

THE OPEN UNIVERSITY OF SRI LANKA
FACULTY OF HEALTH SCIENCES
DEPARTMENT OF PHARMACY
THE ACADEMIC YEAR 2022/ 2023 – SEMESTER I



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

DATE: 21ST MARCH 2023

TIME: 09.30 A.M. – 12.30 P.M.

Part B – 02 Short Answer Questions (20 Marks)

1.

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

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- 1.2 State four (04) information that you would collect during a medication history taking other than names, durations, frequencies, and doses of medication. (04 marks)

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

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2.

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

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

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

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Part B – 04 Structured Essay Questions (60 Marks)

1.

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

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

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

2. 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 (CHF), hypothyroidism and Ischemic Heart Disease (IHD).

Additional information.

BP: 140/95 mmHg

Blood investigations:

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|------|------------------------------|
| 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 µmmol/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

- 2.1 Review this patient's medicines. List the problems you identify with suggestions for resolving identified problems. (10 marks)
- 2.2 How you would advise this patient regarding the use of thyroxine? (02 marks)
- 2.3 List three (03) lifestyle management advice you would give to Mrs. HJ for the control of her IHD. (03 marks)

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3. 49-year-old Mr. HA has a history of heart failure (HF) and osteoarthritis (complains of joint pain). He is receiving the following medications:

Perindopril 10 mg/ mane
Frusemide 40 mg/ bd
Carvedilol 12.5 mg/ bd
Digoxin 250 µg daily
Spironolactone 12.5 mg/ tds
Diltiazem 60 mg/ tds (new)

- 3.1. List three (03) drug related issues you can identify with appropriate suggestions for resolving the issues. (06 marks)
- 3.2. Why would you need to monitor his serum electrolytes? (03 marks)
- 3.3. After one-month patient got admitted with nausea and vomiting. Digoxin toxicity was suspected.
- 3.3.1. Briefly explain why you would recommend Therapeutic Drug Monitoring (TDM) for digoxin? (03 marks)
- 3.3.2 When should the samples to be collected for TDM? Justify your answer. (03 marks)

4. Mrs. CD (60 years old) has a history of hypertension and asthma. She is admitted to your ward for an endoscopy test. You can see from the clinic notes that Mrs. CD is being investigated for gastric ulcers.

The medication history taken by a junior ward pharmacist is mentioned below.

Losartan 50mg/ mane
Salmeterol + Fluticasone capsule/ inhale sos (prescribed bd)
Salbutamol capsule/ inhale sos
Diclofenac 50mg/ tds (self-prescribed) – being on this a few months for a back pain.

Note: Patient doesn't know the drug names and has a poor inhaler technique.

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- 4.1 Why is it important to take notes on patients' knowledge regarding medicines while taking the history? (02 marks)
- 4.2 Briefly explain different strategies that can be used to improve this patient's adherence and knowledge regarding the medicines. (05 marks)
- 4.3 Comment on the appropriateness of the medicines she has been taking. (08 marks)