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	Dear Dr. Gupta ,				
	We at Drug Information Unit, pharmacotherapy consultation	Department of Pharmacolo n services for tricity doctors	gy, PGIMER have initiated 5.		
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GOVERNMENT MEDICAL COLLEGE & HQSPITAL SECTOR-32, CHANDIGARH HOSPITAL ADMINISTRATION BRANCH-II -FA3 (15)/2018/ 3/560 Dated:- 31 AUG 2018

Endst. No. GMCH-HA-II-EA3 (15)/2018/ 31560

A copy is forwarded to the System Analyst, IT Centre, GMCH with a request to ecirculate/email the same to All the HODs, GMCH-32, Chandigarh for information and necessary action.

> neeno. Office Superintendent (HA-II) **Medical Superintendent**

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भेषजगुण विज्ञान विभाग स्नातकोत्तर चिकित्सा शिक्षा एवं अनुसंधान संस्थान, चण्डीगढ़ – 160 012 (भारत) DEPARTMENT OF PHARMACOLOGY

POSTGRADUATE INSTITUTE OF MEDICAL EDUCATION & RESEARCH, CHANDIGARH - 160 012 (INDIA)

डॉ॰ अमोल पाटिल Dr. Amol N. Patil MBBS, MD

सहायक प्राचार्य Assistant Professor Incharge, Drug Information Unit



दूरभाष/Phone	(Off.)	;	0172-27	755	24

संख्या / No./Pharma/ /.....

दिनांक / Dated.....

Dear Sir / Ma'am,

Sub: Established DIC(Drug information Centre) for tricity doctors: Information regarding,

I am Dr. Amol Patil, In-charge of Drug Information Centre [DIC], Dept. of Pharmacology, PGIMER, Chandigarh. On the be-half of DIC, we circulate this letter to raise awareness of drug information centre and spectrum of DIC services, keeping in view its benefits to the healthcare system.

Since the inception of the Drug Information services in the USA in 1962, it has made a colossal impact on health care, and contributed enormously to the evidence-based medicine (EBM). Though India adopted this idea in 1997, the services are still in a nascent stage, with only a few actively functioning centres in the country.

We systemized the services of DIC offering the following but not limited to:

Hospital-based services:

Answering phone calls to provide information, such as:

- 1. Any drug related information like recommendation of appropriate drug and its dose, route of administration
- 2. Drug-safety information in treatment of patients with organ impairment.
- 3. Interpretation of culture-sensitivity report, and preference of antibiotic and alternate antibiotics.
- 4. Need and interpretation of Therapeutic Drug Monitoring (TDM).
- 5. Patient counselling on safely and precautions in drug usage in genetic and metabolic disorders.

Community-based services:

- 1. Conducting public awareness lectures
- 2. Publishing articles in newspaper
- Answering phone calls for any specific information regarding drug use except comment on prescription.