COURSE TITLE: Mental Health APPE
PPRA 981

REQUIRED/ELECTIVE: Required/Elective

Learning Objectives:

A student who successfully completes a clinical experience in psychiatric pharmacy practice-mental health experience shall be able to provide pharmaceutical care as demonstrated by competence in the following areas:

A. Knowledge Base

1. Identify the symptoms of a wide range of psychiatric disorders as described in the current edition of the *Diagnostic and Statistical Manual of Mental Disorders.*
2. Identify medical conditions, pathophysiologic theories and concomitant drug therapy which influence selection, use, and dosage of psychotropic agents.
3. Identify FDA and non-FDA approved indications in which the use of psychoactive medications are justified.
4. Identify assessment differences in various patient populations (i.e. geriatrics, pediatrics, adolescents, chemically-dependent patients, medically compromised patients, treatment refractory populations, and patients with developmental disorders).
5. Identify therapeutic endpoints for various psychiatric disorders.

B. Integration

1. Integrate the pathophysiology of psychiatric disorders with appropriate pharmacotherapy.
2. Integrate pharmacotherapeutic options and non-drug strategies for psychiatric disorders.
3. Integrate the data collected from various sources with the principles of pharmacotherapeutic applications.
4. Evaluation of the psychiatric drug literature to determine validity of the results and conclusions and how the literature may influence pharmacotherapeutic decisions.

C. Applications

1. Monitor, assess, and recommend pharmacotherapy for the major psychiatric disorders, based on the effects of the drugs and the psychiatric and medical conditions of the patient.
2. Utilize pharmacokinetic principles in the development and evaluation of pharmacotherapy when applicable.
4. Monitor, assess, and recommend modifications in drug therapy prospectively for potential adverse drug reactions and toxic responses to circumvent these problems.

D. Communication

1. Conduct a patient psychiatric evaluation and interpret the results.
2. Conduct a medication history assessing patient compliance and attitudes toward compliance.
3. Provide patient counseling both for individuals and groups of patients as applicable.
4. Provide formal and informal education services to students and other professionals as required.
5. Communicate effectively with patients, family members, staff, and peers.

Areas of Emphasis:

The learning objectives shall be applied to each of the following:

A. Psychotic Disorders

1. Pathophysiological theories
2. Clinical presentations including positive and negative symptoms
3. Differential diagnostic criteria
4. Non-drug therapies

B. Pharmacotherapy

1. Antipsychotics
2. Adjunctive agents
3. Pharmacology
4. Adverse Effects

C. Mood Disorders

1. Depression
   a. Pathophysiological theories
   b. Clinical presentation including subtypes
   c. Therapy
i. Cognitive
ii. Electroconvulsive
iii. Pharmaceutical
   — Pharmacology
   — Pharmacokinetics
   — Adverse effects
   — Overdose and management

2. Bipolar-Mania
   a. Pathophysiological theories
   b. Clinical presentation including subtypes
   c. Pharmacotherapy
      i. Pharmacology
      ii. Pharmacokinetics
      iii. Adverse effects
      iv. Drug/Drug and Drug/Disease interactions
      v. Overdose and management

3. Anxiety Disorders
   a. Pathophysiological theories
   b. Clinical presentation including:
      i. Generalized anxiety disorder
      ii. Panic and phobic disorder
      iii. Post traumatic stress disorder
      iv. Obsessive compulsive disorder
   c. Pharmacotherapy
      i. Pharmacology
      ii. Pharmacokinetics
      iii. Adverse effects
      iv. Drug interactions/contraindications
         — Benzodiazepines
         — Azapirones
         — Beta-blockers
         — Antidepressants
         — Other agents

D. **Other areas of emphasis which may be included depending on the practice site are as follows:**

1. Psychoactive substance use disorders
2. Personality disorders
3. Geriatric psychiatry
4. Child and adolescent disorders
5. Developmental disorders
6. Neurology
Attendance

The student is expected to be at the practice site, Monday through Friday. Times may vary with each site. It is the policy of the College of Pharmacy that experiences are not limited to a forty (40) hour week, nor any particular time of the day or day of the week. In fact, most experiences require more than eight hours of daily participation. The student must inform the preceptor as soon as possible of a pending absent. Preceptor consent is needed for excused absences. Specific assignments may be waved by the preceptor if the student attends a professional meeting or other professional activity.

Grading

The student must pass each assignment. No assignment should receive a below average score and an overall satisfactory evaluation is required to pass the experience. The preceptor may weigh the various assignments in order to calculate an overall evaluation. Assignments which do not pass will be returned to the student to be re-done. Students who have not passed all assignments by the end of the session will be given an Incomplete. It is the student’s responsibility to assure that arrangements are made with the preceptor to satisfy the course requirements and remove the Incomplete before graduation.

Dishonesty, violation of patient confidentiality, conduct considered seriously detrimental to the College’s programs could lead to disciplinary action under applicable College or University policy. Remember copying another person's written words is plagiarism. If you copy another health professional's work from the chart without appropriate credit it is also plagiarism.

Dress

Professional attire only. No blue jeans or clothes not in good condition. No ties on the psychiatric ward (except clip-ons). A name badge is required.

Assignments

The number and weight of assignments will vary with each preceptor. The following is a general description of each type of assignment. Specific forms will be provided at each site.

1. **Unit Staff Meetings**
   The student will review the charts of all patients who are to be discussed during staff meetings. The student may use any type of notes, but knowledge of all drugs and doses is necessary. The student should actively participate by asking questions, offering information on drug therapy, and taking notes on new admissions or unit problems.
2. **Medication Histories**  
The student will interview all new admissions to obtain information after the patient is stabilized.

3. **Discharge Counseling**  
The student will counsel each patient on the unit who is discharged with medication. The OBRA checklist will be used.

4. **Drug Information Questions**  
The student will answer all drug-related questions from the staff, patients, and preceptors. The form of the answer would be similar to that given by a drug information pharmacist. The answer may be handwritten or typed, describing the question, the answer, and should include a reference list.

5. **Adverse Drug Reaction Report**  
The student will monitor for adverse drug reactions. Include in each report the patient's name, hospital I.D. number, unit number, and student-pharmacist name.

6. **Pharmacokinetic Monitoring**  
The student will monitor an assigned number of patients on his or her unit who are on medications which require monitoring of levels. When appropriate, calculate drug dosage changes required. Discuss with the preceptor before making recommendations to the M.D. Provide references if necessary.

7. **Patient Monitoring**  
The number of these and how they are chosen will be site specific; they may be done in conjunction with case presentations. In some sites, a card or one page in a small notebook should be filled out on each patient listing the probable psychiatric problems, current medications, and general behavior over the past 4 days. The student should know the dosage range for each drug the patient is taking, the physical appearance of the dosage forms used, and the most common side effects for each medicine.

8. **Individual Counseling**  
The student will counsel patients requiring one-to-one counseling.

9. **Drug Utilization Evaluation**  
This may be an independent project or done in conjunction with College of Pharmacy or hospital quality of care programs.
10. **Aims or Discus Testing**
These screens for tardive dyskinesia are to be done on patients taking neuroleptics.

11. **Patient Medication Groups**
Held at a time to be worked out with the staff on each unit and the preceptor. They will usually be conducted each week. The student will take an active part in these groups.

12. **Formal Meetings Between the Student and Preceptor**
During these weekly meetings a variety of activities may take place. The student should actively participate by asking and answering questions.

   a. Discussion or lectures related to psychotropic drugs, psychiatric diagnosis, etc.
   b. Formal case/patient presentations
   c. Informal discussions of patients being worked up, monitored, or studied for some other assignment
   d. Journal presentations
   e. Quizzes and grading
   f. Progress reports or submission of completed assignments

13. **Comprehensive Patient Presentations (Case Studies)**
The patient should be pre-approved by the preceptor. These assignments may include both a verbal presentation and a written report. The *Pharmacist's Workup of Drug Therapy* (PWDT), SOAP, or other problem solving format should be followed. The length of essay portion is normally four pages. Additional pages will be necessary for the bibliography (at least 5 references; primary references must be used when they are obtainable), pharmacokinetic calculations, drug history, drug calendar, results of psychometric tests, etc.

14. **Abbreviated Patient Presentations (Case Summaries)**
One to two pages in length, typed or neatly written. The content to be specified by the preceptor. These are not as long or as involved as the comprehensive patient presentations above. They may include the medication history, individual counseling progress notes, notes on other activities such as discharge counseling, patient medication groups, etc. They will also include an evaluation of drug therapy and recommendations.

15. **Inservice**
The topic and time of presentation should be worked out with the preceptor. A typed handout (with references, names of presenter and date) must be used to facilitate talk.
16. **Psychiatric Literature Evaluation and Journal Club**

The student will be prepared to discuss the article in detail. Analyze the article with respect to study design, statistical analysis, and validity of author's conclusions. Primary articles are usually required. The article should be current. The preceptor may direct the student to specific journals or time periods. Pre-approval of an article may be required. Completion of a form or report may also be required.

17. **Written Exams**

There will usually be a quiz at the beginning of the session to measure psychotherapeutic knowledge gained from the therapeutics class or readings required by the experience. There may also be a written final exam which can also include topics covered during case presentations, weekly meetings, journal clubs, etc.

18. **Therapy Groups and Patient Activities**

The student will attend these activities. The therapy group is a formal meeting between staff and patients for educational or therapeutic purposes. A patient activity is any recreational or social event that is organized by the staff. The purpose of attending these types of activities is to observe and interact with patients on an informal level, establishing rapport, observing patient behavior, and effects of medications.

19. **Readings**

The student will be given readings to complete at the beginning of the session and during the session. Re-reading chapters in the therapeutics text book may be required.

20. **Other Activities:**

   a. Psycal, a computer program of five cases (available only through Idaho State University)
   b. A written paper on a topic chosen or approved by the preceptor
   c. Videos
   d. Films
   e. Guest speakers and conferences