



Advanced Pharmacy Practice Experience Manual



**University of Louisiana at Monroe
School of Pharmacy**

2015-2016

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School of Pharmacy**

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Rotation Calendar

APPE 1	May 18 - June 26, 2015
APPE 2	June 29 - August 7, 2015
APPE 3	August 10 - September 17, 2015
APPE 4	September 21 - October 28, 2015
APPE 5	November 2 - December 11, 2015
APPE 6	January 4 - February 11, 2016
APPE 7	February 15 - March 25, 2016
APPE 8	March 28 - April 29, 2016

Rotation Timeline

Rotation Time Frame	Requirements and Submissions
Two Weeks before Rotation:	<ul style="list-style-type: none"> Student contacts preceptor to find out specific information on when and where to report and any pre-rotation preparation/readings. For your January rotation, contact your preceptor by the second week of December - many preceptors take vacation over the Christmas holidays
Day One of Rotation:	<ul style="list-style-type: none"> Student and preceptor should discuss with preceptor their background experience, career goals, and initial self-assessment relative to the objectives of this rotation.
Rotation Mid-Point:	<ul style="list-style-type: none"> Preceptor submits a mid-point evaluation Student and preceptor meet to discuss mid-point evaluation. If you haven't received any specific feedback from your preceptor regarding your progress and performance, respectfully request your preceptor to give you an interim evaluation of your strengths and weaknesses. Graciously accept constructive feedback and then work on improving those areas.
Five Days before Last Day of Rotation:	<ul style="list-style-type: none"> Students submits self-assessment
Last Day of Rotation:	<ul style="list-style-type: none"> Preceptor submits final evaluation Student and preceptor meet to discuss final evaluation and student self-assessment Student submits evaluations of preceptor, site, and course.

Introduction

The Pharmacy Practice Experience Programs provides the entry-level Doctor of Pharmacy students a structured, supervised program of participation in the practice of pharmacy. Students gain experience in problem solving and providing patient care services while applying the basic and pharmaceutical sciences learned in the classroom and practice laboratories. Through the practicum experience, the student continues to mature while moving through the continuum from student to practitioner. Under the supervision of faculty and selected preceptors, the developing professional learns to make decisions based on professional knowledge and judgment. Broad exposure to as many pharmacy activities as possible, as well as significant personal study and reflection, facilitate this transition.

The Advanced Pharmacy Practice Experience (APPE) Program consists of 7 required rotations. Out of these 7 there are 3 elective experiences, and 4 required experiences. All students are required to take a Community practice experience, Institutional practice experience, Acute Adult Medicine experience, Ambulatory care experience, 2 Patient care experiences, and one more patient care or non-patient care experience. All practice experiences are 6 weeks long unless specified otherwise.

In the community and institutional practice experiences, students will participate in advanced hospital and community activities in order to provide them with practice skills and sufficient knowledge to begin practice in these settings. In all other required and elective experiences, students are primarily in clinical settings. They practice in ambulatory care and inpatient care environments, learning to apply their knowledge of drugs and how to use them safely and most effectively. The experiences are often interdisciplinary, focusing on patient care activities. The clinical experiences should not contain significant drug distribution, dispensing, or management activities. If the student has the interest, a maximum of one non-traditional experience that is not clinical in nature can be accomplished as an elective.

The primary objective of the experiences is to assure that each student develops the technical skill, knowledge, application skills, professional judgment, communication skills and competency necessary for entry into the profession of pharmacy. The student serves under the close supervision of faculty and selected pharmacists who have been recognized by the School of Pharmacy as preceptors. These preceptors show the student how to apply knowledge learned in the classroom to daily practice, assess the student's progress, and prepare the student's evaluation.

Preceptors are vital role models in the education of pharmacy students and their role cannot be over-emphasized. Preceptors qualify to participate in the program by meeting and adhering to standards set by the School of Pharmacy and its Experiential Committee. The preceptors agree not to utilize any aspect of the program for promotional or advertising purposes.

A preceptor is different from a teacher in several ways. A teacher provides the student with the information he or she needs to know. A preceptor *facilitates* the student directed learning. Student-directed learning can be seen as a more active learning experience. Students will learn the skills required to be life long learners. They are expected to learn through their own observations, personally chosen readings, and their patients and by observing and collaborating with their preceptor. This type of learning will be a relatively new process and the students will need encouragement to be an active learner and not fall back to a passive style of learning. During the experiences, students look to the preceptor for guidance in evaluating his or her current level of knowledge and skill and how to best reach their goals. Preceptors provide some formal teaching but more importantly will serve as role models. The preceptor's are not expected to be full time teachers and their primary responsibilities are to their patients and practice.

All pharmacy students who undertake learning experiences at any practice site must accept and adhere to the Policies and Procedures of that site. This may include, but is not limited to, random drug testing. According to the policies of the School of Pharmacy, all students practicing at any practice site must adhere to the following policies and procedures.

Policies and Procedures

I. Qualifications for entering Advanced Pharmacy Practice Experiences

- Only students who have satisfactorily completed all didactic courses with a minimum grade of “C” in each course will be allowed to enter the Advanced Practice Experience Program during the summer following their third professional year.

Prior to entering the Practice Experience Program, the student must satisfy the following:

- Health screening requirements as prescribed by the School of Pharmacy. Students will be given notice of the health screening requirements and the date by which they must be satisfied. If all required immunizations and health testing are not complete by orientation (late May), the student will not be allowed to participate in the Practice Experience Program.
- Licensure as an intern in the State of Louisiana. For sites outside of Louisiana, the student must satisfy the licensure requirements of that specific state by contacting the Board of Pharmacy for that state. It is the student’s responsibility to satisfy licensure requirements in Louisiana or states other than Louisiana.
- Carry professional liability insurance covering the time that the student is enrolled in practice experiences. The State of Louisiana Office of Risk Management provides coverage for all students enrolled in the professional program.
- Obtain a copy of the criminal background check that was performed upon admittance to the school of pharmacy.
- Carry health insurance coverage during the time that the student is enrolled in practice experiences.
- Certification in Basic Life support for the Healthcare provider, including electronic defibrillators.
- Attendance of the mandatory orientation held prior to beginning practice experiences.
- Other requirements mandated by individual practice sites (ex. Criminal background checks, drug tests, etc).

Students must keep their immunization records, intern license, background check, CPR certification, and insurance proof with them at all times during their practice experiences

II. Assignment of Pharmacy Practice Experiences

During the fall semester preceding their practice experiences, students will be able to begin practice experience selection. Using RXpreceptor, students will be allowed to choose preferences for each practice experience. Assignments are selected by RXpreceptor in a randomized fashion. Experiences will be assigned in such a way to ensure regular faculty experiences are given priority and faculty workload is adjusted with respect to the assignment of students. All students will have a minimum of two (2) practice experiences with full-time faculty.

III. Change of Pharmacy Practice Assignments

After the initial practice experience assignment, changes in the assignments will be considered as follows:

- Students will be allowed two weeks after the receipt of their initial assignments to negotiate with their fellow students a swap of sites within certain conditions.
- If for any reason the preceptor is unable to take the students as assigned, the Director of Experiential Education, the Coordinator of Introductory Practice Experience, or the Associate Dean of Academic Affairs, or his/her designee, will consult with the individual students involved and make the necessary reassignments.
- Departmental Administration will consider request for changes in assignments due to extreme hardships and the Director of Experiential Education, the Associate Dean of Academic Affairs, or his/her designee will make decisions on a case-by-case basis.

IV. Out of State Assignments

Students will be allowed to complete a maximum of two (2) of their total Introductory and Advanced practice experiences out of state. Students who wish to request such sites will be asked to provide as much information as possible about the site and the preceptor to the Office of Experiential Education. The request will be reviewed and the student will be informed of the decision. Students are not allowed to pay out of state facility (ies) and/or preceptor(s) to provide a practice experience. Students participating in out-of-state experiences must follow the rules and regulations of that state. For instance, if that state requires students to be registered with the Board of Pharmacy, the student must register with that Board of Pharmacy in addition to the Louisiana Board of Pharmacy.

V. Setting up New Practice Experiences

Students desiring a site not affiliated with the University must provide as much information as possible about the site and the preceptor to the Office of Experiential Education. The request will be reviewed and the student will be informed of the decision. Request may be denied if there are already practice experiences of the same type in the area.

VI. Absences During Pharmacy Practice Experiences

Attendance at the practice experience site is **MANDATORY**. Each student is expected to be at the site a minimum 8 hours per day/5 days per week. Students will be expected to establish a schedule with the preceptor on the first day and adhere to that schedule. Due to the limited number of days available during the practice experience, absences must be kept to a minimum. As outlined below, students are limited to the number of days they can miss without repeating an experience.

The Practice Experience schedule does not follow the University schedule. Holidays that are considered “off” days for the University may not be “off” days for practice experiences. All “off” days and mandatory University meetings will be published in the Practice Experience Schedule. If a practice site is open on a “Holiday” that’s published in the schedule, preceptors may require students to be available on that day.

Absences are defined as excused or unexcused as indicated in the University’s student policy handbook. Absences other than those identified in the student policy handbook may be excused at the preceptor’s discretion.

Community and Institutional Practice Experiences:

- The Office of Experiential Education must approve excused absences of greater than three (3) days in a month even though they are made up.
- A failing grade will be given to the student for any unexcused absence.
- **To assure compliance with the Louisiana Board of Pharmacy’s regulations, all absences (excused and unexcused) during the community or institutional practice experiences must be made up.**

All other Advanced Pharmacy Practice Experiences:

- The Office of Experiential Education must approve excused absences of greater than three (3) days in a month even though they are made up.
- A failing grade will be given to the student for any unexcused absence.
- Absences of greater than two (2) consecutive workdays must be made up.
- The student will be required to repeat the clerkship for any absences of greater than 4 workdays during an individual experience. The grade of “incomplete” will be given to the student whose absences are considered excused absences by the University of Louisiana at Monroe. The Director of Experiential Education or the Associate Dean of Academic Affairs, with the consent of the preceptor, may approve time off in excess of these guidelines.

Inclement Weather

In the event of inclement weather conditions, the student should contact their preceptor to determine the need for reporting to the site. Many factors are taken into consideration when deciding to cancel practice experiences, but student safety is the number one consideration. If a preceptor does excuse the student due to weather conditions, the time missed should be made up before the completion of the experience. University closures may not apply to experiential rotations.

VII. Process for Handling Student Complaints

The University is committed to providing a learning and working environment in which complaints are responded to promptly and with minimum distress and maximum protection to all parties involved. The University views student complaints as providing an opportunity to review and improve its policies and practices, and also to gain insight into student levels of satisfaction. To avoid any confusion as to the best way to handle any troublesome situation that has arisen or may arise between a student and a practice site, the process outlined below should be pursued. ***It is the responsibility of the student to report any problems that arise during the practice experiences to the Office of Experiential Education as soon as the problem occurs. DO NOT wait until the end of the practice experience.***

1. The student should attempt to resolve the issue with the preceptor directly.
2. If the complaint is not resolved quickly, the student should submit a **written** complaint to the Director of Experiential Education. The complaint should explain the problem as clearly and completely as possible.
 - a. Tell why the complaint should be considered
 - b. Give all the details that would help to better understand the situation, what has been done to resolve the situation, and the student's expected outcome.
 - c. Give your full name, address, contact phone number and date.
 - d. Attach any information that would aid in making a decision.
3. If the complaint is still not resolved, a **written** complaint should be submitted to the Associate Dean of Academic Affairs following the same format as above.
4. If the complaint is still not resolved, a **written** complaint should be submitted to the Dean of the School of Pharmacy following the same format as above.

VIII. Process for Handling Student Appeals

Problems may arise for students in the Pharmacy Practice Experience Program for various reasons. The University wants students to have an opportunity to appeal if there are special circumstances. The appeal must be in writing and delivered to the Office of Academic Affairs. It must follow the outlined procedure below.

1. A **written** appeal should be sent to the Director of Experiential Education. The appeal form should explain the problem as clearly and completely as possible.
 - a. Tell why the appeal should be considered.
 - b. Give all the details that would help to better understanding the situation, what has been done to address the appeal, and the student's expected outcome.
 - c. Give your full name, address, contact phone number and date.
 - d. Attach any information that would aid in making a decision.
2. If the situation is still not resolved, a **written** appeal should be sent to the Associate Dean of Academic Affairs following the same format as above.
3. If the situation is still not resolved, a **written** appeal should be sent to the Dean of the School of Pharmacy following the same format as above.

IX. Pharmacy Practice Experience Failure

Each student must successfully complete each pharmacy practice experience with a passing grade. If a student earns a grade less than a “C”, he/she will be required to repeat that practice experience type with a different preceptor. Students who earn two (2) failing grades during their practice experiences will be dismissed from the program. Because of the importance of maintaining appropriate relationships with preceptors and their institutions and the importance of quality patient care, students will be withdrawn from a practice experience with a failing grade at the **first** request of the preceptors.

X. Student Assessment During Pharmacy Practice Experiences

Using the evaluation form in RXpreceptor, the preceptor must complete a mid-point and final evaluation for each practice experience. The mid-point evaluation creates a valuable opportunity to review the experience to date, detect any unexpected issues, and plan for the remainder of the educational experience. If a mid-point evaluation is not completed in a timely manner, it is the student’s responsibility to request that the preceptor complete one. If still not completed by the preceptor, the student must report to the Office of Experiential Education. Failure to report will negate a student’s ground for appeal based on the lack of a mid-point evaluation.

The final evaluation should reflect the learner’s performance during the entire practice experience--their knowledge, skills and attitudes, and how they have improved during the practice experience. The final evaluation should be electronically submitted to the University no later than five (5) days after the final day of the practice experience. Preceptors should also check off the student’s community assignments, institutional assignments and other assignments, if applicable. This should also be electronically submitted to the University no later than five (5) days after the final day of the practice experience. After the fifth day, the Administrative Assistant for Experiential Education will begin to contact by phone and email all preceptors with outstanding evaluations and assignments.

Pharmacy Practice Proficiency examinations are a required component of the Advanced Practice Experience Program. Three examinations will be scheduled throughout the year, consisting of an error and omissions (E&Os) and objective structured clinical exams (OSCEs). In order to graduate, a minimum score of 60% must be achieved on two out of three of the E&O examinations and students must also obtain a 75% or better on two out of three of the OSCE exams. If a student does not achieve the required minimum passing scores on the pharmacy practice proficiency exams, they will be ineligible for graduation until they have completed appropriate remediation. Remediation will be assigned by the Associate Dean of Academic Affairs or his/her designee and may include self-study, remediation of selected didactic or experiential courses, remediation of specific course sequences, or other remediation as deemed appropriate. Failure to meet minimum performance standards, as defined above, will result in delaying graduation a minimum of one academic semester.

XI. Qualifications for Community and Institutional Pharmacy Practice Experiences

One of the goals of the Pharmacy Practice Experiences is to provide students with experiential education in both community and institutional pharmacy practice. It is essential that this education be provided in facilities where high standards of pharmaceutical care and instruction are available. Therefore, Community and Institutional Practice Experience preceptors and sites must meet certain qualifications.

A. Preceptors must:

- Be actively engaged in the delivery of high-quality pharmaceutical care.
- Typically have completed a B.S. or a PharmD degree and may have residency and/or fellowship training.
- Willingly accept the responsibility for professional guidance and training of the student consistent with the course objectives and be able to devote adequate time to instruction.

- Be licensed and in good standing with the State Board of Pharmacy and meets the Board of Pharmacy requirements for preceptors in the state in which the practice site is located, or in any state in the country for a federal practice site (e.g. Veteran's Administration Hospital/Clinics).
- Communicate and make recommendations to other health care professionals.
- Be evaluated annually based on student evaluations.
- Reflect by accomplishment, attitude and appearance the highest ideals of professional practice.
- Demonstrate active involvement in patient oriented practice.
- Provide a professional practice environment suitable for patient counseling and encourage participation in such by the student.
- Demonstrate proficiency or interest in promoting intra- and interprofessional relationships by collaboration with other health professionals and colleagues in pharmacy.
- Complete and return the affiliation agreement with the School of Pharmacy.

B. Facilities must:

- Be licensed and accredited by the State Board of Pharmacy in the state in which they are located, or meet the federal guidelines in the case of federal practice sites.
- Allow student access to primary literature, drug information media (texts, Micromedex, etc.) and a core professional medical library.
- Provide adequate student orientation to the facility.
- Allow access to appropriate patient information such as medication profiles, lab data, patient charts, etc.
- Allow student to function as a pharmacist under proper supervision.
- Be evaluated annually based on student evaluations.

XII. Qualifications for Clinical Patient Care Advanced Pharmacy Practice Experiences

The Patient Care Advanced Practice Experience provides students with experiential education in several important areas of clinical pharmacy practice. It is essential that this education be provided in facilities where high standards of pharmaceutical care and instruction are available. Therefore, Patient Care Advanced Practice Experience preceptors and sites must meet certain qualifications.

A. Preceptors must:

- Be actively engaged in the delivery of high-quality pharmaceutical care.
- Typically have completed a B.S. or preferable a PharmD degree and may have residency and/or fellowship training.
- Spend a majority of their time providing pharmaceutical care in their facility but will commit sufficient time to education of ULM students.
- Be licensed and in good standing with the State Board of Pharmacy and meets the Board of Pharmacy requirements for preceptor
- Provide in-service education to other health care professionals.
- Perform patient specific assessments and care plans.
- Communicate and makes recommendations to other health care professions.
- Document clinical activity as part of clinical practice.
- Provide patient education on regular basis.
- Evaluate patient outcomes to assure quality pharmaceutical care.
- Complete preceptor application and submit CV to Director of Experiential Education
- Provide syllabus outlining goals, objectives, assignments and outcomes as well as evaluation methods
- Be annually evaluated based on student evaluations.

B. Facilities must:

- Be licensed and accredited by the State Board of Pharmacy.
- Provide clinical services that are integrated into routine pharmacy practice and quality assurance procedures must be in place.
- Provide Adverse Drug Reaction reporting and Error monitoring programs.
- Allow student access to primary literature, drug information media (texts, Micromedex, etc.) and a core professional medical library.
- Provide adequate student orientation to the facility.
- Allow access to appropriate patient information such as medication profiles, lab data, patient charts, etc.
- Allow student to function as a pharmacist under proper supervision.
- Be evaluated annually based on student evaluations.

XIII. Student Professionalism During Pharmacy Practice Experiences

The ULM School of Pharmacy expects all Pharmacy Practice Experience students to uphold the most professional behavior at all times. This includes the student's appearance and the student's interaction with preceptor, patient, health care professionals, and health care institutions. Behavior of a student reflects on a student's qualification and potential to become a competent pharmacist. Attitudes and behaviors inconsistent with compassionate care, refusal by or inability of the student to participate constructively in learning or patient care, derogatory attitudes or inappropriate behavior directed at patient groups, peers, faculty or staff, or other unprofessional conduct, can be grounds for dismissal.

During the practice experiences, professional behavior is expected from each student. The student's professional behavior will be graded, however, **consistent or blatant unprofessional behavior** can result in the student being requested to leave the site with an **unexcused absence or immediate failure**.

Attitude- An important part of professionalism and the ability of the student to learn is the attitude a student portrays on a daily basis. To achieve an optimum learning experience mutual respect and courtesy between preceptor and student and other health care providers are required.

- The student should never question the advice or direction of the preceptor in public, but should discuss any disagreements in private
- The student should not hesitate to admit they do not know something, but seek help whenever needed.
- Professional decisions or judgments should not be made without checking with the preceptor. This is of particular importance when patient care will be affected. Violation of this will result in suspension from the program.
- The student must be punctual in arriving to work and meetings, and finishing tasks/assignments. **Three or more tardies may result in failure of the practice experience.**
- The student should be aware of all laws and regulations that govern the practice of pharmacy and seek clarification of any points that are unclear.
- Communication with other health care providers is encouraged, but it should not go beyond the realm of professional courtesy or common sense.
- Experiential learning is not a passive process and the student is expected to be assertive and display initiative.

Institutional Rules- The institution and preceptor are placing considerable trust by allowing students into their practice site, and preceptors, institutional employees, patients, and other customers must be treated with the utmost respect. This includes extending courtesy and respect to all employees (i.e. secretaries, janitors, technicians etc.) of that institution.

- The student is obligated to follow all rules/regulations/procedures of an institution in which they are practicing. If the rules/regulations/procedures differ between ULM and the institution, the stricter rule should be followed. If a rule/regulation/procedure of the institution conflicts with that of ULM, or state or federal law, the preceptor or a ULM faculty member should be consulted for guidance.

- The student is obligated to respect any and all confidences revealed during the training period. This includes all information pertaining to patient confidentiality as well as institutional information (i.e. pricing procedures, number of prescriptions filled, contracts, forms, or other aspects of business).

Dress Code- Personal appearance is regarded as an important aspect of a student's overall evaluation, and should reflect that of a professional. Any student found in violation of the dress code should be asked to leave their site and will receive an unexcused absence. *Students must be aware of the dress code in the institution they are working. If the institution's dress code is stricter, the institution's dress code must be followed.*

- Lab coat - Students must wear a clean **short** (hip length) white lab jacket with the University of Louisiana at Monroe School of Pharmacy logo at all times.
- Name badge - A University approved name badge identifying the student as a ULM School of Pharmacy student must be worn at all times. In addition, an individual institutional identification must be worn if required.
- Shirt and tie - Men must wear clean pressed collared-shirts with tie.
- Hats and Scarves - Hats and other coverings should not be worn.
- Miniskirts - Skirts should not be shorter than 2 inches above the knee.
- Halter-tops and sundresses - Halter, tube, or sleeveless tops along with sheer or sleeveless sundresses should not be worn.
- Jeans - Jeans of **any color** should not be worn.
- Hair - Hair including beards and side burns should be neatly groomed.
- Hygiene - Daily bathing and the use of deodorant are encouraged.
- Make-up - Should be natural and inconspicuous.
- Perfume/Cologne/After shave - Should be used sparingly or not at all.
- Hand and nails - Should be well manicured.
- Shoes - Should be polished and in good condition. High heeled and platform shoes over 2 inches should not be worn. Open toed shoes are discouraged and are not allowed in any hospital environment.
- Jewelry - Excessively large or dangling jewelry or earrings or several "clanging type" bracelets are unacceptable.

Any violations of the above guidelines can result in suspension from the program.

XIV. Professional Liability Insurance

All students enrolled in the professional program will automatically be covered by professional liability insurance during their practice experiences or while participating in other clinical activities that are part of the student's curriculum. The University maintains commercial excess general and medical malpractice liability insurance administered through the State of Louisiana Office of Risk Management for itself, its agents, officers, employees and students. This coverage can be viewed from the web site located at: <http://doa.louisiana.gov/orm/SUMMARY.2014-15%20Revision%209-9-14.pdf>

Primary Commercial General Liability coverage is underwritten by the Louisiana Self-Insurance Fund (Self insured by the office of Risk Management) and provides \$5,000,000 per occurrence (no aggregate). Miscellaneous Tort Liability coverage is underwritten by the Louisiana Self-Insurance Fund and provides comprehensive umbrella excess of \$5,000,000 per occurrence.

The student professional liability insurance does not cover students when employed outside the curriculum. The student policy expires upon date of graduation.

XV. Student Compensation During Pharmacy Practice Experiences

Students do not and may not receive any financial compensation or reimbursement for their participation in the Pharmacy Practice Experience Program. The students will receive academic credit for each practice experience successfully completed.

- Students will receive a maximum credit of 1000 hours from the Louisiana Board of Pharmacy for the structured didactic program.
- Student employment outside the practice experience is permitted but discouraged. It will not be the basis for excusing a student from an assignment nor from any other course responsibilities. Some practice experiences may involve time on evenings or weekends. **Remember, students are required to work a minimum of 40 hours per week during the practice experiences.**

XVI. Training for occupational exposure to blood borne and airborne pathogens

All students entering the Practice Experience program will receive training during orientation on Universal Precautions to decrease exposure to blood borne pathogens. Students are responsible for learning institutional guidelines for proper prevention of communicable disease transmission in each institution and for complying with those regulations.

Student training prior to practice experiences will include, but not be limited to, the following topics:

- Hepatitis B virus (HBV)
- Human Immunodeficiency virus (HIV)
- Hepatitis C virus (HCV)
- Other Potentially Infectious Material (OPIM)
- Contaminated Sharps
- Other regulated waste containers
- Universal Precautions
- Handwashing
- Gloves
- Mask, eye protection
- Protective body clothing
- Occupational Exposure

If a student is stuck by a needle or other sharp or gets blood or any body fluid in their eyes, nose, mouth, or on broken skin they should:

- i. Immediately flood the exposed area with water and clean any wound with soap and water or a skin disinfectant if available. Irrigate eyes with clean water, saline, or sterile irrigants immediately. Using a caustic agent such as bleach is not recommended.
- ii. Report exposure immediately to their preceptor and the Office of Experiential Education. Also report exposure to the department responsible for managing exposures at your practice site. The institution's accident report should be filled out, and a copy of this report should be sent to the Office of Experiential Education within **5 days** of the accident. The Office of Experiential Education will keep a copy of the report, and a copy will be sent to the Associate Dean of Academic Affairs. Prompt reporting is essential because, in some cases, post exposure treatment may be recommended, and it should be started as soon as possible.
- iii. Seek immediate medical attention.

For detailed management of potential blood borne pathogens refer to the Centers for Disease Control and Prevention website located at www.cdc.gov/mmwr/PDF/rr/rr5011.pdf.

XVII. Student Health and Safety Guidelines

Students enrolling in the Pharmacy Practice Experience program must satisfy the health requirements described below prior to beginning practice Experiences. Keep in mind that these requirements may change or a practice site may have stricter compliance standards that must be met. Students should be prepared to present their immunization records at their practice sites. Some sites require proof of immunizations before the student is allowed to continue past the first day. Students are responsible for all costs associated with meeting the requirements listed below.

In order to ensure our students are in good health, it is necessary for us to require the following:

- **2 Measles, Mumps, Rubella (MMR) Vaccinations.** -All students must provide documentation of immunity against Measles, Mumps and Rubella (MMR), providing the month and year of immunization.
- **Tetanus/Diphtheria (TD) Vaccination** – All students must provide documentation of a current TD (within the past 10 years)
- **Hepatitis B Series-** All students must provide documentation of receiving the three (3) vaccination series or sign a formal declination. A Hepatitis B surface antibody titer must be obtained one (1) month after series is completed.
- **Varicella titer-** titer must be drawn as evidence of immunity to the disease
- **Rubella titer-** titer must be drawn as evidence of immunity to the disease
- **Rubeola titer-** titer must be drawn as evidence of immunity to the disease
- **Mumps titer-** titer must be drawn as evidence of immunity to the disease
- **Tuberculosis testing (TB)** – Pharmacy students should be tested annually for tuberculosis. State of Louisiana Sanitary Code instructions are that:
 1. 2-step testing be done for anyone without a PPD Mantoux administered within the past twelve (12) months, and
 2. A follow-up PPD Mantoux will be administered for anyone with a negative test in the past twelve (12) months

Two-step testing involves the student having a PPD administered and read within 48 – 72 hours of administration; if it is negative, the student is to wait one to three (1-3) weeks and have a second PPD administered and read. Any student who has ever had a positive PPD is required to meet the State of Louisiana Sanitary Code requirements for health care providers with latent tuberculosis infection. Proof of compliance with therapy is mandatory. See the Student Health Services nurse for details if you have ever had a positive PPD Mantoux or been treated for tuberculosis.

- **Influenza vaccine-** All students must receive yearly influenza seasonal vaccine. Influenza vaccines are available in the fall of each year.
- **Health Insurance Coverage** - Students must maintain an acceptable health insurance policy during all practice experiences. Students must provide proof of current insurance coverage to the Office of Student and Professional Affairs. You may apply for the Student Health Insurance that is offered by the University. Applications for Student Health Insurance are available in the Student Life Office.
- **Cardiopulmonary Resuscitation (CPR) Certification** – All students are required to be certified in Basic Life Support (BLS) for the HealthCare Provider **PRIOR TO** entering their practice experiences. This certification will include infants, children, and electronic defibrillators.

All immunization records are retained in the Office of Student Health for 30 years post-graduation.

XVIII. Student Housing and Transportation

Housing during practice experiences is not provided by the School of Pharmacy. Students should plan well in advance where they plan to live during these off-campus experiences. Students may request assistance in locating housing from the Office of Experiential Education.

Transportation during practice experiences is the responsibility of the student. Whenever possible, attempts will be made to assign students to practice experiences near where they live. However, this is not always possible. Please understand that traveling up to an hour (and sometimes longer) one-way is considered "commutable distance".

Some sites, especially larger teaching hospitals, have limited parking available for students. Students should inquire with their preceptor on parking availability and policies. Some sites may require the student to pay for parking. Students must comply with all parking rules at the assigned sites.

XIX. Drop/Withdraw a Scheduled Pharmacy Practice Experience

In general, changes to the assignment schedule are *not* permitted. If a student experiences an emergency that results in the need to drop/withdraw from a scheduled practice experience (e.g., extended personal illness or death in the immediate family), the student must provide written notification to the Director of Experiential Education of the reasons for this request. These requests will be reviewed and decisions will be made on a case-by-case basis. Students seeking to drop/withdraw from a scheduled practice experience should follow the following procedures:

- The Director of Experiential Education must be notified by phone and in writing as soon as possible. This notification is *in addition* to any notification made directly to the preceptor. The message should include the following information:
 - The specific practice experience and preceptor affected and nature of the emergency
- s from students to drop/withdraw from scheduled practice experiences are subject to review and approval by the Director of Experiential Education.
- Every attempt will be made to reschedule the student into a similar experience. However, the student may need to be assigned to a different type of experience, give up an open month, or accept other changes to ensure that graduation requirements will be met.
- Students **MUST NOT** contact any preceptor directly to inquire whether the preceptor is available for a rescheduled practice experience.

XX. Student Assignments and Evaluations

Each student will submit evaluations and paperwork related to each practice experience at the end of the experience. Students must complete an evaluation of the preceptor, site, and course. Feedback from students to sites and preceptors can help them make improvements to their rotation. The information provided will also be used by the Office of Experiential Education to continually evaluate our program. The information will be shared with the site/preceptor in an anonymous, aggregate form. It will in no way effect your evaluation or grade. The assignments must be completed in RXpreceptor no later than the last day of the practice experience. Individual faculty may require students to enter assignments on a daily or weekly basis. The student must comply with the strictest policy. ***Students entering assignments after the last day of the experience will not receive credit for those activities.*** The evaluations will be submitted electronically ***no later than five (5) days*** after the final day in the pharmacy. Failure to comply will result in the student receiving an incomplete for the course.

XXI. Student Internet and E-mail Access

Students must have an active University e-mail address and access to a computer with Internet services at all times during the practice experiences. Students are responsible for checking their e-mail daily and keeping a working and current e-mail address on file with the Office of Experiential Education. Printed copies of material sent by e-mail will not be supplied. It is not the responsibility of the University to notify students of mail delivery failures due to invalid address, address over quota, etc. Students will be held responsible for any e-mail sent concerning the Pharmacy Practice Experience Program, or other University related activities. Make sure your e-mail is in good working order.

XXII. HIPAA-Training

All students and clinical faculty will be trained on policies and procedures with respect to Protected Health Information (PHI) as necessary and appropriate to carry out their function during Pharmacy Practice Experience and clinical practice. Training will occur by the covered entity on site-specific policies and procedures with respect to PHI, as necessary and appropriate for them to carry out their function within a covered entity.

All School of Pharmacy employees and students are responsible for protecting the security of all protected health information (PHI), oral or recorded in any form, which is obtained, handled, learned, heard or viewed in the course of his or her work or association with the Covered Entity. Use or disclosure of protected health information is acceptable only in the discharge of one's responsibilities and duties (including reporting duties imposed by legislation) and based on the need to know. Discussion regarding personal health information shall not take place in the presence of persons not entitled to such information or in public places (elevators, lobbies, cafeterias, off premises, etc.) Any collection of PHI made by a student in the course of his or her duties must not contain information that allows others not involved in the patient's care to identify the patient to which the collection refers. If patient information is to be collected on a Personal Data Assistant (PDA), the PDA must have the capability of limiting access to the intended user.

XXIII. Sexual Harassment Policy

The University is committed to providing a learning and working environment which is free from sexual harassment. Sexual harassment may constitute a criminal offense. The ULM School of Pharmacy prohibits any member of the School community, male or female, from sexually harassing another employee, student or other person having dealings with the institution. Sexual harassment, in any form, fundamentally undermines the educational and employment goals and philosophy of the School. To avoid any confusion as to the best way to handle any troublesome situation that has arisen or may arise between a student and a practice site, the process outlined below should be pursued. ***It is the responsibility of the student to report any problems that arise during the Pharmacy Practice Experiences to the Office of Experiential Education as soon as the problem occurs. DO NOT wait until the end of the practice experience.***

Examples of harassment may include, but are not limited to:

- Verbal harassment or abuse
- Subtle pressure for sexual activity
- Sexist remarks about an individual's clothing, body, or sexual activities
- Following, cornering, or getting an individual in a room alone in a manner perceived by her/him as threatening
- Unnecessary touching, such as patting, pinching, hugging, kissing, or repeated brushing against an individual's body
- Demanding sexual favors accompanied by implied or overt threats concerning one's job, grades or letter of recommendation
- Physical sexual assault (a criminal offense)
- Insults, humor, jokes and/or anecdotes that belittle or demean an individual's or a group's sexuality or sex
- Inappropriate displays of sexually suggestive objects or pictures, which may include but not be limited to posters, calendars, computer screen savers, and music

Reporting Procedure

1. The students should attempt to resolve the issue with the preceptor directly if he/she feels comfortable doing so. If a student chooses to address the preceptor himself or herself, he/she must submit a written notification to the Coordinator of Introductory Pharmacy Practice Experience or the Director of Experiential Education. The notification should explain the problem as clearly and completely as possible.
 - a. Give all the details that would help to better understand the situation, what has been done to resolve the situation (if anything), and the student's expected outcome.
 - b. Give your full name, address, contact phone number, and date.
 - c. Attach any information that would help aid in making a decision.
2. If the student does not feel comfortable approaching the preceptor directly, the Office of Experiential Education will handle the issue after receiving the written notification from the student. The School of Pharmacy will then follow the University's procedure on handling Sexual Harassment Complaints as outlined in the ULM Student Policy Manual.

XXIV. Student Background Check

Criminal background checks are now required in order to participate in all Pharmacy Practice Experiences. This policy was established to comply with emerging accreditation standards and to promote the highest level of integrity in our program. The criminal background check will be presented to any practice site participating in the academic training of the student. At that time, the practice site will determine whether the student may participate in that setting. Students can obtain a copy of their criminal background check from Certiphi by calling 1-800-803-7860, dial 0 and ask for Applicant Services.

XXV. Preceptor Training

According to the Accreditation Standards and Guidelines, preceptors should hold a defined position in the school and should be well versed in the outcomes expected of students and pedagogical methods that best enhance learning. In order to comply with these standards and ensure that the highest level of training is available to our students, the School of Pharmacy will offer ongoing training and development to all preceptors enrolled in our program. Documentation of training will be recorded in RXpreceptor.

All new volunteer preceptor applicants are required to complete a preceptor application, a curriculum vitae and a syllabus for consideration. Preceptor applicants are then required to sign an affiliation agreement and undergo an orientation to the program. This orientation may be live or via telephone. Thereafter, an annual “Preceptor Conference” is provided at various locations within the state and at various times during the year. Attendees are updated with regard to School of Pharmacy policies, provided opportunities to enhance preceptor skills, and provided three to five hours of continuing education. These programs have been successful in educating preceptors, and the preceptor reviews have been overwhelmingly positive. Each preceptor also receives a copy of the APPE Student Manual as well as the Preceptor Manual. These manuals are updated annually to reflect changes during the year. Within these manuals are the required professional competencies and the requirements for each type of experience, including the responsibilities of the student and the preceptor. A biannual newsletter is also published to keep preceptors informed of changes and new developments in the program as well as to reemphasize policies and procedures. The Office of Experiential Education also strives to visit each active site regularly to monitor and improve quality. All preceptor training and site visits provided by the ULM School of Pharmacy will be tracked using RXpreceptor.

Tobacco and Alcohol Sales Policy

It is the responsibility of the pharmacy profession to promote public health and safety. Therefore, Pharm.D. candidates are not to engage in the sales of alcohol or tobacco products during Practice Experiences.

Mailing address

Students are responsible for providing a current mailing address and phone number to the Office of Experiential Education for all rotations. The Dean's office will be mailing several important documents as commencement approaches. ***It is imperative that each student file current address changes.***

Knowledge of the law

The student should be aware of all laws and regulations that govern their practice and seek clarification of any points that are unclear. ***At no time shall the student be left alone in the pharmacy!!!*** Students left unsupervised in the pharmacy should exit the pharmacy and contact the Director of Experiential Education. Any student found to be working in an unsupervised situation will be withdrawn from the rotation and given a failing grade. The preceptor or board certified preceptor pharmacist should be available to the student to provide continuous education guidance.

The student is responsible for documentation of all Community and Institutional hours in RXpreceptor. The preceptor must approve all documented hours. Hours that are documented in RXpreceptor but not approved by the preceptor will not be accepted for hours toward licensure.

§709. Scope of Practice

A. Pharmacy interns may perform any duty of a pharmacist provided he is under the supervision of a pharmacist.

B. The ratio of pharmacy interns to pharmacists shall be 1:1. However, the ratio of pharmacy interns on rotation with a board-approved college of pharmacy to pharmacists shall be no more than 3:1.

C. A pharmacy intern may not:

1. present or identify himself as a pharmacist;
2. sign or initial any document which is required to be signed or initialed by a pharmacist unless a preceptor cosigns the document;
3. independently supervise pharmacy technicians; or
4. administer immunizations unless properly credentialed as required by the board.

§907. Scope of Practice

A. Pharmacy technician candidates and pharmacy technicians may assist the pharmacist by performing those duties and functions assigned by the pharmacist while under his direct and immediate supervision.

1. The ratio of candidates to pharmacists on duty shall not exceed one to one at any given time.

2. The ratio of technicians to pharmacists on duty shall not exceed two to one at any given time. However, the ratio of technicians to pharmacists on duty may be increased to three to one if no technician candidates are on duty at the same time.

SOAP notes

When writing progress notes in patient charts, the standard SOAP format should be used. This type of note is most widely used by other health care professionals and lends itself to universal recognition. Refer to material from previous Pharmacy Care Labs to understand the writing of proper SOAP notes.

Case Presentation Guidelines

Guidelines for case presentations may vary with different preceptors. Check with your current preceptor to determine the presentation format of choice. Most formats will require discussion of the following:

1. Chief Complaint (CC):
2. History of Present Illness (HPI):
3. Past Medical History (PMHx):
Including Drug History, Allergies
4. Past Surgical History (PSHx):
5. Social History (SHx):
6. Review of Systems (ROS):
7. Physical Exam (PE):
8. Laboratory and Diagnostic Tests:
9. Assessment (Patient Problem List):
10. Plan with Monitoring Parameters:

Students should be able to discuss the patient's primary and secondary diseases as they relate to rational drug therapy. This includes etiology, clinical manifestations, pertinent lab data and diagnostic tests, prognosis, treatment and monitoring parameters.

Students should be familiar with usual dosage range, uses, indications and side effects of all medications, as well as be familiar with drug-drug, drug-food and drug-disease interactions for the patient. Students should be able to identify appropriate monitoring parameters for each drug a patient is taking and evaluate the appropriateness of therapy.

Students should supply proper references for any citations used in case presentations.

Journal Article Guidelines

Guidelines for Journal Article Presentations may vary with different preceptors. Check with your current preceptor to determine the presentation format of choice. This may depend on whether your current practice site has an active Journal Club.

*Advanced Community Pharmacy Practice
Experience*

Name of Pharmacy

Advanced Community Pharmacy Practice Experience

I. Contact Information

Preceptor Name
Pharmacy Address
Telephone Number
Email
Office Location and Hours (if applicable)
Webpage (if applicable)

II. Practice Experience Description

This experience allows students to apply the knowledge, skills, and attitudes necessary to provide pharmaceutical care in the community pharmacy setting. Experiences include patient triage, patient health assessment, disease state management, medical interventions, patient education/counseling, follow-up, monitoring, and management issues as well as drug distribution activities.

III. Pre-Rotation Requirements

- Note any information or documentation that the student must provide
- Note any required readings prior to experience

IV. Objectives and Outcomes

Upon completion of this experience, in the community setting the student will be able to:

- Manage general pharmacy operations
Examples:
 - Understands required record keeping practices to meet state and federal laws concerning prescription files, prescription drug inventory, employee files, etc.
 - Plans, organizes, directs, and controls pharmaceutical care systems and human, material, and financial resources utilizing management theories and practices.
 - Applies patient and population specific data, quality assurance strategies, and research processes.
 - Ensures efficient, cost-effective utilization of human, physical, medical, informational, and technological resources in patient care.
- Promote health improvement and self care
Examples:
 - Promotes/participates in effective health and disease prevention services.
 - Collaborates with policy makers, health care providers, members of the community and administrative and support personnel to identify and resolve health problems and evaluate health policy.
- Solve complex problems and make informed, rational, and ethical decisions
Examples:
 - Identifies, retrieves, understands, analyzes, synthesizes, and evaluates information needed to make informed, rational, and ethical decisions.
 - Solves complex problems that require an integration of one's ideas and values within a context of scientific, social, cultural, legal, clinical, and ethical issues.
 - Displays habits, attitudes, and values associated with mature critical thinking.
 - Uses good judgment in coming up with sensible, practical solutions to problems.
 - Seeks out and utilizes important facts and information in decision-making.

- Recognizes and evaluates available alternatives.
- Gives thought to possible consequences of decisions.
- Makes decisions in a timely manner.
- Prepare and distribute prescription orders
 - Examples:*
 - Determines correctness and completeness of each prescription order.
 - Performs necessary determinations for accurate filling of prescriptions, including quantities to dispense, concentration determinations, drug additive quantities.
 - Evaluates and selects products.
 - Documents all activities involved with the provision of comprehensive patient specific pharmaceutical care.
- Monitor and evaluate drug therapy
 - Examples:*
 - Reviews profile for drug-drug, drug-disease, and drug-food interactions and responds appropriately.
 - Reviews profile for duplication of medications.
 - Develops and implements an evidence-based care plan.
 - Evaluates the appropriateness of a given prescription or medication order based on patient and disease-specific factors.
 - Interviews patient to maintain current patient profiles including medications, allergies, medical conditions, medical history and special needs.
- Compound the most optimal formulation for drug delivery
 - Examples:*
 - Compounds and/or dispenses the most optimal formulation for drug delivery consistent with the patient needs and in harmony with the law.
 - Uses appropriate safety measures according to Hazard Code and Safety Guidelines (gloves, mask, protective eyewear, etc).
 - Utilizes acceptable professional techniques and procedures.
 - Selects appropriate equipment and containers.
 - Documents calculations and procedures appropriately.
 - Prepares and maintains clean work area for compounding.
 - Selects appropriate chemicals required for formula preparation and familiar with the use/purpose of each.
 - Is familiar with dosage form options targeted at improved patient compliance.
- Retrieve and evaluate drug information
 - Examples:*
 - Defines the question that needs to be answered.
 - Distinguishes among lay, professional, and scientific literature.
 - Identifies appropriate literature search engines for lay, professional, and scientific literature.
 - Explains the method to construct an appropriate search strategy for various literature types.
 - Evaluates literature source validity.
 - Explains methods for systematically evaluating literature.
 - Evaluates the appropriateness of research methodologies and statistical methods.
 - Draws appropriate conclusions from research results.

- Assesses the potential impact and implication of published information on current practices.
- Exhausts all available sources for information prior to questioning preceptor.
- Communicate about prescription drugs and disease states

Examples:

 - Counsels and/or educates about medication use, disease-state management, and health maintenance.
 - Discusses drug cautions, side effects, and patient conditions.
 - Relates to others in a professional manner.
 - Uses terminology appropriate to the receiver's level of understanding.
 - Interacts to confirm understanding.
 - Demonstrates proper use of dosing devices when necessary.
 - Develops population-based education programs.
- Communicate about nonprescription products, devices, and diagnostics

Examples:

 - Evaluates a situation for self-treatment or referral.
 - Familiarizes self with nonprescription products, devices, or diagnostics available.
 - Displays ability to guide non-prescription product selection based on symptoms/need, concomitant prescription drug use, and concomitant disease states.
 - Displays an ability to question about conditions and intended drug use.
 - Communicates with others regarding OTC and herbal drug dosages, usages, storage, and side effects.
- Communicate with health professionals

Examples:

 - Demonstrates ability to accurately interpret verbal medication orders.
 - Is not afraid to request missing or additional information when needed.
 - Demonstrates ability to efficiently express ideas and questions.
 - Collaborates proactively with other healthcare professionals using appropriate effective communication in both written and oral forms.
 - Reads, writes, speaks, listens, and uses data, media, and computers to send and respond effectively to communications for varied audiences and purposes.
- Maintain professional competence

Examples:

 - Reports on time to all scheduled meetings.
 - Responds to assignments and responsibilities in a timely manner.
 - Accepts the responsibilities embodied in the principles of pharmaceutical care.
 - Deals professionally with colleagues and patients.
 - Maintains patient confidentiality.
- Maintain ethical standards

Examples:

 - Represents the profession in an ethical manner.
 - Identifies, analyzes, and resolves ethical problems involved in pharmacy practice.
 - Practices in a manner that is consistent with state and federal laws and regulations.
 - Exhibits reliability and credibility in dealing with others.

- Demonstrate human relation skills
Examples:
 - Demonstrates appropriate interpersonal, intergroup, and cross-cultural behaviors that promote respect and trust from peers, patients, and community members.
 - Participates as a team player.
 - Is attentive to and accepts constructive criticism well and works to correct problem.
 - Is sensitive to the needs, feelings, and concerns of others.
 - Listens, is nonjudgmental and responds appropriately to other's problems.
 - Acts in the best interest of others.

- **Other Site-specific objectives**

V. Required Activities/Topics Covered

Student activities during this rotation will include but not be limited to the following:

Activity	Minimum Quantity To Be Completed
Antibiotic Call-back Program	30
Drug Information Requests	5
Herbal Write-ups	5
Intervention regarding prescription medication related problems	5
Interventions made to counsel or recommend OTC/herbal products	10
New Drug Presentation	1
Order Reconciliation Process	1
OTC Medication Class write-up and formulary development	1
Patient Case Report Presentations	2
Patient Counseling- prescription medication	30
Patient Education Project	1
Patient Histories	5
Patient Specific Care Plan Development	5
Quality Assurance Documentation Process (how to properly handle a prescription misfill)	1
Third Party Problem Resolution	10
Written work-flow evaluation and discussion with preceptor	1
Other suggested activities: (Voluntary)	
• Diabetes Patient Education	
• Blood Pressure Screening	
• Asthma Patient Education	
• Nutrition Education	
• Metered Dose Inhaler Training	
• Poison Prevention Programs	
• Medical Device Counseling/Education	
• Community Presentations	
• Implement new pharmaceutical care service at pharmacy	

The actual activities will be reviewed by the preceptor and documented and approved in RXpreceptor system.

Other site-specific activities/topics covered during this experience include:

•

VI. Evaluation and Grade Assignment

Two assessments will be completed during the practice experience, one mid-point evaluation and one final evaluation. The mid-point evaluation creates a valuable opportunity to review the experience to date, detect any unexpected issues, and plan for the remainder of the educational experience. The final evaluation will reflect your performance during the entire practice experience—your knowledge, skills, attitudes, and how you have improved during the practice experience. The final evaluation will be submitted to the University no later than five (5) days after the final day of the practice experience. The preceptor evaluation counts as 100% of the grade and the other assignments are credit or no credit.

Grading Scale:

94 – 100%	A
87 – 93%	B
80 – 86%	C
<80%	F

VII. Policies and Procedures

A. Attendance Policy:

Attendance at the practice experience site is **MANDATORY**. Each student is expected to be at the site a minimum 8 hours per day/5 days per week. The student is expected to work in the pharmacy at least one weekend during the experience. Your preceptor will provide you with a schedule on the first day and you must adhere to that schedule. Your practice experience schedule does not follow the University schedule. Holidays that are considered “off” days for the University may not be “off” days for the practice experience. All “off” days and mandatory University meetings will be published in the Advanced Pharmacy Practice Experience (APPE) Schedule.

- **All absences during the community practice experiences must be made up.**
- The Office of Experiential Education must approve excused absences of greater than three (3) days in a month even though they are made up.
- A failing grade will be given to the student for any unexcused absence. This grade may be appealed following the appeals process outlined in Policy 1.9 of the Office of Experiential Education Policy and Procedure Manual.

B. Academic Integrity:

Faculty and students must observe the ULM published policy on Academic Dishonesty (see the ULM *Student Policy Manual* - <http://www.ulm.edu/studentpolicy/>). All professional students will adhere to the standards set forth in the School of Pharmacy’s Code of Conduct. <http://www.ulm.edu/pharmacy/student/copcodeofconduct.pdf> (Also, include any additional policy information)

C. Preceptor/Site/Course Evaluation Policy:

All students are required to complete an on-line evaluation of the preceptor, site, and practice experience at the conclusion of each experience. Those evaluations should be electronically submitted in RXpreceptor no later than five (5) days after the final day in the pharmacy.

D. Student Services:

Information concerning student services in the School of Pharmacy can be found in the School of Pharmacy Student Handbook. In particular, students should pay special attention to the Schools technical standards and policies concerning students with special needs (<http://www.ulm.edu/studentpolicy/studentpolicy.pdf>). ULM student services, such as Student Success Center (<http://ulm.edu/cass/>), Counseling Center (<http://ulm.edu/counselingcenter/>), and Student Health Services, is available at the following Student Services web site <http://ulm.edu/studentaffairs/>.

If you are having problems with emotional, social, and/or behavioral issues please call any of the mental health clinics on the ULM campus to make an appointment. All services are free to ULM students, staff, and faculty, and are strictly confidential.

- COP Office of Student and Professional Affairs: 342-3800
- ULM Counseling Center: 342-5220
- Marriage and Family Therapy Clinic: 342-5678
- Community Counseling Center: 342-1263
- ULM HELPS (Helping Educators and Learners Prevent Suicide) Project Office: 342-1335

E. Compensation Policy:

Students do not and may not receive any financial compensation or reimbursement for their participation in the Advanced Practice Experience Program. The students will receive academic credit for each practice experience successfully completed.

F. Dress Code Policy:

Available in the APPE Student Manual and Preceptor Manual located in RXpreceptor.

G. Student Schedule:

- State the hours the student is expected to be on site. If applicable, may indicate hours are not firm and may vary
- If possible, provide typical daily schedule. Include time to meet with the student to discuss student's performance and make recommendations for improvement.
- Consider making a calendar of dates/times to discuss specific topics, have journal club meetings, or other conferences.

H. Other Site-Specific Policies

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- **Antibiotic Call-back Program** – An inexpensive and effective way to identify and possibly prevent adverse effects, patient non-compliance, and other drug related problems relating to antibiotic therapy. Students are required to contact a minimum of 30 patients receiving antibiotic therapy during the experience to evaluate compliance, adverse effects, and outcomes. Standard procedure and template form provided for your use in case the site does not have their own procedure and documentation methods.
- **Drug Information Request-** Pharmacists are considered the drug experts, so there are frequent questions/requests from patients and healthcare providers. A minimum of 5 drug information requests must be completed during the experience. Template form provided for your use in case the site does not have standard documentation methods.
- **Herbal Write-ups-** More patients are looking for natural alternatives to replace or complement conventional medication. To become familiar with herbal medications all students must complete 5 herbal drug write-ups following the format on the Herbal Write-up Form provided.
- **Interventions/Prescription Medication-** Pharmacists are able to identify, solve, and prevent medication related problems relating to prescription medication in the dispensing process. Students are required to document a minimum of 5 prescription medication interventions that they encountered during the experience. Template form provided for your use.
- **Interventions/OTC or Herbal Medication-** Pharmacists are able to obtain information from the patient and accurately assess the patient in order to make appropriate OTC/herbal medication recommendations. Students are required to document a minimum of 10 OTC/herbal medication interventions made to counsel or recommend that they encountered during the experience. Template form provided for your use.
- **New Drug Presentation-**Students must complete at least one New Drug Presentation to be presented to pharmacy staff or other healthcare providers. Typical presentation outline provided for your use.
- **Order Reconciliation Process-** Students should understand the ordering process within a pharmacy from initial placement of the order until order received. Students are required to participate in this entire process at least 1 time during their community experience.
- **OTC Medication Class Write-up/Formulary Development-** Students should have a thorough understanding of OTC medication classes and appropriate uses and contraindications. At least 1 OTC medication class write-up should be completed which includes appropriate indications, dosing, contraindications and recommendations for preferred selections in different populations.
- **Patient Case Report Presentations-** Students must present at least 2 patient case reports during their community experience. These case reports must describe an event, situation, or problem that has taken place or is currently taking place. The student should discuss and analyze the situation and make appropriate decisions or recommendations on the best course of action. Example case report outline provided for your use.
- **Patient Counseling/Prescription Medication-** Effective patient counseling is critical to ensure patient understanding of their treatment and medications. Students must complete a minimum of 30 patient counseling encounters following the Indian Health Format included on the Patient Counseling Form provided.
- **Patient Education Project-** Educational sessions provide patients with more comprehensive information regarding their medical conditions, treatment strategies, and/or lifestyle changes. Patients can only process so much information at one time so it is important to provide concise information that applies to the patients' needs or relates to what they already know. Students must complete 1 patient education project assigned by the preceptor based upon need within the pharmacy.
- **Patient Histories-** There are times when pharmacists need to go beyond counseling patients during dispensing functions and collect more in-depth clinical information. This may occur during the provision of disease state or case management services, a comprehensive medication review, clinical services, or other types of encounters with patients. Students must complete 5 patient histories during their community experience. Template form provided for your use.

- **Care Plan Development-** Patient care planning involves systematically assessing a patient's health problems and needs, setting objectives, performing interventions, and evaluating results. Care plan development can be summarized as a five-step process involving the SOAP format (Subjective, Objective, Assessment and Plan of care). Students must develop 5 patient specific care plans using the Care Plan template provided.
- **Quality Assurance Documentation Process-** Unfortunately prescription misfills do occur. Students should understand how to properly handle a prescription misfill. This assignment may need to be accomplished through role-playing or discussion if it does not actually occur during the month.
- **Third Party Problem Resolution-** Third party prescription programs are a large part of community pharmacy today so pharmacists spend a great deal of time troubleshooting claims questions. Students are required to troubleshoot a minimum of 10 third party problems during the course of this experience in order to gain an understanding of on-line rejections and plan parameters.
- **Workflow evaluation-** Community pharmacies are always looking for ways to increase efficiency and effectiveness. Students are required to complete a workflow analysis of the pharmacy which involves evaluating the workflow process and offering suggestions on ways to improve workflow. This should be discussed with the preceptor and documented on the Workflow Evaluation Form provided.

Evaluations

Students are required to submit a self-assessment for each practice experience. The self-assessment will be available at mid-point and student should complete and submit at least 5 days prior to the final evaluation. Students will also be required to complete an evaluation of the site, preceptor and course at the conclusion of each experience. Those evaluations should be electronically submitted no later than five (5) days after the final day in the pharmacy.

Preceptors will be required to complete a mid-point evaluation approximately 3 weeks into the practice experience and a final evaluation on the student's performance at the conclusion of each experience. Those evaluations should be electronically submitted no later than five (5) days after the final day in the pharmacy. *(If online access is unavailable, the preceptor should complete the manual evaluation form and mail, or deliver in person, to the Advanced Practice Coordinator no later than five (5) days after the final day in the pharmacy.)*

Time Log

The student is responsible for documentation of all Community hours in RXpreceptor. The preceptor must approve all documented hours. Hours that are documented in RXpreceptor but not approved by the preceptor will not be accepted for hours toward licensure.

*Advanced Institutional Pharmacy Practice
Experience*

Name of Pharmacy

Advanced Institutional Pharmacy Practice Experience

I. Contact Information

Preceptor Name
Pharmacy Address
Telephone Number
Email
Office Location and Hours (if applicable)
Webpage (if applicable)

II. Practice Experience Description

This experience allows students to apply the knowledge, skills, and attitudes necessary to provide pharmaceutical care and manage the pharmacy practice in the institutional pharmacy setting. Student activities will focus on the drug distribution process, manufacturing, and management issues. Students will also be involved in patient health assessment, the accurate dispensing of drug orders, patient drug monitoring, medical intervention, and similar clinical activities.

III. Pre-Rotation Requirements

- Note any information or documentation that the student must provide
- Note any required readings prior to experience

IV. Objectives and Outcomes

Upon completion of this experience, in the health system setting the student will be able to:

- Manage general pharmacy operations
Examples:
 - Understands required record keeping practices to meet state and federal laws concerning prescription files, prescription drug inventory, employee files, etc.
 - Plans, organizes, directs, and controls pharmaceutical care systems and human, material, and financial resources utilizing management theories and practices.
 - Applies patient and population specific data, quality assurance strategies, and research processes.
 - Ensures efficient, cost-effective utilization of human, physical, medical, informational, and technological resources in patient care.
- Promote health improvement and self care
Examples:
 - Promotes/participates in effective health and disease prevention services.
 - Collaborates with policy makers, health care providers, members of the community and administrative and support personnel to identify and resolve health problems and evaluate health policy.
- Solve complex problems and make informed, rational, and ethical decisions
Examples:
 - Identifies, retrieves, understands, analyzes, synthesizes, and evaluates information needed to make informed, rational, and ethical decisions.
 - Solves complex problems that require an integration of one's ideas and values within a context of scientific, social, cultural, legal, clinical, and ethical issues.
 - Displays habits, attitudes, and values associated with mature critical thinking.
 - Uses good judgment in coming up with sensible, practical solutions to problems.
 - Seeks out and utilizes important facts and information in decision-making.

- Recognizes and evaluates available alternatives.
 - Gives thought to possible consequences of decisions.
 - Makes decisions in a timely manner.
- Prepare and distribute prescription orders

Examples:

 - Determines correctness and completeness of each prescription order.
 - Performs necessary determinations for accurate filling of prescriptions, including quantities to dispense, concentration determinations, drug additive quantities.
 - Evaluates and selects products.
 - Documents all activities involved with the provision of comprehensive patient specific pharmaceutical care.
- Monitor and evaluate drug therapy

Examples:

 - Reviews profile for drug-drug, drug-disease, and drug-food interactions and responds appropriately.
 - Reviews profile for duplication of medications.
 - Develops and implements an evidence-based care plan.
 - Evaluates the appropriateness of a given prescription or medication order based on patient and disease-specific factors.
- Compound extemporaneous preparations, including IV admixtures, according to appropriate procedures

Examples:

 - Compounds and/or dispenses the most optimal formulation for drug delivery consistent with the patient needs and in harmony with the law.
 - Uses appropriate safety measures according to Hazard Code and Safety Guidelines (gloves, mask, protective eyewear, etc).
 - Utilizes acceptable professional techniques and procedures.
 - Selects appropriate equipment and containers.
 - Documents calculations and procedures appropriately.
 - Prepares and maintains clean work area for compounding.
 - Selects appropriate chemicals required for formula preparation and familiar with the use/purpose of each.
 - Is familiar with dosage form options targeted at improved patient compliance.
- Retrieve and evaluate drug information

Examples:

 - Defines the question that needs to be answered.
 - Distinguishes among lay, professional, and scientific literature.
 - Identifies appropriate literature search engines for lay, professional, and scientific literature.
 - Explains the method to construct an appropriate search strategy for various literature types.
 - Evaluates literature source validity.
 - Explains methods for systematically evaluating literature.
 - Evaluates the appropriateness of research methodologies and statistical methods.
 - Draws appropriate conclusions from research results.

- Assesses the potential impact and implication of published information on current practices.
- Exhausts all available sources for information prior to questioning preceptor.
- Communicate about prescription drugs and disease states
Examples:
 - Counsels and/or educates about medication use, disease-state management, and health maintenance.
 - Discusses drug cautions, side effects, and patient conditions.
 - Relates to others in a professional manner.
 - Uses terminology appropriate to the receiver's level of understanding.
 - Interacts to confirm understanding.
 - Demonstrates proper use of dosing devices when necessary.
 - Develops population-based education programs.
- Communicate about nonprescription products, devices, and diagnostics
Examples:
 - Familiarizes self with nonprescription products, devices, or diagnostics available.
 - Displays an ability to question about conditions and intended drug use.
 - Communicates with others regarding OTC and herbal drug dosages, usages, storage, and side effects.
- Communicate with health professionals
Examples:
 - Demonstrates ability to accurately interpret verbal medication orders.
 - Is not afraid to request missing or additional information when needed.
 - Demonstrates ability to efficiently express ideas and questions.
 - Collaborates proactively with other healthcare professionals using appropriate effective communication in both written and oral forms.
 - Reads, writes, speaks, listens, and uses data, media, and computers to send and respond effectively to communications for varied audiences and purposes.
- Maintain professional competence
Examples:
 - Reports on time to all scheduled meetings.
 - Responds to assignments and responsibilities in a timely manner.
 - Accepts the responsibilities embodied in the principles of pharmaceutical care.
 - Deals professionally with colleagues and patients.
 - Maintains patient confidentiality.
- Maintain ethical standards
Examples:
 - Represents the profession in an ethical manner.
 - Identifies, analyzes, and resolves ethical problems involved in pharmacy practice.
 - Practices in a manner that is consistent with state and federal laws and regulations.
 - Exhibits reliability and credibility in dealing with others.
- Demonstrate human relation skills
Examples:

- Demonstrates appropriate interpersonal, intergroup, and cross-cultural behaviors that promote respect and trust from peers, patients, and community members.
- Participates as a team player.
- Is attentive to and accepts constructive criticism well and works to correct problem.
- Is sensitive to the needs, feelings, and concerns of others.
- Listens, is nonjudgmental and responds appropriately to other’s problems.
- Acts in the best interest of others.

- **Other Site-specific objectives**

V. Required Activities/Topics Covered

Student activities during this rotation will include but not be limited to the following:

Activity	Minimum Quantity To Be Completed
Order entry	10
IV preparation	30
Medication intervention	5
Pharmacokinetic dosing	5
Renal dosing adjustments	5
IV to PO conversions	5
Medication monitoring	5
Antibiotic culture and susceptibility interpretation	5
Adverse Drug Reaction reporting	1
Drug Information Request	10
Attend P&T/Supervisor Meeting	1
Healthcare Presentation	1
Understand:	
• Controlled Substance Handling	√
• Formulary process	√
• JCAHO rules, regulations, and USP Chapter 797	√
• Safety processes	√
• Pharmacy technicians roles and responsibilities	√
• Policies and procedures process	√

The actual activities will be reviewed by the preceptor and documented and approved in RXpreceptor system.

Other site-specific activities/topics covered during this experience include:

-

VI. Evaluation and Grade Assignment

Two assessments will be completed during the practice experience, one mid-point evaluation and one final evaluation. The mid-point evaluation creates a valuable opportunity to review the experience to date, detect any unexpected issues, and plan for the remainder of the educational experience. The final evaluation will reflect your performance during the entire

practice experience—your knowledge, skills, attitudes, and how you have improved during the practice experience. The final evaluation will be submitted to the University no later than five (5) days after the final day of the practice experience. The preceptor evaluation counts as 100% of the grade and the other assignments are credit or no credit.

Grading Scale:

94 – 100%	A
87 – 93%	B
80 – 86%	C
<80%	F

VII. Policies and Procedures

A. Attendance Policy:

Attendance at the practice experience site is **MANDATORY**. Each student is expected to be at the site a minimum 8 hours per day/5 days per week. Your preceptor will provide you with a schedule on the first day and you must adhere to that schedule. Your practice experience schedule does not follow the University schedule. Holidays that are considered “off” days for the University may not be “off” days for the practice experience. All “off” days and mandatory University meetings will be published in the Advanced Pharmacy Practice Experience (APPE) Schedule.

- **All absences during the institutional practice experiences must be made up.**
- The Office of Experiential Education must approve excused absences of greater than three (3) days in a month even though they are made up.
- A failing grade will be given to the student for any unexcused absence. This grade may be appealed following the appeals process outlined in Policy 1.9 of the Office of Experiential Education Policy and Procedure Manual.

B. Academic Integrity:

Faculty and students must observe the ULM published policy on Academic Dishonesty (see the ULM *Student Policy Manual* - <http://www.ulm.edu/studentpolicy/>). All professional students will adhere to the standards set forth in the School of Pharmacy’s Code of Conduct. <http://www.ulm.edu/pharmacy/student/copcodeofconduct.pdf> (Also, include any additional policy information)

C. Preceptor/Site/Course Evaluation Policy:

All students are required to complete an on-line evaluation of the preceptor, site, and practice experience at the conclusion of each experience. Those evaluations should be electronically submitted in RXpreceptor no later than five (5) days after the final day in the pharmacy.

D. Student Services:

Information concerning student services in the School of Pharmacy can be found in the School of Pharmacy Student Handbook. In particular, students should pay special attention to the Schools technical standards and policies concerning students with special needs (<http://www.ulm.edu/studentpolicy/studentpolicy.pdf>). ULM student services, such as Student Success Center (<http://ulm.edu/cass/>), Counseling Center (<http://ulm.edu/counselingcenter/>), and Student Health Services, is available at the following Student Services web site <http://ulm.edu/studentaffairs/>.

If you are having problems with emotional, social, and/or behavioral issues please call any of the mental health clinics on the ULM campus to make an appointment. All services are free to ULM students, staff, and faculty, and are strictly confidential.

- COP Office of Student and Professional Affairs: 342-3800
- ULM Counseling Center: 342-5220
- Marriage and Family Therapy Clinic: 342-5678
- Community Counseling Center: 342-1263
- ULM HELPS (Helping Educators and Learners Prevent Suicide) Project Office: 342-1335

E. Compensation Policy:

Students do not and may not receive any financial compensation or reimbursement for their participation in the Advanced Practice Experience Program. The students will receive academic credit for each practice experience successfully completed.

F. Dress Code Policy:

Available in the APPE Student Manual and Preceptor Manual in RXpreceptor.

G. Student Schedule:

- State the hours the student is expected to be on site. If applicable, may indicate hours are not firm and may vary
- If possible, provide typical daily schedule. Include time to meet with the student to discuss student's performance and make recommendations for improvement.
- Consider making a calendar of dates/times to discuss specific topics, have journal club meetings, or other conferences.

H. Other Site-Specific Policies

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Institutional Advanced Practice Experience Definitions of Assignments

- **Order Entry-** Interpretation of medication orders and transcribe to computerized patient medication profiles.
- **IV Preparation** – Prepare and dispense medications, including sterile, chemotherapy, and parenteral nutrition preparations.
- **Medication Interventions-** Intervention regarding drug related problems (contraindications, drug-drug interactions, drug-food interactions, allergies, therapeutic duplications, etc)
- **Pharmacokinetic Dosing** - Complete pharmacokinetic dosing adjustments per organizational protocol
- **Renal Dosing Adjustments-** Complete medication related renal dosing adjustments per organizational protocol
- **IV to PO Conversions-** Complete medication IV to PO conversions per organizational protocol
- **Medication Monitoring-** Perform medication monitoring (TPN, anticoagulant, enoxaparin, etc)
- **Antibiotic Culture/Sensitivity Interpretation-** Review/interpret culture and susceptibility data for antibiotic appropriateness and recommend changes
- **Adverse Drug** - Report suspected adverse drug reactions and medication errors accurately per organizational protocol
- **Drug Information Request-** Provide accurate, adequate and timely drug information responses to professional healthcare providers
- **Attend P&T/Supervisor Meetings-** Attend supervisor meetings and Pharmacy and Therapeutics (P&T) committee meetings to gain exposure to hospital management
- **Healthcare Presentation-** Select a publication in the primary literature and provide a review presentation for healthcare providers
- **Controlled Substance Handling-** Understand controlled substance ordering, storage, and security within the facility
- **Formulary Process-** Understand the pharmacy's formulary process and therapeutic substitution protocol
- **JACHO Requirements-** Understand JCAHO rules, regulations, and USP Chapter 797
- **Safety Process-** Understand safety processes in place within the institution (double checks, barcoding, automation, etc)
- **Pharmacy technicians roles and responsibilities-** Understand the pharmacy technicians roles and responsibilities within the institution
- **Policies and procedures process-** Understand methods by which policies and procedures are proposed, passed, and implemented within the institution

Advanced Institutional Pharmacy Practice Experience

During this practice experience the student will obtain experience in the delivery of pharmaceutical care in the institutional pharmacy setting. The program for the 6-week institutional pharmacy practicum is divided into nine (9) areas of concentration.

1. The institutional environment 3 days
2. Drug distribution 10 days
3. Related professional activities 2 days
4. Laws, regulations and procedures for controlled substances..... 2 days
5. Manufacturing activities (Sterile and non-sterile) 3 days
6. Procurement and inventory control 3 days
7. Management and personnel relations 3 days
8. Clinical activities (IV therapy, ambulatory clinic, etc.) 4 days
9. Special assignment s (some will be done outside the working hours)

It is realized that there may not be a clear-cut separation of these areas because of their interrelationship. For example, certain laws will be considered during the act of dispensing.

- **Visitation to Another Health Care Institution in the Area (1) -optional**

- Each intern may visit another health care institution within the area sometime during the rotation. Such an institution may be a nursing home, health departments, another hospital, neighborhood health clinic, etc. This visit may be over and beyond the 40-hour workweek. It should not last more than half a day. Your preceptor will help arrange such a visit after it has been decided what institution would be visited. The primary area to look at will be how drugs are controlled within the particular facility. A form is provided so that you may record this visit.

Evaluations

Students are required to submit a self-assessment for each practice experience. The self-assessment will be available at mid-point and student should complete and submit at least 5 days prior to the final evaluation. Students will also be required to complete an evaluation of the site, preceptor and course at the conclusion of each experience. Those evaluations should be electronically submitted no later than five (5) days after the final day in the pharmacy.

Preceptors will be required to complete a mid-point evaluation approximately 3 weeks into the practice experience and a final evaluation on the student's performance at the conclusion of each experience. Those evaluations should be electronically submitted no later than five (5) days after the final day in the pharmacy. *(If online access is unavailable, the preceptor should complete the manual evaluation form and mail, or deliver in person, to the Advanced Practice Coordinator no later than five (5) days after the final day in the pharmacy.)*

Time Log

The student is responsible for documentation of all Institutional hours in RXpreceptor. The preceptor must approve all documented hours. Hours that are documented in RXpreceptor but not approved by the preceptor will not be accepted for hours toward licensure.

Other Pharmacy Practice Experiences:

Patient Care

Pharmacy Practice I

Pharmacy Practice II

Pharmacy Administration

Name of Pharmacy

Type of Patient Care Experience (Ex. Acute Care Adult Medicine)

(Use this template for Adult Medicine, Cardiology, Critical Care, Emergency Medicine, Geriatrics, Hospital Clinical Management, Infectious Disease, Nephrology, Nutrition Support, Oncology, Pediatrics, Psychiatry, Ambulatory Care, Community Clinical, Disease State Management, Hospice, Long Term Care, and Surgery)

I. Contact Information

- Preceptor Name
- Address of Site
- Telephone Number
- Email
- Office Location and Hours (if applicable)
- Webpage (if applicable)

II. Practice Experience Description

This experience provides exposure to a variety of disease states, allowing the student to gain experience monitoring drug therapy and to participate in the therapeutic decision making process. Activities include team meetings, rounds, patient assessment and pharmacokinetic assessment of prescribed medications. Students will participate in other activities including patient care conferences and in-service education programs. Assignments are preceptor specific and based on the capabilities of the average student.

III. Pre-Rotation Requirements

- Note any information or documentation that the student must provide
- Note any required readings prior to experience

IV. Objectives and Outcomes

Upon completion of this experience, in the patient care setting the student will:

- Demonstrate clinical knowledge
 - Examples:*
 - Describe pathophysiology, clinical presentation and appropriate therapies for each patient problem.
 - Demonstrate a working knowledge of drug classes, mechanism of action, common adverse effects, drug-drug interactions, drug-disease interactions and monitoring parameters.
 - Demonstrate working knowledge of non-drug therapies and alternative therapies.
- Demonstrate clinical skills
 - Examples:*
 - Demonstrate sound decision making, critical thinking, and problem solving skills.
 - Appropriately identify real and potential drug therapy problems.
 - Construct appropriate patient pharmacotherapeutic plans.
 - Appropriately assess patient status and monitor response to therapy.
 - Apply pharmacokinetic principles to make dosing recommendations.
 - Collect and analyze patient data in accordance with current standards of practice.
 - Appropriately document clinical findings and interventions in patient medical record.
 - Evaluate drug orders for accuracy and safety.
 - Integrate basic science knowledge with specific patient problems.

- Demonstrate ability to triage patients to other health care professionals.
- Demonstrate retrieval and use of drug information resources
 - Examples:*
 - Effectively retrieve and use drug information resources.
 - Apply drug literature appropriately in patient care decisions.
 - Supplement textbook knowledge with primary literature for use in patient care decisions.
- Demonstrate professional communication
 - Examples:*
 - Appropriately communicate orally with other health care professionals.
 - Appropriately communicate in writing with other health care professionals.
 - Demonstrate appropriate level of communication during projects and case presentations.
 - Effectively counsel patients regarding purpose, uses and effects of their medications.
- Demonstrate personal and professional growth
 - Examples:*
 - Actively participates in all clerkship activities.
 - Conducts him/herself in a professional manner.
 - Completes assignments in a timely manner.
 - Is consistently on time for rounds, group discussions and meetings.
 - Keeps excused absences to a minimum without unexcused absences.
 - Personal appearance is professionally appropriate.

V. Topics/Disease States Covered

Students are expected to cover the following major disease states/conditions during their patient care advanced practice experiences. This may be accomplished by one-on-one discussion with the preceptor, group discussions, live or self-study continuing education, or written assignments.

Asthma	Myocardial Infarction	Hyperlipidemia
COPD	Stroke/TIA	Hypertension
Pneumonia	Angina	Hepatic Disorders
Renal Failure	Heart Failure	HIV/Opportunistic Infections
Diabetes	Venous Thromboembolism	

Other site-specific topics covered during this experience include:

-

VI. Required Activities

Students will be required to participate in various activities at the discretion of the preceptor. These activities may vary depending on the practice site.

The following are the minimum required projects to be completed by the student during the Advanced Practice Experiences. The student will be responsible for making sure that these projects are assigned and completed at some point during the advanced practice experiences.

Activity	Minimum Quantity To Be Completed
Adverse Drug Reporting	3
Pharmacotherapeutic Clinical Interventions	30
Pharmacokinetic Clinical Interventions	5
Patient Counseling Activity	20
Journal Club/Literature Evaluation	5
Medication Histories /Medication Reconciliation	18
Case/Disease State Presentation *	3
Formal Disease State Presentation**	2
Drug Information Requests	15
Evaluative Drug Monograph	1
Health Professional In-Service	1
Nutrition Intervention	3

* May be completed with faculty or adjunct preceptors

**Must be completed with faculty preceptors

Student must complete a minimum of 2 of the following activities during their advanced practice experiences.

• Medication Use Evaluation	• Case Report
• Newsletter Article (Hospital or Community)	• Writing a review article
• P&T Review	• Research Project (could be longitudinal)
• Brown Bag	• Poster Presentation
• Patient Health Education Presentation/Resource Pamphlet	• LSHP Newsletter article
• Public Health Screening	• LPA Journal article
• Local Newspaper Article	• Medication Therapy Management

The actual activities will be reviewed by the preceptor and documented and approved in RXpreceptor system.

Other site-specific activities covered during this experience include:

-

VII. Evaluation and Grade Assignment

Two assessments will be completed during the practice experience, one mid-point evaluation and one final evaluation. The mid-point evaluation creates a valuable opportunity to review the experience to date, detect any unexpected issues, and plan for the remainder of the educational experience. The final evaluation will reflect your performance during the entire practice experience—your knowledge, skills, attitudes, and how you have improved during the practice experience. The final evaluation will be submitted to the University no later than five (5) days after the final day of the practice experience. The preceptor evaluation counts as 100% of the grade and the other assignments are credit or no credit.

Grading Scale:

94 – 100%	A
87 – 93%	B
80 – 86%	C
<80%	F

VIII. Policies and Procedures

A. Attendance Policy:

Attendance at the practice experience site is **MANDATORY**. Each student is expected to be at the site a minimum 8 hours per day/5 days per week. Your preceptor will provide you with a schedule on the first day and you must adhere to that schedule. Your practice experience schedule does not follow the University schedule. Holidays that are considered “off” days for the University may not be “off” days for the practice experience. All “off” days and mandatory University meetings will be published in the Advanced Pharmacy Practice Experience (APPE) Schedule.

- A failing grade will be given to the student for any unexcused absence. This grade may be appealed following the appeals process outlined in Policy 1.9.
- The Office of Experiential Education must approve excused absences of greater than three (3) days in a month even though they are made up.
- Absences of greater than two (2) consecutive workdays must be made up.
- The student will be required to repeat the clerkship for any absences of greater than 4 workdays during an individual experience. The grade of “incomplete” will be given to the student whose absences are considered excused absences by the University of Louisiana at Monroe. The Director of Experiential Education or the Associate Dean of Academic Affairs, with the consent of the preceptor, may approve time off in excess of these guidelines.

B. Academic Integrity:

Faculty and students must observe the ULM published policy on Academic Dishonesty (see the ULM *Student Policy Manual* - <http://www.ulm.edu/studentpolicy/>). All professional students will adhere to the standards set forth in the School of Pharmacy’s Code of Conduct. <http://www.ulm.edu/pharmacy/student/copcodeofconduct.pdf> (Also, include any additional policy information)

C. Preceptor/Site/Course Evaluation Policy:

All students are required to complete an on-line evaluation of the preceptor, site, and practice experience at the conclusion of each experience. Those evaluations should be electronically submitted in RXpreceptor no later than five (5) days after the final day in the pharmacy.

D. Student Services:

Information concerning student services in the School of Pharmacy can be found in the School of Pharmacy Student Handbook. In particular, students should pay special attention to the Schools technical standards and policies concerning students with special needs (<http://www.ulm.edu/studentpolicy/studentpolicy.pdf>). ULM student services, such as Student Success Center (<http://ulm.edu/cass/>), Counseling Center (<http://ulm.edu/counselingcenter/>), and Student Health Services, is available at the following Student Services web site <http://ulm.edu/studentaffairs/>.

If you are having problems with emotional, social, and/or behavioral issues please call any of the mental health clinics on the ULM campus to make an appointment. All services are free to ULM students, staff, and faculty, and are strictly confidential.

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- ULM Counseling Center: 342-5220
- Marriage and Family Therapy Clinic: 342-5678

- Community Counseling Center: 342-1263
- ULM HELPS (Helping Educators and Learners Prevent Suicide) Project Office: 342-1335

E. Compensation Policy:

Students do not and may not receive any financial compensation or reimbursement for their participation in the Advanced Practice Experience Program. The students will receive academic credit for each practice experience successfully completed.

F. Dress Code Policy:

Available in the APPE Student Manual and Preceptor Manual located in RXpreceptor.

G. Student Schedule:

- State the hours the student is expected to be on site. If applicable, may indicate hours are not firm and may vary
- If possible, provide typical daily schedule. Include time to meet with the student to discuss student's performance and make recommendations for improvement.
- Consider making a calendar of dates/times to discuss specific topics, have journal club meetings, or other conferences.

H. Other Site-Specific Policies

-

Name of Pharmacy

Type of Pharmacy Practice I Experience (Ex. Compounding)

(Use this template for experiences involving drug preparation and dispensing) Ex. Closed Door, Compounding, Home Infusion, Nuclear, and Institutional Outpatient)

I. Contact Information

Preceptor Name

Pharmacy Address

Telephone Number

Email

Office Location and Hours (if applicable)

Webpage (if applicable)

II. Practice Experience Description

This experience allows students to apply the knowledge, skills, and attitudes necessary to provide pharmaceutical care and manage the pharmacy practice in the institutional pharmacy setting. Student activities will focus on the drug distribution process, manufacturing, and management issues. Students will also be involved in patient health assessment, the accurate dispensing of drug orders, patient drug monitoring, medical intervention, and similar clinical activities.

III. Pre-Rotation Requirements

- Note any information or documentation that the student must provide
- Note any required readings prior to experience

IV. Objectives and Outcomes

Upon completion of this experience, in the health system setting the student will be able to:

- Manage general pharmacy operations

Examples:

- Understands required record keeping practices to meet state and federal laws concerning prescription files, prescription drug inventory, employee files, etc.
- Plans, organizes, directs, and controls pharmaceutical care systems and human, material, and financial resources utilizing management theories and practices.
- Applies patient and population specific data, quality assurance strategies, and research processes.
- Ensures efficient, cost-effective utilization of human, physical, medical, informational, and technological resources in patient care.

- Promote health improvement and self care

Examples:

- Promotes/participates in effective health and disease prevention services.
- Collaborates with policy makers, health care providers, members of the community and administrative and support personnel to identify and resolve health problems and evaluate health policy.

- Solve complex problems and make informed, rational, and ethical decisions

Examples:

- Identifies, retrieves, understands, analyzes, synthesizes, and evaluates information needed to make informed, rational, and ethical decisions.

- Solves complex problems that require an integration of one's ideas and values within a context of scientific, social, cultural, legal, clinical, and ethical issues.
 - Displays habits, attitudes, and values associated with mature critical thinking.
 - Uses good judgment in coming up with sensible, practical solutions to problems.
 - Seeks out and utilizes important facts and information in decision-making.
 - Recognizes and evaluates available alternatives.
 - Gives thought to possible consequences of decisions.
 - Makes decisions in a timely manner.
- Prepare and distribute prescription orders
 - Examples:*
 - Determines correctness and completeness of each prescription order.
 - Performs necessary determinations for accurate filling of prescriptions, including quantities to dispense, concentration determinations, drug additive quantities.
 - Evaluates and selects products.
 - Documents all activities involved with the provision of comprehensive patient specific pharmaceutical care.
- Monitor and evaluate drug therapy
 - Examples:*
 - Reviews profile for drug-drug, drug-disease, and drug-food interactions and responds appropriately.
 - Reviews profile for duplication of medications.
 - Develops and implements an evidence-based care plan.
 - Evaluates the appropriateness of a given prescription or medication order based on patient and disease-specific factors.
- Compound extemporaneous preparations, including IV admixtures, according to appropriate procedures
 - Examples:*
 - Compounds and/or dispenses the most optimal formulation for drug delivery consistent with the patient needs and in harmony with the law.
 - Uses appropriate safety measures according to Hazard Code and Safety Guidelines (gloves, mask, protective eyewear, etc).
 - Utilizes acceptable professional techniques and procedures.
 - Selects appropriate equipment and containers.
 - Documents calculations and procedures appropriately.
 - Prepares and maintains clean work area for compounding.
 - Selects appropriate chemicals required for formula preparation and familiar with the use/purpose of each.
 - Is familiar with dosage form options targeted at improved patient compliance.
- Retrieve and evaluate drug information
 - Examples:*
 - Defines the question that needs to be answered.
 - Distinguishes among lay, professional, and scientific literature.
 - Identifies appropriate literature search engines for lay, professional, and scientific literature.
 - Explains the method to construct an appropriate search strategy for various literature types.

- Evaluates literature source validity.
 - Explains methods for systematically evaluating literature.
 - Evaluates the appropriateness of research methodologies and statistical methods.
 - Draws appropriate conclusions from research results.
 - Assesses the potential impact and implication of published information on current practices.
 - Exhausts all available sources for information prior to questioning preceptor.
- Communicate about prescription drugs and disease states
Examples:
 - Counsels and/or educates about medication use, disease-state management, and health maintenance.
 - Discusses drug cautions, side effects, and patient conditions.
 - Relates to others in a professional manner.
 - Uses terminology appropriate to the receiver's level of understanding.
 - Interacts to confirm understanding.
 - Demonstrates proper use of dosing devices when necessary.
 - Develops population-based education programs.
- Communicate about nonprescription products, devices, and diagnostics
Examples:
 - Familiarizes self with nonprescription products, devices, or diagnostics available.
 - Displays an ability to question about conditions and intended drug use.
 - Communicates with others regarding OTC and herbal drug dosages, usages, storage, and side effects.
- Communicate with health professionals
Examples:
 - Demonstrates ability to accurately interpret verbal medication orders.
 - Is not afraid to request missing or additional information when needed.
 - Demonstrates ability to efficiently express ideas and questions.
 - Collaborates proactively with other healthcare professionals using appropriate effective communication in both written and oral forms.
 - Reads, writes, speaks, listens, and uses data, media, and computers to send and respond effectively to communications for varied audiences and purposes.
- Maintain professional competence
Examples:
 - Reports on time to all scheduled meetings.
 - Responds to assignments and responsibilities in a timely manner.
 - Accepts the responsibilities embodied in the principles of pharmaceutical care.
 - Deals professionally with colleagues and patients.
 - Maintains patient confidentiality.
- Maintain ethical standards
Examples:
 - Represents the profession in an ethical manner.
 - Identifies, analyzes, and resolves ethical problems involved in pharmacy practice.
 - Practices in a manner that is consistent with state and federal laws and regulations.
 - Exhibits reliability and credibility in dealing with others.

- Demonstrate human relation skills
Examples:
 - Demonstrates appropriate interpersonal, intergroup, and cross-cultural behaviors that promote respect and trust from peers, patients, and community members.
 - Participates as a team player.
 - Is attentive to and accepts constructive criticism well and works to correct problem.
 - Is sensitive to the needs, feelings, and concerns of others.
 - Listens, is nonjudgmental and responds appropriately to other’s problems.
 - Acts in the best interest of others.
- Other Site-specific objectives

V. Required Activities/Topics Covered

Students will be required to participate in various activities at the discretion of the preceptor. These activities may vary depending on the practice site.

The following are the minimum required projects to be completed by the student during the Advanced Practice Experiences. The student will be responsible for making sure that these projects are assigned and completed at some point during the advanced practice experiences.

Activity	Minimum Quantity To Be Completed
Adverse Drug Reporting	3
Pharmacotherapeutic Clinical Interventions	30
Pharmacokinetic Clinical Interventions	5
Patient Counseling Activity	20
Journal Club/Literature Evaluation	5
Medication Histories /Medication Reconciliation	18
Case/Disease State Presentation *	3
Formal Disease State Presentation**	2
Drug Information Requests	15
Evaluative Drug Monograph	1
Health Professional In-Service	1
Nutrition Intervention	3

* May be completed with faculty or adjunct preceptors

**Must be completed with faculty preceptors

Student must complete a minimum of 2 of the following activities during their advanced practice experiences.

• Medication Use Evaluation	• Case Report
• Newsletter Article (Hospital or Community)	• Writing a review article
• P&T Review	• Research Project (could be longitudinal)
• Brown Bag	• Poster Presentation
• Patient Health Education Presentation/Resource Pamphlet	• LSHP Newsletter article
• Public Health Screening	• LPA Journal article
• Local Newspaper Article	• Medication Therapy Management

The actual activities will be reviewed by the preceptor and documented and approved in RXpreceptor system.

Other site-specific activities/topics covered during this experience include:

-

VI. Evaluation and Grade Assignment

Two assessments will be completed during the practice experience, one mid-point evaluation and one final evaluation. The mid-point evaluation creates a valuable opportunity to review the experience to date, detect any unexpected issues, and plan for the remainder of the educational experience. The final evaluation will reflect your performance during the entire practice experience—your knowledge, skills, attitudes, and how you have improved during the practice experience. The final evaluation will be submitted to the University no later than five (5) days after the final day of the practice experience. The preceptor evaluation counts as 100% of the grade and the other assignments are credit or no credit.

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87 – 93%	B
80 – 86%	C
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C. Preceptor/Site/Course Evaluation Policy:

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G. Student Schedule:

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- If possible, provide typical daily schedule. Include time to meet with the student to discuss student's performance and make recommendations for improvement.
- Consider making a calendar of dates/times to discuss specific topics, have journal club meetings, or other conferences.

H. Other Site-Specific Policies

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Name of Pharmacy

Type of Pharmacy Practice II Experience (Ex. Drug Information)

(Use this template for experiences not involving drug preparation and dispensing) Ex. Drug Information, Managed Care, Medicaid Prior Approval, Medication Therapy Management)

I. Contact Information

Preceptor Name

Pharmacy Address

Telephone Number

Email

Office Location and Hours (if applicable)

Webpage (if applicable)

II. Practice Experience Description

This experience allows students to apply the knowledge, skills, and attitudes necessary to provide pharmaceutical care and manage the pharmacy practice in the pharmacy practice setting. Student activities will focus on the drug distribution process, manufacturing, and management issues. Students will also be involved in patient health assessment, the accurate dispensing of drug orders, patient drug monitoring, medical intervention, and similar clinical activities.

III. Pre-Rotation Requirements

- Note any information or documentation that the student must provide
- Note any required readings prior to experience

IV. Objectives and Outcomes

Upon completion of this experience, in the health system setting the student will be able to:

- Manage general pharmacy operations

Examples:

- Understands required record keeping practices to meet state and federal laws concerning prescription files, prescription drug inventory, employee files, etc.
- Plans, organizes, directs, and controls pharmaceutical care systems and human, material, and financial resources utilizing management theories and practices.
- Applies patient and population specific data, quality assurance strategies, and research processes.
- Ensures efficient, cost-effective utilization of human, physical, medical, informational, and technological resources in patient care.

- Promote health improvement and self care

Examples:

- Promotes/participates in effective health and disease prevention services.
- Collaborates with policy makers, health care providers, members of the community and administrative and support personnel to identify and resolve health problems and evaluate health policy.

- Solve complex problems and make informed, rational, and ethical decisions

Examples:

- Identifies, retrieves, understands, analyzes, synthesizes, and evaluates information needed to make informed, rational, and ethical decisions.

- Solves complex problems that require an integration of one's ideas and values within a context of scientific, social, cultural, legal, clinical, and ethical issues.
 - Displays habits, attitudes, and values associated with mature critical thinking.
 - Uses good judgment in coming up with sensible, practical solutions to problems.
 - Seeks out and utilizes important facts and information in decision-making.
 - Recognizes and evaluates available alternatives.
 - Gives thought to possible consequences of decisions.
 - Makes decisions in a timely manner.
- Monitor and evaluate drug therapy
 - Examples:*
 - Reviews profile for drug-drug, drug-disease, and drug-food interactions and responds appropriately.
 - Reviews profile for duplication of medications.
 - Develops and implements an evidence-based care plan.
 - Evaluates the appropriateness of a given prescription or medication order based on patient and disease-specific factors.
- Retrieve and evaluate drug information
 - Examples:*
 - Defines the question that needs to be answered.
 - Distinguishes among lay, professional, and scientific literature.
 - Identifies appropriate literature search engines for lay, professional, and scientific literature.
 - Explains the method to construct an appropriate search strategy for various literature types.
 - Evaluates literature source validity.
 - Explains methods for systematically evaluating literature.
 - Evaluates the appropriateness of research methodologies and statistical methods.
 - Draws appropriate conclusions from research results.
 - Assesses the potential impact and implication of published information on current practices.
 - Exhausts all available sources for information prior to questioning preceptor.
- Communicate about prescription drugs and disease states
 - Examples:*
 - Counsels and/or educates about medication use, disease-state management, and health maintenance.
 - Discusses drug cautions, side effects, and patient conditions.
 - Relates to others in a professional manner.
 - Uses terminology appropriate to the receiver's level of understanding.
 - Interacts to confirm understanding.
 - Demonstrates proper use of dosing devices when necessary.
 - Develops population-based education programs.
- Communicate about nonprescription products, devices, and diagnostics
 - Examples:*
 - Familiarizes self with nonprescription products, devices, or diagnostics available.
 - Displays an ability to question about conditions and intended drug use.

- Communicates with others regarding OTC and herbal drug dosages, usages, storage, and side effects.
- Communicate with health professionals
Examples:
 - Demonstrates ability to accurately interpret verbal medication orders.
 - Is not afraid to request missing or additional information when needed.
 - Demonstrates ability to efficiently express ideas and questions.
 - Collaborates proactively with other healthcare professionals using appropriate effective communication in both written and oral forms.
 - Reads, writes, speaks, listens, and uses data, media, and computers to send and respond effectively to communications for varied audiences and purposes.
- Maintain professional competence
Examples:
 - Reports on time to all scheduled meetings.
 - Responds to assignments and responsibilities in a timely manner.
 - Accepts the responsibilities embodied in the principles of pharmaceutical care.
 - Deals professionally with colleagues and patients.
 - Maintains patient confidentiality.
- Maintain ethical standards
Examples:
 - Represents the profession in an ethical manner.
 - Identifies, analyzes, and resolves ethical problems involved in pharmacy practice.
 - Practices in a manner that is consistent with state and federal laws and regulations.
 - Exhibits reliability and credibility in dealing with others.
- Demonstrate human relation skills
Examples:
 - Demonstrates appropriate interpersonal, intergroup, and cross-cultural behaviors that promote respect and trust from peers, patients, and community members.
 - Participates as a team player.
 - Is attentive to and accepts constructive criticism well and works to correct problem.
 - Is sensitive to the needs, feelings, and concerns of others.
 - Listens, is nonjudgmental and responds appropriately to other's problems.
 - Acts in the best interest of others.
- **Other Site-specific objectives**

V. Required Activities/Topics Covered

Students will be required to participate in various activities at the discretion of the preceptor. These activities may vary depending on the practice site.

The following are the minimum required projects to be completed by the student during the Advanced Practice Experiences. The student will be responsible for making sure that these projects are assigned and completed at some point during the advanced practice experiences.

Activity	Minimum Quantity To Be Completed
Adverse Drug Reporting	3

Pharmacotherapeutic Clinical Interventions	30
Pharmacokinetic Clinical Interventions	5
Patient Counseling Activity	20
Journal Club/Literature Evaluation	5
Medication Histories /Medication Reconciliation	18
Case/Disease State Presentation *	3
Formal Disease State Presentation**	2
Drug Information Requests	15
Evaluative Drug Monograph	1
Health Professional In-Service	1
Nutrition Intervention	3

* May be completed with faculty or adjunct preceptors

**Must be completed with faculty preceptors

Student must complete a minimum of 2 of the following activities during their advanced practice experiences.

• Medication Use Evaluation	• Case Report
• Newsletter Article (Hospital or Community)	• Writing a review article
• P&T Review	• Research Project (could be longitudinal)
• Brown Bag	• Poster Presentation
• Patient Health Education Presentation/Resource Pamphlet	• LSHP Newsletter article
• Public Health Screening	• LPA Journal article
• Local Newspaper Article	• Medication Therapy Management

The actual activities will be reviewed by the preceptor and documented and approved in RXpreceptor system.

Other site-specific activities/topics covered during this experience include:

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F. Dress Code Policy:

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G. Student Schedule:

- State the hours the student is expected to be on site. If applicable, may indicate hours are not firm and may vary
- If possible, provide typical daily schedule. Include time to meet with the student to discuss student's performance and make recommendations for improvement.
- Consider making a calendar of dates/times to discuss specific topics, have journal club meetings, or other conferences.

H. Other Site-Specific Policies

Name of Pharmacy

Type of Pharmacy Administration Experience

(Use this template for Academia, Community Pharmacy Management, Hospital Administration, Pharmaceutical Industry, Organization Administration, and Research)

I. Contact Information

Preceptor Name

Address of Site

Telephone Number

Email

Office Location and Hours (if applicable)

Webpage (if applicable)

II. Practice Experience Description

This experience allows the student to develop the pharmaceutical knowledge base, competencies, and skills needed in the administrative setting. Activities will vary depending on the particular site. Assignments are preceptor specific and based on the capabilities of the average student.

III. Pre-Rotation Requirements

- Note any information or documentation that the student must provide
- Note any required readings prior to experience

IV. Objectives and Outcomes

Upon completion of this experience, the student will:

- Demonstrate understanding of laws and regulations

Examples:

- Describe state and federal laws and regulations regulating pharmacy practice.
- Describe applicable accreditation standards affecting pharmacy operations. (e.g. JCAHO, ASHP standards, AACP standards, OSHA regulations, etc).

- Manage general practice operations

Examples:

- Identify factors involved in managing personnel issues, including policies, procedures, and laws regarding hiring and termination of employees, workload and scheduling, worker rights, benefits, etc.
- Describe policies regarding drug acquisition including quality, supply, cost, delivery schedule, and mechanisms of assessment of purchasing policies.
- Describe system of inventory control, which assures adequate inventory levels, and prevention of theft or pilferage of drugs.
- Understands financial/resource constraints existing in healthcare systems and how these impact pharmaceutical services.
- Understands importance of maintaining and reconciling accounts receivable from third-party payers.
- Understands process of medication pricing.

- Demonstrate effective leadership skills

Examples:

- Contribute to the achievement of pharmacy goals through effective participation in or leading committees and informal work groups.

- Describe differences in healthcare models
Examples:
 - Socialized medicine vs. US model of health care.
 - For-profit vs. not-for-profit systems.
 - Differences in chain and independent practice situations.
 - Differences in institutional settings (acute, outpatient, LTAC, nursing homes, etc.).

- Solve complex problems and make informed, rational, and ethical decisions
Examples:
 - Identifies, retrieves, understands, analyzes, synthesizes, and evaluates information needed to make informed, rational, and ethical decisions.
 - Solves complex problems that require an integration of one's ideas and values within a context of scientific, social, cultural, legal, clinical, and ethical issues.
 - Displays habits, attitudes, and values associated with mature critical thinking.
 - Uses good judgment in coming up with sensible, practical solutions to problems.
 - Seeks out and utilizes important facts and information in decision-making.
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- Retrieve and evaluate drug information
Examples:
 - Defines the question that needs to be answered.
 - Distinguishes among lay, professional, and scientific literature.
 - Identifies appropriate literature search engines for lay, professional, and scientific literature.
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 - Draws appropriate conclusions from research results.
 - Assesses the potential impact and implication of published information on current practices.
 - Exhausts all available sources for information prior to questioning preceptor

- Demonstrate effective teaching skills
Examples:
 - Actively participates in student, technician, and/or healthcare provider education (e.g. classroom teaching, healthcare in-services, new procedures).

- Communicate with health professionals
Examples:
 - Demonstrates ability to efficiently express ideas and questions.
 - Collaborates proactively with other healthcare professionals using appropriate effective communication in both written and oral forms.
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- Maintain professional competence
Examples:
 - Reports on time to all scheduled meetings.
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- Consider making a calendar of dates/times to discuss specific topics, have journal club meetings, or other conferences.

H. Other Site-Specific Policies

-

Definitions of Required Assignments

- **Adverse Drug Reporting** – Completion of an approved FDA Med Watch form noting offending drug, pertinent labs, diseases and resolution.
- **Case Report** – Publishable case report similar to those found in NEJM or Pharmacotherapy. Consists of chronological summary of events and a review of pertinent literature
- **Clinical Interventions, Pharmacotherapeutic** – Identification of medication related problems (i.e. unnecessary/need for additional drug therapy, inappropriate compliance, incorrect dosing). Renal dose conversion, IV to PO switch, therapeutic substitution, allergy avoidance, cost avoidance, etc. All intervention assignments require a completed suitable progress note for credit, i.e. SOAP, PHARM etc.
- **Clinical Interventions, Pharmacokinetic** – Consists of the assessment of plasma concentrations, calculations and formulation of a recommendation if appropriate. For drugs that have a narrow therapeutic range, assess the appropriateness of dosages that patients are receiving and recommend an appropriate regimen based on patient response. All intervention assignments require a completed suitable progress note for credit, i.e. SOAP, PHARM etc.
- **Clinical Interventions, Nutrition** – Calorie determination, initial TPN orders, TPN monitoring and adjustment, calculation of caloric needs for enteral nutrition products, drug-food interactions, discussion of specific diets tailored to different medical conditions (cholesterol, diabetic, etc). All intervention assignments require a completed suitable progress note for credit, i.e. SOAP, PHARM etc.
- **Disease State Presentation** – Oral presentation on a particular disease or condition approved by the preceptor. Most likely relating to disease states encountered on the current rotation. **Guidelines for formal presentations:**
 - Present in front of an audience
 - Use PowerPoint
 - Include objectives and introduction
 - At least two sources must be primary literature preferably published within the past five years
 - Summarize conclusions
 - Include references
- **Drug Information Requests** – Written or oral answer to a clinical question relating to subjects applicable to current rotation.
- **Health Service In-Service** – Short oral presentation (5-20 minutes) presented to pharmacist or other health care professionals.
- **Journal Club/Evaluation** – Formal critique of primary literature article usually within the last year. Can occur in a structured Journal Club or one-on-one with a preceptor (group activity is preferred). Students are required to understand the rationale, methods and statistical analysis used as well as be able to discuss the validity of the results and appropriateness of the discussion.
- **Medication Histories** – Complete medication history including disease list, Rx and OTC drugs as well as complimentary and alternative medicines and diet.
- **Medication Reconciliation** – The process of identifying the most accurate list of all medications that a patient is taking, including name, dosage, frequency, and route, by comparing the medical record to an external list of medications provided by the patient, hospital or other provider.
- **Medication therapy management (MTM)** - Medical care provided by pharmacists whose aim is to optimize drug therapy and improve therapeutic outcomes for patients. Medication therapy management includes five core components: a medication therapy review (MTR), personal medication record (PMR), medication-related action plan (MAP), intervention and/or referral, and documentation and follow-up

- **Medication Use Evaluation** – Normally a start to finish research project determining proper use of a medication within a health care institution. Involves development of criteria and data collection instrument, collection of data, and interpretation and reporting of findings.
- **Evaluative Drug Monograph** – P&T style monograph (1-3 pages) summarizing key drug information (MOA, uses, doses, AE's, monitoring parameters, and clinical trials)
- **Patient Counseling Activity** – One-on-one communication with a patient discussing any aspect of pharmaceutical care.
- **Case Presentation** – Oral presentation of a particular case encountered by the student during the rotation. Consisting of a presentation of the patient, discussion of the disease and recommended treatments. Includes a critique of the care of the patient.
- **Newsletter Article, Hospital or Community Pharmacy** – Pharmacy educational article published in a hospital or community pharmacy newsletter
- **Newsletter Article, LSHP or LPA** – Pharmacy educational article published in the LSHP newsletter or the LPA Journal
- **Brown Bag** – conduct session where patients bring in all their medications for the pharmacist/pharmacy student to review for possible drug interactions or questionable doses.
- **Patient Health Education Presentation**- Oral educational presentation on common health related problems. Should be assigned by the preceptor based upon population need.
- **Public Health Screening**- preventative health screenings aimed at identifying medical conditions early on, sometimes even before symptoms occur.
- **Newspaper Article, Local**- Pharmacy educational article published in a local newspaper.
- **Review Article**- a written review article that critically evaluates material that has already been published. Purpose is to present the “truth” found among conflicting and variable primary literature
- **Research Project**- In-depth written study of any pharmacy related topic that is of interest to you or that you may have questions about. Must be approved by preceptor. May be a longitudinal project.
- **Poster Presentation**- Create a pharmacy related poster and present at a professional pharmacy meeting.
- **Pharmacy and Therapeutics Review**- a brief written review of a pharmaceutical agent being considered for addition/deletion to a Health System formulary by members of various health professions within the institution.
- **SOAP Notes** – Create a SOAP (subjective, objective, assessment, plan) note for 5 clinical interventions. These must be uploaded in RxPreceptor where you document the Field Encounter.
-

Evaluations

Students are required to submit a self-assessment for each practice experience. The self-assessment will be available at mid-point and student should complete and submit at least 5 days prior to the final evaluation. Students will also be required to complete an evaluation of the site, preceptor and course at the conclusion of each experience. Those evaluations should be electronically submitted no later than five (5) days after the final day in the pharmacy.

Preceptors will be required to complete a mid-point evaluation approximately 3 weeks into the practice experience and a final evaluation on the student's performance at the conclusion of each experience. Those evaluations should be electronically submitted no later than five (5) days after the final day in the pharmacy. *(If online access is unavailable, the preceptor should complete the manual evaluation form and mail, or deliver in person, to the Advanced Practice Coordinator no later than five (5) days after the final day in the pharmacy.)*

Assignment Templates

Antibiotic Call-back

An antibiotic call-back program is an inexpensive and effective way of assessing and improving therapy outcomes. Pharmacists are able to identify and possibly prevent adverse effects, non-compliance, and other drug related problems relating to antibiotic therapy. During the community experience, students are required to contact a minimum of 30 patients receiving antibiotic therapy. There is a standard Antibiotic Call-back template in case your site does not have a procedure in place. The student should consult the preceptor on the best way to obtain a list of patients to contact. Most stores will be able to generate a list of patients on antibiotic therapy. You should also discuss with the preceptor the time frame for call-back, normally 3-5 days is appropriate for antibiotics. If a problem is identified during the call-back, the student should consult the preceptor on the best way to handle the problem. There will be times when you have to communicate with or refer the patient to another healthcare provider. The appropriate communication process to follow should be determined by the preceptor (call-back notes sent by fax, by phone, etc). REMEMBER: NO RECOMMENDATIONS ARE MADE TO THE PATIENT OR PHYSICIAN WITHOUT PRECEPTOR APPROVAL.

Standard Call-back Procedure

Introduction

Below is an example of an introduction

“Hello Mrs. Smith, this is David from Allen’s Pharmacy. Three days ago you had a prescription filled for Amoxil® and I wanted to call and see how you were doing and if you had any additional questions regarding the antibiotic.”

Compliance Check

First question should be to determine if patient is taking the medication correctly. This must be done in a delicate, non-accusing tone to encourage an honest response. For example:

“So Mrs. Smith, How have you been taking your antibiotic?”

Outcome Assessment

The next questions should be aimed at determining whether or not our desired outcomes have been met. Do not ask generic questions such as “How are you feeling?” because you will inevitably get the standard response of “I’m fine”. Specific questions usually elicit the response you’re looking for.

First Outcome: To cure the disease

Question should incorporate disease (if known). For example:

“How is the Amoxil® working for your ear infection?”

“Did the Amoxil® that was prescribed do the trick for your ear infection?”

Second Outcome: Reducing or eliminating symptoms

Question should incorporate the main symptom. For example:

“How has the Amoxil® worked for your earache?”

“Have you been running fever since starting on the Amoxil®?”

Third Outcome: Controlling a physiological parameter without reducing quality of life

Question should be concerned with patient’s quality of life. For example:

“Do you feel better since you began the Amoxil®?”

“Do you feel like your normal self again after starting the Amoxil®?”

Adverse Effect

The next questions should be aimed at checking with the patient for adverse effects. This should be a two-part process with the first question aimed at receiving patient volunteered information and the second question aimed at checking for the most common adverse effects of the medication.

First Question: Receiving patient volunteered information

For example:

“Have you had any side effects since beginning this medication?”

Second Question: Probing for additional information

Question should check for the most common adverse effects. Some patients may not think that problems they’re having are related to the medication. For example:

“Have you had any nausea since beginning the Amoxil®?”

Pharmacist Recommendation

After all information is gathered, you should interpret the results and make a recommendation. If outcomes have been reached, then the recommendation is usually to complete prescribed course of antibiotic as previously directed. For example:

“It sounds like the Amoxil® has done the trick for your ear infection. Do you have any questions?”

If outcomes have not been reached, then it becomes your responsibility to help the patient reach the desired outcome. It may be that the patient requires further counseling, or even contacting or referring patient back to the physician. At this point you will need to consult with the preceptor on the best course of action.

“It sounds as though you’re having some difficulty with nausea which is a common side effect with Amoxil®. *(The patient may just need additional counseling on spreading the doses out or taking with food)*

“It sounds as though you’re having a hard time

remembering to take your medication three times a day. *(The patient may need additional counseling on using a pill planner or may even need to contact physician regarding once a day therapy)*

Follow Up

If there is patient confusion or non-compliance, some further follow-up may be necessary.

After the Call-back

Make sure the call-back form is completed for every callback provided and placed in your student portfolio. Also, your preceptor may have other documentation requirements to complete in addition to completing the University form.

Antibiotic Callback Form

Patient's Name: _____

Phone No: _____

Drug Name: _____

RX Number: _____

Date Filled: _____

1. Is the medication working?

2. Is patient experiencing adverse effects?

3. How is patient taking the medication? (daily dose and frequency)

4. Is patient taking on empty stomach or with food?

5. Has patient missed any doses? (Reinforce to complete full course of therapy)

6. Any questions or concerns voiced by patient?

Remember to thank the patient for their time

Date Called: _____

Length of call: _____

Additional comments:

Herbal Write-up

Student Name: _____

Herbal Name: _____

Trade Names:

Active Ingredients:

Proposed Mechanism of action:

Dosage forms and strengths available:

Proposed indications:

Other over the counter drugs or herbal products available for this indication:

Prescription agents available for this indication

Dosage (recommended):

Contraindications:

Adverse Effects:

Pregnancy Category:

Overdose possibilities and abuse potential:

What should a patient be counseled on about this medication?

Other information:

Prescription Intervention Form

Intern name: _____ Date: _____

Prescriber: General Practitioner Specialty Other

Patient Age: _____

Patient Sex: Male Female

Reason for Intervention

Explanation

Clerical

Interaction:

Drug/Drug

Drug/Food

Wrong Medication:

Patient/Disease

Strength

Dose/frequency

Dose form

Other

Action

Result

Contact Prescriber

Other

Outcome

Reason

Dispensed as written

Medication changed

Medication stopped

Patient counseled

RX not dispensed

Other

Time to resolve the problem: _____ minutes

OTC/Herbal Intervention Form

Intern name: _____ Date: _____

Patient Age: _____

Gender: Male Female Pregnant: Yes No Breast Feeding: Yes No

Allergies: _____

Medical Conditions: _____

Current Medications: (OTC/prescription/Other)

Reason for Intervention

1. Describe the symptoms and symptom time frame which led this patient to desire OTC/Herbal therapy:

2. Are there any past self-treatment strategies for this problem?

3. What other disease states, conditions, or medications was the patient taking that influenced your recommendation?

3. Was the patient referred to the physician? Yes No
List the criteria for your decision.

4. If you recommended self-therapy, list your OTC/herbal recommendation as well as the monitoring plan.

COUNSELING TECHNIQUE EVALUATION FORM

A. SETTING THE STAGE

	YES	NO	N/A
1. Display confidence and self-direction in preparing for patient counseling.			
2. Identify physical and patient barriers and deal with these appropriately.			
3. Properly identify self and the purpose of the counseling.			
4. Communicate effectively, using appropriate level of terminology.			

B. CONSULTATION PROCESS

	YES	NO	N/A
1. Assesses the patient's or caregiver's prior knowledge of the medication and its use.			
2. Convey complete and accurate drug information to the patient and caregiver. Include drug name, strength, dosage form, administration schedule, intended use, expected actions, side effects, precautions, etc.			
3. Maintain control and direction of the counseling process at all times.			
4. Adjust instruction to appropriately accommodate patient/caregiver responses.			
5. Utilize appropriate teaching aids if needed. Ask patient to demonstrate wherever possible.			

C. CLOSURE

	YES	NO	N/A
1. Assure complete patient/caregiver understanding. You may ask, "Just to make sure I didn't leave anything out, please go over how you are going to use the medicine."			
2. Ensure appropriate closure. You may ask, "Do you have any further questions regarding your medication?"			

STUDENT'S NAME _____

MEDICATION: _____

PHARMACIST'S NAME: _____ **DATE:** _____

Patient Medical History Form

Name: _____ Phone: (H) _____ (W) _____
Address: _____ City: _____ State: _____
Date of Birth: _____ Height: _____ Weight: _____ Gender: _____
Allergies: _____

Tobacco History: None
Currently Use Year started _____ Type _____ Packs per day
Prior Use Year started _____ Year Quit _____

Alcohol Use: None Occasional Weekly Daily
Type: Beer Wine Spirits
Estimated number of drinks per week/month: _____

Current Diet: Satisfactory Unsatisfactory
Concerns: _____

Current Exercise/Activity level: Satisfactory Unsatisfactory
Concerns: _____

Current/Chronic Medical Conditions:

Past Medical Conditions: _____

Current Medications: (OTC/prescription/Other)

University of Louisiana at Monroe

School of Pharmacy

Developing a Pharmaceutical Care Plan

Patient care planning involves systematically assessing a patient's health problems and needs, setting objectives, performing interventions, and evaluating results. Pharmacists must assess their own patients and identify specific areas on which to focus. For example, the pharmacist may want to identify patients with specific diseases (e.g., asthma, hypertension, diabetes mellitus, or hypercholesterolemia).

Care plan development can be summarized as a five step process involving the SOAP format (Subjective, Objective, Assessment and Plan of care)

Step 1. Gathering Information

The pharmacist should gather an accurate medication history, including both prescription and nonprescription medications and indications for each drug. If information needs to be obtained from the physician, written permission should be gotten from the patient before soliciting this information.

Step 2. Identifying Problems

From the patient's medication profile, all problems should be listed. All subjective and objective findings related to the problem should be documented. Subjective findings are those that the patient describes (e.g. "Feeling tired", "Feeling dizzy"). Objective findings are those that can be observed or measured by the pharmacist (e.g. "Patient looks tired", "Blood Pressure 200/110").

Step 3. Assessing Problems

Next, the information gathered in steps 1 and 2 should be analyzed. The pharmacist should attempt to determine if drugs caused or exacerbated the problems listed. Next the pharmacist should assess the severity of the identified problems.

Step 4. Developing the Plan

In step 4, the pharmacist establishes goals linked to each of the patient's problems and specifies a course of action aimed at meeting each goal. Each goal (i.e., desired improvement) should be stated in terms of measurable outcomes that indicate the extent to which the particular problem has been resolved. Often, the patient has several problems, and the plan must be comprehensive enough to have a positive effect on the overall health of the patient.

Step 5. Evaluating the Achievement of Outcomes

Outcomes that will be used to evaluate the success of the pharmaceutical care plans must be meaningful, measurable, and manageable. Outcomes are specific, measurable indicators for the goals of treatment. Thus, they should be identified in the planning process.

Documentation should include these components.

1. *Patient data* such as name, medical record number, location, date of hospital admission (if applicable), age, sex, height, weight, known medication or other allergies, and medication history.
2. *Name of pharmacist(s)* responsible for developing and implementing the pharmaceutical care plan.
3. *Patient problem(s)* listed individually in order of potential pharmacotherapeutic impact (highest to lowest priority). Subjective and objective data that lead to identification of a specific problem and potential drug-related problems should also be included.
4. *Date* on which a patient problem is identified. Many diseases remain chronic throughout the patient's life. Problems such as urinary tract infection or upper respiratory tract infection usually resolve in 10 to 14 days

Pharmaceutical Care Plan

Date/Time: _____ Pharmacist Signature: _____

Patient Name: _____

Address: _____

City, State, Zip: _____

Phone: _____ Date of Birth: _____

Height: _____ Weight: _____ Sex: _____ Race: _____

Allergies: _____

Diagnosis(es): _____

Other information: _____

Medication	Strength	Regimen	Indication

Problem(s) Subjective and Objective Information	Assessment	Plan/Goal	Evaluation/Outcomes

Problem(s) Subjective and Objective Information	Assessment	Plan/Goal	Evaluation/Outcomes

Progress Notes

*Evaluation Templates Completed By Preceptor
About Student*

*University of Louisiana at Monroe
School of Pharmacy*

Pharmacy Practice Evaluation of Student

(Used for Community, Institutional, Closed Door Pharmacy, Compounding, Drug Information, Home Infusion, Managed Care, Medicaid Prior Approval, Medication Therapy Management, Nuclear, and Hospital Outpatient)

1	2	3	4	N/A
<u>Below Expectations</u> Unsatisfactory performance	<u>Meets Expectations</u> Satisfactory level of performance for an entry-level practitioner	<u>Exceeds Expectations</u> Advanced level of performance for an entry-level practitioner	<u>Superior Performance</u> Outstanding level of performance for an entry-level practitioner	<u>Not Applicable</u> Student is not evaluable in this area

An average grade of less than 2 in any section will result in a failing grade for the entire rotation

Pharmacy Practice Skills

1. Manages general pharmacy operations

Mid-point	1	2	3	4	N/A
Final	1	2	3	4	N/A

Examples:

- Understands required record keeping practices to meet state and federal laws concerning prescription files, prescription drug inventory, employee files, etc.
- Plans, organizes, directs, and controls pharmaceutical care systems and human, material, and financial resources utilizing management theories and practices.
- Applies patient and population specific data, quality assurance strategies, and research processes.
- Ensures efficient, cost-effective utilization of human, physical, medical, informational, and technological resources in patient care.

2. Promotes Health Improvement and Self Care

Mid-point	1	2	3	4	N/A
Final	1	2	3	4	N/A

Examples:

- Promotes/participates in effective health and disease prevention services as part of Pharmacy Practice Experience.
- Collaborates with policy makers, health care providers, members of the community and administrative and support personnel to identify and resolve health problems and evaluate health policy.

3. Problem Solving and Decision Making

Mid-point	1	2	3	4	N/A
Final	1	2	3	4	N/A

Examples:

- Identifies, retrieves, understands, analyzes, synthesizes, and evaluates information needed to make informed, rational, and ethical decisions.

- Solves complex problems that require an integration of one’s ideas and values within a context of scientific, social, cultural, legal, clinical, and ethical issues.
- Displays habits, attitudes, and values associated with mature critical thinking.
- Uses good judgment in coming up with sensible, practical solutions to problems.
- Seeks out and utilizes important facts and information in decision-making.
- Recognizes and evaluates available alternatives.
- Gives thought to possible consequences of decisions.
- Makes decisions in a timely manner.

4. Drug Preparation and Distribution

Mid-point	1	2	3	4	N/A
Final	1	2	3	4	N/A

Examples:

- Determines correctness and completeness of each prescription order.
- Performs necessary determinations for accurate filling of prescriptions, including quantities to dispense, concentration determinations, drug additive quantities.
- Evaluates and selects products.
- Documents all activities involved with the provision of comprehensive patient specific pharmaceutical care.

5. Monitors and evaluates drug therapy

Mid-point	1	2	3	4	N/A
Final	1	2	3	4	N/A

Examples:

- Reviews profile for drug-drug, drug-disease, and drug-food interactions and responds appropriately.
- Reviews profile for duplication of medications.
- Develops and implements an evidence-based care plan. (pharmacology, med chem, physiology, pathology, etc.).
- Evaluates the appropriateness of a given prescription or medication order based on patient and disease-specific factors.
- Interviews patient to maintain current patient profiles including medications, allergies, medical conditions, medical history and special needs.

6. Compounding

Mid-point	1	2	3	4	N/A
Final	1	2	3	4	N/A

Examples:

- Compounds and/or dispenses the most optimal formulation for drug delivery consistent with the patient needs and in harmony with the law.
- Uses appropriate safety measures according to Hazard Code and Safety Guidelines (gloves, mask, protective eyewear, etc).
- Utilizes acceptable professional techniques and procedures.
- Selects appropriate equipment and containers.
- Documents calculations and procedures appropriately.
- Prepares and maintains clean work area for compounding.
- Selects appropriate chemicals required for formula preparation and familiar with the use/purpose of each.
- Is familiar with dosage form options targeted at improved patient compliance.

Information Resources

7. Retrieves and evaluates drug information

Mid-point	1	2	3	4	N/A
Final	1	2	3	4	N/A

Examples:

- Defines the question that needs to be answered.
- Distinguishes among lay, professional, and scientific literature.
- Identifies appropriate literature search engines for lay, professional, and scientific literature.
- Explains the method to construct an appropriate search strategy for various literature types.
- Evaluates literature source validity.
- Explains methods for systematically evaluating literature.
- Evaluates the appropriateness of research methodologies and statistical methods.
- Draws appropriate conclusions from research results.
- Assesses the potential impact and implication of published information on current practices.
- Exhausts all available sources for information prior to questioning preceptor.

Communication Skills

8. Communicates about prescription drugs and disease states

Mid-point	1	2	3	4	N/A
Final	1	2	3	4	N/A

Examples:

- Counsels and/or educates about medication use, disease-state management, and health maintenance.
- Discusses drug cautions, side effects, and patient conditions.
- Relates to others in a professional manner.
- Uses terminology appropriate to the receiver's level of understanding.
- Interacts to confirm understanding.
- Demonstrates proper use of dosing devices when necessary.
- Develops population-based education programs.

9. Communicates about nonprescription products, devices, and diagnostics

Mid-point	1	2	3	4	N/A
Final	1	2	3	4	N/A

Examples:

- Evaluates a situation for self-treatment or referral.
- Familiarizes self with nonprescription products, devices, or diagnostics available.
- Displays ability to guide non-prescription product selection based on symptoms/need, concomitant prescription drug use, and concomitant disease states.
- Displays an ability to question about conditions and intended drug use.
- Communicates with others regarding OTC and herbal drug dosages, usages, storage, and side effects.

10. Communicates with health professionals

Mid-point	1	2	3	4	N/A
Final	1	2	3	4	N/A

Examples:

- Demonstrates ability to accurately interpret verbal medication orders.
- Is not afraid to request missing or additional information when needed.
- Demonstrates ability to efficiently express ideas and questions.
- Collaborates proactively with other healthcare professionals using appropriate effective communication in both written and oral forms.
- Reads, writes, speaks, listens, and uses data, media, and computers to send and respond effectively to communications for varied audiences and purposes.

Personal and Professional Growth

11. Professionalism

Mid-point	1	2	3	4	N/A
Final	1	2	3	4	N/A

Examples:

- Maintains professional competence.
- Reports on time to all scheduled meetings.
- Responds to assignments and responsibilities in a timely manner.
- Accepts the responsibilities embodied in the principles of pharmaceutical care.
- Deals professionally with colleagues and patients.
- Maintains patient confidentiality.

12. Maintains ethical standards

Mid-point	1	2	3	4	N/A
Final	1	2	3	4	N/A

Examples:

- Represents the profession in an ethical manner.
- Identifies, analyzes, and resolves ethical problems involved in pharmacy practice.
- Practices in a manner that is consistent with state and federal laws and regulations.
- Exhibits reliability and credibility in dealing with others.

13. Demonstrates human relation skills

Mid-point	1	2	3	4	N/A
Final	1	2	3	4	N/A

Examples:

- Demonstrates appropriate interpersonal, intergroup, and cross-cultural behaviors that promote respect and trust from peers, patients, and community members.
- Participates as a team player.
- Is attentive to and accepts constructive criticism well and works to correct problem.
- Is sensitive to the needs, feelings, and concerns of others.
- Listens, is nonjudgmental and responds appropriately to other's problems.
- Acts in the best interest of others.

*University of Louisiana at Monroe
School of Pharmacy*

Clinical Evaluation of Student

(Used for Adult Medicine, Ambulatory Care, Cardiology, Critical Care, Emergency Medicine, Geriatrics, Hospital Clinical Management, Infectious Disease, Nephrology, Nutrition Support, Oncology, Pediatrics, Psychiatry, Women’s Health, Community Clinical, Disease State Management, Hospice, Long Term Care, Surgery)

An average grade of less than 2 in any section will result in a failing grade for the entire rotation

1. Clinical Knowledge (25 percent)

1	2	3	4	N/A
<u>Below Expectations</u>	<u>Meets Expectations</u>	<u>Exceeds Expectations</u>	<u>Superior Performance</u>	<u>Not Applicable</u>
Unsatisfactory level of basic science and clinical knowledge for an entry-level practitioner	Satisfactory level of basic science and clinical knowledge for an entry-level practitioner	Advanced level of basic science and clinical knowledge for an entry-level practitioner	Outstanding level of basic science and clinical knowledge for an entry-level practitioner	Student is not evaluable in this area

Mid-point	1	2	3	4	N/A
Final	1	2	3	4	N/A

Examples:

- Describes pathophysiology, clinical presentation and appropriate therapies for each patient problem.
- Demonstrates a working knowledge of drug classes, mechanism of action, common adverse effects, drug-drug interactions, drug-disease interactions and monitoring parameters.
- Demonstrates working knowledge of non-drug therapies and alternative therapies.

2. Clinical Skills (25 percent)

1	2	3	4	N/A
<u>Below Expectations</u>	<u>Meets Expectations</u>	<u>Exceeds Expectations</u>	<u>Superior Performance</u>	<u>Not Applicable</u>
Unsatisfactory clinical skills for an entry-level practitioner	Satisfactory level of clinical skills for an entry-level practitioner	Advanced level of clinical skills for an entry-level practitioner	Outstanding level of clinical skills for an entry-level practitioner	Student is not evaluable in this area

Mid-point	1	2	3	4	N/A
Final	1	2	3	4	N/A

Examples:

- Demonstrates sound decision making, critical thinking, and problem solving skills.

- Appropriately identifies real and potential drug therapy problems.
- Constructs appropriate patient pharmacotherapeutic plans.
- Appropriately assesses patient status and monitors response to therapy.
- Applies pharmacokinetic principles to make dosing recommendations.
- Collects and analyzes patient data in accordance with current standards of practice.
- Appropriately documents clinical findings and interventions in patient medical record.
- Evaluates drug orders for accuracy and safety.
- Integrates basic science knowledge with specific patient problems.
- Demonstrates ability to triage patients to other health care professionals.

3. Information Resources (20 percent)

1	2	3	4	N/A
<u>Below Expectations</u>	<u>Meets Expectations</u>	<u>Exceeds Expectations</u>	<u>Superior Performance</u>	<u>Not Applicable</u>
Unsatisfactory performance	Satisfactory level of drug information retrieval and application skills	Advanced level of drug information retrieval and application skills	Outstanding level of drug information retrieval and application skills	Student is not evaluable in this area

Mid-point	1	2	3	4	N/A
Final	1	2	3	4	N/A

Examples:

- Effectively retrieves and uses drug information resources.
- Applies drug literature appropriately in patient care decisions.
- Supplements textbook knowledge with primary literature for use in patient care decisions.

4. Professional Communication (20 percent)

1	2	3	4	N/A
<u>Below Expectations</u>	<u>Meets Expectations</u>	<u>Exceeds Expectations</u>	<u>Superior Performance</u>	<u>Not Applicable</u>
Unsatisfactory performance	Satisfactory level of professional communication	Advanced level of professional communication	Outstanding level of professional communication	Student is not evaluable in this area

Mid-point	1	2	3	4	N/A
Final	1	2	3	4	N/A

Examples:

- Appropriately communicates orally with other health care professionals.
- Appropriately communicates in writing with other health care professionals.

- Demonstrates appropriate level of communication during projects and case presentations.
- Effectively counsels patients regarding purpose, uses and effects of their medications.

5. Personal and Professional Growth (10 percent)

1	2	3	4	N/A
<u>Below Expectations</u>	<u>Meets Expectations</u>	<u>Exceeds Expectations</u>	<u>Superior Performance</u>	<u>Not Applicable</u>
Unsatisfactory performance	Satisfactory level of personal and professional growth	Advanced level of personal and professional growth	Outstanding level of personal and professional growth	Student is not evaluable in this area

Mid-point	1	2	3	4	N/A
Final	1	2	3	4	N/A

Examples:

- Actively participates in all clerkship activities.
- Conducts him/herself in a professional manner.
- Completes assignments in a timely manner.
- Is consistently on time for rounds, group discussions and meetings.
- Keeps excused absences to a minimum without unexcused absences.
- Personal appearance is professionally appropriate.

*University of Louisiana at Monroe
School of Pharmacy*

Pharmacy Administration Evaluation of Student

(Used for Academic, Community Pharmacy Management, Hospital Administration, Pharmaceutical Industry, Pharmacy Organization Administration, and Research)

1	2	3	4	N/A
<u>Below Expectations</u> Unsatisfactory performance	<u>Meets Expectations</u> Satisfactory level of performance for an entry-level practitioner	<u>Exceeds Expectations</u> Advanced level of performance for an entry-level practitioner	<u>Superior Performance</u> Outstanding level of performance for an entry-level practitioner	<u>Not Applicable</u> Student is not evaluable in this area

An average grade of less than 2 in any section will result in a failing grade for the entire rotation

Pharmacy Administration Skills

1. Demonstrates understanding of laws and regulations

Mid-point	1	2	3	4	N/A
Final	1	2	3	4	N/A

Examples:

- Describe state and federal laws and regulations regulating pharmacy practice.
- Describe applicable accreditation standards affecting pharmacy operations. (e.g. JCAHO, ASHP standards, AACP standards, OSHA regulations, etc).

2. Manages general practice operations

Mid-point	1	2	3	4	N/A
Final	1	2	3	4	N/A

Examples:

- Identify factors involved in managing personnel issues, including policies, procedures, and laws regarding hiring and termination of employees, workload and scheduling, worker rights, benefits, etc.
- Describe policies regarding drug acquisition including quality, supply, cost, delivery schedule, and mechanisms of assessment of purchasing policies.
- Describe system of inventory control which assures adequate inventory levels and prevention of theft or pilferage of drugs.
- Understands financial/resource constraints existing in healthcare systems and how these impact pharmaceutical services.
- Understands importance of maintaining and reconciling accounts receivable from third-party payers.
- Understands process of medication pricing.

3. Demonstrates effective leadership skills

Mid-point	1	2	3	4	N/A
Final	1	2	3	4	N/A

Examples:

- Contribute to the achievement of pharmacy goals through effective participation in or leading committees and informal work groups.
- Participate in clinical, ethics, management, and economic outcomes discussions.
- Participate in the development and implementation of selected pharmacy departmental policies and procedures.

4. Describe differences in healthcare models

Mid-point	1	2	3	4	N/A
Final	1	2	3	4	N/A

Examples:

- Socialized medicine vs. US model of health care.
- For-profit vs. not-for-profit systems.
- Differences in chain and independent practice situations.
- Differences in institutional settings (acute, outpatient, LTAC, nursing homes, etc.).

5. Problem Solving and Decision Making

Mid-point	1	2	3	4	N/A
Final	1	2	3	4	N/A

Examples:

- Identifies, retrieves, understands, analyzes, synthesizes, and evaluates information needed to make informed, rational, and ethical decisions.
- Solves complex problems that require an integration of one's ideas and values within a context of scientific, social, cultural, legal, clinical, and ethical issues.
- Displays habits, attitudes, and values associated with mature critical thinking.
- Uses good judgment in coming up with sensible, practical solutions to problems.
- Seeks out and utilizes important facts and information in decision making.
- Recognizes and evaluates available alternatives.
- Gives thought to possible consequences of decisions.
- Makes decisions in a timely manner.

Information Resources

6. Retrieves and evaluates drug information

Mid-point	1	2	3	4	N/A
Final	1	2	3	4	N/A

Examples:

- Defines the question that needs to be answered.
- Distinguishes among lay, professional, and scientific literature.
- Identifies appropriate literature search engines for lay, professional, and scientific literature.
- Explains the method to construct an appropriate search strategy for various literature types.
- Evaluates literature source validity.
- Explains methods for systematically evaluating literature.
- Evaluates the appropriateness of research methodologies and statistical methods.
- Draws appropriate conclusions from research results.
- Assesses the potential impact and implication of published information on current practices.
- Exhausts all available sources for information prior to questioning preceptor.

Communication Skills

7. Demonstrates effective teaching skills

Mid-point	1	2	3	4	N/A
Final	1	2	3	4	N/A

Examples:

- Actively participates in student, technician, and/or healthcare provider education (e.g. classroom teaching, healthcare in-services, new procedures).

8. Communicates with health professionals

Mid-point	1	2	3	4	N/A
Final	1	2	3	4	N/A

Examples:

- Demonstrates ability to efficiently express ideas and questions.
- Collaborates proactively with other healthcare professionals using appropriate effective communication in both written and oral forms.
- Reads, writes, speaks, listens, and uses data, media, and computers to send and respond effectively to communications for varied audiences and purposes.

Personal and Professional Growth

9. Professionalism

Mid-point	1	2	3	4	N/A
Final	1	2	3	4	N/A

Examples:

- Maintains professional competence.
- Reports on time to all scheduled meetings.
- Responds to assignments and responsibilities in a timely manner.
- Accepts the responsibilities embodied in the principles of pharmaceutical care.
- Deals professionally with colleagues and patients.
- Maintains patient confidentiality.

10. **Maintains ethical standards**

Mid-point	1	2	3	4	N/A
Final	1	2	3	4	N/A

Examples:

- Represents the profession in an ethical manner.
- Identifies, analyzes, and resolves ethical problems involved in pharmacy practice.
- Practices in a manner that is consistent with state and federal laws and regulations.
- Exhibits reliability and credibility in dealing with others.

11. **Demonstrates human relation skills**

Mid-point	1	2	3	4	N/A
Final	1	2	3	4	N/A

Examples:

- Demonstrates appropriate interpersonal, intergroup, and cross-cultural behaviors that promote respect and trust from peers, patients, and community members.
- Participates as a team player.
- Is attentive to and accepts constructive criticism well and works to correct problem.
- Is sensitive to the needs, feelings, and concerns of others.
- Listens, is nonjudgmental and responds appropriately to other's problems.
- Acts in the best interest of others.

***Evaluation Templates Completed By Student
About Site, Preceptor, and Course***

STUDENT EVALUATION OF SITE

UNIVERSITY OF LOUISIANA AT MONROE SCHOOL OF PHARMACY

	1	2	3	4	N/A			
	Below Average	Average	Above Average	Superior	Not Applicable			
	Site does not meet student expectations, would not recommend to other students	Site meets student expectations, would recommend to other students	Site exceeds student expectations, would recommend to other students	Site far exceeds student expectations, would recommend to other students	Student not able to evaluate rotation in this area			
General Site Characteristics								
1	Site meets or exceeds all legal and professional standards required to provide patient care.			1	2	3	4	N/A
2	Site has a patient population that exhibits diversity in culture, medical conditions, gender, and age, where appropriate.			1	2	3	4	N/A
3	Site has an adequate patient population based on the learning objectives for the rotation.			1	2	3	4	N/A
4	Site has access to learning and information resources.			1	2	3	4	N/A
5	Site has a commitment to the education of pharmacy students.			1	2	3	4	N/A
6	Site has management that is supportive of professional staff involvement in the education of pharmacy students			1	2	3	4	N/A
7	Site has a practice environment that nurtures and supports pharmacist and student interactions with patients			1	2	3	4	N/A
8	Site provides daily contact with the preceptor or a qualified designee to ensure that students receive feedback and have opportunities to ask questions.			1	2	3	4	N/A
9	Site is adequately equipped with the technology needed to support student training and to reflect contemporary practice.			1	2	3	4	N/A
10	Site provides medication therapy management and patient care services for diverse populations.			1	2	3	4	N/A
11	Site has adequate professional staff and supportive technical and clerical staff to meet the learning objectives and to provide for optimum time for preceptor and student interaction.			1	2	3	4	N/A
12	Site provides educational workshops for patients and other health care providers.			1	2	3	4	N/A
13	Site serves as an accredited site for training of pharmacy residents.			1	2	3	4	N/A
14	Site has collaborative professional and/or training relationships with other health care providers (e.g. interaction with other health care providers)			1	2	3	4	N/A
15	Site demonstrates a strong commitment to health promotion and illness prevention as reflected by the services provided and/or products sold (e.g. provision of health screening, tobacco cessation counseling, immunizations; not stocking cigarettes and other tobacco products)			1	2	3	4	N/A

1. Explain any changes you would make to enhance this practice experience.
2. What did you like most about the practice experience, why?
3. What did you dislike the most about the practice experience, why?
4. Additional Comments: (this information will only be seen by the Office of Experiential Education and not shared with the subject of this evaluation)

STUDENT EVALUATION OF PRECEPTOR

UNIVERSITY OF LOUISIANA AT MONROE SCHOOL OF PHARMACY

	1	2	3	4	N/A			
	Below Average	Average	Above Average	Superior	Not Applicable			
	Preceptor does not meet student expectations, would not recommend to other students	Preceptor meets student expectations, would recommend to other students	Preceptor exceeds student expectations, would recommend to other students	Preceptor far exceeds student expectations, would recommend to other students	Student not able to evaluate preceptor in this area			
General Preceptor Characteristics								
1	Preceptor practices ethically and with compassion for patients.			1	2	3	4	N/A
2	Preceptor accepts personal responsibility for patient outcomes.			1	2	3	4	N/A
3	Preceptor has professional training, experience, and competence commensurate with their position.			1	2	3	4	N/A
4	Preceptor utilizes clinical and scientific publications in clinical care decision making and evidence-based practice.			1	2	3	4	N/A
5	Preceptor has a desire to educate others (patients, care givers, other health care professionals, students, pharmacy residents)			1	2	3	4	N/A
6	Preceptor has an aptitude to facilitate learning.			1	2	3	4	N/A
7	Preceptor is able to document and assess student performance.			1	2	3	4	N/A
8	Preceptor has a systematic, self-directed approach to his or her own continuing professional development.			1	2	3	4	N/A
9	Preceptor collaborates with other health care professionals as a member of a team.			1	2	3	4	N/A
10	Preceptor is committed to their organization, professional societies, and the community.			1	2	3	4	N/A
11	Preceptor answers questions willingly.			1	2	3	4	N/A
12	Preceptor encourages the student to ask questions or express ideas at appropriate times.			1	2	3	4	N/A
13	Preceptor is enthusiastic about the subject matter.			1	2	3	4	N/A
14	Preceptor communicates ideas and principles clearly and effectively.			1	2	3	4	N/A
15	Preceptor stimulates and maintains the student's interest.			1	2	3	4	N/A
16	Preceptor communicates well with the student.			1	2	3	4	N/A
17	Preceptor promotes self-confidence in the student.			1	2	3	4	N/A
18	Preceptor exhibits a professional attitude and motivation.			1	2	3	4	N/A
19	Preceptor is responsive to the needs of the students.			1	2	3	4	N/A

20	Preceptor provides helpful critiques or evaluation of student efforts.	1	2	3	4	N/A
21	Preceptor is a good role model in pharmacy practice.	1	2	3	4	N/A
22	Preceptor was fair in evaluating me.	1	2	3	4	N/A
23	Preceptor seems to have a thorough knowledge and understanding of his/her field.	1	2	3	4	N/A
24	Preceptor allows ample time for discussion of patients.	1	2	3	4	N/A
25	Preceptor treats students with respect.	1	2	3	4	N/A
26	Preceptor provides relevant information.	1	2	3	4	N/A
27	Preceptor assists student in integrating knowledge of drug therapy with patient care.	1	2	3	4	N/A
28	Preceptor clearly specified performance requirements.	1	2	3	4	N/A
29	Overall effectiveness of the preceptor.	1	2	3	4	N/A

1. Explain any changes you would make to enhance this practice experience.
2. What did you like most about the practice experience, why?
3. What did you dislike the most about the practice experience, why?
4. Additional Comments: (this information will only be seen by the Office of Experiential Education and not shared with the subject of this evaluation)

STUDENT EVALUATION OF COURSE
APPE COMMUNITY/INSTITUTIONAL

UNIVERSITY OF LOUISIANA AT MONROE
SCHOOL OF PHARMACY

Using the scale below, please indicate, on average, how frequently you were exposed to or allowed to participate in the activities below.						
		0	1	2	3	4
		Never/Not applicable	Less than 1 time per week	1-2 times per week	3-4 times per week	Daily or multiple times per day
Pharmacy Student Opportunities						
1	Practicing as a member of an interprofessional team.	0	1	2	3	4
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.	0	1	2	3	4
3	Consulting with patients regarding self-care products.	0	1	2	3	4
4	Recommending prescription and nonprescription medications, dietary supplements, diet, nutrition, traditional nondrug therapies, and complementary and alternative therapies.	0	1	2	3	4
5	Recommending appropriate medication dosing utilizing practical pharmacokinetic principles.	0	1	2	3	4
6	Administering medications where practical and consistent with the practice environment and where legally permitted.	0	1	2	3	4
7	Identifying and reporting medication errors and adverse drug reactions.	0	1	2	3	4
8	Managing the drug regimen through monitoring and assessing patient information.	0	1	2	3	4
9	Providing pharmacist-delivered patient care to a diverse patient population.	0	1	2	3	4
10	Providing patient education to a diverse patient population.	0	1	2	3	4
11	Educating the public and health care professionals regarding medical conditions, wellness, dietary supplements, durable medical equipment, and medical and drug devices.	0	1	2	3	4
12	Retrieving, evaluating, managing, and using clinical and scientific publications in the decision-making process.	0	1	2	3	4
13	Accessing, evaluating, and applying information to promote optimal health care.	0	1	2	3	4
14	Ensuring continuity of pharmaceutical care among health care settings.	0	1	2	3	4
15	Participating in discussions and assignments regarding the compliance with accreditation, legal, regulatory/legislative, and safety requirements.	0	1	2	3	4
16	Participating in discussions and assignments regarding the drug approval process and the role of key organizations in public safety and standards setting.	0	1	2	3	4
17	Participating in discussions and assignments concerning key health care policy matters that may affect pharmacy.	0	1	2	3	4
18	Working with the technology used in pharmacy practice.	0	1	2	3	4
19	Preparing and dispensing medications.	0	1	2	3	4

20	Managing systems for storage, preparation, and dispensing of medications.	0	1	2	3	4
21	Allocating and using key resources and supervising pharmacy technical staff.	0	1	2	3	4
22	Participating in purchasing activities.	0	1	2	3	4
23	Creating a business plan to support a patient care service, including determining the need, feasibility, resources, and sources of funding.	0	1	2	3	4
24	Managing the medication use system and applying the systems approach to medication safety.	0	1	2	3	4
25	Participating in the pharmacy's quality improvement program.	0	1	2	3	4
26	Participating in the design, development, marketing, and reimbursement process for new patient services.	0	1	2	3	4
27	Participating in discussions and assignments of human resource management, medication resources management, and pharmacy data management systems, including pharmacy workload and financial performance.	0	1	2	3	4
28	Participating in the pharmacy's planning process.	0	1	2	3	4
29	Conducting a drug use review.	0	1	2	3	4
30	Managing the use of investigational drug products.	0	1	2	3	4
31	Participating in the health system's formulary process.	0	1	2	3	4
32	Participating in therapeutic protocol development.	0	1	2	3	4
33	Participating in the management of medical emergencies.	0	1	2	3	4
34	Performing prospective and retrospective financial and clinical outcomes analyses to support formulary recommendations and therapeutic guideline development.	0	1	2	3	4

1. Explain any changes you would make to enhance this practice experience.
2. What did you like most about the practice experience, why?
3. What did you dislike the most about the practice experience, why?
4. Additional Comments: (this information will only be seen by the Office of Experiential Education and not shared with the subject of this evaluation)

STUDENT EVALUATION OF COURSE
APPE GENERAL MEDICINE/AMBULATORY CARE

UNIVERSITY OF LOUISIANA AT MONROE
SCHOOL OF PHARMACY

Using the scale below, please indicate, on average, how frequently you were exposed to or allowed to participate in the activities below.						
		0	1	2	3	4
		Never/Not applicable	Less than 1 time per week	1-2 times per week	3-4 times per week	Daily or multiple times per day
Pharmacy Student Opportunities						
1	Practicing as a member of an interprofessional team.	0	1	2	3	4
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.	0	1	2	3	4
3	Consulting with patients regarding self-care products.	0	1	2	3	4
4	Recommending prescription and nonprescription medications, dietary supplements, diet, nutrition, traditional nondrug therapies, and complementary and alternative therapies.	0	1	2	3	4
5	Recommending appropriate medication dosing utilizing practical pharmacokinetic principles.	0	1	2	3	4
6	Administering medications where practical and consistent with the practice environment and where legally permitted.	0	1	2	3	4
7	Identifying and reporting medication errors and adverse drug reactions.	0	1	2	3	4
8	Managing the drug regimen through monitoring and assessing patient information.	0	1	2	3	4
9	Providing pharmacist-delivered patient care to a diverse patient population.	0	1	2	3	4
10	Providing patient education to a diverse patient population.	0	1	2	3	4
11	Educating the public and health care professionals regarding medical conditions, wellness, dietary supplements, durable medical equipment, and medical and drug devices.	0	1	2	3	4
12	Retrieving, evaluating, managing, and using clinical and scientific publications in the decision-making process.	0	1	2	3	4
13	Accessing, evaluating, and applying information to promote optimal health care.	0	1	2	3	4
14	Ensuring continuity of pharmaceutical care among health care settings.	0	1	2	3	4
15	Participating in discussions and assignments regarding the compliance with accreditation, legal, regulatory/legislative, and safety requirements.	0	1	2	3	4
16	Participating in discussions and assignments regarding the drug approval process and the role of key organizations in public safety and standards setting.	0	1	2	3	4
17	Participating in discussions and assignments concerning key health care policy matters that may affect pharmacy.	0	1	2	3	4
18	Working with the technology used in pharmacy practice.	0	1	2	3	4

19	Developing and analyzing clinical drug guidelines.	0	1	2	3	4
20	Participating in the health system's formulary process.	0	1	2	3	4
21	Participating in the design, development, marketing, and reimbursement process for new patient services.	0	1	2	3	4
22	Participating in discussions of human resources management, medication resources management, and pharmacy data management systems including pharmacy workload and financial performance.	0	1	2	3	4

1. Explain any changes you would make to enhance this practice experience.
2. What did you like most about the practice experience, why?
3. What did you dislike the most about the practice experience, why?
4. Additional Comments: (this information will only be seen by the Office of Experiential Education and not shared with the subject of this evaluation)

STUDENT EVALUATION OF COURSE
APPE GENERAL ELECTIVE

UNIVERSITY OF LOUISIANA AT MONROE
SCHOOL OF PHARMACY

Using the scale below, please indicate, on average, how frequently you were exposed to or allowed to participate in the activities below.						
		0	1	2	3	4
		Never/Not applicable	Less than 1 time per week	1-2 times per week	3-4 times per week	Daily or multiple times per day
Pharmacy Student Opportunities						
1	Practicing as a member of an interprofessional team.	0	1	2	3	4
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.	0	1	2	3	4
3	Consulting with patients regarding self-care products.	0	1	2	3	4
4	Recommending prescription and nonprescription medications, dietary supplements, diet, nutrition, traditional nondrug therapies, and complementary and alternative therapies.	0	1	2	3	4
5	Recommending appropriate medication dosing utilizing practical pharmacokinetic principles.	0	1	2	3	4
6	Administering medications where practical and consistent with the practice environment and where legally permitted.	0	1	2	3	4
7	Identifying and reporting medication errors and adverse drug reactions.	0	1	2	3	4
8	Managing the drug regimen through monitoring and assessing patient information.	0	1	2	3	4
9	Providing pharmacist-delivered patient care to a diverse patient population.	0	1	2	3	4
10	Providing patient education to a diverse patient population.	0	1	2	3	4
11	Educating the public and health care professionals regarding medical conditions, wellness, dietary supplements, durable medical equipment, and medical and drug devices.	0	1	2	3	4
12	Retrieving, evaluating, managing, and using clinical and scientific publications in the decision-making process.	0	1	2	3	4
13	Accessing, evaluating, and applying information to promote optimal health care.	0	1	2	3	4
14	Ensuring continuity of pharmaceutical care among health care settings.	0	1	2	3	4
15	Participating in discussions and assignments regarding the compliance with accreditation, legal, regulatory/legislative, and safety requirements.	0	1	2	3	4
16	Participating in discussions and assignments regarding the drug approval process and the role of key organizations in public safety and standards setting.	0	1	2	3	4
17	Participating in discussions and assignments concerning key health care policy matters that may affect pharmacy.	0	1	2	3	4
18	Working with the technology used in pharmacy practice.	0	1	2	3	4

1. Explain any changes you would make to enhance this practice experience.
2. What did you like most about the practice experience, why?
3. What did you dislike the most about the practice experience, why?
4. Additional Comments: (this information will only be seen by the Office of Experiential Education and not shared with the subject of this evaluation)