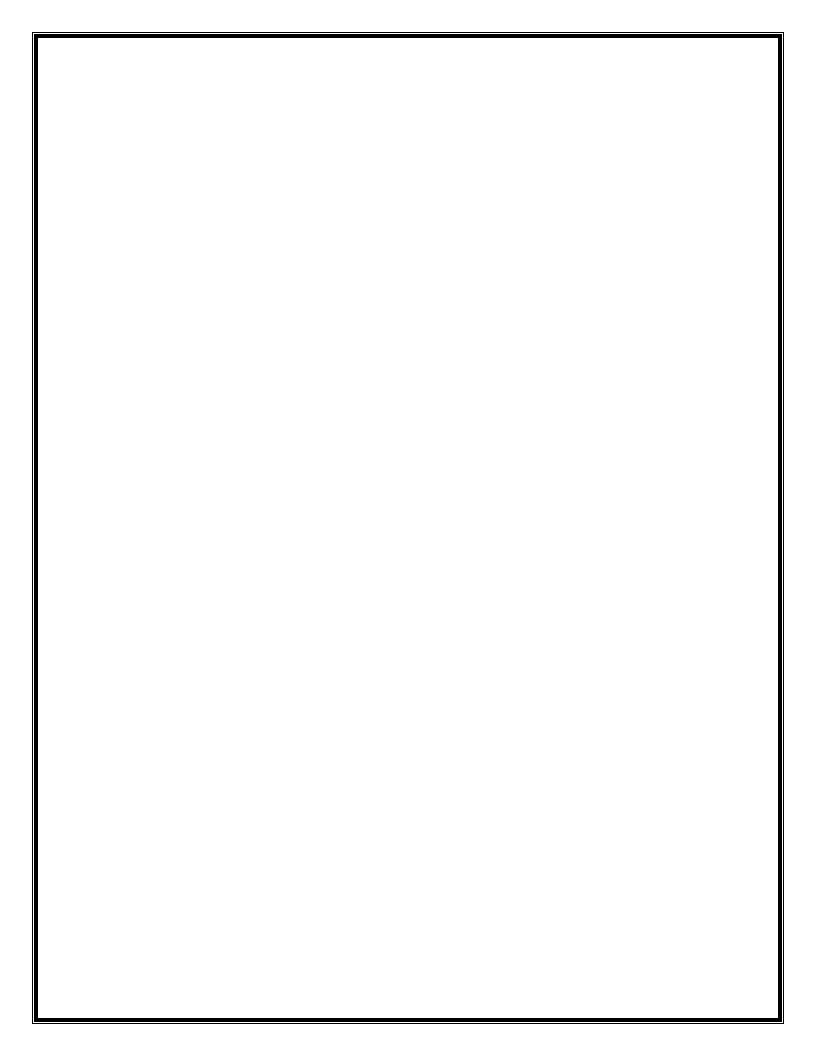


Introductory Pharmacy Practice Experience

Preceptor Manual

2023 - 2024



The University of Findlay College of Pharmacy Mission Statement

"To prepare pharmacists dedicated to improving patients' lives through practice, service, and research."

VISION

The College of Pharmacy supports a vision of the future of the profession that includes the recognition by all persons of the value of pharmacist-provided comprehensive patient care. Pharmacy practice of the future will focus on direct patient care. Our faculty will pursue research and other scholarly activity designed to enhance the education of our students and to help define the therapies of the future and the pharmacist's role in monitoring therapy.

Our graduates will be leaders as we transition from a medication dispensing focus to prominence in the pharmacotherapy of practitioner diagnosed conditions. These new roles require that our graduates are trained with other health professionals to provide patient care services as a team. The strategies and goals in this plan are meant to support the mission statement and vision of the College of Pharmacy.

CONTEXT OF THE MISSION STATEMENT

The mission of the University of Findlay is to equip students for meaningful lives and productive careers. The core values identified in the University's 2005-2015 strategic plan included acknowledgment that our graduates are the primary contribution the university provides to local and national communities, a commitment to excellence in performance when compared to national standards, and a commitment to collaborative initiatives that improve the quality of and accessibility to the services which the University and its graduates provide. The College of Pharmacy's mission and vision are fully aligned with both the institution's mission and these core values. Its goals also mirror the mission of other health and human services programs in the University's Colleges of Education and Health Professions.

The College of Pharmacy endeavors to provide pharmacy education to students within a diverse, supportive, student-centered environment. The curriculum emphasizes the collaborative practice of pharmacy care and related healthcare disciplines, continuous professional development, critical thinking, evidence-based medicine, research, and service to the community.

In support of this mission, our faculty and students pursue scholarly activity to advance the care of patients, and our faculty members provide teaching and learning environments for our students to develop critical thinking skills. Our faculty members also participate in various service activities as part of their professional responsibilities. Through this capacity, they serve as role models for our students.

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The current IPPE Manuals, preceptor application, and other documents can also be found on the University of Findlay website at:

https://www.findlay.edu/pharmacy/Preceptor-Information

Welcome/Thank You Letter

Dear Preceptor,

Welcome to the 2023-2024 school year. We are grateful that you have agreed to precept our students this year and are excited about their experience with you.

If you are a new preceptor this year, please take a moment to review the description and brief overview of our program beginning on page 5 of this manual. This manual is designed to be a resource for you as you precept our students. It includes checklists of experiences we would like each of our students to have while they are on rotations. Checklists are organized by the student's school year (P3, P4, or P5) and by semester (Summer/Fall and Winter/Spring). The following information can also be found in this manual:

- Our program policies, including our absence/tardiness policy, academic dishonesty policy, and harassment/discrimination policy among others, are explicitly outlined beginning on page 7 of this document. You are HIGHLY encouraged to report any violations of the above policies by calling or emailing the experiential office.
- A "**Student Introduction**" should be filled out by the student prior to starting a rotation with you. It is meant to help open the lines of communication between you and the student and to set up proper expectations for the experience. Please take a moment to ask the students about this on the first day and discuss it with them.
- Additionally, you will find a "Student Schedule" document. You are encouraged to use
 this form to help ensure students are accountable to you for their hours during the
 semester.
- A section of this manual is entirely devoted to preceptor resources. It begins on page 45.
 This section contains several helpful preceptor resources including: a list of preceptor
 expectations, a cheat sheet for using RxPreceptor/CORE ELMS (Findlay's software system
 for tracking experiential students), details on obtaining preceptor training, a checklist for
 orienting students, a layout of the current pharmacy curriculum, and more.

As always, students want and appreciate your feedback on their performance, and it is a critical piece of their development as student pharmacists. Please try to provide a **timely** evaluation of the student. Preferably, you would **go over their evaluation with them in person on the last day of the rotation**. As a reminder ., **any students** precept will also fill out an evaluation of you and the site on RxPreceptor/CORE ELMS. The students must complete the evaluation no later than 24 hours after the final day of the rotation. This evaluation will become available for your review on RxPreceptor/CORE ELMS as soon as you complete your evaluation of the student. For details on accessing the student's evaluation of you, see page 47 of this manual.

As always, we appreciate your continued dedication to educating future pharmacists. If you ever have any concerns or questions, please feel free to contact us.

Thank you,

University of Findlay College of Pharmacy Office of Experiential Education

Introduction to the University of Findlay's Introductory Pharmacy Practice Experience (IPPE) Program

PROGRAM DESCRIPTION

The introductory pharmacy practice experiences are intended to introduce students to the practice of pharmacy, the healthcare system, and the role the pharmacist plays within the healthcare system. Students will gain pharmacy experience in community and institutional pharmacy practices (and other areas if possible). Other pharmacist roles may include pharmacist managers, clinical pharmacists, consultant pharmacists, regional managers for chain pharmacies, and call pharmacists in mail-order pharmacists.

PROGRAM GOAL

The IPPE Program aims to provide practical, supervised, and intellectually stimulating professional experiences which will enable students to develop a fundamental understanding of various areas of the healthcare system, how the pharmacist integrates into those settings, and to develop introductory problem-solving skills in the patient care environment during the P3 and P4 years and more advanced problem-solving skills during the P5 year.

PROGRAM OVERVIEW

	Corresponding Course	Practice Experience
P3 Year	PHAR 391 (Fall)	50 hours in a community pharmacy
		5 hours of academic service-learning
	PHAR 392 (Spring)	50 hours in a community pharmacy
P4 Year	PHAR 491 (Fall)	50 hours in an elective pharmacy setting
	PHAR 492 (Spring)	50 hours in an elective pharmacy setting
		5 hours of academic service-learning
P5 Year	PHAR 591 (Fall)	50 hours in an institutional pharmacy setting
		5 hours of academic service-learning
		50 hours in an institutional pharmacy setting
		10 hours of Advanced Cardiac Life Support training

- **Experiential Portfolio** Each semester, the student will assemble and submit to the course instructor a professional portfolio using the MyCred program.
- **Evaluations** The preceptor will evaluate the student throughout the rotation. Both formal and informal feedback are expected. Preceptor evaluations of the student will be used to identify and encourage improvement in areas where the student is not performing well. The student will also evaluate the preceptor and rotation site.
- **Reflections** At the end of each semester, students will reflect on their IPPE rotations and academic service-learning experiences during class. The dates for these reflections will be outlined in the corresponding course syllabus.
- Professional development Throughout the IPPE program, students will participate in career and professional development activities designed to help the students prepare for successful, meaningful, and productive careers. Each semester students will meet with a pharmacy mentor. Additional activities, speakers, and events will be outlined in the corresponding course syllabus.

IPPE PROGRAM OUTCOMES

Upon successful completion of the IPPE program and prior to beginning APPEs, students will have gained practical experiences that address each of the following educational outcomes outlined by the Center for the Advancement of Pharmacy Education (CAPE) and endorsed by the Accreditation Council for Pharmacy Education (ACPE):

Domain 1 – Foundational Knowledge

1.1. Learner (Learner) - Develop, integrate, and apply knowledge from the foundational sciences (i.e., pharmaceutical, social/behavioral/administrative, and clinical sciences) to evaluate the scientific literature, explain drug action, solve therapeutic problems, and advance population health and patient-centered care.

Domain 2 – Essentials for Practice and Care

- 2.1. Patient-centered care (Caregiver) Provide patient-centered care as the medication expert (collect and interpret evidence, prioritize, formulate assessments and recommendations, implement, monitor and adjust plans, and document activities).
- 2.2. Medication use systems management (Manager) Manage patient healthcare needs using human, financial, technological, and physical resources to optimize the safety and efficacy of medication use systems.
- 2.3. Health and wellness (Promoter) Design prevention, intervention, and educational strategies for individuals and communities to manage chronic disease and improve health and wellness.

Domain 3 - Approach to Practice and Care

- 3.1. Problem Solving (Problem Solver) Identify problems; explore and prioritize potential strategies; and design, implement, and evaluate a viable solution.
- 3.2. Educator (Educator) Educate all audiences by determining the most effective and enduring ways to impart information and assess understanding.
- 3.5. Cultural sensitivity (Includer) Recognize social determinants of health to diminish disparities and inequities in access to quality care.
- 3.6. Communication (Communicator) Effectively communicate verbally and nonverbally when interacting with an individual, group, or organization.

Domain 4 – Personal and Professional Development

4.4. Professionalism (Professional) - Exhibit behaviors and values that are consistent with the trust given to the profession by patients, other healthcare providers, and society.

Experiential Program Policies

PROFESSIONAL CONDUCT

While completing any pharmacy experience, students will adhere to the highest standards of professional conduct. Students are expected to uphold the strictest patient confidentiality standards and display a positive, self-motivated attitude. Students are expected to arrive on time and participate fully in all scheduled introductory practice experiences. In addition, students will be expected to dress in appropriate professional attire as outlined below. Students failing to comply with these standards should be immediately reported through RxPreceptor/CORE ELMS's "Incident Report" or via an email to the Assistant Director of Experiential Education. Depending on the situation, students may be removed from a site based on failure to comply with professional conduct policies. Also, a non-passing grade may be assigned to the student at the preceptor's discretion and Director or Assistant Director of Experiential Education.

Absence/Tardiness Policy

- Students are **NOT** excused from classes to complete experiential hours.
- After a schedule for completion of IPPE hours has been established, the student is committed to that schedule and any deviation or request for alteration by the student will be considered an unexcused absence.
- Students who are dealing with heightened physical or mental health issues that impact
 their ability to fully participate in the learning experience must have medical
 documentation to continue in the rotation for their well-being and the patients they
 serve
- **Emergency absence** If the student must miss their rotation because of illness or an **emergency** situation, the student must complete the steps outlined below **AT A MINIMUM.** If a preceptor requires additional steps, those must also be completed.
 - Attempt to contact the preceptor via office <u>phone</u> and <u>email</u> **PRIOR TO** the time you are scheduled to report for your IPPE rotation. If the preceptor cannot be reached by phone, the student must leave a message with the details of the situation and a phone number where they can be reached.
 - Attempt to contact the Assistant Director of Experiential Education via <u>phone</u> and <u>email</u> **PRIOR TO** the time you are scheduled to report for your IPPE rotation. If the Assistant Director cannot be reached by phone, the student must leave a message with the details of the situation and a phone number where they can be reached.
 - The student should be prepared to provide documentation (doctor's notes, accident report, etc.) to the preceptor and a copy of the documentation to the Assistant Director of Experiential Education.
 - Students whose absences result from inpatient medical care must provide a medical release to the Assistant Director of Experiential Education before returning to the assigned rotation.
 - The student must make up the missed hours at a new date/time agreed upon by the preceptor.
- Unexcused absence If the student does not adhere to the pre-specified rotation schedule OR the student did not follow the proper procedure or provide appropriate documentation for an "emergency absence," this will be considered an unexcused absence.
 - o The preceptor should file an incident report in RxPreceptor/CORE ELMS and/or contact the Assistant Director of Experiential Education if such absences occur.
 - Unexcused absences are NOT tolerated and jeopardize the student's successful completion of the program. Unexcused absences will result in the assignment of a failing grade or grade reduction in the corresponding experiential course.

- **Tardiness** If the student arrives more than 5 minutes past the expected and predetermined start time for an experience, the student is considered tardy.
 - The preceptor should file an incident report in RxPreceptor/CORE ELMS and/or contact the Assistant Director of Experiential Education if tardiness occurs.
 - o Three reports of tardiness are equivalent to one unexcused absence and may result in the assignment of a failing grade or grade reduction in the corresponding experiential course.

Professional Dress Code

- The following is a minimum expected dress code for the University of Findlay College of Pharmacy students. When an experiential site dress code is more inclusive, the site dress code must be followed.
 - Students must wear their white coat, which should be clean in appearance and ironed or pressed, along with their College of Pharmacy issued name badge for all introductory experience activities unless otherwise directed by the preceptor.
 - o 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.
 - o Piercings No visible body piercings, except ear piercings, will be permitted.
 - o Tattoos Limit visible body tattoos. All tattoos potentially visible by patients or other caregivers may be requested to be covered at the site and/or preceptor's discretion.
 - o Shoes No open toed shoes will be permitted in patient care areas.
 - Clothing Clothing should be professional and appropriate for the practice setting. Skirts and dresses must be at knee length. Skirts or dresses must fall below the hemline of the white lab coat.
 - Fragrances No over-powering fragrances.
- If a preceptor, employee, or patient at a site where the student is working feels that any area of this professional dress code has been violated, the preceptor may choose to address the issue directly with the student, or they may file an incident report on RxPreceptor/CORE ELMS and the issue will be addressed by the Office of Experiential Education.

Social Media & Public Forum Policy

• Students are expected to exercise personal and professional responsibility <u>whenever</u> <u>using social media</u>, which includes not violating the trust of those with whom they are engaging. This includes patients, patient families, other students, sites, preceptors, and the University. Any posting in any social media or public forum regarding encounters during experiential education, even if posted in a non-identifiable way, is prohibited.

No Smoking Policy

 Pharmacy students shall not smoke during rotation hours, breaks, or on the premises of the facility/pharmacy. Student clothing should be free of smoke odor, as this can be offensive to patients and other care givers. A student identified breaking this policy is at risk of being removed from the site and failing the rotation.

Use of Handheld and Mobile Devices

- Students are responsible for determining the experiential site's policy on mobile phones and handheld devices for the purposes of drug information prior to or during the first day of a new experience.
- The personal use of mobile phones (personal calls, texting, emailing, or other personal business not related to IPPEs) is prohibited during any IPPE. Inappropriate use of mobile phones is considered unprofessional and may result in the assignment of a failing grade or grade reduction in the corresponding experiential course.

Patient Confidentiality

- The student will abide by HIPAA regulations and uphold the strictest patient confidentiality standards.
- The student is expected not to discuss patient information they have learned from their rotation site outside of their learning environment. Patient names should not be used in any oral or written presentations or assignments.
- Records containing protected health information are NOT to be removed from the facility. All records should be placed in the appropriate area as designated by the preceptor. Students may not remove records from designated areas without permission.
- Any violation of the above policy will result in immediate dismissal from the practice site and a failing grade will be assigned.

ACADEMIC DISHONESTY

- To maintain academic integrity, the College of Pharmacy has outlined a code of conduct (an Honor Code), which describes acceptable behavior for students in all its academic settings. This code has been developed using University and College standards. Full details of the University of Findlay College of Pharmacy's Honor code can be found in the Pharmacy Student Handbook or by following this link:
- https://www.findlay.edu/intranet/colleges/pharmacy/Documents/University%20of%20Findlay%20College%20 of%20Pharmacy%20Student%20Handbook%20-%2012-13-18.pdf
- Per the College of Pharmacy's definition, academic dishonesty includes:
 - Cheating: Using or attempting to use unauthorized materials, information, notes, study aids or other devices, or obtaining unauthorized assistance from any source for work submitted as one's own individual efforts in any class, clinic, assignment, or examination.
 - Plagiarism: Representing orally or in writing, in any academic assignment or exercise, the words, ideas, or works of another as one's own without customary and proper acknowledgment of the source.
 - o **Facilitating Academic Dishonesty**: Helping or attempting to help another person commit an act of academic dishonesty.
 - Abuse of Academic Materials: Destroying or making inaccessible academic resource materials.
 - Stealing: Taking, attempting to take, or withholding the property of another thereby permanently or temporarily depriving the owner of its use or possession.
 - Lying: Making any oral or written statement that the individual knows to be untrue.
- Academic dishonesty in any form will not be tolerated. Incidences of confirmed or suspected academic dishonesty should be reported to the Director and/or Assistant Director of Experiential Education immediately. Acts of academic dishonesty will result in immediate dismissal from the practice site and a failing grade. Students will then be referred to the College's Student Affairs Committee to continue addressing academic misconduct.

HARASSMENT AND DISCRIMINATION

The University of Findlay prohibits harassment and discrimination in any of its programs and activities, including those conducted in partnership with another institution. Harassment or discrimination based on sex, age, race, ethnicity, national origin, color, religion, gender identity, handicap/ability, sexual orientation, genetic information, veteran, or military status and physical or mental disabilities is prohibited.

Sexual harassment is defined as conduct on the basis of sex that satisfies one or more of the following: (i) an employee of the University conditioning the provision of an aid, benefit, or service of the University on an individual's participation in unwelcome sexual conduct; (ii) unwelcome conduct determined by a reasonable person to be so severe, pervasive, and

objectively offensive that it effectively denies a person equal access to the recipient's education program or activity, or (iii) sexual assault, dating violence, domestic violence, or stalking. Harassment on the basis of other protected traits may include any conduct which the submission to or rejection of: (i) is made either explicitly or implicitly a term or condition of the person's grade or evaluation in the program, (ii) is used as the basis for employment or educational decisions affecting an individual in the program, or (iii) creates an intimidating, hostile, or offensive working or educational environment within the program.

Specific definitions and examples are provided within the applicable policies below.

- Mandatory Reporting of Sexual Harassment/Discrimination: Allegations of sexual harassment or
 discrimination by or against a University of Findlay student MUST be reported to the University of
 Findlay Title IX Coordinator immediately. Allegations of harassment or discrimination against a
 University of Findlay student by someone at the preceptor's institution should also be reported to
 the preceptor institution in accordance with its institutional policies. The University of Findlay Title IX
 Policy: https://www.findlay.edu/offices/student-affairs/title-ix/title-ix-policy
- Reporting of All Forms of Harassment/Discrimination: Any allegations of harassment or
 discrimination that involve a University of Findlay student on experiential rotation may be reported
 to the University of Findlay Director of Equity and Title IX or to the Harassment Hotline. The University
 of Findlay Non-Discrimination and Anti-Harassment Policy:
 http://catalog.findlay.edu/en/Archived-Current/Shared-Content/Student-Rights-and-Responsibilities-Statement/X-Non-Discrimination-Anti-Harassment-and-Hostile-Campus-Environment-Policy

Individuals involved in making a report as indicated above are protected from retaliation. More information about those protections can be found in the policies listed above. Preceptors must assist the University of Findlay in providing adequate supportive measures to ensure University of Findlay students have continuing access to the program.

Contact Information: Charles Ludwig
Director for Equity & Title IX, Civil Rights/Title IX Coordinator
(419) 434-4038 charles.ludwig@findlay.edu

Office Location: Old Main 45, University of Findlay, 1000 N. Main Street, Findlay, OH 45840 University of Findlay Harassment Hotline: (419) 434-6777

EMPLOYMENT AND COMPENSATION

- IPPEs will not be scheduled around employment and students should NEVER leave a rotation early or miss a requirement due to outside employment.
- Students may NOT be compensated for experiences submitted for academic credit.
- Students may not complete IPPE hours at a site where they have worked for compensation or where they currently work.
- Students MAY NOT complete experiential hours prior to being linked with the preceptor in CORE/ELMS.

PRECEPTOR POLICIES

- An affiliation agreement and preceptor application form must be in place with each site
 and pharmacist, respectively, prior to the student starting an experience.
- All experiences must be completed with an approved College of Pharmacy preceptor.
- Students may **NOT** be precepted by a spouse, parent, grandparent, or sibling.
- Students may choose no more than one preceptor per semester, unless prior approval is granted by the Director or Assistant Director of Experiential Education.
- Students may NOT complete more than 150 hours (3 semesters) of introductory experience at any one site or with any one preceptor.

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Introduction to Precepting University of Findlay IPPE Students

Dear Preceptor,

University of Findlay students are required to meet a set of learning objectives during each IPPE rotation. These objectives are designed to give them a well-rounded look at both community and institutional pharmacy. A checklist of activities was created to help ensure that the students meet each learning objective for the rotation. If there are items on the checklist that you will not be able to achieve at your site, feel free to develop another, more creative way, to achieve the learning objective associated with that item, or you can have the student email me for an alternative assignment (burkart@findlay.edu).

The two pages following this document are a sample of the **Student Introduction** and **Student Schedule** documents. Your student should fill out the Student Introduction prior to arrival at your site, and they should present it to you on the first day. This is designed to help improve communication between you and your student. The student schedule is a tool to help you establish a concrete schedule with your students so you can hold them accountable for their hours. You do not have to use this document, but if you think it would be helpful, I encourage you to incorporate it into your rotation.

Following those documents, you will find the learning objectives and checklists for Findlay IPPE students broken down by year (P3, P4, or P5) and by course/semester (Fall vs. Spring). These checklists are a guide for a minimum experience. We highly encourage you to go beyond the checklist if there are additional experiences you would like our students to have.

If you have any questions or suggestions for how we can improve these checklists for future students, please do not hesitate to contact me (burkart@findlay.edu). We want to make the learning objectives and the checklists as realistic and well-rounded as possible.

Thank you,

Tim Burkart, PharmD, BCPS, BCGP, CDP Assistant Director of Experiential Education

Student Introduction – Summer/Fall

Directions: This form is designed to open the lines of communication between the preceptor and the student in order to facilitate the best possible learning experience. The student must prepare this form prior to the start of their IPPE rotation and present it, along with the Student Scheduling document, and the appropriate Competencies Checklist to the preceptor on the first day of the rotation (this form does NOT need to be turned in to the Experiential Office).

Student Name:	
If this is a new IPPE site and/or a new preceptor you have not worked describe your pharmacy work history (if you have not worked in a phoindicate that).	
What are the current courses you are taking, and what topics are you brief summary)? If it is summer, what courses did you complete last ser	
My personal, specific, measurable goals for this introductory pharmacare: 1.	y practice experience
2.	

Student Schedule – Summer/Fall

Directions: On (or before) the first day of the rotation, please establish a schedule for completion of the remaining IPPE hours. This schedule does not need to be turned in but is meant to serve as an official commitment on the part of the student. It may be useful for the preceptor and student to have a copy of this document. *Remember, IPPE hours **cannot** be counted if performed prior to linking with a preceptor in CORE/ELMS.

Date	Time	Number of Hours
Ex: 10/20	5:00-8:00 pm	3 hours
	Total # of Hours:	

		10101 # 01 110013.		
I agree to this schedu considered an unexc		•	viation from this sche	dule will be
Student Signature			Date	
If there is an emergency, I will need a way to contact my preceptor. My preceptor prefers to be contacted at this phone number and at this email address				

Student Introduction - Winter/Spring

Directions: This form is designed to open the lines of communication between the preceptor and the student in order to facilitate the best possible learning experience. The student must prepare this form prior to the start of their IPPE rotation and present it, along with the Student Scheduling document, and the appropriate Competencies Checklist to the preceptor on the first day of the rotation (this form does NOT need to be turned in to the Experiential Office).

Student Name: Student Email: Student Phone Number:	
If this is a new IPPE site and/or a new preceptor you have not worked we describe your pharmacy work history (if you have not worked in a phar indicate that).	
What are the current courses you are taking and what topics are you obrief summary)? If it is summer, what courses did you complete last sem	
My personal, specific, measurable goals for this introductory pharmacy are: 1.	practice experience
2.	

Student Schedule - Winter/Spring

Directions: On (or before) the first day of the rotation, please establish a schedule for completion of the remaining IPPE hours. This schedule does not need to be turned in but is meant to serve as an official commitment on the part of the student. It may be useful for both the preceptor and the student to have a copy of this document. *Remember, IPPE hours **cannot** be counted if performed prior to linking with a preceptor in CORE/ELMS.

Date	Time	Number of Hours
Ex: 10/20	5:00-8:00 pm	3 hours
	Total # of Hours:	

	Total # of Hours:		
I agree to this schedu considered an unexc	· · · · · · · · · · · · · · · · · · ·	viation from this sched	dule will be
Student Signature		Date	
If there is an emerge contacted at this pho			
	16		

P3 Students **Introductory Practice Experience** PHAR 391 and PHAR 392 17

P3 Learning Objectives (PHAR 391 and PHAR 392)

Upon completion of the <u>P3</u> experiences with pharmacist preceptors in the <u>community</u> **pharmacy setting** and completion of academic service-learning the student should be able to:

- 1. Demonstrate the basic technical functions of prescription processing (Outcome 2.2)
- 2. Identify policies used to improve patient safety (Outcome 2.2)
- 3. Demonstrate the ability to collect complete, accurate patient information for the purpose of prescription processing (Outcome 2.1)
- 4. Describe the responsibilities of a pharmacist when handling controlled substances in an outpatient setting (Outcome 2.2)
- 5. Discuss the role of the pharmacist in the healthcare system (Outcome 4.4)
- 6. Discuss the activities and responsibilities of all pharmacy team members in the pharmacy (Outcome 4.4)
- 7. Demonstrate ethical, professional behavior at all times and describe their importance (Outcome 4.4)
- 8. Describe how culture, language, and health literacy may impact the delivery of healthcare services (Outcome 3.5)
- 9. Provide effective medication information to patients regarding prescription and non-prescription therapies (Outcome 2.1, 3.6)
- 10. Demonstrate fundamental drug information skills (Outcome 1.1)

The following objectives are met in the classroom, academic service-learning, and/or for the students' portfolios. The objectives may be observed in the experiential setting but are not always part of the preceptor's assessment/evaluation of the student.

- 1. Describe how healthcare informatics is utilized by the site to improve efficiency (Outcome 2.2)
- 2. Identify brand names, generic names, and the therapeutic class for common medications (Top 200) (Outcome 1.1)
- 3. Demonstrate effective communication skills (verbal, non-verbal, and written) at an appropriate level for patients, caregivers, and healthcare providers (Outcome 3.6)
- 4. Discuss the role of third parties in the provision of drug therapy in the community setting (Outcome 2.2)
- 5. Prepare a project or presentation and/or participate in activity related to the promotion of health and wellness for a local non-profit organization, nursing home, or school (Outcomes 2.3, 3.2, and 3.6)
- 6. Interact with a unique or diverse patient population (Outcome 3.5)
- 7. Discuss how a patient's age, culture, nationality, religion, language, ethnicity, or social group may impact their health beliefs or access to care (Outcome 3.5)
- 8. Discuss how serving persons with diverse backgrounds may impact one's cultural competence (awareness, attitude, knowledge, and skills) (Outcome 3.5)

The University of Findlay College of Pharmacy P3 Year – Summer/Fall (PHAR 391) Competency Checklist

On the following pages, you will find a checklist of tasks that will help you to evaluate the student's ability to achieve the learning objectives on the previous page. These tasks are aligned with the ACPE outcomes from page 6 and are also linked to entrustable professional activities (EPAs). Use this checklist when completing a final evaluation of the student to assess not only their knowledge but your level of trust in them performing the activities. The definition of the trust levels is included in the four-point scale below and on the Experiential Competency Requirements & Student Evaluation found on CORE/ELMS.

- o <u>The student is responsible for attempting to complete ALL items listed.</u>
- o If you feel that the student may not be able to complete some of the items on the checklist, please contact the Assistant Director of Experiential Education immediately to discuss alternative options.
- o Items that have an asterisk (*) next to them indicate assignments that complement items on the checklist. The student must complete these assignments at home and upload them to their professional portfolio. You may or may not choose to review these materials.

Upon conclusion of this student's rotation, you will be asked to evaluate and document achievement of the learning objectives in **RxPreceptor/CORE ELMS**. Therefore, either you or your designee must personally observe the student completing the tasks in order to adequately assess the student's competence.

You will be asked to evaluate the student using the following four-point scale:

1 = Unsatisfactory Performance (Low Trust: The student required complete guidance or was unprepared; the preceptor had to complete most of the task.)

Student does not meet requirements. Student is unable to complete the tasks despite guidance and prompting.

2 = Needs Improvement (Minimal/Moderate Trust: The student was able to perform some tasks but required repeated directions.)

Student meets some minimum requirements. Student frequently requires guidance and/or prompting to complete tasks.

3 = Progressing Satisfactorily (High Trust: The student demonstrated some independence, only requiring intermittent prompting.)

Student consistently meets requirements. Student completes basic and some complex tasks independently with minimal or no guidance and/or prompting.

4 = Exceeds Expectations (Complete Trust: The student functioned fairly independently and only needed assistance with nuances or complex situations.)

Student exceeds requirements. Student consistently and independently completes all basic and complex tasks going beyond what is required.

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P3 YEAR - SUMMER/FALL (PHAR 391) COMPETENCY CHECKLIST

Preceptors will use this list when evaluating students. Students will use this list as part of their goals and assignments (as marked with an asterisk.)

1.	Demor	nstrate the basic technical functions of prescription	n processing (Outcome 2.2; PHAR 350)		
		Student accurately enters a new prescription or o	Irug order ten (10) consecutive times		
		Student ensures that the correct medication is pl times	aced into a prescription vial ten (10) consecutive		
			prescription refill in accordance to the site procedure		
		Student describes all of the legal requirements of			
			ving hardcopy and/or electronic patient drug records		
2.	Identif	y policies used to improve patient safety (Outcom	ne 2.2; PHAR 350)		
		Student describes policies at the site that are me process	ant to identify and resolve errors in the dispensing		
		Student discusses non-safety cap dispensing police	cy at the site		
3.		nstrate the ability to collect complete, accurate pasing (Outcome 2.1; PHAR 251)	atient information for the purpose of prescription		
		fill a new prescription including: • Demographic information	der to obtain the necessary information to properly		
		Medication history Allergies			
		AllergiesInsurance information			
4.		be the responsibilities of a pharmacist when hand me 2.4; PHAR 251, 350)	ling controlled substances in an outpatient setting		
		Student describes the differences between CI, CII	, CIII, CIV and CV classifications		
		Student describes the rationale for a drug gaining	g a controlled substance designation		
5.	Discus	s the role of the pharmacist in the healthcare syst	em (Outcome 4.4; PHAR 150, 251, 350)		
		Student describes the role of the pharmacist in a	•		
	□ Student observes pharmacist making an intervention				
		Student describes at least 10 different career opt	ions for a pharmacist		
	☐ Student identifies at least 10 different skills that a pharmacist utilizes				
	□ Student determines what preparation is necessary to function at practice site				
6.		s the activities and responsibilities of all pharmac 251, 350)	y team members in the pharmacy (Outcome 4.4;		
		Student describes the training and background or	f pharmacy technicians		
		Student identifies the responsibilities of each pha	rmacy team member (pharmacist, interns,		
		technicians, clerks, and others) in regard to the fo	_		
		- Order Entry	- Counseling patients		
		- Final verification of prescriptions	- Billing/payment issues		
		 Transferring prescriptions and taking copies 	 Scheduling of pharmacists/technicians 		
		 Handling of controlled substances 	- Customer/patient relations		
		- Inventory management	- Error management		

- Offer to counsel patients

		*ASSIGNMENT: Use a grid or table to describe each team member's responsibilities
7.		strate ethical, professional behavior at all times and describe their importance (Outcome 4.4; PHAR
	251, 35	
		Student identifies policies at the site that are meant to ensure compliance with HIPAA
		Student and preceptor discuss professionalism, and the student defines what it means to be "professional"
		Student recognizes the importance of professionalism when observing a pharmacist interacting with physicians, patients, and colleagues
		Student always demonstrates professionalism when communicating with physicians, patients and colleagues
8.		pe how culture, language, and health literacy may impact the delivery of healthcare services (Outcome AR 251)
		Student identifies one minority, immigrant, refugee or underserved population at the site
		*ASSIGNMENT: Student identifies any potential health disparities for this population and writes a one-page paper discussing how one's culture may impact health disparity citing specific examples
9.		e effective medication information to patients regarding prescription and non-prescription therapies me 2.1, 3.6; PHAR 350)
		Student describes the role of the pharmacist in counseling patients on medications and observes the pharmacist counsel a patient on at least one (1) prescription medication and one (1) over-the-counter medication
		Student performs at least three (3) practice counseling session with pharmacy personnel and the preceptor offers constructive feedback
10	Demor	nstrate fundamental drug information skills (Outcome 1.1; PHAR 251, 350)
10.		*ASSIGNMENT: Student utilizes one or more of the resources available to the practice site mechanism, severity, likelihood and consequences of two (2) drug interactions encountered during the experience (a total of 4 drugs, 2 pairs) *ASSIGNMENT: Student types a list of five (5) non-controlled prescription medications and five (5)
		controlled substances (generic and trade name) that were seen during experience. For each medication list the therapeutic class and most common side effects

The University of Findlay College of Pharmacy P3 Year – Winter/Spring (PHAR 392) Competency Checklist

On the following pages, you will find a checklist of tasks that will help you to evaluate the student's ability to achieve the learning objectives on the previous page. These tasks are aligned with the CAPE outcomes from page 6 and are also linked to entrustable professional activities (EPAs). Use this checklist when completing a final evaluation of the student to assess not only their knowledge but your level of trust in them performing the activities. The definition of the trust levels is included in the four-point scale below and on the Experiential Competency Requirements & Student Evaluation found on CORE/ELMS.

- o <u>The student is responsible for attempting to complete ALL items listed.</u>
- o If you feel that the student may not be able to complete some of the items on the checklist, please contact the Assistant Director of Experiential Education immediately to discuss alternative options.
- o Items that have an asterisk (*) next to them indicate assignments that complement items on the checklist. The student must complete these assignments at home and upload them to their professional portfolio. You may or may not choose to review these materials.

Upon conclusion of this student's rotation, you will be asked to evaluate and document achievement of the learning objectives in **RxPreceptor/CORE ELMS**. Therefore, either you or your designee must personally observe the student completing the tasks in order to adequately assess the student's competence.

You will be asked to evaluate the student using the following four-point scale:

1 = Unsatisfactory Performance (Low Trust: The student required complete guidance or was unprepared; the preceptor had to complete most of the task.)

Student does not meet requirements. Student is unable to complete the tasks despite guidance and prompting.

2 = Needs Improvement (Minimal/Moderate Trust: The student was able to perform some tasks but required repeated directions.)

Student meets some minimum requirements. Student frequently requires guidance and/or prompting to complete tasks.

3 = Progressing Satisfactorily (High Trust: The student demonstrated some independence, only requiring intermittent prompting.)

Student consistently meets requirements. Student completes basic and some complex tasks independently with minimal or no guidance and/or prompting.

4 = Exceeds Expectations (Complete Trust: The student functioned fairly independently and only needed assistance with nuances or complex situations.)

Student exceeds requirements. Student consistently and independently completes all basic and complex tasks going beyond what is required.

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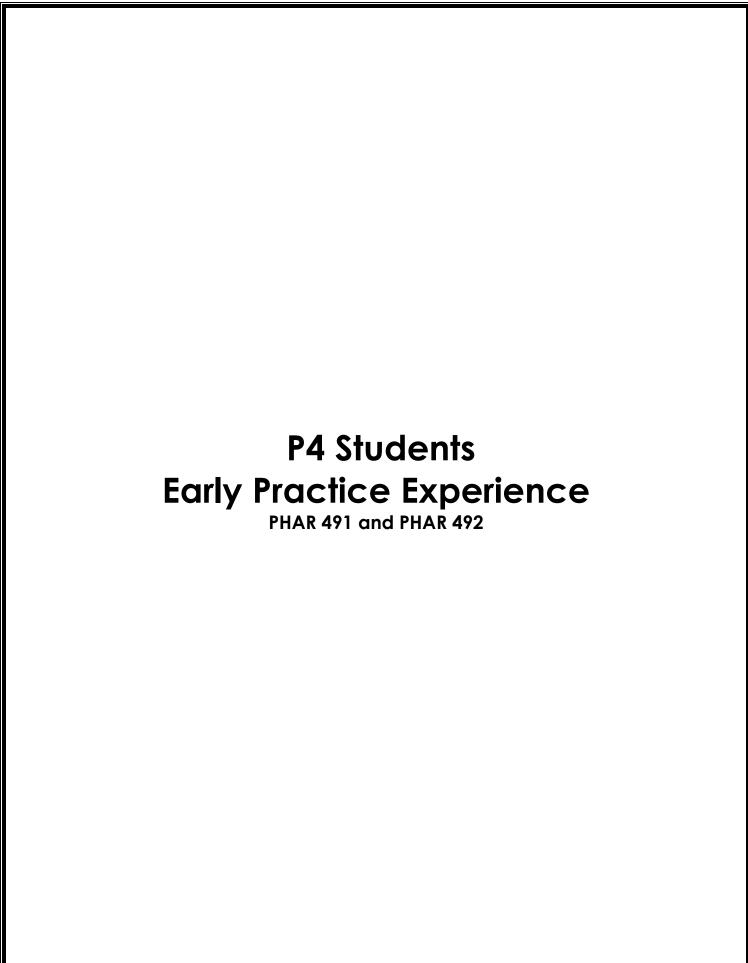
Preceptors will use this list when evaluating students. Students will use this list as part of their goals and assignments (as marked with an asterisk.)

1.	Demonstrate the basic technical functions of prescription processing (Outcome 2.2; PHAR 251, 350, 351)	
	□ Student receives and accurately transcribes five (5) consecutive prescriptions via voicemail	
	□ Student gives three (3) copies of a prescription to another pharmacy	
	☐ Student receives and accurately transcribes three (3) consecutive prescriptions via <u>live phone call</u>	
	□ Student accurately labels six (6) consecutive medications with appropriate auxiliary labels	
2.	Identify policies used to improve patient safety (Outcome 2.2; PHAR 350)	
	☐ Student identifies (5) pairs of look-alike/sound-alike medications dispensed at the site	
	□ Student describes specific strategies at the site to prevent errors related to look-alike/sound-alike dr	ugs
3.	Describe how healthcare informatics is utilized by the site to improve efficiency (Outcome 2.2)	
	□ Student identifies the methods by which pharmacy staff are trained in the use of one or more of the following at the site:	
	i. Dispensing robot or other automated dispensing process	
	ii. Automated compounding device	
	iii. Medication cabinet (e.g. Accudose, Pyxis)	
	iv. Inventory management systems	
	v. Electronic prescribing systems	
	□ Student performs a quality assurance check on one of the items listed above or identifies how to generate and utilize reports	
4.	Identify brand names, generic names and the therapeutic class for common medications (Top 200) (Outcor 1.1; PHAR 251, 350, 351)	ne
	☐ Student correctly identifies twenty-five (25) non-controlled substances by trade and generic name	
	□ Student correctly identifies ten (10) controlled substances by trade and generic names	
	□ Student correctly identifies ten (10) over-the-counter medications by trade and generic name and	
	student and preceptor discuss the medications' indications, exclusions for use, and major counseling points	
	*ASSIGNMENT Student types a list of ten (10) over-the-counter medications (generic and common	
	trade names) that were seen during the experience. For each OTC medication list the most common indications, mechanism of action, and major counseling points	l
5.	Describe the responsibilities of a pharmacist when handling controlled substances in an outpatient setting	
э.	(Outcome 2.2; PHAR 251, 350)	
	☐ Student correctly completes a DEA form for ordering controlled substances	
	☐ Student explains the storage requirements for controlled substances	
	 Student explains the process by which a patient may purchase a Schedule V Exempt Narcotic (e.g. codeine cough elixir) 	
6.	Demonstrate ethical, professional behavior at all times and describe their importance (Outcome 4.4; PHAR 251, 350)	
	□ Student describes what it means to act "ethically"	
	 Student describes what it means to act ethically Student and preceptor discuss an ethical situation that the preceptor has encountered and the students. 	n+
	reflects upon what they would do in the same situation	:111
	□ Student describes what it means to act "professionally"	
	 Student describes what it means to act professionally Student demonstrates professionalism when communicating with physicians, patients and colleague 	ıς
	— Stadent demonstrates professionalism when communicating with physicians, patients and coneague	J

		Student communicates at least three (3) times with another health professional via phone to resolve a medication related issue (e.g. nurse, nurse practitioner, physician assistant, physician, pharmacist). *ASSIGNMENT: Student documents each of the three (3) interactions and describes what the issue was, who they spoke to, how the conversation went, and how the issue was resolved
		Student demonstrates the ability to communicate with patients, caregivers and healthcare providers at
		an appropriate level.
		*ASSIGNMENT: Student chooses one medication encountered during the experience and types at least
		one (1) paragraph in which they dictate exactly what they would say to a low-literacy patient about
		their new prescription. The following information should be included: a. Brand and generic name of the medication
		b. Mechanism of action (in patient-friendly language)
		c. Common side effects and appropriate warnings/precautions
		d. Proper administration (if appropriate) and storage
		e. Any other information that might be appropriate
8.	Provide	e effective medication information to patients regarding prescription and non-prescription therapies
	-	me 2.1, 3.6; PHAR 251, 350)
		Student performs at least one (1) practice counseling session with pharmacy personnel and the preceptor offers constructive feedback
		Student utilizes the PAR (prepare, assess, respond) technique to counsel six (6) patients on either
		prescription and or non-prescription medications
		Student learns about at least one (1) OTC diagnostic device and counsels one (1) patient on it (e.g.
		blood glucose monitor, blood pressure monitor, etc.) *ASSIGNMENT: Student answers the following question: A parent comes into the pharmacy looking for
		something for their 4-year-old son who fell outside and hurt his leg. They state the child weighs 45lbs. Recommend an appropriate dose of ibuprofen suspension in mg and mL including directions of use (route, frequency, etc.)
9.	Demon	strate fundamental drug information skills (Outcome 1.1; PHAR 251, 350, 351)
		Student recognizes a time when they do not know the answer to a drug information question
		On at least two (2) occasions, the student identifies which of the available drug information resources
		they can use to find the answer, researches the answer, formulates a response and provides the
		response to the healthcare provider or patient in a timely fashion
10.	Discuss	the role of third parties in the provision of drug therapy in the community setting (Outcome 2.2)
		Student processes six (6) prescriptions requiring a prior authorization or another restriction related to
	_	prescription medication coverage
		Student assists or counsels a patient or caregiver in problems related to prescription medication coverage, health insurance, government health care programs or manufacturer patient assistance programs
		*ASSIGNMENT: Student types a <u>one-page paper</u> on the benefits and challenges of health insurance

7. Demonstrate effective communication skills (verbal, non-verbal, and written) at an appropriate level for

patients, caregivers, and healthcare providers (Outcome 3.6; PHAR 251, 350)



P4 Learning Objectives (PHAR 491 and PHAR 492)

Upon completion of the $\underline{P4}$ experiences with pharmacist preceptors in $\underline{\mathbf{an elective setting}}$, the student should be able to:

- 1. Identify policies and mechanisms utilized by the site to improve safety (Outcome 2.2)
- 2. Demonstrate essential knowledge of commonly used medications (Outcome 1.1)
- 3. Demonstrate appropriate documentation for non-controlled and controlled substance ordering, prescription processing, and inventory management (Outcome 2.2)
- 4. Describe the site's management and organizational structure (Outcome 4.4)
- 5. Make and defend rational, ethical decisions within the context of personal and professional values (Outcome 4.4)
- 6. Demonstrate caring, ethical, and professional behavior when interacting with peers, professionals, patients, and caregivers (Outcome 1.1)
- 7. Demonstrate the ability to utilize available resources to augment drug knowledge, answer drug-related questions, and complete drug information assignments (Outcome 1.1)
- 8. Describe the site's management and organizational structure (Outcome 1.1)

As the site's scope of practice allows, students should also demonstrate competence in the following learning objectives:

- 1. Demonstrate full technical functions of prescription processing
- 2. Accurately and safely compound prescription medication
- 3. Obtain accurate and comprehensive medication histories based on patient interviews and use the information to identify drug-related problems
- 4. Provide effective medication information to patients regarding prescription and nonprescription therapies
- 5. Accurately complete basic physical assessments and counsel patients on the results
- 6. Describe the role of other healthcare providers in the provision of comprehensive patient care and discuss the role of the pharmacist within an interdisciplinary healthcare team

The University of Findlay College of Pharmacy P4 Year – Summer/Fall (PHAR 491) Competency Checklist

On the following pages, you will find a checklist of tasks that will help you to evaluate the student's ability to achieve the learning objectives on the previous page. These tasks are aligned with the CAPE outcomes from page 6 and are also linked to entrustable professional activities (EPAs). Use this checklist when completing a final evaluation of the student to assess not only their knowledge but your level of trust in them performing the activities. The definition of the trust levels is included in the four-point scale below and on the Experiential Competency Requirements & Student Evaluation found on CORE/ELMS.

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3 = Progressing Satisfactorily (High Trust: The student demonstrated some independence, only requiring intermittent prompting.)

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Student exceeds requirements. Student consistently and independently completes all basic and complex tasks going beyond what is required.

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P4 YEAR - SUMMER/FALL (PHAR 491) COMPETENCY CHECKLIST

Preceptors will use this list when evaluating students. Students will use this list as part of their goals and assignments (as marked with an asterisk.)

<u>Students must demonstrate competence in the following learning objectives upon completion of this rotation:</u>

1.	Identify policies and mechanisms utilized by the site to improve safety (Outcome 2.2)		
	□ Student discusses the common reasons for medication errors, where the errors commonly occur, and		
	systems in place at the site to address or avoid errors		
	□ Student and preceptor discuss medication error reporting requirements at the site including what gets		
	reported (near misses or just errors that reach the patient) and how those reports are addressed and followed up		
	*ASSIGNMENT: Write a one-page paper describing best practices in place at the site that reduce the		
	potential for medication errors		
2.	Demonstrate essential knowledge of commonly used medications (Outcome 1.1)		
	☐ Student correctly identifies at least fifteen (15) Top 200 medications by trade and generic name, lists		
	their therapeutic class and can describe their mechanism of action		
3.	Demonstrate appropriate documentation for non-controlled and controlled substance ordering, prescription processing and inventory management (Outcome 2.2)		
	 Student describes the process of drug inventory management (controlled and non-controlled substances) at the site including ordering, storage, and security and control procedures 		
4.	Make and defend rational, ethical decisions within the context of personal and professional values (Outcome 4.4)		
	 Student and preceptor discuss an ethical dilemma encountered during the experience (or if one is not encountered during the experience, the preceptor may describe an ethical situation they've encountered in the past) 		
	☐ Student demonstrates a willingness to form and defend an opinion on the ethical situation		
	*ASSIGNMENT: Describe in writing (one-page minimum) the ethical dilemma that was discussed, the		
	method of resolving it, and a description of how you would have handled the situation (May NOT use Plan B scenario)		
5.	Demonstrate caring, ethical, and professional behavior when interacting with peers, professionals, patients,		
	and caregivers (Outcome 4.4)		
	□ Student demonstrates professionalism when communicating with physicians, patients and colleagues		
6.	Demonstrate the ability to utilize available resources to augment drug knowledge, answer drug-related questions, and complete drug information assignments (Outcome 1.1)		
	Student discusses one article relating to the practice of pharmacy and/or healthcare including how the article applies to the site or its patients.		
	*ASSIGNMENT: Write a one-page summary of the healthcare article and the conversation including how the article applies to the site or its patients (proper citation of the article must be included)		
	*ASSIGNMENT: Student answers the following question: A patient in your hospital has experienced an NSTEMI. The ED doctor decided to start the patient on IV heparin. Calculate a bolus dose and initial IV		
	infusion. The patient weighs 154 lb.		

As the site's scope of practice allows, students should also demonstrate competence in the following learning objectives:

7.	Demor	nstrate full technical functions of prescription processing	
		Student accurately reads, evaluates and assesses six (6) consecutive prescriptions for appropriate drug	
		dose, frequency, route of administration	
		Student reviews at least six (6) patient profiles for drug duplication, contraindications, drug	
		interactions, drug allergies and proposes potential resolutions for any issues	
		Student assesses the urgency and risk associated with any drug-related problems	
		Student describes the process at the site for documenting the intervention and resolution of issues	
		related to drug duplication, contraindication, drug interactions, and drug allergies	
		Student communicates with another healthcare provider to resolve medication related issue	
8.	Accura	tely and safely compound prescription medication	
		Student extemporaneously compounds three medications (oral, topical, rectal, ophthalmic or parenteral preparation) pursuant to a prescription or mock prescription	
		Student documents the compound's ingredients and shows correct calculations	
		Student determines the appropriate storage of compounded medications before and after dispensing	
9.	Obtain accurate and comprehensive medication histories based on patient interviews and use the information to identify drug-related problems		
		Interview at least three (3) patients to obtain an accurate and comprehensive medication history (including allergies and reactions, prescription medications, over-the-counter medications, herbals/natural products, dates of therapy, etc.)	
		Evaluate the collected patient information to determine the presence of a disease, medical condition, or drug-related problem(s), and assess the need for treatment and/or referral	
10.	Provid	e effective medication information to patients regarding prescription and non-prescription therapies	
		Student utilizes the PAR (prepare, assess, respond) technique to counsel at least three (3) patients on either prescription and or non-prescription medications	
		Student recommends or selects nonprescription products appropriate for a given patient's symptoms or nutritional needs with consideration of potential adverse effects, appropriate dose and duration of use, potential drug-disease state or drug-drug interactions/contraindications and need for physician referral	
11.	Accura	tely complete basic physical assessments and counsel patients on the results	
		Student manually assesses the pulse and respiratory rate, blood pressure and/or blood glucose of five (5) patients	
		Student explains the results of the assessment to each of the five patients	
12.		be the role of other healthcare providers in the provision of comprehensive patient care and discuss	
		e of the pharmacist within an interdisciplinary healthcare team	
		Student participates in interdisciplinary care by observing at least one other healthcare provider (nurse, physician, physician assistant, nurse practitioner, dietician, social worker, etc.) interacting with the patient and medical team	
		Student discusses the role of the healthcare provider observed with preceptor	

The University of Findlay College of Pharmacy P4 Year – Winter/Spring (PHAR 492) Competency Checklist

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P4 YEAR - WINTER/SPRING (PHAR 492) COMPETENCY CHECKLIST

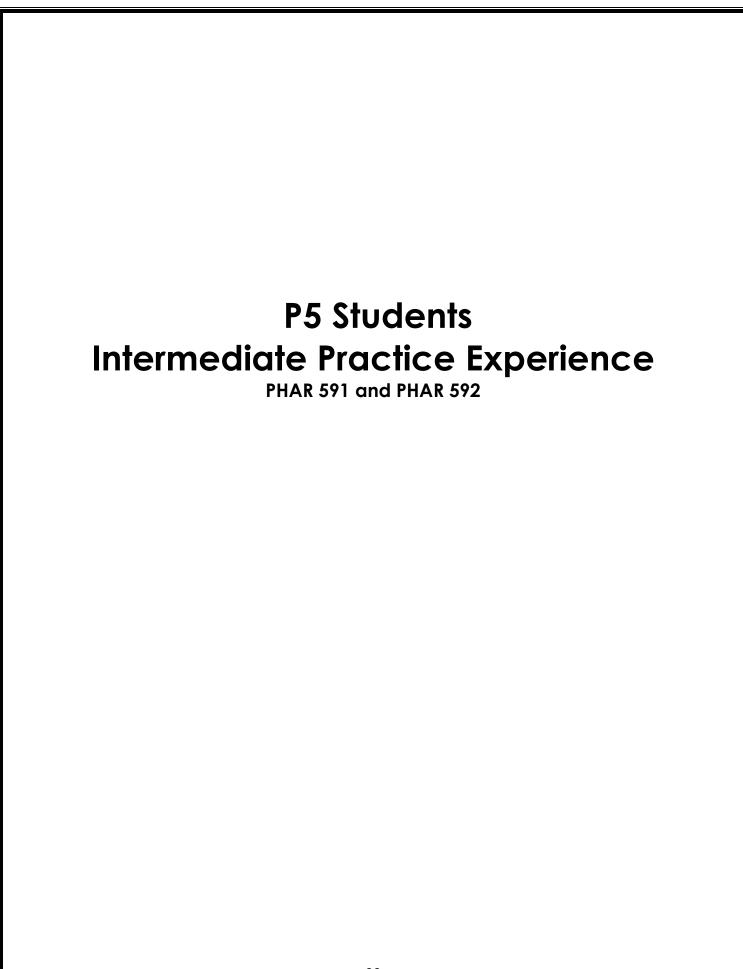
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Students must demonstrate competence in the following learning objectives upon completion of this rotation:

1.	Identify policies and mechanisms utilized by the site to improve safety (Outcome 2.2)		
	 Student discusses the function and importance of a quality assurance and describe how quality is ensured at the practice site 		
	□ Student performs or observes a quality assurance check		
	 Student identifies the methods by which pharmacy staff are trained in the use of one or more of the following at the site: Dispensing robot or other automated dispensing process Automated compounding device Medication cabinet (e.g. Accudose, Pyxis) Smart pumps Inventory management systems Electronic prescribing systems 		
2.	Demonstrate essential knowledge of commonly used medications (Outcome 1.1)		
	☐ Student correctly identifies at least fifteen (15) Top 200 medications by trade and generic name, lists their therapeutic class and can describe their mechanism of action		
3.	Describe the site's management and organizational structure (Outcome 1.1)		
	 Student and preceptor discuss the site's organizational chart, and the responsibilities of various staff to coworkers, patients, and the department (if applicable) 		
	☐ Student and preceptor discuss staffing patterns, requirements and scheduling at the site		
4.	Demonstrate caring, ethical, and professional behavior when interacting with peers, professionals, patients, and caregivers (Outcome 4.4)		
	 Student demonstrates professionalism when communicating with physicians, patients and colleagues *ASSIGNMENT: Describe a situation in which you or someone at the site had to deal with a challenging patient or practitioner. Write a two-page paper reflecting on the following questions: How was the situation handled? Was someone right and wrong in this situation? Was the outcome positive or negative, and what made it that way? What are some of the potential issues that the patient/practitioner may have been dealing with, 		
	which may not have been known to the person in the pharmacy?		
	 How did the situation impact the work environment of the pharmacy? If you had the same situation occur again, what would you do the same or different? 		
5.	Demonstrate the ability to utilize available resources to augment drug knowledge, answer drug-related questions, and complete drug information assignments (Outcome 1.1)		
	☐ Student and preceptor discuss a current issue of <i>Pharmacist's Letter</i> , identifying and reviewing articles that are important for a pharmacist practicing at the site		
	 Student and preceptor discuss various opportunities for pharmacists to participate in professional and educational activities, i.e. continuing education, staff development, professional organizations, etc. *ASSIGNMENT: Identify and answer one drug-related question as given by a pharmacist, patient or healthcare professional. The answer should be a minimum of two-pages and properly referenced. 		

As the site's scope of practice allows, students should also demonstrate competence in the following learning objectives:

6.	Demor	nstrate full technical functions of prescription processing	
		Student accurately reads, evaluates and assesses six (6) consecutive prescriptions for appropriate drug, dose, frequency, route of administration	
		Student reviews at least six (6) patient profiles for drug duplication, contraindications, drug	
		interactions, drug allergies and proposes potential resolutions for any issues	
		Student assesses the urgency and risk associated with any drug-related problems	
		Student describes the process at the site for documenting the intervention and resolution of issues related to drug duplication, contraindication, drug interactions, and drug allergies	
		Student communicates with another healthcare provider to resolve medication related issue	
7.	Accurately and safely compound prescription medication		
		Student extemporaneously compounds three medications (oral, topical, rectal, ophthalmic or parenteral preparation) pursuant to a prescription or mock prescription	
		Student documents the compound's ingredients and shows correct calculations	
		Student determines the appropriate storage of compounded medications before and after dispensing	
8.		accurate and comprehensive medication histories based on patient interviews and use the ation to identify drug-related problems	
		Interview at least three (3) patients to obtain an accurate and comprehensive medication history (including allergies and reactions, prescription medications, over-the-counter medications, herbals/natural products, dates of therapy, etc.)	
		Evaluate the collected patient information to determine the presence of a disease, medical condition, or drug-related problem(s), and assess the need for treatment and/or referral	
9.	Provide effective medication information to patients regarding prescription and non-prescription therapies		
	a.	Student utilizes the PAR (prepare, assess, respond) technique to counsel at least three (3) patients on either prescription and or non-prescription medications	
	b.	Student recommends or selects nonprescription products appropriate for a given patient's symptoms or nutritional needs with consideration of potential adverse effects, appropriate dose and duration of use, potential drug-disease state or drug-drug interactions/contraindications and need for physician referral	
	loc be	SSIGNMENT: Student answers the following question: A mother comes into your retail pharmacy sking for something for her 4-year-old who hurt her arm. She weighs 39.6 lb. She has used Tylenol fore and has responded well to it. Please recommend a dose for Tylenol suspension in mg and mL for including directions (route, frequency, etc).	
10.	Accura	tely complete basic physical assessments and counsel patients on the results	
		Student manually assesses the pulse and respiratory rate, blood pressure and/or blood glucose of five (5) patients	
		Student explains the results of the assessment to each of the five patients	



P5 LEARNING OBJECTIVES (PHAR 591 and PHAR 592)

Upon completion of the <u>P5</u> experiences with the pharmacist practitioner in the <u>institutional</u> <u>pharmacy setting</u>, the student should be able to:

- 1. Accurately process medication orders in an institutional pharmacy (Outcome 2.2)
- 2. Accurately and safely compound intravenous admixtures (Outcome 2.2)
- 3. Identify policies and mechanisms utilized by the site to improve safety (Outcome 2.2)
- 4. Identify patient information from a patient's medical record (Outcome 2.1)
- 5. Demonstrate essential knowledge of commonly used medications in the institutional setting (Outcome 1.1)
- 6. Compose an accurate SOAP note that includes a prioritize assessment of the patient's problems as well as patient-specific data (Outcomes 2.1 and 3.1)
- 7. Identify and reconcile drug-related problems (Outcome 3.1)
- 8. Discuss the changes in pharmacokinetic parameters that occur in certain disease states and adjust medication doses based on pharmacokinetic changes (Outcome 2.1)
- 9. Describe the responsibilities of the pharmacist when handling controlled substances in the inpatient setting (Outcome 2.2)
- 10. Demonstrate caring, ethical, and professional behavior when interacting with peers, professionals, patients, and caregivers (Outcome 4.4)
- 11. Discuss the roles and responsibilities of pharmacists, other healthcare providers, staff, and administration in the institutional setting (Outcome 1.1)
- 12. Demonstrate effective communication skills (verbal, non-verbal, and written) at an appropriate level for patients, caregivers, health care providers and the general public (Outcome 3.6)
- 13. Use effective written, visual, verbal, and nonverbal communication skills to provide patient/caregiver education (Outcome 3.6)
- 14. Demonstrates the ability to utilize available drug information resources to augment drug knowledge, answer drug-related questions, and complete drug information assignments (Outcome 1.1)
- 15. Describe how health care informatics is utilized by the site to improve efficiency and safety (Outcome 2.2)

The University of Findlay College of Pharmacy P5 Year – Summer/Fall (PHAR 591) Competency Checklist

On the following pages, you will find a checklist of tasks that will help you to evaluate the student's ability to achieve the learning objectives on the previous page. These tasks are aligned with the CAPE outcomes from page 6 and are also linked to entrustable professional activities (EPAs). Use this checklist when completing a final evaluation of the student to assess not only their knowledge but your level of trust in them performing the activities. The definition of the trust levels is included in the four-point scale below and on the Experiential Competency Requirements & Student Evaluation found on CORE/ELMS.

- o The student is responsible for attempting to complete ALL items listed.
- o If you feel that the student may not be able to complete some of the items on the checklist, please contact the Assistant Director of Experiential Education immediately to discuss alternative options.
- Items that have an asterisk (*) next to them indicate assignments that complement items on the checklist. The student must complete these assignments at home and upload them to their professional portfolio. You may or may not choose to review these materials.

Upon conclusion of this student's rotation, you will be asked to evaluate and document achievement of the learning objectives in **RxPreceptor/CORE ELMS**. Therefore, either you or your designee must personally observe the student completing the tasks in order to adequately assess the student's competence.

You will be asked to evaluate the student using the following four-point scale:

1 = Unsatisfactory Performance (Low Trust: The student required complete guidance or was unprepared; the preceptor had to complete most of the task.)

Student does not meet requirements. Student is unable to complete the tasks despite guidance and prompting.

2 = Needs Improvement (Minimal/Moderate Trust: The student was able to perform some tasks but required repeated directions.)

Student meets some minimum requirements. Student frequently requires guidance and/or prompting to complete tasks.

3 = Progressing Satisfactorily (High Trust: The student demonstrated some independence, only requiring intermittent prompting.)

Student consistently meets requirements. Student completes basic and some complex tasks independently with minimal or no guidance and/or prompting.

4 = Exceeds Expectations (Complete Trust: The student functioned fairly independently and only needed assistance with nuances or complex situations.)

Student exceeds requirements. Student consistently and independently completes all basic and complex tasks going beyond what is required.

If you have any questions or concerns please contact the Assistant Director of Experiential Education by phone at (419) 434-5783 or e-mail at <u>burkart@findlay.edu</u>).

P5 YEAR - SUMMER/FALL (PHAR 591) COMPETENCY CHECKLIST

Preceptors will use this list when evaluating students. Students will use this list as part of their goals and assignments (as marked with an asterisk.)

1.	Accura	tely process medication orders in an institutional pharmacy (Outcome 2.2)						
		Student receives and appropriately interprets ten (10) written or electronic medication orders						
		Student receives and interprets six (6) written intravenous admixture orders						
		Student describes the process for prioritizing medication orders at site (e.g. STAT, now, on call, routine PRN orders)						
		Student identifies and reviews six (6) standard order sets at institution						
		Student describes the process for dispensing unit dose medications						
		Student describes the process for dispensing intravenous admixtures						
2.	Accurately and safely compound intravenous admixtures (Outcomes 2.2)							
		Student describes the importance of USP 797 guidelines						
		Student demonstrates the appropriate method for personal cleansing and garbing before entering the clean room and the appropriate method for cleaning the hood						
		Student properly calculates the expiration date and time for six (6) intravenous admixture						
		Student performs the calculations required for six (6) intravenous admixtures and if possible,						
		compounds the admixtures using appropriate aseptic technique for each product.						
3.	Identif	y policies and mechanisms utilized by the site to improve safety (Outcome 2.2)						
		Student discusses the common reasons for medication errors, where the errors commonly occur, and systems in place to address or avoid errors						
		Student and preceptor discuss The Joint Commission's National Patient Safety Goals and policies at the site that comply with the safety goals						
		Student identifies at least two (2) initiatives at the site that minimize medication errors during transition of care						
1	Identif	y patient information from a patient's medical record (Outcome 2.1)						
٦.		Student reviews six (6) patient charts and identifies the following items:						
	_	Patient demographic information, medication profile, lab results, progress notes						
		Student calculates ideal body weight, body mass index and creatinine clearance for each patient						
5	Demon	strate essential knowledge of commonly used medications in the institutional setting (Outcome 1.1)						
٥.		Student correctly identifies at least fifteen (15) medications by trade and generic name, lists their therapeutic class and can describe their mechanism of action						
		SSIGNMENT: Student identifies the target drug concentrations for Narrow Therapeutic index drugs: oxin, lithium, phenytoin, theophylline, warfarin						
	_	SSIGNMENT: Student documents six (6) drug therapy interventions made by a pharmacist, and						
		scribes the rationale for the changes						
1.	Coi	mpose an accurate original SOAP note from patients encountered at the site that includes a prioritize						
	ass	essment of the patient's problems as well as patient-specific data (Outcomes 2.1 and 3.1)						
	*A	SSIGNMENT: Student completes one (1) SOAP note. Choose any one topic from among the following: Cardiovascular Disorder Renal Diseases						
		Caralovascular Disoraci Nellal Discases						

See the "SOAP Note Guidelines" on page 41 for further details on expectations and format.

Immunology or Connective Tissue Disorders

Respiratory Diseases

The	<u>studen</u>	t must obtain feedback from the preceptor and adjust the SOAP note BEFORE uploading this
ass	ignment	t to MyCred (student review with preceptor/preceptor initial or sign cases).
_		
6.	Identif	y and reconcile drug-related problems (Outcome 3.1)
		Student identifies at least two (2) drug-related problems on medication orders and makes a
		recommendation for the resolution of the problem
		Student resolves two (2) medication related issues by phone or in person with a prescriber
7.		s the changes in pharmacokinetic parameters that occur in certain disease states and adjust ation doses based on pharmacokinetic changes (Outcome 2.1)
	*A:	SSIGNMENT: Student determines the pharmacokinetic changes that occur in specific patients under the
	foll	lowing conditions:
		Half-life in a renal failure patient
		 Volume of distribution in a heart failure patient
		Clearance in a geriatric patient
8.		be the responsibilities of the pharmacist when handling controlled substances in the inpatient setting me 2.2)
		Student accurately fills or describes the process of filling controlled substance floor stock
		Student describes the difference between the processes for drug ordering, check-in, returns, and
		credit/charging for control and non-controlled medication
9.	Demon	nstrate caring, ethical, and professional behavior when interacting with peers, professionals, patients
۶.		regivers (Outcome 4.4)
		Student and preceptor discuss an ethical situation that occurred at the site (either in the past or the
		present) and the student describes how they would handle the situation
		Student demonstrates professionalism when communicating with physicians, patients and colleagues
10.	Discuss	s the roles and responsibilities of pharmacists, other healthcare providers, staff and administration ir
	the ins	titutional setting (Outcome 1.1)
		Student describes the role of other healthcare workers in the provision of patient care and services. The student should discuss healthcare workers including (but not limited to) the following: Physicians
		physician assistants, nurses (LPN/RN/NP), dieticians, OT/PT, and respiratory therapists
		Student participates in interdisciplinary care by observing at least one other healthcare provider
		(nurse, physician, physician assistant, nurse practitioner, dietician, social worker, etc.) interacting with
		the patient and medical team
		Student discusses the role of the health care provider observed with preceptor
11.		nstrate effective communication skills (verbal, non-verbal, and written) at an appropriate level for its, caregivers, health care providers and the general public (Outcome 3.6)
		Student takes six (6) calls from a physician or nurse regarding a question or clarification of a medication order
12	Use eff	fective written, visual, verbal, and nonverbal communication skills to provide patient/caregiver
		ion (Outcome 3.6)
		Student performs discharge counseling for at least three (3) patients OR discusses a medication
		therapy change directly with a patient or caregiver at least three (3) times

drug-related questions, and complete drug information assignments (Outcome 1.1)

13. Demonstrates the ability to utilize available drug information resources to augment drug knowledge, answer

	Student identifies at least six (6) drug information sources available to the practice site
	Student identifies IV compatibility for at least six (6) combinations of intravenous admixtures
A:	SSIGNMENT: Student completes one journal club discussion with the preceptor

The University of Findlay College of Pharmacy P5 Year – Winter/Spring (PHAR 592) Competency Checklist

On the following pages, you will find a checklist of tasks that will help you to evaluate the student's ability to achieve the learning objectives on the previous page. These tasks are aligned with the CAPE outcomes from page 6 and are also linked to entrustable professional activities (EPAs). Use this checklist when completing a final evaluation of the student to assess not only their knowledge but your level of trust in them performing the activities. The definition of the trust levels is included in the four-point scale below and on the Experiential Competency Requirements & Student Evaluation found on CORE/ELMS.

- o <u>The student is responsible for attempting to complete ALL items listed.</u>
- o If you feel that the student may not be able to complete some of the items on the checklist, please contact the Assistant Director of Experiential Education immediately to discuss alternative options.
- o Items that have an asterisk (*) next to them indicate assignments that complement items on the checklist. The student must complete these assignments at home and upload them to their professional portfolio. You may or may not choose to review these materials.

Upon conclusion of this student's rotation, you will be asked to evaluate and document achievement of the learning objectives in **RxPreceptor/CORE ELMS**. Therefore, either you or your designee must personally observe the student completing the tasks in order to adequately assess the student's competence.

You will be asked to evaluate the student using the following four-point scale:

1 = Unsatisfactory Performance (Low Trust: The student required complete guidance or was unprepared; the preceptor had to complete most of the task.)

Student does not meet requirements. Student is unable to complete the tasks despite guidance and prompting.

2 = Needs Improvement (Minimal/Moderate Trust: The student was able to perform some tasks but required repeated directions.)

Student meets some minimum requirements. Student frequently requires guidance and/or prompting to complete tasks.

3 = Progressing Satisfactorily (High Trust: The student demonstrated some independence, only requiring intermittent prompting.)

Student consistently meets requirements. Student completes basic and some complex tasks independently with minimal or no guidance and/or prompting.

4 = Exceeds Expectations (Complete Trust: The student functioned fairly independently and only needed assistance with nuances or complex situations.)

Student exceeds requirements. Student consistently and independently completes all basic and complex tasks going beyond what is required.

If you have any questions or concerns, please contact the Assistant Director of Experiential Education by phone at (419) 434-5783 or e-mail at burkart@findlay.edu).

P5 YEAR – WINTER/SPRING (PHAR 592) COMPETENCY CHECKLIST

Preceptors will use this list when evaluating students. Students will use this list as part of their goals and assignments (as marked with an asterisk.)

	Student receives and appropriately interprets ten (10) written or electronic medication orders
	Contact and the second state a
	Student receives and interprets six (6) written intravenous admixture orders
	Student receives and interprets six (6) written intravenous admixture orders
	Student accurately calculates doses for any given drug
	Student reviews a medical administration records (MAR) and describes the purpose and usefulness of the MAR and identifies standard administration times at institution
Accura	tely and safely compound intravenous admixtures (Outcome 2.2)
	Student demonstrates the appropriate method for personal cleansing and garbing before entering the clean room and the appropriate method for cleaning the hood
	Student properly calculates the expiration date and time for six (6) intravenous admixture
	Student performs the calculations required for six (6) intravenous admixtures and if possible, compounds the admixtures using appropriate aseptic technique for each product
	Student describes process for order and preparation of TPN admixtures and chemotherapy products, and if possible, demonstrates appropriate compounding technique for preparing these products
	Student checks an emergency cart or drug kit for contents and expiration dating
	y policies and mechanisms utilized by the site to improve safety (Outcome 2.2)
	Student describes the process for medication reconciliation at site
	Student describes the process for adverse event reporting at the site and documents at least one (1) adverse drug reaction using this process
	Student discusses the membership and function of the Pharmacy and Therapeutics Committee and the Institutional Review Board
	Student describes the purpose and benefits of the Medication Use Evaluation (MUE) process from the perspective of the physician/provider, patient, and pharmacist
Describ	be how health care informatics is utilized by the site to improve efficiency and safety (Outcome 2.2)
	Student identifies the methods by which pharmacy staff are trained in the use of one or more of the following at the site:
	Dispensing robot or other automated dispensing processAutomated compounding device
	Medication cabinet (e.g. Accudose, Pyxis)Smart pumps
	Inventory management systems
	Electronic prescribing systems
	Student performs a quality assurance check or on at least one of the items listed above or identifies how to generate and utilize reports
	Student describes how the site is using technology to dispense medication and improve patient safety
	strate essential knowledge of commonly used medications in the institutional setting (Outcome 1.1)
	Student correctly identifies the spectrum and indications for commonly used antibiotics
	Student correctly describes the mechanism(s) of common drug interactions SSIGNMENT: Student documents six (6) drug therapy interventions made by a pharmacist, and scribes the rationale for the changes
	Accura

1.	Compose an accurate original SOAP note that from patients encountered at the site that includes a prioritized assessment of the patient's problems as well as patient-specific data (Outcomes 2.1 and 3.1) *ASSIGNMENT: Student completes one (1) SOAP note. Choose any one topic from among the following: • Gastrointestinal Disorders • Neurologic Diseases • Infectious Diseases See the "SOAP Note Guidelines" on page 41 for further details on expectations and format. The student must obtain feedback from the preceptor and adjust the SOAP note BEFORE uploading this assignment to MyCred (student review with preceptor/preceptor initial or sign cases).
6.	Identify and reconcile drug-related problems (Outcome 3.1)
	 Student identifies at least two (2) drug-related problems on medication orders and makes a recommendation for the resolution of the problem
	□ Student resolves two (2) medication related issues by phone or in person with a prescriber
7.	Discuss the changes in pharmacokinetic parameters that occur in certain disease states and adjust medication doses based on pharmacokinetic changes (Outcome 2.1) *ASSIGNMENT: Student determines the correct dose for three (3) of the listed drugs in a specific patient and provides a description of the calculation and/or rationale for dose recommendation as well as appropriate monitoring parameters. The drugs are: • Warfarin, phenytoin, gentamicin, tobramycin, theophylline, digoxin, and/or vancomycin
8.	Demonstrate caring, ethical, and professional behavior when interacting with peers, professionals, patients,
	and caregivers (Outcome 2.2) □ Student demonstrates professionalism when communicating with physicians, patients, and colleagues *ASSIGNMENT: Student uploads completed the IPPE Interprofessional Education (IPE) Evaluation Form with Preceptor comments/feedback (form found in CORE Elms/RxPreceptor)
9.	Discuss the roles and responsibilities of pharmacists, other healthcare providers, staff, and administration in the institutional setting (Outcome 4.4)
	☐ Student and preceptor discuss the site's organizational chart, and the responsibilities of various staff to coworkers, patients, and the department, and other department
	 Student and preceptor discuss staffing patterns, requirements, and scheduling at the site
	 Student and preceptor discuss the role of the pharmacy directors and managers in the operation of an institutional pharmacy
10.	Demonstrate effective communication skills (verbal, non-verbal, and written) at an appropriate level for patients, caregivers, health care providers and the general public (Outcome 3.6) *ASSIGNMENT: Student gives a topic presentation (at least 10 minutes long) on a topic assigned by the preceptor. See the "Topic Presentation Guidelines" and the "Topic Presentation Evaluation" form on pages 43 and 44 for further instructions.
11.	Use effective written, visual, verbal, and nonverbal communication skills to provide patient/caregiver education (Outcome 3.6)
	Student performs discharge counseling for at least three (3) patients OR discusses a medication therapy change directly with a patient or caregiver at least three (3) times
12.	Demonstrates the ability to utilize available drug information resources to augment drug knowledge, answer drug-related questions, and complete drug information assignments (Outcome 1.1)

*ASSIGNMENT: Student identifies, and answers one drug-related question as given by a pharmacist, patient, or healthcare professional. The answer should be a minimum of a <u>two-page referenced answer</u>.

SOAP Note Guidelines

Use SOAP (subjective, objective, assessment, plan) note format to document your patient case. You will need to incorporate a pharmacy focused plan into your note. Choose a case in which the assigned topic (cardiovascular disease, infectious disease, endocrinology disorder, or gastrointestinal disorder) is the MAIN or MOST CRITICAL problem. You will write up the subjective, objective, and assessment for the entire patient, but you will only include a plan for the most critical problem.

I. Subjective Information:

This information is obtained from the patient and/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 following items should be reviewed and considered when available, the specific examples under each item listed are not all inclusive, but instead should be used as a guide in writing your case.

- Chief Complaint (layperson'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
 - o Injuries that patient has experienced
 - o 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 considered: marital status, number of children, educational background, occupation, physical activity, dietary habits, alcohol/ tobacco/recreational drug use)
- Medications (This information can be provided by patient or caregiver. If the
 information is confirmed via medical records or pharmacy records, it should be
 moved to the objective section)
 - o Should include prescription medications, OTCs, and herbal or alternative therapies
 - o Include the drug name, dose, route, frequency, and duration of therapy
- Allergies
 - o Include the allergy and the patient's reaction (if known)
- ROS (review of systems)
 - o In this section the examiner will ask questions to the patient about each body system. For the purpose of this assignment only the positive and negative findings are recorded. The ROS serves to evaluate each body system and to prevent the omission of pertinent information. Information that was not noted in the HPI should be noted in this section.

II. Objective Information:

This information is detailed data that is obtained and recorded by the examiner or another health care provider. Items that are commonly listed here include:

- Vital Signs
- Height/Weight/BMI
- Cardiac Findings
- Chest
- HFFNT
- Extremities: (e.g. 2+ bilateral pedal edema)
- Neurologic Findings
- Radiographic Findings
- Labs
- Medications (if confirmed by medical or pharmacy records)

III. Assessment:

Identify, prioritize, and characterize the real or potential drug therapy problems using a patient-focused approach. You should have one assessment statement for each problem identified. The assessment statement should include:

- The status of the problem, if applicable (e.g. mild/moderate/severe, chronic/acute, controlled/uncontrolled, etc.)
- The problem itself
- The evidence that confirms your assessment
- The current therapy
- For example:
 - Uncontrolled type 2 diabetes as evidenced by A1c of 8.3% and average fasting blood glucose of 230mg/dL despite daily therapy with metformin 1000mg BID and glimepiride 4mg daily.

You MUST **prioritize** your patient's problems. The most critical problem should be listed first and the least critical (or those problems which are currently under control) should be listed last. **It is expected that you will assess all problem areas**.

IV. Plan:

Develop an optimal individualized pharmacotherapy plan for only the <u>FIRST PROBLEM</u> <u>YOU ASSESSED</u> (you do NOT have to create a plan for every problem you assessed) using the guidelines below:

- 1. Goal clearly outline at least one SMART (Specific, Measurable, Action-oriented, Relevant, and Time-bound) goal for the problem
- 2. Pharmacologic Plan Select a drug, dosage form, dose, schedule, and duration of therapy that is best for your patient
 - a. Consider allergies, economic, psychosocial, and ethical factors that are applicable to the patient.
 - b. Describe the reason for drug therapy selection. Document evidence-based practice guidelines and/or drug references.
- 3. Non-Pharmacologic Plan List non-drug related recommendations
- 4. Monitoring and Follow-Up Include a plan for monitoring the <u>safety</u> **and** <u>efficacy</u> of the interventions including when monitoring and follow-up should occur
- 5. Patient Education include an outline of the education you would provide to the patient or caregiver on this new plan

Topic Presentation Guidelines

This activity is intended to give students an opportunity to go through the steps required to prepare and present a topic presentation. In addition, it will give them practice with their presentation skills.

Audience:

The presentation may be presented to just the preceptor or may be given to other healthcare professionals

Style:

The presentation may be informal (handout only) or formal (PowerPoint presentation, with or without handouts)

Length:

The presentation must be at least 10 minutes long. The preceptor may choose to have the student give a longer presentation if desired

Feedback:

An evaluation form can be found on the following page. This evaluation form is optional

Topic Ideas:

The preceptor may assign any pharmacy-related topic. However, several suggestions have been made below to help ease the selection of a topic if desired

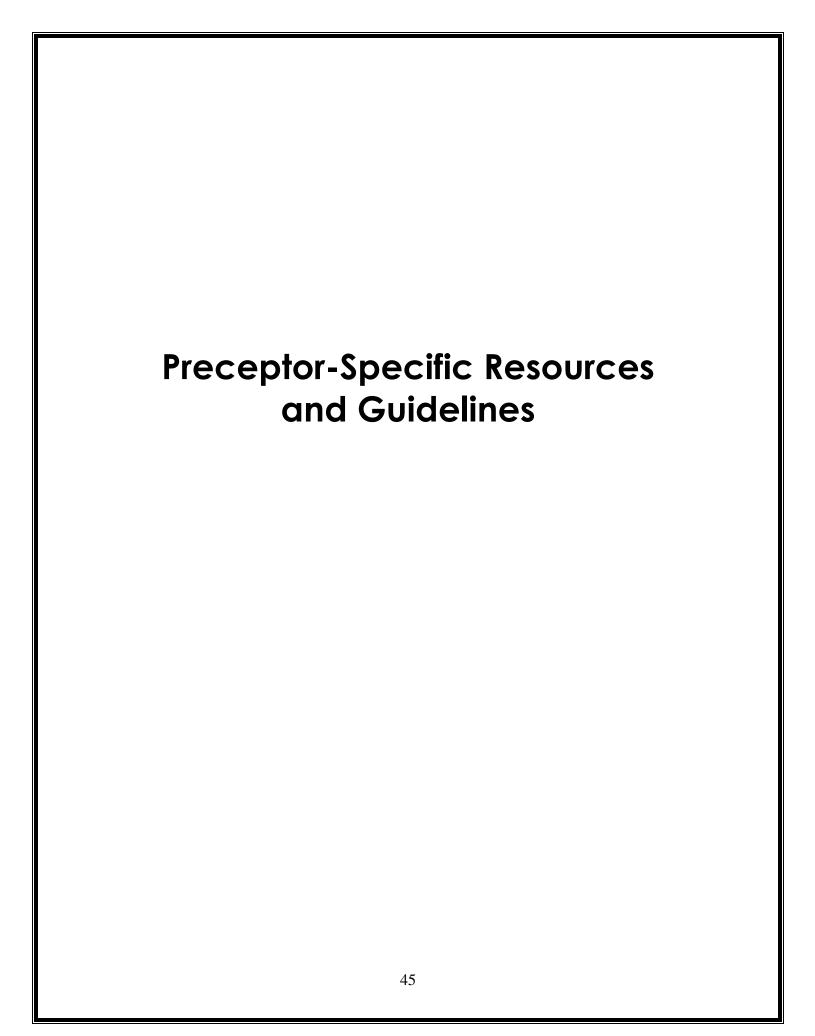
- Disease State (this could focus on diagnosis, staging, and/or treatment as the preceptor and student deem appropriate)
 - o Pneumonia
 - o CHF
 - o COPD (acute exacerbation)
 - Atrial Fibrillation
 - o Others...
- Drug-specific presentation
 - Choose a drug encountered during IPPEs
 - New drug
 - Discuss indication, side effects, warning/precautions, administration issues, etc.
 - Evaluate the primary literature related to its approval and form an opinion on the drug's role
- Other topic ideas:
 - o Treatment of heparin-induced thrombocytopenia
 - o Treatment of diabetic ketoacidosis
 - Causes of hyponatremia or hypernatremia
 - New vaccine issues
 - o Topics related to pharmacy law or pharmacy administration

Topic Presentation Evaluation

Please evaluate the student's presentation using the following scale:

- 1 Improvement Mandatory (the student is substantially below performance expectation, remediation needed)
- 2 Below Expectations
- 3 Meets Expectations
- 4 Exceeds Expectations
- **5 Superior** (the student significantly exceeds expectations and is performing at an APPE level or beyond)

Student Name:			I	Topic:		
Presentation Style						Comments
Student appeared self-assured (good eye contact, limited use of notes)	1	2	3	4	5	
Pace of delivery was appropriate	1	2	3	4	5	
Volume and tone were appropriate	1	2	3	4	5	
Student did not have distracting mannerisms	1	2	3	4	5	
Student did not use pause words (such as "um" and "like")	1	2	3	4	5	
Organization and Time						Comments
Presentation was an appropriate length and time was used appropriately	1	2	3	4	5	
Visual materials were organized, neat, and free of spelling and grammar errors	1	2	3	4	5	
The information was organized logically	1	2	3	4	5	
Content		_		•		Comments
Background information was accurate and pertinent	1	2	3	4	5	
Appropriate drug information resources were consulted and referenced	1	2	3	4	5	
Questions were handled appropriately	1	2	3	4	5	
It is clear the student knows the topic well	1	2	3	4	5	
Final comments:						



Preceptor Expectations

- 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 his/her expectations, particularly in 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 syllabus.
- 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 arrange for introductions, and 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.

Using RxPreceptor/CORE ELMS for IPPEs

RxPreceptor/CORE ELMS is the online reporting and monitoring tool used by **the** University of Findlay College of Pharmacy to track and facilitate the experiential education program.

You will use RxPreceptor/CORE ELMS to:

- Confirm student hours
- Confirm successful completion of student competency checklists
- Evaluate student's professional development
- Review student evaluations of you
- Track student absences, tardiness, or report incidents to the Experiential Office
- Track preceptor training

To use RxPreceptor:

- 1. Go to https://www.corehighered.com/ and click "LOGINS" in the upper right-hand corner and select "ELMS Login."
- 2. Enter your username and password in the areas indicated. If you do not know your username and password, you can contact Pam Cochran at 419-434-5633 or cochranp@findlay.edu.

ELMS



Forgot Your Password?

3. Verification of IPPE Hours

Preceptors are expected to confirm student hours. On the left side of the screen, click on "Hours Tracking." You can verify the date and time that your student has spent with you. IPPE students are to log their hours daily and should be verified by the preceptor by the end of the experience. The University of Findlay experiential faculty will review the student's submission after the preceptor has confirmed all hours.

4. Completing Evaluation of the Student

Preceptors are expected to evaluate the student. On the left side of the screen, click on "Evaluations" then the sub tab "Evaluation of Student." Find the student's name and click on the link to the right of the student's name. This will bring up the evaluation form which must be completed. You can work and "Save as Draft Copy" this document but when it is complete you must click the "Submit Final Score" tab at the bottom of the evaluation.

5. Accessing Evaluations

Students are required to complete an evaluation of their preceptor within 24 hours of concluding their experience. An outline of the evaluation students complete can be found on page 60 of the IPPE Preceptor manual. This evaluation can be accessed only **after** the preceptor has submitted their evaluation of the student. To access and view this evaluation, click on "**Evaluations**" on the left side of the screen then click on the sub tab "**Evaluation of Preceptor**."

6. Incident Tracking/Student Absence Tracking

Incident reporting and absence tracking can be used to track student absences, tardiness, professionalism issues, or any other concerning situation that arises during IPPE rotations. On the left side of the screen, click on "**Student Absences**" or "**Student Incidents**," respectively. You may choose to report the incident or absence through RxPreceptor/CORE ELMS's reporting mechanism, or you may contact Tim Burkart directly at burkart@findlay.edu or by phone at (419) 434-5783.

7. Preceptor Training

We encourage preceptor education and offer training through the **Connect. Educate. Impact** (CEI) program. All University of Findlay preceptors can access CEI through their CORE/ELMS account.

To access the training module, log into your CORE/ELMS account. At the bottom of the left-hand, orange column, click on External Resources. A bolded CEI tab will appear; click on this to access the instructions and access code for CEI.



At the bottom of the screen which appears, you'll click the green "Go to CEImpact site."



YOUR CEImpact ACCESS CODE ID: UFINDLAY21

****Please note: the code listed above is an older code shown as an example – please check the site for the most up to date code as it changed annually****

This action will take you to the CEI log-in page where you will enter the CEI Access Code ID. You must use all caps. Once logged in, you will find several free CE courses when you click on the Preceptor Catalog.

Any time you complete preceptor training (on campus, at a national meeting, via CEI or even through another college's experiential program), please document this under the "My Requirements" tab found on the left side of the CORE/ELMS screen. Scroll down to the folder titled "Level I – University of Findlay Preceptor." Click "Edit" next to "Preceptor Training

Program" and in the comment box, note the type of preceptor training you have completed and the date. (Please leave the expiration date field blank). Then click the "**Status**" radio button that says "**Complete**." Then hit "**Enter Requirement.**" If you gain additional training at a later date, simply add the additional training and dates to the comment box. This is on the honor system, and we do not require you to send us a copy of your CE.

Other Preceptor Training Resources

American Pharmacist's Association Advanced Preceptor Training Program

Accredited by ACPE
Associated fees for members or non-members for CE
https://www.pharmacist.com/apha-advanced-preceptor-training

American Society of Health-System Pharmacists Education

Has some free eLearning activities for CE and others cost varying amounts Can be member or non-member to access activities http://elearning.ashp.org/catalog/free

Doty, R. Getting Started as a Pharmacy Preceptor

American Pharmacists Association; 2011, 153 pp. ISBN: 978-1-58212-146-8

Soric, M., Schneider, S., Wisneski, S. The Effective Pharmacy Preceptor

American Society of Health-System Pharmacists; 2017, 161 pp. ISBN: 978-1-58528-555-6

Checklist for Orienting Students

GENERAL ORIENTATION:

- □ What should the student call you?
- □ What name does the student prefer to be called?
- □ Where should the student store their belongings?
- □ Where should the student park?
- □ Does the student need a badge?
- □ Policy on breaks/meals, if applicable (Can the student purchase a meal on site? If not, is the student permitted to leave the site to purchase a meal? Where can they eat a meal they packed for themselves?)
- □ What is your policy on cell phones/handheld devices as drug information references?
- □ Discuss site-specific policies and procedures. Are there policies that go above and beyond the UF absence/tardiness policy, dress code, patient confidentiality policy, etc.? If so, please outline your policies for the student.
- □ Orient the student to the computer/telephone system and your expectation of student responsibilities in regards to these technologies.

STUDENT-SPECIFIC ORIENTATION:

- □ Review the student's Competency Requirements for the semester to discuss how and when competencies will be met during the rotation.
- Review the student's "Student Introduction" (the student should have this filled out ahead of time).
 - What are the student's previous pharmacy experiences (both paid employment and experiential rotations)?
 - What courses is the student taking right now and what topics are being covered? (Is there a way you can reinforce the topics the student is learning about in your pharmacy setting?)
 - o What are the student's goals for the rotation?
 - Are they reasonable goals for the experience you can provide at your site?
 Please discuss why or why not.
- □ Do you have any site-specific learning objectives, expectations, or goals for the student? Please share this with the student.
- □ Establish a schedule for the remainder of the rotation (a schedule is provided in the IPPE manual). The student should sign this schedule to confirm and commit to the days discussed. Please make a copy for the student and keep a copy for yourself.

University of Findlay College of Pharmacy Curriculum

The following is the suggested outline for the UF Pharmacy program. Not all students follow this exact path, but it is meant as a guide. Please use this to get better idea of where your IPPE students are within the curriculum. To see the CORE+ classes, click here.

Fall	Hours	Spring	Hours
Pharmacy First Year			
CHEM 130 Advanced General Chemistry I	3	CHEM 131 Advanced General Chemistry II	3
CHEM 130L Adv General Chemistry I Lab	1	CHEM 131L Adv General Chemistry II Lab	1
BIOL 152 Intro to Cell & Molecular Biology	3	MATH 141 Calculus I	4
BIOL 152L Intro to Cell & Molecular Biology Lab	1	CORE + (02)	3
CORE+ (01)	3	CORE+ GE Outcome (C3, 03, RI, R2, R3, EI, or E2)	3
CORE+ GE Outcome (C3, 03, R1, R2, R3, E1, or E2)	3	CORE+ GE Outcome (C3, 03, RI, R2, R3, EI, or E2)	3
ENGL 106 College Writing 2	3	PHAR 151 Oiler Pharmacy II	1
PHAR 150 Oiler Pharmacy I	1	Total	18
Fotal	18		
Pharmacy Second Year		CHEM 211 Adv Organic Chemistry II	3
CHEM 210 Adv Organic Chemistry I	3	CHEM 211L Organic Chemistry II Lab	1
CHEM 210L Adv Organic Chemistry I Lab	1	MATH 223 Applied Statistics and Data Analysis	3
PHYS 260 Physics for Health Sciences	4	BIOL 323 Human Anatomy & Physiology II	3
BIOL 322 Human Anatomy & Physiology I	3	BIOL 323L Human Anatomy & Physiology II Lab	1
BIOL 322L Human Anatomy & Physiology I Lab	1	CORE+ GE Outcome (C3, 03, R 1, R2, R3, E 1 or E2)	3
CORE+ GE Outcome (C3, 03, RI, R2, R3, El or E2)	3	PHAR 251 Professional Practice Development	1
PHAR 250 Professional Practice Development	1	PHIL 221 Health Care Ethics (C3)	3
Total Total	16	Total	18
Pharmacy Third Year			
		BIOL 412 Microbiology	3
BIOL 302 Cell Biology	3	BIOL 412L Microbiology Lab	1
CHEM 400 Biochemistry	4	PHAR 351 Intro to Pharmacy Practice 2	3
PHAR 350 Intro to Pharmacy Practice 1	3	PHAR 362 Pharmaceutics/Pharmacokinetics 2	3
PHAR 361 Pharmaceutics	4	PHAR 363 Pharmacy Practice Skills	1
PHAR 391 Intro to Pharmacy Practice Exp 1	1	PHAR 370 Physical Assessment for Pharmacy	3
PHAR 411 Advanced Self-Care 1	2	PHAR 380 Intro Pharmacology & Med Chem	3
Total Control of the	17	PHAR 392 Intro to Pharmacy Practice Exp 2 (U1) Total	1 18
Pharmacy Fourth Year PHAR 463 PP&T Respiratory Diseases	2	PHAR 460 PP&T Immunol & Connective Tissue	4
PHAR 466 PP&T Cardiovascular Diseases	5	PHAR 469 PP&T Influence & Conflective rissue	4
PHAR 476 PP&T Cardiovascular Diseases	3	PHAR 473 PP&T Endocrinology & Metabolism	5
PHAR 482 Pharm Practice Skills II	3 1	PHAR 483 Pharm Practice Skills III	1
PHAR 491 Early Practice Experience I	1	PHAR 492 Early Practice Experience II	
· · · · · · · · · · · · · · · · · · ·	5		1 3
Pharmacy Electives Total	5 17	Pharmacy Electives Total	18
Pharmacy Fifth Year			
PHAR 553 Pharmacoeconomics	3	PHAR 551 Pharmacy Administration	3
PHAR 560 PP&T Neurologic Diseases	4	PHAR 552 Pharmacy Law	2
PHAR 563 PP&T Hematology/Oncology	4	PHAR 590 Pharmacy Research	2
PHAR 569 PP&T Gastrointestinal Diseases	3	PHAR 592 Intermediate Practice Experience II	1
PHAR 584 Pharm Practice Skills IV	1	PHAR 599 Application of Pharmacy Practice	5
PHAR 591 Intermediate Practice Experience I	1	Pharmacy Electives	4
Pharmacy Electives	2	Total	17
otal	18		

Creating Site-Specific Objectives

Preceptors are strongly encouraged to develop site-specific learning objectives. The learning objectives for University of Findlay students are specifically designed to give an overview of community and institutional pharmacy practice, but we understand that many sites do not fit the mold of a traditional "community" or "institutional" pharmacy practice site. Please consider creating a few site-specific learning objectives and/or activities you would like students to complete.

When creating objectives, it can be hard to decide where to begin. Bloom's Taxonomy is a tool used by educators to help create objectives designed to address different levels of cognitive complexity. Feel free to use this as a guide to help you in creating learning objectives.

Bloom's Taxonomy Putting information together in an innovative way. **EVALUATING** Making judgements based on a set of guidelines. Breaking the concept into parts and ANALYSING understand how each part is related Use the knowledge gained in new **APPLYING** Making sense of what you have UNDERSTANDING Recalling relevant knowledge from REMEMBERING long term memory

Action Verbs

Depending on the level of cognition you would like your student to achieve, choose an action verb to start off your learning objective. Keep in mind that your students will be in their first, second, or third professional years of pharmacy school.

Remembering	Understanding	Applying	Analyzing	Evaluating	Creating
Define	Classify	Choose	Appraise	Appraise	Assemble
Duplicate	Describe	Demonstrate	Compare	Argue	Construct
List	Discuss	Employ	Contrast	Defend	Design
Memorize	Explain	Illustrate	Criticize	Judge	Develop
Reproduce	Identify	Interpret	Differentiate	Select	Formulate
Repeat	Locate	Operate	Discriminate	Support	Write
	Recognize	Schedule	Distinguish	Value	
	Report	Solve	Examine	Evaluate	
	Select	Use	Question		
	Translate		Test		
	Paraphrase				

Student Evaluation of Preceptor & Site

The following form will be completed by your student at the end of each experience. To maintain objectivity in grading, you will not be able to see the student's evaluation of you until you have completed the student's evaluation (additionally, the student will not be able to see your evaluation of them until this form is complete). Once both evaluations are complete, you will be granted access to review the student's evaluation of you on RxPreceptor/CORE ELMS.

Please evaluate the preceptor and site according to the following scale: 4 = Exceeds Standards, 3 = Meets Standards, 2 = Partially Meets Standards, 1 = Does Not Meet Standards

Preceptor Quality	Evaluation	Comments
The preceptor explained what was expected of you and any site-specific requirements prior to starting the experience.	4 3 2 1	
The preceptor provided regular feedback on the quality of your work throughout the experience.	4 3 2 1	
The preceptor was a positive healthcare role model to both you and the patients.	4 3 2 1	
The preceptor was knowledgeable in his or her area of expertise.	4 3 2 1	
The preceptor communicated to you in a professional and appropriate manner.	4 3 2 1	
Site Quality	Evaluation	Comments
The site provided sufficient opportunity for me to meet all the UF course specific objectives.	4 3 2 1	
The site provided sufficient opportunity for me to meet all of the site-specific objectives. (Those above and beyond UF objectives)	4 3 2 1	
The resources were adequate to complete the rotation.	4 3 2 1	
The site promoted an environment conducive for independent and guided learning.	4 3 2 1	

Preceptor Strengths:

Areas where the Preceptor could improve:

Site Strengths:

Areas where the Site could improve (please be specific):

Trouble-shooting

Call the Experiential Office! We are here to help and would be happy to help guide you through **any** situation you are dealing with. We commonly help with the following issues by providing strategies for working with and developing students with:

- Gaps in their knowledge-base
- Communication difficulties
- Professionalism issues

It may be that you will not be able to address the student's issues during their IPPE rotation with you, BUT we still want to know if you have concerns. If you are concerned about a student, please let us know. We will meet with the student to address areas of concern and work with them to help address those issues. We find that students who have issues on IPPEs also struggle in other areas and are more likely to struggle during APPEs and beyond. We strongly believe that the students are better off if issues are identified early so they know what to work on in order to become a successful pharmacist.

For any issues you encounter with IPPE student, please contact:

Tim Burkart, Pharm.D., BCPS, BCGP, CDP
Assistant Director of Experiential Education
(419) 434-5783
burkart@findlay.edu

Bloodborne Pathogens Exposure Procedure

Background:

Bloodborne pathogens are infectious microorganisms present in blood that can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV), hepatitis C virus (HCV), and human immunodeficiency virus (HIV), the virus that causes AIDS. Student and Health Care Providers (HCP) exposed to bloodborne pathogens are at risk for serious or life-threatening illnesses. All healthcare providers and students should use appropriate practices for handling and disposing of contaminated sharps or specimens. In the event an exposure does occur, the following should be followed.

Purpose:

To establish a clear set of directives in the event a student or faculty/staff member is exposed to a possible bloodborne pathogen (BBP) and to provide the proper precautions and steps to be carried out if exposure to any BBP occurs to any student or faculty/staff member.

Procedure:

1. Treat Exposure Site

- a. The student or faculty/staff member should take immediate action to clean the affected area following any needle stick, injury, or other incident that causes the student or faculty/staff member to be exposed to a source patient's blood or other body fluid.
 - i. Skin exposures
 - 1. The area should be washed thoroughly with soap and water
 - 2. Wounds or punctures may be cleaned with an antiseptic such as an alcohol-based hand hygiene agent
 - ii. Mucosal surfaces (mouth, nose, and eye exposure)
 - 1. These areas should be flushed with large amounts of water or normal saline for at least 10 minutes
- b. Follow the site's policy, if applicable, to obtain care as soon as possible
 - i. Employee or student to seek medical attention within the first hour of exposure to a potential BBP

2. Report and Document Exposure

- a. Students should inform their clinic supervisor/preceptor of the incident immediately. The supervisor should then report to the department chair and to Cosiano Health Center. Faculty, staff, and students may seek care with their personal healthcare provider or with Cosiano Health Center on campus.
- b. Source to complete the "Source Individual Consent Form"
 - i. This can be performed by clinic supervisor or another qualified HCP
- c. Source to have testing at site (if hospital) or other medical facility agreed upon
- d. The following information should be documented regarding the recipient and incident using the "Bloodborne Pathogen Exposure Documentation" form:
 - i. Date and time of exposure

- ii. Details of the procedure being performed, including where and how the procedure was performed
- iii. Details of the exposure, including the type and amount of fluid or material and the severity of the exposure
- iv. Details about the infection status of the source (i.e. HIV positive, hepatitis B, hepatitis C, or unknown
 - A note should also state if the source status is unknown
- v. Details about the recipient's health including: hepatitis B vaccination response status, medical conditions, allergies, pregnancy or breastfeeding etc
- e. Faculty /Staff must provide documentation of any counseling, post-exposure management and follow-up to Cosiano Health Center

3. <u>Determine Need for Post exposure Prophylaxis (PEP)</u>

This will be determined by your medical provider as he or she will have the most up-todate information regarding the following:

- a. The need for PEP is determined by the type of injury and the status of the recipient
 - i. Type of exposure
 - 1. Percutaneous injury
 - 2. Mucous membrane exposure
 - 3. Non-intact skin exposure
 - 4. Bites resulting in blood exposure to either person involved
 - ii. Type and amount of fluid/tissue
 - 1. Blood
 - 2. Fluids containing blood
 - 3. Potentially infectious fluid or tissue (semen; vaginal secretions; and cerebrospinal, synovial, pleural, peritoneal, pericardial, and amniotic fluids)
 - 4. Direct contact with concentrated virus
 - iii. Infectious status of source
 - 1. Presence of HBsAg
 - 2. Presence of HCV antibody
 - 3. Presence of HIV antibody
 - 4. In the instance of an unknown source, evaluate the likelihood of exposure to a source at high risk for infection. Collect information about where and under what circumstances the exposure occurred to be assessed epidemiologically for the likelihood of transmission of HBV, HCV, or HIV
 - iv. Susceptibility of exposed person
 - 1. Hepatitis B vaccine and vaccine response status
 - 2. HBV, HCV, and HIV immune status
 - v. If any party is unsure whether to start PEP or not, they may call the PEPline for up-to –the-minute advice on managing occupational exposures to bloodborne pathogens at 888-448-4911 or visit

https://nccc.ucsf.edu/clinician-consultation/pep-post-exposure-prophylaxis/.

- b. According to the CDC, HBIG, hepatitis B vaccine and HIV PEP are most likely to be effective if administered as soon after the exposure as possible.
 - i. HBIG within 24 hours
 - ii. HBV vaccine within 24 hours
 - 1. Can be administered simultaneously with HBIG at different site
 - iii. HIV PEP
 - Start PEP medication regimens as soon as possible after occupational exposure to HIV and continue them for a 4-week duration.
 - 2. Animal studies suggest that PEP is less effective when started more than 72 hours after exposure; however, the interval after which no benefit is gained from PEP in humans is undefined. Therefore, PEP should be started even if the interval since exposure exceeds 72 hours.
 - 3. Exact regimens and recommendations for disease- specific PEP management should are provided by the CDC and are available at https://npin.cdc.gov/publication/updated-us-public-health-service-quidelines-management-occupational-exposures-human
- 4. Financial Responsibility
 - a. When a student is exposed to a potentially infectious agent during the course of regular educational activities for the University, the University will not be responsible for costs incurred by the student for treatment and follow-up of this exposure.
 - b. The "source" testing will be paid for by the college.
 - c. Any personal financial obligation incurred by an exposure is the student's responsibility.

Please refer to the most current information located on the Center for Disease Control and Prevention website: http://www.cdc.gov/niosh/topics/bbp/guidelines.html.

Resources:

CDC. Updated U.S. Public Health Service Guidelines for the Management of Occupational Exposures to HBV, HCV, and HIV and Recommendations for Postexposure Prophylaxis. MMWR: Recommendations and Reports; June 29, 2001 / 50(RR11);1-42.

CDC. Updated U.S. Public Health Service Guidelines for the Management of Occupational Exposures to HIV and Recommendations for Postexposure Prophylaxis. 2013. Available from: https://npin.cdc.gov/publication/updated-us-public-health-service-guidelines-management-occupational-exposures-human.

Source Individual's Consent Form HIV, HBV, and HCV Testing

University of Findlay – College of Pharmacy

The "Source Individual" is the person whose blood or body fluids were exposed to the healthcare provider/student.

Source Individual's Information

Name (please print):

Address:	
Telephone Number:	
Exposure Date:	
Source Individual's Statement of Understand I understand that employers/sites are require and HCV testing each time an employee or any individual. I understand that a University accidentally exposed to my blood or bodily requested. I am not required to give my cor	ed by law to attempt to obtain consent for HIV, HBV, student is exposed to the blood or bodily fluids of
	Il be kept confidential and will only be released to by care and treatment, to the exposed healthcare and to others only as required by law.
I hereby consent to:	I hereby refuse consent to:
HIV Testing	HIV Testing
HBV Testing	HBV Testing
HCV Testing	HCV Testing
Source Individual's signature:	
Legal guardian name (please print): If source is under 18 years of age Legal guardian signature: If source is under 18 years of age Date:	
Name of Medical Facility/ER where the source	ce individual will receive testing:
Contact information of testing site:	

Bloodborne Pathogen Exposure Documentation

University of Findlay – College of Pharmacy

The recipient is the employee or student exposed to a potential bloodborne pathogen. The source is the person whose blood or body fluids were exposed to the healthcare provider/student.

Name:

UF Department or Program:

Recipient Health Information

Hepatitis B vaccination response status:

Current medical conditions:

Allergies:

Incident Information

Date of Exposure:

Time of Exposure

Detail of procedure being performed at the time of exposure (including where and how the procedure was performed)

Type (blood, plasma, etc.) and amount (in mL) of fluid or material exposed:

Area exposed (skin, eyes, mucosal, etc.):

Severity of exposure:

Provide a brief description what occurred:

Treatmen ^a	Inform	nation
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For Skin Exposure:

Was the site thoroughly washed with soap and water? Circle one: Yes / No

Were wounds and punctures cleaned with an antiseptic agent? Circle one: Yes / No

For Mucosal Exposure:

Was the site flushed with water for at least 10 minutes? Circle one: Yes / No

• Did the recipient receive medical attention within the first hour of exposure?

Circle one: Yes / No

If no, please describe whey not and when medical attention was obtained and where it

was obtained

If yes, please describe when and where medical attention was obtained

Testing

Did the source know details of their infection status (HIV, HCV, HBV)? Circle one: Yes / No

If yes, what was the status?

Was the source asked for testing? Circle one: Yes / No

If so, did they consent to testing? Circle one: Yes / No

If not, why was the source not asked for testing?

Where did the source individual seek medical attention?

Exposed/injured Individual's signature:	Date:

UF Supervisor's signature: Date:_____

The supervisor should submit this documentation to the department chair and to Cosiano Health Center.