

# **PHARMACY 2081**

## **Hospital Rotation**

**(2 consecutive weeks @ minimum 35 hours per week)**

**\*\*To start a rotation students must hold a valid Pharmacy Student License for the province of their rotation\*\***

**Please review practice supervision reminder on page 3**

# **PRACTICE EXPERIENCE PROGRAM**

## **Second Year Hospital Rotation Manual**

**Class of 2015**

**Summer 2013**

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Please see: <http://pharmacy.dal.ca/preceptor/> for program policy manual

### **PRECEPTORS**

**FREE ONLINE LIBRARY RESOURCES, SEE MESSAGE ON BACK COVER.**

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**Practice Supervision Reminder to  
Pharmacist Preceptors & Pharmacy Students**  
**IMPORTANT PRACTICE SUPERVISION REMINDER:**

Pharmacy Students and Preceptors are reminded while on clinical rotations, Pharmacy Students must be under the direct personal supervision of their Pharmacist Preceptor. Advice provided from Pharmacy Students to patients and prescribers must be done at all times under the direct personal supervision of the Pharmacist Preceptor.

**Students and preceptors should review at the start of the rotation the strategy that will be followed to achieve the appropriate level of supervision, to meet the pharmacy legislative requirements for the province of the rotation.** A Pharmacy Student must always clearly identify them self when in the practice setting. It is an expectation of the College of Pharmacy that students are supervised by preceptors in a manner that maximizes opportunities for regular formative and summative feedback, and the provision of safe and effective patient care.

**\*\*PLEASE NOTE: Class of 2015 Pharmacy Students have not received education/training about the administration of medications by pharmacists including injections and are therefore, not able to perform any professional functions related to the administration of medications by injection or any other route.\*\***

## **ACKNOWLEDGEMENTS 2013**

On behalf of the Dalhousie College of Pharmacy I would like to thank the many pharmacists in the Maritimes and across Canada who support the Dalhousie University College of Pharmacy Practice Experience Program (PEP). Thank you for making the choice to volunteer as a preceptor and welcome a pharmacy student into your practice site.

Thank you to Tracy Jollymore, Administrative Secretary for PEP, who provides valuable organizational and administrative support to this program.

Thank you to Kim Sponagle, Skills Lab Administrator, and Glenn Rodrigues, Skills Lab II Coordinator, for their assistance with the patient assessment activity in this manual and for offering Skills Lab activities to help prepare students for the second year hospital patient assessment activity.

The feedback received via written and verbal communication from students and preceptors is helpful in evolving and adjusting the Practice Experience Program each year. Comments and suggestions are always welcome.

Pharmacists are the most accessible health care providers in Canada. We are grateful as a College of Pharmacy to have pharmacists who despite having busy and demanding roles make time to contribute to student learning as preceptors with the Practice Experience Program.

If you are interested in preceptor development CE opportunities resources and upcoming events are posted on the College's website at: <http://pharmacy.dal.ca/preceptor/>.

Preceptors are welcome to visit the new Faculty of Health Professions preceptor online education modules for tips on learning and teaching in practice:

<http://preceptor.learningandteaching.dal.ca/>. These modules are accredited for 4 Dalhousie CPE CEU credits. Certificates can be obtained by emailing: [Harriet.Davies@dal.ca](mailto:Harriet.Davies@dal.ca).

Thank you and have an enjoyable rotation!

Sincerely,



Harriet Davies, BSc (Pharm), CDE, M.Ed.  
Coordinator of Clinical Education  
College of Pharmacy  
Dalhousie University  
T: 902-494-3464  
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## Association of Faculties of Pharmacy Educational Outcomes for First Professional Degree Program in Pharmacy<sup>1</sup>

### Medication Therapy Experts

The goal of First Professional Degree Programs in Pharmacy (FPDPP) in Canada is to graduate Medication Therapy Experts. This requires graduates to integrate knowledge, skills and attitudes from all seven educational outcomes. Via this integration, graduates are educated to meet the competencies required of Canadian pharmacists as described by the profession<sup>2</sup>. These competencies include roles relating to care and services for individual patients as well as roles emphasizing the responsibilities of pharmacists to populations of patients, to their communities and to the profession. In addition, graduates who are **Medication Therapy Experts** are educated to fulfill roles beyond those required of pharmacists, acknowledging that the goal of university education extends beyond solely preparing graduates to enter into pharmacy practice.

### Seven Educational Outcomes

**Care Provider:** Pharmacy graduates use their knowledge, skills and professional judgement to provide pharmaceutical care and to facilitate management of patient's medication and overall health needs.

**Communicator:** Pharmacy graduates communicate with diverse audiences, using a variety of strategies that take into account the situation, intended outcomes of the communication and the target audience.

**Collaborator:** Pharmacy graduates work collaboratively with teams to provide effective, quality health care and to fulfill their professional obligations to the community and society at large.

**Manager:** Pharmacy graduates use management skills in their daily practice to optimize the care of patients, to ensure the safe and effective distribution of medications, and to make efficient use of health resources.

**Advocate:** Pharmacy graduates use their expertise and influence to advance the health and well-being of individual patients, communities, and populations, and to support pharmacist's professional roles.

**Scholar:** Pharmacy graduates have and can apply the core knowledge and skills required to be a medication therapy expert, and are able to master, generate, interpret and disseminate pharmaceutical and pharmacy practice knowledge.

**Professional:** Pharmacy graduates honour their roles as self-regulated professionals through both individual patient care and fulfillment of their professional obligations to the profession, the community and society at large.

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<sup>1</sup> [http://www.afpc.info/downloads/1/AFPC\\_Education\\_Outcomes\\_AGM\\_June\\_2010.pdf](http://www.afpc.info/downloads/1/AFPC_Education_Outcomes_AGM_June_2010.pdf)

<sup>2</sup> [http://napra.ca/Content\\_Files/Files/competencies.pdf](http://napra.ca/Content_Files/Files/competencies.pdf)

## AFPC Educational Outcomes and PEP

The Practice Experience Program (PEP) courses are designed to help pharmacy students achieve learning that will contribute to the development of knowledge and understanding that supports the attainment of the following AFPC Educational Outcomes:

**Care Provider:** Pharmacy graduates use their knowledge, skills and professional judgement to provide pharmaceutical care and to facilitate management of patient's medication and overall health needs.

As **Care Providers**, pharmacy graduates:

### A. Assess patients

- 1.1 Develop and maintain professional, collaborative relationships required for patient care.*
- 1.2 Elicit and complete an assessment of required information to determine the patient's medication-related and other relevant health needs.*
- 1.3 Assess if a patient's medication-related needs are being met.*
- 1.4 Determine if a patient has relevant, priority health and wellness needs.*

### B. Plan Care

- 1.5 Refer patients for management of priority health and wellness needs that fall beyond the scope of practice of pharmacists*
- 1.6 Develop a care plan that addresses a patient's medication-therapy problems and priority health and wellness needs.*
- 1.7 Implement the care plan.*

### C. Follow-up and Evaluate

- 1.8 Elicit clinical and / or lab evidence of patient outcomes.*
- 1.9 Assess and manage patients' new medication-related needs.*

### D. Document

- 1.10 Support the continuity of patient care by documenting their patient care activities*

As **Communicators** pharmacy graduates communicate with diverse audiences, using a variety of strategies that take into account the situation, intended outcomes of the communication and the target audience.

As **Communicators**, pharmacy graduates:

- 2.1. Communicate non-verbally and verbally with others.*
- 2.2. Communicate in writing.*
- 2.3. Present information.*
- 2.4. Use communication technology.*

As **Collaborators** pharmacy graduates work collaboratively with teams to provide effective, quality health care and to fulfill their professional obligations to the community and society at large.

As **Collaborators**, pharmacy graduates:

- 3.1. Function as members of teams.*
- 3.2 Support team-based care in a community setting with geographically distinct centres of care.*
- 3.3 Work collaboratively with the patient and his/her health care professionals to provide care and services that facilitate management of the patient's health needs.*

As **Managers** pharmacy graduates use management skills in their daily practice to optimize the care of patients, to ensure the safe and effective distribution of medications, and to make efficient use of health resources.

As **Managers**, pharmacy graduates:

- 4.1 Manage their personal practice.*
- 4.2 Manage the safe and efficient distribution of medications.*
- 4.3 Participate in quality assurance and improvement programs.*
- 4.5 Manage to maintain the sustainability of the practice.*

As **Advocates** pharmacy graduates use their expertise and influence to advance the health and wellbeing of individual patients, communities, and populations, and to support pharmacist's professional roles.

As **Advocates**, pharmacy graduates:

- 5.1 Interpret the advocacy role of pharmacists / profession of pharmacy.*
- 5.2 Promote the health of individual patients, communities, and populations*
- 5.3 Support the role of pharmacists in evolving health care systems.*

As **Scholars** pharmacy graduates have and can apply the core knowledge and skills required to be a medication therapy expert, and are able to master, generate, interpret and disseminate pharmaceutical and pharmacy practice knowledge.

As **Scholars**, pharmacy graduates:

- 6.1 Demonstrate a thorough understanding of the fundamental knowledge required of pharmacists and apply this knowledge in daily practice.*
- 6.2 Provide drug information and recommendations.*
- 6.3 Educate regarding medications and appropriate medication use, including the pharmacist's role.*

As **Professionals** pharmacy graduates honour their roles as self-regulated professionals through both individual patient care and fulfillment of their professional obligations to the profession, the community and society at large.

As **Professionals**, pharmacy graduates:

- 7.1 Demonstrate professionalism throughout patient encounters.*
- 7.2 Practice in an ethical manner which assures primary accountability to the patient.*
- 7.3 Maintain their competence to practice through life long learning.*
- 7.4 Practice in manner demonstrating professional accountability.*
- 7.5 Display a sense of pride in and commitment to the profession and its evolving role in the health care system.*

**Four Year Overview of Curriculum Content**  
**College of Pharmacy, Dalhousie University**  
**Undergraduate Pharmacy Program**

| Program Year | Class   | PracExp (Days)                               | Learning Method   | Credit Hours  |
|--------------|---|--|---|---|
| First        | PHAR 1060.015 Pharmacy Administration I<br>PHAR 1070.03 Skills Lab I<br>PHAR 1080.00 Community Experience Program<br>ANAT 1040.03 Human Anatomy<br>MICR 1050.03 General Microbiology<br>CHEM 2442.03 Introductory Organic Chemistry for Students of Pharmacy<br>PHYL 1400.06 Human Physiology<br>BIOC 1040.06 Biological Chemistry & Metabolism for Students of Pharmacy<br>PHAC 1470.06 Pharmacology for Pharmacy                                    | 14   | Lect; Tut<br>SkilLab; Tut; Lect<br>PracExp<br>Lect; Tut<br>Lect; Tut; SciLab<br>Lect<br><br>Lect; Tut<br>Lect; Tut; SciLab<br><br>Lect; Tut | 1.5<br>3<br>0<br>3<br>3<br>3<br>6<br>6<br>6               |
| Second       | PHAR 2010.03 Critical Appraisal Series I<br>PHAR 2015.03 Topical Products (Dermatologicals)*<br>PHAR 2020.03 Topical Products (Eye & Ear)*<br>PHAR 2035 Respiratory Tract Complaints*<br>PHAR 2040.03 Gastrointestinal Disorders*<br>PHAR 2045.015 Nutrition<br>PHAR 2055.015 Drug Disposition<br>PHAR 2060.015 Pharmacy Administration II<br>PHAR 2070.03 Skills Lab II<br>PHAR 2081.03 Practice Experience I<br>PHAR 2082.03 Practice Experience II | <br><br><br><br><br><br><br><br><br>10<br>10 | Lect<br>Lect; Tut<br>Lect; Tut<br>Lect; Tut<br>Lect; Tut<br>Lect; Tut<br>Lect<br>Lect<br>Lect; Tut<br>SkilLab<br>PracExp<br>PracExp         | 3<br>3<br>3<br>6<br>3<br>1.5<br>1.5<br>1.5<br>3<br>3<br>3 |
| Third        | PHAR 3010.03 Critical Appraisal Series II<br>PHAR 3020.03 Women's Health Issues*<br>PHAR 3030.03 Infectious Diseases*<br>PHAR 3040.06 Cardiovascular Diseases*<br>PHAR 3050.03 Pain and Rheumatology*<br>PHAR 3055.06 CNS and Behavioral Disorders*<br>PHAR 3060.03 Endocrine Disorders*<br>PHAR 3070.03 Skills Lab III<br>PHAR 3080.03 Practice Experience III   | <br><br><br><br><br><br><br><br>20           | Lect<br>Lect; Tut<br>Lect; Tut<br>Lect; Tut<br>Lect; Tut<br>Lect; Tut<br>Lect; Tut<br>SkilLab<br>PracExp                                    | 3<br>3<br>3<br>6<br>3<br>6<br>3<br>3<br>3                 |
| Fourth       | PHAR 4010.015 Critical Appraisal Series III<br>PHAR 4025.06 Pathocytologic Disorders*<br>PHAR 4035.06 Disorders of the Liver and Genitourinary Systems*<br>PHAR 4060.03 Pharmacy Administration III<br>PHAR 4070.015 Skills Lab IV<br>PHAR 4080.045 Practice Experience IV<br>PHAR 4085.045 Practice Experience V   | <br><br><br><br><br>30<br>30                 | Lect<br>Lect; Tut<br>Lect; Tut<br><br>Lect; Tut<br>SkilLab<br>PracExp<br>PracExp  | 1.5<br>6<br>6<br><br>3<br>1.5<br>4.5<br>4.5               |
|              | Degree Totals   | 114  |   | 123   |

Key:      Lect-                      Lecture  
             PracExp-              Practice Experience  
             SciLab-              Science Laboratory  
             SkilLab-              Skills Laboratory  
             Tut-                      Problem-Based Learning Tutorial

\*These are multidisciplinary PBL units consisting of pharmaceutical sciences, pharmacotherapeutics, and pharmacy administration.



**DALHOUSIE UNIVERSITY**  
**College of Pharmacy**  
**Clinical Rotation Orientation Materials**  
**Student Communication Profile (SCP)**

Students please complete this Student Communication Profile (SCP) and review the contents with your preceptor at the start of the rotation.

Students please review the rotation orientation checklist starting on page 11 of this manual with your preceptor at the start of the rotation.

**STUDENT NAME:** \_\_\_\_\_

**STUDENT EMAIL:** \_\_\_\_\_

**CONTACT NUMBER DURING ROTATION:**\_\_\_\_\_

**ROTATION DATES:** \_\_\_\_\_

Is there anything your preceptor should be aware of that might affect your ability to perform on this clinical rotation?

What are your personal learning objectives for this clinical rotation and explain how you intend to achieve them?

What are your clinical, interpersonal and professional strengths?

What other clinical, interpersonal and professional skills would you like to improve during this rotation?

Are there any specific disease states or patient populations you wish to have an opportunity to work with and learn from during this rotation?

*Adapted from Grey-Bruce Regional Health Centre/D'Youville College Student Placement Profile/Dalhousie School of Physiotherapy*

### **STUDENT TRAVEL TO THE SITE**

Please provide your travel/commuting plans to your site each day.

### **ILLNESS/SICK DAYS DURING ROTATIONS**

Please review the sick day policy for PEP in the Information Manual posted on PharmX and on the College's preceptor development website:

[http://pharmacy.dal.ca/Files/FINAL\\_Aug\\_7\\_POLICY\\_MANUAL2012\\_13.pdf](http://pharmacy.dal.ca/Files/FINAL_Aug_7_POLICY_MANUAL2012_13.pdf) and review who to contact at the site should you become ill and are unable to attend rotation.

Is there anything else you wish to discuss with your preceptor at the start of your rotation?

Please continue on and review the orientation checklist that starts on the next page.

## Rotation Orientation Checklist

### ***Student Specific Information to Review***

- ☐ Student is registered with the pharmacy regulatory body and has a pharmacy student license, students must be registered to start rotation
- ☐ Important student direct personal supervision reminder provided on page 3 reviewed and discussed as per requirements for province of rotation.
- ☐ Student prepared to verbally identify themselves during all onsite professional interactions e.g. with patients, prescribers
- ☐ Resumé and letter of introduction received and reviewed
- ☐ Student communication profile reviewed (page 9)
- ☐ Student pre-rotation self-assessment reviewed (pages 46-49)
- ☐ Student emergency contact sheet completed and provided to preceptor (page 16)

### ***Rotation Scheduling and Planning***

- ☐ Daily schedule reviewed eg. arrival, lunch, breaks, departure, scheduled rounds etc.
- ☐ Tentative rotation schedule reviewed for the 2 weeks
- ☐ Tentative date for mid-point evaluation: \_\_\_\_\_
- ☐ Tentative date for final evaluation: \_\_\_\_\_
- ☐ Upcoming CE events or off-hour events: \_\_\_\_\_

### ***Important/Frequently Used Numbers***

- ☐ Pharmacy phone number: \_\_\_\_\_
- ☐ Pharmacy fax number: \_\_\_\_\_
- ☐ Prescriber's line: \_\_\_\_\_
- ☐ Preceptor's pager number: \_\_\_\_\_
- ☐ Preceptor's e-mail: \_\_\_\_\_
- ☐ Drug Information Centre: \_\_\_\_\_
- ☐ Provincial drug plan contact number: \_\_\_\_\_
- ☐ Listing of contact numbers for insurance providers
- ☐ Other important numbers:

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## ***Introductions***

- ☐ Pharmacy Staff
- ☐ Management
- ☐ Health care team members
- ☐ Patients
- ☐ \_\_\_\_\_
- ☐ \_\_\_\_\_

## ***Site Resources***

- ☐ Fridge for food
- ☐ Coat and boot storage
- ☐ Locker
- ☐ Personal area to work, store books and other materials
- ☐ Lunch/Staff Room/Microwave for food
- ☐ Cafeteria
- ☐ Pharmacy department layout
- ☐ Washrooms for staff
- ☐ Drug information resources
- ☐ Library
- ☐ Internet access
- ☐ Site shuttle use (if available between different hospital campuses)
- ☐ Parking
- ☐ Public transit locations
- ☐ \_\_\_\_\_

### ***Computer Information***

- ☐ Review of site's computer use policy
- ☐ Location of computers for patient information
- ☐ Review site's computer software for patient management, prescription processing
- ☐ If applicable, location of computer for word processing, e-mail, online searching etc.
- ☐ If applicable, passwords assigned
- ☐ Review of site's policy re: hand held electronic devices eg. cell phones, pagers, wireless internet, tablets etc.
- ☐ \_\_\_\_\_

### ***Health and Safety***

- ☐ Handwashing stations and site policy on handwashing reviewed
- ☐ Procedure to follow should a student receive a sharps injury
- ☐ Person to contact should a student become ill at the site or at home during the rotation or within 2 weeks of leaving the site
- ☐ Procedure to follow should the student call in sick or have a personal emergency
- ☐ Procedure to follow if late arriving to the site eg. who to contact
- ☐ Review the safety procedures to follow should the pharmacy be robbed
- ☐ Procedure to follow if there is a fire alarm
- ☐ Site specific infectious disease updates (e.g. pandemic or other disease outbreak information)
- ☐ Review of hospital overhead paging codes eg. code blue, code yellow etc.
- ☐ Information re: neighbourhood safety eg. late night departure
- ☐ \_\_\_\_\_

### ***Patient Safety***

- ☐ Introduction to site's medication safety pharmacist
- ☐ Review of pharmacy department's medication incident reporting and documentation procedure
- ☐ Procedure to be followed should a medication incident be identified to a Pharmacy Student.

### ***Dress Code***

- ☐ **Student is wearing an ID badge at all times that clearly identifies them as a Pharmacy Student**
- ☐ Review of site's dress code policy (including footwear)
- ☐ If applicable, site ID badge assigned for duration of rotation and information provided on where and when to return the hospital ID badge
- ☐ Student is wearing Dalhousie University Clinical ID badge
- ☐ \_\_\_\_\_
- ☐ \_\_\_\_\_
- ☐ \_\_\_\_\_

### ***Privacy Policy***

- ☐ Site's privacy policy reviewed
- ☐ Process to access patient charts reviewed
- ☐ \_\_\_\_\_
- ☐ \_\_\_\_\_
- ☐ \_\_\_\_\_

### ***Additional Points to Review***

- ☐ \_\_\_\_\_
- ☐ \_\_\_\_\_
- ☐ \_\_\_\_\_
- ☐ \_\_\_\_\_
- ☐ \_\_\_\_\_
- ☐ \_\_\_\_\_
- ☐ \_\_\_\_\_

**2013 Hospital PEP PHARMACY 2081**  
**Major Activities Quick Summary List**

- ☐ Student resumé received & reviewed by preceptor
- ☐ Student Communication Profile reviewed page 9
- ☐ Preceptor & student have reviewed student self-assessment at start of rotation & made note of any specific learning needs or objectives
- ☐ Student orientation to site completed
- ☐ Student supervision reminder reviewed and discussed, please see notice on page 3
- ☐ **Pharmacy student license verified & posted where required by law**
- ☐ Mid-point check-in & final assessment dates pre-booked
- ☐ Patient located for chart review and patient interview activity in Unit 2
- ☐ Unit 4 activities organized and completed
- ☐ Medication reconciliation pharmacist or team leader contacted to arrange a meeting with student to help with completion of questions & activities in Unit 5 – Patient Safety
- ☐ Drug information questions completed for Unit 6
  - 2 drug information questions
  - 2 questions focusing on IV compatibility, stability etc.
- ☐ Preceptor & student have discussed & planned at least one interprofessional health education activity to complete Unit 7
- ☐ Activities & questions completed in:
  - Units 2, 3, 4, 5, & 6

**Student Emergency Contact Information Sheet for Preceptor/Site**

**Pharmacy 2081 Practice Experience Program**

\*Students please complete this form and provide to your preceptor on the first day of your Practice Experience Program Rotation

**Student Name:** \_\_\_\_\_

**In case of emergency please notify the following person:**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Daytime Phone Number:** Area Code :(     )-\_\_\_\_\_

**Evening Phone Number:** Area Code: (     )-\_\_\_\_\_

**Relationship to student:** \_\_\_\_\_

**College of Pharmacy Contact Numbers**

**College of Pharmacy Main Desk:** Monday to Friday 8:30 am to 4:30 pm  
(*Summer Hours 8:30 am to 4:00 pm*): **902-494-2378**

**Coordinator of Clinical Education, Harriet Davies:** 902-494-3464 [Harriet.Davies@dal.ca](mailto:Harriet.Davies@dal.ca)

**Administrative Secretary, Tracy Jollymore:** 902-494-3832 [Tracy.Jollymore@dal.ca](mailto:Tracy.Jollymore@dal.ca)



## **What needs to be returned to the College of Pharmacy and when?**

**From the Student:** Within 10 regular calendar days of completing the rotation

- Student Self Assessment Forms (signed by Preceptor and Student)
- Student written pharmacy case presentation please see pages 24-26 for complete details
- Student Evaluation of PEP Program Content
- Student Evaluation of Site
- Student Evaluation of Preceptor

**From the Preceptor:** Within 10 regular calendar days of completing the rotation

- Preceptor Evaluation of Student (signed by Preceptor and Student)
- Preceptor Evaluation of PEP Program Content

**Dalhousie University pharmacy students and preceptors please return all required paperwork by the above mentioned deadlines to:**

Coordinator of Clinical Education  
College of Pharmacy, Dalhousie University  
PO Box 15000, 5968 College Street  
Halifax NS B3H 4R2

**FAX: 902-494-1396**

**Faxes are accepted.**

**Preceptors & Students please keep a copy of all forms for your records as well.**

**Preceptor CE certificates are located on pages: 57 & 58**

## UNIT 1 – PROFESSIONAL AND INTERPERSONAL SKILLS

This unit involves a fulfillment of objectives as a continuum over the course of all practice experience program (PEP) rotations. PEP rotations provide opportunities for students to continue to develop professional and interpersonal skills in “real life” practice settings. **The expected level of competence displayed during second year rotations should be consistent with a student who is two years away from entry to practice as a pharmacist.**

***PRECEPTORS: Please see the curriculum overview chart on page 8 of this manual for a summary of the professional practice topics that have been covered by a second year student. Pharmacy Students must always practice under the direct personal supervision of a licensed Pharmacist preceptor.***

Professional and interpersonal skill development is not unique to PEP rotation activities. Proof of continuing professional competency is a standard licensing requirement for pharmacists in Canada. Professional and personal self-assessment and self-reflection is also required by pharmacists throughout their professional career.

### **References:**

1. Professional Competencies for Canadian Pharmacists at Entry to Practice Report of the National Licensing Standards Committee, NAPRA, March 2007 second revision  
[http://napra.ca/Content\\_Files/Files/Entry\\_to\\_Practice\\_Competencies\\_March2007\\_final\\_new\\_layout\\_2009.pdf](http://napra.ca/Content_Files/Files/Entry_to_Practice_Competencies_March2007_final_new_layout_2009.pdf)
2. NSCP Pharmacist's Code of Ethics <http://www.nspharmacists.ca/ethics/index.html>
3. Model Standards of Practice for Canadian Pharmacists, NAPRA, March 2009  
[http://129.128.180.43/Content\\_Files/Files/Model\\_Standards\\_of\\_Prac\\_for\\_Cdn\\_Pharm\\_March09.pdf](http://129.128.180.43/Content_Files/Files/Model_Standards_of_Prac_for_Cdn_Pharm_March09.pdf)

### **Learning Objectives:**

**At the end of the rotation the student will have demonstrated:**

- effective verbal, non-verbal, listening and written communication skills;
- professionalism during pharmacy practice activities;
- skills of self-reflection, self-assessment and self-improvement;
- skills of self-motivation and initiative;

**appropriate for a hospital pharmacy practice setting at a level expected for a student who has completed two out of four years of pharmacy studies.**

**Self-Assessment/Assessment Criteria:**

- Demonstrates commitment to each patient regardless of race, religion, gender, sexual orientation, age, health, cultural or educational background or economic status
- Presents themselves in a professional manner at all times
- Displays appropriate verbal, non-verbal, writing & listening skills
- Able to adapt communication to the needs of the patient
- Displays sensitivity, compassion, respect & empathy to patient concerns
- Follows required dress code
- Is reliable and punctual
- Completes tasks carefully & thoroughly
- Respects patient confidentiality
- Displays a positive attitude toward pharmacy practice
- Shows interest and takes initiative
- Demonstrates good organization & time management skills
- Maintains appropriate professional boundaries
- Accepts responsibility for actions and decisions
- Uses feedback to improve performance
- Completes extra readings, learning activities or assignments when suggested/needed

## **UPDATED: UNIT 2 – HOSPITAL PHARMACY PRACTICE**

In order to meet the College of Pharmacy's curricular outcomes and to encourage students to practice in a manner consistent with the *Model Standards of Practice for Canadian Pharmacists* (NAPRA 2009) and the *Professional Competencies for Canadian Pharmacists at Entry to Practice* (NAPRA March 2007), students are expected to participate in and shadow direct patient care activities while on PEP rotations. **All professional advice provided by a Pharmacy Student must be done under the direct personal supervision of a licensed Pharmacist Preceptor, and a Pharmacy Student must clearly identify them self as a student during all interactions.**

By the end of second year, students have had opportunities to role-play and practice patient care skills with skills lab demonstrators and trained simulated patients. Students have had the opportunity to practice professional communication skills, initial patient interviewing, non-prescription and prescription medication consultation on select therapeutic categories, and have begun to develop skills for patient assessment. Preceptors should note that second year students have covered therapeutics courses in the following areas: Dermatologicals; Eye and Ear; Respiratory Tract Complaints; Gastrointestinal Disorders; and Nutrition. If possible, it may be beneficial to help your student locate a patient to interview who may have experienced some of the therapeutic issues they have studied.

### **Learning Objectives**

**At the end of the rotation the student will have completed the following under the direct personal supervision of the preceptor:**

- strengthened their understanding of the contributions hospital pharmacists make to patient care;
- located and interpreted (under the direct personal supervision of their preceptor) patient information within a hospital chart;
- reviewed the documentation and accessibility policies and procedures for patient charts/records at the rotation site;
- prepared for and completed one patient assessment including a detailed patient interview and chart review (under the direct personal supervision of their preceptor);

**at a level expected for a student who has completed two out of four years of pharmacy studies.**

### **Patient Care Questions & Activities**

- a. Discuss with your preceptor what you have learned about the pharmacist's patient care process at the College of Pharmacy.

- b. During the rotation pharmacy students with the help of their preceptor should arrange to:
  - Participate in patient care rounds with a pharmacist.
  - Arrange to work with/shadow a pharmacist for a morning or afternoon while they are providing clinical/direct patient care services to a specific hospital floor/service or affiliated patient clinic.
- c. During the rotation discuss with your preceptor the patient care roles of a hospital pharmacist (in general).

### **The Patient's Chart/Medical Record Questions & Activities**

- a. Review the layout and design of the patient chart used at your site. Does the site use paper **and/or** electronic charts? Review with your preceptor who is allowed to read and access a patient chart at your site.
- b. Which health care professionals document in the patient's chart?
- c. Where does each health care professional document in the patient chart?
- d. Review the pharmacy documentation standards followed by your site (paper **and/or** electronic).
- e. Is a patient allowed to read their chart? If a patient asks to review their hospital chart what procedure should be followed?
- f. How are records stored as paper **and/or** via an electronic medium?
- g. How do health care professionals obtain an older patient chart that is either not available electronically or not available at the site?
- h. Are patients allowed to review their chart after they have been discharged?

- i. Review with your preceptor under what circumstances the hospital would release information from a patient's chart:
  - Lawyer's request?
  - Subpoena from a court/judge?
  - Medical examiner's warrant?
  - Police warrant?
  - Research project?
  - Other scenarios?

## **UPDATED: Patient Assessment Activity**

**The experience of communicating with and learning from a patient is the most important part of this activity.** Preceptors should note that students have covered the following therapeutic areas so far in their pharmacy studies: Dermatologicals; Eye and Ear; Respiratory Tract Complaints; Gastrointestinal Disorders; and Nutrition. Students are encouraged to discuss any unknown information with their preceptor. Students are also encouraged to read and research medications and disease states that may be new to them. For many students this will be the first time they have completed a patient interview in a real practice setting. A student must clearly identify themselves to the patient and complete this activity under the direct personal supervision of their pharmacist preceptor.

### **Activities:**

- a. Review and discuss with your preceptor the process you will follow to conduct a patient assessment. **Students will have received information about completing a detailed patient interview and chart review during second year skills lab at the College prior to arriving at the site. Please note that for many students this activity will be the first chance they have to complete a real patient interview, and assessment with the help of a preceptor.**
- b. **If possible**, observe the preceptor or another pharmacist conducting a detailed patient assessment (patient interview and chart review).
- c. **Obtain with the help of your preceptor, the consent of a patient able to participate in this exercise.** Prior to the start of this activity it should be explained to the patient that the student is there to practice their patient interviewing skills, and to gain insight into the patient's medication experiences, and to gather information that they will use to practice writing a patient case.
- d. Conduct a brief review of the patient's chart (with the help of your preceptor) prior to the patient interview.
- e. Conduct one detailed patient interview. **During the interview your preceptor must be in attendance.** The preceptor's role during the interview is to observe and provide guidance when needed to the student. **The detailed patient interview may be conducted "solo" or in a group with other students. Students please note: written case presentations must be completed as an individual task to allow each student a chance to practice organizing patient information they have gathered.**
- f. Following the patient interview review the patient chart again with your preceptor (if necessary) to gather or clarify any further information.
- g. Identify with the help of your preceptor, any potential or actual drug related problems (DRPs) recognized as a result of the patient assessment process (detailed patient interview, chart review and preceptor discussions). Discuss possible solutions to any identified DRPs with your preceptor.

- h. Complete the written case presentation exercise that follows. Please see the instructions on pages 24-27 of this manual.

### **Written Pharmacy Case Presentation**

#### **Required PEP Assignment**

#### **Patient Assessment: Detailed Patient Interview and Chart Review**

Students, this assignment must be passed in with your second year PEP paperwork and assessment forms **within 10 days of completing your rotation**. Please review your patient findings and case write-up with your preceptor. **Your preceptor does not need to evaluate the final written case.**

Use the information gathered from the patient assessment to present a patient case in written format. Page 25 of the second year hospital PEP manual summarizes the required written pharmacy case presentation format. When preparing your written case please note the following:

- The case should be well organized, clear and complete.
- **The maximum length for the written case is 3 pages. Please staple pages together. In rare situations and due to the extensive medication experience of a patient a case may need to be longer than 3 pages. However, every effort should be made to be as brief and succinct as possible.**
- Please type your case using 12 point font.
- Written case should be **concise** and **systematic**.
- Please use point form **not** paragraph style.
- **Please remove all patient identifiers.**
- Please include student name and hospital location on each page of the assignment.
- Students may complete the patient interview as part of a group **but must submit their own case write-up** that is their original work.

**Second year case reports will be reviewed during third year Skills Lab.**



## **UPDATED: REQUIRED PHARMACY CASE PRESENTATION FORMAT**

- I. ID:** Patient's initials (*please do not include patient's name*), patient's age, sex and ethnic origin (if applicable to the care of this patient). Include height and weight **(in metric units)**.
- II. Chief Complaint (CC):** the reason for seeking medical attention. *E.g. why has the patient been admitted to hospital?*
- III. History of Present Illness (HPI):** a chronological account of events and symptoms of the chief complaint. This includes pertinent laboratory/diagnostic procedures as well as negative findings.
- IV. Past Medical History (PMH):** list past illnesses, surgical procedures and prior hospitalizations and when they occurred.
- V. Allergies:** list any allergies to medications and non-medications, type of reaction and when it occurred.
- VI. Social History (SH):** if contributory (i.e. lives alone, alcohol abuse, smoker).
- VII. Family History (FH):** if contributory (i.e. familial diseases).
- VIII. Medications:** Please provide a summary that lists the patient's current **and** past medications. **Medications should be provided using generic names; you may insert a chart for this section.**

The following information should be investigated and documented in this section:

- **Current medications:** name, directions, dosage, duration of use, response (efficacy, toxicity), how they use it (is it different from actual prescriber directions/ prn use), medication issues. **Current immunization status.**
  - **Past medications:** identify *relevant* medications taken in the past and include information on response and reason for discontinuation (when pertinent to the patient's current drug management decisions).
  - Include prescription and non-prescription (e.g. non-prescription medications, natural health products etc.). If the patient is not on any – state “*does not take any non-prescription or natural health products.*”
  - Provide any added details about changes in drug therapy, including the reason for the switch, if relevant to the patient's current drug management decisions.
  - Evaluate and document patient adherence with medications in this section.
- IX. Review of Systems (ROS)/Physical Exam (PE):** Only include findings that are pertinent to your involvement with the patient (i.e. pertinent to DRPs found)
  - X. Labs/Diagnostic Tests:** Include findings that are pertinent to your involvement with the patient (i.e. pertinent to DRPs found)

**XI. Course in Hospital:** *Briefly* relay, in chronological order, significant day to day changes in the patient's status, pertinent test results, medication changes, etc. as they pertain to your involvement with the patient.

List any actual or potential drug related problems (DRPs) that were identified from the detailed patient interview. **If known, include a brief note indicating how each DRP was addressed.**

Updated\_2013

## **UPDATED: UNIT 3 – HOSPITAL PHARMACY DRUG DISTRIBUTION SERVICES**

The objectives of this unit are to familiarize the student with the drug distribution system in place at the hospital site. Preceptors are encouraged to tailor this section based on the past hospital work experience of the student. Students are expected to have a good professional understanding of drug distribution systems used within hospitals.

### **Learning Objectives**

**At the end of the rotation the student will have:**

- strengthened their knowledge about the health professionals involved in the distribution of medications within a hospital;
- examined the medication order review process followed by a hospital pharmacy;
- reviewed the drug distribution process followed by a hospital pharmacy;

**at a level expected for a student who has completed two out of four years of pharmacy studies.**

### **Activities & Questions**

- a. Discuss with your preceptor the processes that occur from the initial ordering of a medication through to the administration of the medication to the patient. Take special note of the various health care professionals involved, and their specific roles and responsibilities.

**The following questions will help guide your discussion:**

1. Who has prescribing authority within the hospital (e.g., medical residents, physicians, midwives, nurse practitioners etc)?
2. Can pharmacists prescribe medication in the hospital? Can pharmacists prescribe medication in the community setting?
3. Who can receive and officially record in the patient's chart a prescription for a medication (e.g., registered nurses, medical students, residents, midwives, pharmacists)?

4. Where is a medication order written or recorded?
5. Are medication orders required to be written generically?
6. Are abbreviations acceptable? Does the site use a list of acceptable abbreviations or alpha/numeric symbols for patient charting and orders?
7. Is the medication order received in the pharmacy a 'carbon copy' of the original order or is the medication order entered and received electronically?
8. How and when is a medication order brought to the pharmacy?
9. How and when are medications provided to the floors/units?
10. Compare and contrast the role of the pharmacist and pharmacy technician during drug distribution activities.

**b. After shadowing a Pharmacist and/or Pharmacy Technician involved in the preparation of medication for distribution please answer the following questions based on the drug distribution system used at the rotation site.**

1. Who fills and prepares prescriptions? Observe the preparation of patient prescriptions at the site, and not the roles and responsibilities of the people involved.
2. Who determines whether the medication is safe and appropriate for the patient?
3. Who checks the final prescription product before it leaves the pharmacy?

4. What prescription filling functions are delegated to a pharmacy technician (e.g. “tech-check-tech”, sterile IV or chemotherapy preparation)?
  5. How is a pharmacy technician at your site trained? Can technicians become licensed in the province of your rotation?
- b. Discuss with your preceptor **or** delegate the requirements for procurement, record keeping and distribution of the following :
- **Narcotics and controlled drugs**
  - **Investigational/study drugs**
  - **Non-formulary drugs**
  - **Special access drugs via Health Canada**
  - **Methadone for in hospital use**
  - **Antidotes**
  - **Immunizations**

- **Review the process followed for the destruction and disposal of:**
    - **narcotics**
    - **controlled drugs**
    - **other medications**
- c. Review any special medication policies including:
- **Automatic stop orders related to drug distribution at your site**
  - **Automatic substitution orders**
  - **Night cupboard access**
  - **After hours staffing of the pharmacy and pharmacist on-call services**

### **Drug Distribution Systems**

- a. Compare and contrast the following drug distribution systems:
- unit-dose/inpatient prescriptions
  - pass medications
  - ward stock
- b. Discuss with your preceptor the following questions as they pertain to any ward stock systems in place in the hospital:
- How is ward stock replenished?
  - What system is used to ensure ward stock medications are in date?
  - How does the pharmacy department/hospital determine what medications should be provided as ward stock?

- c. Discuss with your preceptor any medication administration policies that may be in place to allow medications to be under the direct control of the patient in their room.
  
- d. Are patients allowed to bring medications to the hospital that they have been using at home? E.g. natural health products; non-formulary medications.

### **Medication Order Review**

- a. **Discuss the following guiding questions with your preceptor:**
  - Who reviews the medication order in the pharmacy?
  
  - Who enters patient information into the computer patient profile or chart?
  
  - How are problems/questions with a medication order clarified?
  
  - Review with your preceptor some common types of problems/questions identified during the medication order review process?
  
  - Does the hospital computer system include a drug interaction program? Which drug interaction program is used? How is it updated? How are problems reported to the drug interaction database provider?
  
  - Are there any paper based drug interaction resources available on site?
  
  - Are there any other drug interaction resources available for use by pharmacists e.g. hand held devices, on-line resources?

- How are drug interactions managed when entering prescription orders? Who can override the drug interaction to fill the prescription? Is any documentation required e.g. reason for the override?
- b. Observe the preceptor reviewing actual medication orders, and participate where possible.
- c. When a patient is admitted to hospital which health care professional(s) would verify and reconcile the patient's home medication use/medication history? Does the hospital have a medication reconciliation program?
- d. Does the province of your rotation operate a computer database linking community pharmacy profiles with hospitals and other health care providers?
- e. How is permission obtained from a patient to gather patient information from their community pharmacy?
  - If the patient is conscious?
  - If the patient is unconscious?
- f. Discuss some possible reasons why a hospital pharmacist would need to communicate with a patient's community pharmacy.
- g. Who would prepare a medication calendar for a patient when they are discharged from hospital?
- h. Who would look after any required special authorization forms needed for medication coverage in the community?



## **UPDATED: UNIT 4 –PARENTERAL MEDICATIONS**

### **Learning Objectives**

**At the end of the rotation the student will have:**

- learned about the preparation and administration of parenteral medications in the hospital setting;
- reviewed the procedures to follow for the safe handling of sharps;
- learned about the total parenteral nutrition (TPN) services provided by a hospital pharmacy;

**at a level expected for a student who has completed two out of four years of pharmacy studies.**

### **Activities**

- *Using the following questions and activities as a guide and with the help of your preceptor complete the following questions and activities:*

1. Where are IV medications/admixtures prepared in the hospital?
2. Define IV push. Outline the method to be followed in approving the administration of an IV push medication by a nurse at the hospital site. Name three medications that can be administered by *IV push*. Who else can administer medications by *IV push*? Do pharmacists provide advice about the safe and effective use of *IV push* medications?
  - 
  - 
  -
3. What resources are available to assist nurses with the preparation and administration of IV medications?

4. Does the hospital have a parenteral medication administration policy manual?
  5. Review with your preceptor the following question: When a nurse is preparing IV medications for administration and phones the pharmacist for assistance what are some common questions they may ask?
  6. Review with your preceptor what procedure is followed when incompatible IV medications must be administered into a single lumen catheter?
  7. Are there special procedures to follow when a medication is administered intrathecally (IT)? Why?
- **With the help of your preceptor schedule time with a medication nurse to observe the administration of medications, charting procedures, safety checks and other related procedures nurses follow when administering medication to a patient.**

**Discuss the following questions/points with the medication nurse, and then review with your preceptor:**

- Use of medication calendars, med cards, Medication Administration Record (MAR) on the floor/unit.
- Is there a “double check” system in place at point of medication administration to patients?
- Does the hospital employ any special technology to assist with medication administration at the bedside? E.g. bar code scanning

### **UPDATED: Sharp Safety Questions**

- Does the hospital have a sharps safety program?
- What types of sharps safety devices are used at the hospital to protect workers/patients?
- How are sharps disposed of in the pharmacy and patient care areas of the hospital?
- Review some common safety procedures that should be followed to minimize sharps-related injuries?
- What procedures must be followed if a person experiences a sharps-related injury while working or learning in the hospital?

### **Total Parenteral Nutrition (TPN) Observation Activity & Questions**

**Students in second year cover TPN in the pharmacy curriculum and receive guest lectures and case work activities from a TPN pharmacist. Second year rotations provide an opportunity for students to see TPN services in action with patients.**

1. **If the hospital site provides TPN services** make arrangements with the help of your preceptor to meet with the TPN Pharmacist and/or technicians. Using the following questions as a guide learn about the TPN services provided by the pharmacy department:
  - Does the hospital have a standardized TPN order sheet? If possible review the sheet with the TPN pharmacist.
  - Who orders TPN in the hospital?
  - How are the TPN orders checked? By hand? By computer?
  - What types of patients require TPN?
  - Are any patients provided with a home TPN service?

- Ask to view the TPN preparation area. Who prepares the TPN? Who completes the final check on the product before it reaches the patient?
- Does the pharmacy department provide TPN services at scheduled times? Does the hospital pharmacy provide any after hours TPN services?

## **UPDATED: UNIT 5 – PATIENT SAFETY**

### **Learning Objectives**

**At the end of the rotation the student will have:**

- reviewed the patient safety programs and initiatives available in Canada;
- investigated medication safety programs supported or managed by the hospital pharmacy department;
- verified the infection control policies and procedures that are expected to be followed by all health care staff at the hospital site;

**at a level expected for a student who has completed two out of four years of pharmacy studies.**

### **Activities & Questions**

#### **Patient Safety Programs & Initiatives in Canada**

1. Review the patient safety link found on the website for the Canadian Council on Health Services Accreditation <http://www.accreditation.ca/> .
2. Visit the following websites\* and familiarize yourself with the resources available:

[www.ismp.org](http://www.ismp.org)

[www.ismp-canada.org/](http://www.ismp-canada.org/)

[www.saferhealthcarenow.ca](http://www.saferhealthcarenow.ca)

**\*The information found on the above listed websites may help you answer the questions that follow.**

#### **Medication Safety in Practice**

1. Discuss with your preceptor (or their delegate) the term “high-alert medication.”
  - a. What does this term mean?

- b. Identify some high-alert medications commonly used at your hospital site.
  - c. What procedures are followed when dispensing “high-alert” medications in the hospital?
2. Review with your preceptor how the pharmacy department manages look-alike sound-alike (LASA) names of medications. Keep a record of look-alike sound-alike names of medications you encounter during your hospital rotation. Speak with your preceptor to learn how they manage clarifying such orders where there may be confusion about the drug ordered. Visit the following websites for resources on look-alike sound-alike medications (LASA):

[www.ismp.org](http://www.ismp.org)  
<http://www.ismp-canada.org/index.htm>
3. Does the pharmacy use TALLman lettering? Why or why not? Please see the following link for a recent ISMP newsletter about TALLman lettering:

<http://www.ismp-canada.org/download/safetyBulletins/ISMPCSB2010-08-TALLmanforOncology.pdf>
4. Review with your preceptor where concentrated electrolytes (including but not limited to potassium chloride, potassium phosphate, sodium chloride greater than 0.9%) are stored in the hospital and why.
5. How are updates about patient safety issues communicated to hospital staff?
6. What procedures and policies are in place to encourage staff to report medication and patient safety issues?
  - a. What term(s) does the hospital use to describe medication or patient safety events?
  - b. Review the medication incident reporting policy of the hospital.
  - c. Briefly review the procedure that would be followed after a serious patient safety event in the hospital.
7. What are “near misses”? Why should “near misses” be reported?

8. What does the term “medication reconciliation” mean?
- a. Is there a medication reconciliation program at the rotation site?
  - b. Arrange to meet with the medication reconciliation pharmacist or program leader to learn about the medication reconciliation process followed at the rotation site. You have learned about the concept of medication reconciliation at the College of Pharmacy. Please take the opportunity to learn about how medication reconciliation is achieved in a practice setting.
    - i. Review the process that is followed at the site to reconcile patient medication at points of admission, transfer and discharge.
    - ii. Review any tools or forms that are used within the institution to collect Best Possible Medication Histories (BPMH).
    - iii. Who at the site is trained to complete a BPMH?
    - iv. Learn about the role or possible roles of pharmacy technicians in the medication reconciliation process.
    - v. **If possible** arrange to observe a health care professional completing a best possible medication history (BPMH) at admission, transfer **or** discharge.
    - vi. Which health professionals take part in the medication reconciliation process? How many different professions are involved in the process?

### **Adverse Drug Reaction Reporting (Canada Vigilance Program)**

1. Familiarize yourself with the national adverse drug reaction reporting system (Canada Vigilance) in place for Canadians.  
See: [http://www.hc-sc.gc.ca/dhp-mps/medeff/index\\_e.html](http://www.hc-sc.gc.ca/dhp-mps/medeff/index_e.html).
  - *E-mail notification for adverse drug reaction newsletters is available please see the link above for more information.*
2. Review how Adverse Drug Reactions (ADRs) are reported at the site? Learn about the new Accreditation Canada standards related to adverse drug reaction reporting.

3. **If possible** assist a pharmacist with the reporting of an adverse drug reaction or learn about an adverse drug reaction that was recently reported to Health Canada.

### **Infection Control**

1. Review the infection control policies and procedures that must be followed by all health care professionals employed by the hospital.
2. Review the recommended hand washing technique for staff in direct patient care areas.
  - a. Can staff in direct patient care areas wear rings, bracelets or watches?
  - b. Can staff wear artificial nails or long fingernails in patient care areas?
3. Does the hospital provide alcohol hand wash for visitors and staff? Does alcohol hand wash remove all possible pathogens from a person's hands?
4. Does the hospital require staff to receive an annual influenza vaccine?
5. When would a health care professional be required to glove, gown and/ or wear a mask to speak with a patient?
6. When would an employee or student be required to report to occupational health?
7. How does the hospital notify staff members of any potential exposures to communicable diseases?
8. Where can health care providers obtain information on bacterial resistance rates?
9. What do MRSA, VRE, C. Dif stand for?
  - a. What hospital programs or policies are in place to prevent the spread of
    - i. MRSA
    - ii. VRE
    - iii. C. Difficile



## **UPDATED: UNIT 6 – DRUG INFORMATION (DI)**

In the second year Critical Appraisal Series (CAS), students learn about the effective use of various drug information resources both printed and electronic and how to respond to drug information requests. Students learn how to do on-line searches to obtain relevant articles and the beginnings of how to critically appraise those articles. In Skills Lab, students complete drug information questions. For some students, this rotation may be their first experience answering drug information questions in a practice environment. Students can access the Dalhousie Kellogg Library remote access system from any internet web browser page. The link for remote access is:

<http://www.library.dal.ca/Services/Distance/Resources/>

### **Learning Objective:**

**At the end of the rotation the student will have:**

- demonstrated an ability to contribute to patient care by responding appropriately to drug information (DI) requests encountered during the rotation;

**at a level expected for a student who has completed two out of four years of pharmacy studies.**

### **Activities**

1. Complete an orientation to the hospital's drug information resources both paper and electronic.
2. Complete at least **two drug information requests** as coordinated by the preceptor. Review and discuss your findings with your preceptor. Drug information requests may originate from:
  - a. the preceptor
  - b. patients
  - c. medical practitioners
  - d. registered nurses
  - e. other health care professionals
3. Use the following steps as a guide to help you complete the drug information request:
  - a. Receive and understand the question.
  - b. Search for the data.
    - Analyze the data and formulate a response. Integrate the information obtained from several sources, and critically evaluate the appropriateness of each source in relation to the information requested.

- c. Communicate the response (appropriately to the preceptor, **both** verbally **and** in writing).
- d. Communicate responses as appropriate to the requester, verbally **and/or** in writing (**under the direct personal supervision of your preceptor**).
  - Provide a clear and concise response which is referenced appropriately.
- e. Follow-up as required.

*A sample DI Request Form is included with this unit for the student to use or they may use another one of their choice or one used by the rotation site.*

- 4. Answer at least **two** drug information questions that cover IV compatibility, stability, dilution, and/or rate of flow. Questions may come from the preceptor's current or past practice, or another health care professional. **All answers must be reviewed with the preceptor prior to communication with another health care professional.** Students should refer to the following link: <http://pharmacy.dal.ca/druginfo/compat.html> for a list of references that may be helpful for answering compatibility and stability questions. Students are encouraged to understand and use resources available on site including IV compatibility textbooks and online databases. Students should review with their preceptor how professional judgements/assessments are made by a pharmacist when using electronic databases, online references or printed materials to research IV related drug information requests.

## PHARMACY 2081: Drug Information Request/Response Form

|                      |
|----------------------|
| <b>Requester</b>     |
| <b>Location</b>      |
| <b>Address</b> _____ |
| <b>Telephone</b>     |
| <b>Fax</b>           |
| <b>e-mail</b>        |

**Priority**

ASAP ☐      Today ☐      1-2 Days ☐      No Rush ☐

**Source of Request**

Health Professional:

☐ Physician      ☐ Nurse      ☐ Pharmacist      ☐ Patient      ☐ Other

**Background Information** (age, sex, weight, disease states, medications, lab values, allergies etc.):

**Ultimate Question:**

| Type of Request           |                       |                       |
|---------------------------|-----------------------|-----------------------|
| __Administration          | __Formulation         | __Pharmaceutics       |
| __Adverse effect          | __ID/availability     | __Pharmacology        |
| __Alternative therapy     | __Interaction         | __Pregnancy/lactation |
| __Biopharmaceutics        | __Law/regulation      | __Professional issues |
| __Compatibility/stability | __Lecture             | __Therapeutics        |
| __Copy of article         | __Library             | __Toxicity            |
| __Cost                    | __Monograph           | __Other               |
| __Dosage                  | __Patient information |                       |

**Response (use additional paper if needed):**

**References:**

## **UPDATED: UNIT 7 – INTERPROFESSIONAL HEALTH EDUCATION (IPHE) ACTIVITY**

Hospitals offer unique opportunities for pharmacy students “to learn with, from and about other health professionals (<http://www.caipe.org.uk/> ).”

### **Learning Objectives:**

At the end of the rotation the student will have:

- observed and interacted with non-pharmacy health professional(s) to clarify roles and experience interprofessional communication, collaboration and learning;
- reviewed actual and potential opportunities for pharmacists to work in collaboration with other health professionals and;
- reflected upon team functioning within the IPHE activity observed;

**at a level expected for a student who has completed two out of four years of pharmacy studies.**

### **Activities**

- a. Identify with the help of your preceptor at least one IPHE activity during the rotation. Examples include but are not limited to:
  - Attending grand rounds
  - Observing a medical procedure
  - Participating in an outpatient day-clinic
  - Observing Physiotherapy or Occupational Therapy clinics
  - Shadowing a Respiratory Technologist
- b. Prior to attending the IPHE activity and with the help of your preceptor, determine if any special preparation is required.
  - e.g. observation of surgery: the surgical charge nurse or person booking the educational viewing may provide a list of things to do prior to attending the surgery:
    - eat breakfast
    - rest
    - what to do if you feel faint etc.
  - pre-reading before rounds or clinic visit
- c. Once completed, review the IPHE activity with your preceptor. Explore what interprofessional patient care opportunities exist for a pharmacist in the area observed or visited. What types of interprofessional collaboration and communication did you observe?

**COLLEGE OF PHARMACY STUDENT SELF-ASSESSMENT  
PHAR 2081 (Hospital)**

**Pharmacy 2081 (Hospital Pharmacy)**

Please take a moment to complete this self-assessment prior to your arrival on site, and before your midpoint and final evaluations during your Pharmacy 2081 rotation. Read each statement on the left of the chart and when prompted select a description from the assessment scale that best reflects how prepared you are to practice the skill(s) described. Note your selection below the appropriate time (PRE = initial self-assessment, MID=mid-point & END=final). If you are not able to self-assess the described skill (s) please use the notation "NA". In some parts of the self-assessment you may be prompted to answer yes or no.

During your rotation student evaluations are intended to be a constructive dialogue about strengths, and areas for improvement. **The expected level of competence displayed during second year rotations should be consistent with a student who has completed 2 out of 4 years of professional studies.**

Students must review their initial self-assessment at the start of the rotation with the preceptor. A student's initial self-assessment will reflect their past PEP (Practice Experience Program), PBL (Problem Based Learning) group work, CAS (Critical Appraisal Skills) learning, Skills Lab learning and pharmacy work experiences. A review of the student's initial self-assessment will provide information that allows the rotation to be tailored to suit the learning needs of the student. Preceptors assign a grade of pass or fail at the conclusion of the rotation.

**All concerns about a student's performance, attendance or potential failure should be directed to the Coordinator of Clinical Education as soon as the concern is identified.**

**Students must clearly identify themselves as a Pharmacy Student during all professional interactions and must work at all times under the direct personal supervision of a Pharmacist Preceptor.**

**Student Self-Assessment Scale**

1-Needs further development: Please provide suggestions/details

2-At expected level of practice

3-Above expected level of practice

**"...for a Pharmacy Student who has completed 2 out of 4 years of professional studies"**  
N/A- Not able to self-assess or answer the yes or no prompts provided.

Student Name: \_\_\_\_\_  
 Rotation Site: \_\_\_\_\_

Student is licensed as a *Registered Pharmacy Student* in the province of the rotation.  
 YES \_\_\_\_ NO \_\_\_\_ (rotation cannot start until license in place)

| Self-Assessment Scale  | 1<br>Needs Further<br>Development <i>Please<br/>provide suggestions/<br/>details</i> | 2<br>At Expected  | 3<br>Above Expected   |
|--|--|---|---|
| <b>*Students <u>must</u> be licensed to start the rotation.*</b>   |  |   |   |
| In some areas of the <i>Professional and Interpersonal Skills</i> portion of the self-assessment/assessment form the option of answering yes or no to the self-assessment/assessment criteria may be preferred.<br><i>Please provide suggestions/further details for any documentation of "No"</i> |  |   |   |
| Time of Self-Assessment  | PRE  | MID-POINT<br>CHECK-IN                                       | FINAL   |
| <b>Unit 1 - Professional &amp; Interpersonal Skill Development</b>   |  |   |   |
| Demonstrates commitment to each patient regardless of race, religion, gender, sexual orientation, age, health, cultural or educational background or economic status   |  |   |   |
| Presents themselves in a professional manner at all times  |  |   |   |
| Displays appropriate verbal, non-verbal, writing & listening skills  |  |   |   |
| Able to adapt communication to the needs of the patient  |  |   |   |
| Displays sensitivity, compassion, respect & empathy to patient concerns  |  |   |   |
| Follows required dress code  | <input type="checkbox"/> YES<br><input type="checkbox"/> NO                          | <input type="checkbox"/> YES<br><input type="checkbox"/> NO | <input type="checkbox"/> YES<br><input type="checkbox"/> NO |
| Is reliable and punctual   | <input type="checkbox"/> YES<br><input type="checkbox"/> NO                          | <input type="checkbox"/> YES<br><input type="checkbox"/> NO | <input type="checkbox"/> YES<br><input type="checkbox"/> NO |
| Completes tasks carefully & thoroughly   |  |   |   |
| Respects patient confidentiality   |  |   |   |
| Displays a positive attitude toward pharmacy practice  |  |   |   |
| Shows interest and takes initiative  |  |   |   |
| Demonstrates good organization & time management skills  |  |   |   |
| Maintains appropriate professional boundaries  |  |   |   |
| Accepts responsibility for actions & decisions   |  |   |   |
| Uses feedback to improve performance   |  |   |   |
| Completes extra reading, learning or assignments when suggested/needed   | <input type="checkbox"/> YES<br><input type="checkbox"/> NO                          | <input type="checkbox"/> YES<br><input type="checkbox"/> NO | <input type="checkbox"/> YES<br><input type="checkbox"/> NO |

**Comments:**

Student Name: \_\_\_\_\_  
 Rotation Site: \_\_\_\_\_

| Self-Assessment Scale   | 1<br>Needs Further<br>Development <i>Please<br/>provide suggestions/<br/>details</i> | 2<br>At Expected      | 3<br>Above Expected |
|---|--|-----------------------|---------------------|
| Time of Self-Assessment   | PRE  | MID-POINT<br>CHECK-IN | FINAL               |
| <b>Unit 2 - Hospital Pharmacy Practice</b>  |  |                       |                     |
| Completed at least one detailed patient interview and chart review  | <input type="checkbox"/> YES <input type="checkbox"/> NO                             |                       |                     |
| Followed an organized & focused approach for gathering accurate & complete patient information  |  |                       |                     |
| Collected & interpreted patient information gathered to effectively identify & prioritize drug related problems ( <b>under direct personal supervision of the preceptor</b> ) |  |                       |                     |
| <b>Activities &amp; Questions (check once completed)</b>  |  |                       |                     |
| Unit 3 - Hospital Pharmacy Drug Distribution Services   | <input type="checkbox"/> YES <input type="checkbox"/> NO                             |                       |                     |
| Unit 4 - Parenteral Medications   | <input type="checkbox"/> YES <input type="checkbox"/> NO                             |                       |                     |
| Unit 5 - Patient Safety   | <input type="checkbox"/> YES <input type="checkbox"/> NO                             |                       |                     |

**Additional Comments/Notes to Review with Preceptor:**

Student Name: \_\_\_\_\_  
 Rotation Site: \_\_\_\_\_

| Self-Assessment Scale   | 1<br>Needs Further<br>Development <i>Please<br/>provide suggestions/<br/>details</i> | 2<br>At Expected                                 | 3<br>Above Expected |
|---|--|--|---------------------|
| Time of Self-Assessment   | PRE  | MID-POINT<br>CHECK-IN                            | FINAL               |
| <b>Unit 6 - Drug Information</b>  |  |  |                     |
| Provided accurate, timely and appropriate drug & disease information that helped to meet patient care needs at the site |  |  |                     |
| Completed at least 2 different routine drug information questions   | <input type="checkbox"/> YES <input type="checkbox"/> NO                             | <input type="checkbox"/> Reviewed with preceptor |                     |
| Completed at least 2 different drug information questions on IV medications   | <input type="checkbox"/> YES <input type="checkbox"/> NO                             | <input type="checkbox"/> Reviewed with preceptor |                     |
| <b>Unit 7 - Interprofessional Health Education Activity</b>   |  |  |                     |
| Completed at least one interprofessional IPHE activity  | <input type="checkbox"/> YES <input type="checkbox"/> NO                             |  |                     |
| Please provide a brief description of the IPHE activity completed.  |  |  |                     |

Mid-Point Check-In/Assessment Review Date: \_\_\_\_\_  
 Preceptor's Signature: \_\_\_\_\_  
 Student's Signature: \_\_\_\_\_

Final Assessment Review Date: \_\_\_\_\_  
 Preceptor's Signature: \_\_\_\_\_  
 Student's Signature: \_\_\_\_\_



Rotation Site: \_\_\_\_\_

**EVALUATION OF THE PROGRAM CONTENT**  
**PHAR 2081 (Hospital) 2013**  
(By Student)

The information you provide will be used to review the Practice Experience Program. Your thoughtful ratings and constructive comments will be extremely valuable in making appropriate changes.

1. Please indicate whether the objectives and activities of each unit were able to be fulfilled at the site?

| Unit   | Were the objectives & activities able to be fulfilled at the site? |
|--|--|
| Unit 1- Professional & Interpersonal Skills          | <input type="checkbox"/> Yes <input type="checkbox"/> No           |
| Unit 2- Hospital Pharmacy Practice                   | <input type="checkbox"/> Yes <input type="checkbox"/> No           |
| Unit 3- Hospital Pharmacy Drug Distribution Services | <input type="checkbox"/> Yes <input type="checkbox"/> No           |
| Unit 4- Parenteral Medications                       | <input type="checkbox"/> Yes <input type="checkbox"/> No           |
| Unit 5- Patient Safety                               | <input type="checkbox"/> Yes <input type="checkbox"/> No           |
| Unit 6- Drug Information                             | <input type="checkbox"/> Yes <input type="checkbox"/> No           |
| Unit 7- Interprofessional Health Education Activity  | <input type="checkbox"/> Yes <input type="checkbox"/> No           |

2. The Coordinator of Clinical Education was available to assist the student when needed during the rotation.  
☐ Yes    ☐ No    ☐ Did not need to contact
3. I received useful and constructive feedback from my preceptor during the rotation.  
☐ Yes    ☐ No

**Comments:**

On a scale of 1 to 10, please rate your satisfaction with your involvement in the second year Hospital Pharmacy Practice Experience Program in terms of its educational value in your development as a student.

|                    |   |   |   |           |   |   |   |   |                  |
|--------------------|---|---|---|-----------|---|---|---|---|------------------|
| 1                  | 2 | 3 | 4 | 5         | 6 | 7 | 8 | 9 | 10               |
| Highly Unsatisfied |   |   |   | Satisfied |   |   |   |   | Highly Satisfied |

**Dalhousie University pharmacy students please return all required paperwork to the Coordinator of Clinical Education, College of Pharmacy, Dalhousie University, PO Box 15000, 5968 College Street, Halifax NS B3H 4R2, within 10 regular calendar days of completion of the hospital rotation.**

**Fax: 902-494-1396**

Student Name: \_\_\_\_\_  
Rotation Site: \_\_\_\_\_

**EVALUATION OF PRECEPTOR**  
**PHAR 2081 (Hospital)**  
(By Student)

**Preceptor(s) to be Evaluated:** \_\_\_\_\_

This feedback may be shared with your preceptor **after** you have been assigned a grade for the course. Your preceptor will use this feedback in their own professional development, therefore, please apply the principles of providing effective feedback that you have been taught throughout the College of Pharmacy curriculum.

| Statement   | Reply  |
|---|--|
| The preceptor(s) was/were interested in my success as a student during the Practice Experience Program rotation.            | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| The preceptor(s) was/were available for help and guidance, and committed sufficient time to my personal learning/education. | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| The preceptor(s) introduced me to the staff I would be working with and oriented me to the site.                            | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| The preceptor(s) was/were organized and planned the rotation efficiently.   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| The preceptor(s) was/were the person/people most directly involved with my learning at the site.                            | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| The preceptor(s) gave me feedback regarding my progress on a regular basis throughout the rotation.                         | <input type="checkbox"/> Yes <input type="checkbox"/> No |

2. The preceptor(s) conducted at least two evaluations with me, one at the mid-point check-in and one at the end of the rotation.  
☐Yes ☐No

**Comments:**

**Dalhousie University pharmacy students please return all required paperwork including this preceptor evaluation form to the Coordinator of Clinical Education, College of Pharmacy, Dalhousie University, PO Box 15000 Halifax NS B3H 4R2, within 10 regular calendar days of completion of the rotation.**  
**Fax: 902-494-1396**

Student Name: \_\_\_\_\_  
Rotation Site: \_\_\_\_\_

**EVALUATION OF SITE**  
**PHAR 2081 (Hospital)**  
(By Student)

This feedback may be shared with your preceptor and site after you have been assigned a grade for the course. Your feedback will be used by the preceptor and site to develop and enhance PEP rotations held at the site each year. Please apply the principles of providing effective feedback that you have been taught throughout the College of Pharmacy curriculum.

The most enjoyable part of my rotation at this site was:

Please respond to the following statements:

| Statement  | Reply  |
|--|--|
| Site facilities were adequate to explore all of the objectives and activities of the rotation. | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| The site was clean, orderly and had a professional work environment.                           | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| The pharmacy library/internet/resources were appropriate, adequate and easily accessible.      | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| I would recommend this site as an appropriate practice site for a 2nd year hospital rotation.  | <input type="checkbox"/> Yes <input type="checkbox"/> No |

**Comments:**

**Please list any activities or unique opportunities this site provided which were above and beyond the specific objectives of the rotation.**

**Dalhousie University pharmacy students please return all required paperwork to the Coordinator of Clinical Education, College of Pharmacy, Dalhousie University, PO Box 15000, 5968 College Street, Halifax NS B3H 4R2, within 10 regular calendar days of completion of the hospital rotation.**

**Fax: 902-494-1396**

Student Name: \_\_\_\_\_  
Rotation Site: \_\_\_\_\_



## Preceptor's Evaluation of the Student

### Pharmacy 2081 (Second Year Hospital)

Please take a moment to complete this evaluation and be prepared to discuss the results with your student after reviewing and discussing the student's mid-point and final self-assessments. Please read each statement on the left of the chart. Select a rating from the assessment scale provided that best reflects what you have observed about the student's ability to demonstrate that skill during the rotation. Note your selection below the appropriate time (PRE = initial self-assessment, MID=mid-point & END=final). If you are not able to self-assess the described skill (s) please use the notation "NA". In some parts of the assessment you may be prompted to answer yes or no.

Evaluations are intended to be part of a constructive dialogue between you and your student about their strengths, and areas for improvement. **The expected level of competence displayed during second year rotations should be consistent with a student who has completed 2 out of 4 years of professional studies.**

Completion of the column marked "PRE" is not required by preceptors. The student will review their initial self-assessment at the start of the rotation with the preceptor. The student's initial self-assessment in second year will reflect their past PEP (Practice Experience Program), PBL (Problem Based Learning) group work, CAS (Critical Appraisal Skills) learning, skills lab learning and personal pharmacy work experiences. A review of the student's initial self-assessment at the start of the rotation helps provide information that will allow the rotation to be tailored to suit the learning needs of the student.

**All concerns about a student's performance, attendance or potential failure should be directed to the Coordinator of Clinical Education as soon as the concern is identified.**

**Students must clearly identify themselves as a Pharmacy Student during all professional interactions and must work at all times under the direct personal supervision of a Pharmacist Preceptor.**

#### Assessment Scale

- 1- Needs further development: please provide suggestions/details
- 2- At expected level of practice
- 3- Above expected level of practice

**"...for a Pharmacy Student who has completed 2 out of 4 years of professional studies"**  
N/A- Not able to assess or answer the yes or no prompts provided.

Student Name: \_\_\_\_\_  
 Rotation Site: \_\_\_\_\_

Student is licensed as a *Registered Pharmacy Student* in the province of the rotation.  
 YES \_\_\_\_ NO \_\_\_\_ (rotation cannot start until license in place)

| Assessment Scale   | 1<br>Needs Further<br>Development<br><i>Please provide<br/>suggestions/ details</i> | 2<br>At Expected  | 3<br>Above Expected   |
|--|---|---|---|
| <b>*Students must be licensed to start the rotation.*</b>  |   |   |   |
| In some areas of the <i>Professional and Interpersonal Skills</i> portion of the self-assessment/assessment form the option of answering yes or no to the self-assessment/assessment criteria may be preferred.<br><i>Please provide suggestions/further details for any documentation of "No"</i> |   |   |   |
| Time of Assessment   | PRE   | MID-POINT<br>CHECK-IN                                       | FINAL   |
| <b>Unit 1 - Professional &amp; Interpersonal Skill Development</b>   |   |   |   |
| Demonstrates commitment to each patient regardless of race, religion, gender, sexual orientation, age, health, cultural or educational background or economic status   |   |   |   |
| Presents themselves in a professional manner at all times  |   |   |   |
| Displays appropriate verbal, non-verbal, writing & listening skills  |   |   |   |
| Able to adapt communication to the needs of the patient  |   |   |   |
| Displays sensitivity, compassion, respect & empathy to patient concerns  |   |   |   |
| Follows required dress code  |   | <input type="checkbox"/> YES<br><input type="checkbox"/> NO | <input type="checkbox"/> YES<br><input type="checkbox"/> NO |
| Is reliable and punctual   |   | <input type="checkbox"/> YES<br><input type="checkbox"/> NO | <input type="checkbox"/> YES<br><input type="checkbox"/> NO |
| Completes tasks carefully & thoroughly   |   |   |   |
| Respects patient confidentiality   |   |   |   |
| Displays a positive attitude toward pharmacy practice  |   |   |   |
| Shows interest and takes initiative  |   |   |   |
| Demonstrates good organization & time management skills  |   |   |   |
| Maintains appropriate professional boundaries  |   |   |   |
| Accepts responsibility for actions & decisions   |   |   |   |
| Uses feedback to improve performance   |   |   |   |
| Completes extra reading or assignments when suggested/needed   |   | <input type="checkbox"/> YES<br><input type="checkbox"/> NO | <input type="checkbox"/> YES<br><input type="checkbox"/> NO |

**Comments:**

Student Name: \_\_\_\_\_

Rotation Site: \_\_\_\_\_

| Assessment Scale  | 1<br>Needs Further<br>Development <i>Please<br/>provide suggestions/<br/>details</i> | 2<br>At Expected      | 3<br>Above Expected |
|---|--|-----------------------|---------------------|
| Time of Assessment  | PRE  | MID-POINT<br>CHECK-IN | FINAL               |
| <b>Unit 2 - Hospital Pharmacy Practice</b>  |  |                       |                     |
| Completed at least one detailed patient interview and chart review  | <input type="checkbox"/> YES <input type="checkbox"/> NO                             |                       |                     |
| Followed an organized & focused approach for gathering accurate & complete patient information  |  |                       |                     |
| Collected & interpreted patient information gathered to effectively identify & prioritize drug related problems ( <b>under direct personal supervision of the preceptor</b> ) |  |                       |                     |
| <b>Activities &amp; Questions (check once completed)</b>  |  |                       |                     |
| Unit 3 - Hospital Pharmacy Drug Distribution Services   | <input type="checkbox"/> YES <input type="checkbox"/> NO                             |                       |                     |
| Unit 4 - Parenteral Medications   | <input type="checkbox"/> YES <input type="checkbox"/> NO                             |                       |                     |
| Unit 5 - Patient Safety   | <input type="checkbox"/> YES <input type="checkbox"/> NO                             |                       |                     |

Additional Written Comments from Preceptor:

Rotation Site: \_\_\_\_\_

Mid-Point Check-In/Assessment Review Date: \_\_\_\_\_  
Preceptor's Signature: \_\_\_\_\_  
Student's Signature: \_\_\_\_\_

Final Assessment Review Date: \_\_\_\_\_  
Preceptor's Signature: \_\_\_\_\_  
Student's Signature: \_\_\_\_\_

**PASS**

**FAIL**

Rotation Site: \_\_\_\_\_

## 2013 PHAR 2081 (Hospital)

**By Preceptor:** \_\_\_\_\_

The information you provide will be used to review the Practice Experience Program. Your thoughtful ratings and constructive comments will be extremely valuable in making appropriate changes.

1. Please indicate whether the unit objectives and activities were able to be fulfilled at the site.

| Unit   | Were the objectives & activities able to be fulfilled at the site? |
|--|--|
| Unit 1- Professional & Interpersonal Skills          | <input type="checkbox"/> Yes <input type="checkbox"/> No           |
| Unit 2- Hospital Pharmacy Practice                   | <input type="checkbox"/> Yes <input type="checkbox"/> No           |
| Unit 3- Hospital Pharmacy Drug Distribution Services | <input type="checkbox"/> Yes <input type="checkbox"/> No           |
| Unit 4- Parenteral Medications                       | <input type="checkbox"/> Yes <input type="checkbox"/> No           |
| Unit 5- Patient Safety                               | <input type="checkbox"/> Yes <input type="checkbox"/> No           |
| Unit 6- Drug Information                             | <input type="checkbox"/> Yes <input type="checkbox"/> No           |
| Unit 7- Interprofessional Health Education Activity  | <input type="checkbox"/> Yes <input type="checkbox"/> No           |

2. The Coordinator of Clinical Education was available to assist the preceptor when needed during the rotation.

☐ Yes    ☐ No    ☐ Did not need to contact

**Additional Comments:**

On a scale of 1 to 10, please rate your satisfaction with your involvement in this Practice Experience Program in terms of its educational value in your development as a preceptor/pharmacist.

1                      2                      3                      4                      5                      6                      7                      8                      9                      10  
Highly Unsatisfied                      Satisfied                      Highly Satisfied

**Dalhousie University pharmacy students please return all required paperwork to the Coordinator of Clinical Education, College of Pharmacy, Dalhousie University, PO Box 15000, 5968 College Street, Halifax NS B3H 4R2, within 10 regular calendar days of completion of the hospital rotation.**

**Fax: 902-494-1396**

**Thank you for your support of the Practice Experience Program.**



Student Name: \_\_\_\_\_  
Rotation Site: \_\_\_\_\_

**FORM M**

**New Brunswick Pharmaceutical Society  
Continuing Professional Development Learning Project  
Record Sheet: Preceptor Practice Experience Program (PEP)  
Program approved by: College of Pharmacy, Dalhousie University 2012-2013 Academic Year**

Name: \_\_\_\_\_ License No.: \_\_\_\_\_

Date(s) of PEP Rotation(s): \_\_\_\_\_ Site Address: \_\_\_\_\_

Name of Student: \_\_\_\_\_ Pharmacy Class of \_\_\_\_\_

Please check applicable rotation(s):

- ☐ Pharmacy 2081 (Hospital Pharmacy-6 CEU)  
☐ Pharmacy 2082 (Community Pharmacy-6 CEU)  
☐ Pharmacy 3080 (Community Pharmacy-12 CEU)  
☐ Pharmacy 4080 (Hospital Pharmacy-18 CEU)  
☐ Pharmacy 4085 (Community Pharmacy-18 CEU)

**\*please note points are awarded for one student only, multiple points are not awarded for multiple students within the same PEP rotation. File # CED-2013-001**

1. Learning Objectives (as defined by College of Pharmacy):

- To learn to select educational methods and approaches that are appropriate to teach pharmacy students about pharmacy practice within the Canadian health care system.
- To learn about changes in practice theory and ideas as a result of being a preceptor for a pharmacy student.

Learning Objectives (what you hope to achieve/learn from this educational activity)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. List the "take home" messages from this educational activity

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Is this activity related to your practice? Yes No  
If NO, why did you complete/attend it? \_\_\_\_\_

4. Did you learn something new from this activity? Yes No  
If YES, list one item: \_\_\_\_\_

5. Did this activity verify important information you already knew? Yes No

6. Will this educational activity cause you to change your practice? Yes No  
a. If YES, list one item: \_\_\_\_\_

b. If yes, are you committed to making these changes? Yes No

I certify I have completed this educational activity

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please print name: \_\_\_\_\_ License No.: \_\_\_\_\_

**Preceptors please keep this document in your portfolio for 3 years for audit purposes.  
Please do not send to the Society office unless requested**

Student Name: \_\_\_\_\_  
Rotation Site: \_\_\_\_\_



**This certificate shall serve as proof that:**

---

**Province** \_\_\_\_\_

**License Number:** \_\_\_\_\_

**has acted as a preceptor for the following  
Practice Experience Program (PEP) courses in the undergraduate  
curriculum at the College of Pharmacy in 2013\*:**

|                                 |                |         |
|---------------------------------|----------------|---------|
| _____ Pharmacy 2081 (Hospital)  | Student: _____ | 6 CEUs  |
| _____ Pharmacy 2082 (Community) | Student: _____ | 6 CEUs  |
| _____ Pharmacy 3080 (Community) | Student: _____ | 12 CEUs |
| _____ Pharmacy 4080 (Hospital)  | Student: _____ | 18 CEUs |
| _____ Pharmacy 4085 (Community) | Student: _____ | 18 CEUs |

**TOTAL CEUs** \_\_\_\_\_

**\*Please note points are awarded for one student only; multiple points are not awarded for multiple students within the same year of PEP rotation. If you wish to share the total CEU points amongst more than one pharmacist who was actively involved in the student's learning please note this on this form and photocopy for the other pharmacist's CEU record.**

**Please keep a copy of the student assessment forms as part of your CE record.**

**These programs have been accredited by the  
Division of Continuing Pharmacy Education, file #CED-2013-001.**

**Please retain this form for the purpose of CEU self-recording.**

## **ATTENTION PEP PRECEPTORS:**

***Are you interested in free online access to the  
Dalhousie University Library resources?***

Preceptors are reminded that they are welcome to apply for an Adjunct Professor appointment following the completion of a recognized online or live preceptor education program and regular participation as a preceptor with the Dalhousie College of Pharmacy Practice Experience Program. Appointment details can be found on the preceptor website: <http://pharmacy.dal.ca/preceptor/>. This appointment provides preceptors with online Dalhousie University library access.