Lake Erie College of Osteopathic Medicine (LECOM)
School of Pharmacy

Bradenton Campus

**Introductory Pharmacy Practice Experiences
(IPPE)**

**Class of 2018
Experiential Education Program Manual**

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Welcome to Introductory Pharmacy Practice Experiences (IPPEs)

Dear Students and Preceptors,

Congratulations to our students for reaching an important milestone and thanks to our preceptors for mentoring our students to reach higher professional goals. The purpose of Introductory Pharmacy Practice Experiences (IPPE) is to apply the facts, information, and concepts gained in the first-year didactic coursework in "real-life" situations. The IPPE rotations do not emphasize the need to gain knowledge of abstract theories, but rather use an integrative approach to learning that includes experience and interactions between the students and preceptors in various health care settings to turn didactic knowledge into practical knowledge.

During IPPE rotations, the students have an excellent opportunity to develop an array of skills such as professionalism, communication, problem solving, critical thinking, and professional competence. We encourage our preceptors to emphasize to the students the importance of connecting knowledge, critical thinking skills, and action.

The goal of these experiences is for our students to initiate proficiency in the operations of community and institutional practices. This includes providing safe and effective pharmacotherapy plans and optimizing patients' outcomes by assuring safe and accurate preparation and dispensing of medications, providing reliable health care information, and promoting public health.

We encourage the preceptors and students to use this manual and provide input to continuously improve the quality of experiential rotations. We look forward to your feedback and will do our best to support you during the rotations.

On behalf of the administration and faculty of LECOM School of Pharmacy, we wish you a successful rotation experience!

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LECOM EXPECTATIONS for our STUDENTS

The student is responsible for ensuring successful completion of the rotation by emphasizing the following:

1. Review and comply with the information outlined in this manual and the rotation syllabus.
2. SHARE this manual and its contents with the preceptor at the beginning of the rotation.
3. Have applicable Pharmacist Intern License(s) available at all times for review by site, preceptor, or Office of Experiential Education.
4. Fulfill all prerequisites specific to the rotation including immunizations, background checks, drug screenings, HIPAA/OSHA training, and anything additional as required by site.
5. Follow all laws and regulations that govern the pharmacy profession.
6. Fully engage in the experience provided by the preceptor and the rotation site.
7. Recognize and appreciate that the preceptor is volunteering his/her time, energy and expertise to help you develop and improve your professional skills.
8. Work independently, but seek advice and accept direction from the preceptor.
9. Learn to say "I don't know" and follow through with acquiring the necessary knowledge to answer a question or complete a task.
10. Submit all assignments and evaluations in a timely fashion.
11. Positively accept feedback and constructive criticism. Recognize its intended purpose (helping the student grow professionally).
12. Exhibit professional conduct at all times.

__The student is required to share the rotation manual with his/her preceptor at the beginning of the rotation.__ A student that does not may have an additional 5 percentage (5%) subtracted from their final calculated grade. The student is responsible for reading the content of the rotation manual and is expected to follow the policies and regulations as stated. Any infringements can lead to deductions in grade, automatic dismissal from the site, and/or failure of the rotation.

PRECEPTOR CHARACTERISTICS AND EXPECTATIONS

The following characteristics have been outlined by the Accreditation Council for Pharmacy Education (ACPE) Accreditation Standards and Guidelines:

1. Practice ethically and with compassion for patients.
2. Accept personal responsibility for patient outcomes.
3. Have professional training, experience, and competence commensurate with their position.
4. Utilize clinical and scientific publications in clinical care decision making and evidence-based practice.
5. Have a desire to educate others (patients, care givers, other health care professionals, students, pharmacy residents).
6. Have an aptitude to facilitate learning.
7. Be able to document and assess student performance.
8. Have a systematic, self-directed approach to his/her continuing professional development.
9. Collaborate with other health care professionals as a member of a team.
10. Be committed to their organization, professional societies, and the community.

The preceptor will be responsible for the following:

1. Maintain their professional licensure and precepting license, if applicable.
2. Listening to preceptor training via The Pharmacist's Letter [Preceptor Resource and Training Network](#) regarding General Policies and Procedures and IPPE as indicated by School.
3. Review and employ the material contained in this manual and the rotation syllabus.
4. Serve as a role model for professional practice.
5. Interact with the student as teacher-student versus employer-employee.
6. Determine the student's level of competence and provide a learning environment and opportunities for the student to develop and improve professional skills.
7. Provide timely constructive feedback to the student in a private and confidential manner.
8. Inform students of any areas needing improvement as early as possible.
9. Review to ensure that assignments are complete. Complete midpoint and final evaluations, review them with the student, and submit to the Office of Experiential Education as outlined in this manual.
10. Maintain the confidentiality of all student information including information regarding student performance. The Family Educational Rights and Privacy Act (FERPA) is a federal law that protects the privacy of student education records. Preceptors should think of student information as they would private patient information.

IPPE Rotation Schedule

First rotation block (June)	6/01/15 – 6/26/15
Second rotation block (July)	6/29/15 – 7/24/15
Third rotation block (August)	7/27/15 – 8/21/15
Fourth rotation block (September)	8/31/15 – 9/25/15

Each student is scheduled for two of the three rotation blocks.

LECOM observes the following holiday calendar for didactic courses on campus; however, they do NOT apply to experiential rotations. The preceptor/site may require students to be in attendance on these days if they fall within a rotation block. Students must coordinate attendance with their preceptor to be off during these holidays. ***The attendance policy applies to holidays*; *the day(s) must be made up*.**

- New Year's Day
- Freedom Day (Martin Luther King Jr. Day)
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving Day and the day after
- Christmas Day

Rotation Policies & Regulations

The student is required to share the rotation manual with his/her preceptor at the beginning of the rotation. **A student that does not may have an additional 5 percent (5%) subtracted from their final calculated grade (e.g. 93% calculated - 5% deduction = 88% revised final grade reported to the Registrar).** The student is responsible for reading the content of the rotation manual and is expected to follow the policies and regulations as stated. Any infringements can lead to deductions in grade, automatic dismissal from the site, and/or failure of the rotation.

I.   Pre-requisites

1. Be in good academic standing after the first academic year.

2. **Students are required to contact their respective preceptor/site at least <u>4-6 weeks prior</u> to their start date to determine clearance requirements and plan for their site orientation. An exception is Veterans Affairs (VA) sites, Indian Health System (IHS), and other government sites, most of which have specific internal procedures for completing background checks and must be contacted 6-8 weeks prior to the start of the rotation.** <u>Failure to provide necessary information to sites or the Office of Experiential Education may result in cancellation of the rotation, which will need to be made up at a later date, potentially delaying graduation.</u>

3. **All documents and any additional prerequisites as required by the rotation site must be completed in advance of the first day of the rotation and filed with the Office of Experiential Education.** *It is the student's responsibility to determine well in advance, what is required for clearance and to ensure that all documentation is acquired and ready to present to both the site and the Office of Experiential Education for sign-off as needed.* **Failure to adhere to this policy will result in the delay of your rotation and a full 5% reduction in your grade.**

    a) **PLEASE NOTE: Many government sites require US Citizenship (and some will NOT accept dual citizenship).** Be sure to check with your sites well in advance if clearance is a concern in this regard.

    b) <u>Health Documents</u> - Students must have all up-to-date school and site-required health records (physical examination, immunizations, 2 step-PPD, influenza vaccine, etc.) prior to starting rotations. *Students must keep a copy of their health records with them to present to the site upon request. A copy must also be provided to Experiential Education.*

    c) <u>Background Checks, Drug Screens, etc</u>. – Student must complete a background check, fingerprinting and drug screens as required by the rotation sites, within the required timeframe. Instructions for completing these checks through Certiphi, FieldPrint, or other appropriate vendor are described in another section of this manual. Students may have different requirements for each rotation; therefore, it is essential that they contact the site in a timely fashion as indicated above to determine such requirements. **Please note the TIMELINE for GOVERNMENT sites in #2 above and abide by this timeline…no exceptions.**

        If a student chooses to complete any of these screens through a different vendor, LECOM will not be able to verify completion or sign off on required documents for the sites. This may result in increased cost to the student (when they need to order and complete the screens through the vendors noted above) and may result in delay or cancellation of the rotation.

    d) <u>Intern Licenses</u> – Student must have an intern license for each state in which they will complete rotations. *Students must have their intern license with them at all times while on rotation.* ALL STUDENTS MUST BE LICENSED IN FLORIDA regardless of whether rotations will be completed in FL. Last minute reschedules are often scheduled in Florida; if you are not licensed, you may not be able to be rescheduled and your rotation may be delayed.

Please note: Most FEDERAL SITES will accept internship licensure from any state in lieu of licensing within the state of the facility. Please DO NOT ASSUME that you will not require a state-specific license. Please VERIFY with your preceptor.

    e) <u>OSHA/HIPAA/TB Training</u> – Student must complete the required on-line training modules regarding (OSHA) Bloodborne Pathogens and HIPAA (Privacy and Security) and Tuberculosis on The Pharmacist's Letter website as instructed by the School.

II.   <u>Attendance policy</u>

1. <u>Time requirements:</u>
All students are expected to adhere to the rotation attendance policy. All students are required to spend a **minimum** of 40 contact hours per week at the site and at least 5 hours working on rotation-related activities off-site. A preceptor may expect you to stay extra time for educational purposes, but a student <u>will need to follow the laws a rules for each state they are licensed in regarding the number of intern hours that can be earned per week.</u> *<u>No more than 50 hours/week of intern time will be credited under any circumstances</u>*.

Students are expected to be on time and to stay until the time set by the preceptor. Repetitive tardiness or leaving early will result in failure of the rotation. Students are not permitted to work "ahead" hours to shorten their rotation, and should follow the schedule as assigned by the preceptor. It is not up to the students to determine their own schedule for convenience, financial reasons, or otherwise. **Modifying rotation dates or hours without notification and approval of the Director of Experiential Education will result an additional 5 percent (5%) deducted from the student's final calculated rotation grade.**

2. <u>Absences:</u>

    a. **Absences with Advanced Notice:** A student may make a request to be excused from rotation for a qualifying school-sponsored or other educational event. In these cases, an "Experiential Absence Request/Report Form" (available on the LECOM portal) needs to be completed by the student then signed and approved by his/her preceptor and the Director of Experiential Education <u>at least ten (10) working days in advance</u>. Failure to adhere to this policy will result in missing days being counted as unexcused absences. A site may be audited at any time to ensure that the student is present.
        i. **Plans should not be made (e.g. conference registrations, airline tickets purchased, etc.) without approval by the preceptor AND the Director of Experiential Education first**. The School will not be responsible for lost monies, etc. due to the student not following proper procedures.
        ii. **The 5% grade deduction for not documenting within the specified 0 day window will be waived in instances where the student does not have a 10 day notice for a planned event (e**.g. residency interviews).
        iii. **Any <u>non-emergency absence that is NOT documented</u> utilizing the form will result in an additional 10% deduction** from the student's final calculated rotation grade.

    b. **Unplanned Absences (e.g. Illness or Emergency):** In the event that the student must be unexpectedly absent from rotation, the student **must immediately notify BOTH the preceptor (by phone) and the Administrative Assistant of the Office of Experiential Education (941-782-5676).** Additionally, you must document the absence as soon as you return to rotation with an "Experiential Absence Request/Report Form" which is located on the portal. Please treat your preceptor as you would an employer and provide notice as early as possible. In the event that the student must leave a message, (s)he should provide a contact phone number where (s)he may be reached and follow up with an e-mail (if possible) to ensure that the message was received. **Each failure to notify both the preceptor AND the School properly will result in a 5% deduction** from the student's final calculated rotation grade**.**

    c. **Absences for Holidays:**
The attendance policy applies to holidays falling during the rotation year. Though LECOM

observes certain holidays for on-campus schedules, the student should assume that the preceptor/site requires attendance on these days. Patients do not take holidays off.   If students wish to take a holiday off, they must develop a plan with their preceptor and submit a completed Absence Request/Report form; **any time missed is considered an UNEXCUSED absence.**   The **Absences with Advanced Notice (section a above)** policy applies in the case of holidays.

d. **Absence due to Weather conditions:**
All students should follow the weather advisory from their rotation site regarding cancellation or delay of the rotation. However, the students who cannot travel to the site due to hazardous weather conditions should immediately notify their preceptors and the Administrative Assistant to the Director of Experiential Education (941-782-5676). The attendance policy applies regarding reporting and making up days.

e. **Excessive Absences:** Students who miss more than three (3) days per rotation, for any reason, will **fail** the rotation, and the rotation MUST be remediated and may consequently delay graduation. All but one (1) missed day (for any reason) must be made up. Documentation of plans for making up this time must be included on the "Absence Request/Report Form."
  i. **EXCEPTION:** Students who need to miss >3 days due to illness or other emergency situations may request a Leave of Absence. The rotation will be considered **incomplete** until the missed time has been made up.

f. **Extended Absences:** If an extended absence from the rotation becomes necessary, the student **MUST** contact the Director of Experiential Education (in addition to the preceptor) immediately to determine the course of action, including consideration of an official leave of absence. If the absence is due to MEDICAL reasons, the student must receive medical clearance to return to rotation, even if the medical event occurred during an "OFF" rotation block.   Information will be shared with the Office of Student Affairs and other School personnel as needed.

g. Examples of excused absences include (list is non-inclusive):
  i. Attendance at professional meetings
  ii. Attendance at school-sponsored events (e.g. Career Day)
  iii. Required legal appointments (e.g. jury duty, immigration appointments)
  iv. Emergency situations (may result in rescheduling of rotation)

3. *Please note that a site may be audited by phone or in person at any time and student attendance will be one aspect reviewed.*

III.   Professional liability insurance

LECOM arranges for liability insurance for students each year. If the site requests verification of LECOM liability insurance, they may contact the Office of Experiential Education and a copy of the insurance certificate will be sent to the site.

IV.   Site selection / Site Audits

1. Students create their preference list of rotations on-line in PharmAcademic using the list of sites and preceptors that have worked with LECOM in the past. Preceptors provide their availability on-line in PharmAcademic during the fall. The randomized match is run in late fall and the preliminary schedule is released prior to Thanksgiving. Students can then request changes to their schedule by swapping with classmates or selecting from remaining availability. Specific instructions on the process, including requesting new sites, will be provided by each campus Director of Experiential Education.
2. Students are not authorized to perform their rotations at the same site where a co-existing or previous employer/employee relationship exits or under the direct supervision of a family member. Students may complete more than two rotations at the same location (including both IPPE and APPE) as long as a substantial difference in the learning experience can be demonstrated.
3. Students are responsible for expenses associated with the rotation. Students will not accept any remuneration from the site.
4. Rotation <u>dates</u> are firm and CANNOT be changed except for extreme hardships and must be approved by the Director of Experiential Education. A "Rotation Change Request" (located on the portal) must be completed and submitted to the Director of Experiential Education to document the reason for the request.
5. **Students should be sure to inform the Office of Experiential Education immediately if there is a change in their assigned Preceptor of Record.** Students must submit the appropriate assessment in PharmAcademic at the beginning of the rotation to verify preceptor information.
6. A site visit may occur by phone or in person to audit the compliance with rotation requirements.

V.   Rotation portfolio

All students shall maintain an electronic rotation portfolio (<u>PharmPortfolio</u>). All required assignments and all work accomplished during the rotations should be uploaded in PharmPortfolio and juried by the preceptor at each site. This information should be shared with each subsequent preceptor for review prior to the first day of the rotation. The portfolio will help you to keep track of your own accomplishments as well as to inform your preceptor about your activities during previous rotations.   You will continue to build your portfolio through the rest of the curriculum and during your APPEs.

Portfolios must be completed by the end of the rotation. You must meet with your Advisor within two (2) weeks of returning to campus for the didactic portion of the Fall term of your P2 year to discuss your rotations and review your portfolio. The Advisor will be responsible for review of and assignment of **10% of each of your IPPE grades**.   Failure to have your portfolio completed ready for review within the two (2) week time frame will result in a loss of 10% of your grade. The Office of Experiential Education may also review your portfolio at any time. <u>Please see the evaluation criteria in the Resources and Forms section of this manual.</u>

The following is required for your portfolio:

- Contents
    - Required documents
        - Curriculum vitae (CV)
        - Intern license(s)
        - Immunization records
        - Background check, if available (optional)
        - HIPAA/ OSHA/TB Training Certificates, if applicable
        - Other important required information for individual sites
        - Other: Copy of the printed rotation manual (optional) and site contact form.
    - Completed assignments/ reflections/ projects
        - As outlined in the Assignments section of the manual
    - Evaluations- any written feedback by preceptor, including presentation evaluations and rotation midpoint and final evaluations

VI.   Evaluations

All rotation evaluations are to be completed in PharmAcademic. Failure to adhere to this policy will result in an incomplete grade until all documents are received by the Director of Experiential Education.

Preceptor:
- At the midpoint (2 weeks) and end of each rotation (4 weeks), the preceptor will complete an evaluation of the student and review it with them.
- The student must be informed of any concerns regarding deficiencies that may jeopardize his/her ability to successfully pass the rotation. The preceptor should contact the Director of Experiential Education immediately and forward the Midpoint Deficiency Notification if there is a concern of the student failing the rotation.

Student:
- The student must perform a Midpoint and Final Self-Assessment, print it and have it available for evaluation discussions with their preceptor.
- At the end of the rotation, the student will complete an evaluation of the preceptor and the rotation site.

VII.   Grading

Grading will be a letter grade similar to the grading during the didactic portion of your training at school. The evaluation will be performed by the preceptor at mid-rotation and at the end of the rotation.   The grade is calculated by LECOM based on the way you are assessed in each competency area of the evaluation. **The preceptor does not assign your official grade.** Ten percent (10%) of your grade will come from the completion of your student portfolio.

Preceptor- Assignment Completion/ Overall IPPE Evaluation: 90%
Advisor- Review of Student Portfolio: 10%
100%

Failure to complete the required assignments will result in an incomplete grade for the rotation. The student will meet with the ASP Committee who will confer with the Director of Experiential Education and recommend the outcome of the rotation. This could include failure.
Deductions of an additional **5 percentage (5%)** (more if specified) from the rotation grade may be made by the school in certain situations, calculated as follows:

> Final calculated grade   - 5% = Final reported grade
> e.g.   93%   - 5% = 88% reported to Registrar

Each situation is considered unique and the points are additive. These reasons include, but are not limited to:
- Failure to share and discuss the requirements of the IPPE Manual with the preceptor at the beginning of the rotation.
- Failure to maintain a student portfolio.
- Failure to complete assignments included in this manual.
- Failure to complete school and site-specific requirements in a timely manner.
    - If this failure results in a delay to the start of the rotation or rescheduling of a rotation, the deduction will be **10** %.
- Failure to contact and send curriculum vitae to preceptor prior to rotation as outlined in this manual.
- Attempts to modify rotation dates or scheduled hours without approval by the Director of Experiential Education.
- Failure to report absences as outlined in this manual (up to 10% deduction)
- Failure to complete midpoint and final self-assessments.
- Failure to submit the Student Evaluation of Preceptor and Site
- Lack of professionalism (as described in section X. Professionalism).
- Unapproved and inappropriate use of personal smart phones, tablets or other technology.

<u>Grade scale</u>

A - Excellent (Numerical Range 89.5-100)
B - Good (Range 79.5-89.4)
C - Satisfactory (Range 69.5-79.4)
F - Failure (Range of 69.4 or below)

Failure of two (2) rotations may result in dismissal from school as defined by the Academic Catalog and Student Handbook.

VIII. Dismissal from sites

All students are representing LECOM and the pharmacy profession during preparation for and presence at the rotation site. Therefore, compliance with requirements, professionalism and the highest standards are expected from all students during their association with the preceptor and site. LECOM, the site and preceptors may refuse a student from attending a site or dismiss a student from a current site per the site's agreement with LECOM. Examples include (but are not limited to) not complying with pre-requisites (background checks, immunizations, etc.), not upholding a professional attitude during the rotation or not meeting academic standards. Additionally, rotation sites maintain the right to remove a student from the site if the student does not comply with safety, ethical, or treatment standards of the rotation site. Any student under the influence of any substance of abuse or caught stealing (drugs, money, etc.) from the site will be also be dismissed. **<u>Dismissal for any reason will result in an automatic failure of the rotation and may disqualify a student from graduation or delay the graduation date.</u> Both the preceptor and the student should contact the Director of Experiential Education immediately if the student is dismissed.** The incident will be forwarded to the Academic Standing and Professionalism (ASP) Committee for further action.

IX. Academic Honesty & Plagiarism

Any violation of the Academic Honesty Policy and Plagiarism as defined in the student handbook will not be tolerated. Violators will be subject to disciplinary action, which may include failure of the rotation.

Examples of dishonesty and plagiarism include, but are not limited to:
1. Not using own work for an assignment
2. Reusing projects for multiple rotations, unless using them as reference
3. Using slides from course lectures for rotation presentations

X. Professionalism

As consistent with the expectations of a professional and practice environment, professional behavior and attitudes are expected of all students enrolled in this rotation. Examples of professional behavior include, but are not limited to: appropriate demeanor/attitude, ethics, dress/grooming, punctuality, and civility.

Cell phones, tablets or other technology should not be used directly by the student without prior approval from the preceptor for a specific and valid reason (e.g. electronic drug reference). Under no circumstances should a student text, make calls, or check/post to social media sites during rotation, unless on break. Any reports by preceptors to the School regarding violations to this policy will result in a *5% deduction* in the rotation grade on top of any deductions taken by the preceptor on the student's overall evaluation. Please keep in mind that discussion of any rotation-related matters may constitute a violation of HIPAA.

XI. Dress code

All students should wear their white lab coat with appropriate logo from the LECOM School of Pharmacy and their LECOM name badge during the rotation time. No additional embellishments are allowed on the white lab coat. No jeans, short skirts, revealing clothing, sandals, or sneakers are allowed. All students should be well groomed. No extensive jewelry, perfume, earrings, or long hair are allowed. Good body hygiene is to be observed. Preceptors/sites may have a specific dress code requirement that students must follow while on rotation. This includes both attire and appearance (e.g. no facial hair, tattoos, artificial nails, etc.).

XII. Confidentiality & HIPAA

Patient information is private. Confidentiality is a foundation for the establishment of trust between patients and health care providers; patients permit pharmacists to look into their private health information in order to carry out their duties. Students are expected not to discuss or divulge in any manner (intentional or otherwise) any patient information that they have learned from their rotation sites outside of their learning environment. Students are also not to access any patient information for which they do not have a legitimate educational and patient care need; this includes their OWN personal information, that of friends/family members and/or any other patient they are not directly following at the preceptor's request. Business models and procedures of rotation sites should also be considered confidential information and not shared with others without the permission of the preceptor and/or site.

Any infraction will result in immediate dismissal from the site and a failing grade will be given for the rotation.

Students will complete the HIPAA Privacy and Security Training via The Pharmacist's Letter as directed by the Office of Experiential Education.

XIII. Family Education Rights and Privacy Act (FERPA)

The Family Educational Rights and Privacy Act (FERPA) is a Federal law that protects the privacy of student education records. The law applies to all schools that receive funds under an applicable program of the U.S. Department of Education. Section 10 of the LECOM Student Catalog and Handbook provides additional details.

Preceptors and sites must also maintain the confidentiality of all student information including information regarding their performance. Preceptors should think of student information as they would private patient information.

XIV. Verification of Site and Preceptor Information in PharmAcademic

All students will verify the information contained in PharmAcademic regarding their preceptor and site on the first day of the rotation including preceptor; spelling of preceptor name; preceptor address, phone number, fax number, and e-mail address (if available); site name, address, phone number, and fax number. This verification will be accomplished by completing the appropriate assessment in PharmAcademic. The student will notify the Administrative Assistant for Experiential Education (941-782-5676) of any additional information and provide the correct information as soon as possible by e-mail. Failure to do this may impact the evaluation process and may delay the rotation.

Experiential Curriculum

Learning Objectives

Share these objectives with your preceptor prior to the start of your rotation, or on the first day while reviewing the manual. These objectives should serve as general guidelines throughout the rotation. However, your preceptors will have opportunities to add additional tasks specific to the site in order to provide you with more practice experiences.

The goal of these rotations is to have the students become proficient in the daily practice of pharmacy operations. The student will:

1. Describe the structure, the organization, and chain of command within the organization.
2. Describe the roles and responsibilities of the diverse personnel working in the pharmacy.
3. Become familiar with the workflow in the pharmacy.
4. Handle the processing of prescriptions or physician's orders from their initial receipt in the pharmacy to the dispensing of the product to the patient or to the patient's floor/bedside.
5. Gain experience handling parenteral medications as well as other types of formulations.
6. Document and/or file orders or other documents pertaining to the daily work in the pharmacy.
7. Use pharmacy technology pertaining to the site and understand the technology's impact on the practice of pharmacy.
8. Communicate efficiently with patients (if appropriate) and members of the health care team.
9. Be professional at all times.

This list is not intended to be exhaustive. The preceptor has the authority to adapt and to add other experiences that he/she feels the student will benefit from.

LECOM School of Pharmacy Program Outcomes

As noted in the 2016 ACPE Standards, ACPE chose AACP's Center for the Advancement of Pharmacy Education (CAPE) Outcomes 2013 as the framework for establishing expected educational outcomes for Doctor of Pharmacy programs. LECOM School of Pharmacy (LECOM SOP) has assigned CAPE outcomes 2013 as LECOM SOP outcomes based on LECOM SOP's mission, vision, strategic initiatives, goals, and objectives. Graduates of the LECOM School of Pharmacy will demonstrate:

Center for the Advancement of Pharmacy Education (CAPE)
2013 Educational Outcomes

Domain 1 – Foundational Knowledge

1.1. **Learner (Learner)** - Develop, integrate, and apply knowledge from the foundational sciences (i.e., pharmaceutical, social/behavioral/administrative, and clinical sciences) to evaluate the scientific literature, explain drug action, solve therapeutic problems, and advance population health and patient- centered care.

Domain 2 – Essentials for Practice and Care

2.1. **Patient-centered care (Caregiver)** - Provide patient-centered care as the medication expert (collect and interpret evidence, prioritize, formulate assessments and recommendations, implement, monitor and adjust plans, and document activities).

2.2. **Medication use systems management (Manager)** - Manage patient healthcare needs using human, financial, technological, and physical resources to optimize the safety and efficacy of medication use systems.

2.3. **Health and wellness (Promoter) -** Design prevention, intervention, and educational strategies for individuals and communities to manage chronic disease and improve health and wellness.

2.4. **Population-based care (Provider)** - Describe how population-based care influences patient-centered care and influences the development of practice guidelines and evidence-based best practices.

Domain 3 - Approach to Practice and Care

3.1. **Problem Solving (Problem Solver)** – Identify problems; explore and prioritize potential strategies; and design, implement, and evaluate a viable solution.

3.2. **Educator (Educator)** – Educate all audiences by determining the most effective and enduring ways to impart information and assess understanding.

3.3. **Patient Advocacy (Advocate) -** Assure that patients' best interests are represented.

3.4. **Interprofessional collaboration (Collaborator)** – Actively participate and engage as a healthcare team member by demonstrating mutual respect, understanding, and values to meet patient care needs.

3.5. **Cultural sensitivity (Includer)** - Recognize social determinants of health to diminish disparities and inequities in access to quality care.

3.6. **Communication (Communicator)** – Effectively communicate verbally and nonverbally when interacting with an individual, group, or organization

Domain 4 – Personal and Professional Development

4.1. **Self-awareness (Self-aware) –** Examine and reflect on personal knowledge, skills, abilities, beliefs, biases, motivation, and emotions that could enhance or limit personal and professional growth.

4.2. **Leadership (Leader) -** Demonstrate responsibility for creating and achieving shared goals, regardless of position.

4.3. **Innovation and Entrepreneurship (Innovator)** - Engage in innovative activities by using creative thinking to envision better ways of accomplishing professional goals.

4.4. **Professionalism (Professional) -** Exhibit behaviors and values that are consistent with the trust given to the profession by patients, other healthcare providers, and society.

Introductory Pharmacy Practice Experience (IPPE)

Rotation Brief Descriptions

Individual syllabi for rotations are available as separate documents

Community Rotation

COURSE DESCRIPTION:

The goal of this rotation is to have the student become competent in the daily practice of community pharmacy operations through active learning and participation. The emphasis is on the operations, distribution system and professional conduct in the community environment. This will serve as a basis for understanding the provision of patient-centered care in the community setting. The following three (3) steps of the medication-use system will be emphasized: selecting, procuring and storing; ordering and transcribing; and dispensing and preparation.

GENERAL ABILITY-BASED OUTCOMES:

At the completion of this rotation, the student will be able to:

1. Describe the structure, the organization, and chain of command within the organization.
2. Describe the roles and responsibilities of the diverse personnel working in the pharmacy.
3. Become familiar with the workflow in the pharmacy.
4. Handle the processing of prescriptions from their initial receipt in the pharmacy to the dispensing of the product to the patient.
5. Gain experiences in handling various types of formulations.
6. Document and/or file orders or other documents pertaining to the daily work in the pharmacy.
7. Use pharmacy technology pertaining to the site and understand the technologies' impact on the practice of pharmacy.
8. Communicate efficiently with patients (if appropriate) and members of the health care team.
9. Be professional at all times.

This list is not intended to be all inclusive. The preceptor has the authority to adapt and to add other experiences that he/she feels the students will benefit from. Specific activities suggested by the Accreditation Council for Pharmacy Education (ACPE) Accreditation Standards and Guidelines and SUCCESS competencies are also to be included in the rotation experience. Refer to the rotation syllabus for further detail.

Institutional Rotation

COURSE DESCRIPTION:

The goal of this rotation is to have the student become competent in the daily practice of institution (hospital) pharmacy operations through active learning and participation. The emphasis is on the operations, distribution system and professional conduct in the hospital environment. This will serve as a basis for understanding the provision of patient-centered care in the hospital, inpatient setting. The following three (3) steps of the medication-use system will be emphasized: selecting, procuring and storing; ordering and transcribing; and dispensing and preparation.

GENERAL ABILITY-BASED OUTCOMES:

At the completion of this rotation, the student will be able to:

1. Describe the structure, the organization, and chain of command within the organization.
2. Describe the roles and responsibilities of the diverse personnel working in the pharmacy.
3. Become familiar with the workflow in the pharmacy.
4. Handle the processing of prescriptions from their initial receipt in the pharmacy to the dispensing of the product to the patient.
5. Gain experiences in handling various types of formulations.
6. Document and/or file orders or other documents pertaining to the daily work in the pharmacy.
7. Use pharmacy technology pertaining to the site and understand the technologies' impact on the practice of pharmacy.
8. Communicate efficiently with patients (if appropriate) and members of the health care team.
9. Be professional at all times.

This list is not intended to be all inclusive. The preceptor has the authority to adapt and to add other experiences that he/she feels the students will benefit from. Specific activities suggested by the Accreditation Council for Pharmacy Education (ACPE) Accreditation Standards and Guidelines and SUCCESS competencies are also to be included in the rotation experience. Refer to the rotation syllabus for further detail.

Accreditation Council for Pharmacy Education (ACPE)
Accreditation Standards and Guidelines for IPPE Rotations

1. Processing and dispensing new/refill medication orders
2. Conducting patient interviews to obtain patient information
3. Creating patient profiles using information obtained
4. Responding to drug information inquiries
5. Interacting with other health care professionals
6. Participating in educational offerings designed to benefit the health of the general public
7. Interpreting and evaluating patient information
8. Triaging and assessing the need for treatment or referral, including referral for a patient seeking pharmacist-guided self-care
9. Identifying patient-specific factors that affect health, pharmacotherapy, and/or disease state management
10. Assessing patient health literacy and compliance
11. Performing calculations required to compound, dispense, and administer medications
12. Administering medications
13. Providing point-of-care and patient-centered services
14. Conducting physical assessments
15. Preparing and compounding extemporaneous preparations and sterile products
16. Communicating with patients and other health care providers
17. Interacting with pharmacy technicians in the delivery of pharmacy services
18. Documenting interventions in patient records in a concise, organized format that allows readers to have a clear understanding of the content
19. Presenting patient cases in an organized format covering pertinent information
20. Billing third parties for pharmacy services

This list is not intended to be all inclusive. The preceptor has the authority to adapt and to add other experiences that he/she feels will benefit the students.

SUCCESS Competencies

The following seven competencies from the SUCCESS model developed collaboratively by the Schools of Pharmacy in Florida have been selected as appropriate for IPPE rotations. These may be referred to support specific activities and feedback throughout the rotations. A complete list of all thirteen competencies and the evaluation rubric may be accessed at https://www.cop.ufl.edu/SUCCESS/.

1. Drug Distribution Systems
    a. Applies principles of civil law to the practice of pharmacy.
    b. Applies state and federal regulations in the dispensing process.
    c. Determines need and factors for correctly using the medication.
    d. Identifies drug costs to the patient.
    e. Clarifies, adds and/or corrects prescription order information when necessary.
    f. Correctly labels and performs the final check.
    g. Correctly documents adverse drug reactions through the appropriate channels.
    h. Applies ordering, purchasing and inventory control principles.
    i. Abides by laws on storage and disposal of medication.

2. Patient Interviews
    a. Introduces self as student from College of Pharmacy.
    b. Optimizes environment for the interview.
    c. Clarifies the purpose and structure of the interview.
    d. Verifies patient name and correct pronunciation, and demographic data.
    e. Explains how patient will benefit from interview.
    f. Employs vocabulary, question structure, question complexity, and invited feedback to ensure patient understanding.
    g. Implements the interview in an organized fashion.
    h. Answers patient questions providing appropriate and correct data.

3. Patient Education/Counseling
    a. Speaks clearly using proper enunciation, volume, and rate.
    b. Uses terminology specific to the understanding of the patient.
    c. Uses appropriate non-verbal communication.
    d. Provides accurate and pertinent information in appropriate detail.
    e. Includes information required for the patient's social and financial needs.
    f. Provides feedback to patient questions/concerns.
    g. Determines patient level of understanding by asking questions.
    h. Demonstrates empathy.
    i. Shows concern for patient well-being.
    j. Retrieves and evaluates new information for the purpose of responding to patient questions.

4. Drug Information
    a. Selects the best available resource for answering a drug related request.
    b. Demonstrates the ability to use other information resources (this includes poison control centers, pharmaceutical companies and federal agencies).
    c. Generates correct answers to questions in a timely and systematic manner.
    d. Can define primary, secondary and tertiary references.

5. Professional Team Interaction
    a. Dresses appropriately for the setting.
    b. Demonstrates sensitivity for patients and families during team activities.
    c. Demonstrates respect for other health care professionals.
    d. Uses interpersonal communication skills to facilitate team interactions.

e. Actively participates in team activities.
f. Assists team members in establishing therapeutic and/or diagnostic objectives.
g. Uses documentation, persuasion, and alternative suggestions to resolve therapeutic disagreements.
h. Provides accurate, organized, and pertinent information relevant to the team's current or future tasks.
i. Follows up on questions asked by the team in a timely fashion.
j. Interactions with the team are conducted with an appropriate level of confidence.
k. Retrieves and evaluates new information for the purpose of responding to professional questions.

6. Professionalism/Motivation
a. Identifies and respects the values of others.
b. Demonstrates knowledge and understanding of the pharmacist "code of ethics."
c. Defends ethical decisions through analysis of ethical principles.
d. Demonstrates sensitivity to confidentiality issues.
e. Attends and participates in all activities according to attendance policies.
f. Is punctual for all activities.
g. Completes assigned responsibilities (including patient care responsibilities) on time.
h. Accommodates to change in workflow without disruption of work schedule.
i. Initiates additional learning opportunities.
j. Synthesizes new information in order to draw conclusions, hypothesizes, or decides a course of action.

7. Cultural Sensitivity
a. Assesses the religious and socio-economic value systems that affect need and adherence.
b. Possesses the knowledge, skills and behaviors required to identify communication tools to accommodate a culturally diverse population.
c. Identifies cultural differences that will potentially affect professional interactions.
d. Identifies appropriate alternative measures to improve verbal and non-verbal interactions between patient and pharmacist.

REQUIRED Rotation Assignments

The assignments included in this manual (and each rotation syllabus) have been designed for application of knowledge and skills taught during the first didactic year. The manual contains titled sections that provide descriptions and worksheets for specific assignments. The following table identifies the competency area and the related assignments:

Competency Area	Community Site Assignment	Institution Site Assignment	When it is due for review by preceptor
Distribution Systems	Rotation Site Description (Introduction to Health Care Delivery)	Rotation Site Description (Introduction to Health Care Delivery)	Midpoint
Professional Growth	Reflection	Reflection	Midpoint and Final
Drug Information	OTC Formulary / Related Products Reference (Pharmacist Provided Care)	Drug Information Question(s) (Drug Information)	Midpoint and/or Final
Patient Care	SOAP Note / QuEST-SCHOLAR (Introduction to Pharmacy; Pharmacist Provided Care)	Medication History (Communications; Pharmacist Provided Care)	Final

The assignments listed in the pertinent columns are **required**. Additional assignment suggestions are provided in the manual. These and/or additional site or rotation-specific assignments may be assigned at the discretion of the preceptor.

Failure to complete the required assignments will result in an incomplete grade for the rotation. The student will meet with the ASP Committee who will confer with the Director of Experiential Education and recommend the outcome of the rotation. This could include failure.

1. **All assignments should be reviewed for satisfactory completion and "scored" as part of the Final Assessment by the preceptor using the Excellent, Competent, and Deficient criteria**. They should then be included in the student's portfolio when completed for review by preceptors, the student's advisor, or the Office of Experiential Education.

General guidance for a quality assignment:

● The student displayed initiative, independence, motivation and effort to complete the assignment.
● Moderate preceptor intervention was required to complete the assignment.
● Minimal to moderate corrections were necessary upon review of the final assignment by the preceptor.
● Grammar, organization, style and formatting were appropriate.
● The final assignment was deemed competent to excellent.

Citation Reference Guide: Pharmacy

General Guidelines:

- List references as superscripts at the end of sentences or phrases. Example.[1,3-5,8]
- List author names with the author's last name followed by initials, no periods. Example: Sheehan AH, Killion VJ. (IF MORE THAN 6 AUTHORS, LIST THE FIRST 3 FOLLOWED BY, ET AL.)
- Retain the spelling, abbreviations, and style for numbers used in the original article title, book title, parts of book, or other material.
- For journal article titles and chapter titles in books, capitalize only the first letter of the first word in a title and subtitle.
- For journal titles and book titles, capitalize all main words.
- Inclusive page numbers (i.e., 1404-1412 would be referenced as 1404-12; 1395-1406 would be referenced as 1395-406.)
- Do not use quotation marks.
- Reference the most specific part when possible (i.e., cite the monograph within the online database, not the entire database or cite the chapter within book.)
- Accepted abbreviation of journal titles should be used rather than the full name of the journal

Journal Articles	Authors(Last name First Name Initial). Article title. *Abbreviated Journal Title.* Year Month Date; Volume Number(Issue Number):Inclusive Pages	Meneton P, Jeunemaitre X, de Wardener HE, MacGregor GA. Links between dietary salt intake, renal salt handling, blood pressure, and cardiovascular diseases. *Physiol Rev.* 2005 Apr;85(2):679-715.
Online Journal Article	Author Last Name First Initial Middle Initial. Title of article. *Accepted Abbreviation of Journal Title* Year; Volume: Inclusive Page Numbers. DOI.	Fahey T, Schroeder K, Ebrahim F. Interventions used to improve control of blood pressure in patients with hypertension. *Cochrane Database Syst Rev* 2006;(4):CD005182. doi:10.1002/14651858.CD005182.
Textbooks	Author. Title of Book. Edition. Place of Publication: Publisher; Date. Name of Part Number of Part, Title of Part; Location of Part.	Speroff L, Fritz MA. Clinical gynecologic endocrinology and infertility. 7th ed. Philadelphia: Lippincott Williams & Wilkins; c2005. Chapter 29, Endometriosis; p. 1103-33
Mircomedex®	Title of monograph or document. Specific Micromedex database. Micromedex 2.0. Truven Health Analytics, Inc. Greenwood Village, CO. Available at: http://www.micromedexsolutions.com. Accessed Month day, year.	Entanercept. DrugPoints Summary. Micromedex 2.0. Truven Health Analytics, Inc. Greenwood Village, CO. Available at: http://www.micromedexsolutions.com. Accessed August 13, 2014.
Lexi-Comp ®	Name of monograph, specific topic or chart. Specific database. Lexicomp. Wolters Kluwer Health, Inc. Hudson, OH. Available at: http://online.lexi.com. Accessed Month day, year.	Entanercept. Lexi-Drugs. Lexicomp. Wolters Kluwer Health, Inc. Hudson, OH. Available at: http://online.lexi.com. Accessed August 13, 2014.
Facts and Comparisons ®	Name of monograph, specific topic or chart. Specific database. Wolters Kluwer Health, Inc. Philadelphia, PA. Available at: http://factsandcomparisons.com. Accessed Month day, year.	Atorvastatin. Drug Facts and Comparisons. Facts & Comparisons eAnswers. Wolters Kluwer Health, Inc. Philadelphia, PA. Available at: http://factsandcomparisons.com. Accessed August 13, 2014.
Package Inserts (DailyMed®)	Medication Name [package insert]. City, State Abbreviation: Manufacturer's Name; Year.	Byetta(R) [package insert]. San Diego, CA: Amylin Pharmaceuticals Inc; 2007.
UpToDate®	Authors. Title of article. In: UpToDate, Post TW (Ed), UpToDate, Waltham, MA. Accessed Month day, year.	Bichet DG. Diagnosis of polyuria and diabetes insipidus. In: UpToDate, Post T, (ed), UpToDate, Waltham, MA: Accessed August 13, 2014.
Internet Sites	Authors (if indicated). Organization responsible for the site. Title of page or document. Available at: URL. Accessed Month day, year.	Food and Drug Administration. MedWatch. Available at: http://www.fda.gov/medwatch/index.html. Accessed June 13, 2007.

Assignment I – *Required*
(for both Community and Institution rotations)

Rotation Site Description

Directions:
1. Complete the data collection worksheet for the practice site by interviewing your preceptor and other healthcare professionals. Select the data collection worksheet appropriate to the rotation site.
2. Answer the additional points below by interviewing necessary personnel.
3. Write a paper describing the site incorporating the data collected. ***The assignment must be done individually by each student and be written in your own words.***
   a. Description to be typewritten and 2-3 pages in length or as directed by your preceptor.
   b. You will place both the completed data collection worksheet and the paper to your portfolio.

Additional points to address:
- Describe the physical layout of the pharmacy practice setting.
- Describe the personnel of the pharmacy, including job titles and primary responsibilities.
  o Include the number of FTE's (full time equivalents).
- Specifically discuss your primary preceptor's role and responsibilities.
- Discuss the organizational chart (reporting structure) for the pharmacy.
- Describe the services and activities provided by the pharmacy.
  o Include a discussion of non-pharmacy interactions, if applicable. Examples include interactions with departments or services external to the pharmacy.
- Describe the workflow in the pharmacy on an average day.
- Describe how the site or applicable personnel is/are involved in the training of pharmacy students.
- What measures does the site have in place to prevent dispensing errors?

Site Data Collection Worksheet – Institution

(To be completed by student – download form from portal)

Adapted from American Association of Colleges of Pharmacy Academic-Practice Partnership Initiative, pilot project to profile exemplary advanced practice experience sites (completed September 2005)

Part 1 – General Descriptive Criteria

1. Site Name:	
2. Location:	Address: City: State: ZIP: Phone: Fax: Website:
3. Patient Types:	□ Acute □ Ambulatory □ Extended Care
4. Pharmaceutical care is a primary focus of practice	□ Yes □ No
5. Approx. % of patient types	Pediatric _____ % Geriatric _____ % Other: _____ % Adult _____ % Hospice _____ %
6. Number of pharmacists	FTE (full-time equivalents) PTE (part-time equivalents)
7. Number of technicians	FTE (full-time equivalents) PTE (part-time equivalents)
8. Site affiliates with other academic institutions	□ Yes List schools: □ No
9. Number of specialized positions	FTE (full-time equivalents) PTE (part-time equivalents)
10. Site is an accredited residency site	□ Yes Accrediting Agency: □ No
11. Number of residents and type	PGY1: Hospital: Community: Managed Care: Home Care: Long-Term Care: Ambulatory Care: Family Practice: PGY2: Management: Clinical pharmacokinetics: Critical Care:

		Drug Information: Geriatrics: Infectious Diseases: Internal Medicine: Nuclear Pharmacy: Nutrition Support: Oncology: Pediatrics: Pharmacotherapy: Primary Care: Psychiatric Pharmacy: Other (describe):
1.	Practice Type	□ Hospital □ Extended Care □ Other (describe):
2.	Institution Size	# of beds:
3.	Average census	
4.	Basic Hospital Services (check all that apply)	□ Medical / Surgical □ Pediatrics □ Neonatal ICU □ Pediatric ICU □ ICU □ ER □ Trauma Center □ OB/Gyn □ Oncology □ Psychiatry □ Ambulatory Care □ Infectious Disease □ Other (describe:
5.	Distributive services provided	□ Centralized unit dose distribution □ Decentralized unit dose distribution □ IV preparation □ TPN compounding □ Chemotherapy compounding □ Other (describe):
6.	Non-distributive services provided	□ Patient rounds □ Pharmacokinetics □ Therapeutic consults □ IV to PO conversion □ Drug information □ Newsletter provision □ P&T Committee/Formulary development □ Nursing/Physician/Other Healthcare Practitioner education □ Chart writing privileges □ Laboratory test order protocol □ Code Blue participation □ ER service □ OR service □ Infectious Disease service □ Nutritional Support service □ Anticoagulation service

		□ Pain Management service □ Formal patient education programs □ Other (describe):
7.	Patients monitored/ RPh practitioner/day	Average #:
8.	Patient identification for non-distributive services	Describe (e.g., physician referrals, lab results, etc.):
9.	Pharmaceutical Care documentation system	Describe:
10.	Automation	□ Baker cells/counting machines □ Barcode scanning □ Interactive voice response (IVR) □ IV automation system (describe): □ Medication dispensing cabinets (describe): □ Robot/ScriptPro (describe): □ Other (describe):

11.	Economics of practice (%):	Insurance:
		   Medicare:
		   Medicaid:
		   Private pay:
		Cash:

Student Name (print): _____

Student Signature: _____

Rotation Dates: _____

Site Data Collection Worksheet –Community
(To be completed by student – download form from portal)

Adapted from American Association of Colleges of Pharmacy Academic-Practice Partnership Initiative, pilot project to profile exemplary advanced practice experience sites (completed September 2005)

1. Site Name:	
2. Location:	Address: City: State: ZIP: Phone: Fax: Website:
3. Patient Types:	□ Acute □ Ambulatory □ Extended Care
4. Pharmaceutical care is a primary focus of practice	□ Yes □ No
5. Approx. % of patient types	Pediatric _____ % Geriatric _____ % Other: _____ % Adult _____ % Hospice _____ %
6. Number of pharmacists	FTE (full-time equivalents) PTE (part-time equivalents)
7. Number of technicians	FTE (full-time equivalents) PTE (part-time equivalents)
8. Site affiliates with other academic institutions	□ Yes List schools: □ No
9. Number of specialized positions	FTE (full-time equivalents) PTE (part-time equivalents)
10. Site is an accredited residency site	□ Yes Accrediting Agency: □ No

11. Number of residents and type	PGY1:
	    Community:
	    Other (describe):
	PGY2:
	    Community:
	    Other (describe):

Pharmacy area (square feet)	
1. Drive through window	□ Yes □ No
2. Average Rx's per day	

3. 4.	Front-end square footage Products	Square feet: Products: □ OTC □ Supplements □ Herbals □ Homeopathic □ Diagnostics/monitoring devices □ Medical supplies □ Other (describe):
5.	Description of services	Medication Therapy Management in: □ Anticoagulation □ Asthma □ Diabetes □ CHF □ Hyperlipidemia □ Hypertension □ Metabolic Syndrome □ Smoking cessation □ Weight loss □ Women's health Other: □ Compounding □ Durable Medical Equipment (DME) □ Home IV and Hyperalimentation □ Emergency contraception □ Immunizations □ Medication counseling □ Health screenings □ OTC consultations □ Polypharmacy management □ Skilled Nursing Home consulting □ Patient medication assistance Other (describe):
6.	Patients monitored/ RPh practitioner/day	Average #:
7.	Patient care workflow for MTMS (how are they referred/seen/etc.)	Describe (referrals, walk-ins, etc.):
8.	Pharmaceutical care documentation system	Describe:
9.	Documentation format and feedback	□ SOAP Notes □ Other (describe): How is information provided to patient and to patient's physician (describe)?

10. Automation	□ Baker cells/counting machines □ Barcode scanning □ Interactive voice response (IVR) □ IV automation system (describe): □ Robot/ScriptPro (describe): □ Other (describe):

11. Economics of practice (%)	Insurance:
	    Medicare:
	    Medicaid:
	    Private pay:
	Cash:

12. Billing for MTMS	Describe (include success):

Student Name (print): _____

Student Signature: _____

Rotation Dates: _____

Assignment II – *Required*
(For Both Community and Institution Rotations)

Reflection Paper

Write two (2) reflections for each IPPE rotation. The first will be at the end of the second week (midpoint) and the second will be at the completion (final) of the rotation. Include the aspects noted below and any additional information you feel important in your development as a pharmacist. Each reflection should be 2-3 pages, typed and double-spaced. Submit to your preceptor the day before your midpoint and your final evaluations, unless otherwise requested by your preceptor. Please print a copy for your portfolio and retain an electronic version of this reflective exercise. The Office of Experiential Education may request that you send a copy at any time.

Pre-Planning:
Determine your specific goals and objectives to attain during your rotation experience.

Both reflections need to include the following title information:
1. Student name
2. Title to include midpoint or final reflection
3. Date of reflection
4. Preceptor name
5. Site name
6. Rotation type (community or institution) and dates

Midpoint Reflection (due the day before your 2-week Midpoint evaluation):
1. Identify what you thought you would experience during the first two (2) weeks of the rotation, including your goals and objectives, and compare to your actual experience.
2. Summarize your activities and experiences during the first two (2) weeks of the rotation.
3. Describe at least one (1) example of behaviors or characteristics you observed among the pharmacy employees and how they positively or negatively affect the delivery of services.
4. Describe at least one (1) interaction between pharmacy employees and each of the following healthcare professionals: Physician; Nurse. Include your thoughts on what you expected to see as compared to how the interaction actually occurred, a description of the outcome and your thoughts on how the interaction could have been improved.
5.
6. Identify at least one (1) area of pharmacy practice you participated in that was covered in pharmacy coursework during your P1 year.
7. Identify specific goals for the final two (2) weeks of the rotation.

Final Reflection (due the day before your FINAL evaluation):
1. Identify what you thought you would experience during the last two (2) weeks of the rotation, including your goals and objectives, and compare to your actual experience.
2. Summarize your activities and experiences during the last two (2) weeks of the rotation.
3. Describe at least one (1) **additional** (and different) behavior or characteristic you observed among the pharmacy employees and how they positively or negatively affect the delivery of services.
4. Describe at least one (1) **additional** interaction between pharmacy employees and each of the following healthcare professionals: Physician; Nurse. Include your thoughts on what you expected to see as compared to how the interaction actually occurred, a description of the outcome and your thoughts on how the interaction could have been improved.
5. Identify at least one (1) additional area of pharmacy practice you participated in that was covered in pharmacy coursework during your P1 year.
6. Describe how you have been changed by this rotation experience and how it has helped you in your development as a pharmacist. Include an assessment of strengths and weaknesses you identified in yourself during this rotation.

Grading Criteria:
1. All title information is included.
2. Reflection is 2-3 pages, typed and double-spaced.
3. Sentences are complete and free from grammatical errors.
4. Goals are clearly stated.
5. Experiences and activities are clearly summarized.
6. Description and outcome of pharmacy employees' behaviors and characteristics are clearly described.
7. At least one (1) aspect of the pharmacy coursework was clearly related to the rotation experience.
8. Strengths and weaknesses were clearly described.
9. The impact of the rotation on professional growth as a pharmacist is clearly addressed.

Assignment III- *Institutional Requirement*

Drug Information Question Worksheet

Final results to be typed for inclusion in student portfolio. Refer to the following guide for processing questions.

Requestor Name (if patient, use initials): _____

Question asked: _____

_____

ULTIMATE/REAL Question: _____

_____

Introduction (state pertinent background provided that sets the context for the response):

Information / data found regarding question:

Conclusion / Recommendations (information / data above must support conclusion):

References (cite reference completely):

Student Name (print): _____   Date: _____

Student Signature: _____

Preceptor Name (print): _____   Date: _____

Preceptor Signature: _____

Drug Information Question Processing

Modified Systematic Approach

(Host TR, Kirkwood CF. Abstract presented as ASHP Midyear Clinical Meeting; Dec 1987)

Steps:
1. Identify caller
2. Obtain background information*****
3. Determine and categorize ultimate question
4. Develop search strategy and conduct search
5. Perform evaluation, analysis, and synthesis
6. Formulate and provide response
7. Conduct follow-up and documentation

*Background Information to determine:

Regardless of type of question:	- Requestor's name - Requestor's location and/or contact info - Requestor's affiliation, if healthcare professional - Requestor's title, profession - Resources requestor has already contacted - Request patient specific or not - Patient's diagnosis and other meds - Urgency of request
Adverse Drug Reaction:	- Obtain description of the event and assess severity - Temporal relationships - Signs/symptoms - Concomitant medications - Assess current status of patient - How is the patient being managed? - Previous history of exposure to same or similar agents
Drug Interactions:	- Obtain description of the problem – is the patient already taking the drugs or is this in anticipation of starting a drug? - Doses, duration of therapy, rates of administration? - Temporal relationship between the drugs in question - Other medications - Is a disease-drug or food-drug interference a possibility?
Foreign drug identification:	- Reason for inquiry - US equivalent needed - Suspected form, strength, dosing regimen, color, markings - Where did the spelling come from?
Product availability:	- Indication for treatment - Dosage form/ route of administration desired - On formulary status required

Product ID:	● Correct spelling ● Country of origin ● Trade/generic/chemical name ● Reason for inquiry ● Suspected product and use ● Manufacturer ● Size/shape/strength, imprint markings, color ● Where did you hear about the product? ● How did you hear about this product?
Compatibility/stability:	● How are drugs going to be mixed? ● What are the concentrations of the drugs? ● What diluent solutions are the drugs mixed in? ● What are the doses and rates of infusion? ● Any fluid/electrolyte restrictions? ● Available routes for administration ● How many IV lines are available? ● What other medications are running?
Dosage/Administration:	● Indication for the drug ● Weight of the patient ● Age/sex of patient ● Renal and/or hepatic function ● Planned route of administration ● Other medications (drug interactions)
Drug of Choice/Therapeutics:	● Exact indication and severity of condition ● Renal and/or hepatic function ● Concomitant medications ● Concomitant medical conditions ● Route of administration ● Allergies ● What other treatments has this patient tried for this condition? If other tried, why were they stopped? (Lack of efficacy, adverse effect) ● Compliance and cost factors
Pharmacokinetics:	● Reason for inquiry (treatment failure, low levels) ● Dose and route of administration ● Indication ● Height, weight, age, sex of patient ● Renal and/or hepatic function/protein status ● Drug levels? Timing of levels? Believable? ● Single versus multiple doses ● Duration of therapy ● Times levels drawn and what are the levels ● Concomitant medications? Other physiologic conditions present that can affect kinetics?

Pregnancy/ lactation:	● Has the patient already taken the drug? ● Indication for the drug ● How essential is the drug ● Planned dose, frequency, duration, and route of administration? ● Other drugs or disease states? ● Trimester of pregnancy ● Fetal abnormality? ● Symptoms following breast feeding ● How old is the infant? ● Frequency/schedule of breast-feeding ● Is bottle feeding an option?
Compounding/ Formulation:	● Reason for having to compound ● What is the drug being used for? ● Did the patient use another similar agent?? Result? ● Dosage ● Site of desired administration
Poison/ Toxicology:	● Telephone number ● Acute ingestions → poison center ● What was ingested – drug/chemical? ● Amount ingested ● Route of exposure ● Time elapsed since ingestion ● Accidental exposure? Suicide attempt? Environmental exposure? ● What symptoms is patient having? ● What has been done for the patient so far? ● Renal and hepatic function
Pharmacology:	● Reason for inquiry (often pharmacokinetics or drug interaction) ● Patient's disease state
Investigational drugs:	● Reference sources (where did caller hear about the drug?) ● Correct spelling (source of spelling) ● Therapeutic use ● Investigator manufacturer ● Reason for inquiry (sometimes a toxicity/ adverse effects question)

Assignment IV- *Institutional Requirement*

Medication History / Patient Interview Worksheet - Instructions

*All documentation to be turned in to the school or kept in the student portfolio must <u>NOT</u> contain any patient identifiers.

IMPORTANT: LECOM School of Pharmacy feels that this is an important skill that must be developed and practiced in our students. If this activity cannot be performed due to limited opportunities at site, the following is recommended:
- If the preceptor or other staff member is willing, perform an interview/med history using that person as your sample patient
- The preceptor can create a "mock" patient script that may be used while the student conducts the interview.
- If multiple students are at the site, the preceptor can oversee the performance of actual or mock medication histories on each other.
- As a worst case scenario, the student may interview a family member, friend, or roommate in order to complete the assignment.

*The following are **examples** of questions and points to discuss with patients to help obtain an accurate medication history:
1. What medications are you currently taking?
2. What medications have your doctors told you to take?
3. What products do you buy to feel better that you don't need a prescription for?
4. What product(s) do you take for…
   a. A headache?
   b. Aches and pains?
   c. Cold/sinus symptoms (congestion, cough, runny nose, etc.)?
   d. Allergy symptoms (itchy/watery eyes, runny nose, etc.)?
   e. Stomach problems (upset stomach, constipation, diarrhea)?
5. What herbal/natural/vitamin products do you take?

Medication History / Patient Interview Worksheet

Interview Date: _____ □ Male   □ Female   Age: _____

Source of information (e.g., patient, family member, etc.): _____

*Medication History (include all prescription, over the counter, supplements and herbal products used by the patient); use additional page if necessary.

Medication (name, strength, quantity/dose, route and frequency)	Last Taken (Date/Time)	Indication/ Purpose/ Comments

Medication Allergies:

Medication name: _____   Reaction: _____

Medication name: _____   Reaction: _____

Medication name: _____   Reaction: _____

Immunization Record (date/year of last dose if known):

Influenza Vaccine: _____Hepatitis Vaccine: _____Pneumonia Vaccine: _____
_____Tetanus Vaccine: _____

Zoster Vaccine: _____ Other Vaccine: _____

Describe any potential drug-related problems or other areas of concern:

_____

_____

_____

_____

_____

_____

Student Name (print): _____ Date: _____

Student Signature: _____

Preceptor Name (print): _____ Date: _____

Preceptor Signature: _____

Assignment V- *Community Requirement*

OTC Formulary / Related Products Reference

Create a document (2-3 pages) to serve as a reference for a category of OTC medications or home monitoring/diagnostic products. The purpose is to serve as a resource to help a patient select the best product for self-treatment. Choose from the list below (or as assigned by your preceptor) and compare/contrast the individual products carried by the pharmacy you are assigned to for your community IPPE rotation. The preceptor may help determine if all products in the category should be included or only selected products, such as the top 5 best sellers. On the following page, an optional drug monograph worksheet is included. This can be used to describe each class of medication.

Categories - OTC class or home diagnostic product:

● Ophthalmic and contact lens preparations
● Otic preparations
● Laxatives
● Anti-diarrheals
● Antacids (and other stomach upset preparations)
	● Diet/weight control agents
	● Sleep aids
	● Topical antibacterials/ antiseptics and wound irrigations
	● Yeast infection products
	● Contraceptive products
		● Sunburn prevention/ treatment
		● Diaper rash
		● Pediatric fever and pain relief products
		● Home diagnostic products:
		   ○ pregnancy tests
		   ○ blood glucose
		   ○ drug tests

Your report should include the following information, at a minimum:

OTCs	**Home Monitoring/Diagnostic Products**
● Background information on the selected topic/OTC class ● Names of the products in that category carried at the pharmacy ● Active Ingredients (if applicable) ● Other ingredients (if to be considered in OTC selection/recommendation to a patient) ● Dosing ● Indications ● Contraindications ● Drug/drug interactions ● Drug/disease interactions ● Adverse reactions ● Toxicity ● Recommendations for specific patient populations (e.g., pediatrics, geriatrics, disease states, etc.) ● Patient teaching considerations ● References	● Background information on the selected topic/OTC class ● Names of the products in that category carried at the pharmacy ● Mechanism of action ● Criteria for product recommendation ● Patient teaching considerations ● References

Drug Monograph Worksheet:

Brand name:	Other brand names available:
Generic name:	Mechanism of action:
Therapeutic category (Antacid, analgesic, etc.):	Onset of action:
Pharmacologic category (H2-blocker, NSAID, etc.):	Recommendations for special populations (pediatrics, geriatrics, pregnancy):
Dosing:	
Indications:	
Contraindications:	
Drug-Drug Interactions:	Patient counseling points:
Drug-Disease Interactions:	
Adverse Reactions:	

List 3 important counseling points for your patient that are not located on the Drug Facts Label:

Assignment VI- *Community Requirement*

SOAP Note / QuEST-SCHOLAR / Patient Self-Medication Consultation Worksheet

Without even realizing it, pharmacists perform the QuEST SCHOLAR or SOAP technique with patients every day as they listen to and provide therapeutic recommendations for OTC products. Many questions, such as those listed in the QuEST SCHOLAR technique are utilized. The pharmacist quickly listens to their "subjective" complaints, observes for any "objective" signs, "assesses" the patient's condition using their overall experience in patient care, and then develops a "plan"/provides a recommendation.

- Please interview or observe your preceptor in consultation with a patient regarding a specific OTC health related concern (e.g. recommendation for treatment of a cough or cold). Even though timing is sometimes tight, if at all possible, utilize the QuEST SCHOLAR or Patient Self-Medication Consultation Worksheet to gather all pertinent information from the patient.
- Utilize either the QuEST SCHOLAR or SOAP Note format to document what you have learned, reason through, and develop a plan of action for the patient.
- Because of the busy nature of most pharmacies, in most cases, the student will observe a fairly brief interaction between the pharmacist and patient. However, in the write-up, the student should perform a thorough assessment and create a plan as if there is ample time to spend.
- If preceptors would prefer to create a more "complex" patient for learning purposes, they can create a "mock" patient script and play the role of the patient while the student conducts the interview.

QuEST SCHOLAR:

QuEST SCHOLAR is a method used to gather information from patients about self-care concerns. Please utilize the following template to gather information from a patient and to organize your self-care recommendation and counseling points:

Title: *Date:*	
*Qu: **Qu**ickly and accurately assess the patient* *Who is the patient (age/ gender/initials/ethnicity)?*	
Symptoms:	
Characteristics:	
History:	
Onset:	
Location:	
Aggravating factors:	
Remitting factors:	
Health conditions:	

Allergies:	
Medications (Prescription, OTC, herbals):	
Social History:	

Initial assessment:

Nonprescription products available:

*E: **E**stablish that the patient is an appropriate self-care candidate (if any "yes" then refer to MD)*

	Yes/No	Describe:
Severe symptoms?		
Persistent symptoms?		
Avoiding med care?		

*S: **S**uggest appropriate self-care strategies*

Medication (including dose and frequency):		Rationale:
Alternative tx:		
General care:		

*T: **T**alk with the patient*

	Absolute need to know (try to limit to 3-4):	Should know:
Med (action, admin, ADRs):		
Treatment expectations:		
Follow up:		

Patient Self-Medication Consultation Worksheet

Please utilize this form to assure that you collect all of the information from the patient that is needed in order to appropriately assess and document your OTC consultation experience.

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

2. What other disease states or conditions does the patient have? What other medications is the patient taking? How did this information influence your decision?

3. Your assessment of the patient's situation.

4. Your detailed recommendation. It needs to include 4 components: a) specific recommendation for treatment (include dose, route, and frequency for drug therapy); b) rationale for your recommendation; c) recommendation for specific monitoring for efficacy and safety; and d) patient education including when to seek additional help.

Student Name: _____ Date: _____

Preceptor Name: _____ Date: _____

SOAP Note

Final SOAP note to be typed for inclusion in the student portfolio.

Using the data obtained from your Patient Self-Medication Consultation worksheet or your interview with the patient, please write a SOAP Note for each patient following the format provided.

SOAP Notes Guide

Subjective
- ▪ Information that the patient relates back to the health care practitioners regarding her/his conditions
- ▪ Perceived by the patient and not evident to the health care provider (i.e. pain, nausea, fatigue, dizziness)
- ▪ Ideas and opinions of the patient – often the chief complaint

Objective
- ▪ Quantifiable data the health care provider observes without bias
- ▪ All information that can be reproduced or verified
- ▪ Facts (i.e. laboratory tests, vital signs, diagnostic tests, medication profile)
- ▪ Should NOT include anything the patient has told the provider
  - o However, may include information that supports the subjective information provided by the patient, for example:
    Subjective: "I'm depressed, I can't stop crying."
    Objective: The patient is tearful today.

Assessment
- ▪ Usually includes diagnoses noted by the physician or nurse practitioner
  - o Pharmacists cannot diagnose a medical condition(s)
- ▪ Should be a complete assessment
  - o Assessment of problem (with rationale)
  - o Assessment of present therapy (with rationale)
- ▪ Pharmacy student SOAP notes should include their own evaluation of the subjective and objective information
  - o For example:
    Subjective: "I feel dizzy whenever I stand up."
    Objective: Patient has been on atenolol 50 mg daily for 2 years and BP had been well controlled without dizziness until recently. Creatinine was 2 on admission. Baseline creatinine was 1.1. BP 110/70, P 80 lying down. BP 80/40 with P 120 standing up.
    Assessment: Patient's dizziness is likely related to orthostatic hypotension secondary to atenolol and its reduced clearance due the current change (decrease) in renal function. Estimated creatinine clearance is 30 mL/min.

Plan
- ▪ Strategy for treating/addressing the problem(s)
  - o Include a SMART goal for each problem
  - o Be specific! If making a recommendation to start a new medication, be sure to give drug name, dose, route, and schedule.
- ▪ Must include 4 components
  - o Specific recommendation for treatment (include dose, route, and frequency for drug therapy)
  - o Rationale for your recommendation
  - o Recommendation for specific monitoring (include safety and efficacy)
  - o Patient education
- ▪ Discharge planning, immunizations, and counseling should be included.

- ▪ Based on the issues defined in the Assessment portion, define a plan of action for each issue, including non-pharmacologic and pharmacologic options. Be sure that this is something that is within a pharmacist's scope of practice (i.e. use "Recommend increase dose to…", not "Increase dose to....")
  - o i.e. for atenolol example above:

    Plan: Recommend holding atenolol until orthostasis resolved and reinstitute atenolol at 25 mg daily once BP is up. Monitor BP, orthostatic BP, and symptoms of orthostasis such as lightheadedness/dizziness when getting up. Prior to discharge, will educate patient on the change in dose if this is implemented. Will also educate regarding methods to manage orthostasis including getting up slowly and dangling legs over the edge of the bed before standing.

Completing Evaluations (Assessments)

1. STEPS TO BE COMPLETED IN ORDER
2. All forms to be completed and submitted via PharmAcademic unless otherwise indicated.
3. **The student** should review the PHARMACADEMIC process with his/her preceptor and the evaluations should be entered online. The completed online assessment must be received by the Director for Experiential Education no later than the last day of each rotation. **It is the student's responsibility to see that this is done.**

MID-ROTATION:

Student:

1. Turn in all pertinent assignments to your preceptor for review prior to your Midpoint evaluation.

2. Complete "IPPE- Student Mid-rotation Self-Assessment" (online in PharmAcademic). Print and submit to your preceptor for discussion.

Preceptor:

1. During the second week of rotation complete the "IPPE -- Preceptor Midpoint Assessment of Student" form and review the results with the student.

2. If the student is at risk for failure during the mid-rotation review, **the preceptor** should contact the Director of Experiential Education. A plan of action should be developed between the preceptor, the student and the Director of Experiential Education to improve the student's performance and chance of success. Please document concerns and pertinent plan using the Midpoint Deficiency Notice (found in this manual following the Midpoint Assessment) and submit to the Director of Experiential Education-Bradenton.

END of ROTATION:

Student:

1. Turn in all pertinent assignments to your preceptor for review at the Final Assessment as outlined in the manual. The preceptor may ask to see ALL assignments from the full rotation, so please have them ready for review.

2. Complete the "IPPE - Student Final Self-Assessment" (online in PharmAcademic). Print and submit to your preceptor for discussion.

3. Complete the "Student Assessment of Site and Preceptor" (online in PharmAcademic). Failure to submit this evaluation will result in a **5 points deduction** from the overall rotation grade.

4. Your portfolio must be reviewed by your Advisor within 2 weeks of returning to campus for the Fall term in order for you to receive credit for this work. **This is worth 10% of your grade for EACH rotation.**

Preceptor:

1. During the fourth (last) week of rotation complete the "IPPE -- Preceptor Final Assessment of Student" online in PharmAcademic and review the results with the student.

2. Please see the following pages for the questions that you will be asked to complete in PharmAcademic when completing the online evaluation (assessment).

IPPE Midpoint <u>Assessment of Student</u>

Considering the student's coursework to date (Introduction to Pharmacy, Pharmacy Law, Basic Drug Information Skills, Communications, Calculations, Biochemistry, Anatomy and Physiology, Microbiology, and Pharmaceutics), please evaluate the student in the following areas using these criteria:

D = Deficient	C = Competent	E = Excellent
Student is **not able to meet expectations** despite guidance and/or multiple redirection attempts on part of preceptor. Student seems **indifferent to preceptor counseling**. Assignment quality is **poor or incomplete**. Significant revision is still needed.	Student is **able to meet expectations with guidance from the preceptor** in most cases but some refinement may be needed. Completes assignments and follows directions. Student is **open to feedback**. Assignments are of **adequate quality;** may have required moderate corrections but overall outcome is sufficient**.**	Student **consistently and independently fulfills and sometimes exceeds expectations** compared to usual students. Is **proactive** in approach to various situations, to learning, and in communicating. Is a model student. Assignments are of **high overall quality** and required minimal correction to complete

<u>Knowledge Base</u>

1.   Order fulfillment/drug and pharmacy systems knowledge

Example competencies: **Evaluation:**_____

a.   Completes basic order interpretation and dispensing of requested product
b.   Displays basic knowledge of brand/generic and drug purpose
c.   Performs pertinent calculations
d.   Demonstrates error prevention process

2. Knowledge support skills

Example competencies: **Evaluation: _____**

a.   Retrieves additional information when needed (e.g. from patient/caregiver, chart, package insert, nurses, insurance company, pharmaceutical company, etc.)
b.   Researches basic drug information questions
c.   Interprets information from basic literature, manuals, or other references

<u>Technical Skills</u>

Example competencies: **Evaluation: _____**

a.   Acquires from stock and accurately prepares medications
b.   Displays good technique (after training) in preparation of parenteral products
c.   Able to navigate use of technology appropriately (dispensing systems, computers, etc.)
d.   Identifies/troubleshoots basic problems

e. Able to incorporate self into workflow of the pharmacy effectively
f. Files necessary paperwork, electronic data

Communication Skills

1. Verbal/non-verbal communication

Example competencies: **Evaluation:** _____

a. Uses appropriate verbal (clear, concise) communication skills with preceptor/other staff
b. Displays appropriate non-verbal mannerisms during all interactions
c. Communicates with preceptor/staff when more guidance is needed
d. Interacts effectively with patients
e. Delivers live presentations effectively

2. Written communication

Example competencies: **Evaluation:** _____

a. Uses appropriate written (legible, accurate, format, professional) communication skills in assignments/other communications
b. Crafts appropriate SOAP note/care plan

Professionalism

1. Attitude

Example competencies: **Evaluation:** _____

a. Accepts constructive feedback and responsibility. Recognizes own limitations.
b. Enthusiastic about learning/ self-motivated/ self-confident for level of experience/ participates in discussion and activities
c. Displays caring, non-judgmental attitude toward patients, caregivers, or health care colleagues (including culture, religion, gender, or personal lifestyle)
d. Appears invested in well-being of patients, success of colleagues/site in delivering patient care.
e. Respect other's opinions/ consensus seeking
f. Remains focused and not distracted from duties/responsibilities

2. Professional Ethics   **Evaluation:** _____

Example competencies:

a. Arrives on time (and forms preceptor promptly otherwise), appropriate attire/appearance, uses professional language, collegial
b. Adheres to laws, regulations, and site specific policies/procedures.
c. Conscientious in completing assigned tasks in a timely fashion
d. Maintains confidentiality (patient/proprietary)

Assignments

Has student completed the following required assignments to date (note, grades are recorded on the final evaluation):

a. Site description   *Yes / No*

b. Midpoint Reflection   *Yes / No*

c. Any additional preceptor-directed assignments   *Yes / No*

Preceptor's Comments regarding student performance to date:

_____

_____

_____

_____

_____

_____

Please indicate the number of days the student has been absent from this rotation to date:

     0   1   2   3   4

How many of these absent days did the student make up?

     NA   1   2   3   4

Is this student in danger of failing this rotation? If yes, please contact the Director of Experiential Education, Dr. Laura Stevenson (941-782-5677) as soon as possible to discuss a plan for student improvement.

     Yes   No

This evaluation was verbally discussed with the student.

     Yes   No

Midpoint Deficiency Notification

Please contact the Director of Experiential Education immediately by phone (941-782-5677) or email lstevenson@lecom.edu) if there is a concern the student may fail the rotation. Please complete and forward this notification to attention of Dr. Laura Stevenson by fax (941-782-5733) or as a PDF via e-mail to document concerns and the action plan. Attach additional pages if needed.

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

Rotation Site: _____

Preceptor's Name: _____

Description of deficiency:

_____

_____

_____

_____

_____

_____

Action Plan for Improvement:

_____

_____

_____

_____

_____

Student's Signature: _____

Preceptor's Signature: _____

IPPE- *Sample* Student Self-Assessment

This assessment documents the progress and achievement of objectives for the IPPE rotation. An __honest__ self-assessment will help you focus your learning endeavors and development of professional skills. This evaluation should be performed towards the end of the second week and at the end of the fourth week of the rotation and provided to your preceptor prior to your evaluation.

D = Deficient	C = Competent	E = Excellent
Student is **not able to meet expectations** despite guidance and/or multiple redirection attempts on part of preceptor. Student seems **indifferent to preceptor counseling**. Assignment quality is **poor or incomplete**. Significant revision is still needed.	Student is **able to meet expectations with guidance from the preceptor** in most cases but some refinement may be needed. Completes assignments and follows directions. Student is **open to feedback**. Assignments are of **adequate quality;** may have required moderate corrections but overall outcome is sufficient**.**	Student **consistently and independently fulfills and sometimes exceeds expectations** compared to usual students. Is **proactive** in approach to various situations, to learning, and in communicating. Is a model student. Assignments are of **high overall quality** and required minimal correction to complete

Knowledge Base

1. Order fulfillment/drug and pharmacy systems knowledge

Example competencies: **Evaluation:_____**

a. Completes basic order interpretation and dispensing of requested product
b. Displays basic knowledge of brand/generic and drug purpose
c. Performs pertinent calculations
d. Demonstrates error prevention process

2. Knowledge support skills

Example competencies: **Evaluation: _____**

a. Retrieves additional information when needed (e.g. from patient/caregiver, chart, package insert, nurses, insurance company, pharmaceutical company, etc.)
b. Researches basic drug information questions
c. Interprets information from basic literature, manuals, or other references

Technical Skills

Example competencies: **Evaluation: _____**

a. Acquires from stock and accurately prepares medications
b. Displays good technique (after training) in preparation of parenteral products
c. Able to navigate use of technology appropriately (dispensing systems, computers, etc.)
d. Identifies/troubleshoots basic problems
e. Able to incorporate self into workflow of the pharmacy effectively
f. Files necessary paperwork, electronic data

Communication Skills

1. Verbal/non-verbal communication

Example competencies: **Evaluation: _____**

a. Uses appropriate verbal (clear, concise) communication skills with preceptor/other staff
b. Displays appropriate non-verbal mannerisms during all interactions
c. Communicates with preceptor/staff when more guidance is needed
d. Interacts effectively with patients
e. Delivers live presentations effectively

2. Written communication

Example competencies: **Evaluation: _____**

a. Uses appropriate written (legible, accurate, format, professional) communication skills in assignments/other communications
b. Crafts appropriate SOAP note/care plan

Professionalism

1. Attitude

Example competencies: **Evaluation: _____**

a. Accepts constructive feedback and responsibility. Recognizes own limitations.
b. Enthusiastic about learning/ self-motivated/ self-confident for level of experience/ participates in discussion and activities
c. Displays caring, non-judgmental attitude toward patients, caregivers, or health care colleagues (including culture, religion, gender, or personal lifestyle)
d. Appears invested in well-being of patients, success of colleagues/site in delivering patient care.
e. Respect other's opinions/ consensus seeking
f. Remains focused and not distracted from duties/responsibilities

2. Professional Ethics

Example competencies: **Evaluation:** _____

a. Arrives on time (and forms preceptor promptly otherwise), appropriate attire/appearance, uses professional language, collegial
b. Adheres to laws, regulations, and site specific policies/procedures.
c. Conscientious in completing assigned tasks in a timely fashion
d. Maintains confidentiality (patient/proprietary)

Assignments *(all listed here are due at Final)*

Site description   **Evaluation:** _____

Midpoint Reflection   **Evaluation:** _____

Med Class Review (Comm.)/DI Question (Inst.)   **Evaluation:** _____

SOAP Note (Comm.) or Medication History (Inst.)   **Evaluation:** _____

Final Reflection   **Evaluation:** _____

Midpoint- Comments regarding my performance to date:

Final- Comments regarding my overall performance on this rotation:

Midpoint only: My plans for improvement during the second half of rotation include:

IPPE Final <u>Assessment of Student</u>

Considering the student's coursework to date (Introduction to Pharmacy, Pharmacy Law, Basic Drug Information Skills, Communications, Calculations, Biochemistry, Anatomy and Physiology, Microbiology, and Pharmaceutics), please evaluate the student in the following areas using these criteria:

D = Deficient	C = Competent	E = Excellent
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<u>Knowledge Base</u>

1. **Order fulfillment/drug and pharmacy systems knowledge**

    Example competencies: **Evaluation:_____**

    a. Completes basic order interpretation and dispensing of requested product
    b. Displays basic knowledge of brand/generic and drug purpose
    c. Performs pertinent calculations
    d. Demonstrates error prevention process

2. **Knowledge support skills**

    Example competencies: **Evaluation: _____**

    a. Retrieves additional information when needed (e.g. from patient/caregiver, chart, package insert, nurses, insurance company, pharmaceutical company, etc.)
    b. Researches basic drug information questions
    c. Interprets information from basic literature, manuals, or other references

Technical Skills

Example competencies: **Evaluation: _____**

a. Acquires from stock and accurately prepares medications
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Communication Skills

1. Verbal/non-verbal communication

Example competencies: **Evaluation: _____**

a. Uses appropriate verbal (clear, concise) communication skills with preceptor/other staff
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Example competencies: **Evaluation: _____**

a. Uses appropriate written (legible, accurate, format, professional) communication skills in assignments/other communications
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Professionalism

1. Attitude

Example competencies: **Evaluation: _____**

a. Accepts constructive feedback and responsibility. Recognizes own limitations.
b. Enthusiastic about learning/ self-motivated/ self-confident for level of experience/ participates in discussion and activities
c. Displays caring, non-judgmental attitude toward patients, caregivers, or health care colleagues (including culture, religion, gender, or personal lifestyle)
d. Appears invested in well-being of patients, success of colleagues/site in delivering patient care.
e. Respect other's opinions/ consensus seeking
f. Remains focused and not distracted from duties/responsibilities

2. Professional Ethics

Example competencies: **Evaluation: _____**

a. Arrives on time (and forms preceptor promptly otherwise), appropriate attire/appearance, uses professional language, collegial
b. Adheres to laws, regulations, and site specific policies/procedures.
c. Conscientious in completing assigned tasks in a timely fashion
d. Maintains confidentiality (patient/proprietary)

Required Assignments

Assignments *(all listed here are due at Final)*

Site description   **Evaluation:** _____
Midpoint Reflection   **Evaluation:** _____
Med Class Review (Comm.)/DI Question (Inst.)   **Evaluation:** _____

SOAP Note (Comm.) or Medication History (Inst.)   **Evaluation:** _____

Final Reflection   **Evaluation:** _____

Preceptor's Overall Comments regarding student performance on rotation:

Please indicate the number of days the student has been absent from the entire rotation:

0   1   2   3   4

How many of these absent days did the student make up?

NA   1   2   3   4

Did the student complete a *minimum* of 160 hours during this rotation?

Yes   No

Student contacted site a *minimum* of 4 weeks prior to the start of rotation, completed all necessary pre-work, and reviewed manual with preceptor at the beginning of the rotation. (Failure to follow policy will result in 5 points deduction of grade.)

Yes   No

LECOM calculates the grade based on the way you evaluated the student above. However, based on your overall assessment of the student, what would you recommend for this student's overall grade?

A (Excellent; 89.5-100) **B** (Good; 79.5-89.4) **C** (Average; 69.5-79.4) **F** (Failure; 69.4 or less)

I completed and discussed a midpoint evaluation with the student.

Yes   No

This evaluation was verbally discussed with the student at the end of the rotation.

Yes   No

Student Assessment of Site and Preceptor

The student should complete this form at the end of the rotation and prior to receiving the final grade and evaluation from the preceptor. Your preceptor will receive feedback in the future regarding his/her performance.

The evaluation form appears as follows:

Evaluated: "Preceptor Name"   **Delivery Date:** "Date/Time will be present"
Assessment: Student Evaluation of Preceptor/Site   **Due Date:** "Date/Time will be present"
Evaluator: "Student Name"

Using the following key, complete each statement.
1 = Strongly Disagree
2 = Disagree
3 = Neutral
4 = Agree
5 = Strongly Agree

Failure to submit this evaluation will result in a deduction from the rotation grade.

Page 1 - Student Evaluation of Preceptor/Site ▼

A.   Student Evaluation of Preceptor/Site

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1. The site provided a good opportunity to experience the rotation learning objectives.	○	○	○	○	○
2. The site provided an environment conducive to student learning.	○	○	○	○	○
3. I was made to feel welcome at the site.	○	○	○	○	○

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4. I had the opportunity to interact with other health care professionals.

○ ○ ○ ○ ○

5. I had the opportunity to interact with diverse patient populations.

○ ○ ○ ○ ○

6. The preceptor provided timely feedback.

○ ○ ○ ○ ○

7. The preceptor provided helpful feedback.

○ ○ ○ ○ ○

8. The preceptor provided opportunities conducive to learning.

○ ○ ○ ○ ○

9. The preceptor served as a positive role model.

○ ○ ○ ○ ○

10. The preceptor is a highly competent pharmacy practitioner.

○ ○ ○ ○ ○

11. The preceptor demonstrated collegiality with all team members.

○ ○ ○ ○ ○

12. The preceptor was receptive to questions and other viewpoints.

○ ○ ○ ○ ○

13. The preceptor is a dedicated and enthusiastic teacher.

○ ○ ○ ○ ○
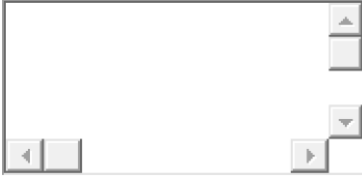
14. Would you recommend this preceptor for recognition as an outstanding preceptor? If yes, please explain.

Comments:

○　Yes

○　No

*15. What did the preceptor do that was most effective in supporting your learning needs?

*16. How could the learning experience be improved?

*17. My preceptor reviewed my performance at the rotation's midpoint.

○　Yes

○　No

*18. My preceptor reviewed my overall performance at the end of the rotation (or is scheduled to do so).

○　Yes

○　No

19. Other comments:

Submit

General Instructions for using Pharm*Academic*

LECOM School of Pharmacy

General Instructions for using Pharm*Academic*

Pharm*Academic* is the rotation management software system used by the LECOM School of Pharmacy to track all pharmacy rotations and associated information. Every preceptor and student will be able to use the system, via the Internet, to check for rotation updates, maintain addresses, record activities using PharmPortfolio, and complete evaluation forms.

The following pages are intended to provide basic instructions for use of the system.
Pharm*Academic* ID's and passwords are intended for the recipient only. Please do not share your ID or password with anyone. Unauthorized use is prohibited.

If you have questions or problems with the SYSTEM, do not hesitate to contact McCreadie Group Support at 1-866-722-1096 so they can provide you with assistance. Thank you.

PharmAcademic: Login/Change Password
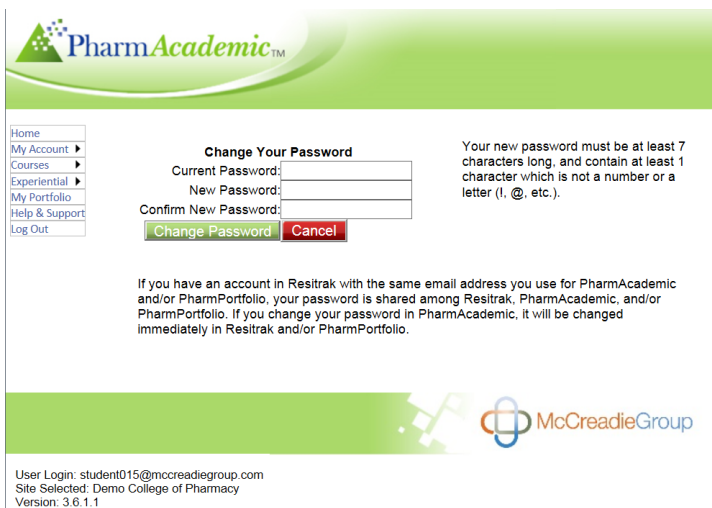
Steps for logging in to PharmAcademic:
1. Click on a link to PharmAcademic in an email message sent to you, or type http://www.pharmacademic.com into your internet browser.
2. If your email address is not pre-populated, type your email address in the PharmAcademic Email box.
3. Type in your password. If you are using a 14-character automatically-generated password (such as the initial one you receive), copy and paste it from the email message so you do not need to identify each of the characters (take care not to copy any leading or trailing spaces).

Steps for changing your password in PharmAcademic:
1. Log in to PharmAcademic.
2. Select the Change My Password option from the My Account menu at the top of the screen.
3. Type or copy and paste your current (old) password into the Current Password box.
4. Select a new password that meets the requirements described on the screen.   It must be at least 7 characters long, and contain one character that is neither a letter nor a number (such as a punctuation mark).
5. Type in your new password two times in the boxes provided.
6. Click the Change Password button. Your new password is valid immediately.

PharmAcademic Instructions for Preceptors

Additional information for Preceptors may be found on the PharmAcademic home page in the "Announcement" tab of the Experiential Education tab set. This information is regularly updated by the Experiential office. Documents, files, and other information uploaded by the Experiential office may also be found on the "Resources" tab.

The "Sites and Rotations" tab lists all rotations for which the preceptor is listed as either the primary or supporting preceptor. Clicking on the name of a Site opens a pop-out window with information about the site only. Clicking on the PDF link opens the Site Description report (including information about all rotations at the site). Clicking on the Rotation name opens the Rotation Description Report (which can also be opened from the Student Viewer).

The "Preceptor Contact Information" tab displays the preceptor name, primary email, and primary phone number exactly as they are displayed for students who have been scheduled with the preceptor. (Students may only see contact information for the preceptors on their schedule, not during the rotation ranking process.) A link to the "Edit My Account Information" screen is available, and that screen may also be accessed from the My Account menu on the left. Preceptors should review and update their information regularly.

View Current Schedule

Select the "Schedule" tab in the Experiential Education tab set on the PharmAcademic home page.

The Schedule tab contains the list of all students, rotations, and dates which have been scheduled for the preceptor. These rotations are displayed after the experiential education office releases the match to preceptors. Note that the default date range is three month into the past through two years into the future. To view students outside of this date range, change the default dates and click the Filter button.

By clicking on the name of a student, preceptors may view more information about the student and the rotation in the Student Viewer.

Experiential Education

Preceptor, Fifth

| Announcements | Schedule | Sites and Rotations | Preceptor Availability | Preceptor Contact Information | Resources | License Management | Manage CV/Resume |

The date search is based on the begin date on the student's schedule

Students in this Rotation   Begin: 8/11/2011   End: 2/17/2012   Filter

The student list is based only on the primary preceptor.   Submit/Review a Change Request

Student	Match	Start Date	End Date	Rotation
Student, Andrew	P4 2011-2012	10/15/2011	11/14/2011	Internal Med: Pediatrics
Student, Eighth	P4 2011-2012	8/15/2011	9/14/2011	Community: General
Student, Eighth	P4 2011-2012	10/15/2011	11/14/2011	Internal Med: Pediatrics
Student, Eleventh	P4 2011-2012	9/15/2011	10/14/2011	Internal Med: Pediatrics
Student, Eleventh	P4 2011-2012	10/15/2011	11/14/2011	Internal Med: Pediatrics
Student, Jill	P4 2011-2012	8/15/2011	9/14/2011	Community: General
Student, Jill	P4 2011-2012	9/15/2011	10/14/2011	Internal Med: Pediatrics
Student, Jill	P4 2011-2012	1/15/2012	2/14/2012	Internal Med: Pediatrics
Student, Twelfth	P4 2011-2012	8/15/2011	9/14/2011	Internal Med: Pediatrics
Student1, Demo	P4 2011-2012	11/15/2011	12/14/2011	Internal Med: Pediatrics

Student Viewer

The Student Viewer allows the preceptor to view the student's primary address, phone number, email address, and photo (if loaded by the school or the student), and the student's entire schedule for the match in which the preceptor's rotation occurs. The name of the rotation is a hyperlink to the Rotation Description report, which opens as a PDF in a new

window.

Clicking the "View the Student's Portfolio" link opens the PharmPortfolio Viewer in a new tab in the user's browser. The student portfolio may contain the student's CV, previous pharmacy employment experience, biography statement, projects/presentations/research and other artifacts of learning. At the direction of the college of pharmacy, students are responsible for maintaining the portfolio contents. The student's portfolio will be available 30 days prior to the match through 30 days after the end of the match.

The Assessments for this Rotation grid displays all scheduled evaluations for the rotation block. Submitted evaluations (including single evaluations completed by the student, if this option is enabled by the experiential education office) can be viewed using the view link. The evaluations will open as a PDF document in a separate window.

Entering Availability for Future Matches

The Preceptor Availability tab lists all current and future matches in which the preceptor's rotation is contained. The availability for each match can either be viewed or edited, depending upon settings controlled by the experiential education office.

PLEASE NOTE that you will need to follow the directions below for each match in which you are accepting students (IPPE vs. APPE) by using the dropdown menu toward the top of your screen.

When it is time to indicate your availability, you will be notified by email. Log on to PharmAcademic as before and choose the "Preceptor Availability" tab in the Experiential Education tab set. Choose the match where you need to indicate availability per block. Please indicate your availability that you can dedicate to LECOM SCHOOL OF PHARMACY-ERIE CAMPUS only.

Preceptor Availability

Enter your availability for this match. You can set your availability at the individual block level by editing the grid below. Click the save button to save your entries.

Quick Links - Set all blocks to 0 | 1 | 2 students accepted

Site Name	Block	Rotation	How many students will you accept for this block?	
ABC Pharmacy #521	September Block (09/01/2012 - 09/30/2012)	Advanced Community	Not Specified	Edit
ABC Pharmacy #521	October Block (10/01/2012 - 10/31/2012)	Advanced Community	Not Specified	Edit
ABC Pharmacy #521	November Block (11/01/2012 - 11/30/2012)	Advanced Community	Not Specified	Edit
ABC Pharmacy #521	December Block (12/01/2012 - 12/30/2012)	Advanced Community	Not Specified	Edit
ABC Pharmacy #521	January Block (01/03/2013 - 01/31/2013)	Advanced Community	Not Specified	Edit
ABC Pharmacy #521	February Block (02/01/2013 - 02/28/2013)	Advanced Community	Not Specified	Edit
ABC Pharmacy #521	March Block (03/01/2013 - 03/31/2013)	Advanced Community	Not Specified	Edit
ABC Pharmacy #521	April Block (04/01/2013 - 04/30/2013)	Advanced Community	Not Specified	Edit
ABC Pharmacy #521	May Block (05/01/2013 - 05/31/2013)	Advanced Community	Not Specified	Edit

If you wish to specify the total number of blocks that you will accept students or the total number of students you will accept, please complete these fields. Otherwise, you may leave these blank.

Maximum Number of Students Accepted for this Match: ☐

Maximum Number of Blocks to Schedule for this Match: ☐

Special Availability Requests for the Experiential Training Office:

[text box]

[Save] [Close]

Per rotation per block availability: Enter your availability per rotation and per block, noting the number of students you are willing to accept for each block, for each rotation. Blocks are the actual rotation time periods defined for the match. You will want to put zeros for any blocks where you cannot accept students. Please put non-zero availability for as many blocks as possible in this section. You can limit the total number of blocks and/or students as described below.

To change the specified availability for any line in this table, click the "edit" link on the far right. The row you selected will become yellow. Type the number of students you will accept for that block and that rotation in the box, and click "update".

You may find the quick links just above the table to be helpful. They will set the availability for all rotations and all blocks to a specified number. You can, of course, edit each of the rows specifying your availability after clicking one of the quick links.

If you offer multiple rotations, you can choose whether to accept students in both rotations at the same time, or whether you only accept students in one rotation at a time. In order to accept students in both/all rotations, put non-zero availability for both/all rotations for each block. To ensure that only one rotation is scheduled for each block, put non-zero availability for only one rotation in each block.

Number of Students Accepted for this Match: Further limit the total number of students you accept for the entire match presented on this screen by entering a number here. *You may leave this field blank if you can accept the total number of students entered in the per block availability.*

Number of Blocks to Schedule for this Match: Further limit the total number of blocks for which you will accept students for the entire match presented on this screen by entering a number here. *You may leave this field blank if you can accept students in each of the blocks completed in the per block availability.*

Special Availability Requests for the Experiential Training Office: Enter any additional comments you have for the Experiential Education Office.

Click the "Save" button at the bottom of the screen. If needed, repeat the process for a second match by selecting the

second match after saving the current one.

Helpful hints/notes:

All of the availability restrictions will be respected by the automatically-generated schedule. However, the Experiential Education Office at the School/College of Pharmacy is able to override any preferences you specify.

If you do not want students in different rotations (e.g. Internal Medicine and Cardiology) at the same time, make your availability greater than zero for only one rotation for each block.

In order to provide maximum flexibility for scheduling students, please use the boxes at the bottom of the screen to limit the total number of blocks or the total number of students you will accept, instead of putting overly-restrictive requirements in the per rotation per block availability at the top. Use the per-block availability to show only those blocks you cannot accept students. For example, if you are willing to accept students for no more than 4 blocks throughout the year, but there are no blocks where it is impossible for you to accept students, put availability in all blocks on the top, but a maximum of four blocks at the bottom. PharmAcademic will schedule students such that ALL of the requirements are met. Thus, no more than the number of students per rotation per block listed at the top AND no more than the maximum number of students AND no more than the maximum number of blocks will be scheduled.

Completing a Student Evaluation: Preceptors

When an evaluation is due to be completed in PharmAcademic, you may receive an email notification similar to the one at the right. You can click on the included link to access the evaluation. You will be redirected to PharmAcademic and be prompted to log in before you can begin the evaluation. Your login is the email address to which the message was sent. If you don't know your password, click the "Forgot Password" link. Enter your e-mail address and PharmAcademic will reset your password and send you a new one.

Subject	PharmAcademic Student Assessment Notification: End of Rotation Assessment Form
From	McCreadie Group Support
To	PreceptorSmith@localpharmacy.biz
Sent	Thursday, September 02, 2010 11:51 AM

You have been assigned the following assessment. Please click on the link(s) below to complete the assessment. The assessment is also listed on your home screen when you log into PharmAcademic.

Assessment: End of Rotation Assessment Form
Type: Student
Due Date: 2/28/2011
Subject: Student Jones
http://www.pharmacademic.com/pharmacademic/Assessments/Assessment.aspx?id65fcb6f-44e8-

If you don't know your password, please go to http://www.pharmacademic.com/pharmacademic/login.aspx and click the "Forgot Password" link. Enter the e-mail address that this message was sent to and PharmAcademic will reset your password and send you a new one.

Alternatively, any time you log in to PharmAcademic, your Home page lists any outstanding assessments in the "Current" tab of the Assessments tab set. The list will show the name of the assessment, the name of the person or the course/rotation to be evaluated, and the date on which the assessment is due. Assessments will drop off the list when complete or when the expiration date has passed.

Once the assessment is open, information at the top of each page lists the name of the evaluator, the name of the person (or site/rotation) being evaluated, the name of the evaluation and the due date.

Evaluations may have several sections, so upon completing a page, you may need to select the Next button to go on to the next part of the assessment. When you are done, you may submit the assessment by clicking the "Submit" button, or save it to review later by selecting the "Home" button.

Throughout the assessment, there may be required questions which are marked with an asterisk. If you do not answer these required questions, you will be prompted to go back and complete them before you can submit the evaluation.

You may receive email reminders if you do not complete an evaluation by the due date. These are set up by the college/school of pharmacy, and can be set to repeat if the evaluation remains unsubmitted.

Viewing Completed Evaluations

From the PharmAcademic home page, the "All" tab of the Assessments tab set displays all evaluations which have been assigned to the preceptor. The Due Date filter allows preceptors to search past, current, and future evaluations, and the columns can be sorted by clicking on the column title. Current evaluations can be completed by clicking the name of the assessment. Submitted evaluations may be viewed by clicking the submit date, and they will open in a separate PDF window. All evaluations will display the date they become available and the expiration date. Evaluations with no link (neither the assessment name nor the date is clickable) have not yet been delivered or have expired. Preceptors must contact the college of pharmacy regarding expired evaluations. Selecting the View link opens the completed evaluation as a PDF document in a separate window. You will need a PDF reader to view these evaluations.

Additionally, submitted assessments for a specific student may be viewed from the Student Viewer, available from the Schedule tab of the Experiential Education tab set.

PharmAcademic Instructions for Students

Completing an Assessment: Students

When an evaluation is due to be completed in PharmAcademic, you may receive an email notification similar to the one at the right.

You can click on the included link to access the evaluation. You will be redirected to PharmAcademic and be prompted to log in before you can begin the evaluation.

Your login is the email address to which the message was sent. If you don't know your password, click the "Forgot Password" link. Enter your e-mail address and PharmAcademic will reset your password and send you a new one.

Alternately, any time you log in to PharmAcademic, your Home page lists any outstanding assessments. The list will show the name of the assessment, the name of the person or the course/rotation to be evaluated, and the date on which the assessment is due. Assessments will drop off the list when complete or when the expiration date is past.

Select an assessment to begin.

Subject	**PharmAcademic Student Assessment Notification: End of Rotation Assessment Form**
From	McCreadie Group Support
To	John.doe@pharmacyschool.edu
Sent	Thursday, September 02, 2010 11:51 AM

You have been assigned the following assessment. Please click on the link(s) below to complete the assessment. The assessment is also listed on your home screen when you log into PharmAcademic.

Assessment: End of Rotation Assessment Form
Type: Student
Due Date: 2/28/2011
Subject: John Doe
http://www.pharmacademic.com/pharmacademic/Assessments/Assessment.aspx?id=be

If you don't know your password, please go to http://www.pharmacademic.com/pharmacademic/login.aspx and click the "Forgot Password" link. Enter the e-mail address that this message was sent to and PharmAcademic will reset your password and send you a new one.

Once the assessment is open, information at the top of each page lists the name of the evaluator, the name of the person (or site/rotation) being evaluated, the name of the evaluation and the due date.

Evaluations may have several sections, so upon completing a page, you may need to select the Next button to go on to the next part of the assessment. When you are done, you may submit the assessment by clicking the "Submit" button, or save it to review later by selecting the "Home" button.

Throughout the assessment, there may be required questions which are marked with an asterisk. If you do not answer these required questions, you will be prompted to go back and complete them before you can submit the evaluation.

You may receive email reminders if you do not complete an evaluation by the due date. These are set up by the sender, and can be set to repeat if the evaluation remains unsubmitted.

Once completed, you may view evaluations by viewing your schedule in PharmAcademic. From the Experiential Training menu, select the Student Ranking/Schedule screen, and select Details next to a rotation. Evaluations will be listed, and those that are complete have a View link. Selecting the View link opens the completed evaluation as a PDF document in a separate window. You will need a PDF reader to view these evaluations. Any incomplete evaluations which have not expired will have an active "Go" link which will redirect you to the evaluation.

Completed evaluations are also available in PharmPortfolio. From the education record, select the "More…" link next to the rotation, then select the Assessments tab. Completed evaluations will be displayed with a View link which opens the evaluation as a PDF document in a separate window as above.

Viewing Completed Evaluations: Students

1. Log in to PharmAcademic
2. Select the "All" tab from the Assessments tab set on the home screen.

The All tab displays all evaluations which have been assigned to the student. The Due Date filter allows students to search past, current, and future evaluations, and the columns can be sorted by clicking on the column title. Current evaluations can be completed by clicking the name of the assessment. Submitted evaluations may be viewed by clicking the submit date, and they will open in a separate PDF window. All evaluations will display the date they become available and the expiration date. Evaluations with no link (neither the assessment name nor the date is clickable) have not yet been delivered or have expired. Students must contact the college of pharmacy regarding expired evaluations.

Completed evaluations are also available in PharmPortfolio. From the education record, select the "More…" link next to the rotation, then select the Assessments tab. Completed evaluations will be displayed with a View link which opens the evaluation as a PDF document in a separate window as above.

Site-Specific Requirements

(Background Checks, Drug Screens, MVRs,

Child Abuse Clearance, Fingerprinting)

Fulfilling Site-Specific Requirements

Students must check with rotation sites at least 4-6 weeks in advance to discover what is required by the site. Exception: Many GOVERNMENT sites (VA, IHS) must be contacted at least 6-8 weeks in advance of the rotation. LECOM School of Pharmacy has contracted with Certiphi and FieldPrint to provide students with a convenient and economical means of obtaining background checks, drug screens or finger printing when possible (exception: PA Fingerprinting). Directions for use are on the following pages. A link is provided in this section and is also available on the main page of the LECOM portal.

CERTIPHI INSTRUCTIONS

LECOM - Bradenton, FL Campus

A summary of the background check and drug screen instructions is included below. Detailed instructions follow this summary.

Instructions	Packages	
1. Click the link below or paste it into your browser: http://www.applicationstation.com 2. Enter the code for the type of check you are ordering in the Application Station Code field: **Background Recheck: LECOM-RECHECKFL** **Drug Screen: LECOMSCREEN** 3. Click the "SIGN UP NOW" button to create an account. 4. Follow the instructions on the Application Station web site. If you have questions about the screening requirement, please contact Lake Erie College of Osteopathic Medicine School of Pharmacy. If you have technical issues visiting the Application Station site, please contact Application Station Support at: 888-291-1369 x2006.	Background Recheck: ▪ SSN Validation and Verification ▪ Florida Statewide Criminal Search (FDLE) ▪ County Criminal Search – for all counties outside of Florida ▪ Federal Criminal Records Search – for all U.S. Districts of residence for the past three years ▪ National Sexual Offender Registry Search ▪ OIG/GSA EPLS ▪ SanctionsBase – includes state excluded parties list and OFAC ▪ Employment Verification – 2 employers ▪ NOTE: Does **NOT** include driving record	Price: $53.00

	Package	
Drug Screen: 10 panel	**Amphetamines** **Barbiturates** **Benzodiazepines** **Cannabinoids (Marijuana)** **Cocaine** **MDMA (Ecstasy)** **Methadone** **Opiates (4): Codeine, Morphine, Oxycodone, Hydrocodone** **Phencyclidine** **Propoxyphene**	Price: $29.50

Report Delivery Manager

- **NOTE: LECOM requires that you directly provide all requested information to the site AT LEAST 2 weeks prior to the start of rotation unless otherwise directed. Some of these checks can take many weeks to complete; therefore it is necessary to contact rotation sites at least 4-6 weeks before the start of the rotation.**

Report Delivery Manager (RDM) allows students to distribute an electronic copy of your background check and drug screen results to a third party. RDM can be found in Application Station: Student Edition. Please see the document titled *Student Report Delivery Manager* for step-by-step instructions. Reports are available to students for 12 months. If reports are needed beyond 12 months, students must print a copy to be distributed as needed.

If you encounter issues with the Application Station: Student Edition or have questions regarding the site, please contact Certiphi's Help Desk at 888-260-1370, ext. 2006 or itsupport@certiphi.com. If you are still running into problems acquiring your records, you may contact the LECOM Office of Security at 941-782-5908 during daytime business hours for assistance in acquiring your reports.

What to do if you need an *updated* Background Investigation?

- This applies if you have ordered a background investigation from Certiphi previously through PharmCAS.
- **The cost for an updated background check is $53.00**

Locate the email from **studentedition@certiphi.com** titled "Application Station – Student Edition". The email will include step-by-step instructions for accessing Application Station: Student Edition to authorize and pay for a background investigation. If you are unable to locate the email, follow these instructions:

1. Click the link below or paste it into your browser: http://www.applicationstation.com
2. Enter the Code: **LECOM-RECHECKFL in** the Application Station Code field.
3. Click the "SIGN UP NOW" button to create an account.
4. Follow the instructions on the Application Station web site.

Note – please store the username and password created for Application Station in a secure location. This information is needed to enter Application Station in the future which includes obtaining a copy of your background investigation.

If you encounter issues with the Application Station: Student Edition or have questions regarding the site, please contact Certiphi's Help Desk at 888-260-1370, ext. 2006 or itsupport@certiphi.com.

Background Investigations are completed, on average, within 3 to 5 business days. Once completed, you will receive an email from Certiphi Screening. Follow the link in the email to access Application Station: Student Edition to view the report. Application Station includes instructions for disputing information included in the background check should you feel anything is incorrect.

The search components included in an updated background investigation are listed below. All records are searched by primary name and all AKAs, a student's primary address, and all addresses lived within the past three years.

- SSN Validation and Verification
- Florida Statewide Criminal Search (FDLE)
- County Criminal Search – for all counties outside of Florida
- Federal Criminal Records Search – for all U.S. Districts of residence for the past three years
- National Sexual Offender Registry Search
- OIG/GSA EPLS
- SanctionsBase – includes state excluded parties list and OFAC
- Employment Verification – 2 employers
- NOTE: Does **NOT** include driving record

What to do if you need a 10-Panel Drug Screen?

- **The cost of a drug screen is $29.50 for an in-network facility**. Additional fees may apply if you need to use an out-of-network facility.

Locate the email from studentedition@certiphi.com title ""Application Station – Student Edition". The email will include step-by-step instructions (also listed immediately below) for accessing Application Station Student: Edition to pay for the drug screen as well as locate a collection site. *If none of the collection sites listed are convenient (within 30 minute drive)*, please contact Certiphi's Occupational Health Screening Department for assistance with locating an alternate location; phone number 800-803-7859.

Lake Erie College of Osteopathic Medicine School of Pharmacy has asked that you use the Application Station - Student Edition to complete necessary additional screening services through Certiphi Screening, Inc.

To do so, please follow the instructions below:

1. Click the link below or paste it into your browser: http://www.applicationstation.com
2. Enter the Code: **LECOMSCREEN** in the Application Station Code field.
3. Click the "SIGN UP NOW" button to create an account.
4. Follow the instructions on the Application Station web site.

Note – please store the username and password created for Application Station in a secure location. This information is needed to obtain a copy of your drug screen.

After you have paid for the drug screen, please follow these instructions:

Before the Collection

1. Please log on to www.applicationstation.com before going for your drug screen collection.

2. Provide the LabCorp technician account number 258466 at the time of collection. The LabCorp technician will create an electronic COC (chain of custody) for your drug screen collection.

3. You are required to have valid photo identification with you. (Examples: driver's license or other photo identification card)

After the Collection

1. Obtain the donor copy of the chain of custody form prior to leaving the collection facility.

2. Within one hour of completion of all testing, call Certiphi Screening (a division of Vertical Screen) at 800-803-7859. Have your copy of the chain of custody form available.

3. If drug screen is performed before logging on to www.applicationstation.com it can cause a delay with receiving your drug screen results.

If the initial drug screen is reported as positive/non-negative, you will receive a call from Certiphi's Medical Review Officer (MRO). The MRO will obtain medical proof as to why you test positive. If you are on any form of prescription medicine, it is wise to obtain proof from your physician to be provided to the MRO when contacted. This will speed up the process of reporting drug test results.

You will receive an email from Certiphi Screening once drug test results are available. Follow the link in the email to access Application Station: Student Edition to view the report.

All drug screens conducted for LECOM are 10-panel and tests for:

- **Amphetamines**
- **Barbiturates**
- **Benzodiazepines**
- **Cannabinoids (Marijuana)**
- **Cocaine**

- **MDMA (Ecstasy)**
- **Methadone**
- **Opiates (4): Codeine, Morphine, Oxycodone, Hydrocodone**
- **Phencyclidine**
- **Propoxyphene**

If you encounter issues with the Application Station: Student Edition or have questions regarding the site, please contact Certiphi's Help Desk at 888-260-1370, extension 2006 or itsupport@certiphi.com.

What to do if you need a Motor Vehicle Report (driving history)
- **The cost of a motor vehicle report is $3.00 plus applicable state processing fees ($13.00 total for FL).**

Locate the email from studentedition@certiphi.com titled "Application Station – Student Edition". The email will include step-by-step instructions for accessing Application Station: Student Edition to authorize and pay for a background investigation.

If you are unable to locate the email, instructions are as follows.

Lake Erie College of Osteopathic Medicine School of Pharmacy has asked that you use the Application Station - Student Edition to complete necessary screening services through Certiphi Screening, Inc.

To do so, please follow the instructions below:

1. Click the link below or paste it into your browser: http://www.applicationstation.com
2. Enter the Code: **LECOMFL-MVR** in the Application Station Code field.
3. Click the "SIGN UP NOW" button to create an account.
4. Follow the instructions on the Application Station web site.

FIELDPRINT INSTRUCTIONS

LECOM - Bradenton, FL Campus

What to do if you need a fingerprint for a Florida rotation site (an AHCA fingerprint)?
- **The cost for an AHCA Fingerprint - $85.25.**

1) Visit www.FieldprintFlorida.com.

2) Click the "Schedule an Appointment" button, which links to our scheduling website.

3) Follow the wizard instructions to log into the site. Provide your FieldPrint Code of **FPLakeErieOsteo1.** At that point, you are ready to schedule your fingerprint appointment.

4) At the end of the process, print the Confirmation Page. Take the Confirmation Page with you to your fingerprint appointment, along with two forms of identification. At least one form of ID must be a valid, government issued Photo ID, such as a driver's license.

Once fingerprints have been collected, results will be electronically submitted to AHCA. AHCA will not return fingerprint report results to the student or school. However, the clinical site will access results directly from AHCA. The site will need your name, SSN, and date of birth.

What to do if you need fingerprinting for other states:

If you are located in PA and need fingerprinting:

1 Contact at www.pa.cogentid.com
2. Select **Department of Public Welfare (DPW)**
3 Select **Register Online** from the Registration Column
4. Fill in YELLOW areas
   a. Reason Fingerprinted: choose "**Employment with a significant likelihood of regular contact with children"**
   b. **SSN** should be filled in to assure a better match
   c. Driver's License No should also be included
5. Select **Next**
6. Verify your information
   a. If correct select **Next**
   b. If not correct select **Go Back** and repeat steps 4 to 6
7. Fill in Payment information
8. Select **Pay**
9. Go to location to have fingerprints taken. Locations that can take fingerprints are available on the Cogent web site.

If you are NOT located in FL or PA and need fingerprinting:

Request specific instructions from your preceptor or appropriate person at the rotation site. Contact the Administrative Assistant for Experiential Education on campus (941-782-5676) and provide information about the request and the process.

OTHER SCREENING INSTRUCTIONS

What to do if you need a Pennsylvania Child Abuse Clearance (Act 33)- Electronic Submission ($10)

- Go to Child Abuse History Clearance Online at https://www.compass.state.pa.us/CWIS.
- First time users should Create a New Account. Establish a Keystone ID. This will give you immediate access to your results. If your results cannot be processed immediately, the site will provide the status of your results.
- Once submitted if within 7 days you do not see the words under your e-Clearance ID Purpose "Your application has been processed -To view the results, click here," please call the Childline Verification Unit at 1.717.783.6211 and ask that a copy of your results be mailed immediately.

Note – please store the username and password created for Application Station in a secure location. This information is needed to enter Application Station in the future which includes obtaining a copy of your background investigation.

If you encounter issues with the Application Station: Student Edition or have questions regarding the site, please contact Certiphi's Help Desk at 888-260-1370, extension 2006 or itsupport@certiphi.com.

Motor Vehicle Reports are completed, on average, within 1 to 2 business days. Once completed, you will receive an email from Certiphi Screening. Follow the link in the email to access Application Station: Student Edition to view the report. Application Station includes instructions for disputing information included in the background check should you feel anything is incorrect.

Resources and Forms

Important Contact and Resource Information

LECOM School of Pharmacy   941-756-0690
5000 Lakewood Ranch Blvd
Bradenton, FL 34211

Office of Experiential Education   rxrotations-fl@lecom.edu

Julie Wilkinson, PharmD, MS, BCPS   **941-782-5678**
Associate Dean for Traditional Pathway   jwilkinson@lecom.edu
Professor

Laura Stevenson, PharmD, MS   **941-782-5677**
Director of Experiential Education   lstevenson@lecom.edu
Associate Professor

Deborah Atkinson, CPhT   **941-782-5676**
Coordinator of Experiential Education   datkinson@lecom.edu

Resources:

    LECOM Website: http://lecom.edu/

    LECOM Learning Portal: https://portal.lecom.edu/ics/

    LECOM Web Page for Preceptors: http://lecom.edu/pharm_mentor.php
    ● Rotation Manuals

    PharmAcademic: https://www.pharmacademic.com

    SUCCESS: https://www.cop.ufl.edu/SUCCESS/

    The Pharmacist's Letter Preceptor Training and Resource Network:
        http://pharmacistsletter.therapeuticresearch.com/ptrn/default.aspx?cs=&s=PL

    Certiphi (Background Checks / Drug Screens):   http://www.applicationstation.com

    FieldPrint (Fingerprinting for FL rotation sites):   http://www.fieldprintflorida.com/

    Florida Board of Pharmacy: 850 – 245-4292
                           http://www.doh.state.fl.us/mqa/pharmacy

    National Association of Boards of Pharmacy: http://www.napb.net/

LECOM Bradenton School of Pharmacy Experiential Checklist
(Maintain this form in your rotation binder)

Note: Rotations may not be started until all requirements are complete.

Required Documentation	Deadline
☐ Records Release Form Completed	First Week of School
☐ Florida Pharmacy Intern License (other states if necessary)	End of P1 Fall Semester (deadline will be posted)
☐ Medical	
☐ 2 step PPD skin test, then annual PPD skin test (chest x-ray if positive to skin test)	Prior to orientation and in May of subsequent years **(Exception: P2 students requiring chest x-ray do not need to complete)**
☐ Influenza Vaccine	Fall of P1, P3 and P4 years (deadline will be posted)
☐ Physical Exam	Prior to orientation and in subsequent years (as directed)
☐ Other – Site Specific	Site Specific
☐ Immunizations completed and furnished to LECOM	Prior to Orientation
☐ Tdap	Matriculation Deadline
☐ Proof of adequate titers for:	Matriculation Deadline

Varicella	Rubella
Mumps	Rubeola
Hepatitis B	

☐ Background Check to LECOM	Prior to orientation and subsequent years as directed
☐ LECOM Certificate of Self-Insurance	Site to request from Experiential Ed if needed
☐ CV sent to your rotation site (Includes your contact information, phone, email address, work history, etc.)	Send to site 4-6 weeks prior to the start of the rotation
☐ Review manual (IPPE/APPE) & longitudinal checklist (APPE rotations only) with preceptor	First day of each rotation
☐ Rotation Assessments returned to LECOM	Students: **PRIOR** to receiving mid-point and final evaluations Preceptors: Midpoint and end of rotation
☐ Report personal intern hours to State Board of Pharmacy if rotation in state other than Florida	As required by the state you wish to practice and/or have your intern license

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NOTE: PLEASE KEEP A COPY OF ALL MEDICAL AND LEGAL DOCUMENTS IN YOUR ROTATION BINDER.

Student – Site Contact Form

LECOM School of Pharmacy

Student Name_____   Class of_____

Once rotations have been assigned it is the responsibility of the student to contact **PRECEPTORS** / rotation sites **APPROXIMATELY** *6-8 weeks* prior to start of rotation. Ask about specific requirements such as HIPAA training, immunizations (Human Resources), OSHA, CPR, liability insurance proof etc.

Date of Contact	Type of Rotation	Rotation Block	Site Name	Contact Person	Special Requirements

This form to be maintained in rotation binder and made available to LECOM faculty upon request.

LECOM SCHOOL OF PHARMACY – BRADENTON CAMPUS

5000 Lakewood Ranch Boulevard • Bradenton, FL 34211

941.756.0690   fax 941.782.5733

Rxrotations-fl@lecom.edu

Experiential Education Absence Request/Report Form

Except for an unplanned absence, this form MUST be submitted ten (10) business days prior to your request. Students who miss more than three (3) days per rotation for any reason may fail the rotation. Any absence NOT documented on this form will result in **deduction** of your rotation grade – **10 points for planned and 5 points for unplanned absences.**

Name: _____   Date: _____

Rotation Type: ☐ IPPE   ☐ APPE   Dates of Rotation: _____

Name of Site: _____

Address: _____

Preceptor Name: _____   Phone: _____

Email: _____

Requested Dates: _____   Number of Days: _____

Total number of days absent for this rotation (to date): _____

Reason for Request (be specific): _____

_____

PRECEPTOR USE ONLY

Please indicate how the time off for this request will be made up

☐   Time **DOES NOT** need to be made up. (Note: Up to One (1) day per rotation, per preceptor discretion)

☐   Time **DOES** need to be made up. (Make up Dates and Times below)

Date	Start Time	End Time	Total Hours
Date	Start Time	End Time	Total Hours

- -

☐ Approved

_____   _____   ☐ Not Approved
Preceptor Signature   Date

☐ Approved (Excused)

_____   _____   ☐ Not Approved (Unexcused)
Laura L. Stevenson, PharmD, MS   Date

BOTH SIGNATURES ARE REQUIRED TO BE COMPLETE

Date of Student Notification (via email) _____

IPPE Portfolio – Grading Criteria

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Should occur within 2 weeks of the student's return to school in the fall following IPPE rotations.
<mark>*The Portfolio Score reflects 10% of the student's grade for EACH of the IPPE rotations.*</mark>

Student:_____

Advisor/Evaluator Name:_____

Date of Evaluation: _____

Scale (Points)	1.5	2	2.5	
Description	Needs Work	Average	Excellent	
Criteria	**Scale/Comments**			**Total Points**
Organization Neat, easy to locate information, professional appearance	1.5 2 2.5 Comments:			
Completeness (refer to checklist below) Personal information (CV, etc.), assignments/projects; evaluation forms, etc.	1.5 2 2.5 Comments:			
Apparent Effort Reflects thoughtful input of creativity and effort	1.5 2 2.5 Comments:			
Overall Quality Reflects pride in accomplishments, provides positive "snapshot" of student's abilities	1.5 2 2.5 Comments:			
CONTAINS PATIENT IDENTIFIERS (HIPAA) *(if YES, student will receive 0 points for portfolio)*	☐ **Yes** ☐ **No**			
Grand Total (if YES to HIPAA question above, this will be 0)				

Evaluator Signature: _____

Checklist:

Item	Mark "x" if present in Portfolio
General	
3 ring binder	
Curriculum vitae (Bradenton Campus)	
Intern License(s)	
Immunization records	
Background check (optional)	
HIPAA/Bloodborne Path/(TB optional) training certificates	
Printed rotation manual (optional)	
Divider tabs between general items and at least Institutional and Community IPPE	
Institutional IPPE	
Rotation Site Description Assignment	
Midpoint Reflection	
Drug Information Question Assignment	
Medication History Assignment	
Final Reflection	
Midpoint Assessment by Preceptor	
Midpoint Self-Assessment	
Final Assessment by Preceptor	
Final Self-Assessment	
May contain additional projects/assignments	
Community IPPE	
Rotation Site Description Assignment	
Midpoint Reflection	
OTC Formulary/Product Reference Assignment	
SOAP Note	
Final Reflection	
Midpoint Assessment by Preceptor	
Midpoint Self-Assessment	
Final Assessment by Preceptor	
Final Self-Assessment	
May contain additional projects/assignments	

Additional Feedback: