

PHA5759 Advanced Pharmacy Practice Experience Readiness

Spring 2023

1 Credit Hour – [Satisfactory-Unsatisfactory Grading]

This course offers students with a capstone experience that provides a transition from the first three years of the curriculum to the fourth year of Advanced Pharmacy Practice Experiences (APPE). The capstone experience provides learning activities and assessments that simulate student responsibilities during an APPE.

Teaching Partnership Leader

Lisa Vandervoort, Pharm.D.

- Email: lvandervoort@cop.ufl.edu
- Office: Lake Nona Campus
- Phone: 407-313-7013

Office Hours: Please see the 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. Collect information to identify a patient's medication-related problems and health-related needs.
2. Analyze information to determine the effects of medication therapy, identify medication-related problems, and prioritize health-related needs.
3. Establish patient-centered goals and create a care plan for a patient in collaboration with the patient, caregiver(s), and other health professionals that is evidence-based and cost-effective
4. Implement a care plan in collaboration with the patient, caregivers, and other health professionals.
5. Follow-up and monitor a care plan.
6. Collaborate as a member of an interprofessional team.
7. Identify patients at risk for prevalent diseases in a population.
8. Minimize adverse drug events and medication errors.
9. Maximize the appropriate use of medications in a population.
10. Ensure that patients have been immunized against vaccine-preventable diseases.
11. Educate patients and professional colleagues regarding the appropriate use of medications.
12. Use evidence-based information to advance patient care.

13. Fulfill a medication order.

Course-Level Objectives

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

1. Demonstrate time-management skills necessary to balance multiple practice-related responsibilities with attention to patient care priorities.
2. Perform simulations related to practice tasks that are student expectations during APPES and are related to the entrustable professional activities and the Pharmacists' Patient Care Process. Specifically:
 - a. Collect information to identify a patient's medication-related problems and health-related needs.
 - b. Analyze information to determine the effects of medication therapy, identify medication-related problems, and prioritize health-related needs.
 - c. Establish patient-centered goals and create a care plan for a patient in collaboration with the patient, caregiver(s), and other health professionals that is evidence-based and cost-effective
 - d. Implement a care plan in collaboration with the patient, caregivers, and other health professionals.
 - e. Follow-up and monitor a care plan.
 - f. Collaborate as a member of an interprofessional team.
 - g. Minimize adverse drug events and medication errors.
Maximize the appropriate use of medications in a population.
 - h. Educate patients and professional colleagues regarding the appropriate use of medications.
 - i. Use evidence-based information to advance patient care.
 - j. Fulfill a medication order.
3. Demonstrate professional demeanor including communication skills during all activities that occur during the course.
4. Demonstrate self-awareness of abilities in the practice-setting and in accomplishing continuous professional development.

Course Pre-requisites

1. Completion of all coursework in Blocks 1-16 of the Pharm.D. curriculum.

Course Co-requisites

1. None.

Course Outline

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

Required Textbooks/Readings

Each student will develop a set of electronic and paper-based resources to personally use when accomplishing the week of activity. These resources must fit within the student's lab coat pocket.

The student may also use their personal laptop to access online resources such as the following:

- AccessPharmacy, McGraw-Hill Professional, New York, NY (This resource is available through the UF Health Science Center Library.) <http://accesspharmacy.mhmedical.com/book.aspx?bookid=1593> - The following resources will be frequently used:
 - Nemire R, Kier K, Assa-Eley MT. Pharmacy Student Survival Guide. 3rd Edition. McGraw-Hill.
 - Brunton L. Goodman and Gilman's The Pharmacological Basis of Therapeutics, McGraw-Hill Professional, New York, NY, 13th Edition, 2018. ISBN-13:978-0071624428; ISBN-10:0071624422 (Available in Access Pharmacy)
 - Dipiro, J, Talbert R, Yee G, Matzke G, Wells B, Posey L. Pharmacotherapy – A pathophysiologic approach. McGraw-Hill Professional, New York, NY, 11th Edition, 2020. ISBN-13: 978-1259587481; ISBN-10: 1259587487 (Available in Access Pharmacy)
 - Other available resources include: Multiple textbooks, Calculators, Pharmacotherapy Casebook and Care Plans, Cases, Self-Assessments and Multimedia Videos
- Krinsky DL, Ferreri SP, Hemstreet B, et al. Handbook of nonprescription drugs: An interactive approach to self-care. 18th ed. Washington, D.C.: American Pharmacists Association; 2015.

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/>

Suggested Textbooks/Readings

The student is also expected to retrieve primary literature references as needed to address patient care needs. These may be accessed through the UF Health Sciences Center Library.

Other Required Learning Resources

None

Materials & Supplies Fees

None

Student Evaluation & Grading

This course is graded using a Satisfactory-Unsatisfactory grading scheme. Requirements for a grade of Satisfactory are listed below. APPE Ready is defined as the student completing the skill with some direction from

the facilitator. That is, a student will be deemed APPE Ready if the student has successfully demonstrated a level of knowledge, skills, and abilities sufficient to perform usual professional activities under direct supervision by a pharmacist/preceptor. A student identified as not APPE ready will be referred to remediation for that specific skill. Remediation is described below.

The faculty will use Appendices C-M to assess performance.

There will also be peer assessments using Appendices L and M

Professional behavior is an important part of being APPE Ready. Attendance is mandatory. If a student needs to miss time during the week, student must email the course coordinator in addition to following the College of Pharmacy absence procedure. The communication must be in the form of a request. In APPE Readiness the student is expected to dress professionally, following the guidelines in the APPE manual. All communication should be respectful. During zoom sessions students should have the camera on and be dressed professionally. The student is expected to participate throughout the entire session, not just during their presentation. All assignments must be submitted.

| Assessment Item | Rubric | Criteria for Satisfactory |
|--|------------|--|
| Pharmacist Patient Care Process | | |
| Rounding* | Appendix C | Assessed as Ready by Facilitator |
| Verbal Recommendation Diabetes Clinic Patient* | Appendix I | Assessed as Ready by Facilitator |
| Verbal Recommendation Warfarin Clinic Patient* | Appendix I | Assessed as Ready by Facilitator |
| Self-Care Patient Recommendation* | Appendix F | Assessed as Ready by Facilitator |
| Communication | | |
| Facilitated Patient Case Discussion* | Appendix J | Assessed as Ready by Facilitator |
| Vancomycin SOAP Note for Initial Dose* | Appendix H | Assessed as Ready by Facilitator |
| Diabetes patient SOAP Note* | Appendix H | Assessed as Ready by Facilitator |
| Warfarin patient interview* | Appendix K | Assessed as Ready by Facilitator |
| Managing Microaggressions | MCQ | 80% or above |
| Application of Knowledge* | | 80% or above combined average on activities listed below |
| Antimicrobial Stewardship Cases | MCQ | Combined average |
| Transitions in Care Case | MCQ | Combined average |
| Inpatient Verification | MCQ | Combined average |
| Anticoagulation case | MCQ | Combined average |
| MTM Cases | MCQ | Combined average |
| Drug Interaction Cases | MCQ | Combined average |
| Self-Care Cases | MCQ | Combined average |
| Oncology Case | MCQ | Combined average |
| Utilize evidence to advance patient care | | |
| Drug Information Question #1* | Appendix D | S requires a total of at least 40/50 |
| Journal Club | Appendix E | Assessed as Ready by Facilitator |
| In-service presentation* | Appendix G | Assessed as Ready by Facilitator |
| Calculations* | | 80% or above combined average on activities listed below |
| Community Cases | MCQ | Combined average |

| | | |
|--|-----|--|
| Vancomycin Case | MCQ | Combined average |
| IV Room Cases | MCQ | Combined average |
| Vancomycin Follow up Case | MCQ | Combined average |
| Heparin Protocol | MCQ | Combined average |
| Aminoglycoside Protocol | MCQ | Combined average |
| Pain Cases | MCQ | Combined average |
| Professionalism^ | | 80/100 points |
| Attendance | | 5 points for each infraction |
| Verbal Communication | | 5 points for each infraction |
| Written Communication | | 5 points for each infraction |
| On time of Submissions of Activities | | 5 points for each infraction |
| Completion of Peer Evaluations | | 5 points for each submission |
| On time of Submission of Personal Plan for Improvement | | 10 points if not completed and submitted |

^Professionalism- Each student will start with 100 points and for each infraction, the number of points next to each item will be subtracted from the total.

*Assessed by Faculty using the definition of APPE Ready for the activity which is provided in the associated rubric.

Rounding of grades:

Final grades in Canvas will be rounded to the 2nd 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."

Remediation:

Remediation will be as follows:

| | |
|---|---|
| Verbal Recommendations or Rounding | Perform the skill again after receiving feedback with Course Coordinator or designee |
| Communication | Perform the skill again after receiving feedback from Course Coordinator or designee |
| Application of Knowledge Canvas assessments | Retake or submit a plan to review |
| Drug Information | Retake with a different question |
| Pharmacy Practice Canvas assessments | Retake or submit a plan to review |
| Professionalism | Meet with practicing pharmacy manager to discuss effects of unprofessional actions on patient care, pharmacy team and health care team. |

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
3. EHRGo™ Academic Electronic Health Record

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 [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/>

Makeup Assignments

Makeup assignments will be required for excused absences. Students must complete the makeup assignment within one month of the course's completion.

Late Assignments

All assignments should be submitted, even if past due date and time. Deductions within professionalism grade will occur if the student does not communicate with the course coordinator.

Respect for Diversity

The University of Florida College of Pharmacy strives to stimulate a culture that promotes diversity and inclusion within an exceptional community of students, faculty, and staff. It is our intent that students from all diverse backgrounds and perspectives be well served by this course, that students' learning needs be addressed both in and out of class, and that the diversity that students bring to this class be viewed as a resource, strength, and benefit.

We intend to present materials and activities that are respectful of diversity: gender, sexuality, disability, age, socioeconomic status, ethnicity, race, and culture. Your suggestions are encouraged and appreciated. Please let us know ways to improve the course's effectiveness for you personally or for other students or student groups.

If any of our class meetings conflict with any of your religious events, an excused absence will be provided when requested using the standard UF COP process as detailed in the [UF COP Course policies](#).

If you feel that you have experienced or witnessed any bias/treatment that falls short of these expectations, you may submit a report through the UF [COP Student Mistreatment Report](#).

Course Evaluation Process

Students are expected to provide professional and respectful feedback on an end-of-course survey sent to them at the end of assigned activities.

Appendix A. Course Directory

Teaching Partnership Leader/Course Director:

Lisa Vandervoort, Pharm.D.

Email: lvandervoort@cop.ufl.edu

Office: Lake Nona Campus

Phone: 407 313 7013

Office Hours: By appointment ONLY.

Questions to Ask:

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

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 SofTest 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:

Gainesville Campus Coordinator:

Kimberly Stultz, Pharm.D. Office Hours: Available via zoom throughout the week

kstultz@cop.ufl.edu

Jacksonville Campus Coordinator:

Chardae Whitner, Pharm.D.

Office Hours: Available via zoom throughout the week

Whitnerc@cop.ufl.edu

Kaitlin Alexander, Pharm.D.

Kaitlin.alexander@cop.ufl.edu

Shauna Buring, Pharm.D.

sburing@cop.ufl.edu

Anthony M. Casapao, Pharm.D., M.P.H.

Casapao@cop.ufl.edu

Larisa Cavallari, Pharm.D., BCPS, FCCP

lcavallari@cop.ufl.edu

Teresa Cavanaugh, Pharm.D., BCPS

TCavanaugh@cop.ufl.edu

Lindsey Childs-Kean, Pharm.D., MPH, BCPS

LChild-Kean@cop.ufl.edu

Emily Cicali, PharmD

Emily.cicali@cop.ufl.edu

Kelsey Cook, Pharm.D., BCPS

Kelsey.cook@ufl.edu

Stacey Curtis, PharmD

scurtis@cop.ufl.edu

David DeRemer, Pharm.D., BCOP, FCCP, FHOPA

DDeRemer@cop.ufl.edu

Eric Dietrich, Pharm.D.

dietrich@cop.ufl.edu

Julio Duarte, PharmD, PhD

Juliod@cop.ufl.edu

Eric F. Egelund, Ph.D., Pharm.D.

EEgelund@cop.ufl.edu

Michelle Farland, PharmD, BCPS, CDE

mfarland@cop.ufl.edu

Carinda J. Feild, Pharm.D.

CFeild@cop.ufl.edu

Reginald Frye, Pharm.D., Ph.D, FCCP

Frye@cop.ufl.edu

Jessica Huston, PharmD.

jessicahuston@cop.ufl.edu

Adonice Khoury, Pharm.D., BCPS

AKhoury@cop.ufl.edu

Tracy Leonard, P.Ph, BCPP, BCACP, CDCES, CPh

Tracy.leonard@cop.ufl.edu

Kalen Manasco, PharmD, BCPS, FCCP, FPPAG

kmanasco@cop.ufl.edu

Kayihura Manigaba, Pharm.D.

manigk@cop.ufl.edu

Robin Moorman Li, Pharm.D., BCACP, CPE

moorman@cop.ufl.edu

Carol Motycka, Pharm.D., BCACP

motycka@cop.ufl.edu

Erin St Onge, Pharm.D.

stonge@cop.ufl.edu

Bradley Phillips, Pharm.D.

bradnp@cop.ufl.edu

Jason Powell, PharmD

JPdrums@ufl.edu

Joshua Pullo, Pharm.D., C.Ph.

jpullo@cop.ufl.edu

Teresa Roane, Pharm.D., MBA, BCACP

troane@cop.ufl.edu

Casey Rowe, Pharm.D.

Casey.rowe@cop.ufl.edu

Barbara Santevecchi, PharmD, BCPS, BCIDP

bsantevecchi@cop.ufl.edu

Janet Schmittgen, Pharm.D.

JSchmittgen@cop.ufl.edu

Nathan Seligson, Pharm.D.

Nseligson@cop.ufl.edu

Bethany Shoulders, Pharm.D., BCCCP

BRShoulders@cop.ufl.edu

Janel Soucie, Pharm.D

JSoucie@cop.ufl.edu

James Taylor, Pharm.D., CDE, BCACP

JTaylor@cop.ufl.edu

Angelina Vascimini, Pharm.D. BCACP

Avascimini@ufl.cop

Veena Venugopalan, Pharm.D., BCPS

VVenugopalan@cop.ufl.edu

Katie Vogel Anderson, Pharm.D., BCACP

Kvanderson@cop.ufl.edu

Karen Whalen, Pharm.D, BCPS, CDE

whalen@cop.ufl.edu

Lihui Yuan, Pharm.D. PhD

Yuanlh@cop.ufl.edu

Instructional Designer:

Chris Egan, M.Ed., NRP

- Email: cegan@ufl.edu
- Phone: (352) 294 – 5636

Academic Coordinator Gainesville Campus:

Ashleigh Langford

- Email: lynn8597@cop.ufl.edu
- Phone: (352) 273-6284
- Office: HPNP 4309

Absence/Tardy Email: absent3pd@cop.ufl.edu

Educational Coordinators

Katie Orben

- Email: korben06@ufl.edu
- Office: Jacksonville Campus
- Phone: (904) 244 - 9590

Andrea M Arredondo

- Email: aarredondo1@cop.ufl.edu
- Office: Orlando Campus
- Phone: (407) 313 - 4087

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.)

Appendix B: Course Outline

Students are expected to be available to complete assigned activities throughout the entire day outside of the scheduled activities with faculty. Student are asked to set up Canvas to send “push alerts” to their email and if desired phone, so they can be alerted to the activities in a timely manner. The activity's instructions, due time and how to submit will be described in the alert.

This experience requires presence on your campus from 8am-5pm each day unless otherwise indicated. (See scheduling in Canvas)

Similar to an APPE activity, the team/care provider will contact you at unscheduled times and request a consult/assistance. During the week, you will receive a Canvas communication to provide the following consults/assistance at **times that are not listed in the schedule below**. ***Please watch your emails closely since their consults/activities are time sensitive and you must be prepared to address the consult/assistance when it is requested.*** The communication will also indicate when the consults/activities are due.

Performance will be evaluated using rubrics available in the syllabus **Appendix** and **Canvas Multiple Choice Questions** (Multiple Choice Questions (MCQ) that have 6-25 options for answers).

Below are examples of the consults/activities that will occur during the week. These will be graded using rubrics in the **Appendices** and via **Canvas Multiple Choice Questions**:

1. Pharmacokinetics consult. (initial recommendations via MCQ and graded SOAP note and follow up; graded with a rubric)
2. Provide recommendations using protocols.
3. Drug information questions. (graded with a rubric)
4. Address issues that arise with patients across the week (potential ADR, medication error, need for follow up of monitoring parameters, patient education plans)
5. Transitions in Care (graded via Canvas)
6. Review orders and approve dispensing of products.

| Date/Time | Activity | Assessment | Learning Objective | EPA |
|--|---|--|--------------------|-----|
| Monday, February 27th 8:30am – 10:30am (Synchronous Session – Active Learning Room on your campus) | Orientation and overview of the week (all campuses will be synchronously connected or recorded video) | 1. Course requirement (self-awareness) | 4 | N/A |
| Monday, February 27th 10:30 am | You will receive your topic and readings for the Journal Club on Friday. | Not graded but you will be graded on Friday. | 2K | 11 |

| Date/Time | Activity | Assessment | Learning Objective | EPA |
|--|---|--|--------------------|-------|
| Monday, February 27th 10:30 am | You will receive your topic for the in-service presentation. You will provide a one-page handout and present the in-service to your group and facilitator on Friday according to the schedule posted in Canvas. | Not graded but you will be graded during your presentation on Friday. | | |
| Monday, February 27th | You will receive information about your Facilitated Case Discussion. | Not graded but you will be evaluated during the discussion on Tuesday am | | |
| Monday, February 27th | Review Managing Microaggressions | Ungraded assessment activity checked for completeness Missed assignments will be assessed under professionalism | 2a,2d,2e | 2,4,5 |
| Monday February 27th 10:30-4:30 You will receive alerts from Clinical Pharmacy Service (Canvas) during the day that need to be addressed by a given deadline | Monitor the Clinical Pharmacy Service Notifications and complete the activities by the deadline provided. | Assessment of the requested consultation activity. | 2e,2h | 5,8 |
| Tuesday February 28th 9:00-11:00 AM | Facilitated Case Discussion. A group of 15-20 students will be assigned a facilitator to answer questions on the case and related issues. Attend on Zoom | Graded via rubric | 2a, 2b, 2h | |
| Tuesday, February 28th 11:00 | You will be assigned a patient to present and provide a therapeutic plan during rounds on Wednesday to a pharmacist preceptor. During rounds you will also be expected to explain your rationale for your plan | Not graded but you will be graded during Wednesday rounds. | 2a,2b,2c | 1,2,3 |

| Date/Time | Activity | Assessment | Learning Objective | EPA |
|---|--|---|--------------------|-------|
| | and answer other questions typical of rounds. | | | |
| Tuesday February 28th 8:30-4:30 You will receive alerts from Clinical Pharmacy Service (Canvas) during the day that need to be addressed by a given deadline | Monitor the Clinical Pharmacy Service Notifications and complete the activities by the deadline provided. Attendance on Campus NOT required | Assessment of the requested consultation activity. | 2e,2h | 5,8 |
| Wednesday, March 1st 1 hour prior to assigned round time | Each student will receive updated information about the patient assigned on Tuesday and need to prepare for rounds. | Not graded but you will be graded during rounds | 2a,2b,2c | 1,2,3 |
| Wednesday, March 1st Students are assigned one rounding session. See schedule on Canvas 8:30-10:30 11:00-1:00 1:30-3:30 | Participate in a rounding experience with an attending pharmacist/faculty member and group members | Attending pharmacist/faculty member will utilize a rubric to evaluate your recommendations for the patient, rationale, and communication skills during the rounding experience. | 2c,2d | 4,5 |
| Wednesday, March 1st 8:30am-4:30pm You will receive alerts from Clinical Pharmacy Service (Canvas) during the day that need to be addressed by a given deadline | Monitor the Clinical Pharmacy Service Notifications and complete the activities by the deadline provided. | Assessment of the requested consultation activity. | 2e,2h | 5,8 |
| Thursday, March 2nd All day you will receive alerts from Clinical Pharmacy Service (Canvas) during the day that need to be addressed by a given deadline | Monitor the Clinical Pharmacy Service Notifications and complete the activities by the deadline provided. | Assessment of the requested consultation activity. | 2a,2d,2e | 2,4,5 |
| Thursday March 2nd One hour prior to assigned clinic time | Review clinic patients | | 2a,2d,2e | 2,4,5 |

| Date/Time | Activity | Assessment | Learning Objective | EPA |
|--|--|--|--------------------|-----------|
| Thursday March 2nd 8:30-6:00 Student attends clinic for 2-3 hours at assigned time. See Canvas for schedule | Attend ambulatory care clinic and complete assigned duties. | Assessment of the requested activity using rubric | 2a thru 2e | 1,2,3,4,5 |
| Thursday March 2nd One hour after assigned clinic time | Complete any patient care note documentation from clinic | Patient care note will be graded using rubric | 2d | 4 |
| Friday March 3rd Students are assigned one session to present their in-service and journal club. See schedule on Canvas 8:30-11:00 11:30-2:00 2:30-4:00 | In-service and journal club presentation and via zoom | In-service/journal club will be graded by the facilitator using a rubric | 2k | 11 |
| Friday, March 3rd Complete by 4:30 | Complete the Peer reviews and self-awareness assessment and evaluate the course. | Submission Missed assignments will be assessed under professionalism | 4 | |
| Friday March 24th | Complete Personal Plan of Improvement | Submission Missed assignments will be assessed under professionalism | 4 | |

Appendix C –

Rounding Rubric Wednesday

| Criteria | Ready | Ready with comment | Not Ready | Comments | |
|---|---|--|---|----------|--|
| Collect Data | Collects appropriate data points related to the disease states and therapy without prompting | Collects appropriate data points related to the disease states and therapy WITH prompting or direction from facilitator | Student unable to collect appropriate data points even with prompting | | |
| Knowledge of Disease State | Demonstrates understanding of disease state by providing pertinent data related to signs and symptoms of disease states | Demonstrates understanding of disease state by providing pertinent data related to signs and symptoms of disease states WITH prompting or direction from facilitator | Student unable to provide pertinent data related to signs and symptoms of disease states even with prompting | | |
| Knowledge of Drug Therapy | Demonstrates understanding of the drug classes in the case and states correct information and answers questions regarding the specific drugs listed in the case (MOA, dose, indications, etc..) | Demonstrates understanding of the drug classes in the case and states correct information and answers questions regarding the specific drugs listed in the case (MOA, dose, indications, etc. with minimum guidance WITH prompting or direction from facilitator | Unable to recall basic information about specific drugs listed in the case. (Indication, dose, etc) even with prompting | | |
| Identify Medication Related Problems | Identifies major medication related problems without prompting | medication related problems WITH prompting or direction from facilitator | Unable to identify medication related problems even with prompting | | |
| Identify appropriate treatment goals | Provides appropriate treatment goals for identified problems without prompting | Provides appropriate treatment goals for identified problems WITH prompting or direction from facilitator | Unable to provide appropriate treatment goals even with prompting | | |
| Treatment Plan | Provides appropriate recommendations including dose, route, frequency or discontinuation if needed without prompting | Provides appropriate recommendations including dose, route, frequency or discontinuation if needed WITH prompting or direction from facilitator | Unable to provide appropriate recommendations even with prompting | | |
| Monitor Appropriate Endpoints | Provides appropriate therapeutic and toxic endpoints and timeframe for monitoring without prompting | Provides appropriate therapeutic and toxic endpoints and timeframe for monitoring WITH prompting | Unable to provide appropriate endpoints for monitoring with prompting | | |

| | | | | |
|---------------------------------|--|--|---|--|
| Communicate Plan Clearly | Concise/efficient summary of patient problems w/ most of the necessary information | Provides summary of patient with most of the necessary information with some unnecessary information | Rambling/unorganized summary of the patient without focusing on the problems or therapy | |
| Ready for APPEs | | | Not Ready for APPEs (3 or more items identified as not | |
| | Alert course coordinator if the student does not respond to get back to you questions within 3 hours of the end of rounds. Professionalism points will be deducted | | | |

Appendix D – Drug Information Rubric

| | 10 points each | |
|---|------------------------------|-----------------------------|
| Answered the question providing a detailed rationale summarizing available information. | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Used primary literature to support answer. | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| References provided in AMA or MLA format | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| At least one primary reference provided | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| No grammar or spelling errors | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Final Score | _____ of 50 points | |
| Comments: | | |
| | | |

Appendix E –Journal Club rubric (Friday)

| Study Overview | |
|--|--|
| Introduction <ol style="list-style-type: none"> 1. Authors' affiliation/study support 2. Study objective(s) and rationale 3. Quality of journal | |
| Methods | |
| Methods- Design <ol style="list-style-type: none"> 1. Case-control, cohort, controlled exp, etc. 2. Type of Design (cross-over, parallel, etc.) 3. Type of assignment use 4. Blinding <p>Methods- Patients/Subjects</p> <ol style="list-style-type: none"> 5. How enrolled/from where? 6. Inclusion/exclusion criteria 7. # enrolled per group | |
| Methods- Treatment Regimens <ol style="list-style-type: none"> 1. Treatments used 2. Dosages/administration 3. Therapy duration <p>Methods- Outcome Measures</p> <ol style="list-style-type: none"> 4. Primary Measure 5. Secondary Measures <p>Methods- Data Handling</p> <ol style="list-style-type: none"> 6. Intention to treat, per protocol, etc. 7. # lost to follow up 8. Reasons for dropouts <p>Methods- Statistics</p> <ol style="list-style-type: none"> 9. Tests Used 10. Power of study | |

| Results | |
|--|--|
| Results <ol style="list-style-type: none">1. Results for each outcome measure2. Confidence intervals3. P-values4. Compliance5. Adverse events <p>Conclusion</p> <ol style="list-style-type: none">6. Authors' conclusion(s) | |
| Study Conclusion | |
| Clear, Concise Conclusion Stated | |

Appendix F – Clinic Assessment (Self-Care Rubric)

Self-Care Rubric (Thursday)

| Criteria | Ready | Ready with Comment | Not Ready | Comments |
|-------------------------|--|---|--|----------|
| Patient Assessment | Independently utilizes patient centered questions and collects SCHOLAR-MAC elements. | Utilizes patient centered questions and collects SCHOLAR-MAC elements with prompting. | Unable to utilize patient centered questions and collect SCHOLAR-MAC elements even with prompting | |
| Recommendation/Referral | Provides appropriate recommendation/referral; | Provides appropriate recommendation /referral WITH prompting | Provides wrong recommendation OR Does not refer patient when appropriate. Failure to make recommendation despite prompting | |
| Counseling/Education | Complete and accurate counseling and education with minimal errors | Complete and accurate counseling and education with minimal errors with prompting | Incomplete or inaccurate counseling and education even with prompting | |
| Empathy and Compassion | Provided empathy when needed; demonstrated visible concern and compassion | Provided empathy when needed when prompted | Minimal to no empathy or concern for the patient even when prompted | |
| | Ready for APPEs | | Not Ready for APPEs (Defined as ≥ 1 Not Ready as defined above) | |
| | | | | |
| | | | | |
| | Comments: | | | |

Appendix G – Inservice Presentation Rubric (Friday)

| | Ready | Ready with Comment | Not Ready | Comment |
|----------------------|---|---|---|---------|
| Handout Organization | Information is organized in a concise and efficient manner with no spelling mistakes. | Information is mostly organized in a concise manner with few spelling mistakes. | Information disorganized and inconsistent with many spelling mistakes. | |
| Handout Content | Only pertinent information provided, limited to 1 page. | Extraneous Information provided | Exceeded page limit or inaccurate or unconnected information provided | |
| Handout References | References provided in appropriate MLA or AMA format | References provided but not in appropriate format (MLA or AMA) | No references provided | |
| Introduction | Introduces self by name and provides title of presentation. | Needs prompting to introduce self to audience by name or provide title of presentation. | No greeting or introduction of self to audience by name and title even with prompting | |
| Delivery | Speaks with proper pace/tone and no distracting mannerisms and minimal filler words. | Almost always speaks with proper pace with few distracting mannerisms and noticeable use of filler words. | Speaks too quickly or slowly. Displays distracting mannerisms and excessive filler words. | |
| Eye Contact | Maintains good eye contact | Spends more time reading notes than maintaining eye contact | Reads continuously with no eye contact | |
| Time | Able to present information in the allotted time | Able to present information in allotted time but seemed rushed | Unable to present information in allotted time | |
| Audience | Both presented information and handout targeted toward correct audience. | Presented information targeted for correct audience with prompting from facilitator | Presented information and handout were not geared toward correct targeted audience. | |
| Ready for APPEs | | | Not Ready for APPEs (Defined as 3 or more items identified as NOT Ready) | |
| Comments: | | | | |

Appendix H – Patient Care Note (SOAP) Rubric

University of Florida College of Pharmacy Pharmacy Care Note Rubric for APPE Readiness

| Criteria | Ratings | | |
|---|---|--|--|
| | Proficient (S+) | Competent (S) | Deficient (S-) |
| COLLECT | | | |
| <i>examples of what might be included in this section</i> Subjective <ul style="list-style-type: none"> • CC • HPI • PMH • Medication history • Allergies • SH • FH Objective <ul style="list-style-type: none"> • Vitals • Labs • Diagnostic tests Current Medication List | <ul style="list-style-type: none"> • Pertinent signs and symptoms, vitals, tests and lab information. • CrCl calculated • Current medication list • Allergies | <ul style="list-style-type: none"> • Missing some pertinent information important for assessing conditions/medication therapy • Partial but accurate summary of pertinent information • Complete medication list included • Some extraneous information included | <ul style="list-style-type: none"> • Markedly lacking detail required to make an accurate assessment • Inaccurate information included • No allergy information included • Pertinent lab values/results not included • Incomplete medication list |
| ASSESS/PLAN | | | |
| Assessment of current medical condition(s) <i>For each condition:</i> <ul style="list-style-type: none"> • Current Status • Goals of therapy • Drug therapy problem(s) identified • Rationale | <ul style="list-style-type: none"> • Assessment is complete and appropriate | <ul style="list-style-type: none"> • Incomplete goal(s) of therapy • Drug therapy problem(s) not identified • Incomplete rationale | <ul style="list-style-type: none"> • No goals of therapy • Rationale not communicated clearly • Communication hard to understand |
| PLAN/IMPLEMENT | | | |
| Plan <i>For each condition:</i> <ul style="list-style-type: none"> • Start/stop/continue specific medication dose, route, frequency, duration • Monitoring parameters for efficacy, toxicity • Follow-up (who, when, what) | <ul style="list-style-type: none"> • Plan is complete and appropriate in every detail. • Monitoring and follow-up include what, when, and by who | <ul style="list-style-type: none"> • Follow-up not specific • Plan is not consistent with assessment • Plan lacks enough specificity so it is difficult for another provider to follow plan | <ul style="list-style-type: none"> • Suggested changes may cause patient harm • Monitoring not included • Follow up not included • Plan lacks enough specificity for another provider to follow plan |

| STRUCTURE | | | |
|--|---|--|--|
| <ul style="list-style-type: none"> <i>Spelling/grammar</i> <i>Unsafe abbreviations</i> | No grammatical or spelling errors No unsafe abbreviations used | 1 grammatical/spelling errors 1 unsafe abbreviation used | No clear organization to note 2+ grammatical/spelling errors 2+ unsafe abbreviations used. |
| 1. | Proficient (S+) Must receive 50% or more proficient ratings and 0 deficient ratings to receive an overall score of proficient | Competent (S) Less than 50% proficient ratings and 0 deficient ratings | Deficient (S-) Any deficient ratings |

If student receives a score of S or S+, the student will receive passing score.

If student receives a score of S-, the student will be required to rewrite the note until an S is achieved. A S- is considered an unsatisfactory grade

Appendix I – Verbal Recommendation Rubric (Thursday)

Diabetes

| Criteria | Ready | Ready with comment | Not Ready | Comments | Score |
|--|--|---|---|----------|-------|
| Identify Pertinent Patient Data | Identifies appropriate data points without prompting | Identifies appropriate data points WITH prompting or direction from facilitator | Student unable to provide patient data even with prompting | | |
| Identify Medication Related Problems | Identifies medication related problem for diabetes treatment | Identifies medication related problem for diabetes treatment WITH prompting or direction from facilitator | Student unable to identify medication related problem for diabetes treatment even with prompting | | |
| Identify Medication Related Problems | Identifies medication related problem for CV risk reduction | Identifies medication related problem for CV risk reduction WITH prompting or direction from facilitator | Student unable to identify medication related problem for CV risk reduction even with prompting | | |
| Identify Treatment Goals | Identifies treatment goals for diabetes | Identifies treatment goals for diabetes WITH prompting or direction from facilitator | Student unable to identify treatment goals for diabetes even with prompting | | |
| Identify Treatment Goals | Identifies treatment goals for CV risk reduction | Identifies treatment goals for CV risk reduction WITH prompting or direction from facilitator | Student unable to identify treatment goals for CV risk reduction even with prompting | | |
| Identify Treatment Plan | Provides appropriate recommendations for treatment of diabetes | Provides appropriate recommendations for treatment of diabetes WITH prompting or direction from facilitator | Student unable to provide appropriate recommendations for treatment of diabetes even with prompting | | |
| Identify Treatment Plan | Provides appropriate recommendations for CV risk reduction | Provides appropriate recommendations for CV risk reduction WITH prompting or direction from facilitator | Student unable to provide appropriate recommendations for CV risk reduction even with prompting | | |
| Identify Appropriate Monitor Parameters | Provides appropriate therapeutic and toxic endpoints and timeframe for monitoring diabetes treatment | Provides appropriate therapeutic and toxic endpoints but wrong timeframe for monitoring diabetes treatment WITH prompting or direction from facilitator | Student unable to provide appropriate therapeutic and toxic endpoints and timeframe for monitoring diabetes treatment even with prompting | | |
| Identify Appropriate Monitor Parameters | Provides appropriate therapeutic and toxic endpoints and timeframe for monitoring CV risk reduction | Provides appropriate therapeutic and toxic endpoints but wrong timeframe for monitoring CV risk reduction WITH prompting or direction from facilitator | Student unable to provide appropriate therapeutic and toxic endpoints and timeframe for monitoring CV risk reduction even with prompting | | |
| Ready for APPEs | | | Not Ready for APPEs (3 or more items identified as not ready) | | |

| |
|------------------|
| Comments: |
|------------------|

Warfarin

| Criteria | Ready | Ready with comment | Not Ready | Comments | Score |
|--|---|--|--|----------|-------|
| Identify Pertinent Patient Lab Data | Identifies appropriate data points without prompting | Identifies appropriate data points WITH prompting or direction from facilitator | Student unable to provide patient data even with prompting | | |
| Identify Pertinent Patient Data | Identifies appropriate data points without prompting | Identifies appropriate data points WITH prompting or direction from facilitator | Student unable to provide patient data even with prompting | | |
| Identify Medication Related Problems | Identifies medication related problem for warfarin management | Identifies medication related problem for warfarin management WITH prompting or direction from facilitator | Student unable to identify medication related problem for warfarin management even with prompting | | |
| Identify Treatment Goals | Identifies treatment goals for warfarin management | Identifies treatment goals for warfarin management WITH prompting or direction from facilitator | Student unable to identify treatment goals for warfarin management even with prompting | | |
| Identify Treatment Plan | Provides appropriate recommendations for warfarin management | Provides appropriate recommendations for warfarin management WITH prompting or direction from facilitator | Student unable to provide appropriate recommendations for warfarin management even with prompting | | |
| Identify Appropriate Monitor Parameters | Provides appropriate therapeutic and toxic endpoints and timeframe for monitoring warfarin management | Provides appropriate therapeutic and toxic endpoints but wrong timeframe for monitoring warfarin management WITH prompting or direction from facilitator | Student unable to provide appropriate therapeutic and toxic endpoints and timeframe for monitoring warfarin management even with prompting | | |
| Ready for APPEs | | | Not Ready for APPEs (2 or more items identified as not ready) | | |
| Comments: | | | | | |

Appendix J –Facilitated Patient Case Discussion Rubric (Tuesday)

| Criteria | Ready | Ready with Comment | Not Ready | Comments |
|--|--|--|---|--|
| Communication | Communicates clearly enables understanding by the listener | Communication is overly verbose and not to the point or clarifies with prompting from preceptor. | Communicates in a manner that often interferes and/or prevents understanding by audience | |
| Preparation | Appears prepared and familiar with patient history, information and diagnosis | Appears prepared needs prompting to identify patient information | Appears unprepared or is not familiar with significant portion of the patient's history or diagnosis | |
| Response to Clinician's Questions | Responds appropriately and promptly | Responds appropriately with prompting or guidance from facilitator | Does not respond appropriately even with prompting | |
| Content | Content of responses is accurate and mostly complete | Content of responses is accurate and mostly complete WITH prompting from facilitator | Unable to provide answers to multiple questions without significant prompting from facilitator | |
| Rationale | Rationale for response is reasonable without prompting. | Rationale for response is reasonable WITH prompting from facilitator | Cannot provide reasonable rationale even with prompting Does not cite evidence-based resources when asked. Cites class notes instead of literature. | |
| Supporting Evidence | Provides evidence-based resources or guideline without prompting | Provides evidence-based resources or guideline WITH prompting from facilitator | Does not cite evidence-based resources when asked. Cites class notes instead of literature. | |
| Professionalism | Pays attention with camera on. Attentive when others are answering. | Attention seems elsewhere when others are answering or turns camera off. | Attention strays or keeps camera off even after warned by facilitator | |
| | Ready for APPEs | | | Not Ready for APPEs (Defined as 2 or more items identified as NOT Ready) |
| | Alert course coordinator if the student does not respond to get back to you questions within 2 hours of the end of rounds. Professionalism points will be deducted | | | |
| | Comments: | | | |

Appendix K – Patient Interview Rubric Thursday

| APPE Ready | APPE Ready with Comment | Needs improvement | Comments |
|---|---|--|----------|
| Introduced self and identified as UF student | Introduced self but not as a student | Did not introduce self | |
| Good eye contact, calm body language, non-distracting gestures | Some eye contact and distracting gestures or appears nervous | Minimal eye contact, VERY NERVOUS body language, distracting gestures | |
| Good pace, tone, and uses terms patient can understand | Pauses and uncertainty some use of medical terms | Too fast/slow pace, too loud/soft/lecturing tone, used predominantly medical terms | |
| Used open-ended questions when appropriate | Asked some open-ended questions but some questions could have been rephrased as open ended so some improvement needed | Asked leading questions – did not collect all the necessary information | |
| Asked key questions: How to take medications – adherence / OTC/ side effects | Missed OTC medications or adherence or side effects | Missed two of the following adherence / OTC/ side effects | |
| Asked key questions: Why do you take – understanding importance of indication and INR | | Missed key questions: Why do you take – understanding importance of indication and INR | |
| Asked key questions: Sign/symptoms bleeding | | Missed key questions: Sign/symptoms bleeding | |
| Asked key questions: Diet related conversation | | Missed key questions: Diet related conversation | |
| APPE Ready | | Not Ready for APPEs ((3 or more items identified as Not Ready) | |

Appendix L - Peer SOAP Note Rubric

Using the SOAP note answer key, review your peer's SOAP note and answer the questions below. Provide constructive feedback on the accuracy of the assessment and plan as well as your ability to follow the plan. (So if you were the pharmacist caring for the patient could you follow the plan based off the note alone?)

| Criteria | | YES | NO | Comment-(If checked "NO" then must provide explanation) |
|--|--|-----|----|---|
| Subjective and Objective Data | Complete with summary of pertinent info and not a lot of extraneous information | | | |
| Assessment | Prioritized problem list with assessment and goal listed for each. Evaluator agrees with assessment. | | | |
| Therapeutic Plan | Provides appropriate recommendations including dose, route, frequency or discontinuation if needed; adequate monitoring parameters Evaluator agrees with plan. | | | |
| Spelling/grammar/unsafe abbreviations | No grammar/spelling errors/unsafe abbreviations. Problem list in same order in assessment and plan | | | |
| Communication | After reading this note evaluator can determine the next steps in care of patient. | | | |
| Comments: | | | | |

Appendix M – Peer Drug Information Question Rubric

| | | |
|---|------------------------------|-----------------------------|
| | | |
| Drug related question provided | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Answer provided using literature to support answer. | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| References provided in AMA or MLA format | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| At least one primary reference provided | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| No grammar or spelling errors | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| | | |
| Comments: | | |
| | | |