



UNIVERSITY OF RUHUNA – FACULTY OF ALLIED HEALTH SCIENCES

DEPARTMENT OF PHARMACY

THIRD BPHARM PART I EXAMINATION – DECEMBER 2023

PH 3134 HOSPITAL AND CLINICAL PHARMACY – SEQ PAPER

TIME: THREE HOURS

INSTRUCTIONS

- There are six questions in part A, B and C of this SEQ paper.
- Answer all questions.
- No paper should be removed from the examination hall.
- Do not use any correction fluid.
- Use illustrations where necessary.

PART A

1. All practicing pharmacists are obliged to ensure the service they provide to each patient meets appropriate quality and guarantees patient safety. Good Pharmacy Practice (GPP) serves as a tool to clarify and fulfill this obligation.
 - 1.1. Define the term GPP related to pharmacy practice. *(10 marks)*
 - 1.2. State the difference between pharmaceutical care and pharmacy care. *(10 marks)*
 - 1.3. List five common drug-related problems in Sri Lanka. *(15 marks)*
 - 1.4.
 - 1.4.1. Draw a typical medication management cycle in a hospital pharmacy. *(10 marks)*
 - 1.4.2. Briefly outline the role of a hospital pharmacist to ensure patient safety and quality of the service according to 1.4.1. *(15 marks)*
 - 1.5. Briefly describe the requirements of the following related to GPP guidelines of Sri Lanka. *(30 marks)*
 - 1.5.1. Opening a new pharmacy in urban areas and rural areas
 - 1.5.2. Opening a new pharmacy inside a supermarket in an urban area
 - 1.5.3. Premises requirements
 - 1.5.4. Relocating a pharmacy in an urban area
 - 1.5.5. Medicine dispensing area and prescription counter
 - 1.6. Define “LASARA” drugs and briefly outline how these drugs should be handled to ensure patient safety. *(10 marks)*
2.
 - 2.1. What is the primary function of a “Central Sterile Supply Department (CSSD)” in a hospital setting? *(10 marks)*
 - 2.2. Draw a typical flow process of a CSSD. *(15 marks)*
 - 2.3. Define control substances and mention five examples. *(15 marks)*

- 2.4. Develop a Standard Operating Procedure (SOP) for handling narcotic drugs in a hospital, addressing the following: (30 marks)
- 2.4.1. Storage
 - 2.4.2. Issuing
 - 2.4.3. Administering
 - 2.4.4. Disposal
- 2.5. Describe the key roles of a clinical pharmacist in a patient's ward and how these interventions could contribute to improve the patient's quality of life. (30 marks)

PART B

- 3.
- 3.1. Write four therapeutic services provided by a hospital. (15 marks)
 - 3.2. The Drug and Therapeutic Committee (DTC) ensures the safe and effective use of medicines in a hospital.
 - 3.2.1. List five members of the DTC. (15 marks)
 - 3.2.2. Briefly explain four functions of the DTC in a hospital. (20 marks)
 - 3.3.
 - 3.3.1. State the difference between "formulary" and "formulary system". (20 marks)
 - 3.3.2. Briefly explain the advantages of implementing a formulary system. (30 marks)
- 4.
- 4.1. List two minimum standards for ambulatory care pharmaceutical services. (10 marks)
 - 4.2. Write a short note on automated medication dispensing. (30 marks)
 - 4.3. Briefly explain the storage procedures for flammables and corrosives in the drug store. (15 marks)
 - 4.4. State three types of waste commonly accumulated in hospitals, giving one example for each type. (15 marks)
 - 4.5. Hospital pharmacists play an important role in aseptic dispensing and cytotoxic drug reconstitution.
 - 4.5.1. Define aseptic dispensing. (10 marks)
 - 4.5.2. Write four sources of contamination during cytotoxic drug reconstitution. (10 marks)
 - 4.5.3. Write two aseptic techniques followed during cytotoxic drug reconstitution. (10 marks)

5.

- 5.1. Define the term "Clinical Pharmacy". (10 marks)
- 5.2. Clinical pharmacists are responsible and accountable for medication therapy and patient outcomes.
- 5.2.1. State five reasons for the emergence of clinical pharmacy. (10 marks)
- 5.2.2. Pharmaceutical care is integral to clinical pharmacy. Briefly explain the key elements of the pharmaceutical care process. (30 marks)
- 5.3 Drug information can be a verbal answer to a patient's query, or may involve a detailed monograph presented to the Pharmacy & Therapeutics committee of a healthcare setting.
- 5.3.1. Briefly explain the systemic approach recommended for answering drug information queries. (35 marks)
- 5.3.2. Mention five roles of a clinical pharmacist in providing drug information services. (15 marks)

6.

- 6.1. Define the term "Medication Reconciliation". (10 marks)
- 6.2. A 75-year-old male, Mr. JB, presents at a rheumatologic clinic with a complaint of on and off knee pain and is prescribed naproxen 250 mg three times daily. He has a past medical history of severe heart failure, hypertension and diabetes and is also taking below medications.

Furosemide	40 mg mane
Carvedilol	6.25 mg bd
Aspirin	75 mg nocte
Metformin	500 mg tds
Enalapril	5 mg once daily

On examination, his BP is reported as 130 mmHg/ 85 mmHg and HbA1c level is reported as 5.7%. He has an allergy history of penicillin and no allergy history to food and plasters.

- 6.2.1. Match the patient's current medications with indication. (18 marks)
- 6.2.2. Identify one drug-related problem from the patient's current drug therapy. (05 marks)
- 6.2.3. Write a recommendation to overcome the drug-related problem identified in 6.2.2. (05 marks)
- 6.3. Assume that you are a clinical pharmacist and have to counsel a patient about the prescribed medication. Write four counselling points that you have to address. (12 marks)

PART C

- 6.4. Briefly explain the role of pharmacist in a drug information center. **(20 marks)**
- 6.5. List five team members available in a poison information center. **(10 marks)**
- 6.6. Briefly describe three functions of a poison information center. **(20 marks)**

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