

# ACHARYA NAGARJUNA UNIVERSITY

CH. USHA RANI, M.Com.,  
CONTROLLER OF EXAMINATIONS



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Date: 13-08-2020.

## REVISED TIME-TABLE FOR IV/VI YEAR – PHARM-D (REGULAR) EXAMS., SEPTEMBER, 2020

Max Marks: 70

TIME: 10.00 a.m. To 01.00 p.m.

PAPER CODE	SUBJECT	MAX. MARKS	EXISTING DATE	POSTPONED DATE
PD 4.1	Pharmacotherapeutics-III	70	24-08-2020 MONDAY	11-09-2020 FRIDAY
PD 4.2	Hospital Pharmacy	70	25-08-2020 TUESDAY	12-09-2020 SATURDAY
PD 4.3	Clinical Pharmacy	70	26-08-2020 WEDNESDAY	14-09-2020 MONDAY
PD 4.4	Biostatistics & Research Methodology	70	27-08-2020 THURSDAY	15-09-2020 TUESDAY
PD 4.5	Biopharmaceutics & Pharmacokinetics	70	28-08-2020 FRIDAY	16-09-2020 WEDNESDAY
PD 4.6	Clinical Toxicology	70	29-08-2020 SATURDAY	17-09-2020 THURSDAY
PD 4.7	Pharmacotherapeutics - I & II (Pharm.D P.B) Students Only	70	31-08-2020 MONDAY	18-09-2020 FRIDAY

(BY ORDER)

  
CONTROLLER OF EXAMINATIONS

To

All the Principals of Pharmacy Colleges offering Pharma-D courses, A.N.U. area with a request to send the question paper requirement to the Co-ordinator, PG Exams, ANU

Copies to: the Co-Ordinator, PG Examinations, A.N.U.

P.A. to Vice-Chancellor/Registrar, A.N.U.

STATE UNIVERSITY

Department of Business Administration  
 Faculty: Dr. [Name]

Faculty: Dr. [Name]

Page No. [Number]

REVISIONS TO THE SYLLABUS

TIME TO BE TAKEN: 100 MIN

REVISION NO.	DATE	REASON	REVISION
1	15-08-2018	Initial	Initial
2	15-08-2018	Initial	Initial
3	15-08-2018	Initial	Initial
4	15-08-2018	Initial	Initial
5	15-08-2018	Initial	Initial
6	15-08-2018	Initial	Initial
7	15-08-2018	Initial	Initial
8	15-08-2018	Initial	Initial
9	15-08-2018	Initial	Initial
10	15-08-2018	Initial	Initial

*[Signature]*

DR. [Name]

Approved by the Head of Department, [Department Name], [University Name].

Approved by the Head of Institute, [Institute Name], [University Name].