



ROOSEVELT UNIVERSITY
COLLEGE OF PHARMACY

Advanced Pharmacy Practice Experience

(APPE) Manual

Commitment
Competence
Compassion

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COLLEGE OF PHARMACY CONTACT INFORMATION

Experiential Education Office

OEE@Roosevelt.edu

Joan Hardman, BPharm RPh
Director of Experiential Education
(847) 330-4508

JHardman02@roosevelt.edu

Randall Lambert, PhD RPh
Assistant Director of Experiential Education
(847) 330-4512

RLambert@Roosevelt.edu

John W. Maxwell, BPharm MS RPh
Assistant Director of Experiential Education
(847) 330-4526

JMaxwell02@Roosevelt.edu

Karen Laudенbach, BA CPhT
Experiential Education Specialist
(847) 330-4544

KLaudenbach@Roosevelt.edu

Office of the Dean

George MacKinnon III, PhD RPh
Dean and Professor

Zita Ceponis, Business Manager
847-619-7293

To the Class of 2014:

How proud you must be of your academic accomplishment. Making it through two full years of coursework in a College of Pharmacy accelerated program is a noteworthy achievement! You are now ready to take on the challenge of your final year and all of your Advanced Pharmacy Practice Experiences (APPEs). I am looking forward to assisting each and every one of you in transitioning from student to pharmacist.

The purpose of Advanced Pharmacy Practice Experiences (APPEs) is to enable you to apply the facts, information and concepts gained in didactic coursework to “real-life” situations. The experience and interactions that you have with your preceptors in the various rotations will allow you to turn your didactic knowledge into practical knowledge.

During APPE rotations, you will be able to refine an array of skills such as professionalism, communication, problem solving, critical thinking and professional competence in your quest to best serve the patient and their medication needs. Our preceptors are asked to assist in emphasizing the importance of connecting knowledge, critical thinking and action. The best advice that I can pass along to you, as the student, is to take their guidance. This will enable you to transform into the health professional that is an asset to their patients and the community served.

It is important for you to ask your preceptors many questions, not only related to drug therapy but also about their practice settings. Be observant of their work lives on a daily basis and take time to evaluate your feelings on if you could fit into that particular setting following graduation or maybe further on in your career. Remember, as with most things in life, what you get out of your rotation depends on what you put into it.

Some may ask what is the secret to a successful APPE rotation experience. It really is not such a secret. Hard work, a high level of energy, a positive attitude and professionalism are the key ingredients that you will need, as you embark on your final year as a student. Your goal of becoming a highly qualified pharmacist who is competent, committed and compassionate in the care provided to your patients is soon to be reached. Enjoy and learn from all of your Advanced Pharmacy Practice Experiences (APPEs)!

Warm regards,

Joan Hardman, RPh., BSP Pharm
Director, Office of Experiential Education

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Pledge of Professionalism

As a Doctor of Pharmacy student at the Roosevelt University College of Pharmacy, I pledge to display professionalism through my Commitment, Competence, and Compassion.

As a Doctor of Pharmacy Student, I will strive for **COMMITMENT** through continued self-development, taking pride in the profession of pharmacy, making ethically sound decisions, being prepared, displaying professional attire, manner, and conduct, and being respectful of myself and other persons at all times.

As a Doctor of Pharmacy Student, I will strive for **COMPETENCE** by acquiring requisite knowledge and skills, through creativity and innovation, by being conscientious and trustworthy, honoring patient confidentiality, being accountable, demonstrating leadership, and through effective and appropriate communication with patients, families, caregivers and other healthcare professionals at all times.

As a Doctor of Pharmacy Student, I will strive for **COMPASSION** through my service to the profession, participating in patient-centered care, showing empathy towards patients, families, caregivers, and by displaying cultural and psychosocial awareness at all times.

I take this pledge voluntarily to fulfill the responsibilities and expectations that are upon me in the academic program at Roosevelt University College of Pharmacy with the expectation that I will strive to uphold the principles herein, at all times.

Name

Signature

Date

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WELCOME PRECEPTORS!

Thank you for serving as a preceptor for Roosevelt University College of Pharmacy. You play a very important role as teacher and mentor for our Advanced Pharmacy Practice Experience (APPE) student's professional development. Your guidance of our students through their final year of pharmacy as they acquire the skills and knowledge needed to become a patient centered practicing pharmacist is crucial.

APPEs are designed to enhance the knowledge and skills that students need in order to fulfill the competencies required for their doctoral pharmacy degree. During their APPE rotations, the students need to develop their skills in patient care, critical thinking, decision making, ethical judgment and professionalism.

This manual is a guide for preceptors. We have included information on APPE policies and procedures, rotation objectives, suggested activities, evaluation forms and grading rubric.

You are making a valued contribution to our students and we are appreciative of your efforts. Please do not hesitate to contact the Office of Experiential Education, if you have any questions or concerns. The phone number is: 847-330-4508. We will be available to assist you.

Best wishes for a rewarding experience for both you and our students.

Joan Hardman, RPh. BS Pharm
Director of Experiential Education

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APPE Policies

Description

Advanced Pharmacy Practice Experiences (APPE)

The entire P4 year is comprised of Advanced Pharmacy Practice Experiences (APPEs). Students will complete six rotations. Each rotation is six weeks long. The term “week” implies 40 hours of practice experience for a minimum of 1,440 APPE hours. There are four required pharmacy practice experiences: Community Pharmacy, Hospital or Health-System Pharmacy (“*Hospital*”), Ambulatory Care, and Inpatient/Acute Care General Medicine (“*Medicine*”). In addition, there are two elective APPE rotations that take place in various pharmacy or other health-related settings. Elective APPEs may involve taking one of the four required rotations a second time to deepen your experience in that area or they may take place in other settings that have been previously approved by the Office of Experiential Education (OEE). These experiential sites will include local, regional, and national locations. An individualized experiential schedule will be developed solely by the OEE which, to greatest extent practical, will factor in students’ experiences, preferences, and interests for future careers in pharmacy.

Rotation Hours

The hours during which a student can be expected to be on rotation during an APPE will vary from one rotation to the next. Your preceptor will determine the specific hours of your rotation and this may vary from one day to the next. Depending on the preceptor and the site a rotation may begin early in the morning or end late at night (as a guide only, think of this as meaning “mornings or evenings” or “AMs or PMs”). Your rotation ends each day at the time your preceptor sets. This means that there may be occasions when your time on rotation may exceed eight hours in a given day. You are expected to remain on rotation until you are dismissed by your preceptor. You may be required to be on rotation any day of the week. The minimum required hours (1,440) are exclusive of homework assignments given to you by your preceptor, breaks, meals or absences whether due to the rotation site being closed (e.g., a holiday) or a student need (e.g., illness) or other reason. Any hours missed must be made up in-full and the plan for doing this must be approved by the preceptor at the start of the rotation or as soon as possible in the event of an unanticipated event (e.g., illness). The student is responsible

for notifying their preceptor of absences. The OEE will assist students in the event of emergency situations when asked by the student for assistance.

Roosevelt University respects the religious freedoms of students and will work with the student, rotation site and preceptor to attempt to make accommodations, upon proper request, to accommodate religious observances which may occur during a rotation. Students who wish to observe religious holidays must inform the Director of the Office of Experiential Education (or their designee) in writing at least two weeks before the start of the rotation block of their desire to observe the holiday so that alternative arrangements acceptable to both the student and preceptor can be explored at the earliest opportunity. Due to site-related factors and preceptor availability it is possible that the request may not be able to be accommodated. In such cases the student will be expected to be on rotation on that day.

Students are encouraged to keep a log of the hours spent on rotation and to share this log with the preceptor. The final assessment of each rotation will require the preceptor to enter the number of hours spent on that rotation. Your log will help your preceptor complete your assessment efficiently. NOTE: A time log will be posted on Blackboard for your convenience.

Active License

Proper Licensure

NO STUDENT MAY BE ON ROTATION WITHOUT A VALID LICENSE FOR THE ENTIRE DURATION OF THE ROTATION.

Students are responsible for providing proof to the OEE they hold a current State of Illinois Pharmacy Technician license with the STUDENT endorsement. The license must remain in good standing and valid throughout all rotations.

STUDENTS MUST HAVE THEIR CURRENT STATE OF ILLINOIS PHARMACY TECHNICIAN/STUDENT "WALLET CARD" IN THEIR POSSESSION AT ALL TIMES WHILE AT ROTATION SITES.. (If a rotation approved by OEE occurs outside of Illinois the appropriate license(s) and registration(s) must be obtained by the student before the start of the rotation and evidence of these documents must be provided to OEE before beginning the rotation(s)

Failure to maintain proper licensing during APPEs will result in the student's immediate removal from the practice site and receiving a failing grade for that rotation and the student will not be allowed to resume their APPE rotations until they provide proof to the OEE that the proper license and/or registration has been obtained. (State Boards of

Pharmacy, other regulatory agencies or the site may also take additional actions in these circumstances.) To implement this policy during the Pharmacy Technician license renewal period in Illinois, students are required to provide OEE a copy or scan of their renewed license by 4:00 PM local time, March 31, 2014. If this is not done the student may not go on rotation until evidence of renewal has been received and it is the student's responsibility to notify their preceptor of this not later than March 31, 2014. The concept described here applies equally to any licenses or requirements occurring outside of Illinois.

Scans of renewed licenses should be emailed to OEE@Roosevelt.edu.

INSURANCES

Health Insurance

Students are required to have a health insurance policy in force during all rotations. If a student does not have health insurance coverage and cannot locate a health insurance provider themselves, the Roosevelt University Student Handbook provides information about a firm through which students should be able to obtain health insurance.

Liability Insurance

Roosevelt University maintains liability insurance to protect itself and the practice site. Proof of this insurance is provided to our practice sites at a "corporate" level. Therefore, it is very unlikely that a preceptor would ask a student for proof of this insurance. However, should this ever occur, the student should promptly notify the OEE and it will provide evidence of liability insurance coverage to the practice site.

HIPAA and Other Regulatory Compliance

Occupational Safety and Health Administration (OSHA) Training / Communicable Diseases Guideline / Health Insurance Portability and Accountability Act (HIPAA) Privacy Rules – During all rotations students must have in their possession evidence that they have received training in OSHA Regulations, including guidelines for blood borne pathogens and for the proper prevention of communicable disease transmission, HIPAA, HITECH and immunization training. Some sites may require additional training on their own internal policies. In this case, students are required to participate in this training. The student is responsible for learning and adhering to all applicable laws, rules, and regulations affecting the practice at each rotation site.

Professionalism

Dress Code

While on rotation, students are expected to comply with these dress standards before entering the practice site:

- a. Students are to dress in a professional manner at all times and must comply with the dress code standards of the College of Pharmacy and the dress code policies of the experiential sites.
- b. Jeans, shorts, and t-shirts are never to be worn.
- c. Caps or other forms of headgear cannot be worn for reasons other than religious or medical necessity.
- d. Hosiery is required for women and socks are required for men and shoes for men and women must be closed toe (no flip-flops, etc.).
- e. Students should wear the proper clean, pressed white College of Pharmacy lab jacket at the practice site.
- f. Students must have their current Roosevelt University identification badge, and a means of displaying it on their outer clothes, at all times while on rotation.
- g. Individual sites may have more restrictive dress codes (including jewelry, nail care, cosmetics, fragrance, etc. restrictions). Some sites may require alternate attire such as wearing scrubs, gowns, etc. If site-required alternate attire obstructs the College patch that identifies your status as a Student Pharmacist, you are then required to display your Roosevelt University student identification badge in the manner required by your preceptor. Students are expected to follow these additional dress codes while at those individual sites.

Electronics

Personal electronics (e.g., computers, phones, tablets etc.), are not allowed to be used while on rotation unless directed otherwise by your preceptor. If a preceptor permits the use of personal electronics they may only be used to support the requirements of the rotation. Receiving or sending personal communications (e.g., texts, email, phone calls, use of social media, etc. while at a practice site is restricted to approved breaks or mealtimes and locations determined by your preceptor.

Lunch and Breaks

Students will take meals and breaks as scheduled by their preceptor.

APPE Block Calendar

	Block A		Block B		Block C		Block D		Block E		Block F	
	MON	FRI	MON	FRI	MON	FRI	MON	FRI	MON	FRI	MON	FRI
Week 1	8/26	8/30	10/7	10/11	11/18	11/22	1/13	1/17	2/24	2/28	4/7	4/11
Week 2	9/2	9/6*	10/14	10/18*	11/25	11/29	1/20	1/24	3/3	3/7	4/14	4/18
Week 3	9/9	9/13	10/21	10/25	12/2	12/6	1/27	1/31	3/10	3/14	4/21	4/25
Week 4	9/16	9/20	10/28	11/1	12/9	12/13*	2/3	2/7	3/17	3/21	4/28	5/2
Week 5	9/23	9/27*	11/4	11/8*	12/16	12/20	2/10	2/14	3/24	3/28	5/5	5/9
Week 6	9/30	10/4	11/11	11/15	12/23	12/27	2/17	2/21*	3/31	4/4*	5/12	5/16*
Week 7					12/30	1/3/14						
Week 8					1/6	1/10						

*Denotes day back on Roosevelt campus for students

Holidays

Your need to be on rotation on holidays will be determined by your preceptor based of site-related factors, preceptor availability or other factors. During rotations that include one of the holidays listed here, students should be sure to cover the topic in a discussion with their preceptor at the start of the rotation. Students are permitted to request to be off rotation on Labor Day (September 2), Thanksgiving Day (November 28), Christmas Day (December 25) and New Year’s Day (January 1). When these holidays occur mid-week, students are expected to be on rotation the day before and/or after the holiday if it would otherwise be considered by the preceptor to be a required rotation day. Because these holidays are all included in the required minimum 1,440 hours, any holidays taken off with preceptor approval must be made up before the end of that rotation. NOTE: Labor Day 2013 falls is the second Monday of the first rotation block. Be sure to address this with your preceptor promptly.

Site Required Background Checks and Drug Screens

Students may occasionally be required to have a background check and/or a drug screen prior to beginning rotations at various sites in addition to the requirements of the College. It is the responsibility of the student to obtain the requested background/drug screen and ensure the requesting facility receives the final report **prior to starting** the rotation. The student is financially responsible for any additional background and/or drug screenings.

RUCOP Policies Apply

University Policies and Academic Regulations – Students are required to observe all University and College policies and academic regulations during their rotations. See both the Roosevelt University Student Handbook and the College of Pharmacy Student Handbook.)

Site Rules

During rotations situations may arise in which there is a discrepancy between the general rights and obligations you have as a student and the requirements of the rotation or site. In such instances, follow the rules of the rotation site.

Compensation

Students may not be compensated financially for their participation in experiential training; rather you will receive academic credit towards graduation and internship credit hours.

Rotations must maintain an “arm’s length” separation between the student, preceptor and site and avoid even the appearance of a conflict of interest. Some examples of situations that must be avoided include:

- Rotations may not be done under the supervision of a preceptor to whom the student is related or has a personal relationship with.
- Rotations may not be done under the supervision of a preceptor who is a current or former co-worker.
- Rotations may not be done at a site at which the student is or was employed.

NOTE: In the case of multi-pharmacy entities, e.g., “chains”, each separately licensed pharmacy is considered to be a separate site.

Incident Reporting

While it is not common for incidents to occur while on rotation, sometimes they do. To provide you with any support that might be required or useful to our students the College of Pharmacy has in place a policy requiring you report them. The term incident covers many areas, including, but not limited to: injury, illness, illegal behavior, whether committed by pharmacy employees or others, exposure to potential harm, unethical behavior, inappropriate behavior including harassment of any kind, car accidents that occur on the way to or from rotations, and any other action or occurrence deemed out of the ordinary by the student. Should an incident occur, please complete the form on the following page (or download it from Blackboard) to document the event, and turn it in to any member of the Office of Experiential Education as soon as possible. The form will be shared with the Office of Enrollment and Student Services and reviewed jointly. You will be notified of the results of this review.

Experiential Education Incident Report Form	
Student name (print)	
Date of Incident	Time of Incident
Location of Incident	
Description of Incident (use the following lines as needed):	
Were there any injuries? Yes No (circle one)	If yes, please describe the injuries (use the following lines as needed):
Was first aid give? Yes No (circle one)	If yes, by whom?
Were the police or another emergency agency contacted? Yes No (circle one)	
If yes, who contacted them?	
If yes, did the emergency agency respond to the incident?	
If yes, name of emergency agency, report number or other identifier:	
What support or assistance do you feel would be helpful to you regarding the incident) use the following lines as needed):	

Please return this completed report to the Office of Experiential Education

Fax #: 847-330-4525

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Activities on Rotation

Assignments to be performed while on rotation will be listed in each rotation's manual and may include assignments suggested by the College and approved by the preceptor, assignments given to you by the preceptor or a combination of both. These assignments become a required part of that rotation and will factor in to your final grade for the rotation.

Concurrent Employment

Students may choose to work while in school, but such employment must not interfere with the requirements, attendance and/or performance at rotation sites during pharmacy practice experiences.

Evaluations/Assessments

All rotation assessments are to be completed in RXpreceptor. The mid rotation assessment by the preceptor and the student's self-assessment are due by the Friday of the midpoint of the rotation. The final assessment by the preceptor and the student's final assessment by the preceptor and the student's final assessment are due by the last Friday of the site rotation.

The student must be informed of any concerns regarding deficiencies that may jeopardize their ability to successfully pass the rotation (see section in manual on Completing Assessments).

RXpreceptor

RXpreceptor is the management tool that the College's Office of Experiential Education (OEE) uses to manage preceptor availability, student scheduling, site descriptions, experience requirements and rotation evaluations. As a preceptor, you may use this tool to describe your site and communicate your site availability. Students will use this tool to view your site's availability, select rotations, complete site evaluations and access specific site requirements. Please add support@rxinsider.com as a trusted email source. Your username and password will be sent via registration email from this address at RXinsider. The link to the RXpreceptor login page is: https://www.academicsuiterx.com/experiential_login.php. Please contact Karen Laudенbach directly with any questions you may have at 847-330-4544 or by email at KLaudenbach@roosevelt.edu.

FINAL GRADE

FACTOR	WEIGHT
Preceptor evaluation.....	85%
On-campus activities (APhA assessment, etc.).....	5%
Completes both self-assessments and preceptor assessment on time.....	5%
Submit summary reflective writing on time.....	5%

The APPE rotations will be graded via points with a maximum grade of 100%. A letter grade will be assigned as follows:

- A-100% to 90%
- B- 89% to 80%
- C-79% to 70%
- D-69% to 60%
- F-below 59%

For the Core rotations of Community, Health System (Institutional), Ambulatory Care and Medicine, the top 10% of students will receive a Certificate of Excellence in Experiential Education at graduation.

COMPLETING ASSESSMENTS

1. All forms to be completed and submitted via RXpreceptor unless otherwise indicated.
2. The completed on line assessment must be received by the Director or Experiential Education by the Friday of the third week of the rotation (mid rotation evaluation) and by the last day of the rotation.
3. Any questions regarding assessments should be directed to Karen Laudenbach.

Mid-Rotation

Student:

1. Turn in all pertinent assignments as assigned by your preceptor for review prior to your mid-rotation evaluation.
2. The mid rotation will be available to you on RXpreceptor. Complete and share with your preceptor.

Preceptor:

1. During the third week of rotation complete the APPE Assessment Rubric which is available on RXpreceptor.
2. **If the preceptor feels that the student is at risk for failure prior to or during the mid-rotation assessment, the preceptor should contact the Director of Experiential Education as soon as possible.** A plan of action should be developed between the preceptor and student to improve the student's performance and chance for success. Please use the Mid-Assessment Deficiency Notice (see page 21) and submit to the Director of Experiential Education for review.

End of Rotation

Student:

1. Turn in all pertinent assignments to your preceptor. The preceptor may ask to see ALL assignments from the full rotation, so have them ready for review.
2. Complete the APPE Assessment Rubric which is available on RXpreceptor
3. Complete the Evaluation of APPE Preceptor and Site. Please provide honest, but professional feedback. Feedback will be shared with your preceptor to assist them in improving the rotation for future students.

Preceptor:

1. During the last week of rotation, complete the APPE Assessment Rubric on RX Preceptor.
2. Please see the following attachment (Appendix) for additional questions that you will be asked to complete in RX Preceptor when completing the on line final assessment.

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Mid Rotation Deficiency Notice

Please contact the Director of Experiential Education, Joan Hardman, immediately by phone (847-330-4508) or email (jhardman02@roosevelt.edu) if there is a concern that the student may fail the rotation. Please complete and forward this notification to Joan Hardman by fax (847-330-4525) or as a PDF via email to document concerns and the action plan.

Student's Name: _____ **Date:** _____

Rotation Site: _____

Preceptor's Name: _____

Description of deficiency identified: _____

Action plan for improvement: _____

Student's Signature: _____

Preceptor's Signature: _____

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APPE ASSESSMENT RUBRIC

This assessment tool is an opportunity to reflect with students on their learning. The grade itself is blinded to the preceptor. You will only be able to assign an “Excellent”, “Competent” or “Deficient” rating as it pertains to the student’s activities in each of the competency areas. Each competency carries with it a weight and each rating a score. The grade will be generated automatically taking these factors into consideration and will be directly calculated by Roosevelt College of Pharmacy. The important point to recognize is that you will be evaluating the students based on what they have done; their grade will follow naturally.

Competencies adapted with permission from SUCCESS (System of Universal Clinical Competency Evaluation in the Sunshine State) Copyright 2013. Florida A&M University; Nova Southeastern University; Palm Beach Atlantic University; & University of Florida

Please evaluate your student on each of the 13 competencies below. For each competency rate the student as **Excellent**, **Competent**, **Deficient** or select **Not Applicable** using the following standards for differentiating between the levels of assessment:

Excellent – Student consistently performed at a high level professionally and with significant autonomy.

Competent – Student performed at a professionally acceptable level with occasional input from others.

Deficient – Student routinely performed below a professionally acceptable level even with input from others.

Not Applicable – the competency was either not relevant to this rotation or was encountered so infrequently that an assessment cannot be made.

COMPETENCY AND EXAMPLES OF BEHAVIORS RELEVANT TO THE COMPETENCY	ASSESSMENT
<p>COMPETENCY #1 – Drug Distribution Systems. When evaluating this take into account the following sub-competencies as you form your assessment. Please make an assessment if any of the examples below were encountered with sufficient frequency to render a fair assessment of the student’s performance.</p> <ul style="list-style-type: none"> • Applies the principles of civil law to the practice of pharmacy. • Applies state and federal regulations in the dispensing process. • Determines need and factors for correctly using the medication. • Identifies drugs costs to the patient. • Clarifies and/or corrects prescription order information as necessary. • Correctly labels and performs the final check. • Correctly documents adverse drug reactions through the appropriate channels. • Applies ordering, purchasing and inventory control principles. • Abides by laws on storage and disposal of medication. 	

<p>COMPETENCY #2 – Disease State Knowledge. When evaluating this take into account the following sub-competencies as you form your assessment. Please make an assessment if any of the examples below were encountered with sufficient frequency to render a fair assessment of the student’s performance.</p> <ul style="list-style-type: none"> • Discusses pathophysiology of disease(s). • Synthesizes basic science and clinical information to appropriately identify patient problems. • Applies knowledge of the pathophysiology of a specific disease to prevent medication-related problems. • Uses appropriate critical pathways, clinical practice guidelines, and disease management protocols in the delivery of pharmaceutical care. • Assesses the needs of the target population relative to disease prevention/detection. • Selects and implements an appropriate strategy to prevent (i.e. immunizations) or detect (i.e. blood cholesterol screening) disease in the target population. 	
<p>COMPETENCY #3 – Drug Therapy Evaluation And Development. When evaluating this take into account the following sub-competencies as you form your assessment. Please make an assessment if any of the examples below were encountered with sufficient frequency to render a fair assessment of the student’s performance.</p> <ul style="list-style-type: none"> • Synthesizes complete patient history and laboratory and physical exam data to identify problems. • Identifies and prioritizes both actual and potential drug related problem stating rationale. • Identifies problems that require emergency medical attention. • Designs and evaluates treatment regimens for optimal outcomes using pharmacokinetic data and drug formulation data. • Designs and evaluates treatment regimens for optimal outcomes using disease states and previous or current drug therapy as well as including psycho-social, ethical-legal, and financial data. • Develops backup plans based on what problems are likely to occur from/with the primary plan. • Provides written documentation of the pharmaceutical care plan that is clear, complete, and concise 	
<p>COMPETENCY #4 – Monitoring For Endpoints. When evaluating this take into account the following sub-competencies as you form your assessment. Please make an assessment if any of the examples below were encountered with sufficient frequency to render a fair assessment of the student’s performance.</p> <ul style="list-style-type: none"> • Identifies and suggests appropriate therapeutic endpoints for patient (cure, maintenance, or prophylaxis of disease). • Develops monitoring plan appropriate for patient specific physiologic differences. • Provides rationale for monitoring plan with documentation from reliable sources. • Evaluates and alters monitoring plan when necessary as the patient's needs change. • Identifies monitoring results, which would require emergency medical attention. • Suggests drug therapy changes based on progress towards endpoints or identified drug-related problems. 	

<p>COMPETENCY #5 – Patient Case Presentations. When evaluating this take into account the following sub-competencies as you form your assessment. Please make an assessment if any of the examples below were encountered with sufficient frequency to render a fair assessment of the student’s performance.</p> <ul style="list-style-type: none"> • Patient cases are prepared in a timely manner. • Follows patients and maintains information on number required by preceptor. • Verbally presents data in an organized manner. • Writes a chart note on patient and data is recorded and presented in appropriate format. • Uses appropriate verbal and nonverbal mannerisms during presentation. • Communicates presentation clearly and in a tone and volume that is clearly understood. • Able to answer questions about patients or disease states. 	
<p>COMPETENCY #6 – Patient Interviews. When evaluating this take into account the following sub-competencies as you form your assessment. Please make an assessment if any of the examples below were encountered with sufficient frequency to render a fair assessment of the student’s performance.</p> <ul style="list-style-type: none"> • Introduces self as student from College of Pharmacy. • Optimizes environment for the interview. • Clarifies the purpose and structure of the interview. • Verifies patient name and correct pronunciation, and demographic data. • Explains how patient will benefit from interview. • Employs vocabulary, question structure, question complexity, and invited feedback to insure patient understanding. • Implements the interview in an organized fashion. • Answers patient questions providing appropriate and correct data. 	
<p>COMPETENCY #7 – Patient Education/Counseling. When evaluating this take into account the following sub-competencies as you form your assessment. Please make an assessment if any of the examples below were encountered with sufficient frequency to render a fair assessment of the student’s performance.</p> <ul style="list-style-type: none"> • Speaks clearly using proper enunciation, volume, and rate. • Uses terminology specific to the understanding of the patient. • Uses appropriate non-verbal communication. • Provides accurate and pertinent information in appropriate detail. • Includes information required for the patient's social and financial needs. • Provides feedback to patient questions/concerns. • Determines patient level of understanding by asking questions. • Demonstrates empathy. • Shows concern for patient well-being. • Retrieves and evaluates new information for the purpose of responding to patient questions. 	

<p>COMPETENCY #8 – Drug Information. When evaluating this take into account the following sub-competencies as you form your assessment. Please make an assessment if any of the examples below were encountered with sufficient frequency to render a fair assessment of the student’s performance.</p> <ul style="list-style-type: none"> • Selects the best available resource for answering a drug related request. • Demonstrates the ability to use other information resources (this includes poison control centers, pharmaceutical companies and federal agencies). • Generates correct answers to questions in a timely and systematic manner. • Can define primary, secondary and tertiary references. • Is able to discuss the organization and operation of the Pharmacy and Therapeutics Committee (or its equivalent depending on the site). (Specific responsibilities would include formulary management and drug usage evaluation process). • Demonstrates the ability to interpret descriptive statistics and inferential statistical tests using assessment tools commonly reported in medical and pharmaceutical literature. • Critically analyzes the design, methodology, results, and conclusions of a given published study • Compares and contrasts the approaches to clinical practice guideline (CPG) development and the concept of evidence-based medicine (EBM) 	
<p>COMPETENCY #9 – Formal Oral Presentations. When evaluating this take into account the following sub-competencies as you form your assessment. Please make an assessment if any of the examples below were encountered with sufficient frequency to render a fair assessment of the student’s performance.</p> <ul style="list-style-type: none"> • Provides list of references that support an adequate review of the literature. • Delivers a content correct presentation based on the assignment parameters. • Communicates correct information that is understood and useable by the audience. • Uses appropriate verbal and non-verbal communication skills (inclusive of body language). • Utilizes audiovisual aids and technology that enhance delivery and understanding of the presentation. • Utilizes time allotted for presentation efficiently and effectively. • Generates feedback from the audience by asking questions. • Demonstrates a knowledge base sufficient for the topic of discussion. • Correctly synthesizes enthusiasm, verbal skills, non-verbal skills, and audiovisual aids to produce a presentation, which gains and keeps the audience's attention. 	
<p>COMPETENCY #10 – Formal Written Presentations. When evaluating this take into account the following sub-competencies as you form your assessment. Please make an assessment if any of the examples below were encountered with sufficient frequency to render a fair assessment of the student’s performance.</p> <ul style="list-style-type: none"> • Facts about the topic are correct. • Presentation of the topic is organized. • Presentation format and length adheres to the parameters established by the Preceptor. • Written document contains review of primary literature from reputable sources. 	

<p>COMPETENCY #11– Professional Team Interaction. When evaluating this take into account the following sub-competencies as you form your assessment. Please make an assessment if any of the examples below were encountered with sufficient frequency to render a fair assessment of the student’s performance.</p> <ul style="list-style-type: none"> • Dresses appropriately for the setting. • Demonstrates sensitivity for patients and families during team activities. • Demonstrates respect for other health care professionals. • Uses interpersonal communication skills to facilitate team interactions. • Actively participates in team activities. • Assists team members in establishing therapeutic and/or diagnostic objectives. • Uses documentation, persuasion, and alternative suggestions to resolve therapeutic disagreements. • Provides accurate, organized, and pertinent information relevant to the team's current or future tasks. • Follows up on questions asked by the team in a timely fashion. • Interactions with the team are conducted with an appropriate level of confidence. • Retrieves and evaluates new information for the purpose of responding to professional questions. 	
<p>COMPETENCY #12 – Professionalism/Motivation. When evaluating this take into account the following sub-competencies as you form your assessment. Please make an assessment if any of the examples below were encountered with sufficient frequency to render a fair assessment of the student’s performance.</p> <ul style="list-style-type: none"> • Identifies and respects the values of others. • Demonstrates knowledge and understanding of the pharmacist "code of ethics". • Defends ethical decisions through analysis of ethical principles. • Demonstrates sensitivity to confidentiality issues. • Attends and participates in all activities according to attendance policies. • Is punctual for all activities. • Completes assigned responsibilities (including patient care responsibilities) on time. • Accommodates to change in workflow without disruption of work schedule. • Initiates additional learning opportunities. • Synthesizes new information in order to draw conclusions, hypothesizes, or decides a course of action. 	
<p>COMPETENCY #13 – Cultural Sensitivity. When evaluating this take into account the following sub-competencies as you form your assessment. Please make an assessment if any of the examples below were encountered with sufficient frequency to render a fair assessment of the student’s performance.</p> <ul style="list-style-type: none"> • Assesses the religious and socio-economic value systems that affect need and adherence. • Possesses the knowledge, skills and behaviors required to identify communication tools to accommodate a culturally diverse population. • Identifies cultural differences that will potentially affect professional interactions. • Identifies appropriate alternative measures to improve verbal and non-verbal interactions between patient and pharmacist. 	

Evaluation of APPE Preceptor and Site

Part 1 – Evaluation of Preceptor		Strongly Agree 1	Agree 2	Disagree 3	Strongly Disagree 4
1	The preceptor is knowledgeable about their practice environment				
2	The preceptor was a pharmacy practice role model				
3	The preceptor displayed enthusiasm for teaching				
4	The preceptor provided opportunities conducive to learning				
5	The preceptor communicated clearly with me				
6	The preceptor motivated me to further my learning				
7	The preceptor provided hands-on activities and interactive discussion				
8	The preceptor provided timely and constructive feedback to me				
9	The preceptor encouraged me to think independently				
10	Was this preceptor exceptional? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what are the qualities that make this preceptor exceptional?				

Part 2 – Evaluation of Rotation		Strongly Agree 1	Agree 2	Disagree 3	Strongly Disagree 4
1	I understood the college's expectations for this rotation prior to beginning				
2	The preceptor clearly described what was expected of me early in the rotation				
3	Resources I needed were available to me				
4	I feel that the preceptor's assessment of my performance was fair				
5	I was encouraged to further develop my ability to self-assess during this rotation				
6	The site provides an environment conducive to learning				
7	<i>Answer only if this is a patient care rotation.</i> I was allowed the opportunity to provide responsible patient-centered care				
8	What were the strengths of this rotation?				
9	What were the weaknesses of this rotation?				
10	What suggestions can you make to improve this rotation?				

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Journal Club Evaluation Form

Student Name: _____ DATE _____

Preceptor / Evaluator Name: _____

<p>Student demonstrates EXCELLENT skills in this area. Assignment is completed ABOVE AND BEYOND minimum requirements.</p> <p style="font-size: 1.2em;">2</p>	<p>Student demonstrates SATISFACTORY skills in this area. Assignment MEETS minimum requirements.</p> <p style="font-size: 1.2em;">1</p>	<p>Student NEEDS IMPROVEMENT in this area. Assignment DOES NOT MEET minimum requirements.</p> <p style="font-size: 1.2em;">0</p>
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Criteria (25 points)			
Introduction			
Reference	2	1	0
Author's Affiliation / Study Support	2	1	0
Background	2	1	0
Study Objectives & Rationale	2	1	0
Methods			
Study Design and Setting	2	1	0
Inclusion / Exclusion Criteria	2	1	0
Treatment Interventions (arms, number of patients per group, dosage, administration, and duration)	2	1	0
Primary Outcome Measures	2	1	0
Secondary Outcome Measures	2	1	0
Statistics			
Intention to Treat / Per Protocol	2	1	0
Statistical Tests	2	1	0
Power	2	1	0
Results			
Baseline Characteristics	2	1	0
Number lost to follow up or dropouts, reason for drop out, and number	2	1	0

completed study			
Study Outcomes	2	1	0
Confidence Intervals, <i>p</i> -values	2	1	0
Compliance	2	1	0
Safety (adverse effects)	2	1	0
Conclusions			
Author's Conclusions	2	1	0
Student's Conclusions	2	1	0
Clinical Relevance	2	1	0
Critique	2	1	0
References	2	1	0
Speaking Style (eye contact) / Overall Presentation	2	1	0
Response to Questions	2	1	0
Comments:			

Patient Case Presentation Evaluation Form

Student Name: _____ DATE _____

Preceptor / Evaluator Name: _____

Student demonstrates EXCELLENT skills in this area. Assignment is completed ABOVE AND BEYOND minimum requirements. 2	Student demonstrates SATISFACTORY skills in this area. Assignment MEETS minimum requirements. 1	Student NEEDS IMPROVEMENT in this area. Assignment DOES NOT MEET minimum requirements. 0
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Criteria (need 24/30 points to pass)				
Patient demographic data (age, sex, race, weight (actual, ideal, and/or adjusted body weight), Chief complaint (CC), and History of present illness (HPI)	2	1	0	N/A
Past medical history (PMH), Social history (SH), and Family history (FH)	2	1	0	N/A
Allergies (ALL) – severity and reaction	2	1	0	N/A
Medications (MEDS) (prescription, over the counter, dose, directions, and indications)	2	1	0	N/A
Review of Systems (ROS) and Physical examination (PE)	2	1	0	N/A
Laboratory Data – serum creatinine included and creatinine clearance calculated	2	1	0	N/A
Problem list (most severe to least severe)	2	1	0	N/A
Progress notes (brief chronological listing of the hospital stay; include signs and symptoms, diagnostic and laboratory tests indicating improvement or deterioration of the patient's condition, and medication therapy changes)	2	1	0	N/A
Discussion of Disease State				
Epidemiology	2	1	0	N/A
Pathophysiology	2	1	0	N/A
Risk Factors	2	1	0	N/A
Labs/Diagnostic criteria	2	1	0	N/A
Disease state complications	2	1	0	N/A
Treatment <ul style="list-style-type: none"> • Non-pharmacologic Treatment • Pharmacologic Treatment (doses, directions, duration, MOA, warning/precautions, contraindications, adverse effects) • Review of Guidelines 	2	1	0	N/A

Primary Literature Review (at least 2 primary articles)				
Objective	2	1	0	N/A
Methods (inclusion/exclusion criteria)	2	1	0	N/A
Outcome measures,	2	1	0	N/A
Statistical analysis	2	1	0	N/A
Results	2	1	0	N/A
Conclusions	2	1	0	N/A
Critique	2	1	0	N/A
Clinical Relevance/Significance of Primary Literature included	2	1	0	N/A
Assessment/Plan (all disease states assessed)				
Treatment goals included	2	1	0	N/A
Non-pharmacologic treatment / Lifestyle Modifications included	2	1	0	N/A
Treatment recommendations, including rationale for selecting that therapy using primary literature and/or guidelines	2	1	0	N/A
Monitoring parameters (adverse effects, drug interactions, laboratory parameters)	2	1	0	N/A
General Health Maintenance included	2	1	0	N/A
References included	2	1	0	N/A
Speaking Style (eye contact) / Overall Presentation	2	1	0	N/A
Response to Questions	2	1	0	N/A
Comments:				

PHAR 770 Advanced Pharmacy Practice Experience: Community Pharmacy

I. Course Information	
Course Description:	<p>Students will apply the facts, information and concepts gained in didactic coursework to professional practice through practical experience under the supervision of a licensed pharmacist in a community pharmacy setting. The Community Pharmacy Practice rotation encompasses medication dispensing and control, communicating with patients, prescribers, and other health care professionals and understanding the basic principles of managing workflow to deliver positive patient outcomes. Community pharmacists are the most visible and available to the public. This rotation develops student competence to provide pharmaceutical care in the community setting and extends students' image of community pharmacy practice beyond traditional dispensing. This experience contributes to the integration of clinical knowledge and skills with the basics of communication, medication dispensing and control.</p> <p>See attached Curricular Mapping Index.</p>
Course Development Team & OEE Contact Information	<p>Instructor 1: Hardman, J. OEE, (847) 330-4508, jhardman02@roosevelt.edu</p>
Required Readings:	<p>See APPE Blackboard Course for postings. Access Pharmacy: Pharmacotherapy: A Pathophysiologic Approach. Access Pharmacy: Harrison's Principles of Internal Medicine</p>
Recommended Readings	<p>See APPE Blackboard Course for additional assigned or recommended readings. Additional readings may be assigned by your preceptor or be necessary to complete assignments given to you by your preceptor.</p>
Course Credit(s) & General Format	<p>Credits: 8.0 Format: Experiential Education, Projects, Self-evaluation, Preceptor evaluation.</p>
Prerequisites:	<p>Completion of Term 1-9 didactic courses and satisfactory academic progress.</p>
Assessment and Evaluation and Course Grading:	<p>The course coordinator will assign a final grade based on student performance in the practice setting as assessed by the preceptor. Grades assigned will be A, B, C, D, or F. Students must complete a self-evaluation prior to meeting with their assigned preceptor for both midpoint and final evaluations.</p>

Potential Rotation Assignments (Assign at least 3 per rotation, 2 may be the same type)	Journal Club	Drug Information Paper	Case Discussion	Presentation	Other (preceptor designed)
Special Projects / Assignments:	Preceptors may assign students one of the listed assignments (above) or another project they find will help the student learn important skills relevant to the practice of pharmacy in the community out-patient setting. These projects will vary from site to site and student to student in order to address patient and student factors. For the purpose of example only, possible assignments or projects, other than those listed above, others might include: researching the top prescribed drugs at the pharmacy and develop a patient counseling plan for each of them; develop a patient-screening algorithm for commonly requested OTC medications and making appropriate recommendations including patient-counseling; using business performance documents, analyze them and present the findings to the pharmacy or other manager at the site; managing patient concerns of an increasing level of urgency or complexity; participating in vaccination events and administering vaccinations; attending a CPE event with the preceptor or other pharmacist; or, participating in community-based health events.				
Educational Outcomes and Ability-Based Outcomes:	RUCOP Educational Outcomes and RUCOP Ability-based Outcomes are identified by course faculty and used to document content and skills taught, while ensuring the process of curricular evaluation and continuous quality improvement. These outcomes are kept in a living file to assist the process of mapping and curricular evaluation. Course coordinators/faculty may post these on the Blackboard website for students' review at their discretion.				

SUGGESTED PROJECTS/ACTIVITIES TO BE USED IN COMMUNITY APPEs

- Develop and present a tabletop display about the Affordable Care Act with a focus on the elements that impact patients directly.
- Determine the ten most prevalent disease states or conditions encountered at the pharmacy. Discuss the list with your preceptor and select three of them. For each of the three, compile a comprehensive list of the medications used. Finally, prepare a counseling plan for each of the drugs, taking into account adjustments that may be required when the therapy plan involves more than one drug.
- With input from your preceptor, plan, promote and provide a screening clinic for which you received training the Pharmaceutical Care Lab.
- Identify a patient who a) is on a complex therapy plan involving at least four medications and b) who has requested assistance in understanding their therapy or who your preceptor determines needs assistance to improve adherence and/or outcome. The preceptor should take the lead in offering your help to develop a plan for improvement. After the preceptor gains consent from the patient, arrange for a follow-up meeting with the patient. Develop an improvement plan and have it approved by your preceptor. Finally, meet with the patient, present the plan and affirm their comprehension.
- Conduct an anonymous survey of patients' use, or interest in using, social media as a therapy management tool. Collect, organize, analyze and present your findings to your preceptor in writing.
- With the help of your preceptor, identify an opportunity to conduct a "brown bag" (senior center, church, etc.) and under the supervision of a pharmacist meet with patients at the "brown bag", review their therapies and make appropriate recommendations.
- Investigate the available "drug take-back" programs available in the area served by your practice site and develop an informational fact sheet for use by patients or care-givers. If approved by your preceptor, make this available to patients or care-givers.
- Evaluate the pharmacy's workflow and identify any changes that might improve patient-care or efficiency. Present your findings to your preceptor (and others identified by your preceptor).
- Investigate the pharmacy's medication error reporting/quality improvement system and compare it to "gold standard" models from the literature. Present your findings to your preceptor (and others identified by your preceptor).

- Participate in an off-site immunization clinic at which you enroll patients, counsel patients, prepare injections/sprays, participate in billing activities and physician notification.
- Identify two drugs introduced within the past 12 months. For each one, prepare and present a staff in-service and develop a patient counseling plan for each drug. (The presentations do not have to be presented at the same point in time.)
- Demonstrate ability to perform basic physical assessment procedures (see list below):
 - a. Blood pressure (manual and electronic)
 - b. Blood glucose testing
 - c. Minor skin evaluation
 - d. Minor cut/abrasion evaluation
 - e. Peak flow monitoring
 - f. Metered dose inhaler
 - g. Cholesterol screening
- Perform a DUR (drug utilization review) on a complex patient. Demonstrate to your preceptor your ability to communicate the recommendations that you have made both in writing and verbally.
- Identify ten of the most purchased herbal remedies for that community location. Develop information/reference sheets which provide the following: appropriate use/indications, ingredient efficacy, toxicity and drug interactions.
- Describe to the preceptor the workload and financial performance indicators of the site and the purchasing and inventory management process.
- Participate in a community outreach program, such as a presentation to nursing homes, on a topic selected by your preceptor.
- Identify any drug shortages affecting patients at the site and develop a plan of action for alternatives to be discussed with the prescribing physician.

PHAR 771 Advanced Pharmacy Practice Experience: Hospital Pharmacy

I. Course Information					
Course Description:	<p>Students will apply the facts, information and concepts gained in didactic coursework to professional practice through practical experience under the supervision of a licensed pharmacist in a hospital pharmacy setting. The hospital rotation helps students integrate knowledge and theoretical concepts across the curriculum in an environment that encourages and requires interactions between students, preceptors and patients. Our goal is to enable students to safely and accurately perform the activities associated with the receipt, preparation and dispensing of medication orders, perform required drug control activities, support the mission of the pharmacy department and activities that maintain productive relationships with other departments in the hospital.</p> <p>See attached Curricular Mapping Index.</p>				
Course Development Team & OEE Contact Information	Instructor 1: Hardman, J. OEE, (847) 330-4508, jhardman02@roosevelt.edu				
Required Readings:	<p>See APPE Blackboard Course for postings. Access Pharmacy: Pharmacotherapy: A Pathophysiologic Approach. Access Pharmacy: Harrison’s Principles of Internal Medicine</p>				
Recommended Readings	<p>See APPE Blackboard Course for additional assigned or recommended readings. Additional readings may be assigned by your preceptor or be necessary to complete assignments given to you by your preceptor.</p>				
Course Credit(s) & General Format	<p>Credits: 8.0 Format: Experiential Education, Projects, Self-evaluation, Preceptor evaluation.</p>				
Prerequisites:	Completion of Term 1-9 didactic courses and satisfactory academic progress.				
Assessment and Evaluation and Course Grading:	<p>The course coordinator will assign a final grade based on student performance in the practice setting as assessed by the preceptor. Grades assigned will be A, B, C, D, or F. Students must complete a self-evaluation prior to meeting with their assigned preceptor for both midpoint and final evaluations.</p>				
Potential Rotation Assignments (Assign at least 3 per rotation, 2 may be the same type)	Journal Club	Drug Information Paper	Case Discussion	Presentation	Other (preceptor designed)

<p>Special Projects / Assignments:</p>	<p>Preceptors may assign students one of the listed assignments (above) or another project they find will help the student learn important skills relevant to the practice of pharmacy in the hospital setting. These projects will vary from site to site and student to student in order to address patient and student factors. For the purpose of example only, possible assignments or projects, other than those listed above, might include: researching drug shortages and recommending substitutions; using business performance documents, analyze them and present the findings to the pharmacy manager at the site; researching a drug information question; preparing IV or other sterile products; attending a CPE event with the preceptor or other pharmacist; or, participating in community-focused health events.</p>
<p>Educational Outcomes and Ability-Based Outcomes:</p>	<p>RUCOP Educational Outcomes and RUCOP Ability-based Outcomes are identified by course faculty and used to document content and skills taught, while ensuring the process of curricular evaluation and continuous quality improvement. These outcomes are kept in a living file to assist the process of mapping and curricular evaluation. Course coordinators/faculty may post these on the Blackboard website for students' review at their discretion.</p>

SUGGESTED PROJECTS/ACTIVITIES TO BE USED IN HOSPITAL APPEs

- Discuss the role of each of the following agencies in the Practice of Hospital Pharmacy- State Board of Pharmacy; The Joint Commission (AKA JCAHO); State Department of Health; American Society of Health-System Pharmacists (ASHP).
- Ask your preceptor to identify the department policies that are covered during orientation for a newly hired pharmacist. Choose at least 3 of these policies that you are not currently familiar with. After review of these policies discuss the formulation and application of these policies with one of your site preceptors.
- Given a listing of health care practitioners including Attending Physicians, Medical Fellows, Residents and Interns, Hospitalists, Medical and Surgical Subspecialties, Advanced Practice Nurses, Physician Assistants, Nurses, Respiratory Therapists, Physical Therapists, Occupational Therapists. Discuss the role of each of these clinicians and develop a plan to interact with each of these providers in your future role as a pharmacist.
- Review your notes describing the PPMI as developed by ASHP. Describe the changes in pharmacy practice that would result from adoption of the PPMI. Explain the areas where you are in agreement and in disagreement with the PPMI. If the PPMI is not adopted describe how this outcome will affect your future practice of pharmacy.
- Given a medication order, describe the process for: transcription interpretation (if necessary), record keeping, preparation, verification and dispensing to a health care provider. What roles do pharmacists have in enhancing the efficiency and the safety of this process?
- Prepare a flow chart to describe the relationship between the use of direct dispensing, automated cabinets, automated carousels, robots, floor stock, and cart exchange for providing unit dose oral and direct injectable medications to patients. (Note: your practice site likely will not use every one of these methods.) Discuss the relative safety, efficiency, timeliness and user friendly aspects of each of these methods. Compare the perspective of the pharmacist to the perspective of the patient's nurse, and to the perspective of the patient.
- Review the policy manual for preparation and dispensing of sterile products. Compare the process for preparing IV admixtures to the process for IV compounding. Describe the policies at your site for IV compounding.

- Many hospital pharmacies have adopted a practice model that considers all pharmacists to be clinical pharmacists. Discuss why this describes the prevailing concepts in contemporary practice. Do you agree with this concept? Why or why not?
- ASHP recently recommended that a Post Graduate Year One (PGY1) residency become a minimum qualification for a career in hospital pharmacy. If you are interested in hospital pharmacy describe how you can become a stronger residency candidate.
- What makes a pharmacist a good preceptor? How are you planning to develop your pharmacy practice so that future students consider you to be an excellent preceptor?
- What makes a pharmacist a good supervisor and leader of pharmacy technicians? How are you planning to develop your pharmacy practice so that both your departmental leadership and the staff pharmacy technicians consider you to be an excellent supervisor?
- What is a tech check tech system? This process of was recently approved by the Illinois Board of Pharmacy. Discuss the advantages and disadvantages of a tech check tech system.
- Summarize the process for adding a medication to the formulary. Compare an open formulary to a closed formulary. What would be the process for verifying and providing a non-formulary medication in an open formulary? In a closed formulary? Describe a situation when a pharmacist should and when a pharmacist should NOT provide a non-formulary medication. Describe how you would discuss your decision with the prescriber.
- How does your practice site manage drug shortages? Describe a process for conserving medications that are known to be in short supply. What is the best way to determine the most appropriate alternative medication? What is the role of the hospital pharmacist in identifying alternative medications?
- Describe the role of the pharmacy department for providing medications to patients that are a) investigational drugs; b) that are assigned to a Risk Management and Mitigation Strategy (REMS); c) that are available only from a specialty pharmacy. Do you think that these medications should go through the formulary process? Why or why not?
- Many hospital pharmacy departments conduct drug use evaluations (DUE/ MUE) or drug use analysis. This type of analysis has often been compared to a type of study design known as a "Case Series". What is the purpose of conducting a drug use analysis? Participate in and describe the purpose and the findings of a drug use analysis conducted at your practice site.

- Define a "culture of safety".
- Why do you think it is important to investigate the cause of potential errors even when they might not have caused harm in a particular situation? Explain what is meant by preventing systematic errors. Compare two examples of forcing functions to two examples of increasing vigilance as methods to reduce the frequency of errors. Which model of hospital pharmacy practice would you prefer to work under and why?
- Identify methods of implementing, maintaining and evaluating clinical pharmacy services in an institution
- Attend an interdisciplinary committee meeting with your preceptor and write up the benefits of what is being worked on or what has been accomplished.
- Select a medication error reduction goal in collaboration with your preceptor. Develop a possible implementation plan to help reduce the error. Discuss with the preceptor the impact of a medication error on a patient's health and the pharmacist's role in medication error reduction.
- Discuss the technique for compounding and dispensing cytotoxic agents. Identify policies and additional safeguards performed during this process.
- Describe the process for drug procurement and inventory control. Compare/contrast the differences with that of a controlled substance.
- Investigate what information is contained on a material safety data sheet (MSDS). Why are these sheets/information required by the Occupational Safety and Health Administration (OSHA)? Where is this information kept at the site?

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PHAR 772 Advanced Pharmacy Practice Experience: Ambulatory Care

I. Course Information	
Course Description:	<p>Students will apply the facts, information and concepts gained in didactic coursework to professional practice through practical experience under the supervision of a licensed pharmacist in an ambulatory care setting (at home or at an out-patient healthcare facility). The Ambulatory Care rotation and requires interactions between students, preceptors and patients. Our goal is to enable students to recommend, provide and monitor safe, effective and cost-efficient disease state management by assuring the safe, accurate preparation and dispensing of medications, developing patient-specific pharmacotherapy plans and optimizing patients' outcomes through interactions with patients and other health professionals. This experience contributes to the integration of clinical knowledge and skills with the basics of pharmacology, pharmacotherapy, patient assessment, counseling skills, professional communication and medication management.</p> <p>See attached Curricular Mapping Index.</p>
Course Development Team & OEE Contact Information	Instructor 1: Hardman, J. OEE, (847) 330-4508, jhardman02@roosevelt.edu
Required Readings:	See APPE Blackboard Course for postings. Access Pharmacy: Pharmacotherapy: A Pathophysiologic Approach. Access Pharmacy: Harrison's Principles of Internal Medicine
Recommended Readings	See APPE Blackboard Course for additional assigned or recommended readings. Additional readings may be assigned by your preceptor or be necessary to complete assignments given to you by your preceptor.
Course Credit(s) & General Format	Credits: 8.0 Format: Experiential Education, Projects, Self-evaluation, Preceptor evaluation.
Prerequisites:	Completion of Term 1-9 didactic courses and satisfactory academic progress.
Assessment and Evaluation and Course Grading:	The course coordinator will assign a final grade based on student performance in the practice setting as assessed by the preceptor. Grades assigned will be A, B, C, D, or F. Students must complete a self-evaluation prior to meeting with their assigned preceptor for both midpoint and final evaluations.

Potential Rotation Assignments (Assign at least 3 per rotation, 2 may be the same type)	Journal Club	Drug Information Paper	Case Discussion	Presentation	Other (preceptor designed)
Special Projects / Assignments:	<p>Preceptors may assign students one of the listed assignments (above) or another project they find will help the student learn important skills relevant to the practice of pharmacy in the ambulatory care setting. These projects will vary from site to site and student to student in order to address patient and student factors. For the purpose of example only, possible assignments or projects, other than those listed above, others might include: researching the top prescribed drugs at the site and develop a patient counseling plan for each of them; performing medication reconciliations; providing MTM services; fielding drug information requests; managing patient questions or concerns about their medications; applying the principles of motivational interviewing or other techniques to improve adherence, participating in vaccination events and administering vaccinations; attending a CPE event with the preceptor or other pharmacist; or, participating in community-based health events.</p>				
Educational Outcomes and Ability-Based Outcomes:	<p>RUCOP Educational Outcomes and RUCOP Ability-based Outcomes are identified by course faculty and used to document content and skills taught, while ensuring the process of curricular evaluation and continuous quality improvement. These outcomes are kept in a living file to assist the process of mapping and curricular evaluation. Course coordinators/faculty may post these on the Blackboard website for students' review at their discretion.</p>				

SUGGESTED PROJECTS/ACTIVITIES TO BE USED IN AMBULATORY CARE APPEs

- Describe the roles and responsibilities of pharmacists in the ambulatory care practice setting
- Participate in direct patient care for disease management of chronic illnesses as directed by the preceptor
- Collect and analyze pertinent data from the medical chart and the patient as needed to provide patient care
- Perform disease-specific physical assessment
- Provide appropriate triage to patients depending on their presenting signs and symptoms
- Apply pharmacologic, pharmacokinetic and therapeutic principles when developing treatment plans
- Demonstrate the ability to recommend changes in drug therapy to other healthcare providers
- Develop a plan for monitoring patient progress based on the treatment plan
- Provide appropriate education to patients, caregivers, and/or other healthcare providers
- Identify a patient on numerous medications who is not adherent. Develop a plan to increase adherence. Share with preceptor and counsel patient. Perform follow up
- Participate in Immunization Clinic
- Identify, assess and report adverse drug reactions and medication errors using the appropriate reporting system

- Identify cultural, psychological and economic barriers which may inhibit patient compliance
- Pick a particular disease state which is often seen at the site (i.e. Diabetes, Hypertension, Dyslipidemia, COPD, Asthma). Describe various aspects of the disease state including, but not limited to, pathophysiology, risk factors, progression, chronic and acute complications, long term effects
- Describe the following for all medications in a patient's pharmacotherapeutic plan:
 - Mechanism of action
 - Pharmacodynamics and pharmacokinetics
 - Toxicities and adverse drug reactions
 - Clinically significant drug interactions

PHAR 773 Advanced Pharmacy Practice Experience: Medicine

I. Course Information					
Course Description:	<p>Students will apply the facts, information and concepts gained in didactic coursework to professional practice through practical experience under the supervision of a licensed pharmacist in a health-system in-patient setting. The Inpatient/Acute Care General Medicine Practice (“Medicine”) rotation will provide the student to apply and enhance the skills necessary to deliver rational, evidence-based pharmaceutical care by participating in the daily work of a clinician pharmacist. It will require functioning in a team setting with a broad range of other healthcare professionals in which critical thinking, applying knowledge from all aspects of prior didactic subjects, professional communication and conduct are expected. This experience contributes to the application of clinical knowledge and skills and refining them to deliver high quality outcomes for patients.</p> <p>See attached Curricular Mapping Index.</p>				
Course Development Team & OEE Contact Information	Instructor 1: Hardman, J. OEE, (847) 330-4508, jhardman02@roosevelt.edu				
Required Readings:	<p>See APPE Blackboard Course for postings. Access Pharmacy: Pharmacotherapy: A Pathophysiologic Approach. Access Pharmacy: Harrison’s Principles of Internal Medicine</p>				
Recommended Readings	<p>See APPE Blackboard Course for additional assigned or recommended readings. Additional readings may be assigned by your preceptor or be necessary to complete assignments given to you by your preceptor.</p>				
Course Credit(s) & General Format	<p>Credits: 8.0 Format: Experiential Education, Projects, Self-evaluation, Preceptor evaluation.</p>				
Prerequisites:	Completion of Term 1-9 didactic courses and satisfactory academic progress.				
Assessment and Evaluation and Course Grading:	<p>The course coordinator will assign a final grade based on student performance in the practice setting as assessed by the preceptor. Grades assigned will be A, B, C, D, or F. Students must complete a self-evaluation prior to meeting with their assigned preceptor for both midpoint and final evaluations.</p>				
Potential Rotation Assignments (Assign at least 3 per rotation, 2 may be the same type)	Journal Club	Drug Information Paper	Case Discussion	Presentation	Other (preceptor designed)

<p>Special Projects / Assignments:</p>	<p>Preceptors may assign students one of the listed assignments (above) or another project they find will help the student learn important skills relevant to the practice of pharmacy in the health-system in-patient medicine setting. These projects will vary from site to site and student to student in order to address patient and student factors. For the purpose of example only, possible assignments or projects, other than those listed above, might include: performing medication reconciliation upon admission; developing drug treatment plans; researching patients' underlying disease states or conditions; monitoring patient outcomes and, if warranted, proposing revisions to drug treatment plans; handling drug information requests; adjusting dosages for special populations; providing discharge counseling to patients or their care-givers, participating in daily rounds, attending in-services or a CPE event with the preceptor or other pharmacist; or, participating in community-based or institution-based health events.</p>
<p>Educational Outcomes and Ability-Based Outcomes:</p>	<p>RUCOP Educational Outcomes and RUCOP Ability-based Outcomes are identified by course faculty and used to document content and skills taught, while ensuring the process of curricular evaluation and continuous quality improvement. These outcomes are kept in a living file to assist the process of mapping and curricular evaluation. Course coordinators/faculty may post these on the Blackboard website for students' review at their discretion.</p>

SUGGESTED PROJECTS/ACTIVITIES TO BE USED IN MEDICINE APPEs

- Identify, assess and report adverse drug reactions and medication errors using the appropriate reporting system
- Assist in facilitating patient transition from one care setting to another by communicating the pharmaceutical care plan to another pharmacist and/or health care provider
- Develop a complete medical and drug therapy list on selected complicated patient
- Devise and implement a patient monitoring plan to ensure achievement of desired therapeutic outcomes
- Formally present a Drug Information request
- Describe the role of the most common diagnostic tests used in adult acute care
- Apply pharmacokinetic and pharmacodynamics principles to assure appropriate drug dosing
- Develop basic patient (including physical) assessment
- Describe, evaluate, recommend, implement and monitor therapeutic outcomes associated with a pharmaceutical care plan for a patient suffering from any of six of the following disease states:
 - Chronic obstructive pulmonary disease
 - Asthma
 - Pneumonia
 - Congestive Heart Failure
 - Angina
 - Myocardial Infarction
 - Diabetes
 - Renal Failure
 - HIV
 - Stroke/Transient Ischemic Attacks
 - Anticoagulation

- Seizures
- Hypertension

- Any applicable projects/activities from Hospital (Institutional) rotation

PHAR 774 Advanced Pharmacy Practice Experience: Elective I

I. Course Information	
Course Description:	<p>Students will apply the facts, information and concepts gained in didactic coursework to professional practice through practical experience under the supervision of a qualified professional in a setting approved by the Director of the Office of Experiential Education (or designee). The types of settings will generally be patient-care focused, such as a second experience similar to PHAR 770, PHAR 771, PHAR 772 or PHAR 773, but may also be in non-patient-care settings such as academic pharmacy, healthcare related management, managed care, professional healthcare associations or healthcare regulatory bodies. For elective rotations other than at a site with which Roosevelt University already has an established affiliation agreement students are advised to exercise caution due to the long periods of time it typically takes to establish the necessary agreements.</p> <p>See attached Curricular Mapping Index.</p>
Course Development Team & OEE Contact Information	Instructor 1: Hardman, J. OEE, (847) 330-4508, jhardman02@roosevelt.edu
Required Readings:	If the elective is a second experience in one of the four required APPEs, reading assignments will be those stated in the required APPE's syllabus. For all other elective APPE's the preceptor will determine the requirements.
Recommended Readings	If the elective is a second experience in one of the four required APPEs, suggested reading assignments will be those stated in the required APPE's syllabus. For all other elective APPE's reading requirements the preceptor will determine the recommendations.
Course Credit(s) & General Format	<p>Credits: 8.0</p> <p>Format: Experiential Education, Projects, Self-evaluation, Preceptor evaluation.</p>
Prerequisites:	Completion of Term 1-9 didactic courses and satisfactory academic progress.
Assessment and Evaluation and Course Grading:	The course coordinator will assign a final grade based on student performance in the practice setting as assessed by the preceptor. Grades assigned will be A, B, C, D, or F. Students must complete a self-evaluation prior to meeting with their assigned preceptor for both midpoint and final evaluations. For non-patient-care rotations a grading rubric that is different from the ones used for a patient-care may be used.

Potential Rotation Assignments (Assign at least 3 per rotation, 2 may be the same type)	Journal Club	Drug Information Paper	Case Discussion	Presentation	Other (preceptor designed)
Special Projects / Assignments:	<p>If the elective is a second experience in one of the four required APPEs, special projects/assignments will be comparable to those listed in the required APPE's syllabus. For all other elective rotations students should expect the variety of potential projects or assignments to be broad and often difficult to predict. Students in such elective rotations should anticipate that these rotations will likely require flexibility on the student's part and may introduce them to aspects of healthcare that may not have been covered in the curriculum.</p>				
Educational Outcomes and Ability-Based Outcomes:	<p>RUCOP Educational Outcomes and RUCOP Ability-based Outcomes are identified by course faculty and used to document content and skills taught, while ensuring the process of curricular evaluation and continuous quality improvement. These outcomes are kept in a living file to assist the process of mapping and curricular evaluation. Course coordinators/faculty may post these on the Blackboard website for students' review at their discretion.</p>				

PHAR 775 Advanced Pharmacy Practice Experience: Elective II

I. Course Information	
Course Description:	<p>Students will apply the facts, information and concepts gained in didactic coursework to professional practice through practical experience under the supervision of a qualified professional in a setting approved by the Director of the Office of Experiential Education (or designee). The types of settings will generally be patient-care focused, such as a second experience similar to PHAR 770, PHAR 771, PHAR 772 or PHAR 773, but may also be in non-patient-care settings such as academic pharmacy, healthcare related management, managed care, professional healthcare associations or healthcare regulatory bodies. For elective rotations other than at a site with which Roosevelt University already has an established affiliation agreement students are advised to exercise caution due to the long periods of time it typically takes to establish the necessary agreements.</p> <p>See attached Curricular Mapping Index.</p>
Course Development Team & OEE Contact Information	Instructor 1: Hardman, J. OEE, (847) 330-4508, jhardman02@roosevelt.edu
Required Readings:	If the elective is a second experience in one of the four required APPEs, reading assignments will be those stated in the required APPE's syllabus. For all other elective APPE's the preceptor will determine the requirements.
Recommended Readings	If the elective is a second experience in one of the four required APPEs, suggested reading assignments will be those stated in the required APPE's syllabus. For all other elective APPE's reading requirements the preceptor will determine the recommendations.
Course Credit(s) & General Format	<p>Credits: 8.0</p> <p>Format: Experiential Education, Projects, Self-evaluation, Preceptor evaluation.</p>
Prerequisites:	Completion of Term 1-9 didactic courses and satisfactory academic progress.
Assessment and Evaluation and Course Grading:	The course coordinator will assign a final grade based on student performance in the practice setting as assessed by the preceptor. Grades assigned will be A, B, C, D, or F. Students must complete a self-evaluation prior to meeting with their assigned preceptor for both midpoint and final evaluations. For non-patient-care rotations a grading rubric that is different from the ones used for a patient-care may be used.

Potential Rotation Assignments (Assign at least 3 per rotation, 2 may be the same type)	Journal Club	Drug Information Paper	Case Discussion	Presentation	Other (preceptor designed)
Special Projects / Assignments:	<p>If the elective is a second experience in one of the four required APPEs, special projects/assignments will be comparable to those listed in the required APPE's syllabus. For all other elective rotations students should expect the variety of potential projects or assignments to be broad and often difficult to predict. Students in such elective rotations should anticipate that these rotations will likely require flexibility on the student's part and may introduce them to aspects of healthcare that may not have been covered in the curriculum.</p>				
Educational Outcomes and Ability-Based Outcomes:	<p>RUCOP Educational Outcomes and RUCOP Ability-based Outcomes are identified by course faculty and used to document content and skills taught, while ensuring the process of curricular evaluation and continuous quality improvement. These outcomes are kept in a living file to assist the process of mapping and curricular evaluation. Course coordinators/faculty may post these on the Blackboard website for students' review at their discretion.</p>				

Copy of Appendix C Mappings

<i>Competency</i>		<i>PHAR 770 Community</i>	<i>PHAR 771 Hospital</i>	<i>PHAR 772 Am Care</i>	<i>PHAR 773 Medicine</i>	<i>PHAR 774/5 Electives</i>
	<i>In general, and where legally permitted, activities in which students should participate during required advanced pharmacy practice experiences include, but are not limited to:</i>	<i>An "X" indicates that the competency should be (or could be, if an elective) encountered in that course</i>				
C.1.1	practicing as a member of an interprofessional team	X	X	X	X	X
C.1.2	identifying, evaluating, and communicating to the patient and other health care professionals the appropriateness of the patient's specific pharmacotherapeutic agents, dosing regimens, dosage forms, routes of administration, and delivery systems	X	X	X	X	X
C.1.3	consulting with patients regarding self-care products	X		X		X
C.1.4	recommending prescription and nonprescription medications, dietary supplements, diet, nutrition, traditional nondrug therapies, and complementary and alternative therapies	X		X		X
C.1.5	recommending appropriateness medication dosing utilizing practical pharmacokinetic principles		X		X	X
C.1.6	administering medications where practical and consistent with the practice environment and where legally permitted	X		X		X
C.1.7	identifying and reporting medication errors and adverse drug reactions	X	X	X	X	X
C.1.8	managing the drug regimen through monitoring and assessing patient information	X	X	X	X	X
C.1.9	providing pharmacist-delivered patient care to a diverse patient population	X	X	X	X	X
C.1.10	providing patient education to a diverse patient population	X		X		X

Competency		PHAR 770 Community	PHAR 771 Hospital	PHAR 772 Am Care	PHAR 773 Medicine	PHAR 774/5 Electives
C.1.11	educating the public and health care professionals regarding medical conditions, wellness, dietary supplements, durable medical equipment, and medical and drug devices	X		X	X	X
C.1.12	retrieving, evaluating, managing, and using clinical and scientific publications in the decision-making process	X	X	X	X	X
C.1.13	accessing, evaluating, and applying information to promote optimal health care	X	X	X	X	X
C.1.14	ensuring continuity of pharmaceutical care among health care settings	X		X	X	X
C.1.15	participating in discussions and assignments regarding compliance with accreditation, legal, regulatory/legislative, and safety requirements	X	X			X
C.1.16	participating in discussions and assignments regarding the drug approval process and the role of key organizations in public safety and standards setting	X	X	X		X
C.1.17	participating in discussions and assignments concerning key health care policy matters that may affect pharmacy	X	X	X		X
C.1.18	working with the technology used in pharmacy practice	X	X	X	X	X
	<i>Additional activities in which students should be able to participate during required community and hospital/health system advanced pharmacy practice experiences may include, as appropriate to the learning environment:</i>					
C.2.1	preparing and dispensing medications	X	X			X
C.2.2	managing systems for storage, preparation, and dispensing of medications	X	X			X
C.2.3	allocating and using key resources and supervising pharmacy technical staff	X	X			X
C.2.4	participating in purchasing activities	X	X			X

<i>Competency</i>		<i>PHAR 770 Community</i>	<i>PHAR 771 Hospital</i>	<i>PHAR 772 Am Care</i>	<i>PHAR 773 Medicine</i>	<i>PHAR 774/5 Electives</i>
C.2.5	creating a business plan to support a patient care service, including determining the need, feasibility, resources, and sources of funding	X	X	X		X
C.2.6	managing the medication use system and applying the systems approach to medication safety	X	X			X
C.2.7	participating in the pharmacy's quality improvement program	X	X	X	X	X
C.2.8	participating in the design, development, marketing, and reimbursement process for new patient services	X	X	X	X	X
C.2.9	participating in discussions and assignments of human resources management, medication resources management, and pharmacy data management systems, including pharmacy workload and financial performance	X	X			X
C.2.10	participating in the pharmacy's planning process	X	X			X
C.2.11	conducting a drug use review	X	X	X	X	X
C.2.12	managing the use of investigational drug products	X	X			X
C.2.13	participating in the health system's formulary process	X	X			X
C.2.14	participating in therapeutic protocol development	X	X		X	X
C.2.15	participating in the management of medical emergencies	X	X	X	X	X
C.2.16	performing prospective and retrospective financial and clinical outcomes analyses to support formulary recommendations and therapeutic guideline development	X	X			X
	<i>Additional activities in which students should be able to participate during required ambulatory care and acute/general medicine advanced pharmacy practice experiences may include, as appropriate to the learning environment:</i>					
C.3.1	developing and analyzing clinical drug guidelines			X	X	X
C.3.2	participating in the health system's formulary process		X	X	X	X

<i>Competency</i>		<i>PHAR 770 Community</i>	<i>PHAR 771 Hospital</i>	<i>PHAR 772 Am Care</i>	<i>PHAR 773 Medicine</i>	<i>PHAR 774/5 Electives</i>
C.3.3	participating in the design, development, marketing, and reimbursement process for new patient services		X	X	X	X
C.3.4	participating in discussions of human resources management, medication resources management, and pharmacy data management systems including pharmacy workload and financial performance	X	X	X	X	X