

2017-2018

PHRD 700-707 Course Manual



Educating Students...
...Creating Partnerships



NOTRE DAME
OF MARYLAND
UNIVERSITY

SCHOOL OF PHARMACY



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Section One

School of Pharmacy Vision, Mission, and Values

Office of Experiential Education Mission

School of Pharmacy Vision

To provide exceptional pharmacy education by creating a model learning community dedicated to the transformation of societal health.

School of Pharmacy Mission

We educate student pharmacists to be compassionate, ethical professionals who improve medication use and provide quality patient care to a diverse population. We develop leaders and advance public health.

Our Values

The faculty, staff and student pharmacists pledge to work together to achieve our vision and mission in an environment that lives by and embraces the following values:

- Altruism
- Collaboration
- Excellence
- Innovation
- Integrity

Office of Experiential Education Mission

The Office of Experiential Education (OEE) at Notre Dame of Maryland University, School of Pharmacy is committed to student learning and pharmacy practice in an environment that embodies quality, values partnerships, and fosters collaboration. Our mission is to provide students with diverse and challenging Introductory and Advanced Pharmacy Practice Experiences that will prepare them to be successful practitioners in any practice setting.

Office of Experiential Education
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Section Two

Program Description & Information

Advanced Pharmacy Practice Experiences

Program Description

The Advanced Pharmacy Practice Experiences are 5 week; full-time experiences during the last year of the Doctor of Pharmacy degree curriculum. Students will complete 7, 5-week rotations in which four rotations are required and three are electives. The four required rotations are Acute Care/General Medicine, Ambulatory Care, Advanced Health-System Pharmacy Practice and Advanced Community Pharmacy Practice. At least one of the three electives must be direct patient care and up to two may be non-patient care. The advanced experiences are designed for students to apply what they have learned in the didactic curriculum to real life patient and health care situations. In addition, these experiences are critical for the student to evolve from student to pharmacist and to develop into a life-long, independent learner.

The Advanced Pharmacy Practice Experiences also serve as an opportunity for students to integrate the tenets of professionalism into practice. Professional socialization is the process by which an individual develops the attitudes, values and beliefs of a professional. The process of professional socialization starts the first day of pharmacy school and needs to be continually emphasized and practiced over time. Student pharmacists are members of the pharmacy professional community. As such, it is important for a student to build and reinforce a professional identity upon the principles of integrity, ethical behavior, honesty, fairness and mutual respect. It is important for faculty, preceptors, practitioners, peers and other health care professionals to model the skills, behaviors, attitudes and values of the profession.

The sites to which the students are assigned will vary somewhat in the type of experience they can provide. Each student's experience will vary slightly from students at other sites; however, in order to ensure the same competencies are achieved by all students, a standard set of learning objectives and method of evaluation will be utilized by all preceptors.



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Advanced Pharmacy Practice Experiences 2017-2018 Rotation Calendar

University Holidays and other dates students are OFF of rotation

| | |
|--------------------------|------------------------|
| May 29, 2017 | Memorial Day |
| July 4, 2017 | Independence Day |
| September 4, 2017 | Labor Day |
| January 15, 2018 | Martin Luther King Day |
| March 30 – April 2, 2018 | Holiday Break |

| <u>Block</u> | <u>Rotation dates</u> | <u>Evaluation Due (9 am)</u> |
|------------------------------|-------------------------------|-------------------------------------|
| Rotation # 1 | May 15 – Jun 16, 2017 | June 14 |
| Rotation # 2 | Jun 19 – Jul 21, 2017 | July 19 |
| Rotation # 3 | Jul 24 – Aug 25, 2017 | August 23 |
| Rotation # 4 | Aug 28 – Sept 29, 2017 | September 27 |
| Rotation # 5 | Oct 2 – Nov 3, 2017 | November 1 |
| <i>Capstone Requirement:</i> | <i>Nov 6 – Nov 8, 2017</i> | <i>Career Prep Workshop</i> |
| Rotation # 6 | Jan 8 – Feb 9, 2018 | February 7 |
| Rotation # 7 | Feb 12 – Mar 16, 2018 | March 14 |
| Rotation # 8 | Mar 19 – Apr 20, 2018 | April 18 |
| <i>Capstone Requirement:</i> | <i>April 30 – May 8, 2018</i> | <i>Capstone Events</i> |

*Standardized to Rotation #1 starting on the 3rd Monday in May and Rotation #6 starting on the 2nd Monday in January of each year.

**NAPLEX Review Sessions on the 2nd and 4th Fridays starting in Rotation #4 through #8.

School of Pharmacy Curriculum

| Year | Fall Semester - (20 credits) | Credits | Spring Semester - (17 credits) | Credits |
|-------------|---|----------------|---|----------------|
| P-1 | PHRD 300: Foundations for Pharmacy Practice | 2 | PHRD 306: Pharmacist Care Lab II | 2 |
| | PHRD 301: Pharmaceutical Calculations | 2 | PHRD 308: Developing the Leader Within | 2 |
| | PHRD 302: Pharmacy & the U.S. Health Care System | 3 | PHRD 309: Immunology | 3 |
| | PHRD 303: Pharmaceutics I & Lab | 4 | PHRD 310: Care of Diverse Populations | 3 |
| | PHRD 304: Pharmacist Care Lab I | 2 | PHRD 311: Pharmaceutics II & Lab | 4 |
| | PHRD 305: Biochemistry | 4 | PHRD 312: Pharmacy Practice Management | 3 |
| | PHRD 307: Applied Biomedical Sciences Workshop | 3 | | |
| | Fall Semester - (17 Credits) | Credits | Spring Semester- (18-20 credits) | Credits |
| P-2 | PHRD 400: Biopharmaceutics & Clinical Pharmacokinetics | 3 | PHRD 405: Women's Health Issues | 2 |
| | PHRD 401: Clinical Research Design | 3 | PHRD 406: Pharmacist Care Lab IV | 1 |
| | PHRD 404: Pharmacists Care Lab III | 1 | PHRD 408: Pharmacy Law & Ethics | 3 |
| | PHRD 410 or 412: Introductory Pharmacy Practice Experiences I or II | 3 | PHRD 410 or 412: Introductory Pharmacy Practice Experiences I or II | 3 |
| | PHRD 413: Pharmacotherapeutics I -Principles of Medicinal Chemistry & Pharmacology* | 2 | PHRD 417: Pharmacotherapeutics IV – Infectious Diseases | 4 |
| | PHRD 414: Pharmacotherapeutics II Principles of Pharmacotherapeutics | 2 | PHRD 418: Pharmacotherapeutics V – Gastrointestinal Disorders | 2 |

| | | | | |
|------------|---|----------------|--|----------------|
| | PHRD 416: Pharmacotherapeutics III - Self-Care & Dermatologic Disorders | 3 | PHRD 419: Pharmacotherapeutics VI - Hematologic, Rheumatologic Disorders & Surgery | 2 |
| | | | Professional Elective*** | 1-3 |
| P-3 | Fall Semester - (17-19 credits) | Credits | Spring Semester-(16-18 credits) | Credits |
| | PHRD504: Pharmacists Care Lab V | 1 | PHRD 506: Pharmacists Care Lab VI | 1 |
| | PHRD 505: Human Resources Management | 3 | PHRD 508: Complementary Medicine & Human Nutrition | 3 |
| | PHRD 507: Public Health | 3 | PHRD 509: Evidence Based Medicine | 2 |
| | PHRD 510: Longitudinal Care I | 1 | PHRD 512: Longitudinal Care II | 1 |
| | PHRD 513: Pharmacotherapeutics VII - Pulmonary Disorders | 2 | PHRD 516: Pharmacotherapeutics X - Endocrine Disorders & Women's Health | 2 |
| | PHRD 514: Pharmacotherapeutics VIII - Cardiovascular Disorders | 4 | PHRD 517: Pharmacotherapeutics XI - Neoplastic Disorders | 2 |
| | PHRD 515: Pharmacotherapeutics IX - Renal Disorders | 2 | PHRD 518: Pharmacotherapeutics XII - Central Nervous System Disorders | 4 |
| | Professional Elective*** | 1-3 | Professional Elective*** | 1-3 |

| P-4 | Summer/Fall/Spring- (36 credits)** | Credits | | |
|------------|---|----------------|---------------------------------------|--|
| | PHRD 700 Advanced Pharmacy Practice Ambulatory Care | 5 | | |
| | PHRD 701 Advanced Pharmacy Practice Acute Care General Medicine | 5 | | |
| | PHRD 702 Advanced Health Systems Pharmacy Practice | 5 | | |
| | PHRD 703 Advanced Community Pharmacy Practice | 5 | | |
| | PHRD 704 Advanced Pharmacy Practice Elective I | 5 | | |
| | PHRD 705 Advanced Pharmacy Practice Elective II | 5 | | |
| | PHRD 706 Advanced Pharmacy Practice Elective III | 5 | | |
| | PHRD 707 Advanced Pharmacy Practice & Education Capstone | 1 | Total Program Credits= 144-146 | |

**All Pharmacotherapeutics courses are taught sequentially within a semester*

***All APPE are five weeks in duration except 707*

****Students are required to complete a minimum of 6 to 8 hours of professional electives for graduation, which must be accomplished over a minimum of three (3) courses.*



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Learning Outcomes for the Doctor of Pharmacy Curriculum

October 23, 2008

*Approved by Curriculum Committee on October 23, 2008
Revised December 15, 2003; rev. 2/17/09; rev. 7/30/09*

Preamble

The learning outcomes described herein represent the terminal abilities required of a graduate of the Doctor of Pharmacy Program at the School of Pharmacy at College of Notre Dame of Maryland, and their professional responsibility beyond graduation to adapt to new and evolving information in the field of pharmacy. These outcomes were derived by consensus of the faculty during its deliberation at a series of meetings of the Curriculum Committee in fall 2008. The three practice functions (domains) described in the 2004 Center for the Advancement of Pharmaceutical Education (CAPE) Educational Outcomes provide the main framework for the learning outcomes at College of Notre Dame of Maryland: 1) Patient-centered Care, 2) Systems Management, and 3) Public Health. In addition, a fourth domain was created by the Committee through the process of outcomes development: 4) Leadership and Professional Competency. The general abilities are integrated within these four domains.

Domain 1: Patient-Centered Care

Provide patient-centered care in cooperation with patients, prescribers, and other members of an interprofessional health care team based upon sound therapeutic principles and evidence-based data, taking into account relevant legal, ethical, social, economic, and professional issues, emerging technologies, and evolving pharmaceutical, biomedical, sociobehavioral, and clinical sciences that may impact therapeutic outcomes.

- 1. Apply knowledge of biomedical and pharmaceutical sciences and evolving scientific technologies to make medication therapy decisions and improve patient outcomes**
- 2. Evaluate and apply scientific and clinical literature to patient care**
- 3. Display professional behavior when interacting with patients, caregivers, other health care professionals and the public**

4. **Develop treatment plans to ensure optimal therapeutic and disease outcomes**
5. **Communicate with patients, caregivers, health care professionals and the lay public to provide safe and optimal use of medications and related devices**
6. **Provide individual and population-based care that considers the ethnic, cultural, socioeconomic, physical, and psychosocial influences on patient care outcomes**
7. **Ensure the safe and accurate delivery of medications and related devices**
8. **Comply with and uphold the laws and ethical standards of and related to the practice of pharmacy**

Domain 2: Systems Management

Manage and use resources of the health care system, in cooperation with patients, prescribers, other health care providers, and administrative and supportive personnel, to promote health; to provide, assess, and coordinate safe, accurate, and time-sensitive medication distribution; and to improve therapeutic outcomes of medication use.

9. **Manage pharmacy systems and personnel in the delivery of medications and related devices**

Domain 3: Public Health

Promote health improvement, wellness, and disease prevention in cooperation with patients, communities, at risk populations, and other members of an interprofessional team of health care providers.

10. **Promote public health regarding disease prevention and health maintenance through advocacy, education, and provision of health services**

Domain 4: Leadership and Professional Competency

Advance the profession through advocacy, problem solving, and engagement in political efforts on behalf of the patient and profession, while advancing oneself by maintaining professional competence through life-long learning.

- 11. Lead the profession to promote safe medication use and to improve health care**
- 12. Maintain professional competence**

Section Three

Policies and Procedures

Attendance Policy

Students are required to be at their sites for 5 full-time weeks. Attendance is mandatory and consistent, timely attendance is expected. Students are expected to conduct themselves in experiential courses as if they were employees of the site. Although hours of attendance will vary by site, students are expected to participate in learning activities for a minimum of 40 hours per week. Preceptors may require additional hours of attendance based upon the facility's hours of operation.

No more than **3 days** may be missed from a rotation for any reason, or the student will receive an incomplete grade for the rotation. The rotation must then be repeated. Any missed time must be made up at the discretion of the preceptor. The student must complete and submit the 'Experiential Education Absence Request Form' to the preceptor and OEE for any absence. The form must have arrangements documented for how the missed time will be made up, the preceptor's signature and uploaded for the experiential director's review.

- In case of illness: The preceptor and Office of Experiential Education (OEE) must be notified immediately. The student must have a physician's note for any absences ≥ 2 days. Students must submit a signed Absence Request Form via e-value.
- Residency/Job interviews: Students requesting time off for residency/job interviews must first obtain prior approval from the preceptor before making arrangements for the interview. Students must provide a copy of the interview invitation letter to the preceptor and OEE with their Absence Request Form via e-value.
- Professional meetings: Students are permitted to be absent once during the P4 year for attendance at a professional meeting. Students requesting time off for a professional meeting must obtain prior approval from the preceptor before making arrangements. The student must provide the preceptor and OEE with proof of the meeting registration and submit an Absence Request Form via e-value.
- Holidays – The Experiential Program will observe all Notre Dame of Maryland University holidays except for the week of spring break. Please refer to the rotation schedule in the manual for a complete list of holidays. Times missed due to holidays observed by the site, but are not official University holidays (e.g. Veteran's Day) may be made up at the discretion of the preceptor. P4 students are not granted a Summer Break, Fall Break or Spring Break.

In case of an emergency, illness, or tardiness, students must notify the preceptor and the OEE, via email (if possible) and telephone, immediately. Students must arrange with the preceptor to make up any missed time.

In unusual circumstances when the student must plan for an absence, prior approval must be obtained from the preceptor and OEE. The student must complete and submit the 'Experiential Education Absence Request Form' to the preceptor and OEE no later than 1 week prior to the planned absence. The form must have arrangements documented for how the missed time will be made up, the preceptor's signature and uploaded for the experiential director's review. Failure to obtain prior approval will be considered an unexcused absence and may result in failure of the rotation.

Professionalism Policy

Student pharmacists are also members of the pharmacy professional community. As such, it is important for a student to build and reinforce a professional identity upon the principles of integrity, ethical behavior, honesty, fairness and mutual respect. As a result, students shall conduct themselves in a professional manner at all times and follow all established School and practice site policies. Adherence to these principles is vital to the development of a professional relationship between the pharmacist, his/her patients and society. Students agreed to live by these principles upon acceptance into the School of Pharmacy.

Professionalism is defined as the active demonstration of the attributes of a professional. These attributes include: knowledge and skills of the profession, commitment to self-improvement of skills and knowledge, service orientation, pride in the profession, covenantal relationship with patient, creativity and innovation, conscience and trustworthiness, accountability for one's work, ethically sound decision making and leadership. Professional socialization is the process by which an individual develops the attitudes, values and beliefs of a professional. The goal of professional socialization is to develop professionalism as described above and this process must begin at the beginning of an individual's professional education. Professionalism is demonstrated by a student who:

Communication & Interpersonal Interactions

- Uses appropriate verbal & non-verbal communication
- Communicates assertively – actively and appropriately engages in dialogue or discussion
- Is non-judgmental – demonstrates an attitude of open-mindedness towards others and situations; does not "stereotype" others or prejudge situations

- Is respectful – demonstrates regard for self, standardized patients, peers, faculty, staff and university property
- Is empathetic – demonstrates appreciation of others' positions; attempts to identify with others' perspectives; demonstrates consideration towards others
- Is diplomatic – is fair and tactful in all dealings with patients, peers, faculty and staff
- Is confident – acts & communicates in a self-assured manner, yet with modesty and humility
- Is cooperative – i.e. non-argumentative; willing and helpful
- Is truthful in all interactions, being straightforward

Email Communication

As per the Notre Dame of Maryland University Catalog, the official communication will be Notre Dame of Maryland email. Personal email accounts will not be utilized for communication by the OEE. Students should be aware that email is considered a formal and official mechanism of communication. It is in the student's best interest to observe proper form, etiquette, and grammar. Email is a reflection on an individual's professionalism. While email is a convenient mechanism for communication, issues that the student believes may be of a more serious nature should be handled face-to-face with the preceptor and/or OEE. The OEE and preceptors will not generally respond to emails after business hours or on holidays or weekends.

Work Ethic

- Is punctual
- Is reliable, dependable, accountable for one's actions
- Behaves in an ethical manner
- Produces quality work
- Accepts constructive criticism and modifies behavior if necessary
- Is self-directed in undertaking tasks, self-motivated
- Handles stress – remains calm, levelheaded, and composed in critical, stress or difficult situations
- Is an active learner – seeks knowledge; asks questions, searches for information, takes responsibility for their own learning
- Follows through with responsibilities – if task is left incomplete or problem is not resolved, student seeks aid
- Demonstrates a desire to exceed expectations – goes "above and beyond the call of duty", attempts to exceed minimal standards and requirements for the tasks, assignments, and/or responsibilities
- Utilizes time efficiently – allocates and utilizes appropriate amounts of time to fulfill responsibilities; utilizes others' time wisely

All cell phones and pagers are to be on silent mode or turned off. Cell phones, pagers, and text messages are **NOT** to be answered at any time. Cell phone use is only acceptable when accessing drug information resources or when permitted by the preceptor for emergency purposes.

Professional Dress Policy

Students will dress professionally and pay attention to personal hygiene in the practice environment. Attire and personal grooming should not distract from nor compromise the professional integrity of the School of Pharmacy or the pharmacy profession. The following is considered appropriate attire:

- a) **all** students are to wear a clean, white, long-sleeved lab jacket (provided in the P-1 year) with the School of Pharmacy logo and a name badge
- b) all students are to wear professional attire
 - men: slacks, collared shirt with tie, dress shoes and socks
 - women: slacks/skirts, dresses, dress shoes
- c) hair (including facial hair) is to be neatly trimmed and styled
- d) fingernails are to be neat, clean and well maintained – acrylic nails and nail polish is not permitted at any time during the experience as it is in violation of USP 797 clean room standards
- e) body piercings should have limited visibility and tattoos should be covered
- f) perfume and scented creams are not allowed in the practice environment due to the potential to exacerbate patient allergies and lung conditions

Students are expected to adhere to any other site specific dress policies.

Mini-skirts, jeans, sneakers, low-cut dresses, tee shirts, torn clothing, baseball caps, etc. are **NOT** professional dress. Students should note the difference between professional attire and fashionable attire. In addition, students will be spending a great deal of time standing and walking, please wear appropriate shoes.

The following types of clothing are not allowed at any time:

- Hats, caps or other headgear are not to be worn indoors (head covers that are required for religious purposes or to honor cultural tradition are permitted).
- Tank tops, tube tops, halter tops, spaghetti strings, off-the-shoulder, or mid-drift showing tops that do not cover to the waist.
- Clothes that are sheer, low cut, or revealing.
- Slacks, skirts or pants that expose the mid-drift skin.
- Short shorts, mini-skirts, or pajama bottoms.
- Flip flops, thong sandals, or shower shoes.
- Clothing with obscene or lewd text/pictures, depictions of alcohol, drugs or other smoking materials.

Students who are considered to be in violation of the professional dress policy will be asked to leave the site and return in appropriate attire. The OEE will be notified as soon as possible of any students who are asked to leave the rotation. Students will be responsible for making up any time missed at the site.

Social Media Policy

Social Media are powerful communication tools defined as media intended to be disseminated through social interaction, created using highly accessible and scalable publishing techniques. Because of the emerging nature of social media platforms, these guidelines do not attempt to name every current and emerging platform. Rather, they apply to those cited and any other online platform available and emerging including social networking sites and sites with user-generated content. Examples include, but are not limited to, You Tube, Facebook, iTunes, LinkedIn, Twitter, Flickr, MySpace and Blogs.

The following guidelines must be followed by all students of Notre Dame of Maryland University, School of Pharmacy.

- Protect Confidential and Proprietary Information: Do not post confidential or proprietary information about the University or School, students, employees or alumni.
- Respect of Copyright and Fair Use: Content that is threatening, obscene, a violation of intellectual property or privacy laws, or otherwise injurious or illegal, may not be used.
- Think before Posting: There are no “private” social media sites. Archived material can re-emerge years after its publication date, and comments can be forwarded or copied. Be mindful of any photos, videos or text selected for posting on any social media site.
- Avoid University Logos for Endorsements: Do not use Notre Dame of Maryland University logos or any other University or School images or iconography on personal social media sites.
- Respect University and School Image: In keeping with the traditions of Notre Dame of Maryland University, School of Pharmacy, be professional, thoughtful and respectful. As a representative of the School of Pharmacy, postings can impact the image of the University as well as that of the individual.
- Terms of Service: Adhere to the *Terms of Service* of any social media platform employed.

Disciplinary Policy

Notre Dame of Maryland University, School of Pharmacy student pharmacists are expected to display high standards of character both in their didactic and experiential coursework. Student pharmacists in the Experiential Program will be expected to adhere to the School's Professional Policy, Student Pledge of Professionalism,

Pharmacist Code of Ethics and Oath of the Pharmacist. In addition, students must respect and adhere to specific rules and regulations governing individual practice sites. Student deviations from the rules and regulations set forth by the Advanced Pharmacy Practice Experience (APPE) Manual and/or those of specific site(s), will incur disciplinary action. This may include, but is not limited to:

- Dismissal from a practice site, temporarily or indefinitely
- Failure of a rotation
- Dismissal from the School of Pharmacy

The preceptor or other official of the affiliated site has the authority to remove a student from the site, or request removal of the student from the site for any reason determined necessary by the preceptor or official. The preceptor(s) or director of pharmacy will immediately notify the OEE of incidences or misconducts. The OEE will work with the preceptor or director of pharmacy in determining the course of action needed to address the incident. In such cases, the OEE will also file an Incident Report with the Office of the Dean.

Dismissal from sites

The School of Pharmacy and sites develop a collaboration and partnership in which both parties sign a legally binding affiliation agreement recognizing the nature of the working relationship. As such, this process takes a great deal of time and effort and both the SOP and the site must gain from the collaboration. Students are expected to maintain the highest professional standards and under certain circumstances the OEE reserves the right to cancel its obligation to provide a rotation assignment for students. Students involved in any illegal actions while on rotation will be removed from the site and denied the privilege of participation in the rotation. In addition, students suspected of being under the influence of any drug substance for non-medical purposes while on rotation, may also be removed from the site and denied participation privilege. Please refer to the most current version of the Notre Dame of Maryland University, School of Pharmacy Handbook for more details regarding this issue. It is imperative that we protect students and rotation sites, honor our affiliation agreements, and maintain the integrity of the program.

Academic Honesty Policy

Students who violate the Intellectual Responsibility and Plagiarism Policy as stated in the most current version of Notre Dame of Maryland University, School of Pharmacy Handbook will be subject to disciplinary action, which may include failure of the course.

Site Selection

All rotation placements will be completed at sites currently affiliated with Notre Dame of Maryland School of Pharmacy. Students will not be assigned to sites where there would be a potential for conflict of interest. Students will not receive remuneration for participation in the rotation, are responsible for travel to and from the site and any expenses related to the rotation.

Grading & Evaluation

Advanced Pharmacy Practice Experiences are graded experiences. The preceptor is responsible for assigning the grade in e-value. Successful completion of all rotation assignments and activities, achievement of the course objectives and a passing grade for professionalism will warrant a passing grade for the rotation. Failure to pass the professionalism evaluation, despite a passing grade for the competency evaluation will result in failure of the rotation. In addition, **students must earn at least a 70% on the competency assessment in order to pass the rotation.**

In order for students to receive feedback regarding areas of strength and areas for improvement, preceptors will provide students with a mid-rotation evaluation. Students are expected to perform a self-assessment at the midpoint and improve performance utilizing the feedback from the preceptor in areas noted for improvement. A final evaluation will also be provided to students at the conclusion of each rotation.

Grade Scale

93 – 100 = A

87 – 92 = B+

80 – 86 = B

75 – 79 = C+

70 – 74 = C

< 70 = F

Learning Agreements

The preceptor and student learning agreement should be reviewed at the start of the rotation. The agreement contains a sample of the evaluation form the preceptor will complete in e-value at midpoint and the end of the rotation. The preceptor and student should review the evaluation criterion and expectations for the rotation together. Both the preceptor and student should sign the learning agreement where indicated at the

bottom of the document. Please be sure to complete the "Educational Activities" section with the appropriate educational activities and percentage each activity is worth.

Rotation Evaluations

As part of the quality assurance of the experiential program, rotation evaluations must be completed by the students in e-value no later than **9:00 a.m.** on the given deadline date (see rotation calendar). Students may not submit a rotation evaluation any earlier than the end of the 4th week of rotation. Failure to submit a rotation evaluation by the deadline will result in a lowering of the student's grade by 0.5 (e.g. A to B+) for each business day the evaluation is overdue. Evaluations must be done professionally. Evaluations deemed to be unprofessional by the OEE will result in the lowering of the student's professionalism grade which may result in failure of the rotation. Please plan ahead and ensure rotation evaluations are completed on time. Students experiencing technical difficulties should contact the OEE immediately, so issues may be resolved in a timely fashion.

Preceptors should regularly save their work in e-value as they are completing the student evaluations. Once the evaluation form is submitted, the information will be accessible to the student **if** the student has completed the site/preceptor evaluations. Preceptors will review and discuss the student's evaluations with them. If preceptors do not want the student to have access to the evaluation prior to the planned discussion time, they should save the data in e-value and only submit the evaluation to e-value just before the discussion with the student. Preceptors should have the student log into e-value during this discussion to view the evaluation together. If the student did not complete the site/preceptor evaluation, then the student evaluation by the preceptor will not be accessible. Student should complete this item in order to move forward with the evaluation process. Once the evaluation is submitted into e-value, changed cannot be made. Preceptors must contact the OEE if a change in the evaluation is warranted. If the preceptor needs to provide the student with a final evaluation before the last day of the rotation, then the student must complete the site/preceptor evaluation before the final grade is received from the preceptor.

Preceptors will receive student evaluations of the preceptor, site, and overall rotation after precepting at least two students. This data will be accessible in aggregate form and may be viewed at any time.

MyFolio (e-portfolio)

Students are expected to keep an electronic portfolio of their completed work throughout the APPE year. Preceptors will have access to their assigned student's portfolio in order to review student performance and assignments on current and past rotations. This access will span 30 days prior, during, and 30 days after the rotation.

Preceptors should collect assignments, provide feedback and evaluate the work in a manner they deem appropriate. The student will upload all completed assignments into their electronic portfolio (i.e. e-value) with the preceptor comments, evaluations, as well as the final work product. Students should de-identify patient information prior to uploading the work. Maintenance of the portfolio is the student's responsibility.

NAPLEX Review Policy

Students are required to attend NAPLEX Review Sessions beginning in Block 4 through Block 8 of the academic year. Attendance is mandatory and timely attendance is expected. Students are expected to engage in ten, 4-hour sessions (1:00-5:00 pm) held on the 2nd and 4th Friday of each APPE block during the fall and spring semesters.

Guidelines

- If students have an OFF block during Blocks 4,5,6,7, 8 OR a residency interview needs to be scheduled, the student is NOT required to attend the session; however, students may still participate in person or online via JoinMe.
- If students have an APPE rotation in another time zone, they are NOT required to attend the session, but may participate online via JoinMe.
- If students have an APPE rotation >50 miles away from campus, the student IS required to attend the session and JoinMe will be an online option for those students.
- Please contact Dr. Culhane prior to the review session in the case of an emergency, illness or any other extenuating circumstance.

This activity **is** part of your APPE rotation, thus attendance is **mandatory**. If an absence is not excused by the OEE, the OEE reserves the right to lower a student's professionalism score to an ***unacceptable (0)***, which will result in failure of the rotation.

Safety Policy

Several professional practice experiences will be offered in Baltimore City and its surrounding suburbs. These are urban environments, which require students to be aware of and take responsibility for their safety. Being alert, proactive, and using common sense are ways in which to maintain safety. As with any city environment, using good judgment is always recommended. Listed below are a few safety suggestions to keep in mind during professional practice experiences:

- Locate the security station at each rotation site and keep the phone number with you at all times
- Walk with others (when possible) while entering or leaving a rotation site
- When parked at or near rotation sites, keep all valuables located in your car out of sight
- Avoid isolated and dark areas
- Carry your cell phone and keep it accessible
- When available, use the institution's shuttle service to area parking lots, public transportation, etc.
- Immediately report any violations of safety to the site's security office and OEE

Accommodations for Students with Disabilities

Students, who have identified themselves as disabled and have documented their disability, will be provided reasonable accommodations in the course in accordance with section 504 of the Rehabilitation Act and the Americans with Disabilities Act of 1990. If accommodations are required, students with disabilities should identify themselves to the University Disability Support Services Office [410-532-5434], provide the DSS office with an assessment by an appropriate provider (e.g. medical doctor or licensed psychologist), and present a completed accommodations form from the DSS office to the Assistant Dean of Student Affairs as soon as possible. Course instructors will be notified thereafter. Accommodations will not be provided until documentation is received by the SOP Dean's office.

Sexual Misconduct and Discrimination

"No person in the United States, shall, on the basis of sex, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any education program or activity receiving Federal financial assistance..." — Title IX of the Education Amendments of 1972, and its implementing regulation at 34 C.F.R. Part 106 (Title IX)

Notre Dame of Maryland University seeks to foster and maintain an atmosphere of mutual respect and concern for all members of the University community. As such, the University does not discriminate against students, faculty or staff based on sex in offering equal access to its educational programs and activities or with respect to employment terms and conditions. Sexual- and gender-based harassment and misconduct, including sexual violence, are a kind of sex discrimination and are prohibited by Title IX and the University.

NDMU is committed to maintaining an environment that is free from discrimination based on sex, and maintains that commitment by responding promptly and effectively when it learns of any form of possible discrimination based on sex. The University responds to reports of sexual harassment, including sexual violence, as part of its efforts to stop the misconduct, prevent its recurrence, and remedy its effects. In compliance with Title IX, the University has Sexual Misconduct and Sexual Harassment policies. (<http://www.ndm.edu/files/resources/ndmu-sexual-misconduct-policy-final-10012016-2.pdf>)

Please contact Dr. Nicole Culhane (410-532-5527; nculhane@ndm.edu) immediately if you have any concerns about the policy or if you suspect or are aware of any potential violation(s).

Inclement Weather Policy

The student should follow the inclement weather policy of the individual practice site. In the event of inclement weather, students must contact their individual preceptor for instructions regarding attendance. Driving conditions may be hazardous and weather conditions will differ in and outside the state, so students must contact the preceptor to determine if they should travel to the site. If the preceptor excuses the student due to weather conditions or if the student believes driving conditions would pose a safety risk, the student must discuss with the preceptor how the time missed will be made up. In addition, students must notify the OEE of the absence within 24 hours.

Requirements for Experiential Training

Students must fulfill the following requirements to meet eligibility standards for participation in APPEs. Individual sites may have additional requirements that students must complete. Students are responsible to look in e-value under Site Requirements to determine if there are any additional requirements they must complete prior to the first day of rotations. Students are required to contact their preceptor or designated contact person at least **3-4 weeks** prior to the start of the rotation. Preceptors may provide additional logistical information needed by the students. **It is the student's responsibility to fulfill these requirements. Failure to do so may result in removal from the practice site and thus failure of the rotation.**

Criminal Background Check and Drug Screening

It is common practice for agencies and/or clinical sites to have policies requiring screening and/or criminal background checks for their employees, volunteers, and

students who are assigned to the facility. Notre Dame of Maryland University, School of Pharmacy will comply with these requirements when placing students at such facilities or agencies. As a condition for enrollment and continued matriculation in academic programs involving external placements, clinical rotations, internships, or service learning experiences, students are required to participate in a criminal background check prior to matriculation. Criminal background checks will be required annually and additional drug screening tests may be required during the professional curriculum. This will be at the discretion of the School of Pharmacy or the agency sponsoring the external placement.

Notre Dame of Maryland University, School of Pharmacy will assist students in understanding and complying with the requirements; however, the responsibility for providing such information and the associated costs rests with the student- not the School of Pharmacy. Failure to submit such testing or provide such information required as a condition for admission and clinical placements by the designated due dates may result in the inability to complete program requirements and/or delay completion of the program. Similarly, results from the drug screening tests or criminal background checks may result in denial of clinical placement and/or disciplinary action on the part of the School of Pharmacy, including, but not limited to disqualification from further studies at the School.

Cardiopulmonary Resuscitation (CPR) Certification and First Aid

Students are required to obtain and maintain CPR and First Aid Certification for the healthcare provider from the American Heart Association. The students must provide proof of current certifications through e-value to the OEE in order to participate in APPEs. If the certifications expire prior to the completion of the academic program, the student must recertify and resubmit a copy of the certification cards to the OEE through e-value. Students will be responsible for the cost of the certification programs and all renewals. Students will be required to upload the certification cards into e-value and have it in their possession while on Advanced Pharmacy Practice Experiences.

Health Information

As a condition of enrollment, the Office of Admissions and Student Affairs requires all Doctor of Pharmacy students to maintain and submit proof of health insurance coverage including the effective date and renewal date at the beginning of each academic year. If the student is no longer covered under their parent(s)' plan, they may purchase a University-sponsored health insurance plan. Personal health insurance covers illness and injury in the classroom, lab situations and any off campus injuries/illnesses.

HIPAA and BBP/OSHA Training

Students are required to complete HIPAA and BBP/OSHA training before reporting to the rotation site. Training will be arranged by the OEE through the Pharmacist's Letter

Preceptor Training and Resource Network. Proof of HIPAA and BBP/OSHA certification will be maintained in e-value.

Immunizations

Students are required to have proof of immunization prior to the start of the Advanced Pharmacy Practice Experiences. Proof of immunization or certificate of waiver must be uploaded into e-value under *Immuns and Certs*. Required immunizations include tetanus DPT, polio, MMR, Tb test, meningococcal, completion of the hepatitis B vaccine series, Varicella (chicken pox) and influenza. In order to prevent the spread of influenza, documentation of this immunization or proof of contraindication must be submitted seasonally by **October 31st**. Vaccinations are at the student's expense. Students who fail to submit documentation of the required immunizations will not be permitted to participate in the Advanced Pharmacy Practice Experiences.

Individual experiential sites may require additional exams and/or immunizations. Please refer to e-value for site specific immunization requirements at least **one month** prior to the start of your first rotation. These immunizations are at the student's expense.

Students failing to submit documentation of such exams or immunizations will not be permitted to report to the practice site and thus may result in failure of the rotation.

Student Professional Liability Insurance

Students are required to carry student professional liability insurance through the Notre Dame of Maryland, School of Pharmacy group policy. This insurance premium is included in student fees and is renewed on an annual basis. This policy covers students during all approved IPPE and APPE experiences while in the program. The policy also requires appropriate student supervision while in the experiential setting.

Transportation and Housing

It is the student's responsibility to assure he/she has appropriate arrangements for transportation to and from rotation sites throughout the curriculum. Rotations begin in the first semester of the professional program. Transportation is not provided by the School. Students are not considered an agent or employee of the University and are not insured for any accidents or mishaps that may occur during any travel completed as part of the student's professional program. The School does not guarantee all required rotations will take place in the Maryland metropolitan area and students may be required to complete rotations in other cities or states. Transportation, parking, and housing costs are the student's responsibility.

Tips for Success!!!

- Always be professional, friendly, and confident!!!
- Attitude is everything! It is one of the few things you can control.
- Be flexible- pharmacy practice is unpredictable. Adaptability is one of the best qualities in a leader!
- Be inquisitive- preceptors appreciate your questions and are eager to share their wisdom.
- Communicate regularly with preceptors. If you are not sure about something – ASK.
- Expect to learn something from everyone and in every experience.
- Always look for opportunities to learn something new.
- Always stay one or two steps ahead of your preceptor. Try to anticipate the needs and report findings to your preceptor without being asked.
- Remember, preceptors are volunteering their time to educate you. Be respectful of their time and be prepared.
- Motivation is the key to SUCCESS!!!
- And Finally.....

“People don’t care how much you know until they know how much you care”

Section Four

Rotation Learning Agreements & Assessments

Rotation Learning Agreements and Assessments

The Pharmacists' Patient Care Process (PPCP)

In 2013, the Joint Commission of Pharmacy Practitioners (JCPP) adopted a vision for the pharmacy profession that states, "Patients achieve optimal health and medication outcomes with pharmacists as essential and accountable providers, within patient-centered team-based health care." The need for pharmacists to use a consistent approach to the delivery of patient care service has been recognized as important; however, the need is gaining urgency with the increasing movement towards outcomes-based reimbursement models. Additionally, as pharmacists continue to expand and evolve their patient care services, implementation of a uniform, patient care process establishes and promotes consistent expectations about pharmacist-provided patient care among health care professionals and other stakeholders within the health care system. Regardless of the care setting (acute care hospital practice to community pharmacy practice), or the type of service provided (immunizations to complex medication management services), following a consistent process of care will foster pharmacists' patient care services that are specific, predictable, and measurable.



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PHRD 700 - Ambulatory Care

Preceptor and Student Learning Agreement

This preceptor and student learning agreement should be reviewed at the start of the rotation. This document also contains a sample of the evaluation form the preceptor will complete at the midpoint and end of the rotation in E*Value. The preceptor and student should review the evaluation criterion and expectations for the rotation together and sign the learning agreement at the end of the document. Please be sure to complete the “Educational Activities” section with the appropriate educational activities and the percentage each activity is worth.

Rotation Description

This rotation is a structured, full-time, 5-week patient care experience in ambulatory care. It is designed to provide the student with the opportunity to develop and refine the skills necessary to deliver pharmaceutical care, with an emphasis on optimizing drug therapy and outcomes, to an ambulatory care patient population. Students will apply their didactic knowledge to various therapeutic issues and disease states encountered in clinical practice. Emphasis will be placed on problem-solving, critical thinking, and basic clinical skills such as obtaining medication histories, drug information retrieval and evaluation, drug therapy monitoring, and patient counseling. Interaction and communication with other health care professionals for the promotion of optimal drug therapy are stressed to help the student develop a sound professional approach to the practice of pharmacy. In addition, students are encouraged to broaden their existing competencies and incorporate their professional and personal goals into this rotation.

Rotation Objectives:

At the completion of this rotation, students will be able to:

Professionalism

- Display professional behavior when interacting with patients, caregivers, other health care professionals, and the public.
- Provide ethical patient care.
- Demonstrate the actions needed for life-long learning abilities.
- Lead the profession to promote safe medication use and improve health care.

Patient Care and Communication

- Apply knowledge of biomedical and pharmaceutical sciences and evolving scientific technologies to make medication therapy decisions and improve patient outcomes.
- Identify, retrieve, evaluate and apply scientific and clinical literature to patient care.
- Design evidence-based treatment and monitoring plans to ensure optimal therapeutic and disease outcomes.
- Identify and resolve medication therapy problems.
- Counsel patients regarding drug therapy.
- Document patient care interventions.
- Communicate with patients, caregivers, health care professionals and the lay public to provide safe and optimal use of medications and related devices.
- Demonstrate effective communication skills when interacting with diverse patient and professional populations.
- Provide individual and population-based care that considers the ethnic, cultural, socioeconomic, physical, and psychosocial influences on patient care outcomes.
- Promote public health regarding disease prevention and health maintenance through advocacy, education, and provision of health services.
- Establish collaborative professional relationships with health care team members.
- Explain how continuous quality improvement initiatives are utilized to improve and ensure quality patient care.
- Demonstrate critical thinking skills to facilitate decision making.
- Perform professional activities in compliance with HIPAA.
- Comply with and uphold the laws and ethical standards of and related to the practice of pharmacy.

Rotation Responsibilities:

Patient care responsibilities (70% of grade)

(This is not an all-inclusive list)

- Medication histories/consults
- Collect and analyze medical/medication information
- Perform targeted physical assessment as it applies to the therapeutic management of patients
- Evaluate medication regimens and identify disease prevention and detection needs as well as potential drug related problems
- Resolve drug related problems
- Design an evidence-based therapeutic plan
- Design an evidence-based monitoring plan
- Educate patients on appropriate therapy
- Document patient care activities and/or interventions using SOAP format

Educational activities (30% of grade)

- At least one major patient case presentation (5% - *template available*)
(Major indicates a level of preparation above daily patient discussions)
- One disease state presentation to health care professionals (5% - *template available*)
- At least one journal club article published within the last 6 months must be retrieved, evaluated, and assessed. (preceptors can choose more than one article at their discretion) (5% *template available*)

- Answer drug information questions requested by health care professionals. Document the response, whether the response is provide in writing or verbally, utilizing the drug information request form. (5% - *template available*)
- Other educational activities: (10%)

Preceptors may choose from the list below or add additional activities as deemed appropriate. Other activities and percentage of final grade should be determined at the beginning of the rotation and discussed with the student.

- Small informal topic presentations/discussions of select topics
- Attendance and/or presentation at any educational meetings at site (morning report, grand rounds, etc)
- Patient education materials
- Community presentations
- Discuss the design, development, marketing, and reimbursement process for new patient services
- Pharmacy and therapeutic committee projects/formulary management
- Participation in the preceptors research activities
- Adverse drug reaction reporting (*template available*)
- Other activities deemed appropriate by the preceptor

Rotation Evaluation:

Patient care responsibilities 70% (*Utilize the competency assessment criteria*)

Educational activities 30%

(Template evaluation tools are included in this manual or preceptors may choose to use their own templates)

*****Please list the educational activities and the associated percentage (%) and discuss with the student on the first day of rotation*****

PHRD 700 – AMBULATORY CARE

COMPETENCY ASSESSMENT

Select a score within the evaluation range for each criterion. Students must obtain a final average score $\geq 70\%$ on this portion of the assessment to pass the rotation.

For your reference, the midpoint grades for this student have been populated in the fields below. Simply replace those values with their earned final grades.

PATIENT CARE RESPONSIBILITIES (70% of grade)

Knowledge Criteria

Assess the student on the following criteria based on the student's stage of development during the Advanced Pharmacy Practice Experience year.

| 93-100 | 87-92 | 80-86 | 75-79 | 70-74 | 0 <small>(a score of 0.01 must be entered in e-value for the system to perform an accurate calculation)</small> |
|---|---|---|--|--|--|
| Outstanding | Proficient | Competent | Acceptable | Minimally Acceptable | Unacceptable |
| Infrequent knowledge deficits and learns material in a timely manner without preceptor assistance | Minimal deficits and learns material in a timely manner with minimal preceptor assistance | Some knowledge deficits and learns material in a timely manner with moderate preceptor assistance | Some knowledge deficits and learns material with consistent preceptor assistance | Significant knowledge deficits; requires constant preceptor assistance | Minimal knowledge despite repeated requests from preceptor to learn material |

****N/A (Not applicable) – If criterion is not applicable, please simply leave it BLANK****

| Questions (text field) | Entered (%) Grade by Preceptor |
|---|--------------------------------|
| 1. Identify the epidemiology and etiology of diseases. | |
| 2. Discuss normal physiologic processes. | |
| 3. Explain the pathophysiology of diseases | |
| 4. Explain the pharmacologic actions (MOA, side effects, drug interactions, pharmacogenetics/pharmacogenomics) of drug therapy. | |
| 5. Discuss the pharmacokinetic and pharmacodynamic effects of drug therapy. | |

Skills Criteria

Assess the student on the following criteria based on the student's stage of development during the Advanced Pharmacy Practice Experience year.

| 93-100 | 87-92 | 80-86 | 75-79 | 70-74 | 0 (a score of 0.01 must be entered in e-value for the system to perform an accurate calculation) |
|--|--|---|---|--|---|
| Outstanding | Proficient | Competent | Acceptable | Minimally Acceptable | Unacceptable |
| Independently performs the skill without preceptor assistance Independently identifies and master skills without preceptor assistance | Performs the skill with minimal preceptor assistance | Performs the skill with moderate preceptor assistance | Performs the skill with frequent preceptor assistance | Performs the skill only with consistent preceptor assistance | Unable to perform the skill despite consistent preceptor assistance |

****N/A (Not applicable) – If criterion is not applicable, please simply leave it BLANK****

Skills Criteria: Patient-centered Care

Pharmacists' Patient Care Process (PPCP) – a 5-step process that utilizes a consistent, patient-centered approach in collaboration with other health care professionals on the health care team to optimize patient health and medication outcomes.



| Questions (text field) | Entered (%) | Grade by Preceptor |
|--|-------------|--------------------|
| Collect | | |
| Assures the collection of necessary subjective and objective information about the patient in order to understand the relevant medical/medication history and clinical status of the patient. Information may be gathered and verified from multiple sources including existing patient records, the patient, and other health care professionals. | | |
| 1. Collect and organize patient data to identify and resolve existing and potential medication therapy problems. | | |
| 2. Retrieve scientific and clinical literature to solve patient care problems and make | | |

| | |
|---|--|
| evidence-based medication therapy decisions. | |
| Assess | |
| Assesses the information collected and analyzes the clinical effects of the patient's therapy in the context of the patient's overall health goals in order to identify and prioritize problems and achieve optimal care | |
| 3. Develop a medical and medication therapy problem list. | |
| 4. Interpret and evaluate patient and medication data to identify existing or potential medication therapy problems. | |
| 5. Evaluate and apply scientific and clinical literature to solve patient care problems and make evidence-based medication therapy decisions. | |
| 6. Explain the rationale and provide supporting evidence to justify the patient care plan. | |
| 7. Utilize ethical principles in patient care decision making. | |
| 8. Utilize the physical, mental and psychosocial factors that influence patient health in development of the patient care plan. | |
| 9. Utilize relevant behavioral theories of health, illness, medication use, health literacy and cognitive abilities and apply these theories to the development of the patient care plan. | |
| Plan | |
| Develops an individualized patient-centered care plan, in collaboration with other health care professionals and the patient or caregiver that is evidence based and cost effective. | |
| 10. Develop a patient-specific care plan utilizing evidence-based medicine. (prescription, non-prescription medications, complementary and alternative therapies, and dietary supplements). | |
| 11. Develop a monitoring plan based on patient, disease, and drug-specific goals. | |
| Implement | |
| Implements the care plan in collaboration with other health care professionals and the patient care or caregiver. | |
| 12. Educate patients regarding medications and related devices appropriate to the care plan. | |
| 13. Implement the patient specific care plan. | |
| Follow-up | |
| Monitors and evaluates the effectiveness of the care plan and modifies the plan in collaboration with other health care professionals and the patient or caregiver as needed. | |
| 14. Monitor and adjust patient care plan based on patient and drug-specific factors. | |
| Communication/Collaboration/Documentation are incorporated throughout the PPCP | |
| Communication | |
| 15. Communicate clearly and effectively with patients, caregivers and the public using appropriate listening, verbal, non-verbal and written communication skills. | |
| 16. Communicate clearly and effectively with health care professionals using appropriate listening, verbal, non-verbal and written communication skills. | |
| 17. Demonstrates sensitivity to and adjustment of communication based on contextual or cultural factors (shows respect for different backgrounds; treats each person with respect; utilizes tools to assist in communication when available and applicable) | |
| 18. Communicate with patients based on health literacy, literacy or cognitive abilities and use behavioral theories of health when appropriate. | |
| Collaboration | |
| 19. Collaborate with other health care professionals to foster a team approach to care. | |
| 20. Recognize the roles and responsibilities of the members of the healthcare team through the engagement of shared decision making. | |
| 21. Integrate pharmacy practice within the inter-professional team to ensure patient care is safe and effective, continuous, and coordinated. | |
| Documentation | |
| 22. Document patient interactions, interventions and outcomes in the patient profile or medical record to facilitate communication and collaboration with health care providers. | |

| Questions (text field) | Grade Received (%) |
|---|--------------------|
| 23. Apply relevant competencies of public health practice to population-based centered care and systems management. | |
| 24. Assess access to rational, safe, and cost-effective drug therapy and pharmaceutical care. | |
| 25. Define and assess the health status of individuals and populations including determinants of health and illness, factors contributing to health promotion and disease prevention, factors influencing the use of health services, and epidemiology of diseases. | |
| 26. Select and implement strategies to prevent or detect disease in the target population. | |

Patient Care Responsibilities Grade (70% of total grade): _____

EDUCATIONAL ACTIVITIES (30% of total grade)

Please evaluate the students on the following educational activities. Please enter in all activities completed by students. Please type in the percentage points each assignment is worth and the final grade received. Below are required activities and the recommended percentage for each.

- One major patient case presentation (5% - *template available*)
(Major indicates a level of preparation above daily patient discussions)
- One disease state presentation (5% - *template available*)
- At least one journal club article published within the last 6 months must be retrieved, evaluated, and assessed. (preceptors can choose more than one article at their discretion) (5% - *template available*)
- Answer drug information questions requested by health care professionals. Document the response, whether the response is provide in writing or verbally, utilizing the drug information request form. (5% - *template available*)

Other educational activities: (10%)

Preceptors may choose from the list below or add additional activities as deemed appropriate. Other activities and percentage of final grade should be determined at the beginning of the rotation and discussed with the student.

- Small informal topic presentations/discussions on select topics
- Attendance and/or presentation at any educational meetings at site (morning report, grand rounds, etc)
- Patient education materials
- Community presentations
- Discuss the design, development, marketing, and reimbursement process for new patient services
- Participation in the preceptors research activities
- Adverse drug reaction reporting
- Pharmacy and therapeutic committee projects/formulary management
- Other activities deemed appropriate by the preceptor

In the "**Percentage Assignment is Worth**" column, enter the percentage the assignment is worth. All items in the "**Percentage Assignment is Worth**" column should add up to **30%**.

In the "**Grade Received**" column, enter what percentage of this assignment the student received. For example, if the "Percentage Assignment is Worth" column indicates that the assignment is worth 4% and the



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PHRD 701 - Acute Care General Medicine

Preceptor and Student Learning Agreement

This preceptor and student learning agreement should be reviewed at the start of the rotation. This document also contains a sample of the evaluation form the preceptor will complete at the midpoint and end of the rotation in E*Value. The preceptor and student should review the evaluation criterion and expectations for the rotation together and sign the learning agreement at the end of the document. Please be sure to complete the “Educational Activities” section with the appropriate educational activities and the percentage each activity is worth.

Rotation Description

This rotation is a structured, full-time 5-week patient care experience in adult internal medicine in an institutional acute care setting. It is designed to provide the student with the opportunity to develop and refine the skills necessary to deliver pharmaceutical care, with an emphasis on optimizing drug therapy and patient outcomes, to an inpatient population. This will be accomplished by participation in the daily activities of work rounds with the internal medicine team and through consultation with other health care providers involved in the care of patients. Students will apply their didactic knowledge to various therapeutic issues and disease states encountered in clinical practice. Interaction and communication with other health care professionals for the promotion of optimal drug therapy are stressed to help the student develop a sound professional approach to the practice of pharmacy. In addition, students are encouraged to broaden their existing competencies and incorporate their professional and personal goals into this rotation.

Rotation Objectives:

At the completion of this rotation, students will be able to:

Professionalism

- Display professional behavior when interacting with patients, caregivers, other health care professionals, and the public.
- Provide ethical patient care.
- Demonstrate the actions needed for life-long learning abilities.
- Lead the profession to promote safe medication use and improve health care.

Patient Care and Communication

- Apply knowledge of biomedical and pharmaceutical sciences and evolving scientific technologies to make medication therapy decisions and improve patient outcomes.

- Identify, retrieve, evaluate and apply scientific and clinical literature to patient care.
- Design evidence-based treatment and monitoring plans to ensure optimal therapeutic and disease outcomes.
- Identify and resolve medication therapy problems.
- Counsel patients regarding drug therapy.
- Document patient care interventions.
- Communicate with patients, caregivers, health care professionals and the lay public to provide safe and optimal use of medications and related devices.
- Demonstrate effective communication skills when interacting with diverse patient and professional populations.
- Establish collaborative professional relationship with health care team members.
- Explain how continuous quality improvement initiatives are utilized to improve and ensure quality patient care.
- Demonstrate critical thinking skills to facilitate decision making.
- Perform professional activities in compliance with HIPAA.
- Comply with and uphold the laws and ethical standards of and related to the practice of pharmacy.

Rotation Responsibilities:

Patient care responsibilities (70% of grade)

(This is not an all-inclusive list)

- Actively participate as part of the rounding team or participate in pharmacy rounds/work rounds
- Medication histories/consults
- Collect and analyze medical/medication information
- Perform medication reconciliation on select patients
- Collect and analyze medical/medication information
- Perform targeted physical assessment as it applies to the therapeutic management of patients
- Evaluate medication regimens and identify disease prevention and detection needs as well as potential drug related problems
- Resolve drug related problems
- Design an evidence-based therapeutic plan
- Design an evidence-based monitoring plan
- Educate patients on appropriate therapy
- Document patient care activities and/or interventions using SOAP format

Educational activities (30% of grade)

- One major patient case presentation **(5% - template available)**
(Major indicates a level of preparation above daily patient discussions)
- One disease state presentation **(5% - template available)**
- At least one journal club article published within the last 6 months must be retrieved, evaluated, and assessed. (preceptors can choose more than one article at their discretion) **(5% - template available)**
- Answer drug information questions requested by health care professionals. Document the response, whether the response is provide in writing or verbally, utilizing the drug information request form. **(5% - template available)**
- Other educational activities: **(10%)**

Preceptors may choose from the list below or add additional activities as deemed appropriate. Other activities and percentage of final grade should be determined at the beginning of the rotation and discussed with the student.

- Small informal topic presentations/discussions on select topics

- Attendance and/or presentation at any educational meetings at site (morning report, grand rounds, etc)
- Patient education materials
- Community presentations
- Discuss the design, development, marketing, and reimbursement process for new patient services
- Participation in the preceptors research activities
- Adverse drug reaction reporting
- Pharmacy and therapeutic committee projects/formulary management
- Other activities deemed appropriate by the preceptor

Rotation Evaluation:

Patient care responsibilities 70% (Utilize the competency assessment criteria)

Educational activities 30%

(Template evaluation tools are included in this manual or preceptors may choose to use their own templates)

*****Please list the educational activities and the associated percentage (%) and discuss with the student on the first day of rotation*****

PHRD 701 – ACUTE CARE GENERAL MEDICINE

COMPETENCY ASSESSMENT

Select a score within the evaluation range for each criterion. Students must obtain a final average score $\geq 70\%$ on this portion of the assessment to pass the rotation.

For your reference, the midpoint grades for this student have been populated in the fields below. Simply replace those values with their earned final grades.

PATIENT CARE RESPONSIBILITIES (70% of grade)

Knowledge Criteria

Assess the student on the following criteria based on the student's stage of development during the Advanced Pharmacy Practice Experience year.

| 93-100 | 87-92 | 80-86 | 75-79 | 70-74 | 0 <small>(a score of 0.01 must be entered in e-value for the system to perform an accurate calculation)</small> |
|---|---|---|--|--|---|
| Outstanding | Proficient | Competent | Acceptable | Minimally Acceptable | Unacceptable |
| Infrequent knowledge deficits and learns material in a timely manner without preceptor assistance | Minimal deficits and learns material in a timely manner with minimal preceptor assistance | Some knowledge deficits and learns material in a timely manner with moderate preceptor assistance | Some knowledge deficits and learns material with consistent preceptor assistance | Significant knowledge deficits; requires constant preceptor assistance | Minimal knowledge despite repeated requests from preceptor to learn material |

****N/A (Not applicable) – If criterion is not applicable, please simply leave it BLANK****

| Questions (text field) | Entered (%) Grade by Preceptor |
|---|---------------------------------------|
| 1. Identify the epidemiology and etiology of diseases. | |
| 2. Discuss normal physiologic processes. | |
| 3. Explain the pathophysiology of diseases | |
| 4. Explain the pharmacologic actions (MOA, side effects, drug interactions, pharmacogenetics/pharmacogenomics) of drug therapy. | |
| 5. Discuss the pharmacokinetic and pharmacodynamic effects of drug therapy. | |

Skills Criteria

Assess the student on the following criteria based on the student's stage of development during the Advanced Pharmacy Practice Experience year.

| 93-100 | 87-92 | 80-86 | 75-79 | 70-74 | 0 |
|--|--|---|---|--|--|
| Outstanding | Proficient | Competent | Acceptable | Minimally Acceptable | (a score of 0.01 must be entered in e-value for the system to perform an accurate calculation) |
| Independently performs the skill without preceptor assistance Independently identifies and master skills without preceptor assistance | Performs the skill with minimal preceptor assistance | Performs the skill with moderate preceptor assistance | Performs the skill with frequent preceptor assistance | Performs the skill only with consistent preceptor assistance | Unacceptable Unable to perform the skill despite consistent preceptor assistance |

****N/A (Not applicable) – If criterion is not applicable, please simply leave it BLANK****

Skills Criteria: Patient-centered Care

Pharmacists' Patient Care Process (PPCP) – a 5-step process that utilizes a consistent, patient-centered approach in collaboration with other health care professionals on the health care team to optimize patient health and medication outcomes.



| Questions (text field) | Entered (%) Grade by Preceptor |
|---|--------------------------------------|
| <p><u>Collect</u> Assures the collection of necessary subjective and objective information about the patient in order to understand the relevant medical/medication history and clinical status of the patient. Information may be gathered and verified from multiple sources including existing patient records, the patient, and other health care professionals.</p> | |
| 6. Collect and organize patient data to identify and resolve existing and potential | |

| | |
|---|--|
| medication therapy problems. | |
| 7. Retrieve scientific and clinical literature to solve patient care problems and make evidence-based medication therapy decisions. | |
| Assess | |
| Assesses the information collected and analyzes the clinical effects of the patient's therapy in the context of the patient's overall health goals in order to identify and prioritize problems and achieve optimal care. | |
| 8. Develop a medical and medication therapy problem list. | |
| 9. Interpret and evaluate patient and medication data to identify existing or potential medication therapy problems. | |
| 10. Evaluate and apply scientific and clinical literature to solve patient care problems and make evidence-based medication therapy decisions. | |
| 11. Explain the rationale and provide supporting evidence to justify the patient care plan. | |
| 12. Utilize ethical principles in patient care decision making. | |
| 13. Utilize the physical, mental and psychosocial factors that influence patient health in development of the patient care plan. | |
| 14. Utilize relevant behavioral theories of health, illness, medication use, health literacy and cognitive abilities and apply these theories to the development of the patient care plan. | |
| Plan | |
| Develops an individualized patient-centered care plan, in collaboration with other health care professionals and the patient or caregiver that is evidence based and cost effective. | |
| 15. Develop a patient-specific care plan utilizing evidence-based medicine. (prescription, non-prescription medications, complementary and alternative therapies, and dietary supplements). | |
| 16. Develop a monitoring plan based on patient, disease, and drug-specific goals. | |
| Implement | |
| Implements the care plan in collaboration with other health care professionals and the patient care or caregiver. | |
| 17. Educate patients regarding medications and related devices appropriate to the care plan. | |
| 18. Implement the patient specific care plan. | |
| Follow-up | |
| Monitors and evaluates the effectiveness of the care plan and modifies the plan in collaboration with other health care professionals and the patient or caregiver as needed. | |
| 19. Monitor and adjust patient care plan based on patient and drug-specific factors. | |
| Communication/Collaboration/Documentation are incorporated throughout the PPCP | |
| Communication | |
| 20. Communicate clearly and effectively with patients, caregivers and the public using appropriate listening, verbal, non-verbal and written communication skills. | |
| 21. Communicate clearly and effectively with health care professionals using appropriate listening, verbal, non-verbal and written communication skills. | |
| 22. Demonstrates sensitivity to and adjustment of communication based on contextual or cultural factors (shows respect for different backgrounds; treats each person with respect; utilizes tools to assist in communication when available and applicable) | |
| 23. Communicate with patients based on health literacy, literacy or cognitive abilities and use behavioral theories of health when appropriate. | |
| Collaboration | |
| 24. Collaborate with other health care professionals to foster a team approach to care. | |
| 25. Recognize the roles and responsibilities of the members of the healthcare team through the engagement of shared decision making. | |
| 26. Integrate pharmacy practice within the inter-professional team to ensure patient care is safe and effective, continuous, and coordinated. | |
| Documentation | |
| 27. Document patient interactions, interventions and outcomes in the patient profile or medical record to facilitate communication and collaboration with health care providers. | |

Skills Criteria: Public Health

| Questions (text field) | Entered (%) Grade by Preceptor |
|---|--------------------------------|
| 28. Apply relevant competencies of public health practice to population-based centered care and systems management. | |
| 29. Assess access to rational, safe, and cost-effective drug therapy and pharmaceutical care. | |
| 30. Define and assess the health status of individuals and populations including determinants of health and illness, factors contributing to health promotion and disease prevention, factors influencing the use of health services, and epidemiology of diseases. | |
| 31. Select and implement strategies to prevent or detect disease in the target population. | |

Patient Care Responsibilities Grade (70% of total grade): _____

EDUCATIONAL ACTIVITIES (30% of total grade)

Please evaluate the students on the following educational activities. Please enter in all activities completed by students. Please type in the percentage points each assignment is worth and the final grade received. Below are required activities and the recommended percentage for each.

- One major patient case presentation (5% - *template available*)
(Major indicates a level of preparation above daily patient discussions)
- One disease state presentation (5% - *template available*)
- At least one journal club article published within the last 6 months must be retrieved, evaluated, and assessed. (preceptors can choose more than one article at their discretion) (5% - *template available*)
- Answer drug information questions requested by health care professionals. Document the response, whether the response is provide in writing or verbally, utilizing the drug information request form. (5% - *template available*)

Other educational activities: (10%)

Preceptors may choose from the list below or add additional activities as deemed appropriate. Other activities and percentage of final grade should be determined at the beginning of the rotation and discussed with the student.

- Small informal topic presentations/discussions on select topics
- Attendance and/or presentation at any educational meetings at site (morning report, grand rounds, etc)
- Patient education materials
- Community presentations
- Discuss the design, development, marketing, and reimbursement process for new patient services
- Participation in the preceptors research activities
- Adverse drug reaction reporting
- Pharmacy and therapeutic committee projects/formulary management
- Other activities deemed appropriate by the preceptor

In the "**Percentage Assignment is Worth**" column, enter the percentage the assignment is worth. All items in the "**Percentage Assignment is Worth**" column should add up to **30%**.

In the "**Grade Received**" column, enter what percentage of this assignment the student received. For example, if the "Percentage Assignment is Worth" column indicates that the assignment is worth 4% and the

student earned 3 of those percentage points, you would enter 75% in the "Grade Received" column. If they earned all 4 percentage points, you would enter 100% in the "Grade Received" column.

| Activities | Percentage Assignment is worth | Grade Received (%) |
|------------------------|--------------------------------|------------------------|
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| | TOTAL = 30% | |

Educational Activities Grade (30% of total grade): _____

I certify that my student completed all requirements for the Advanced Pharmacy Practice Experience.

Yes No

Midpoint Grade:

Midpoint Letter Grade:

Final Grade: _____

Final Letter Grade: _____

Final - Comments

*****Students must PASS a separate professionalism assessment with a mean score of ≥ 3.0 (no individual score < 2) in order to PASS the rotation*****

Preceptor and Student Pharmacy Learning Agreement Statement:

I have received the Preceptor and Student Pharmacy Rotation Learning Agreement and reviewed the assessment methods with my preceptor. I understand all methods by which I will be assessed in this rotation.

I understand all patient data reviewed or discussed during the rotation must be kept confidential. Cases should only be discussed with the preceptor or members of the health care team. Any breach of patient confidentiality, however minor, may result in failure of the rotation.

Student Name (Printed)

Student Signature

Date

Preceptor Name (Printed)

Preceptor Signature

Date



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SCHOOL OF PHARMACY

PHRD 702 - Advanced Health Systems Pharmacy Practice

Preceptor and Student Learning Agreement

This preceptor and student learning agreement should be reviewed at the start of the rotation. This document also contains a sample of the evaluation form the preceptor will complete at the midpoint and end of the rotation in E*Value. The preceptor and student should review the evaluation criterion and expectations for the rotation together and sign the learning agreement at the end of the document. Please be sure to complete the “Pharmacy Management and Operational Activities” section with the appropriate educational activities and the percentage each activity is worth.

Rotation Description:

This rotation is a structured, full-time, 5 –week pharmacy practice experience in health-system pharmacy. It is designed to provide the student with the opportunity to develop understanding and competence within all aspects of health-system pharmacy. The students will accomplish this through participation in a hospital pharmacy department which provides a variety of services that may include, but not limited to, medication reconciliation, therapeutic pathways, antibiotic surveillance, patient counseling, pharmacokinetic monitoring, parenteral nutrition consults, and interdisciplinary educational sessions. The student will also gain experience in managing the procurement, ordering, dispensing, monitoring, and administration of medication products. Students will learn administrative skills through activities such as management of technical staff and supportive personnel, compliance with relevant laws and standards, financial analysis, and health-system policy and procedures. In addition, students are encouraged to broaden their existing competencies and incorporate their professional and personal goals into this rotation.

Rotation Objectives:

At the completion of this rotation, students will be able to:

Professionalism

- Display professional behavior when interacting with patients, caregivers, other health care professionals, and the public.
- Provide ethical patient care.
- Demonstrate the actions needed for life-long learning abilities.
- Lead the profession to promote safe medication use and improve health care.

Practice Management and Pharmacy Operations

- Perform professional activities in compliance with HIPAA.
- Comply with federal, state and local regulations that govern the practice of pharmacy.

- Discuss pharmacy management and operations issues.
- Discuss the roles and responsibilities of personnel necessary to effectively operate the pharmacy.
- Evaluate and fill a prescription in compliance with state and federal laws.
- Describe and evaluate the drug distribution system.
- Demonstrate proficiency in reading and understanding common medical terminology.
- Perform calculations required to compound, dispense and administer medications.
- Discuss drug and pharmacy service issues.
- Discuss the role of the Pharmacy and Therapeutics Committee in determining formulary decisions and medication use policies.
- Discuss the expanding role of technology and informatics in the practice of pharmacy and patient care.
- Explain and participate in inventory management and purchasing including ordering, receiving, storing, and returning merchandise.
- Describe the organizational structure of the pharmacy and the pharmacists' role as it relates to the parent organization.

Patient Care and Communication

- Demonstrate effective communication skills when interacting with diverse patient and professional populations.
- Identify, retrieve, and evaluate clinical literature to answer drug information questions.
- Identify and resolve medication therapy problems.
- Accurately and completely reconcile medications across the continuum of care.
- Counsel patients regarding drug therapy.
- Document patient care interventions.
- Participate in continuous quality improvement initiatives and explain how they can be utilized to improve and ensure quality patient care.
- Demonstrate critical thinking skills to facilitate decision making.

Rotation Responsibilities:

Medication use and patient-care activities (60% of grade)

- Medication use process - students must participate in all areas of the medication use process including but not limited to:
 - Fill prescriptions as per pharmacy policies and procedures in accordance with federal and state laws
 - Evaluate medication orders for safety, efficacy, and compatibility with other medications.
 - Evaluate the drug distribution system to identify areas where errors can occur and determine strategies for prevention.
- Medication reconciliation
 - Student must perform a minimum of 10-15 (app. 2-3 per week)
 - Document these interventions using SOAP format or MTM core elements paperwork.
- Discharge counseling
 - Student must perform a minimum of 10 (app. 2 per week)
 - Document these interventions using SOAP format or MTM core elements paperwork.
- Participate in medical emergencies to the level permitted by the site
- Participate in protocol development
- Attend pharmacy related meetings

Pharmacy management and operational activities: (40% of grade)

- Participate in and prepare or revise a pharmacy specific policy or protocol – **(5%)**
- Participate in at least one or a portion of one Drug Utilization Review/Evaluation – **(5%)**
- Pharmacy and Therapeutics Committee project – **(10%)**

- Evaluate and report at least 2 adverse drug reactions (ADR) utilizing an ADR algorithm – **(5% - template available)**
- One educational in-service presentation to pharmacy staff, nursing, and/or physicians – **(5% - template available)**
- Administrative responsibility assignments
 - Student must discuss with or interview the preceptor on at least one or more of the following topics – **(10%)**
 - Pharmacy Practice Model Initiative (PPMI)
 - The role of the pharmacist in adjusting medications based on pharmacogenomic/pharmacogenetic factors
 - Inventory management
 - Medication error and reporting mechanisms
 - Drug shortages
 - Generic utilization
 - Infection control
 - Labor utilization
 - Technology and informatics
 - Medication and patient safety
 - Institute for Safe Medication Practices (ISMP)
 - Policy development
 - Health care policy matters that may affect pharmacy practice
 - The Joint Commission and other health care accreditation organizations
 - Other – as deemed appropriate by the preceptor

Rotation Evaluation:

Medication Use and Patient care activities 60% *(Utilize the competency assessment criteria)*
 Pharmacy management and operational activities 40%

*****Please list the educational activities and the associated percentage (%) and discuss with the student on the first day of rotation*****

PHRD 702 - ADVANCED HEALTH SYSTEMS

COMPETENCY ASSESSMENT

Select a score within the evaluation range for each criterion. Students must obtain a final average score $\geq 70\%$ on this portion of the assessment to pass the rotation.

For your reference, the midpoint grades for this student have been populated in the fields below. Simply replace those values with their earned final grades.

PATIENT CARE RESPONSIBILITIES (60% of grade)

Knowledge Criteria

Assess the student on the following criteria based on the student's stage of development during the Advanced Pharmacy Practice Experience year.

| 93-100 | 87-92 | 80-86 | 75-79 | 70-74 | 0 <small>(a score of 0.01 must be entered in e-value for the system to perform an accurate calculation)</small> |
|---|---|---|--|--|---|
| Outstanding | Proficient | Competent | Acceptable | Minimally Acceptable | Unacceptable |
| Infrequent knowledge deficits and learns material in a timely manner without preceptor assistance | Minimal deficits and learns material in a timely manner with minimal preceptor assistance | Some knowledge deficits and learns material in a timely manner with moderate preceptor assistance | Some knowledge deficits and learns material with consistent preceptor assistance | Significant knowledge deficits; requires constant preceptor assistance | Minimal knowledge despite repeated requests from preceptor to learn material |

****N/A (Not applicable) – If criterion is not applicable, please simply leave it BLANK****

| Questions (text field) | Entered (%) Grade by Preceptor |
|---|---------------------------------------|
| 1. Identify the epidemiology and etiology of diseases. | |
| 2. Discuss normal physiologic processes. | |
| 3. Explain the pathophysiology of diseases | |
| 4. Explain the pharmacologic actions (MOA, side effects, drug interactions, pharmacogenetics/pharmacogenomics) of drug therapy. | |
| 5. Discuss the pharmacokinetic and pharmacodynamic effects of drug therapy. | |

Skills Criteria

Assess the student on the following criteria based on the student's stage of development during the Advanced Pharmacy Practice Experience year.

| 93-100 | 87-92 | 80-86 | 75-79 | 70-74 | 0 (a score of 0.01 must be entered in e-value for the system to perform an accurate calculation) |
|--|--|---|---|--|---|
| Outstanding | Proficient | Competent | Acceptable | Minimally Acceptable | Unacceptable |
| Independently performs the skill without preceptor assistance Independently identifies and master skills without preceptor assistance | Performs the skill with minimal preceptor assistance | Performs the skill with moderate preceptor assistance | Performs the skill with frequent preceptor assistance | Performs the skill only with consistent preceptor assistance | Unable to perform the skill despite consistent preceptor assistance |

****N/A (Not applicable) – If criterion is not applicable, please simply leave it BLANK****

Skills Criteria: Patient-centered Care

Pharmacists' Patient Care Process (PPCP) – a 5-step process that utilizes a consistent, patient-centered approach in collaboration with other health care professionals on the health care team to optimize patient health and medication outcomes.



| Questions (text field) | Entered (%) | Grade by Preceptor |
|--|-------------|--------------------|
| Collect | | |
| Assures the collection of necessary subjective and objective information about the patient in order to understand the relevant medical/medication history and clinical status of the patient. Information may be gathered and verified from multiple sources including existing patient records, the patient, and other health care professionals. | | |
| 1. Collect and organize patient data to identify and resolve existing and potential medication therapy problems. | | |
| 2. Retrieve scientific and clinical literature to solve patient care problems and make | | |

| | |
|---|--|
| evidence-based medication therapy decisions. | |
| Assess | |
| Assesses the information collected and analyzes the clinical effects of the patient's therapy in the context of the patient's overall health goals in order to identify and prioritize problems and achieve optimal care | |
| 3. Develop a medical and medication therapy problem list. | |
| 4. Interpret and evaluate patient and medication data to identify existing or potential medication therapy problems. | |
| 5. Evaluate and apply scientific and clinical literature to solve patient care problems and make evidence-based medication therapy decisions. | |
| 6. Explain the rationale and provide supporting evidence to justify the patient care plan. | |
| 7. Utilize ethical principles in patient care decision making. | |
| 8. Utilize the physical, mental and psychosocial factors that influence patient health in development of the patient care plan. | |
| 9. Utilize relevant behavioral theories of health, illness, medication use, health literacy and cognitive abilities and apply these theories to the development of the patient care plan. | |
| Plan | |
| Develops an individualized patient-centered care plan, in collaboration with other health care professionals and the patient or caregiver that is evidence based and cost effective. | |
| 10. Develop a patient-specific care plan utilizing evidence-based medicine. (prescription, non-prescription medications, complementary and alternative therapies, and dietary supplements). | |
| 11. Develop a monitoring plan based on patient, disease, and drug-specific goals. | |
| Implement | |
| Implements the care plan in collaboration with other health care professionals and the patient care or caregiver. | |
| 12. Educate patients regarding medications and related devices appropriate to the care plan. | |
| 13. Implement the patient specific care plan. | |
| Follow-up | |
| Monitors and evaluates the effectiveness of the care plan and modifies the plan in collaboration with other health care professionals and the patient or caregiver as needed. | |
| 14. Monitor and adjust patient care plan based on patient and drug-specific factors. | |
| Communication/Collaboration/Documentation are incorporated throughout the PPCP | |
| Communication | |
| 15. Communicate clearly and effectively with patients, caregivers and the public using appropriate listening, verbal, non-verbal and written communication skills. | |
| 16. Communicate clearly and effectively with health care professionals using appropriate listening, verbal, non-verbal and written communication skills. | |
| 17. Demonstrates sensitivity to and adjustment of communication based on contextual or cultural factors (shows respect for different backgrounds; treats each person with respect; utilizes tools to assist in communication when available and applicable) | |
| 18. Communicate with patients based on health literacy, literacy or cognitive abilities and use behavioral theories of health when appropriate. | |
| Collaboration | |
| 19. Collaborate with other health care professionals to foster a team approach to care. | |
| 20. Recognize the roles and responsibilities of the members of the healthcare team through the engagement of shared decision making. | |
| 21. Integrate pharmacy practice within the inter-professional team to ensure patient care is safe and effective, continuous, and coordinated. | |
| Documentation | |
| 22. Document patient interactions, interventions and outcomes in the patient profile or medical record to facilitate communication and collaboration with health care providers. | |

| Questions (text field) | Entered (%) Grade by Preceptor |
|---|--------------------------------------|
| 23. Manage pharmacy operations <ul style="list-style-type: none"> • Evaluate a pharmacy for ownership or management using principles of financial management and business indicators • Apply principles of business planning to create a management plan that supports the implementation and provision of pharmaceutical care services, identifies and acquires necessary resources, and assures financial success of the practice • Apply principles of systems planning and management to the development of pharmacist-managed, patient-centered pharmacy services | |
| 24. Manage provider relations <ul style="list-style-type: none"> • Identify the key features of private and public payers of health care • Describe the objectives of health insurance and managed health care programs • Describe the role of public and private insurer, pharmaceutical industry, and managed care on health care delivery • Compare the costs associated with insured vs. uninsured, and underinsured patients including the affordability and access of prescription drugs | |
| 25. Manage medication distribution and control systems <ul style="list-style-type: none"> • Utilize inventory control concepts to develop and implement an inventory control system | |
| 26. Manage human resources <ul style="list-style-type: none"> • Determine the organizational structure of the pharmacy • Interpret state and federal regulations that affect personnel policies • Understand the role of staffing plans in maintaining workforce productivity | |
| 27. Optimize physical and technological resources for optimal medication delivery <ul style="list-style-type: none"> • Describe principles that influence the distribution of pharmaceutical products and services • Evaluate a pharmacy's layout • Design/redesign a pharmacy to maintain efficiency and enhances patient-focused care services • Utilize automated medication storage and distribution systems | |
| 28. Manage medication use systems <ul style="list-style-type: none"> • Participate in pharmacy system's process for reporting and managing medication errors and adverse drug reactions | |

Medication Use and Patient Care Responsibilities Grade (60% of total grade): _____

PHARMACY MANAGEMENT AND OPERATIONS EDUCATIONAL ACTIVITIES (40% of total grade)

Please evaluate the students on the following educational activities. Please enter in all activities completed by students. Please type in the percentage points each assignment is worth and the final grade received. Below are required activities and the recommended percentage for each.

- Participate in and prepare or revise a pharmacy specific policy or protocol – **(5%)**
- Participate in at least one or a portion of one Drug Utilization Review/Evaluation – **(5%)**
- Pharmacy and Therapeutics Committee project – **(10%)**
- Evaluate and report at least 2 adverse drug reactions (ADR) utilizing an ADR algorithm – **(5% - template available)**
- One educational in-service presentation to pharmacy staff, nursing, and/or physicians – **(5%)**
- Administrative responsibility assignments

- Student must discuss with or interview the preceptor on at least one or more of the following topics – (10%)
 - Pharmacy Practice Model Initiative (PPMI)
 - The role of the pharmacist in adjusting medications based on pharmacogenomic/pharmacogenetic factors
 - Inventory management
 - Medication error and reporting mechanisms
 - Drug shortages
 - Generic utilization
 - Infection control
 - Labor utilization
 - Technology and informatics
 - Medication and patient safety
 - Institute for Safe Medication Practices (ISMP)
 - Policy development
 - Health care policy matters that may affect pharmacy practice
 - The Joint Commission and other health care accreditation organizations
 - Other – as deemed appropriate by the preceptor

In the "Percentage Assignment is Worth" column, enter the percentage the assignment is worth. All items in the "Percentage Assignment is Worth" column should add up to 40%.

In the "Grade Received" column, enter what percentage of this assignment the student received. For example, if the "Percentage Assignment is Worth" column indicates that the assignment is worth 4% and the student earned 3 of those percentage points, you would enter 75% in the "Grade Received" column. If they earned all 4 percentage points, you would enter 100% in the "Grade Received" column.

| Administrative responsibility assignments | Percentage Assignment is worth | Grade Received (%) |
|---|--------------------------------|------------------------|
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| | TOTAL = 40% | |

Educational Activities Grade (40% of total grade): _____

I certify that my student completed all requirements for the Advanced Pharmacy Practice Experience.

Yes No

Midpoint Grade: _____

Midpoint Letter Grade: _____

Final Grade: _____

Final Letter Grade: _____

Final - Comments

*****Students must PASS a separate professionalism assessment with a mean score of ≥ 3.0 (no individual score < 2) in order to PASS the rotation*****

Preceptor and Student Learning Agreement Statement:

I have received the Preceptor and Student Learning Agreement and reviewed the assessment methods with my preceptor. I understand all methods by which I will be assessed in this rotation.

I understand all patient data reviewed or discussed during the rotation must be kept confidential. Cases should only be discussed with the preceptor or members of the health care team. Any breach of patient confidentiality, however minor, may result in failure of the rotation.

Student Name (Printed)

Student Signature

Date

Preceptor Name (Printed)

Preceptor Signature

Date



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PHRD 703 – Advanced Community Pharmacy Practice Preceptor and Student Learning Agreement

This preceptor and student learning agreement should be reviewed at the start of the rotation. This document also contains a sample of the evaluation form the preceptor will complete at the midpoint and end of the rotation in E*Value. The preceptor and student should review the evaluation criterion and expectations for the rotation together and sign the learning agreement at the end of the document. Please be sure to complete the “Educational Activities” section with the appropriate educational activities and the percentage each activity is worth.

Rotation Description:

This rotation is a structured, full-time, 5-week patient care experience in community practice. It is designed to provide the student with the opportunity to develop and refine the skills necessary to deliver pharmaceutical care, with an emphasis on rational drug therapy and outcomes. Students will apply their didactic knowledge to various therapeutic issues and disease states encountered in clinical practice. Emphasis will be placed on problem-solving, critical thinking, patient counseling, application of clinical skills, and providing medication therapy management services to patients whenever possible. Opportunities for further development in the use of OTC, alternative therapies, and home diagnostic tests and monitoring systems and durable medical equipment will be provided. Issues related to reimbursement by third parties will be discussed. Skill development in the dispensing process, extemporaneous compounding (depending on the site) is an additional facet of the rotation. In addition, students are encouraged to broaden their existing competencies and incorporate their professional and personal goals into this rotation.

Rotation Objectives:

At the completion of this rotation, students will be able to:

Professionalism

- Display professional behavior when interacting with patients, caregivers, other health care professionals, and the public.
- Provide ethical patient care.
- Demonstrate the actions needed for life-long learning abilities.
- Lead the profession to promote safe medication use and improve health care.

Practice Management and Pharmacy Operations

- Perform professional activities in compliance with HIPAA.
- Comply with federal, state and local regulations that govern the practice of pharmacy.
- Discuss pharmacy management and operations issues.
- Discuss the roles and responsibilities of personnel necessary to effectively operate the pharmacy.
- Evaluate and fill a prescription in compliance with state and federal laws.
- Describe and evaluate the drug distribution system.
- Demonstrate proficiency in reading and understanding common medical terminology.
- Perform calculations required to compound, dispense and administer medications.
- Discuss drug and pharmacy service issues.
- Explain and participate in inventory management and purchasing including ordering, receiving, storing, and returning merchandise.

Patient Care and Communication

- Identify, retrieve, evaluate and apply scientific and clinical literature to patient care.
- Apply knowledge of biomedical and pharmaceutical sciences and evolving scientific technologies to make medication therapy decisions and improve patient outcome.
- Develop treatment plans to ensure optimal therapeutic and disease outcomes.
- Identify and resolve medication therapy problems.
- Provide individual and population-based care that considers the ethnic, cultural, socioeconomic, physical, and psychosocial influences on patient care outcomes.
- Promote public health regarding disease prevention and health maintenance through advocacy, education, and provision of health services.
- Counsel patients regarding drug therapy.
- Document patient care interventions.
- Communicate with patients, caregivers, health care professionals and the lay public to provide safe and optimal use of medications and related devices
- Demonstrate effective communication skills when interacting with diverse patient and professional populations.
- Explain how continuous quality improvement initiatives are utilized to improve and ensure quality patient care.
- Describe the roles and responsibilities of other members of the health care team.
- Demonstrate critical thinking skills to facilitate decision making.

Rotation Responsibilities:

Medication use and patient oriented activities: (70 % of grade)

- Medication use process
 - Fill prescriptions as per pharmacy policies and procedures in accordance with federal and state laws
 - Evaluate prescriptions for safety, efficacy, and compatibility with other medications.
 - Evaluate the drug distribution system to identify areas where errors can occur and determine strategies for prevention.
- Medication Therapy Management
 - Student must conduct a minimum of 15 patient interventions (app. 3 per week). At least 5 of these must be face to face interviews of patients with a comprehensive review of medications/profile.
 - Document these interventions using SOAP format or MTM core elements paperwork.
- Disease state management
 - Student must conduct a minimum of 5 disease state management intervention such as: (smoking cessation options, glucometer review, inhaler/peak flow meter review, how to take a blood pressure, treatment options for a specific disease state, etc)
- OTC consultations

- Student must conduct a minimum of 10-15 (app. 2 per week). Utilize the QuestScholar technique when obtaining information from the patient.
- Document these consultations using SOAP format.
- Patient counseling
 - Student should counsel all patients receiving a new medication with a minimum of 25 counseling sessions per rotation.
- Immunizations (if applicable)
 - Students must administer at least 5 immunizations per rotation (app. 1 per week)

Educational activities: (30% of grade)

- Prevention/wellness event (at least 1) – **(10% - template available)**
 - Student must determine the population served and most appropriate event to hold.
 - Prepare marketing materials and educational materials
 - Document the date, type of event, number of customers serviced, results found (e.g. record BP measurement if BP screening conducted)
- Brief patient case presentations (minimum of 2) – **(5% - template available)**
- Answer drug information questions requested by health care professionals. Document the response, whether the response is provide in writing or verbally, utilizing the drug information request form. **(5% - template available)**
- Administrative responsibility assignments
 - Student must discuss with or interview the preceptor on at least one or more of the following topics – **(5%)**
 - Inventory management
 - Medication error and reporting mechanisms
 - Personnel and labor utilization
 - Staff development
 - Medication safety
 - Generic utilization and wholesaler options
 - Other
- Other educational activities: **(5%)**

Preceptors may choose from the list below or add additional activities as deemed appropriate. Other activities and % of final grade should be discussed and determined at the beginning of the rotation.

- Disease state presentation
- Journal club
- Patient education materials
- Community presentations
- Other activities deemed appropriate by the preceptor

Rotation Evaluation:

| | | |
|--|-----|---|
| Medication Use and Patient care responsibilities | 70% | <i>(Utilize the competency assessment criteria)</i> |
| Educational activities | 30% | |

(Template evaluation tools are included in this manual or preceptors may choose to use their own templates)

*****Please list the educational activities and the associated percentage (%) and discuss with the student on the first day of rotation*****

PHRD 703 – ADVANCED COMMUNITY

COMPETENCY ASSESSMENT

Select a score within the evaluation range for each criterion. Students must obtain a final average score $\geq 70\%$ on this portion of the assessment to pass the rotation.

For your reference, the midpoint grades for this student have been populated in the fields below. Simply replace those values with their earned final grades.

PATIENT CARE RESPONSIBILITIES (70% of grade)

Knowledge Criteria

Assess the student on the following criteria based on the student’s stage of development during the Advanced Pharmacy Practice Experience year.

| | | | | | |
|---|---|---|--|--|---|
| 93-100 | 87-92 | 80-86 | 75-79 | 70-74 | 0 (a score of 0.01 must be entered in e-value for the system to perform an accurate calculation) |
| Outstanding | Proficient | Competent | Acceptable | Minimally Acceptable | Unacceptable |
| Infrequent knowledge deficits and learns material in a timely manner without preceptor assistance | Minimal deficits and learns material in a timely manner with minimal preceptor assistance | Some knowledge deficits and learns material in a timely manner with moderate preceptor assistance | Some knowledge deficits and learns material with consistent preceptor assistance | Significant knowledge deficits; requires constant preceptor assistance | Minimal knowledge despite repeated requests from preceptor to learn material |

****N/A (Not applicable) – If criterion is not applicable, please simply leave it BLANK****

| Questions (text field) | Entered (%) Grade by Preceptor |
|---|---------------------------------------|
| 1. Identify the epidemiology and etiology of diseases. | |
| 2. Discuss normal physiologic processes. | |
| 3. Explain the pathophysiology of diseases | |
| 4. Explain the pharmacologic actions (MOA, side effects, drug interactions, pharmacogenetics/pharmacogenomics) of drug therapy. | |
| 5. Discuss the pharmacokinetic and pharmacodynamic effects of drug therapy. | |

Skills Criteria

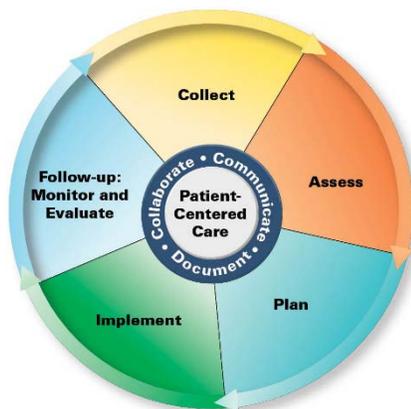
Assess the student on the following criteria based on the student’s stage of development during the Advanced Pharmacy Practice Experience year.

| | | | | | |
|---|--|---|---|--|--|
| 93-100 | 87-92 | 80-86 | 75-79 | 70-74 | 0 |
| Outstanding | Proficient | Competent | Acceptable | Minimally Acceptable | (a score of 0.01 must be entered in e-value for the system to perform an accurate calculation) |
| Independently performs the skill without preceptor assistance | Performs the skill with minimal preceptor assistance | Performs the skill with moderate preceptor assistance | Performs the skill with frequent preceptor assistance | Performs the skill only with consistent preceptor assistance | Unacceptable |
| Independently identifies and master skills without preceptor assistance | | | | | Unable to perform the skill despite consistent preceptor assistance |

****N/A (Not applicable) – If criterion is not applicable, please simply leave it BLANK****

Skills Criteria: Patient-centered Care

Pharmacists’ Patient Care Process (PPCP) – a 5-step process that utilizes a consistent, patient-centered approach in collaboration with other health care professionals on the health care team to optimize patient health and medication outcomes.



| | |
|---|--------------------------------------|
| Questions (text field) | Entered (%) Grade by Preceptor |
| <p><u>Collect</u> Assures the collection of necessary subjective and objective information about the patient in order to understand the relevant medical/medication history and clinical status of the patient. Information may be</p> | |

| | |
|---|--|
| gathered and verified from multiple sources including existing patient records, the patient, and other health care professionals. | |
| 1. Collect and organize patient data to identify and resolve existing and potential medication therapy problems. | |
| 2. Retrieve scientific and clinical literature to solve patient care problems and make evidence-based medication therapy decisions. | |
| Assess | |
| Assesses the information collected and analyzes the clinical effects of the patient's therapy in the context of the patient's overall health goals in order to identify and prioritize problems and achieve optimal care | |
| 3. Develop a medical and medication therapy problem list. | |
| 4. Interpret and evaluate patient and medication data to identify existing or potential medication therapy problems. | |
| 5. Evaluate and apply scientific and clinical literature to solve patient care problems and make evidence-based medication therapy decisions. | |
| 6. Explain the rationale and provide supporting evidence to justify the patient care plan. | |
| 7. Utilize ethical principles in patient care decision making. | |
| 8. Utilize the physical, mental and psychosocial factors that influence patient health in development of the patient care plan. | |
| 9. Utilize relevant behavioral theories of health, illness, medication use, health literacy and cognitive abilities and apply these theories to the development of the patient care plan. | |
| Plan | |
| Develops an individualized patient-centered care plan, in collaboration with other health care professionals and the patient or caregiver that is evidence based and cost effective. | |
| 10. Develop a patient-specific care plan utilizing evidence-based medicine. (prescription, non-prescription medications, complementary and alternative therapies, and dietary supplements). | |
| 11. Develop a monitoring plan based on patient, disease, and drug-specific goals. | |
| Implement | |
| Implements the care plan in collaboration with other health care professionals and the patient care or caregiver. | |
| 12. Educate patients regarding medications and related devices appropriate to the care plan. | |
| 13. Implement the patient specific care plan. | |
| Follow-up | |
| Monitors and evaluates the effectiveness of the care plan and modifies the plan in collaboration with other health care professionals and the patient or caregiver as needed. | |
| 14. Monitor and adjust patient care plan based on patient and drug-specific factors. | |
| Communication/Collaboration/Documentation are incorporated throughout the PPCP | |
| Communication | |
| 15. Communicate clearly and effectively with patients, caregivers and the public using appropriate listening, verbal, non-verbal and written communication skills. | |
| 16. Communicate clearly and effectively with health care professionals using appropriate listening, verbal, non-verbal and written communication skills. | |
| 17. Demonstrates sensitivity to and adjustment of communication based on contextual or cultural factors (shows respect for different backgrounds; treats each person with respect; utilizes tools to assist in communication when available and applicable) | |
| 18. Communicate with patients based on health literacy, literacy or cognitive abilities and use behavioral theories of health when appropriate. | |
| Collaboration | |
| 19. Collaborate with other health care professionals to foster a team approach to care. | |
| 20. Recognize the roles and responsibilities of the members of the healthcare team through the engagement of shared decision making. | |
| 21. Integrate pharmacy practice within the inter-professional team to ensure patient care is safe and effective, continuous, and coordinated. | |
| Documentation | |

22. Document patient interactions, interventions and outcomes in the patient profile or medical record to facilitate communication and collaboration with health care providers.

Skills Criteria: Systems Management

| Questions (text field) | Grade Received (%) |
|---|--------------------|
| 23. Manage pharmacy operations <ul style="list-style-type: none"> • Evaluate a pharmacy for ownership or management using principles of financial management and business indicators • Apply principles of business planning to create a management plan that supports the implementation and provision of pharmaceutical care services, identifies and acquires necessary resources, and assures financial success of the practice • Apply principles of systems planning and management to the development of pharmacist-managed, patient-centered pharmacy services | |
| 24. Manage provider relations <ul style="list-style-type: none"> • Identify the key features of private and public payers of health care • Describe the objectives of health insurance and managed health care programs • Describe the role of public and private insurer, pharmaceutical industry, and managed care on health care delivery • Compare the costs associated with insured vs. uninsured, and underinsured patients including the affordability and access of prescription drugs | |
| 25. Manage medication distribution and control systems <ul style="list-style-type: none"> • Utilize inventory control concepts to develop and implement an inventory control system | |
| 26. Manage human resources <ul style="list-style-type: none"> • Determine the organizational structure of the pharmacy • Interpret state and federal regulations that affect personnel policies • Understand the role of staffing plans in maintaining workforce productivity | |
| 27. Optimize physical and technological resources for optimal medication delivery <ul style="list-style-type: none"> • Describe principles that influence the distribution of pharmaceutical products and services • Evaluate a pharmacy's layout • Design/redesign a pharmacy to maintain efficiency and enhances patient-focused care services • Utilize automated medication storage and distribution systems | |
| 28. Manage medication use systems <ul style="list-style-type: none"> • Participate in pharmacy system's process for reporting and managing medication errors and adverse drug reactions | |

Skills Criteria: Public Health

| Questions (text field) | Grade Received (%) |
|---|--------------------|
| 29. Assess access to rational, safe, and cost-effective drug therapy and pharmaceutical care. | |
| 30. Select and implement strategies to prevent or detect disease in the target population. | |

Medication Use and Patient Care Responsibilities Grade (70% of total grade): _____

EDUCATIONAL ACTIVITIES (30% of total grade)

Please evaluate the students on the following educational activities. Please enter in all activities completed by students. Please type in the percentage points each assignment is worth and the final grade received. Below are required activities and the recommended percentage for each.

- Prevention/wellness event (at least 1) – **(10% - template available)**
 - Student must determine the population served and most appropriate event to hold
 - Prepare marketing materials and educational materials
 - Document the date, type of event, number of customers serviced, results found (e.g. record BP measurement if BP screening conducted)
- Brief patient case presentations (minimum of 2) – **(5% - template available)**
- Answer drug information questions requested by health care professionals. Document the response, whether the response is provided in writing or verbally, utilizing the drug information request form **(5% - template available)**
- Administrative responsibility assignments
 - Student must discuss with or interview the preceptor on at least one or more of the following topics – **(5%)**
 - Inventory management
 - Medication error and reporting mechanisms
 - Personnel and labor utilization
 - Staff development
 - Medication safety
 - Generic utilization and wholesaler options
 - Other
- Other educational activities: **(5%)**

Preceptors may choose from the list below or add additional activities as deemed appropriate. Other activities and % of final grade should be discussed and determined at the beginning of the rotation.

- Disease state presentation
- Journal club
- Patient education materials
- Community presentations
- Other activities deemed appropriate by the preceptor

In the "**Percentage Assignment is Worth**" column, enter the percentage the assignment is worth. All items in the "**Percentage Assignment is Worth**" column should add up to 30%.

In the "**Grade Received**" column, enter what percentage of this assignment the student received. For example, if the "Percentage Assignment is Worth" column indicates that the assignment is worth 4% and the student earned 3 of those percentage points, you would enter 75% in the "Grade Received" column. If they earned all 4 percentage points, you would enter 100% in the "Grade Received" column.

| Activities | Percentage Assignment is worth | Grade Received (%) |
|------------------------|---------------------------------------|---------------------------|
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| | TOTAL = 30% | |

Educational Activities Grade (30% of total grade):_____

I certify that my student completed all requirements for the Advanced Pharmacy Practice Experience.

Yes No

Midpoint Grade:

Midpoint Letter Grade:

Final Grade:

Final Letter Grade:

Final - Comments

*****Students must PASS a separate professionalism assessment with a mean score of ≥ 3.0 (no individual score < 2) in order to PASS the rotation*****

Preceptor and Student Learning Agreement Statement:

I have received the Preceptor and Student Learning Agreement and reviewed the assessment methods with my preceptor. I understand all methods by which I will be assessed in this rotation.

I understand all patient data reviewed or discussed during the rotation must be kept confidential. Cases should only be discussed with the preceptor or members of the health care team. Any breach of patient confidentiality, however minor, may result in failure of the rotation.

Student Name (Printed)

Student Signature

Date

Preceptor Name (Printed)

Preceptor Signature

Date



NOTRE DAME
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UNIVERSITY

SCHOOL OF PHARMACY

PHRD 704,705,706 - Inpatient Patient Care Elective

Preceptor and Student Learning Agreement

This preceptor and student learning agreement should be reviewed at the start of the rotation. This document also contains a sample of the evaluation form the preceptor will complete at the midpoint and end of the rotation in E*Value. The preceptor and student should review the evaluation criterion and expectations for the rotation together and sign the learning agreement at the end of the document. Please be sure to complete the “Educational Activities” section with the appropriate educational activities and the percentage each activity is worth.

Rotation Description

Each elective (PHRD 704/705/706) advanced pharmacy practice experience (APPE) site will provide opportunities for students to develop the advanced pharmacy practice experience program outcomes in areas such as, but not limited to, community, health-system, clinical, industry, and administrative pharmacy practice. These experiences will further develop a student’s knowledge and skills in the areas of their practice choice. Interaction with other health care professionals, professionalism, and strong communication skills is strongly emphasized. Students are encouraged to broaden their existing competencies and incorporate their professional and personal goals into these rotations.

Rotation Objectives:

At the completion of this rotation, students will be able to:

Professionalism

- Display professional behavior when interacting with patients, caregivers, other health care professionals, and the public.
- Provide ethical patient care.
- Demonstrate the actions needed for life-long learning abilities.
- Lead the profession to promote safe medication use and improve health care.

Patient Care and Communication

- Apply knowledge of biomedical and pharmaceutical sciences and evolving scientific technologies to make medication therapy decisions and improve patient outcomes.
- Identify, retrieve, evaluate and apply scientific and clinical literature to patient care.
- Design evidence-based treatment and monitoring plans to ensure optimal therapeutic and disease outcomes.

- Identify and resolve medication therapy problems.
- Counsel patients regarding drug therapy.
- Document patient care interventions.
- Communicate with patients, caregivers, health care professionals and the lay public to provide safe and optimal use of medications and related devices.
- Demonstrate effective communication skills when interacting with diverse patient and professional populations.
- Establish collaborative professional relationship with health care team members.
- Explain how continuous quality improvement initiatives are utilized to improve and ensure quality patient care.
- Demonstrate critical thinking skills to facilitate decision making.
- Perform professional activities in compliance with HIPAA.
- Comply with and uphold the laws and ethical standards of and related to the practice of pharmacy.

Rotation Responsibilities:

Patient care responsibilities (70% of grade)

- Actively participate as part of the rounding team or participate in pharmacy rounds/work rounds
- Medication histories/consults
- Collect and analyze medical/medication information
- Perform medication reconciliation on select patients
- Collect and analyze medical/medication information
- Perform targeted physical assessment as it applies to the therapeutic management of patients
- Evaluate medication regimens and identify disease prevention and detection needs as well as potential drug related problems
- Resolve drug related problems
- Design an evidence-based therapeutic plan
- Design an evidence-based monitoring plan
- Educate patients on appropriate therapy
- Document patient care activities and/or interventions using SOAP format

Educational activities (30% of grade)

- One major patient case presentation **(5% - template available)**
(Major indicates a level of preparation above daily patient discussions)
- One disease state presentation **(5% - template available)**
- At least one journal club article published within the last 6 months must be retrieved, evaluated, and assessed. (preceptors can choose more than one article at their discretion) **(5% - template available)**
- Answer drug information questions requested by health care professionals. Document the response, whether the response is provide in writing or verbally, utilizing the drug information request form. **(5% - template available)**
- Other educational activities: **(10%)**

Preceptors may choose from the list below or add additional activities as deemed appropriate. Other activities and percentage of final grade should be determined at the beginning of the rotation and discussed with the student.

- Small informal topic presentations/discussions on select topics
- Attendance and/or presentation at any educational meetings at site (morning report, grand rounds, etc)
- Patient education materials
- Community presentations

- Discuss the design, development, marketing, and reimbursement process for new patient services
- Participation in the preceptors research activities
- Adverse drug reaction reporting
- Pharmacy and therapeutic committee projects/formulary management
- Other activities deemed appropriate by the preceptor

Rotation Evaluation:

Patient care responsibilities 70% (Utilize the competency assessment criteria)

Educational activities 30%

(Template evaluation tools are included in this manual or preceptors may choose to use their own templates)

*****Please list the educational activities and the associated percentage (%) and discuss with the student on the first day of rotation*****

PHRD 704, 705, 706 – INPATIENT, PATIENT CARE ELECTIVE

COMPETENCY ASSESSMENT

Select a score within the evaluation range for each criterion. Students must obtain a final average score $\geq 70\%$ on this portion of the assessment to pass the rotation.

For your reference, the midpoint grades for this student have been populated in the fields below. Simply replace those values with their earned final grades.

PATIENT CARE RESPONSIBILITIES (70% of grade)

Knowledge Criteria

Assess the student on the following criteria based on the student's stage of development during the Advanced Pharmacy Practice Experience year.

| 93-100 | 87-92 | 80-86 | 75-79 | 70-74 | 0 <small>(a score of 0.01 must be entered in e-value for the system to perform an accurate calculation)</small> |
|---|---|---|--|--|--|
| Outstanding | Proficient | Competent | Acceptable | Minimally Acceptable | Unacceptable |
| Infrequent knowledge deficits and learns material in a timely manner without preceptor assistance | Minimal deficits and learns material in a timely manner with minimal preceptor assistance | Some knowledge deficits and learns material in a timely manner with moderate preceptor assistance | Some knowledge deficits and learns material with consistent preceptor assistance | Significant knowledge deficits; requires constant preceptor assistance | Minimal knowledge despite repeated requests from preceptor to learn material |

****N/A (Not applicable) – If criterion is not applicable, please simply leave it BLANK****

| Questions (text field) | Entered (%) Grade by Preceptor |
|---|--------------------------------|
| 1. Identify the epidemiology and etiology of diseases. | |
| 2. Discuss normal physiologic processes. | |
| 3. Explain the pathophysiology of diseases | |
| 4. Explain the pharmacologic actions (MOA, side effects, drug interactions, pharmacogenetics/pharmacogenomics) of drug therapy. | |
| 5. Discuss the pharmacokinetic and pharmacodynamic effects of drug therapy. | |

Knowledge Criteria - Comments

Skills Criteria

Assess the student on the following criteria based on the student's stage of development during the Advanced Pharmacy Practice Experience year.

| 93-100 | 87-92 | 80-86 | 75-79 | 70-74 | 0 (a score of 0.01 must be entered in e-value for the system to perform an accurate calculation) |
|--|--|---|---|--|---|
| Outstanding | Proficient | Competent | Acceptable | Minimally Acceptable | Unacceptable |
| Independently performs the skill without preceptor assistance Independently identifies and master skills without preceptor assistance | Performs the skill with minimal preceptor assistance | Performs the skill with moderate preceptor assistance | Performs the skill with frequent preceptor assistance | Performs the skill only with consistent preceptor assistance | Unable to perform the skill despite consistent preceptor assistance |

****N/A (Not applicable) – If criterion is not applicable, please simply leave it BLANK****

Skills Criteria: Patient-centered Care

Pharmacists' Patient Care Process (PPCP) – a 5-step process that utilizes a consistent, patient-centered approach in collaboration with other health care professionals on the health care team to optimize patient health and medication outcomes.



| Questions (text field) | Entered (%) | Grade by Preceptor |
|--|-------------|--------------------|
| Collect | | |
| Assures the collection of necessary subjective and objective information about the patient in order to understand the relevant medical/medication history and clinical status of the patient. Information may be gathered and verified from multiple sources including existing patient records, the patient, and other health care professionals. | | |
| 1. Collect and organize patient data to identify and resolve existing and potential medication therapy problems. | | |
| 2. Retrieve scientific and clinical literature to solve patient care problems and make | | |

| | |
|---|--|
| evidence-based medication therapy decisions. | |
| Assess | |
| Assesses the information collected and analyzes the clinical effects of the patient's therapy in the context of the patient's overall health goals in order to identify and prioritize problems and achieve optimal care | |
| 3. Develop a medical and medication therapy problem list. | |
| 4. Interpret and evaluate patient and medication data to identify existing or potential medication therapy problems. | |
| 5. Evaluate and apply scientific and clinical literature to solve patient care problems and make evidence-based medication therapy decisions. | |
| 6. Explain the rationale and provide supporting evidence to justify the patient care plan. | |
| 7. Utilize ethical principles in patient care decision making. | |
| 8. Utilize the physical, mental and psychosocial factors that influence patient health in development of the patient care plan. | |
| 9. Utilize relevant behavioral theories of health, illness, medication use, health literacy and cognitive abilities and apply these theories to the development of the patient care plan. | |
| Plan | |
| Develops an individualized patient-centered care plan, in collaboration with other health care professionals and the patient or caregiver that is evidence based and cost effective. | |
| 10. Develop a patient-specific care plan utilizing evidence-based medicine. (prescription, non-prescription medications, complementary and alternative therapies, and dietary supplements). | |
| 11. Develop a monitoring plan based on patient, disease, and drug-specific goals. | |
| Implement | |
| Implements the care plan in collaboration with other health care professionals and the patient care or caregiver. | |
| 12. Educate patients regarding medications and related devices appropriate to the care plan. | |
| 13. Implement the patient specific care plan. | |
| Follow-up | |
| Monitors and evaluates the effectiveness of the care plan and modifies the plan in collaboration with other health care professionals and the patient or caregiver as needed. | |
| 14. Monitor and adjust patient care plan based on patient and drug-specific factors. | |
| Communication/Collaboration/Documentation are incorporated throughout the PPCP | |
| Communication | |
| 15. Communicate clearly and effectively with patients, caregivers and the public using appropriate listening, verbal, non-verbal and written communication skills. | |
| 16. Communicate clearly and effectively with health care professionals using appropriate listening, verbal, non-verbal and written communication skills. | |
| 17. Demonstrates sensitivity to and adjustment of communication based on contextual or cultural factors (shows respect for different backgrounds; treats each person with respect; utilizes tools to assist in communication when available and applicable) | |
| 18. Communicate with patients based on health literacy, literacy or cognitive abilities and use behavioral theories of health when appropriate. | |
| Collaboration | |
| 19. Collaborate with other health care professionals to foster a team approach to care. | |
| 20. Recognize the roles and responsibilities of the members of the healthcare team through the engagement of shared decision making. | |
| 21. Integrate pharmacy practice within the inter-professional team to ensure patient care is safe and effective, continuous, and coordinated. | |
| Documentation | |
| 22. Document patient interactions, interventions and outcomes in the patient profile or medical record to facilitate communication and collaboration with health care providers. | |

Skills Criteria - Comments

| | | |
|------------------------|------------------------|------------------------|
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| | TOTAL= 30% | |

Educational Activities - Comments

Educational Activities Grade (30% of total grade): _____

I certify that my student completed all requirements for the Advanced Pharmacy Practice Experience.

Yes No

Midpoint Grade:

Midpoint Letter Grade:

Final Grade: _____

Final Letter Grade: _____

Final - Comments

*****Students must PASS a separate professionalism assessment with a mean score of ≥ 3.0 (no individual score < 2) in order to PASS the rotation*****

Preceptor and Student Learning Agreement Statement:

I have received the Preceptor and Student Learning Agreement and reviewed the assessment methods with my preceptor. I understand all methods by which I will be assessed in this rotation.

I understand all patient data reviewed or discussed during the rotation must be kept confidential. Cases should only be discussed with the preceptor or members of the health care team. Any breach of patient confidentiality, however minor, may result in failure of the rotation.

Student Name (Printed)

Student Signature

Date

Preceptor Name (Printed)

Preceptor Signature

Date



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PHRD 704,705,706 - Outpatient Patient Care Elective: Advanced Community

Preceptor and Student Learning Agreement

This preceptor and student learning agreement should be reviewed at the start of the rotation. This document also contains a sample of the evaluation form the preceptor will complete at the midpoint and end of the rotation in E*Value. The preceptor and student should review the evaluation criterion and expectations for the rotation together and sign the learning agreement at the end of the document. Please be sure to complete the “Educational Activities” section with the appropriate educational activities and the percentage each activity is worth.

Rotation Description

Each elective (PHRD 704/705/706) advanced pharmacy practice experience (APPE) site will provide opportunities for students to develop the advanced pharmacy practice experience program outcomes in community and/or outpatient pharmacy practice. This experience is a structured, full-time, 5-week patient care experience in a community/outpatient practice setting. It is designed to provide the student with the opportunity to develop and refine the skills necessary to deliver pharmaceutical care, with an emphasis on rational drug therapy and outcomes. Students will apply their didactic knowledge to various therapeutic issues and disease states encountered in clinical practice. Emphasis will be placed on problem-solving, critical thinking, patient counseling, application of clinical skills, and providing medication therapy management services to patients whenever possible. Opportunities for further development in the use of OTC, alternative therapies, and home diagnostic tests and monitoring systems and durable medical equipment will be provided. Issues related to reimbursement by third parties will be discussed. Students are encouraged to broaden their existing competencies and incorporate their professional and personal goals into the rotation.

Rotation Objectives:

At the completion of this rotation, students will be able to:

Professionalism

- Display professional behavior when interacting with patients, caregivers, other health care professionals, and the public.
- Provide ethical patient care.
- Demonstrate the actions needed for life-long learning abilities.
- Lead the profession to promote safe medication use and improve health care.

Practice Management and Pharmacy Operations

- Perform professional activities in compliance with HIPAA.

- Comply with federal, state and local regulations that govern the practice of pharmacy.
- Discuss pharmacy management and operations issues.
- Discuss the roles and responsibilities of personnel necessary to effectively operate the pharmacy.
- Evaluate and fill a prescription in compliance with state and federal laws.
- Describe and evaluate the drug distribution system.
- Demonstrate proficiency in reading and understanding common medical terminology.
- Perform calculations required to compound, dispense and administer medications.
- Discuss drug and pharmacy service issues.
- Explain and participate in inventory management and purchasing including ordering, receiving, storing, and returning merchandise.

Patient Care and Communication

- Identify, retrieve, evaluate and apply scientific and clinical literature to patient care.
- Apply knowledge of biomedical and pharmaceutical sciences and evolving scientific technologies to make medication therapy decisions and improve patient outcome.
- Develop treatment plans to ensure optimal therapeutic and disease outcomes.
- Identify and resolve medication therapy problems.
- Provide individual and population-based care that considers the ethnic, cultural, socioeconomic, physical, and psychosocial influences on patient care outcomes.
- Promote public health regarding disease prevention and health maintenance through advocacy, education, and provision of health services.
- Counsel patients regarding drug therapy.
- Document patient care interventions.
- Communicate with patients, caregivers, health care professionals and the lay public to provide safe and optimal use of medications and related devices
- Demonstrate effective communication skills when interacting with diverse patient and professional populations.
- Explain how continuous quality improvement initiatives are utilized to improve and ensure quality patient care.
- Describe the roles and responsibilities of other members of the health care team.
- Demonstrate critical thinking skills to facilitate decision making.

Rotation Responsibilities:

Medication use and patient oriented activities: (70% of grade)

- Medication use process
 - Fill prescriptions as per pharmacy policies and procedures in accordance with federal and state laws
 - Evaluate prescriptions for safety, efficacy, and compatibility with other medications.
 - Evaluate the drug distribution system to identify areas where errors can occur and determine strategies for prevention.
- Medication Therapy Management
 - Student must conduct a minimum of 15 patient interventions (app. 3 per week). At least 5 of these must be face to face interviews of patients with a comprehensive review of medications/profile.
 - Document these interventions using SOAP format or MTM core elements paperwork.
- Disease state management
 - Student must conduct a minimum of 5 disease state management intervention such as: (smoking cessation options, glucometer review, inhaler/peak flow meter review, how to take a blood pressure, treatment options for a specific disease state, etc)
- OTC consultations
 - Student must conduct a minimum of 10-15 (app. 2 per week). Utilize the QuestScholar technique when obtaining information from the patient.

- Document these consultations using SOAP format.
- Patient counseling
 - Student should counsel all patients receiving a new medication with a minimum of 25 counseling sessions per rotation.
- Immunizations (if applicable)
 - Students must administer at least 5 immunizations per rotation (app. 1 per week)

Educational activities: (30% of grade)

- Prevention/wellness event (at least 1) – **(10% - template available)**
 - Student must determine the population served and most appropriate event to hold.
 - Prepare marketing materials and educational materials
 - Document the date, type of event, number of customers serviced, results found (e.g. record BP measurement if BP screening conducted)
- Brief patient case presentations (minimum of 2) – **(5% - template available)**
- Answer drug information questions requested by health care professionals. Document the response, whether the response is provide in writing or verbally, utilizing the drug information request form. **(5% - template available)**
- Administrative responsibility assignments
 - Student must discuss with or interview the preceptor on at least one or more of the following topics – **(5%)**
 - Inventory management
 - Medication error and reporting mechanisms
 - Personnel and labor utilization
 - Staff development
 - Medication safety
 - Generic utilization and wholesaler options
 - Other
- Other educational activities: **(5%)**

Preceptors may choose from the list below or add additional activities as deemed appropriate. Other activities and % of final grade should be discussed and determined at the beginning of the rotation.

- Disease state presentation
- Journal club
- Patient education materials
- Community presentations
- Other activities deemed appropriate by the preceptor

Rotation Evaluation:

Medication Use and Patient care responsibilities 70% (*Utilize the competency assessment criteria*)
 Educational activities 30%
 (*Template evaluation tools are included in this manual or preceptors may choose to use their own templates*)

*****Please list the educational activities and the associated percentage (%) and discuss with the student on the first day of rotation*****

PHRD 704,705,706 – OUTPATIENT, PATIENT CARE ELECTIVE- ADV COMM

COMPETENCY ASSESSMENT

Select a score within the evaluation range for each criterion. Students must obtain a final average score $\geq 70\%$ on this portion of the assessment to pass the rotation.

For your reference, the midpoint grades for this student have been populated in the fields below. Simply replace those values with their earned final grades.

PATIENT CARE RESPONSIBILITIES (70% of grade)

Knowledge Criteria

Assess the student on the following criteria based on the student's stage of development during the Advanced Pharmacy Practice Experience year.

| 93-100 | 87-92 | 80-86 | 75-79 | 70-74 | 0 <small>(a score of 0.01 must be entered in e-value for the system to perform an accurate calculation)</small> |
|---|---|---|--|--|---|
| Outstanding | Proficient | Competent | Acceptable | Minimally Acceptable | Unacceptable |
| Infrequent knowledge deficits and learns material in a timely manner without preceptor assistance | Minimal deficits and learns material in a timely manner with minimal preceptor assistance | Some knowledge deficits and learns material in a timely manner with moderate preceptor assistance | Some knowledge deficits and learns material with consistent preceptor assistance | Significant knowledge deficits; requires constant preceptor assistance | Minimal knowledge despite repeated requests from preceptor to learn material |

****N/A (Not applicable) – If criterion is not applicable, please simply leave it BLANK****

| Questions (text field) | Entered % Grade by Preceptor |
|---|-------------------------------------|
| 1. Identify the epidemiology and etiology of diseases. | |
| 2. Discuss normal physiologic processes. | |
| 3. Explain the pathophysiology of diseases | |
| 4. Explain the pharmacologic actions (MOA, side effects, drug interactions, pharmacogenetics/pharmacogenomics) of drug therapy. | |
| 5. Discuss the pharmacokinetic and pharmacodynamic effects of drug therapy. | |

Skills Criteria

Assess the student on the following criteria based on the student's stage of development during the Advanced Pharmacy Practice Experience year.

| 93-100 | 87-92 | 80-86 | 75-79 | 70-74 | 0 (a score of 0.01 must be entered in e-value for the system to perform an accurate calculation) |
|--|--|---|---|--|---|
| Outstanding | Proficient | Competent | Acceptable | Minimally Acceptable | Unacceptable |
| Independently performs the skill without preceptor assistance Independently identifies and master skills without preceptor assistance | Performs the skill with minimal preceptor assistance | Performs the skill with moderate preceptor assistance | Performs the skill with frequent preceptor assistance | Performs the skill only with consistent preceptor assistance | Unable to perform the skill despite consistent preceptor assistance |

****N/A (Not applicable) – If criterion is not applicable, please simply leave it BLANK****

Skills Criteria: Patient-centered Care

Pharmacists' Patient Care Process (PPCP) – a 5-step process that utilizes a consistent, patient-centered approach in collaboration with other health care professionals on the health care team to optimize patient health and medication outcomes.



| Questions (text field) | Entered (%) Grade by Preceptor |
|--|--------------------------------------|
| Collect Assures the collection of necessary subjective and objective information about the patient in order to understand the relevant medical/medication history and clinical status of the patient. Information may be gathered and verified from multiple sources including existing patient records, the patient, and other health care professionals. | |
| 1. Collect and organize patient data to identify and resolve existing and potential medication therapy problems. | |
| 2. Retrieve scientific and clinical literature to solve patient care problems and make | |

| | |
|---|--|
| evidence-based medication therapy decisions. | |
| Assess | |
| Assesses the information collected and analyzes the clinical effects of the patient's therapy in the context of the patient's overall health goals in order to identify and prioritize problems and achieve optimal care | |
| 3. Develop a medical and medication therapy problem list. | |
| 4. Interpret and evaluate patient and medication data to identify existing or potential medication therapy problems. | |
| 5. Evaluate and apply scientific and clinical literature to solve patient care problems and make evidence-based medication therapy decisions. | |
| 6. Explain the rationale and provide supporting evidence to justify the patient care plan. | |
| 7. Utilize ethical principles in patient care decision making. | |
| 8. Utilize the physical, mental and psychosocial factors that influence patient health in development of the patient care plan. | |
| 9. Utilize relevant behavioral theories of health, illness, medication use, health literacy and cognitive abilities and apply these theories to the development of the patient care plan. | |
| Plan | |
| Develops an individualized patient-centered care plan, in collaboration with other health care professionals and the patient or caregiver that is evidence based and cost effective. | |
| 10. Develop a patient-specific care plan utilizing evidence-based medicine. (prescription, non-prescription medications, complementary and alternative therapies, and dietary supplements). | |
| 11. Develop a monitoring plan based on patient, disease, and drug-specific goals. | |
| Implement | |
| Implements the care plan in collaboration with other health care professionals and the patient care or caregiver. | |
| 12. Educate patients regarding medications and related devices appropriate to the care plan. | |
| 13. Implement the patient specific care plan. | |
| Follow-up | |
| Monitors and evaluates the effectiveness of the care plan and modifies the plan in collaboration with other health care professionals and the patient or caregiver as needed. | |
| 14. Monitor and adjust patient care plan based on patient and drug-specific factors. | |
| Communication/Collaboration/Documentation are incorporated throughout the PPCP | |
| Communication | |
| 15. Communicate clearly and effectively with patients, caregivers and the public using appropriate listening, verbal, non-verbal and written communication skills. | |
| 16. Communicate clearly and effectively with health care professionals using appropriate listening, verbal, non-verbal and written communication skills. | |
| 17. Demonstrates sensitivity to and adjustment of communication based on contextual or cultural factors (shows respect for different backgrounds; treats each person with respect; utilizes tools to assist in communication when available and applicable) | |
| 18. Communicate with patients based on health literacy, literacy or cognitive abilities and use behavioral theories of health when appropriate. | |
| Collaboration | |
| 19. Collaborate with other health care professionals to foster a team approach to care. | |
| 20. Recognize the roles and responsibilities of the members of the healthcare team through the engagement of shared decision making. | |
| 21. Integrate pharmacy practice within the inter-professional team to ensure patient care is safe and effective, continuous, and coordinated. | |
| Documentation | |
| 22. Document patient interactions, interventions and outcomes in the patient profile or medical record to facilitate communication and collaboration with health care providers. | |

Skills Criteria: Systems Management

| Questions (text field) | Entered % Grade by Preceptor |
|---|------------------------------------|
| 23. Manage pharmacy operations <ul style="list-style-type: none"> • Evaluate a pharmacy for ownership or management using principles of financial management and business indicators • Apply principles of business planning to create a management plan that supports the implementation and provision of pharmaceutical care services, identifies and acquires necessary resources, and assures financial success of the practice • Apply principles of systems planning and management to the development of pharmacist-managed, patient-centered pharmacy services | |
| 24. Manage provider relations <ul style="list-style-type: none"> • Identify the key features of private and public payers of health care • Describe the objectives of health insurance and managed health care programs • Describe the role of public and private insurer, pharmaceutical industry, and managed care on health care delivery • Compare the costs associated with insured vs. uninsured, and underinsured patients including the affordability and access of prescription drugs | |
| 25. Manage medication distribution and control systems <ul style="list-style-type: none"> • Utilize inventory control concepts to develop and implement an inventory control system | |
| 26. Manage human resources <ul style="list-style-type: none"> • Determine the organizational structure of the pharmacy • Interpret state and federal regulations that affect personnel policies • Understand the role of staffing plans in maintaining workforce productivity | |
| 27. Optimize physical and technological resources for optimal medication delivery <ul style="list-style-type: none"> • Describe principles that influence the distribution of pharmaceutical products and services • Evaluate a pharmacy's layout • Design/redesign a pharmacy to maintain efficiency and enhances patient-focused care services • Utilize automated medication storage and distribution systems | |
| 28. Manage medication use systems <ul style="list-style-type: none"> • Participate in pharmacy system's process for reporting and managing medication errors and adverse drug reactions | |

Skills Criteria: Public Health

| Questions (text field) | Entered % Grade by Preceptor |
|---|------------------------------------|
| 29. Assess access to rational, safe, and cost-effective drug therapy and pharmaceutical care. | |
| 30. Select and implement strategies to prevent or detect disease in the target population. | |

Medication Use and Patient Care Responsibilities Grade (70% of total grade): _____

EDUCATIONAL ACTIVITIES (30% of total grade)

Please evaluate the students on the following educational activities. Please enter in all activities completed by students. Please type in the percentage points each assignment is worth and the final grade received. Below are required activities and the recommended percentage for each.

- Prevention/wellness event (at least 1) – **(10% - template available)**
 - Student must determine the population served and most appropriate event to hold.
 - Prepare marketing materials and educational materials
 - Document the date, type of event, number of customers serviced, results found (e.g. record BP measurement if BP screening conducted)
- Brief patient case presentations (minimum of 2) – **(5% - template available)**
- Answer drug information questions requested by health care professionals. Document the response, whether the response is provide in writing or verbally, utilizing the drug information request form. **(5% - template available)**
- Administrative responsibility assignments
 - Student must discuss with or interview the preceptor on at least one or more of the following topics – **(5%)**
 - Inventory management
 - Medication error and reporting mechanisms
 - Personnel and labor utilization
 - Staff development
 - Medication safety
 - Generic utilization and wholesaler options
 - Other
- Other educational activities: **(5%)**

Preceptors may choose from the list below or add additional activities as deemed appropriate. Other activities and % of final grade should be discussed and determined at the beginning of the rotation.

- Disease state presentation
- Journal club
- Patient education materials
- Community presentations
- Other activities deemed appropriate by the preceptor

In the "**Percentage Assignment is Worth**" column, enter the percentage the assignment is worth. All items in the "**Percentage Assignment is Worth**" column should add up to **30%**.

In the "**Grade Received**" column, enter what percentage of this assignment the student received. For example, if the "Percentage Assignment is Worth" column indicates that the assignment is worth 4% and the student earned 3 of those percentage points, you would enter 75% in the "Grade Received" column. If they earned all 4 percentage points, you would enter 100% in the "Grade Received" column.

| Activities | Percentage Assignment is worth | Grade Entered by Preceptor |
|------------------------|---------------------------------------|-----------------------------------|
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| | TOTAL = 30% | |

Educational Activities - Comments

Educational Activities Grade (30% of total grade): _____

I certify that my student completed all requirements for the Advanced Pharmacy Practice Experience.

Yes No

Midpoint Grade: _____

Midpoint Letter Grade: _____

Final Grade: _____

Final Letter Grade: _____

Final - Comments

*****Students must PASS a separate professionalism assessment with a mean score of ≥ 3.0 (no individual score < 2) in order to PASS the rotation*****

Preceptor and Student Learning Agreement Statement:

I have received the Preceptor and Student Learning Agreement and reviewed the assessment methods with my preceptor. I understand all methods by which I will be assessed in this rotation.

I understand all patient data reviewed or discussed during the rotation must be kept confidential. Cases should only be discussed with the preceptor or members of the health care team. Any breach of patient confidentiality, however minor, may result in failure of the rotation.

Student Name (Printed)

Student Signature

Date

Preceptor Name (Printed)

Preceptor Signature

Date



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PHRD 704,705,706 - Outpatient Patient Care Elective

Preceptor and Student Learning Agreement

This preceptor and student learning agreement should be reviewed at the start of the rotation. This document also contains a sample of the evaluation form the preceptor will complete at the midpoint and end of the rotation in E*Value. The preceptor and student should review the evaluation criterion and expectations for the rotation together and sign the learning agreement at the end of the document. Please be sure to complete the “Educational Activities” section with the appropriate educational activities and the percentage each activity is worth.

Rotation Description

Each elective (PHRD 704/705/706) advanced pharmacy practice experience (APPE) site will provide opportunities for students to develop the advanced pharmacy practice experience program outcomes in areas such as, but not limited to, community, health-system, clinical, industry, and administrative pharmacy practice. These experiences will further develop a student’s knowledge and skills in the areas of their practice choice. Interaction with other health care professionals, professionalism, and strong communication skills is strongly emphasized. Students are encouraged to broaden their existing competencies and incorporate their professional and personal goals into these rotations.

Rotation Objectives:

At the completion of this rotation, students will be able to:

Professionalism

- Display professional behavior when interacting with patients, caregivers, other health care professionals, and the public.
- Provide ethical patient care.
- Demonstrate the actions needed for life-long learning abilities.
- Lead the profession to promote safe medication use and improve health care.

Patient Care and Communication

- Apply knowledge of biomedical and pharmaceutical sciences and evolving scientific technologies to make medication therapy decisions and improve patient outcomes.
- Identify, retrieve, evaluate and apply scientific and clinical literature to patient care.
- Design evidence-based treatment and monitoring plans to ensure optimal therapeutic and disease outcomes.
- Identify and resolve medication therapy problems.

- Counsel patients regarding drug therapy.
- Document patient care interventions.
- Communicate with patients, caregivers, health care professionals and the lay public to provide safe and optimal use of medications and related devices.
- Demonstrate effective communication skills when interacting with diverse patient and professional populations.
- Provide individual and population-based care that considers the ethnic, cultural, socioeconomic, physical, and psychosocial influences on patient care outcomes.
- Promote public health regarding disease prevention and health maintenance through advocacy, education, and provision of health services.
- Establish collaborative professional relationship with health care team members.
- Explain how continuous quality improvement initiatives are utilized to improve and ensure quality patient care.
- Demonstrate critical thinking skills to facilitate decision making.
- Perform professional activities in compliance with HIPAA.
- Comply with and uphold the laws and ethical standards of and related to the practice of pharmacy.

Rotation Responsibilities:

Patient care responsibilities (70% of grade)

- Medication histories/consults
- Collect and analyze medical/medication information
- Perform targeted physical assessment as it applies to the therapeutic management of patients
- Evaluate medication regimens and identify disease prevention and detection needs as well as potential drug related problems
- Resolve drug related problems
- Design an evidence-based therapeutic plan
- Design an evidence-based monitoring plan
- Educate patients on appropriate therapy
- Document patient care activities and/or interventions using SOAP format

Educational activities (30% of grade)

- One major patient case presentation **(5% - template available)**
(Major indicates a level of preparation above daily patient discussions)
- One disease state presentation to health care professionals **(5% - template available)**
- At least one journal club article published within the last 6 months must be retrieved, evaluated, and assessed. (preceptors can choose more than one article at their discretion) **(5% template available)**
- Answer drug information questions requested by health care professionals. Document the response, whether the response is provided in writing or verbally, utilizing the drug information request form. **(5% - template available)**
- Other educational activities: **(10%)**

Preceptors may choose from the list below or add additional activities as deemed appropriate. Other activities and percentage of final grade should be determined at the beginning of the rotation and discussed with the student.

- Small informal topic presentations/discussions of select topics
- Attendance and/or presentation at any educational/committee meetings at site (morning report, grand rounds, etc)
- Patient education materials
- Community presentations

- Discuss the design, development, marketing, and reimbursement process for new patient services
- Pharmacy and therapeutic committee projects/formulary management
- Participation in the preceptors research activities
- Adverse drug reaction reporting (*template available*)
- Other activities deemed appropriate by the preceptor

Rotation Evaluation:

Patient care responsibilities 70% (*Utilize the competency assessment criteria*)
Educational activities 30%

(Template evaluation tools are included in this manual or preceptors may choose to use their own templates)

*****Please list the educational activities and the associated percentage (%) and discuss with the student on the first day of rotation*****

PHRD 704,705,706 – OUTPATIENT, PATIENT CARE ELECTIVE

COMPETENCY ASSESSMENT

Select a score within the evaluation range for each criterion. Students must obtain a final average score $\geq 70\%$ on this portion of the assessment to pass the rotation.

For your reference, the midpoint grades for this student have been populated in the fields below. Simply replace those values with their earned final grades.

PATIENT CARE RESPONSIBILITIES (70% of grade)

Knowledge Criteria

Assess the student on the following criteria based on the student's stage of development during the Advanced Pharmacy Practice Experience year.

| 93-100 | 87-92 | 80-86 | 75-79 | 70-74 | 0 <small>(a score of 0.01 must be entered in e-value for the system to perform an accurate calculation)</small> |
|---|---|---|--|--|--|
| Outstanding | Proficient | Competent | Acceptable | Minimally Acceptable | Unacceptable |
| Infrequent knowledge deficits and learns material in a timely manner without preceptor assistance | Minimal deficits and learns material in a timely manner with minimal preceptor assistance | Some knowledge deficits and learns material in a timely manner with moderate preceptor assistance | Some knowledge deficits and learns material with consistent preceptor assistance | Significant knowledge deficits; requires constant preceptor assistance | Minimal knowledge despite repeated requests from preceptor to learn material |

****N/A (Not applicable) – If criterion is not applicable, please simply leave it BLANK****

| Questions (text field) | Entered (%) Grade by Preceptor |
|---|--------------------------------|
| 1. Identify the epidemiology and etiology of diseases. | |
| 2. Discuss normal physiologic processes. | |
| 3. Explain the pathophysiology of diseases | |
| 4. Explain the pharmacologic actions (MOA, side effects, drug interactions, pharmacogenetics/pharmacogenomics) of drug therapy. | |
| 5. Discuss the pharmacokinetic and pharmacodynamic effects of drug therapy. | |

Skills Criteria

Assess the student on the following criteria based on the student's stage of development during the Advanced Pharmacy Practice Experience year.

| 93-100 | 87-92 | 80-86 | 75-79 | 70-74 | 0 (a score of 0.01 must be entered in e-value for the system to perform an accurate calculation) |
|--|--|---|---|--|---|
| Outstanding | Proficient | Competent | Acceptable | Minimally Acceptable | Unacceptable |
| Independently performs the skill without preceptor assistance Independently identifies and master skills without preceptor assistance | Performs the skill with minimal preceptor assistance | Performs the skill with moderate preceptor assistance | Performs the skill with frequent preceptor assistance | Performs the skill only with consistent preceptor assistance | Unable to perform the skill despite consistent preceptor assistance |

****N/A (Not applicable) – If criterion is not applicable, please simply leave it BLANK****

Skills Criteria: Patient-centered Care

Pharmacists' Patient Care Process (PPCP) – a 5-step process that utilizes a consistent, patient-centered approach in collaboration with other health care professionals on the health care team to optimize patient health and medication outcomes.



| Questions (text field) | Entered (%) | Grade by Preceptor |
|--|-------------|--------------------|
| Collect | | |
| Assures the collection of necessary subjective and objective information about the patient in order to understand the relevant medical/medication history and clinical status of the patient. Information may be gathered and verified from multiple sources including existing patient records, the patient, and other health care professionals. | | |
| 1. Collect and organize patient data to identify and resolve existing and potential medication therapy problems. | | |
| 2. Retrieve scientific and clinical literature to solve patient care problems and make | | |

| | |
|---|--|
| evidence-based medication therapy decisions. | |
| Assess | |
| Assesses the information collected and analyzes the clinical effects of the patient's therapy in the context of the patient's overall health goals in order to identify and prioritize problems and achieve optimal care | |
| 3. Develop a medical and medication therapy problem list. | |
| 4. Interpret and evaluate patient and medication data to identify existing or potential medication therapy problems. | |
| 5. Evaluate and apply scientific and clinical literature to solve patient care problems and make evidence-based medication therapy decisions. | |
| 6. Explain the rationale and provide supporting evidence to justify the patient care plan. | |
| 7. Utilize ethical principles in patient care decision making. | |
| 8. Utilize the physical, mental and psychosocial factors that influence patient health in development of the patient care plan. | |
| 9. Utilize relevant behavioral theories of health, illness, medication use, health literacy and cognitive abilities and apply these theories to the development of the patient care plan. | |
| Plan | |
| Develops an individualized patient-centered care plan, in collaboration with other health care professionals and the patient or caregiver that is evidence based and cost effective. | |
| 10. Develop a patient-specific care plan utilizing evidence-based medicine. (prescription, non-prescription medications, complementary and alternative therapies, and dietary supplements). | |
| 11. Develop a monitoring plan based on patient, disease, and drug-specific goals. | |
| Implement | |
| Implements the care plan in collaboration with other health care professionals and the patient care or caregiver. | |
| 12. Educate patients regarding medications and related devices appropriate to the care plan. | |
| 13. Implement the patient specific care plan. | |
| Follow-up | |
| Monitors and evaluates the effectiveness of the care plan and modifies the plan in collaboration with other health care professionals and the patient or caregiver as needed. | |
| 14. Monitor and adjust patient care plan based on patient and drug-specific factors. | |
| Communication/Collaboration/Documentation are incorporated throughout the PPCP | |
| Communication | |
| 15. Communicate clearly and effectively with patients, caregivers and the public using appropriate listening, verbal, non-verbal and written communication skills. | |
| 16. Communicate clearly and effectively with health care professionals using appropriate listening, verbal, non-verbal and written communication skills. | |
| 17. Demonstrates sensitivity to and adjustment of communication based on contextual or cultural factors (shows respect for different backgrounds; treats each person with respect; utilizes tools to assist in communication when available and applicable) | |
| 18. Communicate with patients based on health literacy, literacy or cognitive abilities and use behavioral theories of health when appropriate. | |
| Collaboration | |
| 19. Collaborate with other health care professionals to foster a team approach to care. | |
| 20. Recognize the roles and responsibilities of the members of the healthcare team through the engagement of shared decision making. | |
| 21. Integrate pharmacy practice within the inter-professional team to ensure patient care is safe and effective, continuous, and coordinated. | |
| Documentation | |
| 22. Document patient interactions, interventions and outcomes in the patient profile or medical record to facilitate communication and collaboration with health care providers. | |

| Questions (text field) | Grade Received (%) |
|---|--------------------|
| 23. Apply relevant competencies of public health practice to population-based centered care and systems management. | |
| 24. Assess access to rational, safe, and cost-effective drug therapy and pharmaceutical care. | |
| 25. Define and assess the health status of individuals and populations including determinants of health and illness, factors contributing to health promotion and disease prevention, factors influencing the use of health services, and epidemiology of diseases. | |
| 26. Select and implement strategies to prevent or detect disease in the target population. | |

Patient Care Responsibilities Grade (70% of total grade): _____

EDUCATIONAL ACTIVITIES (30% of total grade)

Please evaluate the students on the following educational activities. Please enter in all activities completed by students. Please type in the percentage points each assignment is worth and the final grade received. Below are required activities and the recommended percentage for each.

- One major patient case presentation (5% - *template available*)
(Major indicates a level of preparation above daily patient discussions)
- One disease state presentation (5% - *template available*)
- At least one journal club article published within the last 6 months must be retrieved, evaluated, and assessed. (preceptors can choose more than one article at their discretion) (5% - *template available*)
- Answer drug information questions requested by health care professionals. Document the response, whether the response is provide in writing or verbally, utilizing the drug information request form. (5% - *template available*)

Other educational activities: (10%)

Preceptors may choose from the list below or add additional activities as deemed appropriate. Other activities and percentage of final grade should be determined at the beginning of the rotation and discussed with the student.

- Small informal topic presentations/discussions on select topics
- Attendance and/or presentation at any educational meetings at site (morning report, grand rounds, etc)
- Patient education materials
- Community presentations
- Discuss the design, development, marketing, and reimbursement process for new patient services
- Participation in the preceptors research activities
- Adverse drug reaction reporting
- Pharmacy and therapeutic committee projects/formulary management
- Other activities deemed appropriate by the preceptor

In the "**Percentage Assignment is Worth**" column, enter the percentage the assignment is worth. All items in the "**Percentage Assignment is Worth**" column should add up to **30%**.

In the "**Grade Received**" column, enter what percentage of this assignment the student received. For example, if the "Percentage Assignment is Worth" column indicates that the assignment is worth 4% and the



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PHRD 704, 705, 706 - Non-patient Care Elective

Preceptor and Student Learning Agreement

This preceptor and student learning agreement should be reviewed at the start of the rotation. This document also contains a sample of the evaluation form the preceptor will complete at the midpoint and end of the rotation in E*Value. The preceptor and student should review the evaluation criterion and expectations for the rotation together and sign the learning agreement at the end of the document. Please be sure to complete the “Educational Activities” section with the appropriate educational activities and the percentage each activity is worth.

Rotation Description

Each elective (PHRD 704/705/706) advanced pharmacy practice experience (APPE) site will provide opportunities for students to develop the advanced pharmacy practice experience program outcomes in areas such as, but not limited to, community, health-system, clinical, industry, and administrative pharmacy practice. These experiences will further develop a student’s knowledge and skills in the areas of their practice choice. Interaction with other health care professionals, professionalism, and strong communication skills are strongly emphasized. Students are encouraged to broaden their existing competencies and incorporate their professional and personal goals into these rotations.

Rotation Objectives:

At the completion of this rotation, students will be able to:

Professionalism

- Display professional behavior when interacting with patients, caregivers, other health care professionals, and the public.
- Provide ethical patient care.
- Demonstrate the actions needed for life-long learning abilities.
- Lead the profession to promote safe medication use and improve health care.

Non-patient Care and Communication

- Establish collaborative professional relationship with health care team members.
- Identify, retrieve, evaluate and apply scientific and clinical literature.
- Design evidence-based patient/population treatment and monitoring plans to ensure optimal therapeutic and disease outcomes.
- Communicate clearly and effectively with health care professionals and/or the lay public using appropriate listening, verbal, and nonverbal communication skills.

- Communicate clearly and effectively when interacting with health care professionals using appropriate written communication skills.
- Deliver a presentation utilizing effective communication skills.
- Demonstrate critical thinking skills to facilitate decision making.
- Perform professional activities in compliance with HIPAA (if applicable).
- Comply with and uphold the laws and ethical standards of and related to the practice of pharmacy.

Rotation Responsibilities:

Site-specific responsibilities (50% of grade)

- This will be determined by the preceptor at the specific rotation site. Students must be notified of these daily responsibilities on the first day of the rotation.

Educational activities (50% of grade)

(If any of the below activities account for the majority of the student's daily activities, please re-allocate that portion of the grade to other educational activities (e.g. drug information focus – reallocate drug information question %)

- At least one major presentation on topic determined by preceptor **(5% - template available)**
(Major indicates a level of preparation above daily patient discussions)
- At least one journal club article pertinent to the rotation published within the last 6 months must be retrieved, evaluated, and assessed. (preceptors can choose more than one article at their discretion) **(5% - template available)**
- Literature retrieval and evaluation and/or drug information questions requested by health care professionals. Document the response, whether the response is provided in writing or verbally, utilizing the drug information request form. **(5% - 10% - template available)**
- Other educational activities: **(30-35%)**

Preceptors may choose from the list below or add additional activities as deemed appropriate. Other activities and percentage of final grade should be determined at the beginning of the rotation and discussed with the student.

- Small informal topic presentations/discussions of select topics
- Attendance and/or presentation at any educational/committee meetings at site
- Patient education materials
- Community presentations
- Participation in the preceptors research activities
- Adverse drug reaction reporting *(template available)*
- Other activities deemed appropriate by the preceptor

Rotation Evaluation:

| | | |
|--------------------------------|-----|---|
| Site specific responsibilities | 50% | <i>(Utilize the competency assessment criteria)</i> |
| Educational activities | 50% | |

*****Please list the educational activities and the associated percentage (%) and discuss with the student on the first day of rotation*****

PHRD 704, 705, 706 – NON-PATIENT CARE ELECTIVE

COMPETENCY ASSESSMENT

Select a score within the evaluation range for each criterion. Students must obtain a final average score $\geq 70\%$ on this portion of the assessment to pass the rotation.

For your reference, the midpoint grades for this student have been populated in the fields below. Simply replace those values with their earned final grades.

SITE SPECIFIC RESPONSIBILITIES (50% of grade)

Knowledge Criteria

Assess the student on the following criteria based on the student's stage of development during the Advanced Pharmacy Practice Experience year.

| | | | | | |
|---|---|---|--|--|---|
| 93-100 | 87-92 | 80-86 | 75-79 | 70-74 | 0 <small>(a score of 0.01 must be entered in e-value for the system to perform an accurate calculation)</small> |
| Outstanding | Proficient | Competent | Acceptable | Minimally Acceptable | Unacceptable |
| Infrequent knowledge deficits and learns material in a timely manner without preceptor assistance | Minimal deficits and learns material in a timely manner with minimal preceptor assistance | Some knowledge deficits and learns material in a timely manner with moderate preceptor assistance | Some knowledge deficits and learns material with consistent preceptor assistance | Significant knowledge deficits; requires constant preceptor assistance | Minimal knowledge despite repeated requests from preceptor to learn material |

****N/A (Not applicable) – If criterion is not applicable, please simply leave it BLANK****

| Questions (text field) | Entered % Grade by Preceptor |
|---|-------------------------------------|
| 1. Identify the epidemiology and etiology of diseases. | |
| 2. Discuss normal physiologic processes. | |
| 3. Explain the pathophysiology of diseases | |
| 4. Explain the pharmacologic actions (MOA, side effects, drug interactions, pharmacogenetics/pharmacogenomics) of drug therapy. | |
| 5. Discuss the pharmacokinetic and pharmacodynamic effects of drug therapy. | |

| | |
|--|---------------------------|
| Rotation Specific Additional Knowledge Criteria | Entered % Grade by |
|--|---------------------------|

| | | |
|----|----------------------|----------------------|
| | | Preceptor |
| 1. | <input type="text"/> | <input type="text"/> |
| 2. | <input type="text"/> | <input type="text"/> |
| 3. | <input type="text"/> | <input type="text"/> |
| 4. | <input type="text"/> | <input type="text"/> |
| 5. | <input type="text"/> | <input type="text"/> |

Preceptors should enter and evaluate, according to the scale above, outcomes specific to their rotation type.

Knowledge Criteria - Comments

Skills Criteria

Assess the student on the following criteria based on the student's stage of development during the Advanced Pharmacy Practice Experience year.

| 93-100 | 87-92 | 80-86 | 75-79 | 70-74 | 0 <small>(a score of 0.01 must be entered in e-value for the system to perform an accurate calculation)</small> |
|--|--|---|---|--|--|
| Outstanding | Proficient | Competent | Acceptable | Minimally Acceptable | Unacceptable |
| Independently performs the skill without preceptor assistance Independently identifies and master skills without preceptor assistance | Performs the skill with minimal preceptor assistance | Performs the skill with moderate preceptor assistance | Performs the skill with frequent preceptor assistance | Performs the skill only with consistent preceptor assistance | Unable to perform the skill despite consistent preceptor assistance |

****N/A (Not applicable) – If criterion is not applicable, please simply leave it BLANK****

| Questions (text field) | Entered % Grade by Preceptor |
|--|------------------------------------|
| 6. Retrieve scientific and clinical literature to solve patient/health care problems and make evidence-based medication therapy decisions. | |
| 7. Evaluate and apply scientific and clinical literature to solve patient/health care problems and make evidence-based medication therapy decisions. | |
| 8. Collect and organize patient data to identify and resolve existing and potential medication therapy problems. | |
| 9. Collect and utilize data to make clinical decisions for populations of patients being | |

| | |
|---|--|
| studied. | |
| 10. Describe how pharmacists can apply pharmacoeconomic principles in daily practice. | |
| 11. Utilize pharmaceconomic models to evaluate the impact of drug therapy decisions on a health care system. | |
| 12. Discuss how technology can improve safety within healthcare systems. | |
| 13. Identify different quality, safety, and performance improvement measures. | |
| 14. Interpret and evaluate patient and/or medication data to identify and resolve existing or potential therapy problems. | |
| 15. Develop a patient/population specific care plan (prescription, non-prescription medications, complementary and alternative therapies, and dietary supplements). | |
| 16. Explain the rationale and provide supporting evidence to justify the patient/population specific care plan. | |
| 17. Monitor and adjust the care plan based on patient/population and drug-specific factors. | |
| 18. Educate patients/health care professionals regarding medication use and related devices. | |
| 19. Collaborate with other health care professionals to foster effective team work. | |
| 20. Communicate clearly and effectively with health care professionals using appropriate listening, verbal, non-verbal and written communication skills. | |
| 21. Communicate clearly and effectively with patients, caregivers and the public using appropriate listening, verbal, non-verbal and written communication skills. | |
| 22. Establish collaborative professional relationships with health care team members. | |
| 23. Document interactions, interventions and outcomes to facilitate communication and collaboration with health care provider/professionals. | |
| 24. Utilize relevant behavioral theories of health, illness and medication use and apply these theories to the development of the patient/population specific care plan. | |
| 25. Apply ethical principles in health care decision making. | |
| 26. Apply relevant competencies of public health practice to population-based centered care and systems management. | |
| 27. Define and assess the health status of individuals and populations including determinants of health and illness, factors contributing to health promotion and disease prevention, factors influencing the use of health services, and epidemiology of diseases. | |
| 28. Select and implement strategies to prevent or detect disease in a target population. | |
| 29. Demonstrate critical thinking skills to facilitate decision making. | |

| | Rotation Specific Additional Skills Criteria | Entered % Grade by Preceptor |
|----|---|-------------------------------------|
| 1. | _____ | <input type="text"/> |
| 2. | _____ | <input type="text"/> |
| 3. | _____ | <input type="text"/> |
| 4. | _____ | <input type="text"/> |
| 5. | _____ | <input type="text"/> |

| | | |
|------------------------|------------------------|------------------------|
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| (entered by preceptor) | (entered by preceptor) | (entered by preceptor) |
| | TOTAL = 50% | |

Educational Activities - Comments

Educational Activities Grade (50% of total grade): _____

I certify that my student completed all requirements for the Advanced Pharmacy Practice Experience.

Yes No

Midpoint Grade:

Final Grade: _____

Final - Comments

*****Students must PASS a separate professionalism assessment with a mean score of ≥ 3.0 (no individual score < 2) in order to PASS the rotation*****

Preceptor and Student Learning Agreement Statement:

I have received the Preceptor and Student Learning Agreement and reviewed the assessment methods with my preceptor. I understand all methods by which I will be assessed in this rotation.

I understand all patient data reviewed or discussed during the rotation must be kept confidential. Cases should only be discussed with the preceptor or members of the health care team. Any breach of patient confidentiality, however minor, may result in failure of the rotation.

Student Name (Printed)

Student Signature

Date

Preceptor Name (Printed)

Preceptor Signature

Date



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PHRD 707 Capstone

Rotation Description

This one week capstone experience will be completed after successful completion of PHRD 700 through PHRD 706. This course integrates campus based patient case presentations, project poster presentations and community based health promotion & prevention activities. These assignments will be developed and presented by students under the supervision of faculty.

The goals of the Capstone are for students to continue their contributions to the community utilizing their full complement of knowledge and skills and to demonstrate what they have achieved throughout the experiential education program. During this week, three key events will take place. First, students will conduct a health fair for an underserved population near the University. Second, students will spend one day providing care for the primary need(s) of their AdvoCaring partner agency. Third, students will host an interactive educational program and reception that consists of podium and poster presentations for all key stakeholders, partners and P-3 students. Students will be assessed on a pass/fail basis for this experience.

Rotation Objectives:

- Display professional behavior when interacting with faculty, staff, clients, patients, and other health care professionals.
- Provide ethical patient care.
- Foster and demonstrate a teamwork approach when conducting health care events.
- Communicate clearly and effectively with health care professionals and/or the lay public using appropriate listening, verbal, and nonverbal communication skills.
- Demonstrate effective communication skills when interacting with diverse patient populations.
- Design patient education materials utilizing effective communication strategies.
- Counsel patients regarding medical conditions and drug therapy.
- Deliver a presentation utilizing effective communication skills.
- Plan, organize, and implement a health care event.
- Demonstrate critical thinking skills to facilitate decision making.

Rotation Responsibilities:

- AdvoCaring event
 - This will take place at the AdvoCaring agency
 - Students identify and implement a project/event that meets at least one to two health care needs of the agency
- Health fair – students will work with their base teams and provide the following:
 - Poster presentations
 - Podium health topic presentations
 - Health & wellness education/screening services
 - Medication education services
- Education Program & Reception
 - Students will work with their base teams and present the following:
 - Poster presentations
 - Podium presentations
 - Educational information/screenings

Rotation Evaluation:

Pass/Fail

Students will be evaluated for the following activities utilizing the templates in the APPE manual.
(*Students will be evaluated on an individual basis on the activities completed for each event*)

- Disease state/topic presentations
- Poster presentations
- Podium presentations
- design of patient education materials

Professionalism – APPE rubric

*****Students must PASS (≥ 3.0 median score) a separate professionalism assessment in order to PASS the rotation*****

Advanced Pharmacy Practice Experiences Professionalism Assessment

****Evaluate the student based on the Likert scale below. Comments are encouraged for all performance levels, but are REQUIRED for performance levels less than 3 (three). Please note that the student MUST earn a mean score of 3.0 or above (and no individual score below a 2.0) on this professionalism assessment in order to PASS the rotation****

| Unacceptable Performance | Needs Improvement | Acceptable Performance | Very Good Performance | Exceptional Performance | NA |
|--|--|---|--|---|--|
| 1 | 2 | 3 | 4 | 5 | NA |
| Student does not demonstrate this behavior despite preceptor prompting | Student inconsistently demonstrated this behavior, requires consistent preceptor prompting | Student demonstrated this behavior, minimal preceptor prompting | Student demonstrated this behavior, occasional to no preceptor prompting | Student consistently demonstrated this behavior, does not require preceptor prompting | Not able to assess; either not observed or insufficiently observed |

Emotional intelligence (EQ) is a set of emotional and social skills that collectively establish how well we perceive and express ourselves, develop and maintain social relationships, cope with challenges, and use emotional information in an effective and meaningful way. (EQ-i^{2.0})

| Emotional Intelligence Elements per EQ-I 2.0 | Professionalism Assessment Area | Midpoint Grade | Final Grade |
|---|--|----------------|-------------|
| Self-Actualization The ability and tendency to want to grow, to stretch and to strive—to see your full potential, set meaningful goals and work toward your betterment and fulfillment. | <ul style="list-style-type: none"> • Student is self-motivated (is an active learner – seeks knowledge; asks questions, searches for information, takes responsibility for own learning) | | |
| | <ul style="list-style-type: none"> • Student accepts constructive criticism and modifies behavior if necessary | | |
| | <ul style="list-style-type: none"> • Student demonstrates a desire to exceed expectations (goes “above and beyond the call of duty”, attempts to exceed minimal standards and requirements for tasks/assignments/responsibilities) | | |
| Self-Regard The ability and the tendency for you—in light of both your positive and negative | <ul style="list-style-type: none"> • Student demonstrates confidence (acts and communicates in a self-assured manner, yet with modesty and humility) | | |
| | <ul style="list-style-type: none"> • Student maintains good hygiene and grooming habits | | |

| | | | |
|--|---|--|--|
| qualities—to both like and have confidence in yourself. | | | |
| <p style="text-align: center;">Independence</p> <p>Your ability and tendency to be self-directed in your thinking, feeling, and actions—to go at it alone when needed.</p> | <ul style="list-style-type: none"> • Student utilizes time efficiently (allocates and utilizes appropriate amounts of time to fulfill responsibilities; utilizes others' time wisely) | | |
| | <ul style="list-style-type: none"> • Student is punctual (arrives to practice setting and meetings on time, meets deadlines) | | |
| | <ul style="list-style-type: none"> • Student takes responsibilities for one's own actions (does not try to blame others for insufficient or untimely work) | | |
| | <ul style="list-style-type: none"> • Student is reliable, dependable and follows through with responsibilities (can be counted on; if task is left incomplete or problem is left unresolved, student seeks aid) | | |
| <p style="text-align: center;">Interpersonal Relationships</p> <p>Your ability and tendency to give and receive trust and compassion, and to establish and maintain satisfying personal relationships.</p> | <ul style="list-style-type: none"> • Student is respectful (demonstrates regard for patients, peers, superiors, other personnel and property) | | |
| | <ul style="list-style-type: none"> • Student is cooperative (non-argumentative; willing and helpful) | | |
| | <ul style="list-style-type: none"> • Student displays honesty and integrity in all interactions with patients and other health care professionals (truthful and straightforward; behaves in an ethical manner) | | |
| <p style="text-align: center;">Empathy</p> <p>Your ability and willingness to take notice of and be sensitive to other people's needs and feelings.</p> | <ul style="list-style-type: none"> • Student is non-judgmental (demonstrates an attitude of open-mindedness towards others and situations; does not "stereotype" others or prejudge situations) | | |
| | <ul style="list-style-type: none"> • Student is compassionate and empathetic (demonstrates appreciation of others' positions; attempts to identify with others' perspectives; demonstrates consideration towards patients and others) | | |
| <p style="text-align: center;">Social Responsibility</p> <p>Your ability and tendency to cooperate and contribute to the welfare of a larger social system, to have and act in accordance with a social</p> | <ul style="list-style-type: none"> • Social awareness and responsibility (takes responsibility for adapting and providing quality patient care to diverse patient populations) | | |

| | | | |
|--|--|--|--|
| conscience and to show concern for the greater community. | | | |
| Impulse Control The ability to resist or delay a drive or temptation to do or say something or to decide too quickly or rashly. | <ul style="list-style-type: none"> • Student is diplomatic (fair and tactful in all dealings with patients, superiors, peers, and other personnel; Avoids inappropriate comments and gestures) | | |
| | <ul style="list-style-type: none"> • Student displays self-control (thinks through thoughts before speaking; control emotional responses) | | |
| Stress Tolerance Your ability and tendency to live your life effectively in the face of stress. | <ul style="list-style-type: none"> • Student appropriately handles stress (remains calm, levelheaded, composed in critical or difficult situations) | | |
| Optimism Your ability and tendency to look at the brighter side of life and to maintain a positive attitude even in the face of adversity. You are hope and are enabled to see the future as a positive, inviting place. | <ul style="list-style-type: none"> • Student leads the profession to promote safe medication use and to improve health care; Student maintains professional competence (advocates for the profession; promotes life-long learning) | | |

(adapted from Hammer D. from University of Washington, American Pharmacists Association, American Board of Internal Medicine; Taxonomy of Professionalism, Daniel Brown, AJPE, 2009; Multi-Health Systems Inc. Toronto, ON; 2011; EQ-i^{2.0}, MHS copyright 2011)

I attest that the student has been present at my site for the required amount of time.

Yes No

Midpoint Final Mean Score:

Midpoint Final Comments (PROFESSIONALISM):

Final Mean Score: _____

Final Comments (PROFESSIONALISM) - If this box is highlighted in red and you are not able to submit this evaluation, this means that the student has received a score <3.0 and comments must be made before submission:

*****Students must PASS (> 3.0 mean score) a professionalism assessment in order to PASS the rotation*****

APPE Experiential Site and Preceptor Evaluation

(to be completed by the student)

Site _____
 Preceptor _____
 Title of Experience _____

Phone Number _____
 E-Mail _____
 Date of Evaluation _____

Experiential Site

| Type of practice | | |
|---------------------------------|--|-------------------------------------|
| Hospital/Inpatient ____ | Community Pharmacy Independent ____ | Drug Information/Poison Center ____ |
| Hospital/Internal Medicine ____ | Ambulatory Care Clinic ____ | Managed Care Organization ____ |
| Hospital/Outpatient ____ | Long-term Care/Extended Care Facility ____ | Industry ____ |
| Community Pharmacy Chain ____ | | Other ____ |

Evaluate the experiential site, preceptor, and overall rotation utilizing the following scale:

| | | | | | |
|------------------------|--------------------------------------|-----------------------------|----------------------------|--------------------------|-----------------------------------|
| N/A 0 | Strongly Disagree 1 | Disagree 2 | Neutral 3 | Agree 4 | Strongly Agree 5 |
|------------------------|--------------------------------------|-----------------------------|----------------------------|--------------------------|-----------------------------------|

Site Information

| | | | | | | |
|---|---|---|---|---|---|---|
| Activities, projects, and assignments fulfilled learning objectives of experience | 0 | 1 | 2 | 3 | 4 | 5 |
| I had access to necessary patient information (as pertinent for experience) | 0 | 1 | 2 | 3 | 4 | 5 |
| I had access to necessary reference materials, either hard copy or electronic | 0 | 1 | 2 | 3 | 4 | 5 |
| I had an adequate number of patient cases to facilitate my learning (as pertinent for experience) | 0 | 1 | 2 | 3 | 4 | 5 |
| I had adequate space to work | 0 | 1 | 2 | 3 | 4 | 5 |
| The site and the staff displayed a professional image | 0 | 1 | 2 | 3 | 4 | 5 |
| The staff (pharmacists, interns, and technicians) support student interactions and involvement | 0 | 1 | 2 | 3 | 4 | 5 |
| Patient-centered care philosophy was evident in practice | 0 | 1 | 2 | 3 | 4 | 5 |
| The site provided an environment that facilitated my learning | 0 | 1 | 2 | 3 | 4 | 5 |
| Comments: | | | | | | |

Inter-Professional Practice Experience (IPE) Information

| | | | | | | |
|---|---|---|---|---|---|---|
| This site provided inter-professional team-based experiences and supported my involvement in these practices. | 0 | 1 | 2 | 3 | 4 | 5 |
| This site provided opportunities to learn about the roles and responsibilities of different health care professionals involved in patient care. | 0 | 1 | 2 | 3 | 4 | 5 |

| | | | | | | |
|--|---|---|---|---|---|---|
| I had an adequate number of experiences with other health care professionals in a team-based environment to facilitate my understanding of providing integrated inter-professional health care. | 0 | 1 | 2 | 3 | 4 | 5 |
| This site provided a better understanding of how working in an inter-professional health care team improves communication, patient outcomes and overall care. | 0 | 1 | 2 | 3 | 4 | 5 |
| I had the opportunity to interact with other health care professionals (as pertinent for experience) | 0 | 1 | 2 | 3 | 4 | 5 |
| Please select the health care professions you worked with in a team-based environment during this rotation experience (Select all that apply). <ul style="list-style-type: none"> • Attending Physicians • Medical Residents • Medical Students • Nursing Staff • Nursing Students • Social Workers • Dieticians/Nutritionists • PT/OT • Physician Assistants • Others (Please specify): _____ | | | | | | |
| Please select the activities/experiences where you worked as part of an inter-professional team. <ul style="list-style-type: none"> • Medical Rounds • Topic Discussions/Presentations • Patient Education • Others (Please specify): _____ | | | | | | |
| Upon completion of this rotation, I feel more confident in my ability to effectively collaborate with other health care professionals to foster a team-based approach to patient care. | 0 | 1 | 2 | 3 | 4 | 5 |
| Comments: | | | | | | |

Preceptor Information

The Preceptor:

| | | | | | | |
|---|---|---|---|---|---|---|
| Leadership and Management | | | | | | |
| Expectations and responsibilities were clearly expressed to me at the beginning of the experience | 0 | 1 | 2 | 3 | 4 | 5 |
| Demonstrated effective managerial and leadership relationships with colleagues | 0 | 1 | 2 | 3 | 4 | 5 |
| Recognized his/her own limitations | 0 | 1 | 2 | 3 | 4 | 5 |
| Role Model Practitioner | | | | | | |
| Served as a role model for me | 0 | 1 | 2 | 3 | 4 | 5 |
| Was approachable | 0 | 1 | 2 | 3 | 4 | 5 |
| Demonstrated high ethical and personal character | 0 | 1 | 2 | 3 | 4 | 5 |
| Displayed interest /enthusiasm in teaching | 0 | 1 | 2 | 3 | 4 | 5 |

| Facilitates Teaching | | | | | | |
|--|---|---|---|---|---|---|
| Displayed patient care problem solving skills | 0 | 1 | 2 | 3 | 4 | 5 |
| Explained clinical reasoning process to me | 0 | 1 | 2 | 3 | 4 | 5 |
| Was readily available to answer questions and concerns | 0 | 1 | 2 | 3 | 4 | 5 |
| Displayed strong drug therapy knowledge | 0 | 1 | 2 | 3 | 4 | 5 |
| Displayed appropriate interpersonal communication skills | 0 | 1 | 2 | 3 | 4 | 5 |
| Promotes Self-Directed Learning and Provides Constructive Feedback | | | | | | |
| Provided regular and consistent feedback | 0 | 1 | 2 | 3 | 4 | 5 |
| Provided constructive feedback | 0 | 1 | 2 | 3 | 4 | 5 |
| Discussed written evaluation with me at the midpoint and end of the experience | 0 | 1 | 2 | 3 | 4 | 5 |
| Responded to students' specific learning needs | 0 | 1 | 2 | 3 | 4 | 5 |
| Made student teaching an important focus of practice | 0 | 1 | 2 | 3 | 4 | 5 |
| Treated students as colleagues in training | 0 | 1 | 2 | 3 | 4 | 5 |
| Comments: | | | | | | |
| | | | | | | |

Rotation Information

| | | | | | | |
|---|---|---|---|---|---|---|
| My verbal communication skills were further developed on this rotation | 0 | 1 | 2 | 3 | 4 | 5 |
| My written communication skills were further developed on this rotation | 0 | 1 | 2 | 3 | 4 | 5 |
| My clinical skills were further developed on this rotation | 0 | 1 | 2 | 3 | 4 | 5 |
| I applied what I learned in my didactic coursework on this rotation | 0 | 1 | 2 | 3 | 4 | 5 |
| I believe this experience will help me be a better pharmacist | 0 | 1 | 2 | 3 | 4 | 5 |
| Comments: | | | | | | |
| | | | | | | |

Rate the overall quality of this practice experience. Excellent___ Good___ Fair___ Poor___

I would recommend this site to others. Yes___ No___

How could this practice experience be improved?

Section Five

Resources & Evaluation Tools

Experiential Education Absence Request Form

Please submit the completed form to Preceptor for signed approval and upload with signatures to e-value for Experiential Education Director approval at least one week prior to a planned absence OR the day of an absence due to unforeseen circumstances.

Student _____ Date _____
Preceptor _____
Rotation/Site _____

Number of days of absence included in this request: _____

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

REASON FOR ABSENCE:

- _____ Illness
- _____ Death in Family
- _____ Residency Interview (must show copy of invitation to interview to preceptor and OEE)
- _____ Attend Professional Meeting
- _____ Other Explanation: (must be an acceptable reason to preceptor and OEE)

PLAN TO MAKE-UP TIME:

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

_____/_____/_____
(Student Signature) (Date)

Approval _____/_____/_____
(Preceptor Signature) (Date)

Email Communication to Director of EE & Upload to E-value _____/_____/_____
(Date)

THE HEALTH PROFESSIONALS' INVENTORY OF LEARNING STYLES (H-PILS)

Think about a few recent situations where you had to learn something new to solve a problem. This could be any kind of situation: While you were taking a course at school, learning to use new software, or figuring out how to assemble a barbecue.

Now, circle the letter in the column that best characterizes what works best for you in situations like the ones you've thought about.

| When I'm trying to learn something new | Usually | Sometimes | Rarely | Hardly |
|---|---------|-----------|--------|--------|
| 1. I like to watch others before trying it for myself. | B | D | C | A |
| 2. I like to consult a manual, textbook or instruction guide first. | B | C | D | A |
| 3. I like to work by myself rather than with other people. | A | C | B | D |
| 4. I like to take notes or write things down as I'm going along. | B | C | D | A |
| 5. I'm critical of myself if things don't work out as I hoped. | B | C | D | A |
| 6. I usually compare myself to other people just so I know I'm keeping up. | B | D | C | A |
| 7. I like to examine things closely instead of jumping right in. | B | D | C | A |
| 8. I rise to the occasion if I'm under pressure. | C | A | B | D |
| 9. I like to have plenty of time to think about something new before trying it. | D | B | C | A |
| 10. I pay a lot of attention to the details. | B | C | A | D |
| 11. I concentrate on improving on the things I did wrong in the past. | C | A | D | B |
| 12. I focus on reinforcing the things I got right in the past. | B | D | A | C |
| 13. I like to please the person teaching me. | D | B | A | C |
| 14. I trust my hunches. | D | C | A | B |
| 15. I'm usually the first one in a group to finish whatever we're doing. | A | C | D | B |
| 16. I like to take charge of a situation. | C | A | B | D |
| 17. I'm well-organized. | B | A | C | D |

Now, add up the number of times you circled each letter.

A = _____ B = _____ C = _____ D = _____

Your **DOMINANT** learning style is the letter you circled most frequently.

Your **SECONDARY** learning style is the next most-frequently circled letter.

A= Accommodator

You enjoy dealing directly with people and have little time or patience for indirect or soft-sell jobs. You enjoy looking for, and exploiting, opportunities as they arrive, and you have an entrepreneurial spirit. You learn best in a hands-on, unencumbered manner, not in a traditional lecture-style format. Though you don't take any particular pleasure in leading others, you do so because you sense you are best-suited for the job. You are confident, have strong opinions and value efficiency. You are concerned about time and like to see a job get done. Sometimes, however, your concern with efficiency means that the quality of your work may suffer and you may not be paying as much attention to others' feelings and desires as you ought to.

B= Assimilator

You generally prefer working by yourself, at your own pace, in your own time, or with a very small group of like-minded people. You tend to avoid situations where you are the center of attention, or you are constantly being watched—you prefer to be the one observing (and learning) from others. You have an ability to learn from your own, and others', mistakes. You place a high priority on getting things done properly, according to the rules but, at times, you can be your own worst critic. You value organization and attentiveness to detail.

C= Converger

You are focused, practical and to the point. You usually find yourself in a leadership role and enjoy this challenge. You have little time or patience for those who dither or are indecisive or who spend too much time on impractical, theoretical matters. You are good at coming to quick, decisive conclusions, but you recognize that at times your speed may result in less than perfect results. You would rather get a good job done on time than get an excellent job delivered late. You like being in a high-performance, high-energy, fast-paced environment.

D = Diverger

You enjoy out-of-the-box environments where time and resources are not particularly constrained. You have a flair for keeping others entertained and engaged, and sincerely believe this is the way to motivate others and get the best out of everyone. You are most concerned—sometimes too concerned—about how others perceive you, and you place a high priority on harmony. You find little difficulty dealing with complex, ambiguous, theoretical situations (provided there is not a lot of pressure to perform), but sometimes you have a hard time dealing with the practical, day-to-day issues.

Now, as a group of individuals with the same dominant learning style, think about the following questions and share your opinions.

- 1) What professional, social or personal characteristics do you have in common?
- 2) What teaching and learning methods work best for you?
- 3) What teaching and learning methods do not work well for you?
- 4) What are some examples of the type of feedback that motivates you?
- 5) What are some examples of the type of feedback that discourages you?

Now, share your group's discussion with members of the other learning-styles' groups.



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Pharmacist Care Lab - SOAP Criteria

|  <p>PPCP Pharmacist Patient Care Process</p> | <p>Subjective:</p> <ul style="list-style-type: none"> It includes descriptive information that cannot be confirmed by diagnostic tests or procedures It includes information derived from the patient's perspective: Chief Complaint, History of Present Illness, Histories, Allergies, Medication, and Review of Systems | |
|---|--|--|
|  | <p>Chief Complaint (CC)</p> | <ol style="list-style-type: none"> Indicate the reason for the visit, as stated by the patient in his own words and may include the patient's symptoms and/or complaints <ul style="list-style-type: none"> <i>Written as a patient quote or as a general reason, but is usually short, consisting of one to two sentences or short phrases</i> |
| | <p>History of Present Illness (HPI)</p> | <ol style="list-style-type: none"> Summarize the story of present illness accurately and chronologically <ul style="list-style-type: none"> <i>The information is collected DURING the patient interview and is obtained from speaking with the patient</i> <i>It includes pertinent story of the illness and is written as pros in full sentences and paragraph form summarized by the pharmacist in professional language related to chief complaint</i> <i>Summary of the pertinent information varies based on setting:</i> <ul style="list-style-type: none"> <i>Hospital (inpatient)/Long Term Care/Nursing Home: admission reason and major findings or treatments to date</i> <i>Community/Ambulatory Care: major events prior to date of patient being seen in clinic, patient's story</i> <i>E.g. 56 year old male referred to see a clinical pharmacist for diabetes counseling. Patient recently diagnosed with diabetes mellitus type II two weeks with an A1c of 11% and was given a prescription for insulin glargine 20 units SubQ once daily at night time that she was instructed to start today. During interview patient is overwhelmed and states she does not understand how to use her medication.....</i> |
| | <p>Histories</p> | <ol style="list-style-type: none"> List past medical history List social history List family history List surgical history |
| | <p>Allergies</p> | <ol style="list-style-type: none"> List medication allergies and reaction List food allergies and reaction |
| | <p>Medications (derived from patient interview)</p> | <ol style="list-style-type: none"> List patient's current medication to include: Name, Indication, Dosage Strength, Dose, Frequency, Duration, Adherence <ul style="list-style-type: none"> <i>This is usually the home medication list</i> |
| | <p>Review of Systems (ROS)</p> | <ol style="list-style-type: none"> Identify pertinent findings from the head to toe review of systems |
| <p>PPCP</p> | <p>Objective:</p> <ul style="list-style-type: none"> It includes information that can be measured or verified objectively | |
|  | <p>Medications (derived from medical record)</p> | <ol style="list-style-type: none"> Identify Vital signs Identify pertinent Physical Exam findings Identify Mental Status Exam findings (if available) Identify pertinent labs and other tests (Laboratory tests, POCT, Imaging) |
| | <ul style="list-style-type: none"> Identify patient's current medication to include: Name, Indication, Dosage Strength, Dose, Frequency, Duration, Adherence <ul style="list-style-type: none"> <i>Hospital setting should have two medication lists: Home medications (entered under subjective) and Inpatient medications (entered under objective)</i> | |

| | |
|-------------|--|
| PPCP | Assessment: |
| | <ul style="list-style-type: none"> It includes the pharmacist's evaluation of the collected subjective and objective information The assessment justifies and provides the framework for the pharmacist's plan of action and recommendation It includes: Problem ID, Evaluation Summary, Goals of Therapy, Potential Treatment Options, Non-Pharmacologic Options |

| | | | | | | | |
|---|--|---|--|--|--|--|---|
|  | Problem ID and Prioritize | <ol style="list-style-type: none"> Identify the most important or acute disease state problem (e.g. Hypertension, Diabetes mellitus type II, and Urinary Tract Infection) <ul style="list-style-type: none"> Community/Ambulatory Care: can consider reason for pharmacist referral as the first problem List the patient's identified health related problems in order of decreasing priority | | | | | |
| | Evaluation and Summarize | Interpret, evaluate, and summarize pertinent information related to specific Problem ID identified above | | | | | |
| | | Subjective | Objective | Risk Factors/Cause/Etiology | Severity of Problem ID | Disease state status | Appropriateness of current treatment |
| | | 1. Identify and interpret pertinent CC/HPI/ROS related to specific problem ID being addressed | 2. Identify and interpret pertinent histories, medications, vitals, labs, imaging related to specific problem ID being addressed | 3. Identify any risk factors/etiology/triggers specific to the patient that puts him/her risk for problem ID/disease | 4. Classify disease stage or severity based on guidelines (e.g. stage I, II, III) Mild/Moderate/Severe | 5. Summarize the current status of the disease state: e.g. Resolved/Worsening Subtherapeutic/Supratherapeutic Stable/Unstable Controlled/Uncontrolled Improved/Unimproved | 6. Assess the appropriateness of the current regimen <i>Consider the following when assessing the appropriateness of the current treatment</i> <ul style="list-style-type: none"> Medication related Problem ID (No indication, inappropriate: indication, dose, frequency, route, dosage form, Therapeutic duplication, Drug allergy or intolerance, Adverse drug event, Drug Interactions (Drug-Drug/Drug-Disease/Drug-Nutrition/Drug-Laboratory), Contraindication) Patient related Problem ID (Patient understanding/knowledge of medication, Adherence, Cost barriers, Health literacy) |
| | Goals of therapy | <ol style="list-style-type: none"> Identify goals of therapy <ul style="list-style-type: none"> The goals of therapy should follow national guidelines and follow the principle of evidenced-based medicine Document goals of therapy for continuity of care with progression toward achievement of that goal Identify all goals objectively: E.g. According to AHA guidelines, goal A1c is | | | | | |
| | Potential treatment options | <ol style="list-style-type: none"> Identify all potential pharmacotherapy treatment options (can be identified by drug class) based on guidelines and include references when possible <ul style="list-style-type: none"> E.g. According to AHA guidelines, first line therapy for the treatment of x is drugs y and z Give rationale/justification on why you would make changes or recommend one regimen vs another or continue current therapy based on patient/medication/disease state factors <ul style="list-style-type: none"> E.g. Based on patient's CrCl, drug X would not be appropriate based on limited clearance and increased risk of toxicity. Instead, would consider drug y based on no need for renal dosage adjustment\ Answer any Pharmaceutical Science Questions (Appendix I) as designated by faculty | | | | | |
| Non-pharmacologic options | <ol style="list-style-type: none"> Identify all potential non-pharmacologic treatment options based on guidelines and include references when possible <ul style="list-style-type: none"> Consider: diet restrictions, patient support programs, physical activity Give rationale/justification on why you would make changes, recommend one option vs another, or continue current non-pharmacologic therapy based on patient/medication/disease state factor | | | | | | |

| | |
|-------------|--|
| PPCP | Plan: |
| | <ul style="list-style-type: none"> It will include a complete and specific documentation of all recommendations related to Problem ID It will include: all pharmacological and non-pharmacological recommendations, monitoring, patient education, follow-up and referrals |

| | | |
|---|-----------------------------|---|
|  | Treatment plan | <ol style="list-style-type: none"> Create a patient-centered plan in regards to medication therapies <ul style="list-style-type: none"> Use the following action words: Initiate/Discontinue/Continue/Restart/Hold regarding the medication plan For medication recommendations, always include dosage strength, dose, route, frequency, and duration of therapy List who you will contact to make recommendations if applicable (patient/provider/case manager/caregiver ect.) Create a patient-centered plan in regards to non-pharmacologic therapies |
| | Monitor | <ol style="list-style-type: none"> Create a complete efficacy monitoring plan for each medication and/or the disease <ul style="list-style-type: none"> Efficacy: Include: all objective labs that are associated with helping assess goals of drug and disease state therapy are met; signs and symptoms associated with resolution or improvement of disease state Create a complete safety monitoring plan for each medication <ul style="list-style-type: none"> Safety: Include all objective labs, signs, and/or symptoms related to associated adverse effects of medication |
| | Counseling/Education | <ol style="list-style-type: none"> Summarize the key points of the interventions made during this encounter <ul style="list-style-type: none"> Highlight any new medications, medications that were changed, or medications that were discontinued Describe the following counseling points: <ol style="list-style-type: none"> Identify the name (generic and brand) of the medication State the purpose/indication of the medication in terms the patient can understand Describe the dose and frequency and how to take the medication State the expected duration of therapy Describe what to do if patients missed a dose List the common adverse effects Explain proper storage requirements If medication device, describe the specific steps for device use education Explain the important monitoring parameters for efficacy for the disease/medication <ol style="list-style-type: none"> Explain to patient what symptoms and signs will improve by adhering to the plan and when to follow up if the plan is not effective Explain the important monitoring parameters for safety for medications <ol style="list-style-type: none"> Explain the potential adverse effects and any drug interactions, discuss the strategies for prevention/identification/management <p>**If counseling already occurred, also document information related to patient understanding of counseling</p> |
| | Follow-up | <p>Create a complete plan for follow-up for the problems addressed:</p> <ol style="list-style-type: none"> List when, what, and who you will follow-up with based on your plan <ul style="list-style-type: none"> Choose follow-up timelines based on guidelines and/or acuity <ul style="list-style-type: none"> E.g. Community/Ambulatory setting: 2-4 weeks vs Hospital setting: daily if hospitalized or within 1 week of hospital discharge Examples of "who" to follow up with may include: provider, case manager, patient, or caregiver of patient based on plan Describe if referral to another provider is required and provide the rationale |

| | | NOT ACCEPTABLE (0 points) | NEEDS IMPROVEMENT (3 points) | COMPETENT (4 points) | EXCELLENT (5 points) | Score | Weight | Value |
|-------------------|-----------------------------------|---|---|--|--|--------------|---------------|--------------|
| Subjective | HPI | Provided <50% of pertinent information (CC only) OR <50% of HPI is accurate OR P2 spring and all P3s: information verbatim from case or lab handout | Summarized 50-80% of pertinent information OR Provided information other than "S". | Provided partial, but >80%, and accurate summary of pertinent information | Provided complete and concise summary of pertinent information AND contains "S" only | | | |
| | ROS | Provided <50% of pertinent ROS information OR <50% of ROS information is accurate OR P2 spring and all P3s: information verbatim from case or lab handout | Provided 50-80% of pertinent positives and/or negatives | Provided partial, but >80%, and accurate summary of pertinent information | Provided complete and concise summary of pertinent ROS information AND contains "S" only. | | | |
| Comments: | | | | | | | | |
| | | | | | | | | Total |
| Objective | Histories | Provided <50% of pertinent histories OR <50% of history information is accurate OR P2 spring and all P3s: information verbatim from case or lab handout | Provided 50-80% of pertinent histories OR Provided information other than "O" OR Provided elements of histories that are not pertinent to patient's current problems. | Provided partial, but >80%, and accurate summary of pertinent histories | Provided complete and concise summary of pertinent histories AND contains "O" only | | | |
| | Medications | Provided <50% of pertinent medication information OR <50% of medication information is accurate OR P2 spring and all P3s: information verbatim from case or lab handout | Provided 50-80% of pertinent medication information OR Provided information other than "O" | Provided partial, but >80%, and accurate summary of pertinent medication information | Complete and concise summary of pertinent information AND distinguishes home medications from current medications AND contains "O" only. | | | |
| | Physical Exam & Vitals | Provided <50% of pertinent PE/vitals information OR <50% of PE / vitals information is accurate OR P2 spring and all P3s: information verbatim from case or lab handout | Provided 50-80% of pertinent PE/vitals information OR Provided information other than "O" OR Provided elements of PE that are not pertinent to patient's current problems | Provided partial, but >80%, and accurate summary of pertinent PE/vitals information | Complete and concise summary of pertinent information AND contains "O" only. | | | |
| | Labs & Other Tests | Provided <50% of pertinent lab information OR <50% of lab information is accurate OR P2 spring and all P3s: information verbatim from case or lab handout | Provided 50-80% of pertinent lab information OR Provided information other than "O". | Provided partial, but >80%, and accurate summary of pertinent lab information | Complete and concise summary of pertinent lab information AND contains "O" only. | | | |
| Comments: | | | | | | | | |
| | | | | | | | | Total |

| | | | | | | | | |
|-------------------|---|--|---|--|---|--|--|--------------|
| Assessment | Problem ID and Prioritization | Listed <50% of problems OR Missed main problem OR Missed a problem that could result in patient harm OR Failed to prioritize problems OR Identified nonexistent problems. | Identified 50-80% of problems OR Inappropriately prioritized problems OR Included extraneous information | Identified and appropriately prioritized >80%, but <100%, of problems AND included the "main" problem for the case | Complete problem list generated and rationally prioritized with no extraneous information or issues listed. | | | |
| | Assessment of Current Medical Condition(s) or Drug Therapy-related Problem | Included clinically appropriate assessment of current and potential therapeutic regimens with rationale for <50% of listed problems | Included clinically appropriate assessment of current and potential therapeutic regimens with rationale for 50-80% of listed problems OR Provided information other than "A". | Assessment of current and potential therapeutic regimens with rationale is present for each listed problem but is not optimal (ie, lacks consideration of patient- and/or agent-specific factors) OR Included clinically appropriate assessment for >80% but <100% of listed problems | An optimal and thorough assessment of current and potential therapeutic regimens with rationale is present for each listed problem that considers patient- and agent-specific factors AND contains "A" only. | | | |
| | Treatment Goals | Included appropriate patient-specific therapeutic goals for <50% of listed problems OR <50% of goals are appropriate | Included appropriate patient-specific therapeutic goals for 50-80% of listed problems OR 50-80% of goals are appropriate | Included appropriate patient-specific therapeutic goals for >80% but <100% of listed problems | Appropriate and relevant patient-specific therapeutic goals for each identified problem. | | | |
| | Comments: | | | | | | | Total |
| Plan | Treatment Plan | Included appropriate and complete (drug, dose, route, frequency, and duration) treatment plan for <50% of listed problems OR <50% of treatment plan is appropriate OR Errors, recommendations, or omissions of plan would result in patient harm | Included appropriate and complete (drug, dose, route, frequency, and duration) treatment plan for 50-80% of listed problems OR Provided information other than "P" OR Lacks non-pharmacologic therapy. OR 50-80% of treatment plan is appropriate OR Not consistent with assessment | Plan is present for each listed problem but is not optimal OR Included appropriate and complete (drug, dose, route, frequency, and duration) treatment plan for >80% but <100% of listed problems, including non-pharmacologic therapy. | Specific, appropriate, cost-effective and justified recommendations (including drug name, dose, route, frequency, and duration of therapy) for each identified problem, including non-pharmacologic therapy. | | | |
| | Counseling, Referral, Monitoring & Follow-up | Included appropriate counseling, monitoring, referral (where applicable), and/or follow-up plan for <50% of listed problems OR <50% of counseling, monitoring, referral (where applicable), and/or follow-up plan is appropriate | Included patient education points, safety and efficacy monitoring parameters, follow-up plan and referral plan (where applicable) for 50-80% of listed problems OR 50-80% of counseling, monitoring, referral (where applicable), and /or follow-up plan is appropriate | Included patient education points, safety and efficacy monitoring parameters, follow-up plan and referral plan (where applicable) for >80% but <100% of identified problems. | Specific patient education points, safety and efficacy monitoring parameters, follow-up plan and (where applicable) referral plan for each identified problem. | | | |
| | Comments: | | | | | | | Total |

| | | | | | | | | |
|---------------|--------------------------------|--|--|---|---|--|--------------|--|
| Format | Organization | Poorly organized with use of inappropriate or unprofessional lay language | Poorly organized but appropriate medical terminology used throughout OR Well organized with use of inappropriate or unprofessional lay language OR Failed to include properly cited references | N/A | Well organized with use of appropriate medical terminology throughout. AND Included properly cited references | | | |
| | Spelling and grammar | >3 non-drug spelling OR >3 grammatical errors OR Any misspellings of drug names OR Use of error-prone or unapproved abbreviations | N/A | 2-3 non-drug spelling OR 2-3 grammatical errors | 0-1 non-drug spelling OR 0-1 grammatical errors | | | |
| | Evidence Based Medicine | Incorrectly or fails to apply evidence-based guidelines to assessment, plan, patient education, and/or follow-up. | Partially appropriate (50-80%) in the application or omission of evidence-based guidelines to assessment, plan, patient education, and/or follow-up for each stated problem. | Mostly appropriate (>80%) for each identified problem in the application or omission of evidence-based guidelines to assessment, plan, patient education, and/or follow-up. | Appropriate application of evidence-based guidelines for assessment, plan, patient education, and follow-up for each state problem. | | | |
| | Comments | | | | | | Total | |

- Notes may not exceed 3 pages unless stated otherwise by that week's lab instructor. 10 points will be deducted for notes exceeding the specified page limit.
- Late submissions or failure to submit a SOAP note will result in a score of "0" for that week's lab grade.
- Faculty reserve the right to eliminate any category (ie, change weight to "0") as appropriate but may not change the weighting of any category to a value other than "0".

Grade: ___ / ___ = ___%

Patient Case Presentation Evaluation Form

Student(s) _____ Evaluator _____ Date _____

Topic _____

Audience: Students _____ Pharmacists _____ Faculty _____ Others (list): _____

| 5 Excellent | 4 Developing Excellence | 3.5 Satisfactory | 2 Needs Improvement | 1 Unsatisfactory |
|--|--|---|---|--|
| Student has excelled in performing the competency, works independently. Student has completed the work and exceeded activity requirements. | Student performed the competency very well, was above average in effectiveness and/or consistency. | Student performed the competency at an acceptable level. Assistance or guidance was occasionally necessary. | Student attempted but did not achieve competency in all areas. Needs improvement. | Unacceptable. Performance was below expectations. Needs significant improvement. |

In the table multiply the rubric score by the weight to get the category score.

| Criteria Categories | Rubric Score | | | | | Weight | Category Score |
|--|--------------|---|---|---|---|----------|----------------|
| | 5 | 4 | 3 | 2 | 1 | | |
| Patient Case Presentation | | | | | | | |
| <ul style="list-style-type: none"> Patient identification, CC, HPI, pertinent histories, allergies, ROS, VS, PE, lab/test results, was clearly presented, and included a detailed chronology of events Demonstrates skill in case-based teaching (Ex: clear link between patient presentation and disease state presentation) | | | | | | 1 | 3.5 |
| Current Drug Therapy | | | | | | | |
| <ul style="list-style-type: none"> Current and past medications categorized by indication, including off label uses Includes medication name, dose, route and frequency | | | | | | 1 | 3.5 |
| Disease State(s) Presentation | | | | | | | |
| <ul style="list-style-type: none"> Explains pathophysiology as needed to understand major concepts for the main disease state and/or problem Explains signs and symptoms consistent with disease state Describes risk factors associated with disease state Includes appropriate diagnostic criteria if pertinent to the case Includes potential treatment options per current guidelines and/or available literature | | | | | | 3 | 10.5 |
| Literature Evaluation | | | | | | | |
| <ul style="list-style-type: none"> Analyzed primary literature and discussed conclusions and appropriateness of interventions Demonstrates skill in case-based teaching (Ex: clear link between patient presentation and literature evaluation) | | | | | | 4 | 14 |
| Drug Therapy Assessment | | | | | | | |
| <ul style="list-style-type: none"> If multiple disease states discussed, appropriately ranked medical problems in order of severity Facilitated the defined individual patient goal for disease state(s), whether the patient is at goal, and described rationale for how goal was determined. Identified any reasons why the patient may not be at goal | | | | | | 4 | 14 |

| | | | | | | | |
|--|--|--|--|--|--|--|--|
| <ul style="list-style-type: none"> Facilitated/Assessed/Critiqued patient's current drug regimen with regards to appropriateness, given patient and medication specific factors Demonstrates skill in case-based teaching (Ex: clear link between literature evaluation and drug therapy assessment) | | | | | | | |
|--|--|--|--|--|--|--|--|

Patient Case Presentation Evaluation Form (page 2 of 2)

| Criteria Categories | Rubric Score | | | | | Weight | Category Score |
|--|--------------|---|---|---|---|------------------------------------|----------------|
| | 5 | 4 | 3 | 2 | 1 | | |
| Drug Therapy Plan | | | | | | | |
| <ul style="list-style-type: none"> Recommends appropriate plan Identified appropriate monitoring parameters of therapeutic effects (including the desirable endpoint and frequency of monitoring) Identified appropriate monitoring parameters of adverse effects (including frequency of monitoring) Demonstrates skill in case-based teaching (Ex: clear link between patient presentation, literature evaluation and drug therapy assessment and plan) | | | | | | 4 | 14 |
| Presentation Skills | | | | | | | |
| <ul style="list-style-type: none"> Presentation was logically organized and information was clearly explained Delivery includes direct eye contact, avoidance of distracting mannerisms, voice projection and proper enunciation/pronunciation of medical terminology Explained unfamiliar terminology Demonstrated ability to present without "reading" notes Clearly, effectively, and confidently presented information Printed material and/or visual aids were well prepared, visually appealing and without grammatical or spelling errors and utilized effectively Effectively utilized the time allotted for the presentation The student was professionally attired The student was well prepared and exhibited command and thorough knowledge of the subject matter Presentation content matched the needs of the audience with an appropriate level of difficulty | | | | | | 2 | 7 |
| Question & Answer Session | | | | | | | |
| <ul style="list-style-type: none"> Demonstrated a sound knowledge base of patient and their disease states (e.g., pathophysiology, clinical presentation, diagnosis, appropriate treatment) Demonstrated sound knowledge base of patient's medications, including but not limited to pharmacology, pharmacokinetics, administration, dose, adverse effects, monitoring parameters, patient education and counseling points. Able to understand and address questions in an objective and factual manner using data / evidence / literature Answered questions effectively | | | | | | 1 | 3.5 |
| | | | | | | Total Score (out of 100) | |

Comments:

Disease State/ Topic Presentation Evaluation

Student Name: _____ Date: _____

| Content and Organizational Skills (40 points) | Point value | Points earned |
|--|--------------------|----------------------|
| Included objectives of presentation | 5 | |
| Made clear transitions between different parts of the presentation | 5 | |
| Clarified any unfamiliar terminology | 5 | |
| Identified important concepts | 5 | |
| Developed appropriate and rational conclusions based on available data | 10 | |
| Covered information in an appropriate amount of time (neither too long or short) | 5 | |
| Responded to comments/questions with accuracy, clarity and confidence | 5 | |
| <u>Comments:</u> | | |
| Instructional Materials (10 points) | | Points |
| Visuals enhanced audience understanding of subject | 3 | |
| Learning objectives were clear and concise | 4 | |
| Prepared legible, concise, informative and useful handouts (if applicable) | 3 | |
| <u>Comments:</u> | | |
| Communication Skills (40 points) | | Points |
| Spoke at a volume suitable for audience | 5 | |
| Spoke at a pace suitable for presentation | 5 | |
| Spoke in a conversational manner (not stylized) | 5 | |
| Student used eye contact (scans total audience) | 5 | |
| Student limited use of notes | 5 | |
| Student used appropriate (non-distracting), non-verbal and verbal mannerisms | 5 | |
| Student attempted to involve colleagues in discussion | 5 | |
| Displayed enthusiasm for the topic | 5 | |
| <u>Comments:</u> | | |
| Overall Presentation Assessment (10 points) | 10 | Points |
| | | |
| Final Grade: | | /100 |
| <u>Comments:</u> | | |

Journal Club Evaluation

Student Name: _____ Date: _____

Evaluation Criteria:

| Points Earned | Criteria | Point Value |
|---------------|--|-------------|
| | Described rationale for conducting study and stated study objectives/hypothesis | 1 |
| | Appropriately described study design | 1 |
| | Discussed characteristics of the study sample (inclusion/exclusion criteria, influence of excluded patient population on study results, representative of the population) | 2 |
| | Identified potential sources of bias and methods used to overcome bias | 1 |
| | Assessed whether drug doses and regimens reflect the current standard of care and whether duration of study was adequate to achieve a therapeutic effect | 2 |
| | Discussed and assessed appropriateness of statistical tests used | 2 |
| | Clearly stated results by reviewing data in tables and whether the results were statistically and clinically significant | 2 |
| | Student discussed the validity of the conclusion on the basis of the study design, objectives and results | 1 |
| | Explained the strengths and limitations of the study | 2 |
| | Student was able to articulate whether statistical significance correlated to clinical significance and how the results of the study can be used in and influence practice | 3 |
| | Overall the student was prepared and the discussion was organized, easy to follow, and comprehend. | 3 |

Total points: _____ out of 20

Comments:

Drug Information Request and Response Form

Date of DI request:

Responder (name, title):

Demographics of requestor (3 points):

| | | | |
|--|---|---|-------------------|
| Name: Age: Sex: | Consumer: Health Professional: Pharmacist <input type="checkbox"/> Physician <input type="checkbox"/> Nurse <input type="checkbox"/> Other _____ | Contact Information: Phone#: e-mail: | |
| Initial question from the requestor (2 pts): | | | |
| Background information / questions (10 pts, information to ask or would like answered before searching): | | | |
| Ultimate question to answer (5 pts, if background questions cannot be asked or answered, use the initial question here) | | | |
| Question classification(s) (5 pts, circle the most appropriate) | | | |
| Adverse drug reaction | Drug interaction | Compatibility | Dosage or regimen |
| Drugs in lactation | Formulation | Indication | Identification |
| Pediatrics | Pharmacology | Pharmaceutics | Pharmacokinetics |
| Stability | Teratogenicity | Therapeutics | Toxicology |
| Nonprescription drugs | Complementary and alternative medicine | Cost | Geriatrics |
| Other (must exclude any of the above categories): | | | |

Search strategy (20 pts: List in the order of your search and type(s) of literature based on the classification above; mark its usefulness (+ = useful, - = not useful)):

Analysis & evaluation of the information (35 pts: Cite, analyze, and critically evaluate pertinent literature/reference found in the previous section):

Response: (20 points: Write an accurate response and draw appropriate conclusions from the literature evaluation, based on either the patient, the requestor, or both).

Notre Dame of Maryland University Hospital
Pharmacy and Therapeutics Committee
Formulary Review
Generic name (proprietary name)

Summary

Introduction

Therapeutic class

Similar drugs

Date of FDA approval

Indications

Clinical Pharmacology

Pharmacokinetics

Clinical Trials

(Spectrum of Activity)

Contraindications

Warnings

Precautions

Drug Interactions

Adverse Reactions

Dosage

Administration

Product Availability

Cost comparison

Conclusion

Recommendation

References

Prepared by

Presenting drug monograph to the Pharmacy and Therapeutics committee

Name: _____ and _____

| | | | | |
|--|--|--|--|--|
| Drug monograph | Excellent! You could present it to a real P&T now. | Good but needs more thorough work | Lack of depth and thoughts | Needs reassessment |
| Components of the monograph as indicated on the template (5 pts) | 5 points: Included all the components of the monograph as indicated on the template | 3 points: Followed the template and addressed at least 50% of the relevant clinical trials | 1 point: Followed the template and addressed only minimal information on the clinical trials | 0 point: Missed clinical trials relevant to the drug approval |
| Inclusion of all of the clinical information and other available data (3 pts) | 3 points: Included all the relevant clinical information and data available | 2 points: Missed one critical clinical information (comparator drug, adverse effects, special population, cost, etc.) | 1 point: Missed two critical clinical information (comparator drug, adverse effects, special population, cost, etc.) | 0 point: Missed > 2 critical clinical information (comparator drug, adverse effects, special population, cost, etc.) |
| Grammar, spelling, and references (2 pts) | 2 points: Free of grammar, misspelling, and wrong references | 1 point: < 3 mistakes made on grammar, misspelling, and references | | 0 point: > 3 mistakes made on grammar, misspelling, and references |
| P&T Presentation | Excellent! You could present it to a real P&T now. | Good but needs more thorough work | Lack of depth and thoughts | Needs reassessment |
| Time and manner in which the students present drug information (4 pts) | 4 points: Clearly, effectively, and confidently presented the information within 5 minutes | 3 points: Clearly, effectively, and confidently presented the information but exceeded the time limit by more than 1 min | 2 points: Presented within the time limit but not confident or convincing | 1 point: Unclearly and ineffectively presented and exceeds the time limit for >2 min |
| Presentation of the drug information (3 pts) | 3 points: Present the information with a completely balanced view, objectivity, and accuracy | 2 points: Unbalanced, subjective, inaccurate in one area of the drug information | 1 points: Unbalanced, subjective, or inaccurate in > 1 area of the drug information | 0 point: Not balanced, objective, or accurate at all. |
| Addressing questions posed by the P&T committee (3 pts) | 3 points: Able to understand and address questions in a nonjudgmental and factual manner, using data | 2 points: Able to address questions posed in a nonjudgmental and factual manner but without referring to data | 1 point: Able to address questions posed only 50% of the time OR did not address the question being asked | 0 point: Not able to address questions posed by the P&T committee at all |

AJHP Citation Style Sheet

General Tips:

- At the beginning of your bibliography, include the heading “References.”
- Make sure that your references are double-spaced and are numbered consecutively as they appear in the text. References that appear in tables or figure captions should receive consecutive numbers based on the placement of the first mention of the table or figure in the text.
- If a U.S. or Canadian city is not well known, include the two-letter abbreviation for the state or province to avoid confusion. For example: Palm Springs, CA. If the city is well known, you do not need to include the state. For example: St. Louis.
- List inclusive page numbers.
- “Letter,” “Editorial,” “News,” or “Abstract” is added at the end of references for these items.

Use these examples as a guide to cite information in the AJHP format.

[Micromedex](#)

[Lexi-Comp](#)

[Facts & Comparisons](#)

[Natural Medicines Comprehensive Database](#)

[UpToDate](#)

[Websites](#)

[Journal Article](#)

[Letter, editorial, abstract](#)

[Books](#)

[Government Agency Publication](#)

Micromedex

Name of the page you are using. In: Name of the resource in Micromedex that you are using (look at the center of the screen) [Internet Database]. City of Publication, State: Publisher. Date last updated (year month day).

For example:

Chamomile. In: AltMedDex [Internet Database]. Greenwood Village, CO: Thomson Reuters (Healthcare) Inc. Updated 2008 Apr.

* If the date last updated is not available, give the date you used this resource. For example: (accessed 2011 Aug 19).

Lexi-Comp

Name of the page you are using. In: Name of the resource in Lexi-Comp that you are using (look at the top of the page) [Internet Database]. City of Publication, State: Publisher. Date last updated (year month day).

For example:

Acetaminophen. In: Lexi-Drugs Online [Internet Database]. Hudson, OH: Lexi-Comp, Inc. Updated 2009 Aug 5.

* If the date last updated is not available, give the date you used this resource. For example: (accessed 2011 Aug 19).

Facts & Comparisons

Name of the page you are using. In: Name of the resource in Facts & Comparisons you are using (look at the top right-hand side of the screen—if a resource is not given use “Facts & Comparisons”) [Internet Database]. City of Publication: Publisher. Date last updated (year month day).

For example:

Acetaminophen / Ethanol. In: Drug Interaction Facts [Internet Database]. St. Louis: Wolters Kluwer Health, Inc. (accessed 2011 Jul 12).

* If the date last updated is not available, give the date you used this resource. For example: (accessed 2011 Aug 19).

Natural Medicines Comprehensive Database

Name of the page you are using. In: Natural Medicines Comprehensive Database [Internet Database]. City of Publication, State: Publisher. Date last updated (year month day).

For example:

Ginger. In: Natural Medicines Comprehensive Database [Internet Database]. Stockton, CA: Therapeutic Research Faculty (accessed 2011 Jul 15).

* If the date last updated is not available, give the date you used this resource. For example: (accessed 2011 Aug 19).

UpToDate

Cite the UpToDate topic as a chapter in a book titled *UpToDate*, edited by Denise S. Basow, published by UpToDate in Waltham, MA. There are no page numbers to cite. Provide the date that the entry you are using was last updated in year month day format.

For example

Marion, DW. Diaphragmatic pacing. In: UpToDate [Internet Database]. DS, Basow, eds. Waltham, MA: UpToDate. Updated 2009 Apr 29.

* If the date last updated is not available, give the date you used this resource. For example: (accessed 2011, Aug 19).

Entire Website

Name of the website [Internet]. City of Publication, State: Publisher (or organization that runs the website). URL (Date accessed (year month day)).

Toxnet: Toxicology Data Network [Internet]. Bethesda, MD: National Library of Medicine. <http://toxnet.nlm.nih.gov/> (accessed 2009 Aug 4).

Section of a Website

Name of the main website [Internet]. Name of webpage being used. City of Publication, State: Publisher (or organization that runs the website). Available from: URL [Date accessed (year month day)].

MedlinePlus [Internet]. Acetaminophen and Codeine. Bethesda, MD: National Library of Medicine. <http://toxnet.nlm.nih.gov/> (accessed 2009 Aug 4).

Standard journal article, including electronic journal article

- List all authors when three or fewer; when four or more, list only first three and add "et al."*).
- To find the abbreviation for a journal title, click on the following link: [http://www.ncbi.nlm.nih.gov/sites/entrez?Db=journals&Cmd=DetailsSearch&Term=currentlyindexed\[All\]](http://www.ncbi.nlm.nih.gov/sites/entrez?Db=journals&Cmd=DetailsSearch&Term=currentlyindexed[All])

Example of journal article citation:

Driscoll DF, Bhargava N, Li L et al. Physicochemical stability of total nutrient admixtures. *Am J Health-Syst Pharm*. 1995; 52:623-34.

Article from a journal paginated by issue

Smith DL. The effect of patient noncompliance on health care costs. *Med Interface*. 1993; 6(4):74-6,78,84.

Letter, editorial, or abstract

Stiles ML, Allen LV Jr, Prince S et al. Stability of ranitidine hydrochloride during simulated home care use. *Am J Hosp Pharm*. 1994; 51:1706-7. Letter.

Book with personal author(s)

Briggs GG, Freeman RK, Yaffe SJ. Drugs in pregnancy and lactation: a reference guide to fetal and neonatal risk. 5th ed. Baltimore: Williams & Wilkins; 1998.

A chapter or article in a book

Jackson EK. Diuretics. In: Hardman JG, Limbird LE, Molinoff PB et al., eds. Goodman and Gilman's the pharmacological basis of therapeutics. 9th ed. New York: McGraw-Hill; 1996: 685-713.

Book with editor(s), compiler(s), or chair(s) as authors

Barone MA, ed. The Harriet Lane handbook: a manual for pediatric house officers. 14th ed. St. Louis: Mosby-Year Book; 1996.

Government agency publication

National Institute on Alcohol Abuse and Alcoholism. Eighth special report to the U.S. Congress on alcohol and health. Washington, DC: U.S. Department of Health and Human Services, 1993; NIH publication no. 93-3699.

Examples pulled from:

Formatting Manuscripts in AJHP Style.

<http://www.ashp.org/DocLibrary/AJHP/Formatmanuscript.aspx> (accessed 2011 Aug 19).

The Naranjo Algorithm¹

To assess the adverse drug reaction, please answer the following questionnaire and give the pertinent score.

| Question | Yes | No | Don't know | Score |
|---|-----|----|------------|-------|
| 1. Are there previous conclusive reports on this reaction? | +1 | 0 | 0 | |
| 2. Did the adverse event appear after the suspected drug was administered? | +2 | -1 | 0 | |
| 3. Did the adverse reaction improve when the drug was discontinued or a specific antagonist was administered? | +1 | 0 | 0 | |
| 4. Did the adverse reaction reappear when the drug was readministered? | +2 | -1 | 0 | |
| 5. Are there alternative causes (other than the drug) that could on their own have caused the reaction? | -1 | +2 | 0 | |
| 6. Did the reaction reappear when a placebo was given? | -1 | +1 | 0 | |
| 7. Was the drug detected in the blood (or other fluids) in concentrations known to be toxic? | +1 | 0 | 0 | |
| 8. Was the reaction more severe when the dose was increased or less severe when the dose was decreased? | +1 | 0 | 0 | |
| 9. Did the patient have a similar reaction to the same or similar drugs in any previous exposure? | +1 | 0 | 0 | |
| 10. Was the adverse event confirmed by any objective evidence? | +1 | 0 | 0 | |

Score interpretation:

Definite: ≥ 9

Probable: 5 – 8

Possible: 1 – 4

Doubtful: ≤ 0

1. Naranjo CA, Busto U, Sellers EM et al. A method of estimating the probability of adverse drug reactions. *Clin Pharmacol Ther.* 1981; 30:239-45.

OTC Consultation

Quest/SCHOLAR Technique

Step 1:

Quickly and Accurately Assess the Patient

Ask about the current complaint using **SCHOLAR**

| SCHOLAR questions | Patient response |
|---|-------------------------|
| <u>Symptoms</u> What are the main and associated symptoms | |
| <u>Characteristics</u> What is the situation like? Is it stable or changing? | |
| <u>History</u> What have you done so far to relieve the symptoms? | |
| <u>Onset</u> When did the condition start? | |
| <u>Location</u> What is the precise location of the problem or symptoms? | |
| <u>Aggravating Factors</u> What (if anything) makes it worse? | |
| <u>Remitting factors</u> What (if anything) makes it better? | |
| <u>Other pertinent questions</u> Concurrent medications and other products; Coexisting medical conditions | |

Step 2:

After discussing the patient responses with your preceptor, document the following:

| QuEST Questions | Student Pharmacist Response |
|--|------------------------------------|
| <u>Establish whether the Patient is an Appropriate Self-Care Candidate</u> <ul style="list-style-type: none">○ No severe symptoms○ No symptoms that persist or return repeatedly | |

| | |
|--|--|
| <ul style="list-style-type: none"> ○ No self-treating to avoid medical care | |
| <p>Suggest Appropriate Strategies for Treatment</p> <ul style="list-style-type: none"> ○ Medication (include name, dosage, duration of treatment) ○ Alternative Treatments ○ General care measures | |
| <p>Talk with The Patient</p> <ul style="list-style-type: none"> ○ Review medication actions, administration, and adverse effects ○ Explain what to expect from treatment ○ Provide information about appropriate follow-up | |

Step 3:

Document the interaction above using SOAP format to the best of your ability.

Step 4:

Call the patient in approximately 3 days to follow-up on your recommendation. Assess the following:

1. Efficacy – are the patient’s symptoms improving on the OTC product? Is the patient experiencing any new symptoms?

2. Safety (Adverse effects) – is the patient tolerating the OTC product?

3. Adherence – is the patient taking the OTC product as per instructions on the label? Does the patient need to be referred to their primary care provider?

**Ambulatory Care Rotation
Topic Discussion and Case-Based Teaching Rubric**

| Category | 4 | 3 | 2 | 1 |
|--|--|--|--|---|
| Quality of Information | Information clearly relates to main topic and adds new concepts/information. Includes supporting details and/or examples | Information clearly relates to main topic. Provides at least 1 supporting detail or example | Information relates to main topic. No details and/or examples are given | Information has little or nothing to do with main topic or simply restates the same topic |
| Resources | Consistently provides resources in AJHP citation. Materials are sent to group 48 hours in advance. | Provides resources (not in AJHP citation). Materials are sent to group 48 hours in advance. | Provides resources (not in AJHP citation). Materials are sent to group 24 hours in advance. | Resources are not included. Materials sent to group < 24 hours in advance. |
| Critical Thinking | Enhances the critical thinking process consistently through reflection and stimulation of group conversation. | Critical thinking is demonstrated only by personal reflection on topic. | Responds to questions but does not engage in personal reflection of topic | Does not appropriately respond to questions. |
| Participation | Encourages and facilitates interaction among group. Handouts or other materials are used to enhance discussion. | Responds to questions by group. Handouts or other materials are used to enhance discussion. | Rarely interacts or responds to questions by the group. Handouts or other materials do not enhance discussion. | Only responds to preceptor questions. Handouts or other materials do not enhance discussion. |
| Professional Language | Both professional grammar and vocabulary are used consistently throughout discussion. | Both professional grammar and vocabulary are used frequently throughout discussion. | Both professional grammar and vocabulary are used occasionally throughout discussion. | Professional grammar and vocabulary are not used. |
| Time | Discussion remains within appropriate time limit designated by faculty. | Discussion exceeds or is under time limit but materials/ concepts are effectively delivered. | Discussion exceeds or is under time limit but materials/ concepts are delivered. | Discussion exceeds or is under time limit and materials/ concepts are NOT effectively delivered. |
| Use of Patient Case <small>*Used only for Case-Based Teaching*</small> | Patient case enhances teaching of concepts and critical thinking skills. | Patient case mimics concepts and utilizes some critical thinking skills. | Patient case mimics concepts but does not allow for critical thinking. | Patient case not relevant for concepts discussed. |
| Presentation Style | Excellent voice projection, pronunciation, and pace for presentation. Maintained eye contact with audience and avoided distracting mannerisms. | Appropriate voice projection, pronunciation, and pace for presentation. Maintained eye contact with audience and avoided distracting mannerisms. | Inappropriate voice projection, pronunciation, and pace for presentation. Decreased eye contact with audience and some distracting mannerisms. | Inappropriate voice projection, pronunciation, and pace for presentation. Minimal eye contact with audience and had distracting mannerisms. |
| Total | | | | |

Topic Discussion: ___/28
Case-Based Teaching: ___/32

Name: _____
 Date: _____
 Evaluator: _____



NOTRE DAME
 OF MARYLAND
 UNIVERSITY

SCHOOL OF PHARMACY

Pharmacist Care Lab

Skill: SBAR (Health Care Provider - Communication Technique)

| | |
|---|--|
| <p>a. <u>Introduced him/herself and profession</u></p> <ul style="list-style-type: none"> • Self • Profession | <p>1 pt 1 pt</p> |
| <p>b. <u>Situation:</u></p> <ul style="list-style-type: none"> • Identified patient • Clearly stated situation (What is going on/problem ID/medication order/prescription) to health care provider | <p>1 pt 1 pt</p> |
| <p>c. <u>Background:</u></p> <ul style="list-style-type: none"> • Clearly stated background (What is clinical background or context) to the health care provider • Included pertinent/relevant elements of background related to the situation (cc, HPI, relevant histories, physical exam, mental status, abnormal labs, vitals, test results, medication history) <ul style="list-style-type: none"> ○ < 50% of pertinent information stated – mark half credit ○ > 50% of information stated was not pertinent – mark half credit • Background stated is systematic and logical | <p>1 pt 2 pt/4 pt 1 pt</p> |
| <p>d. <u>Assessment:</u></p> <ul style="list-style-type: none"> • Clearly stated current assessment (What does he/she think the problem is and why) to health care provider • Provided pertinent/relevant assessment regarding status, severity, and risk factors related to situation <ul style="list-style-type: none"> ○ < 50% of pertinent assessment stated – mark half credit ○ > 50% of information stated was not pertinent – mark half credit • Incorporated appropriate referencing/guidelines/literature to support or justify assessment • Assessment is systematic and logical | <p>1 pt 2 pt/4pt 2 pt 1 pt</p> |
| <p>e. <u>Recommendation:</u></p> <ul style="list-style-type: none"> • Clearly stated recommendation or request to health care provider • Communicated a complete recommendation (included: drug, dose, route, frequency, and duration) • Conveyed systematic and logical pharmacotherapy recommendations | <p>1 pt 1 pt 1 pt</p> |
| <p>f. <u>Throughout the communication, pharmacy student was:</u></p> <ul style="list-style-type: none"> • Nonjudgmental/Respectful • Language is appropriate • Displayed confidence • Appropriately responded to impromptu questions | <p>1 pt 1 pt 1 pt 1 pt</p> |
| <p>g. <u>Accuracy</u></p> <ul style="list-style-type: none"> • Provided incorrect information or missed information that could lead to patient harm | <p>Minus 5 pts</p> |
| <p style="text-align: right;">Total Score</p> | <p>/25 pts</p> |