Idaho State University

Course Number: PHAR 9981
Course Title: Advanced Pharmacy Practice Experience: Ambulatory Care
Semester: Full Year (2016-2017)
Credit Hours: 6

Course Description:
The Ambulatory Care APPE affords students the opportunity to integrate basic pharmacy-related concepts to patient care as a member of an interdisciplinary health care team and provider of patient-centered care in the ambulatory care setting. Using an educator/practitioner as a role model, the student will directly involve him or herself in the development of drug treatment regimens for selected patients. The educational experience may include evaluating literature, developing drug monographs, interviewing patients, interpreting data, assessing drug therapy, making recommendations for and monitoring drug therapy, and understanding and utilizing the evidence-based principles of medicine needed to develop an optimal therapeutic plan for patients with disease states that are commonly treated in an outpatient setting. The students must apply their knowledge of pathophysiology, pharmacology, pharmacokinetics, and pharmacotherapy gained in the preceding curricula.

Class meeting time & place:
Meeting time and place will be determined based on the preceptor site and preceptor availability.

APPE Schedule Dates:

Current Year: 2015-2016
#1: 2015-05-11 - 2015-06-19
#2: 2015-06-22 - 2015-07-31
#3: 2015-08-03 - 2015-09-11
#4: 2015-09-14 - 2015-10-23
#5: 2015-10-26 - 2015-12-04
#6: 2016-12-28 - 2016-02-05
#7: 2016-02-08 - 2016-03-18
#8: 2016-03-21 - 2016-04-29

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Required/recommended course materials, if any:

Textbooks and Resources

The student should start to put together a personal library of information resources which is important for professional growth and life-long learning. Having a personal library of resources he/she is familiar with increases the quickness and efficiency medical information is obtained and distributed to the patient or healthcare provider. At a minimum the following list is an example of the text to be used:

- Pharmacotherapy • Injectable Compatibilities
- Handbook of Drug Data • Compounding
- Handbook of Non-Prescription Drugs • Laboratory Interpretation
- General Medicine • Drug Identification
- Pharmacokinetics • Adverse Drug Reactions
- Medical Dictionary • Adverse Drug Interactions

The resources are available via the College of Pharmacy’s website for AccessPharmacy, PharmacyLibrary and other pharmacy informatic resources.

Learning outcomes related to ACPE Appendix 1:

<table>
<thead>
<tr>
<th>Pharmaceutical Sciences</th>
<th>Applied information: in depth coverage</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Pharmacokinetics : Mathematical determination of the rate of drug movement from one therapeutic or physiologic compartment to another. Application of physicochemical and kinetic principles and parameters to therapeutically important issues, such as drug delivery, disposition, therapeutic effectiveness, and beneficial or adverse interactions in general and specific populations.</td>
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<tr>
<td>• Pharmacology : Pharmacodynamics, mechanisms of therapeutic and adverse drug actions and interactions, lifespan-dependent variations in physiology or biochemistry that impact drug action and effectiveness, and application of these principles to therapeutic decision-making.</td>
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</table>

<table>
<thead>
<tr>
<th>Social/Administrative/Behavioral Sciences</th>
<th>Applied information: in depth coverage</th>
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</thead>
<tbody>
<tr>
<td>• Cultural Awareness : Exploration of the potential impact of cultural values, beliefs, and practices on patient care outcomes.</td>
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<tr>
<td>• Ethics : Exploration of approaches for resolving ethical dilemmas in patient care, with an emphasis on moral responsibility and the ability to critically evaluate viable options against the needs of patients and other key stakeholders.</td>
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<tr>
<td>• Healthcare Systems : Examination of U.S. health systems and contemporary reimbursement models in which patient-centered and/or population-based care is provided and paid for, and how social, political, economic, organizational, and cultural factors influence providers’ ability to ensure patient safety and deliver coordinated interprofessional care services.</td>
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<p>| Clinical Sciences | |
|------------------|</p>
<table>
<thead>
<tr>
<th>Course</th>
<th>Basic principles/foundational concepts</th>
<th>Applied information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical Pharmacokinetics: Application of basic pharmacokinetic principles and mathematical models to calculate safe and effective doses of drugs for individual patients, and adjust therapy as appropriate through the monitoring of drug concentration in biological fluids</td>
<td>superfiacial coverage</td>
<td>superfiacial coverage</td>
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<tr>
<td>Health Informatics: Effective and secure design and use of electronic and other technology-based systems, including electronic health records, to capture, store, retrieve, and analyze data for use in patient care, and confiendentially/legally share health information in accordance with federal policies.</td>
<td>superficial coverage</td>
<td>in depth coverage</td>
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<tr>
<td>Health Information Retrieval and Evaluation: Critical analysis and application of relevant health sciences literature and other information resources to answer specific patient-care and/or drug-related questions and provide evidence-based therapeutic recommendations to healthcare providers or, when appropriate, the public.</td>
<td>in depth coverage</td>
<td>in depth coverage</td>
</tr>
<tr>
<td>Medication Dispensing, Distribution and Administration: Preparation, dispensing and administration of prescriptions, identification and prevention of medication errors and interactions, maintaining and using patient profile systems and prescription processing technology and/or equipment, and ensuring patient safety. Educating about appropriate medication use and administration.</td>
<td>in depth coverage</td>
<td>in depth coverage</td>
</tr>
<tr>
<td>Natural Products and Alternative and Complementary Therapies: Evidence-based evaluation of the therapeutic value, safety, and regulation of pharmacologically active natural products and dietary supplements. Cultural practices commonly selected by practitioners and/or patients for use in the promotion of health and wellness, and their potential impact on pharmacotherapy.</td>
<td>superficial coverage</td>
<td>superficial coverage</td>
</tr>
<tr>
<td>Patient Assessment: Evaluation of patient function and dysfunction through the performance of tests and assessments leading to objective (e.g., physical assessment, health screening, and lab data interpretation) and subjective (patient interview) data important to the provision of care.</td>
<td>in depth coverage</td>
<td>in depth coverage</td>
</tr>
<tr>
<td>Patient Safety: Analysis of the systems- and human-associated causes of medication errors, exploration of strategies designed to reduce/eliminate them, and evaluation of available and evolving error-reporting mechanisms.</td>
<td>in depth coverage</td>
<td>in depth coverage</td>
</tr>
<tr>
<td>Pharmacotherapy: Evidence-based clinical decision making, therapeutic treatment planning, and medication therapy management strategy development for patients with specific diseases and conditions that complicate care and/or put patients at high risk for adverse events. Emphasis on patient safety, clinical efficacy, pharmacogenomic and pharmacoeconomic considerations, and treatment of patients across the lifespan.</td>
<td>in depth coverage</td>
<td>in depth coverage</td>
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<tr>
<td>Public Health: Exploration of population health management strategies, national and community-based public health programs, and implementation of activities that advance public health and wellness, as well as provide an avenue through which students earn certificates in immunization delivery and other public health-focused skills.</td>
<td>in depth coverage</td>
<td>in depth coverage</td>
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<tr>
<td>Self-Care Pharmacotherapy: Therapeutic needs assessment, including the need for triage to other health professionals, drug product recommendation/selection, and counseling of patients on non-prescription drug products, non-pharmacologic treatments and health/wellness strategies.</td>
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<td>in depth coverage</td>
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Endpoint Competency - Expectations

1.1 Integrate and apply foundational knowledge and independently acquire new knowledge as needed for the practice of pharmacy

Student’s should be able to apply learned didactic course material independently to various situations and patient interactions.

1.2 Appropriately evaluate and utilize scientific literature to provide an evidence-based approach to patient care and pharmacy practice

Student’s should effectively gather appropriate medical literature information and be able to synthesize the information into an applicable format.
<table>
<thead>
<tr>
<th>Course Syllabus</th>
<th>Page 4</th>
</tr>
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<tbody>
<tr>
<td><strong>2.1.1</strong></td>
<td>Efficiently gather and organize relevant data from a patient interview or medical record</td>
</tr>
<tr>
<td><strong>2.1.2</strong></td>
<td>Perform basic aspects of physical assessment</td>
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<td><strong>2.1.3</strong></td>
<td>Accurately assess the patient’s/caregiver’s self-management skills (i.e. medication adherence and/or ability to correctly use their drug regimen or device)</td>
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<tr>
<td><strong>2.1.4</strong></td>
<td>Assess a patient’s risk for adverse drug reactions</td>
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<td><strong>2.1.5</strong></td>
<td>Perform an accurate and prioritized assessment of the patient’s drug-related problems including any related health care needs that might affect drug therapy</td>
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<tr>
<td><strong>2.1.6</strong></td>
<td>Appropriately utilize clinical literature to evaluate all therapeutic options</td>
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<tr>
<td><strong>2.1.7</strong></td>
<td>Establish patient-specific therapeutic outcomes</td>
</tr>
<tr>
<td><strong>2.1.8</strong></td>
<td>Determine the best pharmaceutical care plan for each patient (including use of pharmaceutical and clinical science knowledge, evidence-based medicine and sound clinical judgment)</td>
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<tr>
<td><strong>2.1.9</strong></td>
<td>Determine patient-specific monitoring parameters for drug therapy outcomes</td>
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<tr>
<td><strong>2.1.10</strong></td>
<td>Articulate and document a succinct, optimal pharmaceutical care plan including appropriate justification for patient-specific recommendations</td>
</tr>
<tr>
<td><strong>2.2.1</strong></td>
<td>Manage health care needs of patients during transitions of care and optimize the transition process</td>
</tr>
<tr>
<td><strong>2.2.2</strong></td>
<td>Provide medication therapy management for patients with complex pharmacotherapy regimens</td>
</tr>
<tr>
<td><strong>2.2.3</strong></td>
<td>Identify and provide effective health promotion and disease prevention services for individual patients, including educating them about behaviors that promote health, maintain wellness, and prevent disease</td>
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<tr>
<td><strong>2.2.4</strong></td>
<td>Participate effectively in activities that promote health and wellness</td>
</tr>
<tr>
<td><strong>2.2.5</strong></td>
<td>Appropriately apply clinical guidelines and/or interpret medication use reviews to develop disease management protocols to optimize population-based outcomes</td>
</tr>
<tr>
<td><strong>2.2.6</strong></td>
<td>Demonstrate the ability to identify and solve patient-related health care problems</td>
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<tr>
<td><strong>2.2.7</strong></td>
<td>Demonstrate the ability to independently solve multiple problem types in a variety of settings</td>
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<tr>
<td><strong>2.2.8</strong></td>
<td>Provide effective counseling to patients and/or caregivers including proper instructions for self-care and the safe and effective use of medications and devices</td>
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<tr>
<td><strong>2.2.9</strong></td>
<td>Provide accurate and useful drug information by defining the needs of the requestor, thoroughly evaluating information from all appropriate resources and effectively communicating a response</td>
</tr>
</tbody>
</table>

| **2.1.1** | Be able to gather pertinent patient information in order to to identify drug related problems and to perform proper patient counseling. |
| **2.1.2** | Be able to gather information during patient interview and be able to explain the results of the physical examination. |
| **2.1.3** | Be able to assess a patient prescription profile for adherence and patient understanding of medication use. |
| **2.1.4** | Be able to perform a drug utilization review and be able to identify potential of adverse drug reactions and drug interactions. |
| **2.1.5** | Be able to perform a medication review and be able to identify drug-related problems and be able to make appropriate recommendations to resolve these solutions. |
| **2.1.6** | Given a drug-related problem, be able to list and analyze all therapeutic options for that problem. Based on the analysis of options, students should be able to pick an optimal patient specific therapeutic option. |
| **2.1.7** | Based on patient’s therapy, students should be able to select the appropriate monitoring parameters to determine therapeutic efficacy. |
| **2.1.8** | Given a drug-related problem, be able to list and analyze all therapeutic options for that problem. Based on the analysis of options, students should be able to pick an optimal patient specific therapeutic option. |
| **2.1.9** | Based on patient’s therapy, students should be able to select the appropriate monitoring parameters to determine therapeutic efficacy. |
| **2.1.10** | Be able to document specific patient recommendations in the pharmacy’s drug processing software. |
| **2.2.1** | Be able to identify and offer solutions to a patient’s medication list in transition from one care setting to another. |
| **2.2.2** | Be able to complete a medication review and present to other healthcare providers. This may include CMR, TMR, and provider communications. In addition, the student will be able to create a medication action plan to give to the patient. |
| **2.2.3** | When available, be able to deliver immunizations or health screenings. |
| **2.2.4** | If identified, the student should be able to report an ADR to Medwatch. |
| **2.2.5** | Work in a healthcare team to develop care plans that optimize patient care |
| **2.2.6** | Be able to appropriately apply drug knowledge in solving patient in an effective manner and be able to communicate this in an appropriate level. |
| **2.2.7** | Student should be able to communicate problems to other healthcare providers and to patients. |
| **2.2.8** | Be able to apply the OBRA-90 counseling requirements and effectively counsel patient’s on how to use their medication appropriately. |
| **2.2.9** | Given a drug information question, student should be able to identify the appropriate "gold-standard" resource to answer the question and be able to synthesize an appropriate answer from all information sources. |
| **3.2.3** | Provide effective education to a variety of audiences including, patients, other health care professionals, students and the lay public | Student should be able to synthesize and present a disease state informational seminar either to healthcare providers or patients. |
| **3.3.1** | Assist patients in taking responsibility for and control of their health | Be able to apply motivational interviewing techniques to help patients identify and resolve issues with their health. |
| **3.3.2** | Recognize patients having difficulty navigating the health care system and help them to obtain optimal services | Be able to communicate appropriately to other healthcare providers in representing a patient’s health needs. |
| **3.4.1** | Actively participate and engage as a healthcare team member by demonstrating mutual respect, understanding, and values to meet patient care needs | Be able to identify the responsibilities of each member in an ambulatory care setting. Contribute to a patient centered health care model. |
| **3.5.1** | Communicate and interact in a professional and culturally sensitive manner including demonstrating respect and sensitivity for others, being open-minded and nondiscriminatory, and maintaining patient confidentiality | Be able to utilize cultural support tools when necessary. |
| **3.6.1** | Communicate effectively and appropriately at all levels (patient, interprofessional, lay public, peers) | Effectively deliver medication information to patients and other healthcare providers. |
| **3.6.2** | Demonstrate skill in verbal, non-verbal, and written forms of communication | Be able to utilize various communication tools effectively and ensure patient/healthcare provider understanding. |
| **3.6.3** | Display effective interpersonal skills | Be able to function and adjust job duties and responsibilities based on need of the ambulatory care setting. |
| **4.1.1** | Demonstrate a commitment to professional growth and life-long learning, including the ability to self-assess, accept and utilize feedback, and learn independently | Be able to identify areas for growth and how to improve in these areas. |
| **4.1.2** | Utilize reflections to develop a personal plan for improvement | Students should be able to identify areas of improvement in areas to help in pharmacy operations. |
| **4.2.1** | Demonstrate responsibility for creating and achieving shared goals, regardless of position | Be able to direct and instruct other pharmacy students or technicians in the pharmacy. |
| **4.3.2** | Demonstrate initiative when confronted with challenges | Be able to solve problems on their own. |
| **4.4.1** | Demonstrate professional behavior including but not limited to punctuality, reliability, meeting deadlines, appropriate dress, and assuming responsibility for one’s actions | Student will interact in a professional manner with other healthcare providers, patients and other members in the practice setting. |
| **4.4.2** | Accept responsibility for individual patient outcomes and give priority to patient well-being and safety, even if it means making personal sacrifices | Be able to follow patient continuously and appropriately justify patient outcomes |
| **4.4.3** | Maintain high standards with regard to moral, ethical and legal conduct. | Student will utilize the Code of Ethic for pharmacists in all of their interactions in the pharmacy. |

**Active learning strategies employed:**

**Interprofessional concepts or activities included in this course:**

Opportunities to learn about, from or with other members of the interprofessional healthcare team

Opportunities to participate as a health care team member in providing direct patient care and engaging in shared therapeutic decision making

**Course Specific Policies:**

**Orientation:**

Orientation to the practice site with tour of the facility and introduction to management, pharmacist, pharmacy technicians, staff and other key personal involved at the practice experience. Introduction of the policies and procedures, expectations in regard to scheduled hours, dress code, and parking. Orientation will also include the specific duties, activities, training and experience which will enable the student to fulfill the goals and objective needed to accomplish the competencies required to pass their APPE community rotation. Professionalism and patient confidentiality (HIPPA) will also be discussed.

**Methods of Learning:**

The preceptor will assess professional outcome abilities throughout the APPE by involving the student in specific activities and tasks. The following are learning objectives that should guide the learning of the student during their experiential experience.
The objectives are divided into four learning domains that mirror the student evaluation tool.

**Ambulatory Care Objectives**

**Learner:** Develops, integrates, and applies knowledge and skills appropriately to situations encountered in the practice setting.

Examples of learning competence may include:

- Verbally displaying relevant knowledge from the pharmaceutical, social/behavioral/administrative, and clinical sciences.
- Retaining and applying relevant information from current and prior experiences.
- Self-identifying learning needs and appropriately correcting or enhancing knowledge and skills.
- Identifying and critically analyzing literature to support decision-making.
- Describing how population-based care principles influence creation of practice guidelines and care of individual patients.

**Patient Care** *(divided into 3 subdomains)*

1. **Collects data.** Accurately gathers and organizes all relevant subjective and objective information (e.g., comprehensive medication list, allergies, medical history, pertinent lab/physical assessment findings, and social determinants of health).

Examples of data collection competence may include:

- Conducting patient/caregiver interviews using an organized structure and comprehensible wording.
- Efficiently reviewing electronic chart/health records.
- Gathering pertinent information from other health professionals.
- Performing/reviewing physical assessment findings.

2. **Assesses data.** Evaluates drug therapy regimen for appropriateness in achieving optimal patient outcomes (considering safety, efficacy, adherence). Appropriately prioritizes potential or current pharmacotherapy problems. Examples of patient data assessment and prioritization competence may include:

- Performing comprehensive medication review.
- Performing medication reconciliation.
- Performing accurate pharmacy calculations.

3. **Development, implementation, and monitoring of patient care plan.** Develops or revises, implements, and evaluates a patient-centered care plan to optimize drug therapy and clinical outcome. Examples of plan development and implementation competence may include:

- Using clinical guidelines, primary literature, and information from other care providers.
- Incorporating patient beliefs, preferences, and living environment constraints to represent the patient’s best interests.
- Identifying, incorporating, and implementing health and wellness improvement strategies.
- Considering continuity of care across settings.
- Providing patient education and addressing patient questions and concerns about therapy.
- Monitoring patient response to therapy and success in achieving desired therapeutic goals.
- Appropriately documenting patient interventions and other patient care activities.

**Problem-Solving** *(divided into 2 subdomains)*

1. **Demonstrating critical thinking and innovation during the problem-solving process.** Critical thinking and innovation are intellectually disciplined processes of skillfully evaluating information and designing a solution that incorporates new ideas or methods, when appropriate. Examples of problem-solving competency may include:

- Identifying and collecting relevant information.
- Analyzing, evaluating, interpreting, and prioritizing information using logical arguments and incorporating multiple perspectives.
- Synthesizing and implementing the most viable course of action/solution.
- Adapting when new or changing situations arise.

2. **Performing management activities that prevent or address problems in a systematic manner.** Effectively participates in practice/operations management activities using human, financial, technological, and physical resources to optimize the safety and efficacy of medication use systems.

- Applying pharmacy law, ethics, and administrative policies and procedures appropriately.
- Using technology to optimize efficiency and patient safety.
- Participating in the management of human resources, marketing, billing, quality assurance processes, or inventory control.
- Demonstrating leadership when needed.

**Communication** *(divided into 2 subdomains)*

1. **Effectively communicates information verbally, non-verbally, and in written form when interacting with an**
individual, group, or organization. Examples of verbal and written communication competence may include:

- Listening to others with attention.
- Demonstrating interest, empathy, and respect during conversation.
- Communicating articulately, concisely, tactfully, and confidently.
- Providing relevant information appropriately targeted to the audience.
- Writing effective patient care notes and other documents at a level appropriate to the reader.
- Creating documents that have a clear purpose, appropriate content, logical organization, correct mechanics, and appropriately cite and reference resources.

2. Effectively interacts with other members of the health care team or organization. Examples of team competence may include:

- Working collaboratively with the interprofessional and pharmacy team.
- Engaging in shared decision making, rather than just making a recommendation to the team.
- Displaying a willingness to speak up, even against a perceived power gradient.
- Identifying and helping to resolve areas of conflict between team members.
- Assessing effectiveness of team performance.
- Adapting one's role to make the team more effective.

Professionalism (divided into 2 subdomains)

1. Self-Awareness: Examines and reflects on personal knowledge, skills, abilities, beliefs, biases, motivation, and emotions that could enhance or limit personal and professional growth. Examples of self-awareness competence may include:

- Recognizing and accepting responsibility for own work, actions, and consequences.
- Maintaining motivation, attention, and interest during learning and work-related activities.
- Graciously receiving feedback and seeking to improve performance.
- Displaying appropriate humility, confidence, initiative, persistence, and tolerance for ambiguity.

2. Professional Behavior Exhibits appropriate behaviors and values that are consistent with the trust given to the profession by patients, other healthcare providers, and society. Examples of professional behavior competence may include:

- Demonstrating altruism, integrity, trustworthiness, flexibility, and respect in all interactions.
- Displaying preparation, initiative, and accountability consistent with a commitment to excellence.
- Providing care in a manner that is legal, ethical, and compassionate.
- Maintaining standards for professional conduct (e.g., attire, language, attendance, punctuality, commitment, confidentiality).
- Demonstrating the skills and attitudes necessary for self-directed, life-long learning.
- Gracefully managing stressful situations.

Goals of Ambulatory Care Experience:

1. Efficiently gather relevant patient data from a patient interview and/or medical record.
2. Appropriately perform selected aspects of physical assessment.
3. Identify appropriate data affecting drug dosing and/or patients at high risk for adverse drug reactions.
4. Organize key clinical findings by disease state and/or drug regimen.
5. Efficiently identify all drug-related issues and demonstrate retention of level-appropriate knowledge base.
6. Establish appropriate patient-specific outcomes/monitoring parameters for each drug.
7. Identify and evaluate all rational therapeutic options.
8. Use good judgment (e.g., able to draw rational conclusions when data are incomplete).
9. Use pharmacokinetic principles and patient data to determine the most appropriate drug dosage regimen or formulation.
10. Use appropriate literature (e.g. EBM) to support patient-specific recommendations.
11. Provide timely and appropriate medication information.
12. Assume responsibility (e.g., appropriate follow-up) of patient care and therapeutic issues.
13. Seek necessary patient interaction.
14. Possess appropriate understanding of limitations and know when to seek advice.
15. Document an efficient pharmaceutical care plan that facilitates patient monitoring.
16. Verbally justify patient-specific recommendations to the physician and/or preceptor.
17. Ensure patient comfort and communicate appropriately to the patient; ensure HIPAA compliance.
18. Appropriately communicate with other health care professionals/students.
19. Use appropriate grammar and spelling in all written communications.
21. Be cooperative with and respectful to classmates, faculty, and other health care providers.
22. Demonstrate an ability for and commitment to independent learning.
23. Be compliant with all site policies and procedures, including appropriate attire and decorum.
24. Be punctual and actively participate with the health care team.
25. Demonstrate a desire to exceed expectations.
26. Accept and apply constructive criticism.

Preceptors Responsibilities:
1. Orientation to the rotation at the beginning of the APPE
2. Required objectives, activities and expectations
3. Starting and ending times
4. Policies and procedures
5. HIPAA compliance
6. Introduction to appropriate health care professionals and staff
7. Tour of the facility
8. Assign student to responsibilities consistent with the rotation objectives.
9. Provide supervision of the student’s activities and monitor achievement of required tasks to assess related student competencies.
10. Have those qualities which foster a positive professional role model.
11. Possess appropriate communications skills and have the ability to facilitate learning.
12. Supervise all written and verbal recommendations made by the student.
13. Never assume a student’s competency, but determine it by reviewing their work profile, discussion and experience.
14. Provide the student with mid-point performance evaluation during 3rd week.
   a. Specific recommendations for improvement if needed.
15. Complete evaluation of student’s performance.
16. Communicate with Experiential Director regarding any significant irregularities in student behavior:
   a. Irregular attendance
   b. Unprofessional appearance
   c. Violation of facility policies
   d. Unprofessional behavior or inappropriate communications with health professionals, patients, customers or staff

**Student Responsibilities:**

1. Contact preceptors, 2 weeks in advance, to coordinate first day arrival plans
2. Maintain a high standard of professional behavior:
   a. Appropriate attire and appearance for the professional setting.
   b. Effective verbal and written communications.
   c. Consistent and punctual attendance.
   d. Compliance with all site policies and procedures.
3. Use of cell phones or other electronic devices is prohibited except with the express permission of the preceptor.
4. Since the primary objective of the rotation is learning, the student needs to be proactive, not passive. This requires active participation and communication.
5. Maintain patient confidentiality in compliance with HIPAA regulations.
   a. Actively participate in the professional and technical functions of the site, relative to the rotation objectives.
   b. Develop and revise professional and personal goals for each rotation according to the objectives of the particular clerkship.
7. Professional and personal goals should be within the scope of the present rotation.
   a. Satisfy the rotation attendance requirements (240 hours) within the rotation time period.
   b. Complete the rotation and preceptor evaluation forms.
   c. The student’s rotation schedule is at the discretion of the preceptor.
8. This may be nights, weekends, holidays, etc.
9. Must conduct themselves in a professional manner at all times.
10. Unprofessional actions could cause removal from the rotation site and failure of the rotation.
11. Must inform preceptor in advance of any expected absence or tardiness

**Compensation Prohibited:**

Pharmacy students, while participating in any experiential activities to satisfy required hours stated in the College curriculum, shall not, under any circumstances, receive financial remuneration or compensation for hours obtained from experiential sites. Any hours in which the student is paid will not count toward fulfillment of the experiential experience.

**Examples of Learning:**

The preceptor will assess professional outcome abilities throughout the APPE by involving the student in specific activities and tasks. These may include:

1. Reviewing and properly documenting in patient files.
2. Assessing appropriateness of drug therapy by means of patient interviews, drug utilization evaluations, and identification of drug interactions or adverse effects.
3. Student observation of pharmacist role model.
4. Performing selected aspects of physical assessment.
5. Effectively communicating with patients and their caregivers.
6. Effectively communicating with health care providers.
7. Interaction with patient and/or caregiver’s.
8. Using open-ended question to determine patient needs and understanding of mediation counseling.
9. Practicing patient counseling with your preceptor s the patient for several prescriptions you assisted in filling
10. Patient counseling.
11. Learning issues assigned by preceptor.
12. Recommending changes in therapy based on medical literature and assuming responsibility for the outcome. Serving as a patient and health professional educator. This may include oral and/or written projects such as:
   a. Case presentations
   b. SOAP or PHARME write-ups
   c. Journal club presentations
   d. Seminars
   e. Research projects
   f. Clinical intervention logs
   g. Inservices
   h. Drug information responses
   i. Administrative projects
   j. Clinical conferences
   k. Grand rounds presentations
   l. Lab Indices

**Grounds for APPE Failure:**

Students will be dismissed from the APPE for any but not limited to the following:

1. Poor performance in clinic
2. Unprofessionalism
3. Inappropriate behavior
4. Failure to complete all written and oral assignments satisfactorily
5. Lack of attendance
6. Violation of patient confidentiality
7. Informing a patient to change or discontinue a drug without consulting provider
8. Providing inappropriate information to patients, providers, or other staff (including guessing or agreeing with irrational pharmacotherapy)
9. Lack of active participation

**Optional information:**

Each APPE site and preceptor has the option of requiring additional site specific topics. Each site may not cover all of the following disease states based upon discretion of the preceptor. But competency in managing patient outcomes can be in the following areas:

1. Hypertension
2. Hyperlipidemia
3. Diabetes
4. Oral anticoagulant therapy
5. Peptic ulcer disease/GERD
6. Arthritis
7. Asthma
8. Pain management
9. Community acquired infections
10. Chronic heart failure
11. Thyroid disease
12. Depression

**Methods of assessment, examination & grading procedures:**

**Grading**

Grading of Advanced Community APPE will be determined by the preceptor and based on the student evaluation tool available via the preceptor login page. Students should be made aware at the beginning of the APPE of the expectations at practice site. Frequent feedback is recommended to be given to each student in order to obtain the endpoint competencies of the APPE.

**Mid-Point Performance Evaluation:**

Preceptors must provide the student with a mid-point performance evaluation during the 3rd week of the six week rotation. Preceptors will provide specific recommendations for areas of improvement if necessary. Preceptors should report any student failing the mid-point evaluation to the Director of Experiential Education.

**Advanced Pharmacy Practice Experience (APPE) Grading Policy**

- Grades for the APPEs are as follows: **A, B, C, NP**
  - NP is No Pass
  - NP does not specify between a D or an F
NP will trigger intervention by OEE to determine further course of action (see Course of Action Policy below)

- A NP may result from student’s poor performance, unprofessional conduct, if a student is asked to leave or is removed from an APPE.

### Course of Action Policy for NP grade

- **First NP**
  - OEE will contact preceptor to gather additional information on the NP grade
  - Student will report to the Progressions Committee
  - Student will remediate the same rotation with a different preceptor
  - This may result in the student moving to a different home-base to complete APPE
- **Second NP**
  - OEE will contact preceptor to gather additional information on the NP grade
  - Student will report to the Progressions Committee
  - Even if the student remediates previous NP successfully, the student may be removed from pharmacy program

### Progressions Committee

- The student will report to the Progressions committee in the following situations
  - Receiving final grade of a “C” or below in any APPE
  - Receiving a final grade of a 2 or below in Professionalism regardless of final grade for the APPE

### Any grade of NP at midterm needs to be reported to OEE

- Tracy Pettinger: arrotrac@isu.edu / 208.282.5012
- Eastern Idaho, Twin Falls, Coeur d’ Alene
- Kevin Cleveland: clevkevi@isu.edu / 208.373.1872
- Western Idaho & Reno, NV
- Tom Wadsworth: wadsthom@isu.edu / 907.786.6511
- Alaska

### Assessment:

The College has an ongoing assessment program. A requirement for accreditation, the program is designed to assure curricular effectiveness. The assessment program at the College of Pharmacy employs a variety of measures from students, faculty, and preceptors. Throughout the curriculum, students participate in assessments that are embedded as required components of courses and practice experiences. Participation in these assessment activities is required. Assessment is a required component of all pharmacy courses.

### Class attendance policy:

#### Attendance Policy:

Mandatory attendance is required for all Advanced Pharmacy Practice Experiences (APPEs). Each APPE consist of six weeks and each week consist of 40 hours at the designated experience for a total of 240 hours. Students are required to be at the practice facility in accordance with the schedule for each particular site, including nights and weekends. Absences may be excused in the event of unforeseen emergencies, unusual circumstances, illnesses, or severe weather. Any foreseeable absences must be pre-approved by the principal preceptor. All absences are expected to be made up as directed by the preceptor. Continual unexcused absences or tardiness are grounds for failure of the rotation. The only designated holiday during the year is during the Christmas break.

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**-- College Wide Policies --**

#### Attendance Policy

Professionals are involved in their own education. Students are expected to be present during scheduled classes and to actively participate in those classes. Attendance is considered particularly important when “guest” instructors are teaching class. Instructors have the right to enforce attendance requirements.

#### Absence Policy

Only documented illnesses and attendance at national or regional professional meetings are considered excused absences from learning experiences where attendance is required. If an exam must be missed due to an unforeseeable event, prior notification via phone or email is necessary. Failure to notify the course coordinator of the situation as soon as possible may result in receiving no points for the exam; exam retakes may be administered at the discretion of the course instructor or coordinator.

#### Drug and Alcohol Abuse

Pharmacy students that display behaviors outlined in the College of Pharmacy Student Handbook may be referred for a chemical dependency evaluation. Students who display any of these behaviors may be required to submit to an alcohol breathalyzer test sensitive to 0.02%. Positive results obtained in a classroom, IPPE or APPE setting will require the student to submit immediately to a blood alcohol concentration determination and urine drug screen arranged on-site through Certified Background. The student bears all costs associated with drug testing. The results must be brought to the Office of the Associate Dean immediately upon receipt.
**Academic dishonesty**
Academic dishonesty is unacceptable and will not be tolerated. Academic dishonesty includes, but is not limited to, cheating and plagiarism. Cheating is defined as using or attempting to use materials, information, or study aids that are not permitted by the instructor in exams or other academic work. Specific examples of both cheating and plagiarism may be found in the ISU Student Handbook. Dishonest acts undermine the College of Pharmacy’s educational mission and the students' personal and intellectual growth. Pharmacy students are expected to bear individual responsibility for their work, to learn the rules and definitions that underlie the practice of academic integrity, and to uphold its ideals. Ignorance of the rules is not an acceptable excuse for disobeying them. Any student who attempts to compromise the academic process will be sanctioned. Students who are aware of cheating should report this activity immediately to the instructor or exam proctor. Academic sanctions are at the discretion of the instructor(s) and may range from an F on the assignment to an F in the course. Reports of suspected academic dishonesty or unprofessional behavior should be sent to the Office of the Associate Dean or to any member of the College of Pharmacy’s Student Conduct Board.

**Students with disabilities**
The Americans with Disabilities Act (ADA) is the civil rights guarantee for persons with disabilities in the United States. It provides protection for individuals from discrimination on the basis of disability. Idaho State University, in the spirit and letter of the law, will make every effort to make reasonable accommodations, according to section 504 of the Rehabilitation Act of 1973 and the ADA. Students with disability related needs should contact the Director of the Center for Students with Disabilities, Campus Stop 8121, (208) 282-3599. TTY 1-800-377-3529. Disabled students must obtain a letter from the Center for Students with Disabilities that outlines the specific accommodations required. It is the student's responsibility to provide a copy of this letter to the Office of the Associate Dean and to each instructor/module coordinator by the end of the first week of each course or module in order for accommodations to be scheduled.

**Participation in College assessment activities**
Participation in the annual assessment exam and other College of Pharmacy assessment tools is required for all Doctor of Pharmacy students. Assessment tools must be completed by each student, each semester for the student to successfully progress in the program. Please see the ISU College of Pharmacy Student Handbook for a list of required Assessment tools. This includes all applicable course and instructor evaluations.

**Student audio/video taping of class**
Audio or visual recording of any class session is not allowed without the prior direct permission of the presenter. On-line posting or other forms of electronic dissemination of any recordings is strictly forbidden without prior specific written permission from the presenter.

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**Course Instructor(s) & contact information:**

**Lecture schedule:**

[https://pharmacy.isu.edu/syllUpload/](https://pharmacy.isu.edu/syllUpload/)