

0032



17 SEP 2020
THE OPEN UNIVERSITY OF SRI LANKA
KANDY REGIONAL CENTRE
EXAMINATION

THE OPEN UNIVERSITY OF SRI LANKA
FACULTY OF HEALTH SCIENCES
DEPARTMENT OF PHARMACY
ACADEMIC YEAR 2019/2020 – SEMESTER I

BACHELOR OF PHARMACY HONOURS
FMU6303 – CLINICAL PHARMACY I – LEVEL 6
FINAL EXAMINATION
DURATION: THREE (03) HOURS

DATE: 17TH SEPTEMBER 2020

TIME: 9.30 A.M. – 12.30 P.M.

Part B – Short Answer Questions (20 marks)

1.

1.1 List four (04) sources of information you would use when taking medication history from a patient. (04 marks)

- i.....
- ii.....
- iii.....
- iv.....

1.2 State four (04) information you would collect during a medication history taking other than name, duration, frequency and doses of drugs. (04 marks)

- i.....
-
- ii.....
-
- iii.....
-
- iv.....
-

1.3 Write two (02) main purposes of taking medication history. (02 marks)

- i.....
- ii.....

2.

2.1. List three (03) clinical benefits of accurate monitoring of renal function. (03 marks)

- i.....
- ii.....
- iii.....

2.2. State two (02) limitations of the Cockcroft-Gault equation. (02 marks)

- i.....
.....
- ii.....
.....

2.3. Write five (05) biochemicals that can be used to assess the renal function. (05 marks)

- i.....
- ii.....
- iii.....
- iv.....
- v.....

Part C – 04 Structured Essay Questions (60 marks)

1.

1.1. State four (04) negative outcomes of poor discharge process. (04 marks)

1.2. Briefly discuss the role of a clinical pharmacist in the discharge process of a patient. (06 marks)

1.3. Discuss the information you would give to a patient who is newly prescribed with Gliclazide 40 mg to be taken twice daily. (05 marks)

2.

2.1. List four (04) benefits a clinical pharmacist would gain by multidisciplinary ward round participation. (04 marks)

2.2. Briefly explain how a pharmacist would do pre-ward round preparation. (05 marks)

2.3. Briefly describe the follow-up measures a pharmacist would undertake after a ward round preparation. (06 marks)

3. Mrs. HJ (68 years old) has been admitted to your ward with shortness of breath and peripheral oedema. She has a past history of Congestive Heart Failure, Hypothyroidism and Ischaemic Heart Disease (IHD).

Additional information;

BP: 140/95 mmHg

Blood investigations:

Na	127 mmol/L (135-145 mmol/L)
K	3.5 mmol/L (3.5-5.0 mmol/L)
Urea	7.6 mmol/L (2.5-7.7 mmol/L)
Cr	60 µmol/L (30-110 µmol/L)
Ca	1.9 mmol/L (2.1-2.6 mmol/L)
Mg	0.5 mmol/L (0.7-1.0 mmol/L)

Current drug chart includes;

Carvedilol 25 mg/bd

Thyroxine 50 µg/daily

GTN S/L sos

Frusemide 40 mg/tds

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- 3.1 Review this patient's medicines. List the problems you identify with suggestions for resolving identified problems. (10 marks)
- 3.2 What advice you would give regarding the timing of administration of Thyroxine? (02 marks)
- 3.3 List three (03) lifestyle management advices you would give to Mrs. HJ for the control of her IHD. (03 marks)

4.

- 4.1. Review the given prescription and write the identified problems. (10 marks)

<p><i>Rx</i></p> <p>28/08/2020</p> <p>Atenolol 50 mg mane Salmeterol + Fluticasone DP sos Salbutamol DP sos Warfarin 5.0 mg q.d. Diltiazem 30 mg tds</p> <p>Dr. N Senerath MBBS (SL) Reg No: 1648</p>

- 4.2. Write three (03) purposes of conducting a compliance review. (03 marks)
- 4.3. List four (04) consequences of drug related problems. (02 marks)

