

Dr. K.V. Subba Reddy Institute of Pharmac;

(Approved by AICTE, P.C.I New Delhi & Affiliated to JNTUA Anantapuramu,

MoU with Government General Hospital & KMC, Kurnool) Opp. Dupadu Railway Station, Lakshmipuram (Po), N.H - 44, KURNOOL - 518 218, A.P. INDIA Website: www.drkvsrip.in e-mail: principalkvsrip@gmail.com

2.3 Student centric methods such as experiential learning, participative learning and problem solving methodologies are used for enhancing learning experiences and teachers used ICT Enabled tools including online resources for effective teaching and learning process (AY:2019-20)

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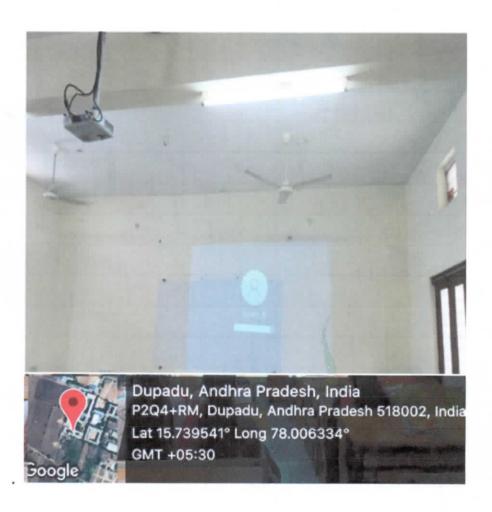
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### LCD PROJECTORS

Spacious, well –lit and well –ventilated classrooms and seminar hall [with ICT] with comfortable seating arrangement are available for smooth conduct of UG and PG theory sessions. Besides the conventional teaching aids, classrooms are also equipped with state-of-the-art audiovisual technology viz. digital smart board, LCD Projectors, thus stepping up the teaching-learning experience to next higher level. Well – thought positioning of aisle in the classroom ensure proper interaction between teacher and students





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The list of various ICT enabled pedagolocial initiatives used by the faculty members for improving teaching and learing experience are as follows:

Chalk and board: To convey basics, critical information, backgrounds, theories .



Fig1.1:Miss.Dr.S Kusuma kumari Assistant professor of department of Pharmacy Practice explaining basic Pharmacotherapy for Pharm D IV year students of pharmacy using chalk and board



Fig1.1:Mrs.B.Aruna Assistant professor of department of Pharmacology explaining concept of Anti Convulsants for B.Pharmacy II year students of pharmacy using chalk and board.



Fig: 1.2 Mr.Dr. K. Chandra Sekhar Assistant professor of department of Pharmaceutical Chemistry explains the concepts of Medicinal Chemistry using LCD projector.



Fig1:3 Ms. E.Honey madam explaining about rotes of drug administration's to Pharm.D III Year students



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### ONLINE TEACHING:

Especially during Covid-19 pandemic situation made a swift transition from classroom to online teaching by using platforms like Google meet, Google classroom, ZOOM, CISCO, WEB-EX, and You tube.

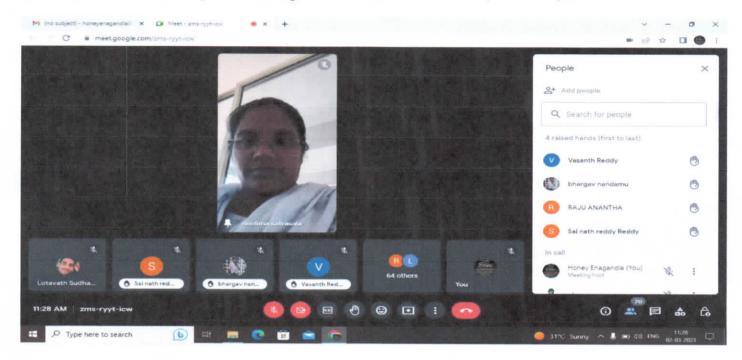
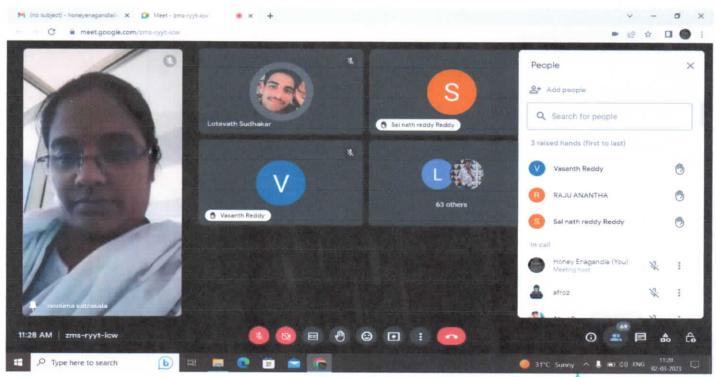
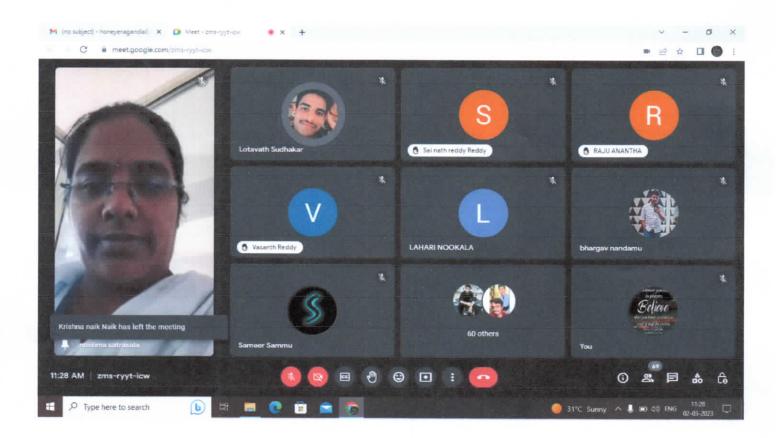


Fig 1.1 Dr.K.Vennela madam discussing about the therapy of Epilepsy to Pharm.D III Year students.





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### **BLENDED TEACHING:**

Teaching aid techniques such as video lectures and PowerPoint presentations are being used for the implementation of active learning strategies such as collaborative and individual learning activities.



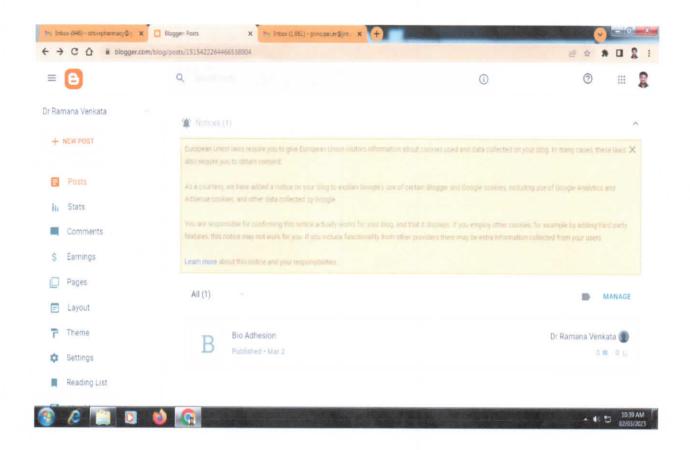
Ms. E. Honey madam explaining about Epithelial Tissue &its types to Pharm.D III Year students



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**Edu-Blogs**: Faculty blogs and channels are used as instructional potential of online resources to students.





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### INDUSTRIAL TRAINING:22/06/2019-06/07/2019

Industrial training, where a student undertakes a period of training at an organization usually during a semester break, acts as an important part in preparing the student for a professional career. With the actively involved preparation, the student learns about the industrial demands, skill set and work ethics.

Every year students experience industrial training as per the syllabus prescribed in JNTUA and gain knowledge of various departments like Formulation and research department (FR&D) i.e., Manufacturing of Tablets, capsules and injection preparations etc., Quality Assurance, Quality control, Clinical research, Drug regulatory affairs, Hospital Pharmacy etc. as such III year B.Pharmacy students have visited, SANZYME LTD.HEALTHCARE BUSINESS,Telangana-502307, Hyderabad, Telangana-5000 72, India and received hands on experience about industry affairs.





Sanzyme Ltd. Healthcare Business

Ref: SAN / PROJ / 2019/KVSR/Hiq-23

Date: 6th JULY, 2019

### TO WHOM SO EVER IT MAY CONCERN

This is to certify that Mr. SHAIK SHAHID is a bonafide student of Dr.K.V.SUBBA REDDY INSTITUTE OF PHARMACY, KURNOOL. He has undergone industrial training in our organization from 22.06.2019 to 06.07.2019 as part of partial fulfillment of his B. Pharmacy course bearing Hall Ticket No 16ER1R0033.

During the training period he had interacted with Quality control, Quality Assurance & Production Departments In charges and acquired basic knowledge in these areas.

During this aforesaid period, we found his hardworking, sincere and learning attitude.

We wish him A Bright Future.

Form SANZYME (P) LTD, E (P) 1 4

HEAD - FACTORY (INU)

cc to: HR Department cc: to Project trainee file.

Unit 2 : Formulation Unit, 7-4-92, Survey No: 219, Gaganpahad, Hyderabad. Phone : 040-32909537, 38 & Fax No : 040-24360459

Regd. Office: Plot No.13. Sagar Society, Road No.2, Banjara Hills, Hyderabad-500 034 Phone: 23554270, 23553892, 23554271, Fax: 040-23542213



Ref: SAN / PROJ / 2019/KVSR/Hig-22

Date: 6th JULY, 2019

### TO WHOM SO EVER IT MAY CONCERN

This is to certify that Miss. A GAYATHRI is a bonafide student of Dr.K.V.SUBBA REDDY INSTITUTE OF PHARMACY, KURNOOL. She has undergone industrial training in our organization from 22.06.2019 to 06.07.2019 as part of partial fulfillment of her B. Pharmacy course bearing Hall Ticket No 16ER1R0053.

During the training period she had interacted with Quality control, Quality Assurance & Production Departments In charges and acquired basic knowledge in these areas.

During this aforesaid period, we found her hardworking, sincere and learning attitude.

We wish her A Bright Future.

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cc to: HR Department.

cc: to Project trainee file.

Unit 2 : Formulation Unit, 7-4-92, Survey No: 219, Gaganpahad, Hyderabad. Phone : 040-32909637, 38 & Fax No : 040-24360459

Regd. Office: Plot No.13. Sagar Society, Road No.2, Banjara Hills, Hyderabad-500 034 Phone: 23554270, 23553892, 23554271, Fax: 040-23542213

Healthcare Business

Ref: SAN / PROJ / 2019/KVSR/Hiq-20

Date: 6th JULY, 2019

### TO WHOM SO EVER IT MAY CONCERN

This is to certify that Mr. A. ALTHAF HUSSAIN is a bonafide student of Dr.K.V.SUBBA REDDY INSTITUTE OF PHARMACY, KURNOOL. He has undergone industrial training in our organization from 22.06.2019to 06.07.2019 as part of partial fulfillment of his B. Pharmacy course bearing Hall Ticket No 16ER1R0059.

During the training period he had interacted with Quality control, Quality Assurance & Production Departments In charges and acquired basic knowledge in these areas.

During this aforesaid period, we found his hardworking, sincere and learning attitude.

We wish him A Bright Future.

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### **INTERNSHIPS:**

# DEPARTMENT OF PHARM.D STUDENTS INTERNSHIP REPORT

Academic Year: 2014-20 Batch: 2014

### Internship Title:

The Pharm.D institutions are aligned with adjacent hospitals in order to provide real-time training including ward rounds. Students are acknowledged with practical in clinical pharmacy and medical pharmacy. After completion of the course, students are gained with the skills in diagnosis, therapeutic usage of drugs, treatment and selection of diseases.

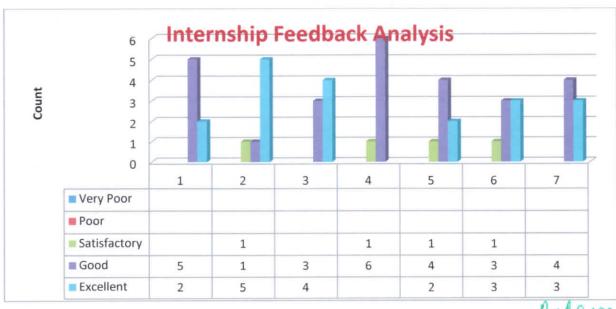
**Internship Period:** 06-03-2019 to 11-03-2020

Company/ Organization: Kurnool General Hospital, Kurnool

### Students Feedback:

FACT	TORS ON FEEDBACK	Very Poor	Poor	Satisfactory	Good	Excellent
FAC	TOR: WARD ROUNDS					
1.	The tasks given are related to the subjects that I have learned in the institution.				5	2
2.	The tasks given are Challenging and testing your mettle.			1	1	5
3.	The tasks given were able to complete within the given duration.				3	4
FAC	TOR: CLINICAL AND MEDICA	AL PHAR	MACY SKI	ILLS		
4.	The work environment is suitable for training of industrial trainee.	*		1	6	

5.	The colleagues provide good support and respective of industrial trainees.			1	4	2
FACT	OR: IN DIAGNOSIS SKILLS			1		
6.	The training attended has prepared me well to work in the industry in terms of knowledge.			1	3	3
7.	The overall learning in the institution had helped me to go through industrial training with confidence.				4	3
FACT	OR: THERAPEUTIC USAGE O	F THE D	RUGS			
8	The training attended has prepared me well to work in the industry in terms of knowledge.			1	3	3
9	The overall learning in the institution had helped me to go through industrial training with confidence.					43



### **Impact Analysis:**

The Internship help the students in the following ways.

- ✓ All the students got Valuable Work Experience
- ✓ Students can present papers in journals/conferences.
- ✓ Students can get placements in Companies.
- ✓ Students can easily choose right career.
- ✓ They will also get multiple Job opportunities.

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### Gertificate for Internship

www. and Amalinthala Ashot W ROLL VO 14CRITOCOL c of Pharm. D. Regulations 2008 of Pharmacy Council of India (PCI). New Dollie and Harperal Kumovi from 6/3/2019 to 4/8/2020 and it was Excellent

DEPARTMENT	15/2 2012/2 HP
GENERAL MEDICINE	0 months
PEDIATRICS	2 months
PATCHIATRY	2 months
GYNECOLOGY	2 months





### Gertificate for Internship

10 confront was Maddita Anusha WERLTOODS of Pharm.1) Regulations 2008 of Pharmacy Council of India (PC), New Dellis and ntal Karnool from 6/8/2019 to 11/8/2020 and a was EXCELLENT

DEPARTMENT	TOTAL BUILATION (IN MIDSTRA)
GENERAL MEDICINE	6 specially.
PEHATRICS	2 months
PSYCHIATIO	2 months
G530EUL065	2 months





### Dr. K.V. SUBBA REDDY INSTITUTE OF PHARMACY

### Gertificate for Internship

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DEPARTMENT	(IN MIDNER)
GENERAL MERICINE	4 months
PERMATRICS	2 months
PAYCHIATRA	2 months
GYNECOLOGY	2 months

Dr. S. Humps



### Dr. K.V. SUBBA REDDY INSTITUTE OF PHARMACY

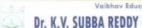
### Gertificate for Internship

Shaik Irlana ( Kurnevi from 6/8/2019 to 11/8/2020 and 11 was Schiefedory

BEFARIMENT	TOTAL BURNTION
GENERAL MEDICINE	ti months
PERIORATRICS	2 months
PSECHIATRS	2 mentles
GVSECOLOGY	2 months 1







### Dr. K.V. SUBBA REDDY INSTITUTE OF PHARMACY

### Gertificate for Internship

& hik Parveen Appendix C of Pharm I) Regulations 2008 of Pharmacy Coincil of India (PCI), New Delht and organi a served from 6/2/2019 to 11/3/2020 and it was Excellent

DEFACTMENT	TOTAL DURATION ON MONTHS
GENERAL MEDICINE	4 monito
PEDIATRICS	2 months
PAYCHEOTIS	I amountly
GYNECOLOGY	2 months







Dr. K.V. SUBBA REDDY INSTITUTE OF PHARMACY

### Gertificate for Internship

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DEPARTMENT	(IS MOSTHS)
GENERAL MEDICINE	5 months :
PEDIATRIES	2 mounts
PSYCHIATRY	2 mounts
GYNECOLOGY	2 mountles









Vaibhav Educational Society's

### Dr. K.V. SUBBA REDDY INSTITUTE OF PHARMACY

### Gertificate for Internship

This is to write the work Shark malammad Attar Mr Real No 14681T0009 Rumon from 6/3/2019 10 4/3/2020 and 11 1121 Excellent

DEPARTMENT	TOTAL DESIGNATION (IN MONTHS)
GENERAL MEDICINE	0.0010004
PEDIATRICS	2 months
PSYCHISTRY	2 months
GSSECOLOGS	2 months







Vaibhav Educational Society's

### Dr. K.V. SUBBA REDDY INSTITUTE OF PHARMACY

### Gertificate for Internship

This is to configurate Marian Nogetta Prem chandra Keddy tile Road Tix 14ERITOOIS has encountrilly com eral Kurmon from 6k/2019 to 11/3/2020 and to was Excellent

DEPARTMENT	(IN SIDNTIES)
GENERAL MEDICINE	A quantities
PERIATRICS	2 mounths
PSYCHIATRY.	2 months
GYNECOLOGY	2 mounts

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Dr. K.V.S.R. Institute of Theorems Opp: Dupadu R. s. KURNOOL-511 (2014)



Vaibhay Educational Society's

### Dr. K.V. SUBBA REDDY INSTITUTE OF PHARMACY

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### Gertificate for Internship

This is to corrige that Me/Mi

Life Rigd No. LLERITODS has successfully completed his her internship as per
the correction of Marm. D. Dontor of Pharmacy prescribed under the regulation 10 and
Appendix C of Pharm. D. Regulations 2008 of Pharmacy Council of India (NCI). New Delhi and
Januahardal Nobra Technological Conversity Anantapur (PNTCA). Anantapuramu at Government
Georgial Hospital, Karmon from b 18/2019 to 11/8/2020 and it was Soft-Sectory

DEPARTMENT	ON MONTHS:
GENERAL MEDICINE	ti smenths
PEDICETRICS	2 investiga
PSYCHIATRY	2 systems
CANY BLOCK	2 months







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### Dr. K.V. SUBBA REDDY INSTITUTE OF PHARMACY

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V. Vanda, S. SCH, 16, 27 H. BULLA.

### Gertificate for Internship

This is to certify that MeMs. Aremost Lafeets until the Regal No. 14ERITO014 has uncasefully completed his/her internship as per the curriculum of Pharm. D. (Doctor of Pharmacy prescribed under the regulation 16 and Appendix C of Pharm. D. Regulations 2008 of Pharmacy Council of India 1901, New Delhe and Januaharfal Neuro-Technological University Anantapus (PNTUA), Anantapunum at Government General Haymal, Kurnool from 618/2019 to 18/2020 and it was Excellent

DEPOSITSHEST	TOTAL BERATION (IN MINISTERN)
GENERAL MEDICINE	A model (c)
PERCENTES	2 months
PSYCHIATRY	2 months
GYNECOLOGY	2 months







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### W W CHIPPA DENTY INCTITUTE OF PHARMACY

pproved by AICTE & PCI New Delhi, Affiliated to JNTU Anantapur, Anantapure MoU with Government General Hospital, KMC, Kurnooli NH 44, Opp Dupad, Rällway Station, Lasahmipuran (Post). Nature (1998) 2018/1004.

### Gertificate for Internship

DEPARTMENT	101AL DER G108 (IS MONTHS)
GENERAL MEDICINE	is asserting
PEDIATRICS	2 months
PSYCHIATRY	2 months
GYNECOLOGY	2 months







Vaibhay Educational Society'

### Dr. K.V. SUBBA REDDY INSTITUTE OF PHARMACY

pproved by ADCTE & PCT New Delta, Affiliated to ANTE Assentages, A MoS with Government General Heights, EMS Kurzooll Net A4, Opp Dupseu Railway Station, Listatempuram (Post), Kurzool - 5182.8 IA P. INDIA.

### Certificate for Internship

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This recording of them D. Toutet of thermally prescribed white the regulation 16 and Appendix C of them D. Regulations Nest of thermally Council of India (PC), New Dellis and Januaharlal Nitres Technological Conversey, Anastaper (PNTCA), Anastaperous at Government General Magnetal National from 618/2019 to u13/2020 and it was Excellent

000 (4130) 51	DESCRIPTION OF STREET
GENERAL MEDICINE	4-meetile
PERIODES	2 months
PSYCHI SERS	3 months
GYSECOLOGA	2 monaths

Preceptor

All the second



Dr. K.V.S.B. Institute of Pharmas Opp: Dupady R.S. H. L.44.7 KURNOOL-518218 (A.P.)



### Dr. K.V. SUBBA REDDY INSTITUTE OF PHARMACY

### Gertificate for Internship

P. Swetta WE WANT NO 14ERITOOIT al Europe from 6/8/2019 to 11/3/2020 and a war Excellent

DEPARTMENT	DOLG BUILDINGS (IS MOSTHM)
GENERAL MERICINE	to assessment
PEDIATRICS	2 people
PSYCHIATRY	2 months
GYNECOLOGY	2 months





Vaibhay Educational Society's

### Dr. K.V. SUBBA REDDY INSTITUTE OF PHARMACY

### Gertificate for Internship

entity that MICHA Shork Mohammed? Muzzama well Read No. 1400170019 has successfully completed his/her intern in of Pharm.D (Doctor of Pharmacy) prescribed under the regulation agrical sumod from 6/3/2019 to 11/3/2020 and it was Satisfactory

DEPAREMENT	ON MONTHS.
GENERAL MEDICINE	5 months
PEDIATRICS	2 months
PSYCHIATRY	2 months
GYNECOLOGY	2 months







### Dr. K.V. SUBBA REDDY INSTITUTE OF PHARMACY

### Gertificate for Internship

Kamitkar Spipnya This West No. 146RITO018 1 2 2 2 2000 from 6/3/2019 to 11/3/2020 and 11 was Excellent

DEPARTMENT	(IN MONTHS)
GENERAL MEDICINE	5 menths
PEDIATRICS	2 mentio
PSYCHIATRY	2 months
GYNECOLOGY	2 meets.





Opp: Dupadu R.S. N.H.-44, KURNOOL-518218 (A.P.)



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### HANDS - ON LEARNING

B. Pharmacy, Pharm.D & Pharm.D (PB) and M. Pharmacy students gain knowledge intheory by taking part in the pragmatic learning in various laboratories located within the institute. Faculty has designed various experiments according to the syllabus assigned by the JNTUA. Students gain practical awareness through live activities and handling the instruments such as Pharmaceutical Analysis instruments operation UV – Visible Spectrophotometry, HPLC, Pharmacology laboratory experiments with animals, and Pharmaceutical Chemistry etc.,



I/II Pharm.D students learning about dissolution in the Pharmaceutics Lab.



III B.Pharmacy students learning about Rotarod apparatus in the Pharmacology Lab

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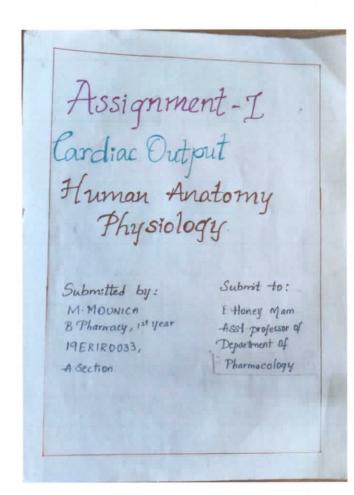
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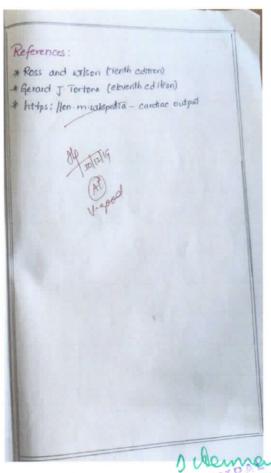
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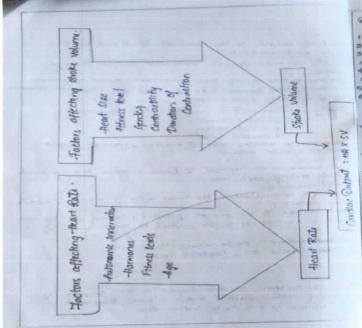
Website: www.drkvsrip.in e-mail: principalkvsrip@gmail.com

### ASSIGNMENTS

Assignments are the part of the internal examination evaluation process, in which would be immense value as additional learning instruments. Many types of assignments can be given to students of all such as essays, literature reviews, critical reviews, reflective journals, annotated bibliographies and case studies, depends upon the need and learning situations. It implies a task for students to accomplish the aim of learning particular contents, concepts or relationships etc., in this text, learning assignments involve students' independent information seeking and use of a wide range of information resources which are available for them. So every semester/year students are assigned with 2 or 3 topics per each subject regarding to their syllabus and asked to gather more relevant information. Allotment of marks to students is given according to their task completion. Through this student are enriched with knowledge regarding of topic, proof reading of and presentation techniques.







Decrease in Carchie Dulput: cardiac output decreases in the following conditions: t Hypothyroidism: Due to decreased basal metabolic 2 Atsal-fibriliation: Because of treamptele -pitting by vertifices 3. Incomplete heast block with economy sciences or myocoadial degeneration: Due to defeature pumping action of the heast of Congestive Cardrac fallow: Because of weak Contractions of heart. of heart.

Shock: Due to poor pumping and creation.

Shack: Due to poor pumping and creation.

Shackord: Due to poor pumping and creation.

Shack: Due to Because of decreased blood volume.

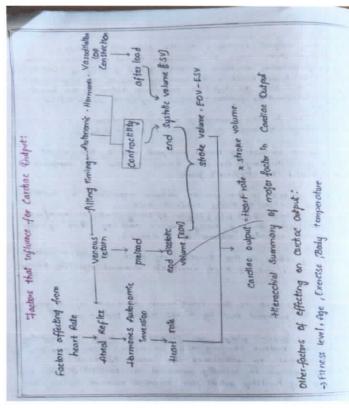
Distribution by Cardiac Dubput:

The whole amount of blood pumped out by the right ventrale goes to lungs But; the blood by the left ventrale is distributed to different parts. to distributed to different parts.

Cardiac Index:

A Cardiac Andex:

It cardiac Andex: Ejection Traction:
Ejectron fraction to the fraction of and diastotic volume
Ejectron fraction to the fraction of and ejection from
that is ejected out by each ventrale Normal ejection from
to be - 65.4. cardiac Reserve to the maximum amount of Blood cardiac Reserve to the maximum amount of Blood that can be pumped out by heart above the normal that can be pumped out by heart above the normal cardiac reserve plays an important orde in Genesiagthe condition output dusing the conditions like exercise.
The is essential to withstand the stress of exercise.
Cardiac heavive is usually expressed in percentage In a cardiac heavive is usually expressed in percentage In a nermal young healthy adult the cardiac reserve is see-year.



Sex: In females, condition output is less than in males because by less broad volume cardiac index is more than In males, because of less body surface area. Body Butlet: Greates the body build, more to their less than in males because by less blood volume. Outlied index a more than in males, because of less body surface area Difurnal Vasiation: Cardiae output to low in early morning & increases in day time -11 depends upon the basal conditions of the suckeriduals of the incitoduals of Environment temperature; moderate change in temperature does not affect cardiac output increase in temperature above 30'c raises cardiac output.

3) Emotional Conditions: Anciety, apprehasion & exchement increases cardiac output about 50-100%.

1) After medis: During the first 1 hour after taking made cardiac output increases. 1) Excersice: Cardrae output Increases during excensise because of thorous in heart rate and five of enhanters.

7) High altitude: In high altitude, the Condition output Increases because of there are accretion of adendine. Advancing secretion is stimulated by hypotra (Jack of G.) o) Tosture: while changing from recumbers to upsight position, the cordiac output decreases.

1) Preparate is Disting the International apparator, registrace. ) Pregroncy: Dusing the laten menths of pregnancy , conditac output increases by 40%. a) sleep: Cardiac output is slightly decreased on it is analtered turing sleep.

Pathological Variations: Processe to Cardiac Dutput:
Contrac output increases in the following conditions
I Fever: Due to increased and other processes.
Anemia: Due to hypoxia.

Hyperthyroidism: Due to receased based metabolic mate

PRINCIPAL PRINCI



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Model making competition conducted by B.Aruna, Assistant professor, Department of pharmacology





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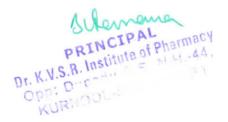


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### B.PHARMACY PROJECT TITLES (AY 19-20)

BATCH	REG.NO	NAME OF THE STUDENT	GUIDE	PROJECT TITLE	DEPARTMENT	
Ī	16ER1R0042	S. SUJATHA				
	16ER1R0045	K. SUPRAJA	Dr.G.Nagarajan			
	16ER1R0053	A.GAYATHRI		Synthesis and high sized activity		
	16ER1R0075	C.SHIVA		Synthesis and biological activity of isatin derivatives	PH.CHEMISTRY -	
	16ER1R0089	Y.MANOHAR		or isaciii derivatives		
	16ER1R0024	M. PAVAN KUMAR REDDY				
2	16ER1R0022	M. PAVANI				
	16ER1R0083	P.TASLEEMA BEGUM		: Formulation and Evaluation of		
	16ER1R0006	P. DIVYA SREE	Dr.B.V.Ramana	floating in situ gel of	PHARMACEUTICS -	
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4	16ER1R0001	S. AMREEN	Mr,Chandrasekhar	: Design and Synthesis of Fluorescent Probes For Hydrazine Sensing		
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	16ER1R0023	M. PAVAN KUMAR			PH.CHEMISTRY	
	16ER1R0077	M.SNEHA				
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Opp. Dupadu Railway Station, Lakshmipuram (Po), N.H - 44, KURNOOL - 518 218, A.P. INDIA Website : www.drkvsrip.in e-mail: principalkvsrip@gmail.com

### PHARM.D V/VI PROJECT LISTS

BATCH	REG.NO	NAME OF THE STUDENT	GUIDE	PROJECT TITLE	DEPARTMENT
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## DESIGN AND SYNTHESIS OF FLUORESCENT PROBES FOR HYDRAZINE SENSING

# A DISSERTATION SUBMITTED TO THE JAWAHAR LAL NEHRU TECHNOLOGICALUNIVERSITY, ANANTAPUR, ANDHRAPRADESH.

SUBMITTED BY

**S.AMREEN (16ER1R0001)** 

R.HEMALATHA (16ER1R0011)

M.PAVAN KUMAR (16ER1R0023)

P.SUMA (16ER1R0043)

M.SNEHA (16ER1R0077)

In the partial fulfillment of the requirement for the award of degree of

BACHELOR OF PHARMACY

Under the guidance of

Dr.K. CHANDRASEKHAR, M.S.Pharm, Ph.D

Associate Professor, Department of Pharmaceutical Chemistry,

Dr. K. V. Subba Reddy Institute of Pharmacy,

**Department of Pharmaceutical Chemistry** 

DR.K.V.SUBBA REDDY INSTITUTE OF PHARMACY DUPADU, KURNOOL-518218, AP

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OPP:Dupadu RS,N.H-44,Lakshmipuram(Post),Kurnool-518218

E-mail:principalkvsrip@gmail.com

### CERTIFICATE

This is to certify that the dissertation entitled DESIGN AND SYNTHSIS OF FLUORESCENT PROBES FOR HYDRAZINE SENSING was done for the partial fulfillment for the award of degree of bachelor of pharmacy in Pharmaceutical Chemistry has been carried out by S. AMREEN(16ER1R0001), R.HEMALATHA(16ER1R0011), M.PAVANKUMAR(16ER1R0011), M.PAV

23), P.SUMA (16ER1R0043), M.SNEHA(16ER1R0077), under the guidance and supervision of Dr.K.CHANDRASEKHAR, M.S.Pharm, Ph.D at DR.K.V.SUBBA REDDY INSTITUTE OF

PHARMACY, Dupadu, Kurnool, during the period 2019-2020. It is further certified that this work or any part of this has not been submitted in part or full for the award of any degree or fellowship.

DATE:

PLACE: Dupadu

Principal Dr. G. NAGARAJAN, M.Pharm, Ph.D.

Principal & HOD,

Department of Pharmaceutical Chemistry,

Dr. K. V. Subba Reddy Institute of Pharmacy,

Dupadu, Kurnool, A.P – 518002.

Blemana

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Approved by AICTE& PCI New Delhi, Affiliated to JNTU Anantapur, Anantapuramu, MoU with

Government General Hospital, KMC, Kurnool)

OPP:Dupadu RS,N.H-44,Lakshmipuram(Post),Kurnool-518218

E-mail:principalkvsrip@gmail.com

Cell.+919440282181,+919704333789

+919440282181,+919704333789

Fax.08518-287618

Fax:

### CERTIFICATE BY SUPERVISOR

This is to certify that the dissertation entitled "DESIGN AND SYNTHSIS OF FLUORESCENT PROBES FOR HYDRAZINE SENSING" was done for the partial fulfillment for the award of degree of bachelor of pharmacy in Pharmaceutical Chemistry has been carried out by S. AMREEN (16ER1R0001), R. HEMALATHA (16ER1R0011), M. PAVANKUMAR (16ER1R0

023), P.SUMA (16ER1R0043), M.SNEHA(16ER1R0077),under the guidance and supervision of Dr.K.CHANDRASEKHAR, M.S.Pharm, Ph.D. at DR.K.V.SUBBAREDDY INSTITUTE OF

PHARMACY, Dupadu, Kurnool, during the period 2019-2020. It is further certified that this work or any part of this has not been submitted in part or full for the award of any degree or fellowship.

DATE:

PLACE:Dupadu.

Supervisor

DR .K. CHANDRASEKHAR,

M.S.Pharm, Ph.D

Associate Professor,

Department of Pharmaceutical Chemistry,

Dr. K. V. Subba Reddy Institute of Pharmacy,

Dupadu, Kurnool, A.P – 518002.

Schemana

DETNCTEAL

Opp: Dupadu R.S. N.H.-44, KURNOOL-518218 (A.P.)

### Dr. K.V. SUBBAREDDYINSTITUTE OF PHARMACY



Approved by AICTE& PCI New Delhi, Affiliated to JNTU Anantapur, Anantapuramu, MoU
with Government General Hospital, KMC, Kurnool)

OPP:Dupadu RS,N.H-44,Lakshmipuram(Post),Kurnool-518218

E-mail:principalkvsrip@gmail.com

Cell:+9194402<u>82383,431828233878</u>919704333789

Fax:08518-287618

### DECLARATION BY CANDIDATES

WeS.AMREEN(16ER1R0001),R.HEMALATHA(16ER1R0011),M.PAVANKUMAR(16ER1R0023), P.SUMA (16ER1R0043), M.SNEHA(16ER1R0077),pursued admission in B. Pharm 4<sup>th</sup> year program for the academic year 2019-2020, at Dr. K. V.Subba Reddy Institute of Pharmacy, Dupadu, Kurnool (Affiliated to JNT University Anantapur, Anantapuramu) and in connection with partial fulfilment for award of degree of Bachelor of Pharmacy. We hereby declare that the entitled research work "DESIGN AND SYNTHSIS OF FLUORESCENT PROBES FOR HYDRAZINE SENSING" was carried out by us undertheguidance of Dr.K.CHANDRASEKHAR, M.S.Pharm, Ph.D, Associate Professor, Department of Pharmaceutical Chemistry. We express no conflict of interest for due submission of this work to board of examiners for evaluation process.

Name of the Student		Signature of thestudent
S.AMREEN	(16ER1R0001)	S. Amoren.
R.HEMALATHA	(16ER1R0011)	R. Hemalatha.
M.PAVAN KUMAR	(16ER1R0023)	M Pavan kumar
P.SUMA	(16ER1R0043)	P. Suma.
M.SNEHA	(16ER1R0077)	Mr. Snels

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### **List of Abbreviations**

S.NO	SYMBOL	ABBREVATION
1.	DMSO	Dimethylsulphoxide
2.	TLC	Thin layer chromatography
3.	mm Hg	Millimeters of mercury
4.	μg	Microgram
5.	mg	Milligram
6.	%	Percentage
7.	ml	Milliliter
8.	Eq	Equivalents
9.	<sup>0</sup> C	Centigrade
10.	<sup>0</sup> F	Fahrenheit
11.	hr	Hour
12.	UV	Ultraviolet
13.	IR	Infrared radiation
14.	NMR	Nuclear Magnetic Resonance
15.	μL	Microliter
16.	nm	Nanometer
17.	μМ	Micromolar
18.	M	Molar
19.	Mm	Mili molar
20.	Rt	Room temperature
21.	gm	Gram
22.	TEA	Triethylamine

# LIST OF SPECTRUMS OF COMPOUNDS

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### **ABSTRACT**

Hydrazine is a highly reactive base and it is widely used in pharmaceutical and chemical industries. Hydrazine is highly toxic and pollutant compound which cause environmental contamination. Hydrazine highly toxic to vital organs like Kidney, Liver and CNS and causes hepatotoxicity, neurotoxicity and Mutagenicity. Hydrazine causes lipid peroxidation in the biological membrane, and increase oxidative stress through reactive oxygen species (ROS) formation. Good fluorophore is important for detection of hydrazine in solution and vapor phase is needed. Here we designed, synthesized and discussed about fluorescent probes used for hydrazine sensing in solution phase.

Key words: Hydrazine, Fluorophore, Hepatotoxicity.

PRINCIPAL

Dr. K.V.S.R. Institute of Pharmacy

Opp: Dupadu R.S. N.H.-44, KURNOOL-518218 (A.P.)

Schemerne

### AIM & OBJECTIVES

### AIM

To design and synthesis of compound that can detect hydrazine in solution phase

### **OBJECTIVES**

- ✓ Design of fluorescent probes.
- ✓ Perform synthesis of fluorescent probes.
- ✓ Characterization of fluorescent probes by using Mass, and NMR spectroscopic studies.
- ✓ Perform an experiment to detect hydrazine by using a fluorescent probe.

PRINCIPAL

Dr. K.V.S.R. Institute of Pharmacy

Opp: Dupadu R.S. N.H.-44,

KURNOOL-518218 (A.P.)

### 

### INTRODUCTION

### HYDRAZINE:

Hydrazine was first prepared from hydrated hydrazine (N<sub>2</sub>H<sub>4</sub>, H<sub>2</sub>O) by Theodor Curtius in 1887. In 1895 the Lobry de Bruyn was prepared anhydrous hydrazine as a free base for the first time. The Raschig was preparing Hydrazine by the oxidation of NH<sub>3</sub> with hypochlorite process, it becomes a chief commercial method of manufacture of hydrazine. Hydrazine is also be written in from of  $H_2NNH_2$ , it is called diamidogen it is basic (alkali) chemical properties ( $K_b = 1.3 \times 10^{-6}$ ) like ammonia. It is colourless fuming liquid with a faint ammonia like odour .It's by products such as nitrogen & water, hydrazine often acts as a convenient reductants such as antioxidant, oxygen scavengers & corrosion inhibitor[1]. Hydrazine released as a by-product in some nitrogen-fixing bacteria. It is important metal corrosion inhibitor to scavenge oxygen in water boilers for feed & heating systems [2]. They used as an anti-corrosine agent in electrical power plants, as an antioxidant in the nuclear power plant. It is also used as an anti-corrosive agent in electrical power plants, as an antioxidant in the nuclear power plant. During the Second World War, time Germany discovered the interesting property of hydrazine as the use of rocket fuel. Now it becomes a one of the most powerful liquid fuels among current rocket propellants. However, the chemical uses of hydrazine now far surpass its use as a fuel. The field of hydrazine chemistry and its applications are over widening. It is a chemical with high toxicity, can be readily absorbed through skin or via breathing directly into the body. Formula (N<sub>2</sub>H<sub>4</sub>), Density (1g/cm<sup>3</sup>), Molar (32.0452), Boiling point(114 °C), Melting point (2 °C).

Determine hydrazine in trace amount using different analytical techniques such as chromatography, chemiluminescence, spectrophotometry, electrochemistry, titrimetry&surface enchanced Raman- spectroscopy<sup>[14]</sup> and some other methods are used for determining hydrazine. To recognizing fluorescence senors moiety for N<sub>2</sub>H<sub>4</sub> have been developed mainly including acetyl,4-bromobutyrate,levulinode(levulinate),phthalimidealdehyde,malononitrile,1,8 naphthaleneimide,coumarin,cyanine derivative,aldehyde,&traditional organic dyes such as benzothiazole mostly through the reaction based approach that exploits the strong nucleophilicity of hydrazine<sup>[3]</sup>.

Hydrazine causes lipid peroxidation &ROS formation ,to elevate oxidative stress & leads eventually to nonspecific damage to protein &DNA<sup>[4]</sup> .Hydrazine has been denoted as a

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possible human carcinogen by the US Environment Protection Value [EPA] with an exposure threshold limit value [TLV] of 10 ppb. <sup>[5]</sup> while exposure to hydrazine may causes eyes,nose irritation,dizziness, headache, nausea,pulmonary edema, seizures, coma in humans as well as damage to the liver, kidney & central nervous system[CNS] <sup>[6]</sup>.

### Uses of Hydrazine

- 1. Gas producers and propellants.
- Precursor to pesticides and pharmaceuticals.
- Rocket fuel.

### 1. Gas producers and propellants

The majority use of hydrazine is as a precursor to blowing agents. Specific compounds include azo dicarbonamide and azo bisisobutyronitrile, which produce 100–200 ml of gas per gram of precursor. In a related application, sodium azide, the gas-forming agent in air bags, is produced from hydrazine by reaction with sodium nitrite [7].

Hydrazine is also used as a propellant on board space vehicles, such as the NASA Dawn probe to Ceres and Vesta, and to both reduce the concentration of dissolved oxygen in and control pH of water used in large industrial boilers. The F-16 fighter jet, NASA Space Shuttle, and U-2 spy plane use hydrazine to fuel their emergency power units<sup>[8]</sup>.

### 2. Precursor to pesticides and pharmaceuticals

Hydrazine can be effective as an active ingredient an admixture with/in combination with other agricultural chemicals such as insecticides, miticides, nematicides, fungicides, herbicides/ plant growth regulators<sup>[9]</sup>. It is widely applies as a pharmaceutical derivatives such as isoniazid, phenyl amino thiourea and the antipsychotic drug 1-isoniacyl-2-isopropylhydrazine, the anti-infective drug 5-nitrofuranmethylhydrazine derivative<sup>[10]</sup>, antitumor drug methyl phenylhydrazine <sup>[11]</sup>.

### 3. Rocket fuel:

Hydrazine was first used as a component in rocket fuels during World War II. A 30% mix by weight with 57% methanol (named M-Stoff in the German Luftwaffe) and 13% water was called C-Stoff by the Germans. [12] The mixture was used to power the Messerschmitt

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Me 163B rocket-powered fighter plane. Hydrazine was also used as a propellant with the German high test peroxide *T*-Stoff oxidizer. Unmixed hydrazine was referred to as B-Stoff by the Germans, a designation also used later for the ethanol/water fuel for the V-2 missile.

Hydrazine is used as a low-power monopropellant for the maneuvering thrusters of spacecraft, and was used to power the Space Shuttle's auxiliary power units (APUs). In addition, monopropellant hydrazine-fueled rocket engines are often used in terminal descent of spacecraft. Such engines were used on the Viking program landers in the 1970s as well as the Phoenix lander and Curiosity rover which landed on Mars in May 2008 and August 2012, respectively.

In all hydrazine monopropellant engines, the hydrazine is passed over a catalyst such as iridium metal supported by high-surface-area alumina (aluminium oxide), which causes it to decompose into ammonia, nitrogen gas, and hydrogen gas [13].

There are ongoing efforts in the aerospace industry to replace hydrazine It include hydroxylammoniumnitrate, dimethylaminoethylazide (DMAZ)<sup>[14]</sup> and energetic ionic liquids.

### Hydrazine Effects

- Hydrazine exposure can cause skin irritation/contact dermatitis and burning, irritation to the eyes/nose/throat, nausea/vomiting, shortness of breath, pulmonary edema, headache, dizziness, central nervous system depression, lethargy, temporary blindness, seizures and coma. Exposure can also cause organ damage to the liver, kidneys and central nervous system [15].
- While exposure to the hydrazine related emergency, NIOSH recommends removing contaminated clothing immediately, washing skin with soap or water, and for eye exposure removing contact lenses and flushing eyes with water for at least 15 minutes. NIOSH also recommends anyone with potential hydrazine exposure to seek medical attention as soon as possible [16].
- Hydrazine causes lipid peroxidation [17] in the biological membranes, and increase oxidative stress through reactive oxygen species (ROS) formation. [18].

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Opp: Dupadu R.S. N.H.-44,

KURNOOL=518218 (A.P.)

International Agency for Research on Cancer (IARC) rates hydrazine as "2A-probably carcinogenic to humans" with a positive association observed by hydrazine exposure and it causes lung cancer<sup>[19]</sup>

- National Academies of Sciences, Engineering and Medicine concluded that there is suggestive evidence of an association between hydrazine exposure and lung cancer, based on cohort and cross-sectional studies of occupational hydrazine exposure, a committee from with insufficient evidence of association with cancer at other sites<sup>[20]</sup>. The European Commission's Scientific Committee on Occupational Exposure Limits (SCOEL) places hydrazine in carcinogen "group B-a genotoxic carcinogen". The genotoxic mechanism the committee cited references hydrazine's reaction with endogenous formaldehyde and formation of a DNA-methylating agent<sup>[21]</sup>.
- The World Health Organization (WHO) recommends potential exposures be treated symptomatically with special attention given to potential lung and liver damage. Past cases of hydrazine exposure have documented success with Pyridoxine (Vitamin B6) treatment<sup>[22]</sup>.

Different fluorescent probes for hydrazine detection provide good choice due to their high sensitivity, compatibility with biological samples, simplicity for implementation and less time consumption. So, essentially a choice of a good fluorophore is crucial for rapid detection of hydrazine in the solution phase, vapor phase as well as in live cell would be beneficial.





### REVIEW OF LITERATURE

Recently literature showed that different hydrazine probes were reported in the literature with different recognition moieties and the different sensing mechanism. The moieties like acetyl, vinyl malononitrile, phthalimide, levulinate, 4-nitrobenzene sulphonyl, and other moieties act as hydrazine recognition moieties.

**Choi** *et.al* <sup>[23]</sup>, reported a hydrazine probe has based on acetyl moiety (**I**). Resorufin acetate (**I**) hydrazinolyzed with hydrazine cause removal of an acetyl group from resorufin results in chromogenic and fluorescence turn-on of the probe (**I**).

Goswami *et al* <sup>[24]</sup>, used 4-bromo butyrate as recognition moiety for the synthesis of hydrazine probe (II) <sup>[24]</sup>. The probe (II) was designed based on ESIPT (Exited State Internal Proton Transfer) mechanism, 4-bromo butyryl moiety blocks the ESIPT of the probe (II). When hydrazine reacts with the probe (II) it will cause remove 4-bromo butyryl moiety and results in ESIPT process turn-on.

Choi et al [25] synthesized hydrazine probe using levulinoyl moiety as a recognition site for hydrazine (III). The probe (III) was prepared by reaction of levulinoyl chloride with 3-cyano-7-hydroxycoumarin. The probe fluorescence moiety was blocked with this levulinoyl moiety but when hydrazine reacts with probe results in the removal of levulinoyl moiety from the probe (III) and fluorescence turn-on of the probe (III).

Ali *et al* <sup>[26]</sup>, reported fluorescent hydrazine probe (**IV**) based on phenanthroimidazole as fluorophores and phthalimide as hydrazine sensing unit. The phthalimide part in probe (**IV**) acts as protecting group for amine moiety and also blocks the fluorescence turn-on process of the probe (**IV**) but when hydrazine reacts with probe results in fluorescence turn-on of the probe (**IV**),

**Chenet al,** synthesized hydrazine probe by using para nitro benzene sulphonyl moiety as a recognition unit **(V).** In probe **(V)** the 4-nitrobenzene sulfonyl moiety acts as fluorescence quencher as an electrophile <sup>[27]</sup>.

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Opp: Dupadu R.S. N.H.-44,

KURNOOL-518218 (A.P.)

Figure 1: Previously reported hydrazine fluorescent probes

The nucleophilic aromatic substitution of hydrazine on the probe (V) cause release of 4-nitrobenzene sulfonyl moiety and results in fluorescence turn-on of the probe (V).

**Sun** *et al* reported a fluorescent probe based on malononitrile as recognition moiety<sup>175</sup> **(VI).** The probe **(VI)** was designed based on Internal Charge Transfer (ICT) phenomenon when hydrazine reacts with the probe **(VI)** leads to the formation of the hydrazone product and results in the ICT process turned-off

**Nguyen** *et al*, <sup>[29]</sup> reported fluorescent hydrazine probe **(VII)** based on dichloro fluorescein as fluorophores and acetyl chloride moiety as hydrazine sensing unit. The acetyl part in probe acts as protecting group and also blocks the fluorescence turn-on process of the probe **(VII)** but when hydrazine reacts with probe results in fluorescence turn-on of the probe **(VII)** 

Figure 2: Hydrazine sensing mechanism of probe (VII)

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Opp: Dupadu R.S. N.H.-44,
KURNOOL-518218 (A.P.)

### 

### **Design Strategy:**

The fluoroscence property of a particular luminophore is being masked by using a proper masking agent (turn-off state). When an analyte which is highly sensitive towards that particular masking agent comes into contact, demasking results followed by the fluoroscence turn-on.

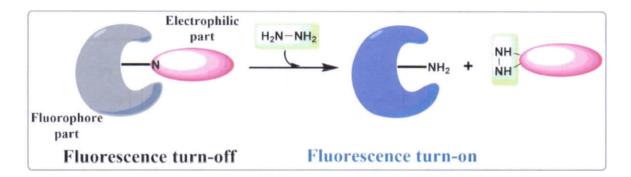


Figure 3:Designed strategy of probe

In the present study, a Napthalene and Antracene moiety was used as a fluorophore in the sensor because it has large stoke shift value (Stokes shift is difference between the emission and excitation maxima) and phthalimide and acetamide used as a hydrazine sensing unit, it can also act as a masking agent to mask the fluorescent nature of fluorophore i.e. Napthalene and antracene. For sensing hydrazine electrophilic center present in the ligand, and phthalimide and acetamide served this purpose. Thus, Compounds were designed as a hybrid of phthalimide and acetamide with Napthalene and antracene. The designed probes were successfully synthesized in a single step with the aim to sense the hydrazine with high specificity. Therefore when hydrazine attack on the probe leads to the generation of fluorophore which is responsible for fluorescence turn-on.

## EXPERIMENTAL SECTION

### **EXPERIMENTAL SECTION**

### **Chemicals Used:**

Table 1: Chemicals used in the project

S.no	Materials	Grade	Molecular	Molecular	Manufacturer
			Formula	Weight	
1.	Alpha-naphthylamine	AR	C <sub>10</sub> H <sub>9</sub> N	143.19	AVRA
2.	2-aminoanthracene	AR	C <sub>14</sub> H <sub>11</sub> N	193.24	Alfa Aesar
3.	Phthalic anhydride	LR	C <sub>8</sub> H <sub>4</sub> O <sub>3</sub>	148.12	SDFCL
4.	Triethylamine	LR	C <sub>6</sub> H <sub>15</sub> N	101.19	SDFCL
5.	Chloroform	AR	CHCl <sub>3</sub>	119.38	SIMSON
6.	Acetyl chloride	LR	CH₃COCl	78.50	SDFCL
7.	Sodium sulphate anhydrous	LR	Na <sub>2</sub> SO <sub>4</sub>	142.04	FINAR
8.	Acetic Acid Glacial	LR	C <sub>2</sub> H <sub>4</sub> O <sub>2</sub>	60.05	SIMSON
9.	Ether Petroleum	AR	C <sub>6</sub> H <sub>14</sub>	82.2	PALLAV
10	Ethyl acetate Extra pure	LR	C <sub>4</sub> H <sub>8</sub> O <sub>2</sub>	88.11	PALLAV
11	Citric Acid	LR	C <sub>6</sub> H <sub>8</sub> O <sub>7</sub>	210.14	NR CHEM
12	Dimethyl sulphoxide	LR	C <sub>2</sub> H <sub>6</sub> OS	78.13	SDFCL

### Materials Used:

The materials used for synthesis purpose are Heating Mantle of Bio Technics India (size :500;model: B72-19), Magnetic Stirrer of 2MLH Magnetic Stirrer, UV light Cabinet is used for detect completion of reaction process and also used for naked eye detection of hydrazine by probe in solution phase, Thermostatic Water bath is used for drying purpose, TLC aluminium sheets (3 x 2.5) are used for checking progress of the reaction, UV Chamber, and Round bottom flask of 50 ml , and some of the glassware's are used .

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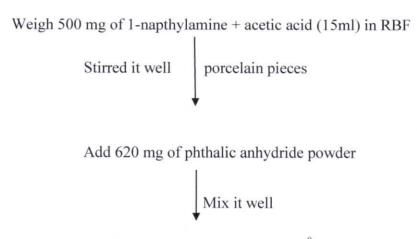
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PROCEDURE FOR SYNTHESIS PROBE 3: (2-(naphthalen-1-yl)isoindoline-1,3-dione)

### Reaction 1:

### Procedure:

To 500 mg of 1-amino napthalene in 50 ml round bottom flask add 15 ml of acetic acid and allow all compound to dissolve after that add 620 mg phthalic anhydride and reflux the reaction at 120 °C for 4 hr until completion of reaction. The reaction completion checked by using TLC plate, once reaction was completed stop the reaction allow the reaction mixture to cool at room temparature, next filter that product using whatmann filter paper, wash the product using cold water and allow the product to dry. After drying the compound 3 was appeared in white colour, the percentage yield of the reaction was found to be 75%



Reaction mixture is refluxed at 120 °C for 4 hr

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Filter it with a whatmanns filter paper

Collect the dried sample and transferred into the sample vial (Probe-3)

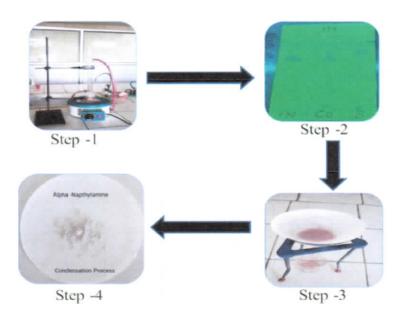


Figure 4: Diagramatic representation of steps involved in synthesis of probe 3 Characterisation Data of probe-3:

<sup>1</sup>H NMR [600 MHz, CDCl<sub>3</sub>]: δ (ppm): 8.03 (m, 2H), 8.0 (d, 1H, *J*=8.4 Hz), 7.95 (d, 1H, *J*=7.8 Hz), 7.85 (m, 2H), 7.61 (m, 2H), 7.54 (m, 2H), 7.48 (m, 1H); <sup>13</sup>C NMR (150 MHz, CDCl<sub>3</sub>) δ (ppm): 167.84, 134.53,134.48, 132.04, 130.30, 130.0, 128.63, 128.19, 127.17, 127.02, 126.59, 124.45, 123.99, 122.46; HRMS: [ESI- m/z] calcd for [C<sub>18</sub>H<sub>11</sub>NO<sub>2</sub>]: 273.08, observed (M+H<sup>+</sup>): 274.0859.

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### PROCEDURE FOR SYNTHESIS PROBE 5: N-(naphthalen-1-

### yl)acetamideReaction-2:

### Procedure:

To the 500 mg of 1- Naphthylamine in a round bottom flask and add 12 ml of chloroform of next add Triethylamine of 1.47 ml and mix it, and then add Acetyl chloride of 0.29 ml the reaction mixture was stirred on a magnetic stirrer at room temperature for 6 hours. Check the completion of reaction by using TLC plate. Next the reaction mixture was taken in to a separation funnel and do workup with Chloroform and water, chloroform layer is collected into a beaker and kept for drying on a water bath after drying the sample collected and weighed. Compound 5 appear as in light brown colour, and the percentage yield of the reaction was found to be 70%.

Kept it on a magnetic stirrer at room temparature

For 6 hours

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Check the completion of reaction using TLC plate

Reaction mixture was taken into separation funnel add Chloroform and water

Mix it well

Separate the chloroform mixture from it

Collect the sample product then

Kept the product in a water bath for a 60 °C

Collect the dried product and transferred it into a sample vial (Probe-5)

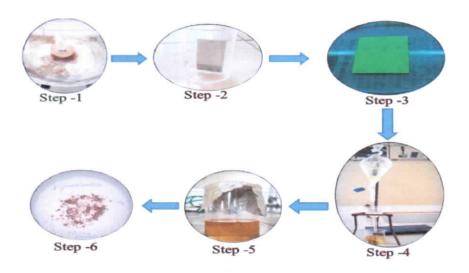
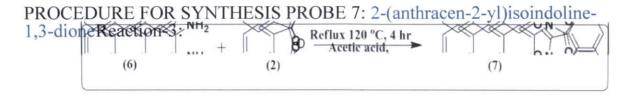


Figure 5: Diagramatic representation of steps involved in synthesis of probe 5Characterisation Data of probe-5:

<sup>1</sup>H NMR [600 MHz, DMSO-d<sub>6</sub>]: δ (ppm):9.91 (s, 1H), 8.07 (d, 1H, *J*=7.2 Hz), 7.92 (d, 1H, *J*=8.4 Hz), 7.73 (d, 1H, *J*=8.4 Hz), 7.68 (d, 1H, *J*=7.2 Hz), 7.53 (m, 2H), 7.47 (t, 1H, *J*=7.8 Hz), 2.18 (s, 3H); <sup>13</sup>C NMR (150 MHz, DMSO-d<sub>6</sub>) δ (ppm): 169.34, 134.11, 128.52, 128.07, 126.38, 126.15, 125.98, 125.45, 123.16, 121.94, 23.91; HRMS: [ESI- m/z] calcd for [C<sub>12</sub>H<sub>11</sub>NO]: 185.08, observed (M+H<sup>+</sup>): 186.0916.



### Procedure:

To 500 mg 2-Aminoanthracene (1 eq) in 50 ml round bottom flask add 10 ml of acetic acid and allow all compound to dissolve after that add 460 mg pthalic anhydride (1.2 eq) and reflux these reaction at 120 °C for 4 hr until completion of reaction. The reaction completion checked by using TLC plate, once reaction was completed stop the reaction allow the reaction mixture to cool at room temparature, next filter that product using whatmann filter paper, wash the product using cold water and allow the product to dry. After drying the compound 7 was appeared in light brown colour, the percentage yield of the reaction was found to be 75 %

Weigh 500 mg of 2-Aminoanthracenein + acetic acid (10 ml) in RBF

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Add 92 mg of phthalic anhydride powder



Kept the reaction refluxed at 120°C for 4 hr

(After completion of reaction)

Filter the reaction mixture it in a whatmans filter paper

Collect the dried sample and transferred into the sample vial (Probe-7)

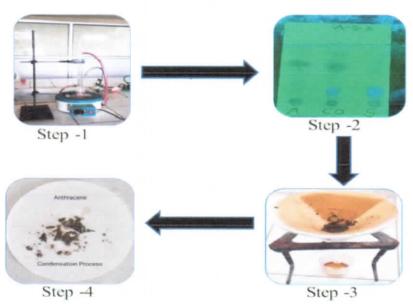


Figure 6: Diagramatic representation of steps involved in synthesis of probe

### Characterisation Data of probe-7:

<sup>1</sup> H NMR [600 MHz, CDCl<sub>3</sub>]: δ (ppm): 8.55 (s, 1H), 8.16 (m, 2H), 8.07 (m, 2H), 8.02 (d, 1H,

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167.94, 134.58, 132.33, 132.15, 131.99, 130.48, 128.47, 128.35, 128.06, 127.43, 126.86, 126.05, 126.0, 124.45, 124.09, 121.22; HRMS: [ESI- m/z] calcd for [ $C_{22}H_{13}NO_2$ ] : 323.09, observed (M+H<sup>+</sup>): 324.1010

### PROCEDURE FOR SYNTHESIS PROBE 8: N-(anthracen-2-

### yl)acetamideRecation-4:

### Procedure:

To the 500 mg of ) 2-Amino anthracene (1 eq) in a round bottom flask and add 10 ml of chloroform of next add Triethylamine of 1.09 ml (3 eq) and mix it, and then add Acetyl chloride of 0.22 ml (1.2 eq) the reaction mixture was stirred on a magnetic stirrer at room temperature for 6 hours. Check the completion of reaction by using TLC plate. Next the reaction mixture was taken in to a separation funnel and do workup with Chloroform and water, chloroform layer is collected into a beaker and kept for drying on a water bath after drying the sample collected and weighed. Compound 8 appear as in Pale Brown colour, and the percentage yield of the reaction was found to be 73%.

Weigh 500 mg of 2-Amino anthracene + 10 ml of Chloroform + 1.09 ml of Triethylamine + 0.22 ml of Acetyl chloride



Kept it on a magnetic stirrer at room temparature

For 6 hours

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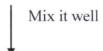
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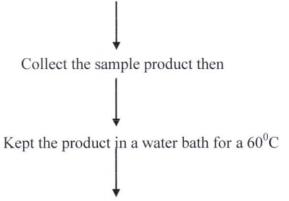
Check the completion of reaction using TLC plate



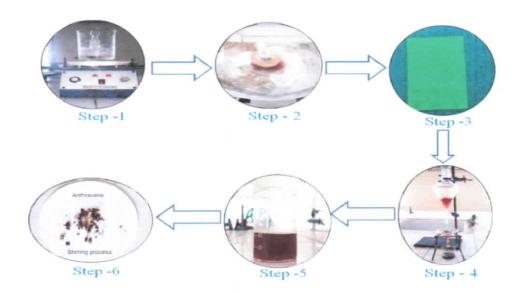
Reaction mixture was taken into separation funnel add Chloroform and water



Separate the chloroform mixture from it



Collect the dried product and transferred it into a sample vial (Probe-8)



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Figure 7: Diagramatic representation of steps involved in synthesis of probe 8Characterisation Data of probe-8:

<sup>1</sup>H NMR [600 MHz, DMSO-d<sub>6</sub>]: δ (ppm): 10.21 (s, 1H), 8.49 (s, 1H), 8.46 (s, 1H), 8.42 (s, 1H), 8.01 (m, 3H), 7.54 (m, 1H), 7.45 (m, 2H), 2.12 (s, 3H); <sup>13</sup>C NMR (150 MHz, DMSO-d<sub>6</sub>) δ (ppm):169.18, 136.71, 132.11, 130.76, 129.18, 128.89, 128.48, 128.10, 126.21, 126.01, 125.34, 125.31, 121.38, 113.99, 24.58; HRMS: [ESI- m/z] calcd for [C<sub>18</sub>H<sub>11</sub>NO<sub>2</sub>]: 273.08, observed (M+H<sup>+</sup>): 274.0859.

### Procedure for Naked eye detection of hydrazine by probe in solution phase:

First initially stock solution of probe was prepared. From the stock solution dilute solution of probe (1 mM) is prepared by diluting with chloroform. Similarly stock solution of hydrazine (5M) in water was prepared from that desired dilute solution (1M) is prepared. Equal volume of probes were poured in 2 vials initially it won't give any fluorescence in the vial after addition of 4  $\mu$ l of hydrazine solution added to second vial after few seconds (< 10 sec) second vial show bright fluorescence when these vials kept under UV cabinet at 365 nm.

### Procedure for UV titration studies of probe with hydrazine solution:

First initially stock solution (3 mM) of probe was prepared. From the stock solution dilute solution of probe (50  $\mu$ M) is prepared by diluting with DMSO. 10 mM of Hydrazine was prepared in distilled water and it is used further for all spectroscopic studies. To the 50  $\mu$ M solution of probe in the cuvette add increasing concentration of hydrazine and corresponding absorption spectrum readings were taken down.

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# RESULTS AND AND BESCUSSION

### **RESULTS AND** DISCUSSION

All the probes were synthesized using standard procedures and probes were obtained in good yields and structure of probe 3,5,7,8 was characterized by Mass and NMR spectroscopic techniques. .

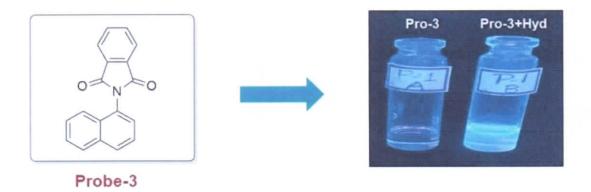
Table 2: Representation of chemical name, actual mass of probes and mass obtained for probes after analysis.

Probes	Names	Chemical	Actual	Mass
		formula	Molecular	obtained
			mass	
Probe-3	2-(naphthalene-1- yl)isoindoline-1,3-dione	C <sub>18</sub> H <sub>11</sub> NO <sub>2</sub>	273.08	274.0859
Probe-5	N-(naphthalene-1-yl) acetamide	C <sub>12</sub> H <sub>11</sub> NO	185.08	186.0916
Probe-7	2-(anthracen-2- yl)isoindoline-1,3-dione	C <sub>22</sub> H <sub>13</sub> NO <sub>2</sub>	323.09	324.1010
Probe-8	N-(anthracen-2-yl) acetamide	C <sub>16</sub> H <sub>13</sub> NO	235.10	236.1075

### Hydrazine sensing:

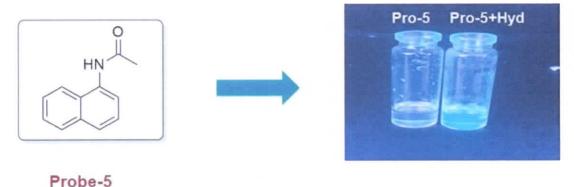
Initially from stock solutions of probe, 1 mM desired concentrations of probe solution in chloroform were prepared. Next equal volume of 1mM probe solution (1ml) added into two vials. In the second vial add 5µl of 1M hydrazine solution was added and mixed, next expose the 2 vials (among them one contain only probe solution and second vial contain probe solution and hydrazine solution) to 365 nm long UV light in UV cabinet, immediately within 10 seconds

second vial in which both probe and hydrazine solution gave bright fluorescence along with some colour change of probe solution.



**Figure 8:** Snapshot of visually detectable fluorescence colour changes of Probe **3**, (1 mM) in absence and presence of hydrazine

Initially probe 3 in chloroform solution does not showed any fluorescence when it exposed to 365 nm of UV light, after addition of hydrazine solution to probe solutions it showed light sky blue colour fluorescence. Similarly after addition of hydrazine to probe-5 solution it gave strong blue colour fluorescence.



**Figure 9:** Snapshot of visually detectable fluorescence colour changes of Probe **5**, (1 mM) in absence and presence of hydrazine.

Next we have taken one ml of 1 mM probe 7 solution in a two separate vials to it we have added 4  $\mu$ l of hydrazine solution and we have absorbed vials under UV cabinet with light at 365 nm wavelength, after 8 seconds we have observe visible light yellow colour fluorescence

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KURNOOL-518218 (A.P.)

light change with the naked eye. Similarly incase of probe-8 solution also after addition of hydrazine it showed strong orange colour fluorescence which is different from the earlier colour of probe-8 solution. With the above experimental results we can come to know all our synthesized probes detect the hydrazine by a fluorescence turn-on mechanism.

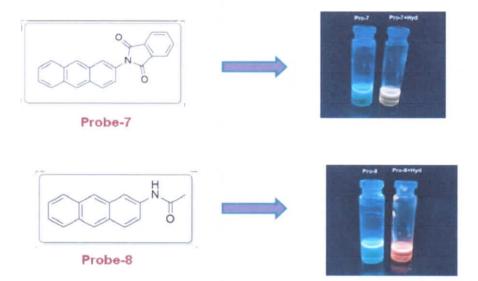


Figure 10: Snapshot of visually detectable fluorescence colour changes of Probe 7 and 8, (1 mM) in absence and presence of hydrazine

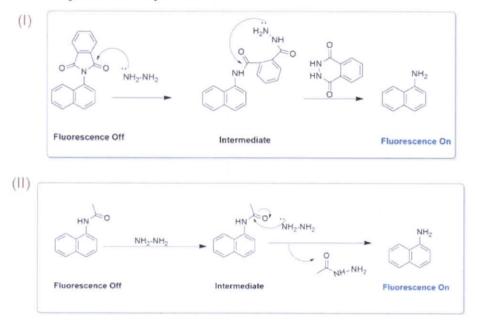


Figure 11: Plausible mechanism by which probes detect hydrazine and shows fluorescence turn-on phenomenon

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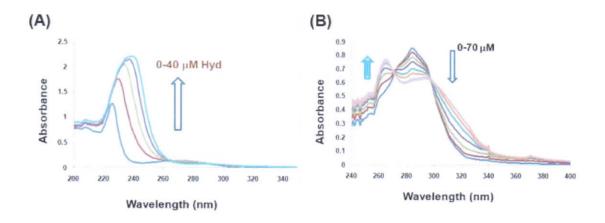
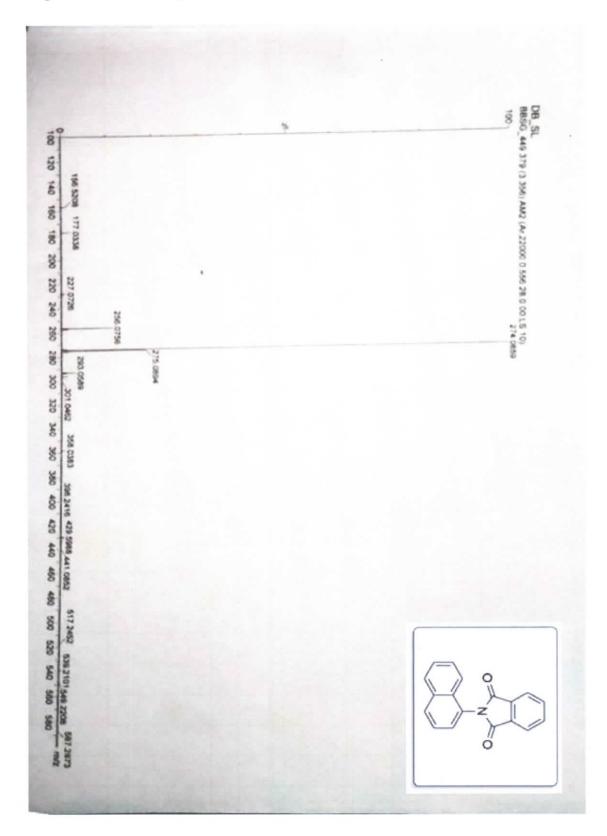
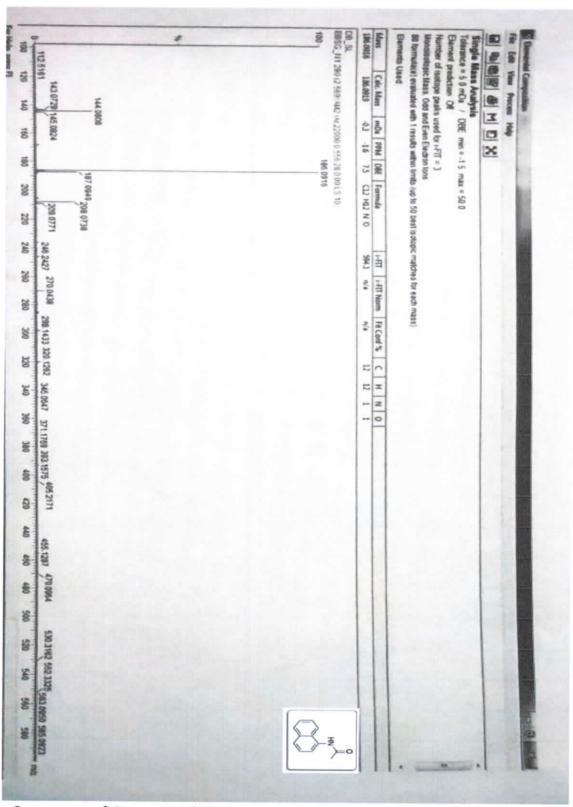


Figure 12: UV titration of (A) probe 3, (B) probe 7 (50 μM) dissolved in DMSO upon addition of varying concentration of Hydrazine

UV-Vis spectroscopy titration experiments were performed for probe **3** and probe **7** with hydrazine. The results showed that the probe-**3** has absorption maxima at 226 nm, next upon gradual addition of hydrazine (0-40  $\mu$ M) to the solution of probe **3**, a steady increase in the absorbance intensity and there is slight shift in the absorption maxima value. Similarly we also performed titration experiments with probe **7**. Initially the probe **7** in DMSO solution showed absorption maximum at 284 nm, up on gradual addition of hydrazine (0-70  $\mu$ M) to probe **5**, a steady decrease in the absorbance at 284 nm is observed at the same time a new peak is generated at 265 nm which may be due generation of fluorophore moiety which is responsible for fluorescence turn-on.

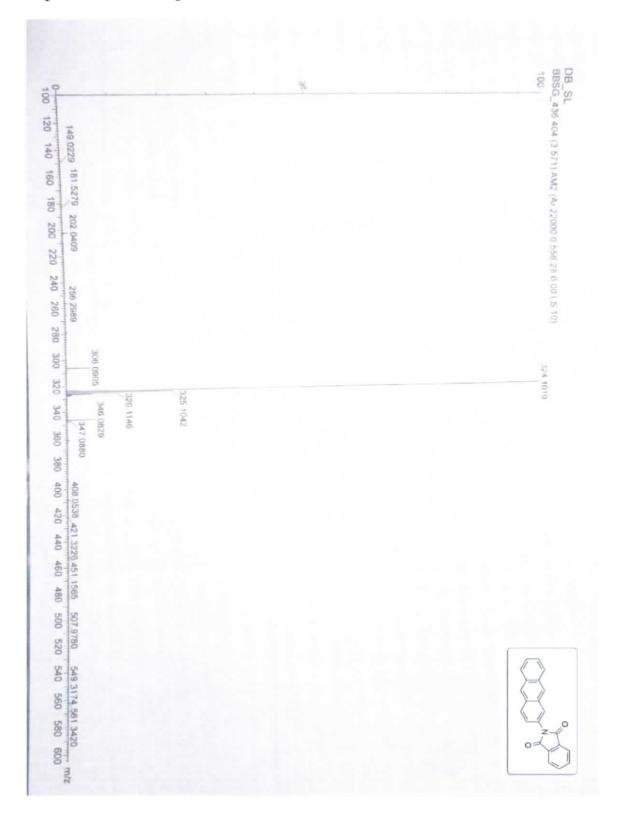
### Mass Spectrum of Compound 3:



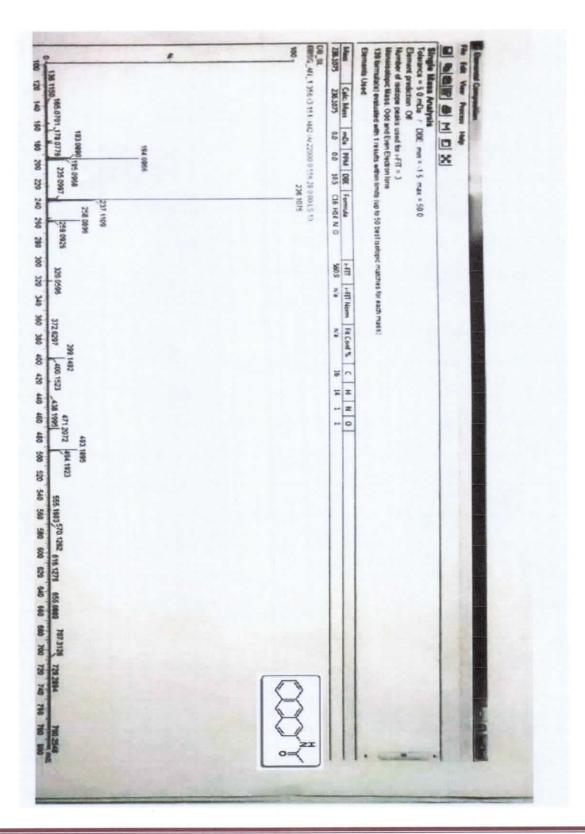


Mass Spectrum of Compound 5:

### Mass Spectrum of Compound 7:

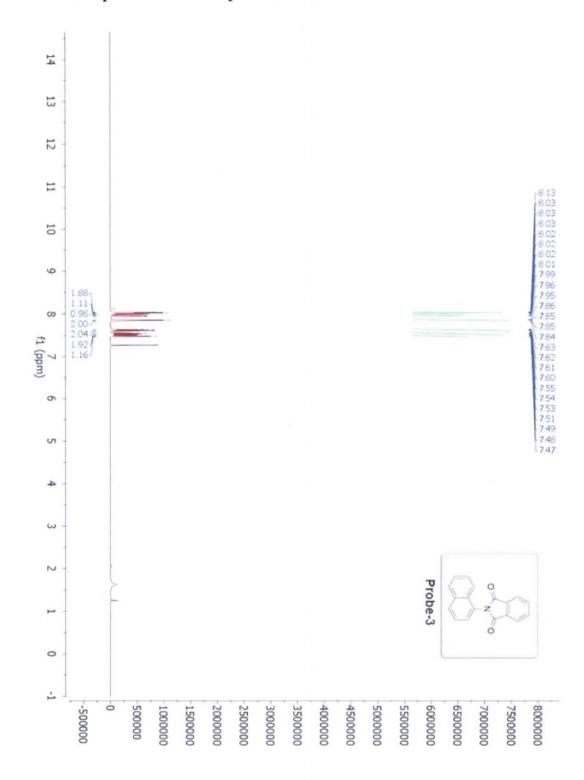


### Mass Spectrum of Compound 8:

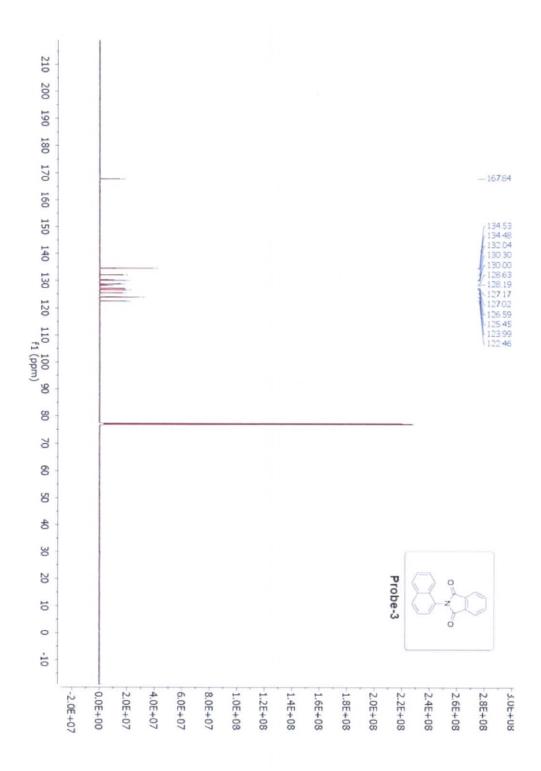


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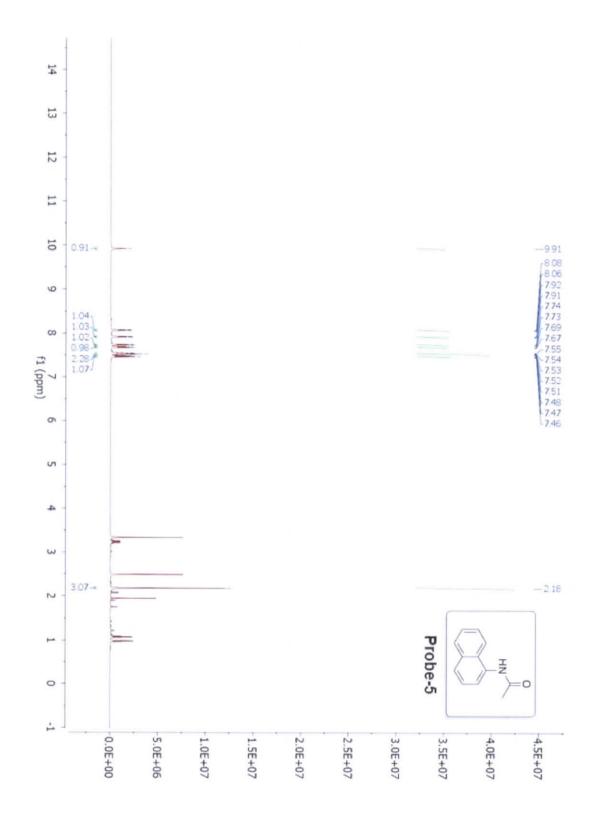
### <sup>1</sup> H NMR Spectrum of compound 3:



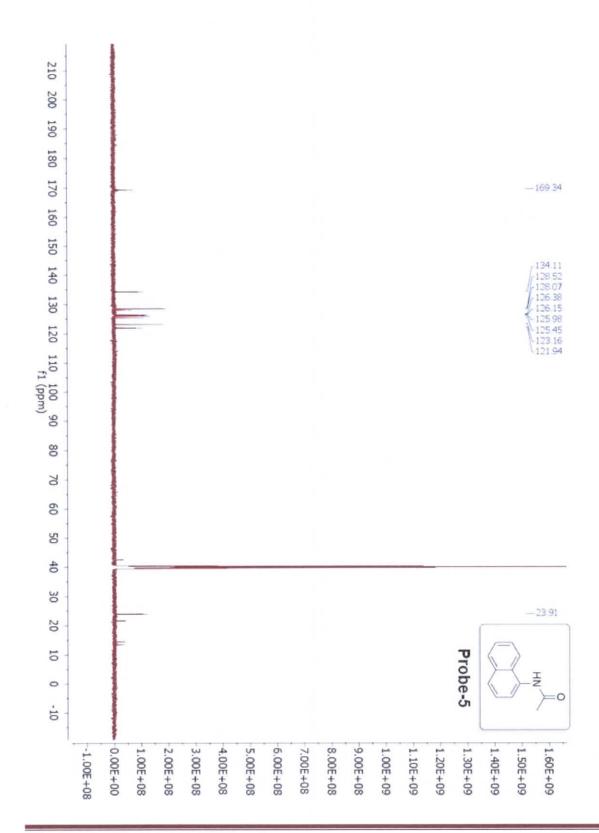
### <sup>13</sup> C NMR Spectrum of compound 3:



# <sup>1</sup> H NMR Spectrum of compound 5:



# <sup>13</sup> C NMR Spectrum of compound 5:

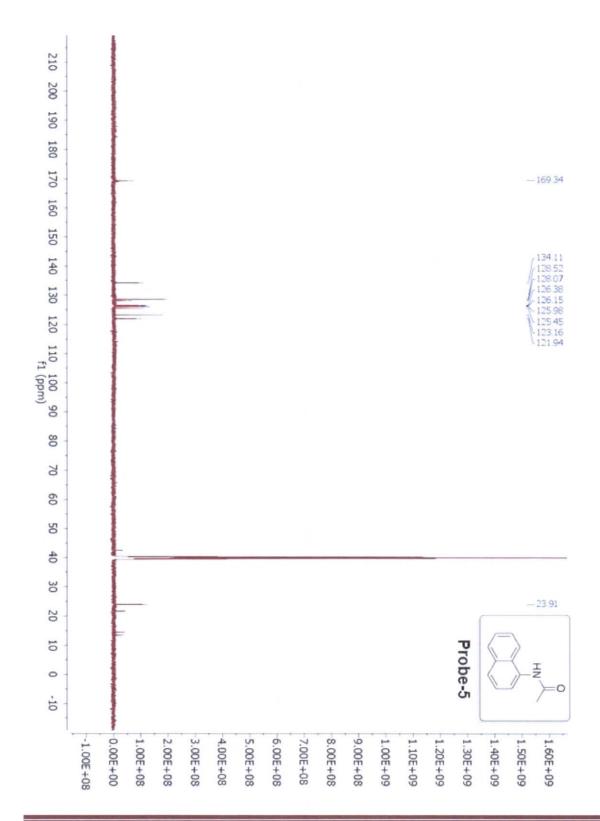


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# <sup>13</sup> C NMR Spectrum of compound 5:

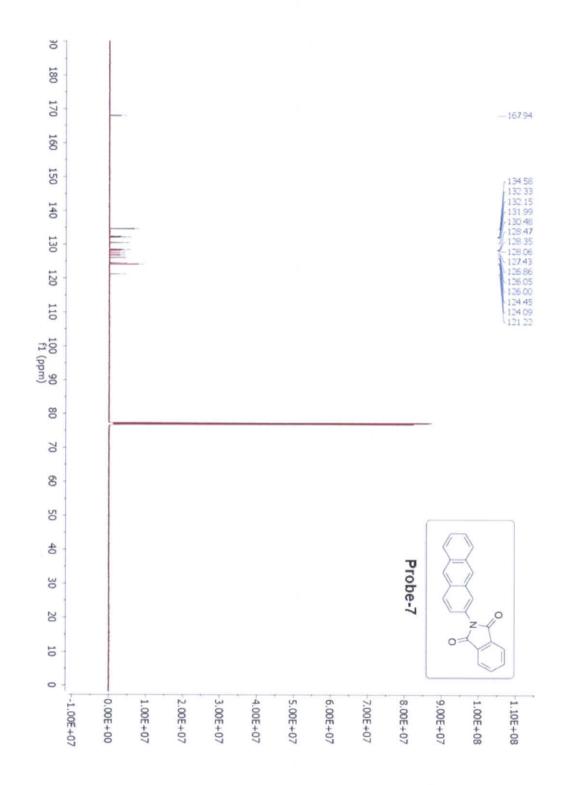


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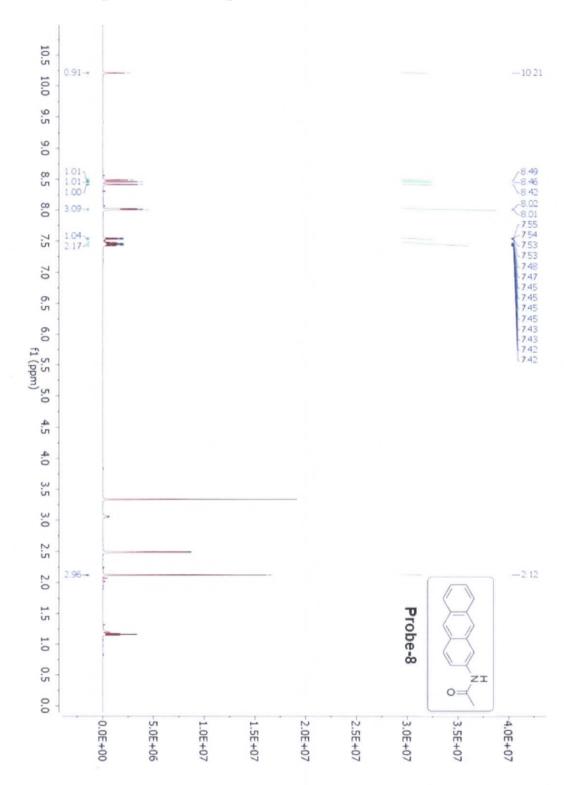
# <sup>13</sup> C NMR Spectrum of compound 7:



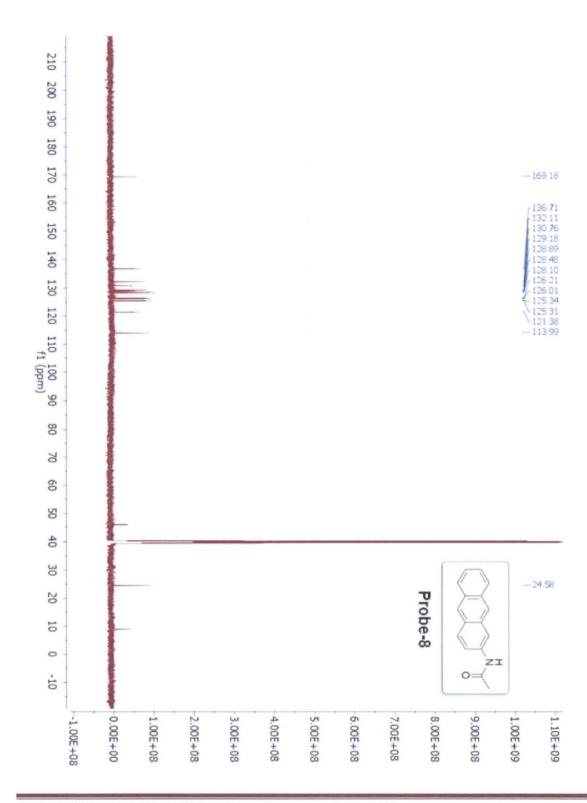
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# <sup>1</sup> H NMR Spectrum of compound 8:



# <sup>13</sup> C NMR Spectrum of compound 8:



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CHAPTER-6 CONCLUSION

# CONCLUSION:

To conclude, here we synthesized four probes. Synthesis of each probe was done by an easy single step reaction. All the compounds structures were characterized by Mass and NMR spectroscopies. All the four fluorescent probes showed naked eye detection of hydrazine at 365 nm region by fluorescence turn-on phenomenon. UV spectroscopy studies of probe 3 and Probe 7 done by titration with hydrazine.

# 

BIBLIOONVEHA

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  as Isoniazid Metabolite by a New Turn-On Fluorescent Probe: Synthesis, Live Cell
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(Approved by AICTE. P.C.I New Delhi & Affiliated to JNTUA Anantapuramu, MoU with Government General Hospital & KMC, Kurnool)

Opp. Dupadu Railway Station, Lakshmipuram (Po), N.H. 44, KURNOOL - 518 218, A.P. INDIA.

Website: www.drkvsrip.in e-mail: principalkvsrip@gmail.com

# CASE STUDY LEARNING

Case studies are a written description of a real-life problem or situation. Only the facts are provided, usually in chronologic sequence similar to what would be encountered in a patient care setting. The use of cases actively involves the students in the analysis of facts and details of the case in the traditional format called SOAP analysis, by selection of a solution to the problem and defense of his or her solution through discussion of the case details. In the case based learning students use their recall of previously learned information to solve clinical case. The case method is used primarily to develop the skills of self-learning, critical thinking, problem identification, and decision making. Working on subsequent cases with similar problems reinforces information recall. Case studies in the health sciences provides the personal history of an individual patient and information about 1 or more health problems that must be solved. The students work through the facts of the case, analyze the available data, gather more information, develop hypotheses, consider possible solutions, arrive at the optimal solution and consider the consequences of the learner's decisions. The use of the case studies and other active learning strategies will enhance the development of essential skills necessary to practice pharmacy in any setting, including community, ambulatory care, primary care, health systems. Long term care. Home health care, managed care and the pharmaceutical industry.

> Dr. K.V.S.R. Institute of Pharmacy Opp: Dupadu R. S. N. H. 44

# PHARM.D ROASTERS YEAR WISE(19-20)

# Dr. K. V. SUBBA REDDY INSTITUTE OF PHARMACY

(Approved by AICTE & PCI New Delhi, Affiliated to JNTU Anantapur, Anantapuramu, MoU with Government General Hospital, KMC, Kurnool)

Opp: Dupadu RS, N. H.-44, Lakshmipuram (Post), 'Lurnool-518218

E-ma.l: principalkvsrip@gmail.com

Cell: +919440282181, +919704333789

Fax: 08518-287618

# PHARM.D INTERNSHIP STUDENTS (VI YEAR) HOSPITAL POSTINGS

s.NO	BATCHES	March - April	May - June	July - August	September - October	November - December	January - February
1.	Ashok(14ER1T0001) Prem Chandra Reddy (14ER1T0012)	MM - I	Nephrology (May) Oncology (June)	Gynecology	Pediatrics	FM - II	FM-I
2.	Anusha(14ER1T0002) Sripriya(14ER1T0018)	MM - II	MM – I	Nephrology (July) Oncology (August)	Gyaecology	Pediatrics	FM-II
3.	A Dinesh(14ER1T0004) Radhika(14ER1T0013)	MM - III	ММ - П	MM - I	Nephrology (September) Oncology (October)	Gynecology	Pediatrics
4.	Irfana(14ER1T0006) Aparna(11Y01T0018)	FM - I	MM - III	MM - II	Pediatrics	Nephrology (November) Oncology (December)	Gynecolog
5.	Keerthana(14ER1T0007) Suvarna(14ER1T0016)	FM - II	FM - I	MM - III	Gynecology	Pediatries	(January) Oncology (February
6.	Parveen(14ER1T0011) Shafeen(14ER1T0014)	Pediatrics	FM - II	FM - I	MM - III	Nephrology (December) Oncology (November)	Gynecolog
7.	Alibar(14ER1T0009) Muazzama(14ER1T0019)	Gynecology	Pediatrics	FM - II	FM-I	MM - III	Nephrolog (February Oncology (January
8.	Sivalcela(14ER1T0015) Swetha(14ER1T0017)	Nephrology (March) Oncology (April)	Gynecology	Pediatrics	FM - II	FM - I	MM - 11

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Dr. K.V.S.R. Institute of Pharmacon
Opp: Dupadu R.S. N.H-7,
KURNOOL-518218 (A.P.)

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# HOSPITAL DUTIES AY(19-20) MAR-APRIL

NAME OF THE STUDENT	WARD NAME	
ASHOK	MM-1	
PREM CHANDRA REDDY		
	ASHOK	ASHOK MM-1

NAME OF THE STUDENT	WARD NAME	
ANUSHA	MM-1I	
SRI PRIYA		
	ANUSHA	ANUSHA MM-11

REG NUMBER	NAME OF THE STUDENT	WARD NAME	
14ER1R0004	A.DINESH	MM-1II	
14ER1R0013	RADHIKA		

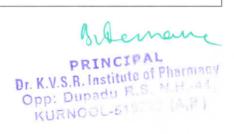
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14ER1R0006	IRFANA	FM-1	
14ER1R0018	APARNA		

REG NUMBER	NAME OF THE STUDENT	WARD NAME	
14ER1R0007	KEERTHANA	FM-11	
14ER1R0016	SUVARNA		

REG NUMBER	NAME OF THE STUDENT	WARD NAME
14ER1R0011	PARVEEN	PEDIATRICS
14ER1R0014	SHAFEENA	

REG NUMBER	NAME OF THE STUDENT	WARD NAME
14ER1R0009	AKBAR	GYNECOLOGY
14ER1R0019	MAUZAMMA	

REG NUMBER	NAME OF THE STUDENT	WARD NAME	
14ER1R0015	SIVALEELA	NEPHROLOGY	
14ER1R0017	SWETHA	ONCOLOGY	



# PHARM.D V YEAR AY(19-20):

	FHARM	- D V YEAR	HOSPITAL P	OSTINGS			
ISERITO014, S TABLE	FEBRUARY/ MARCH	APRIL/MA	JUNE/ JULY	AUGUST/ SEPTEBER	OCTOMBE R/ NOVEMBE R	DECEMBER	EANUAR
15ER ITO004, M. HABIR	SURGERY	PATIENT COUNCELLING	NEPHROLOGY	GYNECOLOGY	PAEDIATRICS	MM-II	FM-II
15ER1R0024, VINAY KUMAR	FRA-II	SURGERY	PATIENT COUNCELLING	NEPHROLOGY	GYNECOLOGY	PAEDIATRICS	MM-II
15ER1T00026, K. SHIVA KUMAR	MM-II ~	FM-II	SURGERY	PATIENT COUNCELLING	NEPHROLOGY	GAMECOFORA	PAEDIATRIC
ISER1R0023,T. RISHIKA REDDY SER1T0022,C.SHARMI	PARDIATRICS	MM-II	FM-II	SURGERY	PATIENT COUNCELLING	NEPHROLOGY	GYNECOLO
ISERITO009,U. PRATHYUSHA ISERITO010,N. SAMRKEN ISERITO019,D. YASMIN	GYNECOLOGY	PAEDIATRICS	MM-II	FM-11	SUNGERY	CASUALITY & PATIENT COUNCELLING	NEPHROLOG
15ER1T0008,V. PRAVALLIKA 15ER1T0013,P. SWOMYA 15ER1T0017,M. VINEELA	NEPHROLOGY	GYNECOLOGY	PAEDIATRICS	MNA-II	17A-11	SURGERY	CASUALITY PATIENT COUNCELLS
15ERIT0015, A. VIHARIKA 15ERIT0016, G. VIJAYA BHARATHI, 15ERIT0011 D. SHIRISHA	PATIENT COUNCELLING	NEPHROLOGY	GYNECOLOGY	PAEDIATRICS	8384-11	PM-II	SURGERY
Dr.K. Y. Sub Tallion deptation Office of the Control of the Contro	g Pharmacy				SUPER	ELNEEDENT General Hospital Kurnool	872/2010

REG NUMBER	NAME OF THE STUDENT	WARD NAME	
15ER1T0014	S.TARUN	SURGERY	
15ER1T0020	NAYEEM		
15ER1T0025	ROHITH SUBRAMANYAM		

REG NUMBER	NAME OF THE STUDENT	WARD NAME
15ER1T0004	M.HABIB	FM-II
15ER1T0006	M.HARI	
15ER1T0024	VINAY KUMAR	

REG NUMBER	NAME OF THE STUDENT	WARD NAME	
15ER1T0005	M.HARISH	MM-II	
15ER1T0021	AMAL SAJEEV		
15ER1T0026	K.SIVA KUMAR		

REG NUMBER	NAME OF THE STUDENT	WARD NAME	
15ER1T0007	R.MOUNISA	PEDIATRICS	
15ER1T0012	S.SAHERA		
15ER1T0022	T.RISHIKA REDDY		
15ER1T0023	C.SHARMILA		

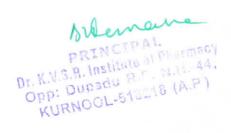


REG NUMBER	NAME OF THE STUDENT	WARD NAME
15ER1T0009	U.PRATHYUSHA	GYNECOLOGY
15ER1T0010	N.SAMREEN	
15ER1T0019	D.YASMIN	

REG NUMBER	NAME OF THE STUDENT	WARD NAME
15ER1T0008	V.PRAVALLIKA	NEPHROLOGY
15ER1T0013	P.SOUMYA	
15ER1T0017	M.VINEELA	

REG NUMBER	NAME OF THE STUDENT	WARD NAME
15ER1T0015	A.VIHARIKA	CASUALITY& PATIENT
15ER1T0016	G.VIJAYA BHARATHI	COUNCELLING
15ER1T0011	D.SIRISHA	

		215	ARM.DIV Y	2015-20	General H	POSTINGS			
			APRILIUNE	JULY	AUSUST	SEPTYMBER	OCTOBER	NOVEMBER	DECEMBER-JANUARY
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-	R1TC004	C Keerthi			2000	PSYCHIATRY	NEPHROLOGY	PEDIATRICS	DVL
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	R1T0011	M. Ram Sunil							
	F1T0028	Sheik Shabana Tasasen	1000		1 50 29				N. Carlotte
	F1T0019	Sri Krishna Jyothika	JVC	MM-6	FM-IV	MW-IV	PSYCHIATRY	NEPHROLOGY	PEDIATRICS
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	110018	B.Bhavana B. Akhila							
	R1T0003	M. Aksyltha						****	OCCUPATION .
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Dr. K. V. SUBBA REDDY INSTITUTE OF PHARMACY, KURNOOL (M.O.U. With G.G.H.KURNOOL

Batch / Month	July August	September October	PITAL POSTINGS 201 November	December	January	March
CTERITIDOS MEKALA MAMATHA 17881TIDELZ S RUKSAR SAMREEN 17881TIDES G LECHCIN RESENHA 17881TIDES M CHENNALAHGARI VAISHNAVI	Patient Counselling	Dialysis	Pediatrics	PM-00	MMC-V	256-1
TERTITIOGO KATHI LAL REDOY TERTITIOGO BABBADI CHETHAMA TERTITIOGO BOLLAVARIAM SOWIANYA TERTITIOGO BULLAVARIAM SOWIANYA TERTITIOGO BUMSHA RUKSAR TERTITIOGO D SANDYA	FM-I	Patient Counselling	Dielysis	Pediatrics	FM-III	MM-Y
LTERTIDOR ROTTELA NEERA LTERTIDOGE Y LAKSHMI CHARITHA LTERTIDOGE THAMU YAMMINI LTERTIDOGE THAMU YAMMINI LTERTIDOGE SHAIK THASLEM LTERTIDOGE SPULI DIVYA LTERTIDOGE S VISWANATH REDDY	MM-V	FM-I	Patient Courselling	Dialysis	Pediatrio	PM-88
EPERTYDOO? KATRIE BHAVANI LYERITOOO? NAYAKAANI SHINY SUSAN LYERITOOO! DARA SHAILAIA LYERITOOO! DARA SHAILAIA LYERITOOO! Y FAATHIK KUMAR	FM-III	MM-V	FM-I	Patient Counselling	Dialysis	Pediatrics
IZELITOOS KANDUKUKU SUPRAJA IZERITOOIS, S.SHARIYA TABASSUM IZERITOOIT, AMBATI PAVITRA TERITOOB MANDLA PRIYANKA SYDITOOIS SHOAIB ABDUR RAQUEEB	Pediatrics	FM-III	MM-V	FM-E	Patient Counseiling	Diadysis
TERITODIG SHAJK WASIMA NASREEN TERITODID VILMATA BHUVANESWARI TERITODIO N VILMATA BHUVANESWARI TERITODII SAKE SUKASINI TERITODII NIMMALA NAVYASREE	Dialysis	Pedlatrics	FM-III	MM-V	FM-L	Patient Courselling

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	PHARM.D II YE	EAR HOSPITAL	POSTINGS 2019-	2020		
Batch / Month	September October	November December	January	February	March	April
SERITO001 BOYA RAMADEVI						
SERITO003 GANTA EDIGA LIKITHA	Patient					1
SERITO005 JUTURU HEMALATHA	Counselling	Causuality	MM-I	Pediatrics	FM-III	FM-I
SERIT0006 KAMPAMALLA SHANMUKA	Counselling		Market Bl			
8ER1T0025 MISKIN SAHEB SHAIK ASMA						
8ER1T0002 GANGIREDDY VEERA SAI			10 3 1 1 P			
8ERIT0004 JAKKA DIVYASREE		Patient				P34 11
8ERIT0007MUNAGALA MANI PRASANNA	FM-I	Counselling	Causuality	MM-I	Pediatrics	FM-II
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SERITO008 MUNAGALA RADHIKA						
SERITOOI2 SHAIK TAHURA BATUL			Patient		MM-I	Pediatrics
SERITO014 SUDDAMALLA DURGA PAVITRA	FM-II	FM-I	Counselling	Causuality	3131-1	E CUME ICO
SERIT0027 PINJARI ANWAR BASHA						
SERIT0029 SHAIK SANA AFREEN						
SERITO017 UNUGURU JOSHITHA						
SERITUUI9 VANGARA MALLESHWARI			FM-I	Patient	Causuality	MM-I
SERITO021 JAMMANZAI ZUHA KHANAM	Pediatrics	FM-II	L-M-1	Counselling		
ERIT0024 MANTHUGARI PRANEETH						
ERIT0030 SHAIK SANAFREEN	La National					
ERIT0015 SUGALI VANI						
ERIT0016 THALIKKAL JAHNAVI			FM-II	FM-I	Patient	Causauality
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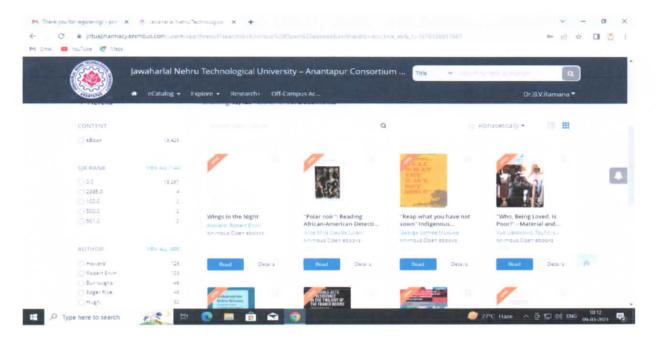
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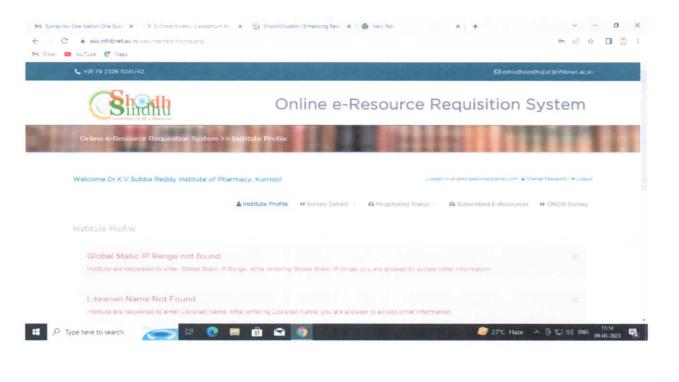
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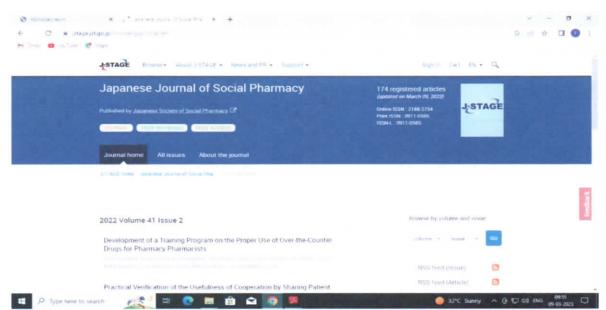
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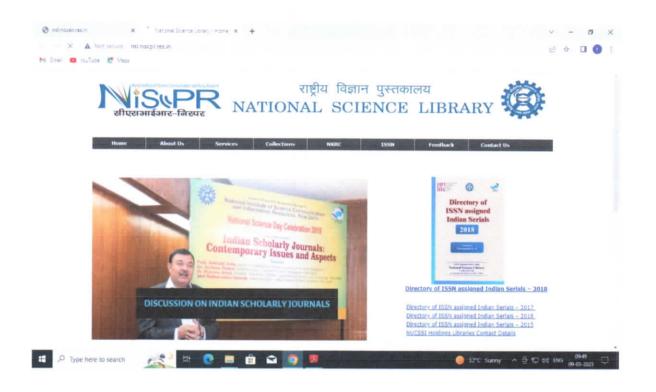
# **E-LEARNING**



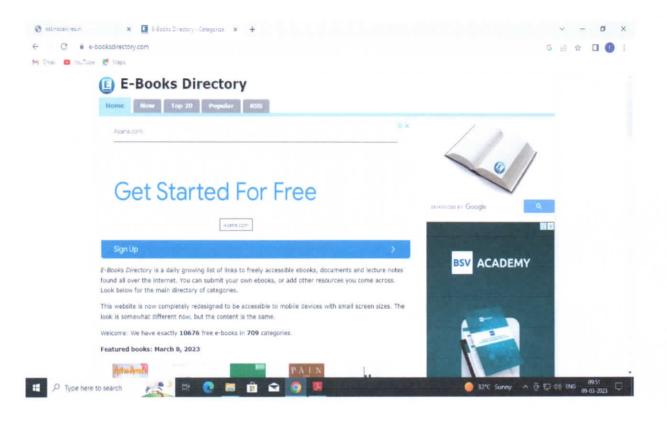
PRINCIPAL Dr. K.V.S.R. Institute of Pharmacy Opp: Dupadu R.S. N.H.: 14, KURNOOL-5187 1 LAJET



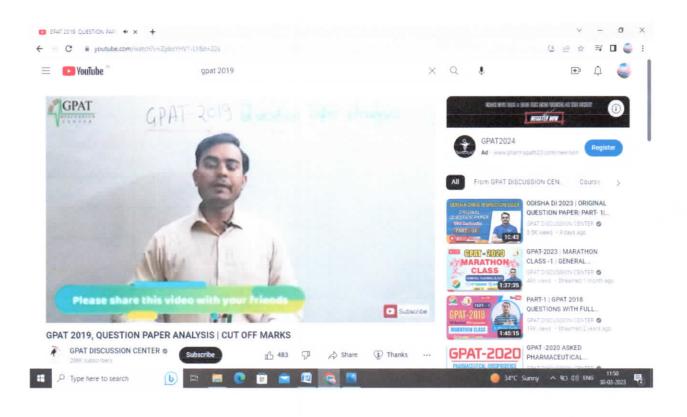




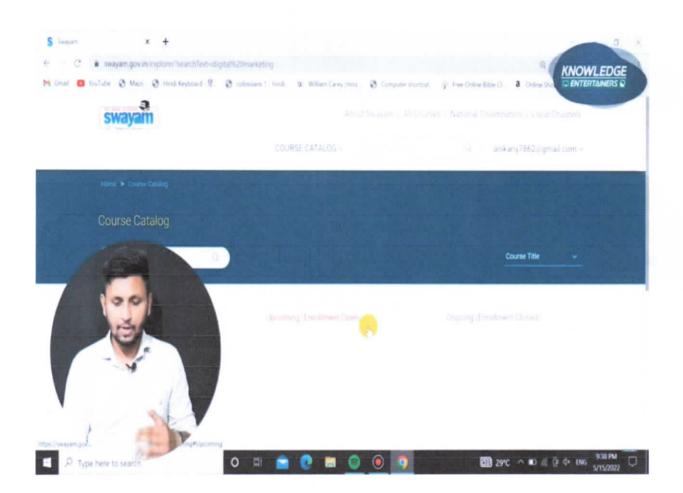












Dr. K.V.S.R. Institute at Pharmacy
Opp. Dupand (A.B.)
KURNOOL

# Number of teachers and students using the library per day over last year

Last page of accession register	Method of computing Per day usage of library	No. of users using library through e- access per day	No. of teachers accessing library per day	No. of students accessing library per day	Certified E- copy of the ledger of the data for 5days	Certified screenshots of the data for 5 days for online access
-	Gate register	195	41	355	~	-

Percentage per day usage of library by teachers and students:

Number of students=650

Number of teachers=51

Formula= (Number of teachers and students using the library perday/Total number of teachers and students) X 100

= (591/650) X100

=90.92



# Dr. K.V. Subba Reddy Institute of Pharmac. (Approved by AICTE, P.C.I New Deibi & Affiliated to JNTUA Anantapuramu.

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# **WORKSHOP & GUEST LECTURES:**

	AY @ 2019-20	
1.	One day seminar /hackathon on role and responsibility of pharma- professionals in health care	Dr. M. Kishore Babu
2.	A webinar on HPTLC-technique &herbal application of stress management in different situations	Mr. G. AVinash
3.	Seminar on Application of QbD in pharmaceutical product development	Mr. M.Vageesh
4.	Webinar on Basics and application of bio pharmaceutics in Drug Delivery System startup in life sciences.	Mr. Abhi Kumar turakhiya
5.	One day seminar on "Role of the Clinical Pharmacist on Endocrinology related diseases"	Dr. Thirumalesh Goud (CES)
6.	Conference on "Role of Clinical Pharmacist on Pain Management"	Dr. B. Chandra Sekhar
7.	Workshop on Research Methodology & Biostatistics	Dr. M. Suresh Babu (KVSRIT)
8.	One day workshop on theoretical basis for in silico methods in Biopharmaceutics and pharmacokinetics	Dr. M. Kishore Babu (Krishna Teja)
9.	One Day Workshop on Clinical Research and Regulatory Requirements	Mr. V. Rambabu
10.	One Day Workshop on Drug Safety	Mr. K. Pavan Kumar
11.	One Day Workshop on Leadership and Management skills	Dr. K. Sucharita (MBA- KVSRIT)
12.	One Day seminar on Practice opportunities for Indian Pharmacy Practice Students	Dr. Thirumalesh Goud (CES)
13.	One day webinar Pharmacometrics applications in drug development and patient care	Dr. L. Karthik
14.	One day conference on "What Properties Are Important for Antimalarials?"	Dr. N. Nanda Kishore
15.	One day webinar on "Applications and recent advances of CADD in drug discovery process"	Mrs. T. Sri Laxmi (Dr. Reddy's)



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# PHARMACY SEMINARS:

		DR F V SUBBREDDY IN ST			
		Details of Pharmary Seminary of	TUTE OF PHARMACY, DUPADU, KURNOOI.		
S.No.	Hall No.	Name of the Student	Title		
	190 K180004	BAUTRIYABAI	CELIAC DISEASE	Presentation Date	
3.	THERTRIKOT	D SREYA REDDY	CHILD AND ADOLESCENT PSYCHIATRY	9/2/2019	
3	LINERSHINGIA	GHARISHA	CHRONIC KIDNEY DISEASE	9/2/2019	
4	TREETHOUZS	K NAVANELTHA	CHRONIC LEUKEMIA	9/2/2019	
100	19EX180076	PMOUNIKA	COPD	9/2/2019	
	THE R 11000000	UNISHORE BABU	COLORECTAL CANCER	92 2019	
7	T9ER1R0093	KUNCHA MANASA	CORNEA AND EXTERNAL DISEASE	9/2/2019	
-8	INTERTROUTE	GOLLA TARUN KUMAR	CORONAVIRUS (COVID-19)	1/38/2020	
- 4	18ER1R0017	GOTLA YELLASWAMY	DENTAL AND ORAL HEALTH	1/36/2020	
10	ISERTROOTS	GUDIMARALLA KAVIN KUMAR	DEPRESSION	1/30/2020	
11	18ER1R0025	KURUVA SURESH	DIABETIC MICROVASCID AR COMPLICATIONS	1/30/2020	
122	18FRIROGS2	NARITA LIKHITA	DIALYSIS	1/30/2020	
13.	IREKTROUSS.	PALLAPU SANDYA RANI	FLECTRONIC HEALTH RECORDS	1/30/2020	
14	TRERIEDOS?	PICHIGUNTLA MARIESTI	EMERGING AND REEMFRIGING INFECTIOUS DISEASES	1/10/2020	
15	ATTEMPROMIZ:	ASUNITIA	PND-STAGE RENAL DISEASE	6/13/2018	
16.	17FR1R0000	BOYA VIDYAVANI	GALLIBLADDER AND BILLIARY DISEASE	6/13/2018	
17	17ER1R0016	DANDU MADHUSUDHAN	GENOMIC MEDICINE	6/13/2018	
18	17ER1R0019	DASHAVATHPRAVALLIKA	GFR1)	6/13/2018	
19	17FR1R0022	COLLA MADRU SHEKAR	ERECTILE DYSPUNCTION	6/13/201X	
26	17FM1R0062	BOMMAKA BHARGAVA REDDY	ETHES	0/13/2019	
21	17FR1R0067	GELTAIAH HEMALATHA	HEAD AND NECK CANCER	6/13/2018	
22	161 K1R0015	MALLEPOGU MAHESH	HEADACHI.	8/23/2017	
23	16EK1R(8018	PAGIDI MARY	BEALTH DIVERSITY	8/23/2017	
	16ER1R0025	HEKKEM PRATHYUSHA	LUNG CANCER	8/23/2017	
24 25	16FR1R0076	BHEEMAGUNTLA PRAVEEN RAL	LYME DISEASE	8.23/2017	
	16ER1R0054	DUDEKULA SHAIKAHAMED	OBJGYN AND WOMEN'S REAL THINURSING	8/23/2017	
26	16ER1R0036	SHAIK SHAKEER	OBESITY AND WEIGHT MANAGEMENT	8/23/2017	
2 N	16ER1R0079	YELLALA SRITEJA	PATIENT SAFETY	8/23/2017	
-45	THE PURISING				
			given by Pharm.D Students in Academic Year 2019-20		
			Title	Presentation Date	
S.No.	Roll No.	Name of the Student	DISULIN THERAPY	2/7/2020	
211	INERTICOUS	H ASWINI BAI	INTEGRATIVE MEDICINE	2/1/2020	
2	19ER1TU006	C SUSHMA	INTERVENTIONAL CARDIOLOGY & SURGERY	27/2020	
1	19ER1T0009	GAIGIJNIKA	RENAL CELL CARCINOMA	2/7/2020	Mary Billion
4	(9ERITOKI)	K SAI CHATTHANYA	REPRODUCTIVE ENDOCRINOLOGY	2:7/2020	0 0
C 5. 10	19ER(10015)	V VAMSI KRISHNA	RESIDENTS	2/2/2020	
6	19630170017	BATENKATESH	RESTLESS LEGS SYNDROME	2/7/2020	ODENTIPAL
7 100	190 R11001X	BARDUNIKA	RHEUMATOID ARTHRITIS	4/11/2019	pp: Dapadu R.5. N

PRESIDENCE			
	ME NAGALA MANUPRASANNA	SCHOOLINE NA	431 7019
- PANCELL TREATS	MURAHARI SUJANA DOMA	PEDISTRIC DERMATOLOGY	4/1/2019
188-9171-012	SUAIS TABLINA BATUS	PEDIATRIC OPERFICAÇÃO	4/11/2019
[81/III/[907]7 ]	UNI GURU JOSHITHA	LRINARY INCOMPRENCE & DAIL	4/11/2019
18E-91 F09022	KASSATHAMBELBUILANA		4/7 / 2010
	DARA SHAILAIA		0/242019
	V VAMSI KRISHNA	MEDICAL MALPRACTICE AND LEGAL DOLLS	6/24/2619
	KATIKI BRAVASI	AIFDICAL PRACTICE MANAGEMENT	6/34/2019
	ANDIATTEAVIDEA		6/24/2019
	PAVITHRA		6/24/2019
	PLEADIVYA	SPINAL DISORDERS	6/24/2019
THE RETURNS	REMNHA RUKKAR	PERTICULCER DISEASE.	6/24/2019
	PATHAN JAVIOD	PERIOPERATIVE NURSING	11/2/2017
		PNI-DABONIA	11/2/2017
		MIGRAINE	11/2/2017
		MINIMALLY INVASIVE GASTROINTESTINAL SURGERY (MIGS)	11/2/2017
	SHAIK SUMERA IRHAM	MODERATE TO SEVERE AS OBMA	11/2/2017
			11/2/2017
AND RELIDITE	BOGYAM BRAVANA	KIDNEY & PANEBEAS TRANSPLANT	11/2/2017
			CHINCIPAL &
		Dr. X.	WETTER MAN
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PRINCIPAL

# Dr. K. V. SUBBA REDDY INSTITUTE OF PHARMACY



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MoU with Government General Hospital, KMC, Kurnool)

Opp: Dupadu RS, N.H-44, Lakshmipuram (Post), Kurnool-518218

E-mail:principalkvsrip@gmail.com

Cell: +919440282181, +919704333789

Fax: 08518-287618

# DEPARTMENT OF PHARMACY (2019-2020)

# CIRCULAR

DATE: 17/08/2019

All the faculty and students here by informed that the Group Discussion Program will be conducted for B pharmacy & Pharm.D students on the 19<sup>th</sup> August 2019 as per the following schedule. All the faculty & students are instructed to note the same and attend the program as per the schedule.

Copy to faculty members

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KURNOOL-5 (8218 (A.P.)



MoU with Government General Hospital & KMC, Kurnool)

Opp. Dupadu Railway Station, Lakshmipuram (Po), N.H. - 44, KURNOOL - 518 218, A.P. INDIA.

Website: www.drkvsrip.in e-mail: principalkvsrip@gmail.com

# **Group Discussion Session**

AY: 2019-2020

Group Discussions help to check students 'interactive skills and how effective they are in communicating with people. The GD is to check how one behave, participate and contribute in a group, how much importance do you give to the group objective as well as your own, how well do you listen to viewpoints of others and how open-minded are you in accepting views contrary to your own.

The aspects which make up a GD are verbal communication, non-verbal behavior, and conformation to norms, decision-making ability and cooperation. The following skills are required in GD

- ♦ Communication Skills
- ♦ Interpersonal Skills
- ♦ Leadership Skills
- ♦ Motivational Skills
- ♦ Team Building Skills
- ◆ Tolerance
- ♦ Clarity over Ambiguity
- ♦ Divergent Thinking
- ♦ Listening skills
- ♦ Presentation Skills
- ♦ Analytical / Logical skills

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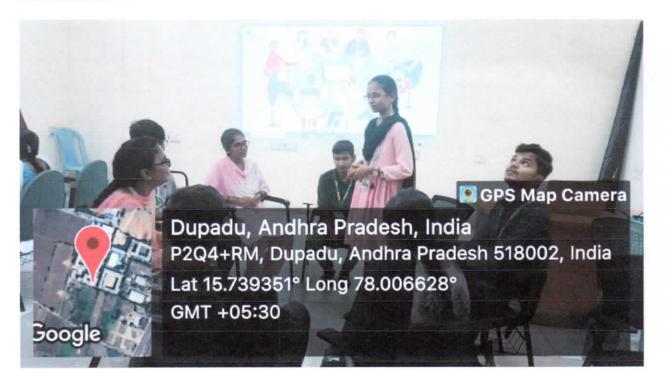
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MUPRISH MITERIAL (M.P.)

# Topic:

# Cost of treatment at private health care centre should be capped too:

The corona virus pandemic has served to rewrite the priorities of the country's healthcare system. The surge in the number of cases and the lopsided nature of the medical facilities available, where the government sector is woefully inadequate while the private sector is mostly beyond the reach of the majority, have meant a resetting of the strategy by seeking to make the treatment affordable.



Private hospitals, on their part, have maintained that the capping of the cost is unfair as it also means treating the underlying co-morbidities. The focus has to be on clinical outcome, not just the cost. The high cost of treatment in private hospitals has also been ascribed to the health cess imposed in this year's Budget on the import of medical equipment which most private hospitals do to provide specialised healthcare. Actually, therefore, the initiative to put a cap on the cost of treatment should have come from the Centre itself, instead of leaving it to the states.

Dr. K.V.S.A. Institute of Pharmacy
Opp: Dupadu R.S. N.H. J. J.
KURNOOL-548218 (A.P.)



Batch of 19 B.Pharm students attended the session conducted on 19/08/2019.

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Cell: +919440282181, +919704333789

Fax: 08518-287618

# DEPARTMENT OF PHARMACY (2019-2020)

# CIRCULAR

DATE: 13/06/2019

All the faculty and students here by informed that the Debate Program will be conducted for B pharmacy & Pharm.D students on the 15/06/2019 as per the following schedule. All the faculty & students are instructed to note the same and attend the program as per the schedule.

Copy to faculty members

Dr. K.V.S.R. Institute of Pharmacy Opp: Dupadu R.S. N.H.-44

KURNGOL-518218 (A.P.)



## Debate

AY: 2019-2020

Debate is a process that involves formal discourse on a particular topic, often including a moderator and audience. In a debate, arguments are put forward for common opposing viewpoints. Debates have historically occurred in public meetings, academic institutions, debate halls, coffee houses, competitions, and legislative assemblies. Debates has also been conducted for educational and recreational purposes, usually associated with educational establishments and debating societies.

- 1.Develop excellent oral and written communication skills.
- 2.Develop excellent critical thinking skills.
- 3. Develop effective tools for research, organization and presentation.
- 4. Develop strategies to overcome fears of public speaking.
- 5. Discover the confidence and desire to participate in all academic classes.

## Benefits:

- Confidence Belief in themselves and their abilities, and the desire to participate in all classes.
- Curiosity The passion of discovery through effective tools for research, organization and presentation.
- Critical Thinking How to explore the world through the lens of an inquisitive mind.
- Communication Oral & written skills and strategies for lively yet respectful discussions & disagreements.
- Control Eliminate the fears of public speaking.
- Creativity The desire to explore, create and invent.
- Camaraderie Meet like-minded peers at tournaments and build healthy bonds of competition.
- Leadership Self-motivation and the ability to delegate assignments and manage peers.

Debates teaches individuals the importance of being prepared to listen. First, it trains people in the mental preparation of listening – having a listening plan. During a debate you listen for specific things, points you want to answer, weakness in logic, supporting material and key points.

# Summary

Using debates in the classroom provides students the opportunity to explore real-world topics and issues. Debates also engage students through self reflection and encourage them to learn from their peers.

Sheman

# Topic:

# Does social media affect teenager??

In this 21st century, with the advancement of technology, the internet is available to everyone, no longer being confined to metropolitan cities or internet cafes. It has crossed the threshold and is available at our fingertips. With the spread of the internet, there is a rise in the use of social media and specially there is a hike in usage by teens. Though there is an age limit provided by some of these social media platforms but there is no hard and fast rule and by just altering your birth year, you're good to go.



Using Social media has its own set of pros and cons. They affect a child in both positive as well as negative ways. There is an ongoing debate about whether or not high school goers should be allowed to use social media. But, the harsh truth is that it is beyond our control. So we have to



digest the fact that teens will use social media even if we don't want them to. However, social media use can also negatively affect teens, distracting them, disrupting their sleep, and exposing them to bullying, rumor spreading, unrealistic views of other people's lives and peer pressure. The risks might be related to how much social media teens use.



A debate on "Does social media affect teenager??" was conducted on 15/06/2019 and the students of CSE branch have actively participated in this session.

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Dr. K.V. Subba Reddy Institute of Pharmac;
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Opp. Dupadu Railway Station, Lakshmipuram (Po), N.H - 44, KURNOOL - 518 218, A.P. INDIA
Website: www.drkvsrip.in e-mail: principalkvsrip@gmail.com

Date: 28/09/2019

### DEPARTMENT OF PHARMACY (2019-2020)

#### CIRCULAR

All the I year B. pharmacy faculty and students here by informed that the bridge course will be conducted for I year B. pharmacy & Pharm.D students on 7/10/2019 as per the following schedule. All the faculty & students are instructed to note the same and attend the classes as per the schedule.

S.NO	DATES	TIME	SUBJECT	FACULTY
1.	07-10-2019 TO 011-10- 2019	9-10AM	PHARMACEUTICAL CHEMISTRY	Dr.N.PADMAJA
2	07-10-2019 TO 011-10- 2019	10-11AM	PHARMACEUTICAL ANALYSIS	P. T.NAGA RAJU
3	07-10-2019 TO 011-10- 2019	11-12PM	MATHEMATICS/BIOLOGY	V.ANU RADHA/ARUNA MADAM
4	07-10-2019 TO 011-10- 2019	2-3PM	COMMUNICATION SKILLS	S.SREELEKHA

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KURNOOL-518218 (A.P.)

### PHARMACEUTICAL CHEMISTRY:

S.NO	TOPIC NAME	NO.OF HOURS
1	Introduction to pharmaceutical chemistry	2
2	Basics of chemistry	.2
3	General preparations and methods of compounds	2
4	methods of radio pharmaceuticals preparations	2
5	Basic tests for purity of compounds	2
	Total	10

#### PHARMACEUTICAL ANALYSIS:

S.NO	TOPIC NAME	NO.OF HOURS
1	Basic concepts of analaysis	2
2	Basic theories of titration methods	2
3	Different preparation & Methods of standardization	2
4	Concepts of oxidation & reduction	2
5	Methods of electro chemical methods of analysis	2
	Total	10

Dr. M.V.S. M. Masting S. S. A. P. M. P. Opp. Dupadu R.S. 18218 (A.P.)

Opp. Dupadu R.S. 18218 (A.P.)

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Dr. K.V.S.R. Institute of Pharmacy

Opp: Dupadu R.S. N.H.-44

KURN⊕OL-518218 (A.P.)

#### **MATHEMATICS:**

S.NO	TOPIC NAME	NO.OF HOURS
1	Theory and their application in pharmacy	2
2	Solving different types of problems by applying theory	2
3	Basic introduction of Logarithms	2
4	Basic introduction of Matrices and Determinant	2
5	Applications in solving chemical kinetics and pharmacokinetic equations	2
	Total	10

#### COMMUNICATION SKILLS:

S.NO	TOPIC NAME	NO.OF HOURS
1	Learning Basic communication skills	2
2	basic learning of listening skills	2
3	Basic understanding of writing skills	2
4.	Learning of presentation skills	2
5	Learning of interview skills	2
	Total	10

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Opp: Dupadu R.S. N.H.-44,

KURNOOL-518218 (AP)

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Dr. K.V.S.R./Institute of Pharmacy Opp: Dupadu R.S. N.H.-44 KURNOOL-518218 (A.P)

Dr. K.V.S.R. Institute of Pharmacy
Opp: Dupadu R.S. N.H.-44
KURN&OL-518218 (A.P.)



Date: 5/10/2019

### DEPARTMENT OF PHARMACY (2019-2020)

#### CIRCULAR

All the II year B. Pharmacy faculty and students here by informed that the bridge course will be conducted for II year B.Pharmacy later entry students on 09-10-2019 to 12-10-2019 as per the following schedule. All the faculty & students are instructed to note the same and attend the classes as per the schedule

S.NO	DATES	TIME	SUBJECT	FACULTY
1	09-10-2019 to 12-10- 2019	10-11AM	PHARMACEUTICALCHEMISTRY	R.MOHANA PRIYA
2	09-10-2019 to 12-10- 2019	11-12PM	COMPUTER APPLICATIONS	S.FATHIMA

COPY TO FACULTY MEMBERS

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Opp: PRINCIPAL IS (A.S.)

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Dr. K.V.S.R. Institute of Pharmacy
Opp: Dupadu R.S. N.H.-44,
KURNOOL-518218 (A P)

### CHEMISTRY:

S.NO	TOPIC NAME	NO.OF HOURS
1	Introduction to pharmaceutical chemistry	2
2	Basics of chemistry	2
3	General preparations and methods of compounds	2
4	methods of radio pharmaceuticals preparations	2
5	Basic tests for purity of compounds	2
	TOTAL	10

### COMPUTER APPLICATIONS:

S.NO	TOPIC NAME	NO.OF HOURS
1	Types of applications of computers in pharmacy	2
2	Concepts of information system and softwares used in pharmacy	2
3	Web technologies (HTML,XML,CSS,MS ACCESS)	2
4	Objectives of Bio informatics	2
5	Data analysis in pre clinical development	2
	TOTAL	10

PRINCIPAL

Dr. K.V.S.R. Institute of Plantary

Opp: Dupadu R.S. National

KURNOOL-516218 (A.P.)

PRINCIPAL

Dr. K.V.S.R. Institute of Pharmacy

Opp: Dupadu R.S. N.H.-44.

KURN@OL-518213 (A P)

# DR.K.V.SUBBAREDDY INSTITUTE OF PHARMACY, DUPADU, KURNOOL (AY:19-20)

#### PHARMACEUTICAL CHEMISTRY:

S.NO	NAME OF THE STUDENT	9/10/2019	10/10/19	10/10/19	12/10/19
19ER5R0001	P.BHARATH KUMAR REDDY	1		\(\sigma\)	V
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19ER5R0003	M.MOHAMMED KALID	V		V	V
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#### COMPUTER APPLICATIONS

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Dr. K.V.S.H. Institute of Pharmacy Opp: Dupadu R.S. N.H.-44, KURNOOL-518218 (A.P.)

PRINCIPAL

Dr. K.V.S.R. Institute of Pharmacy

Opp: Dupadu R.S. N.H.-44.

KURNOOL-518218 (A.P.)



Website: www.drkvsrip.in e-mail: principalkvsrip@gmail.com

Date:21/09/2019

### DEPARTMENT OF PHARMACY (2019-2020) CIRCULAR

All the B.Pharmacy faculty and students here by informed that the Remedial classes will be conducted for B. Pharmacy & Pharm.D students on 23/09/2019 to 28/10/2018 as per the following schedule. All the faculty & students are instructed to note the same and attend the classes as per the schedule

Copy to the faculty members

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Opp. Dupadu Railway Station, Lakshmipuram (Po), N.H - 44, KURNOOL - 518 218, A.P. INDIA
Website: www.drkvsrip.in e-mail: principalkvsrip@gmail.com

### Department of B. Pharmacy

Following are the students from B. pharmacy II, III & IV years I semester who need to attend remedial classes without fail.

		II Year I Sem		
18ER1R0001	18ER1R0008	18ER1R0013	18ER1R0015	18ER1R0017
18ER1R0018	18ER1R0034			

		III Year I Sem		
17ER1R0008	17ER1R0044	17ER1R0059	17ER1R0062	17ER1R0065
17ER1R0069	17ER1R0077			

		IV Year I Sem		
16ER1R0018	16ER1R0026	16ER1R0035	16ER1R0049	16ER1R0072
16ER1R0073	16ER1R0074			

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OPP: Dupadu S18218

PRINCIPAL

PRINCIPAL

OR: K.V.S.R. Institute of Pharmacy

Opp: Dupadu R.S. N.H.-44,

KURNOOL-518218 (A P)

## Department of B. Pharmacy

#### Timetable for Remedial Classes

Year & Sem: II - I

Academic Year: 2019-20

Sign	Venue	Subject	Faculty	Timings	Day
13.19. Qu	Room No.102	PE	B.V.RAMANA	5:00PM - 6:00PM	Monday
9000	Room No.102	PP	S.K.RUBINA	5:00PM - 6:00PM	Tuesday
	Room No.102	PP	S.K.RUBINA	5:00PM - 6:00PM	Tuesday

Year & Sem: III - !

Academic Year: 2019-20

Day	Timings		Subject	Venue	Sign
Monday	5:00PM - 6:00PM	K.SARA SIRISHA	MOOCS	Room No.103	KSS
Tuesday	5:00PM - 6:00PM	K.CHANDRASEK HAR	MC-I	Room No.103	OS

Voor & Some IV - I

Apademia Veer 2019.20

			Subject		Sign
Monday	5:00PM - 6:00PM	R.MOHANA PRIYA		Room No.104	Apringa
	5:00PM - 6:00PM		ME	Room No.104	Relevy

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Dr. K.V.S.R. Institute of Pharmacy

Opp: Dupadu R.S. N.H.-44,

KURNOOL-518218 (A.P.)



Dr. K.V. Subba Reddy Institute of Pharmac (Approved by AICTE, P.C. I New Delhi & Affiliated to JNTUA Anantapuramu, McU with Government General Hospital & KMC, Kurnool)

Opp. Dupadu Railway Station, Lakshmipuram (Po), N.H. - 44, KURNOOL - 518 218, A.P. INDIA Website: www.drkvsnp.in e-mail: principalkvsrip@gmail.com

### Department of B.Pharmacy

#### Attendance for Remedial Classes

Course Name: PE

Year: Il - I

Course Faculty: B.V.RAMANA

A.Y: 2019-20

S. No.	Roll No.	23-09-2019	30-09-2019	07-10-2019	14-10-2019	21-10-2019	28-10-2019
1	18ER1R0001	X	~	/	~	V	
2	18ER1R0008		V	×	W	~	~
3	18ER1R0013	V	V		V	1	
4	18ER1R0015	V	×	1/			~
5	18ER1R0017	×	~	V		~	V
6	18ER1R0018	V			×		V
7	18ER1R0034		V	×			1
Fa	culty Sign	15 cg =	Sia	00	SIA	Brt	168

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Opp. Dupadu Railway Station, Lakshmipuram (Po), N.H - 44, KURNOOL - 518 218, A.P. INDIA Website: www.drkvsrip.ln e-mail ; principalkvsrip@gmail.com

### Department of B. Pharmacy

#### Attendance for Remedial Classes

Course Name: PP

Year: II - I

Course Faculty: S.K.RUBINA

A.Y: 2019-20

					-920-		
S. No.	Roll No.	24-09-2019	1-10-2019	08-10-2019	15-10-2019	22-10-2019	29-10-2019
1	18ER1R0001	4		1		1	
2	18ER1R0008		1			×	1
3	18ER1R0013	-	×	1	1		
4	18ER1R0015		1	×			1
5	18ER1R0017	1			V	/	×
6	18ER1R0018	V	2	1	×		-
7	18ER1R0034	×				V	1
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KURNOOL-518218 (A P)



Department of B.Pharmacy

### Attendance for Remedial Classes

Course Name: MOOCS

Course Faculty: K.SARA SIRISHA

Year: III - I A.Y: 2019-20

S. No.	Roll No.	23-09-2019	30-09-2019	07-10-2019	14-10-2019	21-10-2019	28-10-2019
1	17ER1R0008	X	V	1		1	1
2	17ER1R0044		×	1		1	
3	17ER1R0059		./		×		1
4	17ER1R0062			~			
5	17ER1R0065	×	V			1	
6	17ER1R0069			-	IR	~	×
7	17ER1R0077	X					1
F	eulty Sign	8	-8-	8	P	al-	8

OPP. DUPAOL-518210 (A.P.)

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Dr. K.V.S.R. Institute of Pharmacy

Opp: Dupadu R.S. N.H.-44,

KURN@OL-518218 (A.P.)



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### Department of B.Pharmacy

### Attendance for Remedial Classes

Course Name: MC-1

Year: III - I

Course Faculty: K.CHANDRASEKHAR

A.Y: 2019-20

S. No.	Roll No.	24-09-2019	1-10-2019	08-10-2019	15-10-2019	22-10-2019	29-10-2019
1	17ER1R0008	×		1			
2	17ER1R0044						
3	17ER1R0059	1_		4		1	
4	17ER1R0062	_					Y
5	17ER1R0065		×				
6	17ER1R0069			~	×		1
7	17ER1R0077		-		V		
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Dr. K.V. Subba Reddy Institute of Pharmac;
(Approved by AICTE, P.C. I New Delhi & Affiliated to JNTUA Anantapuramu,
MoU with Government General Hospital & KMC, Kurnool)

Opp. Dupadu Bailway Station, Lakshmipuram (Po), N.H - 44, KURNOOL - 518 216, A.P. INDIA
Website: www.drkvsrip.in e-mail: principalkvsrip@gmail.com

### Department of B.Pharmaty

### Attendance for Remedial Classes

Course Name: PV

Year: IV-I

Course Faculty: R.MOHANA PRIYA

A.Y: 2019-20

S. No.	Roll No.	23-09-2019	30-09-2019	07-10-2019	14-10-2019	21-10-2019	28-10-2019
1	16ER1R0018		×				
2	16ER1R0026			X	~		
3	16ER1R0035			1			×
4	16ER1R0049		X				1
5	16ER1R0072		X		1		-
6	16ER1R0073			X			1
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Dr. K.V.S.R. Institute of Pharmacy Opp: Dupadu R.S. N.H.-44, KURNOOL-518218 (A.P.)

Cell: 09704 333 78

Dr. K.V. Subba Reddy Institute of Pharmac (Approved by AICTE P.C. I New Delhi & Affiliated to JNTUA Anantapuramu, MoU with Government General Hospital & KMC, Kurnool)

Opp. Dupadu Railway Station, Lakshmipuram (Po), N.H. - 44, KURNOOL - 518 218, A.P. INDIA Website: www.drkvsrip.in e-mail: principalkvsrip@gmail.com

### Department of B.Pharmacy

#### Attendance for Remedial Classes

Course Name: MC

Year: IV-I

Course Faculty: B.LAVANYA

A.Y: 2019-20

S. No.	Roll No.	24-09-2019	1-10-2019	08-10-2019	15-10-2019	22-10-2019	29-10-2019
1	16ER1R0018				~	×	
2	16ER1R0026		X			~	
3	16ER1R0035			~		×	
4	16ER1R0049	X	~	~		~	2
5	16ER1R0072		X				
6	16ER1R0073	X					
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Cell: 09704 333 78

Dr. K.V. Subba Reddy Institute of Pharmac

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Opp. Dupadu Railway Station, Lakshmipuram (Po), N.H - 44, KURNOOL - 518 218, A.P. INDIA
Website: www.drkvsrip.in e-mail: principalkvsrip@gmail.com

### Department of Pharm.D

#### Timetable for Remedial Classes

Year & Sem: II

Academic Year: 2019-20

Day	Timings	Faculty	Subject	Venue	Sign
Monday	5:00PM - 6:00PM	Dr.K.VENNELA	PT	Room No.102	N. N
Tuesday	5:00PM - 6:00PM	R.JONA METHUSALA	P.COL	Room No.102	nm

Year & Sem: III

Academic Year: 2019-20

Day	Timings	Faculty	Subject	Venue	Sign
Monday	5:00PM - 6:00PM	R.MOHANA PRIYA	MC-1	Room No.103	spires
Tuesday	5:00PM - 6:00PM	DR.S.KUSUMA KUMARI	PT	Room No.103	Ho

Year & Sem: IV

Academic Year: 2019-20

Day	Timings	Faculty	Subject	Venue	Sign
Monday	5:00PM - 6:00PM	Dr.C.H.NAVEEN KUMAR	BS	Room No.104	CHA
Tuesday	5:00PM - 6:00PM	B.V.RAMANA	BPPK	Room No.104	3 MC

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MoU with Government General Hospital & KMC, Kurnool)

Opp. Dupadu Railway Station, Lakshmipuram (Po), N.H - 44, KURNOOL - 518 218, A.P. INDIA Website: www.drkvsrip.in e-mail: principalkvsrip@gmail.com

### Department of Pharm.D

Following are the students from PHARM.D II, III & IV years semester who need to attend remedial classes without fail.

		II Year		
18ER1T0003	18ER1T0014	18ER1T0019	18ER1T0027	

		III Year		
17ER1T0018	17ER1T0023	17ER1T0025	17ER1T0026	

		IV Year		
16ER1T0016	16ER1T0023	16ER1T0027	16ER1T0030	

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Dr. K.V. Subba Reddy Institute of Pharmac,
(Approved by AICTE, P.C.I New Delhi & Alfiliated to JNTUA Anantapuramu,
MoU with Government General Hospital & KMC, Kurnool)
Opp. Dupadu Railway Station, Lakshmipuram (Po), N.H - 44, KURNOOL - 518 218, A.P. INDIA Website: www.drkvsrip.in

### Department of Pharm .D

#### Attendance for Remedial Classes

Course Name: PHARMACOLOGY

Year: II

Course Faculty: R.JONA METHUSALA

A.Y: 2019-20

S. No.	Roll No.	21-09-2019	28-09-2019	05-10-2019	12-10-2019	19-10-2019	26-10-2019
1	18ER1T0003			V			
2	18ER1T 0014	,×	~				
3	18ER1T 0019	1	V	×			
4	18ER1T 0027		×			_	
Fa	culty Sign	en	LM	Kem	Rem	am	rom

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MoU with Government General Hospital & KMC, Kurnool)
Opp. Dupadu Railway Station, Lakshmipuram (Po), N.H - 44, KURNOOL - 518 218, A.P. INDIA Website: www.drkvsrip.in e-mail: principalkvsrip@gmail.com

### Department of Pharm .D

### Attendance for Remedial Classes

Course Name: PT

Year: II

Course Faculty: Dr.K. VENNELA

A.Y: 2019-20

S. No.	Roll No.	21-09-2019	28-09-2019	05-10-2019	12-10-2019	19-10-2019	26-10-2019
5. 110.			20 07 2017	00 10 2017	12 10 2017	17-10-2017	20 10 2017
1	18ER1T0003	V	X			1	1
2	18ER1T 0014						X
3	18ER1T 0019	X					
4	18ER1T 0027					1	
Fa	culty Sign	Qu)	(A)	XX	(X)	20	Q.

Dr. K.V.S.R. Institute of Pharmacy Opp: Dupadu R.S. N.H.-44. KURNOOL-518218 (A PA



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MoU with Government General Hospital & KMC, Kurnool)
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### Department of Pharm.D

#### Attendance for Remedial Classes

Course Name: MC-1

Year: III

Course Faculty: R.MOHANA PRIYA

A.Y: 2019-20

S. No.	Roll No.	21-09-2019	28-09-2019	05-10-2019	12-10-2019	19-10-2019	26-10-2019
1	17ER1T 0018		X	~	~	~	
2	17ER1T 0023	1/			/		X
3	17ER1T 0025		×		-		
4	17ER1T 0026					X	
Fa	culty Sign	DAR	MD	Ma	MP.	de P	AND

Dr. K.V.S.R. Institute of Pharmacy Opp: Dupadu R.S. N.H.-44 KURNOOL-518218 (A.P.)

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Opp. Dupadu Railway Station, Lakshmipuram (Po), N.H.-44, KURNOOL - 518 218, A.P. INDIA Website: www.drkvsrip.in e-mail: principalkvsrip@gmail.com e-mail: principalkvsrip@gmail.com

### Department of Pharm.D

### Attendance for Remedial Classes

Course Name: PT-II

Year: III

Course Faculty: DR.S.KUSUMA KUMARI

A.Y: 2019-20

S. No.	Roll No.	21-09-2019	28-09-2019	05-10-2019	12-10-2019	19-10-2019	26-10-2019
1	17ER1T 0018			×	/		
2	17ER1T 0023			V			
3	17ER1T 0025		X				
4	17ER1T 0026						X
Faculty Sign		de	d	de-	CK:	K	da

Dr. K.V.S.R. Institute of Pharmacy Opp: Dupadu R.S. N.H.-44 KURNOOL-518218 (AP)



Website: www.drkysrip.in e-mail: principalkysrip@gmall.com

### Department of Pharm.D

#### Attendance for Remedial Classes

Course Name: BS

Year: IV

Course Faculty: Dr.C.H.NAVEEN KUMAR

A.Y: 2019-20

S. No.	Roll No.	21-09-2019	28-09-2019	05-10-2019	12-10-2019	19-10-2019	26-10-2019
1	16ER1T0016	X	~				
2	16ER1T0023	~			· V		1
3	16ER1T0027	1	X				
4	16ER1T0030	~			1		1
Faculty Sign		CVA	CHAR	CHA	CHA	CAHD	CHO

Silermana Dr. K.V.S.R. Institute of Pharmacy Opp: Dupadu R.S. N.H.-44 KURNOOL-518218 (A.P.)



Dr. K.V. Subba Reddy Institute of Pharmac,
(Approved by AICTE. P.C.) New Delhi & Affiliated to JNTUA Anantapuramu,
MoU with Government General Hospital & KMC, Kurnool)
Opp. Dupadu Railway Station, Lakshmipuram (Po), N.H. - 44, KURNOOL - 518 218, A.P. INDIA e-mail: principalkvsrip@gmail.com

### Department of Pharm.D

#### Attendance for Remedial Classes

Course Name: BPPK

Year: IV

Course Faculty: B.V.RAMANA

A.Y: 2019-20

S. No.	Roll No.	21-09-2019	28-09-2019	05-10-2019	12-10-2019	19-10-2019	26-10-2019
1	16ER1T0016	~	1				
2	16ER1T0023		×		~	~	
3	16ER1T0027	X					
4	16ER1T0030		/	X	~	1	/
Faculty Sign		314c	34	- B19-c	134	BUR	DV8

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MoU with Government General Hospital & KMC, Kurnool)

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Website: www.drkvsrip.in e-mail: principalkvsrip@gmail.com

### **Department of Pharmacy**

### **Laboratory Sessions**

Branch: B.Pharmacy

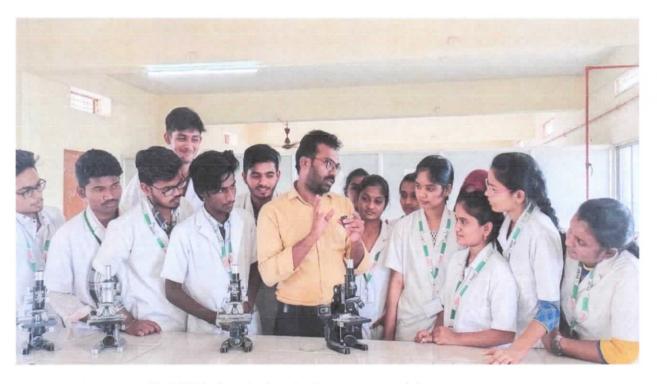


Fig1.1 T.S of crude drug in pharmacognosy laboratory

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Regulation: R15



Fig 1.2 Experimental lab on limit test in Pharmaceutical Inorganic Chemistry lab

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### **Department of Pharmacy**

**Laboratory Sessions** 

Branch:Pharm.D Regulation: R15



Fig 1.3 Experimental lab in Microbiology laboratory

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KURNOOL-518218 (A.P.)



Fig 1.4 Experimental lab in Pharmaceutical Analysis laboratory

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Opp: Dupadu R.S. N.E. 14,
KURNOOL-518216 (A.P.)



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Opp. Dupadu Railway Station, Lakshmipuram (Po), N.H - 44, KURNOOL - 518 218, A.P. INDIA.
Website: www.drkvsrip.in e-mail: principalkvsrip@gmail.com

### **PharmaQuiz**

The Department of Pharmacy has conducted a **Pharma Quiz Competition** in the college auditorium on 02<sup>nd</sup> Sep 2019 under Pharmacy students Chapter in which four different teams with five participants in each group gave tough battle to each other. Principal of the college Dr.B.V.Ramana Garu presented mementos to the winners.



Fig 1: Presenting Mementos to the winners by Principal

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Opp. Dupadu Railway Station, Lakshmipuram (Po), N.H - 44, KURNOOL - 518 218, A.P. INDIA.

Website: www.drkvsnp.in e-mail: principalkvsnp@gmail.com

### **Department of Pharmacy**

#### **Think Pair Share Session**

**AY:** 2019-20

Think-Pair-Share (TPS) is a cooperative learning activity that can work in varied size classrooms and in any subject. Instructors pose a question, students first THINK to themselves prior to being instructed to discuss their response with a person sitting near them (PAIR).

In other words, Think-pair-share (TPS) is a collaborative learning strategy where students work together to solve a problem or answer a question about an assigned reading. This strategy requires students to (1) think individually about a topic or answer to a question; and (2) share ideas with classmates. Discussing with a partner maximizes participation, focuses attention and engages students in comprehending the reading material.

- It helps students to think individually about a topic or answer to a question.
- It teaches students to share ideas with classmates and builds oral communication skills.
- It helps focus attention and engage students in comprehending the reading material.



Fig.1: Students during a Think Pair Share Session

Batch of 65 Pharmacy students attended the session conducted on 20/1/2020.

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KURNOOL-518218 (A.P.)



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Opp. Dupadu Railway Station, Lakshmipuram (Po), N.H - 44, KURNOOL - 518 218, A.P. INDIA.
Website::www.drkvsrip.in e-mail::principalkvsrip@gmail.com

#### **CLUB ACTIVITIES:**

This club activities is organized by students as well as faculty members is to promote & enhance activity in educational institution .this kind of activities empower the students analytical interpretation skills. It provide familiarize members with emerging trends in the field of pharmacy. It provide environment for learning inter disciplinary academic research.





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KURNOOL-518218 (A.P.)



### Dr. K. V. SUBBA REDDY INSTITUTE OF PHARMACY

(Approved by AICTE & PCI New Delhi, Permanent Affiliated to JNTU Anantapur, Anantapuramu,
MoU with Government General Hospital, KMC, Kurnool)
Opp: Dupadu RS, N.H-44, Lakshmipuram (Post), Kurnool-\$18218
E-mail:principalkvsrip@gmail.com
Cell: +919440282181, +919704333789
Fax: 08518-287618

DATE:07/12/2019

### DEPARTMENT OF PHARMACY (2019-2020)

### CIRCULAR

All the faculty and students here by informed that Work Shop on Training on EX-Pharma Softwarewill be conducted for III- & IV-year B. pharmacy students on 09/12/2019 to 10/12/2019 as per the following schedule. All the faculty & students are instructed to note the same and attend the classes as per the schedule.

Dr. K.V.S. PRINCIPAL (A.P.)
Opp. Dupadu-518218 (A.P.)
KURNOOL-518218

Copy to faculty members

PRINCIPAL

Dr. K.V.S.R. Institute of Pharmacy
Opp: Dupadu R.S. N.H.-44

KURNOOL-518218 (A P )

Cell: 09704 333 789



(Approved by AICTE, P.C.I New Delhi & Affiliated to JNTUA Anantapuramu, MoU with Government General Hospital & KMC, Kurnool)

Opp. Dupadu Railway Station, Lakshmipuram (Po), N.H - 44, KURNOOL - 518 218, A.P. INDIA.

Website www.drkvsrip.in e-mail; principalkvsrip@gmail.com

#### PROBLEM SOLVING METHODS

Dr.K.V.Subba Reddy institute of pharmacy conducted Three days training on EX-PHARMA SOFT WARE for B.Pharmacy II& III Year students on 09/12/2019 to 11/12/2019. This presentation accounts for handling ,caring ,feeding ,common infections ,different routes of injection & disposal of laboratory animals. This workshop is very helpful to acquire knowledge, conceptual understanding, and skills to solve problems and make informed decision in scientific context. This is a computer assisted learning (CAL) software containing various programs which simulate animal experiments in Pharmacology. These programs can be used to demonstrate effect of drugs on different animals systems. The package is user friendly, highly interactive and full of animated sequences which make simulation appear realistic. The current version of Experimental Pharmacology (Ex-Pharm) Series Software consists of following computer simulated experiments: Eminent speaker R.JONA METHUSALA sir ,M. Pharmacy, Associate professor Department of Pharmacology.

Dr. K.V.S.R. Institute of Pharmacy
Opp: Dupadu R.S. N.H.-44,
KURNOOL-518218 (A.P.)



# NH-44,Opp Dupadu Railway Station, Kurnoul-518218 (A.P) India

## Department of Pharmacy

## Training on Ex pharma software

Date : 09-12-2019 to 11 12-2019



email principalkvsrip@gmail.com Contact 9440282181, 9177287508

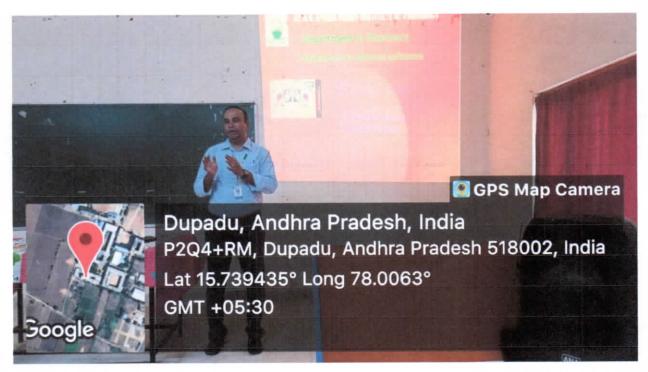
Welcome to Resource Person R.JONA METHUSALA Associate Professor

Smt. S. Vijayalakshmamma Secretary & Correspondent Dr. G.Nagarajan

Principal



PRINCIPAL Dr. K.V.S.R. Institute of Pharmacy Opp: Dupadu R.S. N.H.-44, KURNOOL-518218 (A.P.)





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Dr. N.V.S.R. Institute of Pharmacy

Oppp: Dupadu R.S. N.H.-44,

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#### VIRTUAL LABS

Virtual labs are used to provide remote asses to stimulation based labs in various disciplines of sciences and pharmacy departments. By using these virtual labs to enthuse students to conduct experiments by arousing their curiosity. This would help them in learning basic & advanced concepts through remote experimentation. This would help them to provide complete learning management system around the virtual labs where the students/ teachers can avail the various tools for learning, including additional web resources, video lectures, animated demonstrations and self examinations.

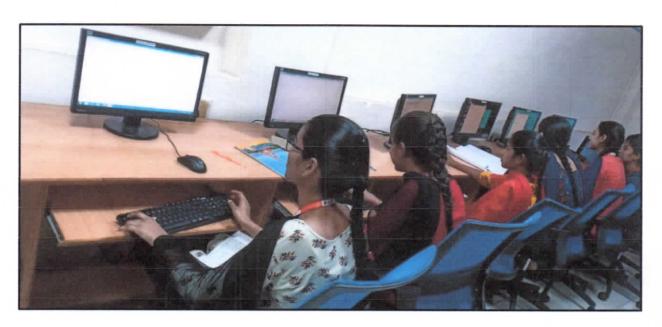


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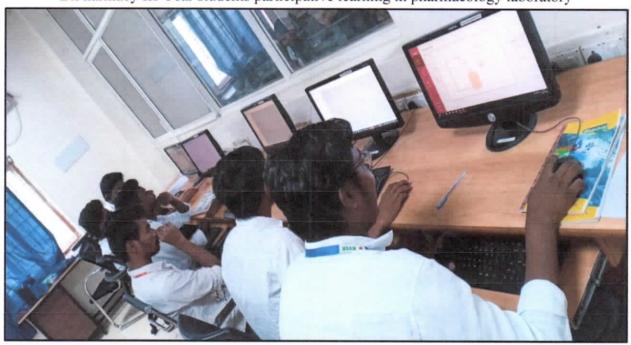
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B.Pharmacy III Year students participative learning in pharmacology laboratory



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