



SREE DATTHA INSTITUTE OF PHARMACY

(Approved by AICTE & PCI, New Delhi, Affiliated to JNTU, Hyderabad)

Sagar Road, Sheriguda, Ibrahimpatnam, R.R.Dist.-501510

Ph.:08414-202206, 320919, 9393808082

www.sreedattha.org, E-mail: principalsdip@sreedattha.ac.in

College Code: SDIP

PHARM.D VI YEAR STUDENTS INTERNSHIP A.Y: 2023-24

S NO	H.T NO	NAME OF THE CANDIDATE
1.	18U21T0001	APOORVA BACHU
2.	18U21T0002	KASAMSETTY SRUJANA
3.	18U21T0003	KUMBAM RESHMA
4.	18U21T0004	GOPU LAVANYA
5.	18U21T0005	HAFSA BANU
6.	18U21T0006	CHINNAVAIDI VIDHYA SREE
7.	18U21T0007	A MOUNIKA
8.	18U21T0008	ANAPURAM PRIYANKA
9.	18U21T0009	JAKKA JAGADEESH KUMAR
10.	18U21T0010	ADDANKI HEMANTH KUMAR
11.	18U21T0011	PASAM SHIREESHA
12.	18U21T0012	KAMTAM SAITEJA
13.	18U21T0013	MAHESWARLA PRANAV KUMAR
14.	18U21T0014	GOTIKE SUPRIYA
15.	18U21T0015	BYROJU ANUSHA
16.	18U21T0016	MIDDE ARCHANA
17.	18U21T0017	GANGAPURAM SHRAVYA MADHURI
18.	18U21T0018	A SREE PRAVALLIKA
19.	18U21T0019	JONNALAGADDA KRANTHIRMAI
20.	18U21T0020	SILIVERU SHIRISHA
21.	18U21T0021	HRUSHIKESH MASURI
22.	18U21T0023	AYUB HOSSAIN
23.	18U21T0024	SOYEL AKHTAR
24.	18U21T0025	HARUN-AL-RASHID
25.	18U21T0026	SAHARUKH HOSSAIN
26.	18U21T0027	NARSING SHIVANI
27.	18U21T0028	APURBA MANDAL
28.	18U21T0029	MD. SHADAB QAISER
29.	18U21T0030	JAKA JHANSI





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Pharm D (PB) III Yr

S. No	HT. NO	NAME OF THE STUDENT
1.	21U25T0001	MOHAMMED FAISAL MUNEER
2.	21U25T0002	SARAH FATIMA
3.	21U25T0003	HASEENA
4.	21U25T0004	ENGOLIKAR AISHWARYA
5.	21U25T0005	BOJU SHRUTHI
6.	21U25T0006	MARYA HABEEBA
7.	21U25T0007	BALLEM VAISHNAVI
8.	21U25T0008	JILLA AMULYA
9.	21U25T0010	PUJA DAS





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Certificate of Internship



This is to certify that

Ms. APOORVA BACHU

Roll No. 18U21T0001

of Sree Dattha Institute of Pharmacy, Ibrahimpatnam, Hyderabad

has successfully completed the Pharm.D. Internship at

Global Hospitals, L.B. Nagar

in the following units / departments as prescribed under regulation 9 & 16 and
Appendix B & C of Pharm.D. Regulations 2008

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SKIN AND VD	31-01-2024	29-03-2024	Two Months
SURGERY	01-04-2024	31-05-2024	Two Months


Sumera Iram
Preceptor


Dr. B. Chandra Shekar
Head of the Institution
Sree Dattha Institute of Pharmacy

Principal
Sree Dattha Institute Of Pharmacy
Sheriguda(V), Ibrahimpatnam(R).
RangaReddy(Dist).-501510.


Dr. Lakshmi Kiran Chelluri
Director Academics & Research
GMERF
Global Hospital
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Certificate of Internship



This is to certify that

Ms. KASAMSETTY SRUJANA

Roll No. 18U21T0002

of Sree Dattha Institute of Pharmacy, Ibrahimpatnam, Hyderabad
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Dr. Sumera Iram
Preceptor

Dr. B. Chandra Shekar
Head of the Institution
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Principal

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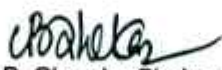
Ms. KUMBAM RESHMA

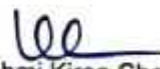
Roll No. 18U21T0003

of Sree Dattha Institute of Pharmacy, Ibrahimpatnam, Hyderabad
has successfully completed the Pharm.D. Internship at
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Dr. S. Nera Iram
Preceptor


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This is to certify that

Ms. GOPU LAVANYA

Roll No. 18U21T0004

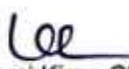
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Dr. Sumera Iram
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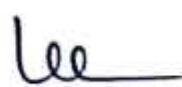
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This is to certify that

Ms. CHINNAVAIDI VIDHYA SREE

Roll No. 18U21T0006

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Ms. A MOUNIKA

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Ms. ANAPURAM PRIYANKA

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Sumera

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Chandra Shekar

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This is to certify that

Mr. JAKKA JAGADEESH KUMAR

Roll No. 18U21T0009

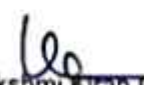
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This is to certify that

Mr. ADDANKI HEMANTH KUMAR

Roll No. 18U21T0010

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This is to certify that

Ms. PASAM SHIREESHA

Roll No. 18U21T0011

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This is to certify that

Mr. KAMTAM SAITEJA

Roll No. 18U21T0012

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Mr. MAHESWARLA PRANAV KUMAR

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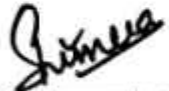
This is to certify that

Ms. GOTIKE SUPRIYA

Roll No. 18U21T0014

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This is to certify that

Ms. BYROJU ANUSHA

Roll No. 18U21T0015

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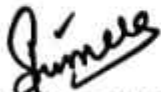
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PEDIATRICS	30-11-2023	29-01-2024	Two Months
SKIN AND VD	31-01-2024	29-03-2024	Two Months
SURGERY	01-04-2024	31-05-2024	Two Months


Dr. Sumera Iram
Preceptor


Dr. B. Chandra Shekar
Head of the Institution
Sree Dattha Institute of Pharmacy

Principal
Sree Dattha Institute Of Pharmacy
Sheriguda(V), Ibrahimpatnam(M),
RangaReddy(Dist).-501510.


Dr. Lakshmi Kiran Chelluri
Director Academics & Research
GMERF
Global Hospital

MEDICAL SUPERINTENDENT
GLOBAL HOSPITAL HYDERABAD



SREE DATTHA INSTITUTE OF PHARMACY

(Approved by AICTE & PCI, New Delhi, Affiliated to JNTU H, Hyderabad)

Sagar Road, Sheriguda, Ibrahimpatnam, R.R. Dist.- 501510

Certificate of Internship



This is to certify that

Ms. GANGAPURAM SHRAVYA MADHURI

Roll No. 18U21T0017

of Sree Dattha Institute of Pharmacy, Ibrahimpatnam, Hyderabad
has successfully completed the Pharm.D. Internship at
Global Hospitals, L.B. Nagar
in the following units / departments as prescribed under regulation 9 & 16 and
Appendix B & C of Pharm.D. Regulations 2008

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SURGERY	01-04-2024	31-05-2024	Two Months

Dr. Sumera Iram
Preceptor

Dr. B. Chandra Shekar
Head of the Institution
Sree Dattha Institute of Pharmacy

Principal

Sree Dattha Institute Of Pharmacy
Sheriguda(V), Ibrahimpatnam(M),
RangaReddy(Dist).-501510.

Dr. Lakshmi Kiran Chelluri
Director Academics & Research
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Sagar Road, Sheriguda, Ibrahimpatnam, R.R.Dist.- 501510

Certificate of Internship



This is to certify that

Ms. A SREE PRAVALLIKA

Roll No. 18U21T0018

of Sree Dattha Institute of Pharmacy, Ibrahimpatnam, Hyderabad

has successfully completed the Pharm.D. Internship at

Global Hospitals, L.B. Nagar

in the following units / departments as prescribed under regulation 9 & 16 and

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Dr. Sumera Iram
Preceptor

Dr. B. Chandra Shekar
Head of the Institution
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Sagar Road, Sheriguda, Ibrahimpatnam, R.R. Dist.- 501510

Certificate of Internship



This is to certify that

Ms. JONNALAGADDA KRANTHIRMAI

Roll No. 18U21T0019

of Sree Dattha Institute of Pharmacy, Ibrahimpatnam, Hyderabad
has successfully completed the Pharm.D. Internship at
Global Hospitals, L.B. Nagar
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Sumera

Dr. Sumera Iram
Preceptor

Chandra Shekar

Dr. B. Chandra Shekar
Head of the Institution
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Principal

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Lakshmi

Dr. Lakshmi Kiran Chelluri
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Sagar Road, Sheriguda, Ibrahimpatnam, R.R.Dist.- 501510

Certificate of Internship



This is to certify that

Ms. SILIVERU SHIRISHA

Roll No. 18U21T0020

of Sree Dattha Institute of Pharmacy, Ibrahimpatnam, Hyderabad

has successfully completed the Pharm.D. Internship at

Global Hospitals, L.B. Nagar

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Dr. Sumera Iram
Preceptor

Dr. B. Chandra Shekar
Head of the Institution
Sree Dattha Institute of Pharmacy

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Sagar Road, Sheriguda, Ibrahimpatnam, R.R.Dist.- 501510

Certificate of Internship



This is to certify that

Mr. HRUSHIKESH MASURI

Roll No. 18U21T0021

of Sree Dattha Institute of Pharmacy, Ibrahimpatnam, Hyderabad

has successfully completed the Pharm.D. Internship at

Global Hospitals, L.B. Nagar

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Dr. Sumera Iram
Preceptor

Dr. B. Chandra Shekar
Head of the Institution
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Principal

Sree Dattha Institute Of Pharmacy
Sheriguda(V), Ibrahimpatnam(M),
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Dr. Lakshmi Kiran Cholluri
Director Academics & Research
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Sagar Road, Sheriguda, Ibrahimpatnam, R.R.Dist.- 501510

Certificate of Internship



This is to certify that

Mr. AYUB HOSSAIN

Roll No. 18U21T0023

of Sree Dattha Institute of Pharmacy, Ibrahimpatnam, Hyderabad

has successfully completed the Pharm.D. Internship at

Global Hospitals, L.B. Nagar

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Sumera Iram

Dr. Sumera Iram
Preceptor

Dr. B. Chandra Shekar

Dr. B. Chandra Shekar
Head of the Institution
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Principal

Sree Dattha Institute Of Pharmacy
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Dr. Lakshmi Kiran Chelluri

Dr. Lakshmi Kiran Chelluri
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Sagar Road, Sheriguda, Ibrahimpatnam, R.R.Dist.- 501510

Certificate of Internship



This is to certify that

Mr. SOYEL AKHTAR

Roll No. 18U21T0024

of Sree Dattha Institute of Pharmacy, Ibrahimpatnam, Hyderabad
has successfully completed the Pharm.D. Internship at
Global Hospitals, L.B. Nagar
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Dr. Sumera Iram
Preceptor


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Principal
Sree Dattha Institute Of Pharmacy
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Sagar Road, Sheriguda, Ibrahimpatnam, R.R.Dist.- 501510

Certificate of Internship



This is to certify that

Mr. HARUN AL RASHID

Roll No. 18U21T0025

of Sree Dattha Institute of Pharmacy, Ibrahimpatnam, Hyderabad

has successfully completed the Pharm.D. Internship at

Global Hospitals, L.B. Nagar

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Dr. Sumera Iram
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Sagar Road, Sheriguda, Ibrahimpatnam, R.R.Dist.- 501510

Certificate of Internship



This is to certify that

Mr. SAHARUKH HOSSAIN

Roll No. 18U21T0026

of Sree Dattha Institute of Pharmacy, Ibrahimpatnam, Hyderabad

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Sumera

Dr. Sumera Iram
Preceptor

Chandra Shekar

Dr. B. Chandra Shekar
Head of the Institution
Sree Dattha Institute of Pharmacy

Principal

Sree Dattha Institute Of Pharmacy
Sheriguda(V), Ibrahimpatnam(M),
RangaReddy(Dist).-501510.

Lakshmi Kiran

Dr. Lakshmi Kiran Chelluri
Director Academics & Research
GMERF
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Sagar Road, Sheriguda, Ibrahimpatnam, R.R. Dist.- 501510

Certificate of Internship



This is to certify that

Ms. NARSING SHIVANI

Roll No. 18U21T0027

of Sree Dattha Institute of Pharmacy, Ibrahimpatnam, Hyderabad

has successfully completed the Pharm.D. Internship at

Global Hospitals, L.B. Nagar

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Dr. Sumera Iram
Preceptor

Dr. B. Chandra Shekar
Head of the Institution
Sree Dattha Institute of Pharmacy

Principal

Sree Dattha Institute Of Pharmacy
Sheriguda(V), Ibrahimpatnam(M),
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Sagar Road, Sheriguda, Ibrahimpatnam, R.R.Dist.- 501510

Certificate of Internship



This is to certify that

Mr. APURBA MANDAL

Roll No. 18U21T0028

of Sree Dattha Institute of Pharmacy, Ibrahimpatnam, Hyderabad
has successfully completed the Pharm.D. Internship at
Global Hospitals, L.B. Nagar
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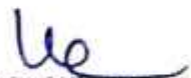
Dr. Sumera Iram
Preceptor



Dr. B. Chandra Shekar
Head of the Institution
Sree Dattha Institute of Pharmacy

Principal

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Sheriguda(V), Ibrahimpatnam(M),
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Dr. Lakshmi Kiran Cheiluri
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Sagar Road, Sheriguda, Ibrahimpatnam, R.R.Dist.- 501510

Certificate of Internship



This is to certify that

Mr. MD SHADAB QAISER

Roll No. 18U21T0029

of Sree Dattha Institute of Pharmacy, Ibrahimpatnam, Hyderabad

has successfully completed the Pharm.D. Internship at

Global Hospitals, L.B. Nagar

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Dr. Sumera Iram
Preceptor


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Sagar Road, Sheriguda, Ibrahimpatnam, R.R. Dist.- 501510

Certificate of Internship



This is to certify that

Ms. JAKA JHANSI

Roll No. 18U21T0030

of Sree Dattha Institute of Pharmacy, Ibrahimpatnam, Hyderabad

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Principal

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RangaReddy(Dist).-501510,

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Sagar Road, Sheriguda, Ibrahimpatnam, R.R.Dist.- 501510

Certificate of Assessment of Internship

FOR THE FULFILMENT OF AWARD OF DOCTOR OF PHARMACY - PHARM.D
ACADEMIC YEAR 2018-2024

Name of the Student : Ms. Apoorva Bachu

Reg No: 18U21T0001

SI No.	Assessment Criteria	Scores Secured (0-5)
1	Proficiency of knowledge required for each case management	5
2	The competency in skills expected for providing Clinical Pharmacy Services	5
3	Responsibility, Punctuality, Work up of case, involvement in patient care	5
4	Ability to work in a team (Behavior with other healthcare professionals including medical doctors, nursing staff and colleagues)	5
5	Initiative, Participation in discussions, research aptitude	5

Intern's performance is evaluated using the following scoring system:

Poor	Fair	Below Average	Average	Above Average	Excellent
0	1	2	3	4	5

Note : A SCORE OF 3 AND ABOVE REPRESENTS SATISFACTORY COMPLETION OF INTERNSHIP

This certificate of assessment of internship is issued on satisfactory completion of training / internship

Dr. Sumera Iram
Preceptor

Dr. B. Chandra Shekar
Head of the Institution
Sree Dattha Institute of Pharmacy

Principal
Sree Dattha Institute Of Pharmacy
Sheriguda(V), Ibrahimpatnam(R),
RangaReddy(Dist)-501510.

Dr. Lakshmi Kiran Chetturi
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Certificate of Assessment of Internship

FOR THE FULFILMENT OF AWARD OF DOCTOR OF PHARMACY - PHARM.D
ACADEMIC YEAR 2018-2024

Name of the Student : Ms. Kasamsetty Srujana

Reg No: 18U21T0002

SI No.	Assessment Criteria	Scores Secured (0-5)
1	Proficiency of knowledge required for each case management	5
2	The competency in skills expected for providing Clinical Pharmacy Services	5
3	Responsibility, Punctuality, Work up of case, involvement in patient care	5
4	Ability to work in a team (Behavior with other healthcare professionals including medical doctors, nursing staff and colleagues)	5
5	Initiative, Participation in discussions, research aptitude	5

Intern's performance is evaluated using the following scoring system:

Poor	Fair	Below Average	Average	Above Average	Excellent
0	1	2	3	4	5

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Sumera

Dr. Sumera Iram
Preceptor

Chandra Shekar

Dr. B. Chandra Shekar
Head of the Institution
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Principal

Sree Dattha Institute Of Pharmacy
Sheriguda (R), Ibrahimpatnam (M),
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Lakshmi Kiran

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Certificate of Assessment of Internship

FOR THE FULFILMENT OF AWARD OF DOCTOR OF PHARMACY - PHARM.D
ACADEMIC YEAR 2018-2024

Name of the Student : Ms. Kumbam Reshma

Reg No: 18U21T0003

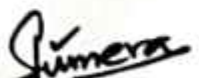
Sl No.	Assessment Criteria	Scores Secured (0-5)
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5	Initiative, Participation in discussions, research aptitude	5

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Certificate of Assessment of Internship

FOR THE FULFILMENT OF AWARD OF DOCTOR OF PHARMACY - PHARM.D
ACADEMIC YEAR 2018-2024

Name of the Student : Ms. Gopu Lavanya

Reg No: 18U21T0004

SI No.	Assessment Criteria	Scores Secured (0-5)
1	Proficiency of knowledge required for each case management	5
2	The competency in skills expected for providing Clinical Pharmacy Services	5
3	Responsibility, Punctuality, Work up of case, involvement in patient care	5
4	Ability to work in a team (Behavior with other healthcare professionals including medical doctors, nursing staff and colleagues)	5
5	Initiative, Participation in discussions, research aptitude	5

Intern's performance is evaluated using the following scoring system:

Poor	Fair	Below Average	Average	Above Average	Excellent
0	1	2	3	4	5

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Dr. Sumera Iram
Preceptor

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Sheriguda, Ibrahimpatnam (M),
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FOR THE FULFILMENT OF AWARD OF DOCTOR OF PHARMACY - PHARM.D
ACADEMIC YEAR 2018-2024

Name of the Student : Ms. Hafsa Banu

Reg No: 18U21T0005

SI No.	Assessment Criteria	Scores Secured (0-5)
1	Proficiency of knowledge required for each case management	5
2	The competency in skills expected for providing Clinical Pharmacy Services	5
3	Responsibility, Punctuality, Work up of case, involvement in patient care	5
4	Ability to work in a team (Behavior with other healthcare professionals including medical doctors, nursing staff and colleagues)	5
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Preceptor

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Head of the Institution
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Principal

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Sagar Road, Sheriguda, Ibrahimpatnam, R.R.Dist.- 501510

Certificate of Assessment of Internship

FOR THE FULFILMENT OF AWARD OF DOCTOR OF PHARMACY - PHARM.D
ACADEMIC YEAR 2018-2024

Name of the Student : Ms. Chinnavaidi Vidhya Sree

Reg No: 18U21T0006

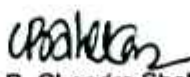
SI No.	Assessment Criteria	Scores Secured (0-5)
1	Proficiency of knowledge required for each case management	5
2	The competency in skills expected for providing Clinical Pharmacy Services	5
3	Responsibility, Punctuality, Work up of case, involvement in patient care	5
4	Ability to work in a team (Behavior with other healthcare professionals including medical doctors, nursing staff and colleagues)	5
5	Initiative, Participation in discussions, research aptitude	5

Intern's performance is evaluated using the following scoring system:

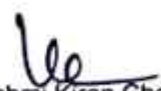
Poor	Fair	Below Average	Average	Above Average	Excellent
0	1	2	3	4	5

Note : A SCORE OF 3 AND ABOVE REPRESENTS SATISFACTORY COMPLETION OF INTERNSHIP
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FOR THE FULFILMENT OF AWARD OF DOCTOR OF PHARMACY - PHARM.D
ACADEMIC YEAR 2018-2024

Name of the Student : Ms. A Mounika

Reg No: 18U21T0007

SI No.	Assessment Criteria	Scores Secured (0-5)
1	Proficiency of knowledge required for each case management	5
2	The competency in skills expected for providing Clinical Pharmacy Services	5
3	Responsibility, Punctuality, Work up of case, involvement in patient care	5
4	Ability to work in a team (Behavior with other healthcare professionals including medical doctors, nursing staff and colleagues)	5
5	Initiative, Participation in discussions, research aptitude	5

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ACADEMIC YEAR 2018-2024

Name of the Student : Ms. Anapuram Priyanka

Reg No: 18U21T0008

SI No.	Assessment Criteria	Scores Secured (0-5)
1	Proficiency of knowledge required for each case management	5
2	The competency in skills expected for providing Clinical Pharmacy Services	5
3	Responsibility, Punctuality, Work up of case, involvement in patient care	5
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FOR THE FULFILMENT OF AWARD OF DOCTOR OF PHARMACY - PHARM.D
ACADEMIC YEAR 2018-2024

Name of the Student : Mr. Jakka Jagadeesh Kumar

Reg No: 18U21T0009

SI No.	Assessment Criteria	Scores Secured (0-5)
1	Proficiency of knowledge required for each case management	5
2	The competency in skills expected for providing Clinical Pharmacy Services	5
3	Responsibility, Punctuality, Work up of case, involvement in patient care	5
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ACADEMIC YEAR 2018-2024

Name of the Student : Mr. Addanki Hemanth Kumar

Reg No: 18U21T0010

SI No.	Assessment Criteria	Scores Secured (0-5)
1	Proficiency of knowledge required for each case management	5
2	The competency in skills expected for providing Clinical Pharmacy Services	5
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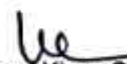
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ACADEMIC YEAR 2018-2024

Name of the Student : Ms. Pasam Shireesha

Reg No: 18U21T0011

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1	Proficiency of knowledge required for each case management	5
2	The competency in skills expected for providing Clinical Pharmacy Services	5
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Name of the Student : Mr. Kamtam Saiteja

Reg No: 18U21T0012

SI No.	Assessment Criteria	Scores Secured (0-5)
1	Proficiency of knowledge required for each case management	5
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Name of the Student : Mr. Maheswarla Pranav Kumar

Reg No: 18U21T0013

SI No.	Assessment Criteria	Scores Secured (0-5)
1	Proficiency of knowledge required for each case management	5
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Lakshmi

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ACADEMIC YEAR 2018-2024

Name of the Student : Ms. Gotike Supriya

Reg No: 18U21T0014

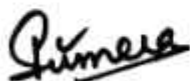
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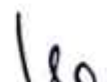


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ACADEMIC YEAR 2018-2024

Name of the Student : Ms. Byroju Anusha

Reg No: 18U21T0015

SI No.	Assessment Criteria	Scores Secured (0-5)
1	Proficiency of knowledge required for each case management	5
2	The competency in skills expected for providing Clinical Pharmacy Services	5
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ACADEMIC YEAR 2018-2024

Name of the Student : Ms. Midde Archana

Reg No: 18U21T0016

SI No.	Assessment Criteria	Scores Secured (0-5)
1	Proficiency of knowledge required for each case management	5
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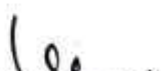
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ACADEMIC YEAR 2018-2024

Name of the Student : Ms. Gangapuram Shravya Madhuri

Reg No: 18U21T0017

SI No.	Assessment Criteria	Scores Secured (0-5)
1	Proficiency of knowledge required for each case management	5
2	The competency in skills expected for providing Clinical Pharmacy Services	5
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ACADEMIC YEAR 2018-2024

Name of the Student : Ms. A Sree Pravallika

Reg No: 18U21T0018

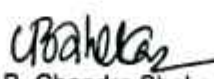
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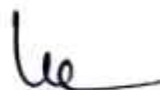
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ACADEMIC YEAR 2018-2024

Name of the Student : Ms. Jonnalagadda Kranthirmai

Reg No: 18U21T0019

SI No.	Assessment Criteria	Scores Secured (0-5)
1	Proficiency of knowledge required for each case management	5
2	The competency in skills expected for providing Clinical Pharmacy Services	5
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ACADEMIC YEAR 2018-2024

Name of the Student : Ms. Siliveru Shirisha

Reg No: 18U21T0020

SI No.	Assessment Criteria	Scores Secured (0-5)
1	Proficiency of knowledge required for each case management	5
2	The competency in skills expected for providing Clinical Pharmacy Services	5
3	Responsibility, Punctuality, Work up of case, involvement in patient care	5
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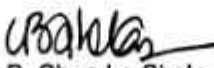
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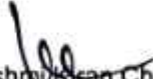
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ACADEMIC YEAR 2018-2024

Name of the Student : Mr. Hrushikesh Masuri

Reg No: 18U21T0021

SI No.	Assessment Criteria	Scores Secured (0-5)
1	Proficiency of knowledge required for each case management	5
2	The competency in skills expected for providing Clinical Pharmacy Services	5
3	Responsibility, Punctuality, Work up of case, involvement in patient care	5
4	Ability to work in a team (Behavior with other healthcare professionals including medical doctors, nursing staff and colleagues)	5
5	Initiative, Participation in discussions, research aptitude	5

Intern's performance is evaluated using the following scoring system:

Poor	Fair	Below Average	Average	Above Average	Excellent
0	1	2	3	4	5

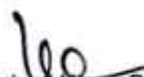
Note : A SCORE OF 3 AND ABOVE REPRESENTS SATISFACTORY COMPLETION OF INTERNSHIP

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Dr. Sumera Iram
Preceptor


Dr. B. Chandra Shekar
Head of the Institution
Sree Dattha Institute of Pharmacy

Principal
Sree Dattha Institute Of Pharmacy
Sheriguda, Ibrahimpatnam (R.R.)
RangaReddy(Dist).-501510.


Dr. Lakshmi Kiran Chelluri
Director Academics & Research
GMERF
Global Hospital
MEDICAL SUPERINTENDENT
GLOBAL HOSPITAL HYDERABAD



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Certificate of Assessment of Internship

FOR THE FULFILMENT OF AWARD OF DOCTOR OF PHARMACY - PHARM.D
ACADEMIC YEAR 2018-2024

Name of the Student : Mr. Ayub Hossain

Reg No: 18U21T0023

SI No.	Assessment Criteria	Scores Secured (0-5)
1	Proficiency of knowledge required for each case management	5
2	The competency in skills expected for providing Clinical Pharmacy Services	5
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FOR THE FULFILMENT OF AWARD OF DOCTOR OF PHARMACY - PHARM.D
ACADEMIC YEAR 2018-2024

Name of the Student : Mr. Harun Al Rashid

Reg No: 18U21T0025

SI No.	Assessment Criteria	Scores Secured (0-5)
1	Proficiency of knowledge required for each case management	5
2	The competency in skills expected for providing Clinical Pharmacy Services	5
3	Responsibility, Punctuality, Work up of case, involvement in patient care	5
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FOR THE FULFILMENT OF AWARD OF DOCTOR OF PHARMACY - PHARM.D
ACADEMIC YEAR 2018-2024

Name of the Student : Mr. Saharukh Hossain

Reg No: 18U21T0026

SI No.	Assessment Criteria	Scores Secured (0-5)
1	Proficiency of knowledge required for each case management	3
2	The competency in skills expected for providing Clinical Pharmacy Services	4
3	Responsibility, Punctuality, Work up of case, involvement in patient care	3
4	Ability to work in a team (Behavior with other healthcare professionals including medical doctors, nursing staff and colleagues)	4
5	Initiative, Participation in discussions, research aptitude	3

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Certificate of Assessment of Internship

FOR THE FULFILMENT OF AWARD OF DOCTOR OF PHARMACY - PHARM.D
ACADEMIC YEAR 2018-2024

Name of the Student : Ms. Narsing Shivani

Reg No: 18U21T0027

SI No.	Assessment Criteria	Scores Secured (0-5)
1	Proficiency of knowledge required for each case management	5
2	The competency in skills expected for providing Clinical Pharmacy Services	5
3	Responsibility, Punctuality, Work up of case, involvement in patient care	5
4	Ability to work in a team (Behavior with other healthcare professionals including medical doctors, nursing staff and colleagues)	5
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Certificate of Assessment of Internship

FOR THE FULFILMENT OF AWARD OF DOCTOR OF PHARMACY - PHARM.D
ACADEMIC YEAR 2018-2024

Name of the Student : Mr. Apurba Mandal

Reg No: 18U21T0028

Sl No.	Assessment Criteria	Scores Secured (0-5)
1	Proficiency of knowledge required for each case management	5
2	The competency in skills expected for providing Clinical Pharmacy Services	5
3	Responsibility, Punctuality, Work up of case, involvement in patient care	5
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Sumera

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Preceptor

Chandra Shekar

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Lakshmi Kiran

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Certificate of Assessment of Internship

FOR THE FULFILMENT OF AWARD OF DOCTOR OF PHARMACY - PHARM.D
ACADEMIC YEAR 2018-2024

Name of the Student : Mr. MD Shadab Qaiser

Reg No: 18U21T0029

SI No.	Assessment Criteria	Scores Secured (0-5)
1	Proficiency of knowledge required for each case management	5
2	The competency in skills expected for providing Clinical Pharmacy Services	5
3	Responsibility, Punctuality, Work up of case, involvement in patient care	5
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Certificate of Assessment of Internship

FOR THE FULFILMENT OF AWARD OF DOCTOR OF PHARMACY - PHARM.D
ACADEMIC YEAR 2018-2024

Name of the Student : Ms. Jaka Jhansi

Reg No: 18U21T0030

SI No.	Assessment Criteria	Scores Secured (0-5)
1	Proficiency of knowledge required for each case management	5
2	The competency in skills expected for providing Clinical Pharmacy Services	5
3	Responsibility, Punctuality, Work up of case, involvement in patient care	5
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Certificate

This is to certify that,

Mr./Ms. Parasam Shireesha Roll No. : 180210011

Year : 6th year Semester : 23-2024

Department : Pharm-D

has successfully completed all the experiments in the subject.....
prescribed by Jawaharlal Nehru Technological University during the academic year.

Faculty in-Charge Dr. Sumela Mam

Attended University Exam on 08-06-2024

Sumela
Internal Examiner



D. Sathya
External Examiner

Head of the Department

SREE DATTHA
INSTITUTE OF PHARMACY

B Pharmacy | LL Pharmacy | Pharm D | Pharm D (H)

Principal

Sree Dattha Institute Of Pharmacy

Sheriguda (V), Ibrahimpatnam (M), Greater Hyderabad District, Ranga Reddy (Dist) - 501511

Campus : Nagarjuna Sagar Road, Sheriguda (V), Ibrahimpatnam (M), Greater Hyderabad District, Ranga Reddy (Dist) - 501511
Ph : 8801099922 Email : info@sreedattha.ac

* Activity forms *

INDEX

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SREE DATTHA

INSTITUTE OF PHARMACY

(Approved by AICTE and Affiliated by JNTU), PCI Approved
No. 100/2017-18, Hyderabad (M), P. O. District, 501 510



NAME: Sandhya AGE: 33 SEX: F PT ID: 301254 DATE: 7/6/23

MEDICATION HISTORY

NAME	DIRECTIONS	START DT	STOP DT	PURPOSE
Tab. metoprolol	25mg - OD	7/6/23	9/6/23	Treating Hypertension
Tab. PAN.	40mg OD -BBF	7/6/23	9/6/23	Treats Acidity/ Heartburn.
Tab. Zofee	4mg - BD	7/6/23	9/6/23	Tx Nausea/vomiting

MEDICAL HISTORY:

- ☒ Known Hypertension
- ☐ Known DM
- ☐ Known kidney problem
- ☐ Known liver problem
- ☐ Frequent urination
- ☐ Difficulty with urination
- ☐ Frequent urination at night
- ☒ Nausea or vomiting
- ☐ Constipation or diarrhoea
- ☐ Bloody or black bowel
- ☐ Frequent heart burn
- ☐ Cough with sputum
- ☐ Fainting in the past

- ☐ Sores on leg or foot
- ☐ Leg pain or swelling
- ☐ Anaemia
- ☐ Thyroid problem
- ☐ Muscle cramps or pain
- ☐ Dizziness
- ☐ Change in appetite
- ☐ Rash
- ☐ Walking or balance problem
- ☐ TB
- ☐ Others

Familial history of any of the above problems None

SOCIAL HISTORY:

Nicotine use: -

Caffeine: -

Alcohol consumption: -

Diet: low salt diet

CLINICAL PHARMACIST NAME & SIGNATURE Param Shireen



AWARE GLOBAL HOSPITALS
IN COLLABORATION WITH SREE DATTHA INSTITUTE OF PHARMACY
L.B.NAGAR, Hyderabad. www.globalhospitalsindia.com



PATIENT COUNSELLING DOCUMENTATION FORM

DATE: 7/6/23

TIME 5:00 PM

Type of Patient:



In Patient



out Patient

IP- Number: 310227

OP- Number:

Age: 33

Sex: F

Allergies: NKA

Current Medical Problem: POD5 - USCS

Current Medication: Lactase, Pantol, Zmuvite, Optinemon forte.

Whether patient's specific background information collected? ☒ Yes ☐ No

On which Disease counseled:

Points covered during counseling session:

☒ Name and Purpose of medication

☐ Dosage regimen

☐ Advice on missed dose

☐ Significant interactions

☒ Precautions to be taken

☐ Storage recommendations

☒ Potential side effects

☒ Life style modifications

Any major barriers involved: ☐ Yes ☒ No

If Yes, ☐ Patient based

☐ Provider based

☐ System based

Time taken for counseling: 10 mins

Counseling provided to: ☒ Patient

☐ Patient's representative

If patient's representative, give reason:

☐ Patient is unconscious

☐ Language problem

☐ Hearing problem

☐ Pediatric patient

Counseling material provided: Summary

Understanding of the patient ascertained:

☒ Yes

☐ No

Name of the Pharmacist: Param.

Shineetha

Signature: [Signature]

Name of the Patient:

Signature:

Disease condition :- Patient had lower segment cesarean section so patient was to be taken bed rest - LSCS was done due to conjuginous marriage instead of labour - on request.

Drugs! ① Tab. optineuron ^{1 tab - OD} _{forte} is an multivitamin - nutritional supplement ^{2 days} after food.

② Tab. lactare - 1 tab - p/o - BD - lactation enhancer.

③ Tab. Ranta - 20mg - BD - Befor Food - Antacid - ↓ gastric acid secretion.

④ Zimovite 4 tab - p/o - After optineuron doses - 7 days - nutrition ^{Supplement}

Side effects - If any abnormal rather develop, please consultant physician.

Life style modifications :- ① Avoid lifting heavy objects.

② Eat fruits / leafy vegetables (spinach - broccoli)

③ Consume rich - foods (meat)

④ Warm the body.

⑤ Decrease salty foods / Avoid junk foods.

⑥ Take bed-rest for 1st - 2 days.

Precautions! -

① Should not skip the medications.

② Do not scratch the wound.

③ Do not contaminate the wound site, operation site.

④ Use modern toilets - for passing the stools.

⑤ Avoid hardly digesting foods - like.



DRUG INFORMATION REQUESTION FORM

DATE: 1/6/23 TIME RECEIVED: 5:00 ☐ AM ☒ PM

RECEIVED BY: Param. Shireedha

REQUESTERS CONTACT INFORMATION:

NAME: Sandhya

Email: Sandy@13@gmail.com Phone No. 8974570719

REQUESTERS IDENTITY:

☒ Physician ☐ Pharmacist ☐ Nurse ☐ Patient ☐ others (specify) _____

PREFERRED METHOD OF DELIVERY:

☒ Verbal ☐ Written ☐ Phone ☐ email

RESPONSE NEEDED IN:

☐ 15 MIN ☒ 1 HOUR ☒ END OF THE DAY ☐ 2 DAYS

DRUG INFORMATION QUERY:

Information of precautions to be taken during
lactation after LSCS and about Tab. Ranta, and other
as follows.

TYPE OF REQUEST:

☐ Drug Profile ☒ Indications ☐ Contraindications ☐ Dose/Dosage/Availability
☒ Precautions ☐ Pharmacokinetics ☐ Pharmacodynamics ☒ Pregnancy/Lactation
☒ Drug Interactions (Drug/Food) ☐ ADR ☐ Cost ☒ Brand Names
☐ Toxicity

PATIENT PROFILE:

Age: 33 Gender: F Height: 5.2 Weight: 59.6

Allergies (If any): NKA

Diagnosis: POD₅ - LSCS - (lactating mother)

Drug Therapy: Tab. lactare, RANTA

* Tab. RANTA - 40mg BD - P/O - BBF *

- 1) Brand name - Tab. RANTA
- 2) Generic name - Rantidine - Antacid
- 3) MOA - It works by decreasing the secretion of gastric acid i.e. HCl in the stomach, that causes acidity.
- 4) S/E - Headache, Constipation, stomach pain.
- 5) Uses - Treats heartburn, Acidity.
- Precautions -
 - 1) Avoid lifting heavy objects.
 - 2) Do not contaminate the wound site.
 - 3) Eat Iron rich foods - Avoid Junk foods.
 - 4) Do not have intercourse for the next - 20 days.
 - 5) Do not skip lactating the baby + warm the body.



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Shirdi (V), Ibrahimpatnam (M), R.R. District - 501 510



Medication Error Reporting Form

1. Date of event: 9/6/23
Time of event: 8:00 pm

2. Location of event:

☒ Ward ☐ OPD ☐ Pharmacy ☐ Others

3. Type of error:

☒ Prescribing ☐ Dispensing
☐ Administration ☐ Others (specify)

4. Patient details:

Age: 28

Gender: M

Diagnosis: Spontaneous bacterial peritonitis

5. Description of the event: (how did the event occur and how was it detected?)

Patient was administered 7mg Tramadol and 7mg Zofen at the same time.

6. Details of medicines involved in the event:

S. No.	Dosage Form	Generic Name	Strength	Frequency
1.	7mg	Tramadol	100mg	7AM
2.	7mg	Ondansetron	4mg	7AM

7. Did the error reach the patient?

☒ Yes ☐ No

8. Outcome of the event:

No error

Error, harm

☐ A. Events have potential to cause error

☒ E. Temporary harm requiring treatment

Error, No harm

☐ B. Error did not reach patient

☐ F. Temporary harm requiring hospitalization

☐ C. No harm

☐ G. Permanent harm

☐ D. No harm but requires monitoring

☐ H. Near death event

Error, death

☐ I. Death

9. Possible causes & contributing factors:

☒ Lack of knowledge / experience

☐ Unavailable patient information

☒ Illegible prescription

☐ Peak hour

☐ Look alike / sound alike medication

☐ Miscommunication

☐ Wrong labeling / instruction

☐ Failure to adhere to work procedure

☐ Use of abbreviations

☐ Others

10. Details of reporter: (optional)

Name: Pavani Shinde

Designation:

Mobile No:

11. Intervention done:

☐ Administered antidote

☒ Changed to correct drug / dose / frequency

☐ No action needed

☒ Education / training provided

☐ Communication process improved

☐ Others (specify)

☒ Informed staff who made error

☐ Policy / procedure changed / instituted

* Root cause analysis *

Incident → Drug interaction.

Date of occurrence → 9/6/23

Time of " → 8:00 AM.

Department → ICU - (General medicine).

RCA carried out by → Clinical pharmacologist.

Members investigated → clinical pharmacologist.

Description of the event → patient was prescribed 2

Inj. Dexamethasone - 100mg - 7AM and Inj. Zofen - 4mg - 7AM
at the time, as they are given by nurse at the
same time leading to the serotonin-syndrome.

Corrective action → Immediately informed to the
concern primary consultant and
made him to change the timings
of the above 2 drugs administration

Preventive action - Informed about ADR's by giving
these 2 drugs at a time, and
educated the administering nurse
too.

ADVERSE DRUG REACTION [ADRI] ASSESSMENT FORM

Name: Divya

I.P: 31227

Unit: -

Age: 30

sex: F

weight: -

consultant: -

Reasons for admission:

Past medical history:

Multiple doses administration of paracetamol tablets.

Diagnosis: Paracetamol poisoning

Patients know allergies: -

Brief description of reaction: Patient consumed lot of paracetamol doses

Date of onset of reaction: 11/6/23

Drug used prior to reaction	Dose	Route and frequency	Date started	Date stopped	Reasons for use
Tab - pcm	1gm (multiple Doses)	PO-TID	11/6/23	11/6/23	Suicidal attempt
Tab - pantop	40mg	PO-BID	11/6/23	11/6/23	Tx Antacid

Name of drug	Brand name	Labeled strength	Batch/lot no.	Exp. date	Manufacturer
Paracetamol	paracetamol N-Acetyl (misused)	1 tab	10175	2026	Velnex

N-acetylcystine

Predisposing Factors:

☐

Age

☐

Intercurrent Disease

☐

Gender

☐

Multiple drug therapy

☐

Genetic

☒

others (specify) *depression*

Management of Adverse drug reaction:

Fate of the suspected drug:

☒

Drug withdraws

☐

Dose altered

☐

No change

Treatment given:

☒

Specific

☐

Symptomatic

☐

Nil

Dechallenge and Rechallenge Information:

Outcomes:

☐

Fatal

☒

Recovered

☐

Unknown

☐

Permanent harm

☐

continuing

☐

other

Patient Interviewed:

☒

Yes

☐

No

Thank you note provided:

☒

Yes

☐

No

☐

N/A

Alert card provided:

☒

Yes

☐

No

☐

N/A

Follow Up:

Follow up in OPD after 7 days.

Dechallenge: ☐ Yes ☐ No ☒ Not Known

Rechallenge: ☐ Yes ☒ No ☐ N/A

If yes,

☐

Definite improvement

☐

No improvement

☐

Unknown

If yes,

☐

Recurrent of symptoms

☐

No recurrence of symptoms

☐

Unknown

Causality:

A) WHO probability scale

☐

Certain

☐

Probable

☐

Possible

☐

Unassessable/Unclassifiable

☐

Unlikely

☐

Conditional/unclassified:

B) Naranjo's scale

☐

Definite

☐

Probable

☐

possible

☐

unlikely

C) Karch & Lesagna's Scale

☐

Definite

☐

Probable

☐

Possible

☐

Unlikely

Severity:

Mild:

☐ Level 1

☐ Level 2

Moderate:

☒ Level 3

☐ Level 4(a)

☐ Level 4(b)

Severe:

☐ Level 5

☐ Level 6

☐ Level 7

Predictability:

☒ Predictable

☐ Not predictable

Preventability:

☒ Definitely preventable

☐ probably preventable

☐ Not preventable

References consulted:

Name:

Reporting Doctor's Name:

Name of the pharmacist: *param . shreeha .*

Pharmacist (staff) In charge: *Sumela . mam .*

Signature:

GLOBAL MEDICAL EDUCATION AND RESEARCH FOUNDATION

Dept. of Pharmacy Practice, SREE DATTHA INSTITUTE OF PHARMACY

Lakdi-ka-pool, Hyderabad- 500004.

PHARMACIST INTERVENTION DOCUMENTATION FORM

Date: 12/1/24

Unit: SW-

IP Number: 30125

Patient Details:

Age: 27 Sex: ☐ Male ☒ Female

PMHx: —

Diagnosis:

Acute Respiratory distress Syndrome.

Drug(s) involved:

~~100% pure~~ aspirin - 8mg.

Date of drug prescribed:

13/1/24

Day of problem Identified:

13/1/24.

DRP Identified:

- ☐ Untreated Indication
- ☐ Drug use without indication
- ☐ Subtherapeutic dose
- ☒ Overdose
- ☐ ADR
- ☐ Drug Interaction
- ☐ Improper drug Selection
- ☐ Alternative dosage forms
- ☐ Others (Please specify)

Specific background information collected?

☒ Yes ☐ No

Problem identified discussed with concerned HCP:

☒ Yes ☐ No

Suggestion made at appropriate time:

☒ Yes ☐ No

Accepted: ☒ Yes

☐ No

Changed: ☒ Yes

☐ No



SREE DATTHA INSTITUTE OF PHARMACY

Approved by AICTE, Pharmacy Council of India, New Delhi, Affiliated to JNTU

Certificate

This is to certify that,

Mr./Ms. PASAM SHIREESHA Roll No. : 18U21T0011

Year : VI year Semester : 2023 - 2024

Department : Pharm-D

has successfully completed all the experiments in the subject.....
prescribed by Jawaharlal Nehru Technological University during the academic year.

Faculty in-Charge Dr. Sumera mam

Attended University Exam on 08-06-2024

Sumera
Internal Examiner



D. Lakshmi
External Examiner

Head of the Department

**SREE DATTHA
INSTITUTE OF PHARMACY**

B Pharmacy | LL Pharmacy | Pharm D | Pharm D (Reg)

Chakraborty
Principal

Campus : Nagarjuna Sagar Road, Sheriguda (V), Ibrahimpatnam (M), Rangareddy (Dist), Telangana - 501510
Ph : 8801099922 Email : info@sreedattha.ac.in

* General Ward - Cases - 30 *

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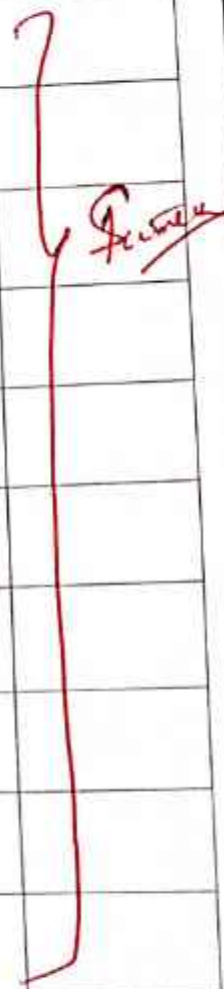
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2	5/6/23	Hypoglycemia, recurrent episodes	6 - 10	
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7	23/6/23	Alcoholic liver disease + Hepatitis, portal HTN, Ascites, Jaundice, ^{Umbilical} Hernia	31 - 35	
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19	7/9/23	Left knee ACL tear + lateral meniscal tear.	91-95 91-95	
20	8/9/23	Liver abscess.	96-100 96-100	
21	19/9/23	Carcinoma Stomach.	101-105 101-105	
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23	2/10/23	ACS-Acute IMWI; mild LV dysfunction UTI; s/p- CABG; PTCA	111-115 111-115	
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26	19/10/23	RTA-Head Injury; Grade II, III Renal Injury	126-130 126-130	[Signature]
27	30/10/23	Rheumatoid arthritis, Chronic diarrhoea.	131-135 131-135	
28	1/11/23	B/L-maxillary right frontal sinusitis; B/L-inferior Turbinate Hypertrophy.	136-140 136-140	
29	3/11/23	Urosepsis-pseudomonas; Sepsis + mops AKI on CKD; metabolic disorders.	141-145 141-145	
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* Speciality Ward - Pulmonology - 10 cases *

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4	15/12/23	LRTI, SOB; resp failure; ^{lower limb} pitting edema	166 - 170	
5	16/12/23	Leftsided pleural effusion.	171 - 175	
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7	29/12/23	Acute Exacerbation of ILD	181 - 185	
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* Speciality ward - Neurology (CNS) - 10 cases *

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3	10/2/24	Trigeminal Neuralgia.	211-215	
4	21/2/24	Infective spondylodiscitis (Koch's) ^{+ myelitis}	216-220	
5	23/2/24	Recurrent CVA; Seizure disorders	221-225	
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7	28/2/24	Transverse myelitis; Demyelinated disorder $\pm$ Spastic paraparesis.	231-235	
8	4/3/24	CVA - Ischemic Stroke, Homocystinuria	236-240	
9	10/3/24	CVA - sepsis $\pm$ Septic shock; Seizure ^{24 hrs back.}	241-245	
10.	20/3/24	multicentric Glioma.	246-250	

* Speciality ward - Gynecology & Obstetrics - 10 cases *

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GLOBAL MEDICAL EDUCATION AND RESEARCH FOUNDATION
Dept. of Pharmacy Practice, SREE DATTHA INSTITUTE OF PHARMACY
Lakdi-ka-pool, Hyderabad- 500004.
PATIENT PROFILE FORM



Patient name: <u>Sandhya</u>		Dr:	VITAL SIGNS: Temp: <u>98</u> ^{°F} BP: <u>130/80</u> mmHg	
IP no: <u>50777</u> Unit:		DOA: <u>3/4/24</u>	PR: <u>78</u>	h/m RR: <u>18</u> /min
Age: <u>25yrs</u>	Sex: <u>25yr F</u>	DOD: <u>8/4/24</u>	HEENT:	
Height:	Weight:	ADD:		
Reasons For Admission:			CVS: <u>S₁S₂</u> RS: <u>clear</u>	
presented to ER department at H/o 92pm, at 9ma & oligohydramnios in labour now admitted for emergency LSCs			GIT:	
			CNS:	
			GU: <u>Musculoskeletal</u>	
PMHx:			Allergies:	
FMHx:			Provisional Diagnosis:	
SHx:			G ₂ A, at 9ma oligohydramnios	
O/E: ☐ Pallor ☐ Icterus ☐ Cyanosis ☐ Clubbing ☐ Karyonychia ☐ Edema ☐ Lymphnodes ☐ Dehydration			Final Diagnosis: <u>G₂A, at term gestation & oligohydramnios.</u>	
			Any Other Info:	
			<u>S/p - emergency LSCs on (16/11/19)</u>	

LABORATORY DATA

Hematology		3/4	4/4						
Hb	12-18gm%	13.9	12.4						
RBC Count	3.6-6.0m/cmm	4.3	4.9						
T.WBC	4,000-11000 c/cmm	9,600	13,100						
DLC: N	45-75%	76	84						
L	20-45%	15	10						
E	1-6%	07	05						
M	1-9%	02	01						
B	0-1%								
Retic.count	0.5-2.0%								
PLT	1.5-4.5 l/cmm	1.3	1.4						
ESR	<20mm 1st Hr	35	34						
		39							

pw

DAY 2	Temp: Afebrile °F B.P: 110/80 mmHg Pulse: 92 b/min	Medication Chart / Reports:
C/O:	USCs - POD-1 - Mild Abdominal discomfort.	Follow as per drug chart
O/E:	Pt 4c - coherent / conscious	
Adv:	NBM -> next 6 hours.	
DAY 3	Temp: Afebrile °F B.P: 140/90 mmHg Pulse: 92 b/min	Medication Chart / Reports:
C/O:	POD-2, -US - S ₁ + S ₂ +	Follow as per drug chart
O/E:	Pt 4c - afebrile.	
Adv:	Liquid diet.	
DAY 4	Temp: @ °F B.P: 116/70 mmHg Pulse: 88 b/min	Medication Chart / Reports:
C/O:	No fresh complaints.	Follow as
O/E:	Pt 4c - oriented.	per drug chart
Adv:	Soft diet, Remove Foley's catheter.	
DAY 5	Temp: @ °F B.P: 120/80 mmHg Pulse: 90 b/min	Medication Chart / Reports:
C/O:	No fresh complaints	Follow as
O/E:	US - S ₁ + S ₂ + - Afebrile, pt - 4c.	per drug chart
Adv:		
DAY 6	Temp: @ °F B.P: 110/90 mmHg Pulse: 92 b/min	Medication Chart / Reports:
C/O:	No fresh complaints	As per
O/E:	Pt 4c - conscious & coherent.	drug chart
Adv:		

	Temp:	*F	B.P:	mmHg	Pulse:	b/min	Medication Chart / Reports:
DAY 7							
C/O:							
O/E:							
Adv:							
DAY 8							
C/O:							
O/E:							
Adv:							
DAY 9							
C/O:							
O/E:							
Adv:							
DAY 10							
C/O:							
O/E:							
Adv:							

PHARMACIST ACTIVITIES:

SL no	Activities	Ref.no:	Description

DISCHARGE SUMMARY

Rx

1. Tab. Augmentin - 200mg - p/o
2. Tab. metrogyl - 400mg - p/o - 11 days
3. Tab. PAN-O - p/o - 10 - 5 days
4. Tab. chymotol Forte - BD - 5 days
5. Tab. Wincee - vgt - c - 500mg - BD - 10 days
6. Lab. Unipac - BD - 3 days
7. Tab. Hbloy - DD - 1 month
8. Tab. Shilcal - DD - 5 days

Follow up -

Review after 7-10 days.

DRUG CHART

DRUG	GENERIC NAME	Dose	Freq	Route	Day 1	Day 2	Day 3	Day 4	Day 5
Inj. Moxifloxacin	ceftriaxone	1gm	BD	IV	✓	✓			
Inj. Amphotericin	metronidazole	100ml	TID	IV	✓	✓	✓	✓	✓
Inj. PAN	pantoprazole	40mg	BD	IV	✓	✓	✓	✓	✓
Inj. Dipyridamol	Diclofenac	1amp	TID	IV	✓	✓			
Inj. Zofen	Endamethon	4mg	BD	IV	✓	✓	✓	✓	✓
Inj. Tramexa	Tramexanicaid	1amp	BD	IV	✓	✓			
Tab. Augmentin	Amoxicillin + Clavulanic acid	625mg	BD	IV		✓	✓	✓	✓
Tab. Chymol forte	Drypsin + Chymotrypsin	4226	TID	P/O		✓	✓	✓	✓
Tab. Vence	Vit-c	500mg	BD	P/O		✓	✓	✓	✓
Tab. Combiflam	Paracetamol + Ibuprofen	oral	BD	P/O		✓	✓	✓	✓

DISCUSSION: (SOAP NOTES)

SUBJECTIVE:

A 25yr female presented to ER department
w/ H/O - G₂P₁A₁, E₉MA & oligohydramnios in
labour now admitted for emergency LSCS

OBJECTIVE:

Bp - normal (120/80 mmHg).

CBP - Normal. WBC - 13,100 TT

Other:

CST clear.

Based on Subjective and Objective evidences

ASSESSMENT: Patient was diagnosed to have G₂A₁C₁ term gestation with oligohydramnios and was delivered based on CST-scan report.

Current therapy:

Inf. Monocel: - Generic name - Ceftriaxone - 1gm - BD - W.
Class - Cephalosporins - Antibiotic

Inf. Metrogyl: - Generic name - metronidazole, class - Antibiotic
MOA: Inhibits the cell wall synthesis - kills the bacteria.

Inf. PAN: - Generic name - pantoprazole - 40mg - BD - PPI
MOA: Inhibits the bacterial cell growth, and kills them, prevents infection.

MOA: Inhibits the final step of gastric acid production.

Uses: Treats Heartburn, Acidity, S/E: Constipation, Abdominal discomfort.

Inf. Dynapar: - Generic name - Diclofenac - 1amp - TID.
MOA: Inhibits the production of prostaglandins - the chemical messengers that cause inflammation and pain.

Class - NSAID (Nonsteroidal Anti-inflammatory Drugs).

Inf. Zofen: - Generic name - Ondansetron - 4mg - BD.

Class - Antiemetic; MOA: Inhibits the 5-HT receptors (Serotonin) by inhibiting the nausea and vomiting.

S/E: Drowsiness, Dizziness.

Inf. Tranexa: - Generic name - Tranexamic acid - 1amp - BD.

Class - Antifibrinolytic drug.

MOA: prevents/worsens by breaking/lysing the fibrin production the causes excess loss of blood.

Tab. Augmentin: - Generic name - Amoxicillin + clavulanic acid.

Class - penicillin; Antibiotic S/E: Rash, nausea, Headache.

MOA: Inhibits the cell wall synthesis - kills the bacterial growth.

Tab. Combiflam: - Generic name - paracetamol + Ibuprofen - BI
Class - NSAID - Non-steroidal anti-inflammatory drug.

MOA: Inhibits the production of certain chemical messengers that causes pain and inflammation.

Tab. Lincet: - VitC - multivitamin supplement.

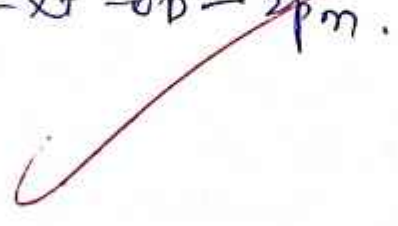
Tab. ChymodalPate: - treats pain

PLAN:

Discharge condition

Symptomatically improved, Haemodynamically Stable

Discharge medication

- 1) Tab. Augmentin - 200mg - BD $\begin{cases} 8AM \\ 8PM \end{cases}$ } 5 days
 - 2) Tab. metrogyl - 400mg - TID $\begin{cases} 8AM \\ 2PM \\ 8PM \end{cases}$ } 5 days
 - 3) Tab. PAN-O - OD - 7AM (BBP) - 5 days
 - 4) Tab. Chymolal forte - BD $\begin{cases} 8AM \\ 8PM \end{cases}$ } 5 days
 - 5) Tab. Vmcee - 500mg - BD $\begin{cases} 8AM \\ 8PM \end{cases}$ } 10 days
 - 6) Tab. Unispa - BD $\begin{cases} 9AM \\ 9PM \end{cases}$ } 4 days
 - 7) Tab. Hbloy - OD - 8AM - 1 month.
 - 8) proteinex powder - 2 scoops - 2 glass of milk - BD $\begin{cases} 8AM \\ 8PM \end{cases}$
 - 9) Tab. Sheleat - XT - OD - 2PM.
- 

PATIENT COUNSELLING:

REGARDING DISEASE CONDITION:

Gestation & oligohydramnios - Is the sudden/decrease of amniotic fluid, due to which a emergency lower segment caesarean section was done on priority.

REGARDING DRUGS:

- Tab Augmentin - 200mg - p/o - BD - Is an antibiotic
- Tab metrogyl - 400mg - TID - is an antibiotic prevents infection
- Tab PAN-D - DD - BBF - Treats Heartburn/Acidity
- Tab. chymoral forte - BD - treats pain.
- Tab. Lomce - BD - multivitamin supplement
- Tab Urispas - BP - reduces muscle pain of UTI
- Tab Hbloy - DD - treats Blood deficiency.
- Tab sheleal - XT - DD - $\uparrow$ blood Ca^{+2} levels.

REGARDING LIFESTYLE MODIFICATION:

- Drink more water to stay hydrated
- Drink plenty of juices
- Don't lift heavy objects
- Take maternal bed rest.
- Perform light physical exercise
- Avoid strenuous exercise
- Take soft diet.
- Healthy food can help you gain a healthy, amount of weight

Sumera



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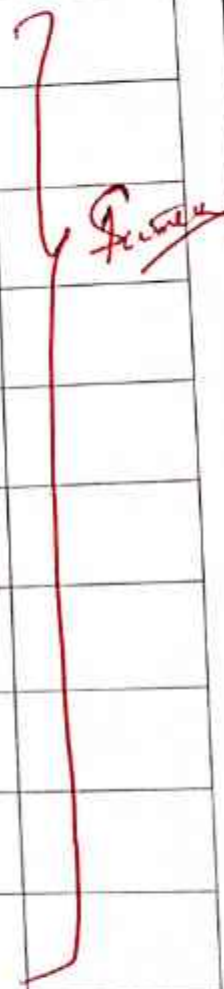
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Age: <u>25yrs</u>	Sex: <u>25yrs F</u>	DOD: <u>8/4/24</u>	HEENT:	
Height:	Weight:	ADD:	CVS: <u>S1S2+</u> RS: <u>clear</u>	
Reasons For Admission:			GIT:	
presented to ER department at <u>92pm</u> & <u>9ma</u> & <u>Oligohydramnios</u>			CNS:	
in labour now admitted for <u>emergency LSCs</u>			GU: <u>Musculoskeletal</u>	
PMHx:			Allergies:	
FMHx:			Provisional Diagnosis:	
SHx:			<u>G2A, & 9ma Oligohydramnios</u>	
O/E: ☐ Pallor ☐ Icterus ☐ Cyanosis			Final Diagnosis: <u>G2A, & term gestation & Oligohydramnios.</u>	
☐ Clubbing ☐ Karyonychia ☐ Edema			Any Other Info:	
☐ Lymphnodes ☐ Dehydration			<u>S/p - emergency LSCs on (16/11/19)</u>	

LABORATORY DATA

Hematology		3/4	4/4							
Hb	12-18gm%	13.9	12.4							
RBC Count	3.6-6.0m/cmm	4.3	4.9							
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DAY 6	Temp: @ °F B.P: 110/90 mmHg Pulse: 92 b/min	Medication Chart / Reports:
C/O:	No fresh complaints	As per
O/E:	Pt 4c - conscious & coherent.	drug chart
Adv:		

	Temp:	*F	B.P:	mmHg	Pulse:	b/min	Medication Chart / Reports:
DAY 7							
C/O:							
O/E:							
Adv:							
DAY 8							
C/O:							
O/E:							
Adv:							
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PHARMACIST ACTIVITIES:

SL no	Activities	Ref.no:	Description

DISCHARGE SUMMARY

Rx

1. Tab. Augmentin - 200mg - p/o
2. Tab. metrogyl - 400mg - p/o - 11 days
3. Tab. PAN-O - p/o - 10 - 5 days
4. Tab. chymotol Forte - BD - 5 days
5. Tab. Wincee - vgt - c - 500mg - BD - 10 days
6. Lab. Unipac - BD - 3 days
7. Tab. Hbloy - DD - 1 month
8. Tab. Shilcal - DD - 5 days

Follow up -

Review after 7-10 days.

DRUG CHART

DRUG	GENERIC NAME	Dose	Freq	Route	Day 1	Day 2	Day 3	Day 4	Day 5
Inj. Moxifloxacin	ceftriaxone	1gm	BD	IV	✓	✓			
Inj. Amphotericin	metronidazole	100ml	TID	IV	✓	✓	✓	✓	✓
Inj. PAN	pantoprazole	40mg	BD	IV	✓	✓	✓	✓	✓
Inj. Dipyridol	Diclofenac	1amp	TID	IV	✓	✓			
Inj. Zofen	Endamethon	4mg	BD	IV	✓	✓	✓	✓	✓
Inj. Tranexa	Tranexamic acid	1amp	BD	IV	✓	✓			
Tab. Augmentin	Amoxicillin + Clavulanic acid	625mg	BD	IV		✓	✓	✓	✓
Tab. Chymotol forte	Dipyridol Chymotripsin	4226	TID	P/O		✓	✓	✓	✓
Tab. Vence	Vit-c	500mg	BD	P/O	✓	✓	✓	✓	✓
Tab. Combiflam	Paracetamol + Ibuprofen	oral	BD	P/O	✓	✓	✓	✓	✓

DISCUSSION: (SOAP NOTES)

SUBJECTIVE:

A 25yr female presented to ER department
w/ H/O - G₂P₁A₁, E₉MA & oligohydramnios in
labour now admitted for emergency LSCS

OBJECTIVE:

Bp - normal (120/80 mmHg).

CBP - Normal. WBC - 13,100 TT

Other:

CST clear.

Based on Subjective and Objective evidences

ASSESSMENT: Patient was diagnosed to have G₂A₁C₁ term gestation with oligohydramnios and was delivered based on CST-scan report.

Current therapy:-

Inf. Monocel: - Generic name - Ceftriaxone - 1gm - BD - W.
Class - Cephalosporins - Antibiotic

Inf. Metrogyl: - Generic name - metronidazole, class - Antibiotic
MOA - Inhibits the cell wall synthesis - kills the bacteria.

Inf. PAN: - Generic name - pantoprazole - 40mg - BD - PPI
MOA - Inhibits the bacterial cell growth, and kills them, prevents infection.

MOA: Inhibits the final step of gastric acid production.

Uses: Treats Heartburn, Acidity, S/E: Constipation, Abdominal discomfort.

Inf. Dynapar: - Generic name - Diclofenac - 1amp - TID.
MOA - Inhibits the production of prostaglandins - the chemical messengers that cause inflammation and pain.

Class - NSAID (Nonsteroidal Anti-inflammatory Drugs).

Inf. Zofen: - Generic name - Ondansetron - 4mg - BD.

Class - Antiemetic; MOA - Inhibits the 5-HT receptors (Serotonin) by inhibiting the nausea and vomiting.

S/E: Drowsiness, Dizziness.

Inf. Tranexa: - Generic name - Tranexamic acid - 1amp - BD.

Class - Antifibrinolytic drug.

MOA - prevents/worsens by breaking/lysing the fibrin production the causes excess loss of blood.

Tab. Augmentin: - Generic name - Amoxicillin + clavulanic acid.

Class - penicillin; Antibiotic S/E: Rash, nausea, Headache.

MOA - Inhibits the cell wall synthesis - kills the bacterial growth.

Tab. Combiflam: - Generic name - paracetamol + Ibuprofen - BI
Class - NSAID - Non-steroidal anti-inflammatory drug.

MOA - Inhibits the production of certain chemical messengers that causes pain and inflammation.

Tab. Lincet: - VitC - multivitamin supplement.

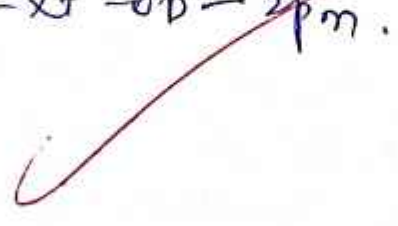
Tab. ChymodalPate: - treats pain

PLAN:

Discharge condition

Symptomatically improved, Haemodynamically Stable

Discharge medication

- 1) Tab. Augmentin - 200mg - BD $\begin{cases} 8AM \\ 8PM \end{cases}$ } 5 days
 - 2) Tab. metrogyl - 400mg - TID $\begin{cases} 8AM \\ 2PM \\ 8PM \end{cases}$ } 5 days
 - 3) Tab. PAN-O - OD - 7AM (BBP) - 5 days
 - 4) Tab. Chymolal forte - BD $\begin{cases} 8AM \\ 8PM \end{cases}$ } 5 days
 - 5) Tab. Vmcee - 500mg - BD $\begin{cases} 8AM \\ 8PM \end{cases}$ } 10 days
 - 6) Tab. Unispa - BD $\begin{cases} 9AM \\ 9PM \end{cases}$ } 4 days
 - 7) Tab. Hbloy - OD - 8AM - 1 month.
 - 8) protein powder - 2 scoops - 2 glass of milk - BD $\begin{cases} 8AM \\ 8PM \end{cases}$
 - 9) Tab. Sheleat - XT - OD - 2PM.
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PATIENT COUNSELLING:

REGARDING DISEASE CONDITION:

Gestation & oligohydramnios - Is the sudden/decrease of amniotic fluid, due to which a emergency lower segment caesarean section was done on priority.

REGARDING DRUGS:

- Tab Augmentin - 200mg - p/o - BD - Is an antibiotic
- Tab metrogyl - 400mg - TID - is an antibiotic prevents infection
- Tab PAN-D - DD - BBF - Treats Heartburn/Acidity
- Tab. chymoral forte - BD - treats pain.
- Tab. Lomce - BD - multivitamin supplement
- Tab Urispas - BP - reduces muscle pain of UTI
- Tab Hbloy - DD - treats Blood deficiency.
- Tab sheleal - XT - DD - $\uparrow$ blood Ca^{+2} levels.

REGARDING LIFESTYLE MODIFICATION:

- Drink more water to stay hydrated
- Drink plenty of juices
- Don't lift heavy objects
- Take maternal bed rest.
- Perform light physical exercise
- Avoid strenuous exercise
- Take soft diet.
- Healthy food can help you gain a healthy, amount of weight

Sumera