

viability [4, 5]. Through the systematic curation of the drug selection process, formularies function to minimize pharmaceutical errors, establish control mechanisms for medication expenses, and establish pathways for enhanced patient outcomes. Beyond serving as a listing mechanism, formularies provide comprehensive guidance encompassing therapeutic indications, prescribed dosage parameters, recognized contraindications, and available therapeutic substitutes, thereby facilitating the clinical decision-making process for members of the healthcare team. The formulary framework exemplifies a methodical strategy for pharmaceutical selection and consumption patterns across healthcare delivery systems, with the explicit intention of achieving consistency in medication therapies while preserving excellence in clinical administration. The P&T Committee ensures systematic oversight through regular evaluation and revision cycles, allowing the formulary to remain contemporaneous with emerging clinical evidence and shifting institutional requirements [6,7,8].

HOSPITAL FORMULARY DEFINITION

A hospital formulary constitutes a formally recognized compilation of medicinal agents approved for institutional deployment, specifically designed to guarantee safe, efficacious, and fiscally responsible pharmaceutical administration. The formulary document is methodically prepared and overseen by the Pharmacy and Therapeutics Committee, a multidisciplinary assembly encompassing physicians, pharmacists, and allied healthcare specialists [6].

PHARMACY AS A DISCIPLINE

The pharmaceutical discipline represents a specialized healthcare field dedicated to the formulation, preparation, distribution, and optimal utilization of medicinal substances in clinical practice. This profession integrates scientific methodology with practical clinical application, guaranteeing that therapeutic agents are deployed with maximum efficacy and adherence to safety protocols. Pharmacists function as crucial stakeholders within healthcare systems by maintaining accountability for pharmaceutical quality standards, monitoring for potential adverse reactions, and guaranteeing the therapeutic appropriateness of medication regimens administered to patients [9].

BEST PRACTICE IN HEALTHCARE

Best practices constitute the most proficient and productive methodologies, procedures, and approaches that have demonstrated consistent success in achieving favorable outcomes, informed by available clinical research, professional knowledge, and universally accepted guidelines. Within pharmaceutical and healthcare contexts, best practices emerge from systematic investigation, accrued professional experience, and established regulatory frameworks, functioning to maintain the highest standards of safety, efficacy, and uniformity in clinical practice [10].

STANDARDS AND COMPLIANCE

Standards function as officially recognized criteria and performance metrics established by authorized professional bodies to maintain quality assurance, safety compliance, and consistency in professional execution. Within pharmaceutical and healthcare environments, these standards delineate the minimum acceptable performance threshold necessary for safeguarding patient welfare and guaranteeing dependable clinical outcomes [11].

DRUG COST ANALYSIS

Drug cost encompasses the complete financial expenditure related to medication procurement, inventory management, storage logistics, distribution mechanisms, and utilization within healthcare institutions. Beyond the basic acquisition expense of pharmaceutical products,

drug costs include supplementary financial considerations such as transportation charges, warehouse facilities, material handling, dispensing operations, and administrative application. Drug cost management remains a critical component of healthcare fiscal planning, institutional financial administration, and individual patient economic accessibility [12].

COMMITTEE MEMBERS AND ROLES

The formulary development and maintenance process constitutes a collaborative undertaking directed by the Pharmacy and Therapeutics Committee, composed of specialized healthcare professionals contributing diverse expertise. Medical doctors serve essential functions within the committee structure by bringing clinical knowledge related to medication efficacy, safety assessment, and therapeutic appropriateness for diverse patient populations. Clinical pharmacists contribute comprehensive expertise in pharmaceutical chemistry, medication interaction patterns, formulation stability, supply accessibility, and comparative cost analysis, while simultaneously maintaining formulary documentation systems and coordinating periodic revisions [6]. Nursing personnel contribute essential practical knowledge concerning medication delivery techniques, treatment adherence factors, and clinical safety considerations in hospital environments. Hospital leadership and administrative personnel participate in committee activities to guarantee that pharmaceutical decisions remain compatible with institutional operational frameworks, financial parameters, and resource distribution practices. In certain facilities, additional specialists including pharmacologists, laboratory microbiologists, or infection prevention coordinators contribute specialized knowledge regarding antimicrobial therapeutics, resistance surveillance, and specialized pharmaceutical interventions. This collaborative structure guarantees that institutional formularies facilitate rational medication selection, comprehensive safety assurance, and economically sustainable healthcare operations [6].

SIGNIFICANCE OF HOSPITAL FORMULARY

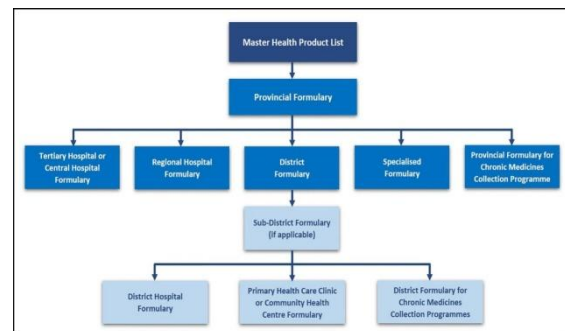


Figure 01: Hierarchical Structure of Hospital and Regional Formulary Systems

A hospital formulary represents a formally approved and institutionally governed list of medications that are authorised for use within a healthcare facility. It functions

as a central instrument for achieving safe, effective, and economically sustainable patient care by ensuring that medication selection is grounded in documented efficacy, safety, quality assurance, and cost-effectiveness. By restricting medicine availability to those that have undergone structured evaluation by a Pharmacy and Therapeutics (P&T) Committee, formularies reduce irrational prescribing and promote uniform therapeutic practices across departments, thereby strengthening institutional pharmaceutical governance [7].

One of the most significant contributions of a hospital formulary is its role in promoting rational prescribing. Medicines included in the formulary are selected through systematic assessment of clinical evidence, adverse effect profiles, and quality standards. This approach minimizes inappropriate drug use, therapeutic duplication, and medication administration errors, which are frequently associated with unrestricted prescribing environments [13]. In this manner, the formulary serves as a practical mechanism for implementing evidence-based medicine within daily clinical practice [7].

Patient safety is substantially enhanced through formulary-based controls. Formularies restrict the use of hazardous, redundant, or non-essential medications and promote standardized treatment pathways and clinical protocols. Such standardization reduces variability in care delivery, lowers the incidence of adverse drug reactions, and improves continuity of care across clinical units. The consistent application of approved therapeutic options supports safer medication practices and improves overall clinical outcomes [6].

From an economic perspective, hospital formularies play a pivotal role in cost containment and improving access to medicines. Concentrated procurement of selected drugs enables bulk purchasing and negotiated pricing, resulting in reduced per-unit costs. These efficiencies translate into lower treatment expenditures for healthcare institutions and patients, which is particularly important in resource-constrained settings. Additionally, formulary-driven generic substitution policies allow institutions to achieve significant savings without compromising therapeutic effectiveness [14].

Ensuring uninterrupted availability of essential and life-saving medicines is another core function of the hospital formulary. By prioritizing frequently used and emergency medications, formularies stabilize supply chains and reduce the risk of critical drug shortages. Limiting excessive brand variations for the same active pharmaceutical ingredient further simplifies inventory management and minimizes confusion among healthcare professionals, thereby supporting safer medication administration [8].

Hospital formularies also function as authoritative reference documents for healthcare professionals. They provide readily accessible information on approved indications, dosage forms, strengths, administration guidelines, contraindications, and therapeutic alternatives.

This documented guidance supports informed clinical decision-making by physicians, pharmacists, and nursing staff and promotes consistency in prescribing practices throughout the institution [7].

Operational efficiency within the pharmacy department is significantly improved through formulary implementation. Streamlined procurement processes, standardized inventory control, and structured storage management reduce pharmaceutical wastage and the accumulation of expired stock. These efficiencies support both logistical optimization and financial sustainability of hospital pharmacy services [6].

In addition, hospital formularies integrate evidence-based medicine into routine healthcare delivery. Medication selection is guided by current clinical literature, professional guidelines, and documented therapeutic outcomes, with periodic review ensuring alignment with emerging research and institutional needs. Formularies also serve an important educational function, providing structured learning resources for medical, pharmacy, and nursing students and promoting consistent prescribing standards among trainees and early-career practitioners [13].

CHALLENGES AND LIMITATIONS OF HOSPITAL FORMULARY SYSTEMS

Despite their proven benefits, hospital formulary systems face several practical challenges that can limit their effectiveness if not adequately addressed. One of the most frequently encountered barriers is resistance from prescribers, particularly senior clinicians who may perceive formulary restrictions as constraints on professional autonomy. Such resistance can lead to non-compliance, off-formulary prescribing, and reduced acceptance of standardized therapeutic protocols, thereby undermining the objectives of rational drug use [6].

Another significant challenge is the influence of pharmaceutical promotion on prescribing behavior. Marketing activities may affect clinicians' perceptions of newer or branded medications, creating pressure for formulary inclusion without sufficient evidence of added therapeutic value. Robust conflict-of-interest policies and transparent decision-making processes are therefore essential to preserve the scientific integrity of formulary decisions [7].

Resource constraints also limit formulary implementation, especially in low- and middle-income countries. Many healthcare institutions lack adequate numbers of trained clinical pharmacists, reliable drug utilization data systems, and digital infrastructure necessary for continuous formulary monitoring and revision. These limitations reduce the capacity of Pharmacy and Therapeutics Committees to conduct regular reviews and enforce adherence effectively [6,16].

In addition, frequent drug shortages and supply chain disruptions complicate formulary management. Unavailability of approved medicines may necessitate

emergency substitutions, increasing the risk of medication errors and inconsistencies in therapy. Institutions must therefore maintain contingency strategies to ensure continuity of patient care during supply interruptions [12].

ROLE OF HOSPITAL FORMULARIES IN QUALITY IMPROVEMENT PROGRAMS

Hospital formularies contribute significantly to institutional quality improvement initiatives by supporting standardized treatment practices and measurable clinical outcomes. When formulary policies are aligned with clinical guidelines, they promote uniform therapeutic approaches that reduce unwarranted variability in patient care. This standardization facilitates benchmarking of outcomes, identification of deviations from best practice, and targeted corrective interventions [8].

Formularies also support medication safety programs by enabling structured adverse drug reaction monitoring and drug utilization evaluations. Regular analysis of prescribing patterns allows healthcare institutions to identify inappropriate drug use, high-risk medications, and opportunities for safer alternatives. These activities directly contribute to continuous quality improvement and patient safety enhancement [6,20].

Furthermore, formulary-based prescribing supports accreditation and regulatory compliance by ensuring that medication management processes meet established professional and institutional standards. Documentation of formulary decisions, review cycles, and adherence metrics provides tangible evidence of quality governance during audits and inspections [11].

Table 01: Common Challenges in Hospital Formulary Implementation and Mitigation Strategies

Challenge	Impact on Practice	Mitigation Approach
Prescriber resistance	Non-adherence to formulary	Clinician engagement, education
Marketing influence	Biased drug selection	Transparent P&T decisions
Resource limitations	Infrequent formulary review	Training, staffing support
Drug shortages	Therapy interruptions	Alternative protocols
Data constraints	Poor monitoring	Improved documentation systems

Table 02: Contribution of Hospital Formularies to Healthcare Quality Improvement

Quality Domain	Formulary Contribution	Outcome
Medication safety	Restricted high-risk drugs	Reduced adverse events
Clinical consistency	Standardized protocols	Uniform care delivery
Cost efficiency	Generic substitution	Financial sustainability

Regulatory compliance	Documented governance	Accreditation support
Education	Reference-based prescribing	Improved clinical competence

EXEMPLARY HOSPITAL FORMULARY MODELS

Globally, several formulary systems serve as reference models for institutional practice. The World Health Organization Essential Medicines List provides a foundational framework for hospital formulary development across many countries, particularly in public-sector healthcare systems [15]. In India, the formulary of the All India Institute of Medical Sciences represents a government-operated tertiary-care model emphasizing evidence-based selection and affordability [16]. The National Health Service hospital formulary system in the United Kingdom demonstrates large-scale standardization across institutions, supporting uniform clinical practice and cost efficiency [17]. Private-sector healthcare networks such as Apollo Hospitals maintain formularies that balance clinical evidence with financial sustainability [18]. Government medical college hospital formularies in India further integrate essential and emergency medicines aligned with national health programs, ensuring equitable access to critical therapies [19].

FORMULARY MAINTENANCE AND ONGOING MANAGEMENT

The development of a hospital formulary begins with the establishment of a multidisciplinary Pharmacy and Therapeutics Committee, which assumes responsibility for medication selection and policy formulation [6]. Institutional pharmaceutical requirements are assessed through analysis of disease patterns, patient demographics, and levels of care provided. Comprehensive data on therapeutic efficacy, safety, quality, and cost are systematically reviewed using authoritative clinical guidelines and evidence-based literature [6,13].

Following selection, medicines are categorized into therapeutic or pharmacological classes and compiled into a structured formulary document containing detailed prescribing information. The proposed formulary undergoes committee review, approval, and dissemination through both print and electronic formats. Ongoing education and training ensure effective adoption, while continuous evaluation allows timely updates and removal of obsolete or unsafe medicines [6].

Formulary maintenance is an ongoing process involving regular review by the P&T Committee, monitoring of utilization patterns, safety surveillance, and pharmaco-economic assessment. Feedback mechanisms and audit-based evaluations promote clinician adherence and continuous improvement in prescribing practices. Active involvement of clinical pharmacists further strengthens compliance by providing real-time guidance

and facilitating therapeutic substitutions when necessary [20,21].

ROLE OF HOSPITAL FORMULARY IN ANTIMICROBIAL STEWARDSHIP





Hospital Core Elements	Priorities for Hospital Core Element Implementation
Hospital Leadership Commitment  Dedicate necessary human, financial, and information technology resources.	Antibiotic stewardship physician and/or pharmacist leader(s) have antibiotic stewardship responsibilities in their contract, job description, or performance review.
Accountability  Appoint a leader or co-leaders, such as a physician and pharmacist, responsible for program management and outcomes.	Antibiotic stewardship program is co-led by a physician and pharmacist.*
Pharmacy/Stewardship Expertise  Appoint a pharmacist, ideally as the co-leader of the stewardship program, to help lead implementation efforts to improve antibiotic use.	Antibiotic stewardship physician and/or pharmacist leader(s) have completed infectious diseases specialty training, a certificate program, or other training on antibiotic stewardship.
Action  Implement interventions, such as prospective audit and feedback or preauthorization, to improve antibiotic use.	Antibiotic stewardship program has facility-specific treatment recommendations for common clinical condition(s) and performs prospective audit/feedback or preauthorization.
Tracking  Monitor antibiotic prescribing, impact of interventions, and other important outcomes, use <i>C. difficile</i> infections and resistance patterns.	Hospital submits antibiotic use data to the NHSN Antimicrobial Use Option.
Reporting  Regularly report information on antibiotic use and resistance to prescribers, pharmacists, nurses, and hospital leadership.	Antibiotic use reports are provided at least annually to target feedback to prescribers. In addition, the antibiotic stewardship program monitors adherence to facility-specific treatment recommendations for at least one common clinical condition.
Education  Educate prescribers, pharmacists, nurses, and patients about adverse reactions from antibiotics, antibiotic resistance, and optimal prescribing.	No implementation priority identified.

Figure 02: Core Elements of Hospital Antibiotic

Stewardship Programs and Implementation Priorities

Antimicrobial resistance has emerged as one of the most critical global public health threats, driven largely by inappropriate and excessive antibiotic use in hospital settings. Hospital formularies play a central role in antimicrobial stewardship by regulating the availability and use of antimicrobial agents through structured policies, restriction mechanisms, and evidence-based guidance. By limiting unrestricted access to broad-spectrum and last-line antibiotics, formularies reduce unnecessary exposure to potent agents and preserve their effectiveness for severe or resistant infections [6], [12].

Formulary-driven antimicrobial policies facilitate rational antibiotic selection by aligning prescribing practices with institutional resistance patterns and national treatment guidelines. Pharmacy and Therapeutics Committees, often in collaboration with microbiology departments, periodically review antimicrobial utilization data and resistance trends to determine which agents should be included, restricted, or removed from the formulary. This coordinated approach ensures that antimicrobial therapy remains both clinically appropriate and epidemiologically responsible [10], [12].

In addition to restricting access, hospital formularies support antimicrobial stewardship by standardizing empirical therapy protocols and encouraging timely de-escalation based on culture and sensitivity results. These measures reduce prolonged exposure to broad-spectrum agents and lower the incidence of hospital-acquired infections caused by multidrug-resistant organisms. Evidence indicates that formulary-based stewardship interventions improve clinical outcomes without increasing mortality or treatment failure rates [6], [13].

HOSPITAL FORMULARY AND MEDICATION ERROR PREVENTION

Medication errors remain a leading cause of preventable harm in hospitalized patients, occurring at multiple stages including prescribing, dispensing, administration, and monitoring. Hospital formularies significantly reduce the risk of such errors by limiting the number of available drug options, thereby decreasing cognitive burden on prescribers and nursing staff. Standardized medication lists reduce confusion between look-alike and sound-alike drugs and promote familiarity with approved therapies [6], [8].

Formulary systems enhance prescribing accuracy by providing clear guidance on dosing, contraindications, and therapeutic alternatives. When formularies are integrated into institutional policies, they reduce reliance on memory-based prescribing and encourage adherence to established standards of care. This structured approach has been shown to decrease dosing errors, inappropriate drug selection, and preventable adverse drug reactions [7], [13].

Furthermore, formularies support medication safety by enabling systematic monitoring of adverse drug events and facilitating timely corrective actions. Regular review of formulary-related safety data allows institutions to identify high-risk medications and implement additional safeguards, such as prescribing restrictions or enhanced monitoring requirements. These activities contribute directly to improved patient safety outcomes and institutional quality assurance [6], [20].

EDUCATIONAL IMPACT OF HOSPITAL FORMULARIES

Hospital formularies serve as valuable educational tools for healthcare professionals at various stages of training. For medical students, nursing trainees, and pharmacy students, formularies provide structured exposure to rational prescribing principles and evidence-based medicine. By familiarizing trainees with approved drug selections and standard treatment protocols, formularies promote consistency in clinical education and reduce variation in early prescribing habits [13], [21].

For practicing clinicians, formularies function as continuing education resources by incorporating updated therapeutic guidelines and safety information. Regular formulary revisions expose healthcare professionals to evolving evidence and encourage lifelong learning. Educational sessions conducted during formulary updates further reinforce appropriate prescribing practices and institutional standards [6].

Clinical pharmacists play a critical role in leveraging formularies as educational instruments by providing bedside guidance, participating in ward rounds, and supporting interdisciplinary discussions. This integration of education with clinical practice enhances prescribing competence and strengthens collaborative healthcare delivery models [6], [21].

INSTITUTIONAL ACCOUNTABILITY AND REGULATORY COMPLIANCE

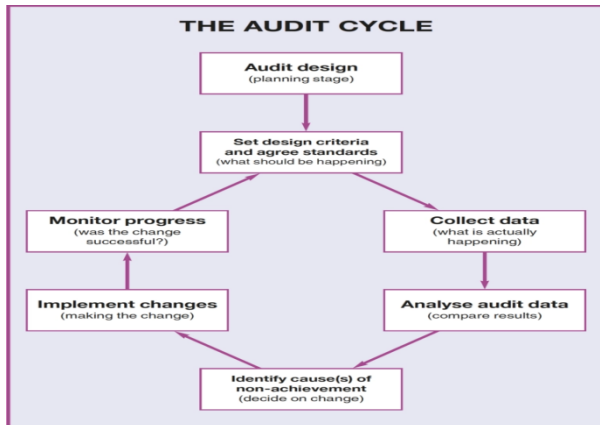


Figure 03: The Clinical Audit Cycle in Hospital Practice
Hospital formularies contribute significantly to institutional accountability and regulatory compliance by providing documented evidence of structured medication governance. Accreditation bodies and regulatory authorities increasingly emphasize standardized medication management processes as indicators of healthcare quality. Formularies demonstrate institutional commitment to patient safety, rational drug use, and financial stewardship [11], [20].

Documented formulary policies, review records, and utilization data support transparency and traceability in pharmaceutical decision-making. During audits and inspections, these records provide objective evidence that medication selection and use are governed by systematic and ethical processes rather than arbitrary or commercial influences [6], [11].

Moreover, formulary-driven governance strengthens institutional resilience by enabling proactive identification of risks related to medication safety, cost escalation, and supply chain disruptions. This proactive approach enhances organizational preparedness and supports sustainable healthcare operations [6], [12].

Table 03: Role of Hospital Formularies in Addressing Key Healthcare Challenges

Healthcare Challenge	Formulary-Based Intervention	Outcome
Antimicrobial resistance	Antibiotic restriction policies	Reduced resistance
Medication errors	Standardized drug lists	Improved safety
Healthcare inequity	Essential medicine prioritization	Improved access
Rising drug costs	Generic substitution	Cost containment
Regulatory compliance	Documented governance	Audit readiness

Table 03: Importance of Hospital Formulary in all domains

Domain	Impact of Formulary System
Clinical care	Improved therapeutic consistency
Patient safety	Reduced adverse drug events
Education	Enhanced prescribing competence
Economics	Sustainable resource utilization
Governance	Strengthened institutional control

FUTURE PERSPECTIVES IN HOSPITAL FORMULARY MANAGEMENT

The future of hospital formulary systems is closely linked to advances in healthcare technology and data-driven decision-making. Increasing integration of electronic health records with formulary databases is expected to enhance real-time prescribing guidance, safety alerts, and monitoring of formulary adherence. Such integration will allow patient-specific recommendations based on clinical parameters, thereby improving precision in medication use [20].

Another emerging trend is the incorporation of pharmacoeconomic and outcome-based evaluation into formulary decisions. As healthcare costs continue to rise, institutions are increasingly prioritizing value-based medicine selection, emphasizing therapeutic benefit relative to cost rather than acquisition price alone. This approach supports long-term financial sustainability without compromising patient care quality [14].

Strengthening the role of clinical pharmacists is also anticipated to play a crucial role in the evolution of formulary systems. Active pharmacist participation in ward rounds, therapeutic decision-making, and prescriber education enhances formulary compliance and optimizes patient outcomes. In developing healthcare systems, investment in clinical pharmacy education and workforce expansion will be essential for effective formulary governance [6,21].

CONCLUSION

Hospital formulary systems represent a structured and evidence-oriented approach to medication governance that is essential for modern healthcare institutions operating under increasing clinical complexity and financial constraints. By providing a formally approved framework for medicine selection and use, formularies enable healthcare organizations to align therapeutic decisions with established standards of efficacy, safety, and quality while maintaining responsible stewardship of limited resources. The formulary thus serves as a practical interface between clinical medicine, pharmaceutical science, and health system management, ensuring that patient care remains both scientifically sound and economically viable.

From a patient safety perspective, formularies contribute substantially to the reduction of medication-related risks. Standardized drug selections, clear prescribing guidance, and defined therapeutic alternatives reduce the likelihood of adverse drug reactions, therapeutic duplication, and medication errors. When integrated with monitoring and review mechanisms, formulary systems allow institutions to identify emerging safety concerns and respond proactively. This continuous feedback loop enhances the overall reliability of medication-use processes and supports sustained improvements in patient outcomes.

Hospital formularies also play a critical role in promoting equitable access to essential medicines. By prioritizing cost-effective and clinically proven therapies, formularies help ensure that treatment availability is determined by patient need rather than financial capacity. This function is especially relevant in publicly funded and resource-limited healthcare settings, where efficient allocation of pharmaceutical resources is necessary to maximize population-level health benefits. Alignment with national and international essential medicines frameworks further reinforces the role of formularies as instruments of public health policy implementation.

In addition to their clinical and economic impact, formularies serve as educational and professional development tools. They provide structured reference material for physicians, pharmacists, nurses, and healthcare trainees, reinforcing principles of rational prescribing and evidence-based practice. Regular formulary review and update processes encourage continuous learning and adaptation to emerging scientific knowledge, thereby fostering a culture of quality improvement within healthcare institutions.

In summary, the hospital formulary extends far beyond its function as a list of approved medicines. It represents a dynamic system of pharmaceutical governance that integrates clinical evidence, safety considerations, economic evaluation, and ethical responsibility. As healthcare systems continue to evolve in response to rising costs, antimicrobial resistance, and increasing patient expectations, robust and well-governed formulary systems will remain central to achieving safe, effective, and sustainable medication management. Strengthening institutional commitment to formulary principles and investing in multidisciplinary collaboration will be essential for realizing the full potential of hospital formularies in improving healthcare quality and outcomes.

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CONFLICT OF INTEREST

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INFORMED CONSENT

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AUTHOR CONTRIBUTION

All authors contributed equally towards the process.

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