

**Advanced Pharmacy Practice Experience (APPE - 5)  
Geriatrics Syllabus  
PHAR 885  
Fall 2015 and Spring 2016**

School of Pharmacy

This syllabus is not to be construed as a contract with the student and is subject to change.

The School of Pharmacy and faculty reserve the right to change the course syllabus, effective upon the student receiving written notification (e-mail or the Blackboard system) and/or verbal notification during regular experiential course hours.

Materials used in this class may be copyrighted and should not be shared with individuals not enrolled in this course.

Credit Hours	5 credit hours; full-time (200 experiential hours)
Course meeting days & time	M-F – 8 hours per day <b>or</b> as directed by preceptor.
Location	Various Sites/Affiliated institutions
Team Leader / Instructor	Craig A. Kimble, PharmD, MBA, MS, BCACP
Office	CEB 137
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Email	<a href="mailto:Craig.kimble@marshall.edu">Craig.kimble@marshall.edu</a>
Office hours	Monday 10AM-12PM or by appointment

Faculty	Email	Office	Phone Number	Office Hours / Appointments accepted?
Robert Stanton, MBA, PharmD, BCPS	<a href="mailto:rstanton@marshall.edu">rstanton@marshall.edu</a>	CEB 138	304-696-7350	TBA & by appointment

**Student: If the instructor accepts appointments, then please email the instructor for availability. The student can expect the instructor to respond to E-mails and phone messages within 72 hours.**

**Course Description:** The Geriatrics APPE is a 5 week experiential rotation that focuses on the provision of clinical pharmacy services in a variety of settings with a focus on care to the elderly population. These sites may include community pharmacies, specialty clinics, rehabilitation hospitals, skilled nursing facilities (SNFs), home-based consult services, psychiatric facilities, and assisted living facilities (ALFs). A focus is placed on the interdisciplinary care of the geriatric population. Students will enhance knowledge of how to assess pharmacotherapy and appropriateness of drugs, determine how safely and effectively a patient can self-administer the therapy, and how to implement plans to ensure such safe and effective use. Students will be expected to utilize, refine, and apply his or her knowledge base of pharmacology, pharmacokinetics, pathophysiology, and therapeutics to enhance the quality of pharmacy related care of the elderly.

**Prerequisites:** P4 Class Standing

**Text Books:**

**Required:** None. Preceptors may require and/or recommend additional readings for their rotations. Students are expected to communicate with the preceptor regarding such requirements prior to the start date.

**Recommended:** Portable Drug Information reference/resource, such as Lexicomp, Micromedex, Facts and Comparisons, Clinical Pharmacology, or similar program.

**Course Objectives:** Upon completion of this experiential course, the student will be able to:

Number	Objective	Linkage to MUSOP Abilities (list ability numbers)	How Assessed
1	Describe the physiologic changes that occur as the result of aging, and how these changes effect the therapeutic drug monitoring and adjustment of medications including medication therapy management (MTM) in the elderly population.	5: Individualize patient therapy (perform therapeutic dose adjustment) 6: Assess lab data during care provision 43: Provides patient care targeted at improving health of the community 44: Applies principles of epidemiology and pharmacoepidmiology in practice 66: Adheres to the tenets of patient safety 67: Identifies, assesses, and avoids potential medication misadventures	Preceptor evaluation of educational activities using a rubric scoring aid
2	Compare and contrast pharmacotherapy principles in older adults and middle-aged adults.	5: Individualize patient therapy (perform therapeutic dose adjustment) 6: Assess lab data during care provision 43: Provides patient care targeted at improving health of the community 44: Applies principles of epidemiology and pharmacoepidmiology in practice 66: Adheres to the tenets of patient safety 67: Identifies, assesses, and avoids potential medication misadventures 69: Reports incidences that threaten patient safety	Preceptor evaluation of educational activities using a rubric scoring aid
3	Identify, resolve, and prevent medication-related problems such as falls and manage medication therapy to ensure that medications are appropriate, safe, effective, and used correctly.	1: Critical thinking and problem solving. 2: Perform physical assessment to resolve MRPs 3: Assess illness severity for triage 5: Individualize patient therapy (perform therapeutic dose adjustment) 6: Assess lab data during care provision 17: Debates and negotiates effectively for the betterment of the team 20: Develops care plans that are sensitive to and incorporates a patient's cultural differences 37: Is a credible member of the healthcare team	Preceptor evaluation of educational activities using a rubric scoring aid

		<p>43: Provides patient care targeted at improving health of the community</p> <p>44: Applies principles of epidemiology and pharmacoepidmiology in practice</p> <p>45: Integrates cost, risk, and benefit considerations into care plans</p> <p>56: Interprets research findings within the context of current practice</p> <p>64: Provides customer service</p> <p>65: Is empathetic during patient care</p> <p>66: Adheres to the tenets of patient safety</p> <p>67: Identifies, assesses, and avoids potential medication misadventures</p> <p>68: Integrates technology and practice to minimize patient risk</p> <p>69: Reports incidences that threaten patient safety</p>	
4	<p>Communicate effectively with patients and/or caregivers to elicit pertinent health information and the provision of appropriate education based on the needs (for example: cultural, appropriate literacy level, etc.) of that specific individual.</p>	<p>2: Perform physical assessment to resolve MRPs</p> <p>3: Assess illness severity for triage</p> <p>9: Document professional practice activities</p> <p>12: Resolve conflicts so everyone wins</p> <p>18: Assesses patient health literacy</p> <p>19: Uses educational techniques or tools to facilitate patient understanding of car.</p> <p>38: Deserves public’s trust due to existence of personal integrity, professional competency, and dedication to patient /profession</p> <p>49: Speaks in public settings.</p> <p>50: Assess nonverbal communication to determine understanding, agreement, or disagreement</p> <p>51: Actively listens</p> <p>52: Communicates through use of professional written media</p> <p>56: Interprets research findings within the context of current practice</p> <p>64: Provides customer service</p> <p>65: Is empathetic during patient care</p> <p>66: Adheres to the tenets of patient safety</p> <p>68: Integrates technology and practice to minimize patient risk</p> <p>69: Reports incidences that threaten patient safety</p>	<p>Preceptor evaluation of educational activities using a rubric scoring aid</p>
5	<p>Communicates relevant, concise, comprehensive, and timely information to other</p>	<p>9: Document professional practice activities</p> <p>12: Resolve conflicts so everyone wins</p>	<p>Preceptor evaluation of educational</p>

	providers (oral, written, or a combination).	<p>17: Debates and negotiates effectively for the betterment of the team</p> <p>37: Is a credible member of the healthcare team</p> <p>49: Speaks in public settings</p> <p>50: Assess nonverbal communication to determine understanding, agreement, or disagreement</p> <p>51: Actively listens</p> <p>52: Communicates through use of professional written media</p> <p>66: Adheres to the tenets of patient safety</p> <p>67: Identifies, assesses, and avoids potential medication misadventures</p> <p>68: Integrates technology and practice to minimize patient risk</p> <p>69: Reports incidences that threaten patient safety</p>	activities using a rubric scoring aid
<b>6</b>	Utilizes appropriate drug reference sources (electronic and printed) to retrieve drug-related information to identify, resolve, and prevent drug-related problems.	<p>9: Document professional practice activities</p> <p>52: Communicates through use of professional written media</p> <p>54: Performs efficient medical literature searches</p> <p>55: Evaluates medical literature for purpose of validity assessment</p> <p>56: Interprets research findings within the context of current practice</p> <p>67: Identifies, assesses, and avoids potential medication misadventures</p> <p>68: Integrates technology and practice to minimize patient risk</p>	Preceptor evaluation of educational activities using a rubric scoring aid
<b>7</b>	Discuss the pathophysiology, signs, symptoms, and treatment options for common diseases seen in older adults.	<p>1: Critical thinking and problem solving</p> <p>6: Assess lab data during care provision</p> <p>37: Is a credible member of the healthcare team</p> <p>44: Applies principles of epidemiology and pharmacoepidmiology in practice.</p> <p>56: Interprets research findings within the context of current practice</p> <p>67: Identifies, assesses, and avoids potential medication misadventures</p>	Preceptor evaluation of educational activities using a rubric scoring aid
<b>8</b>	Describe the clinical pharmacology of commonly used medications in older adults.	<p>37: Is a credible member of the healthcare team</p> <p>44: Applies principles of epidemiology and pharmacoepidmiology in practice</p> <p>56: Interprets research findings within the context of current practice</p>	Preceptor evaluation of educational activities using a rubric scoring aid

		66: Adheres to the tenets of patient safety 67: Identifies, assesses, and avoids potential medication misadventures	
<b>9</b>	Professionally practices as a member of the healthcare team.	4: Administer medications 5: Individualize patient therapy (perform therapeutic dose adjustment) 6: Assess lab data during care provision 9: Document professional practice activities 12: Resolve conflicts so everyone wins 17: Debates and negotiates effectively for the betterment of the team 21: Aware of and follows EEOC standards 22: Places professional responsibilities before own cultural beliefs and prejudices 36: Uses decision making skills to improve the pharmacy profession's standing in healthcare institutions 37: Is a credible member of the healthcare team 39: Assumes responsible for actions, success, and failures 41: Mentors peers and subordinates. 43: Provides patient care targeted at improving health of the community 49: Speaks in public settings 51: Actively listens 57: Dresses appropriately for practice setting 58: Aware of current political and professional debates 59: Adapts to new practice challenges and environments in a positive manner 61: Self evaluates for personal CQI 62: Commits to life-long learning 66: Adheres to the tenets of patient safety 67: Identifies, assesses, and avoids potential medication misadventures 68: Integrates technology and practice to minimize patient risk 69: Reports incidences that threaten patient safety 70: Performs continuous quality assurance processes	Preceptor evaluation of educational activities using a rubric scoring aid
<b>10</b>	Applies federal and state rules and regulations pertaining to the provision of pharmaceutical services to	4: Administer medications 9: Document professional practice activities 63: Practices lawfully and ethically	Preceptor evaluation of educational activities using a rubric scoring aid

	patients in the assigned facility.	66: Adheres to the tenets of patient safety 68: Integrates technology and practice to minimize patient risk 69: Reports incidences that threaten patient safety 70: Performs continuous quality assurance processes	
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**Course Evaluation (assessment): Point Distribution**

Assessment	Percent of Final Grade
Professionalism	15%
Drug Information	10%
Communication Skills	10%
Pharmacotherapeutic Knowledge and Application	20%
Collection of relevant information and monitoring	15%
Identification of Medication Related Problems, Establishing Goals, and Designing and Implementation of workable treatment Plans	15%
Rotation Specific Projects/Assignments	15%
Total	100%

**Longitudinal Abilities Checklist and Portfolio:** There have been specific activities and recommended supplemental activities that are required to be completed during each APPE rotation. These items are included in the longitudinal APPE checklist document which must be turned into the Office of Experiential Learning prior to the completion of APPE rotations. In addition, each student is required to maintain a portfolio throughout all experiential rotations. Some items are required to be uploaded to the students PharmPortfolio as completed in the program as designated by the PharmPortfolio coordinator.

**Course Evaluation (grading):** Grading for this experiential rotation will be established by the individual preceptor based on the following criteria and associated grading rubric:

- Attendance, attitude, and professionalism
- Ethics and responsibility
- Communication and interpersonal skills
- Demonstration of pharmacotherapeutic skills (including patient assessment and monitoring, therapeutic decision-making, and intervention), and integration of basic biomedical, pharmaceutical and clinical science knowledge to optimize patient care outcomes in the geriatric population
- Demonstration of critical thinking skills
- Documentation of interventions
- Daily activities
- Formal case presentation(s)
- Medication use evaluations (MUEs)
- Journal club review
- In-service programs
- Drug information
- Patient education materials
- Herbal monographs/ Drug Monographs
- Clinical practice protocol development
- Written/oral presentation(s)

- Project(s)

**Letter grades distribution:** A = 89.50 to 100%  
B = 79.50 to less than 89.50%  
C = 69.50 to less than 79.50%  
F = Less than 69.50%

**Assignment and examination grades will be posted in Blackboard within 7 days unless otherwise stated.**

**Attendance policy:** All students are expected to adhere to the rotation attendance policy and required to spend a minimum of 40 hours per week at the site.

**Tardiness** is defined as greater than 10 minutes after expected time of arrival. If greater than 1 tardy then this will be classified as an unexcused absence. On time is defined at work and in place to start tasks.

**Unexcused absences** are prohibited and may result in failure of course. Each unexcused absence will result in a minimum reduction of 5 percentage points per occurrence; two unexcused absences will result in automatic failure of the course. For excused absences refer to the student handbook.

**Absences with Advanced Notice:** A student may make a request to be excused from rotation for a qualifying school sponsored or other educational event (e.g. career day).

**Absences for Illness/Emergency:** In the event that the student may be unexpectedly absent from rotation (e.g. illness, emergency), the student **must immediately notify BOTH the preceptor (by phone) and the Office of Experiential Education (304-696-7350)**. Please treat your preceptor as you would an employer and provide notice as soon as possible. In the event that the student must leave a message, (s)he should provide a contact phone number where (s)he may be reached and follow up with an e-mail (if possible) to ensure that the message was received. **Each failure to notify the preceptor AND the school properly will result in (5%) deduction from the rotation grade.**

**Holiday/Break policy:** Students are required to be at their rotation site for all scheduled days **EXCEPT** for the following holidays: **Memorial Day, Independence Day, Labor Day, and Thanksgiving Day**. University academic breaks (e.g. spring break) are NOT scheduled holiday periods and students are expected to be at their rotation site.

**All missed time (for any reason, with the exception of an approved holiday) must be made up.** In the event a student misses more than three (3) days of time during an APPE rotation, they will automatically fail the rotation unless the missed time is made up.

**Length of Course:** This experiential pharmacy practice will consist of five (8 academic hours) days (40 hours) per week for one five-week duration.

## **UNIVERSITY POLICIES**

University policies regarding **Academic Dishonesty, Students with Disabilities, University Computing Services' Acceptable Use, Affirmative Action, and Sexual Harassment** can be found at <http://www.marshall.edu/wpmu/academic-affairs/policies/>.

## School of Pharmacy Policies

### SOCIAL JUSTICE POLICY STATEMENT

Marshall University is committed to bringing about mutual understanding and respect among all individuals and groups at the University. As part of Marshall University, School of Pharmacy has made a commitment to social justice. Therefore, no one will be discriminated against on the basis of race, gender, ethnicity, age, sexual orientation, religion, social class, or differing viewpoints. Each student will be viewed as a valuable member of this class and as the faculty for the course, I will strive to facilitate an atmosphere/learning environment where mutual understanding and respect are actualized.

### ACADEMIC, ETHICAL, AND PROFESSIONAL CONDUCT

Student expections for academic, ethical, and professional conduct are defined within the school's [Ethical and Professional Conduct Policy](#) and the university's [Academic Dishonesty Policy](#).

### Second Chance and Remediation Policy

Second chance and remediation are mechanisms designed to assist students who have struggled within the classroom environment in demonstrating achievement of classroom and curricular learning outcomes. These processes are described in sections 200.001.003 (Second Chance) and 200.001.004 (Remediation) of the [Academic Standards for Grading, Progressions, Dismissal, and Re-admission Policy](#).

### Test Security Policy

In order to ensure the security of all examinations, the School of Pharmacy has adopted the following policies:

#### 1. Test Administration

- A. Non-electronic testing
  - a. Students may not access any electronic equipment during the exam that has not been provided by the faculty, including but not limited to calculators, cell phones, laptops and PDAs.
- B. Electronic testing
  - a. Only those resources (electronic or otherwise) approved by the instructor may be used or accessed during the testing session.
  - b. Students enrolled within courses using electronic testing must download and install the [Respondus Lockdown Browser](#). The installation will require an installation code that must be acquired from Computing Services.

#### 2. Test Review

- A. Students will not be allowed to view any exam without direct supervision of course faculty or site facilitator
- B. Students must review tests within time specified by the course faculty.
- C. Limited numbers of students may be allowed to view the exam at one time depending on office size, space, and faculty preference.
- D. Students will be allowed to review the exam only one time, and time limits may be placed on review as specified by course faculty.



- E. NO notes can be taken by the student while reviewing the test, and students are not allowed to access any electronics while reviewing the tests. NO copies electronic or written!
- F. Individual student printouts for exams are to be retained by the faculty.
- G. Faculty have the right to place further restrictions on test review as deemed necessary.