

**Ministry of Health, Labour and Social Protection  
of Republic of Moldova  
STATE UNIVERSITY OF MEDICINE AND PHARMACY  
„NICOLAE TESTEMITANU”**

Faculty of Pharmacy

Department of  
**SOCIAL PHARMACY „VASILE PROCOPIȘIN”**

**PHARMACEUTICAL  
PROPAEDEUTIC  
Internship program**

*Learning guide  
and internship agenda for students  
of the second year, Faculty of Pharmacy*

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*(student Name and Last Name)*

Group \_\_\_\_\_, a.y. 20\_\_-20\_\_

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## **PHARMACEUTICAL PROPAEDEUTIC**

### **Internship program**

*Author:*

**Elena CHIȚAN**, university assistant

*Edited by:*

**Mihail BRUMĂREL**, PhD, associate professor

*Reviewers:*

**Stela ADAUJI**, PhD, associate professor

**Mihail LUPU**, PhD, associate professor

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# CONTENTS

I. BACKGROUND .....	5
II. STUDENTS TASKS DURING INTERNSHIP .....	7
III. TIME DISTRIBUTION IN WORK AREAS .....	7
IV. INFORMATION FOR SUPERVISORS OF PHARMACY PRACTICE .....	8
V. PROFESSIONAL COMPETENCES AND FINALITIES OF STUDY .....	9
VI. LIST OF PRACTICAL ABILITIES AND SKILLS MANDATORY FOR PERFORMANCE .....	11
6.1. Structure of the pharmaceutical system .....	11
6.2. Functions and role of pharmacy and the pharmacist in the health system .....	12
6.3. Community pharmacy .....	14
6.4. Space of community pharmacy, equipment with furniture and technique .....	17
6.5. Security technique and health rules at the pharmacy workplaces .....	19
6.6. Sanitary regime in community pharmacy .....	20
6.7. Medicines and other pharmaceutical / parapharmaceutical products in community pharmacy .....	25
6.8. Medical devices, other pharmaceuticals / parapharmaceuticals in community pharmacy .....	36
6.9. Other products from community pharmacy - food supplements	37
6.10. Reception of products in community pharmacy .....	38
6.11. Organization of optimal storage of pharmaceuticals products, parapharmaceutical and medical devices in community pharmacy .....	42
6.12. Medicine prescription. Dispensing of medicines from the community pharmacy .....	52
6.13. Dispensing of medicines through community pharmacy. OTC medicines .....	61
6.14. Code of ethics of pharmacists. Basic principles and their application in pharmaceutical practice .....	64
VII. EVIDENCE AND INTERNSHIP REPORT .....	69
VIII. TAKING THE COLLOQUIUM .....	70
COMPULSORY BIBLIOGRAPHY .....	72
ADDITIONAL BIBLIOGRAPHY .....	73

# INTERNSHIP AGENDA

Student \_\_\_\_\_ Group F \_\_\_\_\_ year II  
*(Name, Last Name)*

Place of internship \_\_\_\_\_  
*(company name, address)*

Period of practice \_\_\_\_\_  
*(Duration - 10 days, 60 hours)*

The head of practice at pharmacy \_\_\_\_\_  
*(Name, Last Name)*

\_\_\_\_\_  
*(Position)*

The head of practice at department \_\_\_\_\_  
*(Name, Last Name)*

\_\_\_\_\_  
*(Position)*

\_\_\_\_\_  
*Signature of the head of pharmacy practice*  
*Place for pharmacy stamp*

## I. BACKGROUND

Propedeutics is an introductory education in the study of a discipline and includes its main elements: from the Greek "*pro*": - before and "*paideutike*" - education.

The purpose of the propedeutic practice at the "Pharmacy" specialty is to initiate the students with the basic notions of pharmaceutical activity, training students in the practical professional basic knowledge, preparing them for study at the senior years of the core disciplines; initiating pharmacies students in organizing the work and basic activities of the community pharmacy.

A pharmacy is an institution that has as its main activity the medicine and other parapharmaceutical products. Pharmacists, from community pharmacies, are the main available health workers for population. They dispense medicines through medical prescription, or in other case, over the counter, when it is legally possible. In addition to ensuring a correct delivery of the appropriate products, their professional activities cover patient counselling at the time of medicines dispensing with or without a prescription, information of health professionals, patients and the public, as well as participation in health promotion program. In addition to ensuring proper delivery of the appropriate products, their professional activities cover patient counselling at the time of distributing medicines with or without a prescription, informing of healthcare professionals, patients and the general public, as well as participation in health promotion programs. The pharmacist is an expert in pharmaceutical, pharmacotherapy and health promotion; Is a professional informant for patients, other health care providers, decision makers; Provides high-quality products, services and communications and documents its activities, communicates the results to colleagues.

The main objectives of the pharmacy activity are the reception, preparation, storage and release of medicines of any kind and in any form, in accordance with the normative documents in force, as well as with the international standards; Release of other parapharmaceutical products registered or authorized by the Ministry of Health; Processing medical prescriptions; Monitoring the rational use of medicines and the response to the symptoms of minor affections of patients. Based on this, the main task of the pharmacy is to carry out multilateral pharmaceutical work in order to provide the population with timely and high-quality assistance with medicines and parapharmaceuticals. To accomplish this task the pharmacist must possess not only theoretical knowledge but also the ability to perform a range of standard operating procedures that predict the release of the drug to the patient: selection, storage, preparation, verification, reception; as well as procedure that follow process of medicines release: release,

counselling, controlled self-medication, promoting healthy lifestyle, etc. In this way, future pharmacists will become acquainted with the first practical elements of pharmacy activity in the pharmaceutical propedeutic practice, which will be achieved by completing the curriculum and acquiring the skills and practical skills recommended below.

The objectives of the practical training in pharmaceutical propedeutics are to expose the student to the vast practical activities performed within the community pharmacy, the formation of professional orientation, values, attitudes and behavior in pharmaceutical activity. The student will study the scope of services provided in the pharmacy, identify the types and forms of drugs released, medicines stock management, passively participate in the medication reception and dispensing process, patient counselling process, etc.

Practice is scheduled for 2 weeks (60 academic hours) of pharmacy student's activity and takes place after the completion of the fourth semester of studies. The propedeutic practice ends with a differentiated colloquium, which takes place at the department, in the first week of the next semester after a pre-determined screening schedule. The final grade of the student will consist from the theoretical mark obtained at the course The History of Pharmacy and Pharmaceutical Propedeutics, and the mark obtained as a result of the evaluation of the knowledge obtained during the respective practice. At the colloquium, the student presents with the report, the practice book (internship agenda), and the positive reference characteristic.

## II. STUDENTS TASKS DURING INTERNSHIP

Upon the arrival of the student in the pharmacy, he presents himself with the appointment to practice at the head of pharmacy, who by order designates the supervisor of internship, draws together with him the schedule of the distribution of working time in the respective sectors with the indication on the agenda of the concrete days.

During the practice, students are required to comply with the requirements of current labour law, the internal pharmacy regulation and the security technique.

During the practical internship, students participate in working meetings and other activities of the pharmacy staff. Daily, the amount of work done is detailed in the practice agenda, which is being prepared, and kept until the end of pharmacy practice.

## III. TIME DISTRIBUTION IN WORK AREAS

Name of working sites, activities and practical skills	Hours
<b>1. Acquaintance with pharmacy.</b> <i>1.1. The structure of the pharmaceutical system in Moldova.</i> <i>1.2. Pharmaceutical legislation.</i> <i>1.3. Functions and role of pharmacy and the pharmacist in the health care system.</i> <i>1.4. Community pharmacy.</i> <i>1.5. Premises, equipment and logistical resources requirements of a community pharmacy.</i> <i>1.6. Safety and health protection at the workplace in the pharmacy.</i> <i>1.7. Sanitary conditions in community pharmacies.</i> <i>1.8. History of community pharmacy.</i>	12
<b>2. Acquaintance with medicines assortment, parapharmaceutical products from assortment of pharmacy and their storage places.</b> <i>2.1 Medicines classification.</i> <i>2.2 Assessment of legal status of medicines supply form pharmacy.</i> <i>2.3 Medical devices and Other products from community pharmacy.</i>	12
<b>3. Reception of products in community pharmacy.</b> <i>3.1 Reception of medicines.</i> <i>3.2 Reception of other parapharmaceutical products.</i> <i>3.3 Storage of received products.</i>	6
<b>4. Organization of pharmaceuticals, medical devices and parapharmaceutical products storage in community pharmacy.</b> <i>4.1 Principles and norms of warehousing and storage of goods in the pharmacy.</i>	12

Name of working sites, activities and practical skills	Hours
4.2 <i>Storage peculiarities of various groups of medicines.</i> 4.3 <i>Feature storage industrial dosage form.</i> 4.4 <i>Principles of storage of medicines containing narcotic and psychotropic substances.</i> 4.5 <i>Peculiarities of storage of other pharmaceutical products: medical devices, plant products, parapharmaceutical.</i> 4.6 <i>Monitoring of warehousing and storage of products in pharmacy.</i>	
<b>5. Medical prescription. Dispensing of medicines through community pharmacy.</b> 5.1 <i>General rules of medicines prescribing. Prescription forms.</i> 5.2 <i>OTC medicines.</i>	<b>12</b>
<b>6. Code of ethics of pharmacists. Main principles and their application in pharmaceutical practice.</b> 6.1 <i>Deontological code of pharmacists in Republic of Moldova.</i> 6.2 <i>Practical implementation of ethical principles in community pharmacy practice.</i> 6.3 <i>Case studies of ethical problems in community pharmacy.</i>	<b>6</b>
<b>Total hours:</b>	<b>60</b>

#### IV. INFORMATION FOR SUPERVISORS OF PHARMACY PRACTICE

At the presentation of the appointment to practice, the head of pharmacy designates as a internship supervisor, a pharmacist with a higher education degree and at least 5 years' working experience. The supervisor of the practice will perform the control of the organization and traineeship of the student, will establish the timetable for the time division in the work sectors, will systematically verify the fulfilment of the timetable, will provide the necessary assistance in the accomplishment of the program of practice, will check the agendas and documents completed by the student on each separate compartment, and make the necessary notes and corrections by signing each program section in the agenda.

The head of pharmacy will initiate students in the professional development activities of the collaborators, in the social life of the pharmacy staff.



## **V. PROFESSIONAL COMPETENCES AND FINALITIES OF STUDY**

1. To become acquainted with the structure of the pharmaceutical system, the general notions regulating the pharmaceutical activity.
2. Familiarize with the role of the pharmacist in the public health system.
3. Get acquainted with the community pharmacy, the pharmacy branch.
4. Familiarize with the constituent documents of the pharmacy. Meet the tasks and functions of the pharmacy.
5. Familiarize with the structure of pharmacy staff, positions (post) in pharmaceutical companies, roles and essential functions of the pharmacist.
6. Familiarize with the pharmacy rooms and their furnishing with the necessary furniture and equipment.
7. To initiate with the safety requirements of pharmacy work and its compliance.
8. To study sanitary regime in pharmacy.
9. Familiarize with assortment of medicines from pharmacy.
10. Familiarize with types of drugs and drug forms.
11. Familiarize with parapharmaceutical products and food supplement from pharmacy range.
12. Receiving medicines and other pharmaceutical and parapharmaceutical goods.
13. Study of the optimal storage conditions of pharmaceutical and parapharmaceutical products in the pharmacy depending on various factors (toxicity, properties, etc.).
14. Meet the structure of prescription and types of prescriptions received in the pharmacy.
15. Familiarizing with the notions of pharmaceutical ethics.
16. Familiarizing with the communication ways in pharmacy (pharmacist-patient, pharmacist-pharmacist).
17. Familiarizing with the pharmacist's functions and role within the pharmacovigilance system in community pharmacy.
18. Learning the most common medication problems - abuse and irrational use of medicines.

19. Initiation with the sources of information used in the practice of pharmacists in the community pharmacy.
20. Obtaining knowledge in the process of rational mediatisation of pharmaceutical assistance of the population by the pharmacist.
21. To get acquainted with the history of the founding and evolution of the respective pharmacy (openness, evolution of pharmaceutical cadres, etc.).

By the end of internship, the student will be able to made following abilities and skills:

- To know the structure and mission of the health system;
- To know the structure of the medicines assistance system and the interconnection of its component parts;
- To know the role and purpose of the medicines assistance system and its achievement pathway;
- To know the current role of the pharmacist in the health system and the basic requirements towards the pharmacist;
- To now the essence of pharmaceutical activity and the basic requirements for the exercise of pharmaceutical activity;
- To know the types of pharmaceutical companies and the basic conditions of their activity;
- To know the notions of medicine, pharmaceutical form and other notions deriving from them;
- To know the classification principles and classifications of medicines and the basic activities of their use in medical practice;

To know the organizational principles of the storage of medicines;

- To know the role and functions of professional pharmaceutical organizations;
- To become more confident in choosing the right profession in the spirit of respect and love for it through its role in society.

## VI. LIST OF PRACTICAL ABILITIES AND SKILLS MANDATORY FOR PERFORMANCE

### *Day 1.*

#### 6.1. Structure of the pharmaceutical system

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*List and describe the components of the pharmaceutical system in the country where you make internship.*

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#### Pharmaceutical legislation

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*Indicate the main legislative acts that regulates pharmaceutical activity in the country where you make internship (case study, **community pharmacy**).*

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Regulation:

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Directive:

-

-

Guidelines:

-

-

Laws:

-

-

Government decisions:

-

-

Orders of Ministry of Health:

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- 
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## 6.2 Functions and role of pharmacy and the pharmacist in the health system

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*Formulate the notion of **pharmacist** and **pharmacy** in the context of **contemporary** practice and the real needs of the health and pharmaceutical system.*

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Pharmacy notion:

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Pharmacist notion:

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*Describe the basic **functions** of pharmacists according to the nomenclature of pharmaceutical posts in community pharmacy.*

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Head of pharmacy:

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Head of subsidiary (branch of pharmacy):

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Pharmacist:

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Pharmacist technician:

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*Indicate the structure of staff in the pharmacy where you make the internship. Attach xerox copies of the Regulation and employers working obligation of pharmaceutical positions (posts) identified in pharmacy*

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1. 

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2. 

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3. 

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4. 

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5. 

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6. 

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### 6.3 Community pharmacy

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*Indicate the documents required for the establishment of public access pharmacy and its branches. Attach copies of these documents.*

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Documents required for community pharmacy:

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_
3. \_\_\_\_\_  
\_\_\_\_\_
4. \_\_\_\_\_  
\_\_\_\_\_
5. \_\_\_\_\_  
\_\_\_\_\_
6. \_\_\_\_\_  
\_\_\_\_\_
7. \_\_\_\_\_  
\_\_\_\_\_

Documents required for community pharmacy branch:

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_
3. \_\_\_\_\_  
\_\_\_\_\_
4. \_\_\_\_\_  
\_\_\_\_\_

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*Identify the purpose and functions of community pharmacy. Describe functions of pharmacy where you spend practice.*

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Purpose of community pharmacy:

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Functions of community pharmacy:

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Activities peculiarities of pharmacy where you spend the internship:

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*Study the normative acts regulating the rules for the extension and location of community pharmacies and their subsidiaries (branches). Indicate their main compartments.*

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Rules for the location of pharmacies in the country where you spend the internship:

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International practices - rules for the location of Community pharmacies in some states from European Union:

*Italy:*

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*France:*

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*Spain:*

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*Denmark:*

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*Romania:*

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*Poland:*

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*Evaluate and describe the location of the community pharmacy where you are practicing, in accordance with the rules of extension and location studied in the legislation.*

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Community pharmacy/branch of community pharmacy is located:

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*Design and draw in schematic form, the technological layout of the rooms with the specification of the pharmacy equipment where you spend the practice. Attach the copy of the pharmacy floor plan with surface indication, m2.*

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Technological location of the pharmacy rooms (community pharmacy layout):

List designation rooms from pharmacy where you spend the practice:

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_
3. \_\_\_\_\_  
\_\_\_\_\_
4. \_\_\_\_\_  
\_\_\_\_\_
5. \_\_\_\_\_  
\_\_\_\_\_

Equipping and technical equipment of the pharmacy rooms: indicate furnishings and technical equipment presents in the pharmacy rooms, where you spend the internship:

Furnishing:

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Technical equipment:

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### 6.5 Security technique and health rules at the pharmacy workplaces

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*Take note of the Safety and Health Safety Instructions in the Pharmacy. Record the main compartments of these Instructions as well as the Safety and Health Safety and health Registries for the staff of the pharmacy (registry compartments).*

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The main compartments of the Safety Instructions for Work Safety in Pharmacy:

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Compartments of the safety and health record book:

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*Describe the risks to which the pharmacy staff may be exposed during its work. Attach a copy of the Internal Regulation on employee security.*

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*Possible risks of the pharmacist activity in community pharmacy:*

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### **6.6 Sanitary regime in community pharmacy**

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*Study the Health and Personal Hygiene Instruction in the Pharmacy. Describe the main provisions of the legislative acts or Internal Standard Procedure (SOP) about the the Instruction on the Health Regime in Pharmaceutical Enterprises and Institutions*

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According to legislative acts describe:

- *Hygiene requirements for rooms and equipment:*

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- *Hygienic requirements for heating, ventilation, room microclimate:*

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- *Hygienic requirements on the working conditions of staff:*

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- *Sanitary and disinfection regime:*

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- *Water supply and sewerage:*

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- *Hygienic requirements for lighting:*

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- *Requirements for the personal hygiene of pharmacies / subsidiaries (branches):*

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- *Medical examinations for pharmacies employees:*

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Indicate the legislative act that regulate sanitary regime in the pharmacy where you spend the internship:

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*Record and indicate relative air temperature and humidity in the rooms of your pharmacy. Write the periodicity of the temperature and humidity checks. Attach copies of the record of temperature and relative humidity.*

<b>Rooms</b>	<b>t, °C</b>	<b>Relative humidity, %</b>
Population service room		
Working rooms or work areas, isolated in the Population service room		
Medicine formulations room (if it is present)		
Packaging, analytical control, laundry, solution sterilization, unpacking (if they are present)		
Rooms for storing stocks:		
a) industrial pharmaceutical forms, thermolabile substances and products		
b) vegetal medicinal raw material		
c) mineral waters, pharmaceutical dishes		
d) toxic and narcotic preparations, auxiliary materials, clean dishes		
e) highly flammable products		

*Frequency of measurement:*

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*Indicate the rules for the placement of thermometers and psychrometers in Community pharmacy rooms.*

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*Describe the specifics of cleanliness in the pharmacy where you are practicing:*

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*Floor:*

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Glance and windows frame:

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Furnishing of manufacturing area and dispensing room:

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Sinks for washing hands:

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Tidying up of different rooms:

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Device for shoeshine:

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Sanitary day:

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**Day 3.**

**6.7 Medicines and other pharmaceutical / parapharmaceutical products in community pharmacy**

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*Study and register definitions that characterize: medicine, medicine active substance, international non-proprietary name, trade name, parapharmaceutical product.*

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Medicine (drug):

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Medicine active substance:

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International non-proprietary name:

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Trade name:

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Parapharmaceutical product:

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*Study and identify the names of the medicines present in the pharmacy. Include 10 medicine names according to International Nonproprietary Name (INN) and Trade Name (TN).*

No.	<b>International Non-Proprietary Name, according to the nomenclature of World Health Organization</b>	<b>Trade Name (assigned by manufacturer)</b>	<b>Manufacturer of medicine</b>
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

*Study and enclose the notions of the original medicines and generic medicines. Identify and enrol 5 examples of original medicines and 10 examples of generic medicines from the stocks of the pharmacy where you have the practice.*

**Original medicine:**

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*Exemple of original medicines identified in the pharmacy:*

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

**Generic medicine:**

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*Examples of generic medicines identified in the pharmacy:*

1. 

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3. 

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7. 

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8. 

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9. 

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10. 

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*Analyse during the practice day which medicines are more demanded by patients and more recommended by pharmacists (generic or original). Assess the factors / conditions prevailing at the recommendation of the pharmacist and at the patient's request. Sign the results.*

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**Results of requests/recommendations:**

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**Factors / Conditions (in the case of pharmacist):**

Factors / Conditions (in the patient case):

According to World Health Organization regulations, all the medicines are classified into 14 large classes, depending on the pharmaco-therapeutic action to the organ or system on which they act and their therapeutic, pharmacological and chemical properties – **ATC system – “Anatomical, Therapeutic, Chemical Classification Index”**. Drugs are classified in groups at five different levels. The drugs are divided into fourteen main groups (1st level), with pharmacological/therapeutic subgroups (2nd level). The 3rd and 4th levels are chemical/ pharmacological /therapeutic subgroups and the 5th level is the chemical substance. The 2nd, 3rd and 4th levels are often used to identify pharmacological subgroups when that is considered more appropriate than therapeutic or chemical subgroups. Include examples medicines according to ATC code identified in the pharmacy. **Example: INN Lisinoprilum, TN:Diroton® ATC code: C09AA03**

Code	Organ or system on which they act	International non-proprietary name (INN) and Trade Name (TN) of medicine	ATC code
<b>A</b>	Alimentary tract and metabolism		
<b>B</b>	Blood and blood forming organs		
<b>C</b>	Blood and blood forming organs		
<b>D</b>	Dermatologicals		
<b>G</b>	Genito urinary system and sex hormones		
<b>H</b>	Systemic hormonal preparations, excluding sex hormones		
<b>J</b>	General anti-infective for		

	systemic use		
<b>L</b>	Antineoplastic and immunomodulating agents		
<b>M</b>	Musculo-skeletal system		
<b>N</b>	Nervous system		
<b>P</b>	Antiparasitic products		
<b>R</b>	Respiratory system		
<b>S</b>	Sensory organs		
<b>V</b>	Various		
<b>X</b>	Phyto therapeutic, apitherapy, homeopathic products (in some countries)		

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*In accordance with the therapeutic importance, medicines are classified as **vital, essential and non-essential**. Specify the definition of this medicines categories.*

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Vital medicine:

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Essential medicine:

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Non-essential medicine:

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*Based on WHO Model Lists of Essential Medicines identified in the assortment of pharmacy medicines from this list. Get five examples of each of these medicines in the table.*

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<b>VEN</b>	<b>International Non-proprietary Name of medicine</b>	<b>Trade Name of medicine</b>
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<b>Vital:</b>	- - - -	- - - -
<b>Essential:</b>	- - - -	- - - -
<b>Non-essential:</b>	- - - -	- - - -

**Day 4.**

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*Study the pharmaceutical forms depending on state of aggregation. Include the definitions of them.*

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1. Solid dosage forms – powders, pills, tablets, capsules, sugar-coated tablets (dragee), granules, sachets:

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2. Semisolid dosage forms - suppositories, ointments, pastes, liniments, patch, and soaps:

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3. Liquid dosage forms: solutions, suspensions, emulsions - for external use; drops for - eyes, ears, nose; gargle, enemas, drops for internal use,

potions, sweeteners:

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4. Liquid dosage forms for parenteral administration: injections and infusions:

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5. Gaseous dosage forms - are gases, volatile liquids and aerosols:

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*Study the medicine groups in the pharmacy, based on the route of administration and the pharmaceutical form. Include 1-2 examples identified in the table.*

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<b>Route of administration</b>	<b>Pharmaceutical form</b>	<b>International Non-proprietary Name/ Trade Name</b>	<b>Strength, Unit measurement</b>
Medicines for internal use, oral preparations, <b>administered orally</b> (swallowed)	Tablets		
	Capsules		
	Solutions		
	Syrups		
	Suspensions		
	Powders		

	Effervescent granules		
Medicines for external use, which are not administered orally, by dermal route/ <b>dermal forms</b>	Ointments		
	Creams		
	Gels		
	Paste		
	Lotions		
	Powders		
	Solutions		
Medicines for external use, administered/ applied to mucous membranes/ <b>inhalable forms</b>	Plasters		
	Aerosols		
Medicines for external use, administered/ applied to mucous membranes/ <b>forms for the nose</b>	Inhalations		
	Drops		
Medicines for external use, administered/ applied to mucous membranes/ <b>forms for ears</b>	Spray		
	Drops		
Medicines for external use, administered / applied to mucous membranes / <b>eye forms</b>	Eye drops		
	Ophthalmic ointment & gel		
Medicines for external use, administered/ applied to the mucous membranes/ <b>forms for the oral mucosa</b>	Gargles		
	Oral Drops		
	Mouthwashes		
Medicines for external use, administered/ applied to the mucous membranes/ <b>rectal forms</b>	Suppository		
	Enema		
Medicines for external use, administered/ applied to the mucous membranes/ <b>vaginal forms</b>	Pessary		
	Compressed pessaries		
	Ointment		
	Vaginal creams		



Medicines administered by parenteral routes <b>intravenous/ intramuscular/ subcutaneous</b>	Injection solutions		
	Injection Powders		
	Suspensions for injection		
	Infusion solutions		
	Infusion powders		
	Suspensions for infusion		

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*Study **Directive 2001/83/EC of the European Parliament and of the Council** about the criteria for assessing the legal status of medicinal products regarding their delivery from pharmacies. Indicate the notion of prescription only medicine / POM and non-prescription / OTC medicine.*

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Prescription only medicine, *POM*:

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Non-prescription medicine, *OTC (other the counter)*:

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*Indicate 10 examples of POM and OTC medicines identified in the pharmacy where you are practicing. Give examples of pharmaceutical substances (minimum 2-3), which, depending on the pharmaceutical*

*form, change its pharmacy release status: from POM (Rx) to OTC and vice versa.*

Example of **POM** medicines:

No.	Trade Name	International Nonproprietary Name	Pharmaceutical form	Strenght, measurement unit
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

Example of **OTC** medicines:

No.	Trade Name	International Nonproprietary Name	Pharmaceutical form	Strenght, measurement unit
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

Example of drug substances that may be POM (Rx) or OTC, depending on the pharmaceutical form:

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*Study and describe definitions of the plant based medicines: **herbal medicinal products, herbal substances, herbal preparations**, according to the legislation of the country where you made the internship. The results have to be included in practice agenda.*

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*Herbal medicinal products:*

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*Herbal substances:*

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*Herbal preparations:*

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*Include 10 examples of herbal medicines identified in the pharmacy where you are practicing.*

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Example of plant based medicines:

No.	Trade Name	Name of vegetable compound(s)	Pharmaceutical form
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

**6.8. Medical devices, other pharmaceuticals / parapharmaceuticals in community pharmacy**

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*According to **COUNCIL DIRECTIVE 93/42/EEC of 14 June 1993 Concerning Medical Devices**, study and enrol the definition of medical devices. Identify different categories of medical devices in the pharmacy. List 5 examples of medical devices*

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Medical device notion:

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Examples of rubber medical devices:

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Examples of plastic medical devices:

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Examples of medical devices, surgical instruments:

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Examples of medical devices wound dressing and utensils:

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## 6.9. Other products in community pharmacy - food supplements

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*Study the Directive 2002/46/EC of the European Parliament and of the Council of 10 June 2002 on the approximation of the laws of the Member States Relating to Food Supplements. Identify and enclose the notion of food supplement.*

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Food supplement notion:

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*Compare the notion of medicine and food supplement. Indicate the major differences between these two products that you have identified.*

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Medicine vs Food supplement:

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*Identify different categories of food supplements in your pharmacy. Indicate 5 examples of food supplements containing vitamins and minerals and 3 examples containing various extracts, herbal products from medicinal herbs.*

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Food supplement which contain vitamins, minerals:	1. _____ 2. _____ 3. _____ 4. _____ 5. _____
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Food supplement which contain herbs:	1. _____ 2. _____ 3. _____
Theas:	1. _____ 2. _____ 3. _____

*Analyse during the day of practice which dietary supplements are required by patients and which are indicated in the prescription. Sign the results.*

Food supplements required by patients:

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Food supplements indicated by the physician:

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### **Day 5.**

#### **6.10. Receiving products in the community pharmacy**

*In pharmacy, medications, medical devices, other pharmaceuticals are received based on three criteria: reception according to their quantity, quality and prices (value receipt). Participate during the day of practice in receiving the products in the pharmacy. Describe the reception procedures.*

Quantitative reception:

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Qualitative reception:

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Value based reception:

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*Indicate the discrepancies detected in the reception procedure. What actions have been taken in case of non-compliance of products at the reception.*

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Divergence:

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Actions undertaken:

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*List the documents that reflect the activity of receiving the products in the community pharmacy. Attach copies of these documents.*

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For medicines:

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For medical devices:

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For other products:

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For food supplements:

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*List in the table 5 examples of different categories of products received  
in the*

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Medicines	1. _____ 2. _____ 3. _____ 4. _____ 5. _____
Medical devices	1. _____ 2. _____ 3. _____ 4. _____ 5. _____
Other products	1. _____ 2. _____ 3. _____ 4. _____ 5. _____
Food supplements	1. _____ 2. _____ 3. _____ 4. _____ 5. _____



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*Specify the storage locations of various products received in pharmacy.  
List 10 products that have been placed on / in the show-window,  
argue.*

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Places to store in the incoming products in pharmacy:

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Products placed on the show-window:

1. 

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2. 

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4. 

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5. 

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7. 

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9. 

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10. 

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**Day 6.**

**6.11. Organization of optimal storage of pharmaceutical products, parapharmaceuticals, medical devices in community pharmacy**

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*Study legislative acts or international guidelines and recommendation on the storage practices for pharmaceuticals, para-pharmaceutical products and medical devices. Read review and describe the rules for storing and keeping medicines and other products in the pharmacy where you spend the practice.*

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Principles and norms of placing in warehouse and storage in pharmacy:

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*List in the table by five examples of products in the pharmacy, which are storage according to the criteria outlined below.*

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<b>Used criteria</b>	<b>Temperature, °C</b>	<b>Example of product</b>
Store frozen	-20°C	1. _____
		2. _____
		3. _____
		4. _____
		5. _____

Not be frozen	2-8°C	1. _____ 2. _____ 3. _____ 4. _____ 5. _____
Keep cool	8-15°C	1. _____ 2. _____ 3. _____ 4. _____ 5. _____
Store at room temperature	15-25°C	1. _____ 2. _____ 3. _____ 4. _____ 5. _____
Store at ambient temperature	between 15° to 25°C or up to 30°C	1. _____ 2. _____ 3. _____ 4. _____ 5. _____

*Study the particularities of storage different groups of medicines.  
Indicate 8 examples of medicines, according to the specifics of their  
storage.*

<b>Medicine specificity</b>	<b>INN, TN, pharmaceutical form, strength, unit measure</b>
<i>Photosensitive medicines</i> (shoud be stored in light-protective package in dark rooms)	1. _____ 2. _____ 3. _____ 4. _____ 5. _____ 6. _____ 7. _____ 8. _____
<i>Hygroscopic medicines</i> (keep it in a cool place, in tightly closed packing, waterproof for water vapor)	1. _____ 2. _____ 3. _____ 4. _____ 5. _____ 6. _____ 7. _____ 8. _____
<i>Volatile medicines</i> (keep it in a cool place in hermetically sealed	1. _____ 2. _____

<p>packaging of non-volatile materials for volatile substances)</p>	<p>3. _____</p> <p>4. _____</p> <p>5. _____</p> <p>6. _____</p> <p>7. _____</p> <p>8. _____</p>
<p><i>Thermolabile medicines</i> (keep as specified by the manufacturer on the packaging)</p>	<p>1. _____</p> <p>2. _____</p> <p>3. _____</p> <p>4. _____</p> <p>5. _____</p> <p>6. _____</p> <p>7. _____</p> <p>8. _____</p>
<p><i>Medicines that should be protected against low temperatures</i> (preparations whose physiological properties change at frost exposure, and on heating these changes are not reversible)</p>	<p>1. _____</p> <p>2. _____</p> <p>3. _____</p> <p>4. _____</p> <p>5. _____</p> <p>6. _____</p> <p>7. _____</p>

	8. _____ _____
<i>Flammable and explosive medicines and substances</i> (keep in isolation, stored in special rooms, isolated, with walls made of refractory materials)	1. _____ 2. _____ 3. _____ 4. _____ 5. _____ 6. _____ 7. _____ 8. _____

*Describe the specific storage conditions of industrial pharmaceutical forms.*

Tablets and dragees:

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Injection solutions:

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Liquid medicines:

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Plasma substitutes and detoxification solutions:

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Extracts:

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Ointments and liniments:

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Suppositories:

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Aerosols:

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*Study and describe the principles of storage of medicines containing narcotic and psychotropic substances. Sign up examples of these medicines that you've met in the pharmacy.*

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Principle of storage of medicines containing narcotic and psychotropic substances:

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Examples of narcotic and psychotropic preparations:

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**Day 7.**

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*Study in pharmacy the peculiarities of storage of other pharmaceutical goods: medical devices, plant products, parapharmaceuticals, etc. Describe, with examples, the keeping of the products specified below, depending on the fabric materials.*

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Rubber objects:

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*Example:*

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Plastic articles:

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*Example:*

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Surgical Metal Instruments:

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*Example:*

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Wound dressing and utensils:

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*Example:*

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Gas cylinders:

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*Example:*

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Mineral waters:

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*Example:*

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*Study and describe the techniques used for the surveillance of the shelf-life of medicines/validity term/expiration date in the pharmacy where you are practicing.*

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Techniques for monitoring the shelf-life of medicines:

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*Study and describe the medicines dispensing policy from the pharmacy according to the **FEFO** principle ("first expired, first out"). The results you get, sign up in your practice agenda.*

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Applying the FEFO principle in practice:

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*Get acquainted with methods of extracting medicines with expired validity term in pharmacy. Describe these procedures.*

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Procedure for extracting medicines with expired validity term:

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*Join examples of medicines with limited shelf life.*

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Medicines with limited shelf life in pharmacy:

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*Describe indicators used by pharmacists to assess compliance of product quality when storage them in pharmacy.*

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1. For all type of products:

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2. For liquid products:

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3. For photosensitive products:

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4. For latex products:

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5. For tablets:

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6. For capsules:

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7. For injectable products:

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8. For products in tinfoil packages:

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9. For sterile pharmaceutical products:

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*According to internal Standard Operation Procedure describe the pharmacist work obligations as part of the process of monitoring storage and storage the products in pharmacy.*

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The pharmacist is obliged to:

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**Day 8.**

**6.12. Medicine prescription. Dispensing of medicines from the community pharmacy**

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*Study regulation acts from the countries where you spend the internship on the prescription and dispensing of medicines. Describe abbreviated general prescribing rules for prescription medications.*

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General prescribing rules for outpatient patients:

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*According to legislative acts indicate prescription formularies that could come in the pharmacy. Indicate the main parts of the prescription. Specify which medicines can be prescribed and dispensed on these forms of prescription..*

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Prescription formularies:

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The main parts of prescription:

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The specificity of prescribing and dispensing medicines depending on the formulary:

1. 

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2. 

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3. 

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4. Reimbursed medicines (compensated):

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Prescription form nr.1  
for prescription and dispensing of medicines

Stamp of the health care facility

Physician \_\_\_\_\_ phone no. \_\_\_\_\_  
(name surname)

**Rx Prescription**

Date of prescription  
" " \_\_\_\_\_ 2017

\_\_\_\_\_  
(name, surname of patient)  
Age \_\_\_\_\_ years

Price Rp.:

Signature and physician stamp \_\_\_\_\_

Prescription is available 30 days, 2 months  
(please specify)

Prescription form nr.1  
for prescription and dispensing of medicines

Stamp of the health care facility

Physician \_\_\_\_\_ phone no. \_\_\_\_\_  
(name surname)

**Rx Prescription**

Date of prescription  
" " \_\_\_\_\_ 2017

\_\_\_\_\_  
(name, surname of patient)  
Age \_\_\_\_\_ years

Price Rp.:

Signature and physician stamp \_\_\_\_\_

Prescription is available 30 days, 2 months  
(please specify)

Prescription form nr.1  
for prescription and dispensing of medicines

Stamp of the health care facility

Physician \_\_\_\_\_ phone no. \_\_\_\_\_  
(name surname)

**Rx Prescription**

Date of prescription  
" " \_\_\_\_\_ 2017

\_\_\_\_\_  
(name, surname of patient)  
Age \_\_\_\_\_ years

Price Rp.:

Signature and physician stamp \_\_\_\_\_

Prescription is available 30 days, 2 months  
(please specify)

Prescription form nr.1  
for prescription and dispensing of medicines

Stamp of the health care facility

Physician \_\_\_\_\_ phone no. \_\_\_\_\_  
(name surname)

**Rx Prescription**

Date of prescription  
" " \_\_\_\_\_ 2017

\_\_\_\_\_  
(name, surname of patient)  
Age \_\_\_\_\_ years

Price Rp.:

Signature and physician stamp \_\_\_\_\_

Prescription is available 30 days, 2 months  
(please specify)

**Prescription form nr.1  
for prescription and dispensing of medicines**

Stamp of the health care facility

Physician \_\_\_\_\_ phone no. \_\_\_\_\_  
(name surname)

**Rx Prescription**

*Date of prescription*  
" " \_\_\_\_\_ 2017

\_\_\_\_\_  
(name, surname of patient)  
Age \_\_\_\_\_ years

Price **Rp.:**

*Signature and physician stamp* \_\_\_\_\_

*Prescription is available 30 days, 2 months  
(please specify)*

**Prescription form nr.1  
for prescription and dispensing of medicines**

Stamp of the health care facility

Physician \_\_\_\_\_ phone no. \_\_\_\_\_  
(name surname)

**Rx Prescription**

*Date of prescription*  
" " \_\_\_\_\_ 2017

\_\_\_\_\_  
(name, surname of patient)  
Age \_\_\_\_\_ years

Price **Rp.:**

*Signature and physician stamp* \_\_\_\_\_

*Prescription is available 30 days, 2 months  
(please specify)*

**Prescription form nr.1  
for prescription and dispensing of medicines**

Stamp of the health care facility

Physician \_\_\_\_\_ phone no. \_\_\_\_\_  
(name surname)

**Rx Prescription**

*Date of prescription*  
" " \_\_\_\_\_ 2017

\_\_\_\_\_  
(name, surname of patient)  
Age \_\_\_\_\_ years

Price **Rp.:**

*Signature and physician stamp* \_\_\_\_\_

*Prescription is available 30 days, 2 months  
(please specify)*

**Prescription form nr.1  
for prescription and dispensing of medicines**

Stamp of the health care facility

Physician \_\_\_\_\_ phone no. \_\_\_\_\_  
(name surname)

**Rx Prescription**

*Date of prescription*  
" " \_\_\_\_\_ 2017

\_\_\_\_\_  
(name, surname of patient)  
Age \_\_\_\_\_ years

Price **Rp.:**

*Signature and physician stamp* \_\_\_\_\_

*Prescription is available 30 days, 2 months  
(please specify)*

**Examples of prescribing medicines Form no. 2:**



**Prescription form no.2  
for prescription and dispensing of medicines containing  
narcotic and psychotropic substances**

DOCUMENT OF STRICT EVIDENCE Stamp of the health care facility	
Physician _____ phone no. _____ (name surname)	
<b>Rx Prescription</b>	
Series _____ No. _____ Date of prescription _____ " " _____ 2017	
(name, surname of patient) Age _____ years. Medical card no. _____	
Price	<b>Rp.:</b>
Signature and physician stamp _____	
<i>Prescription is available 10 days</i>	

**Prescription form no.2  
for prescription and dispensing of medicines containing  
narcotic and psychotropic substances**

DOCUMENT OF STRICT EVIDENCE Stamp of the health care facility	
Physician _____ phone no. _____ (name surname)	
<b>Rx Prescription</b>	
Series _____ No. _____ Date of prescription _____ " " _____ 2017	
(name, surname of patient) Age _____ years. Medical card no. _____	
Price	<b>Rp.:</b>
Signature and physician stamp _____	
<i>Prescription is available 10 days</i>	

**Prescription form no.2  
for prescription and dispensing of medicines containing  
narcotic and psychotropic substances**

DOCUMENT OF STRICT EVIDENCE Stamp of the health care facility	
Physician _____ phone no. _____ (name surname)	
<b>Rx Prescription</b>	
Series _____ No. _____ Date of prescription _____ " " _____ 2017	
(name, surname of patient) Age _____ years. Medical card no. _____	
Price	<b>Rp.:</b>
Signature and physician stamp _____	
<i>Prescription is available 10 days</i>	

**Prescription form no.2  
for prescription and dispensing of medicines containing  
narcotic and psychotropic substances**

DOCUMENT OF STRICT EVIDENCE Stamp of the health care facility	
Physician _____ phone no. _____ (name surname)	
<b>Rx Prescription</b>	
Series _____ No. _____ Date of prescription _____ " " _____ 2017	
(name, surname of patient) Age _____ years. Medical card no. _____	
Price	<b>Rp.:</b>
Signature and physician stamp _____	
<i>Prescription is available 10 days</i>	

**Examples of prescribing medicines Form no. 3:**







**Day 9.**

**6.13. Dispensing of medicines through community pharmacy.  
OTC medicines.**

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*Describe the procedure for receiving and checking the patient prescriptions (Forms 1 and 2) by the pharmacist.*

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Receiving and checking prescriptions:

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_
3. \_\_\_\_\_  
\_\_\_\_\_
4. \_\_\_\_\_  
\_\_\_\_\_
5. \_\_\_\_\_  
\_\_\_\_\_
6. \_\_\_\_\_  
\_\_\_\_\_

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*Describe the procedure for receiving and checking the patient prescriptions (for reimbursement medicines) by the pharmacist.*

---

Receiving and checking prescriptions:

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_
3. \_\_\_\_\_  
\_\_\_\_\_
4. \_\_\_\_\_  
\_\_\_\_\_

5.

6.

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*Observe the evaluation of prescriptions by the pharmacist in the pharmacy where you practice. Describe pharmacist working procedure for detecting errors in the prescription.*

---

Operations performed by the pharmacist in case of prescription medicines errors:

1.

2.

3.

4.

5.

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*Indicate the types of prescription errors observed during the day of practice.*

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Types of prescription errors:

1.

2.

3.

4. \_\_\_\_\_  
 \_\_\_\_\_
5. \_\_\_\_\_  
 \_\_\_\_\_
6. \_\_\_\_\_  
 \_\_\_\_\_

*Study the list of medicines that could be dispensed from pharmacy without prescription (OTC medicines). Indicate 3 examples of OTC medicines according to pharmaceutical form.*

<b>Pharmaceutical form</b>	<b>International Non-proprietary Name</b>	<b>Trade Name</b>	<b>Strength, unit measure</b>
Capsule	1.		
	2.		
	3.		
Tablets	1.		
	2.		
	3.		
Cream	1.		
	2.		
	3.		
Dragees	1.		
	2.		
	3.		
Gel	1.		
	2.		
	3.		
Pills	1.		
	2.		
	3.		
Herbal products	1.		
	2.		
	3.		
Syrup	1.		
	2.		
	3.		
Shampoo	1.		
	2.		
	3.		
Drops	1.		
	2.		
	3.		

**Day 10.**

**6.14. Code of Ethics for Pharmacists. Basic principles and their application in pharmaceutical practice**

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*Study and describe the main compartments of the Pharmacist's Code of Ethics and Deontology.*

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1. The main obligation of pharmacist to the society:

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2. Professional Responsibility and Independence of the Pharmacist:

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3. Observance of ethical principles and pharmaceutical deontology:

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4. Relationship between pharmacist and patient:

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5. Relationship between pharmacist and physician:

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6. Relationship between pharmacist and colleagues:

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*Describe how the implementation of basic ethical principles takes place within the community pharmacy where you practice.*

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1. Patient care - an essential prerogative in the activity of the pharmacist of the community pharmacy:



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2. Use of professional judgment in the interest of the patient and the public:

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3. Demonstrating respect for third parties (patients):

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4. Encouraging patients to participate in their health care:

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5. Developing professional skills and knowledge:

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6. Pharmacist - honest and trustworthy:

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7. Responsibility in practical work:

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*Identify the possibilities of solving the following ethical issues, taking into account the principles: **Autonomy versus Interference; Veracity or Truth telling versus Social Responsibility; Confidentiality versus Ceracity; Nonmaleficence or "to do no harm"; Justice.***

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1. You have been contacted by a physician who has addressed the following request: "When in the pharmacy address the patient X, with a medical prescription: **Rp.:** *Enalapril 5 mg Dtd. Nr. 60 S. Internal, 1 tablet in the morning and evening*, please do not let him know about the possible side effects (dry stroke), because this information could harm the patient by refusing to take a medicine with some side effects. " (*Autonomy versus Interference*)

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2. A 40-year-old gentleman asked in the pharmacy for a consultation: "Hello, I need your help. I need to pass compulsory medical check-up tomorrow to get the right to be a maxi-taxi driver by city. Yesterday evening I have been take Tramadol, from my prescription (I got into an accident 2 weeks ago and had a chest injury) and I'm afraid that it will be detected in urine analysis. Please tell me, what medicine or medicines could I administer to ensure that no drugs are detected in the analysis?" (*Veracity vs. Social Responsibility*)

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3. You are phoned in a pharmacy by a parent who asks you to identify some drugs founded in a hidden place in her child's room to determine whether or not they are taking the contraceptive. (*Privacy vs. Veracity*)

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4. Maria is 38 years old women and works as a pharmacist in the community pharmacy. In the morning, she was called by the family physician Mr. Esanu, that warned her that his patient had been released a wrong medicine from her pharmacy yesterday. A prescription with Amiloride 5 mg, with indication "to take 3 tablets by day (15 mg)" was tangled, and actually was dispensed Amlodipine 5 mg in tablets. The patient took the wrong medication one day before the error was detected. Apart from vertigo and headache, the patient did not suffer any serious side effects. Maria extracted the original prescription from the file and confirmed that Amlodipine was released instead of Amiloride. (*Nonmaleficence or "to do no harm"*)

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5. Pharmacies were warned by the Health Insurance Company not to dispense high cost reimbursement medicines to the population, because of the budget deficit. In the pharmacy, comes a lady with medical prescription, that contain: *Interferon 1 $\beta$  No. 15*, indicated for multiple sclerosis. The price of a pack with 15 bottles costs 1540 USD in the pharmacy. This preparation is indispensable in improving the health of patients with multiple sclerosis. What will be the actions that you should take? (*Justice*)

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*Study and record real-life situations in the practice agenda that highlighted ethical issues in the pharmacy where you are practicing. Give an example of each ethical principle.*

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1. *Autonomy:*

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2. *Veracity:*

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3. *Confidentiality:*

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4. *Nonmaleficence:*

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5. *Justice:*

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## VII. EVIDENCE AND INTERNSHIP REPORT

On the first day of practice, the designated pharmacy manager, together with the student, taking into account the "time distribution schedule" and the specifics of the pharmacy, draw up an individual schedule according to the form:

### Individual practical training schedule

No.	Name of the work sector	Duration in days (date)
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		

All work volume is recorded daily in the Internship Agenda. The agenda must be kept in the pharmacy and presented at the first request of the department's professors.

Agenda is an official document that characterizes the work done. Entries will be made in accordance with these guidelines, displayed neat, and will contain the student's own opinion on the exposed material, thus demonstrating the ability to undertake a profound analysis of the problem in question and its expression in writing.

On the agenda is attached a map of the documents drawn up during the documenting of the activities carried out by the student.

Daily, the pharmacy supervisor checks the student's enrollments and makes the appropriate notes. At the end of the practice the head pharmacist signs the agenda and applies the stamp of the pharmacy.

## VIII. TAKING THE COLLOQUIUM

By finishing the practical internship, the student prepares and presents for the colloquium:

1. **The Practice Agenda** (with a document map), signed by the pharmacist tutor, head pharmacist, authenticated by applying the pharmacy stamp;
2. **The reference characteristic**, made by the head of the pharmacy practice, in which it will be elucidated:
  - fulfilling the work volume provided by the practice program;
  - the student's behaviour towards work, observance of the work discipline;
  - relationships with the pharmacy team;
  - student participation in the life of the team;
  - observance of the principles of pharmaceutical ethics;
  - highlighting the student's personal qualities;
  - the shortcomings highlighted during the practice, the discipline violations;
  - general internship mark (unsatisfactory, satisfactory, good, very good);
  - recommendations and requests for improving the practical training of students in the future.
3. **The set of Xeroxed documents** that are indicated in the internship agenda required to perform.
4. **The report**, drafted by the student with the following content:

## REPORT ON THE INTERNSHIP

student \_\_\_\_\_ group F \_\_\_\_\_ year II  
(Last name, First name)

1. Pharmacy where you spend the internship: \_\_\_\_\_

2. Terms of internship according to work schedule: \_\_\_\_\_

3. The general characteristic of the internship conditions:

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4. Content, way and accomplishment of the internship program:

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5. Assessment of the internship:

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6. Conclusions at the end of the internship and proposals for improving internship:

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7. Student signature: \_\_\_\_\_ Date \_\_\_\_\_

## COMPULSORY BIBLIOGRAPHY

1. CARATA, A. Management, marketing și legislație farmaceutică. Vol.1. Management în domeniul farmaceutic. București: Editura Didactică și Pedagogică, R.A, 2008, 303 p.
2. CHISHOLM-BURNS, M. A., VAILLANCOURT, M. A., SHEPHERD, M. Pharmacy Management, Leadership, Marketing, and Finance, Jones & Bartlett Publishers, second edition, 2012, 600 p. ISBN 978-144-965-725- 3.
3. DESSELLE, S.P.; ZGARRICK D.P. Managementul farmaciilor. Informații esențiale pentru practica farmaceutică. Vol.1. Ediția 2. Pritco, 2011. 353 p. ISBN 978-973-769-814-2
4. DESSELLE, S.P.; ZGARRICK D.P. Managementul farmaciilor. Informații esențiale pentru practica farmaceutică. Vol.2. Ediția 2. Pritco, 2011. 298 p. ISBN 978-973-769-814-8
5. EȚCO, C. Management în sistemul de sănătate. Chișinău: Epigraf, 2006. 862 p.
6. HERIST, K. N., ROLLINS, B., PERRI, M. Financial Analysis in Pharmacy Practice, Pharmaceutical Press, 2011, 225 p. ISBN 978-085- 369-897- 5.
7. MYLES, D. B. S. The dawn of drug safety the discovery, reporting and management of adverse drug reactions prior to thalidomide, Third edition, George Mann Publications Published by George Mann Publications Easton, Winchester, Hampshire, 2014, 285 p.
8. REMINGTON, J. P. The Science and Practice of Pharmacy, Vol.1. 22nd Edition, Pharmaceutical Press, 2013. 3024 p. ISBN 978-085-711-062-6.
9. SAFTA, V.; BRUMĂREL, M.; CIOBANU, N.; ADAUJI, S. Management și legislație farmaceutică. Chișinău: F.E.P. Tipografia Centrală, 2012. 800 p.
10. TOOTELIAN, D. H., WERTHEIMER, A. I., MIKHAILITCHENKO, A. Essentials of Pharmacy Management, Pharmaceutical Press, 2012, 446 p. ISBN 978-085- 711-018- 3.
11. VOITCU, M.; CĂRĂUȘ E.-M. Management sanitar și farmaceutic. Iași: "Gr. T. Popa", 2003. 245 p. ISBN 973-790-626-8
12. WIEDENMAYER, K.; SUMMERS, S. R.; MACKIE, C.A.; GOUS, A. G. S.; EVERARD, M. Developing pharmacy practice. A focus on patient care. The Netherlands, The Hague: World Health Organization Department of Medicines Policy and Standards in collaboration with International Pharmaceutical Federation, 2006, 97 p.
13. From Making Medicines to Optimizing Outcomes: The evolution of a profession 1912-2012. Report on Pharmacy, Pharmaceuticals and Global Health, commissioned by FIP and prepared by the UCL School of Pharmacy on the occasion of the Federation's Centennial Congress, 2012. 88 p.



14. Lecture material History of Pharmacy and Pharmaceutical Propedeutics.
15. Pharmacist Ethics and Professional Autonomy: Imperatives for Keeping Pharmacy Aligned with the Public Interest, FIP 2014.
16. SAFTA, V. Farmacie socială. Chişinău: S.n., 2011. 376 p.

## **ADDITIONAL BIBLIOGRAPHY**

1. BEJAN, V. Elemente de propedeutică farmaceutică. Chişinău, 2010.
2. Facultatea Farmacie la 40 de ani (File de istorie), sub red. V. Procopişin, N. Ciobanu. Chişinău, 2004.
3. Făuritorii unei istorii de aur. 60 ani de învăţământ superior în Moldova, Chişinău, 2005.
4. From Making Medicines to Optimizing Outcomes: The evolution of a profession 1912-2012, Report on Pharmacy, Pharmaceuticals and Global Health, commissioned by FIP and prepared by the UCL School of Pharmacy on the occasion of the Federation's Centennial Congress, 2012.
5. Pharmacist Ethics and Professional Autonomy: Imperatives for Keeping Pharmacy Aligned with the Public Interest, FIP 2014.

### **I. INTERNATIONAL GUIDELINES**

1. Guide on Estimating Requirements for Substances under International Control  
[https://www.incb.org/documents/Narcotic-Drugs/Guidelines/estimating\\_requirements/NAR Guide on Estimating EN Ebook.pdf](https://www.incb.org/documents/Narcotic-Drugs/Guidelines/estimating_requirements/NAR_Guide_on_Estimating_EN_Ebook.pdf)  
<https://www.incb.org/incb/en/publications/guidelines-for-use-by-competent-national-authorities.html>
2. Single convention on narcotic drugs, 1961  
[http://www.incb.org/documents/Narcotic-Drugs/1961-Convention/convention\\_1961\\_en.pdf](http://www.incb.org/documents/Narcotic-Drugs/1961-Convention/convention_1961_en.pdf)
3. Convention on psychotropic substances 1971  
[http://www.incb.org/documents/Psychotropics/conventions/convention\\_1971\\_en.pdf](http://www.incb.org/documents/Psychotropics/conventions/convention_1971_en.pdf)
4. United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances, 1988  
[http://www.incb.org/documents/PRECURSORS/1988 CONVENTION/1988Convention E.pdf](http://www.incb.org/documents/PRECURSORS/1988_CONVENTION/1988Convention_E.pdf)

5. Yellow List List of Narcotic Drugs under International Control Annex to Forms A, B and C (55 th edition, December 2016)  
<http://www.incb.org/documents/Narcotic-Drugs/Yellow List/55th Edition/YL -55th edition 2016.pdf>
6. Green List (New Version 2016, 27th edition) Annex to the annual statistical report on psychotropic substances (form P) List of Psychotropic Substances under International Control In accordance with the Convention on Psychotropic Substances of 1971  
<http://www.incb.org/documents/Psychotropics/greenlist/2016/V1604744 Eng.pdf>

## II. EUDRALEX:

1. Council Directive 93/42/EEC of 14 June 1993 Concerning Medical Devices  
<https://www.emergogroup.com/sites/default/files/file/europe-consolidated-mdd-93-42-eec.pdf?action>
2. Directive 2001/83/EC of the European Parliament and of the Council  
[https://ec.europa.eu/health/sites/health/files/files/eudralex/vol-1/dir\\_2001\\_83\\_consol\\_2012/dir\\_2001\\_83\\_cons\\_2012\\_en.pdf](https://ec.europa.eu/health/sites/health/files/files/eudralex/vol-1/dir_2001_83_consol_2012/dir_2001_83_cons_2012_en.pdf)  
(definitions for medicine, adverse reaction etc.) p.11-12; (labelling and package leaflet) p. 58-67; (classification of medicinal products) p. 68-70; (pharmacovigilance) p. 85-88;
3. Directive 2002/46/EC of the European Parliament and of the Council of 10 June 2002 on the approximation of the laws of the Member States relating to food supplements  
<http://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32002L0046&from=EN>
4. Guidelines of 5 November 2013 on Good Distribution Practice of medicinal products for human use  
[http://ec.europa.eu/health/sites/health/files/files/eudralex/vol-1/2013\\_c343\\_01/2013\\_c343\\_01\\_en.pdf](http://ec.europa.eu/health/sites/health/files/files/eudralex/vol-1/2013_c343_01/2013_c343_01_en.pdf)

## III. WORLD HEALTH ORGANIZATION (WHO):

1. Anatomical Therapeutic Chemical (ATC) classification system  
[https://www.whocc.no/atc/structure\\_and\\_principles/](https://www.whocc.no/atc/structure_and_principles/)
2. Building security and fire protection  
<http://digicollection.org/whoqapharm/documents/s22034en/s22034en.pdf>
3. Drug and Therapeutics Committees - A Practical Guide  
<http://apps.who.int/medicinedocs/pdf/s4882e/s4882e.pdf> p.74-76
4. Guidelines for the Control of Narcotic and Psychotropic Substances  
[http://apps.who.int/iris/bitstream/10665/39299/1/9241541725\\_eng.pdf](http://apps.who.int/iris/bitstream/10665/39299/1/9241541725_eng.pdf)

5. Guidelines for the Storage of Essential Medicines and Other Health Commodities  
<http://apps.who.int/medicinedocs/pdf/s4885e/s4885e.pdf>
6. Guidelines for Warehousing Health Commodities  
<http://apps.who.int/medicinedocs/documents/s21549en/s21549en.pdf>
7. Guidelines on good pharmacy practice: standards for quality of pharmacy services  
<http://digicollection.org/whoqapharm/documents/s18730en/s18730en.pdf>
8. Guide to good storage practices for pharmaceuticals  
[http://www.who.int/medicines/areas/quality\\_safety/quality\\_assurance/GuideGoodStoragePracticesTRS908Annex9.pdf](http://www.who.int/medicines/areas/quality_safety/quality_assurance/GuideGoodStoragePracticesTRS908Annex9.pdf)
9. Guide to Good Prescribing  
<http://apps.who.int/medicinedocs/pdf/whozip23e/whozip23e.pdf>
10. Model guidance for the storage and transport of time- and temperature-sensitive pharmaceutical products  
<http://digicollection.org/whoqapharm/documents/s18731en/s18731en.pdf>
11. Model guidance for the storage and transport of time- and temperature-sensitive pharmaceutical products  
<http://digicollection.org/whoqapharm/documents/s22051en/s22051en.pdf>
12. Pharmacovigilance: ensuring the safe use of medicines  
<http://apps.who.int/medicinedocs/pdf/s6164e/s6164e.pdf>
13. Temperature and humidity monitoring systems for fixed storage areas  
<http://digicollection.org/whoqapharm/documents/s22036en/s22036en.pdf>
14. The importance of pharmacovigilance safety monitoring of medicinal products  
<http://apps.who.int/medicinedocs/pdf/s4893e/s4893e.pdf?ua=1>
15. The Role of the Pharmacist in the Health Care System, 1994, WHO, 1994  
<http://apps.who.int/medicinedocs/pdf/h2995e/h2995e.pdf>
16. The Role of the Pharmacist in Self-Care and Self-Medication  
<http://apps.who.int/medicinedocs/pdf/whozip32e/whozip32e.pdf>
17. Viewpoint Issues, controversies and science in the search for safer and more rational use of medicines, part 1, second edition, Upsala Monitoring Centre and WHO Collaborating Centre for International Drug Monitoring, WHO Collaborating Centre for International Drug Monitoring Box 1051, SE-751 40 Uppsala. Sweden, 2010  
<https://www.who-umc.org/media/2684/viewpoint.pdf>
18. WHO good distribution practices for pharmaceutical products  
<http://digicollection.org/whoqapharm/documents/s17440en/s17440en.pdf>
19. WHO Model Lists of Essential Medicines  
[http://www.who.int/medicines/publications/essentialmedicines/20th\\_EML2017.pdf?ua=1](http://www.who.int/medicines/publications/essentialmedicines/20th_EML2017.pdf?ua=1)  
[http://www.who.int/medicines/services/essmedicines\\_def/en/](http://www.who.int/medicines/services/essmedicines_def/en/)
20. WHO Model Lists of Essential Medicines for Children  
[http://www.who.int/medicines/publications/essentialmedicines/6th\\_EMLc2017.pdf?ua=1](http://www.who.int/medicines/publications/essentialmedicines/6th_EMLc2017.pdf?ua=1)