

## KERALA UNIVERSITY OF HEALTH SCIENCES THRISSUR – 680 596, KERALA, INDIA

## OFFICIAL TRANSCRIPT

Name of the Student:			
Gender:			
Date of Birth:			
Nationality:			
Parent / Guardian (as per University records):			
Permanent Address:			
KUHS Registration Number:			
Name of the Course:	Master of Pharmacy -Pharmacy Practice		
Medium of Instruction:	English		
Degree awarded by: Kerala University of Health Science	es, Thrissur, Kerala, India		
Degree awarded by: Kerala University of Health Science  Name of the college of study:	es, Thrissur, Kerala, India		
	es, Thrissur, Kerala, India		
Name of the college of study:	es, Thrissur, Kerala, India Two years		
Name of the college of study:  Address of the college of study:			
Name of the college of study:  Address of the college of study:  Duration of the course:			
Name of the college of study:  Address of the college of study:  Duration of the course:  Date of admission:			

## **Course Curriculum**

I Semes	ter M Pharm			
SI. No.	Subjects	Credit points	Numbers of hours prescribed	Numbers of hours attended
1	Clinical Pharmacy Practice	4	60	
2	Pharmacotherapeutics-I	4	60	
3	Hospital &Community Pharmacy	4	60	
4	Clinical Research	4	60	
5	Pharmacy Practice Practical-I	6	180	
6	Seminar/Assignment	4	105	
	Total	26	525	
II Seme	ster M Pharm		1	1
1	Principles of Quality use of Medicines	4	60	
2	Pharmacotherapeutics II	4	60	
3	Clinical Pharmacokinetics and therapeutic	4	60	
4	Drug Monitoring Pharmacoepidemiology & Pharmacoeconomics	4	60	
5	Pharmacocphocimology & Flarmacocconomics  Pharmacy Practice Practical II	6	180	
6	Seminar/Assignment	4	105	
	Total	26	525	
III Seme	ster M Pharm			
1	Research Methodology and Biostatistics	4	60	
2	Journal Club	1	15	
3	Discussion/Presentation (Proposal presentation)	2	30	
4	Research Work	14	420	
	Total	21	525	
IV Seme	ster M Pharm		1	1
1	Journal Club	1	15	
2	Pre-submission Discussion/ Presentation	3	45	
3	Research Work and Colloquium	16	465	
	Total	20	525	

## **Consolidated Marks Statement**

I Sen	I Semester M Pharm							
SI. No.	Course Code	Subjects	Max. Marks	Marks Obtained	Grade	Grade point	Credit	Month and Year of Exam
1	MPP 101T	Clinical Pharmacy Practice	100					
2	MPP 102T	Pharmacotherapeutics-I	100					
3	MPP 103T	Hospital &Community Pharmacy	100					
4	MPP 104T	Clinical Research	100					
5	MPP 101P	Pharmacy Practice Practical-I	150					
6	_	Seminar/Assignment	100					

	TOTAL		650					
	SGPA							
II Se	mester M Ph	arm						
1	MPP 201T	Principles of Quality use of Medicines	100					
2	MPP 202T	Pharmacotherapeutics II	100					
3	MPP 203T	Clinical Pharmacokinetics and therapeutic Drug Monitoring	100					
4	MPP 204T	Pharmacoepidemiology & Pharmacoeconomics	100					
5	MPP 201P	Pharmacy Practice Practical II	150					
6	_	Seminar/Assignment	100					
	TOTAL		650					
	SGPA							
III S	emester M Ph	narm						
1	MRM 301T	Research Methodology and Biostatistics	100					
2	_	Journal Club	25					
3	_	Discussion/Presentation (Proposal presentation)	25					
4	_	Research Work	350					
	TOTAL		500					
	SGPA		1		•			
IV S	emester M Pl	narm						
1	_	Journal Club	25					
2	_	Pre-submission Discussion/ Presentation	75					
3	_	Research Work and Colloquium	400					
	TOTAL		500					
	SGPA	SGPA						
	Max 7 Min 2 Credit points awarded to co-curricular activities  Awarded:							
	Topic for Dissertation – (Type in Bold)							
	Grand total credit points awarded for Semesters I, II, III and IV		Max	100	Awarde d			
	Grand total	Grand total marks awarded for Semesters I, II, III and IV		Max	2300	Awarde d		
	CGPA		Class		<u> </u>			

Total % of Marks Secured:

Classification:

First Class with Distinction = CGPA of 7.5 and above

First Class = CGPA of 6.00 to 7.49 Second Class = CGPA of 5.00 to 5.99

Minimum for pass: 50% each in theory and	d practical separately
University Rank (if any):	
Verified & Found Correct	
	CERTIFICATE
This is to certify and c	confirm that Mr./Ms.
with KUHS registration No	was a bonafide student of Master of Pharmacy -
Pharmacy Practice course from	(Month and Year) to (Month and Year).
This a regular course of Two years condu	acted at
Controller of Examinations	Authority of the University
Name & Signature	Name & Signature
Place: Thrissur Date:	