

Ohio Northern University



Raabe College of Pharmacy

Doctor of Pharmacy

**Advanced Pharmacy Practice Experience
Manual
PHPR 650**

2011-12

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Advanced Pharmacy Practice Experiences at Ohio Northern University

Mission Statement

The faculty of the Ohio Northern University, Raabe College of Pharmacy educates pharmacy students to enter pharmacy practice as generalists with the knowledge, skills, attitudes and values necessary to optimize drug therapy and provide quality patient care in various practice settings. Doctoral graduates are encouraged to expand the depth of their training through postgraduate experience and/or formalized training (i.e. residencies, fellowships, etc.)

Goal

To educate students to apply problem-solving skills to assess patient parameters, optimize drug therapy, and provide quality patient care in various practice settings.

The terminal component of the Doctor of Pharmacy program, Advanced Pharmacy Practice Experiences (APPEs or rotations), has defined objectives for each rotation including a specified core of knowledge, skills, and practice performance expectations that constitute basic practice capabilities required of a graduate.

Course Description

A full-time experiential program emphasizing delivery of patient care in various practice settings. The APPEs are experience-based, integrated problem-solving courses designed to train the student to become an active participant in providing patient care. The student, under the direction of various faculty and preceptors, will integrate his or her knowledge of **physical assessment, pharmacology, pharmacotherapy, pathophysiology, pharmaceuticals, pharmacokinetics, and pharmacodynamics** in assessing therapeutic plans and in evaluating the selected drugs for patients. During this experiential curriculum, students will learn recommendations and participate in decisions regarding drug therapy. At each practice site, the student is expected to become a functioning component of the ongoing patient care services through faculty instruction and self-learning.

Instructors (Preceptors)

- Full time Faculty
- Shared Faculty
- Adjunct Faculty
- Volunteer Preceptors

Prerequisites/Requirements

- P-6 standing
 - Completion of ≥ 270 academic credit hours
 - Completion of ≥ 300 hours of Introductory Pharmacy Practice Experiences (IPPEs)
 - Successful completion (C or better) of BSPC 543, 544, 545, 546 and PHPR 550 modules
- ≥ 2.00 GPA
- Valid Ohio Intern License
- Valid Intern License when required for other states in which you will complete rotations
- Completed Record of Physical Examination including updated immunizations as required by site and/or other state or federal regulatory agencies
- Satisfactory completion of Background check (performed by school)
- Advanced Cardiac Life Support (ACLS) certification
- Immunization certification
- Proof of medical insurance
- Proof of individual liability insurance
- HIPAA training
- OSHA training

Some sites may also require (at the student's expense):

- Additional background checks
- Drug test
- Immunization titers
- Parking pass
- Proof of auto insurance (for parking)

Course Policy

Students must register for nine (9) six (6)-credit hour APPEs for a total of 54 credits. Each APPE is one calendar month in length and includes, at a minimum, 160 hours at the site. Students registered for any APPE (PHPR 650) who wish to register for any additional courses need the written permission of experiential instructors and the Dean of the Raabe College of Pharmacy prior to registering for the additional courses.

Advanced Pharmacy Practice Experience Curriculum

A student is required complete nine (9) one month long rotations as follows:

- a. One (1) rotation in EACH of the following required rotations:

General/Internal Medicine
Ambulatory Care
Pediatrics or Critical Care ‡
Geriatrics or Long Term Care
Community Pharmacy
Hospital Pharmacy

‡ Any specialty within Pediatrics or Critical Care/Intensive Care Unit (ICU) fulfill this requirement

- b. Three (3) elective rotations from the following list.

- All electives are designated as Patient Care or Non-Patient Care related electives (PC or NPC). Students may complete a maximum of two (2) NPC electives except with permission from the OEE
- In general, a student cannot repeat a rotation type. Exceptions may be approved by the OEE.

Elective Type	PC/NPC
Administration	NPC
Ambulatory Care	PC
Anticoagulation Clinic	PC
Burn	PC
Cardiac ICU	PC
Cardiology	PC
Cardiothoracic ICU	PC
Compounding	PC
Critical Care	PC
Diabetes Clinic	PC
Drug Information	NPC
Education	NPC
Emergency Medicine	PC
Family Medicine	PC
HIV/AIDS	PC
Home Health Care	PC
Home Infusion	NPC
Hospice/Palliative Care	PC

Elective Type	PC/NPC
Informatics	NPC
Internal Medicine	PC
International Medicine	PC
Long Term Care	PC
Mail Order Pharmacy	NPC
Managed Care	NPC
Medical ICU	PC
Medication Safety	NPC
Neonatal ICU	PC
Nephrology	PC
Neurology	PC
Neuro ICU	PC
Nuclear Pharmacy	NPC
Nutrition	PC
Oncology/Hematology	PC
Pain Management	PC
Pediatric Cardiology	PC
Pediatric ICU	PC
Pediatric Oncology	PC

Elective Type	PC/NPC
Pediatric Pain Mgmt	PC
Pediatric pulmonology	PC
Pediatrics	PC
Pharmaceutical Industry	NPC
Pharmacoeconomics	NPC
Poison Control (Toxicology)	NPC
Psychiatric	PC
Public Health	PC
Pulmonary Medicine	PC
Research	NPC
Rural Health	PC
Specialty Care Pharmacy	PC
Surgery/Surgical Care	PC
Surgical ICU	PC
Transplantation	PC
Trauma	PC

Recommended Texts & Resources

- ❑ Handheld electronic device loaded with Lexi-Comp or other drug information resource
- ❑ Pharmacotherapy: A Pathophysiologic Approach (or another tertiary source)
- ❑ The Sanford Guide to Antimicrobial Therapy
- ❑ Lexi-Comp Drug Information Handbook (or other hard copy drug information resource)
- ❑ Access to (may vary by site) and competency in online Ohio Northern drug information resources

PERFORMANCE STANDARDS:

To successfully complete the APPE sequence, the student must accomplish the following:

1. Successfully complete (with a grade of C or better) nine (9) one month long rotations meeting all rotation-specific learning objectives and site-specific responsibilities and/or activities.
2. Successfully complete all longitudinal outcomes measures (Appendix) by the end of the rotation sequence.
3. Complete and turn in a hard copy and/or electronic portfolio that meets all requirements.
4. Successfully complete the final online examination (WebCT) with a 75% or better.
5. Attend Boot Camp at Ohio Northern University in May

COURSE GOAL:

To provide practical, supervised, intellectually stimulating advanced pharmacy practice experiences, which will enable students to develop fundamental capabilities to become self-motivated, self-directed, ethically minded professionals with the mission and skills to advance pharmacy practice in any desired practice setting. Competency in clinical skills, knowledge, judgment, and communication provide the basis for the achievement of this fundamental goal.

DESIRED OUTCOMES:

Upon completion of the Advanced Pharmacy Practice Experiences, the student should be able to:

1. Utilize a systematic problem-solving approach to patient care.
2. Utilize the acquired knowledge base to assess the patient and formulate a therapeutic plan.
3. Demonstrate proficiency in recommending and implementing a therapeutic plan.
4. Identify and evaluate the current literature and apply this information to patient care.
5. Effectively communicate, both verbally and in writing, with patients and other healthcare providers.
6. Demonstrate self-learning and self-assessment abilities and habits.
7. Demonstrate leadership abilities.
8. Demonstrate professionalism.
9. Demonstrate proficiency in the role of the pharmacy practitioner, as a member of the healthcare team, in provision of quality patient care.
10. Demonstrate ability to conduct further research and/or improve pharmacy services in the future.

CORE LEARNING OBJECTIVES:

Patient Care

- I. For each assigned patient, the student shall efficiently utilize medical records, along with direct assessments, when appropriate, to collect physical examination data, system review data, diagnostic test results and laboratory data.
- II. The student shall utilize subjective and objective data to fully assess the patient's condition, drug therapy and identify drug-related problems. This assessment should include the etiology of the problem, whether drug therapy is necessary, and whether current drug therapy is efficacious and appropriate according to current guidelines or treatment standards.

- III. The student should use the information to formulate a plan to resolve drug-related problems, optimize drug therapy, specify an appropriate monitoring plan (evaluating efficacy, side effects, toxicity, etc.), and maximize outcomes. The plan should always include goals of therapy and appropriate counseling. Students shall also identify situations where pharmacokinetic parameters are necessary to optimize drug therapy and thus implement appropriate pharmacokinetic monitoring plans.

Professional Communications

- I. **Interdisciplinary Patient Care**
The student will learn to participate as a pharmacist in an interdisciplinary patient care environment, under the preceptor's supervision and/or direction, in providing patient care.
- II. **Drug Information**
The student will identify drug-therapy related questions, interact with health care professionals to clarify the question, efficiently formulate a response using appropriate resources, and communicate this response effectively in both written and verbal formats.
- III. **Professional Writing**
The student will identify topics, write professional documents on these topics and communicate with other health care professionals concerning those documents.
- IV. **Educational Presentations**
The student will identify, prepare and present topics, patient cases, and journal clubs for the purpose of education within the practice environment.

Practice Management/Clinical Administration

- I. **Documentation of Pharmacist Recommendations**
The student shall explain the need for and participate in the documentation of pharmacists' patient care related activities.
- II. **Drug Use Evaluation (DUE)**
The student will explain the process of DUE and, if applicable, participate in the site's DUE system.
- III. **Adverse Drug Reaction (ADR) Monitoring**
The student shall understand the process of ADR monitoring and, if applicable, participate in the federal and institution-specific ADR system.
- IV. **Research and Scholarly Activity**
The student shall understand and be able to explain the need for research and scholarly activity as it pertains to professional growth.

Personal Attributes

- I. **Social Interaction, Citizenship and Responsibility**
The student shall demonstrate effective interpersonal behaviors in a variety of situations and circumstances. The student shall adapt their professional practice to the dynamic health care system and commit to an attitude of service.
- II. **Self-Learning Abilities and Habits**
The student shall effectively self-assess and satisfy learning needs on an ongoing basis

- III. Cultural Competency
The student shall demonstrate behaviors, attitudes, and knowledge that allow him/her to work effectively as a professional with a variety of patients and in cross-cultural situations.
- IV. Professionalism
The student shall display behaviors and attitudes which reflect respect, honesty, integrity and a passion for learning.

Rotation Specific Objectives

- Objectives for each rotation type are available: <http://www.onu.edu/pharmacy/experiential>
- Individual sites and preceptors are encouraged to develop additional specific objectives.

POLICIES AND INFORMATION FOR PHARMACY PRACTICE EXPERIENCES (Listed Alphabetically):

Academic Experience Affidavit (orange sheet)

The Academic Experience Affidavit is the form used to officially document the number of hours spent at each APPE site. Each preceptor will fill out one line of the form. DDD No is the distributor of dangerous drugs license number. All pharmacies in the state of Ohio have a DDD number, but non-distributing sites and out of state sites may not have this. If your preceptor is not a pharmacist include his/her complete address, contact information and license number on the back of this form. At the completion of APPEs the student should make a copy of this form for their records. The original will be turned in to the College for appropriate documentation.

Accreditation Council for Pharmacy Education (ACPE)

Accreditation is the public recognition awarded to a professional program that is judged to meet established qualifications and educational standards through periodic evaluations. ACPE is the accrediting body for colleges of pharmacy including the Raabe College of Pharmacy. For more specific information on ACPE and ACPE standards see: <http://www.acpe-accredit.org/>

Attendance/Absence

Each rotation begins on the 1st day of the assigned month and ends on the last day of the month. At times it may be necessary for the preceptor to make adjustments to this schedule as he or she sees fit. The student must spend a **minimum** of 160 hours at each site.

Due to the intensity of each rotation and the need to achieve rotation objectives, it is advised that students avoid missing any time during their rotations. We understand that circumstances beyond the student's control (i.e. illness, death in the immediate family, etc.) may arise necessitating time away from a rotation. It is the responsibility of the student to contact the preceptor and arrange how the missed time will be made up.

In the event that time must be missed at a rotation the student must use the "Absence Request Form" (see Appendix) to obtain PRIOR (when possible) preceptor approval. The student must develop a plan to make up the missed time and the preceptor must approve the plan. A copy of the form should be sent to the Office of Experiential Education. Unexcused absences are NOT tolerated and jeopardize the student's successful completion of the program. The preceptor shall immediately contact the Office of Experiential Education if such absences occur.

It is the expectation that residency and job interviews will be scheduled during off months when possible.

Background Checks

All students will have a criminal background check completed before beginning APPEs (this background check is in addition to the one required by the Ohio State Board of Pharmacy). Unfavorable results of background checks will be handled on a case-by-case basis. The offense(s) will be reviewed and the student will be contacted and given a chance to provide a written explanation. Ohio Northern may pursue judicial action under the University Code of Student Conduct, if necessary. Results of such action may delay or prevent graduation from the program. If no judicial action is necessary the student will be allowed to participate in rotations, but appropriate personnel at the student's assigned sites may be informed that he/she had a "hit" on his/her criminal background check. Each site then has the right to accept or refuse the student. In the event that rotation sites cannot be found that will accept the student, the student will not complete the Doctor of Pharmacy degree.

Boot Camp

Boot Camp is an intense, comprehensive review designed and presented by Ohio Northern University faculty for the graduating class in early May. Attendance is required. Specific dates will be announced each year.

Cell Phones

The use of cell phones for any personal communication purposes at any APPE site is prohibited. Unless used for access to drug information resources, cell phones should be turned off during rotations.

Changing a Rotation

After rotations are scheduled they will not be changed based upon student request. Each year hundreds rotations are arranged, and changing them after they have been set up reflects poorly on the program and gets confusing for sites and preceptors. These sites hold slots open because they know a student is coming. In many cases sites have denied other students because their slots were already "filled". The OEE makes a commitment to the sites and the sites make a commitment to Ohio Northern. Each and every rotation is a new opportunity for the student. With the right attitude, every rotation will teach the student something and will add to the unique practitioner he or she is becoming. It is the policy of the OEE that only extreme personal or medical circumstances are considered on an individual basis for making any changes in the APPE schedule. A physician's note will be required to change a rotation for medical reasons.

Rotations may have to change due to issues at the sites. Students are encouraged to remain flexible with regards to their APPE schedules due to the possibility of unforeseen circumstances involving sites and/or preceptors (i.e. preceptor change of employment or illness, site staff shortage, etc.)

Compensation

In accordance with ACPE standards, students cannot be compensated for any experiential activity by any site. In most circumstances students will not complete a rotation at a site where he/she has interned.

Concurrent Employment

Advanced Pharmacy Practice Experiences are full-time commitments. Full-time is considered a *minimum* of 40 hours per week. Employment during the 6th year is strongly discouraged. APPEs will not be scheduled around employment and students should NEVER leave a rotation early or miss a requirement due to outside employment.

Confidentiality

Students are required to respect all confidential information revealed during his or her APPEs such as patient records, professional policies, trade secrets, financial information, etc. The student will abide by HIPAA regulations and uphold the strictest patient confidentiality standards. Patients should not be discussed by name in any public area. Names should not be used in any oral and written presentations or assignments.

Contacting Sites

The student will contact the site **two to three weeks** before the APPE is to begin. (Some sites require earlier contact with the site paperwork before the APPE begins. See PHARMACADEMIC for details). Students should contact the sites by phone or email. Students should remember to demonstrate the utmost professionalism in their correspondence with the preceptor. Emails should include a salutation and closing. (See Appendix for details of what to ask preceptors). If a student cannot reach the preceptor and/or contact person or discovers any problems upon contacting the site, the student should notify the OEE for assistance immediately.

Students will not contact sites prior to one month before the scheduled APPE unless necessary for housing or travel arrangements (contact the OEE when in doubt). Under no circumstances will students contact sites before final rotation schedules are available. All scheduling of rotations and sites will be done by the OEE.

Dress Code

Students are expected to dress in appropriate, professional attire at all times during APPEs. Though some sites may have specific dress code modifications students should expect the following:

1. Students will wear a clean, neatly pressed, short, white professional lab jacket with an ONU identification badge and patch.
2. Female students may wear skirts or dresses of appropriate length, dress slacks and suitable hosiery and shoes. (Skirts and dresses must come to knee level when standing).
3. Male students should wear dress slacks, collared shirts, ties and appropriate shoes.
4. Perfumes, colognes, or heavy fragrances should not be worn, as many people are offended by, or allergic to, chemical scents or odors.
5. Cosmetics should be used in moderation.
6. Jewelry should be conservative in style and kept to a minimum. Visible pierced body jewelry is limited to 2 small pairs of earrings in earlobes
7. All students are expected to maintain a neat appearance and good hygiene.
 - a. Beards and mustaches should be clean and well-groomed; otherwise men should be clean-shaved.
 - b. Fingernails must be clean, short, and neatly trimmed. Clear or light colored nail polish is acceptable. Extreme nail polish colors and artificial fingernails, tips, wraps or fillers may not be worn.
 - c. Hair should be clean, neat and maintained. Long hair may need to be pulled back.
8. Footwear should be clean and appropriate for the setting (no athletic shoes or open-toed shoes).

Inappropriate attire includes (but is not limited to):

1. Visible tattoos
2. Piercing of eyebrow, lip, nose, tongue or any other visible body part aside from the ears (see above)
3. T-shirts or recreational attire (jogging shorts or pants, sports outfits)
4. Mini skirts, halter tops, tank tops, capri pants or similar attire
5. Denim jeans of any color
6. Hair dyed any unnatural hair colors
7. Garments made of spandex, leather or lycra material or "party clothes" including glitter or sequins
8. "Revealing" clothes such as low-cut, sheer, see-through, or tight/form fitting attire—stomach and/or undergarments should not be exposed when sitting or standing
9. Dark glasses (except for documented medical reasons)
10. Head wear including hats, sweatbands, and bandanas
11. Cargo pants
12. Clothing with holes, tears, or fringe

Students should check with preceptors prior to rotations for additional requirements

Electronic Devices

Electronic devices, including but not limited to iPods and PDAs, should not be used at the rotation site unless the use is directly pertinent to providing patient care. Professional judgment should be used to ensure use is appropriate.

Evaluations/Assessment forms

Advanced Pharmacy Practice Experience Student Evaluation Form (see Appendix or PHARMACADEMIC)

At the each rotation, the preceptor will complete a "Rotation Evaluation Form" online through PHARMACADEMIC. The preceptor is to complete the "First Evaluation" (midpoint) section of this form between the second and third week of the rotation. The "Final Evaluation" section and final grade should be completed during the last week of the rotation. During the First and Final Evaluations of the student, the preceptor will discuss the student's strengths and weaknesses. Comments should be documented as thoroughly as possible. Although First and Final Evaluations are required, only the Final Evaluation will be used in determining the student's grade for the APPE. The student will receive a final letter grade for each rotation based on the:

- a. successful completion of core learning objectives
- b. successful completion of rotation specific learning objectives
- c. successful completion of site-specific responsibilities and/or activities
- d. demonstrated progression toward completion of longitudinal outcome measures

The form must be electronically submitted through PHARMACADEMIC on the last day of the rotation. In rare instances the form found in the Appendix may be mailed or faxed to the Director of Experiential Education. The student will be able to view his/her completed evaluation as soon as he/she has submitted the Evaluation of Site and Preceptor Form.

Preceptors may ask to view previous preceptors' evaluations. Students should make these available when requested.

Evaluation of the Site and Preceptor Form (see Appendix or PHARMACADEMIC)

The student should use this form at the end of the month to evaluate the rotation site and preceptor. The form should be submitted electronically through PHARMACADEMIC. The student is also encouraged to share this information directly with the site and preceptor.

Longitudinal Outcome Measures Assessment Form (see Appendix)

During the course of all Advanced Pharmacy Practice Experiences, the student must complete all outcome measures (skills and activities) on the form. These outcomes must be observed and evaluated by various preceptors. Upon completion of each outcome measure, the preceptor will evaluate the student's performance and discuss it with the student. Activities that are required more than once should be completed (and signed off on) during different APPEs. Each preceptor should review the sheet and sign the bottom. The student must turn in the original assessment form with the professional portfolio at the end of the rotation sequence. Each student is responsible for completing all activities listed on this form.

Student Self-Assessment Form (see Appendix or PHARMACADEMIC)

The student must complete a self-evaluation at the end of each rotation online through PHARMACADEMIC. This evaluation should be discussed with the preceptor prior to the completion of the rotation.

Patient Communication Evaluation Form (see Appendix)

Each student must have a minimum of three (3) Patient Communication Evaluation forms completed during three different APPEs of the rotation sequence. The student should be observed and evaluated (by the preceptor or another healthcare professional at the site) based upon the criteria provided on the Patient Communication Evaluation Form. This form should be submitted as part of the Professional Portfolio at the completion of the rotation sequence.

Assessment of PharmD Candidate Professionalism (see Appendix)

Each student will have this form completed during a minimum of three (3) different APPEs during the rotation sequence. These forms should be kept in the portfolio or sent to the OEE as desired by preceptor.

Journal Club Evaluation Form (see Appendix)

Many rotation sites require the student to give a verbal journal club presentation. This is a representative copy of the evaluation form the preceptor may choose to utilize. This form is NOT a required form. However, if this or any other form is completed by the preceptor, it should be included as part of the Professional Portfolio.

Case Presentation Evaluation Form (see Appendix)

Many rotation sites require the student to give verbal case presentations. This is a representative copy of the evaluation form the preceptor may choose to utilize. This form is NOT a required form. However, if this or any other form is completed by the preceptor, it should be included as part of the Professional Portfolio.

Final Examination

At the conclusion of APPEs all graduating Pharmacy students must take an on-line final examination. This examination will be administered through WebCT. The examination will be available for five days (specific dates will be announced at Boot Camp). Students may log on to the WebCT "Rotation" course and complete the exam. The examination will consist of randomly assigned questions (multiple choice, matching, short answer, essay, etc.) pertaining to the practice of pharmacy and the assigned reading list provided by the Director of Experiential Education.

Important notes regarding the examination:

- This is an open-book examination (any resources may be used); however, no discussion between classmates (or any other person) is permitted.
- This is a timed examination. You must submit the examination prior to the designated time limit.
- If, at any time during the examination, a technical difficulty is encountered, please notify the Office of Experiential Education, immediately.

Note: You must achieve a grade of $\geq 75\%$ on your Final Examination to successfully complete the APPEs and be eligible for graduation. Students not achieving a passing grade must schedule a personal remediation with the Director of Experiential Education.

Financial Responsibility

The student is responsible for any expenses incurred during the APPEs. This responsibility includes housing, transportation, food and other costs such as parking passes, copying articles, etc. If a rotation is cancelled or changed, ONU is not responsible for reimbursement of any travel-related costs such as changing or canceling plane tickets, lodging, etc. (Students are expected to purchase travel insurance when applicable).

Grades

Per the General Administration and Academic Regulations of the Raabe College of Pharmacy, a letter grade of a C or better on a grading scale of A, B, C, F must be obtained to pass each APPE. If a student receives an F on a rotation the student will not be able to complete any further rotations, and the rotation type to be repeated will not be scheduled until one calendar year later, during which time the student will be required to display competency on various assessment tools developed by the OEE. For example, if a student fails a February rotation he or she will be unable to continue until the following February when a make-up rotation is scheduled. If the preceptor feels that a student's attitude, behavior, actions, or lack of motivation results in compromising patient care, the student will be

asked to leave the rotation. If OEE finds sufficient evidence we will support the preceptor's decision and the student will receive an F for the rotation. See above for policy regarding failed rotations. Depending on the severity of the student's actions, the student may be dismissed from the College of Pharmacy as determined by the Board of Ethical and Professional Conduct and described in Appendix A of the Ohio Northern University Raabe College of Pharmacy Student Handbook. (Violations 3.02.3)

Health Insurance Portability and Accountability Act (HIPAA)

Students will follow all regulations outlined by HIPAA. Students are HIPAA trained and will have their HIPAA cards readily available as proof if needed by site or preceptor.

Holidays and Breaks

Student schedules while on APPEs are independent of the University schedule. Students will not be off during University breaks and they should not assume they have Holidays off. Students will follow the schedule established by each preceptor and site.

Hours of APPEs

Throughout the rotations students will keep one Hours Affidavit sheet (orange form) which each preceptor will fill out and sign indicating the number of hours the student spent at the site. If any preceptor is not a pharmacist that preceptor's complete contact information should be attached to or written on the back of the form. In order to meet ACPE requirements for licensure, students must meet or exceed 40 hours per week from the first day of the month until the last. If hours are missed during the month long rotation, students must develop an action plan with their preceptor's approval to make-up missed hours. (See Absence/Attendance Policy) Rotational hours are not limited to 9 to 5, or Monday through Friday. Hours of each rotation will vary; your first day discussion with your assigned preceptor should address the requirements for each particular rotation. Other requirements may be, but are not limited to, the following (which may take place during evenings or weekends):

- Local pharmacy meetings
- Community Service participation
- Continuing Education Programs
- Educational Programs for the underserved populations
- Public Health Programs
- Community Outreach Programs
- ICU or ER coverage on weekends

All students will complete a minimum of 1440 hours of APPEs. Hours will be documented on Academic Experience Affidavit (Orange Sheet)

Housing

Housing during APPEs is the responsibility of the student. When the Office of Experiential Education knows of housing in particular areas the information will be posted online or shared with students. The student is responsible for making all housing arrangements and paying associated costs.

Intern Licenses

Each Student must have a valid Ohio Intern license throughout all APPEs. Even if the student is from out of state or completing APPEs out of state, the student must maintain his/her Ohio Intern license because the hours are part of a curriculum based in Ohio. Students will also comply with intern licensing requirements for any APPEs outside of Ohio. Failure to comply with licensing requirements may result in cancelled rotations and delayed graduation.

Liability Insurance

While completing APPEs, Ohio Northern University students are covered under the University's liability insurance policy, however students are also expected to carry their own liability/malpractice insurance policy. Proof of such insurance may be required at certain sites.

Occupational Safety and Health Administration (OSHA) Training

All students will attend mandatory OSHA training before beginning APPEs. If a site/preceptor requires proof of OSHA training contact the OEE.

Personal Documents

In addition to the electronic portfolio, each student will maintain a file of important personal documents to have available if/when requested by a site or preceptor. Documents should include:

- HIPAA Card
- ACLS Card
- Valid Internship License(s)
- Proof of Liability Insurance
- Immunization Record and Record of Physical Exam
- Longitudinal Outcome Measures Assessment Form (Appendix)
- Hours Affidavit

PharmAcademic

PHARMACADEMIC is the online program used to schedule and track experiential activities, provide contact information and details for students regarding sites and preceptors and provide student information to preceptors. Both students and preceptors will complete evaluations in PHARMACADEMIC. Students should review each of their scheduled APPE sites in PHARMACADEMIC to view available syllabi, descriptions and/or required paperwork. It is the student's responsibility to review and complete any necessary information as outlined in PHARMACADEMIC.

Plagiarism and Cheating

All work done on APPEs must be each student's own. Plagiarism and cheating will not be tolerated. See Code of Ethical and Professional Conduct for further details.

Portfolios

The student must create and maintain a "Professional Portfolio" (electronic at www.PharmPortfolio.com) that is to be shared with each preceptor at the beginning of each rotation. Portfolios should be updated each month and will periodically be evaluated by the Experiential Office. The completed portfolio **MUST** be submitted to the Experiential Office on the first morning of Boot Camp. Portfolios will be individually reviewed and assessed and must meet all requirements in order for a student to graduate.

Further details on how to upload information and create the portfolio can be found in the ONU PharmPortfolio manual.

The Professional Portfolio should include:

General Information:

- Updated Curriculum Vitae
- Completed Longitudinal Outcome Measures Assessment Form (scanned and uploaded once completed)
- 3 Completed Patient Communication Evaluation Forms (scanned and uploaded once completed)

- Hours Affidavit (scanned and uploaded once completed)
- Scanned copies of personal documents from above

For each rotation:

Each rotation will have a section. Each section must include:

- A list of personal goals or objectives for the rotation
- A brief (1-2 pages) description of the APPE site, patient population, daily activities, knowledge learned, skills acquired and how goals were or were not met. Include how this experience relates back to previous experiences or classroom knowledge. The student should reflect and explain how this APPE will influence his/her future career and patients.
- A minimum of two (2) typed patient cases (cases are required for all patient-care rotations, including the Community Pharmacy rotation).
 - Cases should be appropriate in length and detail and can be in a variety of formats (i.e. Word document or PowerPoint).
 - All cases should be well-referenced.
 - Cases throughout the portfolio should each be unique and should cover a wide variety of disease states.
 - Even if the student completes more than two cases at one site, the student must complete a minimum of two cases per APPE.
 - For non-patient care rotations (i.e. "Research") the student should include other projects, presentations, etc. to replace the cases
- Additional information such as: presentations, projects, handouts, monographs, etc. completed at each rotation. (All items should be well-referenced).

Note: Each portfolio will be reviewed and graded. You must submit a "passing" portfolio to graduate. Your grade will be based on completeness, content, and presentation.

Professionalism

While completing the Advanced Practice Rotations (PHPR 650), students will maintain a high standard of professional conduct. Students are expected to dress in appropriate professional attire (as defined by his or her respective preceptor and see Dress Code), uphold the strictest patient confidentiality standards, and display a positive, self-motivated attitude. Students failing to comply with these standards may be removed from the site and a non-passing grade may be assigned at the discretion of the preceptor and Director of Experiential Education. See Professional Conduct Statement (signed during Capstone, see Appendix) for further details. Students completing APPEs are still held accountable under the "Code of Ethical and Professional Conduct" as outlined in the Student Handbook. Violations will be handled as outlined in the Code.

During at least three different APPEs each student needs to have a preceptor fill out the "Assessment of PharmD Candidate Professionalism" form to be sent to the OEE and included in the portfolio. (See Appendix)

Professional Meeting Attendance

The College of Pharmacy at Ohio Northern University, as well as the Office of Experiential Education encourages students to participate in local, state and national Pharmacy organizations, however, the student must first discuss meeting attendance with his/her preceptor if APPE time will be missed.

Transportation

Students are required to have a means of transportation to and from rotation sites. All costs associated with transportation are the students' responsibilities.

Travel

While attempts will be made to keep travel distance from being a problem, it is likely that some rotations will be a distance from a student's housing. Students should anticipate driving up to an hour or more one-way to get to some rotation sites.

In addition, some APPEs require travel as part of the site's expectations. For example, the student may be required to report to different hospitals in a Health-System during one rotation or he/she may need to travel to various nursing homes to be with the preceptor.

All expenses incurred as the result of travel are the responsibility of the student.

Weather

Students should ask preceptors what to do in the event of inclement weather. Snow emergencies and cancellation of classes on campus do not automatically cancel rotation days. Patient care continues despite inclement weather and students should plan to attend unless otherwise notified by the preceptor.

Advanced Pharmacy Practice Experience Manual

Appendix

Ohio Northern University
Raabe College of Pharmacy
Office of Experiential Education

Oath of a Pharmacist

At this time, I vow to devote my professional life to the service of all humankind through the profession of pharmacy.

I will consider the welfare of humanity and relief of human suffering my primary concern.

I will apply my knowledge, experience, and skills to the best of my ability to assure optimal drug therapy outcomes for the patients I serve.

I will keep abreast of developments and maintain professional competency in my profession of pharmacy.

I will maintain the highest principles of moral, ethical, and legal conduct.

I will embrace and advocate change in the profession of pharmacy that improves patient care.

I take these vows voluntarily with the full realization of the responsibility with which I am entrusted by the public.

Professional Conduct Statement:

I, _____, (print name) as a participant in the Ohio Northern University College of Pharmacy Experience Programs, do hereby agree to abide by all rules of conduct listed below. I realize that failure to follow these conduct rules will result in disciplinary action which could include failure of the course or dismissal from the program.

Conduct Rules:

I will obey ethical instructions of my preceptor.

I will recognize my preceptor as the authority for all rules, regulations, and expectations.

I will be courteous and professional at all times.

I will arrive on time to all experience sites.

I will wear professional attire, including a white lab coat and name tag, as directed by my preceptor.

I will be attentive and alert to patient needs and care at all times.

I will perform all assigned duties in a timely manner.

I will not enter an unauthorized work area at any time.

I will not interfere with the work performance of another student or employee.

I will not steal, willfully damage equipment or property, or falsify official reports or information while directly participating in College of Pharmacy Experience Programs.

I will not use or possess intoxicating or illegal substances at any experience related setting.

I will not divulge any patient information gathered through conversations, medical charts, pharmacy records, medical rounds, and any other inter-professional involvement.

I will not divulge any company/institutional confidences revealed while completing experience training including pharmacy records, pricing systems, professional policies, and patient records.

In addition to the conduct rules above, I understand and agree that I may be immediately withdrawn from the Facility's educational training program based upon a perceived lack of competency on my part, my failure to comply with the rules and policies of the Institution or Facility, pose a direct threat to the health or safety of others or, for any other reason the Institution or the Facility reasonable believes that it is not in the best interest of the Institution, the Facility or the Facility's patients or clients for me to continue.

By signing this form, I acknowledge that I fully understand the policy listed above and agree to abide by these rules. Furthermore, I understand the potential penalties involved if I fail to follow one or more of these conduct rules.

Signature

Date

BACKGROUND CHECK AUTHORIZATION AND RELEASE

Name: _____
 Last First Middle

Permanent Address: _____
 Street Address (No P.O. Box) City State Zip

Social Security No.: _____ Male _____ Female _____

Driver's License No.: _____ State _____

Expiration Date: _____

Phone Number: _____ Cell Number: _____

Disclosure

As part of your eligibility for experiential educational opportunities, Ohio Northern University will obtain or have prepared a "consumer report" that may include social security number verification, address history, criminal and civil legal history, personal interviews, professional reference interviews, driving histories, professional licensing, public records or information obtained from governmental or law enforcement agencies, and other information bearing on your character, general reputation, personal characteristics, prior employment and education, and mode of living.

Authorization and Release

By signing below, I voluntarily authorize Ohio Northern University to obtain a "consumer report" about me and to consider such reports when making decisions about my eligibility to participate in programs offered by the University and/or any of its affiliated entities or experiential education providers (hereinafter "The Third Parties"). I understand and authorize that such consumer reports about me may be shared by Ohio Northern University with The Third Parties. I further release both Ohio Northern University and The Third Parties from any claims or liabilities of any kind resulting from obtaining and using any such consumer reports. I understand that I have rights under the Fair Credit Reporting Act (FCRA) including those discussed in the FCRA Disclosure provided to me by the University.

Print Full Name: _____

Signature: _____

Helpful Tips for Students:

What to ask when you call your preceptor/site (2 - 3 weeks before rotation starts)

- Introduce yourself
- Confirm the start date (Plan to start on the 1st day of the month, regardless of what day it is)
- What time should I be there?
- Where should I park?
- Where should I go when I get there?/Where will I meet you?
- Is there anything special I need to bring with me? (i.e. proof of auto insurance for parking)
- Is there anything I should do in the couple of weeks to prepare? (i.e. review renal dosing adjustments, read particular articles, review certain disease states)
- Is there anything else I need to know ahead of time? (i.e. should I pack my lunch, etc.)

What to have with you on the 1st day of your rotation

- ONU student ID
- Lab coat
- Portfolio
 - Intern's license
 - Record of physical/immunizations
 - Proof of Health Insurance & Malpractice Insurance
 - Rotation specific objectives
 - Goals and Objectives you are planning to achieve with this rotation
- Advanced Pharmacy Practice Experiences Manual available at www.onu.edu/pharmacy/experiential/

Student Timeline for each APPE:

First Week

- Student to provide preceptor the Portfolio for review
- Student to review objectives for the rotation and be familiar with requirements of the rotation
- Student to discuss rotation schedule and identify any potential absences from the site
- Student to review requirements for projects, readings, and other assignments for the rotation
- Student to identify opportunities for completion of "Longitudinal Outcome Measures" and discuss with preceptor

Second Week/Third Week

- First Evaluation to be completed by Preceptor and reviewed with student
- Preceptor to review progress of student's assignments and projects
- Student approaching completion of all assignments and projects
- If rotation scheduled subsequently to current rotation, make contact with preceptor for next rotation

Fourth/Fifth Week/Last day

- Student to complete all projects and assignments
- Preceptor to complete final evaluation form in PHARMACADEMIC
 - Preceptor completes hours affidavit (orange sheet) (If preceptor is not a Pharmacist make sure his/her name, address, title and pertinent license information is written on the back of orange sheet)
- Preceptor to evaluate student's performance on respective Longitudinal Outcome Measures
- Student to complete self evaluation and Preceptor Evaluation Form and share with preceptor

Advanced Pharmacy Practice PharmD Student Evaluation Form

Ohio Northern University Raabe College of Pharmacy

Student Name: _____ Rotation & Site: _____

Preceptor: _____ Dates of Rotation: _____

Please evaluate the student in the following areas. Use the following scale for evaluation (N/A = Not Applicable):

1 Outcome is unacceptable <i>Student is unable to meet expectations</i>	2 Outcome needs significant development <i>Student requires frequent guidance to meet expectations</i>	3 Outcome needs development <i>Student requires occasional guidance to meet expectations</i>	4 Outcome needs refined <i>Student requires minimum guidance & consistently meets expectations</i>	5 Outcome is refined <i>Student independently & consistently exceeds expectations</i>
---	--	--	--	---

Desired Outcomes & Examples of Performance	First Evaluation	Final Evaluation	First and Final Evaluation Comments
1. Utilize a systematic problem-solving approach to patient care. <ul style="list-style-type: none"> Is able to obtain a complete drug history for assigned patients by collecting relevant information and establishing patient rapport. Clearly identifies clinical status of patient and severity of illness to serve as baseline for later assessment of efficacy/toxicity. Consistently & accurately identifies all drug-related problems. 	<input type="checkbox"/> Exceeds expectations <input type="checkbox"/> Meets expectations <input type="checkbox"/> Does not meet expectations	1 2 3 4 5 N/A	
2. Utilize the acquired knowledge base to assess the patient and formulate a therapeutic plan. <ul style="list-style-type: none"> Constructs an appropriate treatment and monitoring plan for all identified problems. Involves the patient in the therapy decision-making process when possible. Includes therapeutic endpoints and potential toxic effects with a given drug and dosage regimen. Selects appropriate monitoring parameters. 	<input type="checkbox"/> Exceeds expectations <input type="checkbox"/> Meets expectations <input type="checkbox"/> Does not meet expectations	1 2 3 4 5 N/A	
3. Demonstrate proficiency in recommending and implementing a therapeutic plan. <ul style="list-style-type: none"> Consistently develops and presents appropriate therapy options with rationale(s). Prioritizes problems depending on significance and addresses appropriately. Identifies adverse drug events with treatment and prevention strategies. Takes into account relevant differences in cultural, social, economic, political, and scientific viewpoints between the practitioner and patient. 	<input type="checkbox"/> Exceeds expectations <input type="checkbox"/> Meets expectations <input type="checkbox"/> Does not meet expectations	1 2 3 4 5 N/A	
4. Identify and evaluate the current literature and applies this information to patient care. <ul style="list-style-type: none"> Identifies and clarifies drug information questions. Literature search is thorough with sources identified. Synthesizes response from available sources and accurately conveys information. 	<input type="checkbox"/> Exceeds expectations <input type="checkbox"/> Meets expectations <input type="checkbox"/> Does not meet expectations	1 2 3 4 5 N/A	

<p>5. Effectively communicate, both verbally and in writing, with patients and other health care providers.</p> <ul style="list-style-type: none"> Effectively counsels patients without prompting. Presentations are consistently well organized and progress in a logical manner. Effective group presentation skills. 	<input type="checkbox"/> Exceeds expectations <input type="checkbox"/> Meets expectations <input type="checkbox"/> Does not meet expectations	1 2 3 4 5 N/A	
<p>6. Demonstrate self-learning and self-assessment abilities and habits.</p> <ul style="list-style-type: none"> Understands the need for, and development of, lifelong learning habits to maintain professional competence and personal growth. Regularly self-assess learning needs and engages in self-imposed learning activities to further his/her ongoing personal/professional growth. Recognizes the importance of research and the role of the pharmacist in research. 	<input type="checkbox"/> Exceeds expectations <input type="checkbox"/> Meets expectations <input type="checkbox"/> Does not meet expectations	1 2 3 4 5 N/A	
<p>7. Demonstrate leadership abilities.</p> <ul style="list-style-type: none"> Student uses appropriate interpersonal and inter-group behaviors during interactions with patients, healthcare providers, and the public. 	<input type="checkbox"/> Exceeds expectations <input type="checkbox"/> Meets expectations <input type="checkbox"/> Does not meet expectations	1 2 3 4 5 N/A	
<p>8. Demonstrate professionalism</p> <ul style="list-style-type: none"> Demonstrates professional behavior, interest and motivation, and shows respect towards others. Accurately completes assignments in a timely manner. 	<input type="checkbox"/> Exceeds expectations <input type="checkbox"/> Meets expectations <input type="checkbox"/> Does not meet expectations	1 2 3 4 5 N/A	
<p>9. Demonstrate proficiency in the role of the pharmacy practitioner, as a member of the health care team, in provision of quality patient care.</p> <ul style="list-style-type: none"> Volunteers, questions, and comments frequently without distracting from patient discussion. Is able to independently identify activities, completes documentation, and discusses the impact of those actions on patient outcomes. 	<input type="checkbox"/> Exceeds expectations <input type="checkbox"/> Meets expectations <input type="checkbox"/> Does not meet expectations	1 2 3 4 5 N/A	
<p>10. Demonstrate ability to conduct further research and/or improving pharmacy services in the future.</p> <ul style="list-style-type: none"> Pursues answers to research questions to improve patient care. Identifies methods to enhance pharmacy services. 	<input type="checkbox"/> Exceeds expectations <input type="checkbox"/> Meets expectations <input type="checkbox"/> Does not meet expectations	1 2 3 4 5 N/A	
Total Score (If some outcomes were not evaluated, standardize to 50 points)			

YES, I have reviewed the Student's Professional Portfolio and Self-Evaluation

Number of Hours Completed on Rotation _____

Additional Comments:

(Circle Grade Earned) (In general the grading scale followed by ONU's Office of Experiential Education is: 90-100% = A; 80-89% = B; 70-79% = C; <70% = F).

--	--	--	--

Preceptor Signature _____ Date _____ Student Initials _____

Site and Preceptor Evaluation Form
Ohio Northern University Raabe College of Pharmacy

Rotation Site _____ Month/Year of Rotation _____

Rotation Preceptor _____ Rotation Type _____

Name of Student _____

Please read each of the statements carefully, and then indicate your level of agreement or disagreement:

	Strongly agree	Agree	Neutral	Disagree	Strongly disagree	Not Applicable
Orientation to the rotation - Preceptor/Mentor/Instructor:						
Communicated clearly goals and objectives of the rotation	5	4	3	2	1	N/A
Reviewed the college expectations with me (e.g. longitudinal outcomes, portfolio, patient communication evaluation form)	5	4	3	2	1	N/A
Introduced me to the other personnel, provided directions for faculties at the site, and contact information	5	4	3	2	1	N/A
Assessed my abilities, needs, and career goals	5	4	3	2	1	N/A
Gave me specific assignments	5	4	3	2	1	N/A
Provided a monthly calendar and/or clearly defined a timeline for specific tasks (i.e., scheduled meetings and presentations)	5	4	3	2	1	N/A
Emphasized to me performance standards (i.e., my daily responsibilities, reporting medication-related problems, patient history, physical assessment, therapeutic regimen modification, journal club)	5	4	3	2	1	N/A
Completion of the rotation objectives:						
The site provided sufficient opportunity for me to meet all the <u>general</u> objectives	5	4	3	2	1	N/A
The site provided sufficient opportunity for me to meet all of the <u>site-specific</u> objectives	5	4	3	2	1	N/A
The site provided an opportunity to collaborate with other professionals	5	4	3	2	1	N/A

	Strongly agree	Agree	Neutral	Disagree	Strongly disagree	Not Applicable
Resources were adequate to complete the rotation objectives	5	4	3	2	1	N/A
Resources were readily available to complete the rotation objectives	5	4	3	2	1	N/A
My preceptor or mentor was sufficiently accessible to facilitate attainment	5	4	3	2	1	N/A
My preceptor or mentor spent sufficient time with me to guide me (please specify contact hrs/wk _____ hrs/wk)	5	4	3	2	1	N/A
Stimulated problem solving through interaction	5	4	3	2	1	N/A
Had an organized approach to precepting	5	4	3	2	1	N/A
Treated me with respect	5	4	3	2	1	N/A
Promoted an environment conducive for independent learning	5	4	3	2	1	N/A
Providing feedback – Preceptor/Mentor/Instructor:						
Provided me with feedback on my performance frequently and in a timely manner	5	4	3	2	1	N/A
Acknowledged my strengths and worked with me to fortify my areas of weakness	5	4	3	2	1	N/A
Rated my performance based on interactions and feedback from other professionals	5	4	3	2	1	N/A
Gave me feedback that was concise	5	4	3	2	1	N/A
Focused on my performance and not only my intentions	5	4	3	2	1	N/A

What did you like about the site?

What suggestions for improvement do you have for the site?

What did you like about the preceptor?

What suggestions for improvement do you have for the preceptor?

Signature _____ **Student** _____ **Date** _____



OHIO NORTHERN UNIVERSITY
Longitudinal Outcome Measures
Assessment Form

Ohio Northern University Raabe College of Pharmacy

Student Name: _____

- 5= Outcome is refined** (The student consistently, independently, & satisfactorily completes assigned tasks)
- 4= Outcome needs refined** (The student requires minimal prompting to satisfactory complete assigned tasks)
- 3= Outcome needs development** (The student requires occasional guidance to satisfactory complete assigned tasks)
- 2= Outcome needs significant development** (The student requires regular guidance to satisfactory complete assigned tasks)
- 1= Outcome is unacceptable** (The student is unable to satisfactory complete assigned tasks)

A. Patient Care Activities (Each outcome must be completed TWICE during the nine rotation sequence)

Patient Care Activity	First Evaluation	Preceptor	Date	Second Evaluation	Preceptor	Date
Identify and collect appropriate drug-related monitoring parameters for each assigned patient • Utilizing EBM	1 2 3 4 5			1 2 3 4 5		
Maintain an adequate patient data base for each assigned patient	1 2 3 4 5			1 2 3 4 5		
Identify and prioritize drug-related problems for each assigned patient	1 2 3 4 5			1 2 3 4 5		
Assess the appropriateness of each assigned patient's drug therapy	1 2 3 4 5			1 2 3 4 5		
Construct a detailed pharmacotherapeutic plan for each assigned patient	1 2 3 4 5			1 2 3 4 5		
Present all patient data in a concise and meaningful fashion	1 2 3 4 5			1 2 3 4 5		
Provides evidence-based regimens and monitoring plans for each patient	1 2 3 4 5			1 2 3 4 5		
Obtain and write-up a patient medication history	1 2 3 4 5			1 2 3 4 5		
Provide medication information to a unique cultural and socioeconomic diverse patient	1 2 3 4 5			1 2 3 4 5		
Provide a recommendation and counseling on an OTC product	1 2 3 4 5			1 2 3 4 5		
Counsel a patient on their medications	1 2 3 4 5			1 2 3 4 5		
Provide a recommendation and counseling on a OTC point of care testing device	1 2 3 4 5			1 2 3 4 5		
Provide a recommendation for a Complementary or a alternative medication/product or therapy	1 2 3 4 5			1 2 3 4 5		
Provide a verbal therapeutic plan recommendation to another health-care professional (i.e. physician, RN, PA) {Interprofessional}	1 2 3 4 5			1 2 3 4 5		
	1 2 3 4 5			1 2 3 4 5		
Perform medication reconciliation for patients	1 2 3 4 5			1 2 3 4 5		
Physical Assessment Activity	First Evaluation	Preceptor	Date	Second Evaluation	Preceptor	Date
Interpret diagnostic tests results for patient/caregiver/or preceptor	1 2 3 4 5			1 2 3 4 5		
Take a patient's blood pressure	1 2 3 4 5			1 2 3 4 5		
Take a patient's pulse	1 2 3 4 5			1 2 3 4 5		
Asses a patient's peripheral edema	1 2 3 4 5			1 2 3 4 5		
Take a patient's respiratory rate	1 2 3 4 5			1 2 3 4 5		
Assess a patient's temperature	(Evaluate 1 time)			1 2 3 4 5		
Provide an optimal pain management or palliative care plan for a patient	(Evaluate 1 time)			1 2 3 4 5		
Assess an ECG (EKG)	(Evaluate 1 time)			1 2 3 4 5		
Observe a Code in Health-Care Setting	(Evaluate 1 time)			1 2 3 4 5		
Observe a Health Care professional perform a full physical examination and assess results	(Evaluate 1 time)			1 2 3 4 5		

B. Assessment/Intervention Activities (Each outcome must be completed TWICE during the nine rotation sequence)

Assessment Activities	First Evaluation	Preceptor	Date	Second Evaluation	Preceptor	Date
Assess a creatinine clearance for an adult	1 2 3 4 5			1 2 3 4 5		
Assess a creatinine clearance for a child/infant	1 2 3 4 5			1 2 3 4 5		
Assess a creatinine clearance for a renally insufficient patient	1 2 3 4 5			1 2 3 4 5		
Assess a body surface area (BSA) for an adult	1 2 3 4 5			1 2 3 4 5		
Assess an ideal body weight (IBW) for an adult	1 2 3 4 5			1 2 3 4 5		
Intervention Activities	First Evaluation	Preceptor	Date	Second Evaluation	Preceptor	Date
Make a warfarin dosage adjustment based on patient parameters (e.g. INR)	1 2 3 4 5			1 2 3 4 5		
Recommend empiric antibiotic therapy	1 2 3 4 5			1 2 3 4 5		
Recommend antibiotic therapy based upon a culture and sensitivity	1 2 3 4 5			1 2 3 4 5		
Determine monitoring parameters for a patient being treated for an infectious disease	1 2 3 4 5			1 2 3 4 5		
Adjust a drug dose in a patient with renal insufficiency	1 2 3 4 5			1 2 3 4 5		
Assess the significance of a drug-drug interaction	1 2 3 4 5			1 2 3 4 5		

C. Education/Research Activities (Each outcome must be completed ONCE during the rotation sequence).

Educational/Research Activities	Evaluation	Preceptor	Date
Assist in explaining to a patient or caregiver their health-insurance options	1 2 3 4 5		
Prepare a written pharmacokinetic consultation	1 2 3 4 5		
Prepare a handout for case presentation	1 2 3 4 5		
Prepare an article for a newsletter or publication	1 2 3 4 5		
Prepare a patient education sheet	1 2 3 4 5		
Prepare a written drug information response in a practice setting	1 2 3 4 5		
Provide options for medication shortage	1 2 3 4 5		
Provide a formal case presentation	1 2 3 4 5		
Provide an education presentation to pharmacists	1 2 3 4 5		
Provide an education presentation to other health care professionals	1 2 3 4 5		
Lead a Journal Club discussion	1 2 3 4 5		
Complete a Drug Utilization Project	1 2 3 4 5		
Participate in a Patient/Medication Safety Review or error reduction program	1 2 3 4 5		
Develop a community-based educational initiative (Poison Prevention, Immunizations, Tobacco cessation, Wellness/Disease Prevention)	1 2 3 4 5		
Discuss or Implement, evaluate, and obtain reimbursement for MTM services	1 2 3 4 5		
Participate in a discussion of genetic/genome basis of disease, drug development, and/or the genetic alterations in metabolism	1 2 3 4 5		
Participate in a discussion of toxic exposure, poison control centers and the pharmacy's role for emergency preparedness	1 2 3 4 5		
Participate in a discussion of a pharmacist role in ethical issues related to any of the following topics: end of life care, professional behavior, clinical research, and pharmacy current event/hot button issue	1 2 3 4 5		

Preceptor Signatures

Rotation 1 _____

Rotation 4 _____

Rotation 7 _____

Rotation 2 _____

Rotation 5 _____

Rotation 8 _____

Rotation 3 _____

Rotation 6 _____

Rotation 9 _____

Student Self-Evaluation Form

Ohio Northern University Raabe College of Pharmacy

Student Name _____

Site Name _____

Preceptor Name _____

Dates of Rotation _____

Please evaluate yourself on each desired outcome. This form should be discussed with your preceptor and included in your Professional Portfolio.

Desired Outcomes	Evaluation (Circle)
1. Utilize a systematic problem-solving approach to patient care. <ul style="list-style-type: none"> • Is able to obtain a complete drug history for assigned patients by collecting relevant information and establishing patient rapport. • Clearly identifies clinical status of patient and severity of illness to serve as baseline for later assessment of efficacy/toxicity. • Consistently & accurately identifies all drug-related problems. 	Always Usually Sometimes Rarely Never
2. Utilize the acquired knowledge base to assess the patient and formulate a therapeutic plan. <ul style="list-style-type: none"> • Constructs an appropriate treatment and monitoring plan for all identified problems. • Involves the patient in the therapy decision-making process when possible. • Includes therapeutic endpoints and potential toxic effects with a given drug and dosage regimen. • Selects appropriate monitoring parameters. 	Always Usually Sometimes Rarely Never
3. Demonstrate proficiency in recommending and implementing a therapeutic plan. <ul style="list-style-type: none"> • Consistently develops and presents appropriate therapy options with rationale(s). • Prioritizes problems depending on significance and addresses appropriately. • Identifies adverse drug events with treatment and prevention strategies. • Takes into account relevant differences in cultural, social, economic, political, and scientific viewpoints between the practitioner and patient. 	Always Usually Sometimes Rarely Never
4. Identify and evaluate the current literature and applies this information to patient care. <ul style="list-style-type: none"> • Identifies and clarifies drug information questions. • Literature search is thorough with sources identified. • Synthesizes response from available sources and accurately conveys information. 	Always Usually Sometimes Rarely Never
5. Effectively communicate, both verbally and in writing, with patients and other health care providers. <ul style="list-style-type: none"> • Effectively counsels patients without prompting. • Presentations are consistently well organized and progress in a logical manner. • Effective group presentation skills. 	Always Usually Sometimes Rarely Never
6. Demonstrate self-learning and self-assessment abilities and habits. <ul style="list-style-type: none"> • Understands the need for, and development of, lifelong learning habits to maintain professional competence and personal growth. • Regularly self-assess learning needs and engages in self-imposed learning activities to further his/her ongoing personal/professional growth. • Recognizes the importance of research and the role of the pharmacist in research. 	Always Usually Sometimes Rarely Never
7. Demonstrate leadership abilities. <ul style="list-style-type: none"> • Student uses appropriate interpersonal and inter-group behaviors during interactions with patients, healthcare providers, and the public. 	Always Usually Sometimes Rarely Never
8. Demonstrate professionalism <ul style="list-style-type: none"> • Demonstrates professional behavior, interest and motivation, and shows respect towards others. • Accurately completes assignments in a timely manner. 	Always Usually Sometimes Rarely Never
9. Demonstrate proficiency in the role of the pharmacy practitioner, as a member of the health care team, in provision of quality patient care. <ul style="list-style-type: none"> • Volunteers, questions, and comments frequently without distracting from patient discussion. • Is able to independently identify activities, completes documentation, and discusses the impact of those actions on patient outcomes. 	Always Usually Sometimes Rarely Never
10. Demonstrate ability to conduct further research and/or improving pharmacy services in the future. <ul style="list-style-type: none"> • Pursues answers to research questions to improve patient care. • Identifies methods to enhance pharmacy services. 	Always Usually Sometimes Rarely Never

Patient Communication Evaluation Form
Ohio Northern University Raabe College of Pharmacy

Student Name: _____ Date: _____

General Intro/Opening	Not Done	Done Poorly	Average	Well	Outstanding
1. Introduces him/herself	0	1	2	3	4
2. Greets patient by name	0	1	2	3	4
3. Elicits patient's reason for visit using open-ended questions	0	1	2	3	4

Comments: _____

Specific Case-Related Questions:	Not Done	Done Poorly	Average	Well	Outstanding
1. Obtained patient's medication history (Rx, OTC, Herbal)	0	1	2	3	4
2. Obtained patient's medical conditions	0	1	2	3	4
3. How well did the student communicate?	0	1	2	3	4
4. Was the student able to generate a specific drug question?	0	1	2	3	4
5. Did the student respond satisfactorily to the needs and problems presented by the patient?	0	1	2	3	4

Comments: _____

Overall Impression	Not Done	Done Poorly	Average	Well	Outstanding
1. Rate the extent to which the student demonstrated an organized approach to the patient.	0	1	2	3	4
2. Rate the extent to which the student showed a courteous and compassionate toward the patient	0	1	2	3	4
3. Did the student utilize his/her time well?	0	1	2	3	4
4. Rate the content of the interaction.	0	1	2	3	4
5. Rate the overall communication process.	0	1	2	3	4

Evaluator: _____ Total Score: _____

Ohio Northern University Raabe College of Pharmacy
Ohio Northern University, Raabe College of Pharmacy
Assessment of Pharm D. Candidate Professionalism

Pharm D Candidate Name: _____ RotatioSite/Type: _____ Date: _____

Directions: Please assess the Pharm D Candidate using the scale below. If an item is not applicable or you are unable to judge an area, please circle N/A (not applicable) CJ (cannot judge). Please elaborate or provide specific examples when appropriate.

1= Poor 2= Fair 3= Good 4= Very Good 5= Exemplary NA/CJ

Reliability/ Work Habits:

1 2 3 4 5 NA/CJ

Not conscientious about responsibilities,
Often tardy, unwilling to assist with usual
work or absent from assigned duties

Conscientious about duties and responsibilities,
always prompt, willing to regularly assist and
volunteers to help others

Comments: _____

Compassion/Empathy:

1 2 3 4 5 NA/CJ

Does not recognize or respond
To psychosocial aspects or illness,
Inadequate recognition of patients and
Families needs to comfort and help,
Develops inappropriate emotional
involvement

Recognizes and responds to psychosocial aspects of
illness, always appreciates patients and families needs
for comfort and help, avoids inappropriate emotional
involvement.

Comments: _____

Responsibility/Motivation:

1 2 3 4 5 NA/CJ

Does not accept responsibility for own
actions and decisions. Does not respond
to feedback, argumentative.

Fully accepts responsibility for own
actions and decisions. Responds to
Feedback and works to improve.

Comments: _____

Teamwork:

1 2 3 4 5 NA/CJ

Does not demonstrate ability to work as a
Part of a team, dismisses other's suggestions
and disregards abilities of others. Often rude
or obnoxious, hard to work with.

Demonstrates strong ability to work as part of a
team, listens attentively to other's suggestions,
recognizes abilities of others. Pleasant, personable
Easy to work with.

Comments: _____

Interpersonal/Communication Skills:

1 2 3 4 5 NA/CJ

Does not express self clearly, tends to be harsh or abusive, often impolite and inconsiderate.

Expresses self very well, not abusive or rude, always polite and considerate. Great communicator.

Comments: _____

Personal Appearance:

1 2 3 4 5 NA/CJ

Often fails to follow established dress code. Does not respond to feedback. Presents Risk to self and/or others.

Always follows established dress code. Often used as an example for others to emulate.

Comments: _____

Descriptive Words: (Please circle the word or words that best describe this Pharm D Candidate)

- | | | | | |
|----------------|---------------|---------------|-------------|-----------------|
| Abrasive | Conscientious | Impatient | Organized | Tactless |
| Apathetic | Considerate | Inconsiderate | Obnoxious | Undependable |
| Arrogant | Cooperative | Indifferent | Poised | Underperforming |
| Attentive | Dependable | Inept | Resourceful | Understanding |
| Capable | Efficient | Intelligent | Rude | Unfriendly |
| Careless | Friendly | Irresponsible | Sarcastic | Unintelligent |
| Clear-thinking | Honest | Logical | Sincere | Unorganized |
| Cocky | Hindrance | Mature | Tactful | Unscrupulous |
| Confident | Immature | Wise | | |

STERNGTHS: _____

SUGGESTIONS FOR IMPROVEMENT: _____

Would you recommend this Pharm D Candidate for a job? YES NO

Would you allow a family member be cared for by this Pharm D Candidate? YES NO

If no explain: _____

Evaluator's Name: _____ Signature: _____

If you feel any immediate attention (positive or negative) is needed, please contact the Office of Experiential Education immediately and return this form to:

Ohio Northern University
Raabe College of Pharmacy
Office of Experiential Education
525 South Main Street
Ada, OH 45810
Phone (419) 772-1866
Fax (419) 772-2720
p-parteleno@onu.edu

Student will retain a copy of this form for his/her portfolio.

Journal Club Evaluation Form

Student: _____ Article Title: _____

5 Accomplished	4 Developing Excellence	3 Acceptable, but Needs Development	2 Needs Significant Development	1 Remediation Required
Requires no prompting Detailed discussion Displays depth of understanding Highest level of achievement	Clarification needed with minor prompt Above average detail and understanding Accurate	Clarification needed on several prompts Average detail and understanding	Directed questioning to prompt information Detail with some understanding	Extensive clarification needed Limited detail Minimal Understanding Instructor has to intervene for accuracy of information

Desired Outcome	Points Earned	Factor x	Total	Comment
Detailed Description of Relevance:(15 points) <ul style="list-style-type: none"> ○ Identifies purpose and importance of trial ○ Explains background of trial ○ Demonstrates knowledge of other related pharmacy literature (Recent and related trials identified) ○ Selection of article, Journal affiliation/ review process 	1 2 3 4 5	3		
Detailed Overview: (20 points) <ul style="list-style-type: none"> ○ Study design ○ Methods ○ Patient Population ○ Length of trial 	1 2 3 4 5	4		
Detailed Discussion and Accurate Analysis: (15 points) <ul style="list-style-type: none"> ○ Statistics ○ Results ○ Conclusions 	1 2 3 4 5	3		
Evaluation of Clinical Trial: (20 points) <ul style="list-style-type: none"> ○ Strengths and Limitations (Accessed and critiqued) ○ Assessment of statistics (Accessed and critiqued) ○ Ability to formulate own conclusion; Compares them with author(s) 	1 2 3 4 5	4		
Application to Clinical Practice: (10 points) <ul style="list-style-type: none"> ○ Identifies further studies needed ○ Explains how trial impacts current practice 	1 2 3 4 5	2		
Ability to Answer Questions: (15 points) <ul style="list-style-type: none"> ○ Answers logically and accurately ○ Can think on the fly ○ May theorize if unsure, but specifies if unsure 	1 2 3 4 5	3		
Overall Presentation Delivery: (5 points) <ul style="list-style-type: none"> ○ Organization and Preparedness <ul style="list-style-type: none"> ● Handout is accurate and organized ● Information is accurate and concise ○ Communication and Presentation <ul style="list-style-type: none"> ● Pronunciation ● Confidence ● Eye contact ● Rate of speech ● Smooth flow and Presentation 	1 2 3 4 5	1		
TOTAL*Multiply the point (1-5) earned in each section by the factor to calculate point per outcome. Add section totals for final score out of 100.				Total Points

Evaluator: _____ Date: _____

Case Presentation Evaluation Form

Student: _____

Topic: _____

Date: _____

5 Accomplished	4 Developing Excellence	3 Acceptable, but Needs Development	2 Needs Significant Development	1 Remediation Required
Requires no prompting Detailed discussion Displays depth of understanding Highest level of achievement	Clarification needed with minor prompt Above average detail and understanding Accurate	Clarification needed on several prompts Average detail and understanding	Directed questioning to prompt information Detail with some understanding	Extensive clarification needed Limited detail Minimal Understanding Instructor has to intervene for accuracy of information

Patient Presentation	Points Earned	Factor X*	Total	Comments:
<ul style="list-style-type: none"> • Identification of: <ul style="list-style-type: none"> ○ Chief Complaint ○ History of present illness ○ Past medical history ○ Review of systems ○ Vital Signs ○ Physical exam ○ Chronological course adequately detailed 	1 2 3 4 5	5		
Pathophysiology <ul style="list-style-type: none"> • Pertinent sequelae, mechanism • Signs/symptoms reviewed 	1 2 3 4 5	3		
Drug Therapy <ul style="list-style-type: none"> • Understands patient's therapy, links problems • Understands drugs' mechanism of action and rational for use • Anticipated common/serious interactions and adverse events • Pertinent kinetics/dosing considerations 	1 2 3 4 5	5		
Monitoring <ul style="list-style-type: none"> • Appropriate parameters to assess safety/efficacy • Defines endpoints of therapy 	1 2 3 4 5	3		
Patient Information/Counseling <ul style="list-style-type: none"> • Explain purpose(s) of therapy • Instruction for drug use • Side effect/precautions communicated • Other patient action(e.g., blood glucose testing) • Non-pharmacological elements (if appropriate) 	1 2 3 4 5	5		
Style of Presentation <p>Organization</p> <ul style="list-style-type: none"> • Topic was relevant to practice • Logical information sequence • Appropriate continuity of presentation • Appropriate balance of emphasis • Appropriate utilization of time allotted <p>Visual Aids/Handouts</p> <ul style="list-style-type: none"> • Well organized handouts presented to audience • Clear and legible • Complemented the presentation; not read directly • Utilization of Primary Literature and Evidence Based Medicine • References in correct format and complete <p>Verbal Presentation/Delivery</p> <ul style="list-style-type: none"> • Clear, audible speech (easy to understand) • No distracting mannerisms • Eye contact with audience • Ability to handle questions • Clear explanation/articulation of concepts • Minimal use of space fillers (e.g. "umm", "yea") 	1 2 3 4 5	3		

*Please multiply the Points Earned by the Factor to get the Total for each section
 Evaluator's Name: _____

Total Score: _____

Absence Form: Advanced Pharmacy Practice Experiences

Student Name: _____

Date of Absence: _____

Reason for Absence: _____

Plans/Description of how the rotation hours are going to be made-up:

Student's Signature: _____ Date: _____

Preceptor's Signature: _____ Date: _____

I agree with the above action plan to make-up hours missed from the rotation.

Preceptor's Signature: _____ Date: _____

I do not agree with the above action plan to make-up hours missed from the rotations. The student will need to do the following to consider the hours complete:

Please fax or email the completed form to Office of Experiential Education within 24 hours of a missed day.

**Ohio Northern University
Raabe College of Pharmacy
Office of Experiential Education
Fax: 419-772-2720**