Pledge of Professionalism

As a student of pharmacy, I believe there is a need to build and reinforce a professional identity founded on integrity, ethical behavior, and honor. This development, a vital process in my education, will help ensure that I am true to the professional relationship I establish between myself and society as I become a member of the pharmacy community. Integrity must be an essential part of my everyday life and I must practice pharmacy with honesty and commitment to service.

To accomplish this goal of professional development, I as a student of pharmacy should:

**DEVELOP** a sense of loyalty and duty to the profession of pharmacy by being a builder of community, one able and willing to contribute to the well-being of others and one who enthusiastically accepts the responsibility and accountability for membership in the profession.

**FOSTER** professional competency through life-long learning. I must strive for high ideals, teamwork and unity within the profession in order to provide optimal patient care.

**SUPPORT** my colleagues by actively encouraging personal commitment to the Oath of Maimonides and a Code of Ethics as set forth by the profession.

**INCORPORATE** into my life and practice, dedication to excellence. This will require an ongoing reassessment of personal and professional values.

**MAINTAIN** the highest ideals and professional attributes to ensure and facilitate the covenantal relationship required of the pharmaceutical care giver.

The profession of pharmacy is one that demands adherence to a set of rigid ethical standards. These high ideals are necessary to ensure the quality of care extended to the patients I serve. As a student of pharmacy, I believe this does not start with graduation; rather, it begins with my membership in this professional college community. Therefore, I must strive to uphold these standards as I advance toward full membership in the profession of pharmacy.

*Developed by the American Pharmaceutical Association Academy of Students of Pharmacy/American Association of Colleges of Pharmacy Council of Deans (APhA-ASP/AACP-COD) Task Force on Professionalism; June 26, 1994*
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preceptor Quick Start Instructions</td>
<td>3</td>
</tr>
<tr>
<td><strong>ROTATION SYLLABUS</strong></td>
<td>4</td>
</tr>
<tr>
<td>Calendar</td>
<td>6</td>
</tr>
<tr>
<td>Goals</td>
<td>7</td>
</tr>
<tr>
<td>Specific Assignments</td>
<td>7</td>
</tr>
<tr>
<td>Timelines and Assignments snap-shot (see Calendar, p. 6)</td>
<td>9</td>
</tr>
<tr>
<td>Summer Week Immersive Segment Learning Objectives:</td>
<td>10</td>
</tr>
<tr>
<td>Learning Objectives: Semester Segments</td>
<td>12</td>
</tr>
</tbody>
</table>
Dear Preceptor:

Please think of this page as a “quick start” set of instructions…..similar to what you’d see when open the box of that new TV you bought at Best-Buy™; as with that purchase, the intent is to quickly get you up and running! General experiential policies, as well as policies for both students and preceptors are not included here for brevity’s sake; however, all preceptors should familiarize themselves with these policies - all of which are included in the PEP (Professional Experience Program) Manual.

IPPEs for our P3 students occur during the academic year, when they will complete 141 hours in varying patient care settings; no IPPEs occur during summer months. PCSP IPPEs for P3 students include:

**FALL**  
- PHRM 7101 (2 segments)
  - one 40-hour week the first week of fall semester in a retail or institutional setting, and
  - one 8-hour day per week for 6 weeks in a direct patient-care setting.
  - (88 hours for the fall)

**SPRING**  
- PHRM 7201 (1 segment)
  - one 8-hour day per week for 6 weeks in a direct patient-care setting, and
  - A minimum of 5 profession related Service Learning hours.
  - (additional 48 IPPE hours + 5 PSL hours for a total of 141 hours for the year)

PCSP IPPE goals are specified by ACPE, and the day-to-day objectives are generally detailed for our Students and Preceptors, so hopefully there is little need for Preceptors to fret about “what am I going to do with this Student!” Simply pay heed to the information boxed below.

---

**The “meat” of this syllabus template begins on page 7 and ends on page 14.**

- Preceptor & Student primary focus should be on GOALS checklist, p. 7.
- Secondary focus are the SPECIFIC ASSIGNMENTS, which are different for each semester.
- Day-to-Day objectives are based on GOALS and are the basis for all rotation learning objectives.
- Suggestions and hints are highlighted or boxed.
- Specific assignments are due at rotation’s end.
- Preceptors can customize Day-to-day learning objectives, but should be based on GOALS.
- Midpoint evaluation and post-rotation reflection should be live discussions with the student.
- Preceptors - Remember to validate attendance and submit Student evaluations into E*Value.
- See PCSP Experiential website or PEP Manual for updates on all rotation syllabi and other information.
Course Description
The PHRM 7101 (fall semester) IPPEs for P3 students take place in at least 2 different settings. The 1st 40-hr summer week IPPE segment takes place immediately before fall classes begin; it is an immersive or refresher experience in either a community retail or institutional (hospital, long-term care, home infusion) setting. The semester-long 6-week segment is to be in a direct patient care or clinic setting, where students spend all day Thursday each week. The Primary focus for each segment should be to address the GENERAL ASSIGNMENTS from a medication therapy management (MTM) approach, and the SPECIFIC ASSIGNMENTS from the standpoint of disease-state topics currently being covered in the classroom (lectures and recitations).

Site Description (edit as necessary)
Describe your site (i.e. as described on facility website, if applicable), and (to the best of your ability) list all pharmacy related activities to which students will be exposed, and/or in which they will be allowed to participate. Also list any other pertinent information related to pharmacy student presence at the facility. Use the topics below, and the PC-12 competencies list, as a guide.

Course Learning Outcome Topics (taken from 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 FORMS SECTION. Mid-point & final online evaluations via E*Value website.

Class Meeting Times - SEE ACADEMIC CALENDAR FOR ALL IPPE & APPE SCHEDULES.

Textbook

Required: NONE, unless specified by Preceptor.

Supplies

Required: PCSP LAB JACKET, PCSP NAME BADGE (SEE PEP MANUAL FOR COMPLETE IPPE/APPE LIST)

Attendance and Participation

It is the responsibility of the Student to notify both the Office of Experiential Education (OEE) and the Preceptor of their absence. Any time missed during IPPEs must be made up at Preceptor’s discretion. Failure to do so will result in an automatic unsatisfactory evaluation. See PCSP PEP manual for specific information.

Rotation Etiquette - SEE PEP MANUAL FOR FULL POLICY DISCLOSURES AND SPECIFICS

Professionalism, as detailed in the PCSP Code of Professional Conduct, is exemplified by student behavior at the experiential site. Failure to demonstrate the following characteristics of professional behavior can result in an automatic grade of “Unsatisfactory” for the course:

- Reading assignments (including this & all course related syllabi) should be completed by end of Day 1.
- Students are expected to arrive at the assigned site at the scheduled time and remain until dismissed.
- Avoid any behavior which interferes with the ability of others to hear and learn.
- Cell phones and other electronics should be muted, turned to vibrate, or turned OFF during rotations.
- ACTIVE student participation during all experiences is expected by the School and should be encouraged by the Preceptor and their associates and/or delegates.

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 or submitted 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:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>60-100%</td>
<td>Pass (S)</td>
</tr>
<tr>
<td>&lt;60%</td>
<td>Fail (U)</td>
</tr>
</tbody>
</table>

(Grading scale approved by faculty)
### Calendar

**PCSP 7101: Spring IPPE IV**

<table>
<thead>
<tr>
<th>Dates</th>
<th>Topic</th>
<th>Instructor</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>SUMMER WEEK (SW) SEGMENT</strong></td>
<td>August 13-17, 2012: Monday - Friday, 8-hrs/day minimum, 40-hrs/week minimum (40-hr week)</td>
<td>SEE CALENDAR FOR SPECIFIC START &amp; END DATES</td>
</tr>
<tr>
<td><strong>SEMESTER SEGMENT</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>GROUP A</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Week 1</td>
<td>Thursday, August 30, 2012</td>
<td></td>
</tr>
<tr>
<td>Week 2</td>
<td>Thursday, September 6, 2012</td>
<td></td>
</tr>
<tr>
<td>Week 3</td>
<td>Thursday, September 13, 2012</td>
<td></td>
</tr>
<tr>
<td>Week 4</td>
<td>Thursday, September 20, 2012</td>
<td></td>
</tr>
<tr>
<td>Week 5</td>
<td>Thursday, September 27, 2012</td>
<td></td>
</tr>
<tr>
<td>Week 6</td>
<td>Thursday, October 4, 2012</td>
<td></td>
</tr>
<tr>
<td><strong>GROUP B</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Week 1</td>
<td>Thursday, October 18, 2012</td>
<td></td>
</tr>
<tr>
<td>Week 2</td>
<td>Thursday, October 25, 2012</td>
<td></td>
</tr>
<tr>
<td>Week 3</td>
<td>Thursday, November 1, 2012</td>
<td></td>
</tr>
<tr>
<td>Week 4</td>
<td>Thursday, November 8, 2012</td>
<td></td>
</tr>
<tr>
<td>Week 5</td>
<td>Thursday, November 15, 2012</td>
<td></td>
</tr>
</tbody>
</table>

*Thanksgiving Break November 19-23 - No IPPEs this week*

| Week 6 | Thursday, November 29, 2012 |

This topical outline will be followed as closely as possible throughout the semester for all P3 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.
Goals

As per ACPE Guidelines (Appendix C), the primary 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, especially compliance
- performing calculations required to compound, dispense, and administer medications
- administering medications (if possible, or can shadow nursing during med pass)
- 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

*IPPE Students observe intervention documentation; P4s can input with Preceptor supervision

Specific Assignments

<table>
<thead>
<tr>
<th>Summer Week</th>
<th>None required for 40-hr summer week immersion segment (SWIS)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fall</td>
<td>6-week segment</td>
</tr>
<tr>
<td></td>
<td>1 (MINIMUM) Drug Monograph write-up</td>
</tr>
<tr>
<td></td>
<td>5 (MINIMUM) Medication Adherence occurrences</td>
</tr>
<tr>
<td>Spring</td>
<td>6-week segment</td>
</tr>
<tr>
<td></td>
<td>1 (MINIMUM) Drug Monograph write-up</td>
</tr>
<tr>
<td></td>
<td>5 (MINIMUM) Medication Adherence occurrences</td>
</tr>
</tbody>
</table>

Preceptors: Use as a checklist to prioritize, identify and track Student involvement for each activity to the best of your ability. Those activities not applicable to your site or not covered during the experience can be prioritized for subsequent rotations.
Specific Assignment Details...

Preceptors facilitate student learning by: approving Specific Assignment topics; being available to address questions pertaining to assignments and their application to your patient care site; providing an area conducive to working on assignments; and by insuring that the Students use approved formats to complete all assignments. Remember, the priority focus of each IPPE is maximizing Learning Objectives achievement based on the Goals checklist. Feel free to contact us with any questions!

DRUG MONOGRAPH

During P3 Fall & Spring semester IPPEs, for each 6-week segment, students with appropriate supervision from their Preceptor will submit to their Preceptor a minimum of (1) Drug Monograph. The format for the monograph is to be the same one used in the classroom assignment for Drs. Franklin & Sease. A template of this format is in the FORMS section of the PEP manual and this syllabus template. Rationale for monograph topic(s) should be based on drug interaction concerns presented during the IPPE segment, and should be pertinent to disease states currently being covered in lecture; Preceptor having final say. Disease states slated for lecture during P3 fall and spring semesters include: ID (including C/S and kinetics); GI; anti-fungals; enteral/parenteral nutrition; hepatitis/cirrhosis; PUD/pancreatitis; thyroid disorders; DM; stroke; TIA; epilepsy; diuretics. Assignment will comprise portion of final evaluation of student by Preceptor. Students should upload final edited (if necessary) version into E*Value or MyFolio.

MEDICATION ADHERENCE

During P3 Fall & Spring semester IPPEs, for each 6-week segment, students with appropriate supervision from their Preceptor will complete a minimum of (5) medication adherence occurrences. Preceptors practicing in environments that offer more opportunities for these patient care interventions should encourage or require students to complete more of these occurrences. Students should demonstrate the ability to incorporate previously skills learned obtained through completion of prior IPPE Medication Reconciliation assignments during the completion of this assignment. Occurrences can be completed either in a retrospective manner (if Preceptor or site has liability concerns, for example), or prospectively (if rounding with a clinician, for instance). Prospective occurrences are preferred and should include active discussions between student and Preceptor. Primary focus should be on disease state appropriateness and medication recommendations. Preceptor should verify that students meet the minimum number of encounters. Assignment will comprise portion of final evaluation of student by Preceptor. Students should submit a blinded written summary of each encounter into E*Value or MyFolio.

OPTIONAL - Preceptor’s Discrepancy

PATIENT CASE WRITE-UP

During P3 Spring semester IPPEs, AT PRECEPTOR’S DISCREPANCY, students will demonstrate their ability to write up a patient case.*

The assignment objective is for the student to, by the end of the assignment discussion, demonstrate the ability to list the aspects of a case write-up and to analyze the contents of each aspect. The write-up should include: Problem List; Student’s Assessment of the problem list; Student’s Plan to address the problem list; and Student’s Monitoring parameters for the plan. The Preceptor may choose the patient directly (give actual de-identified PMH for Student to use for write up) or preferably, direct the Student to do so on their own (Student has access to patient chart). Please note that the disease state(s) in question must be one covered in the MTM lecture sequence (respiratory/or renal disease only, at this point). Students will upload write-ups into MyFolio, and also present their completed case to their Preceptor (oral or written, according to Preceptor preference). Once the write-up is complete, Student should meet with Preceptor to discuss the case, offering rationale for their decisions made in all 4 aspects of the case. Preceptors should provide guidance and opinion as needed or requested during the write-up. Preceptors will grade the presentation or write up using the rubric in the forms section of this syllabus. Students are not required to submit/upload their patient case write-ups into E*Value or MyFolio.

Preceptor: Although the grade for this assignment will not be a component of your Student evaluation, thoroughness and quality of effort made by the Student in the completion of this assignment should be considered in the final Student evaluation. The summative goal being to help Students apply information they’ve learned in lecture in a real world setting.

*Write up is NOT required to be in SOAP notes format as SOAP notes write-up implies a direct patient interview.

All assignments and objectives completion are due at the end of the experience.
Timelines and Assignments snap-shot (see Calendar, p. 6)

**PHRM 7101 – Fall Semester**

**Hospital/Institutional:** August 13-17, 2012  
Hospital/Institutional Pharmacy or Clinic patient-care setting  
1 week (40-hours total: 5 days, Monday through Friday, 8 hours per day) – site 1  
Specific Assignments: NONE

**THEN**

**Hospital/Institutional:** August 30 – October 4, 2012  
Hospital, Hospice, Dialysis clinics, and Long-Term Care facilities  
6 weeks (48-hours total: every Thursday, 8-hours/day) – site 2  
Specific Assignments: (1) New Drug Update  
(2) Drug Information (DI) requests

**OR**

**Hospital/Institutional:** October 11– November 15, 2012  
Hospital, Hospice, Dialysis clinics, and Long-Term Care facilities  
6 weeks (48-hours total: every Thursday, 8-hours/day) – site 2  
Specific Assignments: (1) New Drug Update  
(2) Drug Information (DI) requests

3rd year (P3) fall semester PHRM 7101 rotations are patient-care focused. The 40-hour “Summer Week” immersion segment reinforces experiences from the past spring’s first introductory institutional experience (PHRM 6201), while the semester-long fall segment introduces students to a more in-depth institutional patient care setting; here the focus is more on improving patient care outcomes versus the more task oriented dispensing objectives of P1 & P2 IPPEs, hence some schools now refer to P3 rotations as “pre-APPEs.” This pre-clinical approach will continue through the spring P3 IPPE segment, as students prepare for their P4 APPEs.

Students will have both specific and general assignments for each segment listed above, and as indicated on the first page of this syllabus.

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. General assignment topics covered at previous rotation sites may be repeated at the next site, but emphasis should be on covering new topics most applicable to the current site and Preceptor.

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 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 complete the final student evaluation then conduct a post-rotation reflection discussion with the student. Afterwards, the student should complete a reflection entry into E*Value, and an evaluation of the site and preceptor (documented in E*Value).

**All assignments, including specific and general assignments, are due at the end of the experience.**
Summer Week Immersive Segment Learning Objectives: INSTITUTIONAL PHARMACY

**Day 1 learning objectives: Students should on first day:**

1. Meet with HR (if required) and Preceptor to discuss expectations for rotation
   a. Preceptor & Student E*Value responsibilities (attendance entry/validation & final evaluations)
2. Complete a tour of rotation site
   a. location of medications, supplies, references, and other areas of importance
3. Be introduced to department staff
   a. health care team members, including Social Workers, Dietitians, Nurses, Administrators, Billing staff, etc.
4. Receive introduction to department/office day-to-day workflow
   1. a. Patient processing, from arrival to departure/discharge
   1. b. Receiving & screening medication orders
   2. a. Order entry processing, dispensing, delivery, etc.

<table>
<thead>
<tr>
<th>Preceptor</th>
<th>Student</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>note Student’s prior experiences, then address accordingly the general assignments.</em></td>
<td><em>assist Preceptor regarding E</em>Value (know how to conduct attendance validation &amp; Student evaluations)*</td>
</tr>
<tr>
<td><em>validate attendance and conduct final evaluation on last day</em></td>
<td><em>insure evaluations are done in person – with Preceptor (preferable) or designee.</em></td>
</tr>
<tr>
<td></td>
<td><em>conduct site/Preceptor evaluation on last day</em></td>
</tr>
</tbody>
</table>

If multiple Students are assigned to facility, the Preceptor should divide Students and assign to different pharmacy or site areas within facility to complete subsequent general and specific assignments; they can subsequently rotate in a manner that insures equal exposure for all Students

**IV Room (TPN/sterile prep)**
**Pharmacokinetics**
**Cart fill (tech fill & pharmacist check)**
**Compounding & Prepackaging**
**Simulated Order Entry**
**Accudose / Pyxis restocking**
**Decentralized site**
**Administration**
**Patient Care/Procedures**
**Patient Education**

**Cancer Center**
**Dietary/Nutrition**
**Discharge Planning**

**Meetings**
- [ ] P&T Committee
- [ ] Medication Safety (ISMP)
- [ ] CPOE (iOrder)
- [ ] Insulin Committee
- [ ] Cancer Center meeting (research, clinical trials)
- [ ] CLBSI (central line related blood stream infections)
- [ ] Stroke Team (TPA, etc.)
- [ ] Strategic Planning (PCSP faculty, etc.)
**Day 2 learning objectives: Students should by end of Day 5:**

1. Identify and apply activities in which they were engaged to the inter-professional expectations and activities typical of a licensed pharmacist, placed in this setting and abiding by the applicable legal standards and law requirements. Compare/contrast to those in previously assigned IPPE sites.

2. Demonstrate proficiency in HIPAA compliance while conducting all activities.

3. Differentiate roles and responsibilities of all department/pharmacy/staff members.

4. Interact with other specialty professions in the delivery of pharmacy services (i.e. Nurses, Prescribers, Administrators, Dieticians, Social Workers, etc.)

5. List the names and describe the roles of 4 agencies having federal/state/local oversight over facility activities.
   a. SC Board of Pharmacy / LLR (remote order entry, meds in facility-owned physician offices, etc.)
   b. DEA (what forms required for scheduled drug procurement/dispensing; why medical residents lack individual DEA#, etc.)
   c. JCOAH (what are they looking for from a pharmacist’s perspective?)
   d. CMS (what regulations should concern pharmacy?)
   e. DHEC

**Day 3 learning objectives: Students should by end of Day 5:**

1. Examine department/office medication purchasing and inventory management strategies.

2. Review medication formulary and department policy and procedures for facility-wide medication redistribution.
   a. P&T Committee cost analysis procedure
   b. medication outdates, returns, recalls

3. With Preceptor or delegated (i.e. Technician) supervision, practice preparing and dispensing new and refill medication orders.

4. Examine emergency patient care procedures.
   a. Does pharmacy personnel participate in Codes? Compare & contrast to procedures of prior IPPE sites.

**Day 4 learning objectives: Students should by end of Day 5:**

1. Consistently identify opportunities for regular participation in patient interviews throughout course of IPPE.
   a. Patient admissions, discharge planning, etc.

2. Demonstrate steps for computer order/data entry
   a. Practice supervised order entry as permitted
   b. Review medication orders
      i. clinical review of patient profile (allergies, etc.)
      ii. correct drug, dose, indication, necessary calculations, administration route
      iii. incorporation and use of clinical pharmacology / online references
      iv. adverse event monitoring and reporting
   c. Compare and contrast merits of CPOE versus patient medication and data entry processes of prior IPPE experiences.
   d. EMARs versus hardcopy MARs

3. Identify 5 opportunities for active participation in responding to drug information inquiries

4. Demonstrate ability to complete 3 medication reconciliation tasks
   a. Be proactive. If pharmacy not directly involved, investigate possibility of working with nursing
   b. activity interaction should directly involve actual patients if at all possible

5. Make preparations for completion of SOAP notes assignment and any other assignments given by Preceptor.
   a. Quiz questions, presentation

**Day 5 learning objectives: Students should by end of Day 5:**

1. Compose Student reflection entry for E*Value MyFolio and complete previous assignments.

2. Identify and address any activities on Goals checklist which still need to be addressed, and prioritize as best as possible for semester segments.
Learning Objectives: Semester Segments
INSTITUTIONAL or COMMUNITY patient care settings

Day 1, Week 1 – ORIENTATION

Day 1 learning objectives: Students should on first day:

1. Meet with HR (if required) and Preceptor to discuss expectations for rotation
   a. Specific assignments due Week 5
   b. Preceptor & Student E*Value responsibilities (attendance entry/validation, mid-point & final evaluations)
2. Complete a tour of site
   a. location of medications, supplies, references, and other areas of importance
3. Be introduced to department staff
   a. health care team members, including Social Workers, Dietitians, Nurses, Administrators, Billing staff, etc.
4. Receive introduction to department/office day-to-day workflow
   a. receiving & screening medication orders
   b. order entry processing, dispensing, delivery, etc.
5. Complete media-fill test (if prerequisite for allowing active Student participation in sterile prep)

Preceptor
- note Student’s prior experiences, then address accordingly the general assignments.
- conduct mid-point evaluation at 3rd visit
- submit final evaluation on last day prior to having post-reflection discussion with student.

Student
- assist Preceptor regarding E*Value (know how to conduct attendance validation & Student evaluations)
- insure midpoint evaluation and post-rotation reflection discussion are done in person – with Preceptor (preferable) or designee.
- conduct site/Preceptor evaluation on last day

Each week Students will meet with their Preceptor or his/her designee to review Student expectations and the agenda for that day. At the end of each day, it is suggested that the Student be required to take a short (oral or written) quiz related to that day's activities (3-5 questions) and to review their observations and findings. This is the time for Students to ask questions about what they saw and to share their areas of interest.

Day 2, Week 2

If multiple Students are assigned to facility, the Preceptor is asked to divide Students and assign to different pharmacy areas within facility to complete subsequent general and specific assignments; they can subsequently rotate in a manner that insures equal exposure for all Students

IV Room (TPN/sterile prep)
Pharmacokinetics
Cart fill (tech fill & pharmacist check)
Compounding & Prepackaging
Simulated Order Entry
Accudose / Pyxis restocking
Decentralized site
Administration
Patient Care/Procedures
Patient Education

Cancer Center
Dietary/Nutrition
Discharge Planning

Meetings
- P&T Committee
- Medication Safety (ISMP)
- CPOE (iOrder)
- Insulin Committee
- Cancer Center meeting (research, clinical trials)
- CLBSI (central line related blood stream infections)
- Stroke Team (TPA, etc.)
- Strategic Planning (PCSP faculty, etc.)
Day 2 learning objectives: Students should by end of Day 6:
1. Identify all applicable legal standards and state pharmacy (BOP/LLR) law requirements for valid medication order/prescription orders. Compare/contrast to those in community retail.
   a. written, faxed, oral, scanned, electronic
   b. controlled substances
   c. site policy for approved versus unapproved abbreviations
   d. what medication records required for filing, and for how long
2. Demonstrate proficiency in HIPAA compliance while conducting all activities.
3. Differentiate roles and responsibilities of all department/pharmacy/staff members.
4. Interact with pharmacy technicians in the delivery of pharmacy services.
5. List the names and describe the roles of 4 agencies having federal/state/local oversight over facility activities.
   a. SC Board of Pharmacy / LLR (remote order entry, meds in facility-owned physician offices, etc.)
   b. DEA (what forms required for scheduled drug procurement/dispensing; why medical residents lack individual DEA#, etc.)
   c. JCOAH (what are they looking for from a pharmacist’s perspective?)
   d. CMS (what regulations should concern pharmacy?)
   e. to the medication distribution system. Student should comprehend how legend prescriptions are processed from receipt to dispensing.

At the end of Day 6 for each site, (optional, but suggested) the Student should be required to take a final quiz (10 questions) related to processes they observed over the 6 weeks and/or give a short presentation (20-30 minutes) on a topic of their choice. The topic should have been reviewed and approved by the Preceptor by week 2.

Day 3, Week 3

Day 3 learning objectives: Students should by end of Day 6:
1. Examine department/office medication purchasing and inventory management strategies.
2. Review medication formulary and department policy and procedures for facility-wide medication redistribution.
   a. P&T Committee cost analysis procedure
   b. medication outdates, returns, recalls
3. With Preceptor or delegated (i.e. Technician) supervision, practice preparing and dispensing new and refill medication orders.
   a. pre-packaging
   b. cart fill
   c. auto-dispensers, Accudose®/Pyxis®/Omnicell® auto-dispensing med-stations, robots
4. Examine emergency crash cart/box and/or floor stock procedures.
   a. Does pharmacy personnel participate in Codes? Differentiate types of codes?
5. Discuss MID-POINT EVALUATION of your progress with Preceptor. Preceptor to submit evaluation via the E*Value database.

Day 4, week 4

Day 4 learning objectives: Students should by end of Day 6:
1. Discuss specifics of a USP 797 compliant clean room.
   a. What was impetus for USP 797? Is facility compliant? Why or why not?
2. Apply aseptic technique training in sterile products preparation - at Preceptor’s discretion.
   a. Discuss techniques with Preceptor regarding TPN and injectable chemotherapy preparation.
3. Consistently identify opportunities for regular participation in patient interviews throughout course of IPPE.
   a. Patient admissions, discharge planning, etc.
Day 5, week 5

**Day 5 learning objectives: Students should by end of Day 6:**

1. Demonstrate steps for computer order/data entry
   a. Practice supervised order entry as permitted
   b. Review medication orders
      i. clinical review of patient profile (allergies, etc.)
      ii. correct drug, dose, indication, necessary calculations, administration route
      iii. incorporation and use of clinical pharmacology / online references
      iv. adverse event monitoring and reporting
   c. Compare and contrast merits of CPOE versus pharmacist/technician order entry
   d. EMARs versus hardcopy MARs
2. Identify 5 opportunities for active participation in responding to drug information inquiries
3. Demonstrate ability to complete 3 medication reconciliation tasks
   a. Be proactive. If pharmacy not directly involved, investigate possibility of working with nursing
   b. activity interaction should directly involve actual patients if at all possible
3. Make preparations for completion of SOAP notes assignment and any other assignments given by Preceptor.
   a. Quiz questions, presentation

Day 6, week 6

**Day 6 learning objectives: Students should by end of Day 6:**

1. Review any previous topics yet to be addressed
   a. Be proactive regarding completion of these objectives
2. Describe 5 opportunities where Student interacted with other health care team members
3. Meet with pharmacy director/department head at least on one occasion if at all possible to discuss overall department performance improvement issues - for example:
   a. JCAHO standards and particulars from their last inspection
   b. National Patient Safety Goals (NPSG)
   c. Facility policy for RCRA mandate for handling P-list pharmaceuticals &
   d. Medication Safety strategy
   e. Medication Errors / ADR discovery and statistical tracking
   f. electronic Quality Variance Reporting (eQVR)
4. Present all completed projects and assignments to Preceptor.
   a. HONOR CODE language
5. Discuss FINAL EVALUATION of your progress with Preceptor.
   a. Preceptor to submit evaluation via the E*Value database PRIOR to post-rotation reflection discussion.
   b. Student will complete evaluation of Site and Preceptor via E*Value after post-rotation reflection discussion.
   c. Final grade status should be assigned and disclosed to Student prior to Student departure. Preceptor and Student should both conclude rotation having had all questions addressed to their satisfaction.
6. Identify and address any activities on Goals checklist which still need to be addressed, and prioritize for semester segments.

Preceptors will validate the Student's Record of Attendance and Evaluation Form at the end of each rotation (Day 6) in the E*Value database – accessible via [http://pharmacy.presby.edu/experiential-education/Preceptors/](http://pharmacy.presby.edu/experiential-education/Preceptors/) web link.

This process as a whole is intended to be enjoyable, exciting and educational for both Student and Preceptor.
Remember that the overriding goal is to show the various distributive and clinical aspects of institutional pharmacy practice and illustrate its viability as a professional career option.
(efficiency adjustments & improvement suggestions to fine-tune & standardize your Students’ experiences).