

PRACTICE ON MANAGEMENT AND MARKETING IN MULAGOHOSPITAL

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Introduction. 4A pharmacy is in charge of providing pharmaceutical services to patients of the 4a medical ward, mostly inward patients. The main work is to provide pharmaceuticals to patients on that ward. The highest percentage of the patients attended to were in the adults. Finally, to collaborate with Nursing and medical staff to develop written policies and procedures for the safe dispensing and administration of medicinal products and devices. A medication administration record of all prescribed drugs for each patient must be produced from the pharmacy maintained patient record. 4B is a medical ward located in the leftwing fourth floor of new mulago. This ward handles adults with mostly AIDS, CANCER, and other complications that follow the diseases named.

Goals: to provide adequate drug information to patients, caretakers and health professionals in the unit, ensure rational drug use in the unit, find out the most common diseases or health problems and the commonly used drugs. The assigned period of training was successfully completed and the duties performed, findings, challenges encountered and a few recommendations are outlined below.

Activities performed

- Proper record keeping of all medicines dispensed to patients on the ward.
- Ensuring availability and appropriate or safe storage of all necessary medicines.
- Providing the staff with possible alternative medicines available in the pharmacy.
- Ordering and transportation of drugs from the store to the ward pharmacy.
- Pharmaceutical care in form of patient counseling about side effects and urging them to ensure they are administered the drugs at the right time by reminding the nurses.

Findings

The major health concern on ward 4A is pain, vomiting, and sleeps deprivation. The commonly used drugs include; metronidazole, ceftriaxone, ampicillin, gentamycin, diazepam, panadol®, amoxicillin, FEFOL and diclofenac. 4A Ward has a very good hospitality for its workers and the clients. The unit provides holistic care to the patients and the care takers. However, the caretakers do not come for the parenteral drugs on time,causing the nurses to administer them late and this causes resistance and sepsis to be at a high rate in the ward and some patients that have no caretakers lay in there filth too long before it is noticed.

Challenges

- There were stock outs of some vital drugs like oral morphine.
- The dispensed parenteral drugs are not administered as prescribed. Actually most drugs are administeredat most twice daily regardless of the fact that some drugs require to be administered six hourly or even four hourly. Therefore patients receive under doses which are a great predisposing factor to development of complications.
- Most physicians especially the intern doctors have a tendency of prescribing the same kind of regimens to the patients as if they are identical. They do not individualize treatment.
- Discharged patients usually receive their discharge forms late and sometimes after 5:00 pm thus leading to a number of patients going home without drugs or overcrowding at casualty pharmacy.

Recommendations

- More teamwork is needed by all staff members in order to improve on patient care.
- An improvement on the continuous availability of essential medicines to patients on wards
- Patients should receive their discharge forms as early as possible to enable the intern pharmacist work on them within the working hours.
- Emphasis should be put on drug administration to ensure that drugs are administered as prescribed.