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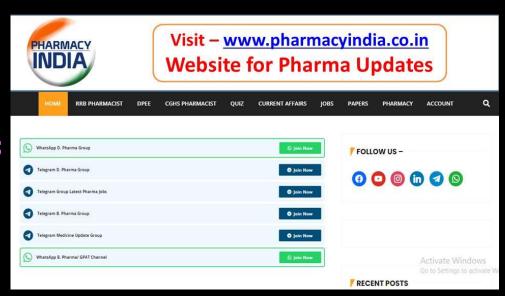
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PHARMACIST (Crash Course)















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Course check करने के लिए बैनर पर क्लिक करें





PHARMACIST UPDATES

ज्डिए PHARMACY INDIA

के साथ.....

WHATSAPP & TELEGRAM SE JUDNE KE LIYE ICONS PAR CLICK KARE











1. Fish liver oil preparations belongs to schedule

- (a) E
- (b) X
- (c) G
- (d) C





1. Fish liver oil preparations belongs to schedule

- (a) E
- (b) X
- (c)G
- (d) C(1)





Schedule C(1) Drugs

- Digitalis Preparations
- Fish Liver Oil Preparations
- Ergot Preparations
- Vitamins
- Hormones etc...





2. Schedule H drug is

- (a) Diclofenac
- (b) Aminopterin
- (c) Insulin
- (d) BCG vaccine





2. Schedule H drug is

- (a) Diclofenac
- (b) Aminopterin
- (c) Insulin
- (d) BCG vaccine





Schedule H Drugs

- Acebutol HCl
- Acyclovir
- Ibuprofen
- Imipramine
- Ketamine HCl
- Ketoprofen
- Digitalis
- Diclofenac
- Clofazamine



Metronidazole etc.
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3. As per the Drugs and Cosmetics Act 1940, if a drug is not labelled in prescribed manner,

- (a) Spurious drug
- (b) Substandard drug
- (c) Adulterated drug
- (d) Misbranded drug







3. As per the Drugs and Cosmetics Act 1940, if a drug is not labelled in prescribed manner,

- (a) Spurious drug
- (b) Substandard drug
- (c) Adulterated drug
- (d) Misbranded drug





MISBRANDED DRUG

- If it is not labeled in the prescribed manner
- If it is so coloured, coated, powdered or polished that damage is concealed or if it is made appear of better or greater therapeutic value than it's really.
- If it is label or container or anything accompanying the drug bears any statement, design or device which make any false claim for the drug or which is false or misleading in any particular.







4. If a drug contains any harmful or toxic substance, which may render it injurious to health, it is called A

- (a) Adulterated drug
- (b) Spurious drug
- (c) Misbranded drug
- (d) Not of standard quality drug





- 4. If a drug contains any harmful or toxic substance, which may render it injurious to health, it is called A
- (a) Adulterated drug
- (b) Spurious drug
- (c) Misbranded drug
- (d) Not of standard quality drug





ADULTERATED DRUG

- If it is consist in whole or in. part, of any filthy, putrid, of decomposed substance
- If it has been prepared packed or stored under insanitary conditions whereby have been render injurious to health.
- If its container is composed, in whole or in part of any poisonous substance to health.
- If it contain harmful or toxic substance injurious to health.
- Any substance mixed which reduce the quality.





5. If the product has been substituted wholly or partially by another drug for) substance His known as

- (a) Spurious drug
- (b) Adulterated drug
- (c) Misbranded drug
- (d) Poisonous drug





5. If the product has been substituted wholly or partially by another drug for) substance His known as

- (a) Spurious drug
- (b) Adulterated drug
- (c) Misbranded drug
- (d) Poisonous drug





SPURIOUS DRUG

- If it is imported (manufactured in relation to manufacture, sale and distribution of drugs) under a name which belong to another drugs
- If it has been substituted wholly or in part by another drugs or substance
- If it purports to be the product of a manufacture of whom it is not truly a product.





6. A middleman is the person who provides a link

between the

- (a) Manufacturer and owner
- (b) Workers and owner
- (c) Customer and owner
- (d) Manufacturer and customer





6. A middleman is the person who provides a link

- between the
- (a) Manufacturer and owner
- (b) Workers and owner
- (c) Customer and owner
- (d) Manufacturer and customer





Explanation:

- ✓ Manufacturer and customer: A middleman is a person or entity that acts as an intermediary between the manufacturer and the customer.
- ✓ The middleman buys goods from the manufacturer and sells them to the customer, helping to bridge the gap between the production of goods and their final sale to the end user.





7. The price that equates market supply and

market demand is called

- (a) Market restoring price
- (b) Market depreciating price
- (c) Market elastic price
- (d) Market clearing price





Explanation:

> The point at which the two curves intersect represents the market-clearing price—the price at which demand and supply are the same.







8. The art of planning, organizing, staffing,

motivating and controlling is called

- (a) Manufacturing
- (b) Advertising skills
- (c) Management
- (d) Marketing





- 8. The art of planning, organizing, staffing,
- motivating and controlling is called
- (a) Manufacturing
- (b) Advertising skills
- (c) Management
- (d) Marketing



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Explanation:

- **Management:** Management is the art and science of planning, organizing, staffing, motivating, and controlling an organization or a specific process within organization to achieve its goals.
- > It involves coordinating various resources, including human, financial, and material, to accomplish objectivesefficiently and effectively.



9. The channel involving retailers and given in

wholesalers is

- (a) The primary channel
- (b) The typical channel
- (c) The secondary channel
- (d) The marketing channe





9. The channel involving retailers and given in

wholesalers is

- (a) The primary channel
- (b) The typical channel
- (c) The secondary channel
- (d) The marketing channel





Explanation:

- **The typical channel**: This is often used to describe the conventional or common distribution channel that involves a manufacturer selling goods to wholesalers, who then sell them to retailers, and finally, the products reach the customers.
- > This is considered the "typical" or standard distribution process in many industries.



10. Which is the end party in the pharmaceutical

- marketing channel
- (a) Physician
- (b) Pharmacist
- (c) Consumer
- (d) Retailer





10. Which is the end party in the pharmaceutical marketing channel

- (a) Physician
- (b) Pharmacist
- (c) Consumer
- (d) Retailer





Explanation:

- **Consumer:** The consumer, or the patient who uses the medication, is the final end party in the pharmaceutical marketing channel.
- > The entire channel is designed to get the medication from the manufacturer to the consumer, who is the ultimate recipient and user of the product.

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11. In drug-drug interaction, the drug whose activity is affected is known as

- (a) Prodrug
- (b) Xenobiotic
- (c) Precipitant
- (d) Object drug





11. In drug-drug interaction, the drug whose activity is affected is known as

- (a) Prodrug
- (b) Xenobiotic
- (c) Precipitant
- (d) Object drug





Explanation:

The risk of a drug-drug interaction increases with the number of drugs used. The drug whose activity is effected by such interaction is called as "Object Drug" and the agent which precipitates such an interaction is called as the "Precipitant".





12. Minimum numbers of PTC meetings which

should be held yearly are

- (a) 2
- (b) 4
- (c) 6
- (d) 8





12. Minimum numbers of PTC meetings which should be held yearly are

- (a) 2
- (b) 4
- (c) 6
- (d) 8





Pharmacy & Therapeutic Committee Composition

- It is an advisory group of medical staff and serves as the organizational line of communication between the medical staff and pharmacy department.
- WHO formed a committee in the hospital setting is responsible for overall pharmaceutical care is termed as Pharmacy and therapeutics committee (PTC).
- The guidelines for inclusion and non-inclusion of drugs in the hospital formulary are framed by PTC.
- Advisory the Committee recommends policies for drug evalua selection, and therapeutic use.





13. The minimum number of physicians required in the Pharmacy and Therapeutics Committee is

- (a) 2
- (b) 3
- (c) 5
- (d) 4





13. The minimum number of physicians required in the Pharmacy and Therapeutics Committee is

- (a) 2
- (b) 3
- (c)5
- (d) 4





Pharmacy & Therapeutic Committee Composition

Staff	Designation	Number
Physician	Chairman of PTC (1 out of 3)	3
Pharmacist	Secretary of PTC	1
Administrator	Member	1
Nurse	Member	1







14. Who is responsible for WHO international drug monitoring Programme

- (a) Uppsala monitoring centre
- (b) WHO drug dictionary
- (c) PVPI
- (d) Contract research Organization





14. Who is responsible for WHO international drug monitoring Programme

- (a) Uppsala monitoring centre
- (b) WHO drug dictionary
- (c) PVPI
- (d) Contract research Organization





The World Health Organization's (WHO) Programme for International Drug Monitoring (PIDM) is administered by the WHO Headquarters in Geneva and the Uppsala Monitoring Centre (UMC) in Sweden.



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15. The DPCO (Drug Price Control Order) was exercise by central government in

- (a)1985
- (b) 1997
- (c) 1987
- (d) 1995





15. The DPCO (Drug Price Control Order) was exercise by central government in

- (a)1985
- (b) 1997
- (c)1987
- (d) 1995





DRUGS (PRICES CONTROL) ORDER 2013

•The drug (price control) order forms of a part of the new drug policy formed by government of India $1987 \to 1995 \to 2013$

DPCO 1995	Passed on 6th Jan. 1995 by Ministry of Chemical and	
	Fertilizer by virtue of section-3 of essential commodities act.	
DPCO 2013	Passed by ministry of chemical and fertilizer (Departmental	
	of Pharmaceutics)	

IMPORTANT DATE

Essential commodities act	1955
National list of essential medicine	2011
National pharmaceutical pricing policy	2012
DPCO Came into force	15 th may, 2013







16. List of Ayurvedic, Siddha and Unani poisons are given in the Schedule

- (a) F(I)
- (b) F(II)
- (c) E
- (d) E(I)





16. List of Ayurvedic, Siddha and Unani poisons are given in the Schedule

- (a) F(I)
- (b) F(II)
- (c) E

(d) E(I)





SCHEDULES TO THE RULES

- A- Performa for application for the licenses, issues and renewal of licenses, for sending
- B- Rates of fee for test or analysis by the Central Drugs Laboratory or the state drug laboratories
- Fee for the test or analysis by the pharmacopeia laboratory for Indian medicine or the
- List of biological and other special products whose import, sale, distribution and manufacture are governed by special provision.
- List of other special products whose import, sale, distribution and mfg are governed by special provision.

D - List of drugs exempted from the provisions to import of drugs.

List of poisonous substances under the Ayurvedic (including Sidha) and Unani systems of medicine





17. Which of the following can be marketed under generic name

- (a) Barbital
- (b) Glutethimide
- (c) Analgin
- (d) Meprobamate







17. Which of the following can be marketed under generic name

- (a) Barbital
- (b) Glutethimide
- (c) Analgin
- (d) Meprobamate







This includes only five drugs that shall be marketed under generic names only:

- 1. Analgin
- 2. Aspirin and its salt
- 3. Chlorpromazine and its salt
- 4. Ferrous sulfate
- 5. Piperazine and its salt





18. Anyone who contravenes any provision of the Drugs and Magic Remedies Act shall on first conviction be liable to

(a) 1 month of imprisonment or fine or both (b) 1 year of imprisonment or fine or both (c) 6 months of imprisonment or fine or both (d) 3 months of imprisonment or fine or both





18. Anyone who contravenes any provision of the Drugs and Magic Remedies Act shall on second conviction be liable to

- (a) 1 month of imprisonment or fine or both
- (b) 1 year of imprisonment or fine or both
- (c) 6 months of imprisonment or fine or both
- (d) 3 months of imprisonment or fine or both





OFFENCES AND PENALTIES

S.NO	OFFENCES	PENALTIES
1.	First conviction: Whoever contravenes any provision of this act or rules	Imprisonment up to 6 month or with fine or both.
2.	Second conviction: Subsequent of the first conviction	Imprisonment up to one year or fine or both any subsequent
3.	By company:	 Every person who at the time of commission of the offences was in charge and responsible for the conduct of company business liable for the punishment. However such person is not liable for the punishment if he proves that offences was committed without his knowledge or that he has taken all the precaution to prevent the commiss of such offence



19. The drug Clofazimine comes under schedule

- (a) G
- (b) X
- (c) W
- (d)H





19. The drug Clofazimine comes under schedule

- (a) G
- (b) X
- (c) W
- (d) H





Schedule H Drugs

- Acebutol HCl
- Acyclovir
- Ibuprofen
- Imipramine
- Ketamine HCl
- Ketoprofen
- Clofazamine
- Metronidazole etc.





20. Morphine sulphate comes under which Schedule of Drugs and **Cosmetics Act**

- (a) H
- (b) W
- (c) X
- (d) G





20. Morphine sulphate comes under which Schedule of Drugs and **Cosmetics Act**

- (a) H
- (b) W
- (c) X
- (d) G





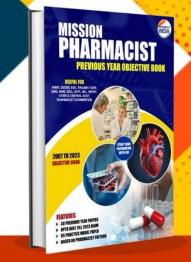
Schedule X Drugs

Amobarbital, Amphetamine, Barbital, Cyclobarbital, Dexamphetamine, Ethchlorvynol, Glutethimide, Meprobamate, Methamphetamine, Methaqualone, Methylphenidate, Methylphenobarbital, Morphine, Pentobarbital, Phencylidine, Phenmetrazine, Phenobarbital, Secobarbital.



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- 21. Cryptococcosis is a disease of _____
- a) viral infection
- b) mycotic infection
- c) parasitic infection
- d) bacterial infection



PHARMACY

- 21. Cryptococcosis is a disease of _____
- a) viral infection
- b) mycotic infection
- c) parasitic infection
- d) bacterial infection



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Explanation:

Cryptococcus neoformans is an important basidiomycetous pathogen of humans, causing cryptococcosis, a generalized mycotic infection involving the bloodstream as well as lungs, central nervous system and other organs.





22. Which among the following is a pathogenic algae for humans?

- a) Cephaleuros
- b) Acanthopeltis
- c) Chlorella
- d) Prototheca





22. Which among the following is a pathogenic algae for humans?

- a) Cephaleuros
- b) Acanthopeltis
- c) Chlorella
- d) Prototheca



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Explanation:

- ☐ Prototheca has been found to be a probable pathogen of humans.
- □ It has been found in systemic and subcutaneous infections, as well as in bursitis.





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23. Chrysolaminarin is the reserved food of

- a) Bacillariophycophyta
- b) Xanthophycophyta
- c) Chlorophycophyta
- d) Phaeophycophyta



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- 23. Chrysolaminarin is the reserved food of
 - a) Bacillariophycophyta
- b) Xanthophycophyta
- c) Chlorophycophyta
- d) Phaeophycophyta





Explanation:

Chrysolaminarin is the food reserved Xanthophycophyta which is the yellow-green algae along with oils.





24. Protozoa that eat other organisms are known as _____

- a) parasitic
- b) mutualistic
- c) holozoic
- d) saprophytic





24. Protozoa that eat other organisms are known as _____

- a) parasitic
- b) mutualistic
- c) holozoic
- d) saprophytic





Explanation:

- ☐ Holozoic protozoa are protozoa that eat other organisms.
- ☐ Species of Paramecium are holozoic and they must have a supply of bacteria or other protozoa.





25. Plasmodium divides by which of the following method most commonly?

- a) Regeneration
- b) Budding
- c) Binary fission
- d) Multiple fission



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- 25. Plasmodium divides by which of the following method most commonly?
- a) Regeneration
- b) Budding
- c) Binary fission
- d) Multiple fission





Explanation:

The malarial parasite, Plasmodium divides by the process of multiple fission where it is known as schizogony and serves to spread the parasite quickly in the host.







26. Small-pox vaccine is a

- (a) Viral vaccine
- (b) Bacterial vaccine
- (c) Toxoid
- (d) Anti serum





26. Small-pox vaccine is a

- (a) Viral vaccine
- (b) Bacterial vaccine
- (c) Toxoid
- (d) Anti serum





Smallpox Vaccine

- The smallpox vaccine is the first vaccine to have been developed against a contagious disease.
- In 1796, British physician Edward Jenner demonstrated that an infection with the relatively mild cowpox virus conferred immunity against the deadly smallpox virus.



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27. Sandfly is a causative agent of

- (a) Kala-azar
- (b) Sleeping sickness
- (c) Typhoid
- (d) Dysentery





27. Sandfly is a causative agent of

- (a) Kala-azar
- (b) Sleeping sickness
- (c) Typhoid
- (d) Dysentery





EXPLANATION:

Sandflies can transmit leishmaniasis, a parasitic disease caused by the bite of infected female phlebotomine sandflies.







28. Coomb's test is for

- (a) Typhoids
- (b) Syphilis
- (c) Yellow fever
- (d) Antiglobulin





28. Coomb's test is for

- (a) Typhoids
- (b) Syphilis
- (c) Yellow fever
- (d) Antiglobulin





EXPLANATION:

A Coombs test, also known as an antiglobulin test, is a laboratory procedure that detects antibodies that attach to red blood cells and platelets, and can destroy them.







29. Tinea pedis is commonly known as

- (a) Corns
- (b) Calluses
- (c) Warts
- (d) Athlete's foot





29. Tinea pedis is commonly known as

- (a) Corns
- (b) Calluses
- (c) Warts
- (d) Athlete's foot





EXPLANATION:

Tinea pedis, also known as athlete's foot, results from dermatophytes infecting the skin of the feet. Patients contract the infection by directly contacting the organism while walking barefoot.





30. Which of the following is an acute communicable disease of the upper respiratory tract

- (a) Chickenpox
- (b) Common cold
- (c) Influenza
- (d) Measles





30. Which of the following is an acute communicable disease of the upper respiratory tract

- (a) Chickenpox
- (b) Common cold
- (c) Influenza
- (d) Measles







EXPLANATION:

Influenza is a communicable viral disease that affects the upper respiratory tract, including upper and lower respiratory passages. A wide spectrum of influenza viruses causes it.



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31. Anti-muscarinic agent preferred in the management of motion sickness is

- (a) Atropine methonitrate
- (b) Scopolamine
- (c) Homatropine methyl bromide
- (d) Ipratropium bromide





31. Anti-muscarinic agent preferred in the management of motion sickness is

- (a) Atropine methonitrate
- (b) Scopolamine
- (c) Homatropine methyl bromide
- (d) Ipratropium bromide





EXPLANATION:

Drugs for Motion sickness	Scopolamine, Hyoscine,	
	Promethazine,	
	diphenhydramine	
Drugs for morning	Doxylamine	
sickness		



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32. Pirenzepine is an antagonist of

(a) M₁ receptor (b) M₂ receptor (c) N₁ receptor (d) N₂ receptor

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32. Pirenzepine is an antagonist of

- (a) M₁ receptor
- (b) M₂ receptor
- (c) N₁ receptor
- (d) N_2 receptor





EXPLANATION:

CHARACTERISTIC	M1	M2	M3
AGONIST	Oxotremorine	Methacholine	Bethanechol
ANTAGONIST	Pirenzepine, Talenzepine	Methoctramine,	Solifenacin,
		Tripitramine	Dariferacin







33. Drug of choice for mushroom poisoning is

- (a) Adrenaline
- (b) Carbachol
- (c) Atropine
- (d) None of these





33. Drug of choice for mushroom poisoning is

- (a) Adrenaline
- (b) Carbachol
- (c) Atropine
- (d) None of these





Condition	Drug of choice	
Mushroom poisoning		
• Early (Inocybe sp.)	Atropine	
• Delayed (Amanita sp.)	Thioctic acid	
Glaucoma		
• Open angle	Latanoprost	
• Angle closure	Acetazolamide	
• Diagnosis	Edrophonium	
• Treatment	Neostigmine/pyridostigmine	
Belladona poisoning	Physostigmine	
Atropine poisoning	Physostigmine	
Dhatura poisoning	Physostigmine	
Alzhiemer's dementia	Donepezil/ Rivastigmine/	
	Gallantamine	
Cobra bite	Anti-venom	







34. Acetylcholine is breakdown into choline and acetic acid and this reaction is ...

- (a) Hydrolysis
- (b) Reduction
- (c) Oxidation
- (d) Deamination





34. Acetylcholine is breakdown into choline and acetic acid and this reaction is ...

- (a) Hydrolysis
- (b) Reduction
- (c) Oxidation
- (d) Deamination





Explanation

• Acetylcholinesterase (AChE) is a cholinergic enzyme primarily found at postsynaptic neuromuscular junctions, especially in muscles and nerves. It immediately breaks down or hydrolyzes acetylcholine (ACh), a naturally occurring neurotransmitter, into acetic acid and choline.







35. Most characteristic side effect of Adriamycin is....

- (a) Nephrotoxicity
- (b) Cardiotoxicity
- (c) Neurotoxicity
- (d) Hemorrhagic cystitis





35. Most characteristic side effect of Adriamycin is.... (a) Nephrotoxicity

- (b) Cardiotoxicity
- (c) Neurotoxicity (d) Hemorrhagic cystitis





Explanation

- Doxorubicin sold under the brand name Adriamycin.
- It is a chemotherapy medication used to treat cancer.
- When the drug is combined with others that can cause heart problems (oxidative stress), or in those who already have heart problems or high blood pressure.







36. Ancylostoma duodenale is a

- (a) Nematode
- (b) Amoeba
- (c) Protozoan
- (d) Fungus





36. Ancylostoma duodenale is a

- (a) Nematode
- (b) Amoeba
- (c) Protozoan
- (d) Fungus







EXPLANATION:

- > Ancylostoma duodenale, the human hookworm (Nematode), is the most common parasitic infection in countries with poor access to adequate water, sanitation, and hygiene.
- > Anclyostoma duodenale along with other soiltransmitted helminths (STH) are transmitt through contact with contaminated soil.



37. Which of the following microorganism is prokaryotic

- (a) Virus
- (b) Protozoa
- (c) Bacteria
- (d) Fungi





37. Which of the following microorganism is prokaryotic

- (a) Virus
- (b) Protozoa
- (c) Bacteria
- (d) Fungi





Prokaryotes

- Prokaryotes (Greek: pro before; karyon nucleus) lack a well defined nucleus and possess relatively simple structure.
- Examples -Bacteria

Rickettsiae





38. The microorganism that can enter the body only through an injury is

- (a) Salmonella typhi
- (b) Clostridium tetani
- (c) Clostridium botulinum
- (d) Streptococcus pyogenes





38. The microorganism that can enter the body only through an injury is

- (a) Salmonella typhi
- (b) Clostridium tetani
- (c) Clostridium botulinum
- (d) Streptococcus pyogenes





EXPLANATION:

- Clostridium tetani (C. tetani) bacteria can enter the body through an open wound or injury, usually caused by broken skin.
- C. tetani bacteria are found in soil, animal feces, and the human intestine, and can remain dormant in the soil for more than 40 years.
- When the bacteria enter a wound, the cells become active and release a toxin that impairs the nerves that control muscles This toxin causes tetanus, a serious infection also known lockjaw.



39.Gram positive bacteria retain which type colour in gram staining

- (a) Red
- (b) Violet
- (c) Green
- (d) Yellow





39. Gram positive bacteria retain which type colour in gram staining

- (a) Red
- (b) Violet
- (c) Green
- (d) Yellow



- gram negative organisms have higher lipid content
- With the dissolution of the lipid layer gram negatives lose the primary stain.
- All bacteria take up crystal violet however with the use of solvent the lipid layer from gram negative organism is dissolved with the dissolution of the lipid layer, gram negative lose the primary stain.

S.NO.	CHARACTERISTIC	GRAM POSITIVE	GRAM NEGATIVE	
1.	Number of layers	One layer	Two layers	
2.	Thickness	Thick (20-50 nm)	Thin (8-10nm)	
3.	Outer membrane	Absent	Present	
4.	Periplasmic	Present in some cell	Present in all cell	
5.	Chemically cell wall	Peptidoglycan, Teichoic acid and lipoteichoic present	Lipopolysaccharide and Lipoprotein present	
6.	Protein	Absent	Present	
7.	Lipid	Less	More	
8.	Permeability	More	Less	



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40. All of the following are single RNA viruses **EXCEPT**

- (a) Rotavirus
- (b) Influenza virus
- (c) Rabies virus
- (d) Polio virus







40. All of the following are single RNA viruses **EXCEPT**

- (a) Rotavirus
- (b) Influenza virus
- (c) Rabies virus
- (d) Polio virus





S. No.	Group	Family	Examples	
1.	ds DNA	Papilloma viruses	HPVS	
		Adeno viruses	Adeno viruses	
		Herpes viruses	HSV-1 & 2, VZV, EBV, CMV	
		Pox viruses	Smallpox (Variola) and Vaccinig	
2.	SS DNA	Par voviruses	Parvo virus	
3.	Ds RNA	Reo viruses	Rota virus	
4.	+ss RNA	Picorna viruses	Polio virus, Rhino viruses, Hepatitis A	
		Corona viruses	SARS	
		Flavi viruses	Yellow Fewer, West Nile, Hepatitis C	
5.	- ss RNA	Rhabdo viruses	Rabies	
		Paramyxo viruses	Measles and Mumps	PHARMACY
		Orthomyxo viruses	Influenza A and B	INDIA
		Bunya viruses	Hanta virus	PHARMA CY INDIA
		Arena viruses	Lassa	G
6.	RNA rev.	Retro viruses	HIV and HTLV	Google Play
7.	DNA rev.	Retro viruses	HIV and HTLV	Download
				App from play store

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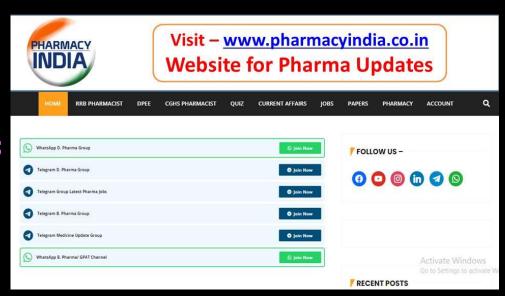
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