

# FINDLAY

THE UNIVERSITY OF FINDLAY

**College of Pharmacy**



**Doctor of Pharmacy**

**Advanced Practice Rotations  
Resource Manual**

2011-2012

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# DOCTOR OF PHARMACY EXPERIENTIAL PROGRAM

## The University of Findlay

### MISSION STATEMENT:

The faculty of The University of Findlay College of Pharmacy educate pharmacy students to enter pharmacy practice as generalists with the knowledge, skills, attitudes and values necessary to optimize drug therapy and provide quality patient care in various practice settings. Doctoral graduates are encouraged to expand the depth of their training through postgraduate experience and/or formalized training (i.e. residencies, fellowships, etc.)

### GOAL:

*To educate students to apply problem-solving skills to assess patient parameters, optimize drug therapy and provide quality patient care in various practice settings.*

Advanced Pharmacy Practice Experiences (APPEs) will provide practical, supervised, intellectually stimulating professional experiences, which will enable students to develop fundamental capabilities to become self-motivated, self-directed, ethically minded professionals with the mission and skills to advance pharmacy practice in any desired practice setting. Competency in clinical skills, knowledge, judgment, and communication provide the basis for the achievement of this fundamental goal.

### COURSE DESCRIPTION:

A series of Advanced Pharmacy Practice Experiences (APPEs) comprise a full-time experiential program emphasizing delivery of patient care in various practice settings. The rotations are experiential-based, integrated problem-solving courses designed to train the student to become an active participant in providing patient care. The student, under the direction of the hub site coordinator and various faculty and preceptors, will integrate their knowledge of **physical assessment, pharmacology, pharmacotherapy, pathophysiology, pharmaceuticals, pharmacokinetics, and pharmacodynamics** in assessing therapeutic plans and in evaluating the drug regimen for patients. During this experiential curriculum, students will learn recommendations and participate in decisions regarding drug therapy. At each practice site, the student is expected to become a functioning component of the ongoing patient care services through preceptor instruction and self-learning.

### HUB SITE MODEL:

Students preparing to enter their P6 (fourth professional) year are assigned to one of approximately 20-25 Hub Sites for the completion of their required APPEs. Each Hub Site has a Hub Site Coordinator (chosen by the site and approved by the UF College of Pharmacy) who is responsible for scheduling student rotations at their site, activities and projects, ensuring all objectives are met and all evaluations are completed, as well as coordinating and training preceptors. This model assures that all students are exposed to core pharmacy related experiences.

A Hub Site may be a large health-system or a geographic area with several small sites working together. Hub Sites must have opportunities for students to fulfill the core required rotations as well as elective rotations. Some of the Hub Sites may provide an inpatient focus while others, an outpatient. Students are informed prior to ranking their Hub Site preference which electives and special populations a site can offer. This way, students who desire a certain experience will know which sites are most likely to fit their interest. Students are first matched to a Hub Site and then work with the Hub Site Coordinator to schedule individual rotations with various preceptors.

The Hub Site model offers several advantages over traditional APPE placement: one-time orientation, opportunities for recruitment, completion of longitudinal projects and flexibility in student scheduling, among others. The advantages in this model of training are similar to a post-graduate residency program.

**INSTRUCTORS:** Faculty, Adjunct Faculty, Hub Site Coordinators (clinical educators) and other approved preceptors.

**PREREQUISITES:**

- P-6 standing
- Valid Ohio intern license
- Current professional liability insurance
- Completed record of physical examination
- Updated immunizations as required by UF, clinical teaching site and/or state and federal regulatory agencies
- Criminal background check(s) as required by UF and/or specific clinical sites
- AHA BLS for Health Care Providers Certification
- AHA Advanced Cardiac Life Support Certification
- Successful completion of all didactic pharmacy courses
- Graduate grade point average  $\geq 3.0$

**RECOMMENDED TEXTS:**

- See course syllabi

**PERFORMANCE STANDARDS:**

To have successfully completed the rotation sequence, the student must accomplish the following:

1. Successfully complete six (6) core rotations meeting all rotation-specific learning objectives and site-specific responsibilities and/or activities and receive a final grade of B- or higher.
2. Successfully complete three (3) elective rotations meeting all rotation-specific learning objectives and site-specific responsibilities and/or activities and receive a final grade of B- or higher.
3. Successfully complete eight (8) core case reviews.
4. Successfully complete the P6 core competency exam.
5. Successfully complete all competencies listed on the Longitudinal Assessment Form.
6. Attend (3) online professional development webinars during the rotation sequence and must successfully complete all assignments associated with webinar.

**DESIRED OUTCOMES:**

Upon completion of each rotation, the student should be able to:

1. Utilize a systematic problem-solving approach to patient care.
2. Utilize the acquired knowledge base to assess the patient and formulate a therapeutic plan.
3. Demonstrate proficiency in recommending and implementing a therapeutic plan.
4. Identify and evaluate the current literature and apply this information to patient care.
5. Effectively communicate, both verbally and in writing, with patients and other healthcare providers.
6. Demonstrate self-learning and self-assessment abilities and habits.
7. Demonstrate leadership abilities.
8. Demonstrate professionalism.
9. Demonstrate proficiency in the role of the pharmacy practitioner, as a member of the healthcare team, in provision of quality patient care.
10. Demonstrate ability to conduct further research and/or improving pharmacy services in the future.

## ADVANCED PHARMACY PRACTICE EXPERIENCE REQUIREMENTS:

### COURSE POLICES:

Students must register for six, one month core rotations and three, one month elective rotations. One month rotation refers to one calendar month unless otherwise specified. One month of rotation is equal to four academic credit hours. Students may not register for any other didactic courses during Advanced Practice Rotations, without the prior approval from the Director of Experiential and the Dean of the College of Pharmacy. Rotations are scheduled July through November and January through April.

Students are not permitted to start rotations in May or June. May, June and December months are considered non-student months for faculty, preceptors, and Hub-Site Coordinators. These months provide educators the opportunity for vacation, participation in on campus events, professional and curricular development, continuing education, scholarly commitment, and reflection and didactic preparation time. In some cases the months of May, June and/or December may be used for unique rotations, such as an international rotation, or may be used for students with unusual circumstances. Situations that **may** qualify a student to be scheduled during May, June or December are unplanned medical issues, student rotation failure, and military obligations. The scheduling of student rotations during the month of May, June and/or December will be evaluated on a case by case basis. The Director of Experiential Education must approve the rotation. Once approved by the Director of Experiential Education, the Department Chair of Pharmacy Practice must also approve of the rotation. These approvals **are rarely granted**.

Semester	APPE Rotation Scheduled	Course Number	Credit Hours
Summer	July	PHAR 701	4
	August	PHAR 702	4
Fall	September	PHAR 703	4
	October	PHAR 704	4
	November	PHAR 705	4
Spring	January	PHAR 706	4
	February	PHAR 707	4
	March	PHAR 708	4
	April	PHAR 709	4

\*Longitudinal pharmacy practice experiences may be selected as one of the 9 months of rotations and may be registered for in any available month.

\*\*The student's schedule may follow a slightly different pattern for the year however, the transcript will reflect the sequence listed above.

A student is required complete six (6) one-month core advanced practice rotations as follows:

<b>Advanced Community Pharmacy / Ambulatory Medicine 1</b>
<b>Advanced Community Pharmacy / Ambulatory Medicine 2</b>
<b>Advanced Institutional Pharmacy / General Medicine 1</b>
<b>Advanced Institutional Pharmacy / General Medicine 2</b>
<b>Special Populations 1 (e.g. Geriatrics, Pediatrics, Critical Care, Hospice)</b>
<i>**Students may choose any one or two special populations during the two-month requirement</i>
<b>Special Populations 2</b>
<i>**Students may choose any one or two special populations during the two-month requirement</i>

A student is required to complete three (3) one-month elective advanced practice rotations from the following list (Rotations are listed alphabetically):

Academic Pharmacy	Health Informatics	Pain Management
Advance Institutional	Heart Failure Clinic	Patient Safety
AIDS/HIV Pharmacy	Home Health Care/ Home Infusion	Pediatrics
Alternative/ Complementary Medicine	Hospice / Palliative Care	Pharmaceutical Industry
Ambulatory Care (various- focus)	Hyperlipidemia Clinic	Pharmacokinetics
Anticoagulation Clinic	Hypertension Clinic	Pharmacy Education
Asthma Clinic	Indian Health Service	Pharmacy Organization Management
Burn Management	Infectious Disease (I.D.)	Poison Control (Toxicology)
Cardiology	Informatics	Preventative Medicine
Community Practice	Institutional Administration	Psychiatry
Community Administration	Intensive Care (Critical Care)	Regulatory & Licensing
Compounding Practice	Internal Medicine	Public Health Service
Corporate Management	International Medicine	Pulmonary Medicine
Critical Care Medicine	Long Term Care	Pharmacy Organization Management
Diabetes Clinic	Mail Order Pharmacy	Research
Disaster Training/ or Pre-Disaster Mgt.	Managed Care	Regulatory & Licensing
Drug Abuse & Prevention	Medical Publishing	Substance Abuse
Drug Information Services	Medication Therapy Management	Surgical Care (Surgery)
Entrepreneurial	Neonatology	Transplantation- various
Emergency Medicine/ Trauma	Nephrology	Patient Safety
Epilepsy Clinic	Neurology	Pediatrics
Family Medicine/Family Practice	Nuclear Pharmacy	Veterinary Medicine
Food & Drug Administration	Nutrition	Wound Care
Gastroenterology (G.I.)	Obstetrics/Gynecology (OB/GYN)	
General Medicine	Oncology / Hematology/Pain	
Geriatrics	Outcomes Research	

Students are placed into Hub Sites (or Co-Hub Sites) for the completion of all six months of core required rotations. Up to three elective rotations may be completed outside of the hub network. Students must receive approval from the Director of Experiential Education and communicate this information with their assigned Hub Site Coordinator for out of network elective rotations. See pages 9-10 for policies and procedures regarding out of network electives.

## **CASE STUDIES:**

Students are expected to complete 8 case studies while on rotation. Case studies must be uploaded into RxPreceptor for grading by the assigned due date. Three of the eight cases are to be completed by **November 21, 2011**. (The student may choose any three.) Case study 4 and 5 are to be completed by **December 21, 2011**, 6 and 7 are to be completed by **February 21, 2012**. The final case study is to be completed by **March 21, 2012**.

It is mandatory that each student complete a case study of the following disease related states. A patient with more than one disease state may only be used one time. (See pages 28-30 for more information on case studies.)

- |                                 |                          |                        |                                |
|---------------------------------|--------------------------|------------------------|--------------------------------|
| <b>1. Diabetes</b>              | <b>2. Hyperlipidemia</b> | <b>3. Hypertension</b> | <b>4. Infectious Disease I</b> |
| <b>5. Infectious Disease II</b> | <b>6. Heart Failure</b>  | <b>7. Stroke</b>       | <b>8. COPD/Asthma</b>          |

## **CORE LEARNING OBJECTIVES (for all required patient care rotations):**

These objectives are to be the minimal learning experiences to be accomplished during the core rotations in addition to any other site specific objectives and requirements. (Pages 31-34).

### **Patient Care Assessment and Plan: (pages 28-30)**

- I. The student will demonstrate his or her ability to enhance patient medication therapy when making pharmacy related assessments by utilizing all components of patient care subjective and objective information including History and Physical.
- II. Student will use the following to develop an appropriate Assessment and Plan for patient care
  - A. Subjective Findings (S)  
For each assigned patient, the student shall utilize the History and Physical and other appropriate sources to identify pertinent subjective findings for each listed disease state for the patient.
  - B. Objective Findings (O)  
For each assigned patient, the student shall utilize the History and Physical and other appropriate sources to identify the pertinent objective findings for each listed disease state for the patient.
  - C. Assessment (A)  
For each assigned patient, the student shall utilize the subjective and objective data to fully assess all drug therapy and identify drug-related problems. This assessment should include the etiology of the problem, whether drug therapy is necessary, and whether current drug therapy is efficacious and appropriate.
  - D. Plan (P)  
For each assigned patient, the student shall utilize the subjective and objective data in conjunction with the assessment to formulate a plan to resolve drug-related problems, optimize drug therapy, specify an appropriate monitoring plan (evaluating efficacy, side effects, toxicity, etc.), and maximize outcomes. The plan should always include goals of therapy and appropriate counseling. Students shall also identify situations where pharmacokinetic parameters are necessary to optimize drug therapy and thus implement appropriate pharmacokinetic monitoring plans.

## Professional Communications

- I. Interdisciplinary Patient Care  
The student will learn to participate as a pharmacist in an interdisciplinary patient care environment, under the preceptor's supervision and/or direction, in providing patient care.
- II. Drug Information  
The student will identify drug-therapy related questions, interact with health care professionals to clarify the question, efficiently formulate a response using appropriate resources, and communicate this response effectively in both written and verbal formats.
- III. Professional Writing  
The student will identify topics, write professional documents on these topics and communicate with other health care professionals concerning those documents.
- IV. Educational Presentations  
The student will identify, prepare and present topics for the purpose of education within the practice environment.

## Practice Management/Clinical Administration

- I. Documentation of Pharmacist Recommendations  
The student shall explain the need for and participate in the documentation of pharmacists' patient care related activities.
- II. Drug Use Evaluation (DUE)  
The student will explain the process of DUE and, if applicable, participate in the site's DUE system.
- III. Adverse Drug Reaction (ADR) Monitoring & other Safety Programs  
The student shall understand the process of ADR monitoring and, if applicable, participate in the federal and institution-specific ADR system. The student shall participate in safety program to improve patient outcomes.
- IV. Health Care Informatics  
The student shall participate in various forms of health care informatics and understand the process, outcomes and the value of the system in place.
- V. Research and Scholarly Activity  
The student shall explain the need for research and scholarly activity as it pertains to professional growth.

## Personal Attributes

- I. Social Interaction and Citizenship  
The student shall demonstrate effective interpersonal behaviors in a variety of situations and circumstances.
- II. Self-Learning Abilities and Habits  
The student shall effectively self-assess and satisfy learning needs on an ongoing basis.
- III. Social Awareness and Social Responsibility  
The student shall adapt their professional practice to the dynamic health care system.

## **Rotation Specific Objectives:**

Additional objectives for each required rotation is provided on pages 31-34 and specific elective rotation objectives may be requested from the Experiential Education Office.

## **EVALUATION:**

At the completion of each rotation, the preceptor will complete a "PharmD Student Rotation Evaluation Form" (pgs. 15-16) using RxPreceptor, online program. Rotation letter grades may be assigned by the preceptor, Hub Site Coordinator, or Director of Experiential Education. The student will be assigned a letter grade (A,B,F) by the preceptor for each rotation based on the following:

- a. Successful completion of core learning objectives.
- b. Successful completion of rotation specific learning objectives.
- c. Successful completion of site-specific responsibilities and/or activities.
- d. Appropriate ethical, professional and academic conduct.

If a letter grade of "F" is achieved on any rotation, the student must repeat the rotation and achieve a passing grade prior to graduation.

Depending on the month of rotation, the rotation grade may also be dependent on the following:

- e. Successful and timely completion of case studies.
- f. Successful and timely completion of P6 competency testing. (dates for testing TBA)
- g. Successful and timely completion of RxPortfolio requirements (monthly updates).
- h. Successful and timely completion of online webinar(s). (TBA)
- i. Completion & submission of the longitudinal form (April 19th)
- j. Completion & submission patient communication form (April 19th)

**Note:** Per the general administration and academic regulations of the College of Pharmacy, a letter grade of a "B-" or better must be obtained to pass each rotation (while maintaining a 3.0 average). At the end of each month if the student's RxPortfolio and CV are not updated or case studies or webinar assignments and competency tests are not completed or submitted when assigned, the Director of Experiential Education may penalize the student by adjusting the grade earned at the site. Deductions in the grade will be based on the number of items not completed timely and may result in a grade change from A to A- or B ; B to B- or Fail) All assignments (case studies, monthly portfolio updates and submissions, P6 competency testing, webinars, longitudinal form, communication form etc.) must be completed in order to successfully graduate.

## **POLICIES REGARDING STUDENT PLACEMENT IN THE HUB NETWORK**

The placement of students into Hub Sites is a **collaborative process** involving the student, Director of Experiential Education, Assistant Director of Experiential Education, Education Specialist and the Hub Site Coordinators. The Director and Assistant Director of Experiential Education assign student placements using the following process. Student preference is considered however, placement based on preference or rank is not guaranteed due to limited Hub Site availability and conditional acceptance by the Hub Site Coordinator. A student is NOT permitted to work (receive compensation) at a site where he or she is completing a rotation for the duration of the scheduled rotation(s). If approved, the student must ask his or her employer for a leave of absence during the time he/she will be on site during clinical rotations. Student must report their place of employment to the experiential office if it appears that there may be an issue with this policy. Failure to comply or report work/academic site conflicts may result in failure of a rotation/course.

1. Hub Site promo packets are posted for P5 students during the fall semester on RxPreceptor.
2. Students submit their rank order preference for their top fifteen sites on RxPreceptor.
3. Students are matched to sites based on the following criteria:
  - a. Student Rank
    - i. Pharmacy GPA
  - b. Student site preference
  - c. Discretion of the Director of Experiential Education based on hub site contracts and/or affiliation agreements.
4. Students and sites are notified of their initial match. Students must submit their updated electronic portfolio to Hub Site as directed during the month of October, Failure to do so may result in forfeiting their assigned site.
5. Hub Sites will have the option to:
  - a. Approve/Disapprove student placements based on portfolio. OR
  - b. Approve/Disapprove student placements pending interview.
    - i. Interviews may take place over the phone, on campus or at the site depending on the preference of the site.
    - ii. Sites will contact students to arrange interview times and places, if necessary.
6. Students who are not approved by their first site and go unmatched, will be placed by the Director of Experiential Education.
7. Students and sites are notified of final placement during the spring semester of their P5 year
  - a. Students must submit electronic portfolio to final site, if different from initial match.

## **POLICIES REGARDING ELECTIVE ROTATIONS OUTSIDE OF THE HUB NETWORK**

Elective rotations are one-month assignments chosen based on interest of the student and availability. Elective rotations are offered at each of the Hub Sites and their respective affiliates; however, electives may also be completed outside of the Hub Network. An elective rotation should fit the description of any of those listed on the table on page 5. If an elective rotation is desired that is not on this list, a waiver must be granted from the Director of Experiential Education. A student is NOT permitted to work at the same site he or she is completing a rotation. The student must request a leave of absence from his or her employer during the time he or she will be on site during clinical rotations. (See policy noted above.)

If students choose to take an elective rotation outside of their assigned Hub Site, the following process must be completed and all documents must be in place before February 25, 2012.

1. Students must receive approval from the Director or Assistant Director of Experiential Education for a potential site, type of rotation and preceptor.
    - a. If a student is requesting to complete more than one month away from his or her hub site, approval must also be received from the Hub Site Coordinator.
  2. If approved, students will:
    - a. Turn in completed preceptor application form.
      - i. First, the student must verify whether the application is on file. If not, the application must be filled out by the pharmacist who will serve as the preceptor. This form is available online and in the Introductory Pharmacy Practice Experience Manual.
  3. If approved, the Experiential Director/ Program will:
    - a. Initiate an Affiliation Agreement with the organization.
      - i. This may take a lengthy period of time, so plan ahead.
  4. Once the preceptor application and affiliation agreement are in place, written affirmation from the preceptor to the Experiential Director/Program must be obtained.
    - a. Affirmation may be provided in an e-mail or letter. The preceptor must, in some written form, affirm that they will be precepting the named student for an elective rotation. He or she must indicate the site, type of elective and agreed month in the affirmation. Once the written affirmation is received, the rotation may not be changed.
- The Director and Assistant Director of Experiential Education reserve the right to deny any student approval for an elective rotation outside the Hub Site.
  - Students may not complete elective rotations out of the Hub Site during the months of July or August. Students may petition the Director of Experiential Education for a waiver. Waivers will be assessed on a case by case basis.
  - Once an elective rotation is scheduled, changes will not be permitted. In the case of extreme personal reasons, changes will be considered by the Director of Experiential Education and the Hub Site Coordinator. Extreme personal reasons do not include changes in student interest, failure to secure housing or a desire to move closer to family or friends. These items should be considered prior to committing to an out of network elective rotation. Elective rotation changes impact the relationship with the school, the site and other pharmacy schools utilizing the site. Each change requires additional administrative work by the school and hub site and may affect payment to the site.
  - Some rotation sites may require the completion of prerequisite rotations, additional background checks, illicit drug screening, and/or other testing or screening. It is the student's responsibility to identify any of these prerequisites with the preceptor and to pay for any additional costs that may be associated with the requirements. Failure to comply with these additional requirements once a rotation is scheduled may result in delay of graduation.

### **POLICIES REGARDING ABSENCE DURING ROTATIONS:**

Due to the intensity of each rotation and the need to achieve rotation objectives, it is advised that students avoid taking time away from their rotations. Students completing rotations do not follow the academic calendar for the University and are not allowed vacation time during their rotation schedule. However, it is recognized that students may need time off for, job interviews, illness or other unforeseen reasons. The following are the approved guidelines regarding absence from rotations:

1. Students will be allowed no more than **NINE (9) days** of approved absences from their assigned experiences over the entire rotation sequence. Each student is responsible for assuring that the maximum number of days away from the nine month rotation sequence is not exceeded. Students are responsible for logging ALL absences in RxPreceptor using the Absentee Log.
2. Students will be allowed no more than **THREE (3) days** of approved absences during any one rotation (1 month experience.) If days are missed, students may be required to spend additional time at the site, beyond the originally scheduled rotation time, so the student can complete all college and rotation specific objectives.
3. Time off is to be taken only with the **PRIOR** approval of the preceptor at the site. The student should use the "Absentee Log" to facilitate this approval.
4. Requests for more than three days of absences within any one rotation must be approved by the preceptor, Hub Site Coordinator and Director of Experiential Education. If students are granted approved absences for more than three (3) days from the rotation, the time **must be made** up or rescheduled.
5. An excused absence from a site does NOT relieve the student from completion of any of the rotation objectives or responsibilities.
6. Unexcused absences are NOT tolerated and jeopardize the student's successful completion of the program. Any unexcused absence may result in failure of the rotation that it occurred in. The preceptor should immediately contact the Office of Experiential Education if such absences occur.
7. Students whose absences are a result of inpatient medical care, must provide a medical release to the Director of Experiential Education prior to returning to the assigned rotation and/or rotation sequence.

#### **POLICIES FOR LOGGING HOURS DURING PRACTICE EXPERIENCES:**

- Students are required to log the total number of hours completed during each rotation by the last scheduled calendar day of the experience using the IPPE/APPE Hour Log on RxPreceptor.
- Hours must be verified by the preceptor using RxPreceptor™ in order to be accepted by the College.
- Hours must be verified by the preceptor at the same time the final evaluation is completed (last scheduled calendar day of the experience).

#### **PROFESSIONAL CONDUCT:**

- While completing the Advanced Practice Rotations, students WILL maintain a high standard of professional conduct. Students are expected to dress in appropriate professional attire (as defined by his or her respective preceptor or site), uphold the strictest patient confidentiality standards, and display a positive, self-motivated attitude. Students failing to comply with these standards will be removed from the site. Additionally, a non-passing grade will be assigned to the student at the discretion of the preceptor and Director of Experiential Education.
- **Appropriate professional appearance shall include, but not be limited to, the following expectations:**
  - **Fingernails - Nails must be kept clean and neat with their length to be no longer than 1/4 inch beyond the end of the finger. Artificial nails are not permitted.**
  - **Piercings – No visible body piercings, with the exception of ear lobe piercings, will be permitted.**
  - **Shoes – No open toed shoes will be permitted in patient care areas.**
  - **Fragrances- No over powering fragrances, see sites policies for details.**
  - **Clothing – Clothing should be professional and appropriate for the practice setting. A white lab coat will be expected unless otherwise told. Lab coats must be kept clean and pressed at all times. Skirts and dresses must be at knee length and must fall below the hemline of the white lab coat.**

- Students are guests at each site. If inappropriate behavior or lack of professionalism is noted by the preceptor (or other individuals at the site), the student may be requested to terminate the rotation and leave the site, at the discretion of the Director of Experiential Education.
- Cell phone use is **prohibited** during core hours of the rotation and in patient care areas. Inappropriate use of cell phones (personal calls or texting) is considered unprofessional and may result in failure of the rotation.

### **ROTATION CHANGES:**

After scheduling rotations, it is difficult for the schedule to be changed due to the following: prior commitment to the preceptors/sites, unavailability of comparable quality rotations, negative effects on other rotations, and changing housing arrangements. Based on experiential program policy, only extreme personal reasons are considered on an individual basis for making any changes in the final rotations schedule. Rotation changes must be approved by both the Hub Site Coordinator and the Director of Experiential Education at The University of Findlay by e-mail. In other words, no phone approvals or approvals based on personal conversation are permitted.

### **WITHDRAWAL FROM ADVANCED PHARMACY PRACTICE EXPERIENTIAL COURSES:**

Withdrawals from an advanced pharmacy practice experiential course will not be granted after the course begins, unless approval is granted by petitioning to the Director of Experiential Education. Either the student or the preceptor may request a withdrawal. Withdrawals may be granted by the Director of Experiential Education for two reasons:

- a. Unsatisfactory clinical education experience- According to the Director of Experiential Education, the experience does not meet the educational needs of the student or provide a safe learning environment.
- b. Exceptional change to personal circumstances- The student has experienced the birth or adoption of a child, has to care for an ill family member and/or has developed a serious health condition during the semester of the scheduled experience.

### **Procedure for Withdrawals from Advanced Pharmacy Practice Experience Courses:**

The student is responsible for:

1. Notifying the Director of Experiential Education of any problems with the advanced pharmacy practice experience IMMEDIATELY.
2. Cooperating with the Director of Experiential Education to determine: the problems associated with the experience, possible solutions to change the experience, and the consequences of the request.
3. Notifying the Director of Experiential Education and providing documentation IMMEDIATELY of an exceptional change in personal circumstance.
  - Refer to student handbook for further details

### **PROFESSIONAL PORTFOLIO (RxPortfolio) REQUIREMENTS:**

The student must continue to maintain his or her "Professional Electronic Portfolio" from their early and intermediate practice experiences and will share it with each preceptor prior to beginning each rotation. The completed portfolio **MUST** be submitted to the Hub Site Coordinator and Director of Experiential Education by **November 18, 2011** and **April 19, 2012** to document satisfactory completion of all objectives and outcomes. RxPortfolios must be reviewed and approved by each student's Hub Site Coordinator and Director of Experiential Education prior to graduation. Failure to complete the portfolio requirements will impact the rotation grade for November and/or April.

The Professional Portfolio shall be organized as outlined:

**General Information:**

- Updated Photo, Contact Information, Personal Biography and Career Objective
- Updated Employment History, Honors & Awards, Professional Activities, Licenses & Certifications

**CV/Resume Archive:**

- Updated Curriculum Vitae
  - CVs must be updated each month to reflect the previous month's experience
  - Most recent CV must be uploaded to RxPortfolio

**Experiential Rotations:**

- Each APPE rotation month must be entered similarly to IPPE rotations under Experiential Rotations
  - Indicate site, preceptor, time frame
  - Attach projects, presentation, any other pertinent documentation (ie. journal club, case reviews, case presentations, handouts, monographs, etc.)
- Scanned copy of Patient Communication Form (submitted to RxPortfolio experiential rotation tab)
- Scanned copy of the Completed Longitudinal Outcome Measures Assessment Form (pgs. 18-19) must be attached to the last rotation month in a student's sequence.

**ROTATION EVALUATION FORMS SUMMARY:**

**PharmD Student Evaluation Form (pgs. 15-16) (complete on RxPreceptor)**

The preceptor is to complete the "Midpoint Evaluation" section of this form during the middle week of the rotation. The "Final Evaluation" section and final grade should be completed during the last week of the rotation. For eight week rotations, the final evaluation should be completed twice (at the end of each 4 weeks.) During the Midpoint and Final Evaluations of the student, the preceptor will discuss the student's strengths and weaknesses. Although Midpoint and Final Evaluations **are required**, only the Final Evaluation will be used in determining the student's grade for the rotation. The Final Evaluation should indicate the student's level of competence upon completion of the rotation. **Preceptors must use RxPreceptor to complete Midpoint and Final evaluations and assign student grades. Hard copy evaluations will no longer be accepted.**

**Student Self-Assessment Form (pg. 17) (complete on RxPreceptor)**

The *student* must complete a self-evaluation at the end of each rotation. This evaluation should be discussed with the preceptor prior to the completion of the rotation.

**Longitudinal Outcome Measures Assessment Form (pgs. 18-19)**

During the Advanced Practice Rotations, the student must complete all longitudinal outcome measures. Upon completion of each outcome measure, the preceptor or Hub Site Coordinator shall evaluate the student's performance. The preceptor should discuss the evaluation with the student. The student must include the original assessment form with the professional portfolio (RxPortfolio) at the end of the rotation sequence. The form should be attached electronically to the last rotation month for review by the Director of Experiential Education no later than **April 19<sup>th</sup>**. Each student is responsible for completing all activities listed on this form.

**Journal Club Evaluation Form (pg. 20)**

Many rotation sites require the student to give a verbal journal club presentation. This is a representative copy of the evaluation form the preceptor may choose to utilize. This form is NOT a required form. However, if this form is completed by the preceptor, it should be included as part of the Professional Portfolio.

**Preceptor/Rotation Evaluation Form (pgs. 21-22)\* (complete on RxPreceptor)**

Students must use RxPreceptor online form to complete the preceptor evaluations no later than the last day of the rotation. Hard copy evaluations will no longer be accepted.

**Case Presentation Evaluation Form (pg. 23)**

Many rotation sites require the student to give verbal case presentations. This is a representative copy of the evaluation form the preceptor may choose to utilize. This form is NOT a required form. However, if this form is completed by the preceptor, it should be included as part of the Professional Portfolio.

**Patient Communication Evaluation Form (pg. 24)**

Each student must complete ONE (1) Patient Communication Evaluation during the rotation sequence. The preceptor may enact the part of the patient, may assign another colleague to enact the part of the patient, or assign a real patient for the student to interact with. The student should be observed and evaluated based upon the criteria provided on the Patient Communication Evaluation Form. This form should be submitted as part of the Professional Portfolio (RxPortfolio) at the completion of the rotation sequence.



## Pharm.D. Student Rotation Evaluation Form

The University of Findlay College of Pharmacy



Student Name: \_\_\_\_\_ Rotation & Site: \_\_\_\_\_

Preceptor: \_\_\_\_\_ Dates of Rotation: \_\_\_\_\_

Please evaluate the student in the following areas. Use the following scale for evaluation (N/A = Not Applicable):

1 <b>Unsatisfactory Performance</b> <i>Student does not meet requirements. Student is unable to complete basic/routine tasks despite guidance and prompting.</i>	2 <b>Needs Improvement</b> <i>Student meets some minimum requirements. Student frequently requires guidance and/or prompting to complete basic or routine tasks.</i>	3 <b>Progressing Satisfactorily</b> <i>Student consistently meets requirements. Student completes basic and some complex tasks independently with minimal or no guidance and/or prompting.</i>	4 <b>Exceeds Expectations</b> <i>Student exceeds requirements. Student consistently and independently completes all basic and complex tasks going beyond what is required.</i>	
Desired Outcomes & Examples of Performance		Midpoint Evaluation	Final Evaluation	Midpoint and Final Evaluation Comments
<b>1. Utilize a systematic problem-solving approach to patient care.</b> <ul style="list-style-type: none"> <li>• Is able to obtain a complete drug history for assigned patients by collecting relevant information and establishing patient rapport.</li> <li>• Clearly identifies clinical status of patient and severity of illness to serve as baseline for later assessment of efficacy/toxicity.</li> <li>• Consistently &amp; accurately identifies all drug-related problems.</li> </ul>		1 2 3 4  N/A	1 2 3 4  N/A	
<b>2. Utilize the acquired knowledge base to assess the patient and formulate a therapeutic plan.</b> <ul style="list-style-type: none"> <li>• Constructs an appropriate treatment and monitoring plan for all identified problems.</li> <li>• Involves the patient in the therapy decision-making process when possible.</li> <li>• Includes therapeutic endpoints and potential toxic effects with a given drug and dosage regimen.</li> <li>• Selects appropriate monitoring parameters.</li> </ul>		1 2 3 4  N/A	1 2 3 4  N/A	
<b>3. Demonstrate proficiency in recommending and implementing a therapeutic plan.</b> <ul style="list-style-type: none"> <li>• Consistently develops and presents appropriate therapy options with rationale(s).</li> <li>• Prioritizes problems depending on significance and addresses appropriately.</li> <li>• Identifies adverse drug events with treatment and prevention strategies.</li> <li>• Takes into account relevant differences in cultural, social, economic, political, and scientific viewpoints between the practitioner and patient.</li> </ul>		1 2 3 4  N/A	1 2 3 4  N/A	
<b>4. Identify and evaluate the current literature and applies this information to patient care.</b> <ul style="list-style-type: none"> <li>• Identifies and clarifies drug information questions.</li> <li>• Literature search is thorough with sources identified.</li> <li>• Synthesizes response from available sources and accurately conveys information.</li> </ul>		1 2 3 4  N/A	1 2 3 4  N/A	

<p><b>5. Effectively communicate, both verbally and in writing, with patients and other health care providers(HCPs).</b></p> <ul style="list-style-type: none"> <li>• Effectively counsels patients without prompting.</li> <li>• Presentations are consistently well organized and progress in a logical manner.</li> <li>• Effective group presentation skills.</li> <li>• Effectively communicates with other HCPs to enhance patient outcomes</li> </ul>	<p>1 2 3 4 N/A</p>	<p>1 2 3 4 N/A</p>	
<p><b>6. Demonstrate self-learning and self-assessment abilities and habits.</b></p> <ul style="list-style-type: none"> <li>• Understands the need for, and development of, lifelong learning habits to maintain professional competence and personal growth.</li> <li>• Regularly self-assess learning needs and engages in self-imposed learning activities to further his/her ongoing personal/professional growth.</li> <li>• Recognizes the importance of research and the role of the pharmacist in research.</li> </ul>	<p>1 2 3 4 N/A</p>	<p>1 2 3 4 N/A</p>	
<p><b>7. Demonstrate leadership abilities.</b></p> <ul style="list-style-type: none"> <li>• Student uses appropriate interpersonal and inter-group behaviors during interactions with patients, healthcare providers, and the public.</li> </ul>	<p>1 2 3 4 N/A</p>	<p>1 2 3 4 N/A</p>	
<p><b>8. Demonstrate professionalism</b></p> <ul style="list-style-type: none"> <li>• Demonstrates professional behavior &amp; appearance, interest and motivation, and shows respect towards others and maintains confidential material.</li> <li>• Arrives on time and prepared for daily activities</li> <li>• Displays cultural competence</li> <li>• Accurately completes assignments in a timely manner.</li> </ul>	<p>1 2 3 4 N/A</p>	<p>1 2 3 4 N/A</p>	
<p><b>9. Demonstrate proficiency in the role of the pharmacy practitioner, as a member of the health care team, in provision of quality patient care.</b></p> <ul style="list-style-type: none"> <li>• Volunteers, questions, and comments frequently without distracting from patient discussion.</li> <li>• Is able to independently identify activities, completes documentation, and discusses the impact of those actions on patient outcomes.</li> </ul>	<p>1 2 3 4 N/A</p>	<p>1 2 3 4 N/A</p>	
<p><b>10. Demonstrate ability to conduct further research and/or improving pharmacy services in the future.</b></p> <ul style="list-style-type: none"> <li>• Pursues answers to research questions to improve patient care.</li> <li>• Identifies methods to enhance pharmacy services.</li> <li>• Uses computer generated pharmacy data to analyze medication or patient safety issues</li> </ul>	<p>1 2 3 4 N/A</p>	<p>1 2 3 4 N/A</p>	

YES, I have reviewed the Student's Professional Portfolio and Self Evaluation

YES, I have documented/verified student rotation hours completed in RxPreceptor under Additional Modules "IPPE/APPE hours"

Additional Comments: (Presentations, Journal Clubs, Projects, Research, Publications, etc.)

Overall Performance (Circle Grade)

**A (Pass with Honors)**

**B (Pass)**

**F (Fail)**

**A:** Student averages scores of > 3.5 (Student continually exceeds expectations and applies skills and knowledge in an independent manner.)

**B:** Student averages scores of 2.5 to 3.5. (Student may have outlying scores, but overall requires development and/or refinement of skills and/or knowledge.)

**F:** Student scores less than 2.5. (Student may have outlying scores, but overall lacks skills and/or knowledge to complete tasks.)

Midpoint Evaluation: Preceptor Signature \_\_\_\_\_ Date \_\_\_\_\_ Student Initials \_\_\_\_\_

Final Evaluation: Preceptor Signature \_\_\_\_\_ Date \_\_\_\_\_ Student Initials \_\_\_\_\_



## Student Self-Evaluation Form

### The University of Findlay College of Pharmacy



Student Name \_\_\_\_\_

Site Name \_\_\_\_\_

Preceptor Name \_\_\_\_\_

Dates of Rotation \_\_\_\_\_

**4= Exceeds Expectations 3= Progressing Satisfactorily 2= Needs Improvement 1=Unsatisfactory Performance**

*Please evaluate yourself on each desired outcome. This form should be discussed with your preceptor and included in your RxPortfolio.*

Desired Outcomes	Evaluation (Circle)
<b>1. Utilize a systematic problem-solving approach to patient care.</b> <ul style="list-style-type: none"> <li>• Is able to obtain a complete drug history for assigned patients by collecting relevant information and establishing patient rapport.</li> <li>• Clearly identifies clinical status of patient and severity of illness to serve as baseline for later assessment of efficacy/toxicity.</li> <li>• Consistently &amp; accurately identifies all drug-related problems.</li> </ul>	1 2 3 4  N/A
<b>2. Utilize the acquired knowledge base to assess the patient and formulate a therapeutic plan.</b> <ul style="list-style-type: none"> <li>• Constructs an appropriate treatment and monitoring plan for all identified problems.</li> <li>• Involves the patient in the therapy decision-making process when possible.</li> <li>• Includes therapeutic endpoints and potential toxic effects with a given drug and dosage regimen.</li> <li>• Selects appropriate monitoring parameters.</li> </ul>	1 2 3 4  N/A
<b>3. Demonstrate proficiency in recommending and implementing a therapeutic plan.</b> <ul style="list-style-type: none"> <li>• Consistently develops and presents appropriate therapy options with rationale(s).</li> <li>• Prioritizes problems depending on significance and addresses appropriately.</li> <li>• Identifies adverse drug events with treatment and prevention strategies.</li> <li>• Takes into account relevant differences in cultural, social, economic, political, and scientific viewpoints between the practitioner and patient.</li> </ul>	1 2 3 4  N/A
<b>4. Identify and evaluate the current literature and applies this information to patient care.</b> <ul style="list-style-type: none"> <li>• Identifies and clarifies drug information questions.</li> <li>• Literature search is thorough with sources identified.</li> <li>• Synthesizes response from available sources and accurately conveys information.</li> </ul>	1 2 3 4  N/A
<b>5. Effectively communicate, both verbally and in writing, with patients and other health care providers.</b> <ul style="list-style-type: none"> <li>• Effectively counsels patients without prompting.</li> <li>• Presentations are consistently well organized and progress in a logical manner.</li> <li>• Effective group presentation skills.</li> <li>• Effectively communicates with other HCPs to enhance patient outcomes</li> </ul>	1 2 3 4  N/A
<b>6. Demonstrate self-learning and self-assessment abilities and habits.</b> <ul style="list-style-type: none"> <li>• Understands the need for, and development of, lifelong learning habits to maintain professional competence and personal growth.</li> <li>• Regularly self-assess learning needs and engages in self-imposed learning activities to further his/her ongoing personal/professional growth.</li> <li>• Recognizes the importance of research and the role of the pharmacist in research.</li> </ul>	1 2 3 4  N/A
<b>7. Demonstrate leadership abilities.</b> <ul style="list-style-type: none"> <li>• Student uses appropriate interpersonal and inter-group behaviors during interactions with patients, healthcare providers, and the public.</li> </ul>	1 2 3 4  N/A
<b>8. Demonstrate professionalism</b> <ul style="list-style-type: none"> <li>• Demonstrates professional behavior &amp; appearance, interest and motivation, and shows respect towards others and maintains confidential material.</li> <li>• Arrives on time and prepared for daily activities</li> <li>• Displays cultural competence</li> <li>• Accurately completes assignments in a timely manner.</li> </ul>	1 2 3 4  N/A
<b>9. Demonstrate proficiency in the role of the pharmacy practitioner, as a member of the health care team, in provision of quality patient care.</b> <ul style="list-style-type: none"> <li>• Volunteers, questions, and comments frequently without distracting from patient discussion.</li> <li>• Is able to independently identify activities, completes documentation, and discusses the impact of those actions on patient outcomes.</li> </ul>	1 2 3 4  N/A
<b>10. Demonstrate ability to conduct further research and/or improving pharmacy services in the future.</b> <ul style="list-style-type: none"> <li>• Pursues answers to research questions to improve patient care.</li> <li>• Identifies methods to enhance pharmacy services.</li> <li>• Uses computer generated pharmacy data to analyze medication or patient safety issues</li> </ul>	1 2 3 4  N/A



## Longitudinal Outcome Measures Assessment Form

The University of Findlay College of Pharmacy  
*Must be completed by the end of the last rotation*



**Student Name:** \_\_\_\_\_

The preceptor or Hub Site Coordinator should complete the following assessment form once the student has demonstrated competence in each of the following patient care activities, assessments or interventions or education/research activities. The student is responsible for sharing this form with his or her preceptor or Hub Site Coordinator on a regular basis to document completion.

**A. Patient Care Activities (Each outcome must be completed at least TWICE during the nine month sequence)**

Patient Care Activity	Preceptor / Date		Preceptor / Date	
Identify and collect appropriate drug-related monitoring parameters for each assigned patient				
Maintain an adequate patient data base for each assigned patient				
Identify and prioritize drug-related problems for each assigned patient				
Assess the appropriateness of each assigned patient's drug therapy				
Construct a detailed pharmacotherapeutic plan for each assigned patient				
Present all patient data in a concise and meaningful fashion				
Obtain and write-up a patient medication history				
Perform medication reconciliation process to improve continuity of pharmaceutical care				
Prepare a written pharmacokinetic consultation				
Prepare a written pharmacotherapeutic plan for a specific patient				
Provide a verbal therapeutic plan recommendation to another health-care professional (i.e. physician)				
Take a patient's blood pressure				
Take a patient's pulse				
Take a patient's temperature				
Take a patient's respiratory rate				
Assess a patient's peripheral edema				
Assess an ECG (EKG)				
Assess one radiographic image				
Observe a physician perform a full physical examination and assess results				

**B. Assessment/Intervention Activities (Each outcome must be completed at least TWICE during the nine rotation sequence)**

<b>Assessment Activities</b>	<b>Preceptor / Date</b>		<b>Preceptor / Date</b>	
Assess a creatinine clearance for an adult				
Assess a creatinine clearance for a child/infant				
Assess a creatinine clearance for a renally insufficient patient				
Assess a body surface area (BSA) for an adult				
Assess an ideal body weight (IBW) for an adult				
<b>Intervention Activities</b>				
Make a warfarin dosage adjustment based on patient parameters (e.g. INR)				
Recommend empiric antibiotic therapy				
Recommend and consult a patient regarding a self care nonprescription product				
Recommend a nonprescription dietary supplement, or herbal product				
Recommend antibiotic therapy based upon a culture and sensitivity				
Determine monitoring parameters for a patient being treated for an infectious disease				
Adjust a drug dose in a patient with renal insufficiency				
Assess the significance of a drug-drug interaction				
Identify and report a medication error or adverse drug reaction and develop a plan for correction				

**C. Education/Research Activities (Each outcome must be completed at least ONCE during the rotation sequence)**

<b>Educational/Research Activities</b>	<b>Preceptor / Date</b>	
Prepare a handout for case presentation		
Prepare an article for a newsletter or publication		
Prepare a patient education sheet		
Prepare a written drug information response in a practice setting.		
Use computer generated pharmacy data to analyze a medication or patient safety issue and develop a plan to improve patient outcomes. (health care informatics)		
Participate in a discussion regarding compliance with accreditation, legal, regulatory/legislative or safety requirements.		
Create a business plan to support a patient care service. (must include: feasibility, need, resources, marketing & reimbursement)		
<b>Provide a formal case presentation</b>		
<b>Provide an education presentation to pharmacists</b>		
<b>Provide an education presentation to other health care professionals</b>		
<b>Lead a Journal Club discussion</b>		
<b>Complete a Drug Utilization Project</b>		
<b>Complete one patient communication evaluation form (see page 24 of manual)</b>		

**Hub Site Coordinator & Student Signatures**

**Hub Site Coordinator** \_\_\_\_\_ **Date** \_\_\_\_\_

**Student** \_\_\_\_\_ **Date** \_\_\_\_\_



**Student Journal Club Evaluations**  
*The University of Findlay College of Pharmacy*



Student: \_\_\_\_\_

Article Title: \_\_\_\_\_

Evaluator: \_\_\_\_\_ Date: \_\_\_\_\_

Overview of the Study \_\_\_\_\_/10pts

- Objectives, purpose, importance
- Background of study using primary references
- Brief review of studies that lead up to the study, when applicable

Presentation of Materials & Methods \_\_\_\_\_/15 pts

- Inclusion and exclusion criteria
- Outcome variables
- Statistics
- Randomization, sample selection
- Blinding

Discussion of Results & Conclusions \_\_\_\_\_/15 pts

- Comparison of results vs. stated conclusions
- Tables vs. text

Evidence of Literature Evaluation Skills \_\_\_\_\_/20 pts

- Discussed relevant and pertinent limitations
- Questions answered, questions left unanswered
- Application to clinical practice

Able to Answer Relevant Questions \_\_\_\_\_/20 pts

Overall Communication Skills \_\_\_\_\_/10 pts

Formal Write Up \_\_\_\_\_/10 pts  
 Organized, complete, accurate, concise

**Deductions**

Staying within time limit (if necessary) \_\_\_\_\_/ 0 to - 5 pts  
 Appropriate citation of additional references used \_\_\_\_\_/ 0 to - 5 pts

**Total** \_\_\_\_\_/100 pts

**Comments:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



**Preceptor Evaluation Form**  
**The University of Findlay College of Pharmacy**



Rotation Site \_\_\_\_\_

Rotation Preceptor \_\_\_\_\_ Rotation type \_\_\_\_\_

Name/Signature of Student \_\_\_\_\_ Date \_\_\_\_\_

*Please read each of the statements carefully, and then indicate your level of agreement or disagreement:*

	<b>Strongly agree</b>	<b>Agree</b>	<b>Neutral</b>	<b>Disagree</b>	<b>Strongly disagree</b>	<b>Not Applicable</b>
<b>Orientation to the rotation - Preceptor/Mentor/Instructor:</b>						
Communicated clearly goals and objectives of the rotation	5	4	3	2	1	N/A
Reviewed the college expectations with me (e.g. longitudinal outcomes, portfolio, patient communication evaluation form)	5	4	3	2	1	N/A
Introduced me to the other personnel, provided directions for faculties at the site, and contact information	5	4	3	2	1	N/A
Assessed my abilities, needs, and career goals	5	4	3	2	1	N/A
Gave me specific assignments	5	4	3	2	1	N/A
Provided a monthly calendar for specific tasks (i.e., scheduled meetings and presentations)						
Emphasized to me performance standards (i.e., my daily responsibilities, reporting medication-related problems, patient history, physical assessment, therapeutic regimen modification, journal club)	5	4	3	2	1	N/A
<b>Completion of the rotation objectives:</b>						
The site provided sufficient opportunity for me to meet all the <u>general</u> objectives	5	4	3	2	1	N/A
The site provided sufficient opportunity for me to meet all of the <u>site-specific</u> objectives	5	4	3	2	1	N/A
The site provided an opportunity to collaborate with other professionals	5	4	3	2	1	N/A

	<b>Strongly agree</b>	<b>Agree</b>	<b>Neutral</b>	<b>Disagree</b>	<b>Strongly disagree</b>	<b>Not Applicable</b>
Resources were adequate to complete the rotation objectives	5	4	3	2	1	N/A
Resources were readily available to complete the rotation objectives	5	4	3	2	1	N/A
My preceptor or mentor was sufficiently accessible to facilitate attainment	5	4	3	2	1	N/A
My preceptor or mentor spent sufficient time with me to guide me (please specify contact hrs/wk _____ hrs/wk)	5	4	3	2	1	N/A
Stimulated problem solving through interaction	5	4	3	2	1	N/A
Had an organized approach to precepting	5	4	3	2	1	N/A
Treated me with respect	5	4	3	2	1	N/A
Promoted an environment conducive for independent learning	5	4	3	2	1	N/A
<b>Providing feedback – Preceptor/Mentor/Instructor:</b>						
Provided me with feedback on my performance frequently and in a timely manner	5	4	3	2	1	N/A
Acknowledged my strengths and worked with me to fortify my areas of weakness	5	4	3	2	1	N/A
Rated my performance based on interactions and feedback from other professionals	5	4	3	2	1	N/A
Gave me remarks that were concise	5	4	3	2	1	N/A
Focused on my performance and not only my intentions	5	4	3	2	1	N/A

*In the space provided, please identify the primary strengths and suggestions for enhancement of the rotation site and the instructor*

**Site Strengths and Suggestions for Enhancement:**

**Preceptor Strengths and Suggestions for Enhancement:**



**Case Presentation Evaluation Form**  
*The University of Findlay College of Pharmacy*



Student: \_\_\_\_\_ Evaluator: \_\_\_\_\_ Date: \_\_\_\_\_

Rotation Title/Number \_\_\_\_\_ Topic: \_\_\_\_\_

1 = Improvement mandatory; substantially below performance expectation	2 = improvement needed: below expectations	3 = meets expectations	4 = exceeds expectations	5 = superior: significantly exceeds expectations
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**Organization**

- Topic was relevant to practice 1 2 3 4 5
- Logical information sequence 1 2 3 4 5
- Appropriate continuity of presentation 1 2 3 4 5
- Appropriate balance of emphasis 1 2 3 4 5
- Appropriate utilization of time allotted 1 2 3 4 5

**Visual Aids/Handouts**

- Well organized handouts presented to audience 1 2 3 4 5
- Clear and legible 1 2 3 4 5
- Complemented the presentation; not used to read directly 1 2 3 4 5
- References in correct format and complete 1 2 3 4 5

**Verbal Presentation/Delivery**

- Clear, audible speech (rate was easy to understand) 1 2 3 4 5
- No distracting mannerisms 1 2 3 4 5
- Eye contact with audience 1 2 3 4 5
- Ability to handle questions 1 2 3 4 5
- Clear explanation/articulation of concepts 1 2 3 4 5
- Minimal use of space fillers (e.g. "umm", "yea") 1 2 3 4 5

**Comments and Suggestions for Improvement**

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Average Score/Grade \_\_\_\_\_

Signature of Evaluator \_\_\_\_\_



**Patient Communication Evaluation Form**  
*The University of Findlay College of Pharmacy*



Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

<b>General Intro/Opening</b>	<b>Not Done</b>	<b>Done Poorly</b>	<b>Average</b>	<b>Well</b>	<b>Outstanding</b>
1. Introduces him/herself	0	1	2	3	4
2. Greets patient by name	0	1	2	3	4
3. Elicits patient's reason for visit using open-ended questions	0	1	2	3	4

Comments: \_\_\_\_\_

<b>Specific Case-Related Questions:</b>	<b>Not Done</b>	<b>Done Poorly</b>	<b>Average</b>	<b>Well</b>	<b>Outstanding</b>
1. Obtained patient's medication history (Rx, OTC, Herbal)	0	1	2	3	4
2. Obtained patient's medical conditions	0	1	2	3	4
3. How well did the student communicate?	0	1	2	3	4
4. Was the student able to generate a specific drug question?	0	1	2	3	4
5. Did the student respond satisfactorily to the needs and problems presented by the patient?	0	1	2	3	4

Comments: \_\_\_\_\_

<b>Overall Impression</b>	<b>Not Done</b>	<b>Done Poorly</b>	<b>Average</b>	<b>Well</b>	<b>Outstanding</b>
1. Rate the extent to which the student demonstrated an organized approach to the patient.	0	1	2	3	4
2. Rate the extent to which the student showed a courteous and compassionate toward the patient	0	1	2	3	4
3. Did the student utilize his/her time well?	0	1	2	3	4
4. Rate the content of the interaction.	0	1	2	3	4
5. Rate the overall communication process.	0	1	2	3	4

Comments: \_\_\_\_\_

Examiner: \_\_\_\_\_ Overall Score: \_\_\_\_\_

**Absence Request Form**

*The University of Findlay College of Pharmacy*



This should be completed on RxPreceptor ([www.rxpreceptor.com](http://www.rxpreceptor.com))

Student \_\_\_\_\_

APPE Site/Rotation \_\_\_\_\_

Number of days of absence included in this request: \_\_\_\_\_

\_\_\_\_\_ Approval is requested for absence from rotation activities on \_\_\_/\_\_\_/\_\_\_ for the reason indicated below.

\_\_\_\_\_ Approval is requested for absence from rotation activities from \_\_\_/\_\_\_/\_\_\_ through \_\_\_/\_\_\_/\_\_\_ for the reason indicated below:

**REASON FOR ABSENCE**

- \_\_\_\_\_ Illness
  - \_\_\_\_\_ Death in Family
  - \_\_\_\_\_ Residency Interview
  - \_\_\_\_\_ Attend Professional Meeting
  - \_\_\_\_\_ Personal Reason
- \_\_\_\_\_ Other Explanation:

**FURTHER REASON FOR ABSENCE CAN BE GIVEN HERE IF EXPLANATION IS REQUIRED.**

\_\_\_\_\_

Approval requested \_\_\_\_\_ / \_\_\_ / \_\_\_  
(Student) (Date)

Approval \_\_\_\_\_ / \_\_\_ / \_\_\_  
(Hub Site Coordinator/Preceptor) (Date)

Received \_\_\_\_\_ / \_\_\_ / \_\_\_  
(Director of Experiential Programs) (Date)

This form should be sent to the Director of Experiential Programs. A copy should be kept on file with the preceptor.

## Rotation Helpful Hints and Notes

The following suggestions are in response to questions and issues that have been raised by previous students.

1. Approximately one (1) week prior to each of your rotations, contact your next preceptor to obtain such information as:

What day do you start?

Where do you meet?

Where do you park?

What should you wear (especially with respect to lab coats)?

What do you need to bring with you?

When are you generally expected to arrive/leave each day; what evening/weekend commitments do you have?

What are your options for lunch? (dinner and bedtime snack?)

Do I need any additional paperwork completed before I start? (eg: VA's require a background check-3 weeks before you start)

Do I need to complete any 797 testing prior to my start date?

Do I need to do a drug screen or background check prior to starting?

2. Your responsibilities for your rotation on holidays is determined by the preceptor you have during that particular month. Do not assume anything (such as you will have the Friday after Thanksgiving off or the Friday before Easter off) without talking to your preceptor. Generally, discussing these items at the beginning of the rotation will avoid any conflicts.
3. **Realize that your rotation commitments take priority over any outside employment commitments, even during evenings.** In some instances, this commitment may include weekends or holidays. Additionally, each rotation is based on a one or two CALENDAR month rotation. If the first day of the month falls on a Friday or Saturday, do NOT assume your rotation will begin on the following Monday.
4. If you see a potential conflict occurring (e.g. interview), make arrangements with your preceptor as soon as possible, preferably prior to the start of the rotation.
5. Keep in contact with the Office of Experiential Education on course registration procedures. The address you provide the University must be an address that you can access on a regular basis. You are responsible for all information mailed to you. Your university e-mail account may be forwarded to your personal e-mail account (i.e. yahoo.com, hotmail.com, etc.) by notifying the Information Technology Services Department.
6. **Remember** - Your Advanced Practice Rotations Manual has many specific policy and procedure details. You are responsible for knowing and abiding by these policies and procedures.
7. If you are reporting rotation hours as internship hours for an out of state Board of Pharmacy, the Academic Experience Affidavit must be completed and signed by each preceptor at the end of each rotation. This form must be turned in to the Ohio State Board of Pharmacy after the last rotation. All hours may be reported on the same form. The form is available at <http://pharmacy.ohio.gov>.
8. A short, white lab coat with an attached "The University of Findlay" patch and name tag is required for your Advanced Practice Rotations.

## Student Checklist for Completion of Paperwork and Coursework

### First Week

- Student to provide preceptor the RxPortfolio for review
- Student to review objectives for the rotation and be familiar with requirements of the rotation
- Student to discuss rotation schedule and identify any potential absences from the site
- Student to review requirements for projects, readings, and other assignments for the rotation
- Student to identify opportunities for completion of “Longitudinal Outcome Measures” and discuss with preceptor
- Verify current preceptor is linked in RxPreceptor, and inform Experiential Office if changes need to be made

### Middle weeks of rotation

- First Evaluation to be completed by Preceptor and reviewed with student
- Preceptor to review progress of student’s assignments and projects
- Student approaching completion of all assignments and projects
- Verify with next site if any extra paperwork/testing is required, and if so, make time to complete this.

### Last Weeks of rotation

- If rotation scheduled subsequently to current rotation, make contact with preceptor for next rotation
- Student to complete all projects and assignments
- Preceptor to complete final evaluation form
- Preceptor to complete internship hours affidavit (if necessary)
- Preceptor to evaluate student’s performance on respective Longitudinal Outcome Measures
- Student to complete Preceptor Evaluation Form
- Student to complete Self Evaluation Form
- Student to enter all hours into RxPreceptor and request that the preceptor confirm all hours before the student leaves the rotation site.
- All paperwork to be mailed to the Office of Experiential Education at the College of Pharmacy
- Update all sections of RxPortfolio prior to starting next month.

### **Upon Completion of the last rotation, the following must be submitted in addition to those items listed above:**

- RxPortfolio
- Longitudinal Outcome Measures Assessment Form (separate tab created in RxPortfolio)
- All Rotation Evaluation Forms
- Preceptor Evaluation Forms
- Patient Communication Form (submitted under separate tab in RxPortfolio)

# CASE STUDIES

The ultimate goal of the patient case presentations is to promote uniform basic clinical experience and competency in seven clinical areas. This experience will provide you with exposure, practical application and self-review. The areas are hyperlipidemia, hypertension, diabetes, congestive heart failure, infectious disease (x2), stroke & asthma/COPD. You should review basic text books, current literature, and evidence based practice guidelines as a guide for the case presentation and recommendations. The general format we suggest to begin this process is SOAP notes (subjective, objective, assessment, plan). You will need to incorporate a pharmacy focused plan into your notes, to be achieved by integrating the FARM process into your presentation as well. The FARM notes will allow you to focus on pharmacy related issues. FARM format (F: Findings A: Assessment R: Recommendation/Resolution and M: follow-up Monitoring.)

## I. Subjective Information/FINDINGS:

This information is obtained from the patient & or caregiver and so is not directly observed or measured by the SOAP writer. This information is descriptive and cannot be confirmed by diagnostic test or procedures. The follow items should be reviewed and considered when available, the specific of each item listed is not conclusive but to be used a guide in writing your case presentation. You may other pertinent findings in your case review that are not listed below, be sure to include the findings & explain the significance in the assessment section.

- **Chief Complaint** (layman's terms of why the patient is seeking medical advice)
- **HPI** (history of present illness)
  - Date of onset
  - Precise location
  - Nature of onset, severity and duration
  - Presence of exacerbations, and remissions
  - Effect of any treatment given
  - Relationship to other symptoms, bodily functions, or activities
  - Degree of interference with daily activities
- **PMH-** (past medical history)
  - Serious illnesses
  - Surgical procedures
  - Injuries that patient has experienced
  - Minor complaints only if they are applicable
- **FMH** (family medical history)
- **SH** (social history) Social & environmental factors that may contribute to the development of disease. (The following may be applicable)
  - Marital status
  - # children
  - Educational background
  - Occupation
  - Physical activity
  - Dietary habits
  - Alcohol/ Tobacco & Recreational drug use
- **MEDICATIONS** (This information can be provided by patient or caregiver. Once the information is confirmed via medical records or pharmacy records it may be transposed into the objective section of the case)
  - Accurate & Current medication records

- Prescription
- OTC
- Herbal/alternative therapy
- Name
- Doses
- Frequency
- Duration of therapy
- **Allergies**
- **ROS** (review of systems)
  - In this section the examiner will ask questions to the patient about each body system. For the purpose of this assignment only the positive & negative findings are recorded. The ROS serves to evaluate each body system & to prevent the omission of pertinent information. Information that was not noted in the HPI should be noted in this section.

## II. Objective Information/FINDINGS

This information is detailed data that is obtained and recorded by the examiner or another health care provider.

Items that are commonly listed here are:

1. Vital Signs:
2. Height:
3. Weight:
4. Cardiac Findings:
5. Chest:
6. HEENT
7. Extremities: (e.g. 2+ bilateral pedal edema)
8. Neurologic Findings:
9. Radiographic Findings
10. Labs:
11. Medications: (drug dose frequency; confirmed by physician/pharmacy/medical records)

## III. ASSESSMENT

Identify the real or potential drug therapy problems using a patient-focused approach and assess the situation(s). You will **prioritize** your patient's problems with the focus area of the case study. It is expected to address all problem areas. You will support your problem identification with subjective & objective data.

Type of Problem	Assessment
Correlation between drug therapy & medical problems	<ol style="list-style-type: none"> <li>1. Are there medications listed without a diagnosis?</li> <li>2. Are there any diagnoses that are not treated?</li> <li>3. Are there any medications that are physically present that cannot be identified? (ambulatory care setting drug review)</li> </ol>
Appropriate Drug Selection	<ol style="list-style-type: none"> <li>1. What is the comparative efficacy of the chosen medications?</li> <li>2. Are there any safety issues with current medications?</li> <li>3. Has the therapy been tailored to this individual? (consider liver/renal/dietary/schedule/ of medications)</li> </ol>

Drug Regimen	<ol style="list-style-type: none"> <li>1. Are doses &amp; dosing frequencies appropriate for this patient</li> <li>2. Is PRN use appropriate for those medications appropriate?</li> <li>3. Is the route and dosage form appropriate?</li> </ol>
Therapeutic Duplication	<ol style="list-style-type: none"> <li>1. Is there any duplication in therapy?</li> <li>2. If so do you need to make a recommendation?</li> </ol>
Drug Allergy or Intolerance	<ol style="list-style-type: none"> <li>1. Is the patient allergic to or intolerant of any medications currently being taken?</li> <li>2. Is the patient allergy to or intolerant of nay chemically-related medications?</li> </ol>
Interactions	<ol style="list-style-type: none"> <li>1. Are there any drug-drug interactions?</li> <li>2. Are any medications contraindicated given patient characteristics &amp; current/past disease states?</li> <li>3. Are there any drug lab test interactions?</li> <li>4. Are there any drug-nutrient interactions?</li> </ol>
Social and Recreational Drug Use	<ol style="list-style-type: none"> <li>1. Can patient's social drug use history be obtained and does it impact current situation?</li> <li>2. Could the use of social drugs be related to patient symptoms/problems?</li> <li>3. Could the sudden decrease or discontinuation of social drugs be related to patient symptoms?</li> </ol>
Failure to Receive Therapy	<ol style="list-style-type: none"> <li>1. Identify why patient has not received or not complied with drug therapy</li> </ol>
Financial Reasons	<ol style="list-style-type: none"> <li>2. Is the medication chosen cost effective?</li> <li>3. Does the cost of drug therapy represent a financial hardship for the patient?</li> </ol>
Patient's Drug Therapy Awareness	<ol style="list-style-type: none"> <li>1. Does the patient know the purpose of the medication?</li> <li>2. Does the patient understand how to take all medications?</li> <li>3. Does the patient have knowledge of side effects of each medication?</li> <li>4. Are there opportunities to provide education?</li> </ol>

#### IV. Plan/RECOMMENDATION/MONITORING

In this section you will develop an optimal individualized pharmacotherapy plan for your case presentation minimally following the guidelines below:

1. The Pharm. D. candidate will select a drug, dosage form, dose, schedule and duration of therapy that is best for your patient.
2. The Pharm. D. candidate will describe the reason for drug therapy selection. **Document evidence based practice guidelines and or drug references.**
3. The Pharm. D. candidate will develop a monitoring protocol that is *well defined* and *measurable* (parameters stated) for patient's therapy, including labs, physical monitoring and adverse effects.
4. The Pharm. D. candidate should consider allergies, economic, psychosocial and ethical factors that are applicable to the patient.
5. The Pharm. D. candidate shall define how this plan is to be executed and who will implement the recommendation/plan.
6. The Pharm. D. candidate will outline the patient/nursing/physician education that will be provided.
7. The Pharm. D. candidate will also provide an alternative plan if the initial therapy fails or cannot be used.

## Advanced Practice Community Pharmacy/Ambulatory Care Objectives

The goal of Advanced Practice Community Pharmacy Experiences is to provide the opportunity for the student to build upon information acquired in his/her didactic education and apply the knowledge and skills in direct patient care activities in community pharmacy/ambulatory care settings. The student will complete all activities in a professional manner under the facilitation of a preceptor. Upon completion of the experience, the student shall be able to:

1. Demonstrate the ability to appropriately assess patients, which shall include, but not be limited to, obtaining or discussing the following information:
  - a. Signs and symptoms of patient complaint or disease
  - b. Patient profile
  - c. Medication history (including previous treatments)
  - d. Available past medical, family, social, and surgical history
  - e. Adherence to medication regimen
  - f. Physical assessment
    - i. Measure basic physical assessment data (i.e. BP, lipid panel, glucose, weight, height, etc.) where available and when appropriate
    - ii. Obtain physical assessment data from patient chart/medical record when chart/record is available
  - g. Healthcare coverage
2. Demonstrate the ability to analyze treatment options (both prescription and non-prescription) for each disease, incorporating:
  - a. Pathophysiology
  - b. Etiology (especially drug-related causes)
  - c. Guidelines of treatment
  - d. Cost
  - e. Benefit of therapy versus risk
3. For each therapeutic option, discuss:
  - a. Pharmacology
  - b. Dosing
  - c. Pharmacokinetics
  - d. Routes of administration
  - e. Contraindications/precautions
  - f. Adverse drug reactions
  - g. Interactions (drugs, dietary supplements, food, laboratory)
  - h. Monitoring parameters for efficacy and toxicity
4. For each prescription, assess appropriate:
  - a. Indication
  - b. Legality
  - c. Completeness
  - d. Dose
  - e. Dosage form
  - f. Duration of therapy
5. Demonstrate the ability to make appropriate recommendations to patients regarding self care.
  - a. Recommend nonprescription medications
  - b. Dietary Supplements
  - c. Home diagnostic devices
6. Communicate information about the disease and drug therapy to the patient, which shall include, but not be limited to:
  - a. Assessment of patient's health beliefs
  - b. Assessment of patient's health literacy
  - c. Effective verbal communication when advising, counseling, and educating patients about their medications
  - d. Prescription – The Student shall demonstrate ability to:
    - i. Establish a dialogue with patients concerning medications to:
      1. Clarify proper medication dosing
      2. Clarify length of therapy
      3. Review potential medication side effects and action(s) by patient when they occur

4. Handle difficult patients and/or difficult situations (e.g., misfiled prescriptions)
5. Counsel patients on sensitive issues
6. Able to apply cultural and social factors to communication and plan development
- e. Non-Prescription – The student shall demonstrate the ability to:
  - i. Respond to patient's questions
  - ii. Assist patients with the selection of an appropriate medication for self use
  - iii. Effective, concise written communication
  - iv. Demonstration and assessment of appropriate use of medications and related devices
7. Participate in promoting healthcare awareness
8. Use the most appropriate resources to respond to drug information questions from patients and health care providers
9. Present organized (formal and informal) case presentations
10. Discuss the policies and procedures for managing the pharmacy's role in providing patient care

## Advanced Practice Hospital Pharmacy/General Medicine Objectives

The goal of Advanced Practice Hospital/General Medicine Pharmacy Experiences is to provide the opportunity for the student to build upon information acquired in his/her didactic education and apply the knowledge and skills in direct patient care activities in Hospital Pharmacy. The student will complete all activities in a professional manner under the facilitation of a preceptor. Upon completion of the experience, the student shall be able to:

1. Demonstrate the ability to appropriately assess patients, which shall include, but not be limited to, obtaining or discussing the following information:
  - a. Signs and symptoms of patient complaint or disease
  - b. Medical Record
  - c. Medication history (including previous treatments)
  - d. Available past medical, family, social, and surgical history
  - e. Medication administration review
  - f. Physical assessment
    - i. Obtain data from patient chart/medical record and/or patient, i.e. including but not limited to:
      1. Blood pressure
      2. Height/weight
      3. Culture and sensitivity
      4. Laboratory tests, e.g. chemistry and drug levels
      5. Other tests
2. Demonstrate the ability to analyze treatment options (both prescription and non-prescription) for each disease, incorporating:
  - a. Pathophysiology
  - b. Etiology (especially drug-related causes)
  - c. Guidelines of treatment
  - d. Cost
  - e. Benefit of therapy versus risk
  - f. Formulary
3. For each therapeutic option, discuss:
  - a. Pharmacology
  - b. Dosing
  - c. Pharmacokinetics
  - d. Routes of Administration
  - e. Contraindications/Precautions
  - f. Adverse drug reactions
  - g. Interactions (drugs, dietary supplements, food, laboratory)
  - h. Monitoring parameters for efficacy and toxicity
4. For each medication order, assess appropriate:
  - a. Indication
  - b. Legality
  - c. Completeness
  - d. Dose/pharmacokinetics
  - e. If injectable:
    - i. IV compatibility
    - ii. Stability
    - iii. Administration Rate
    - iv. IM/SQ
    - v. Reconstitution
  - f. Dosage form
  - g. Duration of therapy
5. Communicate information about the disease and drug therapy to the physician, nurse, other healthcare professionals and the patient, which shall include, but not be limited to:
  - a. Effective, concise written communication
  - b. Demonstration and assessment of appropriate use of medications and related devices
  - c. Effective communication with physicians, nurses and other health care professionals concerning point 1-4 above.

6. Participate in promoting healthcare awareness
7. Use the most appropriate resources to respond to drug information questions from patients and health care providers and patients
8. Present organized (formal and informal) case presentations
9. Discuss the policies and procedures and health care informatics managing the pharmacy's role in providing patient care including, but not limited to:
  - a. Joint Commission on Healthcare Accreditation (JCAHO)
  - b. Adverse Drug Reactions Reporting and prevention
  - c. Medication Error Reporting and Prevention
  - d. Quality Assurance, especially patient safety
  - e. Pharmacy and Therapeutics
  - f. Healthcare Insurance Portability and Accountability Act (HIPAA)
  - g. Sterile and non-sterile compounding

## Ohio Preceptor Standards

- The pharmacist shall possess a current pharmacist license from the boards of pharmacy for all states in which the pharmacist practices, and shall be in good standing before all such boards of pharmacy.
- The pharmacist shall present a professional image to the patient at all times. This image shall include neat, professional attire and the open display of the pharmacist's license.
- The pharmacist shall keep all patient records in strictest confidence and make such records available only to the patient or persons authorized by the patient or by federal or state law.
- The pharmacist shall be a health information provider who engages with patients in an effort to optimize education, prevention and early detection of disease.
- The pharmacist shall maintain current drug information resources to optimally practice as a medication consultant and problem solver to patients and other health care professionals.
- The pharmacist must be able to evaluate the signs and symptoms of common acute self-limiting illness and refer to another health care professional when necessary.
- The pharmacist shall promote only quality products and advise or recommend proper use based upon published reports in the applicable pharmacological or medical literature.
- The pharmacist shall consult with prescriber about the proper medication regimen for each patient.
- The pharmacist shall actively offer and engage in consultation with patients on prescription medications, health-related products and health-related problems.
- The pharmacist shall assure that each prescription is monitored for drug-related problems, including, but not limited to, appropriate indications, contraindications, drug-drug/drug-food interactions, dosing, etc.
- The pharmacist shall monitor each patient's response to the medication regimen to achieve optimal patient outcomes.
- The pharmacist must provide patients with all information concerning services and fees related to professional programs administered by the pharmacist.
- Within the scope of pharmacy practice, the pharmacist shall retain and exercise the ultimate decision making authority for all patient-related decisions.
- The pharmacist shall demonstrate a desire for professional growth and advancement of the profession.
- The pharmacist must maintain adequate patient records for each patient, including profiles, charts and other documentation necessary to demonstrate compliance with the accepted standards of practice.
- The pharmacist shall have a sincere interest in education, especially the teaching and mentoring of pharmacy students.
- The pharmacist shall demonstrate standards of professional practice.
- The pharmacist must cooperate with the Colleges of Pharmacy faculty and positively support the teaching missions of the Colleges.
- The preceptor should be aware that his/her relationship with the student is one of **student-teacher** rather than employer-employee, or coworkers.
- The student-teacher relationship must be built on **mutual respect, trust, communication and understanding**.
- The preceptor is responsible for the **professional and legal supervision** of the student during the experience.
- The preceptor should instill in the student the principles of **professional ethics**.
- The student should be given a thorough **orientation** to the site early in the rotation to facilitate a smooth transition into the site and optimize the use of available resources.
- The preceptor should **explain to the student his/her expectations**, particularly in the areas of dress, conduct, scheduling of hours, and general characteristics of practice.
- The preceptor should afford the student the time and patience needed for an optimal learning experience.
- The preceptor **should not assume the student's level of competence** but should determine it by reviewing the student's profile, discussing previous experience with the student, and observing performance of basic skills.
- The preceptor should expose the student to all aspects of practice consistent with the student's ability, needs, and interests as determined by the preceptor and guided by the course syllabi.
- The preceptor, in consultation with the student, should establish a **mutually-agreeable schedule** of student activities for the rotation. If the schedule includes experiences with other practitioners, the preceptor should clearly communicate with these individuals and make arrangements for introductions, time and place to meet.
- Criticism should be constructive and conveyed to the student privately whenever possible.

- The preceptor should **familiarize all personnel with the experiential program** objectives to avoid misunderstanding and confusion about the student's role during the rotation.
- The preceptor shall complete the evaluation materials required by the College in an accurate and objective manner. **The preceptor shall review each evaluation with the student.**
- Have established relationships with allied health professionals who may provide patients with services beyond the pharmacist's scope of practice (e.g. dieticians)
- Have a working knowledge of the process for billing insurance programs for patient care services (e.g. accurate ICD-9 codes, CMN forms, CPT codes, HCFA 1500 claim forms).
- Actively participate in local, state, and/or national pharmacy organizations (i.e. demonstrated by meeting attendance and participation in organizational committees or the like).