

# PHA5618 Geriatric Pharmacy

Spring 2021

2 Credit Hours – [A-E Grading]

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*This course is designed to allow the student pharmacist with a strong interest in geriatrics to further develop the skills necessary to make optimal treatment decisions. The course will provide opportunities for advanced discussion of geriatric topics beyond those topics included in the Patient Care course series. Student pharmacists will build upon their current knowledge of geriatric pharmacotherapy through a variety of interactive activities. A holistic approach to treatment through an interdisciplinary focus will be explored.*

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## Teaching Partnership Leader

Shannon Miller, Pharm.D., BCACP

- Email: [smiller@cop.ufl.edu](mailto:smiller@cop.ufl.edu)
- Office: Orlando Campus
- Phone: 407-313-7005
- Office Hours: Please see Canvas course site for posted office hours.

*See Appendix A. for Course Directory of Faculty and Staff Contact Information.*

## Entrustable Professional Activities

This course will prepare you to perform the following activities which the public entrusts a Pharmacist to perform:

1. EPA ST 1.4 Use health records to determine a patient's health-related needs relevant to setting of care and purpose of the encounter
2. EPA ST 2.3 Interpret laboratory test results.
3. EPA ST 2.4 Perform a comprehensive comprehensive medication review (CMR) for a patient
4. EPA ST 2.7 Evaluate an existing drug therapy regimen
5. EPA ST 4.1 Write a note that documents the findings, recommendations, and plan from a patient encounter.
6. EPA ST 5.3 Recommend modifications or adjustments to an existing medication therapy regimen based on patient response.
7. EPA ST 6.3 Communicate a patient's medication-related problem(s) to another health professional.
8. EPA ST 6.4 Use setting appropriate communication skills when interacting with others

## Course-Level Objectives

Upon completion of this course, the student will be able to:

1. Describe the role pharmacists play in the care of a geriatric patient.
2. Identify the challenges in providing care to the geriatric patient population.
3. Identify roles and responsibilities of various health care providers to optimize care in the geriatric patient population.
4. Apply current guidelines related to treatment optimization in select diseases of the aging population.
5. Review a patient's medication therapy and identify drug therapy problems.
6. Evaluate current issues facing the geriatric patient population.
7. Formulate a comprehensive care plan for a complex geriatric patient including resources available to caregivers and financial considerations.

## Course Pre-requisites

1. Satisfactory completion of Blocks 13 and 14 in the Pharm.D. curriculum.

## Course Co-requisites

1. None.

## Course Outline

Please routinely check your campus calendar and Canvas for any messages about changes in the schedule including meeting dates/times, deadlines, and room changes.

Date	Mod#	Activity	Contact Hours [Hr.]a	Learning Objectives Covered	Faculty Module Leader
4/23 10:15-12:05	1	Module 01: Introduction to Geriatrics			Miller
	1.1	Watch: Lecture 1.1: Overview of Geriatric Course and Projects	0.75		Miller, Pullo
	1.2	Watch Lecture 1.2.: Fall Risk Assessment	0.5		Miller
		Read: Geriatric Careers <a href="https://www.americangeriatrics.org/geriatrics-">https://www.americangeriatrics.org/geriatrics-</a>	0.25		

		<u>profession/training-requirements/training-geriatric-pharmacists</u> <u>* Education and Training Examinations &amp; Licensure</u>			
		Read: Using Wisely: A Reminder on the Proper Use of The AGS Beers Criteria pgs 1-3  <a href="https://doi.org/10.1111/jgs.15766">https://doi.org/10.1111/jgs.15766</a>	0.5		
		Read: AGS 2019 Updated AGS Beers Criteria for Potentially Inappropriate Medication Use in Older Adults (pages 1-20)  <a href="https://doi.org/10.1111/jgs.15767">https://doi.org/10.1111/jgs.15767</a>	1.5		
		Supplemental: Pocket Guide Preventing Falls in Older Adults <a href="https://www.cdc.gov/steady/pdf/STEADI-PocketGuide-508.pdf">https://www.cdc.gov/steady/pdf/STEADI-PocketGuide-508.pdf</a>			
		Read: Being Mortal prior to active learning session 6	4.5		
<b>Due April 22<sup>th</sup> 11:59PM</b>	1	<b>Pre Class Assignment: Deprescribing (Individual)</b>			
<b>Thursday April 23<sup>rd</sup> 12:15-2:05</b>	1	Active Learning Session 1: <ul style="list-style-type: none"> <li>• Quiz 1</li> <li>• Geriatric Career Panel</li> <li>• Deprescribing Project</li> <li>• Introduction to: <ul style="list-style-type: none"> <li>○ Caregiver Project Q/A</li> <li>○ Walk in a Patient Shoes Q/A</li> </ul> </li> </ul>	2		Miller, Pullo
<b>Due April 23<sup>rd</sup> 11:59PM</b>		<b>Pre Class Assignment: Interdisciplinary Case Work Up</b>			
	2	<b>Module 02: Multidisciplinary approach to Chronic Disease Management</b>			
		Read: Multidisciplinary Team Approach for elderly patients	0.5		

		Supplemental: Optimizing pharmacotherapy in elderly patients: the role of pharmacists <a href="https://www.dovepress.com/optimizing-pharmacotherapy-in-elderly-patients-the-role-of-pharmacists-peer-reviewed-fulltext-article-IPRP">https://www.dovepress.com/optimizing-pharmacotherapy-in-elderly-patients-the-role-of-pharmacists-peer-reviewed-fulltext-article-IPRP</a>			
<b>Friday April 24th 2:15-4:05</b>		Active Learning Session 2: <ul style="list-style-type: none"> <li>• Quiz 2</li> <li>• Complex Case</li> <li>• Geriatric Clinic Simulation</li> </ul>	2		Miller
	3	Module 03: Chronic Disease States of the Elderly – Neurological			Miller, Pullo
	3.1	Watch: Movie Alzheimer’s Every Minute Counts (on your own, link in Canvas)	2		
		Read: Guidelines for the Management of Cognitive and Behavioral Problems in Dementia <a href="https://doi.org/10.3122/jabfm.2012.03.100183">https://doi.org/10.3122/jabfm.2012.03.100183</a>	2		
<b>Monday April 27<sup>th</sup> 2:15-4:05</b>	3	Active Learning Session 3: Neurological Disease States <ul style="list-style-type: none"> <li>• Quiz 3</li> <li>• Examination of Neurological Consideration (Still Alice Discussion)</li> <li>• Mental assessment workshop</li> </ul>	2		Miller, Pullo
	4	Module 04: Chronic Disease States of the Elderly – Metabolic			Miller
	4.1	Watch: Lecture 2.1 Diabetes in the Elderly: Medication Concerns and Insulin Management	1		Dr Robert Vandervoort

	4.1.1	Read: Note Regarding the Endocrine Society Guideline	0.25		
	4.2	Watch: Lecture 2.2 The Heart of the Matter Managing Cardiovascular Risk in the Elderly	1		Dr Grace Simpson
		Supplemental: 2018 AHA/ACC Guideline on the Management of Blood Cholesterol <a href="https://www.ahajournals.org/doi/pdf/10.1161/CIR.0000000000000625">https://www.ahajournals.org/doi/pdf/10.1161/CIR.0000000000000625</a>			
		Supplemental: – 2017 ACC/AHA Guideline for the Prevention, Detection, Evaluation, and Management of High Blood Pressure in Adults <a href="https://www.ahajournals.org/doi/full/10.1161/HYP.0000000000000065">https://www.ahajournals.org/doi/full/10.1161/HYP.0000000000000065</a>			
		Supplemental:: Treatment of Diabetes in Older Adults: An Endocrine Society Clinical Practice Guideline <a href="https://academic.oup.com/jcem/article/104/5/1520/5413486">https://academic.oup.com/jcem/article/104/5/1520/5413486</a>			
		Supplemental: Older Adults: Standards of Medical Care in Diabetes – 2020 <a href="https://care.diabetesjournals.org/content/43/Supplement_1/S152">https://care.diabetesjournals.org/content/43/Supplement_1/S152</a>			
<b>Due April 28<sup>th</sup> 11:59PM</b>		<b>Assignment: Diabetes/CV Case (Individual)</b>			
<b>Wednesday April 29<sup>th</sup> 2:15-4:05 PM</b>	4	Active Learning Session 4: Metabolic <ul style="list-style-type: none"> <li>• Quiz 4</li> <li>• Diabetes Workshop</li> <li>• Diabetes CV Case</li> </ul>	2		Vandervoort Miller
	5	Module 05: Current Issues			Miller, Pullo

	5.1	Watch: Lecture 5.1: Current Issues in Geriatrics	1		Obringer
		Read: 5 Stages of Grief <a href="https://grief.com/the-five-stages-of-grief/">https://grief.com/the-five-stages-of-grief/</a>	0.5		
<b>Due April 29<sup>th</sup> 11:59PM</b>		<b>Assignment: Caregiver Project (Teams)</b>			
<b>Due April 29<sup>th</sup> 11:59PM</b>		<b>Pre Class Assignment: Medicare (Individual)</b>			
<b>Thursday April 30<sup>th</sup> 12:15-2:05 PM</b>	5	Active Learning Session 5: Communication <ul style="list-style-type: none"> <li>• Quiz 5</li> <li>• Medicare Assignment</li> <li>• Caregiver Project Discussion</li> </ul>	2		Miller, Pullo
	6	Module 06: Geriatric Patient Experience			
<b>Due May 3<sup>rd</sup> 11:59PM</b>		<b>Assignment: Walk in a Patients' Shoes (Individual)</b>			
<b>Monday May 4<sup>th</sup> 12:15-2:05</b>		Active Learning Session 6: End of Life Care/Palliative Care <ul style="list-style-type: none"> <li>• Being Mortal Book Assessment</li> <li>• Being Mortal Discussion</li> <li>• Discuss Walk in a Patients' Shoes</li> </ul>	2		Miller
		<i>Total Contact Hours</i>	28.75		

## Required Textbooks/Readings

Gawande, Atul, author. Being Mortal: Medicine and What Matters in the End. Picador; Reprint edition (September 5, 2017); available print/audio version, ISBN-10: 1250076226, ISBN-13: 978-1250076229

## Suggested Textbooks/Readings

- Access Pharmacy, McGraw-Hill Professional, New York, NY (This resource is available through the UF Health Science Center Library.)

- Dipiro, J, Talbert R, Yee G, Matzke G, Wells B, Posey L. Pharmacotherapy – A pathophysiologic approach. McGraw-Hill Professional, New York, NY, 10th Edition, 2017. ISBN-13: 978-1259587481; ISBN-10: 1259587487 (Available in Access Pharmacy) Use UF VPN to access UF Libraries Resources when off-campus.

The UF HSC library staff can assist you with questions or issues related to accessing online library materials. For assistance contact your College of Pharmacy librarian or visit the HSC Library Website at this URL: <http://www.library.health.ufl.edu/>

## Other Required Learning Resources

None

## Materials & Supplies Fees

## Student Evaluation & Grading

*Evaluation Methods and How Grades are calculated.*

[The Canvas© gradebook will be set-up using the percentages below to compute the grade.]

<b>Assessment Item</b>	<b>Grade Percentage</b>
<i>Medicare Assignment (Appendix C)</i>	5
<i>Deprescribing Project (Appendix C)</i>	10
<i>Caregiver Project (Appendix D)</i>	15
<i>Walk in a Patients' Shoes Reflection (Appendix E)</i>	10
<i>Interdisciplinary Case Workup</i>	10
<i>Quizzes (n=5, 4% each)</i>	20
<i>Diabetes/CV Patient Case (Appendix F)</i>	15
<i>Being Mortal Book Assessment</i>	10
<i>Participation</i>	5
<b>Total</b>	<b>100%</b>

*Table 1. Grading Scale*

<b>Percentage Range</b>	<b>Letter Grade</b>
92.50-100%	A
89.50-92.49%	A-

### **Rounding of grades:**

Final grades in Canvas will be rounded to the 2<sup>nd</sup> decimal place. If the decimal is X.495 or higher, Canvas will round the grade to X.50. The above scale depicts this policy and grades are determined accordingly. Grade assignment is made using this policy and NO EXCEPTIONS will be made in situations where a student's grade is "close."

86.50-89.49%	B+
82.50-86.49%	B
79.50-82.49%	B-
76.50-79.49%	C+
72.50-76.49%	C
69.50-72.49%	C-
66.50-69.49%	D+
62.50-66.49%	D
59.50-62.49%	D-
< 59.50%	E

### **Educational Technology Use**

The following technology below will be used during the course and the student must have the appropriate technology and software.

1. ExamSoft™ Testing Platform
2. Canvas™ Learning Management System

For technical support, navigate to [Educational Technology and IT Support Contact Information](http://curriculum.pharmacy.ufl.edu/current-students/technical-help/) at this URL: <http://curriculum.pharmacy.ufl.edu/current-students/technical-help/>

### **Pharm.D. Course Policies**

The Policies in the following link apply to this course. Review the [General Pharm.D. Course Policies](http://curriculum.pharmacy.ufl.edu/current-students/course-policies/) carefully, at this URL: <http://curriculum.pharmacy.ufl.edu/current-students/course-policies/>

### **Course Specific Policies**

The policies outlined in the 'Course Specific Policies' section apply ONLY to this course unless otherwise specified.



# Appendix A. Course Directory

## Teaching Partnership Leader/Course Director:

Name: Shannon A Miller, PharmD, BCACP

Email: smiller@cop.ufl.edu

Office: Orlando Campus

Phone: 407-313-7005

### Questions to Ask:

- Concerns about performance
- Guidance when there are performance problems (failing grades)
- General questions about content

## Academic Coordinator:

Name: Misti Merrill

Email: absent2pd@cop.ufl.edu or absent3pd@cop.ufl.edu

Office: HPNP 4312

Phone: 352-273-5617

## Educational Coordinators:

Name: McKenzie Wallen

Email: mwallen@cop.ufl.edu

Office: Jacksonville Campus

Name: Iverta Allen

iallen@cop.ufl.edu

Office: Orlando Campus

### Questions to Ask:

- Issues related to course policies (absences, make up exams, missed attendance)
- Absence/tardy requests (Only the Academic Coordinator handles absence requests)
- Questions about dates, deadlines, meeting place
- Availability of handouts and other course materials
- Assignment directions
- Questions about grade entries in gradebook (missing grades, incorrect grade)
- Assistance with ExamSoft® (Distance campus students may contact the Educational Coordinator for use of Exemplify and assistance during exams. The Academic Coordinator is the contact person for issues related to grading and posting of ExamSoft grades.)

## Other Teaching Partnership Faculty Members:

Joshua Pullo, PharmD

Email [jpullo@cop.ufl.edu](mailto:jpullo@cop.ufl.edu)

Office: Orlando Campus

## Appendix B: Description of Assignments

### Pre-Class assignments

1. **Deprescribing project:** This case-based assignment will allow students the opportunity to identify inappropriate and unnecessary medications. Based on Beers criteria and current guidelines, students will identify clinical recommendations to optimize the patient's medications, including decreasing pill burden and therapeutically interchanging medications. Additionally, students will make recommendations based on Florida nursing home guidelines. This will mimic the consultant's role in the geriatric setting.
2. **Medicare assignment:** The case based assignment will allow students to navigate the Medicare website to identify the most appropriate Medicare plan for different patients with different needs. During the assignment, students will navigate the Medicare.gov website, explain the information on the site, manage outpatient medications in different formularies, and ideally reduce patient out of pocket expenses. This will mimic the role of a community pharmacist and their role in helping patients understand the Medicare system.
3. **Diabetes/CV Case:** Students will work up a patient with multiple disease states and complex issues. Using the knowledge acquired from previous patient care classes and this course, students will spend time PRIOR to the active learning session working through cases focusing on diabetes and cardiovascular disease.
4. **Interdisciplinary Patient Case:** Students will work up a patient with multiple disease states and complex issues. Using the knowledge acquired from previous patient care classes and this course, students will spend time PRIOR to the active learning session working the patient case up and completing a pre-class form, which will be turned in for credit before the ALS. This will mimic a rotational experience, in which students are expected to come to clinic prepared with patient background information. In the live session, practitioners from multiple disciplines will present new information about the complex case. Students will work through this information and write a treatment plan to be turned in prior to class. This will allow students to see how geriatric pharmacists interact in multidisciplinary settings and impact the patient care process.

### Out of Class Assignments

1. **Caregiver project:** This week-long project will occur outside of scheduled class times and will allow students the opportunity to experience the challenges a caregiver faces when caring for the elderly and recognize the resources available to caregivers and patients. Students will be given a virtual patient with specific needs. Based on these needs, students will place the patient in an independent living senior community, an assisted living facility, or a skilled nursing facility. Research of these institutions will be required and a site visit will be coordinated at a local facility. Students will pitch idea they have regarding a current issue in geriatric populations in progressive care systems. Students will use some type of multimedia platform to present their idea.
2. **Walk in a Patients' Shoes Project:** Student will spend approximately one week experiencing the challenges that geriatric patients face when managing multiple disease states and the accompanying medication/ financial burden. Students will be assigned a patient role and be provided the necessary at home monitoring equipment and "medications." Based on this experience, students will write a reflection paper and have an in-class discussion

## Appendix C

Assignments	Not Completed (0 pts)	Needs Improvement (2pt)	Acceptable (4 pts)	Exceptional (5 pts)
<b>Deprescribing Assignment</b>	Assignment was not submitted	Less than 50% of problems identified; or more than 1 inappropriate therapies suggested.	More than 50%, but not all of problems were identified and recommended therapies were appropriate. Or all problems were identified and no more than 1 inappropriate therapy was recommended.	100% of problems were identified; all recommended therapies appropriate.
<b>Diabetes/CV Case Assignment</b>	Assignment was not submitted	Plan (recommendation, education, and follow up, monitoring) suggested is inappropriate for at least 1 case. OR Plan is not consistent with the assessment for more than 2-3 cases.	Mostly complete and appropriate plan for each case. OR Plan may not be optimal or lacking proper patient counseling or optimal duration of follow-up for 1 case.	Specific and appropriate recommendations including (specific drug, dose, route, and frequency) of medications, patient counseling, monitoring (e.g. pertinent efficacy and toxicity measures) and follow-up of problems are listed for all cases.
<b>Medicare Assignment</b>	Assignment was not submitted	Less than 50% of questions are addressed or appropriately answered. OR Appropriate Medicare Plan was not identified.	More than 50% but not all of questions addressed or appropriately answered. Appropriate Medicare Plan identified.	All patient issues and concerns are addressed appropriately and appropriate Medicare Plan identified.
<b>Interdisciplinary Case Workup</b>	Assignment was not submitted	Less than 50% of problems identified; or more than 1 inappropriate therapies suggested.	More than 50%, but not all of problems were identified and recommended therapies were appropriate	100% of problems were identified; all recommended therapies appropriate.

## Appendix D: Caregiver Project

Assignment	Not Completed (0 pts)	Needs Improvement (10 pts)	Acceptable (12 pts)	Exceptional (15 pts)
<b>Caregiver Project</b>	Assignment was not submitted and site visit not completed.	Not all questions were answered OR site visit not complete.	All questions were answered but student did not expand on topics. Site visit was completed.	All questions were answered and student expanded on topics. Paper met length requirement. Presentation

### Questions

1. Review the case. Find a local facility that will fit your patient's needs. Provide a detailed description of the facility and why this is a good fit for your patient.
2. Consider the caregiver. What challenges do you anticipate for the caregiver; what challenges do you think they are going through now?
3. Now consider distance is not a restraint. Find a facility anywhere in the United States you would like to place your patient. What about this facility makes it a desirable place to meet your patient's needs?
4. If you could design your own facility, what innovative idea would you like to implement? You may come up with your own idea, or you may research the literature to include programs already implemented.

## Appendix E: Walk in a Patient Shoes Reflection Rubric

Grade	Description
S+ (15 pts)	The assignment demonstrates a clear description of knowledge gained and how the student has made sense of it by relating new to prior knowledge, beliefs and assumptions. There is evidence of the student's development of perspectives and change of behavior.
S (satisfactory, 12pts)	The students has identified some issues and has tried to reflect on them, but they could have incorporated a deeper level of reflection. They need to think of the impact of the knowledge gained and try to relate it to previous knowledge, beliefs and assumptions. They then need to think how this information will inform their future actions.
S- (unsatisfactory, 0 pts)	The student made an attempt at describing some of the knowledge gained but with no attention to personal thoughts or relation to previous experiences. They need to provide a clearer description of the new knowledge gained and convey some personal feelings and related these to learning.

## Appendix F: Diabetes/CV Case Rubric

Criteria	Ratings		
	Proficient (S+)	Competent (S)	Deficient (S-)
<b>Step 1 of PPCP: COLLECTING INFORMATION ABOUT THE PATIENT</b>			
<p><i>examples of what might be included in this section</i></p> <p><b>Subjective</b></p> <ul style="list-style-type: none"> <li>• CC</li> <li>• HPI</li> <li>• PMH</li> <li>• Medication history</li> <li>• Allergies</li> <li>• SH</li> <li>• FH</li> </ul> <p><b>Objective</b></p> <ul style="list-style-type: none"> <li>• Vitals</li> <li>• Labs</li> <li>• Diagnostic tests</li> </ul> <p><b>Current Medication List</b></p>	<ul style="list-style-type: none"> <li>• Information collected is complete and appropriate in every detail.</li> <li>• Complete and concise narrative of pertinent patient information</li> <li>• No extraneous information included</li> </ul>	<ul style="list-style-type: none"> <li>• Missing some patient reported information important for assessing conditions/medication therapy</li> <li>• Partial but accurate summary of pertinent information</li> <li>• Complete medication list included</li> <li>• Some extraneous information included</li> </ul>	<ul style="list-style-type: none"> <li>• Markedly lacking detail required to make an accurate assessment</li> <li>• Inaccurate information included</li> <li>• No allergy information included</li> <li>• Pertinent lab values/results not included</li> <li>• Incomplete medication list</li> </ul>
<b>Step 2 and 3 of PPCP: ASSESSING THE MEDICATION THERAPY/PLANNING TO OPTIMIZE MEDICATION THERAPY</b>			
<p><b>Assessment of current medical condition(s)</b></p> <p><i>For each condition:</i></p> <ul style="list-style-type: none"> <li>• Current Status</li> <li>• Goals of therapy</li> <li>• Drug therapy problem(s) identified</li> <li>• Plans to resolve DTPs</li> <li>• Rationale</li> </ul> <p><b>Chief Complaint</b></p>	<ul style="list-style-type: none"> <li>• Assessment is complete and appropriate in every detail</li> </ul>	<ul style="list-style-type: none"> <li>• Incomplete goal(s) of therapy</li> <li>• Incomplete identification of drug therapy problem(s)</li> <li>• Incomplete rationale</li> </ul>	<ul style="list-style-type: none"> <li>• Wrong Status</li> <li>• Wrong goals of therapy</li> <li>• No goals of therapy</li> <li>• Wrong identification of drug therapy problems</li> <li>• Wrong rationale</li> <li>• Rationale has major omission that would make it unlikely another provider would come to the same plan</li> <li>• Assessment may cause patient harm</li> </ul>
<p><b>Other conditions assessed (if necessary)</b></p> <p>Note: the number of ratings will vary depending on the case. If a problem is not addressed, it will</p>	<ul style="list-style-type: none"> <li>• Assessment is complete and appropriate in every detail</li> </ul>	<ul style="list-style-type: none"> <li>• Incomplete goal(s) of therapy</li> <li>• Incomplete identification of drug therapy problem(s)</li> <li>• Incomplete rationale</li> </ul>	<ul style="list-style-type: none"> <li>• Wrong goals of therapy</li> <li>• No goals of therapy</li> <li>• Wrong identification of drug therapy problems</li> <li>• Wrong rationale</li> <li>• Rationale has major omission that would make it unlikely another</li> </ul>

be given a “deficient” rating.			provider would come to the same plan <ul style="list-style-type: none"> <li>• Assessment may cause patient harm</li> </ul>
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**Step 4 and 5 of PPCP: IMPLEMENTING THE PLAN/SCHEDULING FOLLOW UP**

<b>Plan</b> <i>For each condition:</i> <ul style="list-style-type: none"> <li>• Start/stop/continue specific medication dose, route, frequency, duration</li> <li>• Monitoring parameters for efficacy, toxicity</li> <li>• Follow-up (who, when, what)</li> </ul>	<ul style="list-style-type: none"> <li>• Plan is specific, complete and appropriate in every detail.</li> </ul>	<ul style="list-style-type: none"> <li>• Follow-up acceptable but not ideal</li> <li>• Plan is not consistent with assessment</li> <li>• Recommendation acceptable but not ideal</li> <li>• Plan lacks enough specificity for another provider to follow plan</li> </ul>	<ul style="list-style-type: none"> <li>• Condition not addressed</li> <li>• Wrong recommendation(s)</li> <li>• Wrong follow-up plan</li> <li>• Suggested changes may cause patient harm</li> <li>• No recommendation(s)</li> <li>• No follow-up plan</li> </ul>
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<b>Other conditions (if necessary)</b>  Note: the number of ratings will vary depending on the case. If a problem is not addressed, it will be given a “deficient” rating.	<ul style="list-style-type: none"> <li>• Plan is specific, complete and appropriate in every detail.</li> </ul>	<ul style="list-style-type: none"> <li>• Follow-up acceptable but not ideal</li> <li>• Plan is not consistent with assessment</li> <li>• Recommendation acceptable but not ideal</li> <li>• Plan lacks enough specificity for another provider to follow plan</li> </ul>	<ul style="list-style-type: none"> <li>• Condition not addressed</li> <li>• Wrong recommendation(s)</li> <li>• Wrong follow-up plan</li> <li>• Suggested changes may cause patient harm</li> <li>• No recommendation(s)</li> <li>• No follow-up plan</li> </ul>
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**STRUCTURE**

<ul style="list-style-type: none"> <li>• Note elements in proper place</li> <li>• Spelling/grammar</li> <li>• Unsafe abbreviations</li> </ul>	All elements of the note are in the correct location No grammatical or spelling errors No unsafe abbreviations used	Information misplaced 1 grammatical/spelling errors 1 unsafe abbreviations used	No clear organization to note Missing Information 2+ grammatical/spelling errors 2+ unsafe abbreviations used.
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How your overall grade is determined	<b>Proficient (S+)</b> Must receive 50% or more proficient ratings and 0 deficient ratings to receive an overall score of proficient AND pre-work submitted on time.	<b>Competent (S)</b> Less than 50% proficient ratings and 0 deficient ratings AND pre-work submitted on time.	<b>Deficient (S-)</b> Any deficient ratings or if pre-work not submitted on time.
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If student receives a score of S or S+, the student will receive full credit on the note.

If student receives a score of S-, the student will be required to rewrite the note.

The maximum score a student can receive is 80% of the full grade.

If the student receives a score of S- on the 1<sup>st</sup> rewrite, they will be required to rewrite the note again.

The maximum score a student can received on the 2<sup>nd</sup> rewrite is 60% of the full grade.

If the student receives a score of S- on the 2<sup>nd</sup> rewrite, they will be required to rewrite the note again.

The maximum score a student can received on the 3<sup>rd</sup> rewrite is 40% of the full grade.

NOTE: re-writes will only be allowed if the pre-work was initially submitted on time