


ASSIGNMENTS

The assignments or Report writing should enable students to see the purpose for their study and some definite objectives to be achieved. The objectives of the lesson are essential in giving direction and definiteness to the pupils' thought and activities.

The procedure to be followed by the students in doing the work assigned must be explained by the teacher to make the study period effective. The purpose of the lesson assigned must be made known to the students and be recognized by them so that their interest may be stimulated. This refers to the integration of the past and the new lesson or to the principles of the appreciative learning. The psychological principle of apperception is thus given full recognition in the assignment function. Where the elements of appreciative experience are present, the teacher needs to direct the students in the use of such for interpretive purposes.

Another important function of the assignments or Report writing is the recognition of individual differences. All studies in mental measurements agree that among students there exist vast differences in intelligence, aptitudes, and temperaments. Even interests of students are found to be widely divergent. Students work with more vigor, ease, and pleasure when the things they do are in conformity with their interests. It is, therefore, exceedingly important that the assignment provides for these varied interest, aptitudes, and abilities of the pupils.

GRADING RUBRICS FOR REPORT WRITING/ASSIGNMENT

GRADING 	EXCELLENT QUALITY (5)	CONSIDERABLE QUALITY (4)	ADEQUATE QUALITY (3)	INCONSISTENT QUALITY (2)	UNSATISFACTORY QUALITY (1)
FORMAT/ LAYOUT	Follows formal report conventions, Follows formal report conventions, Prefatory parts, Parallel headings, Supplementary parts Demonstrates an effective layout.	Follows all but one of the formal report conventions, Demonstrates an Effective layout.	Reveals two format errors Applies convention incorrectly/incompletely	Reveals three format errors, Applies convention incorrectly/incompletely	Non-presentable because of numerous format errors, Applies convention incorrectly/incompletely
CONTENT / STRUCTURE: INTRODUCTION	Exhibits all of following characteristic: Begins with background / definition, Explains purpose, Describes scope and limitations of report, Offers a preview of the findings	Exhibits two errors in content/ structure: Begins with back ground /definition, Explains purpose, Describes scope and limitations of report Offers a preview of the findings	Reveals three errors in content/ structure: Provides partial background/ definition, Omits the purpose, Does not establish scope and limitations of report, Provides only a partial preview of findings	Demonstrates four major weaknesses: Provides a weak background/ definition Omits the purpose Does not establish scope and limitations of report Omits preview of findings	Demonstrates the following multiple weaknesses: Provides an ineffective background/definition, Omits the purpose Does not establish scope and limitations of report, Omits preview of findings

CONTENT / STRUCTURE: BODY	Discusses topic thoroughly and objectively, Use logical order to present information, Provides facts and figures, Uses appropriate length	Discusses topic adequately and objectively, Use logical order to present information, Provides facts and figures, Uses appropriate length	Discusses topic inconsistently Is sometimes vague Shows inconsistent organization Is too short/long	Does not discuss topic is vague, confusing Shows inconsistent organization Is too short/long	No discussion of topic Is cryptic, vague Shows no organization Is too short/long
CONTENT / STRUCTURE: CLOSING / RESULTS / CONCLUSION	Includes an effective summary of data presented, Draws conclusions, that are analytical, based on complete data, Recommends action, based on findings, Ends courteously, professionally Facilitates quick response based on need, data	Includes an effective summary of data presented, Draws conclusions, that are analytical, data somewhat complete Recommends action, partially based on findings Ends courteously Facilitates quick response based on need only	Includes a partial summary Draws partial conclusions, from data not presented Partial personalized ending Partial action close Partial facilitated response	Omits an effective summary Draws partial conclusions based on hearsay, not data Does not personalize ending Action close confusing Confusing facilitated response	Omits an effective summary of any kind Draws no conclusions Makes no recommendations No personalized ending Omits action close Does not facilitate response
GRAMMAR/ SPELLING	Shows effective use of proof-reading and editing: Eliminates all but a few minor errors in grammar, spelling, punctuation, acronym usage, and capitalization	Exhibits only six of the following errors: Spelling/word choice Mechanics: Sentence errors Pronoun errors Subject/verb Agreement, modifiers Parallel structure Punctuation Capitalization	Reveals seven of the following errors: Spelling/word choice Mechanics: Sentence errors Pronoun errors Subject/verb agreement, modifiers Parallel structure Punctuation Capitalization	Affects credibility due to the following eight errors: Spelling/word choice mechanics: Sentence errors Pronoun errors Subject/verb agreement, modifiers Parallel structure Punctuation Capitalization	Is far too brief for adequate evaluation Affects credibility due to: Spelling/ word choice Mechanics: Sentence errors Pronoun errors Subject/verb agreement, Modifiers Parallel structure Punctuation Capitalization

B. Pharm. 4th Year 1stSemester, 2022-23, CA2

COURSE: B. Pharm.

PAPER: INSTRUMENTAL METHODS OF ANALYSIS

CODE: PT-711

Full Marks: 25

Read the following Case Study carefully and then provide your answer with explanations. Special credits would be given to those who would provide relevant graphical or imagery explanations along with the report.

Jason got absorbed in a pharmaceutical company and got place in Quality Control. First day he was given an API of Voglibose (an antidiabetic drug) which newly came into the market. He was asked to test the purity of API by one sensitive assay method. He previously did not know any analytical method or wavelength for the assay of the same. However, he was given the charge for it. Now answer the following questions:

Q. No	Question	Map. CO	Marks
1	Can he use UV-Visible Spectroscopy at all to do the assay? Justify with electronic structure and explanation.	1	6
2	If yes (IF), what would the analytical wavelength for the assay? How can he find out the analytical wavelength?	1	6



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3	How many absorption bands can he expect from the UV-Vis absorption of the compound? Explain with transitions.	1	6	
4	The Absorptivity (1%, 1cm) of Voglibose is also not given since it is a function of the solvent he will be using. Depending on the solvent he will use, how could he find out the same? Explain with correlating mathematics and Beer's Lambert's Law.	1	7	
QUESTION PAPER AND CO. MAPPING		CO	NO OF QUES.	MARKS
		CO. 1	4	25
		CO. 2		
		CO. 3		
		CO. 4		
		TOTAL		25

M. Pharm. 1ST Year 1ST Semester, 2022-23, 1ST continuous Assessment

COURSE: M. PHARM

PAPER: PHARMACEUTICAL VALIDATION

CODE: MPA-103T

Time: SUBMIT BEFORE 10TH OCT 22

Full Marks: 25

INSTRUCTIONS

1. Assignment should be written in own hand writing with blue/black pen.
2. No typing or print document should be submitted.
3. Mention page number properly at the right bottom corner of each page.
4. Attach the front page mentioning your name, University roll no, semester, year, Subject, Subject code and topic.
5. Pdf file should be renamed as "Roll no_your name" (eg. 18901918025_Name).

ASSIGNMENT Topic	Map. CO	Marks	
Apply your understanding to describe in detail the Qualification and Validation, Advantage of Validation, Streamlining of Qualification & Validation process and Validation Master Plan.	1	25	
ASSIGNMENT AND CO. MAPPING	CO	NO OF QUES.	MARKS
	CO. 1	CO1	25
	CO. 2		
	CO. 3		
	CO. 4		
	CO. 5		



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	TOTAL	1	25
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B. Pharm. 3RD Year 6TH Semester, 2023, 1ST continuous Assessment

COURSE: B. PHARM

**PAPER: PHARMACEUTICAL QUALITY ASSURANCE
PT611N**

CODE:

Full Marks: 25

WRITE THE Presentation within 5-6 slides (excluding front page and last slide), Convert your file into PDF format and Rename the PDF with your University Roll No. Name AND UPLOAD IN PDF FORMAT IN THE UPLOADING SECTION OF GOOGLE FORM.

PRESENTATION TOPIC	Map. CO	Marks	
Total Quality Management (TQM): Definition, elements, philosophies	CO1	25	
ASSIGNMENT AND CO. MAPPING	CO	NO OF QUES.	MARKS
	CO. 1	CO1	25
	CO. 2		
	CO. 3		
	CO. 4		
	CO. 5		
TOTAL	1	25	

B. Pharm. 2nd Year 4th Semester, 2023 2nd Continuous Assessment

SUBJECT: MEDICINAL CHEMISTRY I (THEORY) CODE: PT 413 (N)

Time: ALL HAVE TO SUBMIT ON or BEFORE 8TH MARCH, 2023 Full Marks: 25

Instructions: Please read carefully and follow the given instructions.

1. Assignment should be written in your own handwriting with blue/black pen.
2. **No typing or printing document should be submitted.**
3. Mention the page number properly at the right bottom corner of each page.
4. Attach the front page mentioning your name, University roll no, semester, year, Subject, Subject code and topic.
5. Pdf file should be renamed as "Roll no_your name" (eg. 18901918025_Name).
6. Grading will be as per rubrics provided by the Examination cell.
7. You should submit your assignment in the link provided by the Examination cell to upload the PDF of your assignment.

Q. No	Topic for the assignment of All students	Map. CO	Marks
1	Discuss and explain the effect of the physico-chemical properties of drug in the efficacy of its biological activity with proper examples.	CO.PT 413N.1	15



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2	Elaborate on how drug metabolism affects the biological activity of drug.	CO.PT 413N.2	10	
QUESTION PAPER AND CO. MAPPING		CO	NO OF QUES.	MARKS
		CO. 1	1	15
		CO. 2	1	10
		CO. 3	0	0
		CO. 4	0	0
		CO. 5	0	0
		TOTAL	3	25

Dr. B. C. Roy College of Pharmacy and Allied Health Sciences

Durgapur - 713206

B. Pharm. 3rd yr 5th Semester' 2022-2023

GRADE SHEET CONTINUOUS EVALUATION 1 (CA2)

PAPER: Pharmacognosy & Phytochemistry II Theory

CODE: PT 512

S L. N O	UNIVER SITY ROLL NO	NAME OF THE STUDENT	FORM AT/ LAYO UT	CONTENT / STRUCTU RE: INTRODUC TION	CONTENT / STRUCTURE: BODY	CONTENT / STRUCTURE: CLOSING /RESULTS / CONCLUS ION	GRAMM AR/ SPELLIN G	TOTAL (25)
1	18901920 001	RAM SWARUP CHATTOPADHYAY	4	4	4	3	4	19
2	18901920 002	MD TOUHEED AHAMED	4	4	4	3	3	18
3	18901920 003	SAGNIK DE	4	3	3	3	3	16
4	18901920 004	NUHIN SK	3	3	3	2	3	14
5	18901920 005	TAMAL CHATTERJEE	4	3	2	3	3	15
6	18901920 006	KOUSHIK DAS	4	4	4	4	5	21
7	18901920 007	SUBRATA DUTTA	3	4	4	4	4	19
8	18901920 008	TUSHAR DEBNATH	4	4	2	2	3	15
9	18901920 009	DIBENDU SANNIGRAHI	4	4	4	3	4	19
10	18901920 010	SATHI GHOSH	4	4	4	3	5	20
11	18901920 011	SAIKAT GOSWAMI	3	2	3	3	3	14
12	18901920 012	ANIKET OJHA	5	5	5	4	4	23
13	18901920 014	POULAMI SINGHA	5	5	5	4	3	22
14	18901920	MAHIMA CHOWDHURY	4	4	4	3	4	19



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	015							
15	18901920 016	SAMPRITI MISHRA	3	2	2	2	4	13
16	18901920 017	SRIJITA BASAK	5	5	5	4	3	22
17	18901920 018	ABHISHEK CHOWDHURY	3	3	2	2	3	13
18	18901920 019	BILASH PATRA	4	4	4	2	4	18
19	18901920 020	PRITAM MONDAL	3	4	4	3	4	18
20	18901920 021	SHYAMACHARAN BANERJEE	4	5	4	4	4	21
21	18901920 022	RITWIM MONDAL	4	5	5	3	4	21
22	18901920 023	SOURAV POULIK	4	3	4	4	4	19
23	18901920 024	ANUPAM SINGHA ROY	4	3	4	4	4	19
24	18901920 025	SUBHASH GHOSH	3	3	2	3	3	14
25	18901920 026	BASTAV MAZUMDAR	4	4	3	4	3	18
26	18901920 027	MOHAN CHANDRA BARAL	4	4	4	4	3	19
27	18901920 028	SHANTANU BERA	4	4	4	3	4	19
28	18901920 029	BITHIKA BANERJEE	4	5	5	5	4	23
29	18901920 030	ANOMITA DAS	4	5	5	4	4	22
30	18901920 031	ANKITA DEY	4	5	5	5	4	23
31	18901920 032	AGNITH MAITY.	4	4	3	3	4	18
32	18901920 033	SAYAN NANDI	4	4	4	4	3	19
33	18901920 034	TAPABRATA BHANJA	4	4	5	4	4	21
34	18901920 035	ARITRA NANDY	4	5	5	4	4	22
35	18901920 036	ANIRBAN DAN	4	4	3	3	4	18
36	18901920 037	SUBHANKAR DAS	4	4	5	4	4	21
37	18901920 038	NEHA DAS	4	4	5	3	4	20
38	18901920 039	ANKAN MUKHERJEE	4	4	4	4	4	20



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39	18901920 040	SOHAM KUNDU	4	4	5	3	4	20
40	18901920 041	SUMAN KUMAR PANDA	4	4	5	4	4	21
41	18901920 042	ARKA GANGULY	3	4	4	3	4	18
42	18901920 043	ANWESHA BANDYOPADHYAY	4	4	5	4	4	21
43	18901920 044	INDRANIL KUNDU	3	4	4	3	3	17
44	18901920 045	RITWIK SAHOO	4	4	5	4	4	21
45	18901920 046	SOUVIK GHORAI	4	4	3	3	4	18
46	18901920 047	ARNAB CHOWDHURY	4	5	4	4	4	21
47	18901920 048	SAYAN KAR	4	4	5	5	4	22
48	18901920 049	VISHAL KUMAR MAHATO	4	4	3	4	4	19
49	18901920 050	SARBARTHA DAS	4	5	5	3	4	21
50	18901920 051	SUMAN CHATTERJEE	4	4	4	3	4	19
51	18901920 052	SOUBHAGYA MUKHERJEE	4	4	4	4	5	21
52	18901920 054	SUSHOVAN MAITY	4	4	4	4	3	19
53	18901920 055	RONAJIT MONDAL	3	4	4	4	4	19
54	18901920 056	ARPAN KAR	4	5	5	4	4	22
55	18901920 057	BIDHAKAR RAY	3	3	4	3	4	17
56	18901920 058	ABHISHEK MALIK	3	2	3	2	3	13
57	18901920 059	JEET BANERJEE	4	4	3	3	3	17
58	18901920 060	SHOAIB AKHTAR	4	4	4	3	3	18
59	18901920 061	RANADEEP BOSE	4	4	5	3	4	20
60	18901920 062	SOYEB AKTAR	4	4	4	3	4	19
61	18901920 064	SUMANA DAS	4	4	5	4	3	20
62	18901920 065	SAYAN HATI	4	5	5	3	4	21
63	18901920 067	ROHAN MONDAL	4	4	4	3	3	18



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64	18901920 069	ANTARA GUPTA	4	5	4	4	4	21
65	18901920 070	AMRITA SINGHA	4	5	5	4	4	22
66	18901920 071	ARIJIT SIL	4	5	4	3	4	20
67	18901920 072	SUJATA BURNWAL	4	5	4	4	4	21
68	18901920 073	PRITAM JANA	4	4	5	4	4	21
69	18901920 074	SUSHANTA SINGHA	3	4	4	3	4	18
70	18901920 075	SAPTARSHI BHATTACHARJEE	3	4	5	3	4	19
71	18901920 076	BIKRAM DAS	4	4	5	4	4	21
72	18901920 077	BAPI KONAI	3	4	4	4	4	19
73	18901920 078	SHRABANI DAS	4	5	5	3	4	21
74	18901920 079	RISHAV SETH	4	5	5	4	4	22
75	18901920 080	AYUSH SEN	4	4	4	4	4	20
76	18901920 081	RIK KARAK	4	5	4	3	4	20
77	18901920 082	MD SAKIL HASAN	4	4	4	3	4	19
78	18901920 083	SK SAMIM HOSSAIN	4	4	4	3	4	19
79	18901920 084	VANSHIKA AGARWAL	4	5	5	4	5	23
80	18901920 085	SAUMYABRATA BHATTACHARYA	4	5	4	3	4	20
81	18901920 086	SOUGATA GHOSHAL	3	4	4	3	4	18
82	18901920 087	ANIK MUKHOPADHYAY	4	4	4	3	4	19
83	18901920 088	TAMAL PARIA	4	5	4	3	4	20
84	18901920 089	TANUSHREE PRADHAN	4	5	5	3	4	21
85	18901920 090	MD SAFI	3	2	3	2	3	13
86	18901920 091	BIBEKANANDA BHUIN	4	4	4	4	4	20
87	18901920 092	SUMAN MAITY	4	5	4	4	3	20
88	18901920 093	SAGAR MANDAL	4	5	5	3	4	21



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89	18901920 094	APARESH BERA	4	4	5	4	4	21
90	18901920 095	RITTIK PAUL	4	4	4	4	3	19
91	18901920 096	SUBHRAKANTA MANDAL	4	4	3	3	3	17
92	18901920 097	SOUMYADEEP GUHA	4	5	5	4	4	22
93	18901920 098	NABANITA SEN	4	4	5	3	4	20
94	18901920 099	SHANKHASREE SEN	4	4	4	4	4	20
95	18901920 100	PRITAM DE	4	5	4	3	4	20
96	18901920 101	SINCHAN KUMAR ROY	4	5	4	4	4	21
97	18901920 102	AJITESH PATRA	4	4	3	3	3	17
98	18901920 103	JYOTIRADITYA DAS	4	4	4	3	4	19
99	18901920 104	PRIYANKA JANA	3	5	5	4	4	21
100	18901921 105	SIDDHANTA MISHRA	4	5	5	4	4	22
101	18901921 106	POULAMI BISUYI	4	5	5	5	4	23
102	18901921 107	SURANJANA BASAK	4	5	5	4	4	22
103	18901921 108	ATANU JANA	4	5	5	5	4	23
104	18901921 109	PRABIR MONDAL	3	4	5	5	4	21
105	18901921 110	SAMPRI TI PRAMANICK	4	4	5	4	4	21
106	18901921 111	DEBJYOTI DEY	5	5	5	4	4	23
107	18901921 112	SAYAK MONDAL	4	4	5	4	4	21
108	18901921 113	RIYA KUNDU	4	5	5	4	4	22
109	18901921 114	BUBAI MOHISH	4	5	4	4	4	21
110	18901921 115	SANDIP RUHIDAS	4	5	5	4	4	22
111	18901921 116	SK NOMRUDDIN	4	4	4	4	4	20
112	18901921 117	ARPAN NANDI	4	5	5	4	4	22

POWER POINT PRESENTATION



GRADING RUBRICS FOR POWER POINT PRESENTATION

GRADING ➔	5	4	3	2	1
CONTENT	Content is accurate and information is presented in a logical order.	Content is accurate but some information is not presented in a logical order, but is still generally easy to follow.	Content is accurate but some information is not presented in a logical order making it difficult to follow.	Content is questionable and information is not presented in a logical order making it difficult to follow.	Content is inaccurate and information is not presented in a logical order making it difficult to follow.
SLIDE CREATION	Presentations flows well and logically presentation, reflects extensive use of tools in a creative way, correct number of slides.	Presentations flows well, tools used correctly, correct number of slides, overall presentation is interesting.	Presentations flows well, some tools used to show acceptable understanding, correct number of slides.	Presentations is unorganized, tools are not used in a relevant manner, lacking in number of slides.	Presentation has no flow, no tools used, insufficient number of slides.
SLIDE TRANSITIONS	Transitions are smooth and interesting, transitions enhance the presentation.	Smooth transitions are used on most slides.	Smooth transitions are used on some slides.	Very few transitions are used and/or they distract from the presentation.	No transitions used
MECHANICS	No spelling errors, no grammar errors, text is in authors own words.	Few spelling errors, few grammar errors, text is in authors own words.	Some spelling errors, some grammar errors, text is in authors own words.	Some spelling errors, some grammar errors, Most of text is in authors own words.	Many spelling errors and/or text is copied.
TECHNOLOGY CONNECTION	Comprehensive use of technology in apparent.	General understanding of technology.	Acceptable understanding of technology.	Little understanding of technology.	No understanding of technology.

Shobhan Bose

Shobhan Bose
(IC_Exam)

B. Pharm. 3rd Year 5th Semester, 2022-23, 1st CA COURSE: B. PHARM

PAPER: Pharmacognosy & Phytochemistry II Theory
Full Marks: 25

CODE: PT 512

Make a PowerPoint presentation of 6-7 slides; including the titular slide. Everyone will be evaluated on the basis of the rubric set by examinations department, BCRCP. Everyone is instructed to complete the presentation within stipulated time.

Assignment/Topic	Map.	Marks
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		CO	
STUDY OF UTILIZATION OF RADIOACTIVE ISOTOPES IN INVESTIGATION OF BIOSYNTHETIC PATHWAYS		1	25
PowerPoint Presentation& CO. MAPPING		CO	NO OF QUES
			MARKS
		CO. 1	1
		CO. 2	-
		CO. 3	-
		CO. 4	-
		CO. 5	-
		TOTAL	1
			25

B. Pharm. 2 Year 3rd Semester, 2022, 1st Continuous Assessment

SUBJECT: PHYSICAL PHARMACEUTICS 1(THEORY)

CODE: PT 316

Time: 7 days

Full Marks: 25

Topic of assignment	Map. CO	Marks
Complexation: Classification, methods of analysis and applications in pharmaceutical fields	CO1	25
QUESTION PAPER AND CO. MAPPING	CO	NO OF QUES
	CO1	1
	CO2	0
	CO3	0
	CO4	0
	TOTAL	1
		25

B. Pharm. 4TH Year 7TH Semester, 2022-23, 1ST continuous Assessment

COURSE: B. PHARM

PAPER: INSTRUMENTAL METHODS OF ANALYSIS

CODE: PT-711

Time: WITHIN 28TH JULY 22 ALL HAVE TO SUBMIT

Full Marks: 25

WRITE THE ASSIGNMENT IN AN A4 PAPER AND UPLOAD IN PDF FORMAT IN THE UPLOADING SECTION OF GOOGLE FORM.

PRESENTATION Topic	Map. CO	Marks
Gas chromatography – Introduction, theory, instrumentation, Derivatization, temperature programming, advantages, disadvantages and applications	3	25



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ASSIGNMENT AND CO. MAPPING	CO	NO OF QUES.	MARKS
	CO. 1		25
	CO. 2		
	CO. 3	CO3	
	CO. 4		
	CO. 5		
TOTAL	1	25	

B. Pharm. 4th Year 7th Semester, 2022, 1st CA

COURSE: B. Pharm.

PAPER: INDUSTRIAL PHARMACY II

CODE: PT-716A

Full Marks: 25

PREPARE YOUR PRESENTATION (PPT) WITHIN 7-8 SLIDES AND BE READY TO PRESENT YOUR SLIDES IN THE SCHEDULE CLASS. SEPARATE GOOGLE LINK WILL BE PROVIDED FOR UPLOADING YOUR PREPARED PRESENTATION (PPT). AT THE TIME OF SUBMISSION YOU SHOULD RENAME IT WITH YOUR UNIVERSITY ROLL NUMBER AND NAME.

Q. No	Question	Map. CO	Marks
1	A presentation on "Good Laboratory Practices (GLP)".	3	25

QUESTION PAPER AND CO. MAPPING	CO	NO OF QUES.	MARKS
	CO. 1		
	CO. 2		
	CO. 3	1	25
	CO. 4		
	CO. 5		
TOTAL	1	25	

SAMPLE OF ASSIGNMENT

Dr. B.C. Roy College of Pharmacy And Allied Health Sciences
Durgapur (W.B)
Under
Maulana Abul Kalam Azad University of Technology

ASSIGNMENT-I
Topic: Sulfonamides And β -lactam Antibiotics.

NAME: Malima, Chowdhury
ROLL NO.: 1810192013
Paper: Pharmacology
Paper Code: P.T.-618
B. Pharm 8th Year, 6th Semester (Session: 2022-2023...)

1. Mention various contraindication of penicillin-G and explain the reason.
Penicillin G (penicillin G potassium) is an antibiotic prescribed for the treatment of bacterial infection.
→ Allergy to penicillin: Patients with a known allergy to penicillin should not use penicillin-G. An allergic reaction to penicillin can range from mild rash to severe anaphylaxis, which can be life threatening.
As its a common allergen, it occurs when immune system recognizes penicillin as a foreign substance. They also contain the antibiotics ranging mild to severe.
→ Bleeding disorders: Penicillin-G can interfere with blood clotting, so it should be used with caution in people with blood disorder.
→ Pregnancy and Breast feeding: Penicillin-G is generally considered safe for pregnant and breast-feeding women, but should be used with caution and if the benefits outweigh the risks.
→ Methicillin resistant staphylococcus aureus (MRSA): Penicillin-G is not effective against MRSA infection. Therefore it should not be used to treat MRSA infection. It is a bacterial strain that is resistant to penicillin and other antibiotics. There for penicillin-G increase the risk of toxicity.

2. Write in details on role of β -lactamase inhibitors in β -lactam formulations.
 β -lactam inhibitors have weak antibacterial activity. Cloxacillin acid is the first one of this class and its Natural product from streptomyces normally used in combination with amoxicillin and other β -lactamase sensitive penicillins.
Bacteria have many methods with which to combat the effects of β -lactam type drugs. There are three clinically available β -lactamase inhibitors which are combined with β -lactam. Ampicillin, amoxicillin, ticarcillin and piperacillin are also available in combination with one of several beta-lactamase inhibitors: clavulanic acid, sulbactam or tazobactam.
The addition of a beta lactamase inhibitors extends the activity of these penicillins to include beta-lactamase-producing strains of staphylococcus as well as some beta-lactamase producing gram negative bacteria. It is administered with β -lactam antimicrobials to prevent antimicrobial resistance by inhibiting some beta-lactamase. It also inhibits activity of plasmid mediated beta-lactamase.

3. Write in details on role of peptidoglycan on bacterial cell and mechanism of different β lactam antibiotics.

Peptidoglycan is a major component of the bacterial cell wall and plays a crucial role in maintaining cell shape, integrity and protection against osmotic pressure. It is a complex polymer made up of repeating units of two sugar derivatives, N-acetylglucosamine (NAG) and N-acetylmuramic acid (NAM) crossed linked by short peptide chains. Peptidoglycan provides rigidity to the bacterial cell wall and helps in preventing osmotic lysis.

β -lactam anti-biotics such as penicillin, ampicillin and cephalosporins, are a class of anti-biotics that target the peptidoglycan layer of the bacterial cell wall. They work by inhibiting the activity of enzymes called transpeptidase, which are responsible for cross linking.

Bacteriostatic lipid coating

4. The β -lactam antibiotics have a β -lactam ring in their structure. It's a four membered ring and cyclic amide structure. It stop drugs from binding - Non-porous cell walls, new PBP's and Random mutation of new PBP. Modify Target- Production of new target. Need more antibiotic.

Mechanism: The amide of the β -lactam ring is unusually reactive due to ring strain and conformational arrangement which does not allow the lone pair of the nitrogen to interact with the double bond of the carbonyl.

β Lactams acylate the hydroxyl group on the residues of PBP active site in an irreversible manner. This reaction is further aided by the oxyanion hole, which stabilizes the tetrahedral intermediate.

Non-bactericidal are monocyclic β -lactams, i.e. they contain a single ring - the β -lactam ring.

Cephalosporins inhibit the bacterial cell wall synthesis similar to penicillin. They classified into 5 generations based on their antibacterial spectrum.

Carbapenems include imipenem, meropenem, eburpenem, doripenem and faropenem. They inhibit bacterial cell wall synthesis similar to penicillin. Carbapenems are highly resistant to most β -lactamases.

β -lactam antibiotics \rightarrow bind PBP \rightarrow inhibit cross-linking of peptidoglycan \rightarrow cell wall deficient bacteria \rightarrow osmotic lysis \rightarrow bactericidal effect.

Quarternary inhibitors, e.g. ampicillin, amoxicillin and sulbactam, are used in combination with β -lactams.

5. Sulfamethoxazole and trimethoprim interacts with other protein bound drugs.

Pharmacodynamics: Interferes with the synthesis of folic acid.

Pharmacotherapeutics: Uncomplicated UTIs and systemic infections.

Adverse effect: Nausea, vomiting, diarrhea, allergic reactions and crystalluria.

Health status: Assess for contraindications to drug therapy.

Environment: Photosensitivity may occur.

Risk for injury related to drug induced hypersensitivity reaction, liver or blood pressure. By the end of therapy, the patient will be free from avoidable drug therapy related injuries.

By inhibiting different step in the folic acid synthesis pathway the combination of trimethoprim and sulfamethoxazole prevent the bacteria from producing adequate amount of folate. This leads to a shortage of important metabolites and nucleotides such as purines and pyrimidines which are essential for DNA synthesis and cell division. As a result, the bacteria are unable to replicate and grow and their population decreases. This makes them more susceptible to the immune system and other antibiotics and it eventually leads to their death.

Moreover, the combination drug has a broader spectrum of activity as the two drugs have different mechanism of action. Thus, it has a wider range of uses against different bacteria.

Watch Report on Jarisch-Herxheimer reaction and Steven Johnson Syndrome.

Jarisch-Herxheimer Reaction: This reaction is believed to be due to the liberation of toxic products from the destruction of trypanosomes. It is a reaction to endotoxin-like products released by the death of harmful micro-organisms within the body during antibiotic treatment. Efficacious antimicrobial therapy of bacterial toxins into the bloodstream resulting in systemic inflammatory response.

Common Names: Die-off, Detox-Reaction. Typical symptoms-wide spread pain, fatigue, headache, fever, depression. This reaction resolved rapidly in the study using homeopathic & herbal drugs remedies.

Stevens-Johnson Syndrome: Stevens-Johnson Syndrome (SJS) is an immune-complex-mediated hypersensitivity complex that typically involves the skin and the mucous membranes while minor presentations may occur. Significant involvement of oral, nasal, eye, urethral, and lower respiratory tract mucous membranes may develop in the course of the illness. If and respiratory involvement may progress to necrosis. Stevens-Johnson Syndrome is a serious systemic disorder with potential for severe morbidity and even death. A more severe form of the condition is called Toxic epidermal necrolysis (TEN). It involves more than 30% of the skin surface and extensive damage to the mucous membranes. Strong painkillers to ease pain, to ease any pain.



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Durgapur (W.B)
Under
Maulana Abul Kalam Azad University of Technology

ASSIGNMENT-I (CA2)

NAME: Priya Ray
ROLL NO. (UNIVERSITY): 18901918
Paper: Pharmaceutical Microbiology
Paper Code: P.T.619
B. Pharm 3rd Year, 8th Semester (Session: 2022-2024)

1) As per your view, what type of organisms can be selected for Antibiotic Production? Elaborate your topic to justify it.

→ **Antibiotics**
Antibiotics are obtained from microorganisms (Bacteria/Fungus) which kill or prevent the growth of pathogenic organisms without harming the host tissue. On may cause minor infection, it must be reach the site of infection penetrating lens of tissue at an effective concentration and it must not interfere with the body defense mechanisms.

Types of organisms can be selected for the antibiotics production :-
Antibiotics are the most important class of Pharmaceuticals produced by microbial biotechnological process. They are the products of secondary metabolism, dominant in the stationary phase of the growth curve.

Soil is the major reservoir of microorganisms that produce antibiotics. Considering that soil is densely packed with microorganisms, it is not a wonder that many bacterial and the fungal species have evolved over the time to develop ways of inhibiting their neighbors for the benefit of their own growth. An antibiotic made by a microbe can inhibit many other soil microbes. The bacterial genera *Bacillus* and *Streptomyces* along with the fungal genera *Penicillium* and *Cephalosporium* are commonly found in soil. The genus *Streptomyces* are the most prolific antibiotic producers and, although bacteria, use a unique subgroup of bacteria called the Actinomycetes. Along with most other *Streptomyces*, *Streptomyces griseus* strains are the most common producers of antibiotics. Members of the genus *Streptomyces* are the source for numerous antibiobacterial pharmaceutical agents; among the most important of these are:

- Chloramphenicol (from *S. venezuelae*)
- Neomycin (from *S. fradiae*)
- Terramycin (from *S. virginiae* and *S. aureofaciens*)
- Diaphenacin (from *S. nigrescens*)
- Lincomycin (from *S. lincolnensis*) etc.

Mechanism of action :-
Streptomyces is a member of a family of antibiotics that work by interrupting the function of bacteria cells "ribosomes" the complex ribosomes, serving as a target for antibiotics that work by inhibiting the synthesis of proteins. These have two main points on ribosomes. The larger subunit does the protein building, guided by a type of RNA called messenger RNA (mRNA), which binds to it. The small subunit reads the mRNA and selects the matching transfer RNA (tRNA) molecule, which selects and delivers the next amino acid to the ribosome. This is where *Streptomyces* producing antibiotics play a role. It binds close to the small subunit, causing it to severally misread the sequence. This results in the synthesis of random proteins which ultimately kills the bacteria.

Modern process of antibiotics production :-
Microorganisms used in fermentation are closely identical to the wild type. This is because species are often genetically modified to yield the maximum amount of antibiotics. Mutation is often used and is encouraged by introducing mutagens such as UV radiation or certain chemicals. Selection and further reproduction of the higher yielding strains over many generations can raise yields by 10-fold or more. Another technique used to increase yields is gene amplification, where copies of genes coding for enzymes involved in the antibiotic production can be inserted back into a cell, via vectors such as plasmids.

2) Discuss briefly the application of rDNA technology.

→ **Recombinant DNA technology :-**
Recombinant DNA technology comprises altering genetic material outside an organism to obtain enhanced and desired characteristics in living organisms or as their products. This technology involves the insertion of DNA fragments from a variety of sources, having a desirable gene sequence via appropriate vector.

Application of rDNA technology :-
Recombinant DNA is widely used in biotechnology, medicine and research. Today, recombinant proteins and other products that result from the use of DNA technology are found in essentially every western pharmacy, physician or veterinarian office, medical testing laboratory and biological research laboratory.

1) Production of Antibiotics :-
Antibiotics are the chemical substances which are used against bacterial infection. They can be produced by microorganisms as well as in the laboratory. They have the ability to destroy micro-organisms or other harmful microbes which cause infections in the body. Penicillium and *Streptomyces* are used for mass production of various antibiotics Penicillin and Streptomycin.

2) Production of Human Insulin :-
Insulin is a hormone made up protein, secreted in the pancreas by some cells called as β cells. This hormone is responsible for controlling the glucose level in humans. If a person has decreased amount of glucose level in his body will suffer from a disease called diabetes. The insulin is usually extracted from pancreas of cow and pig. This insulin is slightly different in structure from human insulin. As a result, it leads to allergic reaction in about 6% patients. Human gene for insulin production has been incorporated into bacterial DNA and such genetically engineered bacteria are used for large scale production of insulin. This insulin does not cause allergy.

3) Production of Interferon :-
Interferon is a virus-induced protein produced by virus-infected cells. Interferon are antiviral in nature and act on first course and lymph nodes causing serious infections including cancer very small quantity from human blood cells. It is thus very costly when it is now possible to produce interferon by recombinant DNA technology at much cheaper rate.

4) Monoclonal Antibodies :-
When a foreign object enters the body, immune system of the body release a specific protein called as antibody. Hybridoma technology has made it possible to produce monoclonal antibodies. In this technique, the lymphocytes or B cells are joined with myeloma cells, the resulting substance is called as hybridoma. This hybridoma produces unlimited antibodies in the culture. The antibody induced is called as monoclonal antibody. These antibodies are used to produce vaccines against different viral infections.

5) DNA fingerprinting :-
DNA fingerprinting is a technique in which biological samples help in solving forensic problems. This technique is used to establish that whether the suspected person is committed a crime or not.

6) Diagnosis of disease :-
Many disease are diagnosed by comparing normal tests. Recombinant DNA technology has allowed the development of many tests which are being used to diagnose disease like TB and cancer when they are not diagnosed properly, they can be a threat to human health. In the diagnostic process, certain pathogens are isolated and identified, and then diagnostic kits are produced. When the genome of the specific pathogen is known to kill or block its pathogenic activity.

7) Production of vaccines :-
Vaccines are now produced by transfer of antigen coding gene to disease causing bacteria. Such antibodies provide protection against the infection by the same bacteria or virus.

8) Gene therapy :-
Genetic engineering may one day enable the medical scientists to replace the defective gene responsible for hereditary disease (eg. haemophilia, phenylketonuria, alcaptonuria) with normal genes. This new system of therapy is called gene therapy.

9) Production of Enzymes :-
Some useful enzymes can also be produced by recombinant DNA technique. For instance, enzyme urokinase, which is used to dissolve blood clots, has been produced by genetically engineered microorganisms.

10) Recombinant blood clotting factor VIII :-
A blood clotting protein that is administered to patients with forms of the bleeding disorder haemophilia, who are unable to produce factor VIII in quantities sufficient to support normal blood coagulation. Before the development of recombinant factor VIII, the protein was obtained by processing large quantities of human blood from multiple donors, which carried a very high risk of transmission of blood borne infectious disease, for example HIV and hepatitis B.

11) Human Growth Hormone :-
Human growth hormone is a polypeptide hormone. It is responsible for growth, reproduction of the cells and regeneration in humans as well as animals. It is secreted by somatotrophic cells present in the pituitary glands. In recent years, scientists have developed many growth hormones using recombinant DNA technology. The disease of dwarfism is cured with this hormone.

Recombinant DNA technology is an important development in biotech that has made the human life much easier. In recent years, it has advanced strategies for biomedical applications such as cancer treatment, genetic disease, diabetes and several plant disorders especially viral and fungal resistance.

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B. Pharm. 4th yr 7th Semester' 2022-2023

GRADE SHEET CONTINUOUS EVALUATION 1 (CA1)

PAPER: INDUSTRIAL PHARMACY-II

CODE: 716A

SL. NO	UNIVERSITY ROLL NO	NAME OF THE STUDENT	CONTENT (5)	SLIDE CREATION (5)	SLIDE TRANSITIONS (5)	MECHANISMS (5)	TECHNOLOGY CONNECTION (5)	TOTAL (25)
1	18901918	PRIYA RAY	4	4	4	4	4	20



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	068							
2	18901918 097	DEBOJYOTI SARKAR	5	5	4	4	5	23
3	18901919 001	ANIRBAN GHOSH	4	4	3	3	4	18
4	18901919 002	SOHAM DUTTA	4	4	5	3	4	20
5	18901919 003	DEBAM RAY	5	5	3	3	4	20
6	18901919 004	SUCHETA KARMAKAR	3	3	3	4	4	17
7	18901919 005	ANITA KUMBHAKAR	4	4	4	5	3	20
8	18901919 006	ARNAB PAL	3	3	4	4	4	18
9	18901919 007	PRODIPTO DAS	3	3	3	4	4	17
10	18901919 008	NIKITA DUTTA	5	5	5	4	5	24
11	18901919 009	SWARAJ NAYEK	4	4	4	5	3	20
12	18901919 010	MEHEDI HASAN	2	2	2	3	1	10
13	18901919 011	SUDIN NAYEK	A	A	A	A	A	A
14	18901919 012	DEBABRATA CHATTOPADHYAY	2	2	2	3	1	10
15	18901919 013	DIPEN RANA	3	3	3	3	3	15
16	18901919 014	SUMAN MONDAL	3	2	4	3	3	15
17	18901919 015	DEBARGHYA KARFORMA	2	2	1	3	2	10
18	18901919 016	ARYADIPTO DASGUPTA	4	4	4	3	5	20
19	18901919 017	ABHISHIKTA SARKAR	2	1	2	2	3	10
20	18901919 018	ANKIT DAS	4	4	4	5	5	22
21	18901919 019	ABDUR RAHAMAN	4	5	3	4	4	20
22	18901919 020	ANGANA CHAKRABORTY	5	5	4	4	4	22
23	18901919 021	ABHIJIT GOSWAMI	4	5	4	5	4	22
24	18901919 022	ARIJIT DEY	4	4	4	3	4	19
25	18901919 025	SOUMYADIP SAHA	3	3	3	2	4	10



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26	18901919 026	ANIRBAN DALUI	3	2	3	3	4	15
27	18901919 027	GOPENDRA KRISHNA ROY	A	A	A	A	A	A
28	18901919 028	SUBHANKAR NAG	4	4	4	3	3	18
29	18901919 029	HAREKRISHNA SAHA	2	1	2	2	3	10
30	18901919 030	SOUMYADEEP MAJHI	4	4	4	5	3	20
31	18901919 031	SRINJANI MITRA	4	3	3	3	2	15
32	18901919 032	HIRAK BHOWMIK	1	2	2	2	3	10
33	18901919 033	RUDRA DAS	5	5	5	5	4	24
34	18901919 034	ANKITA KARMAKAR	2	1	2	2	3	10
35	18901919 035	SOUVIK KOWER	A	A	A	A	A	A
36	18901919 036	AVAS PAL	A	A	A	A	A	A
37	18901919 037	GOURAB MANNA	3	3	3	4	2	15
38	18901919 038	ADARSHA GANGULY	2	2	4	4	3	15
39	18901919 039	AVIJIT RUIDAS	3	2	3	2	5	15
40	18901919 040	ANIKET DAS	4	4	4	3	5	20
41	18901919 041	SPURTIKA JANA	A	A	A	A	A	A
42	18901919 042	DEBANWITA LAHA	4	4	4	4	4	20
43	18901919 043	SUBHADIP MANNA	A	A	A	A	A	A
44	18901919 044	DEBAPRIYA DEY	2	2	2	2	2	10
45	18901919 045	SOUVIK GHOSH	1	2	2	3	2	10
46	18901919 046	SNEHASISH KONER	3	3	3	4	2	15
47	18901919 047	DINESH PRADHAN	4	3	3	2	3	15
48	18901919 048	SK DILSHAD ANWAR	3	3	4	4	4	18
49	18901919 049	ARNAB DEY	4	4	4	3	5	20
50	18901919 050	SOURAV PAUL	5	4	5	5	5	24



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51	18901919 051	SATADRU MALLIK	3	3	3	4	2	15
52	18901919 052	SRABONA KONAR	2	3	3	3	4	15
53	18901919 053	SUMAN DAS	4	4	4	4	4	20
54	18901919 054	ARKAPRAVA PAUL	2	3	3	3	4	15
55	18901919 055	SOVAN GIRI	4	5	4	4	4	21
56	18901919 056	SUDARSHINI DUTTA	2	2	4	4	3	15
57	18901919 057	SOURAV GORAI	4	4	3	3	4	18
58	18901919 058	SWAPNAMOY GAYEN	4	4	4	5	2	19
59	18901919 059	SURYAKANTA DOLUI	4	4	5	3	4	20
60	18901919 060	SOURAV PATRA	5	5	4	4	4	22
61	18901919 062	SOUMEN LAHARI	5	5	3	3	4	20
62	18901919 063	SWAGATA ROY	5	2	2	2	4	15
63	18901919 064	SWARUP CHATTERJEE	3	3	3	4	2	15
64	18901919 066	SOURAV GHOSH	A	A	A	A	A	A
65	18901919 067	WASHIM AKTAR	3	3	3	2	4	15
66	18901919 068	TRIDIB NAYEK	5	5	4	5	5	24
67	18901919 069	KRISHNENDU BHOWMICK	4	4	4	3	3	18
68	18901919 070	MD SAHIDUJJAMAN	3	3	4	4	4	18
69	18901919 071	SAYED ANOWAR	2	2	3	1	2	10
70	18901919 072	SOMNATH SINGHA	4	5	4	3	4	20
71	18901919 073	SUMANA PAL	2	1	3	2	2	10
72	18901919 074	MOHITOSH PATRA	4	4	4	5	3	20
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74	18901919 076	SUSOVAN DAS	3	2	2	4	4	15
75	18901919 077	SARMISTHA MONDAL	5	5	3	3	4	20



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76	18901919 078	SUDIP MONDAL	5	5	4	4	4	23
77	18901919 079	SUBHANKAR PAL	4	2	3	3	3	15
78	18901919 080	KOUSHIK DAS	3	3	3	4	2	15
79	18901919 081	ISHIKA DEY	4	4	4	5	3	20
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82	18901919 085	SAYANTA SINGHA	2	2	4	3	4	15
83	18901919 087	PRIYANGI GHOSAL	4	4	4	5	3	20
84	18901919 088	ROHIT CHATTERJEE	5	4	3	5	3	20
85	18901919 089	JAGADISH SHIL	4	4	4	5	3	20
86	18901919 090	MANOJ MANA	3	3	4	3	2	15
87	18901919 091	SAHADEV DAS	3	3	3	2	4	15
88	18901919 092	JAYITA PAL	2	2	2	2	2	10
89	18901919 093	SHREYA DATTA	A	A	A	A	A	A
90	18901919 094	PRIYAM KUMAR GIRI	3	2	4	3	3	15
91	18901919 095	RAJAT SAMAI	2	2	4	4	3	15
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93	18901919 097	INDRAJIT PAL	5	5	5	4	5	24
94	18901919 098	SANGRAM RAKSHIT	4	4	3	3	4	18
95	18901919 099	RAJAT DANDAPAT	4	4	4	3	4	19
96	18901919 100	MAINUL HASAN	1	1	2	3	3	10
97	18901919 101	NIRUPAM PATTANAYAK	4	4	2	2	3	15
98	18901919 102	MD MAINUL HASSAN	1	1	3	3	2	10
99	18901920 106	SANCHITA PODDER	4	5	4	4	4	21
100	18901920 107	SUBHAJYOTI KHAMRUI	4	4	3	4	4	19

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2	109	BONI ISRAIL	5	5	5	5	4	24	
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3	110	SK SAIMA KHATUN	4	4	5	3	4	20	
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4	111	RAMKRISHNA MAHATA	3	3	4	4	4	18	
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5	112	MOUMITA DEBNATH	5	5	5	5	5	25	
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6	113	SUMAN SAW	1	2	2	3	2	10	
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7	114	GOURAB SINGHA MAHAPATRA	4	4	4	3	5	20	
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8	115	KRISHNA GOPAL MONDAL	5	5	4	4	4	22	
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9	116	RITAM MONDAL	3	5	4	4	4	20	
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0	117	ANURAG DAS	5	4	4	5	5	23	
11	18901920								
1	118	AVIJIT BHUNIA	5	4	5	4	4	22	
11	18901920								
2	120	MOUMITA CHATTERJEE	5	4	4	4	4	21	

SAMPLE OF PRESENTATION



**DR. B.C. ROY COLLEGE OF
PHARMACY AND ALLIED
HEALTH SCIENCES**

NAME- RAM SWARUP CHATTOPADHYAY
PAPER NAME- MEDICINAL CHEMISTRY III
PAPER CODE- PT 613
UNIVERSITY ROLL NO- 18901920001
6TH SEMESTER

DRUG RECEPTOR INTERACTION

- WHAT IS DRUG RECEPTOR INTERACTION?
- Drug is a chemical agent that selectively interacts with specific target molecules to alter their specific physiological function.
- Receptors (target molecules for drug) are macromolecules involved in chemical signaling which regulates cellular biochemical processes.
- The binding of drugs to receptor which form drug receptor complex and give responses is known as drug receptor interaction.

Factor affecting drug receptor binding :

- Size and the distance
- Types of bond between drug and receptor
- Receptor and drug structure
- Stereoisomerism



Drug receptor interaction

- Forces involved in drug receptor interaction:
- Ionic bond
- Hydrogen bonding
- Dipole-dipole interactions
- Van der Waal's force

Ionic bonding

- Ionic bonds formed between molecules with opposite charges are strong and can act across long distances. Drugs are often ionized and the active sites receptors contain charged group. (7.97 eV per bond)

Hydrogen bonding

- Hydrogen bond are a type of dipole-dipole interaction formed between the proton of a group X-H, where X is electronegative atom, and one or more other electronegative atom (Y) containing a pair of non bonded electrons. The most significant hydrogen bonds occur in molecules where X and Y are N and O. (Binding energy -1 to 40 kcal/mol)
- H-bonding should have h-bond acceptor (the electron rich atom, slightly negative) and h-bond donor (electron deficient hydrogen, slightly positive). Example: if X removes electron density from the hydrogen so it has partial positive charge, which is strongly attracted to the non bonded electrons of Y, so X is HBD and Y is HBA.