## Shri Guru Ram Rai Institute of Medical & Health Sciences, Dehradun & Shri Mahant Indiresh Hospital

# $\frac{DRUG \& THERAPEUTIC COMMITTEE \& PHARMACOVIJILANCE}{COMMITTEE}$

### **Formulation of the Committee:**

The Drug & therapeutic Committee was formed with the purpose to provide a forum for multidisciplinary input and co-operation and information sharing to recommend and monitor all issues related to the usage of drugs.

#### **Members:**

Name	Position	Designation
Dr. Utkarsh Sharma	Chairperson	Professor & HOD, Paediatrics
Dr. M.A. Beg	Member Secretary	Professor & HOD, Pharmacology
Dr. Vineeta Gupta	Member	Professor & HOD, Gynae & Obs
Dr. Salil Garg	Member	Professor & HOD, Cardiology
Dr. Navneet Badoni	Member	Professor, Orthopaedics
Dr. Hitender Kumar	Member	Professor, Pharmacology & Pharmacy Incharge
Dr. Iva Chandola	Member	Associate Professor, Microbiology
Dr. Prashant Mathur	Member	Professor & HOD, School of Pharmaceutical
		Sciences
Ms. Dipti Negi	Member	Pharmacist
Mrs Bincy Pothan Tiwari	Member	Nursing Superintendent / ANS
Mr. Bipin Prakash Tamta	Member	Pharmacovigilance Associate

Note: In addition to above, Special invitees may be called during the Committee meeting as & when required.

**Frequency:** Once in three months as and when required.

#### **Terms of reference:**

- 1. An Advisory role on the Pharmaco-economic evaluations of drugs.
- 2. Ongoing evaluation of specific pharmaceutical & therapeutic questions
- 3. A prime decision-making body on the selection of a brand of a drug (total control on formulary)
- 4. To co-ordinate the introduction of new drugs/extended use of existing medicines
- 5. To develop & maintain policies & procedures to support use of medicines including:
  - i. Policy for the prescribing, supply, administration & disposal of medicines
  - ii. Management of medication incidents
  - iii. Patient group directions & supplementary prescribing.
- 6. To co-ordinate to the management of risks involving medicines Including:
  - i. Safe use of medicines including incident management & follow up
  - ii. Competency assessment & training in prescribing, supply & administration of medicines.

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- iii. To approve Non-Formulary drugs on named patient basis or exceptional circumstances basis & to promote formulary applications for drugs that appear to have a gradual adoption.
- iv. To co-ordinate the activities of the committee & subgroups working to the drugs & therapeutic committee & receive regular reports from these groups.

#### **Responsibility:**

#### Chairperson

- To develop and implement a Medicines Management strategy for the hospital.
- Review the effectiveness of the D&T Committee to ensure that there are effective structures and processes in place.
- To validate the policy on the safe storage, dispensing, prescribing and administration of medicines within the hospital.
- To consider new drug applications and indications for existing drugs that will be for inhospital use only, and which require to be added to the additional list of the Hospital Formulary.

#### Anaesthetist, Surgeon & Physician

- To prepare hospital drug formulary incorporating all the medicines and consumables used in the hospital.
- To propose addition and/or deletion of medication in the hospital formulary.
- To ensure use of antibiotics as per hospital antibiotic policy and to discuss about any deviation observed.

#### **Nursing Superintendent/ANS**

- To discuss policies and procedure to be prepared as per NABH standard.
- To discuss about implementation of medication management policy across the hospital.
- To ensure appropriate reporting of medication error and to discuss CAPA taken.
- To discuss issues related to medication management and pharmacy services.

#### **Pharmacist**

- To prepare and discuss about drug formulary of the hospital and responsible for addition and/or deletion of medication in the hospital formulary.
- To discuss the policy on the safe storage, dispensing, prescribing and administration of medicines within the hospital.
- To discuss any change/amendment to be incorporated in policy & procedure/forms and format
- To discuss timely updation in LASA/High risk/emergency medication list.
- To ensure appropriate reporting of Quality indicators of pharmacy and to discuss CAPA taken.

#### **Quality Manager**

• To work as conveyer of this committee.

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- To ensure timely reporting of Quality indicators of pharmacy and to discuss CAPA taken.
- To discuss any change/amendment to be incorporated in policy & procedure/forms and format.
- To adhere NABH standard requirements and to discuss regarding implementation of the same.
- To ensure all agenda points to be closed by stipulated time.

## **Duration of Functioning**

- 1. Tenure of committee once constituted will be for 2Years.
- 2. At the end of 2 years, there may be change of participating medical consultants. However, consultants on earlier committee may also continue.

### **Number of Meetings in a year:**

- 1. To hold minimum 4 meetings in a year
- 2. Each Member should attend at least 3 meetings in a year.

#### **Records:**

- 1. Minutes of the Meetings shall be maintained and preserved for 3 years unless required longer.
- 2. Destruction of Records shall be by shredding.

Note: Drug & Therapeutic Committee will report to Quality Assurance Committee.