

2ND PROFESSIONAL YEAR
INTRODUCTORY PHARMACY PRACTICE EXPERIENCE MANUAL

PhPr 4604 Institutional IPPE
2011



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The fundamental goal of the experiential pharmacy education program is to provide structured, practical and closely supervised, professional program experiences that enable the student to develop and apply skills and information previously presented in formal course work in order to better assume his/her future role as a competent pharmacist. The student is expected to integrate his basic sciences and clinical background into an actual practice setting under the Preceptor's guidance and instruction. This includes giving the student the opportunity to further refine professional judgment, practice competency, and technical skills. The Institutional IPPE takes place at the end of the second professional year.

The Institutional IPPE is coordinated by the Experiential Education Office. For any questions or concerns related to this experience, please contact:

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2nd PROFESSIONAL YEAR - INTRODUCTORY PHARMACY PRACTICE EXPERIENCE PhPr 4604 Institutional IPPE

Description

Using select hospital/institutional pharmacies and competency based objectives, students will gain an appreciation for the profession of pharmacy as practiced in the institutional setting. Through participation in daily operations, students will develop professional attitudes, judgment, and skills needed to function in this setting.

Experiential Hours

At a minimum, students will be expected to be *on site* forty (40) hours each week and accumulate a total of 160 hours during the rotation (equivalent to 8 hours per day for 4 weeks). Actual hours on site shall be as assigned by the preceptor. In some instances experiential hours will be scheduled to conform to site activities (e.g. weekends, early morning and late afternoon).

Policy for interaction

Students should contact the Preceptor/Faculty associated with IPPEs via their office phone or email. If unable to reach the individual, students may contact the Hospital Experiential Director or Assistant Dean for Experiential Education by phone or email.

Any concerns, questions, or procedural matters related to this course should be addressed in the following order of progression: the Preceptor, Experiential Director or Assistant Dean for Experiential Education, and finally the Dean's office.

The course syllabus is a general plan for the course; the syllabus may be modified at any point during the semester and deviations communicated to the class. Any changes to the syllabus will be communicated orally at the earliest possible class meeting as well as electronically through electronic mail distribution.

Attendance

There are no excused absences and no recognized student holidays for experiential course work. In case of illness, students must: a) call the Dean's Office (501) 686-5557, AND b) call the preceptor as early as possible on the day that will be missed. If a student anticipates being absent from the experience on a specific date (e.g., job/residency interview, college sponsored meeting/function during rotation hours, other course's requirements, etc.), he or she must make arrangements with the preceptor prior to that date. A minimum of 160 hours is required for each experience; therefore, it is the student's responsibility to reschedule hours missed with the preceptor's approval. If a student is sick or absent for more than one fourth of any rotation, he or she may complete the rotation only with permission of the preceptor and the Experiential Course Coordinator.

Emergency

In the case of an emergency, the student should call the Hospital Experiential Director immediately at (501) 765-6171. This does not include absence for routine illness, job interviews, flat tires, etc. These issues are addressed in the Attendance policy above.

Goals

The Institutional IPPE is an integral element of pharmacy training in view of the significant number of pharmacy practitioners who choose this field as a career path. This experience has the following goals:

- To process prescriptions in a manner compatible with state of the art hospital pharmacy practice
- To develop a concern for the patient's health and welfare
- To develop an appreciation for the impact of hospital pharmacy practice on the health care system and public health
- To foster the development of a responsible professional attitude and judgment
- To foster an appreciation for patient education regarding health and drug-related matters
- To provide a variety of exposures to pharmacy operation and different practitioner philosophies and problem solving skills
- To foster the application of didactic information to the hospitalized patient
- To provide practical experience in the operation and drug distribution systems of the hospital/institutional pharmacy practice site.
- To aid the student in the development of communication skills with the patient and health care professionals

Functions

The student will be introduced to and given instruction regarding the following hospital pharmacy practice functions:

- Dispensing of Prescriptions: Students will participate in receiving, verifying, checking for errors, selecting drug, filling, recording, filing and delivery of prescriptions to the patient. This includes interpretation of written orders, handling of patient records and understanding the application of pharmacy law.
- Compounding: Students will participate in preparation of different types of intravenous products (i.e. IV bag/admixture, syringe or piggyback) and development of appropriate aseptic technique.
- Use of technology: Students gain an appreciation for the technology used in the pharmacy for dispensing, compounding, etc.
- Drug and Product Information. There should be time for the student to identify/evaluate information about both prescription and non-prescription drugs. Each student will be expected to gain knowledge of general drug information including generic and trade names, common dosage forms, indications, side effects, interactions and patient counseling for the top 200 drugs dispensed.

Competency and Objective Expectations

Skills and experience gained during this IPPE have been divided into basic and intermediate levels. Students should experience and begin to develop proficiency with all the Basic level skills and activities. IPPE students may be exposed to the Intermediate level skills and activities but not at the expense of attaining proficiency with Basic level skills.

IPPE Competencies and Objectives

REQUIRED: BASIC	
Competencies	Required Skills and Activities
1. Become familiar with workflow in the pharmacy as well as medication delivery/administration (2.1,2.2)	<p>Describe how orders flow to the hospital pharmacy, are processed, and how medications are delivered throughout the institution.</p> <p>Acquaint the student with the following:</p> <ul style="list-style-type: none"> • Department organizational chart • Staffing hours and patterns • Responsibilities of various staff to the department, patients, and other departments • How pharmacy interacts with other departments • Laws and policies related to practice in your institution
2. Read and process drug orders in professional, ethical, legal manner. (2.1,2.4)	<p>Give student ample experience dispensing unit dose, floor stock, emergency stock, individual orders.</p> <p>Instruct the student on the order entry process. Students must demonstrate they can read, interpret, and prepare drug orders.</p> <p>Instruct student on flow rate calculations, incompatibilities, intravenous access.</p>
3. Develop appropriate aseptic technique in preparing intravenous preparations.(2.1)	<p>Instruct the student on laminar flow hoods and on aseptic technique and allow ample experience to practice it. This technique should include at a minimum:</p> <ul style="list-style-type: none"> • Hands and arms scrubbed prior to hood entry. • Hood cleaned properly prior to medication preparation. • Medications, solutions, and supplies properly aligned in hood before mixing. • All vials and entry ports swabbed correctly (alcohol dried). • Work beyond six-inch area. • No apparent touch or airflow contamination. <p>Instruct student on differences between each of the following products and allow ample practice preparing each product*:</p> <ul style="list-style-type: none"> • IV bag/admixture • Syringe • Piggyback <p><i>*Final product should include at a minimum correct label information, correct amount of drug used, appropriate amount of diluent used, final volume correct, proper placement of IV label on finished product, all products lined up for check (syringes pulled back to display amount injected), and IV area left clean and tidy.</i></p>
4. Become familiar with the Department's technology (i.e., informatics system, automated dispensing/formulary management equipment)(2.2)	<p>Understand how computer systems help manage medication use</p> <p>Demonstrate and highlight for the student any automated dispensing methods or equipment you use (i.e., robotics, Pyxis® MedSystem etc., if available).</p>
5. Be exposed to inventory control, especially for controlled substances (2.2)	<p>Show the student inventory control and purchasing procedures.</p> <ul style="list-style-type: none"> • Demonstrate drug ordering, check in, returns, and charging/crediting (including differences between CII's and other medications). • Explain inventory turnover rates (or other methods for analyzing inventory as related to your institution). • Show student security procedures for controlled substances.
6. Become familiar with and use commonly used drug/medical references (1.3,2.3,3.2)	<p>Show the student the commonly used drug/medical references in the inpatient setting. Be sure to demonstrate circumstances in which each source would be used. Ask student to use these references to look up commonly needed information.</p>

OPTIONAL: INTERMEDIATE	
Competencies	Required Skills and Activities
1. Verbally relate the following information on the “Top 200” drug list (those used in the inpatient setting):	<p>Allow time throughout the rotation for the student to spend dispensing to become familiar with commonly used drugs in the inpatient setting. As you do this, quiz the student on the “Top 200” drug list:</p> <ul style="list-style-type: none"> • Trade/generic name • Therapeutic class • Dosage strengths available • Indication(s) • Mechanism of action • Drug interactions • Contraindications/precautions • Adverse effects • Parameters to monitor therapeutic response in community settings
2. Become familiar with appropriate technique for preparing: <ul style="list-style-type: none"> • Chemotherapy products. • Parenteral products (TPN). (2.1) 	<p>Instruct the student on vertical flow hoods and aseptic technique for chemotherapy. Instruct the student on compounding of complex fluids and/or TPN manually or with the use of micro- and/or macro-mixers.</p> <p><i>Because some sites do not prepare these products, a discussion of the process will suffice.</i></p>
3. Become familiar with and use commonly used drug/medical references. (1.3,2.3,3.2)	<p>Show the student the commonly used drug/medical references in the inpatient setting. Be sure to demonstrate circumstances in which each source would be used. Ask student to use these references to look up commonly needed information.</p> <ul style="list-style-type: none"> • Handbook of Injectable Drugs • American Hospital Formulary Service (AHFS DI) • Micromedex (if available at site) • Other sources such as Facts and Comparisons, Drug Interactions, etc.
4. Become familiar with the process of reporting adverse drug reactions and medication errors in the inpatient setting. (1.1,1.2,1.3)	<p>The student should be made aware of the adverse drug reaction (ADR) reporting system within the institution. Discuss the importance of and process for detecting, reporting, and tracking ADR’s.</p> <p>Discuss the common reasons for medication errors, where the errors commonly occur, and systems in place to address/avoid errors.</p>
5. Become familiar with nursing drug administration. (2.4)	<p>If time allows, have the student spend some time with the nursing staff during medication administration rounds. Discuss with nursing the aspects involved in administering the medications to patients in different states of health and consciousness, maintaining the medication administration record (MAR), and ways to avoid medication errors.</p>

E*Value

E*Value can be accessed at www.e-value.net. Pending evaluations are available on the initial screen. Schedules can be retrieved through E*Value by clicking on "Reports" then "Schedules" then "Rosters" on the left hand tool bar. This will bring up a Roster Schedule Report page. It is not necessary to make a selection under the Curriculum field. "Start date" and "End date" should be changed to the appropriate time frame. The schedule is then generated by clicking on Next.

Grading

The preceptor is a member of the faculty of the College of Pharmacy (COP). He/she is expected to assess student performance of the outlined practice competencies using the COP IPPE Evaluation rubric. **Approximately mid-way through the rotation, deficiencies are to be discussed with the student. Every effort should be made to correct any deficiencies before a student completes the assigned experience.** The preceptor's evaluation constitutes 100% of the assessment of competency.

At the middle and end of the experience, the preceptor will use the Introductory Pharmacy Practice Experience (IPPE) EVALUATION RUBRIC in the online grading system E*Value. Students are required to make a score of 3 or higher on each item on the achievement based assessment, fulfill the IPPE course requirements, and complete all other required documentation prior to receiving credit for the IPPE. The IPPE Evaluation Rubrics will automatically become available at the appropriate times of the experience.

Incomplete Grade

A grade of "I" (incomplete) is assigned when a student, for reasons sufficient to the preceptor, has not been able to complete some vital portion of the experience (IPPE or APPE). The student must finish the requirements of the experience at the same practice site and at the discretion of the preceptor. For the IPPE, all work must be completed before the day of registration for the upcoming Fall semester. If the work is not completed by the designated time, the grade will become an "F" unless the Dean, in conjunction with the preceptor and the appropriate experiential course coordinator, grants an extension of time.

Failing Grade

If a student fails an experience (IPPE or APPE), he/she must repeat that experience. No experience may be attempted more than twice. In the event that a student does not achieve the expected level of competency at the end of the IPPE, the Scholastic Standing Committee will determine whether credit will be granted for the IPPE or a recommended Individualized Education Program (IEP) will be developed as described in the IPPE Scholastic Rules. For students who are not awarded Credit for an IPPE, failure to successfully complete an IEP will result in an "F" and will be viewed as the student's second attempt to complete the IPPE. A second "F" or "WF" grade during the IPPE portion of the curriculum will result in the student being academically dismissed from the College. If a student successfully remediates an experience (IPPE or APPE) and fails a second experience (IPPE or APPE), he/she will be dismissed from the College of Pharmacy.

Withdrawal

1. Preceptors may request that a student be removed, as a result of behavior or performance, from a practice site. Students who are removed from an IPPE will receive a "WF" and will have to repeat the experience at the discretion of the Office of Experiential Education and practice site availability. Students who are removed from a site at the request of a preceptor may be required to complete and pass a remediation plan prior to reentering the IPPE. If the student has been removed because they have been deemed potentially harmful to patient care, the student must pass a remediation plan prior to returning to the IPPE.
2. A student who withdraws at any time during an experience (IPPE or APPE clerkship) and is failing at the time of the withdrawal will be given a "WF" (withdraw failing). The "WF" will be regarded as a failing grade. If the student receives a second "WF" or "F" grade in any experience, he/she will be dismissed from the College of Pharmacy. A student may repeat only one experience to remove a grade of "F" or "WF".
3. If a student withdraws at any time during an experience (IPPE or APPE) and at that time has a passing grade as judged by the preceptor, he/she will receive a grade of "WP" (withdraw passing). At the discretion of the appropriate experiential course coordinator, the student may repeat the experience in which the "WP" was received, some part of that experience as designated by the preceptor or another experience so long as the student meets the experiential requirements for graduation.

Remediation of a Free-Standing Experience

For remediation of an "F" or "WF" grade in an experience, the following rules will be applied:

1. A student who fails an experience will be required to complete the same type of experience. The practice site and scheduled time for the repeat experience will be scheduled at the discretion of the appropriate coordinator and the College of Pharmacy according to availability.
2. A student may repeat the IPPE as a Summer course at the discretion of the IPPE coordinator provided that the second attempt in the IPPE will be completed before the day of registration for the Fall semester of the upcoming Professional Year. IPPEs must be successfully completed before the student may progress to the next academic year.
3. Tuition may be charged for additional or repeated IPPE courses and/or remediation.

Academic Dishonesty

Students are expected to abide by the Pledge of Professionalism and Honor Code. These documents can be found at http://www.uams.edu/cop/current_students/pdfs/honor_code.pdf. Students who commit academic dishonesty or professional misconduct during an IPPE may be given an "F" for the experience in which the violation occurred and/or the matter may be referred to the Honor Council and/or Scholastic Standing for review. Examples of academic dishonesty include but are not limited to plagiarism or cheating as defined in the student handbook.

Professionalism in the Experiential Learning Environment

Preceptors and site staff contribute their pharmacy and time to teach students how to practice pharmacy. These individuals allow the College of Pharmacy to place a student under the preceptor's tutelage. While the student is in the pharmacy, patients and other health professionals will recognize him or her as a part of that pharmacy; the student's conduct and actions will reflect upon the pharmacy. Students are expected to conduct themselves as professionals. The student will respect the operating procedures of the institution and the instructions of the preceptor.

Professional Attire

The student must be neat in appearance and maintain a professional decorum while on rotation. The student is required to be professionally attired at all times while *on site*, including a name tag, required identification and his/her pharmacy jacket, unless instructed otherwise by the preceptor. Although the term "professionally attired" can be interpreted differently, the following general guidelines should be followed:

- When contacting the preceptor prior to beginning the experience, students should ask if there is a dress code. If the site has a specific dress code, students are expected to abide by it. If a student does not abide by the site's dress code, the preceptor may require the student to leave and change into more professional attire before returning. The student is expected to make up any time lost. If there is not a specific dress code at the site, the student should use the preceptor's attire as a guide.
- If uncertain about a site's dress code (e.g. the first day), a safe attire would be slacks, dress shirt, and necktie for males and dress or slacks/appropriate top, skirt/appropriate top for females.
- Some types of clothing should be avoided. Examples include "hipster" style slacks, tops that reveal the mid-section, visible undergarments, "beach-style" footwear, and transparent clothing.
- Clothing should always be neat and clean.

Confidentiality: The pharmacy

The student will learn certain aspects of the pharmacy which should be kept confidential including pricing procedures and other aspects of operation. The preceptor is placing significant trust in the student by taking him or her into the pharmacy as a co-professional. The student must appreciate and respect this trust by not betraying the preceptor's confidence. **Violation of these confidences is grounds for immediate dismissal from the Experiential Program and may also result in additional disciplinary action as deemed necessary by the College of Pharmacy.** (See the College of Pharmacy Handbook- UAMS Confidentiality Policy for more details.)

Confidentiality: The patient

The student must keep confidential all information pertaining to the patient's health and any other information of a personal nature, which may be learned in the externship program. Discussion of any patient specific information must only be done in a professional manner and in an appropriate environment. **Violation of patient confidentiality is grounds for immediate dismissal from the Experiential Program and may also result in additional disciplinary action as deemed necessary by the College of Pharmacy.**

Loyalty

The student should exhibit loyalty to the pharmacy to which he or she is assigned. During this time, he or she should feel as a part of the organization.

Guidelines for Students

1. All students must attend the orientation to rotations offered by the Experiential Education Office prior to beginning the Introductory Pharmacy Practice Experiences.
2. Students are responsible for regularly monitoring their UAMS email messages, as this is the primary means of communicating important information in a timely manner. Students are responsible for maintaining a current UAMS email password throughout their academic experiences. If the password expires, the student must call the UAMS Technical Support Center at 501-686-8555.
3. If a student believes there is a personality conflict with the preceptor, or other problems with the experience which could affect the final grade, he or she should contact the Hospital Experiential Director immediately at (501) 603-1515.
4. Students are responsible for getting all evaluations and grades from the preceptor, including mid-term evaluation by the preceptor.
5. Students CANNOT do a rotation at a site where they have either received intern credit or worked before or during pharmacy school. Failure to notify the Experiential Education Office of a scheduling conflict of this nature is likely to delay the student's progression through academic course work and may result in disciplinary action.
6. The general policy of the UAMS College of Pharmacy is for students to complete all rotations within the State of Arkansas. Out-of-state rotations may be done only with approval from the Experiential Education Office. Students participating in out-of-state rotations must have and are responsible for obtaining an intern license from that state. Students should apply for the out-of-state intern license at least 6 months before the start of the rotation. Students are responsible for all expenses (travel, lodging, additional rotation fees, etc) for any rotation site, unless provided for by the rotation site (e.g. AHEC housing, I.H.S. rotations).

Student Requirements

Students must complete Midpoint and Final self-assessments using the IPPE Evaluation Rubric to enhance feedback discussions regarding student performance. These self-assessments must be submitted in E*Value.

Students must complete the Preceptor and Site Evaluation located in E*Value as the items relate to the individual preceptor and experiential site. It is important that this evaluation be completed within five working days of the last day of participation on the experience. Failure to submit a completed evaluation within five working days may result in a grade of Incomplete (see Incomplete Grade). Results from preceptor and site evaluations will be aggregated and forwarded to the preceptors without individual identification.

In addition to meeting the expectations set forth in this manual, students must comply with the College of Pharmacy Policies and Procedures Governing Students in the Experiential Program located in this document.

Guidelines for Preceptors

The preceptor is an integral and vital part of the total educational experience of the Doctor of Pharmacy student. This role cannot be overemphasized. In assuming the responsibility for training and educating students, the preceptor displays to the public, his/her peers, and other health professionals a commitment to the advancement of the profession through the provision of quality pharmaceutical care.

In assuming this role of teacher/mentor, the preceptor must foster the development of a strong sense of mutual admiration and professional courtesy. While working on a one-to-one basis, the preceptor assumes much more than a teacher or pharmacist role model. The preceptor must identify the student's strengths and weaknesses, while concomitantly providing an atmosphere whereby the student may grow intellectually as well as professionally. The preceptor must recognize that the student's greatest deficiency is inexperience, while the preceptor's greatest asset is knowledge through experience. The student may be able to share with the preceptor newly acquired clinical and scientific knowledge and, in turn, the preceptor will guide the student through the application of that knowledge to daily professional practice. The preceptor may therefore not only teach, but learn as well.

Matching the student's duties with his/her education and experience is an important task for both learning and public safety. Depending on the student's knowledge and experience, competencies may range from technical to highly professional functions. For purpose of supervision and instruction of the experiential portion of the UAMS COP curriculum, the range of learning activities/responsibilities is divided into: basic and intermediate. Preceptors should arrange learning experiences systematically into these levels as listed. Care should be taken to avoid assignment of complex practice tasks to the beginning student. Conversely, inhibiting the systematic progress based on previous accomplishments and demonstrated competencies from one level to the next are contradictory to good education practice. The levels of competency represent a conceptual framework and serve as guidelines to the preceptor and are not meant as finite categories. For the IPPE it is expected, at minimum, that students on this experience will perform at an expected level for basic activities/responsibilities with exposure to the intermediate level. The goal of the experiential program is to allow each student to perform at the highest level he/she is capable throughout the entire program.

Preceptor Requirements

The preceptor must:

- Hold a faculty appointment with the UAMS COP or be a registered Arkansas State Board of Pharmacy licensed Preceptor if the practice site is in Arkansas. Pharmacists whose preceptor certificate has expired need only to renew. Please call the Board (501-682-0190) for a renewal form.
- Maintain professional competency by fulfilling continuing education requirements as determined by the appropriate State Board of Pharmacy and be in good standing with the Board.
- Provide professional clinical services and exercise patient care responsibilities.
- Assure that the minimum training time of 160 hours and other experiential requirements are fulfilled during the scheduled time period.
- Supervise the student and review, in detail, expectations for the student with respect to appearance, attitude, site specific processes of prescription processing, and patient care responsibilities. (The primary preceptor may delegate some of these responsibilities to other qualified persons.)
- Allow adequate time for communication and be willing to discuss all aspects of professional practice in accordance with ethical, moral, and legal standards.
- Provide necessary support systems to allow an atmosphere of maximal/optimal learning for the student.
- Offer constructive criticism in a professional manner as well as praise for outstanding achievements.
- Not enter into any personal or professional relationship with a student that would jeopardize or interfere with objectivity or effective teaching. Not reimburse the student for services rendered, either directly or indirectly.
- Observe the law, uphold the dignity and honor of the profession, and accept its moral and ethical principles.
- Complete the IPPE evaluation rubric at the mid-point and conclusion of the experience, review the assessment with the student, and submit the completed rubric in E*Value. All assessment should be documented by the last day of the experience.

Guidelines for Sites

All experiential practice sites must be approved by the Experiential Education Office.

The institutional pharmacy should:

- Be at a hospital/institution accredited by the Joint Commission on Accreditation of Healthcare Organizations or other appropriate accrediting body. Meet all requirements of the most current section of pharmaceutical services, Joint Commission on Accreditation of Healthcare Organizations (Comprehensive Accreditation Manual for Hospital: the Official Handbook).
- Provide the student with activities, resources and conditions to allow the student to accomplish the behavioral and knowledge objectives of the rotation.
- Allow access to appropriate medical, nursing, and pharmacy records.
- Have an appropriate affiliation agreement in place with the COP.
- Ensure the Pharmacist who will supervise the student is a registered Preceptor by the Arkansas State Board of Pharmacy.¹
- Ensure the student does not receive monetary compensation from the Experiential Site.

¹ Pharmacists who have not been a Preceptor in the past should call the State Board of Pharmacy for information (501) 682-0190. **This applies to pharmacists practicing in Arkansas only.**

College of Pharmacy Policies and Procedures Governing Students in the Experiential Program

All Pharmacy students in the experiential program at any practice site must accept and adhere to the Policies and Procedures of that site. This may include, but is not limited to, random drug testing. According to the policies of the College of Pharmacy, all students must fulfill each of the following criteria for experiential activities:

1. The student must have a valid and current *Intern License* issued by the Arkansas State Board of Pharmacy. If the student has an experience outside of Arkansas, the student must obtain an intern license in that state as well.
2. The student is required to have a current health insurance policy.
3. The student must hold a current professional liability insurance policy (minimum insurance limits of \$1,000,000/\$3,000,000). Insurance is provided through Pharmacists Mutual insurance and is paid from student fee collections at Fall registration.
4. The student must possess current American Heart Association (AHA) Healthcare Provider Cardiopulmonary Resuscitation (CPR) Certification. Proof of certification must be presented at orientation to experiences.
5. The student must have a physical examination and current immunization record on file in the UAMS Employee Health/Student Preventive Health Service (EH/SPHS). The following vaccinations, history of illness, and/or titers are required for enrollment: Tetanus-diphtheria-pertussis (Tdap), Measles-Mumps-Rubella (MMR), Hepatitis B, and Varicella. The student may be required to provide proof of physical examination and current immunization records depending on experiential site. Copies may be obtained by calling the Health Center at 686-6565.
6. The student must adhere to the guidelines of the College of Pharmacy and to the assigned experiential site as to dress, responsibility, confidentiality, and conduct.
7. The student may not receive monetary compensation from any Preceptor or Experiential Site.
8. The student must have a current TB Skin Test on file with the UAMS EH/SPHS and adhere to UAMS monitoring protocol as described below.

Working with patients entails an occupational hazard of contracting tuberculosis due to inadvertent exposure to a person with unrecognized tuberculosis. Such new infection has a 5-10% chance of progressing to actual tuberculosis. For this reason, all students must be tested annually by way of a Tuberculin Skin Test (TST). All new students will have a TST at Fall registration, establish a baseline, and then annually thereafter as a condition of being a student at UAMS.

All new students require a baseline TST. The new student may provide documented proof of a TB skin test as long as it has been no longer than twelve months prior to UAMS hire date. This documented TST will count toward one of the two required readings of the baseline TST. Students who have been vaccinated with BCG should refer to the UAMS EH/SPHS for more specific guidance in these cases.

The baseline TST will include a two-step process if the new student has 1) never had a TST or has no documentation of TST, or 2) if it has been greater than twelve months since the new student had a documented, negative, TST reading result. The 1st TST will be placed at Fall registration. The two-step process will require the student to return within 10 – 21 calendar days for the 2nd placement and reading which will then be recorded as the baseline TST.

New students reporting prior positive TSTs must provide TST and chest radiography documented and confirmable proof. If no documented proof of a past positive is available, a TST will be placed and read with 48-72 hours. The student may request the TST be done with one-half dose (2.5 tuberculin units or 0.05ml). If the TST is positive, the reading will then be recorded in millimeters of induration for UAMS baseline records. However, the student must understand that, if the half dose test results in a negative TST, a 2nd placement of the full dose 0.10 ml, will be required with the results of the 2nd placement and reading being recorded as the baseline TST.

Students with existing medical conditions that prohibit them from participating in the TST process should contact EH/SPHS. Arrangements will be made in a confidential manner (with the Arkansas Department of Health) to complete the annual medical screening requirements. TST results are determined as follows:

- Students with an induration of 0-4mm will be recorded as negative. (A negative test does not rule out the presence of TB.)
- Students with a TST induration of 5-9mm will be considered intermediate. Intermediate skin tests will be repeated on the day of 1st reading with the 2nd placement and reading (recorded within 48-72) as the TST result.
- An induration of >5mm may be considered “positive” in the following groups:
 - Contact with an active case of TB
 - HIV positive persons
 - Chest x-rays consistent with old, healed TB
 - Recipients of organ transplants, and other immunosuppressed conditions (receiving the equivalent of > 15mg/day of prednisone for > 1 month)
- Students with a TST induration of ≥10 millimeters will be referred to the Arkansas Department of Health for further evaluation and preventive therapy if indicated. Chest radiography will be performed at the Pulaski County Health Unit and reviewed by a radiologist at the unit. Only the TB Control Officer for the State of Arkansas, or his designee, may determine the adequacy of a course of treatment, or documentation of treatment, resulting from a positive TST. Further information may be obtained from UAMS SPHS.

9. Students who receive needle stick or other sharp injuries or certain body fluid exposures will, on many occasions, need laboratory monitoring for a period of time. Additionally, the student may be offered appropriate medication therapy as in the case of HIV exposure. The cost of this monitoring will be paid by the institution and student insurance, not the student. This monitoring and the appropriate billing will be handled through SPHS. Students should contact SPHS immediately after such an injury occurs (or contact the Emergency Room if SPHS is not open). Full policy is available at <http://intranet.uams.edu/uh/Policy/Human%20Resources/hr401.htm>.
10. The use or possession of any illicit drug by any student while on University property or on a University affiliated assignment will not be tolerated as described by the campus drug-free workplace policy.² Any College of Pharmacy student who illegally uses, gives, sells or in any way transfers a controlled substance to another person, or manufacturers a controlled substance while involved in an Experiential Program rotation will be subject to immediate dismissal from the rotation and may also result in additional disciplinary action as deemed necessary by the College of Pharmacy. In some cases rotation sites may require random, mandatory drug screening. Students should anticipate that requests for participation in site specific screening may be made, and students on rotation at those sites will be expected to comply.

Failure to comply with these policies can result in dismissal from the College of Pharmacy.

² University of Arkansas for Medical Sciences - Policy on the Drug Free Workplace (Policy no. 860.1) Adopted by the Chancellor's Cabinet - 7/28/89).

UAMS Introductory Pharmacy Practice Experience Preceptor and Experiential Site Evaluation

Preceptor-of-Record: _____

Rotation Site: _____

Please use the following descriptions to rate scaled items.

[5 – Excellent] [4 – Good] [3 – Adequate/satisfactory] [2 – Inadequate/needs improvement] [1 – unacceptable]

Preceptor	Excellent					Unacceptable
1. Preceptor's interest in the student.	⑤	④	③	②	①	
2. Preceptor's availability to the student for help and advice.	⑤	④	③	②	①	
3. Preceptor's knowledge.	⑤	④	③	②	①	
4. Preceptor's ability to communicate/teach information to the student.	⑤	④	③	②	①	
5. Preceptor's ability to communicate information to the patient and/or other healthcare providers.	⑤	④	③	②	①	
6. Amount of time the preceptor actually spent with the student.	⑤	④	③	②	①	
7. Clarity and organization of the preceptor's manner of teaching.	⑤	④	③	②	①	
8. Preceptor's attempts to keep up with new trends and ideas.	⑤	④	③	②	①	
9. Preceptor as an example of honest & ethical practice.	⑤	④	③	②	①	
10. Professional attitude and motivation of the preceptor.	⑤	④	③	②	①	

If the answer to number 9 or 10 was 2 or less, please explain: _____

Orientation and Site

	Excellent			Unacceptable	
11. Orientation provided by the College.	⑤	④	③	②	①
12. Expectations of the preceptor were consistent with those explained in the manual and/or during the College's orientation.	⑤	④	③	②	①
13. Student was oriented to the pharmacy at the beginning of the rotation.	Yes	<input type="radio"/>		No	<input type="radio"/>
14. The preceptor reviewed the grading rubric at the beginning of this experience.	Yes	<input type="radio"/>		No	<input type="radio"/>
15. The preceptor went over the student's progress at the mid-point of this experience.	Yes	<input type="radio"/>		No	<input type="radio"/>
16. The preceptor used the grading rubric at the mid-point to guide his/her comments.	Yes	<input type="radio"/>		No	<input type="radio"/>
17. Exposure to the day-to-day operational aspects of the pharmacy.	⑤	④	③	②	①
18. Active involvement with the day-to day activities of the pharmacy.	⑤	④	③	②	①
19. Pharmacy staff was friendly/easy to work with.	⑤	④	③	②	①
20. Value of the experience gained in this IPPE.	⑤	④	③	②	①
21. Degree of satisfaction with this experience.	⑤	④	③	②	①
22. Would you recommend this site be used for future students?	Yes	<input type="radio"/>		No	<input type="radio"/>

Preceptor-of-Record: _____

Rotation Site: _____

Comments:

1. Has this rotation been of value to your professional development by increasing your professional judgment, practice competency, and technical skills? If so, in what way? If not, why?

2. If you could have spent more/less time doing a specific task/activity during this experience, what would you have liked to have spent more or less time doing?

More: _____

Less: _____

3. What recommendations can you make to this preceptor for improving his/her teaching?

4. What did you like most about this experience?

5. What should the College do to improve this experience?

6. Other comments:

Introductory Pharmacy Practice Experience (IPPE) EVALUATION RUBRIC for P1 Community and P2 Institutional IPPEs

*The student and preceptor each complete one copy of this form in E*Value at the appropriate time(s).*

P1 Community IPPE - Final Assessment (last day); P2 Institutional IPPE – Midpoint (end of week 2) and Final (last day) Assessments

Assessment Guidelines:

1. At the appropriate time (s), the preceptor reviews the student's performance to assess development of skills in each of the competency areas. The preceptor completes the IPPE Evaluation Rubric by entering a proficiency score for each item listed under the competency areas. The final page of the assessment includes written comments on strengths and areas in need of improvement with a suggested plan for continued student development. These assessments are formally reviewed with the student. The Midpoint assessment (P2 only) should occur at the halfway point of the experience, i.e. the end of the 2nd week. The Final assessment should occur on the last day of the experience.
2. The student completes self-assessment(s) at the appropriate time point(s) using the IPPE Evaluation Rubric and reviews the document with the preceptor during a formal meeting to discuss any discrepancy between the student's and preceptor's assessments.
3. By the last day of the IPPE, the assessments are documented in E*Value.
4. At the beginning of the next experiential activity, the student will review past assessments with the preceptor and discuss the activities on which the student will focus to further develop proficiency in the competency areas.
5. Preceptor and student assessments are reviewed by the Office of Experiential Education. If the student is not demonstrating adequate proficiency as outlined in the IPPE Grading and Assessment Procedure, the student will be contacted by the Assistant Dean for Experiential Education, and a remediation plan will be coordinated, as appropriate.
6. For successful completion of the IPPEs, Doctor of Pharmacy candidates must achieve a proficiency score of "3" for each of the items.
7. In the event that a student receives a 0, 1, or 2 for any item on the Final assessment, the Assistant Dean for Experiential Education in consultation with College administrators will make a recommendation to the Scholastic Standing Committee to determine whether the student should complete an Individualized Education Program (IEP) before receiving credit for the IPPE. The committee may request a consultation with the student's preceptors and may request that the student demonstrate his/her ability in any identified items. If the committee determines that the student has not yet demonstrated competency, a recommended IEP will be forwarded to the Associate Dean for Professional Education. A grade of "IEP" will be issued for the IPPE in need of remediation. The Associate Deans for Professional Education and Administrative Affairs and the Assistant Dean of Experiential Education will utilize the recommendation of the Scholastic Standing Committee to develop an IEP for the student.

Proficiency Score

- | |
|---|
| 5 - Meets requirement at a level beyond that expected |
| 4 - Meets requirement with minimal or no prompting and intervention from the preceptor |
| 3 - Meets requirement with moderate prompting and intervention from the preceptor |
| 2 - Meets requirement with extensive prompting and intervention from the preceptor |
| 1 - Does not meet requirement even with prompting and intervention from the preceptor |
| 0 - Though opportunities existed, student did not engage in requirement; therefore not able to assess |
| NA – Not applicable to experience or not observed |

IPPE EVALUATION RUBRIC

Professionalism

Professional Appearance and Decorum

- _____ 1.5, 2.4, 3.3 Demonstrates appropriate grooming and professional dress
- _____ 1.5, 2.4, 3.3 Displays proper respect for all individuals (patients, pharmacy staff, other healthcare providers, etc)
- _____ 1.5, 2.4, 3.3 Is punctual
- _____ 1.5, 2.4, 3.3 Uses personal technology (cell phone, text device, Facebook, etc) appropriately

Ethics

- _____ 1.5, 2.4, 3.3 Maintains strict confidentiality
- _____ 1.5, 2.4, 3.3 Places patient's welfare above personal self interest and is accountable and responsible for patient care
- _____ 1.5, 2.4, 3.3 Understands and complies with all state and federal regulations concerning prescription competencies
- _____ 1.5, 2.4, 3.3 Behaves ethically in all aspects of practice

Dedication to Excellence

- _____ 1.5, 2.4, 3.3 Acknowledges limitations in therapeutic knowledge
- _____ 1.5, 2.4, 3.3 Asks questions, independently seeks to increase knowledge, seeks constructive criticism

Drug Referencing

- _____ 3.2 Recognizes which references are suitable to utilize when researching drug information; demonstrates the ability to select an appropriate reference with minimal assistance

Communications

General

- _____ 2.3 Communicates in a clear, concise and logical manner using correct grammar
- _____ 2.3 Communicates at the level appropriate for the audience/interaction (i.e. lay or professional)

Communication with Patients or Caregivers

- _____ 2.3 Uses effective active listening techniques (listens for understanding, clarifies feelings and concerns, uses empathy in responding to patients); uses open-ended questions
- _____ 2.3 Communicates with sensitivity and diplomacy; establishes a basis for the development of effective rapport with all patients/caregivers

Communication and Collaboration with Health Care Professionals

- _____ 2.3 Provides concise, applicable and timely responses to questions; able to defend recommendations

Prescription Competency

Prescription and Patient Profile Requirements

- ____ 2.1 Accurately completes calculations needed to fill a prescription
- ____ 2.1 Produces an accurate prescription label (i.e. proper spacing, terminology, and dosing; avoids abbreviations or use of shortcut sig codes)
- ____ 2.1 Obtains patient information necessary to fill a prescription (i.e. gender, date of birth, allergies, address, disease states, other medications or devices, insurance, etc)
- ____ 2.1 Accurately receives oral prescription from healthcare provider; resolves identified problems with minimal assistance

Product Selection and Preparation

- ____ 2.1 Chooses correct medication formulation and dose from stock
- ____ 2.1 **Community:** Counts medication correctly, places in a suitable sized bottle or vial; **Institutional:** Compounds sterile products correctly – adheres to aseptic technique (IV bag/admixture, syringe, piggyback, etc), properly scrubs, cleans hood, places meds, solutions, and supplies in hood, swabs, uses appropriate work area, avoids touch/airflow contamination
- ____ 2.1 Reconstitutes correctly (i.e. selects appropriate diluents, utilizes proper procedures to maintain a sterile environment)
- ____ 2.1 Chooses correct pack type/size and attaches correct auxiliary labels; places label on final product neatly; conducts final check for legitimacy, completeness, and accuracy

Legal Requirements

- ____ 2.1 Recognizes required components of a legal written prescription (i.e. patient name, prescriber signature, drug, dose, sig, date, quantity, etc)
- ____ 2.1 Understands federal and state rules and regulations concerning proper prescription competencies

Pharmacy Operations

Workflow and Record Keeping

- ____ 2.2 Understands the workflow in the pharmacy department; follows the basic movement of a prescription throughout the pharmacy from prescription to product with appropriate filing/record keeping. **Community:** prescription handling, OTC medications, counseling, distribution areas; **Institutional:** IV and non-IV prescription handling and compounding, daily med delivery areas
- ____ 2.2 Participates in pharmacy record keeping (i.e. understands procedures associated with prescriptions and inventory; labels/identifies necessary documentation in a neat and clear manner; places paperwork in designated location with appropriate components in place)

Roles and Responsibilities of Personnel

- ____ 2.2 Understands the role of a pharmacy technician and pharmacy intern (i.e. can explain the duties/limitations of a technician; understands the pharmacist:technician and pharmacist:intern ratios; functions within his/her level of practice)
- ____ 2.2 Manages/triages questions from healthcare providers, patients, or customers. **Community:** completes point of sale with correct product, receipt, log book, etc; **Institutional:** Answers questions regarding point of distribution (unit dose) such as proper storage, administration, disposal of medications with minimal assistance; independently exchanges cart fills or delivers meds to the floor, nursing unit, or satellite pharmacy.

Technology

- ____ 2.2 Understands the functions of the computer system beyond prescription order entry; able to discuss computer system(s) use in supporting pharmacy tasks; able to input new profile or insurance information and/or access specific patient information

Describe student strengths:

Describe competency areas that need improvement:

Describe a plan of action for continued student competency development: