Barry and Judy Silverman College of Pharmacy
NOVA SOUTHEASTERN UNIVERSITY | NSU Florida

Academic Year 2025 – 2026

Advanced Pharmacy Practice Experience (APPE) Manual

PHRC 7710
PHRC 7720
PHRC 7730
PHRC 7740
PHRC 7750
PHRC 7760
PHRC 7770
PHRC 7780

Office of Experiential Education

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ADVANCED PHARMACY PRACTICE EXPERIENCES

Purpose of Experiential Education

The purpose of the experiential education portion of the curriculum is to provide pharmacy students with practical experience in various aspects of the profession of pharmacy. These experiences allow the student to learn hands-on in real-world settings, applying the knowledge and skills they've learned in prior didactic and laboratory courses. Students should view each experience as an opportunity to develop and refine the skills, behaviors, and attitudes necessary to be a competent pharmacy practitioner.

Description of the Experiential Education APPE Curriculum

A continuum of required and elective APPEs emphasize the continuity of care and incorporate acute, chronic, and wellness-promoting direct and indirect patient-care services in outpatient and inpatient settings. Students complete 7, six-week, full-time rotation experiences in supervised pharmacy practice environments. There are four required rotation experiences including internal medicine, ambulatory care, advanced hospital, and community pharmacy, and three elective rotation experiences to meet graduation requirements.

Depending on the experiential rotation, APPEs may take place in a variety of settings to expose students to both traditional and non-traditional career opportunities within the profession. These experiential rotations integrate, apply, reinforce, and advance the knowledge, skills, attitudes, abilities, and behaviors developed in the pre-APPE curriculum and co-curricular activities to prepare students to be team and practice ready graduates. Goals of these experiences are site specific with each rotation set up as its own course with school provided and preceptor established goals, objectives, and assignments.

Academic Calendar 2025 – 2026

Term	Blocks	Dates
Winter 2024	Block 1	3/31/2025 – 5/09/2025
Summer 2025	Block 2	5/12/2025 – 6/20/2025
	Block 3	6/23/2025 – 8/01/2025
Fall 2025	Block 4	8/04/2025 – 9/12/2025
	Block 5	9/15/2025 – 10/24/2025
	Block 6	10/27/2025 – 12/05/2025
Winter Break	-----	12/06/2025 – 1/04/2026
Winter 2026	Block 7	01/05/2026 – 02/13/2026
	Block 8	02/16/2026 – 03/27/2026
	Block 9 (if needed)	TBD

May 2025: Curricular Review- Refer to Academic Calendar for Details

ADMINISTRATIVE REQUIREMENTS FOR STUDENTS

1. Prerequisites
    a. To be eligible to register for APPE courses (PHRC 7710 – 7780), students must have successfully completed all didactic and introductory pharmacy practice experience coursework, including required certifications, co-curricular requirements, progression/preparedness examinations (e.g. OSCE, milestone exam), and other APPE-readiness determinants. No incomplete or unresolved failing grades are allowed in any course.

    b. All students must be licensed as a Pharmacist Intern in Florida. Students at the San Juan campus must also be licensed as a Pharmacist Intern in Puerto Rico. To complete experiential courses outside of Florida, students must follow registration requirements of the state board of pharmacy in the jurisdiction where the site is located (e.g., be licensed as a Pharmacist Intern). Students are responsible for identifying and completing requirements for any out of state rotations per the applicable board of pharmacy.

    c. Health and Immunization requirements of NSU Health Profession Division must be complete and proper documentation submitted to the online health tracking system (e.g. MyRecordTracker). Refer to the HPD Student Handbook for more information related to health forms requirements. Additional onboarding requirements of the assigned practice site(s) must also be met.

        Examples of requirements include:
        1. Proof of current immunizations
        2. Current certificate of physical examination
        3. Negative TB test (within the last year)
        4. Health Insurance
        5. Active CPR Certification
        6. Background Check

    d. Students must complete required trainings, including HIPAA and Blood Borne Pathogens, as directed by the College. Certificates of completion should be submitted in FolioRx and/or PEPRx.

2. Successful completion of each advanced pharmacy practice experience is required to meet graduation requirements.
    a. Students must complete each rotation with a final grade of 69.5 or above. A final grade lower than 69.5 is considered failing. See NSU's College of Pharmacy Student Handbook for additional guidance.

    b. A student may withdraw from an APPE course after the block start date according to the policy outlined in the College of Pharmacy Student Handbook. The deadline for withdrawal from any APPE is 5 PM Monday of the 3rd week. If it is past the drop/add period for that semester, the student will receive a grade of W. A student withdrawing from an APPE may not repeat the same experience (same course number) during the same semester.

c. No student-initiated requests to change site or preceptor assignments will be granted after a rotation has started. Students may instead choose to withdraw from the rotation as outlined in 2b.

d. Students who are dropped by a site/preceptor for behavioral or academic reasons during an APPE course will receive a final course grade of "F". The experience will not be rescheduled in the same semester.

3. APPE schedule requirements
   a. Students are responsible for making sure their APPE schedule is complete and satisfies graduation requirements. Students should verify this when schedules are released, during the open add/drop period, and whenever an adjustment is made to their APPE schedule.

   b. Four core rotation types are required for all PharmD students:
      Internal Medicine (PHRC 7710)
      Ambulatory Care (PHRC 7720)
      Advanced Hospital (PHRC 7730)
      Community Pharmacy (PHRC 7740)

   c. Three elective rotation courses are required for all PharmD students:
      Elective I (PHRC 7750)
      Elective II (PHRC 7760)
      Elective III (PHRC 7770)

      I. Rotation types that satisfy each elective course requirement are available at https://cfsecure.nova.edu/PEPrx/documents/Rotations_Types.pdf
      II. Required elective courses must be of three different rotation types.
      III. PHRC 7750 must be a "Direct Patient Care – Patient Centered Care" rotation type.
      IV. PHRC 7760 must be a "Direct Patient Care – Patient Centered Care" or a "Direct Patient Care – Medication Use System" rotation type.
      V. PHRC 7770 can be any elective rotation type.

   d. Students may opt to take a fourth elective rotation (PHRC 7780) in any of the elective rotation type practice settings.

      I. PHRC 7780 should be scheduled in the student's final semester and/or after other required electives have been completed.
      II. PHRC 7780 cannot be substituted for any other elective course number required for graduation. Students should ensure that all required elective courses are completed before proceeding to elective IV.
      III. In most cases, a student will not be scheduled for more than one rotation of the same rotation type (e.g. two rotations in critical care) unless the student provides rationale to support this request and the request is approved by the Office of Experiential Education.

   e. Student schedules require at least one rotation with a College of Pharmacy Faculty preceptor, subject to preceptor and site availability. Placement with faculty offering direct patient care

rotations will be prioritized. The Office of Experiential Education may adjust schedules accordingly. Students are encouraged to take additional rotations with faculty preceptors whenever possible.

4. Placement Information
   a. The Directors of Experiential Education or appointees are responsible for scheduling all site placements. Students may be given the option to rank their preferences, however all assignments are randomized based on the prioritization structure developed by the Office of Experiential Education (e.g. prioritizing pharmacy practice faculty preceptor placements) and preceptor availability.

   b. Health-system, hospital, advanced community, and ambulatory care sites and preceptors in Puerto Rico are reserved for students at the San Juan campus. Students from the Fort Lauderdale/Davie campus are only permitted to rank sites in Puerto Rico in the categories of medication-use system electives, or non-patient care electives.

   c. **All placements are subject to preceptor and site availability and may be adjusted at any time by the Office of Experiential Education.** Notification of a change in an APPE rotation or preceptor will be sent to the student at their NSU email account.

   d. There will be a designated open add/drop period for students to request changes to their preliminary APPE schedule. Changes are not guaranteed and are subject to site/preceptor availability, APPE course requirements, and Office of Experiential Education discretion.

   e. Students identified as having sub-optimal academic or experiential performance, or professional conduct concerns may be required to have modifications made to their APPE schedule. When applicable, such required modifications will be communicated by the Office of Assessment, Academic Support Services, Office of the Associate Dean, Professional Programs, or Dean, College of Pharmacy. Required modifications may consist of additional faculty rotations, rotations at designated practice sites, and/or rotations in assigned practice areas to support student growth and development in areas needing improvement.

   f. APPE may not be completed at a student's current place of employment (within the same department/with the same supervisor) or with a relative. Students may take an APPE with the organization of employment if permitted by the organization and there is a distinct separation of work- and rotation-related responsibilities. Students must notify their respective Director of Experiential Education if scheduled with a site/preceptor that conflicts with this policy. Failure to do so may result in failure of the APPE.

   g. Students may be scheduled for a maximum of two rotations designated as a remote experience (e.g. virtual, work from home).

   h. No more than two APPE rotations may be taken out of Florida/Puerto Rico except for block APPEs offered by health-system practice sites. Out of state practice sites and preceptors must

already be affiliated with an ACPE accredited College of Pharmacy (see policy for out of state experiences on page 12 for additional information).

i. Rotation sites and preceptors outside of the south Florida/Puerto Rico geographic areas (out of area / out of state) are limited and new out of area sites are not routinely recruited. If a student elects to do rotations out of state or out of area and are later dropped by the preceptor, alternative rotation options may not be available in the desired geographic region. Students must be prepared to return to campus areas, as needed, to complete rotations.

j. Events, training, board preparation, or other activities requiring in-person attendance at the Davie or Puerto Rico campus may be scheduled during the block 8 timeframe or other times prior to graduation. Students electing to complete out of area or out of state rotations must plan accordingly and be able to return to their assigned campus area to attend these activities.

k. Students are not permitted to contact NSU preceptors directly to determine availability or discuss placement. Determination of preceptor availability and site placement will be managed by the Office of Experiential Education. Students who contact NSU preceptors to whom they are not assigned trying to secure placement will be denied placement and referred to the appropriate college committee for review.

l. APPE schedules are final after the open add/drop period. Once APPE schedules are finalized, student-initiated changes will only be considered for reasons outlined in the APPE change request policy. The policy on APPE change requests is available at https://cfsecure.nova.edu/PEPrx/documents/rotation-change.pdf. To be considered, requests must be submitted at least 60 days before the start of rotation and meet one or more of the established criteria. Submitting a request does not guarantee that an APPE change will be approved.

5. Site Attendance
   a. Attendance at the practice experience is <u>MANDATORY</u> to meet course and licensure requirements and takes priority over any external obligations. Students must complete a total of 240 hours at the assigned practice site. Site attendance schedules will be determined by the assigned preceptor or designee.

   b. APPEs are completed on a full-time basis according to the schedule determined by the preceptor. Full time is a minimum of 40 hours per week, typically between the hours of 7 AM and 7 PM, Monday through Friday. As patient care occurs all hours of the day, students may be asked to alter their schedules to be exposed to certain experiences. Students are expected to be flexible in attaining goals set in conjunction with their preceptor.

   c. College holidays <u>DO NOT</u> apply while enrolled in practice experiences. Students may be expected by their preceptor to attend their APPE site on college holidays.

   d. Additional time beyond scheduled site attendance will be required to perform/complete self-study, assigned readings, and written assignments or projects.

e. Any time-off granted by the preceptor (e.g. illness, emergency, holiday) must be made up on an hour-per-hour basis through an appropriate make-up schedule or alternate rotation-related assignments as determined by the preceptor.

6. Site Onboarding (Attestations and Site Paperwork)
    a. Site onboarding requirements and processes are determined by the individual site/organization and cannot be altered or waived by the Office of Experiential Education.

    b. Individual site requirements are located in PEPRx and can be accessed by clicking on the site's name on the student's schedule or by locating the site name in the drop-down menu in the Site Requirements and Info section. As site requirements can change frequently, it is important for students to check for updates to site information.

    c. It is the student's responsibility to review expectations for each of the sites they are assigned and for initiating contact with the appropriate Experiential Education personnel to obtain guidance on completion of requirements. Experiential Education staff and students working on site paperwork and attestation forms must start working on requirements a minimum of 60 days before the start date of the rotation (except VA sites which require a longer period for onboarding) and ensure that information is submitted to the site per their requirements.

    d. **Costs associated with onboarding at Experiential sites related to health screenings, background checks, drug screenings, use of online clearance systems, etc. are the responsibility of the student.** Students can estimate costs by reviewing onboarding requirements in PEPRx for each site they are assigned to or by requesting a meeting with Office of Experiential Education personnel. If desired, adjustments to APPE schedule site assignments can be made during the open add/drop period to try to limit onboarding costs.

    e. Students must reply to email or telephone communications from the Office of Experiential Education staff regarding paperwork within 48 hours.

    f. Students must communicate with their individual preceptor at least 4-6 weeks prior to the start date of each rotation. If a student cannot connect with their upcoming preceptor, they must let the Office of Experiential Education know at least 2 weeks before the start date of their APPE rotation. Additional information is outlined in the Attestations and Site Paperwork policy and procedure document.

    g. Students who are not cleared to start at a site due to incomplete or missing paperwork will not be reassigned to a new site during the same experiential session. Lack of following proper procedure may result in delayed graduation.

PROFESSIONAL REQUIREMENTS FOR STUDENTS

1. **Students are responsible for all material in this manual.**

2. Students must exhibit professionalism and follow site specific policies and requirements at all times while at site. Failure to comply with site policies or professionalism expectations may result in disciplinary action at the discretion of the preceptor and/or College; this may include temporary or permanent dismissal from the APPE site and may result in a failing course grade.

3. White lab jacket (clean and pressed) and NSU ID badge are required for all students while on their assigned APPEs unless directed otherwise by preceptor. Student should always identify themselves as a student/Pharmacist Intern while at their assigned practice environment.

4. Students must carry a copy of their Pharmacist Intern license(s) with them at all times. Provide a copy to the site prior to commencing APPE courses.

5. Notify the preceptor of any tardiness or absence (verbally and/or in writing). For anticipated absences, the request should be submitted as far in advance as possible. For emergencies, the student should contact the preceptor no later than 60 minutes prior to the start of their shift or immediately if shift is already in progress. Any missed time must be made up prior to the end of the current experience.

6. The primary objective of APPE courses is learning. Learning requires active commitment by the student. Engagement, being proactive, and self-reflection support the goals of APPE and increase the benefits gained from this experience. Mutual respect, courtesy, and professional communication are essential for an optimum learning experience.

7. Respect any and all confidences revealed during the practice experiences, including pharmacy records, fee systems, professional policies, patient data, patient charts, etc. **Ensure compliance with the Health Information Portability and Accountability Act (HIPAA) at all times**. Students are not permitted to photograph or video/audio record while at the practice site unless specifically directed to by the preceptor to complete rotation related responsibilities.

8. Encourage clear, concise and effective communication with all persons involved at the assigned sites, including pharmacists, pharmacy staff, physicians, other health professionals, patients, and other students.

9. Maintain responsibility for all transportation needs, housing, and other incidental expenses associated with IPPEs and APPEs.

10. Ensure you are functioning within the scope of the roles and responsibilities of a pharmacist intern. Do not make professional decisions without prior discussion with the preceptor, particularly when filling prescriptions/ medication orders, or advising patients and other health care providers on therapeutic and drug related matters. Take initiative in communicating with healthcare providers and patients, but do not step beyond the bounds of professional courtesy or common sense.

11. Be constantly alert to the laws, regulations, and policies that govern the practice of pharmacy and site procedures. Seek clarification of any points that are not clear.

12. Do not accept or receive any form of payment, financial or otherwise, from the assigned preceptor during any Introductory or Advanced Pharmacy Practice Experience.

13. Keep three original Certification of Pharmacy Practice Experience Hours forms for each required Introductory and Advanced Pharmacy Practice Experiences. These forms may be required by other Boards of Pharmacy in states where you are considering licensure. Upload an electronic copy into PEPRx at the completion of the experiential course.

14. Complete the required core rotation checklists under the guidance of your preceptor. Upload the completed packet to PEPRx by the end of the APPE year.

15. Submit course requirements (i.e. weekly activities summary forms and site/preceptor evaluations) in PEPRx or as instructed by Office of Experiential Education. All requirements are due by 9:00PM on the Monday following the last day of the experience. Failure to submit requirements on time will result in point deduction to the final rotation grade.

16. Students' NSU email accounts and class listservs will serve as the official means of communication of APPE-related information from the Office of Experiential Education. Students are responsible for any information conveyed through these communication channels. Students are expected to check their email daily during the APPE year, including during any off-block.

ADDITIONAL POLICIES AND PROCEDURES

Student Conduct on IPPE and APPE Rotations
https://cfsecure.nova.edu/PEPrx/documents/student_misconduct.pdf

It is expected that students always follow NSU and Experiential site policies and rules while on rotation and display professionalism. Failure to meet this expectation may result in verbal feedback, written feedback, grade deductions, referral to Student Professional Conduct Committee, and/or failure of the rotation experience. Preceptors may contact the Office of Experiential Education at any time for assistance in addressing student professional and/or conduct issues.

IPPE and APPE Failures

Successful completion of the Experiential Education curriculum (all IPPEs and APPEs) is required to fulfill degree requirements. Failure of an IPPE may delay progression to APPE. Failure during IPPE or APPE may result in delayed graduation date. Students who have received a failing grade on IPPE or APPE are responsible for working with their preceptor, the Office of Experiential Education, the Associate Dean of the Professional Program, Assistant Dean of Assessment and Accreditation, Academic Support Services and the Dean, as appropriate, in their individual situation.

IPPE and APPE Leave Requests/Course Withdrawals

NSU College of Pharmacy policies (outlined in the Student Handbook) regarding excused absences, leave of absence, and withdrawals will apply to Experiential Education courses. While enrolled in an IPPE or APPE course, a student may request an excused absence, a leave of absence or an administrative break, or request to withdraw from their course. Depending on the circumstances of the situation, this request may lead to a delayed progression to APPE and/or a delayed graduation date.

Refer to current College of Pharmacy Student Handbook for applicable policies and procedures.

Policy and Procedure- Positive Drug Screening
https://cfsecure.nova.edu/PEPrx/documents/drug-screening-policy.pdf

NSU has a zero-tolerance policy on illicit drug use (see NSU student handbook for the University's drug and urine drug screen policy). Students may be unable to participate in IPPE or APPE rotations if they do not pass a criminal background check and/or a drug screening. Students who are unable to complete their experiential education requirements of the Doctor of Pharmacy program cannot progress through the curriculum toward graduation.

Policy and Procedure- Site Paperwork and Attestations
https://cfsecure.nova.edu/PEPrx/documents/site_paperwork.pdf

Experiential Education staff and students working on site paperwork and attestation forms must start working on requirements a minimum of 60 days before the start date of the rotation (except VA sites which

require a longer period for onboarding). It is the student's responsibility to review expectations for each of the sites they are assigned and for initiating contact with the appropriate Experiential Education personnel to obtain supplementary background check/drug screen forms or to receive guidance on completion of requirements.

Paperwork deemed by the site to be late or incomplete may result in the student being dismissed from the site or missing days at their assigned location. Students being dismissed from their site will NOT be reassigned to a new location during that same rotation block period.

 *Students must check their NSU email DAILY.

 *Students must check PEPRx Site Requirements MONTHLY as these are subject to change.

APPE Block Scheduling

Students have an opportunity to complete multiple consecutive APPEs at one practice site or within one health system, known as block APPEs. These block APPE rotations may include a combination of core required rotations and elective experiences. Some practice sites incorporate longitudinal and group projects/research as part of the experience. Select health system sites have a required application, interview, and/or a minimum grade requirement. Prior to APPE scheduling, students will receive information from the Office of Experiential Education regarding sites participating in block scheduling for their academic year.

Block rotations are optional. Benefits of block scheduling include limiting pre-APPE paperwork requirements and time spent on orientation to site policies and procedures. It also provides students the opportunity to have more comprehensive experiences with increased patient care responsibilities.

Block APPEs secured at block-only sites (e.g. Miami VA, Tampa VA, Tampa General, etc.) or through application/selective review processes cannot be changed and are not subject to the APPE rotation Change Petition policy.

Policy on out of Florida/Puerto Rico APPE Experiences

Students may take approved rotation experiences outside of the state of Florida/Puerto Rico. Students are responsible for obtaining appropriate pharmacist intern licensure or meeting other requirements as specified by the jurisdiction of the out of state site. Students interested in out of state rotations should contact the Office of Experiential Education in August of their P3 year.

No more than two APPE rotations may be taken out of Florida except for patient care blocks offered by Health-System practice sites (e.g. Yale New Haven Hospital). When taking a block of rotations at an out of state Health-System, no additional out of state rotations will be scheduled. Other exceptions are Indian Health Services sites (IHS) and Public Health Service/Regulatory Affair sites (PHS) such as CDC or FDA, where a student may be scheduled for one additional out of state rotation.

Students that select an out of state rotation will not be able to drop the out of state rotation(s) once APPE schedules are finalized. Students should carefully consider travel, housing, associated costs, etc. before committing to an out of state rotation.

Out of state practice sites and preceptors must already be affiliated with an ACPE accredited College of Pharmacy and must meet the preceptor and site requirements established by the Office of Experiential Education. The Office of Experiential Education must have all relevant documents (affiliation agreement, syllabus, preceptor application, preceptor availability and licenses) and approval must be completed at least one month prior to ranking of APPEs. New out of state sites will not be considered for onboarding unless justification of programmatic need is identified, and routine ongoing use of the site is anticipated.

Postexposure Policies and Procedures

Full postexposure (blood and body fluid) policies and procedures are available in the current College of Pharmacy student handbook. Students should immediately refer to the handbook and associated policies for complete instructions.

An exposure incident is considered an urgent medical event that requires immediate attention for proper medical management. If a student has experienced such an exposure, the student must not delay in seeking medical care. Students should ensure that their preceptor and the Office of Experiential Education are notified of any incident.

Students must immediately seek care (from the NSU Student Medical Center if during normal business hours and student is within the local geographic area of the NSU Fort Lauderdale/Davie campus; or from the nearest emergency department if after normal business hours or outside of the geographic area of the NSU Fort Lauderdale/Davie campus, including students in Puerto Rico). Exposed students are also responsible for reporting the incident to the Office of Environmental Health and Safety (EHS) at EHS@nova.edu.

PRECEPTOR AND PRACTICE SITE RESPONSIBILITIES

Preceptor Responsibilities

1. Preceptors must meet licensure and training requirements as outlined by the Office of Experiential Education.
2. Preceptors must abide by the laws and regulations that govern pharmacy practice.
3. Preceptors must assist students in achieving the educational goals, objectives, and outcomes set forth for the specified experiential course.
4. Preceptors may use their discretion in allowing off-site experiences such as continuing education seminars, local and/or state pharmacy conferences, Board of Pharmacy meetings, etc. to count toward the experience requirements.
5. Preceptors should ensure the site is a professional environment for the training of the students and fosters learning.
6. Preceptors are expected to instill and demonstrate principles of professionalism and ethics.
7. Preceptors should demonstrate a commitment to educating others (patients, caregivers, other health care professionals, students).
8. Preceptors should ensure students are appropriately oriented to the site and rotation expectations.
9. Preceptors should discuss objectives of the student experience with site personnel to clarify expectations and delineate responsibilities.
10. Preceptors must supervise students' activities at all times; however, the preceptor may delegate this responsibility to another pharmacist or health care professional.
11. Preceptors will allow adequate time for teaching, communication, feedback, and evaluation.
12. Preceptors are responsible for reviewing student progress at regular intervals during the experience and sharing their observations with the students. Critique should be in the form of constructive feedback, and should be given on an ongoing basis, conveyed in private and an appropriate manner.
13. Preceptors shall submit a midpoint and final assessment of their assigned student(s).
14. Preceptors must certify students' hours for each experience on the Certification of Hours form.
15. Preceptors can terminate the experience at any time due to poor professional conduct or other serious event.

Practice Site Responsibilities

1. Sites must meet all state and federal laws related to the practice of pharmacy.
2. Sites must meet all standards set by appropriate governmental, regulatory, and accrediting agencies.
3. Sites must have a signed affiliation agreement with Nova Southeastern University.
4. Sites should provide adequate patient population or other relevant information based on the learning objectives for the rotation.
5. Sites should promote delivery of exceptional pharmacy practice services or other relevant experiences as appropriate to the setting.
6. Sites should provide adequate workspace for the student to complete assigned responsibilities.

PRE-EXPERIENCE CHECKLIST

Eight (8) weeks before…

- ✓ Review site requirements and info in PEPrx to schedule on-site orientation (if needed). As site requirements change frequently, it is important for students to check for updates to site information in PEPrx. Many sites require urine drug screens, special paperwork, etc and all documentation to be sent to the site according to their requirements. Paperwork deemed by the site to be late or incomplete may result in the student being dismissed from the site or missing days at their assigned location. **Students being dismissed from their site will not be reassigned to a new location in the same session.**

Six (6) weeks before…

- ✓ Verify the need for updated Level 1 or Level 2 background check, urine drug screen, and PPD for those sites that require testing more often than yearly. **Students being dismissed from their site will not be reassigned to a new location.**
- ✓ Secure access to onboarding systems used by the experiential site (e.g., Complio, MyRotationManager, Silk Road, etc) and begin completing requirements.
- ✓ Supply the Office of Experiential Education any additional necessary documentation to complete an attestation form (if necessary)
- ✓ Completed additional site-specific documentation and/or training (if necessary).

Four (4) weeks before…

- ✓ Contact preceptor via email and/or telephone to confirm site location, introduce self (provide copy of CV) and request pre-rotation requirements, first day instructions, and any other needed preparations.
- ✓ Update curriculum vitae in PEPrx to include all prior completed experiences, listing projects and presentations (please do not include your home address or phone number on your CV)

One (1) week before…

- ✓ Review the goals and objectives listed in the IPPE Manual and course syllabus
- ✓ Prepare a wish list of activities for the experience to discuss with the preceptor
- ✓ Obtain copies of licenses, health/immunizations, and other forms that may be requested by site or preceptor
- ✓ Complete pre-rotation assignments or topic reviews as directed by the preceptor or student's own self-directed learning plan
- ✓ Drive to the assigned site before the scheduled 1st day to confirm location and parking situation

What happens if I cannot get in contact with my preceptor?
- ▪ Try again with multiple forms of communication (follow-up email, phone, etc.)
- ▪ Ask to speak with his/her designee
- ▪ If still having problems, contact the Office of Experiential Education at your campus at least 2 weeks before the start of the rotation

GUIDELINES FOR ORIENTATION

Preceptors should meet with students at the beginning of the APPE to conduct an orientation meeting. During this meeting, students should be provided with information and guidance that supports their success at the practice site. The following orientation checklist may be used to direct this meeting, however, additional site or experience specific information may be required beyond what is listed.

1. Introductions
   a. Preceptor introduction: education and training, career path, vision of pharmacy practice
   b. Student introduction: pharmacy related-experience, pertinent training/certifications, goals for the experience, professional interests, professional goals
   c. Site introduction: description of pharmacy/health system, population served, services provided
   d. Staff introduction

2. Goals, objectives, and expectations
   a. Review syllabus, goals, objectives, activities of the rotation
   b. Discuss preceptor expectations of the student
   c. Review student expectations for the experience
   d. Ensure alignment of expectations, correct any discrepancies
   e. Discuss expected schedule
   f. Outline and schedule projects and assignments
   g. Create rotation calendar with schedule of activities and due dates

3. Orientation to site
   a. Parking instructions
   b. Storage of personal belongings
   c. Pharmacy tour and workflow overview
   d. Site policies and procedures; guidelines for conducting responsibilities
   e. Site safety information including Safety Office/Emergency contact information
   f. Communication systems (e.g. telephones, fax machines, messaging, etc.)
   g. Computer access, internet usage, rules for use
   h. Library and information resources
   i. Student work area, break, and personal care areas; rules for use

4. Additional site specific information

SUMMARY OF REQUIRED ASSIGNMENTS

All required documentation for each experience must be submitted by the Monday after the rotation finishes. These reports will be the main form of communication you will have with the Office of Experiential Education and serve as a means of assessing your progress. Preceptor evaluations are anonymous and are released to preceptors in May after all APPE rotations for the specified academic year are completed.

List of Required Documentation:
    a. **Weekly Experience Activities Summary forms** are to be completed on a weekly basis. Your activities, experiences, and projects should be summarized. The completed forms should be submitted in PEPRx using the Course Drop-Off Box page. The Director of Experiential Education of your assigned campus will access these to assess for completeness.
    b. **Midpoint Evaluations** are intended to help guide you and your preceptor toward attainment of course goals and objectives. It is mandatory that your preceptor completes a midpoint evaluation in PEPRx. By reviewing your progress at the three-week interval, you can optimize the remaining time on your experience and focus on those areas identified as needing more experience or exposure. This is also your opportunity to let your preceptor know if there were any additional experiences you would like to gain before the end of the APPE.
    c. **Final Student Evaluation** must be completed in PEPRx by the preceptor.
    d. **Preceptor/Site Evaluation Form** is completed in PEPRx at the end of each experience. We encourage you to be honest. These evaluations are released to preceptors, de-identified and in aggregate, at the end of the academic year.
    e. **Certification of Experience Hours Forms**. ****All introductory and advanced experience hours must be logged and summarized on the Certification of Experience Hours forms. **These hours are required for graduation** and may be used for board applications to other states. If the student is planning to obtain a pharmacy license in a state other than Florida, it is the responsibility of the student to obtain the necessary information to ensure pharmacy licensure in the desired state. **Please make sure if you plan to practice in Puerto Rico, you maintain at least three copies with original signatures – forms must not be altered in any way or have any errors/corrections.** A copy of the completed certification of hours form must be uploaded in PEPRx upon completion of the APPE curriculum.
    f. **APPE Skills Checklists** for the four core APPE rotations- Internal Medicine, Ambulatory Care, Advanced Hospital, and Community Pharmacy must be signed by the preceptor after each respective experience. During the first week of a core APPE rotation, the student should review the checklist with their preceptor to ensure all required activities, projects, and artifacts will be completed on the 6-week rotation. Students are responsible for uploading the checklists as a single packet (all 4 checklists together in one file) under the Coursework Drop Off Box in PEPRx upon completion of the four core APPE rotations.

Timetable for Completing and Submitting Required Forms

Form	Form is Completed	Submission
Weekly Activity Summary	Weekly during the APPE rotation. All summaries are due by the Monday after the rotation finishes	Student submits in PEPRx
Midpoint Evaluation	At the end of week 3 of the 6-week APPE rotation	Preceptor submits in PEPRx
Final Evaluation	At the end of the 6-week APPE rotation	Preceptor submits in PEPRx
Preceptor/Site Evaluation	Due by the Monday after the rotation finishes	Student submits in PEPRx
Certification of Experience Hours Form	Signed by each preceptor at the end of the experience; uploaded to PEPRx at the end of all APPE experiences	Student submits in PEPRx
APPE Skills Checklist- IM, AmbCare, Adv Hospital, Community Pharmacy	Signed by each preceptor during each respective experience; uploaded to PEPRx at the end of APPE rotation experiences	Student submits in PEPRx

EXPERIENTIAL EDUCATION WEEKLY ACTIVITIES SUMMARY

Student: _____

Preceptor: _____ Site: _____

This form **must** be completed on a weekly basis and submitted on PEPrx at the end of the week at your site. Please summarize your experiences in detail, abiding by HIPAA regulations. If you are encountering any problems, please call immediately. Please note, edits cannot be made once entered into PEPrx.

Week (or day) #	**Dates:**	**Do not include patient names or other identifying information**			

Patient Population:
☐ Pediatric   ☐ Adolescent   ☐ Adult   ☐ Geriatric

Summary of activities completed (e.g. counseling, filling, antimicrobial stewardship, OTC recommendations, pt rounds, etc):

Interprofessional Collaboration Opportunities

I had the opportunity to:	Shadow	With direct supervision	Accomplished independently	No opportunity
Learn about, from, and with other members of an interprofessional team	☐	☐	☐	☐
Use effective interprofessional communication skills (may include conflict resolution, documentation skills, etc.)	☐	☐	☐	☐
Contribute medication related expertise to an interprofessional team	☐	☐	☐	☐
Discuss a patient's medication related problem with another healthcare professional	☐	☐	☐	☐
Develop a shared therapeutic plan with an interprofessional team	☐	☐	☐	☐

Recommendations to a Healthcare professional or patient
Number of recommendations: _____
Description of recommendations made:

Immunizations
Number of Immunizations administered: _____

Projects/Presentations
☐ Journal Club ☐Drug Information Questions ☐Drug Review ☐ Patient Case Presentation ☐Poster ☐Policy/Procedure ☐Formulary updates

Description of other project/presentation:

Disease States Encountered/Discussed
☐ Cardiovascular ☐Endocrine ☐Gastrointestinal ☐Hematologic/Immunologic ☐Infectious Disease ☐Neurology/Psychiatric ☐Oncology ☐Renal, fluids, electrolytes ☐Respiratory ☐Rheumatology/Musculoskeletal ☐Toxicology

Other:

Make additional copies of this form as needed. Official reports must be submitted electronically in PEPRx.

CERTIFICATION OF EXPERIENCE HOURS FORM- REQUIRED ENTRY LEVEL/ ADVANCED STANDING

Student Name _____   **Intern License Number** _____

Internal Medicine Site:	Week 1 Hours	Week 2 Hours	Week 3 Hours	Week 4 Hours	Week 5 Hours	Week 6 Hours	Total Hours	Preceptor's Signature certifying total hours	License Number
Dates:							240		
Ambulatory Care Site:	Week 1 Hours	Week 2 Hours	Week 3 Hours	Week 4 Hours	Week 5 Hours	Week 6 Hours	Total Hours	Preceptor's Signature certifying total hours	License Number
Dates:							240		
Advanced Hospital Site:	Week 1 Hours	Week 2 Hours	Week 3 Hours	Week 4 Hours	Week 5 Hours	Week 6 Hours	Total Hours	Preceptors Signature certifying total hours	License Number
Dates:							240		
Community Pharmacy Site:	Week 1 Hours	Week 2 Hours	Week 3 Hours	Week 4 Hours	Week 5 Hours	Week 6 Hours	Total Hours	Preceptors Signature certifying total Hours	License Number
Dates:							240		
Elective I Site:	Week 1 Hours	Week 2 Hours	Week 3 Hours	Week 4 Hours	Week 5 Hours	Week 6 Hours	Total Hours	Preceptors Signature certifying total Hours	License Number
Dates:							240		
Elective II Site:	Week 1 Hours	Week 2 Hours	Week 3 Hours	Week 4 Hours	Week 5 Hours	Week 6 Hours	Total Hours	Preceptors Signature certifying total Hours	License Number
Dates:							240		
Elective III Site:	Week 1 Hours	Week 2 Hours	Week 3 Hours	Week 4 Hours	Week 5 Hours	Week 6 Hours	Total Hours	Preceptors Signature certifying total Hours	License Number
Dates:							240		
Elective IV Site:	Week 1 Hours	Week 2 Hours	Week 3 Hours	Week 4 Hours	Week 5 Hours	Week 6 Hours	Total Hours	Preceptors Signature certifying total Hours	License Number
Dates:							240		

I certify that the total hours for each experience are correct and were completed under the supervision and/or authorization of the preceptor signing for the experience.

Student Signature: _____   Date: _____

The student is responsible for accurately completing this form and maintaining it for the duration of their APPE schedule. Only the original, correct and completed form will be certificate to the Board of Pharmacy for internship credit hours. Please make sure that if you plan to practice in Puerto Rico, you have at least three originals.

PEPRx INSTRUCTIONS, MIDTERM/FINAL EVALUATIONS AND GRADING

The PEPRx website is designed to provide tools for students, preceptors, and administrators to facilitate information gathering/distribution, communication, site assignments, grading and resources.

To access this website please use the link below:

https://cfsecure.nova.edu/PEPrx/

Your APPE preceptor is charged with the responsibility of evaluation and grading. The preceptor will be providing feedback, evaluating your progress, and documenting this with a formal midterm and final evaluation. Preceptors may work with other pharmacy personnel, healthcare providers, and residents to co-precept and solicit feedback on your performance.

All preceptors will use PEPRx to grade APPEs using a rubric based on the Pharmacists' Patient Care Process (PPCP) and Entrustable Professional Activities (EPAs) of a pharmacist in practice. Midterm and final evaluations are mandatory. The system allows preceptors to provide comments to the student in the areas of strength, improvement and to attest to the completion of the full 240 hours for each APPE rotation. The system calculates the midterm and final grades based on the weights of each of the seven competencies and the grading scale listed below.

Grading Metric	Grade Percentage
Exceed Expectations- I trust the learner to act independently and execute appropriate activities. The learner completes all basic and complex tasks going beyond what is required. Ready for supervision at a distance	100
Meets Expectations- I trust the learner to act with intermittent supervision available and execute appropriate activities. The learner completes basic and some complex tasks independently with minimal or no guidance	85
Needs Improvement- I trust the learner to act with direct supervision. The learner frequently requires guidance to complete basic or routine tasks	70
Below Expectations- I trust the learner to observe the activity only. The learner is unable to complete basic or routine tasks despite guidance	55
N/A or Not Yet Assessed	Not factored into grade

Students receiving a failing grade in any APPE experience must repeat that experience as soon as scheduling allows.

Weekly summaries and preceptor/site evaluations are due the Monday after the rotation finishes. Up to five points may be deducted from a final grade by the Director of Experiential Education for late or missing paperwork.

- 1 point deducted for each missing/late weekly summary report (6 reports due per rotation; up to 4 points can be deducted)
- 1 point deducted for missing preceptor/site evaluation

There are seven competencies that APPE rotations are graded on: Patient Care Provider, Medication Use Systems Management, Drug Information, Written and Verbal Presentations and Projects, Interprofessional Team Member, Cultural Sensitivity and Professionalism (see below):

COMPETENCY: **Patient Care Provider [1]**
Weight: 1.0

		Exceeds Expectations	Meets Expectations	Needs Improvement	Below Expectations	N/A or Not Yet Assessed
1.	Discusses the diagnosis, etiology and pathophysiology of disease(s)	○	○	○	○	◉
2.	Measures a patient's vital signs and interprets the results (e.g. body temperature, pulse rate, respiration rate, and blood pressure)	○	○	○	○	◉
3.	Collects a medical/medication history from a patient, family member or caregiver	○	○	○	○	◉
4.	Determines a patient's medication adherence and other medication use behaviors	○	○	○	○	◉
5.	Reconciles a patient's medication list and communicates discrepancies to healthcare providers involved in the patient's care	○	○	○	○	◉
6.	Synthesizes basic science and clinical information, patient history, laboratory, and physical exam data to identify problems	○	○	○	○	◉
7.	Compiles a prioritized health-related problem list with patient-centered goals	○	○	○	○	◉
8.	Creates and implements a therapeutic plan including endpoints following evidence-based disease management protocols	○	○	○	○	◉
9.	Develops a self-care treatment plan with a patient	○	○	○	○	◉
10.	Monitors and follows up on patient care plans, prioritizing appropriately based on patient needs	○	○	○	○	◉
11.	Develops alternative plans based on what problems are likely to occur with the primary plan	○	○	○	○	◉
12.	Educates a patient on a new medication, self-care or over the counter products, and/or medication adherence aid	○	○	○	○	◉
13.	Provides prevention, intervention and educational strategies for individuals and communities to improve health and wellness	○	○	○	○	◉
14.	Performs a screening assessment to identify patients at risk for highly prevalent diseases in a population (e.g. hypertension, diabetes, depression)	○	○	○	○	◉
15.	Reports adverse drug events and medication errors to healthcare providers	○	○	○	○	◉
16.	Determines whether a patient is eligible for and has received CDC recommended immunizations	○	○	○	○	◉
17.	Administers and documents CDC recommended immunizations to an adult patient	○	○	○	○	◉

COMPETENCY: **Medication Use Systems Management [2]**
Weight: 1.0

		Exceeds Expectations	Meets Expectations	Needs Improvement	Below Expectations	N/A or Not Yet Assessed
1.	Correctly prepares, verifies, and dispenses medications while assisting in workflow oversight	○	○	○	○	◉
2.	Applies state and federal regulations to the dispensing, storage and disposal of medication	○	○	○	○	◉
3.	Performs drug procurement procedures (e.g. ordering, purchasing and inventory control)	○	○	○	○	◉
4.	Utilizes continuous quality improvement techniques and documentation in the medication use process	○	○	○	○	◉
5.	Assists in preparation for regulatory visits and inspections	○	○	○	○	◉
6.	Assists a patient to acquire medication(s) with consideration to formulary and patient financial impact	○	○	○	○	◉

COMPETENCY: **Drug Information [3]**
Weight: 1.0

		Exceeds Expectations	Meets Expectations	Needs Improvement	Below Expectations	N/A or Not Yet Assessed
1.	Retrieves and analyzes scientific literature to answer a drug information question(s) or to make a patient-specific recommendation	○	○	○	○	◉
2.	Selects the best available resource for answering a drug related request or educational in-service	○	○	○	○	◉
3.	Generates correct answers to questions in a timely and systematic manner	○	○	○	○	◉

COMPETENCY: Verbal and Written Presentations and Projects [4]
Weight: 1.0

		Exceeds Expectations	Meets Expectations	Needs Improvement	Below Expectations	N/A or Not Yet Assessed
1.	Uses appropriate verbal and nonverbal communication skills during presentations	○	○	○	○	●
2.	Delivers or creates presentations and/or projects with appropriate content and references (primary, secondary and tertiary) based on the assignment parameters	○	○	○	○	●
3.	Utilizes appropriate skills and technology to engage the audience for assigned projects or presentations	○	○	○	○	●
4.	Adheres to the parameters established by the preceptor for presentation and/or project format and length	○	○	○	○	●

COMPETENCY: Interprofessional Team Member [5]
Weight: 1.0

		Exceeds Expectations	Meets Expectations	Needs Improvement	Below Expectations	N/A or Not Yet Assessed
1.	Answers questions about patients' medications or disease states in a timely manner	○	○	○	○	●
2.	Triage, document and communicate a patient's medication-related problem(s) to another healthcare professional	○	○	○	○	●
3.	Communicates a patient case to a colleague to ensure an effective hand-off or transition of care	○	○	○	○	●

COMPETENCY: Cultural Sensitivity [6]
Weight: 1.0

		Exceeds Expectations	Meets Expectations	Needs Improvement	Below Expectations	N/A or Not Yet Assessed
1.	Demonstrates an attitude that is respectful of different patient populations and cultures	○	○	○	○	●
2.	Assesses a patient's health literacy and modifies communication strategies to meet the patient's needs	○	○	○	○	●

COMPETENCY: Professionalism [7]
Weight: 1.0   (cannot be zero)

		Exceeds Expectations	Meets Expectations	Needs Improvement	Below Expectations	N/A or Not Yet Assessed
1.	Reports to site on time, prepares all activities and assigned responsibilities in a timely manner	○	○	○	○	--
2.	Displays professionalism in attire, actions, and preparedness	○	○	○	○	--
3.	Engages in the profession of pharmacy by demonstrating a commitment to continual improvement	○	○	○	○	--
4.	Demonstrates sensitivity to confidentiality issues	○	○	○	○	--
5.	Accommodates to change in workflow without disruption of the work schedule	○	○	○	○	--

Student will then see a final grade report with the % grade listed:

Calculate Final Score & Submit Score and Comments
The following are the **submitted** scores per each competency:
Competency
Patient Care Provider [1]
Medication Use Systems Management [2]
Drug Information [3]
Verbal and Written Presentations and Projects [4]
Interprofessional Team Member [5]
Cultural Sensitivity [6]
Professionalism [7]
Assessment Date: 19-Jun-2020 REPORTED FINAL GRADE ON COMPETENCIES = **100.0%**

END OF EXPERIENCE CHECKLIST

- ☐ Receive final evaluation from preceptor; preceptor submits in PEPRx

- ☐ Verify completion of APPE checklist with preceptor's initials (if applicable for required rotations)

- ☐ Verify completion of 240 experience hours

- ☐ Provide Certification of Hours form to preceptor for signature

- ☐ Submit weekly activities summaries (6 for each APPE) in PEPRx

- ☐ Submit evaluation of site/preceptor in PEPRx

END OF APPE YEAR CHECKLIST

- ☐ Upload completed required APPE checklists to PEPRx

- ☐ Upload Certification of Hours form to PEPRx
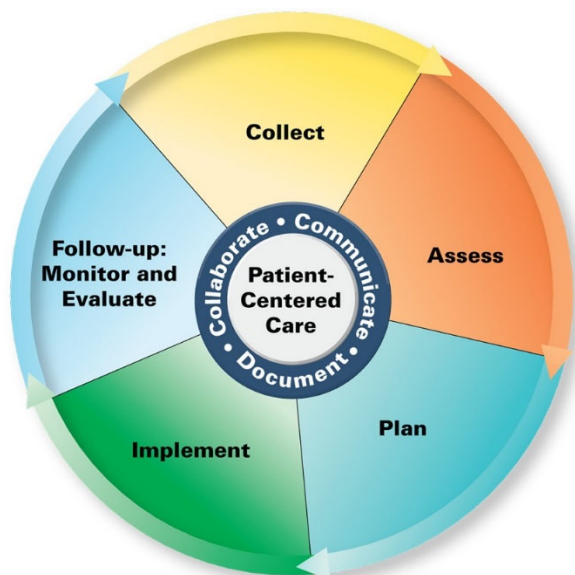
Recognizing the need for a consistent process in the delivery of patient care across the profession, the Joint Commission of Pharmacy Practitioners (JCPP) released the Pharmacists' Patient Care Process. The process is applicable to any practice setting where pharmacists provide patient care and for any patient care services provided by pharmacists. The PPCP focuses on five aspects of patient care with the intent to emphasize pharmacists' role through a comprehensive approach to collaborative patient-centered care.

Collect

The pharmacist assures the collection of necessary subjective and objective information about the patient in order to understand the relevant medical/medication history and clinical status of the patient. Information may be gathered and verified from multiple sources, including existing patient records, the patient, and other health care professionals. This process includes collecting:

- A current medication list and medication use history for prescription and nonprescription medications, herbal products, and other dietary supplements.
- Relevant health data that may include medical history, health and wellness information, biometric test results, and physical assessment findings.
- Patient lifestyle habits, preferences and beliefs, health and functional goals, and socioeconomic factors that affect access to medications and other aspects of care.

Assess

The pharmacist assesses the information collected and analyzes the clinical effects of the patient's therapy in the context of the patient's overall health goals in order to identify and prioritize problems and achieve optimal care. This process includes assessing:

- Each medication for appropriateness, effectiveness, safety, and patient adherence.
- Health and functional status, risk factors, health data, cultural factors, health literacy, and access to medications or other aspects of care.
- Immunization status and the need for preventive care and other health care services, where appropriate.

Plan

The pharmacist develops an individualized patient-centered care plan in collaboration with other health care professionals and the patient or caregiver that is evidence-based and cost effective. This process includes establishing a care plan that:

- Addresses medication-related problems and optimizes medication therapy.
- Sets goals of therapy for achieving clinical outcomes in the context of the patient's overall health care goals and access to care.
- Engages the patient through education, empowerment, and self-management.
- Supports care continuity, including follow-up and transitions of care as appropriate.

Implement

The pharmacist implements the care plan in collaboration with other health care professionals and the patient or caregiver. During the process of implementing the care plan, the pharmacist:

- Addresses medication- and health-related problems and engages in preventive care strategies, including vaccine administration.
- Initiates, modifies, discontinues, or administers medication therapy as authorized.
- Provides education and self-management training to the patient or caregiver.
- Contributes to coordination of care, including the referral or transition of the patient to another health care professional.
- Schedules follow-up care as needed to achieve goals of therapy.

Follow-up: Monitor and Evaluate

The pharmacist monitors and evaluates the effectiveness of the care plan and modifies the plan in collaboration with other health care professionals and the patient or caregiver as needed. This process includes the continuous monitoring and evaluation of:

- Medication appropriateness, effectiveness, safety and patient adherence through available health data, biometric test results, and patient feedback.
- Clinical endpoints that contribute to the patient's overall health.
- Outcomes of care including progress toward or the achievement of goals of therapy.

Joint Commission of Pharmacy Practitioners. Pharmacists' Patient Care Process. 2014
https://jcpp.net/wp-content/uploads/2016/03/PatientCareProcess-with-supporting-organizations.pdf.

Boyce, E. G. (2017). The Pharmacists' patient care process and more? *American journal of pharmaceutical education*, *81*(4), 1.

CORE ENTRUSTABLE PROFESSIONAL ACTIVITIES (EPAS)

Entrustable Professional Activities (EPAs) are units of professional practice or descriptors of work, defined as specific tasks or responsibilities that trainees are entrusted to perform without direct supervision once they have attained sufficient competence. EPAs are independently executable, observable, and measurable in their process and outcome. Core EPAs for New Pharmacy Graduates are discrete, essential activities and tasks that all new pharmacy graduates must be able to perform without direct supervision upon entering practice or postgraduate training. These statements were labeled as "core" to denote that these EPAs are expected of all graduates independent of practice setting. They serve as a baseline, not a ceiling.

Activity
1. Collect information necessary to identify a patient's medication-related problems and health-related needs Example tasks: - Collect a medication history from a patient or caregiver - Collect a patient's experience with medication - Collect information related to barriers for patients to take their medication(s) - Collect objective information from the patient - Collect data from the patient's electronic health, digital health, or medication record
2. Assess collected information to determine a patient's medication-related problems and health-related needs. Example tasks: - Assess the indication of the medication treatment plan - Assess the safety of the medication treatment plan including drug interactions - Assess the effectiveness of the medication treatment plans, including existing, previous, and new medications - Assess the alignment of the medication plan with the patient's goals, needs, abilities, values, and beliefs - Assess the relative priority of each health-related need of the patient to create a prioritized problem list - Assess if a patient requires a referral for their health-related needs - Assess whether a patient is eligible for a CDC-recommended immunization
3. Create a care plan in collaboration with the patient, others entrusted by the patient, and other health professionals to optimize pharmacologic and nonpharmacologic treatment. Example tasks: - Create person-centered treatment goals - Create a prioritized list of evidence-based and patient-centered treatment options to discuss with members of the healthcare team/patient/caregiver - Create a person-centered treatment plan - Create a plan to mitigate the risk of drug interactions and polypharmacy - Create a treatment plan that incorporates potential strategies to minimize cost for the patient, such as formulary review, patient assistance programs, medication discount programs - Create a plan to monitor the safety and efficacy of the treatment plan - Create an individual education plan for the patient and/or caregiver
4. Contribute patient specific medication-related expertise as part of an interprofessional care team. Example tasks: - Explain a pharmacist's role and responsibilities to a healthcare team - Apply the PPCP as a member of an interprofessional team - Communicate a patient's medication-related problem(s) to the healthcare team - Provide recommendations to the healthcare team to resolve and/or monitor medication-related problems - Provide evidence-based drug information to the healthcare team
5. Answer medication related questions using scientific literature. Example tasks: - Ask clarifying questions to identify and address the true question - Perform a systematic search of tertiary, secondary, and primary resources - Identify and retrieve high-quality scientific literature - Analyze scientific literature - Provide written or verbal response to the true question, including findings and recommendations
6. Implement a care plan in collaboration with the patient, others trusted by the patient, and other health professionals. Example task: - Initiate, modify, or discontinue medication therapy - Present necessary information to a colleague during a handoff or transition of care

- Schedule follow-up care as needed (e.g. labs or tests, follow-up appointments)
- Document the findings, recommendations, plan, and pharmacy service provided
- Discuss the care plan with a patient and/or others trusted by the patient

7. Fulfill a medication order.
   Example task:
   - Enter an order or prescription into an electronic health or pharmacy record system
   - Perform calculations required to compound, dispense, and administer mediations
   - Perform a prospective drug utilization review
   - Adjudicate a third-party claim
   - Identify and manage drug therapy problems
   - Consider formulary preferred medications when making recommendations
   - Complete an authorization process for a non-preferred medication
   - Prepare non-sterile and/or sterile medications
   - Perform a quality assurance check on prepared medications prior to dispensing
   - Dispense and administer a product including injectable medications and immunizations
   - Adhere to state and federal laws/regulations and site quality and safety procedures

8. Educate the patient and others trusted by the patient regarding the appropriate use of a medication, device to administer a medication, or self-monitoring test.
   Example tasks:
   - Provide education and self-management training to the patient or caregiver
   - Assess the learning needs of a patient and others trusted by the patient
   - Select a method for providing education in the given environment
   - Actively engage the patient in the education session
   - Identify, select, or develop supportive education materials
   - Determine effectiveness of education by assessing a patient's understanding and/or their ability to demonstrate the technique

9. Monitor and evaluate the safety and effectiveness of a care plan.
   Example tasks:
   - Collect monitoring data at the appropriate time interval(s)
   - Evaluate the selected monitoring parameters to determine the therapeutic and adverse effects related to the treatment plan
   - Recommend modifications or adjustments to an existing medication therapy regimen based on patient response

10. Report adverse drug events and/or medication errors in accordance with site specific procedures.
    Example tasks:
    - Identify factors of systems associated with errors or risk of errors
    - Determine points of intervention within system(s) to prevent or minimize medication-related errors
    - Report and document adverse drug events and medication errors to stakeholders

11. Deliver medication of health-related education to health professionals or the public.
    Example tasks:
    - Lead a discussion regarding published primary literature and its application to patient care
    - Develop and deliver a verbal, digital, or written medication or health-related educational program to health professional(s), a community, or other groups

12. Identify populations at risk for prevalent diseases and preventable adverse medication outcomes.
    Example tasks:
    - Perform a screening assessment to identify patients at risk for prevalent diseases in a population and triage, when needed
    - Evaluate individual and/or aggregated patient data to determine patients or populations at risk for a disease

13. Perform the technical, administrative, and supporting operations of a pharmacy practice site.
    Example tasks:
    - Execute pharmacy policies and procedures
    - Delegate work activities to pharmacy team members
    - Provide formative feedback on pharmacy team dynamics, workflow, processes, and operations
    - Manage pharmacy workflow to ensure efficiency and safety
    - Use technology to support the pharmacy workflow
    - Execute pharmacy quality improvement activities
    - Procure inventory to ensure continued pharmacy operations
    - Prepare for regulatory visits and inspections

STUDENT INTRODUCTION WORKSHEET

This document should be filled out by the student prior to starting a rotation and shared with the preceptor in advance of or during the first day of the rotation. It is meant to help open the lines of communication between the preceptor and the student and to set up proper expectations for the experience.

Student Name: _____

Student Email: _____

Student Phone Number: _____

If this is a new site and/or a new preceptor you haven't worked with in the past, please describe your pharmacy work history (if you have not worked in a pharmacy before, please indicate that.)

My personal, specific, measurable goals for this rotation are:

1.

2.

3.

Why did you choose this rotation and what do you expect to gain from this rotation?

What are your goals and plans post-graduation? (Signed offers with community pharmacy, residency, specialty fields, etc.)

PROJECT & PRESENTATION IDEA LIST

Project parameters, formatting requirements and due dates will vary by rotation. Make sure to discuss expectations in advance with your preceptor.

Required on select rotations

- Drug information responses
- Topic discussions
- Journal club
- Disease state/patient case presentation
- Medical error report
- Drug interaction report
- Patient care plans
- Formulary review

Additional project ideas

- SOAPE note
- New drug review /drug monograph
- New/updated guideline presentation
- In-service to technicians, pharmacy staff, nursing staff
- Medication use evaluation
- P&T projects
- Newsletter article
- Brief drug summaries (e.g. class, mechanism, side effects, counseling points)
- Deliver topic discussion for IPPE students (layered learning)
- Review/update standard operation policy and/or procedure
- Review/update order sets
- Develop staff competencies
- Health and wellness tabling (screening and/or patient education)
- Brown bag medication review
- Community outreach education
- Inspections/Audits
- Regulatory projects
- Medication safety/analysis reports

ADDITIONAL RESOURCES FOR STUDENTS

1. **Experiential Education Canvas Page** – "Riskin's Helpful Materials"
    - Journal club template
    - Patient case template
    - SOAPE templates
    - Counseling guides
    - Patient interview guides
    - SCHOLAR-MAC

2. **ASHP How to Evaluation Primary Literature** - https://www.ashp.org/-/media/assets/pharmacy-practice/resource-centers/preceptor-toolkit/sicp-busy-day-evaluate-literature-module.pdf

3. **LinkedIn Learning** – an online educational platform with more than 5,000 courses that can help you develop skills through expert led videos. Available through HPD library-https://sherman.library.nova.edu/auth/index.php?aid=1641

    - Software training: Microsoft Office 365, Excel, PowerPoint, Outlook, Word, Teams
    - Communication
    - Collaboration and working in teams
    - Presentation skills
    - Professional development
      …and so much more

Patient Care and Administrative Activities Minimum Requirements: To achieve the learning objectives of the IM APPE, students must interact with patients, providers, and the healthcare team.	Preceptor Initials to Indicate Completion
Participate in patient centered care activities for assigned patients with a variety of disease states. At least 50% of the following disease states/patient characteristics should be encountered as primary acute diagnosis or comorbid conditions (additional disease states other than those included on this list may be assigned by the preceptor): ☐ Hypertension ☐ Nausea / vomiting ☐ Seizure / epilepsy ☐ Heart Failure ☐ Cirrhosis ☐ Depression ☐ Acute coronary syndrome ☐ Viral hepatitis ☐ Substance abuse ☐ Arrhythmias ☐ Inflammatory bowel disease ☐ Anxiety ☐ Dyslipidemia ☐ COPD ☐ Altered mental status / dementia ☐ Venous thromboembolism ☐ Asthma ☐ Anemia / sickle cell anemia ☐ Stroke ☐ Acute kidney injury ☐ Thrombocytopenia ☐ Diabetes ☐ Chronic kidney disease ☐ Arthritis ☐ Diabetic ketoacidosis ☐ Pneumonia ☐ Enteral tube feeding ☐ Thyroid disorders ☐ Urinary tract infection ☐ Total parenteral nutrition ☐ Peptic ulcer disease ☐ Skin and soft tissue infection ☐ Oncology supportive care ☐ Gastrointestinal bleeding ☐ HIV/AIDS ± opportunistic infections ☐ Pregnancy or lactation ☐ Diarrhea / constipation ☐ Fungal infection	
Perform patient centered care activities for all assigned patients to include: ▪ Review labs, signs and symptoms of disease, physical assessment, and relevant testing and procedures before or during admission to develop a foundation knowledge of the patient and disease states ▪ Evaluate the use of medications for therapeutic appropriateness, medication related problems, dose and dose adjustments, and potential for IV to PO conversion ▪ Interact with the patient by performing medication history interview, medication reconciliation, discharge counseling, and transition of care communication ▪ Interact with providers and healthcare team by communicating medication discrepancies, therapeutic and medication selection recommendations, formulary substitution, IV to PO conversion, pharmacokinetic and nutrition assessments, adverse medication reactions, and drug information	
Discuss the administrative responsibilities of an internal medicine pharmacist	
Assessment of Patient Care Activities and Professional Development (Minimum Requirements): To document achievement of the learning objectives for the IM APPE, students are evaluated on their ability to successfully complete the following:	**Preceptor Initials to Indicate Completion**
Create 6 patient-centered care plans *Care plans must incorporate at least five of the following disease states: heart failure, ACS/coronary artery disease, atrial fibrillation, COPD/asthma, infectious disease, renal disease, hepatic disease, diabetes, and stroke*	
Complete 2 written formal drug information responses using college or institutional documentation form, citing appropriate references	
Complete and document 5 pharmacokinetic consults	
Complete and document 15 IV to PO therapy conversions	
Complete and document 15 renal dose adjustment recommendations	
Complete and document 5 antibiotic therapy recommendations based on culture/lab results and/or patient status	
Complete and document 5 medication reconciliations including patient medication history	
Participate in 6 or more topic discussions (preceptor or student led) *Topics to include at least five of the following disease states: heart failure, ACS/coronary artery disease, atrial fibrillation, COPD/asthma, infectious disease, renal disease, hepatic disease, diabetes, and stroke*	
Prepare and present 1 journal club	
Prepare and present 1 formal disease state/patient case presentation	
Complete 1 medication error report to appropriate individuals and agencies *May be simulated if no opportunity available*	
Discuss and/or receive feedback from preceptor on career planning and professional development activities including CV, letter of intent, professional website, interview practice, residency/fellowship/job resource discussions, etc.	
Optional Requirements	**Preceptor Initials to Indicate Completion**
Manage a patient with total parenteral nutrition (TPN)	
Complete an in-service to staff and healthcare professionals	
Participate in a multidisciplinary committee meeting (e.g., Pharmacy and Therapeutics, Infection Control, Medication Safety, Antibiotic Stewardship) and discuss role of committee and meeting proceedings with preceptor	
NAPLEX/MPJE review questions focused on relevant disease states such as *heart failure, ACS/coronary artery disease, atrial fibrillation, COPD/asthma, infectious disease, renal disease, hepatic disease, diabetes, and stroke*	

Patient Care and Administrative Activities Minimum Requirements: To achieve the learning objectives of the AmbCare APPE, students must interact with patients, providers, and the healthcare team.	**Preceptor Initials to Indicate Completion**
Participate in patient centered care activities for assigned patients with a variety of disease states. At least 50% of the following disease states/patient characteristics should be encountered (additional disease states other than those included on this list may be assigned by the preceptor): ☐ Hypertension ☐ COPD ☐ HIV/AIDS ± opportunistic infections ☐ Anticoagulation ☐ Asthma ☐ Hormonal contraceptives ☐ Dyslipidemia ☐ Smoking cessation ☐ Hormone replacement therapy ☐ Heart failure ☐ Obesity ☐ Benign prostatic hypertrophy ☐ Atrial fibrillation ☐ Osteoporosis ☐ Incontinence ☐ Diabetes ☐ Pain management ☐ Immunizations	
Perform patient centered care activities for all assigned patients to include: ▪ Review labs, signs and symptoms of disease, physical assessment, and relevant testing and procedures to develop a foundation knowledge of the patient and disease states ▪ Evaluate the use of medications for therapeutic appropriateness, medication related problems, identification and management of polypharmacy, and dose / dose adjustments ▪ Interact with the patient by performing medication history interview, physical assessment (as appropriate), and medication or disease state counseling ▪ Assess cultural and socioeconomic barriers of patient care including access to medications, access to appropriate healthcare professionals, and health literacy/numeracy. Assist patients with prior authorization consults, medication recommendations, patient assistance programs, and/or other means to facilitate access to care, as applicable. ▪ Interact with providers and healthcare team by observing patient visit (if available), communicating medication discrepancies, therapeutic and medication selection recommendations, adverse medication reactions, and drug information	
Discuss the administrative responsibilities of an ambulatory care pharmacist (e.g., quality metrics, reimbursement, pharmacist billing practices, etc.)	
Assessment of Patient Care Activities and Professional Development (Minimum Requirements): To document achievement of the learning objectives for the AmbCare APPE, students are evaluated on their ability to successfully complete the following:	**Preceptor Initials to Indicate Completion**
Create 6 patient-centered care plans to include specific goals of therapy and endpoint monitoring *Care plans must incorporate at least 4 of the following disease states: diabetes, hypertension, dyslipidemia, anticoagulation, and COPD/asthma*	
Perform at least 2 of the following patient assessments: *Blood pressure, pulse, and temperature* *Point of care tests (INR, blood glucose, etc.)* *Physical assessment (ex. diabetic foot exam)*	
Provide 4 patient counseling/education sessions (individual or group) on medications, medication delivery, medical devices, health and wellness, and/or disease states (e.g., blood pressure monitor, glucometer, inhaler, insulin vial/pen, DME, immunizations, lifestyle modifications, etc.)	
Participate in 6 or more topic discussions (preceptor or student led) *Topics to include at least the following disease states: diabetes, hypertension, dyslipidemia, anticoagulation, and COPD/asthma*	
Prepare and present 1 journal club	
Prepare and present 1 formal disease state/patient case presentation	
Complete 2 written formal drug information responses using college or institutional documentation form, citing appropriate references	
Discuss and/or receive feedback from preceptor on career planning and professional development activities including CV, letter of intent, professional website, interview practice, residency/fellowship/job resource discussions, etc.	
Optional Requirements	**Preceptor Initials to Indicate Completion**
Evaluate a collaborative practice agreement	
Complete an in-service to staff and healthcare professionals	
NAPLEX/MPJE review questions focused on relevant disease states such as *diabetes, hypertension, dyslipidemia, anticoagulation, and COPD/asthma*	

Managing Pharmacy and Clinical Operational Activities Minimum Requirements: To achieve the learning objectives of the Advanced Hospital APPE, students must interact with pharmacy staff, patients, providers, and the healthcare team in performing the following.	Preceptor Initials to Indicate Completion
Processing a Medication Order	
Non-sterile Product Medication Order (including narcotic and investigational medications)	
Review patient-specific information in an electronic health or pharmacy record	
Determine therapeutic need and factors influencing appropriate medication use	
Correctly prepare, verify, and dispense medications with pharmacist oversight	
Perform final verification with pharmacist oversight	
Perform medication reconciliation with pharmacist oversight	
Use automated and barcoding systems for safe medication dispensing and distribution	
Coordinate safe, accurate, and time-sensitive medication distribution	
Resolve problems related to medication distribution (e.g., nurse unable to locate a medication)	
Dispense investigational drugs, if possible (using appropriate storage, distribution, and record keeping requirements)	
Use order sets when filling narcotic medication orders (e.g., sedation protocol, prn order sets, etc.)	
Sterile Product Medication Order	
Discuss regulations outlined in USP <795>, <797>, and <800>	
Use the correct choice of diluent(s), packaging, labeling, infusion rate, concentration, compatibility, expiration dating, and compounding technique for safe administration of a sterile product	
Perform applicable calculations to process and prepare or shadow preparation of orders	
Select appropriate medication delivery system based on medication and patient characteristics (peripheral vs. central line, enteral vs. parenteral, pump systems, etc.)	
Use / shadow appropriate aseptic technique when compounding sterile products (demo products accepted)	
Perform final verification with pharmacist oversight	
Manage Pharmacy Operations	
Review the organizational chart for department of pharmacy and high-level organizational chart for the hospital	
Differentiate between centralized and decentralized pharmacy operations processes	
Assess storage for specific medications (e.g., immunizations, temperature excursions, items used for compounding, etc.)	
Perform drug procurement procedures (e.g., ordering, purchasing, and returns/expired medication)	
Participate in the formulary review process	
Perform cost savings initiatives including choice of therapy, formulary decisions, restriction of high-cost medications to specific disease states, and criteria for use medications	
Manage medication shortages	
Assist with unreconciled dispensed drugs, missing medications, and nursing inquiries (minimum of 2)	
Conduct a narcotic audit (waste, purchasing, discrepancy resolution, diversion management, reports, IPE meetings)	
Perform a mock audit for TJC and board of pharmacy visits using appropriate standards, rules, and/or survey tools	
Assist in management of drug costs and pharmacy budgeting	
Critique and/or contribute to pharmacy policies and procedures	
Assist in training and evaluation of pharmacy technicians and other support staff (e.g., monitoring completion of annual training requirements, creation of training materials, presentation of in-service on new procedure, etc.)	
Assist in creation of a schedule for pharmacy staff (minimum of 1)	
Discuss the administrative responsibilities of a hospital operations director	
Manage Medication and Patient Safety	
Perform oversight of automated and barcoding systems for safe medication dispensation and administration (e.g., processing, correcting medications not scanning, clinical decision support rules, etc.)	
Analyze adverse drug and medication error reporting	
Coordinate a quality assurance and patient safety meeting with the medication safety officer or committee	
Outline how technology and informatics are incorporated in acute care/hospital pharmacy practice	
Manage Clinical Pharmacy Operations	
Assist with and/or analyze a medication use evaluation; identify potential or actual medication related problems through evaluation of medication orders, cost comparisons, therapeutic interchanges, prepared medication products, and/or patient data, including suggested actions to address the issue (minimum of 1)	
Analyze the clinical pharmacy consults for a given time frame for a given area using institutional benchmarks (e.g., kinetic, nutrition, heparin, and/or pain) (minimum of 1)	
Evaluate the quality of clinical services provided using institutional benchmarks (e.g., IV to PO, antibiotic stewardship, nutrition, medication reconciliation) (minimum of 2)	
Create and/or evaluate medication order sets (minimum of 1)	
Create and/or evaluate medication use protocol (minimum of 1)	

Participate/coordinate multidisciplinary committee meetings (e.g., Pharmacy & Therapeutics, Infection Control, Medication Safety, Hospital Policy and Procedure Monthly Meetings) and discuss role of committee and meeting proceedings with preceptor (minimum of 2)	
Discuss the administrative responsibilities of a clinical coordinator	
Assessment of Activities and Professional Development (Minimum Requirements): To document achievement of the learning objectives for the Advanced Hospital APPE, students are evaluated on their ability to successfully complete the following:	**Preceptor Initials to Indicate Completion**
Participate in 4 or more topic discussions (preceptor or student led) *Suggested topics include TJC standards, ISMP safety management, management/leadership principles, pharmacy budget, etc.*	
Prepare and present 1 formal presentation on an administrative or operation-related topic	
Complete 2 written formal drug information responses using college or institutional documentation form, citing appropriate references	
Complete an adverse drug reaction report to appropriate individuals and agencies. (Minimum of 1; may be simulated if no opportunity available)	
Complete a medication error report to appropriate individuals and agencies (minimum of 1; may be simulated if no opportunity available)	
Conduct at least one formulary review	
Develop at least one action plan for addressing medication shortage	
Discuss and/or receive feedback from preceptor on career planning and professional development activities including CV, letter of intent, professional website, interview practice, residency/fellowship/job resource discussions, etc.	
Optional Requirements	**Preceptor Initials to Indicate Completion**
Demonstrate borrow/loan transfer procedures between pharmacies	
NAPLEX/MPJE review questions focused on hospital pharmacy practice, pharmacy law, commonly used drugs, and pharmacy calculations	

Patient Care and Operational Activities Minimum Requirements: To achieve the learning objectives of the Advanced Community APPE, students must interact with pharmacy staff, patients, providers, and the healthcare team in performing the following.	Preceptor Initials to Indicate Completion
Dispense Prescriptions	
Enter patient-specific information into an electronic health or pharmacy record system	
Determine therapeutic need and factors influencing appropriate medication use	
Correctly prepare, pre-verify, and dispense medications with pharmacist oversight	
Assist a patient to acquire medication(s) through a patient assistance program	
Resolve problems related to prescription insurance denials including prior authorization	
Transcribe a telephone medication order from a physician phone call or voicemail	
Transfer a prescription to another pharmacy with pharmacist oversight	
Demonstrate the process for storing, handling, and dispensing hazardous medications	
Demonstrate the process for storing, handling, and dispensing specialty medications and REMS program medications	
Perform Patient Care Services	
Perform Medication Therapy Management	
Triage and Assist with Self-Care of Nonprescription Medications: Triage a patient as appropriate to health status (e.g., refer to primary physician, emergency department, or self-care)	
Assist in the selection of appropriate over the counter medication or DME product	
Administer Immunizations:	
Perform immunization screening/questionnaire, administration, billing, and documentation (e.g., FL shots)	
Review immunization documentation for quality and completeness	
Identify immunization gaps (patients in need) and provide immunization recommendations	
Provide Patient Counseling	
Shadow at onsite clinic, if applicable (e.g., Minute Clinic)	
Manage Pharmacy Operations	
General Operations	
Critique and/or contribute to pharmacy policies and procedures	
Supervise pharmacy technicians and other support staff	
Manage workflow and address conflict resolution within staff	
Assist in scheduling of pharmacy staff	
Assist in training and evaluation of pharmacy technicians and other support staff (e.g., monitoring completion of annual training requirements, creation of training materials, presentation of in-service on new procedure, etc.)	
Interpret pharmacy quality and productivity using continuous improvement techniques	
Report and address quality related events (QRE)	
Participate in a mock BOP inspection	
Plan or simulate a medication safety/quality improvement plan meeting	
Participate and contribute to monthly staff meetings	
Identify workflow procedures that optimize medication use system safety	
Review standards and assist in the preparation for regulatory visits and inspections	
Identify business metrics used to evaluate performance and financial benchmarks	
Identify opportunities to advocate on behalf of patients	
Discuss the administrative responsibilities of a community pharmacist	
Inventory Control	
Perform drug procurement procedures for legend and narcotic medications (e.g., ordering, purchasing, and inventory control)	
Assess storage for specific medications (e.g., immunizations, items used for compounding, etc.)	
Manage medication shortages including action plan development and completion of all necessary paperwork	
Critique and/or contribute to medication returns process	
Critique and/or contribute to a narcotic audit including cycle count and reconciliation	
Address narcotic inventory issues and manage discrepancies	
Critique the pharmacy's process for pulling and discarding of expired medications	
Demonstrate the process for using paper DEA 222 forms	
Undergo CSOS training	
Assessment of Activities and Professional Development (Minimum Requirements): To document achievement of the learning objectives for the Advanced Community APPE, students are evaluated on their ability to successfully complete the following:	**Preceptor Initials to Indicate Completion**
Participate in 4 or more topic discussions (preceptor or student led) *Suggested topics include diabetes, COPD/asthma, tobacco cessation, point of care testing, patient adherence, OTC medications, complementary and alternative medicines, Narcan, immunizations, etc.*	

Prepare and present 1 formal disease state/patient case/topic presentation *Suggested topics include medication safety alert/initiative, new drug evaluation, disease state presentation, staff in-service, legal/regulatory update, journal club, community presentation, etc.*	
Complete 2 written formal drug information responses using college or institutional documentation form, citing appropriate references	
Perform 5 medication therapy management case evaluations **weekly**	
Provide 5 patient counseling/education sessions **weekly** (individual or group) regarding appropriate use of a new medication or how to use a medical device and/or self-monitoring test (e.g., first fill, blood glucose meter, automatic blood pressure machine, inhaler demonstration, etc.)	
Discuss and/or receive feedback from preceptor on career planning and professional development activities including CV, letter of intent, professional website, interview practice, residency/fellowship/job resource discussions, etc.	
Optional Requirements	**Preceptor Initials to Indicate Completion**

Perform patient assessments, such as:
    Blood pressure, pulse, and temperature
    Point of care tests (INR, blood glucose, etc.)	

Demonstrate borrow/loan transfer procedures between pharmacies	
NAPLEX/MPJE review questions focused on community pharmacy practice, pharmacy law, commonly used drugs, and pharmacy calculations	