

Rajiv Gandhi University of Health Sciences, Karnataka

V Year Pharm-D (II Year Pharm D Post Baccalaureate) Degree Examination – MAY 2016

Time: Three Hours

Max. Marks: 70 Marks

CLINICAL PHARMACOKINETICS & THERAPEUTIC DRUG MONITORING (RS)

Q.P. CODE: 2876

Your answers should be specific to the questions asked

Draw neat, labeled diagrams wherever necessary

LONG ESSAYS (Answer any two)

2 x 10 = 20 Marks

1. Discuss the role and clinical significance of genetic polymorphism in drug transports and drug targets with suitable examples.
2. a) Explain the general approach for dosage adjustment in renal diseases.
b) List various formulas for measurement of glomerular filtration rate.
3. a) Define Bayesian theory.
b) Explain the necessity and process of TDM in patients receiving cyclosporin and carbamazepine.

SHORT ESSAYS (Answer any six)

6 x 5 = 30 Marks

4. Explain the various pharmacokinetic drug interactions with suitable examples.
5. Discuss the protocol for TDM of a drug.
6. Explain in detail determination of dose and dosing interval of a drug.
7. Enumerate the factors involved in dosing of drugs in pediatric and obese patients.
8. Discuss the process of extracorporeal removal of drugs.
9. Explain dosing with feedback.
10. Discuss the pharmacokinetic / pharmacodynamic correlation in drug therapy.
11. Explain individualization of drug dosage regimen in accordance with patient age and co-existing diseases.

SHORT ANSWERS

10 x 2 = 20 Marks

12. Enumerate the factors influencing dialyzability of drugs.
13. Importance of clinical pharmacokinetics
14. Add a note on START and STOP criteria for drugs to be used in geriatric patients.
15. List four pharmacodynamic drug interactions along with their mechanism and clinical significance.
16. Explain the process of conversion of ciprofloxacin from IV to oral dose in adults.
17. Define pharmacogenetics.
18. Inhibition of biliary excretion
19. Define intrinsic clearance of drugs with its clinical significance.
20. Define narrow therapeutic index with suitable examples.
21. Dosage adjustment in uremic patients with suitable examples.
