

Year 2 - Practical Notes

Community Pharmacy and Management

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Review of Five Prescriptions

Experiment 1 - Practical Notes

Name: _____ Roll no.: _____ Date: _____

Aim

To review five fictional prescriptions for completeness and medicine-safety concerns.

Principle

A prescription review checks patient and prescriber details, indication, allergy, medicine, strength, form, dose, route, frequency, duration, interactions and patient-specific suitability.

Five Fictional Cases

Case	Prescription situation	Review focus
1	Metformin order gives strength but omits frequency.	Incomplete directions; clarify frequency and suitability.
2	Amoxicillin order with documented immediate penicillin allergy.	Allergy conflict; contact prescriber before supply.
3	Rheumatoid-arthritis methotrexate order appears to say daily.	Potential serious weekly-versus-daily error; urgent clarification.
4	Ibuprofen and diclofenac requested together for pain.	NSAID duplication and increased adverse-effect risk.
5	Modified-release tablet prescribed with instruction to crush.	Check product restrictions and an appropriate alternative plan.

Key Points

- Do not infer omitted directions.
- Resolve allergy, duplication and high-risk errors with the prescriber before supply.
- Review renal/hepatic information where relevant.
- Record the concern, action and outcome in a clear audit trail.

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Activity Procedure**1. Read**

Check all required details against the review checklist.

2. Identify

State the main concern in each fictional case.

3. Clarify

Write a concise question for the authorised prescriber.

4. Document

Record the decision and only prepare supply after the issue is resolved.

Record and Observations

Case	Issue found	Clarification / outcome
1	_____	_____
2	_____	_____
3	_____	_____
4	_____	_____
5	_____	_____

Result

Complete the record using your activity, then state the findings, the action required and the reason for that action.

Viva Questions and Answers**1. Why not guess a frequency?**

The guessed instruction can cause under-treatment or overdose.

2. What is therapeutic duplication?

Unnecessary overlap in similar medicines or effects.

3. Why check formulation?

Release design and administration restrictions affect safe use.

Medicine Interaction Review - Two Cases

Experiment 2 - Practical Notes

Name: _____ Roll no.: _____ Date: _____

Aim

To identify and document two clinically relevant fictional medicine interactions.

Principle

An interaction review considers mechanism, severity, patient risk, evidence and the authorised management plan.

Two Fictional Cases

Pair	Risk and review action
Warfarin with Ibuprofen	A fictional person taking warfarin asks to add ibuprofen. Combined anticoagulant and NSAID effects can increase bleeding risk. Do not add the requested medicine without qualified review; assess bleeding symptoms and seek urgent care when indicated.
Simvastatin with Clarithromycin	A fictional simvastatin user presents a new clarithromycin prescription. Clarithromycin can increase simvastatin exposure and muscle-toxicity risk. Flag the interaction to the prescriber/pharmacist for an authorised alternative or temporary-management plan; do not independently alter therapy.

Key Points

- Check the full medicine list, including nonprescription and herbal products.
- Separate pharmacodynamic overlap from altered drug exposure.
- Document who was contacted and the confirmed action.

Community Pharmacy and Management

Activity Procedure**1. Collect**

Record the medicines, indication, duration and relevant patient factors.

2. Assess

Identify the interaction and potential harm in each case.

3. Clarify

Prepare an evidence-based question for the supervising pharmacist or prescriber.

4. Record

Document the authorised outcome and monitoring advice.

Record and Observations

Case	Mechanism / risk	Action / outcome
1	_____	_____
2	_____	_____

Result

Complete the record using your activity, then state the findings, the action required and the reason for that action.

Viva Questions and Answers**1. What is a pharmacodynamic interaction?**

A change in effects through overlapping or opposing actions.

2. What is a pharmacokinetic interaction?

A change in absorption, distribution, metabolism or elimination.

3. Should a student stop medicines independently?

No; seek the authorised management decision.

Preparation of Five Dispensing Labels

Experiment 3 - Practical Notes

Name: _____ Roll no.: _____ Date: _____

Aim

To draft clear labels from five complete fictional orders.

Principle

A dispensing label translates the authorised order into clear patient instructions without inventing or changing the prescription.

Five Fictional Label Orders

Product	Supplied order for the exercise	Product check
Metformin tablet	Take one prescribed-strength tablet with the evening meal each day.	Confirm strength and formulation.
Amoxicillin oral suspension	Give the authorised 5 mL dose three times daily for the stated 5-day course.	Confirm concentration, allergy, storage and use period from product.
Clotrimazole cream	Apply a thin layer to the specified skin area twice daily for the stated course.	External route and product leaflet.
Methotrexate tablets for RA	Take the authorised total tablet dose once weekly on Monday.	Verify total mg, tablet strength/count and weekly day; never infer them.
Prescribed inhaled corticosteroid	Use the authorised inhaler doses at the specified frequency.	Device instructions; mouth-rinsing advice where specified.

Key Points

- Include the fictional patient, medicine, strength, form, directions, date and dispensing details.
- Add route, storage, use period and cautions appropriate to the exact product.
- Use plain language instead of ambiguous abbreviations.
- Orders below are label-writing data only, not treatment recommendations.

Community Pharmacy and Management

Activity Procedure**1. Verify**

Check the order and product before writing directions.

2. Draft

Write one label for each fictional order using the supplied directions.

3. Check

Compare the label back to the order, including units and frequency.

4. Explain

Role-play the instructions and ask for teach-back.

Record and Observations

Case	Student label / checks
1	_____
2	_____
3	_____
4	_____
5	_____

Result

Complete the record using your activity, then state the findings, the action required and the reason for that action.

Viva Questions and Answers**1. Why avoid abbreviations?**

They may be misread by patients.

2. Why label the route?

It reduces administration errors.

3. Can a label correct an unclear order by guessing?

No; clarify the order first.

Measurement of Blood Pressure in Community Pharmacy

Experiment 4 - Practical Notes

Name: _____ Roll no.: _____ Date: _____

Aim

To measure resting blood pressure using the institution-approved device and method.

Principle

Blood pressure is recorded as systolic over diastolic pressure in mmHg. Cuff size, posture, rest, movement and technique affect the reading.

Key Points

- Use an appropriately sized validated upper-arm cuff.
- Allow quiet seated rest and support the back, feet and arm at heart level.
- Record arm, device, cuff and repeated readings.
- A screening measurement does not alone establish a diagnosis.

Activity Procedure

1. Prepare

Explain the activity and check for reasons to defer it; arrange seated rest.

2. Position

Place the cuff on a bare supported upper arm using the device instructions.

3. Measure

Use the validated automatic method or supervised manual auscultatory method; avoid conversation and movement.

4. Repeat

Repeat at the specified interval and record each reading without rounding to a preferred value.

5. Interpret

Use the institution's assessment protocol, symptoms and repeat readings to decide whether review is needed.

Record and Observations

Field	Reading 1	Reading 2
Arm / cuff / device	_____	_____
Systolic, mmHg	_____	_____
Diastolic, mmHg	_____	_____
Pulse / symptoms	_____	_____

Result

Complete the record using your activity, then state the findings, the action required and the reason for that action.

Viva Questions and Answers

1. Why does cuff size matter?

An unsuitable cuff can bias the measurement.

2. What do Korotkoff sounds indicate?

Flow-related sounds used in manual pressure measurement; the defined first and disappearance phases guide readings.

3. Can one reading diagnose hypertension?

Routine diagnosis requires an appropriate repeated assessment, with urgent evaluation when symptoms or severe readings indicate it.

Pulse Oximetry in Community Pharmacy

Experiment 5 - Practical Notes

Name: _____ Roll no.: _____ Date: _____

Aim

To perform and document pulse oximetry.

Principle

A pulse oximeter estimates peripheral oxygen saturation and pulse using optical signals; it does not measure carbon dioxide or diagnose every cause of breathlessness.

Key Points

- Use a warm, still finger and correct sensor position.
- Movement, poor perfusion, nail coverings and other factors can affect reliability.
- Interpret the reading with symptoms; a reassuring number does not override severe distress.

Activity Procedure

1. Prepare

Explain the activity, obtain agreement and check the equipment and suitable resting conditions.

2. Perform

Fit the device according to its instructions, wait for a stable signal, compare pulse with a manual count when needed and repeat if signal quality is poor.

3. Record

Enter actual findings with units, method, time and any limitations.

4. Assess

Use the assigned teaching criteria and refer concerning symptoms for appropriate assessment.

Community Pharmacy and Management

Record and Observations

Field	Actual record
Sensor site / device	_____
SpO ₂ , %	_____
Pulse, beats/min	_____
Signal quality / symptoms	_____

Result

Complete the record using your activity, then state the findings, the action required and the reason for that action.

Precautions

- Use the device instructions and infection-prevention measures.
- Stop the teaching activity if the participant becomes unwell.

Viva Questions and Answers**1. Does SpO₂ measure ventilation?**

No; it estimates oxygen saturation and does not directly measure carbon dioxide clearance.

2. Why record units?

A number without units can be misunderstood.

3. Why repeat an unexpected measurement?

A repeat under valid conditions helps identify technique or device error; concerning symptoms still require prompt review.

Body Mass Index Calculation in Community Pharmacy

Experiment 6 - Practical Notes

Name: _____ Roll no.: _____ Date: _____

Aim

To perform and document body mass index calculation.

Principle

BMI expresses mass relative to height squared: kg/m^2 . It is a screening measure and does not directly measure body-fat distribution.

Key Points

- Measure mass in kg and height in metres without footwear using suitable equipment.
- Convert centimetres to metres before squaring.
- Children, pregnancy and some body-composition situations need additional assessment.

Practice Scenario

Illustrative BMI calculation: mass 60.0 kg and height 1.60 m gives $60 / 2.56 = 23.44 \text{ kg/m}^2$.

Activity Procedure

1. Prepare

Explain the activity, obtain agreement and check the equipment and suitable resting conditions.

2. Perform

Measure mass and height, calculate kg divided by metres squared, check units and interpret using the assigned population-specific chart.

3. Record

Enter actual findings with units, method, time and any limitations.

4. Assess

Use the assigned teaching criteria and refer concerning symptoms for appropriate assessment.

Community Pharmacy and Management

Record and Observations

Field	Actual record
Mass, kg	_____
Height, cm / m	_____
Height squared, m ²	_____
BMI, kg/m ²	_____

Result

Complete the record using your activity, then state the findings, the action required and the reason for that action.

Precautions

- Use the device instructions and infection-prevention measures.
- Stop the teaching activity if the participant becomes unwell.

Viva Questions and Answers**1. What is a common calculation error?**

Using centimetres as though they were metres.

2. Why record units?

A number without units can be misunderstood.

3. Why repeat an unexpected measurement?

A repeat under valid conditions helps identify technique or device error; concerning symptoms still require prompt review.

Capillary Blood Glucose Screening

Experiment 7 - Practical Notes

Name: _____ Roll no.: _____ Date: _____

Aim

To demonstrate a glucose-meter workflow and interpret a fictional screening record.

Principle

A meter estimates glucose from the product-specified specimen. Quality checks, clean technique, timing relative to meals and symptoms affect interpretation.

Key Points

- Use a trainer and simulated result unless supervised practice is authorised.
- Record fasting, post-meal or random context and units.
- Meters and strips must match; check expiry and control results.
- Screening is not a stand-alone diagnosis.

Practice Scenario

Fictional record: an adult feels well and has a random meter value of 165 mg/dL after a meal. Record the context and follow the screening protocol rather than diagnosing diabetes.

Activity Procedure

1. Prepare

Check consent, meter/strip compatibility, quality control and hand hygiene.

2. Demonstrate

Use the manufacturer-approved trainer sequence and show single-use lancet disposal.

3. Read

Record the supplied result, units, meal timing and symptoms.

4. Assess

Use the institution's screening/referral protocol; urgent symptoms require prompt care.

5. Document

Give a clear record and avoid declaring a diagnosis from one reading.

Record and Observations

Device / strip / control	_____
Meal timing / symptoms	_____
Reading / units	_____
Action / referral	_____

Result

Complete the record using your activity, then state the findings, the action required and the reason for that action.

Precautions

- Dispose of sharps correctly and never share lancets.
- No invasive testing on classmates without authorised supervision.

Viva Questions and Answers

1. Why note meal timing?

Glucose interpretation depends on when the measurement was taken.

2. Why use control testing?

It checks whether the meter-strip system is working as intended.

3. Can meters diagnose diabetes alone?

Diagnosis requires the appropriate clinical and laboratory assessment.

Peak Flow and Incentive Spirometer Demonstration

Experiment 8 - Practical Notes

Name: _____ Roll no.: _____ Date: _____

Aim

To perform and document peak expiratory flow measurement.

Principle

Peak flow records the highest expiratory flow reached during a forceful blow from a full inspiration.

Key Points

- Use an individual clean mouthpiece and reset the indicator.
- Record the highest of three acceptable attempts rather than their mean.
- Use the person's prescribed plan and personal best for ongoing interpretation.

Activity Procedure

1. Prepare

Explain the activity, obtain agreement and check the equipment and suitable resting conditions.

2. Perform

With suitable posture, inhale fully, seal lips around the mouthpiece and blow hard and fast; repeat three acceptable attempts with rest as needed.

3. Record

Enter actual findings with units, method, time and any limitations.

4. Assess

Use the assigned teaching criteria and refer concerning symptoms for appropriate assessment.

Record and Observations

Field	Actual record
Attempt 1, L/min	_____
Attempt 2, L/min	_____
Attempt 3, L/min	_____
Highest acceptable value, L/min	_____

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Result

Complete the record using your activity, then state the findings, the action required and the reason for that action.

Precautions

- Use the device instructions and infection-prevention measures.
- Stop the teaching activity if the participant becomes unwell.

Viva Questions and Answers

1. Why use the highest acceptable value?

A technically weaker effort can underestimate peak flow.

2. Why record units?

A number without units can be misunderstood.

3. Why repeat an unexpected measurement?

A repeat under valid conditions helps identify technique or device error; concerning symptoms still require prompt review.

Incentive Spirometer

This device encourages a slow sustained inspiration; it is different from the hard, fast expiration used for peak flow.

1. Prepare

Use the prescribed trainer, suitable posture and clean mouthpiece.

2. Inspire slowly

Exhale normally, seal the lips and inhale slowly and steadily while following the target indicator.

3. Pause and rest

Follow the clinician's breath-hold, repetition and rest instructions; stop for dizziness.

4. Record

Note technique, prescribed target and progress without treating the number as a diagnosis.

Patient Counselling for Type 2 Diabetes

Experiment 9 - Practical Notes

Name: _____ Roll no.: _____ Date: _____

Aim

To counsel a fictional person with type 2 diabetes.

Principle

Long-term glucose management combines prescribed medicines, food/activity choices and complication monitoring.

Key Points

- Review the exact medicine plan and adherence barriers.
- Explain symptom recognition and the individual action plan for low glucose where relevant.
- Discuss foot care, eye/renal review and avoiding tobacco.

Practice Scenario

Fictional role-play case: A fictional adult misses evening medicine when travelling and has no routine follow-up record.

Activity Procedure

1. Assess

Ask about understanding, actual medicine instructions, adherence and concerns.

2. Explain

Explain the medicine purpose and practical self-care in plain language.

3. Demonstrate

Demonstrate a relevant device or reminder method when applicable.

4. Plan

Agree a medicine reminder, review the prescribed monitoring plan and refer symptoms or uncertainty to the care team.

5. Teach back

Ask the partner to repeat the plan and record follow-up needs.

Community Pharmacy and Management

Record and Observations

Topic	Counselling record
Medicine / adherence concern	_____
Key explanation	_____
Teach-back	_____
Referral / follow-up	_____

Result

Complete the record using your activity, then state the findings, the action required and the reason for that action.

Precautions

- Use the supplied case and medicine labels; do not issue a prescription.

Viva Questions and Answers**1. Why ask about actual use?**

Prescribed directions and the way a person uses treatment may differ.

2. Why use teach-back?

It checks practical understanding.

3. Can a student change the regimen?

No; treatment changes require the authorised clinician's plan.

Patient Counselling for Primary Hypertension

Experiment 10 - Practical Notes

Name: _____ Roll no.: _____ Date: _____

Aim

To counsel a fictional person with primary hypertension.

Principle

Persistent blood-pressure elevation requires repeated assessment and a prescribed long-term plan.

Key Points

- Explain that symptoms may be absent.
- Review adherence, home-measurement technique and the prescribed follow-up.
- Discuss reduced excess salt, suitable activity and tobacco cessation in the person's context.

Practice Scenario

Fictional role-play case: A fictional adult stops tablets on days when the blood-pressure reading looks better.

Activity Procedure

1. Assess

Ask about understanding, actual medicine instructions, adherence and concerns.

2. Explain

Explain the medicine purpose and practical self-care in plain language.

3. Demonstrate

Demonstrate a relevant device or reminder method when applicable.

4. Plan

Explain regular prescribed use and arrange review instead of adjusting treatment from one reading.

5. Teach back

Ask the partner to repeat the plan and record follow-up needs.

Community Pharmacy and Management

Record and Observations

Topic	Counselling record
Medicine / adherence concern	_____
Key explanation	_____
Teach-back	_____
Referral / follow-up	_____

Result

Complete the record using your activity, then state the findings, the action required and the reason for that action.

Precautions

- Use the supplied case and medicine labels; do not issue a prescription.

Viva Questions and Answers**1. Why ask about actual use?**

Prescribed directions and the way a person uses treatment may differ.

2. Why use teach-back?

It checks practical understanding.

3. Can a student change the regimen?

No; treatment changes require the authorised clinician's plan.

Patient Counselling for Asthma

Experiment 11 - Practical Notes

Name: _____ Roll no.: _____ Date: _____

Aim

To counsel a fictional person with asthma.

Principle

Airway inflammation and variable narrowing make both correct inhaler use and an individual action plan important.

Key Points

- Check the actual reliever/controller plan; products and regimens differ.
- Demonstrate the exact inhaler and spacer when appropriate.
- Frequent symptoms or increasing reliever use need review; severe breathing difficulty needs urgent care.

Practice Scenario

Fictional role-play case: A fictional student uses an inhaler without coordination and has recurring night symptoms.

Activity Procedure

1. Assess

Ask about understanding, actual medicine instructions, adherence and concerns.

2. Explain

Explain the medicine purpose and practical self-care in plain language.

3. Demonstrate

Demonstrate a relevant device or reminder method when applicable.

4. Plan

Correct technique, confirm adherence and refer poor control to the care team.

5. Teach back

Ask the partner to repeat the plan and record follow-up needs.

Community Pharmacy and Management

Record and Observations

Topic	Counselling record
Medicine / adherence concern	_____
Key explanation	_____
Teach-back	_____
Referral / follow-up	_____

Result

Complete the record using your activity, then state the findings, the action required and the reason for that action.

Precautions

- Use the supplied case and medicine labels; do not issue a prescription.

Viva Questions and Answers**1. Why ask about actual use?**

Prescribed directions and the way a person uses treatment may differ.

2. Why use teach-back?

It checks practical understanding.

3. Can a student change the regimen?

No; treatment changes require the authorised clinician's plan.

Patient Counselling for Hyperlipidaemia

Experiment 12 - Practical Notes

Name: _____ Roll no.: _____ Date: _____

Aim

To counsel a fictional person with hyperlipidaemia.

Principle

Lipid management addresses cardiovascular risk, prescribed therapy and feasible lifestyle changes.

Key Points

- Explain the reason for long-term treatment even without symptoms.
- Review adherence, interactions and concerning muscle symptoms with the prescribed statin.
- Discuss food pattern, activity and tobacco avoidance without promising a cure.

Practice Scenario

Fictional role-play case: A fictional adult stops a statin because cholesterol improved and asks about a new antibiotic.

Activity Procedure

1. Assess

Ask about understanding, actual medicine instructions, adherence and concerns.

2. Explain

Explain the medicine purpose and practical self-care in plain language.

3. Demonstrate

Demonstrate a relevant device or reminder method when applicable.

4. Plan

Review the complete medicine list and seek the authorised plan for the interaction or treatment change.

5. Teach back

Ask the partner to repeat the plan and record follow-up needs.

Community Pharmacy and Management

Record and Observations

Topic	Counselling record
Medicine / adherence concern	_____
Key explanation	_____
Teach-back	_____
Referral / follow-up	_____

Result

Complete the record using your activity, then state the findings, the action required and the reason for that action.

Precautions

- Use the supplied case and medicine labels; do not issue a prescription.

Viva Questions and Answers**1. Why ask about actual use?**

Prescribed directions and the way a person uses treatment may differ.

2. Why use teach-back?

It checks practical understanding.

3. Can a student change the regimen?

No; treatment changes require the authorised clinician's plan.

Patient Counselling for Rheumatoid Arthritis

Experiment 13 - Practical Notes

Name: _____ Roll no.: _____ Date: _____

Aim

To counsel a fictional person with rheumatoid arthritis.

Principle

Disease-modifying treatment aims to control inflammation and limit joint damage; symptom relief alone has a different role.

Key Points

- Review the exact DMARD plan and required blood monitoring.
- For inflammatory-disease methotrexate, verify the once-weekly day and prescribed folic-acid plan.
- Report infection symptoms or concerning adverse effects to the care team.

Practice Scenario

Fictional role-play case: A fictional adult confuses the weekly methotrexate dose with daily medicines.

Activity Procedure

1. Assess

Ask about understanding, actual medicine instructions, adherence and concerns.

2. Explain

Explain the medicine purpose and practical self-care in plain language.

3. Demonstrate

Demonstrate a relevant device or reminder method when applicable.

4. Plan

Use teach-back of the weekly day and tablet count; any daily-use error needs urgent clinical advice.

5. Teach back

Ask the partner to repeat the plan and record follow-up needs.

Community Pharmacy and Management

Record and Observations

Topic	Counselling record
Medicine / adherence concern	_____
Key explanation	_____
Teach-back	_____
Referral / follow-up	_____

Result

Complete the record using your activity, then state the findings, the action required and the reason for that action.

Precautions

- Use the supplied case and medicine labels; do not issue a prescription.

Viva Questions and Answers**1. Why ask about actual use?**

Prescribed directions and the way a person uses treatment may differ.

2. Why use teach-back?

It checks practical understanding.

3. Can a student change the regimen?

No; treatment changes require the authorised clinician's plan.

Community Assessment of Headache

Experiment 14 - Practical Notes

Name: _____ Roll no.: _____ Date: _____

Aim

To assess a fictional headache presentation and decide an appropriate advice/referral pathway.

Principle

Minor-ailment assessment begins with history and red-flag screening; suitability for pharmacy management is determined by the authorised local protocol.

Key Points

- Ask about onset, pattern, severity, previous episodes and medicine use.
- Rest, hydration and avoiding identified triggers may help a familiar mild pattern.
- Refer for sudden severe headache, neurological deficit, fever/neck stiffness, head injury or new concerning pattern.

Practice Scenario

Fictional role play: the instructor provides age, duration and symptoms. The student asks for missing information and records a decision.

Activity Procedure

1. History

Use open questions, then clarify duration, severity and associated symptoms.

2. Screen risk

Check age, pregnancy, allergies, comorbidities and current medicines.

3. Decide

State whether referral is needed before considering any product.

4. Counsel

Explain appropriate self-care and any pharmacist-confirmed product directions.

5. Safety net

State the review interval and symptoms that require earlier help.

Community Pharmacy and Management

Record and Observations

History / symptoms	_____
Patient factors / medicines	_____
Red flags / decision	_____
Advice / review	_____

Result

Complete the record using your activity, then state the findings, the action required and the reason for that action.

Precautions

- Do not assume a diagnosis from the complaint title.
- Use the qualified pharmacist's current protocol for product selection.

Viva Questions and Answers**1. What comes before product selection?**

Assessment of the complaint, patient factors and referral signs.

2. Why consider current medicines?

They may cause symptoms or interact with a proposed product.

3. What is safety-net advice?

Clear instructions about review and when to seek earlier help.

Community Assessment of Nausea and Vomiting

Experiment 15 - Practical Notes

Name: _____ Roll no.: _____ Date: _____

Aim

To assess a fictional nausea and vomiting presentation and decide an appropriate advice/referral pathway.

Principle

Minor-ailment assessment begins with history and red-flag screening; suitability for pharmacy management is determined by the authorised local protocol.

Key Points

- Ask about duration, frequency, fluids retained, pregnancy possibility and medicines.
- Small frequent fluids and an appropriate rehydration plan may be useful when suitable.
- Refer for blood, severe abdominal pain, marked dehydration, altered consciousness or persistent inability to retain fluids.

Practice Scenario

Fictional role play: the instructor provides age, duration and symptoms. The student asks for missing information and records a decision.

Activity Procedure

1. History

Use open questions, then clarify duration, severity and associated symptoms.

2. Screen risk

Check age, pregnancy, allergies, comorbidities and current medicines.

3. Decide

State whether referral is needed before considering any product.

4. Counsel

Explain appropriate self-care and any pharmacist-confirmed product directions.

5. Safety net

State the review interval and symptoms that require earlier help.

Community Pharmacy and Management

Record and Observations

History / symptoms	_____
Patient factors / medicines	_____
Red flags / decision	_____
Advice / review	_____

Result

Complete the record using your activity, then state the findings, the action required and the reason for that action.

Precautions

- Do not assume a diagnosis from the complaint title.
- Use the qualified pharmacist's current protocol for product selection.

Viva Questions and Answers**1. What comes before product selection?**

Assessment of the complaint, patient factors and referral signs.

2. Why consider current medicines?

They may cause symptoms or interact with a proposed product.

3. What is safety-net advice?

Clear instructions about review and when to seek earlier help.

Community Assessment of Dyspepsia

Experiment 16 - Practical Notes

Name: _____ Roll no.: _____ Date: _____

Aim

To assess a fictional dyspepsia presentation and decide an appropriate advice/referral pathway.

Principle

Minor-ailment assessment begins with history and red-flag screening; suitability for pharmacy management is determined by the authorised local protocol.

Key Points

- Ask about meal relationship, reflux, pain, medicine use and symptom duration.
- Discuss feasible meal habits and avoiding individual triggers; OTC suitability follows the pharmacist's protocol.
- Refer for difficulty swallowing, bleeding, persistent vomiting, unexplained weight loss or chest-pain features.

Practice Scenario

Fictional role play: the instructor provides age, duration and symptoms. The student asks for missing information and records a decision.

Activity Procedure

1. History

Use open questions, then clarify duration, severity and associated symptoms.

2. Screen risk

Check age, pregnancy, allergies, comorbidities and current medicines.

3. Decide

State whether referral is needed before considering any product.

4. Counsel

Explain appropriate self-care and any pharmacist-confirmed product directions.

5. Safety net

State the review interval and symptoms that require earlier help.

Community Pharmacy and Management

Record and Observations

History / symptoms	_____
Patient factors / medicines	_____
Red flags / decision	_____
Advice / review	_____

Result

Complete the record using your activity, then state the findings, the action required and the reason for that action.

Precautions

- Do not assume a diagnosis from the complaint title.
- Use the qualified pharmacist's current protocol for product selection.

Viva Questions and Answers**1. What comes before product selection?**

Assessment of the complaint, patient factors and referral signs.

2. Why consider current medicines?

They may cause symptoms or interact with a proposed product.

3. What is safety-net advice?

Clear instructions about review and when to seek earlier help.

Community Assessment of Diarrhoea

Experiment 17 - Practical Notes

Name: _____ Roll no.: _____ Date: _____

Aim

To assess a fictional diarrhoea presentation and decide an appropriate advice/referral pathway.

Principle

Minor-ailment assessment begins with history and red-flag screening; suitability for pharmacy management is determined by the authorised local protocol.

Key Points

- Ask about frequency, duration, blood, fever, travel and hydration.
- Prioritise suitable oral rehydration using the product instructions and hygiene advice.
- Refer for blood in stool, severe pain, marked dehydration, vulnerable age or persistent/severe illness.

Practice Scenario

Fictional role play: the instructor provides age, duration and symptoms. The student asks for missing information and records a decision.

Activity Procedure

1. History

Use open questions, then clarify duration, severity and associated symptoms.

2. Screen risk

Check age, pregnancy, allergies, comorbidities and current medicines.

3. Decide

State whether referral is needed before considering any product.

4. Counsel

Explain appropriate self-care and any pharmacist-confirmed product directions.

5. Safety net

State the review interval and symptoms that require earlier help.

Community Pharmacy and Management

Record and Observations

History / symptoms	_____
Patient factors / medicines	_____
Red flags / decision	_____
Advice / review	_____

Result

Complete the record using your activity, then state the findings, the action required and the reason for that action.

Precautions

- Do not assume a diagnosis from the complaint title.
- Use the qualified pharmacist's current protocol for product selection.

Viva Questions and Answers**1. What comes before product selection?**

Assessment of the complaint, patient factors and referral signs.

2. Why consider current medicines?

They may cause symptoms or interact with a proposed product.

3. What is safety-net advice?

Clear instructions about review and when to seek earlier help.

Community Assessment of Constipation

Experiment 18 - Practical Notes

Name: _____ Roll no.: _____ Date: _____

Aim

To assess a fictional constipation presentation and decide an appropriate advice/referral pathway.

Principle

Minor-ailment assessment begins with history and red-flag screening; suitability for pharmacy management is determined by the authorised local protocol.

Key Points

- Ask about duration, usual bowel habit, medicines, diet and activity.
- Discuss adequate fluid where appropriate, dietary fibre and feasible activity.
- Refer for severe pain, vomiting, obstruction concern, blood, unexplained weight loss or a new persistent change.

Practice Scenario

Fictional role play: the instructor provides age, duration and symptoms. The student asks for missing information and records a decision.

Activity Procedure

1. History

Use open questions, then clarify duration, severity and associated symptoms.

2. Screen risk

Check age, pregnancy, allergies, comorbidities and current medicines.

3. Decide

State whether referral is needed before considering any product.

4. Counsel

Explain appropriate self-care and any pharmacist-confirmed product directions.

5. Safety net

State the review interval and symptoms that require earlier help.

Community Pharmacy and Management

Record and Observations

History / symptoms	_____
Patient factors / medicines	_____
Red flags / decision	_____
Advice / review	_____

Result

Complete the record using your activity, then state the findings, the action required and the reason for that action.

Precautions

- Do not assume a diagnosis from the complaint title.
- Use the qualified pharmacist's current protocol for product selection.

Viva Questions and Answers**1. What comes before product selection?**

Assessment of the complaint, patient factors and referral signs.

2. Why consider current medicines?

They may cause symptoms or interact with a proposed product.

3. What is safety-net advice?

Clear instructions about review and when to seek earlier help.

Community Assessment of Worm Infestations

Experiment 19 - Practical Notes

Name: _____ Roll no.: _____ Date: _____

Aim

To assess a fictional worm infestations presentation and decide an appropriate advice/referral pathway.

Principle

Minor-ailment assessment begins with history and red-flag screening; suitability for pharmacy management is determined by the authorised local protocol.

Key Points

- Ask about symptoms, household context, age and previous assessment.
- Discuss hand/nail hygiene, safe food and the need for an appropriate diagnosis and authorised treatment.
- Refer for severe symptoms, nutritional compromise, persistent illness or diagnostic uncertainty.

Practice Scenario

Fictional role play: the instructor provides age, duration and symptoms. The student asks for missing information and records a decision.

Activity Procedure

1. History

Use open questions, then clarify duration, severity and associated symptoms.

2. Screen risk

Check age, pregnancy, allergies, comorbidities and current medicines.

3. Decide

State whether referral is needed before considering any product.

4. Counsel

Explain appropriate self-care and any pharmacist-confirmed product directions.

5. Safety net

State the review interval and symptoms that require earlier help.

Community Pharmacy and Management

Record and Observations

History / symptoms	_____
Patient factors / medicines	_____
Red flags / decision	_____
Advice / review	_____

Result

Complete the record using your activity, then state the findings, the action required and the reason for that action.

Precautions

- Do not assume a diagnosis from the complaint title.
- Use the qualified pharmacist's current protocol for product selection.

Viva Questions and Answers**1. What comes before product selection?**

Assessment of the complaint, patient factors and referral signs.

2. Why consider current medicines?

They may cause symptoms or interact with a proposed product.

3. What is safety-net advice?

Clear instructions about review and when to seek earlier help.

Community Assessment of Pyrexia

Experiment 20 - Practical Notes

Name: _____ Roll no.: _____ Date: _____

Aim

To assess a fictional pyrexia presentation and decide an appropriate advice/referral pathway.

Principle

Minor-ailment assessment begins with history and red-flag screening; suitability for pharmacy management is determined by the authorised local protocol.

Key Points

- Ask about temperature method, duration, symptoms, exposures and medicines.
- Encourage suitable fluids and monitoring; medicine suitability and dose follow the authorised protocol.
- Refer for very young infant, severe lethargy, breathing difficulty, stiff neck, concerning rash or dehydration.

Practice Scenario

Fictional role play: the instructor provides age, duration and symptoms. The student asks for missing information and records a decision.

Activity Procedure

1. History

Use open questions, then clarify duration, severity and associated symptoms.

2. Screen risk

Check age, pregnancy, allergies, comorbidities and current medicines.

3. Decide

State whether referral is needed before considering any product.

4. Counsel

Explain appropriate self-care and any pharmacist-confirmed product directions.

5. Safety net

State the review interval and symptoms that require earlier help.

Community Pharmacy and Management

Record and Observations

History / symptoms	_____
Patient factors / medicines	_____
Red flags / decision	_____
Advice / review	_____

Result

Complete the record using your activity, then state the findings, the action required and the reason for that action.

Precautions

- Do not assume a diagnosis from the complaint title.
- Use the qualified pharmacist's current protocol for product selection.

Viva Questions and Answers**1. What comes before product selection?**

Assessment of the complaint, patient factors and referral signs.

2. Why consider current medicines?

They may cause symptoms or interact with a proposed product.

3. What is safety-net advice?

Clear instructions about review and when to seek earlier help.

Community Assessment of Upper Respiratory Tract Symptoms

Experiment 21 - Practical Notes

Name: _____ Roll no.: _____ Date: _____

Aim

To assess a fictional upper respiratory tract symptoms presentation and decide an appropriate advice/referral pathway.

Principle

Minor-ailment assessment begins with history and red-flag screening; suitability for pharmacy management is determined by the authorised local protocol.

Key Points

- Ask about duration, fever, sore throat, cough, breathing and risk factors.
- Discuss fluids and suitable symptom measures; antibiotics are not automatically needed for a viral pattern.
- Refer for breathing difficulty, chest pain, severe swallowing difficulty, persistent severe fever or deterioration.

Practice Scenario

Fictional role play: the instructor provides age, duration and symptoms. The student asks for missing information and records a decision.

Activity Procedure

1. History

Use open questions, then clarify duration, severity and associated symptoms.

2. Screen risk

Check age, pregnancy, allergies, comorbidities and current medicines.

3. Decide

State whether referral is needed before considering any product.

4. Counsel

Explain appropriate self-care and any pharmacist-confirmed product directions.

5. Safety net

State the review interval and symptoms that require earlier help.

Community Pharmacy and Management

Record and Observations

History / symptoms	_____
Patient factors / medicines	_____
Red flags / decision	_____
Advice / review	_____

Result

Complete the record using your activity, then state the findings, the action required and the reason for that action.

Precautions

- Do not assume a diagnosis from the complaint title.
- Use the qualified pharmacist's current protocol for product selection.

Viva Questions and Answers**1. What comes before product selection?**

Assessment of the complaint, patient factors and referral signs.

2. Why consider current medicines?

They may cause symptoms or interact with a proposed product.

3. What is safety-net advice?

Clear instructions about review and when to seek earlier help.

Community Assessment of Skin Infections

Experiment 22 - Practical Notes

Name: _____ Roll no.: _____ Date: _____

Aim

To assess a fictional skin infections presentation and decide an appropriate advice/referral pathway.

Principle

Minor-ailment assessment begins with history and red-flag screening; suitability for pharmacy management is determined by the authorised local protocol.

Key Points

- Ask about location, spread, pain, fever, wounds and medical risks.
- Protect the area, use hygiene and avoid sharing personal items; treatment needs appropriate assessment.
- Refer for rapid spread, marked pain, fever, eye-area involvement, immunocompromise or extensive disease.

Practice Scenario

Fictional role play: the instructor provides age, duration and symptoms. The student asks for missing information and records a decision.

Activity Procedure

1. History

Use open questions, then clarify duration, severity and associated symptoms.

2. Screen risk

Check age, pregnancy, allergies, comorbidities and current medicines.

3. Decide

State whether referral is needed before considering any product.

4. Counsel

Explain appropriate self-care and any pharmacist-confirmed product directions.

5. Safety net

State the review interval and symptoms that require earlier help.

Community Pharmacy and Management

Record and Observations

History / symptoms	_____
Patient factors / medicines	_____
Red flags / decision	_____
Advice / review	_____

Result

Complete the record using your activity, then state the findings, the action required and the reason for that action.

Precautions

- Do not assume a diagnosis from the complaint title.
- Use the qualified pharmacist's current protocol for product selection.

Viva Questions and Answers**1. What comes before product selection?**

Assessment of the complaint, patient factors and referral signs.

2. Why consider current medicines?

They may cause symptoms or interact with a proposed product.

3. What is safety-net advice?

Clear instructions about review and when to seek earlier help.

Community Assessment of Oral and Dental Symptoms

Experiment 23 - Practical Notes

Name: _____ Roll no.: _____ Date: _____

Aim

To assess a fictional oral and dental symptoms presentation and decide an appropriate advice/referral pathway.

Principle

Minor-ailment assessment begins with history and red-flag screening; suitability for pharmacy management is determined by the authorised local protocol.

Key Points

- Ask about pain location, swelling, fever, duration and swallowing.
- Use basic oral-hygiene advice and arrange dental assessment of the cause.
- Refer for facial swelling, fever, difficulty swallowing/breathing or rapidly spreading symptoms.

Practice Scenario

Fictional role play: the instructor provides age, duration and symptoms. The student asks for missing information and records a decision.

Activity Procedure

1. History

Use open questions, then clarify duration, severity and associated symptoms.

2. Screen risk

Check age, pregnancy, allergies, comorbidities and current medicines.

3. Decide

State whether referral is needed before considering any product.

4. Counsel

Explain appropriate self-care and any pharmacist-confirmed product directions.

5. Safety net

State the review interval and symptoms that require earlier help.

Community Pharmacy and Management

Record and Observations

History / symptoms	_____
Patient factors / medicines	_____
Red flags / decision	_____
Advice / review	_____

Result

Complete the record using your activity, then state the findings, the action required and the reason for that action.

Precautions

- Do not assume a diagnosis from the complaint title.
- Use the qualified pharmacist's current protocol for product selection.

Viva Questions and Answers**1. What comes before product selection?**

Assessment of the complaint, patient factors and referral signs.

2. Why consider current medicines?

They may cause symptoms or interact with a proposed product.

3. What is safety-net advice?

Clear instructions about review and when to seek earlier help.

Demonstration of Oral Liquid Measurement

Experiment 24 - Practical Notes

Name: _____ Roll no.: _____ Date: _____

Aim

To demonstrate the correct use of a oral liquid measurement with a dummy product or trainer.

Principle

Calibrated oral syringes or suitable measures improve dose-volume accuracy.

Key Points

- Check concentration and the authorised volume.
- Shake a suspension when its label requires it.
- Never substitute a kitchen spoon.

Activity Procedure

1. Check

Read the medicine concentration and prescribed mL; verify any calculation.

2. Measure

Use a suitable oral syringe and align the correct scale mark, removing large bubbles.

3. Demonstrate

Give training liquid into the model or suitable demonstration cup; explain slow administration for a child as instructed.

4. After use

Clean the measuring device according to its instructions and confirm the volume by teach-back.

Community Pharmacy and Management

Record and Observations

Product / trainer model	_____
Preparation check	_____
Observed technique / correction	_____
Teach-back / storage	_____

Result

Complete the record using your activity, then state the findings, the action required and the reason for that action.

Precautions

- Use dummy products or a designated trainer.
- Follow the specific manufacturer instructions and stop if the demonstration causes discomfort.

Viva Questions and Answers**1. Why identify the exact product?**

Preparation and use can differ between devices and formulations.

2. Why use a trainer?

It allows technique assessment without medicine administration.

3. What confirms understanding?

The learner correctly demonstrates and explains the steps.

Demonstration of Eye Drops

Experiment 25 - Practical Notes

Name: _____ Roll no.: _____ Date: _____

Aim

To demonstrate the correct use of a eye drops with a dummy product or trainer.

Principle

Correct drop application delivers medicine while limiting contamination of the tip.

Key Points

- Check the eye, product and directions.
- Avoid contact between dropper tip and the eye, fingers or other surfaces.
- Different drops and contact-lens use require product-specific instructions.

Activity Procedure

1. Prepare

Use hand hygiene and a dummy bottle; check the label.

2. Position

Demonstrate gently drawing down the lower eyelid on a model to form a pocket.

3. Apply

Show placement of the authorised drop into the pocket without touching the tip.

4. Finish

Gently close the eye and demonstrate tear-duct pressure when instructed; follow the product's spacing and storage advice.

Community Pharmacy and Management

Record and Observations

Product / trainer model	_____
Preparation check	_____
Observed technique / correction	_____
Teach-back / storage	_____

Result

Complete the record using your activity, then state the findings, the action required and the reason for that action.

Precautions

- Use dummy products or a designated trainer.
- Follow the specific manufacturer instructions and stop if the demonstration causes discomfort.

Viva Questions and Answers**1. Why identify the exact product?**

Preparation and use can differ between devices and formulations.

2. Why use a trainer?

It allows technique assessment without medicine administration.

3. What confirms understanding?

The learner correctly demonstrates and explains the steps.

Demonstration of Metered-Dose Inhaler and Spacer

Experiment 26 - Practical Notes

Name: _____ Roll no.: _____ Date: _____

Aim

To demonstrate the correct use of a metered-dose inhaler and spacer with a dummy product or trainer.

Principle

A spacer can reduce coordination difficulties with an appropriate metered-dose inhaler.

Key Points

- Identify the exact inhaler; priming and shaking instructions differ.
- A metered-dose inhaler is different from a dry-powder inhaler.
- A corticosteroid-containing product may require mouth rinsing after use.

Activity Procedure

1. Prepare

Check the dummy inhaler, expiry/dose counter and device instructions; attach a compatible spacer.

2. Exhale

Breathe out comfortably away from the device.

3. Inhale

Actuate one puff into the spacer and use the manufacturer-approved slow inhalation or tidal-breathing method.

4. Repeat and clean

Follow prescribed spacing for further puffs; demonstrate product-specific cleaning and after-use advice.

Community Pharmacy and Management

Record and Observations

Product / trainer model	_____
Preparation check	_____
Observed technique / correction	_____
Teach-back / storage	_____

Result

Complete the record using your activity, then state the findings, the action required and the reason for that action.

Precautions

- Use dummy products or a designated trainer.
- Follow the specific manufacturer instructions and stop if the demonstration causes discomfort.

Viva Questions and Answers**1. Why identify the exact product?**

Preparation and use can differ between devices and formulations.

2. Why use a trainer?

It allows technique assessment without medicine administration.

3. What confirms understanding?

The learner correctly demonstrates and explains the steps.

Demonstration of Nasal Drops

Experiment 27 - Practical Notes

Name: _____ Roll no.: _____ Date: _____

Aim

To demonstrate the correct use of a nasal drops with a dummy product or trainer.

Principle

Nasal delivery uses the product-specified position and dose while avoiding contamination.

Key Points

- Distinguish drops from a metered spray.
- Prolonged use of some decongestants can worsen congestion.
- Check age restrictions and the labelled use period.

Activity Procedure

1. Prepare

Read the authorised directions and gently clear the nose when appropriate.

2. Position

Use the product's advised head position on a model.

3. Apply

Demonstrate the specified drops without touching the tip to the nostril.

4. Finish

Maintain the advised position, recap and follow cleaning/storage instructions.

Community Pharmacy and Management

Record and Observations

Product / trainer model	_____
Preparation check	_____
Observed technique / correction	_____
Teach-back / storage	_____

Result

Complete the record using your activity, then state the findings, the action required and the reason for that action.

Precautions

- Use dummy products or a designated trainer.
- Follow the specific manufacturer instructions and stop if the demonstration causes discomfort.

Viva Questions and Answers**1. Why identify the exact product?**

Preparation and use can differ between devices and formulations.

2. Why use a trainer?

It allows technique assessment without medicine administration.

3. What confirms understanding?

The learner correctly demonstrates and explains the steps.

Demonstration of Insulin Pen Trainer

Experiment 28 - Practical Notes

Name: _____ Roll no.: _____ Date: _____

Aim

To demonstrate the correct use of a insulin pen trainer with a dummy product or trainer.

Principle

A pen delivers the selected insulin units using a product-specific preparation and injection sequence.

Key Points

- Verify insulin name, strength and prescribed units; different pens are not automatically interchangeable.
- Use a trainer and dummy cartridge; no insulin is administered in class.
- Never share pens or reuse/share needles.

Activity Procedure

1. Check

Identify the dummy pen and its instructions; demonstrate cartridge and appearance checks.

2. Prepare

Attach a new trainer needle and demonstrate the product-specific flow check.

3. Select and simulate

Dial the authorised training dose, use the injection pad and follow the instructed button/hold sequence.

4. Finish

Demonstrate safe needle removal/disposal, rotation planning and product-specific storage.

Community Pharmacy and Management

Record and Observations

Product / trainer model	_____
Preparation check	_____
Observed technique / correction	_____
Teach-back / storage	_____

Result

Complete the record using your activity, then state the findings, the action required and the reason for that action.

Precautions

- Use dummy products or a designated trainer.
- Follow the specific manufacturer instructions and stop if the demonstration causes discomfort.

Viva Questions and Answers**1. Why identify the exact product?**

Preparation and use can differ between devices and formulations.

2. Why use a trainer?

It allows technique assessment without medicine administration.

3. What confirms understanding?

The learner correctly demonstrates and explains the steps.

Demonstration of Nebulizer

Experiment 29 - Practical Notes

Name: _____ Roll no.: _____ Date: _____

Aim

To demonstrate the correct use of a nebulizer with a dummy product or trainer.

Principle

A nebulizer delivers an aerosol from a prescribed compatible liquid using the specified equipment.

Key Points

- Check prescribed medicine, concentration and volume.
- Use only compatible product and equipment instructions.
- Cleaning reduces contamination; a nebulizer is not a general substitute for every inhaler.

Activity Procedure

1. Assemble

Identify cup, tubing, compressor or other source and mouthpiece/mask.

2. Load trainer

Place demonstration liquid in the cup as the device instructions permit.

3. Demonstrate

Show upright positioning, appropriate breathing and the device-defined end of the treatment.

4. Clean

Follow manufacturer disassembly, cleaning, drying and storage instructions.

Community Pharmacy and Management

Record and Observations

Product / trainer model	_____
Preparation check	_____
Observed technique / correction	_____
Teach-back / storage	_____

Result

Complete the record using your activity, then state the findings, the action required and the reason for that action.

Precautions

- Use dummy products or a designated trainer.
- Follow the specific manufacturer instructions and stop if the demonstration causes discomfort.

Viva Questions and Answers**1. Why identify the exact product?**

Preparation and use can differ between devices and formulations.

2. Why use a trainer?

It allows technique assessment without medicine administration.

3. What confirms understanding?

The learner correctly demonstrates and explains the steps.

Demonstration of Handling Different Tablet Forms

Experiment 30 - Practical Notes

Name: _____ Roll no.: _____ Date: _____

Aim

To demonstrate the correct use of a handling different tablet forms with a dummy product or trainer.

Principle

Release design determines whether a tablet can be divided, dispersed, chewed or crushed.

Key Points

- Compare conventional, dispersible, effervescent, chewable, enteric-coated and modified-release forms.
- A score line does not automatically establish suitability for every division purpose.
- Check the exact product before altering a tablet.

Activity Procedure

1. Identify

Read dummy product labels and assign the dosage-form category.

2. Match use

Explain swallowing, chewing or dispersing only where the product directs.

3. Check alteration

Review whether crushing or splitting is permitted for the exact product.

4. Teach back

Ask a partner to explain use and identify an unsafe alteration request.

Community Pharmacy and Management

Record and Observations

Product / trainer model	_____
Preparation check	_____
Observed technique / correction	_____
Teach-back / storage	_____

Result

Complete the record using your activity, then state the findings, the action required and the reason for that action.

Precautions

- Use dummy products or a designated trainer.
- Follow the specific manufacturer instructions and stop if the demonstration causes discomfort.

Viva Questions and Answers**1. Why identify the exact product?**

Preparation and use can differ between devices and formulations.

2. Why use a trainer?

It allows technique assessment without medicine administration.

3. What confirms understanding?

The learner correctly demonstrates and explains the steps.

Demonstration of Transdermal Patch

Experiment 31 - Practical Notes

Name: _____ Roll no.: _____ Date: _____

Aim

To demonstrate the correct use of a transdermal patch with a dummy product or trainer.

Principle

A patch delivers a product-specific dose through skin over its prescribed application period.

Key Points

- Check the product, replacement interval and whether cutting is permitted; usually do not cut unless expressly authorised.
- Remove the old patch before applying the next according to the plan.
- Heat can alter delivery with some products; follow the label.

Activity Procedure

1. Prepare

Read the dummy patch instructions and select the permitted clean, dry, intact skin site.

2. Apply

Remove the liner without touching the drug surface and press as instructed.

3. Record

Document application time/site and the next replacement.

4. Dispose

Show product-specific safe disposal and hand hygiene; rotate sites as instructed.

Community Pharmacy and Management

Record and Observations

Product / trainer model	_____
Preparation check	_____
Observed technique / correction	_____
Teach-back / storage	_____

Result

Complete the record using your activity, then state the findings, the action required and the reason for that action.

Precautions

- Use dummy products or a designated trainer.
- Follow the specific manufacturer instructions and stop if the demonstration causes discomfort.

Viva Questions and Answers**1. Why identify the exact product?**

Preparation and use can differ between devices and formulations.

2. Why use a trainer?

It allows technique assessment without medicine administration.

3. What confirms understanding?

The learner correctly demonstrates and explains the steps.

Demonstration of Enema Trainer

Experiment 32 - Practical Notes

Name: _____ Roll no.: _____ Date: _____

Aim

To demonstrate the correct use of a enema trainer with a dummy product or trainer.

Principle

Rectal products have product-specific indications, technique and precautions.

Key Points

- Confirm the ordered product and patient suitability.
- Use a mannequin; rectal administration is not practised on classmates.
- Pain, bleeding or obstruction concerns require assessment.

Activity Procedure

1. Prepare

Read the leaflet and demonstrate privacy, positioning and hand hygiene on the trainer.

2. Set up

Check the prescribed quantity and product-specific nozzle preparation.

3. Simulate

Use the mannequin following the product instructions without force.

4. Finish

Explain the product's retention/evacuation advice, disposal and symptoms requiring help.

Community Pharmacy and Management

Record and Observations

Product / trainer model	_____
Preparation check	_____
Observed technique / correction	_____
Teach-back / storage	_____

Result

Complete the record using your activity, then state the findings, the action required and the reason for that action.

Precautions

- Use dummy products or a designated trainer.
- Follow the specific manufacturer instructions and stop if the demonstration causes discomfort.

Viva Questions and Answers**1. Why identify the exact product?**

Preparation and use can differ between devices and formulations.

2. Why use a trainer?

It allows technique assessment without medicine administration.

3. What confirms understanding?

The learner correctly demonstrates and explains the steps.

Demonstration of Suppository Trainer

Experiment 33 - Practical Notes

Name: _____ Roll no.: _____ Date: _____

Aim

To demonstrate the correct use of a suppository trainer with a dummy product or trainer.

Principle

A suppository uses the product-specific rectal route and dissolving or melting behaviour.

Key Points

- Confirm medicine, route and dose; rectal and vaginal products are not interchangeable.
- Use a dummy product and mannequin.
- Do not change product form or dose without confirmation.

Activity Procedure

1. Prepare

Check the leaflet and demonstrate hygiene and suitable positioning.

2. Unwrap

Remove packaging and use lubricant only as the product allows.

3. Simulate

Demonstrate gentle placement on the mannequin according to the approved teaching method.

4. Finish

Explain prescribed after-use advice, storage and when to seek help.

Community Pharmacy and Management

Record and Observations

Product / trainer model	_____
Preparation check	_____
Observed technique / correction	_____
Teach-back / storage	_____

Result

Complete the record using your activity, then state the findings, the action required and the reason for that action.

Precautions

- Use dummy products or a designated trainer.
- Follow the specific manufacturer instructions and stop if the demonstration causes discomfort.

Viva Questions and Answers**1. Why identify the exact product?**

Preparation and use can differ between devices and formulations.

2. Why use a trainer?

It allows technique assessment without medicine administration.

3. What confirms understanding?

The learner correctly demonstrates and explains the steps.

Community Pharmacy Software and Digital Health

Experiment 34 - Practical Notes

Name: _____ Roll no.: _____ Date: _____

Aim

To complete a fictional dispensing and inventory workflow in training software.

Principle

Digital pharmacy records link prescription checks, product selection, stock traceability, labels, counselling and secure documentation.

Key Points

- Use dummy names and records only.
- Track batch, expiry, purchase/issue and stock reconciliation.
- Review interaction alerts critically rather than accepting or dismissing them automatically.
- Use approved access controls and protect health information.

Practice Scenario

Illustrative stock: opening 100 units + receipt 50 - issue 20 = 130 units before documented adjustments.

Activity Procedure

1. Create training record

Enter the fictional prescription and required patient/allergy fields.

2. Review

Check medicine, directions, stock, expiry and alerts.

3. Dispense virtually

Generate a label and simulated issue transaction after the instructor confirms the order.

4. Reconcile

Compare opening stock, receipts, issues and closing stock.

5. Review privacy

Explain access, backup and a secure digital-health referral workflow.

Community Pharmacy and Management

Record and Observations

Prescription / allergy review	_____
Product / batch / expiry	_____
Alert / action	_____
Label / counselling record	_____
Stock reconciliation	_____

Result

Complete the record using your activity, then state the findings, the action required and the reason for that action.

Viva Questions and Answers**1. How is closing stock calculated?**

Opening stock + receipts - issues, with documented adjustments.

2. Does an alert replace judgement?

No; it needs assessment in the patient and medicine context.

3. Why use dummy data?

It protects privacy during the training exercise.

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