SUSPECTED ADVERSE DRUG REACTION REPORTING FORM

For VOLUMTARY reporting of Adverse Drug Reactions by Healthcare Professionals

INDIAN PHARMACOPOEIA COMMISSION (Vitivania Secretation Cartie-Pharmacovigi ande Programme of India) Ministry of Freedit & Family Welfare, General of India Discherota, Registager, Charmacoecovirous There per program									FOR AMC/NCC USE ONLY AMC Report No. :				
													Worldwide Unique No.
									A. PATIENT INFORMATION				
3. Pan			2. Age at time Event or Date			3. M =	M D F D Other D						
-			Sorth		[4_ WeightKes							
B. SUSPECTED ADVERSE REACTION									13. Selevant medical/ medication history (e.g. allergies, race, pregnancy, smoking, alcohol use, hepatic/renal dysfunction etc.)				
5. Date of reaction started (dd/mm/yyyy)													
6. Date of recovery (dd/mm/syyy)													
7. De	scrible nead	tion or p	s noist een										
C. SUSPECTED MEDICATION(S)									14. Semoutness of the reaction (Yes No)				
		MARKET TO THE							Friegulency	There are	w dates		
5.No	B. Marine (Brand/Ge	B. Name (Brand/Generic)		Manufacturier (if known)		 Itings, Du Itings, Du 		Houte	(00,80 esc.)		Date stopped	linedication	
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- 11													
10						1						- 20	
N/													
5 No 9. Action Taken									10. Reaction reappeared after reintroduction				
E Per	Dining:			creased Dose redu		Done not		Unknown	Yes	No	Effect unknown	Dose (if reintroduced)	
	withdrawn	0.50000			. 1333.53100	crangeo	applicable		Aiross	770007			
11											2 3		
110													
TW .	S					Marian Control							
							and herbal	remedies	D. REPORTER DETAILS				
100	with therapy dates (Exclude those used to treat reaction)									16. Name and Professional Address			
										Pin: E-mail			
									Tel. No. (with STD code)				
										Occupation Signature:			
TO Car	isality Assi	es succionario							18. Date of this report (dd/mm/yyyy)c				
	tional by												
Comi	dentialit	or House	parties.	in tallen	offity in	Problem in	street comf	economical are	d protect	ed to the fu	diest extent. Pr	ogrammic stall is not	

Confidentiality: The patient's identity is held in strict confidence and protected to the fullest extent. Programmic stall is no expected to and will not disclose the reporter's identity in response to a request from the public. Submission of a report does no constitute an admission that medical personnel or manufacturer or the product caused or contributed to the reaction.

How To Report Adverse Drug Reaction

Mansour Adam Mahmoud,Brian Godman,Ahmed Awaisu,Ahmed Ibrahim Fathelrahman,Hisham Aljadhey,Joseph O. Fadare,Johanna Catharina Meyer,Fahad Saleem

How To Report Adverse Drug Reaction:

Guideline for Postmarketing Reporting of Adverse Drug Reactions, [docket No. 85D-0249], 1985 Report of Joint **Commission of Prescription Drug Use** Joint Commission on Prescription Drug Use,1980 Guidelines for Reporting of Reporting Adverse Drug Reactions Council for International Organizations of Medical Adverse Drug Reactions ,1988 Medication Safety and Interventions to Reduce Patient Harm in Low- and Middle-Income Countries Sciences, 1999-01-01 Mansour Adam Mahmoud, Brian Godman, Ahmed Awaisu, Ahmed Ibrahim Fathelrahman, Hisham Aljadhey, Joseph O. Fadare, Johanna Catharina Meyer, Fahad Saleem, 2023-02-07 **Contrast Media** Henrik S. Thomsen, Judith A. W. Webb, 2014-01-10 This is the third edition of a very successful book that originally emerged from the work of a committee set up by the European Society of Urogenital Radiology in 1994 to consider the safety of contrast media used for diagnostic imaging The new edition not only fully updates the previous edition but also includes new chapters on complex topics such as pediatric issues and practical aspects of off label contrast media use Comprehensive consideration is given to the many different safety issues relating to iodine based contrast media gadolinium based contrast media microbubbles for ultrasound and barium sulfate The text includes chapters on both acute and delayed non renal adverse reactions and on renal adverse reactions All of the questions frequently raised in radiological practice are addressed This book presented in a handy easy to use format provides an invaluable unique and unparalleled source of information **Interagency Coordination in Drug** Research and Regulations United States. Congress. Senate. Government Operations, 1962 **Best Practices for** Hospital and Health-System Pharmacy 2013-2014 American Society of Health-System Pharmacists, 2013-10-01 ASHP position statements and more than 70 guidance documents of varying scope provide ongoing advice to managers and practitioners to help improve the medication use process patient care and safety and patient outcomes and quality of life New or revised material in this edition includes Clinical Practice Guidelines for Antimicrobial Prophylaxis in Surgery Clinical Practice Guidelines for the Management of Pain Agitation and Delirium in Adult Patients in the Intensive Care Unit ASHP Therapeutic Position Statement on the Role of Pharmacotherapy in Preventing Venous Thromboembolism in Hospitalized ASHP Guidelines on Compounding Sterile Preparations ASHP Guidelines on Home Infusion Pharmacy Services ASHP Statement on the Pharmacy Technician's Role in Pharmacy Informatics ASHP Statement on the Pharmacist's Role in Substance Abuse Prevention Education and Assistance Drug Safety Evaluation Shavne Cox Gad, 2016-12-01 This practical guide presents a road map for safety assessment as an integral part of the development of new drugs and therapeutics Helps readers solve scientific technical and regulatory issues in preclinical safety assessment and early clinical drug development Explains scientific and philosophical bases for evaluation of specific concerns including local tissue tolerance target organ toxicity and carcinogenicity developmental toxicity immunogenicity and immunotoxicity Covers the development of new small and large molecules generics 505 b 2 route NDAs and biosimilars Revises material to reflect new drug products small

synthetic large proteins and cells and tissues harmonized global and national regulations and new technologies for safety evaluation Adds almost 20% new and thoroughly updates existing content from the last edition *Interagency Coordination in Drug Research and Regulation* United States. Congress. Senate. Committee on Government Operations, 1963

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