



# 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**

To,  
The Coordinator,  
NAAC, Bengaluru.

**Subject:** Proof of Student-centric methods used for enhancing learning experience.

**Reference:** 2.3.1 Student-centric methods are used for enhancing learning experience.

**Dear Sir/Madam,**

2.3.1 Student-centric methods used for enhancing learning experience by

- Experiential learning
- Integrated/interdisciplinary learning
- Participatory learning
- Problem solving methodologies
- Self-directed learning
- Patient-centric and Evidence-Based Learning
- Learning in the Humanities
- Project-based learning
- Role play



  
**Dr. S A SREENIVAS**  
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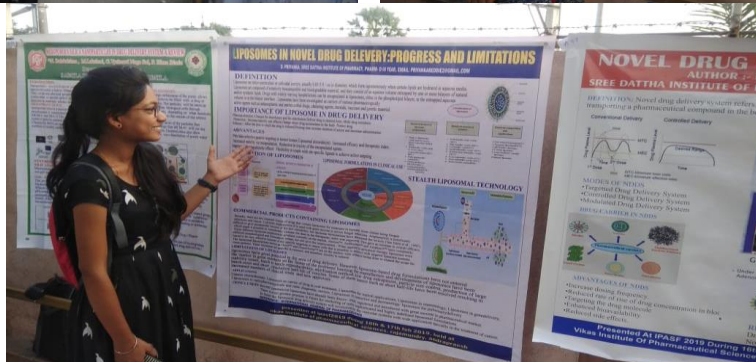
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## PARTICIPATORY LEARNING



OUR PHARM. D III YEAR STUDENTS PPRESNT POSTER IN 10<sup>TH</sup> NATIONAL IPA CONGRESS 2019



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**STUDENT VISIT JODAS PHARMA**



**GROUP DISCUSSION**

  
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## EXPERIENTIAL AND PROBLEM BASED LEARNING



**Mr. Mujeebuddin share his experience in clinical research, Pharmacovigilance and Clinical Data Management**

  
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Sponsored by: Vyjayanthi Educational Society



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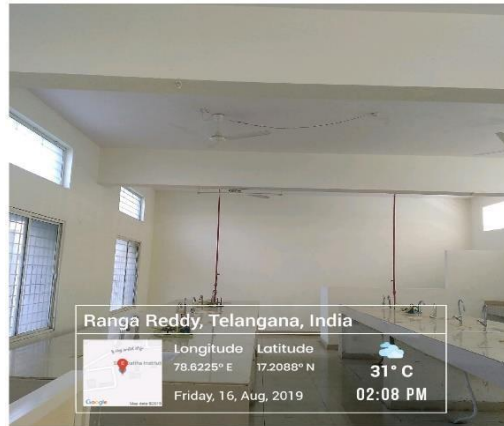
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## Patient-centric and Evidence-Based Learning



### PHARMACY PRACTICE LAB



### AWARE GLOBAL HOSPITAL

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## ROLE PLAY LEARNING



## DRUG INFORMATION CENTER

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

**PATIENT COUNSELLING DOCUMENTATION FORM**

DATE: 10-3-19 TIME: 10:00 AM

Type of Patient:  In Patient IP# Number: 32345  Out Patient OP# Number:

Age: 70 years Sex: Male Allergies: *None*

Current Medical Problem: *Acute exacerbation of COPD (Type II) Respiratory*

Current Medication: *Tab. Lumen AC-600mg, Amp. Acetylstear, Tab. Paracetamol, Tab. Aspirin*

Whether patient's specific background information collected?  Yes  No

On which disease counselled: COPD

Points covered during counselling session:

<input checked="" type="checkbox"/> Name and Purpose of medication	<input checked="" type="checkbox"/> Precautions to be taken
<input type="checkbox"/> Dosage regimen	<input type="checkbox"/> Storage recommendations
<input type="checkbox"/> Advice on missed dose	<input type="checkbox"/> Potential side effects
<input type="checkbox"/> Significant interactions	<input checked="" type="checkbox"/> Life style modifications

Any major barriers involved:  Yes  No

If Yes,  Patient based  Provider based  System based

Time taken for counselling: *20-30 mins*

Counselling provided to:  Patient  Patient's representative

If patient's representative, give reason:

Patient is unconscious  Language problem

Hearing problem  Pediatric patient

Counselling material provided: *Verbal*

Understanding of the patient ascertained:  Yes  No

Name of the Pharmacist: *Chandra* Signature: *[Signature]*

Name of the Patient: *XXX* Signature: *XXX*

COPD

COPD is chronic obstructive pulmonary disease is a common disease - there are two main forms of COPD chronic bronchitis which involves a long term cough with mucus production which involves an damage to lung.

Medication

Tab. lumen AC-600mg  
 Comp: Acetylstear  
 uses: To thin & loosen mucus in the airway & helps you to clear the mucus forming

Side effects: skin rashes, itching  
 D.O.A. deal.

2) Tab. PARACETAMOL-1mg  
 Comp: Paracetamol  
 uses: ↓ Body temperature  
 Side effects: Nausea, vomiting  
 R.O.A.: IV

3) Sy. OPTIMUM  
 Comp: Multivitamin

*[Signature]*  
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**SREE DATTHA INSTITUTE OF PHARMACY**  
Medication Error Reporting Form

1. Date of event: 14/10/2017  
Time of event: 10:30 AM

2. Location of event:  Pharmacy  Other: \_\_\_\_\_

3. Type of error:  
 Prescribing  Dispensing  Administration  Other (specify): Labeling error

4. Patient details:  
Age: \_\_\_\_\_ Gender: Female  
Diagnosis: \_\_\_\_\_

5. Description of the event: (How did the event occur and how was it detected?)  
Duty Doctor prescribed Jay Dory 100mg IV BID but DPA transcribed as 200mg instead.

6. Details of medicines involved in the event:

S. No.	Drug Name	Strength	Frequency
1	Jay Dory (Doxycycline)	100mg	BID

7. Did the error reach the patient?  Yes  No

8. Outcome of the event:

<input type="checkbox"/> A. Events have potential to cause error	<input type="checkbox"/> E. Temporary harm requiring treatment
<input type="checkbox"/> B. Error did not reach patient	<input type="checkbox"/> F. Temporary harm requiring hospitalization
<input type="checkbox"/> C. No harm	<input type="checkbox"/> G. Permanent harm
<input type="checkbox"/> D. No harm but requires monitoring	<input type="checkbox"/> H. Near death event
<input type="checkbox"/> 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: \_\_\_\_\_ Designation: \_\_\_\_\_ Mobile No: \_\_\_\_\_

11. Intervention done:  
 Administered antidote  Changed to correct drug / dose / frequency  No action needed  
 Education / training provided  Communication process improved  Other (specify): \_\_\_\_\_  
 Inform staff who made error  Policy / procedure changed / instituted

Mefenoxyl  
 Injection - soomy - 200mg vial  
 Brand name - mephenoxazole  
 Indications: - used to treat certain bacterial infections  
 Pharmacological class - antibiotic  
 Dose: soomy - IV for every 8 hours in combination with cefotaxime, ampicillin.  
 Patient advice:  
 do not consume alcohol before taking the mephenoxyl  
 contraindications -  
 can be indicated during the first trimester of pregnancy  
 Adverse effects -  
 Vomiting, Nausea, Stomach upset, constipation, metallic taste.  
 Cautions  
 even though it may be safe some people have very bad and sometimes deadly side effects such as larynx lachation.

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: 20/11/17 Unit: Respiratory IC IP Number: 51474

Patient Details:  
 Age: 54yrs Sex:  Male  Female PMHx: H/O

Diagnosis: High grade fever 2-3 days

Drugs involved: Tas Tazvir, Cef Dapthalone, Jay Dory, Tas H/O, Jay Effen

Date of drug prescribed: 20/11/17  
 Day of problem identified: 20/11/17  
 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

  
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**SREE DATTHA INSTITUTE OF PHARMACY**  
Medication Error Reporting Form

1. Date of event: 17/12/21  
Time of event: 10:00 AM

2. Location of event:  Ward  OPD  Pharmacy  Others

3. Type of error:  
 Prescribing  Dispensing  Administration  Others (specify): Transcription error

4. Patient details:  
Age: 45 Gender: Female  
Diagnosis: DM2

5. Description of the event: (how did the event occur and how was it detected?)  
Duty Doctor prescribed Inj Dovy 100mg IV BID but DM2 transcribed as 200mg instead.

S. No.	Dosage Form	Generic Name	Strength	Frequency
1	Inj	Doxyl Doxycycline	100mg	BID

6. Details of medicines involved in the event:

7. Did the error reach the patient?  
 Yes  No

8. Outcome of the event:  
 A. Events have potential to cause error  
 B. Error did not reach patient  
 C. No harm  
 D. No harm but requires monitoring  
 E. Temporary harm requiring treatment  
 F. Temporary harm requiring hospitalization  
 G. Permanent harm  
 H. Near death event  
 I. Error, death  
 J. Death

9. Possible causes & contributing factors:  
 Lack of knowledge / experience  
 Illegible prescription  
 Look alike / sound alike medication  
 Wrong labeling / instruction  
 Use of abbreviations  
 Unavailable patient information  
 Peak hour  
 Miscommunication  
 Failure to adhere to work procedure  
 Others

10. Details of reporter: (optional)  
Name: \_\_\_\_\_  
Designation: \_\_\_\_\_  
Mobile No: \_\_\_\_\_

11. Intervention done:  
 Administered antidote  
 Education / training provided  
 Informed staff who made error  
 Changed to correct drug / dose / frequency  
 Communication process improved  
 Policy / procedure changed / instituted  
 No action needed  
 Others (specify): \_\_\_\_\_

*Handwritten notes:*

used Acetaminophen  
Side effects: Rash, Nausea  
Dose: 100mg  
Inj - Acetaminophen - 100mg  
Comp: Intravenous  
used Treatment of Asthma  
Side effects: Headache, Chest pain  
= Neb Budesonide - Resp  
Comp: Budesonide  
dose: To treat acute/chronic attack  
Side effects: Bad taste in mouth, runny nose  
Situation: asit  
Medicine  
6/11/21

  
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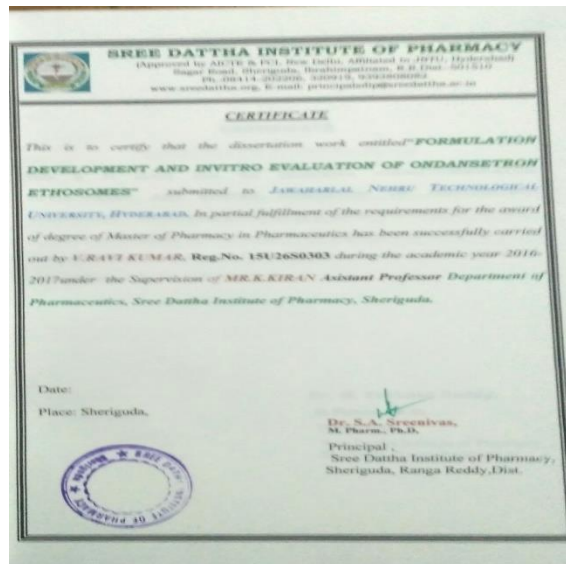
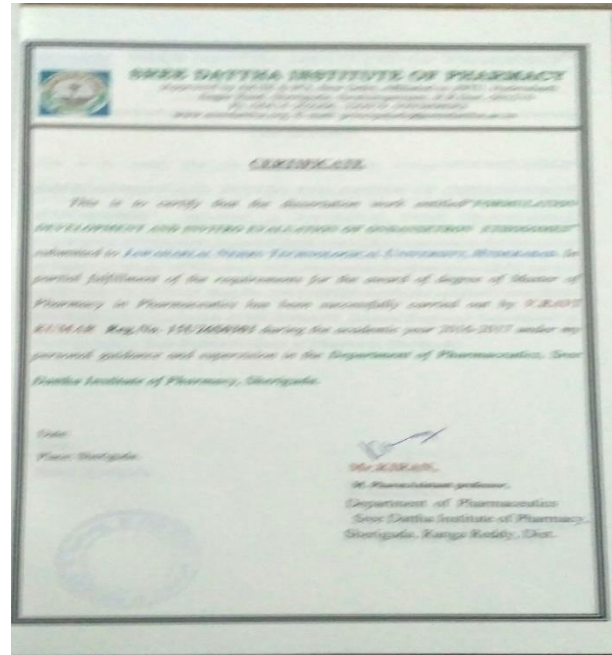
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## PROJECT BASED LEARNING



  
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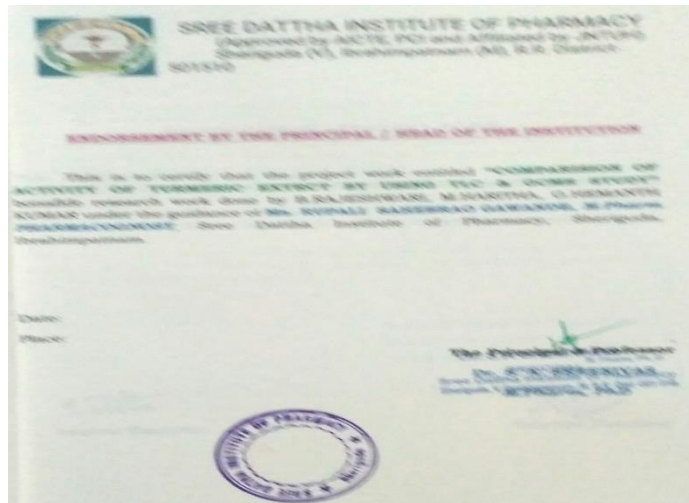
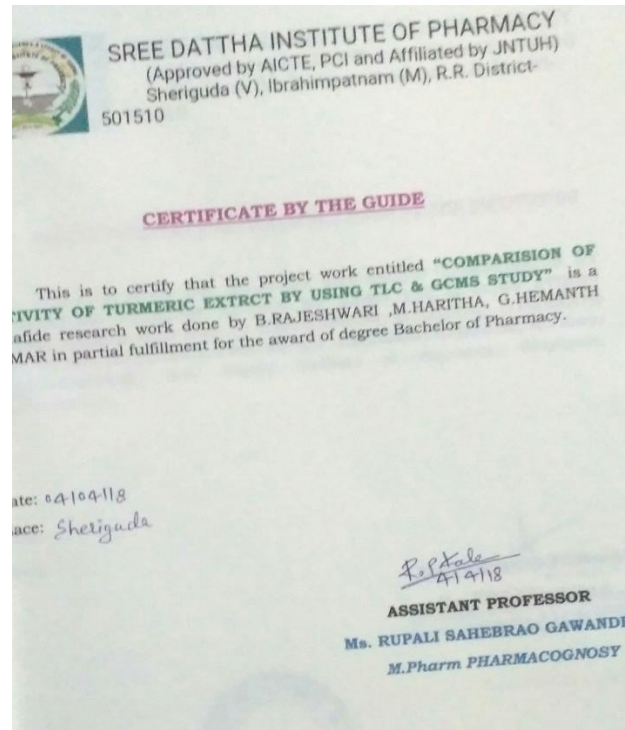
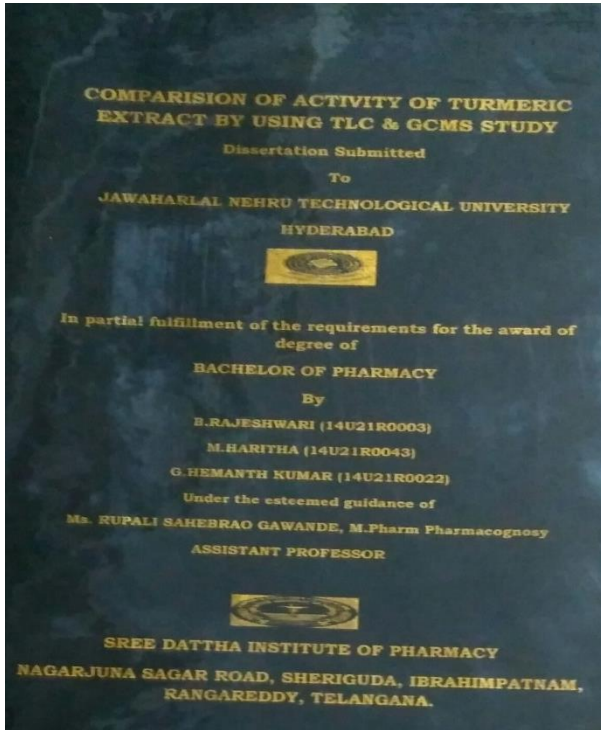
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