Trinity College Dublin
Coláiste na Tríonóide, Baile Átha Cliath
The University of Dublin

M.Sc. in Hospital Pharmacy
Previous Research Projects

- Cathriona Gavin (2017) Does the availability of an accurate electronic patient medication history improve discharge prescribing?
- Eva Heffernan (2017) An audit of discharge prescriptions for surgical and medical patients with a quality improvement initiative
- Gráinne Johnston (2017) An observational review of unintentional medication errors occurring during transfer from critical care to the general ward level
- Cliodhna McDonald (2017) An investigation into the factors that determine the clearance of high-dose methotrexate in patients with primary central nervous system lymphoma
- Aidan Morris (2017) Medication regimen complexity in surgical patients in Tallaght Hospital – an observational study
- Marie O’Halloran (2017) Medication characteristics, polypharmacy and potential drug-drug interactions in an older (≥50 years) and younger (<50 years) HIV positive population and an older (≥50 years) HIV negative population
- Terry Smeaton (2017) Exploring the relationship between potentially inappropriate prescribing and adverse drug reactions contributing to hospitalisation in middle-aged patients in the acute medical (assessment) unit.
- Caoimhe O’Leary (2015) Dose-banding of 5-fluorouracil infusers and carboplatin infusions in an oncology day ward: an assessment of feasibility and impact on current local practice
- Claire Mullins (2015) The impact of clinical pharmacists charting unintentionally omitted medicines on the number of missed doses in an acute medical ward
- Jennifer Dwyer (2015) Therapeutic drug monitoring of tobramycin in adult cystic fibrosis patients
- Ciara Reddy (2015) Preventing drug-induced QT prolongation in elderly patients: Investigating the usefulness of a purpose-built screening tool for identifying elderly patients at risk of developing QT prolongation, and pharmacists’ potential to help minimise medication-related risks
- Maria O’Sullivan (2015) Reducing the Drug Burden Index in Orthopaedic Trauma Patients by Pharmacist Involvement in an Orthogeriatric Round
- Danielle Neale (2015) The prevalence of and characteristics associated with opioid related harm in Tallaght Hospital, 2005-2012, identified through the Hospital In-Patient Enquiry (HIPE) System
- Sarah Moloney (2015) An observational review and audit of the treatment of hypoglycaemic events in the Mater Misericordiae University Hospital
- Coughlan, Miriam (2013) Cost and impact analysis of the pharmacist medication reconciliation service for medical inpatients in St. James’s Hospital
- Leah Gaughan (2013) A prospective survey of post-kidney transplant patients and their community pharmacists, in relation to their experience of prescriptions issued from Beaumont Hospital
• Brona Kehoe (2013) Potentially inappropriate prescribing in elderly in-patients: a prospective observational study incorporating the STOPP (Screening Tool of Older Persons’ Prescriptions) criteria into clinical pharmacy practice, and the reasons for non-uptake of pharmacists’ recommendations by doctors
• Ciara O’Riordan (2013) Medication reconciliation on discharge to primary care following an acute hospital admission
• Fergal O’Shaughnessy (2013) The impact of treatment protocol availability on the clinical verification of oral anticancer medicine prescriptions by non-specialist pharmacists
• Tadhg Reddan (2013) Developing and implementing an environmental monitoring guideline in a hospital pharmacy aseptic compounding unit
• Deirdre Smith (2013) An audit of missed and delayed medication doses in a large teaching hospital with implementation of risk reduction strategies
• Annette Whiriskey (2013) Pilot study to determine the extent of documentation of adverse drug reactions which lead to hospital admission or occur during an in-patient episode at a Dublin university teaching hospital
• Browne, Claire (2011). Implementation of a falls prevention focused medication review by a pharmacist in an acute hospital.
• Byrne, Sharon (2011). Exploring the contribution of a structured clinical pharmacy service to the pharmaceutical care at admission.
• Corey, Louise (2011). The medication related experiences of patients on discharge from Beaumont Hospital.
• Coyle, Mary (2011). Prophylactic preparation of anaesthetic emergency drugs – qualitative investigation to develop a survey instrument.
• Hickey, Aisling (2011). The development and evaluation of e-learning modules on the prescribing and administration of insulin, for junior medical and nursing staff in St. James’s Hospital.
• O’Connor, Mairead (2011). The hospital pharmacist and oral anti-cancer therapy – what is the role within a multi-disciplinary team?
• O’Mahony, Kate (2011). Comparison of a unit-supply individual patient dispensing (USIPD) system with a ward stock drug distribution (WSDD) system in an acute Irish hospital.
• Smith, Sinead (2011). Development and evaluation of an internal audit approach for the Aseptic Compounding Unit in St. James’s Hospital Dublin.
• Tierney, Avril(2011). The evaluation of the Mater Misericordiae University Hospital clinical pharmacy service in an economic downturn
• Fitzsimons, Michelle (2009). An evaluation of the accuracy and availability of sources of pre-admission medication history data.
• Galvin, Mairead (2009). An evidence base for the contribution of clinical pharmacy to medication reconciliation on admission in Ireland.
• Hammond, Lisa (2009). The prescribing and dispensing of oral anticancer medicines in Ireland; Is the current system safe?
• Hayde, Jennifer (2009). Cleaning in the aseptic compounding unit- review, rationalise, validate.
• Hayden, Cliona (2009). The use of antibiotics as a risk factor for the development of Clostridium difficile associated diarrhoea (CDAD) in the Mater Misericordiae University Hospital (MMUH) patients.
• Hoo, Li Wah (2009). Developing a database to facilitate the assessment of antibiotic consumption and trends in microbial sensitivity data in Beaumont Hospital.
• Kelly, Fiona (2009). The development of therapeutic drug monitoring guidelines for digoxin, lithium
and phenytoin in a large teaching hospital.

- Maguire, Orla (2009). Audit of prescribing and administration of nebuliser therapy, for COPD and asthma patients, in St James’s Hospital.
- Muldowney, Ciaran (2009). Hearing impairment and aminoglycoside exposure in adult cystic fibrosis patients attending St. Vincent’s University Hospital.
- Begley, Fiona (2007). Occupational exposure to cytotoxic chemotherapy – do we need to be concerned?
- Crimmins, Eilis (2007). An audit of preoperative medication administration in elective surgical patients in the Mater Misericordiae University Hospital.
- Mcgillycuddy, Joan (2007). Training in aseptic compounding – a clean sweep needed?
- Egan, Sean (2005). The establishment of an antimicrobial usage database & the demonstration of its use as an audit tool to investigate the appropriateness of prescribing of the antimicrobial piperacillin-tazobactam.
- Mc Cabe, Laura (2005). Recombinant Human Activated Protein C (Drotrecogin alfa – Activated): An audit of use in St Vincent’s University Hospital.
- Neville, Louise (2005). A clinical pharmacist led evaluation of post-operative pain management at the Adelaide & Meath Hospital, incorporating the National Children's Hospital.
- Serra, Maria Peraita (2005). Impact of the introduction of complete antibiotic guidelines at Naas General Hospital.
- Treacy, Gemma (2005). Review of the pharmacy service to the emergency department, Mater Misericordiae University Hospital.
- Browne, Caroline (2003). An audit of discharge prescribing at ward level in St.James’s Hospital.
- Dunleavy, Niamh (2003). Assessment of the need and feasibility of extending the role of the compounding unit in St. Vincent’s University Hospital to include production of non-cytotoxic drugs.
• Ferguson, Yla (2003). An investigation into the rational and appropriate use of selective COX-II inhibitors in a Dublin teaching hospital.
• Harkins, Kathy (2003). Audit of the management of anaemia of chronic renal failure in CAPD and pre-dialysis patients in AMNCH.
• Henry, Meabh (2003). Analysis of medication incident report forms over a one year period in a large teaching hospital.
• O’Byrne, John (2003). Audit of the dispensing processes in the Adelaide and Meath Hospital Pharmacy.
• Barron, Ian (2001). Evaluating the percentage hypochromic red cell indices (% HRC) as a predictor of erythropoietic response to intravenous iron supplementation and also as a predictor of titration in rHuEPO dose in maintenance haemodialysis patients at Beaumont Hospital.
• Cooney, Niamh (2001). Pharmacoeconomics – Elasticity of demand & the GMS.
• Creed, Maria (2001). The use of statins as lipid lowering agents in renal transplant patients.
• Flynn, Olivia (2001). Development of an antimicrobial formulary in St. James’s Hospital.
• Gowing, Catriona (2001). An audit of the management of in-patient oral anticoagulation in AMNCH.
• Molloy, Gillian (2001). An ergonomic study of work activities in the cytotoxic compounding unit, Mater Misericordiae Hospital.
• Relihan, Eileen (2001). Assessing the use of antidepressants in an elderly population.
• Beasley, Miriam (1999). The tolerability of nelfinavir in HIV patients.
• Byrne, Louise (1999). Introducing a paediatric CIVA service – does it make economic sense?
• Dungan, Rachel (1999). Development of a risk management strategy for the goods inwards area of the pharmacy department.
• Gibson, Louise (1999). Peri-operative management of Type 1 & Type 2 patients.
• Keane, Claire (1999). Team nursing & team drug trolleys.
• Young, Ailish (1999). Missed doses.
• Barry, Aileen (1997). An evaluation of the sources of medication information available when a patient is admitted to hospital, of the admission process and of the potential role of the pharmacist in this process.
• Deasy, Evelyn (1997). Performance appraisal in the Irish hospital pharmacy sector – does it exist and
where to start?

- Whiriskey, Caroline (1997). An audit of the use of the digoxin therapeutic drug monitoring service in SJH.