

Non-Traditional Pharm.D. Clerkship Guide



This guide is to be used as a reference throughout the experiential portion of the program and as an aid in understanding and completing the Clinical Portfolios.

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Non-Traditional Pharm.D. Clerkship

Part One

Clerkship Description

Clerkship Overview

Definitions and Forms to be completed once prior to beginning the experiential portion of the program!

These forms should be filled out completely, signed and returned to the NTPD office prior to making any specific clerkship requests.

GENERAL CLERKSHIP DESCRIPTION

Clerkships are designed to provide practitioners the opportunity to apply the knowledge gained from didactic courses in a clinical setting. This applied knowledge combined with prior clinical experience will insure that graduates have the skills and experience to manage pharmacotherapy and excel in the rapidly changing health care environment.

Clerkship outcomes are not measured by the number of hours spent on a clerkship site. They are, instead, measured by the outcomes generated by developing individualized pharmacotherapeutic plans. These plans are documented using the clinical profile method based upon the SOAP note format.

The purpose of measuring your progress using the portfolio system is to provide more flexibility in the experiential portion of the program. This method allows you to utilize many more sites than if you were required to complete your clerkships in sites with traditional KU preceptors. The sites you choose to request to host your clerkships can be precepted on-site by a pharmacist, a physician, a nurse practitioner or other qualified health care provider. You will also be assigned a KU-based preceptor to help provide continuity throughout the clerkship portion of the program.

The following points help describe Non-Traditional clerkships at KU:

- ⇒ Before you participate in any activity you wish to be considered for clerkship experience, the topic, site, and on-site preceptor must be approved by the NTPD program (clerkship coordinator).
- ⇒ Students are required to view the online Clerkship Orientation. The link for this orientation is available from the NTPD office or the Clerkship Coordinator
- ⇒ Students will prepare an online site proposal that includes:
 1. How the student plans on meeting the objectives outlined for the clerkship
 2. How NTPD, on-campus preceptor, and on-site preceptor contacts the student
 3. How long the student expects to take to complete the entire clerkship
- ⇒ The preceptor and student must sign a Clerkship Site Agreement for each clerkship site. The form will clearly identify that:
 1. Preceptor will listen to and critique the patient case presentation.
 2. Preceptor will evaluate/assess the student using the NTPD evaluation form.
 3. No payment is made to the clerkship site.
 4. Preceptor and site can and will provide clinical training/expertise.
 5. This form will be mailed or FAXed to the Clerkship Coordinator before any site will be approved.
- ⇒ If the site requires the school to enter into an Affiliation Agreement, please have the site review and sign *two* copies of the “**Clerkship Memorandum of Affiliation**” agreement found at: <http://ntpd.pharm.ku.edu/nontrad/rotations/>. Mail the original signed copies to the NTPD office at: The Non-Traditional Pharm.D. Program, The University of Kansas School of Pharmacy, 1251 Wescoe Hall Dr., Room 6050, Lawrence, KS 66045. The copies will be signed by the Associate Dean for Academic Affairs. One copy will be kept on file and one copy will be mailed back to the site for

its records. Please note that if the site proposes any changes to the agreement or requires the use of its own agreement, then review and approval by legal counsel at the University must be obtained before being signed by the Associate Dean. This may delay the start of the clerkship.

- ⇒ All sites must be approved at least **two** weeks prior to entry (earlier if preferred). In order to be considered for approval all documents must be complete and submitted, including immunization documentation.
- ⇒ A student may only enroll and participate in one prospective clerkship at a time. This does not include enrolling in prior experience exemptions.
- ⇒ The maximum number of clerkships that can be done in the student's work place is one. This one clerkship, if approved, must be outside the students normal work flow.
- ⇒ No more than one clerkship can be done in any one site.
- ⇒ A student may not report to a preceptor that is supervised by the student
- ⇒ A student may not be precepted by a family member or relative (genetically or by marriage).
- ⇒ A student may not be precepted by another student currently in the KU Non-Traditional Pharm.D. program.
- ⇒ **In this portion of the program students will interact with patients! You must select sites that provide access to patients to successfully complete a clerkship!**
- ⇒ **Falsified information on clinical portfolios is not acceptable and constitutes academic misconduct. It may result in disqualification from the program.**
- ⇒ **All patients followed must originate from the clerkship site you select.**
- ⇒ You must complete a minimum of 10 and a maximum of 30 clinical portfolios in each clerkship and a total of 80 clinical portfolios in the entire program. This means that on the average 16 profiles are required in each clerkship!
- ⇒ Students will maintain contact with the KU-based preceptor in part by sending weekly summaries of clerkship activities via email. This correspondence need not be exhaustive.
- ⇒ Students will keep the NTPD office and their preceptors advised of their current e-mail address.
- ⇒ Students will make at least 1 patient case presentation in each clerkship including a written evaluation of the case prior to the presentation.
- ⇒ Students will adhere to a dress code of professional attire at all times when on a clerkship site.
- ⇒ Each clerkship will be completed in no less than 4 weeks and no more than 4 months. The recommended time limit is 3 months. If a clerkship is not completed within 4 months the student will drop the clerkship and enroll again (tuition will be assessed again).
- ⇒ Students will submit (initial submission) at least 4 portfolios by the eighth week of the clerkship experience or risk being disenrolled and required to enroll in the clerkship again. Students disenrolled for this reason will not receive a tuition refund and will be assessed tuition again.
- ⇒ One clerkship (PHPR 637) must be a linear care clerkship that includes:
 1. A linear component - students interact with patients at least 3 times for each portfolio

2. An emphasis on clinical contact and monitoring
 3. Physician interaction
 4. Patient interaction
 5. Other health care provider interaction
 6. Lab interpretation
 7. Provision of drug information
- ⇒ Non-Traditional clerkships may be requested in traditional sites. You will use the clinical portfolio method (not 4 x 40hr weeks).
 - ⇒ Students will allow at least two weeks between the completion of a clerkship and the start of the next.
 - ⇒ If a clerkship site is not able to agree to and sign the site agreement another site should be selected.
 - ⇒ Administrative clerkships are not considered clinical and don't typically qualify NTPD clerkships.
 - ⇒ Traditional style clerkships may be done in traditional or non-traditional sites if approved.
 - ⇒ These sites are monitored by weekly summaries.
 - ⇒ Goals and objectives are still required!
 - ⇒ Each traditional clerkship completed decreases the total number of clinical portfolios required by 16.
 - ⇒ If a student receives an unsatisfactory grade in a clerkship he/she is automatically placed on probation and an additional clerkship is required.
 - ⇒ If a student receives an unsatisfactory grade in a second clerkship (need not be consecutive) he/she is automatically expelled from the program.

Preceptor Definitions:

On-Site Preceptor: Pharmacist, Physician (or other health care professional approved by NTPD office) in a clinical practice site that is providing resources, support and expertise to insure the student has a positive, rigorous, challenging experience in the clerkship. This person cannot be related to the student or report to the student in his/her place of work.

On-Site Preceptor Responsibilities:

- Assure course objectives are reasonable prior to start of clerkship
- Oversee onsite activities of the student
- Help shape the learning experience to provide a positive atmosphere
- Help student meet course objectives
- Approve, discuss and review patients the student will follow (10 per site minimum/ 30 per site maximum, and 80 total in program)
- Provide verbal evaluation of performance throughout the experience
- Assess the student's competency using the Student Evaluation Form in this guide
- Listen to and grade case presentation by student
- Review and sign clinical portfolios as they are completed

University Preceptor: University faculty member who shares responsibility for the educational outcomes of each clerkship. This person will be a KU Clinical Faculty member.

University Preceptor Responsibilities:

- Approve, discuss and review patients the student will follow (10 per site minimum/ 30 per site maximum, and 80 total in program)
- Assure a uniform clinical experience in all sites
- Evaluate students abilities throughout the clerkships
- Assure course objectives are reasonable prior to start of clerkship
- Assure course objectives are met

Clerkship Overview

Clerkship Preparation: The approval process

1. Introduce yourself to potential on-site preceptor.
2. Complete site proposal (online) and notify Clerkship Coordinator to review for approval.
3. After site approval is received from the Clerkship Coordinator complete specific goals and objectives (paper) and have on-site preceptor review and sign.
4. Have onsite preceptor review and sign site agreement.
5. If the site requests an Affiliation Agreement with the school, print off two copies of the **Clerkship Memorandum of Affiliation**, have each copy signed by the official at the site, then mail both copies to the NTPD office for signature. One signed copy will be kept on file, and one copy will be mailed back to the site for its records.
6. Submit specific goals and objectives and site agreement via FAX for final approval.
7. Supply on-site preceptor with signed confidentiality agreement.
8. Be sure you supply the on-site preceptor and the NTPD office a copy of your completed immunization record. The NTPD office must have all supporting documentation on file before you can begin your experience. The date of the immunization is not sufficient alone. You will need documentation of the vaccination or titers indicating acceptable immune status. (See Immunization Facts for NTPD Students, page 25.)
9. With clerkship approval by the Coordinator you will be assigned a KU-based preceptor.
10. Following approval by NTPD program (Clerkship Coordinator) contact your preceptors to verify your start date.

Clerkship Enrollment

1. After you receive final approval by the clerkship coordinator, you will be given approval to enroll and instructions for enrollment.

Portfolio Preparation: Clinical activity

1. Email your KU-based preceptor a progress update every week by Sunday.
2. In conjunction with site preceptor, define the disease states common in the clerkship.
3. Research and understand the physiology and pathology of the major diseases identified in #2 by the student, site preceptor and university preceptor.
4. Round with clinical staff (or initiate patient contact if rounding is not an option).
5. Complete patient interviews and patient assessments and collect data to complete at least 10 but no more than 30 clinical portfolios.
 - **Portfolios must be submitted as they are completed.**
 - No more than 5 portfolios may be submitted for review by the KU preceptor in any 72 hour period
 - Portfolios must be completed and submitted within the duration of the clerkship (it is not acceptable to complete the clerkship patient interactions and do the portfolios at a later date – they need to be completed as you progress through the clerkship).
6. Chart all clinical activities (document pharmaceutical care activity and outcomes on clinical portfolios).
7. Apply principles of outcome research to evaluate pharmaceutical care.

8. Insure that a portfolio is completed for patients with at least 15 of the 17 core disease states.
 - One patient encounter may encompass several core disease states.
 - It is the student's responsibility to maintain a current list of core disease states already addressed and insure that 15 core disease states have been addressed prior to the end of the final clerkship.
 - The KU-based preceptor or clerkship coordinator will not evaluate the number of core disease states addressed until the student completes his/her fifth clerkship.
9. Propose and implement a pharmaceutical care plan.
10. Communicate/advise other health care professionals & the general public.
11. Demonstrate rational, ethical decision-making ability applied to pharmaceutical care decisions.
12. Remember to submit your portfolios **as you complete them**, in groups of no more than five.

Clerkship Summary: Presentation and Summary

1. Prepare a Case Presentation using a portfolio patient. This should consist of a brief overview of the case followed by a detailed, referenced presentation of a specific aspect of the patient's case (using MS PowerPoint). Ex: Current therapy of DVT
2. Prepare and submit a referenced handout outlining your presentation to both preceptors. Demonstrate effective written and verbal communication skill presenting clinical portfolio talk to preceptor(s) following approval and submission of handout information.
3. Self-Assess your progress and skills throughout the clerkship and submit evaluation. Also complete preceptor evaluation (two separate evaluations that students complete online).
4. Have on-site preceptor complete and submit by FAX the student evaluation to the Clerkship Coordinator. (All evaluation forms must be received before a grade can be assigned.)

THE UNIVERSITY OF KANSAS SCHOOL OF PHARMACY
CONFIDENTIALITY STATEMENT

Pharmacy practice experiences (Clerkships) are required components of the academic curriculum at the School of Pharmacy of the University of Kansas, including the NTPD program. Prior to participation in any pharmacy practice experience, each student must read, and sign the following statement:

All information pertaining to patients will be maintained in the strictest confidence. This will include, but not be limited to, prescription records, patient portfolio records and any and all other information which the pharmacy practice site may have available for any given patient.

There will be no disclosure, whether in writing or verbally, of any patient information to anyone outside of the pharmacy practice site except as specifically and directly authorized by the preceptor(s) and/or the release of patient information as provided for by policy of the pharmacy practice site.

Disclosure of patient information, in writing or verbally, to other employees and/or students of the pharmacy practice site will be appropriate only when the disclosure of such information for a given patient at a specific time is consistent with the assigned task and job duties of the individual to whom the information is provided. Disclosure of information will be under the direction of the preceptor and in adherence to specific requirements of the pharmacy practice site as delineated in any policy statement of the practice site.

Records of patient information will not be copied nor removed from the premises of the pharmacy practice site except as specifically authorized by the preceptor or policy of the pharmacy practice site.

Individual patients will be permitted to review and have copies of their own records only as specifically authorized by the preceptor or the policy of the pharmacy practice site. Release of such information to relatives of patients should only be with the written approval of the individual patient and/or in adherence to policy of the practice site.

Discussion of patient records information, medical or personal, will be conducted in a professional manner with discretion and will consider privacy for the patient and/or involved health care professionals. Such discussion will pertain only to information necessary for provision of the required health care services appropriate to the specific pharmacy practice site.

I have read and understand this statement of confidentiality and hereby agree to comply with these requirements.

Pharmacy Student Name (Printed)

Pharmacy Student Signature

Date

Non-Traditional Pharm.D. Clerkship

Part Two

Site Proposal Site Agreement (Non-Traditional and Traditional) Clerkship Goals and Objectives

These forms should be filled out completely, signed and returned or submitted online (if indicated on the form) to the NTPD Clerkship Coordinator (Dr. Dahm, FAX 913-393-9848) prior to the beginning of any clinical experience. Please note that the Site Proposals and evaluations by students must now be submitted online.

KU Non-Traditional Pharm.D. Site Proposal

Complete and submit this Site Proposal and obtain approval 2 weeks before you plan to proceed with on-site activity.

This form is for example only. **ALL** Site Proposals must now be submitted online via the Online Site Proposal form accessible via Blackboard and your Non-Traditional Rotation coursemap. If you are not yet enrolled in Clerkship courses please contact the NTPD office (ntpd@ku.edu or 785.864.5526) for access to the Online Site Proposal form.

Student Name: _____ Date: _____

How can preceptors contact you? _____

Proposed Site Name: _____
Is this site affiliated with your place of employment in any way? Yes ___ No ___

***If yes, please email a detailed description of how this clerkship will differ from your employment responsibilities to sdahm@ku.edu

Proposed Clerkship Title: _____

Proposed Site Address: _____

Proposed Site City, State, Zip: _____, _____, _____

Proposed Preceptor Name: _____

Proposed Preceptor E-mail & Phone: _____

Proposed Preceptor Degree: Pharm.D., B.S.P., M.D., D.O., R.N., A.R.N.P., P.A.
Degree(s)

How long has the proposed preceptor been licensed? _____ Years

How long do you anticipate this clerkship will take you to complete (must be >4 weeks and <4 months – recommend max of _____ weeks)? _____ weeks

****I understand that if the clerkship is not completed in a maximum of 4 months I will have to drop the course and enroll again. ___ Yes**

What is your desired start date for this clerkship (must be at least 2 weeks after this completed packet is received by NTPD office)? _____ (mm/dd/yr)

What will the completion date be if you start on your desired date? _____ (mm/dd/yr)

How many points do you anticipate completing in this clerkship? _____

Will this be a near care clerkship? ___ Yes ___ No

My immunization documentation has been confirmed by the NTPD office as complete ___ Yes

***This proposal cannot be reviewed if immunization documentation has not been confirmed by the NTPD office – this means documentation of immunizations or immunity as requested on the Immunization and Insurance Information Form.**

Kansas University Clerkship Site Agreement - Non-Traditional

NTPD Student name (printed)

NTPD Student Signature

NTPD Program Clerkship Site

Preceptor Name

Dear Preceptor:

The goals of each NTPD clerkship is to provide the student access to experiences that will improve their clinical skills and their ability to provide advanced pharmaceutical care. Your input, as a preceptor, is vital in achieving this. Thank you for your participation!

By signing this agreement you are acknowledging that you have reviewed the course competencies and objectives the student has completed and you agree with the student's plan to attain these goals and competencies in this site. To accomplish this you are also agreeing to provide the student:

1. access to patients
2. access to patient charts
3. access to lab data
4. other resources and expertise you deem necessary to make this clerkship a valuable active learning experience
5. review and grading of one 20 - 30 minute presentation to yourself and at least 2 other colleagues in your clinical site.

In addition:

1. Preceptor will evaluate/assess the student using the NTPD evaluation form
2. Preceptor will provide other information or experiences you feel are necessary to provide a strong clinical foundation for this student.
3. No payment is made to the clerkship site

Do you feel the proposed time to meet the clerkship goals is adequate Yes ___ or No ___

If not how should the student adjust their expectations?

I agree to precept this student and will provide a learning environment conducive with accomplishing the clerkship goals outlined. I understand that the person is a student in the KU School of Pharmacy and as such should only function in a student capacity during clerkship hours.

NTPD Preceptor Signature

Date

Kansas University Clerkship Site Agreement - Traditional Style

NTPD Student name (printed)

NTPD Student Signature

NTPD Program Clerkship Site

Preceptor Name

Dear Preceptor:

The goals of each NTPD clerkship is to provide the student access to experiences that will improve their clinical skills and their ability to provide advanced pharmaceutical care. Your input, as a preceptor, is vital in achieving this. Thank you for your participation!

By signing this agreement you are acknowledging that you will direct the student during the 4-week clerkship in such a way to foster a broad understanding of pharmacy and pharmacotherapy. You will serve as a resource for clinical information and help provide the student the tools to enhance their education. To accomplish this you agree to provide the student:

1. access to patients
2. access to patient charts
3. access to lab data
4. other resources and expertise you deem necessary to make this clerkship a valuable active learning experience
5. review and grading of one 20 - 30 minute presentation to yourself and at least 2 other colleagues in your clinical site (if required at this site).

In addition:

1. Preceptor will evaluate/assess the student using the NTPD evaluation form
2. Preceptor will provide other information or experiences you feel are necessary to provide a strong clinical foundation for this student.
3. No payment is made to the clerkship site

I agree to precept this student and will provide a learning environment conducive with enhancing the student's clinical skills. I understand that the person is a student in the KU School of Pharmacy and as such should only function in a student capacity during clerkship hours.

NTPD Preceptor Signature

Date

Specific Clerkship Goals and Objectives

UPON COMPLETION OF AN NTPD CLERKSHIP, STUDENTS SHOULD BE ABLE TO:

1. **Understand** symptoms, pathophysiology, laboratory tests, diagnosis, and prognosis of acute and chronic disease commonly seen in this site.

*What are the diseases you anticipate participating in the management of at the proposed site?
How will you accomplish this objective?*

2. **Understand** physical examination techniques for acute and chronic diseases commonly seen in this site.

How will you accomplish this objective?

3. **Formulate**, on a prospective basis, a therapeutic management plan for each disease state of the patient. This includes monitoring patients for therapeutic and adverse outcomes, assessing progress and modifying therapeutic plans as needed, and providing patient education.

How will you formulate a therapeutic management plan?

How will you monitor patients in the proposed site?

How will you assess patient progress?

4. **Understand** the pharmacokinetic and pharmacodynamic properties, the MOA, side effects, AE, CI, and drug interaction of all drugs you encounter and recommend.

What resources do you anticipate using for this and how will you convey this understanding to patients and other health care workers in this site?

How will you document interventions?

5. **Provide** drug information to health care professionals in an effective and efficient manner using both written and verbal communication skills.

How will you meet this objective in this site?

Where do you anticipate obtaining the drug information?

What do you anticipate using for written info?

6. **Use** primary literature and reference sources to effectively answer questions and provide information.

What will be your source of primary literature?

7. **Participate** in pharmacy and/or institutional programs/activities in drug utilization, drug information, adverse drug experience monitoring, therapeutic monitoring, etc. (As directed by, or in collaboration with, the preceptors).

How will you meet this objective in this site?

8. **Identify and Gather** subjective and objective data necessary to monitor medication therapy for efficacy and toxicity.

How will you accomplish this objective?

9. **Assess** patient medication teaching needs and communicate medication information to the patient, including why drug changes are made, and when the patient should expect to notice results from therapy changes for at least 10, and no more than 30, clinical portfolios (80 in all clerkships).

How will you accomplish this objective?

10. **Develop** a formal working relationship with the health care team and attend collaboration meetings with other health care professionals at the clerkship site on a regular basis.

How will you accomplish this objective?

11. **Communicate** the following information to other health care professionals involved in the patient's care:

⇒ Patients' current medication use.

⇒ Observed subjective or objective signs of efficacy or toxicity.

⇒ Prospective therapeutic management plans for patient problems (e.g., change of therapy, discontinuation of a drug, change in pain medication, use of prophylactic antibiotics, identification of therapeutic alternatives).

How do you anticipate completing these activities?

12. **Document** therapeutic interventions performed with outcomes (and savings incurred, if any).

What forms will you use to provide documentation?

Skip the goals 13 and 14 if requesting a Traditional Clerkship:

13. **Complete and Submit** at least 10 clinical portfolios per site (80 total in program, including at least 1 portfolio per core disease state - see disease state list attached).

Will you have access to enough patients?

14. **Prepare and Present** a clinical portfolio review to preceptors, classmates, other health care providers, or other select groups identified by preceptor(s).

How will you meet this objective in this site and to whom will you present the education programs?

Student Signature

Preceptor Signature

By signing this form the student acknowledges the commitment to complete the clerkship within 4 months and understands that if it is not complete in that time he/she will drop the clerkship course and enroll again (including additional tuition costs).

Part Three

Core Disease States Student Evaluation Forms Preceptor Evaluation Form

The evaluation forms should be filled out completely, signed and returned to the NTPD office (or submitted online) within 10 days of the completion of the clerkship. It is necessary to have the evaluation forms completed and submitted to the NTPD office for a grade to be assigned in the clerkship.

Core Disease States

You must prepare a patient portfolio representing 15 of these 17 core disease categories. No single portfolio needs to contain all 15 but somewhere in your 80 total portfolios in the program the 15 core disease categories must be represented at least one time. You will have duplication of core disease states in your 80 portfolios. For your convenience, examples of specific disease states are listed under core headings. To meet the core disease state requirements a disease state must have been written up in the Pharmacotherapy Problem List.

1. Fluid, Electrolyte and Nutrition Imbalances
 - ◆ Vitamins and Minerals
 - ◆ Parenteral Nutrition
 - ◆ Enteral Nutrition
2. Diseases of the Blood
 - ◆ Anemias
 - ◆ Coagulation Disorders
3. Endocrine and Metabolic Diseases
 - ◆ Adrenocortical Dysfunction
 - ◆ Thyroid Disorders
 - ◆ Parathyroid Disorders
 - ◆ Diabetes Mellitus
 - ◆ Hyperlipidemias
4. Renal Diseases
 - ◆ Acute Renal Disease
 - ◆ Chronic Renal Disease
 - ◆ Dialysis Therapy
5. Gastrointestinal Diseases
 - ◆ Peptic Ulcer Disease
 - ◆ Inflammatory Bowel Disease
 - ◆ Nausea
 - ◆ Vomiting
 - ◆ Diarrhea
 - ◆ Constipation
6. Hepatic and Pancreatic Diseases
 - ◆ Viral Hepatitis
 - ◆ Drug Induced Hepatitis
 - ◆ Cirrhosis
 - ◆ Pancreatitis
7. Rheumatic Diseases
 - ◆ Rheumatoid Arthritis
 - ◆ Osteoarthritis
 - ◆ Gout and Hyperuricemia
 - ◆ Systemic Lupus Erythematosus
 - ◆ Osteoporosis
8. Respiratory Diseases
 - ◆ Asthma
 - ◆ Chronic Obstructive Pulmonary Disease
 - ◆ Emphysema
9. Cardiovascular Disorders
 - ◆ Hypertension
 - ◆ Congestive Heart Failure
 - ◆ Arrhythmias
 - ◆ Angina
 - ◆ Acute MI
 - ◆ Thromboembolic Disease
10. Skin Diseases
 - ◆ Allergic Skin Disease
 - ◆ Drug Induced Skin Disease
 - ◆ Burns
 - ◆ Acne
11. Disease of the Eye and Ear
 - ◆ Glaucoma
 - ◆ Otitis Media
 - ◆ Otitis Externa
 - ◆ Tinnitus
12. Neurologic Disorders
 - ◆ Headache
 - ◆ Seizure Disorders
 - ◆ Parkinsonism
 - ◆ Pain Management
13. Psychiatric Disorders
 - ◆ Anxiety Disorders
 - ◆ Mood Disorders
 - ◆ Schizophrenia
 - ◆ Sleep Disorders
 - ◆ Attention Deficit Hyperactivity Disorder
 - ◆ Obesity and Eating Disorders
 - ◆ Alcoholism or Drug Abuse
- ◆ Osteomalacia

14. Infectious Diseases

- ◆ Immunizations
- ◆ Upper Respiratory Tract Infections
- ◆ Lower Respiratory Tract Infections
- ◆ Tuberculosis
- ◆ Urinary Tract Infections
- ◆ Intraabdominal Infections
- ◆ Gastrointestinal Infections
- ◆ Infective Endocarditis
- ◆ Central Nervous System Infections
- ◆ Bone and Joint Infections
- ◆ Sexually Transmitted Diseases
- ◆ HIV
- ◆ Mycotic and Parasitic Infections
- ◆ Surgical Prophylaxis
- ◆ Infections in Immunocompromised Host
- ◆ Bacteremia and Sepsis
- ◆ Skin and Soft Tissue Infections

15. Neoplastic Disorders

- ◆ Acute Leukemias

- ◆ Malignant Lymphomas
- ◆ Breast Cancer
- ◆ Liver Tumors
- ◆ Gastrointestinal Cancers
- ◆ Lung Cancer
- ◆ Prostate Cancer
- ◆ Pediatric Solid Tumors
- ◆ Gynecological Cancer
- ◆ Skin Cancer and Melanomas

16. OB-GYN Disorders

- ◆ Gynecologic Disorders
- ◆ Contraception and Infertility
- ◆ Drugs in Pregnancy and Lactation

17. Gerontology

- ◆ Alzheimer's Disease
- ◆ Dementia

**THE UNIVERSITY OF KANSAS SCHOOL OF PHARMACY CLINICAL CLERKSHIP
ASSESSMENT BY THE STUDENT**

Start Date (dd/mm/yy)	End Date (dd/mm/yy)	Presentation Date (dd/mm/yy)	Clerkship Site

Part One: Self-Assessment:

Student: _____ Preceptor: _____

2. What do you see as **your** strengths and weaknesses in this clerkship?

Strengths:

Weaknesses:

3. Discuss whether or not this clerkship is what you expected and why.

4. Please describe the most important things you have learned during this clerkship about:

a) yourself

b) the pharmacy profession

c) the health care profession

5. The most difficult aspect of the clerkship was:

6. The most enjoyable aspect of this clerkship was:

7. How will this clerkship experience impact your practice?

Online Form - Not to be submitted via FAX

Part Two: Site Assessment:

Please complete the following evaluation of your pharmacy practice experience in accordance with the following scale:

5 = Strongly Agree, 4 = Agree, 3 = Neutral, 2 = Disagree, 1 = Strongly Disagree, N/A = Not Applicable

Score	Assessment Categories
1 2 3 4 5 N/A	I was oriented to the facilities early in the clerkship.
1 2 3 4 5 N/A	I was introduced to the other health care professionals with whom I will work.
1 2 3 4 5 N/A	My role and expected level of performance were adequately explained.
1 2 3 4 5 N/A	Pertinent policies and procedures were explained.
1 2 3 4 5 N/A	Active student participation was encouraged.
1 2 3 4 5 N/A	Assignments (readings, papers, projects) were pertinent to the subject and helpful in learning it. (only applicable if assignments were made)
1 2 3 4 5 N/A	I received constructive feedback on my efforts.
1 2 3 4 5 N/A	My confidence level has increased as a result of this experience.
1 2 3 4 5 N/A	My preceptor was easily approachable when I had questions or concerns.
1 2 3 4 5 N/A	Overall, this pharmacy practice experience was worth the time and effort.
Yes No	Should this site be included in future NTPD clerkship rotations?
Yes No	Have you provided your onsite preceptor with an evaluation form to be FAXed to NTPD?

ADDITIONAL COMMENTS:

To be filled in by NTPD faculty after completed and submitted online by student.

This student received a grade of PASS _____ FAIL _____ Course Number _____

Signature of faculty representative _____

___ A copy of this evaluation will be sent to the preceptor at the end of the year unless this line is checked.
 *Check this line only if you do not want your preceptor to receive this feedback.

Online Form - Not to be submitted via FAX

THE UNIVERSITY OF KANSAS SCHOOL OF PHARMACY EVALUATION OF STUDENT BY ON-SITE PRECEPTOR

Before the student will be assigned a grade the Preceptor must FAX this completed form to:
913-393-9848

Name of Student:	Name of Preceptor:	Clerkship Site:	Clerkship Dates:

Please use the following scale to indicate how you would evaluate the student in the following areas:

1	2	3	4	5	6	7	8	9	10
Poor		Below Average		Average			Good		Excellent

Assessment Score		Assessment Categories
	Weight factor	
	X 2	Basic pharmaceutical knowledge
	X 2	Basic therapeutic knowledge
	X 2	Ability to communicate with patients
	X 2	Ability to communicate with health professionals
	X 2	Accuracy of medication histories and patient counseling information
	X 2	Ability to identify drug-related problems
	X 2	Willingness to take action to correct drug-related problems
	X 2	Ability to recommend appropriate therapeutic plans
	X 2	Ability to determine practical solutions to problems
	X 2	Retrieval of appropriate drug information
	X 0.5	Maintains confidentiality
	X 0.5	Ability to use time effectively
	X 0.5	Level of confidence
	X 0.5	Level of self-direction when undertaking responsibilities (i.e. motivation)
	X 0.5	Written communication skills
	X 0.5	Willingness to take responsibility for decisions
	X 0.5	Development of sound, structured judgement
	X 0.5	Level of professionalism (appearance, timeliness, manners)
	X 0.5	Maintains ethical standards
	X 0.5	Respect of assigned deadlines
Circle one →	Yes No	Was the student presentation acceptable

ADDITIONAL COMMENTS:

_____ / _____
Preceptor Signature / Date

Immunization Facts for NTPD Students

MMR

- Must have proof of two vaccinations (vaccinations in the year of 1977 are considered ineffective due to manufacture problems)
- No titer is required with proof of vaccinations
- An alternative to proof of two injections is a positive measles titer, a positive mumps titer and a positive rubella titer (3 separate titers)
- If born **before 1957** proof of vaccination is recommended but not required

Tetanus/Diphtheria Toxoids

Must have documentation of a Td booster within the previous 10 years

Hepatitis B

- Must have a positive titer documenting immune status vs. the Hepatitis B virus
- If titer is negative after an e-shot series a repeat series must be initiated. However a positive titer at any time during this repeat series indicates adequate immunity.

Tuberculin Skin Test

- A negative TB skin test is required within the past 12 months
- An alternative is a chest X-ray negative for signs of TB
or
- Documentation from physician of completing 6 months of isoniazid therapy following a positive TB skin test.

Varicella

Documentation of varicella status is required and must include:

- Positive titer for varicella
or
- Proof of 2 varicella immunization series
or
- Chronologically intact documentation of varicella infection

Students entering clerkships must also submit:

- Current CPR certification
- Proof of liability insurance coverage (maintained throughout the clerkships)
- Health insurance
- Signed Confidentiality Statement
- Copy of current Pharmacy license