PHRM 5201 COURSE SYLLABUS
Introductory Pharmacy Practice Experience (IPPE) I

A guide for P1 students and Preceptors

Spring 2012
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PHRM 5201 COURSE SYLLABUS
Introductory Pharmacy Practice Experience (IPPE) I
Course Syllabus
Spring 2012

Course Instructors

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Questions about course material should be submitted to the course instructor responsible for teaching the related material. If the question is not resolved or the student has questions about course administration the student should contact the course coordinator in person or via phone or e-mail. If the question/issue is not resolved, the student should contact the Department Chair of the course coordinator finally, the Associate Dean for Academic Affairs.

Course Description
This mandatory course is the second introductory pharmacy practice experience (IPPE) having a major focus on institutional pharmacy.

**SEE PEP MANUAL FOR DISCRIPTIONS OF ALL IPPE & APPE COURSES**

Course Learning Outcomes (ACPE Appendix B Outcomes)

**Drug Information**

**Economics / Pharmacoeconomics**

**Ethics**

**Extemporaneous Compounding / Parenteral / Enteral**

**Medication Dispensing & Distribution Systems**

**Pharmacist-Provided Care for Special Populations**

**Pharmacy Law & Regulatory Affairs**

**Pharmacy Practice & Pharmacist-Provided Care**

**Practice Management**

**Professional Communication**
PC Twelve Competencies met by this Course
Communication
Dispensing of Pharmaceuticals
Providing Pharmaceutical Care to Individual Patients
Providing Pharmaceutical Care to Patient Populations
Inter-professional Interaction and Teamwork
Ethical and Legal Judgment
Personal and Professional Growth
Promotion of Health and Public Welfare

Methods of Assessment
SEE PEP MANUAL FORMS SECTION

Class Meeting Times
SEE PEP MANUAL FOR ALL IPPE & APPE SCHEDULES

Textbook
Required: NONE

Supplies
Required: PCSP LAB JACKET, PCSP NAME BADGE

Attendance and Participation
It is mandatory that students attend all scheduled sessions in order to successfully complete this course. Both Preceptor(s) and OEE realize, however, that certain extenuating circumstances may occur which would prevent attendance. This policy addresses those circumstances. Please read through this material carefully and direct any questions to the course coordinator. It is the student’s responsibility to comply with these policies.

Unexcused absence: Any unexcused absence will result in a non-passing grade for the course.

Excused Absence: Excused absences, anticipated and unanticipated, are based upon extenuating circumstances beyond the control of the student. Four areas fall into the category of extenuating circumstance: 1) medical necessity; 2) death of a family member; 3) pre-approved professional activities; or 4) extenuating circumstances unforeseen by this policy (requires the consensus of the instructors).

1) **Medical Necessity** refers to unpredictable or serious illness of the student and his/her immediate family. Documentation such as a medical statement from the patient’s physician may be required at the request of either Preceptor or OEE. Routine office visits within the control of the student are not considered extenuating and should be scheduled around the student’s experiential activities.

2) **Death of a family member** includes death of spouse, children, or significant others within the immediate family as well as parents, grandparents, and siblings of the student and/or spouse.

3) **Pre-approved professional activities.** It is the responsibility of the student to inform the OEE of his/her planned absence **at least two weeks in advance,** preferably at the start of the course. Documentation of attendance at the professional activity is required.

4) **NONE OF THE ABOVE:** contact the OEE if your circumstance does not fall into one of the above categories. The decision of the OEE is final.
Procedure for Notification: It is the responsibility of the student to notify both the OEE and the Preceptor of his/her absence. **ANY AND ALL ABSENCES MUST BE MADE UP AT DISCRETION OF THE PRECEPTOR AND ACCOMPANYING APPROVAL OF THE OEE.**

**Anticipated absences:** The student must notify the Preceptor(s) of anticipated absences as early as possible **prior to absence.** If circumstances prevent the student from notifying the Preceptor(s), arrange for another individual to do it for you. Messages must include the student’s name and contact information.

**Unanticipated absences:** Contact the Preceptor(s) **as soon as reasonably possible** to complete the procedure for notification.

Rotation Etiquette

**SEE PEP MANUAL FOR FULL POLICY DISCLOSURES AND SPECIFICS**

Professionalism is reflected in one’s behavior at the experiential site. Students are expected to demonstrate the following characteristics of professional behavior:

- Reading assignments (including all course-related syllabi) should be completed by the end of Day 1.
- Students are expected to arrive at the assigned site at the scheduled time and remain until dismissed.
- Avoid any and all behavior that does not allow others to hear and learn.
- All cell phones and other electronic devices / noise-making devices should be muted, turned to vibrate, or turned OFF during rotations.
- Student participation during all experiences is expected and encouraged and instructors will gladly address student questions during class.

Special Accommodations

**SEE PEP MANUAL FOR FULL POLICY DISCLOSURES AND SPECIFICS**

Any student in this course who has a disability that may prevent him/her from fully demonstrating his/her abilities should contact the OEE and Preceptor personally as soon as possible to discuss accommodations necessary to ensure full participation and facilitate his/her educational opportunities.

Honor Code

The School of Pharmacy supports and enforces the Presbyterian College Honor System. Pharmacy students are expected to read, understand, and abide by the tenets of the PC Blue Book. Quizzes, tests, examinations, projects, and papers to be graded should be accompanied by the pledge “**On my honor, I pledge that I have neither given nor received any unacknowledged aid on this assignment**” followed by the student’s signature. Unacknowledged aid includes aid that is not allowed by the instructor. On some rotations, students will be expected to work in small groups on certain assignments or projects. When authorized by the Preceptor, these activities are **not** Honor Code violations. However, the interpretation of data and the reporting of results and conclusions are, unless stated otherwise by the Preceptor, individual responsibilities.

Assignments and Grading Policy

**Grading Scale:**

- 60-100% Pass (S)
- <60% Fail (U)

(Grading scale approved by faculty)

**NOTE:**

The Office of Experiential Education reserves the right to make adjustments to the grading scale as necessary in recording the final grade. Any adjustment(s) will be provided in writing to the students prior to implementation.
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**SPRING BREAK MARCH 5 – 9........NO IPPES THIS WEEK**

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This topical outline will be followed as closely as possible throughout the semester for all P2 IPPE students who attend this rotation site; however, the Preceptor(s) reserve the right to adjust the course schedule (within the time confines of the academic calendar and with notification of Office of Experiential Education) as he/she deems necessary.
PHRM 6501 PEP MANUAL EXCERPTS
Introductory Pharmacy Practice Experiences (IPPE) 1

PEP Manual Excerpts & Syllabus for Preceptors and Students

“The mission of the School of Pharmacy at Presbyterian College is to improve the health of South Carolinians and society in general by developing students with an unwavering ethical foundation who will positively impact the delivery of quality, equitable pharmacy care; who will dedicate their lives to community service; and who will provide enlightened leadership in addressing the health care needs of a diverse patient population.”

For the complete online version of Professional Experience Program (PEP) manual please see

http://pharmacy.presby.edu/experiential-education/preceptors/

Revised 20120125

Office of Experiential Education
307 North Broad Street
Clinton, SC 29325
Welcome to PCSP Precepting!

Thank you for your commitment to be a Presbyterian College School of Pharmacy (PCSP) Preceptor. We count on professionals like you to help prepare the next generation of pharmacists. Once PCSP student pharmacists successfully complete our program, they will have completed over 360 IPPE (Introductory Pharmacy Practice Experience) hours and over 1500 APPE (Advanced Pharmacy Practice Experience) hours – an accomplishment not possible without your participation.

The Office of Experiential Education will provide you the tools and resources you need to effectively mentor our students. Please take a moment to visit our Preceptor web page: http://pharmacy.presby.edu/experiential-education/preceptors/

Here you will find – in addition to the aforementioned, links to the following: E*Value®, our web-based rotation management system; free access to Pharmacist Letter® Preceptor training modules; Preceptor Availability form; our Professional Experience Program (PEP) manual; and E*Value® video tutorials for validating student hours and completing student evaluations. Our Preceptor affiliates also will have access to the Presbyterian College electronic journal collection.

As active Preceptors receive email notification when student evaluations or Time Tracking submissions are due, it is essential that the email address we have on file for you is kept current. Your E*Value® username and password will be included in your initial email message. Should you lose your password, you can easily request it from the E*Value® home/log-in page.

Please feel free to contact us anytime with questions or suggestions. Whether by your attendance at one of our Preceptor Conferences, site visit, email or phone call - we will make every effort to make your role as a Preceptor a rewarding experience for all involved.

Kind Regards,

Lewis McKelvey           J. Christopher Rico
Office of Experiential Education Contact Information

The Office of Experiential Education coordinates the Introductory Pharmacy Practice Experience (IPPE) and Advance Pharmacy Practice (APPE) programs for the Presbyterian College School of Pharmacy. The Office is the point of contact for IPPE/APPE Students and Preceptors.

Presbyterian College School of Pharmacy
Office of Experiential Education
307 North Broad Street
Clinton, SC 29325

Office Hours: 8:30 A.M. – 5:00 P.M.
Office Hours for Dr. McKelvey by Appointment

Assistant Dean for Experiential Education
Lewis McKelvey, Jr., Pharm.D. RPh

Campus Office: PCSP 326
Telephone: (864) 938-3866
Fax: (864) 938-3903
Email: lmckelvey@presby.edu

Administrative Assistant
Christopher Rico

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Fax: (864) 938-3903
Email: jrico@presby.edu

The PCSP PharmD program prepares students to...

- Develop and use patient-specific pharmacy care plans.
- Effectively manage a patient-centered pharmacy practice.
- Develop disease management programs.
- Manage the system of medication use.
- Promote the availability of health promotion and disease prevention initiatives.
- Communicate with patients, caregivers, and other members of the inter-professional health care team.
- Search the health sciences literature.
- Demonstrate expertise in the area of informatics (resources, devices, and methods required to optimize the acquisition, storage, retrieval, and use of information in pharmacy and healthcare.
- Apply state and federal laws and regulations to the practice of pharmacy.
- Maintain professional competence.
## 2011 – 2012 EXPERIENTIAL CALENDARS

### FALL 2011 SEMESTER

| AUGUST 2011 | 15 - 19 | Monday thru Friday | P2 Summer community IPPE **40-hour week**  
(8hrs/day for 5 days/week for total of 1 week)  
**NOTE:** Make-up week for Summer Week IPPE is the week after Fall exams. |
|-------------|---------|--------------------|--------------------------------------------------|
| SEPTEMBER 2011 | 6, 7, 9 | Tues, Wed & Fri | P2 Fall institutional IPPE **Semester** Begins  
(4hrs/day, per student, per week, for 5 weeks x2 for total of 10 weeks) |
| OCTOBER 2011 | 4, 5, 7 | Tues, Wed & Fri | Last week of 1st 5-week IPPE segment / E*Value evaluations due  
10-11 | Monday & Tuesday | Fall Break **NO IPPEs this week** |
| 18, 19, 21 | Tues, Wed & Fri | First week of 2nd 5-week IPPE segment |
| NOVEMBER 2011 | 15, 16, 18 | Tues, Wed & Fri | Last week of 2nd 5-week IPPE segment / E*Value evaluations due |

### SPRING 2012 SEMESTER

| JANUARY 2012 | 2 - 6 | Monday thru Friday | P2 Winter community IPPE **40-hour week**  
(8hrs/day for 5 days/week for total of 1 week)  
**NOTE:** Make up week for Winter Week IPPE is the week after Spring exams. |
|-------------|-------|--------------------|--------------------------------------------------|
| FEBRUARY 2012 | 24, 26, 27 | Tues, Thurs & Fri | P2 Spring institutional IPPE **Semester** begins  
(4hrs/day, per student, per week, for 5 weeks x2 for total of 10 weeks) |
| MARCH 2012 | 21, 23, 24 | Tues, Thurs & Fri | Last week of 1st 5-week IPPE segment  
28, MARCH 1, 2 | Tues, Thurs & Fri | First week of 2nd 5-week IPPE segment |
| MARCH 2012 | 5 – 9 | Spring Break **(NO IPPEs this week)** |
| APRIL 2012 | 3, 5, 6* | Tues, Thurs & Fri | P2 Spring Semester IPPEs End / E*Value evaluations due Friday  
*April 6th is Good Friday; make-up day is April 13th. |

**NOTE:** Dates for 3rd Year P3 Experiences TBA
Presbyterian College School of Pharmacy

Curriculum
Course Descriptions

2011-2012

Revised 8-3-2011        PCSP Course Descriptions 2011-12
# Presbyterian College School of Pharmacy
## Doctor of Pharmacy Curriculum 2011-2012
### First Professional Year

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**Total Hours:** 13

### Total Semester Credit Hours: 146
First Professional Year

PHRM 5100, Pharmacy Orientation (1)
The course is a one week orientation workshop for P1 students prior to the start of fall classes. Provides students with an understanding of the School of Pharmacy and Presbyterian College policies and procedures. Introduction to technology, teaching methods, and modalities utilized at the school. Students will be trained on the use and importance of a student portfolio electronic system to be utilized throughout the four-year program. (Fall P1 year; 1 week prior to start of courses; pass/fail only)

PHRM 5101, Introduction to Pharmacy (2)
Orientation to the social, economic, and political environments within which pharmaceutical care is currently being delivered to the patient. Introduce the students to events and factors that impact the practice of pharmacy, including history, health systems, socio-economics, and cultural diversity. (Fall P1 year; 2 lecture hours per week)

PHRM 5102, Drug Literature Evaluation/Evidence Based Medicine (2)
Development of skills necessary to incorporate timely and rigorously analyzed medical literature into a rational decision-making process. (Fall P1 year; 1 lecture hour per week and 1 two-hour recitation per week)

PHRM 5103, Medical Immunology (3)
Basic elements of the immune system and the means through which the mechanisms of immunity act in a wide range of clinical conditions. (Fall P1 year; 3 lecture hours per week)

PHRM 5104, Human Biochemistry (3)
Fundamental biochemical principles underlying cellular physiology and biological processes. (Fall P1 year; 3 lecture hours per week)

PHRM 5105, Practice Integrated Laboratory Sequence I (2)
Training in first aid, CPR, HIPPA, basic state and federal pharmacy-related laws, and other areas required for IPPE rotations will be provided. Biological techniques such as ELISA in relationship to clinical diagnostic tools for the practical aspect of pharmacy practice will be investigated. (Fall P1 year; 2 three-hour labs per week)

PHRM 5106, Medication Safety Management (2)
Introduces medication use safety as a problem in public policy and the processes that foster the development of a culture of safety in the pharmacy workplace. (Fall P1 year; 2 lecture hours per week)

PHRM 5107, Pharmaceutical Calculations (2)
The study of the measurement units, mathematical functions and applications, and medical terminology essential to the safe and accurate practice of pharmacy. (Fall P1 year; 2 one-hour lectures per week)

PHRM 5199, Deans Hour (0)
Involves students in the college's leadership and strategic initiatives and engage them in academic excellence. (Fall P1 year; 1 hour per week; pass/fail only)

PHRM 5201, Introductory Pharmacy Practice Experience I (1)
Introduces students to the health care system and fosters a sense of community involvement. Early exposure to practice will make didactic instruction more relevant to civic involvement, humanistic care of patients, and social awareness of unmet medical needs. Unmet medical needs include: companionship, patient care, medication-related services, and screening for medical problems. Potential practice sites include: hospitals; retail pharmacies; free clinics; specialty clinics such as oncology, dialysis, and pediatrics; and nursing homes. (Spring P1 year; 40 hours during the first week of the semester plus 4 hours per week x 10 weeks during the semester; pass/fail only)

PHRM 5202, Health Care Systems and Socioeconomics (3)
This course is designed to help the student develop effective understanding of health care systems and the relationship of pharmacoepidemiology and pharmacoeconomics to the healthcare setting as well as sociologic and cultural diversity impact on the economics of the health care system. (Spring P1 year; 3 lecture hours per week)

PHRM 5203, Principles of Pathophysiology (5)
The basic biological mechanisms of disease will be presented and discussed. Importance will be placed on basic principles of cell injury and death; inflammation; and neoplasia. (Spring P1 year; 5 lecture hours per week)

PHRM 5204, Principles of Drug Delivery (4)
Principle overview of the medicinal formulations and physical/chemical properties of drugs. (Spring P1 year; 4 lecture hours per week)

PHRM 5205, Health Ethics (3)
Concepts in solving moral problems facing the contemporary pharmacists and medical profession are discussed. (Spring P1 year; 3 lecture hours per week)

PHRM 5206, Practice Integrated Laboratory Sequence II (2)
Community based dispensing and extemporaneous compounding of dosage forms. There will be a weekly reflection segment in which students will provide presentations based on experiences in their IPPE I course. (Spring P1 year; 2 three-hour laboratories per week)
PHRM 5299, Dean Hour (0)
Involves students in the college's leadership and strategic initiatives and engage them in academic excellence. (Spring P1 year; 1 hour per week; pass/fail only)

Second Professional Year

PHRM 6101, Introductory Pharmacy Practice Experience II (2)
Introduces students to the health care system and fosters a sense of community involvement. Early exposure to practice will make didactic instruction more relevant to civic involvement, humanistic care of patients, and social awareness of unmet medical needs. Unmet medical needs include: companionship, patient care, medication-related services, and screening for medical problems. Potential practice sites include: hospitals; retail pharmacies; free clinics; specialty clinics such as oncology, dialysis, and pediatrics; and nursing homes. (Fall P2 year; 40 hours during the first week of the semester plus 4 hours per week x 10 weeks during the semester; pass/fail only)

PHRM 6102, Pharmacokinetic Principles (3)
Involves the theoretical mathematical and functionally dependent physiologic relationships that comprise the quantitative basis for determining patient-specific and drug dosage regimens. (Fall P2 year; 2 lecture hours per week and 1 two-hour recitation)

PHRM 6103, Principles of Pharmacology/Medicinal Chemistry (4)
Basic pharmacologic principles of pharmacodynamics and cellular processes and the structure activity relationships that underlie the understanding of a rational approach to therapeutics. (Fall P2 year; 4 lecture hours per week)

PHRM 6104, Principles in Human Genetics & Pharmacogenomics (2)
Importance of DNA variations in the genetic basis for disease and individual responses to environmental factors, as well as for such normal variations in biological processes as development and drug response. (Fall P2 year; 2 lecture hours per week)

PHRM 6105, Measuring Therapeutic Parameters (3)
Introduction to measurable endpoints for the evaluation of therapy including laboratory markers of diseases and their resolution or progress. (Fall P2 year; 2 lecture hours per week)

PHRM 6106, Practice Integrated Laboratory Sequence III (2)
Develop proficiency with compounding selected sterile formulations and employing proper aseptic techniques. APhA certification in immunizations and also emphasize diabetic education and clinical evaluation of community-based patients. There will be a weekly reflection segment in which students will provide presentations based on experiences in their IPPE II course. (Fall P2 year; 1 three-hour laboratory and 1 two-hour recitation per week)

PHRM 6107, Clinical Research Design/Biostatistics (2)
Design, implementation, and statistical analysis of research projects related to healthcare. (Fall P2 year; 2 lecture hours per week)

PHRM 6201, Introductory Pharmacy Practice Experience III (2)
The Introductory Pharmacy Practice Experience (IPPE) introduces students to the health care system and fosters a sense of community involvement. Early exposure to practice will make didactic instruction more relevant to civic involvement, humanistic care of patients, and social awareness of unmet medical needs. Unmet medical needs include: companionship, patient care, medication-related services, and screening for medical problems. Practice sites will be selected where community or institutional practice is the focus. (Spring P2 year; 40 hours during the first week of the semester plus 4 hours per week x 10 weeks during the semester; pass/fail only)

Medication Therapy Management I-XIV

Medical Therapy Management (MTM) courses are block-taught, integrated modules that present students with the pathology of common diseases; the basic mechanisms, chemistry, and pharmacokinetics of drugs that affect those diseases; and the therapeutic management of patients with those diseases. These courses also focus on the development and management of pharmacy services that center on those disease states.

PHRM 6202, Medication Therapy Management I—Respiratory (2)
Clinical presentation of common diseases of the respiratory system; chemistry, pharmacology, and kinetics of common therapeutic agents used to treat respiratory diseases; and therapeutic management of patients. (Spring P2 year)

PHRM 6203, Medication Therapy Management II—Renal (2)
Clinical presentation of common diseases of the renal system; chemistry, pharmacology, and kinetics of common therapeutic agents used to treat renal diseases; therapeutic management of patients; and the impact on kinetics of medications. (Spring P2 year)

PHRM 6204, Medication Therapy Management III—Cardiovascular System I (2)
Clinical presentation of common diseases of the cardiovascular system; chemistry, pharmacology, and kinetics of common therapeutic agents used to treat cardiovascular diseases such as hypertension, CAD, and hyperlipidemia; and therapeutic management of patients. (Spring P2 year)

PHRM 6205, Medication Therapy Management IV—Cardiovascular System II (2)
Clinical presentation of common diseases of the cardiovascular system; chemistry, pharmacology, and kinetics of common therapeutic agents used to treat cardiovascular diseases such as stroke, CHF, shock, and INR monitoring; and therapeutic management of patients. (Spring P2 year)

PHRM 6206, Medication Therapy Management V—Other-The-Counter/Alternative Medicine (2)
Clinical presentation of common disorders that may be self treated with non-prescription medications; chemistry, pharmacology, and kinetics of common OTC and herbal agents used to treat; and therapeutic management of these disorders. (Spring P2 year)
PHRM 6207, Medication Therapy Management Case Study Laboratory I (1)
Further development of knowledge from the MTM sequence in a problem-based format. Specific to MTM module of study. (Spring P2 year; 1 two-hour recitation per week)

PHRM 6208, Pharmacotherapy Outcomes (2)
The primary predictors of patient response to pharmacotherapy and the main factors of risk are discussed. An emphasis is placed on the socio-economic factors of disease and medication therapy. (Spring P2 year; 3 lecture hours per week)

PHRM 6209, Practice Integrated Laboratory Sequence IV (1)
Clinical assessment techniques and modalities used in the treatment of patients. Material will coincide with the weekly MTM course information. Reflection segment based on experiences in their IPPE III course will be incorporated. (Spring P2 year; 1 three-hour laboratory per week)
General IPPE Introduction & Overview

Pharmacy educators and the community of pharmacy practitioners are joint partners, and together they are tasked with mentoring student pharmacists to develop and enhance the implementation of new practice models. The expectation is that this alliance will lead to graduates capable of practicing patient-centered care and of positively affecting patient outcomes.

The Presbyterian College School of Pharmacy in coordination with community partners are collaborating to provide the preclinical student pharmacist with a practical knowledge base that will augment the didactic course work being taught.

The general goals of the Introductory Pharmacy Practice Experience Program at PCSP are:

1. To develop collaborative relationships between PCSP and the pharmacy professional community for the implementation and development of an early experiential program for pharmacy students.

2. To work jointly with community partners to promote patient-centered care as a practice standard and develop new pharmacy practice models for student experiential training.

3. To work with the pharmacy professional community to improve patient health outcomes and quality of life.

The student-specific goals of the introductory experiential program are:

1. To expose the student to aspects of pharmaceutical care and disease state management in the pharmacy practice setting, and to complement the knowledge, skills and attitudes learned in the didactic (classroom) portion of the curriculum.

2. To allow the student to observe, interact, and practice these concepts with pharmacist role models and other health care professionals.

3. To give the student an understanding of the types of pharmacy practices, workloads, relationships, and attitudes of health care providers.

4. To allow the student to observe and understand the legal and ethical dilemmas faced by pharmacists as they balance their obligation to patients with cost-control imperatives of the health care delivery systems in which they work.

5. To help the student develop a personal perspective regarding the social and economic challenges to the development and maintenance of a patient-centered pharmacy practice.

6. To develop the student’s communication and social-interaction skills, critical problem-solving skills, and a sense of professionalism, responsibility and accountability with regards to the practice of patient centered-care.
Site Assignment
1. The Office of Experiential Education is responsible for assigning students to pharmacy practice sites, although in some instances students will be permitted to help find their own practice sites during the Summer Week and Winter Week 40-hour-week segments.

2. Each site will have a specific contact person – usually the supervising pharmacist preceptor.

3. Students are required to contact their preceptors prior to the start of each experience segment.

4. The preceptor will mentor one to two students during the designated times.

5. The supervising pharmacist preceptor will designate a preceptor pharmacist for each student when necessary.

6. The student will interact with the supervising preceptor, other pharmacists, and other department of pharmacy personnel at the discretion of the preceptor.

7. The pharmacist preceptor who works most closely with the assigned student(s) will be responsible for the ongoing assessment of the student.

8. All students must have a current intern certificate, up to date immunization records, HIPAA & OSHA Bloodborne Pathogen training certification, and clean criminal background and drug screens. Additionally, P2 students have lay responder CPR/First Aid certification and, prior to the spring semester, sterile media fill certification (students will only observe during fall semester). Questions or inquiries regarding specific student information on this subject should be directed to the Office of Experiential Education.

9. The experience level of each assigned student varies – and for that reason, guidelines detailed below are provided to serve as a key to areas where students will be exposed.

General IPPE Guidelines
1. The Community and Institutional Introductory Pharmacy Practice Experience (IPPE) are divided into either a one 40hr week segment, or five 4hr/week segments. P1 students will complete 40 IPPE hours. P2 students will complete 160 IPPE hours. (P3 students will complete 120 IPPE hours)*.

2. The major goal is to expose the pre-clinical student pharmacist to the essential operational elements routinely performed in the community and/or institutional setting.

3. Many of these routinely performed tasks are performed regularly by technicians and other pharmacist extenders, and it would be appropriate for the pre-clinical student pharmacist to spend time with these individuals.

4. A major expectation of the IPPE program is that each session begins with a meeting between the student and the pharmacist preceptor to outline the plan for that day’s activities, and that each session end with the pharmacist preceptor discussing any observations or questions the student may have regarding that day’s encounters.

5. The order in which these activities are performed is at the discretion of the preceptor. Additionally, if a preceptor determines that their site offers other important, applicable experiences, the preceptor should feel free to incorporate these experiences into the student program.

*specifics TBA
Rotation Scheduling

*PCSP IPPE and APPE rotations are scheduled as follows:*

**1st year:** Spring only, 10 weeks, 4 hours one afternoon a week in a community retail (chain or independent) setting.  
**Total P1 hours:** 40 hours

**2nd year:** Fall & spring. At the beginning of EACH semester, one 40hr-week in a community retail setting, followed by 10 weeks in an institutional (hospital, LTC or Hospice) setting, 4 hours one afternoon a week.  
**Total P2 hours:** 160 hours.

**3rd year:** At the beginning of the fall semester, one 40hr week in a community retail setting. During each fall and spring semester, one 8-hr day each week for 5 weeks in a direct patient-care setting for one semester, and one 8-hr day each week for 5 weeks in simulated MTM setting on campus.  
**P3 total:** 120 hours.  
**Grand IPPE total hours:** 335 hours (includes 15 Service Learning hours)

**4th year:** Nine 1-month duration rotations, four of which are mandatory: advanced community; advanced institutional; ambulatory care; and acute care. Remaining 5 rotations are electives.  
**Total P4 hours:** >1500 hours
**IPPE Preceptor Requirements**

Service to the Community is basically what defines PCSP. Before listing the more specific Preceptor requirements, here are a few bullet points to keep in mind when you mentor our students:

- Preceptor training is required for all Preceptors and is available via the Preceptor’s web page. Currently for P1/P2 IPPE rotations, minimum requirement is completion of “Precepting Introductory Pharmacy Practice Experience”, available via Pharmacist Letter. All PCSP Preceptors have free access to Pharmacist Letter via the link on the Preceptor’s web page.
  - 1st-timers, once at the Pharmacist Letter “Welcome PCSP Preceptor” page, click “I’m new to Pharmacist Letter” link, then complete your profile; otherwise, log in or click “Forgot your login codes” to retrieve your CE ID#.
  - Preceptors must complete the CE via the PCSP web link in order to have the CE also credited to your CE record at PCSP.
  - PCSP Preceptor Conferences are held twice annually, in late spring and in late fall. The Spring 2011 program is currently TBA. Preceptors will be required to attend a Preceptor conference at least once every 3 years. These future programs will be recorded and available for non-live CE via our website.

- Where do you fit in the curriculum? The PCSP curriculum, as well as the didactic course syllabi, is also available via the Preceptor’s web page. Together, along with the scheduling described in the previous heading, you can see how rotation goals and activities are integrated, or “woven” into what’s being concurrently covered in lectures and labs.

- Almost all of our preceptors are asked to serve as IPPE and APPE sites, though in some instances Preceptor student preference and site specifics may dictate otherwise. Retail community Preceptors may serve P1 – P4 students, though P4 community Preceptors and their sites must meet specific criteria (see later section on Advanced Community Preceptor Requirements); institutional Preceptors may mentor P2 – P4 students.

- Though the MINIMUM goals and objectives for IPPEs are listed in this manual, as well as in the online syllabi (the most up-to-date versions will always be available via Preceptor's web site), please be thinking of how you can provide additional goals/objectives/assignments for your students in your efforts to provide an educationally beneficial experience. P4 Preceptors are required by ACPE to have *individually specific* syllabi for their rotations. Templates for these syllabi are provided later in this manual, and the Office of Experiential Education will be available to help each Preceptor to create their own unique syllabus.

- It is understood by PCSP leadership that our Preceptors might also take students from other schools. We expect ALL SC pharmacists to serve as Preceptors for ALL SC pharmacy students, and we cooperate with the directors at other schools in efforts to streamline Preceptor criteria, expectations and requirements for an overall simplification of the precepting process.
Know how many students you are expected to take at a time. P1 and P2 Preceptors can take up to 6 students (1-2 students in each of 3 weekday slots) per week. Some Preceptors can do it but most cannot. We ask all to take at least 2 students per week, and 3 if they can – but we’ll take whatever we can get! If we ask you to be a Preceptor (and we do NOT ask everyone), then we believe you are qualified to serve as an excellent mentor for our students.

Do you wonder if you have any input as to what goes on in that PCSP “ivory tower?” Yes, quite a bit……

- Experiential Program Review Committee: This committee is chaired by me and includes PCSP faculty, Preceptor members from retail and institutional settings, as well as student members. We meet once a semester to provide input and feedback regarding the policies and the overall educational expectations of the rotations. Though there are faculty members on this committee, input from real-world pharmacists serves as the basis for all committee decisions.
- Evaluations: Although I know how busy our Preceptors can get, we both desire and need maximum feedback from you. Please take the time wherever possible to provide additional comments when completing your student evaluations, especially where student performance may be a reflection on our teaching. Also know that your students will also provide us evaluations on their Preceptors and on their rotation sites; these blinded results will be available for Preceptor viewing.
- Surveys: The Office of Experiential Education as well as the Experiential Oversight Committee will begin this month to provide Preceptor Surveys. This will be done each semester as we look for topics for future Preceptor Conference programs.

Problem situations and students:

...and FINALLY, we sincerely appreciate your willingness to serve and to commit the time to support our program.
Specific Preceptor Requirements

1. Preceptor must be currently licensed health care team member (pharmacist, physician, nurse, dietician, facility administrator) in good standing with the appropriate health care discipline’s State Board.

2. Preceptor is willing and prepared to mentor pharmacy students in accordance to the requirements of the PCSP curriculum and as specified in the syllabus for their rotation.

2. The Preceptor encourages – either directly or through delegation, fostering of opportunities for PCSP students to actively participate in behaviors which in the end are intended to improve patient health outcomes. These activities, which must be in accordance to proper moral, ethical, and legal standards, include providing medication counseling, as well as other health-care information to patients.

3. Preceptor must have an active email account which he/she monitors routinely so as to receive and reply to email notifications from the Office of Experiential Education.

4. Preceptor must be trained regarding certain, specific curriculum requirements of the experiential program. Adequate training can be acquired via the completion of online preceptor training programs which are accessible via the PCSP website, or by attending live preceptor conferences provided by the School.

5. Preceptor must be willing and able to access and utilize the web-based E*Value rotation management database in order to complete a list of necessary requirements. This list – though not necessarily all encompassing, includes: grading and/or validation of specified student assignments; verification of student attendance; and completion of student midpoint and final evaluations.
Preceptor License Verification Policy

ACPE Standard 14 - Most pharmacy practice experiences are under the supervision of qualified pharmacist preceptors licensed in the United States.

The Office of Experiential Education shall initially verify that pharmacist preceptors are in good standing with the appropriate state’s Board of Pharmacy from answers submitted by preceptors on their availability form, and via the SC Department of LLR website: [https://verify.llronline.com/LicLookup/LookupMain.aspx](https://verify.llronline.com/LicLookup/LookupMain.aspx)

Pharmacist licensure status will also be verified by review of the monthly SC Board of Pharmacy meeting minutes which will identify pharmacists whose licenses have been revoked or for whom disciplinary action has been taken. Date of licensure verification will be added to the Affiliate Tracking field in PEMS. The Office of Experiential Education, in cooperation with the PCSP Executive Committee Education will decide on an appropriate action to be taken in the event of a preceptor licensure issue.

**Evaluation of Preceptors**

Preceptors and their practice sites will be regularly evaluated by students at the end of their experience, and in an on-going manner by the school.
**Student Requirements**

**Student Conduct**

1. Students participating in ALL practice experiences are expected to conduct themselves in a manner that promotes professionalism and is consistent with other professionals at the designated practice site.

2. Academic (e.g., plagiarism) or Professional (e.g., repeated tardiness/absences, drug diversion) misconduct during experiences will be addressed as per PCSP Student Bulletin, and may result in removal from the experience and/or expulsion from the pharmacy program.

3. Information you obtain through your experiential education activities must be considered personal and confidential. Such information must not be circulated or discussed outside the activities of the pharmacy practice setting.

4. Students must comply with all policies and procedures of the practice site.

5. Preceptors will advise students of site policies during the orientation process. The discussion should include the following: fire and safety procedures, telephone etiquette, facility parking policies, etc.

6. Students must respect all site property. All site property must be returned prior to the completion of the pharmacy practice experience.

**Student Dress Code**

The professional world is conservative, and this fact cannot be overstated. A white laboratory coat with PCSP name tag and photo identification must be worn when participating in ALL experiences. Sites may require additional identification or dress policies, and if so students must comply.

Proper dress and grooming is expected of all students at all times.

**Required/Recommended**

- **Good overall hygiene**
  - **Women**: hair pulled back/pinned; minimal makeup; minimal jewelry (should fit inside scrubs/jacket); slacks or skirts/dresses knee length or longer; flesh-colored hose; close-toed dress shoes;
  - **Men**: hair neat/combed; shirt & tie; slacks; dark socks; clean dress shoes,

**Unacceptable**

- Open-toed shoes or sneakers
- Hand/wrist jewelry of any kind/color
- Fingernail polish of any kind/color
- Perfume or other “excessive” fragrance
- Fake/false fingernails
- Tight/body-hugging clothing in general
- Above-the-knee dresses
- Jeans
- “Revealing” clothing of any kind

Smoking is generally frowned upon and is not conducive to good hygiene. If you smoke, please be aware of school and site smoking policies and be aware that non-smokers will almost always notice.
Student Requirements (continued)

Student Attendance

1. Students are expected to attend all scheduled sessions. Punctuality is a must. Should the site be closed due to unforeseen circumstances (i.e. power outage, inclement weather, etc.), the student will be excused from attending his/her experience for the affected number of days, or be reassigned.

2. The assigned student will be present at the designated site on their scheduled day (Tuesday, Wednesday, Thursday, or Friday – from 1:30 P.M. to 5:30 P.M. for IPPEs) - OR – according to a special arrangement made between the preceptor and student and approved by the Assistant Dean for Experiential Education.

3. Any special arrangements should not conflict with the students’ existing schedules.

4. In the event of illness or personal emergency the student must inform the Office of Experiential Education and the pharmacist preceptor at the site as soon as possible on or before their assigned clerkship day. The student is expected to make up missed sessions at the discretion of the preceptor PRIOR to the start of the next rotation segment.

5. Students who for whatever reason are unable to participate in their scheduled experience will be reassigned to conduct this experience beginning the first full week post semester exams); in other words, in December (for missed Summer Week or Fall experiences), or in May (for missed Winter Week or Spring experiences). Students will incur no further charges if their absence was excused. Students who fail any experience will have to repeat that experience and therefore will incur the course fee again.

6. Students must keep a record of attendance, to be validated by their preceptors via E*Value.

7. Students and preceptors must submit evaluations at the end of each rotation via E*Value. The evaluations are conducted electronically. Please see Christopher Rico in the Office of Experiential Education for further information.

MyFolio

Students are encouraged to use the knowledge and experience taken from their IPPEs as food for thought in their professional MyFolio journal entries in E*Value. Your faculty advisor will insure that you have make your entries as required and you both are to use this information as one basis for your student-advisor discussions. Please contact your advisor should you have any questions.

Religious Policy

Students are responsible for informing the OEE (as well as Preceptors and other affected entities) of any potential conflicts between their expected experiential expectations and any personal religious commitments. Although PCSP does not have a formal experiential policy per se, the OEE will make every effort to accommodate absentee requests related to religious practices and observances – overall experiential responsibilities notwithstanding. Having said that, patient care must and will be the priority; it must be clearly understood by our students that depending on the setting and workflow logistics, some experiential sites may or may not be able to partially or fully accommodate their request. Additionally it must be clearly understood that even if such request is granted (e.g. a request by a Muslim student to participate in Friday group prayers every Friday at a mosque), and the student finds himself/herself in a situation where they have to choose between meeting a more immediate patient-related service or need and themselves, the student is required to honor the needs of the patient/patient care above their own needs.
PHRM 5201: Introductory Pharmacy Practice Experiences (IPPE) 1

Introduction to Community Pharmacy Practice Experience
Spring P1 Year (assignment-based)

PHRM 5201 is the very first IPPE for 1st year students, and consists of one 4-hour experience per week for 10 weeks total: 5 weeks in one retail community pharmacy site, immediately followed by another 5 weeks in another retail community pharmacy site. Students will have both specific and general assignments for each 5-week segment. **Specific** assignments are boxed in bold below. **General** assignments include educational expectations and general topics to be covered during the experience; they are bulleted below and also listed in the day-to-day recommended schedules in the following pages. The course is graded pass/fail.

| Specific Assignment: | (2) New Drug Updates |

**GENERAL ASSIGNMENTS OVERVIEW**

The P2 IPPEs (see Appendix C of the PEP Manual for complete details of new ACPE IPPE learning formats and activities), may use various formats, including:

- shadowing of practitioners or students on advanced pharmacy practice experiences
- interviews with real patients
- simulation
- service learning
- real practice experiences in community, institutional, long-term care pharmacies, etc.

In this regard, the goal will be to expose students to and allow participation in activities such as, but not limited to:

- processing and dispensing new/refill medication orders
- conducting patient interviews to obtain patient information
- creating patient profiles using information obtained
- responding to drug information inquiries
- interacting with other health care professionals
- participating in educational offerings designed to benefit the health of the general public
- interpreting and evaluating patient information
- triaging and assessing the need for treatment or referral, including referral for a patient seeking pharmacist-guided self-care
- identifying patient-specific factors that affect health, pharmacotherapy, and/or disease state management
- assessing patient health literacy and compliance
- performing calculations required to compound, dispense, and administer medications
- administering medications
- evaluating appropriateness of medication dosing utilizing basic dosing principles
- providing point-of-care and patient-centered services
- conducting physical assessments
- preparing and compounding extemporaneous preparations and sterile products
- communicating with patients and other health care providers
- interacting with pharmacy technicians in the delivery of pharmacy services
- documenting interventions in patient records in a concise, organized format that allows readers to have a clear understanding of the content
- presenting patient cases in an organized format covering pertinent information
- billing third parties for pharmacy services

**Preceptors:** Use general assignments as checklist to involve students in each aspect to the best of your ability. Those activities not available/applicable to your site can be prioritized their later rotations.

There is a progression of learning implied and to be kept in mind by both student and preceptor; activities of each subsequent week
are to include wherever possible the activities of all previous weeks. 1st year students at the time of this experience have been instructed (classroom and labs) in the following areas, in preparation for this experience – though it must be emphasized their skills are on the level of a 1st year student.

- take requests for drug information from patients and other healthcare providers
- research answers for drug information questions
- provide verbal and/or written responses to drug information requests
- conduct documentation and follow up regarding drug information questions taken
- utilize the drug info resources available to them (i.e. Pubmed, EBSCOhost, etc.)
- analyze and synthesize their findings into a response.

Preceptors are to facilitate student learning by approving patient or drug topic assignments chosen by their students, by making themselves available to address student inquiries pertaining to their assignments, by assuring that the students have time and space access to areas conducive to working on their assignments, and by insuring that the students utilize the approved format to complete all assignments. Students are not to complete their assignments on site (unless directed to do so by the Preceptor), but should instead use the site as a means to collect information needed to complete their assignments.

SPECIFIC ASSIGNMENTS OVERVIEW

NEW DRUG UPDATES

During any and all IPPE segments, students should be expected to provide new drug updates as requested or required by the Preceptor or site. Research for the drug update should only occur outside of the site. Although the student should present to the Preceptor a minimum of one new drug update during each segment, the number of updates is left up to the discretion of the Preceptor – the purpose here being to demonstrate real-world workload unpredictability. ONE update should be formatted as instructed by the OEE and electronically submitted in MyFolio via the E*Value base. The preceptor will grade the write-up.

PATIENT COUNSELING

During the Summer week-long community IPPE segment, students should be expected to counsel FIVE (5) patients – one each day, on at least one prescription, under supervision of the Preceptor. The Preceptor shall use the Patient Counseling Criteria form to critique the student’s performance. This form is to be used as a learning tool only – no grade is to be assigned for this activity; only constructive criticism by the preceptor. However, the progress shown during the duration of the experience will be reflected in the final student evaluation by the Preceptor. Students should be encouraged to counsel as many patients as feasible for the particular site setting.

DRUG INFORMATION REQUESTS

During the P2 Fall semester institutional IPPEs, students are to write up (2) Drug Information (DI) requests. The two forms are automatically generated within the CourseWork® database for students to complete. Once they are graded, they are automatically archived within the system. Should the student not be able to obtain (2) actual requests during the time at the site, the student should provide recommendations to the Preceptor for approval prior to write-up. Regardless – all DI requests should be submitted to the Preceptor for approval.

MEDICATION RECONCILIATION

During P2 Spring semester institutional IPPEs, students should develop ON THEIR OWN, and be prepared to discuss with their Preceptor, a plan for a “real” face-to-face medication reconciliation patient encounter – one that is both applicable to and feasible in the rotation setting. Eligibility criteria for patient selection will be a minimum of 5 medications (legend and OTC) and 3 disease states. It is anticipated that students will complete a minimum of THREE patient encounters. However, should there be no opportunity for enough actual patient encounters, the student should take a proactive approach with the Preceptor for a simulated encounter. Thoroughness of effort and quality of patient encounters – real or simulated, will be reflected in the final student evaluation by the Preceptor. MedRec patient encounters are not required to be submitted into E*Value or MyFolio.
**PHRM 5201 – Spring Semester**

January 17 – March 30, 2012  
Retail Pharmacies

5 weeks (20-hours, 1 day/week, 4-hours/day) – site 1  
Specific Assignments: (2) New Drug Updates

5 weeks (20-hours, 1 day/week, 4-hours/day) – site 2  
Specific Assignments: (2) New Drug Updates

The most important days at each site are the first day, the midpoint, and the final day. On Day 1, the preceptor should instruct the student as to what is expected throughout the rotation. At the midpoint, preceptor should conduct a midpoint evaluation of the student’s progress; evaluation should be face-to-face and the evaluation documented by the preceptor in the E*Value database. On the final day, the preceptor should conduct a final evaluation of the student’s experience (documented in E*Value), and the student should complete an evaluation of the site and preceptor (documented in E*Value).

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**All assignments, including specific and general assignments, are due at the end of the experience.**
COMMUNITY PHARMACY – Suggested Activities Guide

DAY 1 ORIENTATION

1. General site orientation & introduction to pharmacy personnel
   May include HR visit as required. Primary activities to include preceptor and student discussion of expectations, tour of the pharmacy, introduction to personnel, medication and supply layout, library references, and other areas of importance.

2. Assignments Discussion
   Student is responsible for communication of required specific assignments, as well as utilizing the general assignments checklist to assist the Preceptor in determining previously learned skill sets. Students should help ensure that the Preceptor understands his/her responsibility regarding the completion of these assignments by the student, and should contact the OEE immediately if there are any concerns in this regard. Once the discussion is completed, assimilation into the pharmacy workflow process should immediately commence.

WEEK 2, DAY 2

1. Legal Standards and Requirements. Student learning activities to include:
   - Knowledge and recognition of the requirements for a legal prescription and product labeling for legend and scheduled prescriptions, as well as for OTC items.
   - Labeling requirements for dispensing prescriptions to patients, differentiation of requirements for legend prescriptions and scheduled prescriptions, etc.
   - Understanding audit requirements for scheduled medications.

2. Medication distribution system.
   Student should comprehend how legend prescriptions are processed from receipt to dispensing; should include DME if present at the site.

3. Inventory Management
   Student should become familiar with pricing policies, shelf inventory levels, reorder policies, returns from patients, returns to wholesaler, drug recalls, etc.

WEEK 3, DAY 3

1. CQI
   What Continuous Quality Improvement strategies are employed by the pharmacy, and how do they impact error prevention?

2. Third Party
   Introduction to the concepts of Third Party drug formularies, insurances; impact on costs and patient-centered care.

3. Patient Counseling
   Understanding of the integration of prescription preparation / dispensing process with patient counseling.

4. MID-POINT EVALUATION
   Preceptor will conduct a Mid-Point Evaluation of the student’s progress utilizing the E*Value database. Status of student completion of specific assignments will also be addressed during the midpoint evaluation process.

WEEK 4, DAY 4

1. Patient Counseling
   Understanding of the integration of prescription preparation / dispensing process with patient counseling, with an emphasis on patient counseling.

2. Third Party
   Introduction to the concepts of Third Party drug formularies, insurances; impact on costs and patient-centered care. Emphasis on Medicare Part D & Medicaid.

3. Specific Assignments
   Student should at the very least be making final preparations regarding specific assignments. Seek additional preceptor (or other pharmacist) input as needed. Make sure that Preceptor or his/her delegate will be able to make final evaluation of assignments next week.

WEEK DAY, FINAL DAY 5
1. Patient Counseling
   Understanding of the integration of prescription preparation / dispensing process with patient counseling, with an emphasis on patient counseling.

2. Specific Assignments
   Submit specific assignments to preceptor; print or email as needed for Preceptor. Make sure to submit your assignments into MyFolio. Make sure that Preceptor or his/her delegate will be able to make final evaluation of assignments promptly, no later than by following week; contact Office of Experiential Education should you perceive any problems.

3. FINAL EVALUATION.
   Preceptor and each Student are to conduct individual face-to-face final evaluations of each student’s experience at this site. Afterwards, the Preceptor will submit the evaluation results for each student into the E*Value database. Students will complete evaluation of Site and Preceptor via E*Value. Final grade status should be assigned and disclosed to student prior to student departure.

**PRECEPTOR NOTES**  *(efficiency adjustments & improvement suggestions to fine-tune & standardize your students’ experiences).*
**Site Visit Activity Checklist for IPPE Requirements**

Students should use this form to track their activities throughout ALL of their IPPEs. Preceptors should use this form as a baseline knowledge assessment tool for new students.

*Introductory Pharmacy Practice Experiences (IPPEs)*

- Processing and dispensing new/refill medication orders
- Conducting patient interviews to obtain patient information
- Creating patient profiles using information obtained
- Responding to drug information inquiries
- Interacting with other health care professionals
- Participating in educational offerings designed to benefit the health of the general public
- Interpreting and evaluating patient information
- Triaging and assessing the need for treatment or referral, including referral for a patient seeking pharmacist-guided self-care
- Identifying patient-specific factors that affect health, pharmacotherapy, and/or disease state management
- Assessing patient health literacy and compliance
- Performing calculations required to compound, dispense, and administer medications
- Administering medications
- Evaluating appropriateness of medication dosing utilizing basic dosing principles
- Providing point-of-care and patient-centered services
- Conducting physical assessments
- Preparing and compounding extemporaneous preparations and sterile products
- Communicating with patients and other health care providers
- Interacting with pharmacy technicians in the delivery of pharmacy services
- Documenting interventions in patient records in a concise, organized format that allows readers to have a clear understanding of the content
- Presenting patient cases in an organized format covering pertinent information
- Billing third parties for pharmacy services
Sample Student Orientation Checklist

**General**
- Parking
- Name badges and lab coats required
- Entry codes for doors
- Pharmacy hours of operation
- Patient confidentiality (HIPAA)

**Tour of pharmacy / facility**
- Location of drugs/samples/prescription/forms
- Introduction to staff
- Where to put personal belongings
- Food rules/breaks
- Proper hygiene in pharmacy
- Computer system
- Bathrooms
- Fax machine
- Chart rules

**Meeting with Preceptor**
- Review student folio / checklist
- Schedule, assignments and deadlines
- Importance of patient confidentiality
- How to use SOAP forms
- Journal clubs
- Disease state presentations
- SOAP presentations
- Drug table responsibilities
- Student case presentations
- Penalties for late assignments
- Other projects
- Exit exam
- Grading
- Midpoint and Final evaluations
GUIDELINES FOR NEW DRUG UPDATE

The purpose of the new drug review utilizing the STEPS method is to familiarize students with new drug therapy or new indications for drug therapy. The STEPS method utilizes the student’s ability to compare the new drug or indication to currently marketed products in order to decide its place in therapy. STEPS is a process derived from *American Family Physician*, a peer-reviewed journal of the American Academy of Family Physicians. **S=Safety, T=Tolerability, E=Effectiveness, P=Price, S=Simplicity.**

Each presentation should include the following:

- An overview of the drug, approval date from the FDA, approved indications, available dosage forms, and typical dose used

  - **Safety**—any black box warnings, any reported adverse reactions during postmarketing surveillance, contraindications or precautions/warnings to therapy

  - **Tolerability**—most common side effects noted in trials; comparison to other agents ADR in trials

  - **Effectiveness**—success rates for approved indications; compare to other marketed drugs for indications

  - **Price**—per pill, dose, regimen, etc; also include competitor pricing for marketed drugs

  - **Simplicity**—how many times per day patient takes medication; any regard to food; special dosing instructions; dosage adjustments needed

  - **Bottom Line**—would student routinely recommend this drug over previously marketed agents and why

- References used