

VIDEO DEKHNE KE LIYE BANNER PAR CLICK KARE



1 SNCU is

- (a) Special newborn care unit
- (b) Super newborn care unit
- (c) Social norms for cultural unity
- (d) Static newborn care unit



1 SNCU is

- (a) Special newborn care unit
- (b) Super newborn care unit
- (c) Social norms for cultural unity
- (d) Static newborn care unit



In-patients Drug Distribution System

• Inpatients are those patients who require hospitalization i.e. get them selves admitted in the hospital stay there for treatment till they are discharged

1. Individual prescription order system:

- Physician write the prescription for individual patient who obtains the drug prescribed from any medical store or hospital dispensary.
- ICCU (Intensive Coronary Care Unit)
- ICU (Intensive Care Unit)
- NICU (Neonatal Intensive Emergency ward)
- SNCU (Special newborn care unit)



- 2. Complete floor stock system: Envelop method
 - (I) Charged floor stock system: expensive drugs
 - (II) Non-Charged floor stock system : drug basket method, mobile dispensary unit
- 3. Combination of individual drug order floor stock system: Required of drug or surgical items are given to patient who purchase and deposit these items in hospital ward under supervision of registered nurse
- 4. Unit Dose Dispensing system (UDDS)
 - (I) Centralized Unit Dose Dispensing System (CUDDS)
 - (II) Satellite Pharmacies For Decentralized Unit Dose Dispensing System (DUDDS)

What is the full form of 'BEmOC'

- (a) Basic Emergency Obstetric care
- (b) Basic Early Medical Obstetric Care
- (c) Basic Emergency Medical Obstetric Care
- (d) Basic Emergency medical care



What is the full form of 'BEmOC'

- (a) Basic Emergency Obstetric care
- (b) Basic Early Medical Obstetric Care
- (c) Basic Emergency Medical Obstetric Care
- (d) Basic Emergency medical care



BMeOC

• Drugs, parenteral anticonvulsants, manual removal of placenta, removal of retained products of conception, assisted vaginal delivery and neonatal resuscitation are classified as basic emergency obstetric care (BEmOC).



Which one of the following is NOT included in the in-patient services

- (a) Individual prescription order system
- (b) Issue system
- (c) Unit dose dispensing method
- (d) Complete floor stock system



Which one of the following is NOT included in the in-patient services

- (a) Individual prescription order system
- (b) Issue system
- (c) Unit dose dispensing method
- (d) Complete floor stock system



In-patients Drug Distribution System

• Inpatients are those patients who require hospitalization i.e. get them selves admitted in the hospital stay there for treatment till they are discharged

1. Individual prescription order system:

- Physician write the prescription for individual patient who obtains the drug prescribed from any medical store or hospital dispensary.
- ICCU (Intensive Coronary Care Unit)
- ICU (Intensive Care Unit)
- NICU (Neonatal Intensive Emergency ward)
- SNCU (Special newborn care unit)



- 2. Complete floor stock system: Envelop method
 - (I) Charged floor stock system: expensive drugs
 - (II) Non-Charged floor stock system : drug basket method, mobile dispensary unit
- 3. Combination of individual drug order floor stock system: Required of drug or surgical items are given to patient who purchase and deposit these items in hospital ward under supervision of registered nurse
- 4. Unit Dose Dispensing system (UDDS)
 - (I) Centralized Unit Dose Dispensing System (CUDDS)
 - (II) Satellite Pharmacies For Decentralized Unit Dose Dispensing System (DUDDS)



In which drug distribution system are medications ordered, packed, handled, administered and charged in multiples of single-dose units containing a predetermined amount of drug

- (a) Individual prescription system
- (b) Complete floor stock system
- (c) Unit dose dispensing method
- (d) Centralized distribution system



In which drug distribution system are medications ordered, packed, handled, administered and charged in multiples of single-dose units containing a predetermined amount of drug

- (a) Individual prescription system
- (b) Complete floor stock system
- (c) Unit dose dispensing method
- (d) Centralized distribution system



Unit dose dispensing:

Those medications which are ordered, packed, handled administered and charged in multiples of single dose units containing a predetermined amount of drug or supply sufficient for one regular dose.



Unit-dose dispensing system is used for

- (a) In-patient
- (b) Out-patient
- (c) Both in & out patient
- (d) Emergency patients



Unit-dose dispensing system is used for

- (a) In-patient
- (b) Out-patient
- (c) Both in & out patient
- (d) Emergency patients



Types of Services Provided to In-patients

- 1. Individual Prescription order system The doctors write a prescription and ask the patient to get the medicines from licensed medical store.
- 2. Floor Ward Stock System The drugs are stored in Pharmacy Stores, supplied to the wards when ordered and are supervised by the registered nurse at the nursing station.
 - Charge drugs cost of the drugs is billed in the patients account.
 - Non-charge drugs cost is not directly entered in the patients account but included into the per day cost of hospital ward.
- 3. Combination of Individual drug order & floor stock system The drugs in this method are mostly dispensed on an individual prescription basis, while the remaining drugs are obtained via limited floor stock. The nursing personnel prepare individual doses, reconstitute injectable medications and order floor stock.
- 4. Unit Dose System
 - Centralized unit dose dispensing (CUDD)
 - Satellite pharmacy service for decentralized unit dose dispensing (CUDD)



Drug basket dispensing method is adopted in the

- (a) Non charge floor stock
- (b) Charge flour stock drugs
- (c) Ambulatory drugs
- (d) Controlled drugs



Drug basket dispensing method is adopted in the

- (a) Non charge floor stock
- (b) Charge flour stock drugs
- (c) Ambulatory drugs
- (d) Controlled drugs



Non-charge floor stock drugs:

- Non charge floor stock drugs are the medicaments that are placed at the nursing station for the use of all patients on the floor.
- These drugs ,there shall be no direct charge from the patients account. It is divided in to two methods.
 - a. Drug basket method.
 - b. Mobile dispensary unit.

Following statements of unit dose system are correct

- i. Patient receives improved service round the clock and charged for only administered doses
- ii. Allowing nurses more time for direct patient care
- iii. Medication errors are decreased
- iv. Eliminates wastage of drugs and pilferage
- (a) Only (i), (iii) and (iv)
- (c) Only (ii) and (i)
- (b) Only (i), (ii) and (ii)
- (d) All of these

Following statements of unit dose system are correct

- i. Patient receives improved service round the clock and charged for only administered doses
- ii. Allowing nurses more time for direct patient care
- iii. Medication errors are decreased
- iv. Eliminates wastage of drugs and pilferage
- (a) Only (i), (iii) and (iv)
- (c) Only (ii) and (i)
- (b) Only (i), (ii) and (ii)
- (d) All of these



Unit dose dispensing:

Those medications which are ordered, packed, handled administered and charged in multiples of single dose units containing a predetermined amount of drug or supply sufficient for one regular dose.

A. Centralized unit-dose drug distribution system(CUDD):

- All in-patient drugs are dispensed in unit doses and all the drugs are stored in central area of the pharmacy and dispensed at the time the dose is due to be given to the patient.
- Drugs are transferred from the pharmacy to the indoor patient by medication cards.



B. Decentralized unit dose dispensing:

• This operates through small satellite pharmacies located on each floor of the hospital.

Procedure:

- ➤ Patient profile card containing full date, disease, diagnosis is prepared.
- ➤ Prescription are sent directly to the pharmacist witch are then entered in the patient profile card.
- > Pharmacist checks medication order.
- ➤ Patient profile card and prescription order is filled by pharmacy technicians.

Drug distribution system falls into categories

- (a) Ward controlled system
- (b) Pharmacy controlled imprest based system
- (c) Pharmacy controlled patient issue system
- (d) All of these

Drug distribution system falls into categories

- (a) Ward -controlled system
- (b) Pharmacy controlled imprest based system
- (c) Pharmacy-controlled patient issue system
- (d) All of these



Drug distribution system falls in to 3 categories

- 1) Ward controlled system
- 2) Pharmacy controlled imprest based system
- 3) Pharmacy controlled patient issue system

Which one is not a type of floor stock system

- (a) Charged floor-stock system
- (b) Uncharged floor-stock system
- (c) Access floor-stock system
- (d) None of these

Which one is not a type of floor stock system

- (a) Charged floor-stock system
- (b) Uncharged floor-stock system
- (c) Access floor-stock system
- (d) None of these



Complete floor stock system: Envelop method

(I) Charged floor stock system: expensive drugs

(II) Non-Charged floor stock system : drug basket method,

mobile dispensary unit



Automated drug dispensing system is also called

- (a) Unit-based cabinets
- (b) Automated dispensing devices
- (c) Automated distribution cabinets
- (d) All of these



Automated drug dispensing system is also called

- (a) Unit-based cabinets
- (b) Automated dispensing devices
- (c) Automated distribution cabinets
- (d) All of these



Automated drug dispensing system

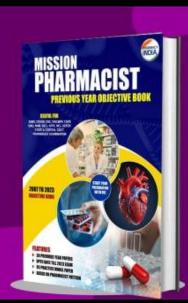
An automated drug dispensing system is also known as an automated medication dispensing machine (ADM), automated medication dispensing cabinet (ADC), unit-based cabinet (UBC), or automated dispensing device (ADD).



PREPARING FOR PHARMACIST EXAM

MISSION PHARMACIST

PREVIOUS YEAR OBJECTIVE BOOK













Best PYQ Book for Question Practice COD Available



WHATSAPP & TELEGRAM SE JUDNE KE LIYE ICONS PAR CLICK KARE







Most essential medicines should be formulated as

- (a) No compound
- (b) Single compound
- (c) Multiple compounds
- (d) Fixed dose combinations



Most essential medicines should be formulated as

- (a) No compound
- (b) Single compound
- (c) Multiple compounds
- (d) Fixed dose combinations



Essential Medicines

Essential medicines, which are those that meet the priority health care needs of a population, should generally be formulated as single compounds.

- E → Effective and economical
- $S \rightarrow Safe$
- $S \rightarrow$ Single drug formulation mostly
- E → Environmental factor are also considered in making the choice
- $N \rightarrow$ Needed by the majority of population
- $T \rightarrow$ They must be available at all times
- $I \rightarrow$ In proper dosage form
- $A \rightarrow$ Aim is to optimally use the limited financial resources
- L > List of essential drugs is made locally with the help of WHO model list



12]

In how many days a pharmacist should dispense diluted aqueous mixtures

- (a) 7 days
- (b) 14 days
- (c) 21 days
- (d) 30 days



12)

In how many days a pharmacist should dispense diluted aqueous mixtures

- (a) 7 days
- (b) 14 days
- (c) 21 days
- (d) 30 days



For about 14 days a pharmacist should dispense diluted aqueous mixtures.



Medications which must be prepared by following a specific recipe or formula, usually because they are not available commercially are called

- (a) Compounds
- (b) Private compounds
- (c) Extemporaneous compounds
- (d) None of these



Medications which must be prepared by following a specific recipe or formula, usually because they are not available commercially are called

- (a) Compounds
- (b) Private compounds
- (c) Extemporaneous compounds
- (d) None of these



Extemporaneous compounds

Extemporaneous compounds are medications that need to be prepared according to a specific recipe or formula because they are not commercially available. This means that these medications are not mass-produced and cannot be purchased from a pharmacy.



A record of medications compounded in the pharmacy is called

- (a) Bulk compounding log
- (b) Compounding log
- (c) Yule time log
- (d) None of these



A record of medications compounded in the pharmacy is called

- (a) Bulk compounding log
- (b) Compounding log
- (c) Yule time log
- (d) None of these



Bulk Compounding log

A record of medications compounded in the pharmacy is called a bulk compounding log. This log is used to document the process of compounding medications in large quantities, typically for institutional use or for compounding pharmacies.



A form that tracks the medication administered to a patient is called

- (a) Formulary
- (b) Medication administration record
- (c) Patient wrist band
- (d) Medication error record



A form that tracks the medication administered to a patient is called

- (a) Formulary
- (b) Medication administration record
- (c) Patient wrist band
- (d) Medication error record



Medication administration record.

A form that tracks the medications administered to a patient is called a medication administration record. This record is used to document the specific medications given to a patient, including the dosage, time, and route of administration.



The healthcare professionals responsible, for reporting ADR in a hospital is/are

- (a) Doctor
- (b) Pharmacist
- (c) Nurses
- (d) All of these



The healthcare professionals responsible, for reporting ADR in a hospital is/are

- (a) Doctor
- (b) Pharmacist
- (c) Nurses
- (d) All of these



Adverse Drug Reaction

- Any response to a drug which is noxious and unintended, and which
 occurs at doses normally used in man for prophylaxis, diagnosis or
 therapy of disease or for the modification of physiological function.
- Doctors, Nurse, pharmacist are responsible for reporting ADR.
- Central Drug Standard Control Organizations the regulatory body for ADR monitoring in India.



While attending to patients during counselling sessions the desirable body language should be

```
[I] Facing the patient directly
```

[II] Leaning forward at a slight angle

[III] Nodding and hand gestures

[IV] Blank stares

- (a) I and II
- (b) Only I
- (c) I, II and III
- (d) I and IV

PHARMACY

17

While attending to patients during counselling sessions the desirable body language should be

```
[I] Facing the patient directly[II] Leaning forward at a slight angle
```

[III] Nodding and hand gestures

[IV] Blank stares

(a) I and II

(b) Only I

(c) I, II and III

(d) I and IV



Steps for Patient Conselling

Step 1: Preparing for the session

- Counselling develop upon the knowledge and skills of the counsellor
- Pharmacist should know as much possible about the patient treatment details.
- If the pharmacist is unfamaliar about drug which is received from the patient go for drug information reference.
- Before counselling you have to consider about mental physical status.



STEP 2 : OPENING FOR THE SESSION:

- The pharmacist should introduce himself/herself to the patient and treat them by name.
- It is best to use title such as mr, mrs, miss. Eg- hello mr, any name, my name is x and I am your clinical pharmacist.
- First discuss the information required by the patient after meeting the patient
- I would like to tell about the medication.
- Do you have a few minutes to spend with me.
- Pharmacist gather information from the patient disease, medication.



STEP 3: CLOSING THE SESSION

- Before closing the session, it is essential to check patient understanding.
- This can be achieved by feedback question, such as can you remember what is this medication is for?
- Or how long should you take this medication?
- Ask the patient about any doubt.
- Before final closure and if time permits, summarise the main point in logical order.



Regulatory body responsible for monitoring of ADRs in India

- (a) Central Drugs Standard Control Organization
- (b) Indian Institute of Sciences
- (c) Pharmacy Council of India
- (d) Medical Council of India



Regulatory body responsible for monitoring of ADRs in India

- (a) Central Drugs Standard Control Organization
- (b) Indian Institute of Sciences
- (c) Pharmacy Council of India
- (d) Medical Council of India



As National Regulatory Authority, CDSCO has the responsibility to conduct the Pharmacovigilance Programme of India (PVPI). For the said purpose, National Coordination Centre (NCC) at IPC has been established to conduct pharmacovigilance under Pharmacovigilance Programme of India.



Patient counseling is done by

- (a) Dispensing pharmacist
- (b) Pathologist
- (c) Clinical pharmacist
- (d) None of these



Patient counseling is done by

- (a) Dispensing pharmacist
- (b) Pathologist
- (c) Clinical pharmacist
- (d) None of these



- Patient counseling is defined as providing medication information orally or in written form to the patients or their representatives on directions of use, advice on side effects, precautions, storage, diet and life style modifications.
- Patient counseling is done by clinical pharmacist.



Faithful adherence of the instructions given by Physician/pharmacist is called

- (a) Non compliance
- (b) Pharmaceutical care
- (c) Patient counseling
- (d) Patient compliance



Faithful adherence of the instructions given by Physician/pharmacist is called

- (a) Non compliance
- (b) Pharmaceutical care
- (c) Patient counseling
- (d) Patient compliance



Patient compliance

- Patient compliance describes the degree to which a patient correctly follows medical advice, medical device use, self-care, self-directed exercises or therapy sessions.
- Adherence the extent to which a patient's medication taking behaviour coincides with the intension of health advice.
- Compliance is a passive behaviour in which the patient is following the list of instructions from the doctor.

Method to improve patient compliance

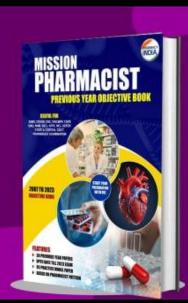
- Patient counselling
- Proper packaging and labelling
- Simplification of medication regime
- Write it down
- Use technology



PREPARING FOR PHARMACIST EXAM

MISSION PHARMACIST

PREVIOUS YEAR OBJECTIVE BOOK













Best PYQ Book for Question Practice COD Available



WHATSAPP & TELEGRAM SE JUDNE KE LIYE ICONS PAR CLICK KARE







The first step of patient counselling after meeting the patient is

- (a) To evaluate the patient's knowledge of medicines
- (b) Introduction
- (c) To discuss the information required by the patient
- (d) To tell about medicines and their importance



The first step of patient counselling after meeting the patient is

- (a) To evaluate the patient's knowledge of medicines
- (b) Introduction
- (c) To discuss the information required by the patient
- (d) To tell about medicines and their importance



Steps for Patient Conselling

Step 1: Preparing for the session

- Counselling develop upon the knowledge and skills of the counsellor
- Pharmacist should know as much possible about the patient treatment details.
- If the pharmacist is unfamaliar about drug which is received from the patient go for drug information reference.
- Before counselling you have to consider about mental physical status.



STEP 2 : OPENING FOR THE SESSION:

- The pharmacist should introduce himself/herself to the patient and treat them by name.
- It is best to use title such as mr, mrs, miss. Eg- hello mr, any name, my name is x and I am your clinical pharmacist.
- First discuss the information required by the patient after meeting the patient
- I would like to tell about the medication.
- Do you have a few minutes to spend with me.
- Pharmacist gather information from the patient disease, medication.



STEP 3: CLOSING THE SESSION

- Before closing the session, it is essential to check patient understanding.
- This can be achieved by feedback question, such as can you remember what is this medication is for?
- Or how long should you take this medication?
- Ask the patient about any doubt.
- Before final closure and if time permits, summarise the main point in logical order.



Which of the following is considered the heart of the patient counselling session

- (a) Preparing for the session
- (b) Opening of the session
- (c) Counselling content
- (d) Closing of the session



Which of the following is considered the heart of the patient counselling session

- (a) Preparing for the session
- (b) Opening of the session
- (c) Counselling content
- (d) Closing of the session



Steps for Patient Conselling

Step 1: Preparing for the session

- Counselling develop upon the knowledge and skills of the counsellor
- Pharmacist should know as much possible about the patient treatment details.
- If the pharmacist is unfamaliar about drug which is received from the patient go for drug information reference.
- Before counselling you have to consider about mental physical status.



STEP 2 : OPENING FOR THE SESSION:

- The pharmacist should introduce himself/herself to the patient and treat them by name.
- It is best to use title such as mr, mrs, miss. Eg- hello mr, any name, my name is x and I am your clinical pharmacist.
- First discuss the information required by the patient after meeting the patient
- I would like to tell about the medication.
- Do you have a few minutes to spend with me.
- Pharmacist gather information from the patient disease, medication.



STEP 3: CLOSING THE SESSION

- Before closing the session, it is essential to check patient understanding.
- This can be achieved by feedback question, such as can you remember what is this medication is for?
- Or how long should you take this medication?
- Ask the patient about any doubt.
- Before final closure and if time permits, summarise the main point in logical order.



What is the full form of ANC related to pregnancy

- (a) All Nutrition Care
- (b) ASHA Nodal Committee
- (c) Anganwadi Nutrition Center
- (d) Ante Natal Care



What is the full form of ANC related to pregnancy

- (a) All Nutrition Care
- (b) ASHA Nodal Committee
- (c) Anganwadi Nutrition Center
- (d) Ante Natal Care



CARE UNIT	DESCRIPTION
Anti- natal care (ANC)	It is essential for protecting the health of women and their unborn children also known as prenatal care provided in the form of medical check-ups lifestyle changes nutrition vitamins which prevent potential health problems.
Special Newborn Care Unit (SNCU)	It is a neonatal unit in the vicinity of the labor room which will provide special care (all care except assisted ventilation and major surgery) for sick newborns.
Post- natal care (PNC)	It is the care given to the mother and her new born baby immediately after the birth and for the first six week of life
Basic Emergency Obstetric Care (BEMOC)	It is defined as a set of life-saving interventions that treat the major obstetric and newborn causes of morbidity and mortality.



Which one of the following is a genetically determined adverse drug reaction

- (a) Addiction
- (b) Drug induced lupus syndrome
- (c) Carcinogenicity
- (d) Idiosyncrasy



Which one of the following is a genetically determined adverse drug reaction

- (a) Addiction
- (b) Drug induced lupus syndrome
- (c) Carcinogenicity
- (d) Idiosyncrasy



Idiosyncrasy

- Genetically determined abnormal reactivity to a chemical
- Certain Bizarre drug effects due to peculiarities of an individual for which no definite genotype has been described, are also included
- Drug interacts with some unique feature of the individual, not found in majority subjects, and produces the uncharacteristic reaction.
- E.g., Barbiturates, Quinine, Chloramphenicol.



A method to improve patient compliance is

- (a) Patient counselling
- (b) Proper packaging and labelling
- (c) Simplification of medication regimens
- (d) All of these



A method to improve patient compliance is

- (a) Patient counselling
- (b) Proper packaging and labelling
- (c) Simplification of medication regimens
- (d) All of these



Patient compliance

- Patient compliance describes the degree to which a patient correctly follows medical advice, medical device use, self-care, self-directed exercises or therapy sessions.
- Adherence the extent to which a patient's medication taking behaviour coincides with the intension of health advice.
- Compliance is a passive behaviour in which the patient is following the list of instructions from the doctor.

Method to improve patient compliance

- Patient counselling
- Proper packaging and labelling
- Simplification of medication regime
- Write it down
- Use technology



Structured evaluation of a patient's medication for improving health outcomes is termed as

- (a) Medication error
- (b) Medication review
- (c) Hospital formulary
- (d) Pharmacovigilance



Structured evaluation of a patient's medication for improving health outcomes is termed as

- (a) Medication error
- (b) Medication review
- (c) Hospital formulary
- (d) Pharmacovigilance



Medication review

- Evaluation of patient medication taking behaviour for improving health outcomes is termed as medication review
- It is a fundamental responsibility of a pharmacist to ensure the appropriateness of medication orders.
- It serves as starting point for other clinical pharmacy activities (medication counselling, TDM, DI, and ADR)

Arrange the following in a meaningful sequence

- [1] Consultation
- [2] Illness
- [3] Doctor
- [4] Treatment
- [5] Recovery
- (a) [4], [3], [1], [2], [5]
- (b) [2], [3], [4], [1], [5]
- (c) [5], [1], [4], [3], [2]
- (d) [2], [3], [1], [4], [5]

Arrange the following in a meaningful sequence

- [1] Consultation
- [2] Illness
- [3] Doctor
- [4] Treatment
- [5] Recovery
- (a) [4], [3], [1], [2], [5]
- (b) [2], [3], [4], [1], [5]
- (c) [5], [1], [4], [3], [2]
- (d) [2], [3], [1], [4], [5]



Illness → Doctor → Consultation → Treatment → Recovery



The extent to which a patient's medication taking behavior coincides with the intention of health advice is known as

- (a) Monitoring
- (b) Adherence
- (c) Drug utilization
- (d) Purchasing power



The extent to which a patient's medication taking behavior coincides with the intention of health advice is known as

- (a) Monitoring
- (b) Adherence
- (c) Drug utilization
- (d) Purchasing power



Patient compliance

- Patient compliance describes the degree to which a patient correctly follows medical advice, medical device use, self-care, self-directed exercises or therapy sessions.
- Adherence the extent to which a patient's medication taking behaviour coincides with the intension of health advice.
- **Compliance** is a passive behaviour in which the patient is following the list of instructions from the doctor.



Which of the following is one of the major functions of the clinical pharmacist

- (a) To maintain the drug store
- (b) Continuing educational programme
- (c) To supply service to residential homes
- (d) To counsel patients on disease and the prescribed drug therapy



Which of the following is one of the major functions of the clinical pharmacist

- (a) To maintain the drug store
- (b) Continuing educational programme
- (c) To supply service to residential homes
- (d) To counsel patients on disease and the prescribed drug therapy



Clinical pharmacist

- Patient education and counselling
- Obtain and prepare medication history of the patients on admission
- Monitoring of drug therapy
- Preparation in medical emergencies
- Providing important consultations in different areas



Which is person responsible for the conduct of the clinical trial at a trial site

- (a) Clinical Research Coordinator
- (b) Monitor
- (c) Investigator
- (d) Sponsor



Which is person responsible for the conduct of the clinical trial at a trial site

- (a) Clinical Research Coordinator
- (b) Monitor
- (c) Investigator
- (d) Sponsor



Terms used in Clinical Trial

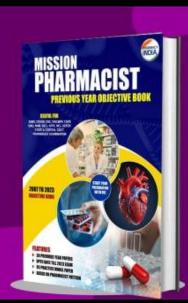
- The **investigator** may help prepare and carry out the protocol (plan) for the study, monitor the safety of the study, collect and analyze the data, and report the results of the study.
- A **Clinical Research Coordinator** (CRC) manages and conducts the day-to-day activities of a clinical trial.
- A **clinical trial sponsor** is an individual, company, institution, or organization that's responsible for the initiation, management, and/or financing of a clinical trial.
- **Clinical trial monitor** oversee the progress of a clinical trial to ensure it's conducted and reported according to protocol, SOPs, Good Clinical Practice (GCP), and other regulations.



PREPARING FOR PHARMACIST EXAM

MISSION PHARMACIST

PREVIOUS YEAR OBJECTIVE BOOK













Best PYQ Book for Question Practice COD Available



WHATSAPP & TELEGRAM SE JUDNE KE LIYE ICONS PAR CLICK KARE







Which of the following tube is used to feed the patient

- (a) B. G Set
- (b) Balloon Catheter
- (c) Ryle's Tube
- (d) Foley's catheter



Which of the following tube is used to feed the patient

- (a) B. G Set
- (b) Balloon Catheter
- (c) Ryle's Tube
- (d) Foley's catheter



Ryle's tube

- A tube of narrow calibre and short length is used for stomach wash especially in case of children. White cotton cloth of various thread count and weight.
- Ryle's tube is used for Nutritional support and aspiration of Intestinal secretion.
- The nasogastric tube used for enteral feeding is called Ryle's tube.



Ryles tube is used for

- (a) Drain off a bladder
- (b) To hold blood vessels
- (c) Nutritional support and aspiration of stomach content
- (d) To hold tissues



Ryles tube is used for

- (a) Drain off a bladder
- (b) To hold blood vessels
- (c) Nutritional support and aspiration of stomach content
- (d) To hold tissues



Ryle's tube

- A tube of narrow calibre and short length is used for stomach wash especially in case of children. White cotton cloth of various thread count and weight.
- Ryle's tube is used for Nutritional support and aspiration of Intestinal secretion.
- The nasogastric tube used for enteral feeding is called Ryle's tube.



The nasogastric tube used for enteral feeding is called

- (a) Stevens tube
- (b) Sengstaken Blakemore tube
- (c) Ryle's tube
- (d) Foley's tube



The nasogastric tube used for enteral feeding is called

- (a) Stevens tube
- (b) Sengstaken Blakemore tube
- (c) Ryle's tube
- (d) Foley's tube



Ryle's tube

- A tube of narrow calibre and short length is used for stomach wash especially in case of children. White cotton cloth of various thread count and weight.
- Ryle's tube is used for Nutritional support and aspiration of Intestinal secretion.
- The nasogastric tube used for enteral feeding is called Ryle's tube.



Which of the following is used to ligate large blood vessels

- (a) Aneurism clip
- (b) Foley's catheter
- (c) Splint
- (d) Umbilical tape



Which of the following is used to ligate large blood vessels

- (a) Aneurism clip
- (b) Foley's catheter
- (c) Splint
- (d) Umbilical tape



- In unit dose dispensing system medication ordered, packed, handle, administered and charged in multiple of single dose units containing a predetermined amount of drugs.
- In 14 days a pharmacist should dispense diluted aqueous mixture.
- Umbilical tape is used to ligate large blood vessels.
- In hospitals, the oxygen tubes for respiration contain oxygen and Helium. Scalpels and blades for surgery may be sterilized by dry heat sterilization.
- Eusol is preferred for dressing wounds infected with pyogenic bacteria.
- Violin gut is obtained from intestines of animal (Sheep).
- Illness \rightarrow Doctor \rightarrow Consult \rightarrow Treatment \rightarrow Recovery.



In hospitals the oxygen tubes for respiration contain oxygen and

- (a) Nitrogen
- (b) Helium
- (c) Argon
- (d) Carbon dioxide



In hospitals the oxygen tubes for respiration contain oxygen and

- (a) Nitrogen
- (b) Helium
- (c) Argon
- (d) Carbon dioxide



- In unit dose dispensing system medication ordered, packed, handle, administered and charged in multiple of single dose units containing a predetermined amount of drugs.
- In 14 days a pharmacist should dispense diluted aqueous mixture.
- Umbilical tape is used to ligate large blood vessels.
- In hospitals, the oxygen tubes for respiration contain oxygen and Helium. Scalpels and blades for surgery may be sterilized by dry heat sterilization.
- Eusol is preferred for dressing wounds infected with pyogenic bacteria.
- Violin gut is obtained from intestines of animal (Sheep).
- Illness \rightarrow Doctor \rightarrow Consult \rightarrow Treatment \rightarrow Recovery.



Scalpels and blades for surgery may be sterilized by

- (a) Boiling in a water bath
- (b) Dry heat sterilized
- (c) Membrane filtration
- (d) Aseptic technique



Scalpels and blades for surgery may be sterilized by

- (a) Boiling in a water bath
- (b) Dry heat sterilized
- (c) Membrane filtration
- (d) Aseptic technique



- In unit dose dispensing system medication ordered, packed, handle, administered and charged in multiple of single dose units containing a predetermined amount of drugs.
- In 14 days a pharmacist should dispense diluted aqueous mixture.
- Umbilical tape is used to ligate large blood vessels.
- In hospitals, the oxygen tubes for respiration contain oxygen and Helium. Scalpels and blades for surgery may be sterilized by dry heat sterilization.
- Eusol is preferred for dressing wounds infected with pyogenic bacteria.
- Violin gut is obtained from intestines of animal (Sheep).
- Illness \rightarrow Doctor \rightarrow Consult \rightarrow Treatment \rightarrow Recovery.



Zinc – oxide bandage is

- (a) Adhesive bandage
- (b) Impregnated bandage
- (c) Elastic bandage
- (d) Non elastic bandage



Zinc – oxide bandage is

- (a) Adhesive bandage
- (b) Impregnated bandage
- (c) Elastic bandage
- (d) Non elastic bandage

	TYPES OF BANDAGES INDIA
Retention Bandages	 ✓ Non-Stretch Fabric Retention Bandages • Triangular Calico Bandage- It is used as a sling • Domette Bandage-It is used for orthopedic purpose • Open-wove Bandage- It is used to secure splints
	 ✓ Stretch Fabric Retention Bandages Cotton Conforming Bandage- It is used to protect the dressing Polyamide and Cellulose Contour Bandage - These types of bandages are used for retention of dressing on the limb, trunk and abdomen
Support and Compression Bandages	Crepe Bandage, Cotton crepe Bandage, Cotton and Rubber Bandage, Elastic adhesive Bandage, Cotton stretch Bandage
Medicated Bandages	 Zinc paste and ichthammol Bandage- Used in treatment of varicose eczema Plaster of Paris Bandage- Content of calcium sulphate NMT 85. Used for immobilization and splinting of fractures Zinc paste and Coal Tar Bandage- Used in treatment of leg ulcer and neurodermatitis Zinc paste Bandage- It is cotton fabric of plain weave impregnated with suitable paste containing zinc oxide. Used to Supports and prevent swelling of fractured limbs after the removal of plaster



The standard test for catgut involving measurement by means of dial reading micrometer is known as the test for

- (a) Tensile strength
- (b) Sterility
- (c) Gauge
- (d) Contaminants



The standard test for catgut involving measurement by means of dial reading micrometer is known as the test for

- (a) Tensile strength
- (b) Sterility
- (c) Gauge
- (d) Contaminants



Absorbent cotton wool	 It consists of absorbent cotton fibers, which are epidermal trichomes obtained from Gossypium species Test for water holding capacity is stated in Indian Pharmacopoeia for absorbent cotton wool. It is used for cleaning and swabbing wounds, Packed in rolls of NMT 500 gm of a continuous lap.
Gauze (Absorbent gauze)	 It is used for pre-operative preparation and for cleaning and swabbing wounds. White cotton cloth of various thread count and weight. Thread Per Stated Length - Warp- average 73 per 10 cm. Weft- average 57 per 10 cm. Weight per unit area- 15 g per m². Sinking time is NMT 10 seconds. Sterilized by autoclaving, ionizing radiation or hot air oven. Standard test -The standard test for catgut involving measurement by means of dial reading micrometer.

All of the following are examples of nonabsorbable sutures EXCEPT

- (a) Nylon
- (b) Silk
- (c) Catgut
- (d) Metallic suture



All of the following are examples of nonabsorbable sutures EXCEPT

- (a) Nylon
- (b) Silk
- (c) Catgut
- (d) Metallic suture



Classification of Sutures

- Biological silk, linen
- Non-absorbable Polyester, Nylon, Stainless steel, Silk, metallic.
- Artificial Polypropylene
- Multifilament Silk (Braided)
- Absorbable Catgut Chromic 2/0, Collagen
- Microfilament Polypropylene, Polydioxane, Nylon



Violin gut is obtained from intestine of

- (a) Horse
- (b) Cat
- (c) Sheep
- (d) Camel



Violin gut is obtained from intestine of

- (a) Horse
- (b) Cat
- (c) Sheep
- (d) Camel



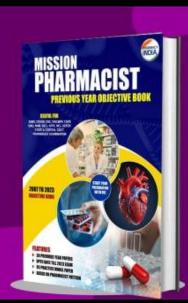
Violin gut, also known as catgut, is a cord made from the natural fibers of animal intestines, usually those of sheep or goats. It's also used for surgical sutures and ligatures, and for the strings of tennis rackets and archery bows.



PREPARING FOR PHARMACIST EXAM

MISSION PHARMACIST

PREVIOUS YEAR OBJECTIVE BOOK













Best PYQ Book for Question Practice COD Available





JULY BATCH

PHARMACIST ONLINE LIVE CLASSES

MISSION

DSSSB, RRB, SEPOY, AIIMS, CGHS ESIC, JSSC & OSSSC

LIVE CLASSES STARTING FROM - 22ND JULY 2024



Connect for admission related queries



WHATSAPP & TELEGRAM SE JUDNE KE LIYE ICONS PAR CLICK KARE



