Appendix A1: Included assessment tool items

Assessment items were included in the assessment tool if the total item weight was ≥30. The included items with their respective weights are listed in **Table** . The included assessment items were combined into the consolidated assessment tool.

Table A1. Consolidated assessment tool

Item[a]	Weight[b]
PTC's institutional integration	
Presence of an organisational regulation document: established policies and guidelines; defined responsibilities	74 248
Subcommittees or ad hoc committees: presence, type, and responsibilities	222
PTC member characteristics	
Number of members	128
Expertise of members	232
Disclosure of conflicts of interest: presence; frequency; strategy to deal with conflicts of interest	91 37 40
Chairperson: presence and expertise	53
Pharmacist: presence; responsibilities	47 66
PTC performance indicators	
Use of performance indicators by the PTC	81
PTC meeting structure	
Meeting frequency	183
Meeting duration	30
Meeting minutes: preparation; distribution and accessibility	52 42
Percentage of attendance in the last year	30
Formulary decision-making	
Responsible body for formulary decision-making	190
Established guidelines for decision-making	57
Request process: presence of standardised request form; allowance for request; disclosure of conflicts of interest of requestor; included information	76 44 53 68
Formulary additions: presence of standardised process	107
Formulary deletions: presence of standardised process; triggers	105 66
Revisions: presence of standardised process; established criteria which drugs are revised (e.g. newly added drugs); triggers; frequency; information used for revisions	211 167 40 86 53

Formulary decision-making cont.	
Drug monograph: preparation for additions, deletions, and/or revisions; person preparing the drug monograph; considerations made in the drug monograph ; timeframe for preparation; established mechanism for expedited reviews; summary into advantages and disadvantages	54 40 48 30 40 31
Considerations: considerations made; safety; cost; efficacy; comparative effectiveness; clinical need; internal data; studies supported by the manufacturer; clinical practice guidelines; decisions by other hospitals; patient convenience ; ease of medication preparation and administration; breadth of approved indications; expert opinions; use of minimal duplication strategy; standardised process for weighting considerations; required scientific level of studies and standardised process to evaluate studies	434 211 331 121 161 140 74 47 41 62 51 91 79 72 71 105 195
Activity of other committees (e.g. subcommittees)	49
Process to communicate decisions	79
Established tool for prioritising decisions	37
Formulary characteristics	
Type of formulary items (medications from different ATC codes, medical devices, nutritional supplements)	82
Presence of specialty medications	40
Validity of formulary: inpatient and/or outpatient	44
Establishment and enforcement of established restrictions by the formulary	196
Included supplementary information (e.g. established restrictions, administration route, or storage advices)	54
Listing of prices for each formulary item	54
Stockage: storage of all formulary drugs; storage of nonformulary medications	32 32
Accessibility of formulary	40
Strategies to guide formulary medication use	
Pharmacist interventions to guide formulary medication use	78
CPOE system: presence and used strategies to guide formulary medication use	199
Use of a CPOE system to enforce or communicate established restrictions	80
Medication information provided by the CPOE system	88
Information on doses provided by the CPOE system	67
Redirection of nonformulary item orders to formulary items	70
Communication of drug shortages and possible therapeutic alternatives by the CPOE system	33

Strategies to guide formulary medication use cont.	
Requirement of indications for some medication orders	48
Written guidelines for formulary medication use: presence; responsibility; adherence monitoring; review frequency	216 154 98 53
Existence of therapeutic interchange guidelines	257
Guidelines on established-use criteria	149
Guidelines for off-label medication use	114
Guidelines for investigational medication use	93
Guidelines for medications with a high potential for medication errors	99
Guidelines on generic substitution	79
Guidelines for nonformulary medication use for patients stabilised on a nonformulary medication	63
Guidelines for managing drug shortages	83
Guidelines for managing high-cost medications	52
Guidelines for managing biosimilars	46
Established guidelines for nonformulary medication use: presence and type; possibility for prescription; requirement of prior authorisation	154 106 101
Clinical practice guidelines with included APIs: presence; involvement of the PTC	262 153
Embedment of clinical practice guidelines into the formulary	54
Educational programs on formulary and the PTC: existence and responsibility	180
Medication use evaluation	
Percentage of formulary medications of all prescribed medications (formulary compliance) and regular monitoring	103
Monitoring of medication use: presence; responsibility	308 56
Monitoring of adverse drug reactions: presence; responsibility	115 95
Monitoring of medication errors: presence and responsibility	30
Use of evaluation data by the PTC	40
Inclusion of top ten prescribed medications in the formulary	32

Abbreviations: ATC, Anatomical Therapeutic Chemical classification system; CPOE, computerised physician order entry; PTC, pharmacy and therapeutics committee. [a]The semicolons (;) in the description of the items mean that different publications were used to formulate the different parts of this item. If this is applicable, more than one respective weight and reference list appear in the respective weight and references column. The weights and reference lists are then sorted in the same way. [b]Item weights were calculated by adding up the publications weights of all publications which covered the respective assessment item in their full text.