

# BUTLER UNIVERSITY



## COLLEGE OF PHARMACY & HEALTH SCIENCES

### DOCTOR OF PHARMACY PROGRAM IPPE and APPE Rotation Manual 2023-2024

E\*Value Website URL: [www.e-value.net](http://www.e-value.net)

**Website:**

<https://www.butler.edu/pharmacy-health/experiential/>

**Drug Information Center:**

<https://www.butler.edu/pharmacy-health/drug-information-center/>

This manual is subject to change

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## MISSION AND GOALS THE COLLEGE OF PHARMACY AND HEALTH SCIENCES

### ***Our Mission:***

The mission of the College of Pharmacy and Health Sciences is to provide effective educational experiences in the health sciences. By so doing, the College facilitates the development of life-long learners with a liberal arts foundation who are able to serve society as dedicated, competent health professionals and community leaders.

### ***Our Vision:***

Developing today's healthcare leaders to overcome tomorrow's challenges.

### **COPHS Values:**

- **Professionally focused—Inspire with excellence in teaching and model life learning**  
We have a passion for our life work and have dedicated our careers to training the next generation of health care providers and educators. We look for new ways to improve learning and we adapt to the need for new knowledge, skills, and attitudes. We share our practical experiences with our students so that what they learn is directly connected to actual patient care or to our scholarship. We utilize real-life experiences whenever possible so that students develop an appreciation for the patient and the societal variables that add complexity to care of an individual or of a population. As faculty, we have developed a collaborative learning environment and are respectful and supportive of one another.
- **Student focused Dedicated to our students**  
We are dedicated to our students and are committed to their development, both inside and outside the classroom, with teaching advising, project oversight and experiential learning.
- **Patient focused—Dedicated to our patients and our professions**  
We are experienced health care practitioners and investigators who exude a high regard for patient care that transcends to our students. We teach others so our professions can excel and provide better patient care and research each day.

### **Our Goals:**

- **Education and Practice:** Advance the practice of our health care professions and the importance of interdisciplinary approach by providing effective and innovative programs for undergraduate, graduate, and professional level learners.
- **Research and Scholarly Activity:** Conduct focused research and scholarly activity that is consistent with our expertise and tied to student experiences.
- **Public Health, Service, and Leadership:** Foster leadership and service for students, faculty, and staff through public health-related community outreach, university and college service, and involvement in professional organizations.
- **Employer of Choice:** Create an employment environment that provides leadership, personal growth, and resources to be a desired place of employment for the ongoing vitality of our programs.
- **Collaboration:** Develop collaborations to increase the reach and effectiveness of our programs and public health initiatives.

## Pharmacy Program Learning Outcomes

- 1) Acquire knowledge and apply rational decision-making and problem-solving skills:
  - a) Apply foundational pharmaceutical and health-related knowledge.
  - b) Ensure the safe and effective use of medications.
  - c) Provide and promote both patient-centered and population-based care and wellness.
  - d) Assess and analyze data to improve patient care.
- 2) Function as an effective communicator and educator:
  - a) Use appropriate interviewing and counseling skills.
  - b) Engage and collaborate with members of the interprofessional health care team and all applicable audiences.
  - c) Advocate for patients.
- 3) Demonstrate the principles of practice:
  - a) Use fundamental pharmacy practice skills.
  - b) Effectively manage medication use-systems.
- 4) Emulate the principles of professionalism
  - a) Inculcate ethical, legal, and compassionate conduct and values.
  - b) Recognize diversity and demonstrate cultural awareness to diminish health disparities.
  - c) Practice independent learning and self-awareness.
  - d) Use leadership, innovation, and entrepreneurship skills to accomplish goals.

**COLLEGE OF PHARMACY & HEALTH SCIENCES  
POLICY & PROCEDURE**

**POLICY NAME:** Student Criminal Background Checks **POLICY NUMBER:** 30-17  
**SCOPE:** P1-P4 Students **DEPARTMENT RESPONSIBLE:** Pharmacy Practice  
**EFFECTIVE DATE:** June 2010 **REV. DATE:** March 2023

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**POLICY:**

To ensure compliance with site affiliation agreements, all students will complete an online background check annually during the professional phase of the program, and any time requested by a rotation site.

**PROCEDURES:**

Students shall be required to complete an online criminal background check at their own expense through the service provider identified by the Pharmacy Experiential Education Office. The following steps shall be followed:

- Students will upload a copy of the completed report to their ePortfolio.
- Failure to meet the deadline for completion of the criminal background check may result in failure of the associated Interprofessional Education & Professional Development course (e.g., RX301 or RX401) or the Introduction to Rotations course (RX502) and/or removal from the IPPE or APPE rotation schedule.
- Students will not be allowed to begin experiences until the background check has been posted as requested.
- Students with recurrent offenses, drug-related or theft-related offenses will be referred to the Associate Dean for review and potential referral to the COPHS Student Professional Conduct Code.
- When necessary, the Experiential Education Office will discuss specific situations with sites as required by the specified affiliation agreement.

**COLLEGE OF PHARMACY & HEALTH SCIENCES  
POLICY & PROCEDURE**

<b>POLICY NAME:</b>	Site Placement	<b>POLICY NUMBER:</b>	30-20
<b>SCOPE:</b>	P1-P4	<b>DEPARTMENT RESPONSIBLE:</b>	Pharmacy Practice
<b>EFFECTIVE DATE:</b>	May 2019	<b>REV DATE:</b>	March 2023

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**POLICY:** Experiential sites will be assigned by the Experiential Education Office. Although students are allowed input regarding rotation preferences and efforts are made to honor these, the Director of Experiential Education makes the final rotation scheduling decisions. These decisions may be influenced by available resources, program requirements, development of a new rotation preceptor, site and/or rotation type, previous student academic performance, and the student's need for additional learning challenges.

Rotation scheduling changes made after the APPE and IPPE schedules are finalized in spring will only be made based upon preceptor or college/program needs. Emergency requests and accepted university reasons for withdrawal, such as medical or personal leave, will be reviewed on a student-by-student basis; the decision of the Director is final in these cases. No scheduling changes will be made based upon non-emergency student requests. If you wish to discuss an acceptable reason to change a 4-week rotation, **you must first contact the IPPE or APPE coordinator. Students are not permitted to approach the preceptor with any such request.**

**PROCEDURES:**

1. Butler University must have an affiliation agreement on file with the site and the supervisor must be an approved preceptor prior to the student beginning the rotation.
2. **Students are not to contact sites and/or preceptors on their own.** Placement is assigned by the Experiential Education Office.
3. Students must have an active license in the state of placement and a completed criminal background check, all health record requirements, and drug screen for APPE and select IPPE. All necessary documentation should be posted to ePortfolio as instructed. Students must also complete any additional requirements of the site according to the site's instructions and posted deadlines.
4. Labor Laws prevent an employee from doing "volunteer work" at the same place of employment from which an employee receives a paycheck unless the person can show that it is substantially different work than for which the person is getting paid. If the student would like to complete an IPPE or APPE at their site of employment, they must provide a written explanation of how the hours will be different from their current job and must receive approval by the Experiential Education Office in conjunction with their employer prior to completing them.
5. Students will not be placed at any facility where ownership or direct supervision is performed by a family member. Additionally, student family members will not be placed together simultaneously at the same practice site for the same experience type.
6. **IPPE:**
  - Students who do not complete their required IPPE hours will not begin advanced rotations and there may be additional remedial hours required at the discretion of the Experiential Education Office.
  - Students will meet IPPE hour requirements based on graduating class year. The college has the right to modify requirements based on ACPE requirements. Modifications may be imposed at any time.
7. **APPE:**
  - Students will choose from a list of available experiential opportunities.
  - All selections will be made through the optimization process administered by E\*Value.



**COLLEGE OF PHARMACY & HEALTH SCIENCES  
POLICY & PROCEDURE**

<b>POLICY NAME:</b>	Intern License Submission	<b>POLICY NUMBER:</b>	30-04
<b>SCOPE:</b>	P1-P4 Students	<b>DEPARTMENT RESPONSIBLE:</b>	Pharmacy Practice
<b>EFFECTIVE DATE:</b>	June 2010	<b>REV. DATE:</b>	March 2023

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**POLICY:**

To ensure timely documentation of an active intern pharmacist license, each student is required to submit required materials by the assigned deadline. This will include one or both of the following items:

- Active Indiana Board of Pharmacy Intern License
- Out of State - Active Pharmacy Intern License or Technician License as required by other states if scheduled to complete IPPE or APPE rotation(s) outside of Indiana

**PROCEDURES:**

- Students are not allowed to complete a rotation without an active intern license. Therefore, no IPPE or APPE hours can be obtained without a valid license.
- Indiana Intern License
  - P1 students will submit the intern license application during the fall semester. Once instructed, documentation of their active license will be submitted to ePortfolio by the specified due date. Students who do not meet this deadline will receive point deductions in RX301. Failure to submit evidence of licensure may result in failure of RX301 and delayed scheduling of experiential rotations.
  - P2-P3 students will submit documentation of their active license to ePortfolio by **September 15 or the last business day prior to September 15**. Students who do not meet this deadline will receive point deductions in RX400S or RX501. Failure to submit evidence of licensure may result in failure of RX400S or RX501 and delayed scheduling of experiential rotations.
  - P4 students must submit verification of their active license to ePortfolio by September 1 or the last business day before September 1. Students without an active intern license by the midpoint of block 5 cannot proceed to their block 6 rotation. Students may also be required to complete remedial hours at the discretion of the Experiential Education Office.
- Out of State Licenses
  - P1-P4 students will submit verification of their active intern (or technician license depending on state requirement) at least 60 days in advance of their rotation start date to their e-portfolio. Students who do not have their license approved by this date will need to have a discussion with the IPPE or APPE coordinator and may result in a site reassignment.
  - It is the student's responsibility to research the requirements of the state in question. The Experiential Education office suggests starting the application process at least 120 days from the rotation start date.
  - EXCEPTIONS: Students assigned to rotations at out of state government facilities do not require an out of state license as long as they have an active pharmacy license. Examples of government facilities include Veteran Affairs Medical Centers, some Indian Health sites, CDC, FDA and NACDS.
- According to the COPHS student handbook, if a student practices without appropriate credentials (e.g., active intern license, technician license requirements) they are in violation of the professional conduct code and their name will be submitted to COPHS Student Professional Conduct Committee and the Experiential Education Office for further action.

**COLLEGE OF PHARMACY & HEALTH SCIENCES**  
**POLICY & PROCEDURE**

<b>POLICY NAME:</b>	Remediation of Rotations	<b>POLICY NUMBER:</b>	30-10
<b>SCOPE:</b>	P1-P4 Students	<b>DEPARTMENT RESPONSIBLE:</b>	Pharmacy Practice
<b>EFFECTIVE DATE:</b>	April 2012	<b>REV. DATE:</b>	March 2023

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**POLICY:** Students are expected to be prepared daily for their rotation, complete assignments and follow-up activities in a timely manner, as well as function at a professional level consistent with the expectations of the preceptor and site. Preceptors should communicate their individual expectations of performance and professionalism at the beginning of the rotation (during week 1). Any issues related to these items should be immediately communicated to the Experiential Education Office for prompt follow-up.

**PROCEDURES:**

If a student is functioning below the level of expectation, the following procedures take place:

- To pass the rotation, the student will be expected to meet or surpass the expected level of performance and complete all activities at a minimum level of competency.
- If at the end of the rotation period an acceptable level of performance has not been reached, the student will receive a failing assessment for the rotation.
- If during the rotation the student exhibits unprofessional behavior or compromises patient safety, the student will receive a failing assessment for the rotation.
- If the student receives a failing grade in any two experiential (IPPE or APPE) pharmacy rotations, the student will stop forward progress and the case will be referred to COPHS Student Professional Conduct Committee for review under the guidelines of the Academic Progress Policy (COPHS Student Handbook).

Grade appeal process for a failed rotation (also in COPHS Student Handbook):

- First the student shall review the evaluation submitted by the preceptor responsible for the rotation. If the student disagrees with the grade assigned, the student may submit a written appeal within 5 business days of the electronic notification of grades sent by the Experiential Director (through preceptor's completed final evaluation in E\*value). The written appeal will be directed to the Director of Experiential Education.
- If the appeal is denied by the Director of Experiential Education, the student may submit a written appeal to the Department Chair within 5 business days of the notice of denial. When appealing to the Department Chair, the student must also notify the Associate Dean of Academic and Administrative Services.
- If the appeal is denied by the Department Chair, the student may appeal to the COPHS Dean within 5 business days of the notice of denial. Appeals to the Dean must be based on an error of fact. The decision of the Dean is final.
- Students on experiential rotations will continue rotations until the appeal process is complete unless there is documentable concern for patient safety, unprofessional student behavior, if this is a second rotation failure, or if charges of criminal misconduct are pending.
- If the appeal is successful, the grade will be changed to an appropriate grade that is supported by the information provided in the appeal.

Rescheduling rotations:

- If the appeal for a change in grade is unsuccessful and this is the student's first failed rotation, they will be scheduled for a retake of the failed rotation with a Butler faculty member. The students will not be re-scheduled with the preceptor awarding the failing assessment.
- If a student fails the IPPE rotation or has deficiencies in competencies as determined by EEO, the IPPE hours will not count and will need to be repeated at the discretion of the Experiential Education Office and prior to progression to APPE. In addition, the student may be referred to the

Experiential Education Office or the COPHS Student Professional Conduct Code committee for further action.

- The repeat APPE or IPPE will be assigned at a time to be determined by the Experiential Education Office. This may require that the repeat rotation occur in the next academic year (e.g., May) which may result in extra fees for the student. This may also require the student to complete remedial work prior to reassignment of the rotation, as determined by the Director of Experiential Education.
- If the student successfully meets expectations for the repeated rotation, they will be allowed to continue in the program. The failing grade will remain on the transcript and will count negatively toward assessment of satisfactory academic progress.

**COLLEGE OF PHARMACY & HEALTH SCIENCES  
POLICY & PROCEDURE**

<b>POLICY NAME:</b>	Rotation Attendance	<b>POLICY NUMBER:</b>	30-11
<b>SCOPE:</b>	P1-P4 students	<b>DEPARTMENT RESPONSIBLE:</b>	Pharmacy Practice
<b>EFFECTIVE DATE:</b>	April 2003	<b>REV. DATE:</b>	March 2023

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**POLICY:**

- It is mandatory for the student to attend the site and/or complete rotation activities on a daily, full-time basis, for an average of at least 40 hours and no greater than 60 hours per week unless there is specific approval from the EEO. Students are reminded that scheduled hours are at the preceptor's discretion, including nontraditional schedules that may include evening hours or weekends. Students must be prepared for all contingencies.
- If a student knows they are going to be absent more than 2 days of the rotation block, they must email the Director of Experiential Education and have this absence approved by the Experiential Education Office. The student must email the Director at least 4 weeks before the block starts.
- If the student has unplanned absences during the rotation that exceeds 2 days, the student should email the Director within 48 hours of the absence. The Experiential Education Office will also consult the preceptor regarding the absence and make up of hours.

**PROCEDURES:**

- Absences for all introductory and advanced pharmacy practice experiences will be recorded on the evaluation form submitted by the preceptor after each rotation block.
- Because of the intense nature of rotations, students must consult their preceptors for rotation expectations, requirements, and schedules before committing to outside employment or other extracurricular activities.
- The student must inform the preceptor prior to the start of the rotation (preferably during your 2-week email) of known absences. It is up to the preceptor's discretion if these absences are considered excused or unexcused.
- Students must report unplanned absences/tardiness directly to the preceptor utilizing the preceptor's preferred communication and timeline, as noted by the preceptor or in the rotation syllabus.
- **Any time missed from rotation due to any absence is required to be made up.** The format of how this time is made up will be dictated by the preceptor, which may include time made up on weekends, additional projects, and/or other patient-care activities. Students should also plan to make up time during non-rotation blocks, if necessary.
- A student may accumulate up to 2 excused absence days per rotation block and no more than 5 excused absence days for the APPE rotation cycle. If more than 2 absences occur during one rotation block, the preceptor and Experiential Education Office will discuss ramifications, which may include the student receiving an incomplete or failure of the rotation.
- If the student is absent from a preceptor-designated rotation site for reasons other than defined below or cannot produce, upon request, supporting documentation of the below reasons within 72 hours, they will automatically be assigned an unexcused absence. Any unexcused absence may result in the student receiving an incomplete or failure for the experiential activity as determined by the Experiential Education Office in collaboration with the preceptor. Two or more unexcused absences may be considered grounds for dismissal.
- Reasons which constitute excused absences include:
  - Illness
  - Jury duty
  - Religious holidays\*
  - Recognized site holidays
  - Presentation of poster at a state or national meeting (e.g., ASHP or APhA)\*
  - Attendance at a professional meeting\*

- Official representative of Butler at state or national conferences\*
- Residency and/or job interviews\*
- Death of family member

\*Must notify preceptor of these events prior to the start of the rotation.

- All absences (unexcused and excused) will be recorded on the evaluation form completed by the preceptor.
- The Director of Experiential Education may be consulted for an opinion regarding the allowance of an absence.
- If you are not working under the direct supervision of your preceptor/on-site, you are required to communicate with your preceptor or their designee (email, phone, etc.) on a daily basis.
- The following are components of a rotation and count as APPE rotation hours; therefore, students will be permitted to leave a rotation early for attendance at the following. Students must notify preceptor of these events prior to the start of the rotation:
  - Interview Day (if applicable)
  - Residency and Fellowship Showcase (if applicable)
  - Departmental Honors Exam (for selected students by invitation only)

**COLLEGE OF PHARMACY & HEALTH SCIENCES  
POLICY & PROCEDURE**

<b>POLICY NAME:</b> APPE Rotation Materials and Late submission	<b>POLICY NUMBER:</b>	30-27
<b>SCOPE:</b>	P4 Students	<b>DEPARTMENT RESPONSIBLE:</b> Pharmacy Practice
<b>EFFECTIVE DATE:</b>	June 2007	<b>REV. DATE:</b> March 2023

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**POLICY:** To ensure timely documentation of successful completion of rotations, each student is required to submit required materials in a timely manner. This includes an affidavit for each assigned rotation block (signed by preceptor and with intern number). Students are also required to update their ePortfolio with their pre- and post-reflections, quarterly reflections for PPCP and leadership, and rotation documents. This includes the following: midpoint and final evaluation by preceptor, student evaluation of site/preceptor, copy of affidavit, and any written projects completed during the rotation.

**PROCEDURES:**

- Students will turn in required written rotation documentation materials to the Experiential Education Office. This includes an affidavit with the preceptor's original signature (preferred) or electronic signature (in unique situations) which should be submitted by the following deadline: the first day of the second subsequent rotation (i.e., paperwork for rotation block 1 is due by the first day of rotation block 3).
- By the last day of the summer, fall, and spring semesters, all affidavits must be submitted (other than a rotation that the student is currently completing—i.e., block 4 or block 8).
- ePortfolios should be updated by the first day of the next rotation. The Experiential Education Office will check and provide feedback on ePortfolios quarterly (during week 2 of blocks 4,7,10, and 1 week before graduation).

**Late submissions:**

- Students who do not meet the above deadlines will receive an incomplete for that rotation until materials are submitted.
- For the first occurrence of any late submission of materials (affidavit or ePortfolio), a reminder email will be sent to the student and a specified time will be given to submit materials.
- A second occurrence of late submission of materials will require the student to complete a written reflection on time management/professionalism and meet with the Director of Experiential Education.
- A third occurrence may result in referral to the COPHS Student Professional Conduct Code committee for further action.

**COLLEGE OF PHARMACY & HEALTH SCIENCES  
POLICY & PROCEDURE**

<b>POLICY NAME:</b> Permission to participate in commencement activities	<b>POLICY NUMBER:</b> 10-13
<b>SCOPE:</b> P4 Students	<b>DEPARTMENT RESPONSIBLE:</b> Pharmacy Practice
<b>EFFECTIVE DATE:</b> April 23, 2002	<b>REV. DATE:</b> March 2021

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**POLICY:** A student who has not yet completed all degree requirements of their program may be permitted to participate in commencement ceremonies if all the conditions set forth in this policy are met in a timely manner. To receive permission to participate in commencement, a student must have less than 12 hours of coursework (didactic and rotations) remaining. If a student has more than 12 hours of coursework to be completed, they will participate in graduation ceremonies the following year. A P4 student who does not have all their rotation requirements completed on the date final grades are due must request permission from the dean to participate in graduation and hooding ceremonies.

**PROCEDURE:**

For permission to participate in commencement activities, a student must complete the following:

- The student must submit a formal written request to the Associate Dean. The request must be submitted not less than 30 days prior to graduation.
- The Associate Dean will consult with faculty and the student’s advisor to determine if the student can reasonably be expected to complete the requirements within the stated timeframe.
- The decision of the Associate Dean is final.
- A student may not sit for boards until they receive their official diploma from Butler University.

**COLLEGE OF PHARMACY & HEALTH SCIENCES  
POLICY & PROCEDURE**

<b>POLICY NAME:</b>	Needle Stick/Biohazard Procedures	<b>Policy Number:</b>	30-07
<b>SCOPE:</b>	P1-P4 Students, PA students	<b>Departments Responsible:</b>	Pharmacy Practice and PA Program
<b>EFFECTIVE DATE:</b>	May 2008	<b>Rev. Date:</b>	March 2021

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**POLICY:** Students may be involved in activities that expose them to risks associated with blood borne pathogens and hazardous substances. Examples of activities include health fairs, surgical settings, and ambulatory, inpatient, and surgical clinical experiences. The policy is based on standard national guidelines to identify and, if applicable, treat those students who may be exposed to disease related to the accidental exposure. Students will need to discuss site procedures with the preceptor prior to any activities that have the potential of causing a needle stick or exposure to biohazards.

**PROCEDURES:**

• **OFF-CAMPUS EXPOSURE:**

If a student does experience a needle stick or biohazard exposure during their rotation experience, the following steps shall be taken:

- Immediately wash the injury with soap and water and induce bleeding. If the eye is contaminated, rinse with sterile water or normal saline for 15 minutes. Other mucous membranes can be rinsed with tap water.
- Per affiliation agreements, the student will immediately notify the preceptor and determine what procedures exist at that site to deal with needle stick/biohazard situations.
- Based on the services provided at the site, the student should have the appropriate steps taken based on the site's protocol for needle sticks/biohazard exposure. The student will be responsible for any costs associated with testing provided by the site.
- If the site does not have a protocol in place for accidental exposures, the student and preceptor will determine where the nearest emergency room is located so the appropriate laboratory tests can be collected within 30 minutes of exposure. Follow procedures outlined in Section II, ON-CAMPUS Exposure.

• **ON-CAMPUS EXPOSURE: Injury on-the-Job Procedure**

- Butler University chooses **Concentra**, an in-network provider to treat all non-critical on-the-job injuries. **Concentra** has 9 locations available in the Indianapolis area. Check Concentra [website](#) for a map of locations and hours:
  - **Nearest location to Butler available 8 a.m. to 5 p.m.:**  
7301 Georgetown Rd, Suites 109-111, Indianapolis, IN 46268; phone: 317-875-9584
  - **Extended hours location available 7a.m. to 9 p.m.**  
5604 W. 74<sup>th</sup> St., Indianapolis, IN 46278
  - **24hr/7 days (365 days/year) location:**  
5940 Decatur Blvd., Indianapolis, IN 46241; phone: 317-856-2945
- Appropriate laboratory tests are:



- - Student testing:
    - Hepatitis B SAG (Hepatitis B Surface Antigen)
    - Hepatitis C Antibody
    - HIV Antibody (Human immunodeficiency Virus) when consent is given
    - Hepatitis B SAB (Hepatitis B Surface Antibody)
  - Source patient testing:
    - Hepatitis B SAG (Hepatitis B Surface Antigen)
    - Hepatitis C Antibody
    - HIV antibody (Human immunodeficiency Virus) when consent is given
    - Hepatitis B Core Antibody when the exposed patient is HBSAB negative
    - Other tests for confirmation of diagnosis when clinically indicated
- It is critical that the appropriate steps are taken in a timely manner (within 30 minutes of exposure).

### Notification and Follow-Up

- In all cases of exposure, an Exposure Incident Report Form should be completed by the student and submitted to the appropriate faculty as outlined below.
  - In the case of an off-campus exposure, the **Director of Experiential Education** (PA or Pharmacy) shall be informed about all situations involving needle sticks, biohazard exposure, or other hazardous substances within 24 hours of exposure during the course of an assigned clinical experiential rotation.
  - For exposures that occur off-campus during the course of participation in a faculty-supervised health fair or clinic, the faculty member overseeing the students' participation shall be informed of the incident within 24 hours.
  - For on-campus exposures, the Program Director for the academic program in which the student is enrolled (Pharmacy, Physician Assistant, BSHS, Masters in Pharmaceutical Sciences), as well as the faculty advisor (in the case of a club activity-related exposure) or the course director (in the case of a class or laboratory-related exposure) shall be informed of the incident within 24 hours.
  - It should be noted that the Butler University Health Services does not provide initial services but can be used for follow-up if needed to guide follow-up care.

**COLLEGE OF PHARMACY & HEALTH SCIENCES  
POLICY & PROCEDURE**

<b>POLICY NAME:</b>	Drug Screen	<b>Policy Number:</b>	TBD
<b>SCOPE:</b>	P1-P4 Students, PA students	<b>Departments Responsible:</b>	Pharmacy Practice
<b>EFFECTIVE DATE:</b>	May 2023	<b>Rev. Date:</b>	

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### Rationale

Health care providers are entrusted with the health, safety, and welfare of patients, have access to controlled substances, confidential information, and operate in settings that require the exercise of good judgment and ethical behavior. Therefore, there are times when an assessment of the student's possible impairment that could diminish the student's capacity to function in such a setting will be evaluated. This helps to promote the highest level of integrity in patient care.

Clinical facilities that serve as educational and training sites for students increasingly require drug screening for individuals who provide services within the facility and particularly for those individuals who provide patient care. Introductory pharmacy practice experiences (IPPEs) and advanced pharmacy practice experiences (APPEs) are essential elements of the curriculum and are required of the PharmD program. Thus, the Experiential Education Office is required to identify, via drug screening, students who may not be allowed to participate in an IPPE or APPE due to their use of unprescribed or illegal substances.

### Process

All students will be required to undergo a urine drug screen in preparation for their APPEs. There are also specific APPE and IPPE rotation sites that require students to submit drug screening results based on the contractual agreements with those sites. This may occur through the designated vendor, or it is possible that a contract with a specific site may have specific requirements dictating the process, handling, and reporting of "for cause" drug screening of an individual student while the student is participating in their IPPE or APPE.

Students will receive information about the requirement for drug screening, deadlines for compliance, results reporting, and associated fees. Students will be responsible for the cost of required drug screenings. Students who refuse to submit to any required drug screen will be provided to the Associate Dean of Academic and Administrative Services for referral to the Student Professional Conduct Committee as indicated.

The student has the right to review the information reported by the designated vendor for accuracy and completeness and may institute a dispute process with the vendor if they have a question about the validity of the results. This will result in a retest by the vendor of the sample that was provided and would be an additional cost to the student. The student should be prepared to validate any positive results with the vendor within 24 hours of receiving the results of the testing. Failure to respond immediately to these requests could result in disciplinary action, delay in rotation start dates, and/or dismissal from the Program.

Results of the student drug screens are reviewed by the Experiential Education Office (EEO). If a student has a positive drug screen due to unprescribed or illegal substance use (as defined by federal law), the EEO will notify the COPHS Student Professional Conduct Committee, and students are subject to sanctions as outlined in the Substance Abuse section of the Professional Conduct Code as written in the COPHS Student Handbook. The student will also be unable to complete their rotation as scheduled.

Prior to making a final determination that may adversely affect the student, the Experiential Education Office will inform the student of their rights, how to contact the designated vendor to challenge the accuracy of the report, and the role of the designated vendor in any decisions made.

## **Positive Drug Screen Results**

Students who have a positive urine drug screen due to unprescribed or illegal substance use may face disciplinary action, including removal from the rotation and sanctions as assigned by the COPHS Student Professional Conduct Committee. Students may be referred for evaluation and treatment as a condition for remaining in the program. Costs incurred are the responsibility of the student.

## STUDENT RESPONSIBILITIES FOR EXPERIENTIAL EDUCATION EXPERIENCES

### **Requirements for Participation in Rotations:**

- Before beginning rotations, all curriculum prerequisites must be met or waived by petition.
- Students must agree to comply with all policies provided in this document, the COPHS Student Handbook, and the Butler University Student Handbook.
- Valid Indiana internship license or license in the state that rotations will be completed
- Criminal background check results within the calendar year (some sites may require an additional background check)
- Complete health-related requirements and documentation posted to the ePortfolio according to posted instructions & deadlines
  - P1 Health Requirements:
    - Documented receipt of annual influenza vaccine
    - Updated Td or Tdap vaccination and documentation, as needed
  - P2 & P3 Health Requirements:
    - Documented receipt of annual influenza vaccine
    - Updated Td or Tdap vaccination and documentation, as needed
    - Complete & documented quantitative immunologic titer collection for (hepatitis B virus, measles (rubeola), mumps, and rubella viruses, and varicella virus (varicella-zoster virus)
    - Documented receipt of all necessary vaccines according to the initial immunologic titer results
    - Completion and documentation of any additional required titers according to the initial titer results
    - Complete & documented interferon gamma release assay (IGRA) collection
    - Complete a 5-panel drug screen (all of P3 and only P2 as required by site)
  - Completion of any additional site-specific onboarding requirements according to the sites' instructions and deadlines
  - HIPAA training documentation required for P1-P4 (some sites may require additional HIPAA training)
  - Bloodborne Pathogens training documentation
  - Valid Basic Life Support (BLS) certification & documentation by the American Red Cross or the American Heart Association
  - Documentation of health insurance coverage while on rotations
  - IPPE only: Completion and submission of the IPPE Rotation Placement Agreement according to posted instructions and deadlines
  - APPE only: Verification of course self-registration for Summer, Fall, and Spring semesters by dates specified by the Experiential Education Office.

### **Requirements for ePortfolio:**

- Students are required to create, maintain, and update the information in their ePortfolio via WordPress each year (P1-P4). Students are expected to grant access to and send a link for the ePortfolio to their preceptor 2 weeks prior to the rotation.
- Students should also discuss the contents of their ePortfolio with their rotation preceptors at the beginning of each rotation. This provides an introduction between student and preceptor, assists the student and preceptor in discussing shared expectations for their rotation experience, and helps students share their experiences and accomplishments.

- This portfolio serves as a compilation of a student's work and should contain a representative sample of work from all rotation blocks. It is a reference for the student, preceptors, and potential employers or residency directors.
- The Experiential Education Office reserves the right to review the student's ePortfolios at any time and will send e-mails to students who are not compliant with ePortfolio requirements.

Information required to be retained in student ePortfolios includes the following:

- Personal contact information (current email and phone number)
- Biography
- Professional picture
- Criminal background check results
- Drug screen results
- Emergency contact information
- Current Health & Immunizations Record
- Health insurance coverage documentation
- Current resume (P1) or CV (P2-P4)
- Proof of valid intern license
- Proof of any out of state licenses (and any relevant paperwork)
- Valid BLS Certification
- Documentation of HIPAA training
- Documentation of Bloodborne Pathogens training
- Immunization Certification (if student is certified)

Each IPPE and APPE rotation section must also include the following:

- Midpoint evaluation
- Final evaluation of student
- Final evaluation of site/preceptor
- Copy of Affidavit (for APPE only)
- Any presentations and projects completed such as:
  - Formal presentation
  - Case presentation
  - Journal Club presentation
  - Topic discussions
  - CE/In-service
  - Care plans
  - Protocols
  - Articles (authored or published)
  - Drug information questions
  - Health topic reports
  - Patient education materials
  - Health care professional materials
- Reflective writing blog entries in paragraph form, **minimum of 100 words for each question**
  - Pre-rotation question(s)
  - Post-rotation question(s)
  - Quarterly leadership reflections (APPE only)
  - Quarterly PPCP reflections (APPE only)

### **Assessment:**

Student assessment and evaluation is the joint responsibility of the preceptor and student. Student assessment is an ongoing process that requires continuous, constructive feedback and demonstrated competency. In addition to informal assessments, there are two formal assessments for each rotation completed via E\*Value: midpoint and final evaluation.

- **Midpoint Evaluation:** Preceptors will complete a midpoint evaluation of the student. Students are not required to complete a midpoint evaluation but may be asked by the preceptor to self-assess their performance to date. Preceptors and students should both contribute to the plan of action.
- **Final Evaluation:** Preceptors will complete a final evaluation of the student. Student will, in turn, complete a final evaluation of the preceptor/site. Students are encouraged to share this evaluation with their preceptor during their last day assessment. Please note there are 3 confidential questions included in the evaluation that are not visible by the preceptor.

If students have any concerns while on their rotation, they should reach out to the Director of Experiential Education and/or complete a concern card on E\*value. The concern card is only sent to the Director of Experiential Education and is not visible to the preceptor.

### **Attendance:**

Refer to the Rotation Attendance Policy at the beginning of the IPPE and APPE rotation manual.

### **Professional Appearance and Attire Guidelines: (refer also to student handbook):**

Students are to dress professionally at experiential sites as outlined in the student handbook. Sites may have specific requirements and it will be the student's responsibility to ask each preceptor about appropriate attire. The dress code is enforced for the acceptability of the patients and the assigned site, and as an expression of your professionalism. Students with attire considered unprofessional by the preceptor may be sent home for the day and will be required to make up all missed time.

Attire considered professional includes:

- Dress shirts with or without a tie. Shirts should not expose shoulders, backs or midribs.
- Layers such as cardigans or quarter-zip sweatshirts are appropriate when temperature dictates as such, but hoodies and athletic sweatshirts are not preferred.
- Leggings or tights are not to be worn in place of pants but can be appropriate when worn under a dress or tunic.
- The length of skirt or dress must exceed the length of the white lab coat.
- Clean, neat, ironed white lab coat - unless it is not worn based upon practice location (e.g., pediatrics, psychiatry); preferred length is no longer than mid-thigh.
- Butler COPHS name tag and/or assigned badge (to be worn at all times within the institution).
- Socks/hosiery required (for health & safety purposes).
- Shoes should be appropriate, comfortable, and closed toed/closed back (no sandals or slip-ons). Shoes should match your professional attire as determined by your preceptor and site.
- Scrubs, as determined by preceptor and site, may be worn. White coats may be required over scrubs. If scrubs are not unacceptable for the practice setting, they should not be worn.
- Body Piercing and/or tattoos: adhere to site policies that address body piercing and/or tattoos.
- All students must always be clean, well groomed, and wear clothing that is not ripped or torn and devoid of large logos, advertising, or slogans.

### **Student Outside Employment: (refer also to student handbook):**

Students need to be reminded that rotations are courses and, therefore, have equivalent requirements of attendance, proper daily preparation, appropriate and timely completion of assignments, and appropriate professional behavior. It should be remembered that rotations also require the completion of “homework”, and that appropriate time, effort and preparation are necessary, as with any other course. Students are required to spend an average of 40 hours per week at the site and/or engaged in rotation activities. Additional time beyond that may be required at the site and, definitely, on your “own” time. Time on rotations and “homework” is your opportunity to fill those “gaps” that you have in your didactic knowledge base. Site schedules may include evenings and weekends and experiential experiences must always take first priority over outside employment. Outside employment is not an excuse for altering site schedules. Because of the intensive nature and required daily preparation for rotations, outside work/employment is strongly discouraged. Rotations are more intensive than semester courses and outside activities/employment will interfere with meeting quality expectations of rotations and will jeopardize your grade. Any decline in academic performance is sufficient justification for the Academic Progression Committee to evaluate critically the extent of time a student should devote to a part-time job.

### **Inclement Weather:**

Students will follow the attendance procedure as dictated by the individual preceptor(s) at the practice sites in the event of inclement weather. If the student is unable to attend the site due to a delayed or cancelled opening, the missed time will need to be made up as described in the absence policy (i.e., at the preceptor’s discretion). Students on Introductory or Advanced Pharmacy Practice Experiences should contact their preceptor regarding any weather-related absences.

### **Personal Emergencies:**

In the event of an emergency, the student should call the Experiential Education Office as well as the preceptor at site to make them aware of the situation. This policy refers to legitimate emergencies and not routine illnesses or absences referred to in the attendance policy.

### **Confidentiality:**

Patient confidentiality is a basic patient right and must be maintained at all times in accordance with HIPAA, state regulations, and COPHS policies. Students should be aware of and follow any site-specific policies regarding confidentiality, which includes policies regarding social media. Discussion of patient specific information must take place in areas where confidentiality can be maintained (e.g., not in cafeteria/elevator) It is considered a breach of confidentiality if a student reveals information about a patient (even if a name is not given) in conversation with friends, etc. outside the institution. Students are reminded that no identifying patient information should be removed from the site (i.e., taken home) or given in case presentations or patient discussions. A chart/patient record is only to be reviewed as a learning resource, and only if the student is following the care of that patient. Chart review of acquaintances, people in the news, etc. is not allowed unless the student is directly involved with the care of that patient. Students are strictly prohibited from viewing their own records, as well as records of their family members. Intentional, repeated, and serious breaches of confidentiality by a student will be reported and evaluated by COPHS Student Professional Conduct Code Committee for further action.

**Legal Responsibilities:**

It is the student's responsibility to be aware of and follow all state and federal laws relating to the practice of pharmacy. The students are expected to know the legal practice guidelines for the professional situations within which they will be working. If the student is unsure about the regulations regarding their practice site, they should confer with the preceptor. Legal violations will be evaluated for severity and addressed at the time of grade assignment. A major violation could result in the failure of the rotation and/or termination of the program.

**Ethics:**

The practice of pharmacy is founded on ethical behavior. The principles of ethics are based on moral obligation, virtues, and responsibilities of a pharmacist to their patients. Respect, compassion, confidentiality, dignity, honesty, and integrity are all components of ethical behavior. As a student at Butler University College of Pharmacy and Health Sciences, you represent yourself, the college, and the profession of pharmacy. Ethical and professional behavior is mandated, and unethical behaviors will not be tolerated. If a student is found to be in violation of basic ethical principles, the infraction will be evaluated and will be referred to the Academic and Professional Affairs committee for further action.

**Professionalism:** (also refer to Professional Conduct Code in Student Handbook)

Students are reminded to refer to COPHS Student Handbook regarding Professional Conduct Code. As student pharmacists, all enrollees in COPHS professional rotations are expected to adhere to professional decorum in all activities as defined by the site and the COPHS program. As professionals, students are responsible for their own attendance, preparedness, handling of common COPHS resources and equipment, participation, and ultimately their performance on rotation.

Professionalism describes the attitudes, values, and behaviors expected of a health care professional. The attributes of professionalism are knowledge and skills, commitment to self-improvement, service orientation, pride in the profession, covenantal relationships, creativity and innovation, conscience and trustworthiness, accountability, ethical sound decision making, and leadership.

Students must maintain a positive attitude toward patients, guests, coworkers, healthcare professionals, and their clinical faculty preceptor. Using flexibility and understanding during unforeseen occurrences and events, students will develop a broader knowledge base and enhanced personal growth. Student attitude will be evaluated and be considered as a part of the final evaluation/grade. Students with questions regarding professionalism may refer to the student handbook.

Students will treat all people with whom they interact with dignity and importance. Students will respect the diversity of background and ideas for those persons, whether patients, family members, other healthcare professionals, or casual observers involved in any situations the students may find themselves. Students will be sensitive to and consider the differences these people bring to a situation. Students will evaluate these differences in a positive manner and use them as a learning experience. Uncomfortable situations should be discussed with the preceptor, and the preceptor should give the students feedback regarding acceptable behavior in situations that may arise.

If a student repeatedly acts in a manner that does not show respect to those involved, this behavior will be evaluated, and may result in failure of the rotation—refer to procedures to be followed upon alleged violation of the professional conduct code in the Student Handbook.



### **Academic Integrity:**

Academic dishonesty in all its manifestations is unacceptable behavior and is inconsistent with the professional integrity necessary to be a health care practitioner. Students must be fully aware of what constitutes academic dishonesty; claims of ignorance cannot be used to justify or rationalize dishonest acts. Behaviors which constitute academic dishonesty are clearly described in the Professional Conduct Code of the College which is contained in the COPHS Student Handbook and in Canvas under the COPHS Community Resources section. Students in COPHS courses are expected to read and to abide by this policy. The procedures outlined in this policy will be followed should any breach of academic integrity occur in this course.

### **Plagiarism:**

Plagiarism is defined as “the unauthorized use or close imitation of the language and thoughts of another author and the representation of them as one’s own original work.” This includes lecture materials (e.g., slides, handouts, charts) created by faculty members. Appropriate paraphrasing and proper referencing are necessary to avoid plagiarism. Please refer to the COPHS Citation Guide, available in the COPHS Community Resources section of Canvas, for proper referencing/citation formats. Students in COPHS courses are expected to read these guidelines and adhere to them in the submission of all written assignments. All instances of plagiarism will be addressed as outlined in the COPHS Professional Conduct Code.

### **Intellectual Property:**

Any outside use, reproduction or mixing of audio and video materials recorded by students or faculty as part of a course is forbidden without the express written consent of the course instructor and all parties involved in the recording. This includes use in ePortfolios or on social media and internet sites such as YouTube or Facebook, etc. For additional information on copyright and intellectual property [click here](#). Violation of this policy will be considered a violation of the COPHS Professional Conduct code. Such a code violation will result in appropriate sanctions by the COPHS Professional Conduct Code committee.

### **Communication:**

Protocol for Sending Email Communications: Students are expected to address administrators, faculty and staff, preceptors and other healthcare professionals using their proper titles. In addition, the subject line must be filled in with the reason for the email. Students should always use their BU email account for this purpose. If a student uses their personal email account, the College of Pharmacy is not responsible for the loss or breach of confidential information. Common courtesy dictates that emails end with a proper closing such as “thank you”, “regards” or other suitable statement. The sender should always close signing their complete name, Class Year, and if a student organization officer, their title. As a rule, students should check their Butler email account twice per day, once first thing in the morning and once late in the afternoon, each day. This includes non-rotation blocks and University closures. Students are expected to maintain their Butler email account and are responsible for messages sent to and from their account. Many faculty, staff and students will use this medium to converse, post important information, and provide updates.

### **Technology:**

The personal use of cell phones and other electronic devices for phone calls, text messaging or web surfing while on rotations is not allowed. Communication by text may only be used if it is the preferred form of communication by the preceptor. Engaging in social media is not acceptable during student learning. Using phones for drug information questions and research is at the discretion of the site/ preceptor. Preceptors are encouraged to discipline students accordingly if such situations arise during the course of a rotation.

**Accommodations for Disabilities:**

It is the policy and practice of Butler University to provide reasonable accommodations for students with properly documented disabilities. Written notification from Student Disability Services is required. If you are eligible to receive an accommodation and would like to request it for this course, please contact Student Disability Services. Allow one-week advance notice to ensure enough time for reasonable accommodations to be made. Otherwise, it is not guaranteed that the accommodation can be provided on a timely basis. Students who have questions about Student Disability Services or who have, or think they may have, a disability (psychiatric, attentional, learning, vision, hearing, physical, medical, etc.) are invited to contact Student Disability Services for a confidential discussion in Jordan Hall, Room 136 or by phone at 317-940-9308.

**Reporting Discrimination or Harassment:**

Butler University is committed to fostering safe and productive living, learning, and working environments free from discrimination and harassment. Faculty members are expected to report any incident of discrimination and/or harassment that students may report to them. Any sex/gender-related incident reported to a faculty member will be in turn reported to the Title IX Coordinator or designee; any non-sex/gender-related incident reported to a faculty member will, in turn, be reported to the Associate Vice President for Human Resources or designee. The Title IX Coordinator or Associate Vice President for Human Resources or designee will then reach out to the reporting student for further discussion. If you would like to speak with someone confidentially who will not be required to report whatever you share, there are several resources available, including the Sexual Assault Response and Prevention Specialist, Counseling and Consultation Services, and ordained clergy providing pastoral care in the Center for Faith and Vocation. Information about these and other resources can be found at [www.butler.edu/sexual-misconduct](http://www.butler.edu/sexual-misconduct) or [www.butler.edu/bias](http://www.butler.edu/bias).

**Drug/Alcohol Abuse Policy:** All COPHS students must adhere to the drug/alcohol abuse policies outlined in the Butler University Student Handbook and the COPHS Student Handbook.

## STUDENT GUIDELINES FOR ROTATION COMPLETION

### **TWO WEEKS BEFORE START OF ROTATION:**

- I. Contact preceptor, at minimum, two weeks prior to the start of a rotation. Be sure to communicate directly with your preceptor. If the name of the preceptor has changed, please contact the appropriate Experiential Education staff (IPPE—Ms. Alison Carrico; APPE—Mrs. Juli Nichols-Shelp) so that E\*Value can be updated, and appropriate material can be sent to the preceptor.
- II. You will need to add your preceptor as a user to your ePortfolio to ensure they have access prior to sending your email with the link to your ePortfolio.
- III. Verify the following in your email (remove not applicable information, such as directions for virtual rotations):
  - Directions to site
  - Where to park on the first day and if there is a fee to park
  - Where to meet the preceptor on the first day
  - What to bring
  - What type of attire should be worn
  - Recommendations for additional ways to prepare for the rotation
  - Any additional information that may be required prior to the start of the rotation

**Note:** Some preceptors may request a meeting before the rotation or may ask you to call them closer to the start date. Some sites will contact you weeks or months prior to your rotation start with specific requirements. Complete them as assigned within the requested time frame. Failure to meet deadlines may result in your inability to complete a rotation as assigned. A new rotation would then be assigned by the Experiential Education Office and scheduled either during your non-rotation block or at the end of your rotation year, if necessary.

### **FIRST DAY:**

- Review your ePortfolio with your preceptor.
- Discuss rotation requirements and expectations, evaluation criteria, and desired outcomes (for student and preceptor), schedule, etc. with your preceptor
- Required institutional/department orientation (may not be required at all sites)

### **DURING ROTATION:**

- Follow attendance policy noted in Rotation Manual.
- Butler student name tags must always be worn. Some sites may require additional ID tags for institutional security purposes.
- Communication is very important while on rotations. It is the student's responsibility to check Butler email and reply appropriately within 24 hours of a request throughout the school year (even during non-rotation blocks).

### **LAST DAY (OR BEFORE):**

- Complete final evaluation of preceptor/site.
- Share feedback with your preceptor.

## **END OF ROTATION:**

For APPE only: Students need to submit their affidavit with the preceptor's signature (this can be an original or electronic signature). Each section of the affidavit must be completed and typed or printed in blue or black ink. The affidavit should be submitted either via the drop box (outside of PHSB 203) or via mail to Krissy Haganman after completion of the rotation. The affidavit form is available on page 61 of the rotation manual.

Krissy Haganman  
Pharmacy Experiential Academic Program Coordinator  
Butler University, CPHS  
4600 Sunset Avenue  
Indianapolis, IN 46208-3485

## **PHARMACIST LICENSE APPLICATION INFORMATION**

Students preparing to graduate should begin the application process for their pharmacist license(s) approximately two to three months before graduation. Important licensing information can be found at the following sites:

- I. Indiana application for Pharmacist License  
[www.IN.gov/pla](http://www.IN.gov/pla)
- II. Registration for the NAPLEX (North American Pharmacist Licensure Examination) and MPJE (Multistate Pharmacy Jurisprudence Examination)  
<https://nabp.pharmacy/>

Refer to Canvas RX502 for updated information and instructions regarding the application process. It is recommended that students review the Board of Pharmacy websites for any state specific information. Contact Ms. Alison Carrico for any licensing questions.

## PRECEPTOR EXPECTATIONS

Welcome to another year of Butler University College of Pharmacy & Health Sciences IPPE and APPE rotations and thank you for your participation. Without your interest and support, our students would not have the opportunity to experience and practice patient and pharmaceutical care. We appreciate your serving as a role model for our students as they learn and develop under your capable guidance.

We utilize a computerized rotation management system, E\*Value. The Rotation Manual is available online at [www.e-value.net](http://www.e-value.net). We also utilize a computerized ePortfolio system for our students, WordPress. Students will share their ePortfolio links with preceptors.

### Oversight/Supervision:

- Students are required to be supervised by a licensed health care professional while performing patient care activities which includes preparation and dispensing of medication orders and prescriptions.
- Preceptors should provide time devoted to the student.

### Communication:

- The preceptor should review the student's ePortfolio prior to or on day 1 to determine the student's goals and areas of interest for the rotation experience.
- The preceptor should communicate all rotation expectations and assessment methods with the student during orientation.
- The students should receive an orientation to the site and the computer system.
- A rotation calendar including dates for rotation activities (e.g., rounds, projects, topic discussions) is highly encouraged.
- The preceptor should maintain an open line of communication (if not through direct contact, through email/phone) with students on a daily basis.

### Mentoring:

- Preceptors should serve as a role model for the students and for the profession of pharmacy.
- As a role model, preceptors are encouraged to hold students accountable for behavior, performance, and attainment of all course objectives.
- Preceptors should encourage students to engage in active learning and provide regular feedback with guidance on self-improvement.

### Preceptor Expectations of the Student:

- The "Student responsibilities" section of the manual outlines the minimum expectations the preceptor should have of the students' behavior, attitude, and expectations. Each site may have their own list of rules and expectations and preceptors should provide these to students at the start of the rotation.
- Student attendance is required. Please refer to the attendance policy in the Rotation Manual.
- Students are required to spend a minimum of 40 hours/week and a maximum of 60 hours/week on rotations. Students are aware that additional time, both on and off site, may be necessary; however, our students may have additional commitments (such as MBA classes or PharmD projects) and may need to request your cooperation to balance these with their rotation requirements. **The best way is often for the preceptor and student to discuss time commitments required for the next four weeks at the start of the rotation.**

**Student Relationship:**

Preceptors should develop a professional relationship based on the teacher-student model rather than the typical employer-employee relationship. Students are not to be compensated by the facility for any experiential activity which the student may receive academic credit from Butler University. Preceptors are cautioned that fraternization may endanger the teacher-student relationship.

**Conflict Resolution:**

- Preceptors and students must attempt to resolve any conflicts that may develop.
- In the event there is a conflict between preceptor and student that cannot be resolved without intervention, the Experiential Education Office should be notified as soon as possible.
- If resolution is not a viable alternative, the student may be reassigned to another preceptor or site.

**Evaluation and Assessment:**

- Student assessment and evaluation is the responsibility of the preceptor and student.
- Student assessment is an ongoing process that requires continuous, constructive feedback to ensure student competency.
- Feedback should be solicited from staff and other health care providers who have substantial interaction with the student.
- Formal assessment occurs at the midpoint and end of rotation.
- Final evaluations must be completed in E\*Value within five business days of a student's completion of their experiential activities. Ideally, the evaluation should be completed and shared with the student on the last day of the rotation. Preceptors are also encouraged to ask for student feedback regarding the student's rotation experience.
- Informal assessment and feedback can also be completed at any time through Ad-Hoc evaluations available in E\*Value.
- In all rotations, students are assessed on their General Professional Skills and Rotation Specific Activities.
- Preceptors may access their evaluation summaries at any time.

**Syllabi Template Information:**

- Syllabi templates are available for all required IPPEs and APPEs and can be found in the Appendix of this rotation manual. Each syllabus contains basic competencies/outcomes necessary for a student to achieve basic practice performance and understanding in that area.
- The competencies/outcomes listed in the syllabi have been identified as practice concepts/activities to which the student needs exposure and practice to succeed in current and future pharmacy environments.
- These identified competencies also serve as the evaluation outcomes for the rotation. In this way, the objectives truly are reflected in the evaluation criteria (see "Explanation of Student Evaluation/ Grading" and the corresponding forms for specifics).
- Preceptors are required to utilize all information in the syllabus template but can add any additional information or requirements for their specific rotation. For quality assurance, the Experiential Education Office is required to have a copy of your syllabus on file. We also ask that you use our grading format and assessment sheet.
- All preceptors are reminded that the syllabus templates represent the minimum course outcomes and objectives. Preceptors can enhance the minimum requirements or necessitate the completion of additional objectives by the student.

### **Introductory Pharmacy Practice Experience Grading Policy:**

IPPE will be graded on a pass or fail basis. Student performance is assessed in technical, clinical, and professional learning outcomes using a scale of Needs Improvement, Meets Expectations, and Not Applicable. Student performance should be assessed based on their pharmacy education level completed before the rotation. Any student who does not “meet expectations” within the **professional learning objectives** will be required to meet with the APPE-readiness Coordinator and will be required to develop an action plan to meet expectations for any applicable learning outcomes. Students assessed at a level of “Needs Improvement” for multiple learning outcomes will be required to meet with the APPE Readiness Coordinator and will be required to develop an action plan to meet any of the unmet learning objectives. This may require additional classroom or site-based activities to ensure the student possesses the appropriate level of preparation prior to APPE rotations.

### **IPPE Automatic Failure:**

- Breaches patient confidentiality or violates policies of the site.
- Displays skills, abilities, and/or knowledge areas that are significantly below expectations for the students’ current level of pharmacy education and are a concern for patient care.
- Professional behavior is inappropriate and/or unethical (e.g., any unexcused absence, inappropriate written/verbal communication or behavior).

If a student fails an IPPE rotation, the completed hours will not count towards the IPPE hour requirement, and the rotation will need to be repeated (see remediation/retake policy). The student will not be eligible for APPE lottery rotations (APPE rotations that are highly requested and have very limited number of available spots) and may be required to complete additional remedial hours at the discretion of the Experiential Education Office and may be submitted to COPHS Student Professional Conduct Code and APPE Readiness Coordinator for further action.

### **IPPE Referral Process:**

On the final student evaluation, preceptors may recommend student referral to the Experiential Education Office for any of the following: professionalism, time management, communication, problem solving, and drug information. Students will be required to meet with the APPE Readiness Coordinator to discuss the identified problem(s) and come up with an action plan for improvement. Referral may include the following: additional assignments or activities to help the student improve, additional assessments to verify improvement, or referral to the learning resource center, etc.

### **Advanced Pharmacy Practice Experience Grading Policy:**

- The final evaluation consists of 2 different sections: (1) Professional and Work Ethic and (2) Pharmacy Entrustable Professional Activities.
- Student must be able to meet expectations in each of the areas specified in order to graduate. Since it is expected that students will improve skills in these areas as the year progresses, preceptors are urged to grade a student without regard to whether this is the student’s first or last rotation. In this way, students will better appreciate the areas for which further attention is required.
- Students' performance on the Professional and Work Ethic section on items are evaluated with the following grading scale: (**C**) Consistently, (**I**) Inconsistently, (**N**) Never. Comments are required for any scores of “inconsistently” or “never”.
- Students' performance on the Pharmacy Entrustable Professional Activities section will be evaluated on items in this section using the grading scale below. Comments are required for any scores of “below expectations” or “fail.”

<b>Exceeds Expectations</b>	Ready for supervision at a distance. I trust the learner to completely and accurately...
<b>Meets Expectations</b>	Ready for reactive supervision. I trust the learner, with limited correction, to...
<b>Below Expectations</b>	Ready for direct, proactive supervision. Learner requires direct supervision and frequent correction, to...
<b>Fail</b>	I do not trust the learner to...

- Overall performance:
  - Preceptors are asked to evaluate the student’s overall performance as “pass” or “fail”.
  - This reflects not only entrustable professional activities, but also professionalism.
  - It is suggested that if the preceptor feels the student is not capable of functioning as a pharmacist, it should be reflected in the evaluation and may be grounds for failure of the rotation.
  - In addition, the preceptor should review the below list of automatic failures below prior to assigning a final grade and contact the Experiential Education Office if they have any questions.
- Automatic failures:
  - Breaches patient confidentiality or violates policies of the site.
  - Did not meet requirements and expectations outlined by the preceptor in the corrected plan of action.
  - Displays skills, abilities, and/or knowledge areas that require significant improvement and are a concern for patient care.
  - Professional behavior is inappropriate and/or unethical (e.g., exceeds absences allowed, inappropriate language or communication)

### **APPE Skills-based Competencies**

- The competency checklist was developed around the concept that a student needs to demonstrate specific competencies prior to graduation.
- It is not necessary for students to attain all these skills on any one rotation; however, the student needs feedback monthly in each of the competency areas so that they may attain the requisite knowledge, skills, and attitudes prior to graduation.
- The level of competency or achievement is set at a level that is minimally necessary for competent practice as a pharmacist in that particular practice setting. The student’s level of practice should show performance that provides safe and effective patient care in the defined areas.
- Please see Appendix for skills-based competency form.

### **APPE Monitoring and Referral Process**

- On the final student evaluation, preceptors may recommend monitoring or referral to the Experiential Education Office for any of the following: professionalism, time management, communication, and drug information. Students must meet with the Director of Experiential Education and Preceptor Development to discuss the identified problem and produce a longitudinal plan for improvement.
- For monitoring, this includes but is not limited to: (1) continued monitoring of the identified area by the Experiential Education Office (with the goal that the student should receive meets or exceeds



- expectations for the remainder of rotation experiences), (2) additional assignments to help the student improve.
- For referral, this includes (but is not limited to): additional assignments or activities to help the student improve, additional assessments to verify improvement, or referral to the learning resource center.
- If a student fails a rotation and the preceptor has concern that a student has significant knowledge deficits, the preceptor may suggest that additional therapeutic topics be discussed prior to the student's retake of the rotation.

## **ROTATION SCHEDULE**

For the 2023-2024 Academic Year:

Block 1: May 8 – June 2, 2023

Block 2: June 5 – June 30, 2023

Block 3: July 3- July 28, 2023

Block 4: July 31 – Aug 25, 2023

Block 5: Aug 28 – Sept 22, 2023

Block 6: Sept 25 – Oct 20, 2023

Block 7: Oct 23 – Nov 17, 2023

Block 8: Nov 20 – Dec 15, 2023

Block 9: Jan 1 – Jan 26, 2024

Block 10: Jan 29 – Feb 23, 2024

Block 11: Feb 26 – March 22, 2024

Block 12: March 25 – April 19, 2024

## **REQUIRED ROTATIONS**

### IPPE

- Students complete 160 hours of community practice experience during the summer after successfully completing their first professional (P1) year.
- Students complete 160 hours of institutional practice experience during the summer or as a longitudinal experience after successfully completing their second professional (P2) year.
- Throughout the professional curriculum, students have additional course assignments and patient care simulation exercises that prepare them for their introductory pharmacy practice experiences.

### APPE

- A total of 10 APPEs (minimum of 1600 hrs.) are required for all students. Required rotations are listed below.

Required APPEs: (for students not on concentrations or dual degrees)

- 1 General Medicine
- 1 Acute Care Inpatient
- 1 Hospital/Health System
- 1 Ambulatory Care
- 2 Community Practice
- 2 Patient Care Elective (in-patient or out-patient)

- 2 Elective rotations (either patient care or non-patient care)

Required APPEs for Medical Spanish Concentration:

- Same requirements as above.
- 1 patient care elective will be at an underserved site that is Spanish speaking (i.e., Shalom, Timmy Foundation Trip)

Required APPEs for Pharmaceutical Sciences and Patient Care Research Concentrations:

- 1 General Medicine
- 1 Acute Care Inpatient
- 1 Hospital/Health System
- 1 Ambulatory Care
- 2 Community Practice
- 1 Patient Care Elective (Pharm Sciences) or 1 Patient Care or Non-Patient Care Elective (Patient Care)
- 3 Pharmaceutical Sciences Research or Patient Care Research

Required APPEs for PharmD/MBA:

- 1 General Medicine
- 1 Acute Care Inpatient
- 1 Hospital/Health System
- 1 Ambulatory Care
- 2 Community Practice
- 2 Patient Care Elective (in-patient or out-patient)
- 2 Administrative/Management Rotations (RX651, RX675, RX693, RX671, and specified RX699)

**LISTING OF CURRENTLY OFFERED APPEs**

RX 650	Academic Experience
RX 651	Administration, Law, and Management
RX 652	Advanced Ambulatory Care*
RX 655	Compounding**
RX 657	Ambulatory Care*
RX 658	Cardiology*
RX 660	Patient Care Research
RX 661	Community Practice*
RX 662	Critical Care*
RX 664	Drug Information
RX 665	Emergency Medicine and Trauma*
RX 666	General Medicine*
RX 667	Geriatrics*
RX 670	Home Healthcare*
RX 671	Industrial Pharmacy
RX 672	Infectious Disease*
RX 674	Long Term Care**
RX 675	Managed Care/Health Policy**
RX 677	Neurology*
RX 678	Nutrition Support*

RX 679	Oncology*
RX 680	Pharmaceutical Sciences Research
RX 681	Neonatology*
RX 682	Pediatrics*
RX 686	Pharmacy Systems and Technology
RX 687	Poison Control and Toxicology**
RX 688	Pulmonary*
RX 690	Psychiatry and Neuropsychology*
RX 691	Radiopharmaceuticals
RX 692	Underserved Clinic Experience*
RX 693	State Board/Associations of Pharmacy
RX 694	Surgery*
RX 695	Transplantation*
RX 696	Women's Health*
RX 699	Special Topics/ Elective in Pharmacy Practice**

## SKILLS-BASED COMPETENCY LIST

**Note: Students are required to complete each competency ONCE prior to graduation. Students must perform or demonstrate the skill “at the level of an entry-level pharmacist.” This form is listed for student and preceptor reference only. Competencies will be completed and verified through E\*Value.**

Clinical Competency Statements (mastered skill)
Deliver a case-based presentation to an audience
Prepare a SOAP note
Prepare and present a patient-specific plan of care
Prepare a drug information response
Critically evaluate and summarize a research study, and deliver a journal club presentation to other health care professionals or health professions students (students will complete a minimum of 2 during APPEs)
Prepare a pharmacokinetic consult for a narrow therapeutic index medication
Recommend a cost-effective regimen for a patient
Discuss procedure for Adverse Drug Reaction reporting
Prepare or discuss how to prepare a Medication Error Report
Complete a pediatric dosage check and/or recommend a pediatric dose
Take a patient’s blood pressure and pulse
Educate patient on proper subcutaneous injection technique (enoxaparin, insulin, etc.)
Collect an inpatient medication history and document appropriately
Complete a comprehensive medication review of a patient
Counsel a patient upon discharge or transition of care including any changes to current medications and discontinuations
Educate a patient on the result of a diagnostic or screening assessment
Counsel a patient on anticoagulation therapy
Counsel a patient on OTC products, herbals, and dietary supplements
Counsel a patient with significant barrier (language, financial, mechanical, etc.)
Counsel a patient on smoking cessation
Counsel a patient on a new prescription including how it works, major side effects, significant drug interactions, proper storage, missed dose

Demonstrate ability to counsel a patient on an ophthalmic preparation
Demonstrate ability to counsel a patient on an otic preparation
Demonstrate ability to counsel a patient on proper use of a self-injection device
Demonstrate ability to counsel a patient on proper inhaler technique of dry powder and aerosol inhalers and use of a spacer
Counsel a patient on a home testing device or kit
Advise a health care provider or patient regarding safe use of medication in pregnancy or lactation
Advise a patient regarding contraception
Provide an antimicrobial stewardship recommendation
Provide a recommendation to improve a transition of care
Educate a patient on a remote patient monitoring device (e.g., CGM)
Use a Smart application/tool to answer a patient question (e.g., ASCVD risk calculator)
Educate a patient how to use the data provided by a Smart application/device (e.g. My fitness pal)

Technical Competency Statements (mastered skill)
Demonstrate ability to review the completed prescription medication product for accuracy
Demonstrate ability to accurately obtain a verbal prescription
Demonstrate the ability to transfer prescriptions to and from a community pharmacy
Enter a verbal medication order in an inpatient or ambulatory care setting (with preceptor supervision)
Verify order/prescription (with preceptor supervision)
Resolve a problem/issue relating to a prescription with a third party/insurance company (prior authorization)
Clarify an inaccurate prescription
Demonstrate ability to appropriately make a compound
Develop a plan to promote a program or service at the pharmacy
Develop a patient information pamphlet/brochure
Discuss an evaluation of financials/goals/measurements of success

Discuss how to order controlled substances (CII)
Participate in inventory management duties completed by the pharmacist, including CII cabinet inventory
Discuss a Pharmacy Board inspector's report
Assist preceptor with an early refill issue or CSA
Discuss pharmaceutical waste management
Discuss best practices for managing and monitoring controlled substance dispensed from an institution
Discuss procedure resolving a fraudulent prescription or right to refuse
Verify a tamper-evident prescription per Medicaid and CSA requirements
Apply pseudoephedrine restrictions
Properly sell syringes to a patient
Demonstrate ability to screen patients for immunizations and administer vaccines
Assess patient's profile for adherence and counsel as needed
Discuss REMS processes (Examples include iPLEDGE, clozapine, Celgene)
Discuss an INSPECT report
Demonstrate proper knowledge/experience with error reduction strategies (e.g., pharmacy bar coding)

## Community Introductory Pharmacy Practice Experience Syllabus (template)

Rotation Title: Community Practice  
Rotation Course Number: RX400S  
Minimum required contact hours: 160 hours

### COURSE DESCRIPTION:

The Community IPPE is a 160-hour on-site rotation conducted in a community or retail pharmacy practice setting. The Community IPPE is designed to introduce students to the fundamentals of community pharmacy practice and engages students in learning opportunities to enhance technical, clinical, and professional knowledge, skills, abilities, and attitudes. Community IPPE rotations introduce students to interprofessional practice involving shared patient care decision-making, professional ethics and expected behaviors, and direct patient care activities.

### COURSE OBJECTIVES:

#### Technical

- Evaluate the acceptability and accuracy of a prescription and verify that the information is correct by correlating the prescription with patient-specific data and drug information.
- Accurately evaluate and process a new prescription or prescription refill in accordance with the law.
- Correctly interprets prescription abbreviations.
- Obtain demographic information, medication, allergy, and medical history from a new patient or update existing patient data.
- Correctly labels and dispenses medications.
- Observes/demonstrates understanding of how to add a third-party plan into the computer system.
- Explain the process used to split bill an insurance claim.
- Observes/demonstrates understanding of how to add a manufacturer discount card into the computer system.
- Appropriately contacts a third-party payer for an override.
- Observes/demonstrates understanding of how to process a Workman's Comp claim.
- Explain the prior authorization process to a patient or patient's family member.
- Demonstrate the ability to send a prior authorization form to a health care provider.
- Explain the process for emergency fill of a prescription.
- Clarify a question regarding a prescription by contacting a prescriber or prescriber's office.
- Correctly calculate total days' supply of medications (e.g., insulin, topicals, eye and ear drops).
- Accurately reconstitute a medication and counsel patient/family member on correct measuring of dose.
- Demonstrate understanding of controlled substance dispensing and refill regulations and company policies.

- Successfully process the partial fill of a prescription.
- Demonstrate ability to use all components of database retrieval to include analysis and interpretation.
- Identify and report adverse events to the appropriate individuals or organizations (i.e., local, state, and federal agencies).
- Explain how the site uses technology to maximize medication safety within the system.
- Demonstrate knowledge of quality improvement programs utilized at the site.
- Explain the roles, duties, and responsibilities of the various personnel within the team.
- Demonstrate understanding of the role of other health care providers (include when to refer to other health care providers, the importance of being respectful in all interactions, when to refer them to physician or other health care provider).
- Participate in patient counseling, taking into account patient's health literacy, cultural diversity, behavioral and economic issues.
- Demonstrate ability to document events, problems, and solutions with patients and patients' agent verbally, electronically, and manually in a concise, accurate, and efficient manner.
- Discuss what to do when you receive a specialty prescription.
- Discuss mail order prescriptions.
- Perform all duties and tasks in accordance with legal and professional pharmacy regulations, standards, and guidelines.

### **Clinical**

- Evaluate a patient's medication profile to identify medication allergies, appropriate doses and directions for use, duplicate medications, and clinically relevant drug interactions.
- Demonstrate knowledge of problem-solving techniques using actual or simulated scenarios.
- Participate in activities that promote to patients the importance of health, wellness, disease prevention (e.g., immunizations, tobacco cessation), and management of their diseases and medication therapies to optimize outcomes.
- Assist a patient or caregiver in problems related to prescription medication coverage, health insurance, or government healthcare programs.
- Discuss with preceptor patient symptoms, responses, adverse events, and medication adherence as it applies to a patient's pharmacotherapy regimen.
- Observes and/or participates in counseling of a patient by the pharmacist.
- Participates in responding appropriately and accurately to drug information requests (this includes when it is appropriate to say that you don't know but will follow-up).
- Observes and/or participates in a MTM session.
- Perform a blood pressure screening.
- Demonstrates familiarity with brand, generic, indication, whether OTC, prescription, or controlled substance for commonly used (e.g., important 200) medications.
- Demonstrates understanding of the components of the Pharmacists' Patient Care Process (PPCP) and how they apply to community practice.
- Recommend a cost-effective option for a patient who is unable to afford their medication.
- Discuss resources available to help patients find low-cost medications and apply for medication rebates.

### **Professional**

- Demonstrates punctuality for all rotation activities and assigned tasks by scheduled deadlines.
- Demonstrates caring, ethical, and professional behavior when interacting with patients, caregivers, and



other health care professionals.

- Complies with federal, state, and local laws and regulations related to pharmacy practice.
- Demonstrates accountability for all behaviors and responds positively to constructive feedback.
- Displays sensitivity and responsiveness to culture, race/ethnicity, age, socioeconomic status, gender, disabilities, spirituality and other aspects of diversity and identity when interacting with patients, caregivers, and other healthcare professionals.

## **STUDENT ACTIVITIES:**

Required:

- Important 200 Medication Review
- Drug Information Question Activity
- Interprofessional Role Discussion with Preceptor
- Completion of the online insurance modules and assignments (work will be completed outside of rotation hours)

Highly Recommended:

- Shadow an administrator (1/2 to 1 day)
- Spend 1-2 days observing/participating in compounding medications
- MTM activity
- Attend Indiana Board Meeting or professional organization meeting
- Participate in live Journal Club or online participation with CEImpact (available on learning modules in E\*Value)

## Institutional Introductory Pharmacy Practice Experience Syllabus (template)

Rotation Title: Institutional Practice  
Rotation Course Number: RX501  
Minimum required contact hours: 160 hours

### **COURSE DESCRIPTION:**

The Institutional IPPE is a 160-hour on-site rotation conducted in a hospital or institutional pharmacy practice setting. The Institutional IPPE is designed to introduce students to the fundamentals of inpatient pharmacy practice and engages students in learning opportunities to enhance technical, clinical, and professional knowledge, skills, abilities, and attitudes. Institutional IPPE rotations introduce students to interprofessional practice involving shared patient care decision-making, professional ethics and expected behaviors, and direct patient care activities.

#### **Technical**

- Accurately read and process a medication order.
- Select the appropriate product (medication) when filling a medication order.
- Accurately label and dispense medications.
- Accurately reconstitute a medication and/or prepare a sterile product (including calculations when appropriate).
- Accurately obtain all required information when filling medication orders. Contact healthcare provider for clarification of medication when needed.
- Explain the process for handling a medication error and reports adverse drug events.
- Explain how the site uses technology to maximize medication safety within the system.
- Describe the roles, duties, and responsibilities of the various personnel within the team.
- Demonstrate ability to document events, problems, and solutions with patients and patients' agent verbally, electronically, and manually in a concise, accurate, and efficient manner.
- Demonstrate knowledge of quality improvement programs utilized within the site.

#### **Clinical**

- Obtain demographic information, allergy, medications, and medical history from a patient.
- Participate in patient counseling taking into account patient's health literacy, cultural diversity, behavioral and economic issues.
- Appropriately and accurately respond to drug information requests.
- Conducts a medication history or review
- Assess patient symptoms, responses, adverse events, and medication adherence as it applies to a patient's pharmacotherapy regimen.
- Demonstrate an ability to use all components of database retrieval, including analysis and interpretation.
- Identify and report medication errors and adverse events to the appropriate individuals or organizations (i.e., local, state, and federal agencies).
- Evaluate information obtained from adverse drug reactions and medication error reporting systems to

identify preventable causes and solutions. Identify solutions which can minimize the occurrence of adverse events.

- Evaluate a patient's medication profile to identify medication allergies, appropriate doses and directions, duplicate medications, and clinically relevant drug interactions.
- Demonstrate knowledge of problem-solving techniques using actual or simulated scenarios.

### **Professional**

- Demonstrate punctuality for all rotation activities and assigned tasks by scheduled deadlines.
- Demonstrate caring, ethical, and professional behavior when interacting with patients, caregivers, and other healthcare professionals.
- Exhibit accountability for all behaviors and respond positively to constructive feedback.
- Display sensitivity and responsiveness to culture, race/ethnicity, age, socioeconomic status, gender, disabilities, spirituality and other aspects of diversity and identity when interacting with patients, caregivers, and other healthcare professionals.
- Perform all duties and tasks in accordance with legal and professional pharmacy regulations, standards, and guidelines.
- Demonstrate and apply knowledge of confidentiality and HIPAA.

### **STUDENT ACTIVITIES:**

- Process medication orders
- Label and dispense medications
- Reconstitute medications and prepare sterile products
- Complete an interprofessional role discussion with preceptor and/or shadowing activity related to the roles of different healthcare team members
- Participation in live Journal Club or online participation with CEImpact (available on learning modules in E\*value)
- Answer a drug information question
- Complete patient medication histories
- Conduct patient medication reviews, comparing list to current medications
- Counsel patients on discharge medications

**Butler University College of Pharmacy and Health Sciences  
Community IPPE Competency Evaluation**

Student Name: \_\_\_\_\_ Graduation Year \_\_\_\_\_  
 Preceptor Name: \_\_\_\_\_ Rotation Location: \_\_\_\_\_  
 Total IPPE hours: \_\_\_\_\_ Rotation Dates: \_\_\_\_\_ to \_\_\_\_\_

<b>ASSESEMENT SCALE</b>	
Below Expectations	The student performs at a level below where they should be at this point in their pharmacy education (1 year of didactic course work for community). Does not display professional attributes or attitudes consistent with a readiness to enter general practice.
Meets Expectations	The student performs at a level consistent with expectations or at least is displaying developing habits, skills, abilities, and/ or knowledge in areas that are improving and/ or requiring further development.
Not Applicable	Student not assessed because competency was not applicable at site

**COMMUNITY PRACTICE ROTATION COMPETENCIES**

<b>TECHNICAL</b>	<b>BELOW EXPECTATIONS</b>	<b>MEETS EXPECTATIONS</b>	<b>NOT APPLICABLE</b>
Evaluates the acceptability and accuracy of a prescription and verifies the information is correct by correlating the prescription with patient-specific data and drug information			
Accurately evaluates and processes a new prescription or prescription refill in accordance with the law			
Correctly interprets prescription abbreviations			
Obtains demographic information, medication, allergy, and medical history from a new patient or updates existing patient data			
Correctly labels and dispenses medications			
Demonstrates understanding of how to add a third-party plan into the computer system			
Appropriately contacts a third-party payer for an override			
Demonstrates understanding of how to process a Workman's Comp claim			
Explains the prior authorization process to a patient or patient's family member			

Demonstrates ability to send a prior authorization form to a health care provider			
Explain the process for emergency fill of a prescription			
Clarifies a question regarding a prescription by contacting a prescriber or prescriber's office			
Correctly calculates the total days' supply of medications (e.g., insulin, topicals, eye and ear drops)			
Accurately reconstitutes a medication and/or counsels a patient/family member on correct measuring of a dose			
Demonstrates understanding of controlled substance dispensing and refill regulations, as well as specific company policies			
Accurately processes the partial fill of a prescription			
Demonstrates ability to use all components of database retrieval, including analysis and interpretation			
Demonstrates knowledge of quality improvement programs utilized at the site			
Demonstrates understanding of the role of other health care providers (including when to refer to other healthcare professionals and the importance of being respectful in all interactions)			
Demonstrate ability to document events, problems, and solutions with patients and patients' agent verbally, electronically, and manually in a concise, accurate, and efficient manner			
<b>CLINICAL</b>			
Evaluates a patient's medication profile to identify medication allergies, appropriate doses and directions for use, duplicate medications, and clinically relevant drug interactions			

Participates in activities that promote to patients the importance of health, wellness, disease prevention, and management of their disease and medication therapies to optimize outcomes			
Discusses with preceptor patient symptoms, responses, adverse events, and medication adherence as it applies to a patient's pharmacotherapy regimen			
Participates in responding appropriately and accurately to drug information request (including when it is appropriate to say that you do not know but will follow up)			
Appropriately documents interventions, medication errors, adverse drug reactions according to site requirements			
Participates in a MTM session			
Performs a blood pressure screening			
Participate in patient counseling taking into account patient's health literacy, cultural diversity, behavioral issues and economic issues			
Demonstrates familiarity with brand, generic, indication, whether OTC, prescription, or controlled substance for commonly used (e.g., important 200) medications			
Demonstrates understanding of the Pharmacists' Patient Care Process (PPCP) and how it applies to community practice			
Recommends a cost-effective option for a patient who is unable to afford their medication			
<b>PROFESSIONAL</b>			
Demonstrates punctuality for all rotation activities and assigned tasks by scheduled deadlines			
Demonstrates caring, ethical, and professional behavior when interacting with patients, caregivers, and other healthcare professionals			
Displays sensitivity and responsiveness to culture, race/ethnicity, age, socioeconomic status, gender, disabilities, spirituality and other aspects of diversity and identity when interacting with patients,			

caregivers, and other healthcare professionals			
Complies with federal, state, and local laws and regulations related to pharmacy practice			
Demonstrates accountability for all behaviors and responds positively to constructive feedback			

**List 3 things the student performed well during this rotation**

- 1.
- 2.
- 3.

**List 3 things in which the student has room for improvement**

- 1.
- 2.
- 3.

**Referral to Director of Introductory Experiential Education**

\_\_\_\_\_ Referral requested for improvement related to:

- \_\_\_\_\_ Professionalism
- \_\_\_\_\_ Time management/organizational skills
- \_\_\_\_\_ Problem solving skills
- \_\_\_\_\_ Communication
- \_\_\_\_\_ Drug information skills

**Please review the list of Automatic Failures as well as the student’s performance on each domain assessed in your overall assessment of the student.**

**Automatic Failures**

- Breaches patient confidentiality or violates policies of the site
- Displays skills, abilities, and/or knowledge areas that are significantly below expectations for the students’ current level of pharmacy education and are a concern for patient care
- Professional behavior is inappropriate and/or unethical (e.g., any unexcused absence, inappropriate written/verbal communication, or behavior)

**Comments:**

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**Overall Performance:    PASS   FAIL**

**Butler University College of Pharmacy and Health Sciences  
Institutional IPPE Competency Evaluation**

Student Name: \_\_\_\_\_ Graduation Year \_\_\_\_\_  
 Preceptor Name: \_\_\_\_\_ Rotation Location: \_\_\_\_\_  
 Total IPPE hours: \_\_\_\_\_ Rotation Dates: \_\_\_\_\_ to \_\_\_\_\_

ASSESSMENT	
Below Expectations	The student performs at a level below where they should be at this point in their pharmacy education (2 years of didactic for institutional). Does not display professional attributes or attitudes consistent with a readiness to enter general practice.
Meets Expectations	The student performs at a level consistent with expectations or at least is displaying developing habits, skills, abilities, and/ or knowledge in areas that are improving and/ or requiring further development.
Not Applicable	Student not assessed because competency was not applicable at site

**INSTITUTIONAL IPPE ROTATION COMPETENCIES**

TECHNICAL	BELOW EXPECTATIONS	MEETS EXPECTATIONS	NOT APPLICABLE
Accurately reads and processes a medication order			
Selects the appropriate medication when filling a medication order			
Accurately labels and dispenses medications			
Accurately reconstitutes a medication and/or prepares a sterile product (including calculations when appropriate)			
Accurately obtains all required information when filling medication orders. Contacts healthcare provider for clarification when needed			
Explains the process for handling a medication error and reporting adverse drug events			
Explains how the site uses technology to maximize medication safety within the system			
Describes the roles, duties, and responsibilities of the various personnel within the team			



Demonstrate the ability to documents events, problems, and solutions with patients and patients' agents verbally, electronically, and manually in a concise, accurate, and efficient manner			
Demonstrates knowledge of quality improvement programs utilized within the site			
<b>CLINICAL</b>			
Obtains demographic information, medication, allergy, and medical history from a patient			
Participates in patient counseling taking into account patients' health literacy, cultural diversity, behavioral, and economic issues			
Appropriately and accurately responds to drug information requests			
Assess patient symptoms, responses, adverse events, and medication adherence as it applies to a patient's pharmacotherapy regimen			
Demonstrates an ability to use all components of database retrieval, including analysis and interpretation			
Identify and report medication errors and adverse events to the appropriate individuals or organizations (i.e., local, state, and federal agencies)			
Evaluate information obtained from adverse drug reactions and medication error reporting systems to identify preventable causes and solutions			
Evaluate a patient's medication profile to identify issues with medication allergies, appropriate dosages and instructions for use, duplicate medications, and clinically relevant drug interactions			
<b>PROFESSIONAL</b>			
Demonstrates punctuality for all rotation activities and completes assigned tasks by scheduled deadlines			
Demonstrates caring, ethical, and professional behavior when interacting with patients, caregivers, and other health care professionals			
Exhibits accountability for all behaviors and responds positively to constructive feedback			

Displays sensitivity and responsiveness to culture, race/ethnicity, age, socioeconomic status, gender, disabilities, spirituality and other aspects of diversity and identity when interacting with patients, caregivers, and other health care professionals			
Performs all duties and tasks in accordance with legal and professional pharmacy regulations, standards, and guidelines			
Demonstrates and applies knowledge of confidentiality and HIPAA			

List 3 things the student performed well during this rotation

- 1.
- 2.
- 3.

List 3 things in which the student has room for improvement

- 1.
- 2.
- 3.

**Referral to Director of Introductory Experiential Education**

\_\_\_\_\_ Referral requested for improvement related to:

- \_\_\_\_\_ Professionalism
- \_\_\_\_\_ Time management/organizational skills
- \_\_\_\_\_ Problem solving skills
- \_\_\_\_\_ Communication
- \_\_\_\_\_ Drug information skills

**Please review the list of Automatic Failures as well as the student’s performance on each domain assessed in your overall assessment of the student.**

**Automatic Failures**

- Breaches patient confidentiality or violates policies of the site
- Displays skills, abilities, and/or knowledge areas that are significantly below expectations for the students’ current level of pharmacy education and are a concern for patient care
- Professional behavior is inappropriate and/or unethical (e.g., any unexcused absence, inappropriate written/verbal communication, or behavior)

**Comments: -**

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**Overall Performance: PASS FAIL**

## General Medicine Rotation Syllabus (template)

Rotation Title: General Medicine  
Rotation Course Number: RX666  
Rotation Course Information: Doctor of Pharmacy Curriculum  
Minimum required contact hours: 160  
Academic hours credited: 4

### COURSE DESCRIPTION:

The General Medicine rotation provides the PharmD student the opportunity to round with a treatment team and/or to participate in the care of patients with a variety of acute and chronic conditions. The application of therapeutic principles and pharmacokinetics, as well as problem identification and solving, documentation, communication skills, and drug information skills are emphasized on a daily basis through interaction with patients and other health care professionals.

### COURSE OBJECTIVES:

1. Collect appropriate information about the patient (through patient interview, patient records, and other healthcare professionals).
2. Assess the patient's medical records for the appropriateness of medication therapy, including but not limited to the following:
  - a. Indications for drug therapy
    - i. Unnecessary drug therapy
    - ii. Additional drug therapy needed
    - iii. Duplication of therapy
  - b. Effectiveness
    - i. Dosage, route, frequency, duration
  - c. Safety
    - i. Drug-drug, drug-allergy, and food-drug interactions
    - ii. Drug-disease state contraindications
    - iii. Possible side effects and adverse drug reactions
  - d. Adherence
  - e. Cost-effectiveness
3. Assess patients' immunization status and determine the need for preventative care and other health care services.
4. Address medication and health-related problems and optimize medication therapy.
5. Selects appropriate goals of therapy for achieving clinical outcomes in the context of the patient's overall health care goals and access to care.
6. Develop a plan for each identified problem and intervene in the care of the patient, as appropriate.
7. Provide appropriate education and self-management training to patients and/or caregivers.
8. Develop concise therapeutic and monitoring plans for each patient.
9. Discuss the pathophysiology, etiology, treatment, and monitoring parameters for those disease states commonly seen in the general medicine setting.
10. Critically evaluate medical literature in order to provide evidence-based recommendations and thorough responses to drug information questions.
11. Present a patient case in a concise and organized manner.

12. Effectively communicate/interact with other healthcare providers and recommend referral or transition of the patient to another health care professional if appropriate.
13. Demonstrate understanding of how organization's and/or department's mission, vision, values align with the Pharmacists' Patient Care process.

**STUDENT ACTIVITIES:**

- On a daily basis, prepare and maintain a monitoring system for each patient.
- Conduct pharmacokinetic monitoring of appropriate medications.
- Prepare a progress note for a patient as needed.
- Promote patient specific recommendations for drug regimens and alternatives.
- Provide medication and disease state counseling to patients as needed, including anticoagulation and discharge regimens.
- Present a patient case to an audience.
- Collect and document patient medication histories and assist with medication reconciliation.
- Deliver a presentation with formal literature evaluation (e.g., journal club, case presentation, debate).
- Attend a multidisciplinary event (e.g., rounds, huddles, meetings, in-services).

## Acute Care Rotation Syllabus (template)

Rotation Title:	Pediatrics, Geriatrics, Hematology/Oncology, Nutrition Support, Critical Care, Transplant, Cardiology, Surgery, Neurology, Psychiatry, Infectious Disease, General Medicine
Rotation Course Number:	RX6__
Rotation Course Information:	Doctor of Pharmacy Curriculum Minimum required contact hours: 160 Academic hours credited: 4

### COURSE OBJECTIVES:

1. Collect appropriate information about the patient (through patient interview, patient records, and other healthcare professionals)
2. Assess the patient's medical records for the appropriateness of medication therapy, including but not limited to the following:
  - a. Indications for drug therapy
    - i. Unnecessary drug therapy
    - ii. Additional drug therapy needed
    - iii. Duplication of therapy
  - b. Effectiveness
    - i. Dosage, route, frequency, duration
  - c. Safety
    - i. Drug-drug, drug-allergy, and food-drug interactions
    - ii. Drug-disease state contraindications
    - iii. Possible side effects and adverse drug reactions
  - d. Adherence
  - e. Cost-effectiveness
3. Assess patients' immunization status and determine the need for preventative care and other health care services.
4. Address medication and health-related problems and optimize medication therapy.
5. Selects appropriate goals of therapy for achieving clinical outcomes in the context of the patient's overall health care goals and access to care.
6. Develop a plan for each identified problem and intervene in the care of the patient, as appropriate.
7. Provide appropriate education and self-management training to patients and/or caregivers.
8. Develop concise therapeutic and monitoring plans for each patient.
9. Discuss the pathophysiology, etiology, treatment, and monitoring parameters for those disease states commonly seen in the acute care setting.
10. Critically evaluate medical literature to provide evidence-based recommendations and thorough responses to drug information questions.
11. Present a patient case in a concise and organized manner.
12. Effectively communicate/interact with other healthcare providers and recommend referral or transition of the patient to another health care professional if appropriate.
13. Demonstrate understanding of how the organization's and/or department's mission, vision, values align with the Pharmacists' Patient Care process.

### STUDENT ACTIVITIES:

1. On a daily basis, prepare and maintain a monitoring system for each patient.

2. Conduct pharmacokinetic monitoring of appropriate medications.
3. Prepare a progress note for a patient as needed.
4. Promote patient specific recommendations for drug regimens and alternatives.
5. Provide medication and disease state counseling to patients as needed, including anticoagulation and discharge regimens.
6. Present a patient case to an audience.
7. Collect and document patient medication histories and assist with medication reconciliation.
8. Deliver a presentation with formal literature evaluation (e.g., journal club, case presentation, debate).
9. Attend a multidisciplinary event (e.g., rounds, huddles, meetings, in-services).

## Advanced Pharmacy Practice Experience (template)

Rotation Title: Hospital/Health-System  
Rotation Course Number: RX676  
Minimum required contact hours: 160 hours

### COURSE DESCRIPTION:

This required APPE focuses on day-to-day operations of an institutional environment, such as providing general care to patients and procurement and distribution of medications. The goal of this rotation is to build upon knowledge and skills learned during the institutional IPPE in order for the student to participate fully in hospital pharmacy operations and services. Students are provided opportunities to enhance their confidence in patient care decision-making, drug distribution, medication safety, pharmacy administration and leadership.

### COURSE OBJECTIVES:

Required Objectives:

1. Outline basic functionality and appropriate use of commonly used automated systems related to medication use (e.g., automated dispensing cabinets, computerized prescriber order entry, bar code med administration, programmable infusion devices, robotics).
2. Participate in processes needed to provide sterile compounded parenteral solutions, including the basic requirements of USP <797> and <800 (if applicable).
3. Describe the integration and interface of clinical and distributive functions, including the synergy that translates into safe and effective medication therapy.
4. Describe the impact of pharmacist involvement on medication safety.
5. Demonstrate understanding of how the organization's and/or department's mission, vision, values align with the Pharmacists' Patient Care process.
6. Demonstrate knowledge of regulatory agencies such as OSHA, DEA, TJC, EPA and the Board of Pharmacy.
7. Review the documentation of compliance items related to regulatory bodies.
8. Collect appropriate information about the patient (through patient interview, patient records, and other healthcare professionals).
9. Assess the patient's medical records for the appropriateness of medication therapy, including but not limited to the following:
  - a. Indications for drug therapy
    - i. Unnecessary drug therapy
    - ii. Additional drug therapy needed
    - iii. Duplication of therapy
  - b. Effectiveness
    - i. Dosage, route, frequency, duration
  - c. Safety
    - i. Drug-drug, drug-allergy, and food-drug interactions
    - ii. Drug-disease state contraindications
    - iii. Possible side effects and adverse drug reactions

- d. Adherence
- e. Cost-effectiveness

### **Optional Objectives:**

- Assess patients' immunization status and determine the need for preventative care and other health care services.
- Address medication and health-related problems and optimize medication therapy.
- Select appropriate goals of therapy for achieving clinical outcomes in the context of the patient's overall health care goals and access to care.
- Develop a plan for each identified problem and intervene in the care of the patient, as appropriate.
- Provide appropriate education and self-management training to patients and/or caregivers.
- Develop concise therapeutic and monitoring plans for each patient.
- Critically evaluate medical literature to provide evidence-based recommendations and thorough responses to drug information questions.
- Present a patient case in a concise and organized manner.
- Effectively communicate/interact with other healthcare providers and recommend referral or transition of the patient to another health care professional if appropriate.

### **STUDENT ACTIVITIES:**

#### **Required:**

- Participate in medication inventory and ordering process.
- Identify and communicate problems with medication orders.
- Contact nursing staff to follow up on missing medication/doses, off schedule administration, patient preferences, and other urgent medication issues.
- Reconstitute medications and prepare sterile products.
- Determine expiration date, BUD, infusion rate, and adequate supply to send for a new and re-ordered medication.
- Describe strategies for reimbursement of pharmacy services in a health system setting and differentiate the mechanisms of paying for health care.
- Evaluate one quality assurance measure (pros and cons).
- Identify and evaluate the process for dealing with a drug shortage or diversion.
- Participate in an inter-disciplinary committee meeting (such as P&T, medication safety, unit meeting, accountable care unit).
- Complete a staff or technician education session.
- Participate in 1 of the following: formulary review, medication use evaluation, or drug policy development and implementation.

#### **Suggested:**

- Collect and document patient medication histories and assist with medication reconciliation.
- Conduct patient medication reviews, comparing list to current medications.
- Counsel patients on discharge medications.
- Deliver a presentation with formal literature evaluation (e.g., journal club, case presentation, debate, in-service, rounds/huddles, inter-disciplinary meetings as noted above).
- Attend a multidisciplinary event (e.g., rounds, huddles, meetings, in-services).
- Complete an interprofessional role discussion with preceptor and/or shadowing activity related to the roles of different healthcare team members.
- Answer a drug information question.



## Ambulatory Care Rotation Syllabus (template)

Rotation Title: Ambulatory Care  
Rotation Course Number: RX657  
Minimum required contact hours: 160  
Academic hours credited: 4

### COURSE DESCRIPTION:

The Ambulatory Care rotation is designed to develop that student's understanding of ambulatory care pharmacy services and clinical skills. Throughout the rotation, the student will participate in activities such as comprehensive medication review, education relating to pharmacotherapy and disease states, medication reconciliation, and completion of appropriate documentation. Additionally, the student will enhance his or her interdisciplinary professional communication and presentation skills.

### COURSE OBJECTIVES:

1. Collect appropriate information about the patient (through patient interview, patient records, and other healthcare professionals).
2. Assess the patient's medical records for the appropriateness of medication therapy, including but not limited to the following:
  - Indications for drug therapy
    - Unnecessary drug therapy
    - Additional drug therapy needed
    - Duplication of therapy
  - Effectiveness
    - Dosage, route, frequency, duration
  - Safety
    - Drug-drug, drug-allergy, and food-drug interactions
    - Drug-disease state contraindications
    - Possible side effects and adverse drug reactions
  - Adherence
    - Cost-effectiveness
3. Assess patients' immunization status and determine the need for preventative care and other health care services.
4. Address medication and health-related problems and optimize medication therapy.
5. Selects appropriate goals of therapy for achieving clinical outcomes in the context of the patient's overall health care goals and access to care.
6. Develop a plan for each identified problem and intervene in the care of the patient, as appropriate.
7. Actively participate in drug therapy management through collaboration with other health care providers.
8. Effectively communicate with patients and other healthcare professionals.
9. Provide appropriate education and self-management training to patients and/or caregivers on disease states, medications, devices, adherence, and lifestyle modifications.
10. Demonstrate appropriate instruction on POC testing and devices.
11. Develop appropriate monitoring parameters and therapeutic endpoints for drug therapy management of each patient.
12. Discuss the pathophysiology, etiology, treatment, and monitoring parameters for those disease states commonly seen in Ambulatory Care.

13. Critically evaluate medical literature to provide evidence-based recommendations and thorough responses to drug information questions.
14. Present a patient case in a concise and organized manner.
15. Demonstrate understanding of how the organization's and/or department's mission, vision, and values align with the Pharmacists' Patient Care process.

**STUDENT ACTIVITIES:**

Required:

- Review patients and communicate with preceptor on a daily basis to develop and evaluate pharmaceutical care plans.
- Collect and document patient medication histories and assist with medication reconciliation.
- Conduct clinical and pharmacotherapy assessments of patients and provide pharmacologic and nonpharmacologic recommendations for patient care.
- Provide medication and lifestyle modification counseling to patients and caregivers as needed.
- Instruct patients on proper use of devices and POC testing as needed.
- Document appropriate patient encounters in the patient's medical record.
- Attend a multidisciplinary event (e.g., meetings, in-services).
- Deliver a presentation with formal literature evaluation (e.g., journal club, case presentation, debate).

Highly Recommended:

- Develop a business plan to provide a new service or enhance an existing service to the pharmacy.

## Community Practice Rotation Syllabus (template)

Rotation Title:	Community Practice
Rotation Course Number:	RX661
Minimum required contact hours:	160
Academic hours credited:	4

### **COURSE DESCRIPTION:**

The Community Practice rotation provides the PharmD student the opportunity to participate in the care of patients with a variety of acute and chronic conditions. The application of therapeutic principles as well as documentation, communication skills, and drug information skills are emphasized on a daily basis through interaction with patients and other health care professionals.

### **COURSE OBJECTIVES:**

1. Collect appropriate information about the patient (through patient interview, patient records, and other healthcare professionals)
2. Assess the patient's profile for the appropriateness of medication therapy, including but not limited to the following:
  - a. Indications for drug therapy
    - i. Unnecessary drug therapy
    - ii. Additional drug therapy needed
    - iii. Duplication of therapy
  - b. Effectiveness
    - i. Dosage, route, frequency, duration
  - c. Safety
    - i. Drug-drug, drug-allergy, and food-drug interactions
    - ii. Drug-disease state contraindications
    - iii. Possible side effects and adverse drug reactions
  - d. Adherence
3. Assess patients' immunization status and determine the need for preventative care and other health care services.
4. Communicate appropriately to patients and other healthcare professionals and refer patients, when appropriate, to seek further medical treatment.
5. Provide appropriate education and self-management training to patients and/or caregivers, taking into account patient's health literacy, cultural, behavioral, and socioeconomic issues.
6. Demonstrate knowledge of common medical devices or non-drug products used in the treatment of disease.
7. Recommend appropriate non-prescription therapy (including OTC, herbals and durable medical equipment) for particular disease states and symptoms.
8. Respond appropriately and accurately to drug information requests identifying database systems available in the community setting.
9. Identify and report medication errors and adverse drug reactions and understand
10. when and how legal resources are used.
11. Identify what quality assurance measures are in place for accurate processing and dispensing of medication and understand how the site uses med errors for enhancing quality assurance.

12. Dispense and verify prescriptions for completeness and accuracy.
13. Comply with all legal regulations regarding prescriptions and HIPAA and understand how this applies to civil law.
14. Devise a business plan to provide a new service or enhance an existing service to the pharmacy.
15. Evaluate and resolve ethical dilemmas that arise in pharmacy practice including intervention in life threatening situations and needs and perceptions of a culturally diverse society.
16. Demonstrate understanding of how the organization or store's vision and values align with the Pharmacists' Patient Care process.

#### **STUDENT ACTIVITIES:**

- Accurately obtain verbal prescriptions
- Clarify inaccurate prescriptions
- Review and resolve patient insurance problems
- Complete the entire dispensing process from order entry to verification (with pharmacist double check)
- Transfer prescriptions in and out of the pharmacy
- Demonstrate the ability to make a compound
- Participate in inventory management duties completed by the pharmacist as needed
- Provide counseling to patients on medications, devices, and dosage forms, including but not limited to: insulin, statins, opiates, warfarin, ophthalmic products, and otic products
- Recommend over the counter products to patients and patient caregivers including but not limited to: constipation, diarrhea, heartburn, cough/cold, and antifungal products
- Recommend a pediatric dose for a patient caregiver for an over-the-counter product
- Provide lifestyle modification counseling (e.g., smoking cessation, exercise, weight loss) to patients and caregivers as needed
- Deliver a presentation with formal literature evaluation (e.g., journal club, topic discussion, case presentation)

## Non-Patient Care Rotation Syllabus Template

Rotation Title: Academic, Administrative, Drug Information, Industrial Pharmacy, Managed Care, State Board/Association  
Rotation Course Number: RX6\_\_  
Rotation Course Information: Doctor of Pharmacy Curriculum  
Minimum required contact hours: 160  
Academic hours credited: 4

### COURSE DESCRIPTION:

The non-patient care rotation is an elective APPE rotation designed to expose the student learner to various aspects of the organization. Skills will be developed in the areas of communication, leadership, mentoring, and assessment.

### COURSE OBJECTIVES:

- Demonstrate effective communication skills (verbal and written).
- Use and apply appropriate didactic/clinical knowledge to decision-making skills.
- Demonstrate understanding of and critically evaluate current applicable literature and apply it to the setting.
- Utilize critical thinking skills to solve issues/problems.
- Conduct self-assessment and peer assessment.
- Provide an overview of leadership with an emphasis of self-awareness (personal values/beliefs, biases, strengths, and weaknesses and how they impact their leadership style).
- Review the roles of key administrative members within the organization.
- Explain the implications of federal guidelines and regulatory agencies applicable to the rotation setting.
- Maximize efficiency in performing tasks through electronic communications.
- Demonstrate appropriate behaviors and attitudes in the area of professional responsibility, liability, confidentiality, and ethics.
- Demonstrate teaching skills for various audiences such as patients, health care professionals, community groups, and peers.

### STUDENT ACTIVITIES:

- Prepare and participate in discussions related to non-patient care topics.
- Develop and monitor goals for the rotation.
- Attend and participate in appropriate meetings and presentations within the organization.
- Investigate components of the administrative environment as it aligns with rotation goals.
- Deliver a presentation with formal literature evaluation (e.g., journal club, formal presentation)
- Complete a written project (e.g., newsletter article, drug information question, patient education materials)



**Butler University College of Pharmacy  
Student Experiential Rotation Midpoint Evaluation Form  
(Must be completed by Preceptor via E\*Value)**

Student Name: \_\_\_\_\_ Preceptor: \_\_\_\_\_

Experience Type: \_\_\_\_\_ Location: \_\_\_\_\_

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

Please review the student's performance at mid-term and evaluate their strengths and opportunities for improvement which you feel the student must achieve.

Strengths:

Opportunities:

Plan of action (to be complete together by the preceptor and the student):

At the midpoint, the student's performance is:

- On Track
- Not on Track

\_\_\_\_\_  
Preceptor Signature/Date                      Student Signature/Date

## APPE FINAL EVALUATION

Please evaluate your student's performance on the Professionalism and Work Ethics items that follow using the grading scale below. Comments are required for any scores of "inconsistently" or "never".

**Grading Scale:** (C) Consistently, (I) Inconsistently, (N) Never

### Professionalism and Work Ethics

	C	I	N
Appearance exemplifies that of a professional (i.e., dress, hygiene).			
The student is self-motivated and eager to learn.			
Demonstrates punctuality in attendance.			
Demonstrates dependability in all assigned tasks and projects.			
The student is professional and ethical in attitude and behavior.			
The student accepts constructive criticism and appropriately modifies behavior.			
<b>Comments:</b>			

Please evaluate your student's performance on the Entrustable Professional Activities that follow using the grading scale below. Comments are required for any scores of "below expectations" or "fail"

<b>Exceeds Expectations</b>	Ready for supervision at a distance. I trust the learner to completely and accurately...
<b>Meets Expectations</b>	Ready for reactive supervision. I trust the learner, with limited correction, to...
<b>Below Expectations</b>	Ready for direct, proactive supervision. Learner requires direct supervision and frequent correction, to...
<b>Fail</b>	I do not trust the learner to...



## Entrustable Professional Activities

<b>Patient Care Provider Domain</b>	<b>EE</b>	<b>ME</b>	<b>BE</b>	<b>F</b>	<b>N/A</b>
...collect information to identify a patient's medication-related problems and health-related needs.					
...identify medication related problems.					
...compile a prioritized health-related problem list for a patient.					
...evaluate and existing drug therapy regimen for its effectiveness.					
...develop an evidence-based treatment plan for a patient.					
...collaborate with the patient, caregiver(s) and other health professionals to establish patient-centered goals.					
...implement a treatment plan in collaboration with other health professionals.					
...educate a patient and caregiver(s) in the implementation of the patient's treatment plan including medications and devices.					
...assess patient adherence to the treatment plan and assist with behavior change as needed.					
...recommend modifications or adjustments to an existing medication therapy regimen based on patient response.					
...assist in a patient's transition to different level(s) of care or care setting(s).					
<b>Comments:</b>					
<b>Interprofessional Team Member Domain</b>	<b>EE</b>	<b>ME</b>	<b>BE</b>	<b>F</b>	<b>N/A</b>
...collaborate as the medication expert as part of an interprofessional team.					
<b>Comments:</b>					

<b>Population Health Promoter Domain</b>	<b>EE</b>	<b>ME</b>	<b>BE</b>	<b>F</b>	<b>N/A</b>
...review and document adverse drug events and medication errors within a medication use system.					
...determine CDC-recommended immunizations for a specific patient, then administer and document as applicable.					
<b>Comments:</b>					
<b>Information Master Domain</b>	<b>EE</b>	<b>ME</b>	<b>BE</b>	<b>F</b>	<b>N/A</b>
...educate professional colleagues or lay audience(s) based on the evaluation of scientific literature and its application.					
...use setting appropriate verbal communication skills.					
...use setting appropriate written communication skills.					
...retrieve and analyze scientific literature to make a patient-specific recommendation and/or answer a drug information question.					
<b>Comments:</b>					
<b>Practice Manager Domain</b>	<b>EE</b>	<b>ME</b>	<b>BE</b>	<b>F</b>	<b>N/A</b>
...appropriately use common automated systems to fulfill a medication order (robotics, Pyxis, sterile compounding technologies etc.).					
<b>Comments:</b>					
<b>Self-Developer Domain</b>	<b>EE</b>	<b>ME</b>	<b>BE</b>	<b>F</b>	<b>N/A</b>
...perform a self-evaluation to identify professional strengths and weaknesses.					
<b>Comments:</b>					

**Please list specific strengths of the student noted during this rotation.**

**Please list specific areas needing improvement which future preceptors should focus on during subsequent rotations.**

**What specific activities would you suggest for this student during future rotations which would complement his or her experience(s) to date?**

If the student has received one or more “below expectations” or “inconsistent”, please check which, if any, of the following should be addressed with the student. If the student received a “never” or “fail” in any area, please contact the Director of Advanced Experiential Education and Preceptor Development for further discussion before submitting the final evaluation.

\_\_\_\_\_ Additional monitoring by the Experiential Education Office for:

- \_\_\_\_\_ Professionalism
- \_\_\_\_\_ Time management/organizational skills
- \_\_\_\_\_ Communication

\_\_\_\_\_ Referral for remediation/performance improvement plan for:

- \_\_\_\_\_ Professionalism
- \_\_\_\_\_ Time management/organizational skills
- \_\_\_\_\_ Communication
- \_\_\_\_\_ Drug information skills
- \_\_\_\_\_ Therapeutics drug knowledge

\_\_\_\_\_ Review on specific therapeutic topics prior to restarting patient care experience (this should only be checked if your assessment is that the student has failed the rotation)

**ABSENCES:**

Number of excused absences on this rotation\*: \_\_\_\_\_

Number of unexcused absences on this rotation\*: \_\_\_\_\_

\*NOTE: If the student has more than 2 excused absences or any unexcused absences, please contact the Experiential Education Office, Dr. Meghan Bodenberg (317-940-8692), prior to assigning the student’s final grade.

**Please review the list of Automatic Failures as well as the student’s performance on each domain assessed in your overall assessment of the student.**

**Automatic Failures**

- Breaches patient confidentiality or violates policies of the site
- Did not meet requirements and expectations outlined by the preceptor in the corrected plan of action
- Displays skills, abilities, and/or knowledge areas that require significant improvement and are a concern for patient care
- Professional behavior is inappropriate and/or unethical (e.g., exceeds absences allowed, inappropriate language or communication)

**FINAL GRADE RECOMMENDATION**

	<b>PASS</b>	<b>FAIL</b>
After reviewing this student's performance my recommendation is that the student:		

**Student Evaluation of Preceptor and Site**

**Preceptor**

1	2	3	4	5
Completely Disagree	Generally Disagree	Neutral or Undecided	Generally Agree	Completely Agree

**Site/Rotation Questions**

	1	2	3	4	5
1 There were specific objectives or student competencies for this rotation.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2 The assessment methods and grading scheme were explained to me at the start of the rotation.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3 I was oriented to the rotation site.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4 The site supported the presence of students.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5 Interaction with the site staff was positive and helpful.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6 Activities and assignments were useful learning activities.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7 I participated in activities most of the time; little time was spent simply observing.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8 Appropriate resources were available to help me meet objectives.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9 Assigned text and/or readings were useful learning aids.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10 The assessment method was a fair way of assessing my knowledge, skills, and attitude.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11 The rotation was well planned and flowed well.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12 The benefits received, and information acquired from the rotation met my expectations.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13 I would recommend this rotation site to others. *	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Preceptor Questions**

	1	2	3	4	5
1 The preceptor clearly communicated rotation objectives, expectations, and instructions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2 The preceptor encouraged and gave me adequate time for discussions and questions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3 The preceptor was interested in my success on rotation.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4 The preceptor treated me with respect.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5 The preceptor encouraged independence and initiative.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6 The preceptor provided timely feedback regarding my performance.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7 The preceptor served as a positive role model (i.e., demonstrated professional dress and behaviors, a positive attitude, depth of knowledge, and strong communication skills). *	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8 The preceptor challenged me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. I would recommend Butler continue to use this person as a rotation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

preceptor. \*

10. The preceptor is knowledgeable in their field of practice.

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
-----------------------	-----------------------	-----------------------	-----------------------	-----------------------

11. The preceptor was an effective teacher and was able to teach fundamental concepts in their area of practice.

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
-----------------------	-----------------------	-----------------------	-----------------------	-----------------------

**General questions. Please complete them all.**

What do you consider to be the strengths of this preceptor?

What do you consider to be areas of improvement for this preceptor?

Please give specific examples of what the preceptor did to facilitate your learning.

Please list 3 strengths of this rotation.

Please list 3 areas of improvement for this rotation.

What are three key items learned from this rotation experience?

1.

2.

3.

Provide examples of your interactions with other healthcare professionals on this rotation.  
Please be specific about the type of profession.

How many weekend hours were required to be on site during your rotation?

Was your midpoint evaluation reviewed with you?

Please enter any other comments you would like to add.

## Journal Club Template

Name \_\_\_\_\_

BACKGROUND AND OVERVIEW	
<b>Article Title/Citation</b>	
<b>Study objectives/ purpose</b> and research hypothesis (if applicable).	
<b>Brief background</b>  Why the issue is important, concise summary of previous literature.	
<b>Funding sources</b>	
METHODS	
<b>Study design and Methodology</b> Study design, randomization, blinding, controls, study groups, length of study, interventions, group distinctions, etc. Are these appropriate?	
<b>Patient selection &amp; enrollment</b> Inclusion/exclusion criteria, sample size <u>needed</u> (if discussed).  Are these appropriate based on 'real-world'?	
<b>Outcome measures/ Endpoints</b> List primary and secondary. Are these appropriate given study objectives?	
<b>Statistical analyses</b>  Summarize tests done and state whether appropriate given type of data and study design? How did they account for missing data?	
RESULTS	



<p><b>Baseline info</b></p> <p>Number of study subjects actually enrolled per group, any <b>baseline</b> differences that could have affected study results, number starting study versus completing, sample size attainment, etc.</p>	
<p><b>Summary of study results, focusing on primary and secondary outcomes</b></p> <p>Including subgroup analysis, etc. Be sure to include both efficacy and safety parameters, if available. List specific numerical and statistical endpoints for relevant differences and discuss both statistical and clinical significance. Suggest making subheading based on stated outcome measures/endpoints.</p>	
<b>DISCUSSION</b>	
<p><b>Brief summary of authors' main discussion points</b></p> <p>Be sure to also include any comparisons with other literature/studies/therapies.</p>	
<p><b>Study strengths and weaknesses</b></p> <p>Include strengths &amp; limitations the authors listed, as well as your personal evaluation of</p>	<p>Strengths (identified by the author):</p>

strengths & weaknesses/limitations. This section should be large and clearly demonstrate that you have critically evaluated the article. Be sure to comment on internal and external validity issues with the trial.

	Weaknesses/limitations (identified by the author):
	Weaknesses/limitations (identified by the reviewer):

**CONCLUSIONS**

<b>Author's conclusions</b>	
-----------------------------	--

<b>Evaluator/student's conclusions</b> Do you agree with the author's conclusions? Why or why not? What different/ additional conclusions do you have?	
-----------------------------------------------------------------------------------------------------------------------------------------------------------	--

<b>Applicability and impact on pharmacists/ healthcare providers and potentially patients/public.</b> Should practice change based on this study?	
------------------------------------------------------------------------------------------------------------------------------------------------------	--

<b>Biggest take home message(s) in 3 sentences or less.</b>	
-------------------------------------------------------------	--

**Journal Club Presentation Evaluation Form**

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

Journal Article: \_\_\_\_\_

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

**Assessment Scale:**

**EE – Exceeds expectations**

**ME – Meets expectations**

**NI – Needs improvement**

<p>Presenter provides accurate and current background information pertinent to the topic using a correct summary of available primary literature. <b>NI ME EE</b></p>	<p><b>Comments:</b></p>
<p>Presenter provides an accurate and brief description of the study goal, methods, and results. <b>NI ME EE</b></p>	
<p>Presenter appropriately discusses attributes and deficiencies of study methodology. When deficiencies are noted, a proposed technique to improve the flaw is provided. <b>NI ME EE</b></p>	
<p>Presenter comments on the appropriateness of statistical methods used. <b>NI ME EE</b></p>	
<p>Presenter provides their own conclusions of study supported by sound reasoning. <b>NI ME EE</b></p>	
<p>Presenter determines the study impact on clinical practice and provides logical explanation of their opinion. <b>NI ME EE</b></p>	
<p>Presenter uses professional language, appears confident, and utilizes an effective presentation style. <b>NI ME EE</b></p>	
<p>Presenter displays ability to appropriately answer questions. <b>NI ME EE</b></p>	

## **CASE PRESENTATION**

### **Guidelines:**

1. Focus on a single, important pharmacotherapy issue
2. Subject chosen by student/approved by preceptor
3. Encourage choice of more unusual/creative topic selection and presentation style
4. Include 2-4 learning objectives (put on title page)
5. Present and highlight information relevant to chosen topic
6. Illustrate application of knowledge
7. Should not exceed 30 minutes (approx. 20-25 minutes for presentation, 5-10 minutes for questions)
8. Include evaluation of 3-4 relevant primary literature references/articles
9. Reading from handout NOT allowed (reading from script will result in failure of activity; should know case well enough/practiced to know material and be able to speak from outline)
10. Handout required; use of audio-visual support strongly suggested (transparencies, Power Point, slides)
11. Handout must be neatly typed, be a summary of information (max = 3-4 pages), list appropriate references, reference tables, diagrams taken from references
12. Use generic nomenclature for all medications mentioned
13. Keep audience in mind
14. Provide appropriate closure before questions

### **Contents:**

Suggested percentages of time for each category included in written handout and/or oral presentation.

#### **Discussion of the Patient – 15%**

1. Admission information (age, race, sex, date/place of admission, chief complaint, signs/symptoms related to CC, history of present illness, other current medical/psychiatric problems)
2. Patient-specific information (past medical/psychiatric history, family/social history, medication history, physical exam\*, mental status exam\*, diagnostic screening\*, physician impressions/plan) – for the asterisked items, indicate the information that relates to the current illness/situation
3. Hospital course (timeline of patient's response to therapies/relevant changes/situations/outcomes)
4. Pharmaceutical care plan (problem list, drug therapy plan for each problem including drug treatment, monitoring, endpoints\*) (\*keep short and concise)
5. Statement of therapeutic issue to be discussed

#### **Discussion of the Disease State – 15%**

1. Discuss disease state according to the following:
  - incidence
  - etiology
  - pathophysiology
  - natural course of disease
  - clinical symptomatology
  - lab findings
  - prognosis
  - complications
  - sequelae
  - correlation of disease with the patient being presented

#### **Discussion of the Treatment—50%**

1. Classic treatment of disease – **10%**
2. Management of current case (compare to classic treatment) – **10%**
3. Pharmacist's role in disease/therapy management – **10%**
4. Proper monitoring of therapy - therapeutic monitoring, therapeutic endpoints - **10%**
5. Review of medications used to treat highlighted issue/disease; pharmacology, pharmacokinetics alternative treatments - **10%**
6. Is the cost of therapy a consideration?

#### **Review of Primary Literature, 2-4 related articles – 15%**

#### **State Conclusions and Relate the Conclusion to the Practice of Pharmacy– 5%**

## PATIENT CASE PRESENTATION EVALUATION FORM

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

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

Key:	EE	Exceeds Expectation; demonstrates mastery consistent with an entry-level practitioner
	ME	Satisfactory/acceptable performance; meets expectations
	NI	Improvement is needed

<b><u>Evaluation of Case: Pharmacotherapy</u></b>	NI	ME	EE	<b><u>Comments</u></b>
Describes pertinent disease state information and discusses need to treat pharmacologically	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Provides adequate patient information in a succinct, efficient manner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Discusses appropriate goals of therapy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Describes pharmacotherapeutic alternatives and non-pharmacological therapies (if applicable) available for treatment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Describes drugs, dosage forms, doses, schedules, and durations of therapy which are appropriate and patient-specific	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Identifies appropriate clinical and laboratory monitoring parameters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Discusses pertinent primary literature (adequately evaluated) when appropriate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

<b><u>Presentation and Communication Skills</u></b>	NI	ME	EE	<b><u>Comments</u></b>
Proper enunciation/ pronunciation/ professional phraseology	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Overall presentation style: smooth delivery, appears comfortable and self-assured, avoids distracting mannerisms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Visual aids well-prepared and easy to read, free of errors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Answers questions in a logical fashion with appropriate depth of answers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Demonstrates ability to think when questioned; may theorize if not sure of an answer, but identifies responses as such	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Overall performance:       PASSED    DID NOT PASS

Final Presentation Evaluation Form				
Student: _____			Date: _____	
Topic: _____				
For each of the sections below, circle the descriptor which most clearly corresponds to your				
EE: exceeds expectations		ME: meets expectations		NI: needs improvement
<b>Content</b>				
Objectives clearly written.	NI	ME	EE	Comments: _____
Knowledge of literature related to subject area.	NI	ME	EE	_____
Clearly identifies and presents pertinent information	NI	ME	EE	_____
Accurately summarizes and applies the primary	NI	ME	EE	_____
Clear pattern of organization.	NI	ME	EE	_____
Utilizes time well.	NI	ME	EE	_____
Slides well prepared (concise, uncluttered,	NI	ME	EE	_____
References provided in correct format.	NI	ME	EE	_____
<b>Presentation</b>				
Direct eye contact maintained.	NI	ME	EE	Comments: _____
Verbal delivery (easily heard, proper rate & pace, correct pronunciation,	NI	ME	EE	_____
Used professional phraseology.	NI	ME	EE	_____
Appeared comfortable, confident, and self-assured.	NI	ME	EE	_____
Ability to think when questioned. Identifies answer as theorized if	NI	ME	EE	_____
Overall presentation style and	NI	ME	EE	_____

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

## **PATIENT PROFILE REVIEW**

THE FOLLOWING IS A STEP-WISE APPROACH TO PATIENT PROFILE DRUG REGIMEN REVIEW:

1. Identify patient allergy and compare to the patient's medication therapy
2. Compare current medications with patient diagnoses, complaints, or problems
  - a. Cross link diagnoses with medications
  - b. Include treatment failures from discontinued medications
3. Determine if the medical condition(s) warrant the drug therapy
  - a. Is non-drug therapy indicated?
  - b. Is this medication used to treat an adverse drug reaction from other therapies?
  - c. Duplicate therapy?
  - d. Addiction?
4. Determine if the medication or its route (form) is the safest and most effective
  - a. Should another dosage form be considered?
  - b. Consider age, physical limitations, gender, race, pregnancy, lactation, etc.
  - c. Consider drug interactions (drug-drug, -food, -lab, disease)
  - d. Determine drugs of choice for disease
  - e. Consider side effects or adverse effects
5. Identify inappropriate prescribing for treatment of disease
  - a. Dose (consider weight, age, gender, etc.)
  - b. Duration
  - c. Interval
6. Consider patient compliance/adherence
  - a. Drug storage
  - b. Convenience
  - c. Motivation
  - d. Affordability
  - e. Personality and intelligence
  - f. Side effects
7. Identify monitoring parameters for follow-up or patient self-monitoring to ensure optimal outcomes
8. Determine non-pharmacological therapies that can be utilized in conjunction with pharmacological treatment to enhance results.
  - a. Support groups
  - b. Educational materials
  - c. Referral to other health care professionals
  - d. Lifestyle modification
  - e. Other therapies
9. Document assessment and plan for continuity of care among co-workers





### Care Plan Description & Criteria for Assessment

Patient Name: \_\_\_\_\_ Age: \_\_\_\_ Gender: \_\_\_\_ Height: \_\_\_\_\_ Weight (actual): \_\_\_\_\_

IBW: \_\_\_\_\_ Estimated CrCl: \_\_\_\_\_ (round to the nearest whole number)

Allergies: \_\_\_\_\_

<b>Collect</b>	Provide a prioritized list of the patient's problems according to the ASHP Priority Designation.
	Collect all pertinent subjective and objective data pertaining to the patient.
<b>Assess</b>	<p><b><u>Goals of Therapy</u></b> Include evidence based and measurable goals of therapy for the assigned patient problem. Goals should be disease state and patient specific. The identified goals of therapy will be reflected in the monitoring plan for the problem.</p> <p><b><u>Assessment of Patient Problem(s)</u></b> Provide an assessment of the assigned patient problem based on the above goals of therapy and the current drug therapy used to treat the patient problem (if applicable).</p> <p><b><u>Assessment of Current Therapy (if applicable)</u></b> Assess each current medication (drug, dose, route, frequency, duration) for appropriateness, effectiveness, safety, and patient adherence.</p> <p><b><u>Assessment of Drug Treatment Options</u></b> Provide an assessment for each drug therapy option to treat the patient problem. Include evidence-based data and patient-specific information.</p>
<b>Plan</b>	<p><b><u>Recommended Drug Therapy</u></b> Provide a patient specific drug therapy plan including drug, dose, route of administration, frequency, and duration (if applicable). Must include all medications continued, discontinued, added, or modified relating to the assigned problem.</p>
<b>Implement</b>	<p><b><u>Patient Education</u></b> Provide patient specific education and self-management training related to recommended drug therapy and non-pharmacologic therapy to the patient or caregiver.</p>
<b>Follow-up: Monitor and Evaluate</b>	<p><b><u>Recommended monitoring plan</u></b> Provide a patient specific monitoring and follow-up plan to assess if patient is meeting goals of therapy.</p>

### Written Project Evaluation Form

Student Name: \_\_\_\_\_ Evaluator: \_\_\_\_\_  
 Experiential Type: \_\_\_\_\_ Topic: \_\_\_\_\_ Date: \_\_\_\_\_

Introduction	Exceeds Expectations	Meets Expectations	Does Not Meet Expectations	Not Applicable
States the purpose of the project	4	3	1	NA
Provides general background information on the topic	4	3	1	NA
Reviews appropriate literature	4	3	1	NA
Information is accurate	4	3	1	NA
Detailed information is provided, and patient confidentiality is maintained	4	3	1	NA
Tables/graphs/charts are used appropriately	4	3	1	NA
There are no spelling or grammatical errors	4	3	1	NA
Appropriate use of professional/ medical language	4	3	1	NA
Medical terms are explained in sufficient depth	4	3	1	NA
If data is conflicting, a suitable conclusion with literature to justify the response is given	4	3	1	NA
Summarized all major points	4	3	1	NA
Articles are referenced according to NEJM standard referencing format	4	3	1	NA

**Comments and Suggestions for Improvement:**

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Total Score: \_\_\_\_\_

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

### Drug Information Request Form



<b>Date:</b>	<b>Contact Name:</b>		
<b>Time:</b>	<b>Phone Number:</b>	<b>Fax:</b>	
<b>Preferred method of contact:</b> Phone: _____ Fax: _____ In person: _____			
<b>Question:</b>			
<b>Search Strategy</b> (List ALL references consulted to prepare the answer. Be sure to include page numbers. References must be in a standardized format.)			
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
<b>Response Given:</b> (Use complete sentences. Write legibly. Summarize response such that another person can relay the answer in your absence. Reference every line of your answer with the corresponding # of the resources used above.)			



### Drug Information Evaluation Form

Resident/Student Name: \_\_\_\_\_ Evaluator: \_\_\_\_\_ Date: \_\_\_\_\_

Please evaluate the student's/resident's topic drug information response on the scale below. Circle one rating for how well each statement was achieved *Please provide comments in the space provided.*

**NI – Needs Improvement    ME – Meets Expectations    EE – Exceeds Expectations**

- |                                                                           |    |    |    |
|---------------------------------------------------------------------------|----|----|----|
| 1. Clarifies requester's drug information need                            | NI | ME | EE |
| 2. Formulates a search strategy                                           | NI | ME | EE |
| 3. Retrieves pertinent literature to evaluate                             | NI | ME | EE |
| 4. Evaluates the literature                                               | NI | ME | EE |
| 5. Provides response to the requester in an appropriate and timely manner | NI | ME | EE |
| 6. Evaluates the effects of the information provided                      | NI | ME | EE |

Additional Comments:

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<b>Overall Assessment:</b>	NI	ME	EE
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## Topic Discussion Evaluation Form

Student Name: \_\_\_\_\_ Evaluator: \_\_\_\_\_

Date: \_\_\_\_\_ Topic Discussion Title: \_\_\_\_\_

Please evaluate the student's/resident's topic discussion based on the scale below. Circle one rating for how well each statement was achieved. ***Please provide comments in the space provided.***

**NI – Needs Improvement    ME – Meets Expectations    EE -Exceeds Expectations**

- |                                                                                                                                                            |           |           |           |
|------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------|-----------|
| 1. Well prepared for discussion and presents completed handout to preceptor                                                                                | <b>NI</b> | <b>ME</b> | <b>EE</b> |
| 2. Identifies etiology of disease and appropriate background information                                                                                   | <b>NI</b> | <b>ME</b> | <b>EE</b> |
| 3. Discusses risk factors for developing the stated disease                                                                                                | <b>NI</b> | <b>ME</b> | <b>EE</b> |
| 4. Identifies appropriate pharmacotherapy goals                                                                                                            | <b>NI</b> | <b>ME</b> | <b>EE</b> |
| 5. Displays command of the pharmacotherapy being discussed<br>(i.e.: mechanism of action, adverse effects, brand/generic, drug-disease state interactions) | <b>NI</b> | <b>ME</b> | <b>EE</b> |
| 6. Follows a logical format when leading topic discussion                                                                                                  | <b>NI</b> | <b>ME</b> | <b>EE</b> |
| 7. Answers questions appropriately and can verbalize thought process behind answers                                                                        | <b>NI</b> | <b>ME</b> | <b>EE</b> |

Additional Comments:

**Overall Assessment:    NI    ME    EE**

### Patient Discussion Evaluation Form

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

Please evaluate the student's/resident's patient discussion based on the scale below. Circle one rating for how well each statement was achieved. *Please provide comments in the space provided.*

<b>NI – Needs Improvement</b>	<b>ME – Meets Expectations</b>	<b>EE -Exceeds Expectations</b>	
1. Well prepared for discussion and uses appropriate monitoring form	NI	ME	EE
2. Presents pertinent demographic information	NI	ME	EE
3. Presents chief complaint HPI, PMH, SH, FM, medications PTA, pertinent lab values, and tests	NI	ME	EE
4. Identifies a problem list and corresponding pharmacotherapy goals	NI	ME	EE
5. Displays command of patient-specific pharmacotherapy regimen (i.e., indications, mechanism of action, adverse effects, brand/generic, drug-disease state interactions)	NI	ME	EE
6. Follows a logical format when leading patient discussion	NI	ME	EE
7. Answers questions appropriately and can verbalize thought process behind answers	NI	ME	EE
8. Displays initiative and willingness to follow up with appropriate health care professionals as necessary	NI	ME	EE
<b>Overall Assessment:</b>	<b>NI</b>	<b>ME</b>	<b>EE</b>

Additional Comments: