

GOVERNMENT OF KERALA DIRECTORATE OF MEDICAL EDUCATION BOARD OF D. PHARM EXAMINATIONS

D.Pharm Part II (Supplementary) Examination October 2024 (ER1991)

Applications are invited for registration to the D-Pharm **Part II (Supplementary)** Examination **October 2024 (ER1991)** from students who have registered with the Board of D.Pharm Examinations and who are eligible to appear for the above examinations as per ER 1991 of Pharmacy Council of India.

The Scheme of Examination is as follows:

1	Last date for submitting the completed application form along with the required fee to the Principal of the College in which the student has undergone the course	29/08/2024		
2	Last date for receipt of applications by the Chairman from the colleges	31/08/2024		
3	Last date of receipt of details of Chief Supdt /Asst.Chief supdt (for GMCs only)	31/08/2024		
	and observers by the Chairman	51/00/2024		
4	Last date of receipt of Biodata of examiners by the Chairman	31/08/2024		
5	Last date of receipt of sessional marks by the Chairman	31/08/2024		
6	Commencement of theory examination	15/10/2024		
7	Commencement of Practical examination	Date will be announced later		

The examination fee and mark list fee should be remitted in any of the Government treasuries in the state under the Head of Account "0210-03-105-Allopathy 98 Exam fee and other fee" and the chalan should be submitted along with the application form.

The Principal of each college should prepare a list of candidates appearing from their college in the serial order of Reg. No. of candidates and send it to the Chairman with the following details of each candidate.

- I. (a). Duly filled application form (ER1991) along with chalan receipt.
 - (b) Photocopy of front page of SSLC book bearing name of the candidate
- II. Duly filled hall ticket with general instructions (single sheet printed on both sides)

(To be tagged separately in Register Number order.)

(**Note:-** Each of the above mentioned items (**item I** including "(a), & (b)" and **Item II** should be separately arranged for the entire batch in the order of their Register Nos.)

The Examination Fee as follows:

• First Appearance for whole subjects : Rs.400/-

• Subsequent Appearance : Rs.75/- per subject

• Mark list Fee : Rs.20/-

Note:- Kindly use the appended formats (I to IV) for the online mode of examination and for the scheme of ER 1991.

- Details of Chief superintendents and observers
- Proforma for Observers & Biodata of teachers
- Details of sessional marks (Must mail the soft copy (mail-id:dmedpharmsection@gmail.com.

TIME TABLE FOR D.PHARM PART II (SUPPLEMENTARY) EXAMINATION (ER-1991) OCTOBER 2024

Date	Time	Course	Course Code	
15/10/2024	10A.M to1 P.M	Pharmaceutics - II	A1	
17/10/2024	10/2024 10A.M to1 P.M Pharmaceutical Chemistry - II		B1	
19/10/2024	10A.M to1P.M	M to1P.M Pharmacology & Toxicology		
22/10/2024	2024 10A.M to1P.M Pharmaceutical Jurisprudence		D	
24/10/2024	10A.M to1 P.M	Drug Store & Business Management	E	
26/10/2024	10A.M to1 P.M	Hospital & Clinical Pharmacy	F1	

Sd/-

Chairman

Directorate of Medical Education Thiruvananthapuram-695011

Board of D.Pharm Examinations

NB: All correspondence related to the examination shall be addressed to The Chairman, Board of D.Pharm Examinations, Directorate of Medical Education, Govt. Medical College, Thiruvananthapuram-695011.

No	Name of Contro
No	Name of Centre Govt. MedicalCollege,Thiruvananthapuram
1	A. College of Pharmaceutical Sciences
1	B. Priyadarshini Institute of Paramedical Sciences
2.	Govt. T.D. Medical College, Alappuzha
3	Govt. Medical College,Kottayam
4	Govt. Medical College, Kozhikode
5	Sreekrishna College of Pharmacy &Research Centre, Parassala. TVPM
6	Kerala Academy of Pharmacy, Kattakkada, TVPM
7	Ezhuthachan College of Pharmacuetical Sciences. Marayamuttam, TVPM
8	Dale View College of Pharmacy &Research Centre, Punalal, TVPM
9	ShreeVidhyadhiraja College of Pharmacy, Nemom, TVPM
10	JohnEnoch College of Pharmacy, Karamana. TVPM
11	Mar Dioscorus College of Pharmacy, Sreekariyam, TVPM
12	A.J.College of Pharmacy, Thonnakkal. TVPM
13	MGM Silver Jubilee College of Pharmacy, Kilimanoor, TVPM
14	Fathima College of Pharmacy, Kollam.
15	Ayisha Majeed College of Pharmacy Karunagappally Kollam
16	Dr. Joseph Mar Thoma Institute of Pharmaceutical Sciences & Research, Kattanam, Alappuzha
17	AES College of Pharmacy, Ambalappuzha.
18	St. Joseph College of Pharmacy, Alappuzha.
19	KVM college of Pharmacy, Cherthala
20	Sree Gokulam SNGM College of Pharmacy, Thuravoor, Cherthala.
21	Hindustan College of Pharmacy, Kanjirappally, Kottayam
22	Caritas College of Pharmacy, Thellakom ,Kottayam
23	Al-Azhar College of Pharmacy, Thodupuzha, Idukki
24	Indira Gandhi Institute of Pharmaceutical Sciences, Perumbavoor
25	Lisie College of Pharmacy, Cochin.
26 27	Chemists College of Pharmaceutical Sciences & Research, Ernakulam Institute of Pharmaceutical Sciences, Aluva.
28	Nirmala College of Health Science, Chalakkudi
29	Holy Grace Academy of Pharmacy, Mala
30	West Fort College of Pharmacy, Thrissur
31	Triveni Institute of Pharmacy, Kechery, Thrissur.
32	Nehru College of Pharmacy, Thiruvilwamala, Thrissur
33	Prime College of Pharmacy, Palakkad
34	Sanjo College of Pharmaceutical Studies, Palakkad
35	Jamia Salafiya Pharmacy College, Pulickal. Malappuram
36	Al-Shifa College of Pharmacy, Perinthalmanna. Malappuram
37	Devaki Amma Memorial College of Pharmacy, Malappuram.
38	KMCT College of Pharmacy. Kuttippuram, Malappuram
39	National College of Pharmacy, Kozhikode.
40	JDT Islam College of Pharmacy, Kozhikode
41	Crescent College of Pharmacy, Kannur.
42	MGM College of Pharmacy Kannur.
43	Malik Deenar College of Pharmacy, Kasargod.

Appendix -I

DIRECTORATE OF MEDICAL EDUCATION BOARD OF D. PHARM EXAMINATION

Name c	of Examination- D. Pharm Part	I/II (R/S) Examin	ation	(month)(year)
Scheme	e of examination- ER1991			
Name c	of centre			
Perman	ent email ID of the centre (for	D.Pharm exams)		
Period	of examinations- From	to	() day	S
	• Details of Chief Sup	erintendent.		
Name	& designation of Chief Supdt.	/Asst. Chief Supd	t. (for GMC only)-	
Mobile	e number of Chief Supdt.(What	ts App)-		
	• Details of faculty me	embers to be post	ed as Observers	
Sl No	Name & Designation	Mobile No	Total teaching experience	Residential address
	Faculty members having a teac ails of minimum two/three mem		f minimum five yea	rs shall be posted as observers. Furnish
Place Date		4040	Principal - Signature - Name –	
		(Office seal)		

Appendix -II

DIRECTORATE OF MEDICAL EDUCATION BOARD OF D. PHARM EXAMINATIONS

(Proforma to be filled by the Observers on each day of examination)

Naı	me of Examination- D. Pharm Part I (S) E	Examination(month)	(year)						
Naı	me of centre								
Sch	neme of examination ER 1991 (strike off v	which is not applicable)							
Dat	e & subject of examination-								
Rep	porting time of the observer at the centre-								
a.	Whether the question paper was download	aded and adequate numbers printed at the right	time-Yes/No						
b.	Whether all the seating arrangements we	ere adequate in the hall-	Yes/No						
c.	Did the invigilators check the hall tickets	s of all the candidates-	Yes/No						
d.	Whether any candidate was permitted to If yes specify his/her Reg No and give re		Yes/No						
e.	Whether any malpractice noticed during If yes whether the Chief Superintendent		Yes/No Yes/No						
f.	Did you verify the register numbers in the answer booklets of candidates with the nominal roll before packing Yes/No								
g.	Whether CCTV and camera were working	ng properly throughout-	Yes/No						
h.	h. Whether the CD covering the entire process of the examination was included in the packet- Yes/No								
i.	Are there proper toilet facilities near the	examination hall-	Yes/No						
j.	Remark about the overall conduct of the	examination- (Write in 2-3 sentences)							
Pla Dat	te Sią Of	ame of Observer- gnature- ficial Address- obile No-							

Note- .Send the report of all the days of examinations (ER 1991) in a single envelop on the day of last examination to the Chairman. Write the official address of the observer on the envelop.

Appendix -III

Biodata of examiners for D. Pharm Part II (Supplementary) Examination October 2024 (ER 1991)

	Intern	al Examiner		nal Examiner	Evaluator for Theory			
Course	For	Practical	fo	r Practical	papers			
	Name, Qualification		Name,	Qualification	Name,	Qualification		
	Designation	&Experience	Designation	&	Designation	&		
	&Contact No.		& Contact	Experience	&Contact No.	Experience		
			No.	_				
				I				

Name & Signature of Principal:-

Appendix -IV

D.PHARM PART- II (S) EXAMINATION SESSIONAL MARK

REGISTER NUMBER		Pharmaceut ics II		Pharmace utical Chemistr y II		Pharmacology & Toxicology		Pharmac eutical Jurisprud ence	DSBM	НСР	
		A1	A2	B1	B2	C1	C2	D	E	F1	F2
		Т	P	Т	P	Т	P	Т	Т	Т	P
		REGISTER NUMBER (In block	REGISTER NUMBER (In block letters) A1	REGISTER NUMBER (In block letters)	REGISTER NUMBER Name of the Student (In block letters) Student A1 A2 B1	REGISTER NUMBER Name of the Student (In block letters) Name of the Student A1 A2 B1 B2	REGISTER NUMBER Name of the Student (In block letters) Name of the Student A1 A2 B1 B2 C1	REGISTER NUMBER Name of the Student (In block letters) Name of the Student (In block letters) Pharmaceut ics II utical Chemistr y II Pharmacology & Toxicology Toxicology & Toxicology	REGISTER NUMBER Name of the Student (In block letters) Name of the Student (In block letters) Name of the Student (In block letters) Pharmaceut ics II utical Chemistr y II Pharmacology & Toxicology Jurisprud ence Pharmacology & Toxicology of the toxicology and the state of the toxicology of th	REGISTER NUMBER Name of the Student (In block letters) Name of the Student (In block letters)	REGISTER NUMBER Name of the Student (In block letters) Name of the Student (In block letters) Name of the Student (In block letters)

Principal

Must mail the soft copy of Sessional Mark- (mail-id: dmedpharmsection@gmail.com)