

Instruction:

- Arrange the jumbled phases in drug management based on the drug management cycle, and connect them using the arrows provided.

Slide 1.2

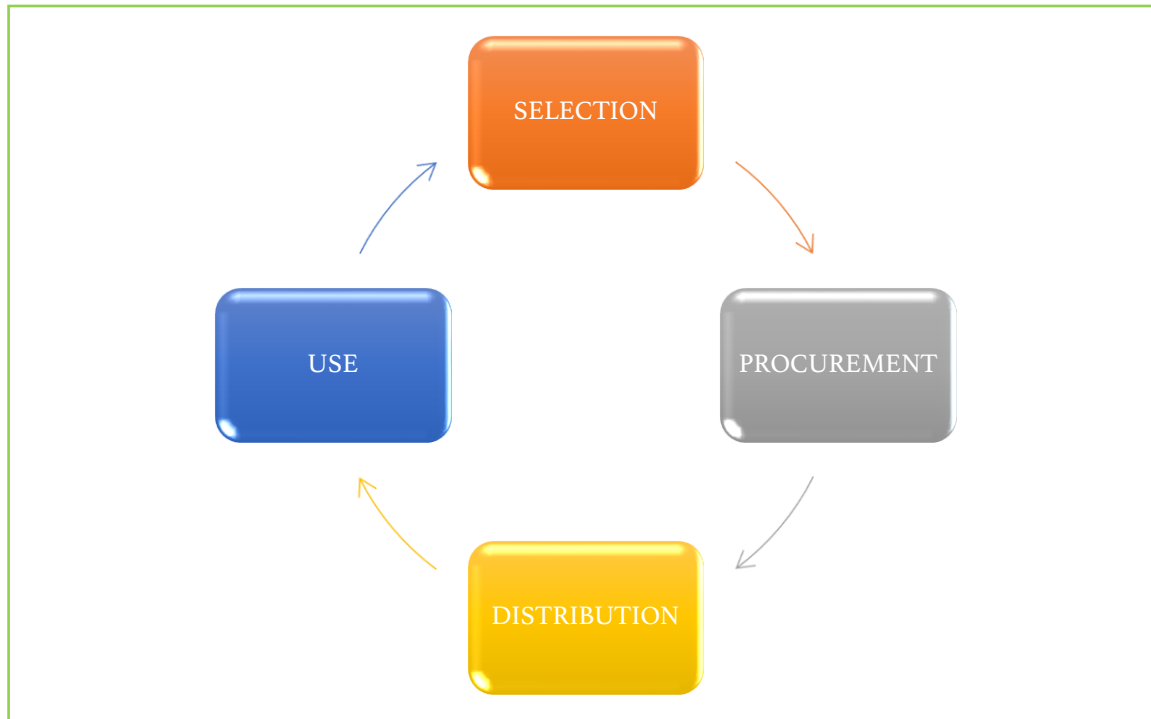
Materials Needed: Adhesive tape, print outs

Instructions to Facilitator:

- Print each of the four principal phases in medicine management on a separate paper:
 - Selection
 - Procurement
 - Distribution
 - Use
- Make and print arrows that will connect the phases in drug management cycle.
- Jumble the phases, and let the participants arrange them based on the drug management cycle.

Instructions to Participants:

- Arrange the jumbled phases in drug management based on the drug management cycle, and connect them using the arrows provided.



Slide 1.3

Instructions to Facilitator:

- After arranging the phases in drug management cycle, evaluate the arrangement by presenting the actual drug management cycle. Then, briefly explain the cycle.

Discussion Point:

- Medicines are first selected based on pre-determined criteria. After determining the quantities required, the selected medicines go through a procurement process. Then, they are delivered to the procuring entity and distributed to the different health facilities. Finally, the use of drugs requires prescribing, packaging, dispensing and counseling.



Majority of the patients visiting the rural health unit complained about mild to moderate cough.

To address this health concern, you are tasked to **determine which medicines should be considered and selected** prior to procurement.

Slide 2.2

Instruction to Facilitator:

- Give the following scenario to participants:
 - Based on disease frequency data, it was found that majority of the patients visiting the rural health unit complained about mild to moderate cough. To address this health concern, you are tasked to determine which medicines should be considered and selected prior to procurement.

Instruction to Participants:

- Determine which medicines should be considered and selected prior to procurement.

Instructions:

- Determine which of the following medicines should be selected to address the health concern of the community.
- Place the medicines under smiley face (☺) if they should be selected, or under sad face (☹) if they should not be selected.

Slide 2.3

Materials Needed: Smiley face (☺), sad face (☹), adhesive tape, pictures of medicines

Instructions to Facilitator:

- Print a smiley face (☺) and a sad face (☹) on a separate paper.
- Flash pictures of medicines listed below:
 - Ambroxol, Bromhexine, Lagundi, Carbocisteine, Butamirate and Dextromethorphan
- Give instructions to participants.

Instructions to Participants:

- The participants are tasked to determine which of the following medicines should be selected to address the health concern of the community. Place the medicines under smiley face (☺) if they should be selected, or under sad face (☹) if they should not be selected.



Slide 2.4

Instruction to Facilitator:

- Provide brief information about the medicines as follows:

Ambroxol

- Mucolytic; for the treatment of wet or productive cough
- Not included in the Philippine National Formulary for Primary Healthcare

Bromhexine

- Mucolytic; for the treatment of wet or productive cough
- Not included in the Philippine National Formulary for Primary Healthcare

Lagundi

- For the relief of mild to moderate cough due to common colds and flu
- Included in the Philippine National Formulary for Primary Healthcare

From these medicines, **Lagundi** should be chosen since it is included in the Philippine National Formulary for Primary Healthcare.



Slide 2.5

Instruction to Facilitator:

- Provide brief information about the medicines as follows:

Carbocisteine

- Mucolytic; for the treatment of wet or productive cough
- Not included in the Philippine National Formulary for Primary Healthcare

Butamirate

- Cough suppressant; for chronic, non-productive cough; symptomatic treatment of cough of various origins
- **Included in the Philippine National Formulary for Primary Healthcare**

Dextromethorphan

- Cough suppressant; for the relief of cough caused by common colds, the flu, or other conditions
- Not Included in the Philippine National Formulary for Primary Healthcare

From these medicines, **Butamirate** should be chosen since it is included in the Philippine National Formulary for Primary Healthcare.

Based on a medicine consumption data dated Jan to June 2014, you are tasked **to determine the quantity and amount (in PhP) of the medicines to be procured in the next 6 months (July to Dec 2014)**



Slide 3.2

Materials Needed: Problem sheet, answer sheet, a sample stock bin card and an appropriate stock bin card

Instructions to Facilitator:

- This activity is on the quantification of drug needs using Consumption Method.
- Print the Problem Sheet (Appendix A) and Answer Sheet (Appendix B).
- Give instructions to participants.

Instructions to Participants:

- Based on a medicine consumption data dated January to June 2014, the participants are tasked to determine the quantity and amount (in PhP) of the medicines to be procured in the next 6 months (July to December 2014).

Item Description	Item Used (for 6 months)	Stocks Available	Acquisition Price
0.9% Sodium Chloride — 500 ML	1,257	243	51.69
Aspirin Tablet — 80 MG	364	36	1.56
Paracetamol Tablet — 500 MG	1,367	33	0.54
Clonidine Tablet — 75 MCG	1,112	388	23.88
Cefalexin Capsule — 500 MG	1,179	321	5.36
Ferrous Sulfate Tablet — 325	466	34	0.89
Tranexamic Acid Capsule — 500 MG	315	0	11.61
Digoxin Tablet — 250 MCG	407	43	4.11
Loratadine Tablet — 10 MG	163	37	15.63
Mefenamic Acid Capsule — 500 MG	2,709	291	1.34
Montelukast Tablet — 10 MG	253	47	32.14
Amlodipine Tablet — 5 MG	266	34	8.79
Omeprazole Capsule — 40 MG	589	11	42.86
Salbutamol Tablet — 2 MG	55	45	0.63
Sterile Water for Injection — 5 ML	5,300	0	9.83
Azithromycin Capsule — 500 MG	196	4	120.53
Celecoxib Capsule — 200 MG	430	20	54.47
Co-Amoxiclav Tablet — 625 MG	617	33	26.79
Simvastatin Tablet — 20 MG	87	13	4.91
Gliclazide Tablet — 80 MG	44	6	3.57

Slide 3.3

Instructions to Facilitator:

- Distribute a copy of the Problem Set (Appendix A) and give instructions to participants.

Instructions to Participants:

- Based on the procurement plan, determine:
 - The average monthly consumption
 - The quantity to order in the next 6 months
 - The total cost of the proposed procurement

Item Description	Item Used (for 6 months)	Stocks Available	Acquisition Price	AMC	Qo	Cost (in PhP)
0.9% Sodium Chloride – 500 ML	1,257	243	51.69	209.5	1,014	52,413.66
Aspirin Tablet – 80 MG	364	36	1.56	60.7	328	511.68
Paracetamol Tablet – 500 MG	1,367	33	0.54	227.8	1,334	720.36
Clonidine Tablet – 75 MCG	1,112	388	23.88	185.3	724	17,289.12
Cefalexin Capsule – 500 MG	1,179	321	5.36	196.5	858	4,598.88
Ferrous Sulfate Tablet – 325	466	34	0.89	77.7	432	384.48
Tranexamic Acid Capsule – 500 MG	315	0	11.61	52.5	315	3,657.15
Digoxin Tablet – 250 MCG	407	43	4.11	67.8	364	1,496.04
Loratadine Tablet – 10 MG	163	37	15.63	27.2	126	1,969.38
Mefenamic Acid Capsule – 500 MG	2,709	291	1.34	451.5	2,418	3,240.12
Montelukast Tablet – 10 MG	253	47	32.14	42.2	206	6,620.84
Amlodipine Tablet – 5 MG	266	34	8.79	44.3	232	2,039.28
Omeprazole Capsule – 40 MG	589	11	42.86	98.2	578	24,773.08
Salbutamol Tablet – 2 MG	55	45	0.63	9.2	10	6.30
Sterile Water for Injection – 5 ML	5,300	0	9.83	883.3	5,300	52,099.00
Azithromycin Capsule – 500 MG	196	4	120.53	32.7	192	23,141.76
Celecoxib Capsule – 200 MG	430	20	54.47	71.7	410	22,332.70
Co-Amoxiclav Tablet – 625 MG	617	33	26.79	102.8	584	15,645.36
Simvastatin Tablet – 20 MG	87	13	4.91	14.5	74	363.34
Gliclazide Tablet – 80 MG	44	6	3.57	7.3	38	135.66
Total Cost						233,438.19

Slide 3.4

Instructions to Facilitators:

- Distribute a copy of the Answer Sheet (Appendix B) and briefly explain the answers.

Discussion Points:

- The average monthly consumption (AMC) is based on the formula:
 - $AMC = \text{Consumption} / \text{number of months of consumption}$
 - Where number of months for consumptions is 6
- The quantity to order (Qo) in the next 6 months is based on the formula:
 - $Qo = \text{number of months to cover} \times AMC - \text{remaining stock}$
 - Where number of months to cover is 6
- The total cost of the proposed procurement is based on the formula:
 - The total cost is the sum of all costs for each medicine.
 - Where cost for each medicine = $Qo \times \text{Acquisition Price}$

= DOH MEDICINES =

P.O. NO.	DATE	DESCRIPTION	QTY	UNIT PRICE	AMOUNT/BALANCE	RECEIPT	SIGNATURE
6/9/14		Paracetamol 100 mg	1 box			Atena Aguirre	Atena
6/9/14		Simvastatin 20 mg	3 boxes			Patron Abella	Patron
6/9/14		Amoxicillin 10 mg	5 boxes			Felix Amador	Felix
6/9/14		Gliclazide 80 mg	3 boxes			Veronica Padilla	Veronica
6/9/14		Amoxicillin 10 mg	1 box			Wilfredo Flores	Wilfredo
6/9/14		Zinc Sulfate 50mg/5ml	1 box			Rio Pardo	Rio
6/9/14		ORS Sachet	5 Sachet			Alexa Fuentes	Alexa
6/9/14		Paracetamol 100mg/5ml	1 box			CHINO MOSE VILLAS	CHINO
6/9/14		Amoxicillin drops	1 box			MILIBSA A. CARGANDO	MILIBSA
6/9/14		Paracetamol drops	1 box			Fernando Casero	Fernando
6/9/14		Amoxicillin 10 mg	1 box			Wendy Amador	Wendy
6/9/14		Aspirin 80 mg	1 box			Wendy Amador	Wendy
6/9/14		Amoxicillin 250mg/5ml	2 boxes			Rafaela Rejilla	Rafaela
6/9/14		Amoxicillin 10 mg	1 box			Christine Aguirre	Christine
6/9/14		Amoxicillin 250mg/5ml	1 box			Alba Valeros	Alba
6/9/14		Amoxicillin 10 mg	1 box			Rio Pardo	Rio
6/9/14		Simvastatin 20 mg	3 boxes			Patron Abella	Patron
6/9/14		Amoxicillin 10 mg	1 box			Wilfredo Flores	Wilfredo
6/9/14		Amoxicillin 10 mg	1 box			CHINO MOSE VILLAS	CHINO
6/9/14		Amoxicillin 10 mg	1 box			Domino Lucinda	Domino
6/9/14		Amoxicillin 10 mg	1 box			Ronaldito Ufias	Ronaldito
6/9/14		Amoxicillin 10 mg	1 box			Ronaldito Ufias	Ronaldito
6/9/14		HCTZ 25 mg	1 box			ELWIN BETA VEGA	ELWIN
6/9/14		Cefotaxim 500mg	31 ceps			NEIVA VALDEARZ	NEIVA
6/9/14		Paracetamol 100mg/5ml	1 box			Patron Jay Didad	Patron
6/9/14		Salbutamol 2mg/5ml	1 box			Edenia Maximo	Edenia
6/9/14		Amoxicillin 250mg/5ml	1 box				
6/9/14		Amoxicillin	1 box				

Slide 3.5

Instructions to Facilitator:

- Give instructions to the participants while presenting the sample stock bin card.

Instructions to Participants:

- Evaluate the completeness of the stock bin card, and supply what other information are needed to make it complete.

Discussion Points: Below are the features of an ideal stock bin card:

- Should contain only one medicine to prevent confusion and monitor accurate counts of the said medicine;
- Should include the reorder level and unit of issue for requisition as well as the "from/to" of the medicines; and
- Should be filled up completely.

ITEM: _____ DOSAGE FORM: _____ UNIT OF ISSUE: _____ REORDER LEVEL: _____

[illegible]

Instructions:

- Determine whether the pictures are reflecting good storage practices or not.
- Place the pictures under smiley face (😊) if they are indicative of good storage practices, while place under sad face (😞) if they are not indicative of good storage practices.
- Using an arrow, point the areas within the pictures that signify good or bad storage practices.

Slide 4.2

Materials Needed: Smiley face (😊), sad face (😞), arrows, adhesive tape, pictures in the presentation, meta cards, Manila paper, markers

Instructions to Facilitator:

- Make available the smiley (😊) and sad (😞) faces.
- Make available the arrows that will point the areas signifying good and bad storage practices.
- Flash slides on the screen.
- Ask participants to come forward and post their answers.



Slide 4.3

Discussion Points:

- This is a **proper** 😊 storage practice because:
 - The medicines are organized properly;
 - Medicine labels are provided; and
 - A dispensing table is provided and it is not overcrowded.



Slide 4.4

Discussion Points:

- This is an **improper** (☹) storage practice because:
 - The medicine boxes (stocks) are disorganized and are not properly stored (i.e., storage conditions are not appropriately monitored); and
 - The stocks are not in an adequate storage facility (e.g., insufficient space).
 - Items other than medicines are likewise stored in the same room.



Slide 4.5

Discussion Points:

- This is a **proper** 😊 storage practice because:
 - The storage area is regularly monitored for the proper storage conditions (e.g., temperature and humidity) by a device.



Slide 4.6

Discussion Points:

- This is an **improper** (☹) storage practice because:
 - The medicines are disorganized;
 - The medicines are not properly labeled; and
 - The documents are not arranged in an orderly manner.



Slide 4.7

Discussion Points:

- This is a **proper** 😊 storage practice because:
 - There is a refrigerator for medicines with low temperature requirements.



Slide 4.8

Discussion Points:

- This is an **improper** (☹) storage practice because:
 - Some medicines that are small in bulk are disorganized (i.e., they should be put into shelves instead of placing them together with the medicine boxes); and
 - Some stocks are not properly arranged (i.e., some stocks are piled up very high).

Instructions:

On a piece of meta card, write down the problems and issues that you encounter when it comes to distribution of medicines (one card for each problem/ issue).

After writing them down, attach the cards on a board.

Slide 4.9

Materials Needed: Meta cards, markers

Instructions to Facilitator:

- Distribute materials to participants.
- Group similar problems and concerns. Facilitate discussion.
- Ask the participants to give their recommendations/ suggestions to the problems and issues posted on the board.



A patient went to you with a prescription at hand. You are tasked to **determine whether the prescription is valid or not, and provide instructions on medicines proper use.**

Slide 5.2

Materials Needed: Sample prescriptions, sample Daily Use Record and an appropriate Daily Use Record

Instructions to Facilitator:

- For the first part of the activity, ask for volunteers – one to act as a patient and the other one to act as a dispenser.
- Observe the counseling points.

Instructions to Participants:

- Determine whether the prescription is valid or not, and provide instructions on medicines proper use.

FOR Juan A. dela Cruz (23 years old)

ADDRESS No. 145, Pedro Gil, Ermita, Manila

R_x *Amoxicillin 250 mg*
Disp. 21 cap
TID x 7 days

L. Deniso
 DR. Leonora Deniso, MD

DEA NO. 62617

DATE 11/21/2014 No. 869, Tondo, Manila ADDRESS
 ITEM #52945

Slide 5.3

Discussion Points:

- A prescription should have the following:
 - Name of the patient and age (especially if a child);
 - Date;
 - Instructions about the prescribed drugs, including:
 - Generic name and dosage form,
 - Dose,
 - Frequency of administration, and
 - Duration of treatment
 - Prescriber's signature and name; and
 - Prescriber's license
- **Proper instruction:**
 - Dispense (give) 21 Amoxicillin 250 mg capsules.
 - The medicine should be taken 3 times a day (every 8 hours) for 7 days (or 1 week).

June			
6/18/14	122-304-452	David, Thomas	D
6/18/14	200-344-001	Nguyen, Quang	D
6/18/14	210-344-002	Nguyen, Quang	D
6/18/14	210-344-003	Nguyen, Quang	D
6/18/14	210-344-004	Nguyen, Quang	D
6/18/14	210-344-005	Nguyen, Quang	D
6/18/14	210-344-006	Nguyen, Quang	D
6/18/14	210-344-007	Nguyen, Quang	D
6/18/14	210-344-008	Nguyen, Quang	D
6/18/14	210-344-009	Nguyen, Quang	D
6/18/14	210-344-010	Nguyen, Quang	D
6/18/14	210-344-011	Nguyen, Quang	D
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6/18/14	210-344-037	Nguyen, Quang	D
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6/18/14	210-344-095	Nguyen, Quang	D
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6/18/14	210-344-097	Nguyen, Quang	D
6/18/14	210-344-098	Nguyen, Quang	D
6/18/14	210-344-099	Nguyen, Quang	D
6/18/14	210-344-100	Nguyen, Quang	D

Slide 5.4

Instructions to Facilitator:

- Give instructions to the participants while presenting the sample daily use record

Instructions to Participants:

- Evaluate the completeness of the daily use record, and supply what other information are needed to make it complete.

Discussion Points: Below are the features of an ideal Daily Use Record:

- Should contain more information about the patient (e.g., age); and
- Should take into account the specific time of administration of the medicine for the patient

[illegible]

Slide 5.5

Instruction to Facilitator:

- Present the template for an appropriate Daily Use Record.

You are tasked to **construct a logical and feasible outline of activities** pertaining to the acceptance of pharmaceutical donations.



Slide 6.2

Materials Needed: Smiley face (😊), sad face (☹), adhesive tape

Instructions to Facilitator:

- Ask the participants to group themselves.
- Give instructions to the participants. Explain that this activity will have three (3) parts. You may ask them to finish all three activities.

Instruction:

- For each of the following criterion set by the DOH, indicate whether this is being followed in your rural health unit by placing a smiley face (😊) and a sad face (😞) if it is not followed.

Slide 6.3

Instructions to Facilitator:

- Flash the slides on the screen.
- Make available the smiley (😊) and sad (😞) faces, and ask the participants to come forward and post their answers.

DOH CRITERIA	
Shelf life of at least 12 months from the time of arrival to the Philippines	
Labeling with English translation or in a language that is understood by health professionals	
Packaging that complies to international shipping regulations accompanied by a detailed packing list	
Weight per carton should not exceed 50 kg	
Exclusive packaging with regard other supplies	
Documentary proof of compliance to applicable quality standards	
Documentary proof that items are obtained from reliable sources	

Slide 6.4

Instructions:

- On a piece of meta card, write down the problems and issues that you encounter when it comes to pharmaceutical donations (one meta card for each problem/ issue).
- After writing them down, attach the cards on a board.

Slide 6.5

Materials Needed: Manila paper, meta cards, adhesive tape, markers

Instructions to Facilitator:

- Distribute materials to participants.
- Group similar problems and concerns. If possible, classify according to the steps of the drug management cycle. Facilitate discussion.

Instruction:

Based on the discussion pertaining to the acceptance of pharmaceutical donations, propose an outline of activities by drawing a flowchart.

Slide 6.6

Materials Needed: Manila paper, markers

Instructions to Facilitator:

- Distribute materials to participants.
- Ask them to write their flowcharts on the Manila paper. Then, ask them to report or explain their charts. Facilitate discussion. Ensure that the flow chart will address specific issues identified by WHO.

You are tasked to **dispose appropriately different medicines** which cannot be used anymore.



Slide 7.2

Materials Needed: Pictures of medicines, adhesive tape

Instructions to Facilitator:

- Print the choices for the disposal methods:
 - Incineration, Landfill, Encapsulation, Inertization and Fast-flowing Watercourse/ Sewer
- Flash the slides of the different medicines.

Instruction:

- Match each dosage form with the appropriate medicine disposal by placing the choices for disposal methods under or beside the pictures provided.

Slide 7.3

Instructions to Facilitator:

- Mention the choices for the disposal methods:
 - Incineration
 - Landfill
 - Encapsulation
 - Inertization
 - Fast-flowing Watercourse/ Sewer
- Facilitate discussion.



Slide 7.4

Discussion Points:

- **Possible disposal methods:**
 - Solids – Encapsulation, Inertization, Landfill
 - Semi-solids – Encapsulation, Inertization, Landfill
 - Powder – Encapsulation, Inertization, Landfill



Slide 7.5

Discussion Points:

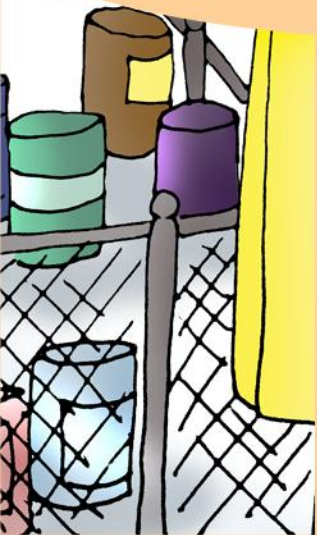
- **Possible disposal methods:**
 - Liquids/ Syrups – Sewer, Fast-flowing Watercourse, Encapsulation
 - Intravenous Fluids – Sewer, Fast-flowing Watercourse (Injections – Encapsulation)

Appendix A. Problem Sheet

Item Description	Item Used (for 6 months)	Stocks Available	Acquisition Price
0.9% Sodium Chloride — 500 ML	1,257	243	51.69
Aspirin Tablet — 80 MG	364	36	1.56
Paracetamol Tablet — 500 MG	1,367	33	0.54
Clonidine Tablet — 75 MCG	1,112	388	23.88
Cefalexin Capsule — 500 MG	1,179	321	5.36
Ferrous Sulfate Tablet — 325	466	34	0.89
Tranexamic Acid Capsule — 500 MG	315	0	11.61
Digoxin Tablet — 250 MCG	407	43	4.11
Loratadine Tablet — 10 MG	163	37	15.63
Mefenamic Acid Capsule — 500 MG	2,709	291	1.34
Montelukast Tablet — 10 MG	253	47	32.14
Amlodipine Tablet — 5 MG	266	34	8.79
Omeprazole Capsule — 40 MG	589	11	42.86
Salbutamol Tablet — 2 MG	55	45	0.63
Sterile Water for Injection — 5 ML	5,300	0	9.83
Azithromycin Capsule — 500 MG	196	4	120.53
Celecoxib Capsule — 200 MG	430	20	54.47
Co-Amoxiclav Tablet — 625 MG	617	33	26.79
Simvastatin Tablet — 20 MG	87	13	4.91
Gliclazide Tablet — 80 MG	44	6	3.57

Appendix B. Answer Sheet

Item Description	Item Used (for 6 months)	Stocks Available	Acquisition Price	AMC	Qo	Cost (in PhP)
0.9% Sodium Chloride — 500 ML	1,257	243	51.69	209.5	1,014	52,413.66
Aspirin Tablet — 80 MG	364	36	1.56	60.7	328	511.68
Paracetamol Tablet — 500 MG	1,367	33	0.54	227.8	1,334	720.36
Clonidine Tablet — 75 MCG	1,112	388	23.88	185.3	724	17,289.12
Cefalexin Capsule — 500 MG	1,179	321	5.36	196.5	858	4,598.88
Ferrous Sulfate Tablet — 325	466	34	0.89	77.7	432	384.48
Tranexamic Acid Capsule — 500 MG	315	0	11.61	52.5	315	3,657.15
Digoxin Tablet — 250 MCG	407	43	4.11	67.8	364	1,496.04
Loratadine Tablet — 10 MG	163	37	15.63	27.2	126	1,969.38
Mefenamic Acid Capsule — 500 MG	2,709	291	1.34	451.5	2,418	3,240.12
Montelukast Tablet — 10 MG	253	47	32.14	42.2	206	6,620.84
Amlodipine Tablet — 5 MG	266	34	8.79	44.3	232	2,039.28
Omeprazole Capsule — 40 MG	589	11	42.86	98.2	578	24,773.08
Salbutamol Tablet — 2 MG	55	45	0.63	9.2	10	6.30
Sterile Water for Injection — 5 ML	5,300	0	9.83	883.3	5,300	52,099.00
Azithromycin Capsule — 500 MG	196	4	120.53	32.7	192	23,141.76
Celecoxib Capsule — 200 MG	430	20	54.47	71.7	410	22,332.70
Co-Amoxiclav Tablet — 625 MG	617	33	26.79	102.8	584	15,645.36
Simvastatin Tablet — 20 MG	87	13	4.91	14.5	74	363.34
Gliclazide Tablet — 80 MG	44	6	3.57	7.3	38	135.66
Total Cost						233,438.19



Activity Manual on Pharmaceutical Supply Chain Management

**for Local Government Health Facilities
(City Health Offices, Municipal Health Offices,
Rural Health Units, and Barangay Health Stations)**

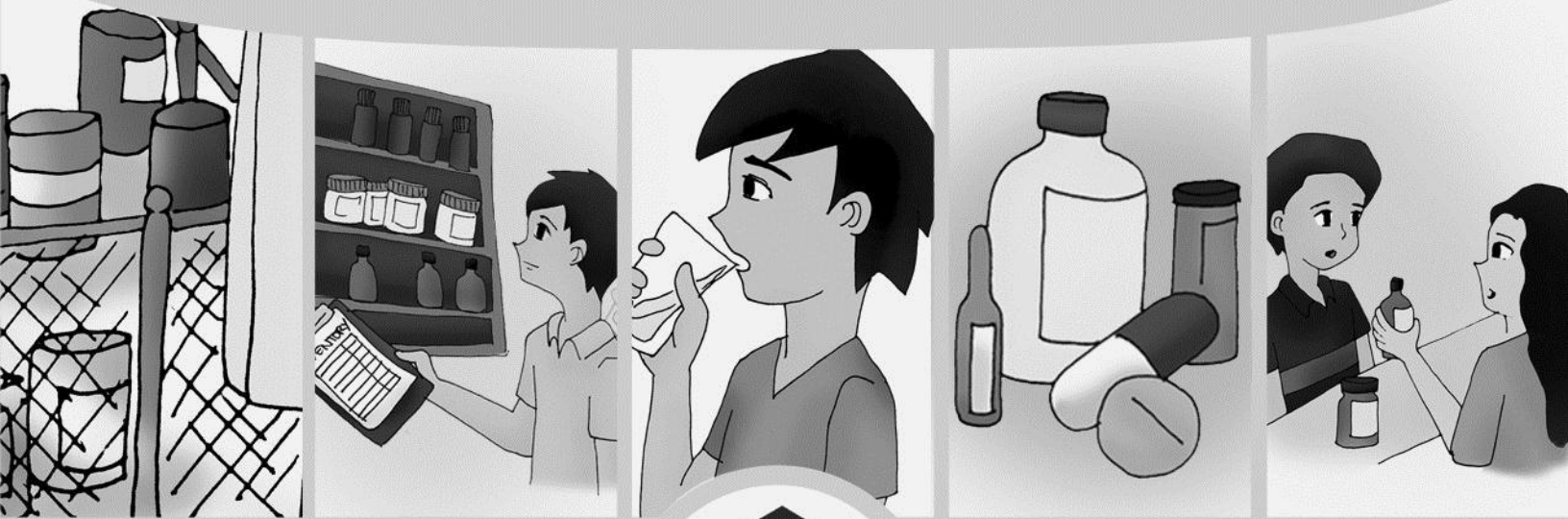


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Activity Manual on Pharmaceutical Supply Chain Management

**for Local Government Health Facilities
(City Health Offices, Municipal Health Offices,
Rural Health Units, and Barangay Health Stations)**



How to Use This Manual

This Activity Manual is for facilitators/ lecturers who will conduct training on Pharmaceutical Supply Chain Management for local government health facilities. This is used along with the Training Manual. The Activity Manual outlines the activities that participants are expected to participate in during the training. The activities are designed such that the participants can apply what they learned from the training. In addition to the activities, answers are provided (when applicable) to help facilitators/ lecturers in discussing them. Moreover, the following are the additional tasks of the facilitators/ lecturers:

- Must set decorum for the activity (e.g. cellphones must be turned off);
- Must see to it that all materials needed for the activities are prepared and ready for use;
- Must provide instructions before the start of each activity;
- Must be responsible for arranging or dividing the participants for group activity;
- Must encourage the participants to engage in all of the activities and provide feedback on the quality of output;
- Must monitor adherence to time limit for each activity;
- Must answer questions which the participants may ask for clarification; and
- Must summarize the output of the activity for the participants' benefit.

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