

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

Date: 11/03/2025

## 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	Chief Medical Superintendent
Dr. Shalu Bawa	Member Secretary	Professor, Pharmacology
Dr. Gaurav Raturi	Member	Medical Superintendent
Dr. Vineeta Gupta	Member	Professor & HOD, Gynae & Obs
Dr. Salil Garg	Member	Professor & HOD, Cardiology
Dr. Suman Bala	Member	Professor, Pharmacology
Dr. Navneet Badoni	Member	Professor, Orthopaedics
Dr. Amit Soni	Member	Professor, Medical Gastroenterology
Dr. Iva Chandola	Member	Professor, Microbiology
Dr. Kavita Singh	Member	Associate Professor, Physiology
Dr. Yogesh Joshi	Member	Associate Professor, School of Pharmaceutical Sciences
Dr. Divya Juyal	Member	Dean, Pharmaceutical Sciences
Mr. Ashish Maletha	Member	Incharge, Central Pharmacy
Mr. Bipin Bisht	Member	Supervisor, Central Pharmacy
Mr. Anish M S	Member	Nursing Superintendent / ANS
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



## **Shri Guru Ram Rai Institute of Medical & Health Sciences, Dehradun & Shri Mahant Indires Hospital**

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- 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**

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- 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 2 Years.
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) Ashok Nayak  
Principal

Principal  
SGRR Institute of Medical & Health Sciences  
Dehradun, Dehradun (Uttarakhand)