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

Date: 31/12/2025

DRUG & THERAPEUTIC COMMITTEE & PHARMACOVIGILANCE COMMITTEE

Formulation of the Committee:

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

Members:

Name	Position	Designation
Dr. Utkarsh Sharma	Chairperson	Principal & Professor , Paediatrics
Dr. Suman Bala	Member Secretary	Professor, Pharmacology
Dr. Gaurav Raturi	Member	Medical Superintendent
Dr. Vineeta Gupta	Member	Professor & HOD, Gynae & Obs
Dr. (Col) Salil Garg	Member	Professor, Cardiology
Dr. J.P. Sharma	Member	Professor, Surgery
Dr. Narayanjeet Singh	Member	Professor & HOD, Medicine
Dr. Navneet Badoni	Member	Professor, Orthopaedics
Dr. Amit Soni	Member	Professor, Medical Gastroenterology
Dr. Iva Chandola	Member	Professor & Head, Microbiology
Dr. Ashwani Sharma	Member	NABH Coordinator
Dr. Jyoti Gusain	Member	NABH Quality Cell
Dr. Divya Juyal	Member	Dean, Pharmaceutical Sciences
Mr. Anish M S	Member	Nursing Superintendent / ANS
Mr. Ashish Maletha	Member	Incharge, Central Pharmacy
Mr. Bipin Bisht	Member	Supervisor, Central Pharmacy
Mr. Bipin Prakash Tamta	Member	Pharmacovigilance Associate

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

Frequency: Once in three months as and when required.

Terms of reference:

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

i. Safe use of medicines including incident management & follow up
ii. Competency assessment & training in prescribing, supply & administration of medicines.
iii. To approve Non-Formulary drugs on named patient basis or exceptional circumstances basis & to promote formulary applications for drugs that appear to have a gradual adoption.
iv. To co-ordinate the activities of the committee & subgroups working to the drugs & therapeutic committee & receive regular reports from these groups.

Responsibility:

Chairperson

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

Anaesthetist, Surgeon & Physician

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

Nursing Superintendent/ANS

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

Pharmacist

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

Quality Manager

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

Duration of Functioning

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

Number of Meetings in a year:

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

Records:

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

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

Prof. (Dr) Utkarsh Sharma
Principal

PRINCIPAL
SGRR Institute of Medical & Health Sciences
Patel Nagar, Dehradun

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