

Healthcare Supply Chain Management Checklist: Inventory & Procurement

Demand Forecasting & Planning

Review and validate demand forecasts to ensure accurate inventory levels.

| Historical Demand Data (Units) | |
|--------------------------------|--|
| Enter a number | |
| | |
| Forecast Revision Date | |
| Enter date | |
| Forecast Accuracy Rate (%) | |
| Enter a number | |
| Forecasting Method Used | |
| Simple Average | |
| Moving Average | |
| Exponential Smoothing | |
| Statistical Modeling | |

| Write something | |
|---|--|
| | |
| | |
| | |
| Safety Stock Level (Units) | |
| Enter a number | |
| | |
| | |
| ventory Levels & Stockouts | |
| nitor current inventory levels and identify potential stockout risks. | |
| intol current inventory levels and identity potential stockout risks. | |
| Current Stock Level (Item A) | |
| Enter a number | |
| | |
| | |
| Reorder Point (Item A) | |
| Enter a number | |
| | |
| | |
| Maximum Stock Level (Item A) | |
| Enter a number | |
| | |
| | |
| | |
| Stockout Risk (Item B) | |
| Low | |
| Stockout Risk (Item B) Low Medium High | |

| Enter date | | |
|--|--------------------------------------|--|
| Days of Supply (It | em D) | |
| Enter a number | | |
| Automated Alerts | Enabled? | |
| Yes No | | |
| | formance & Contra | |
| aluate supplier relia | bility, pricing, and adherence to co | |
| aluate supplier relia | bility, pricing, and adherence to co | |
| aluate supplier relia | bility, pricing, and adherence to co | |
| On-Time Delivery Enter a number | bility, pricing, and adherence to co | |
| On-Time Delivery Enter a number Order Accuracy R Enter a number | bility, pricing, and adherence to co | |

| Contract Expiration Date Status Within 3 Months Within 6 Months Within 9 Months Beyond 9 Months |
|---|
| Last Contract Renewal Date Enter date |
| Summary of Recent Performance Review Write something |
| Supporting Documentation (e.g., Audit Reports) |
| Procurement Process Adherence |
| Verify compliance with established procurement policies and procedures. |
| Purchase Order Approval Route Followed? Standard Route Exception Route No Approval Required (Unauthorized) |

| Enter a number | | |
|------------------------------------|---------------------------------------|--|
| Vendor Contract Used? | | |
| Yes - Existing Contract | | |
| No - New Contract Required | | |
| Date of PO Approval | | |
| Enter date | | |
| Required Approvals Receive | d? | |
| Department Head | | |
| Finance | | |
| Legal | | |
| Other | | |
| Justification for Deviation (if | applicable) | |
| Write something | | |
| | | |
| andon Monograma | t C Tugolaine | |
| erder Managemen | l & Tracking | |
| onitor order status, delivery time | elines, and manage any discrepancies. | |

Enter a number...

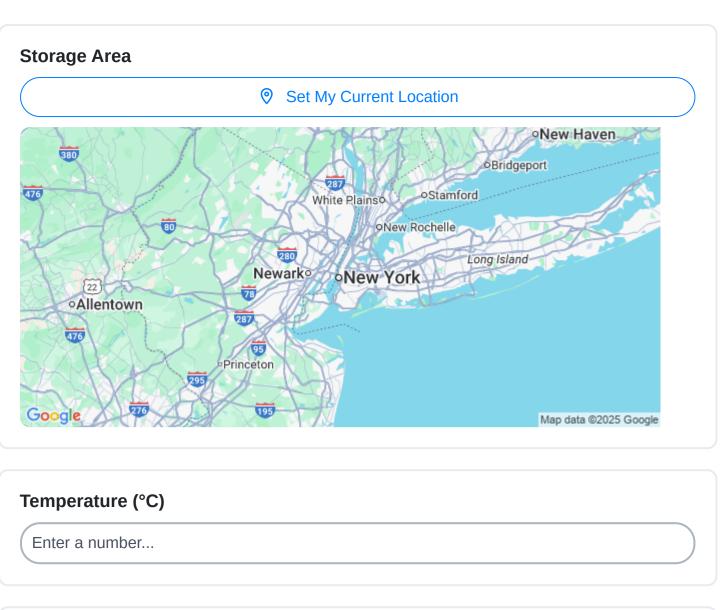
| Order Placement Date |
|---|
| Enter date |
| |
| Order Status Placed Shipped Received Delayed |
| Cancelled |
| Estimated Delivery Date |
| Enter date |
| Tracking Number |
| Enter a number |
| Shipping Notes/Instructions |
| Write something |
| Carrier |
| UPS |
| ☐ FedEx ☐ USPS |
| Other |

| Actual Delivery Date | |
|--|--------------------------------------|
| Enter date | |
| Possiving 9 Inchastion | |
| Receiving & Inspection erify receipt of goods, inspect for damage or defects | s, and reconcile with purchase order |
| Purchase Order Number | |
| Enter a number | |
| | |
| Quantity Received | |
| Enter a number | |
| Condition of Packaging | |
| Excellent | |
| Good | |
| Damaged | |
| Compromised | |
| Description of Damage (if any) | |
| Write something | |
| | |

| Items Missing (if any) | |
|-------------------------------------|-------------------------|
| ltem 1 | |
| ☐ Item 2 | |
| ☐ Item 3 | |
| Upload Photo of Packa Lupload File | ging/Items (if damaged) |
| Lot Number Verified? | |
| Yes | |
| No | |
| Date of Receipt | |
| | |

Storage & Handling

Ensure proper storage conditions, FIFO rotation, and adherence to safety protocols.



| Proper Containment Used? | | |
|--------------------------|--|--|
| Yes | | |
| No | | |
| | | |

| Last Inspection Date | |
|--|---|
| Enter date | |
| Handling Comments/Obs | ervations |
| Write something | |
| | |
| | |
| _ | acy & Cycle Counts |
| nduct regular cycle counts | to maintain accurate inventory records. |
| Cycle Count Date | |
| Enter date | |
| | |
| | |
| Item Quantity on Hand | |
| Item Quantity on Hand Enter a number | |
| | |
| Item Quantity on Hand Enter a number System Quantity on Hand | |
| Enter a number | |
| Enter a number System Quantity on Hand | |
| Enter a number System Quantity on Hand Enter a number | |
| Enter a number System Quantity on Hand | |

| Enter a number | | |
|---|----------------|----|
| Discrepancy Explanation (if applicab | e) | |
| Write something | | |
| | | |
| | | |
| Resolution Required? | | |
| Yes | | |
| No | | |
| Resolution Notes | | |
| Write something | | |
| | | |
| | | |
| Cycle Counter Signature | | |
| | | |
| | | |
| | | |
| aste & Obsolescence | Managemer | nt |
| ntify and manage expired or obsolete in | ventory items. | |
| | | |

| Enter a number | |
|--|-------------------------|
| Reason for Obsolescence | |
| Product Discontinued | |
| Regulatory Change | |
| Slow-Moving Item | |
| Damage/Defect | |
| Detailed Description of Waste | /Obsolete Item |
| Write something | |
| | |
| Supporting Documentation (e | .g., Expiration Report) |
| | .g., Expiration Report) |
| ♣ Upload File | .g., Expiration Report) |
| ♣ Upload File Disposal Method | .g., Expiration Report) |
| □ Upload File Disposal Method □ Recycling □ | .g., Expiration Report) |
| Disposal Method Recycling Return to Vendor | .g., Expiration Report) |
| Disposal Method Recycling Return to Vendor Secure Disposal | |
| Disposal Method Recycling Return to Vendor Secure Disposal Other | |

Security & Access Control

Verify appropriate security measures are in place for inventory storage and access.

| Access Levels Granted (e.g., Admin, Restricted) Admin Restricted Read-Only | |
|---|---|
| Number of Authorized Personnel Enter a number |) |
| Last Access Review Date Enter date |) |
| Authentication Method (e.g., Password, Biometric) Password Biometric PIN | |
| Notes on Access Restrictions or Special Permissions Write something | |