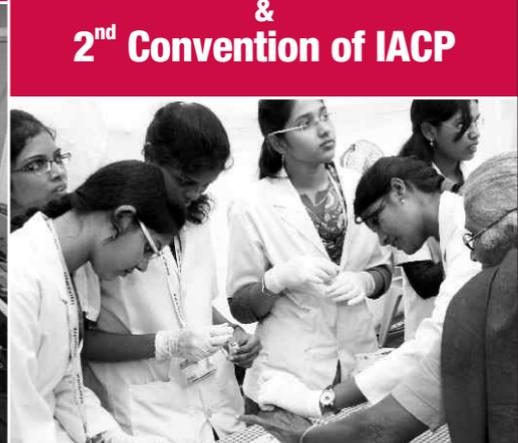




Indian Association
of Colleges of Pharmacy
for a better body of knowledge

Indian Congress of Pharmacy Practice, 2016 & 2nd Convention of IACP



Theme:
**The Responsible
Pharmacist:
Transforming
Patient Care.**

on
2nd and 3rd April, 2016

at
Hotel Le Méridien,
Coimbatore, India.



PHARMACIST WORKING TOWARDS PHARMACEUTICAL CARE

JOINING HANDS TO
ENHANCE THE QUALITY OF
PHARMACY EDUCATION



Indian Association
of Colleges of Pharmacy

For a better world of tomorrow

organizes

'WORKSHOP' & 'ONE ON ONE' MEETINGS
ON
ACPE 'INTERNATIONAL CERTIFICATION'



Outline of App

4. Formal submission of 'Inv' (for certification) with Self-Application Fee
5. First review by Staff for co School may be required to
6. Evaluation of SSR by Pro Commission using "Thres – if application meets "th on-site evaluation
7. On-site evaluation (± 3 da longer for multiple-locatio
8. Draft Evaluation Team Re accuracy check

Indian Association of Colleges of Pharmacy

Indian Association of Colleges of Pharmacy (IACP) is registered under sec 10 of the Tamilnadu Societies Registration Act 1975 and is a national organization with its headquarters at Chennai, whose mission is to serve its member colleges and their respective faculties, by acting as their advocate at the national level, by providing forums for interaction and exchange of information among its members, by recognizing outstanding performance among its member educators and by assisting member colleges and schools in meeting their mission of educating and training pharmacists and pharmaceutical scientists. The association provides leadership in advancing and enhancing the quality of pharmacy education and training in its member colleges. IACP also understands that academic pharmacy plays an important role and shares responsibility with the broader profession of pharmacy.



THE RESPONSIBLE PHARMACIST: TRANSFORMING PATIENT CARE

The Responsible Pharmacist: Transforming Patient Care

Health care professionals recognized as health care providers have multiple and varied areas of expertise and provide various facets of primary care, yet all deliver patient care services. Pharmacists provide expertise and health care delivery in a number of ways, from primary prevention, counselling and adherence programs, and comprehensive medication management to long-term care.

Pharmacists are increasingly requested by many health care systems, providers, and health care teams to improve outcomes and delivery of care. Transformative thinking would proffer that pharmacists do not simply manage medications, rather-

Pharmacists manage patient care and chronic conditions with their expertise in medication use.

- Pharmacists do this in coordination with other members of the health care team.
- Pharmacists manage diseases, not just medications, and in turn care for patients.

- Pharmacists are supported in roles as medication experts.

Long-term care, access to care, public health, and cost containment are roles that maximize the many years of education and training already embedded in the pharmacy profession.

Pharmacists and the Burden of Disease in India

Pharmacists have the capacity to help reduce the nation's health care burdens in long-term care, cost effectiveness, and primary care accessibility. India accounts for 25 per cent of the global disease burden. Every year, roughly 5.8 million Indians die from heart and lung diseases, stroke, cancer and diabetes. In other words, 1 in 4 Indians risks dying from an NCD before they reach the age of 70 and these diseases, now equally affect young too. Millions of productive individuals are lost prematurely to NCDs and seriously undermine social and economic development. Medications are involved in an estimated 80% of all treatments. Given these statistics and pharmacists' formal education and training in the treatment of chronic conditions, it is logical to match

pharmacists' capacity with a scope that includes long-term care.

The Government of India has initiated immediate actions targeting the reduction of the greatest risk factors contributing to NCDs—unhealthy diets, physical inactivity, tobacco & alcohol use, and air pollution. In line with WHO's global action plan for the prevention and control of NCDs 2013-2020, India is the first country to develop specific national targets and indicators aimed at reducing the number of global premature deaths from NCDs by 25% by 2025. This National Multisector Action Plan outlines actions by various sectors in addition to the health sector, to reduce the burden of NCDs and their risk factors.

Transforming Patient Care

The “Responsible Pharmacist” can definitely work and help “Transform Patient Care” for creating a healthy India through an effective ‘Pharmaceutical care’. It is the onus of these responsible pharmacists to stall anemia, anti-microbial drug resistance, antibiotic misuse, malnutrition and adverse drug reaction by counselling patients and promoting preventive healthcare. The one million pharmacists of the country through their contact on a day-to-day basis with the patients while dispensing medicines can play a significant role in reducing the infectious and tropical disease burden like tuberculosis and malaria that impact 5 million of our population and see how they could save at least one per cent of the 5 million lives which is 5,000 patients.

As patients acquire eligibility for affordable health care, access to care

will become even more critical. Currently, it is estimated that over 50% of rural India's lacks adequate access to primary health care because of a shortage of primary care physicians in communities. Some studies have projected a physician shortage anywhere from 500,000 to 600,000 doctors by 2020 to meet the minimum doctor population ratio of 1:1000. India presently has doctor per 1,700 citizens in India. The current average panel size (the number of patients cared for by a clinician) is already large and will likely increase, further worsening patients' access to care, quality of care received by patients, and burnout among primary care physicians. With approximately 10% of populations visiting pharmacies each week, the pharmacists are an incredible asset to improve access to primary care and provide unparalleled potential to greatly improve the nation's health. Pharmacists can serve as key providers within communities to deliver services and serve as a point of entry for patient care.

Pharmacist's Role

The current state of poor health parameters in the country is a clear indication that in hospitals, the role of pharmacists is underutilized and they continue to be mere drug dispensers for a doctor's prescription. The government needs to take note of the services that pharmacists can provide in a hospital setting as doctors have very limited time to advise patients on drug therapy protocols because of patient load and time constraints. There is need to also adopt the same tenets of quality when

medical devices are being used in hospitals. Particularly in the case of implants, patients need to be guided on the post-operative care to reduce risk of infections and unnecessary complications. Therefore, a pharmacist's role is significant in improving India's health parameters. Pharmacists are arguably the most underutilized health care professionals in the country given their level of training, education, and accessibility. In practice, pharmacists are health care providers and public health professionals. Highly integrated within the community, pharmacists have the capacity to address many health care

burdens. Through transformative thinking, policy development, and success in demonstrating the profession's capacity, pharmacists can become a partial solution to the many challenges of the health care system. It is the responsibility of the pharmacists to transform and advance the profession to improve the nation's health. The second convention of IACP has taken upon itself to encourage, the next generation pharmacist to evolve as "The responsible pharmacist and transform patient care".



**I AM PROUD TO BE A
RESPONSIBLE
PHARMACIST**

THE PROGRAM

SCIENTIFIC SESSION

"The Scientific Program is Recognized as Continuing Pharmacy Education (CPE) Under Regulation 4.2(IV) of Pharmacy Practice Regulations 2015"



DAY 1: 2nd April 2016

Start	Finish	Duration (Minutes)	Session title
07:30 AM	09:30 AM	120:00	Registration
09:30 AM	11:00 AM	90:00	Inauguration
11:00 AM	11:30 AM	30:00	Coffee Break
11:30 AM	01:30 PM	120:00	Keynote Address on the theme
01:30 PM	02:30 PM	60:00	Lunch
02:30 PM	04:00 PM	90:00	Plenary Lectures
04:00 PM	04:30 PM	30:00	Coffee break
04:30 PM	06:00 PM	90:00	Plenary Lectures

DAY 2: 3rd April 2016

Start	Finish	Duration (Minutes)	Session title
08:30 AM	10:30 AM	120:00	Scientific Poster Session
08:30 AM	10:30 AM	120:00	Meeting of Stakeholders
08:30 AM	10:30 AM	120:00	Symposium - 1 Pharmacovigilance
08:30 AM	10:30 AM	120:00	Symposium - 2 Faculty Development Programme
10:30 AM	11:00 AM	30:00	Tea Break
11:00 AM	01:30 PM	150:00	Symposium - 3 Pharma Residency Programme
			Symposium - 4 Pharmacoepidemiology
01:30 PM	02:30 PM	60:00	Lunch
02:30 PM	04:00 PM	90:00	Pharmaceutical Care Policy
04:00 PM	05:00 PM	60:00	Valedictory
05:00 PM	06:00 PM	60:00	High Tea & Farewell

THE VENUE

Hotel Le Méridien Coimbatore

762 Avinashi Road, Neelambur Village,
Coimbatore - 641062 Tamil Nadu, India,
Phone: (91)(422) 2364343



Who Should Attend?

The programme is designed for advanced teaching and learning needs so as to understand the objectives underlying certain advanced topics in Pharm. D Programme being offered in India. Pharm. D. programme was introduced in India in 2008 to meet the pharmacy practice requirements of the country in providing quality pharmaceutical care services to the patients.

Students, academicians, professionals and administrators from pharmaceutical industries, hospitals and academic institutions can attend the program.



REGISTRATION DETAILS

Early Registration	Onsite Registration
On or Before 20th March 2016	2nd April 2016
INR 5725/- (5000/- + 725/-*) (*14.5% Service Tax including Cess)	INR 9160/- (8000/- + 1160/-*) (*14.5% Service Tax including Cess)

- Conference Registration details are available on the conference website: www.iacp.org.in
- **Indian Delegates:** Registration fee should be paid through Demand Draft payable to 'Indian Association of Colleges of Pharmacy Convention Account' payable at Chennai.
- **Foreign Delegates:** Registration fee should be paid through wire transfer
- Demand Drafts should be mailed to **Organising Secretary, IACP Conference, Indian Association of Colleges of Pharmacy**, "Prasanna Enclave", First Floor, No.30, Bharathi Avenue Second Street (Near Kotturpuram Railway Station), Kotturpuram, Chennai - 600 085, Tamil Nadu, India

TRAVEL AND ACCOMMODATION

Coimbatore is well connected by air, rail and road. Taxi and other public transport facilities are available from airport, train and bus station. A variety of accommodation facilities are available. Conference secretariat may assist for accommodation only upon request. For more details, please visit the conference website: www.iacp.org.in



KEY SPEAKERS (INVITEE)

1. **Dr. B. Suresh,**
Vice Chancellor, JSS University, Mysore & President, Pharmacy Council of India, New Delhi
2. **Mr. Frank May,**
Service Director, Drug and Therapeutic Information Services, Adelaide, South Australia
3. **Mr. Mike Rouse,**
Assistant Executive Director, Professional Affairs and Director, International Services Accreditation Council for Pharmacy Education (ACPE), Chicago, Illinois USA
4. **Dr. Krishna Kumar,**
Professor of Biopharmaceutics & Pharmacokinetics, Howard University, College of Pharmacy, Washington DC
5. **Dr. Milap Nahata,**
Director, Institute of Therapeutic Innovations and Outcomes, Professor Emeritus, Pharmacy, Pediatrics and Internal Medicine, Colleges of Pharmacy and Medicine, The Ohio State University, USA
6. **Ms. Debra Rowett,**
Service Director, Drug and Therapeutics Information Service, Repatriation General Hospital, Adelaide, South Australia
7. **Dr. Sten Olsson,**
MSc Pharm WHO Programme Expert, WHO Pharmacovigilance Monitoring Centre, Uppsala, Sweden
8. **Dr. Stephen Eckel,**
Clinical Associate Professor Vice Chair of Graduate and Postgraduate Education, Pace Associate Director of Pharmacy, UNC Hospitals, Associate Dean for Global Engagement, University of North Carolina, Chapel Hill, Usa
9. **Dr. Anne Marie Liles,**
PharmD, BCPS, Director – Clinical Services, Student Health Center Pharmacy Clinical Associate Professor of Pharmacy Practice University of Mississippi School of Pharmacy 662-915-2860 amliles@olemiss.edu
10. **Dr. Miranda Nelson,**
PharmD, BCPPS, Pediatric Antimicrobial Stewardship Pharmacist, St. Louis Children's Hospital, mirandapnelson@gmail.com
11. **Dr. G. Parthasarathi,**
Principal, JSS College of Pharmacy, JSS University, Mysuru, India
12. **Mrs. Archana Mudgal**
Registrar-Cum-Secretary, Pharmacy Council of India, New Delhi
13. **Dr. V. Kalaiselvan,**
Principal Scientific Officer, Indian Pharmacopoeia Commission, Ministry of Health & Family Welfare, Govt. of India, Sector-23, Raj Nagar, Ghaziabad-201

ADVISORY COMMITTEE



Dr. B. Suresh,
Vice-chancellor, JSS
University, Mysuru &
President, Pharmacy
Council of India, New
Delhi



Dr. G. N. Singh,
Drug Controller General
of India, New Delhi



Dr. Krishna Kumar,
Professor of
Biopharmaceutics &
Pharmacokinetics,
Howard University,
College of
Pharmacy, Bethesda,
MD, USA



Prof. V. B. Desai,
Former Drug
Controller,
Karnataka



Dr. Rao VSV Vadlamudi,
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St. Peter's Institute of
Pharmaceutical Sciences,
Warangal, Telangana



Dr. Shivajirao Kadam,
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National Institute of
Pharmaceutical
Education & Research,
Kolkatta,
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Pharmacy, Pt. Ravishankar
Shukla University, Raipur,
Chattisgarh



Dr. G. Parthasarathi,
Principal, JSS College of
Pharmacy, Mysuru,
Karnataka



Dr. B. G. Desai,
Principal, KLE University's
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Bengaluru, Karnataka



Dr. K. R. Mahadik,
Principal, Poona College
of Pharmacy, Bharati
Vidyapeeth
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Pharmaceutical Sciences,
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WORKING COMMITTEE MEMBERS

S. No.	Name	Affiliation
1.	Dr. V. Madhavan,	Principal, M.S. Ramaiah College Of Pharmacy, Benagluru, Karnataka
2.	Dr. H. G. Shivakumar,	Professor, JSS College of Pharmacy, Mysuru, Karnataka
3.	Dr. S. P. Dhanbal,	Principal, JSS College of Pharmacy, Ootacamund, Tamil Nadu
4.	Dr. R. Venkat Naryanan,	Principal, RVS College of Pharmaceutical Sciences, Coimbatore, Tamil Nadu
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15.	Dr. D. Chamundeeswari,	Principal, College of Pharmacy, Sri Ramachandra University, Chennai, Tamil Nadu
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17.	Dr. A. Meena,	Principal, K. K. College of Pharmacy, Chennai, Tamil Nadu
18.	Dr. A. Ramesh,	Principal & Professor of Pharmacology, Vishnu Institute of Pharmaceutical Education & Research, Narsapur, Medak (dt), Telengana
19.	Dr. Divakar Goli,	Principal, Acharya & B.M. Reddy College of Pharmacy, Bengaluru, Karnataka
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22.	Dr. Y. Padmanabha Reddy,	Principal, Raghavendra Institute of Pharmaceutical Education and Research, Anantpur, Andhra Pradesh
23.	Dr. H V Raghunandan,	Associate Professor, JSS College of Pharmacy, Mysuru, Karnataka
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37.	Dr. M. Gopal Rao,	Vice - Principal, College of Pharmacy, SRIPMS, Coimbatore, Tamil Nadu

SCIENTIFIC COMMITTEE MEMBERS

S. No.	Name	Affiliation
1.	Dr. M. Ramanathan,	Principal, PSG College of Pharmacy, Coimbatore, Tamil Nadu
2.	Dr. Atmaram Pawar,	Vice-Principal & Head, Dept. of Doctor of Pharmacy, Bharati Vidyapeeth University, Poona College of Pharmacy, Pune, Maharashtra
3.	Dr. V. Ganesan,	Principal, Erode College of Pharmacy, Erode, Tamil Nadu
4.	Dr. S. Mohan,	Principal, Karpagam College of Pharmacy, Coimbatore, Tamil Nadu
5.	Dr. Bharathi D.R.,	Principal, SJM College of Pharmacy, Chitradurga, Karnataka
6.	Dr. M. Ramesh,	Professor & Head, JSS College of Pharmacy, Mysuru, Karnataka
7.	Dr. S. Sriram,	Professor & Head, College of Pharmacy, Sri Ramakrishna Institute of Paramedical Sciences, Coimbatore, Tamil Nadu
8.	Dr. K. S. G. Arulkumar,	Vice- Principal, KMCH College of Pharmacy, Coimbatore, Tamil Nadu
9.	Dr. S. Ponnusankar,	Professor & Head, JSS College of Pharmacy, Ooty, Tamil Nadu
10.	Dr. Sampathkumar,	Assistant Professor, Department of Pharmacy, Coimbatore Medical College, Coimbatore, Tamil Nadu
11.	Dr. C. I. Sajeeth,	Vice-Principal, Grace College of Pharmacy, Palakkad, Kerala
12.	Dr. B. Rajalingam,	Associate Professor, College of Pharmacy, Sri Ramakrishna Institute of Paramedical Sciences, Coimbatore, Tamil Nadu
13.	Dr B Suresh,	Principal, St. Peter's Institute of Pharmaceutical Sciences, Warangal, Telangana

PLACES OF TOURIST INTEREST

Welcome to Coimbatore. Also known as Kovai, Coimbatore is the second largest city of TamilNadu and one of the fastest growing cities in India. Situated at the foot hills of Nilgiris, it is known for its pleasant climate, peaceful atmosphere, cosmopolitan outlook and private enterprise. Cotton textiles, electric motors, pumps, automobile spares, iron steel and aluminium castings form major exports from Coimbatore. The city is also known for its educational institutions. Coimbatore Agricultural University is renowned as one of the best colleges of its kind in South Asia. In spite of its industrial and technological growth, traditions and age old customs are still held in high esteem. The temples bear witness to the religiousness and love of art and architecture of the people. There are also a number of places of tourist interest around Coimbatore. Ootacamund (Ooty for short), is one of the most popular tourist spots in India.



INVITATION FOR ABSTRACTS

The conference's scientific services committee has great pleasure in inviting you to submit findings of your original scientific work for presentation in any of the following scientific sessions during the inaugural convention of IACP with the aim to disseminate knowledge and facilitate the exchange of new ideas among the members of pharmacy profession.

- Medication errors / Drug Related Problems
- Patient Care Service & Pharmacist Intervention
- Patient Safety and Pharmacovigilance
- Pharmacoepidemiology
- Pharmacoeconomics
- Drug/Poison Information
- Pharmacy Practice Education
- Community Pharmacy and Public Health
- Outcome Research / Quality of Life Studies
- Clinical Research

The papers will be considered for presentation in poster session only. The abstract must be submitted as an email attachment to ssc.abc@iacp.org.in on or before 10th March, 2016. No hard copies of abstracts will be entertained. The paper acceptance information will be given on or before 15th March 2016 to the same email id through which the abstract has been submitted

Eligibility

Students, academicians and professionals from pharmacy practice, industry, and academic institutions involved in study of relevant topics in pharmacy practice are invited to submit abstracts for poster presentation at the convention.

Instructions for Preparing Abstracts

All abstracts must be submitted in English only. Please format your Abstract as a Word document (MS Word - 2007 or above). The abstract must be single-spaced and in upper and lowercase letters (Times New Roman Font; Size: 12). The text must not exceed 500 words including title, author details and key words. Abstracts should be in the following format: Aim/Objective, Methods, Results and Conclusion. List not more than four key words related to your research. Tables, graphs, and charts are not permitted in the abstract. Underscore the presenting author's name and affiliation. Avoid reference to name of institution, location or funding sources in the body of the abstract. Maximum number of authors including the presenter should not be more than four.

Submission Permission: The Indian Association of College of Pharmacy (IACP) does not assume any liability or responsibility for publication of any submitted abstracts.

Originality of scientific Work: The presenting author is requested to submit the work only if it has not been presented earlier, the total work or any part thereof has not been published in any form in any journal. They should withdraw the paper if it is published between the time of submission and the presentation at the convention.

Declaration Form: At the time of Poster presentation the presenting author needs to submit an author declaration form.

All queries related to abstract submission & poster presentations should be made only through email at ssc.abc@iacp.org

For more information regarding scientific presentations contact

Dr. T.K. RAVI,

Vice-Chairman (Scientific),

Second Convention of the Indian Association of Colleges of Pharmacy &

Indian Congress of Pharmacy Practice - 2016



Continuing Pharmacy
Education Recognition



Pharmacy Council of India
New Delhi

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Federation

Participating Organisation



**Accreditation Council for
Pharmacy Education, USA**

For further information on convention please contact:
Organising Committee



**Indian Association
of Colleges of Pharmacy**

for a better body of knowledge

"Prasanna Enclave", First Floor, No.30, Bharathi Avenue Second Street
(Near Railway Station), Kotturpuram, Chennai - 600 085, Tamil Nadu, India
Tel. No: + 91 - 44 - 2442 2211 Fax No: + 91 - 44 - 2442 2211

For Abstract Submission: ssc.abs@iacp.org.in For Logistics: logistics@iacp.org.in
For General Queries: contact@iacp.org.in Website: www.iacp.org.in