Chair: Tracy Christofero

GC#6: Course Addition

# **Request for Graduate Course Addition**

- 1. Prepare one paper copy with all signatures and supporting material and forward to the Graduate Council Chair.

  2. E-mail one identical PDF copy to the Graduate Council Chair. If attachments included, please merge into a single file.
- 3. The Graduate Council cannot process this application until it has received both the PDF copy and the signed hard copy.

College: Pharmacy	Dept/Division:Pharmacy Practice	Alpha Designator/Number: PHAR 885		Graded	CR/NC
Contact Person: Glen Anderso	on, PharmD	Phone: 30	4-696-230	5	
NEW COURSE DATA:					
New Course Title: Advanced	Pharmacy Practice Experience (APPE)	) - Geriatrics			
Alpha Designator/Number:	P H A R 8 8 5				
Title Abbreviation: A P P	E 5 - G e r i a t r (Limit of 25 characters and space	i C S			
Course Catalog Description: (Limit of 30 words)	This is a 5 week experiential rotation settings with a focus on care to the specialty clinics, rehabilitation hosp	n that focus on provision of clinical pelderly population. These sites may itals, skilled nursing facilities (SNFs), cus is placed on the interdisciplinary	include co	ommunity p sed consult	harmacies, services, and
Co-requisite(s): None	First Term to be O	offered: FALL 2015			
Prerequisite(s): P4 Status	Credit Hours: 5				
Course(s) being deleted in pl	ace of this addition (must submit cou	rse deletion form): NONE			
Signatures: if disapproved at	any level, do not sign. Return to prev	ious signer with recommendation at	ttached.		
Dept. Chair/Division Head	7. Sem and	Per For	Date _	100/	
Registrar	•		Date		
College Curriculum Chair			Date 2	Q7/15	
Graduate Council Chair			Date		

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College: Pharmacy	Department/Division: Pharmacy Practice	Alpha Designator/Number: PHAR 885
	g the new course addition for each topic listed below tems listed on the first page of this form.	v. Before routing this form, a complete syllabus
1. FACULTY: Identify by name the facu	lty in your department/division who may teach this	course.
Craig Kimble, PharmD, MBA, MS, BCA0 Robert Stanton, PharmD, MBA, BCPS Institutional and community based pr	CP receptors qualified to teach geriatric experiential lea	rning rotations.
2. DUPLICATION: If a question of possi describing the proposal. Enter " <b>Not</b> and Not applicable	ble duplication occurs, attach a copy of the correspo Applicable" if not applicable.	ondence sent to the appropriate department(s)
3. REQUIRED COURSE: If this course wi applicable. Not applicable	ll be required by another deparment(s), identify it/tl	hem by name. Enter " <i>Not Applicable</i> " if not
Enter "Not Applicable" if not applica-	ements required to provide clinical experiences, atta able. ent pharmacy sites in multiple states to provide gene	
agreements are on file with the Office		crarmedicine related experiences. 7111
	ENTS: If your department requires additional faculty time and money required to secure these items. (No ter " <b>Not Applicable</b> " if not applicable.	
6. COURSE OBJECTIVES: (May be subs	nitted as a separate document)	æ

7. COURSE OUTLINE (May be submitted as a separate document)

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10. EXAMPLE EVALUATION METHODS (CHAPTER, MIDTERM, FINAL, PROJECTS, ETC.)

Students will be assessed by a variety of techniques. Students will be directly evaluated by pharmacy faculty, may have assignments from the preceptors including reading, journal clubs, presentations, and may have to complete multiple projects or reports. Preceptors are provided a scoring rubric to assist in the consistent evaluation of students.

11. ADDITIONAL GRADUATE REQUIREMENTS IF LISTED AS AN UNDERGRADUATE/GRADUATE COURSE

Not applicable (see page 1 of application)

12. PROVIDE COMPLETE BIBLIOGRAPHY (May be submitted as a separate document)

Course syllabus attached.

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Please insert in the text box below your course summary information for the Graduate Council agenda. Please enter the information exactly in this way (including headings):

Department:
Course Number and Title:
Catalog Description:
Prerequisites:
First Term Offered:
Credit Hours:

Department: Pharmacy Practice

Course Number and Title: PHAR 885 Advanced Pharmacy Practice Experience (APPE - 5) - Geriatrics

Catalog Description: The Geriatrics APPE is a 5 week experiential rotation that focus on 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, and assisted living facilities (ALFs). A focus is placed on the interdisciplinary care of the geriatric population. Student pharmacists 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 pharmaceutical care of the elderly.

Prerequisites: P4 status First Term Offered: Fall 2015

Credit Hours: 5

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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 <u>or</u> as directed by preceptor.	
Location	Various Sites/Affiliated institutions	
Team Leader / Instructor	Craig A. Kimble, PharmD, MBA, MS, BCACP	
Office	CEB 137	
Phone	304-696-6014	
Email	Craig.kimble@marshall.edu	
Office hours	Monday 10AM-12PM or by appointment	

Faculty	Email	Office	Phone	Office Hours /
			Number	Appointments accepted?
Robert Stanton, MBA,	rstanton@marshall.edu	CEB	304-696-7350	TBA & by appointment
PharmD, BCPS		138		

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 focus on 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, and assisted living facilities (ALFs). A focus is placed on the interdisciplinary care of the geriatric population. Student pharmacists 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 pharmaceutical 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	How Assessed
1	Describe the physiologic changes that occur as the result of aging, and discuss how these changes effect the therapeutic drug monitoring and adjustment of medications including medication therapy management (MTM) in the elderly population.	(list ability numbers) 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.***Potential removal***	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 43: Provides patient care targeted at	Preceptor Evaluation of Educational Activities using a Rubric Scoring Aid

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		improving health of the community 44: Applies principles of epidemiology and pharmacoepidmiology in practice 45: Integrates cost, risk, and benefit considerations into care plans 56: Interprets research findings within the context of current practice 67: Identifies, assesses, and avoids potential medication misadventures 64: Provides customer service 65: Is empathetic during patient care 66: Adheres to the tenets of patient safety 68: Integrates technology and practice to minimize patient risk 69: Reports incidences that threaten patient safety	
4	Communicate effectively with patients and/or caregivers to assess the patient's condition(s) and then ensure understanding by the patient and/or caregiver including addressing special conditions in the elderly (decreased hearing, visual impairment, dysphagia, etc).	2: Perform physical assessment to resolve MRPs 3: Assess illness severity for triage 9: Document professional practice activities 12: Resolve conflicts so everyone wins 18: Assesses patient health literacy 38: Deserves public's trust due to existence of personal integrity, professional competency, and dedication to patient /profession 49: Speaks in public settings. 50: Assess nonverbal communication to determine understanding, agreement, or disagreement 51: Actively listens 52: Communicates through use of professional written media 56: Interprets research findings within the context of current practice 64: Provides customer service 65: Is empathetic during patient care 66: Adheres to the tenets of patient safety 68: Integrates technology and practice to minimize patient risk 69: Reports incidences that threaten patient safety	Preceptor Evaluation of Educational Activities using a Rubric Scoring Aid
5	Provide patient education that is culturally sensitive and at the appropriate level of health literacy.	9: Document professional practice activities 12: Resolve conflicts so everyone wins 18: Assesses patient health literacy 19: Uses educational techniques or tools to facilitate patient understanding of care	Preceptor Evaluation of Educational Activities using a Rubric Scoring Aid

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		20: Develops care plans that are sensitive	
	-ii =	to and incorporates a patient's cultural	
	THE CO.	differences	
	**	37: Is a credible member of the healthcare	
		team	
		38: Deserves public's trust due to	
		existence of personal integrity, professional	
		competency, and dedication to	
	=	pt./profession	
		43: Provides patient care targeted at	
		improving health of the community	
		49: Speaks in public settings	
		50: Assess nonverbal communication to	
		determine understanding, agreement, or	
		disagreement	
		51: Actively listens	
		52: Communicates through use of	
		professional written media	
		64: Provides customer service	
		65: Is empathetic during patient care	
		66: Adheres to the tenets of patient safety	
		68: Integrates technology and practice to	
		minimize patient risk	
6	Communicate relevant,	9: Document professional practice	Preceptor Evaluation
	concise, comprehensive, and	activities	of Educational
	timely information through	12: Resolve conflicts so everyone wins	Activities using a
	oral and written	17: Debates and negotiates effectively for	Rubric Scoring Aid
	communication in a clear	the betterment of the team	
	manner using appropriate	37: Is a credible member of the healthcare	
	terminology and vocabulary	team	
	for healthcare professionals.	49: Speaks in public settings	
		50: Assess nonverbal communication to	
		determine understanding, agreement, or	
		disagreement	
	_	51: Actively listens	
		52: Communicates through use of	
		professional written media	()
		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	
	17/11	69: Reports incidences that threaten patient safety	Dungan Fundan
7	Utilize appropriate drug	<ul><li>69: Reports incidences that threaten patient safety</li><li>9: Document professional practice</li></ul>	Preceptor Evaluation
7	reference sources (electronic	<ul><li>69: Reports incidences that threaten patient safety</li><li>9: Document professional practice activities</li></ul>	of Educational
7	reference sources (electronic and printed) to retrieve drug-	<ul> <li>69: Reports incidences that threaten patient safety</li> <li>9: Document professional practice activities</li> <li>52: Communicates through use of</li> </ul>	of Educational Activities using a
7	reference sources (electronic	<ul><li>69: Reports incidences that threaten patient safety</li><li>9: Document professional practice activities</li></ul>	of Educational

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	drug-related problems.	searches 55: Evaluates medical literature for purpose of validity assessment 56: Interprets research findings within the context of current practice 67: Identifies, assesses, and avoids potential medication misadventures 68: Integrates technology and practice to minimize patient risk	December Fredrick
8	Discuss the pathophysiology, signs, symptoms, and treatment options for common diseases seen in older adults.	<ol> <li>1: Critical thinking and problem solving</li> <li>6: Assess lab data during care provision</li> <li>37: Is a credible member of the healthcare team</li> <li>44: Applies principles of epidemiology and pharmacoepidmiology in practice.</li> <li>56: Interprets research findings within the context of current practice</li> <li>67: Identifies, assesses, and avoids potential medication misadventures</li> </ol>	Preceptor Evaluation of Educational Activities using a Rubric Scoring Aid
9	Describe the clinical pharmacology of commonly used medications in older adults.	37: Is a credible member of the healthcare team 44: Applies principles of epidemiology and pharmacoepidmiology in practice 56: Interprets research findings within the context of current 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
10	Describe the role and function of the clinical pharmacist as a member of the geriatric health care team, serve as part of this team, participate in quality improvement efforts, and demonstrate professionalism as part of this 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	Preceptor Evaluation of Educational Activities using a Rubric Scoring Aid

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		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	
11	Discuss the various federal and state rules and regulations pertaining to the provision of pharmaceutical services to patients in various geriatric settings.	4: Administer medications 9: Document professional practice activities 63: Practices lawfully and ethically 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	Preceptor Evaluation of Educational Activities using a Rubric Scoring Aid

## Course Evaluation (assessment): Point Distribution

Assessment	Percent of Final Grade
Professionalism	15%
Drug Information	10%
Verbal and Written Communication Skills Including Presentation	15%
Pharmacotherapeutic Knowledge and Application (including specific readings)	20%
Collection of relevant information and monitoring from medical record	15%
Identification of Medication Related Problems, Establishing Goals, and	15%
Designing and Implementation of workable treatment Plans	
Rotation Specific Projects/Assignments	10%
Total	100%

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

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- Attendance, attitude, and professionalism
- Ethics and responsibility
- Communication and interpersonal skills
- Demonstration of pharmaotherapeutic 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
- 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.

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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 <a href="http://www.marshall.edu/wpmu/academic-affairs/policies/">http://www.marshall.edu/wpmu/academic-affairs/policies/</a>.

### **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 expectorations 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

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- 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 <u>Respondus Lockdown Browser</u>. 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.