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A Project Report On

APPROACHES MADE ON TRANSDERMAL PATCHES INCOPORATING ANTIVIRAL DRUG FOR TREATMENT OF VIRAL INFECTION.

Submitted by

Ram Swarup Chattopadhyay

University Regn. No. - 201890201910104 of 2020-21 Roll No. - 18901920001

Under the guidance of

Mr. SNEHANSU BISWAS

Assistant Professor

In partial fulfilment of the Requirement for the Degree of

Bachelor of Pharmacy

Submitted to

Maulana Abul Kalam Azad University of Technology West Bengal

Dr. B. C. Roy College of Pharmacy and Allied Health Sciences Durgapur 713206

Academic Year: 2023-2024





DECLARATION

I hereby declare that the Project entitled "A review on approaches made on transdermal patches incorporating antiviral drug for treatment of viral infection" in partial fulfilment of the requirement for the award of Bachelor of Pharmacy submitted to Maulana Abul Kalam Azad University of Technology, West Bengal, is an authentic record of bona fide work carried out by me under the guidance of Mr. SNEHANSU BISWAS.

The matter embodied in this Project has not been submitted for the award of any other degree or diploma to any University / Institution.

Ran Swaruf chatteperdhyay

Name Of Candidate: Ram Swarup Chattopadhyay

Roll No: 18901920001

Date: 03/66/24

Place: Durgapur



CERTIFICATE

This is to certify that the Project entitled "A review on approaches made on Transdermal Patches incorporating antiviral drug for treatment of viral infection." by RAM SWARUP CHATTOPADHYAY in partial fulfilment for the BACHELOR OF PHARMACY under MAULANA ABUL KALAM AZAD UNIVERSITY OF TECHNOLOGY is a record of the original research work under our supervision and up to our satisfaction. To our knowledge, neither his thesis nor any part of it has been submitted for any other academic award anywhere before. The thesis is forwarded to Controller of Examination MAULANA ABUL KALAM AZAD UNIVERSITY OF TECHNOLOGY for assessment.

Signature of Supervisor

Name of Supervisor: Mr. SNEHANSU BISWAS

Date: 03/06/2024

PROF (DR.) SAMIR KUMAR SAMANTA

(PRINCIPAL)

Date:

Place:

Signature of External Examiner

Date:

Place



