



**ADVANCED PHARMACY PRACTICE EXPERIENCE  
(APPE)**

**PRECEPTOR MANUAL**

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## **Introduction**

Welcome and thank you for your service as a preceptor for the University of New Mexico College of Pharmacy. As an Adjunct Clinical Assistant Professor, your role is one of teacher, mentor, guide, and advocate for our students' professional development. As a preceptor for the Advanced Pharmacy Practice Experience (APPE), you are guiding our students through their final year of pharmacy school as they acquire the skills and knowledge necessary to become a practicing professional pharmacist.

APPEs are designed to enhance the knowledge base and skills students need in order to fulfill the competencies required for the professional pharmacy degree. Students should further develop their skills in patient care, critical thinking, decision making, ethical judgment, and professionalism.

This preceptor manual is meant to serve as a guide for preceptors regarding APPEs. We have included information on APPE policies and procedures, goals and objectives, and general overview of processes. It is a dual manual so that preceptors and students are aware of expectations for both roles.

You are making an enormous contribution to individual students, the state of New Mexico, and the profession itself. Please do not hesitate to contact the Office of Experiential Programs if you have any questions; we are more than willing to assist you. Best wishes for a rewarding experience!

Michel Disco, R.Ph., MBA

Assistant Dean, External Program

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**Pharm 770**  
**Advanced Pharmacy Practice Experience (APPE)**  
**Course Description**

The Advanced Pharmacy Practice Experiences, or APPEs, are a series of nine, four-week, 160-hour professional experiences designed to provide students the opportunity to further develop their skills and knowledge base in pharmacy practice. This series of professional experiences follows the first three years of the Pharm.D. curriculum as well as a series of Introductory Pharmacy Practice Experiences (IPPEs) which students complete after their first and second years of the curriculum. APPE rotations take place over 10 months, from June after the third year of the curriculum through April of the fourth year. There are no rotations scheduled for the months of December and May. Students receive one month off for a vacation period. The Office of Experiential Programs asks preceptors to provide scheduling availability in September of the year prior to the start of rotations.

APPE rotations should reinforce and continue the development of skills and knowledge students received during the previous three years in the curriculum. APPEs should also provide students the opportunity to serve various patient populations in a variety of settings and to collaborate with other healthcare professionals. These experiences should offer exposure to patients and disease states that pharmacists are likely to encounter in practice. Students must work under the supervision of a licensed pharmacist or college appointed preceptor at all times during APPEs.

The UNM College of Pharmacy requires five to seven clinical experiences, two of which must be general medicine rotations (e.g. internal medicine, primary care): one in-patient and one out-patient. The third required clinical rotation must be a clinical

specialty rotation (e.g. oncology, cardiology, disease state management). These clinical experiences may be in either inpatient or ambulatory care settings. Students must also complete two to four elective rotations such as drug information, pharmacy administration, or management. These rotations do not involve direct patient care.

In addition, all students must complete one of these rotations in a rural area of New Mexico. This requirement exists as part of the College of Pharmacy's ongoing mission to serve the health needs of the people of New Mexico. The Rural Health Interdisciplinary Program (RHIP) is an option for students interested in rural health. RHIP rotations occur during the first 2 months of the summer and offer students from various disciplines the opportunity to share learning experiences and develop team skills related to the interdisciplinary model of healthcare delivery. Preceptors should be aware that students participating in RHIP are excused from rotation duties on Friday afternoons to participate in RHIP meetings.

## **APPE General Descriptions**

### ***Clinical***

These experiences provide care to patients of all ages related to general medicine issues or to specific medical issues and conditions. Students will learn the provision of pharmaceutical care of a preventive, primary care, or acute/chronic nature on an inpatient or ambulatory care basis. These APPEs will emphasize continuity of care and the development of pharmacist-delivered patient care competencies.

### ***Electives***

Elective APPEs may be either patient-care or non-patient care experiences. These rotations should provide students with an adequate breadth of knowledge in areas of

interest and should complement the required APPEs to develop the student pharmacist into a competent and mature professional. Elective experiences give students the opportunity to gain insight in areas such as research, drug information, and pharmacy administration, among others.

### ***Advanced Practice Community Pharmacy***

These experiences take place primarily in retail settings such as chain store pharmacies, grocery store pharmacies, or independent pharmacies. These experiences focus on the identification, resolution, and prevention of drug related problems dealing with general medicine issues and medication therapy management.

### ***Advanced Practice Hospital/Health System Pharmacy***

These experiences take place in hospitals or other systems of integrated pharmaceutical services such as long-term care, home health care or correctional facilities. These experiences focus on drug distribution and patient-specific care. Emphasis is placed on the drug-use decision-making process, monitoring of individual patient drug therapy, formulary management and the communication of information and analysis to other health professionals and patients.

## **Goals, Objectives and Activities**

The goals and objectives for each experience are based on the competencies needed to fulfill the requirements for the Doctor of Pharmacy degree. Students must demonstrate a minimum level of proficiency in each competency by the end of the experiential education program in order to receive credit for this portion of the curriculum. Example goals, objectives and activities for a limited number of APPEs follow. Preceptors may use these to devise their own goals and objectives for their

rotations and work with students to incorporate individual student interests into goals and objectives. The Goals and Objectives for each experience should be sent to the Office of Experiential programs for review and approval.

### **Pharmacy Administration** *Elective*

The following goals, objectives, and activities are provided as a general overview only of the Pharmacy Administration APPE; they are not specific to all pharmacy administration rotations. Each rotation will vary due to particular site, preceptor, and orientation.

**Purpose:** The purpose of the Pharmacy Administration APPE is to develop the pharmaceutical knowledge base, competencies, and administrative skills in the business and operations management of pharmacy services.

**Goals:**

1. To develop skills necessary to make judgments, set priorities, and assume responsibilities concerning management of pharmaceutical care resources at site
2. To develop thorough understanding of pharmacy practice business operations
3. To gain experience in purchasing and inventory control in pharmacy practice
4. To gain understanding and experience in financial management of pharmacy practice
5. To allow for exploration of areas of interest that will enhance student knowledge base and/or patient care

**Objectives:**

1. Describe state and federal laws and regulations as well as applicable accreditation standards affecting pharmacy operations
2. Identify factors involved in managing personnel issues, including policies, procedures, and laws regarding hiring and termination of employees, workload and scheduling, worker rights, benefits, etc.
3. Describe differences in healthcare models: socialized medicine vs. US model of health care, for-profit vs. not-for-profit systems (institutional pharmacy administration)
4. Describe policies and guidelines for drug acquisition including quality specifications, supply, cost, delivery schedule, and mechanisms of assessment of purchasing policies
5. Understand systems for quality assurance and quality improvement
6. Describe system of inventory control which assures adequate inventory levels
7. Identify proper storage of various pharmaceutical dosage forms
8. Describe security system to prevent theft or pilferage of drugs
9. Understand financial/resource constraints existing in healthcare system and how these impact pharmaceutical services
10. Understand importance of maintaining and reconciling accounts receivable from third-party payers

11. Maintain and monitor operations budget
12. Understand process of medication pricing (independent/chain pharmacy administration)

**Activities:**

1. Assigned readings
2. Orientation to administrative structure at site
3. Working/observing pharmacy management and operations at site
4. Introduction to inpatient and/or outpatient program administration, supply management, resource budgeting, staff/workload scheduling
5. Taking inventory and generating orders
6. Providing weekly/monthly reports on medication errors, purchase orders, ordering trends
7. Write recommendations for drug usage to physicians (institutional administration)
8. Participate in Pharmacy and Therapeutic Committee meetings (institutional administration)

**Anticoagulation**  
*Clinical Specialty, Ambulatory Care*

The following goals, objectives, and activities are provided as a general overview only of the outpatient Anticoagulation APPE; they are not specific to all anticoagulation rotations. Each rotation will vary due to particular site, preceptor, and orientation.

**Purpose:** The purpose of the Anticoagulation APPE is to develop the knowledge base, competencies, and clinical skills in the provision of anticoagulation therapy on an outpatient basis.

**Goals:**

1. To develop thorough understanding of physiology and pathophysiology of thromboembolic disorders
2. To develop necessary clinical skills in order to design, recommend, monitor and evaluate individualized pharmaceutical care plans, integrating patient-specific data with disease-specific and drug-specific information while considering ethical and quality-of-life factors for patients
3. To develop thorough understanding of the pharmacology of antithrombotic agents
4. To develop patient management and anticoagulation management skills
5. To develop written and verbal communication skills necessary to provide drug information/education to patients and other healthcare providers regarding the use and monitoring of anticoagulation medications
6. To develop the critical thinking, decision-making, and professional skills to optimize patient outcomes
7. To allow for exploration of areas of interest that will enhance student knowledge base and/or patient care

**Objectives:**

1. Describe coagulation, antithrombotic therapy and thrombogenesis

2. Assess patient/patient medical history to identify signs and symptoms of bleeding and thromboembolism, other medical problems and/or therapies or potential drug therapy problems and organize information in SOAP format.
3. Describe Prothrombin Time (PT), International Normalized Ratio (INR) and International Sensitivity Index (ISI) values and their relationships
4. Understand optimal intensity and duration of antithrombotic therapy
5. Formulate pharmacotherapeutic plan to include drug, route, dose, interval, therapeutic endpoint and monitoring parameters
6. Describe the following for anticoagulation medication(s):
  - a) Mechanism of action
  - b) Pharmacodynamics and Pharmacokinetics
  - c) Toxicities and adverse drug reactions
  - d) Clinically significant drug interactions
7. Demonstrate ability to interpret INR and related laboratory values and adjust anticoagulant dose accordingly
8. Identify appropriate options for interrupting and/or reversing anticoagulation
9. Demonstrate proper use of point-of-care capillary blood-testing devices
10. Demonstrate ability to research, review, and critically evaluate pertinent literature to respond to drug information questions
11. Demonstrate the ability to communicate with patients and other healthcare providers regarding anticoagulation therapy
12. Identify cultural, psychological, and economic barriers which may inhibit patient compliance

**Activities:**

1. Assigned readings
2. Conduct patient physical assessment, interviews, and/or counseling sessions
3. Evaluate patient information from medical charts, records, laboratory tests, etc.
4. Identify patients who need to be scheduled for fingerstick and/or medical assessment, schedule necessary appointments, document lab results
5. Devise and implement pharmacotherapeutic plans
6. Develop effective follow-up plan to monitor and evaluate effectiveness of anticoagulation therapy
7. Meet with preceptor to discuss patient cases
8. Communicate with referring physician and/or other healthcare providers on matters pertinent to patient's anticoagulation therapy
9. Provide formal presentations and/or in-services to preceptor and/or other healthcare professionals on drug information inquiries, specific patient cases, special topics, etc.

**Cardiology**  
*Clinical Specialty*

The following goals, objectives, and activities are provided as a general overview only of the Cardiology APPE; they are not specific to all cardiology rotations. Each rotation will vary due to particular site, preceptor, and orientation.

**Purpose:** The purpose of the Cardiology APPE is to develop the knowledge base, competencies, and clinical skills in the provision of pharmaceutical care in the area of cardiovascular disease.

**Goals:**

1. To develop thorough understanding of epidemiology and pathophysiology of cardiovascular disease and differences in normal and abnormal cardiac function
2. To develop necessary clinical skills in order to design, recommend, monitor and evaluate individualized pharmaceutical care plans, integrating patient-specific data with disease-specific and drug-specific information while considering ethical and quality-of-life factors for patients
3. To develop thorough understanding of the pharmacology of cardiovascular medications
4. To develop written and verbal communication skills necessary to provide drug information/education to patients and other healthcare providers regarding the use and monitoring of cardiovascular medications
5. To develop the critical thinking, decision-making, and professional skills to optimize patient outcomes
6. To allow for exploration of areas of interest that will enhance student knowledge base and/or patient care

**Objectives:**

1. Assess patient/patient medical history in order to identify cardiovascular disease, other medical problems and/or therapies or potential drug therapy problems and organize in SOAP format
2. Formulate pharmacotherapeutic plan to include drug, route, dose, interval, therapeutic endpoint and monitoring parameters
3. Describe the following for medication(s) in pharmacotherapeutic plan:
  - a) Mechanism of action
  - b) Pharmacodynamics and Pharmacokinetics
  - c) Toxicities and adverse drug reactions
  - d) Clinically significant drug interactions
4. Demonstrate the ability to evaluate effectiveness of drug therapy to determine dosage adjustments or alternate therapy
5. Demonstrate ability to research, review, and critically evaluate pertinent cardiovascular literature to respond to drug information questions
6. Demonstrate the ability to communicate with patients and other healthcare providers regarding cardiovascular medications
7. Identify cultural, psychological, and economic barriers which may inhibit patient compliance

**Activities:**

1. Assigned readings
2. Conduct patient physical assessment, interviews and/or counseling sessions
3. Evaluate patient information from medical charts, records, laboratory tests, etc.
4. Construct and prioritize patient problem list
5. Devise and implement pharmacotherapeutic plans; maintain patient medication profiles

6. Develop effective follow-up plan to monitor and evaluate effectiveness of drug therapy
7. Meet with preceptor to discuss patient cases
8. Attend internal medicine and/or cardiology rounds
9. Attend cardiology conference and journal club sessions
10. Provide formal presentations and/or in-services to preceptor and/or other healthcare professionals on drug information inquiries, specific patient cases, special topics, etc.

### **Consulting Pharmacy** *Elective*

The following goals, objectives, and activities are provided as a general overview only of the Consulting Pharmacy APPE; they are not specific to all consulting pharmacy rotations. Each rotation will vary due to particular site, preceptor, and orientation.

**Purpose:** The purpose of the Consulting Pharmacy APPE is to develop the pharmaceutical knowledge base, competencies, and clinical skills in order to provide pharmacy consultant services.

**Goals:**

1. To develop thorough understanding of the role of the consultant pharmacist in a limited drug clinic, correctional facility, or a facility/agency providing long-term care or Emergency Medical Services
2. To develop understanding of the rules and regulations regarding controlled substances as set forth by the New Mexico Board of Pharmacy and the US Drug Enforcement Administration.
3. To develop understanding of JCAHO guidelines
4. To develop understanding of the role of the consultant pharmacist as a provider of drug information and pharmacy law information
5. To develop understanding of the unique challenges and barriers to providing quality drug therapy in facilities providing long-term care
6. To develop written and verbal communication skills necessary to provide drug information and education to patients and other healthcare providers
7. To develop the critical thinking, decision-making, and professional skills to optimize patient outcomes
8. To allow for exploration of areas of interest that will enhance student knowledge base and/or patient care

**Objectives:**

1. Describe the morbidity and mortality of the patient population specific to the site and this population's particular pharmaceutical care requirements
2. Develop knowledge base in clinical pharmacy
3. Describe process for conducting drug regimen reviews (DRRs), drug use reviews (DURs), and drug use evaluations (DUEs)
4. Describe essential steps involved in a pharmacy inspection at site
5. Gain understanding and experience in formulary management and control

6. Demonstrate appropriate management of telephone and/or written consultations
7. Demonstrate use of technology to aid in the provision of pharmaceutical care services
8. Describe the role of the Pharmacy and Therapeutics (P&T) Committee
9. Demonstrate the ability to research, review, and critically evaluate pertinent drug literature to answer drug information questions
10. Demonstrate the ability to communicate with patients and other healthcare providers regarding drug therapy
11. Describe social, cultural, psychological, and economic barriers which may inhibit patient compliance

**Activities:**

1. Assigned readings
2. Participation in pharmacy site visits/inspections:
  - a) Conduct chart reviews-checking for proper dosing, therapeutic duplication, interactions, proper monitoring
  - b) Check for proper storage of all drugs
  - c) Check for outdated medications
  - d) Check for proper maintenance of medication records
  - e) Complete all necessary documentation and present to P&T Committee meeting
3. Conduct Drug Regimen Reviews, Drug Use Reviews, or Drug Use Evaluations
4. Research and provide formal written answers to drug information questions
5. Update or maintain sample formulary for site
6. Update or maintain sample policies and procedures for site
7. Attend P&T Committee meetings
8. Case presentation from DRR, DUR, DUE or Journal Club Presentation

**Critical Care-Adult**  
*Clinical Specialty*

The following goals, objectives, and activities are provided as a general overview only of the Adult Critical Care APPE; they are not specific to all adult critical care rotations. Each rotation will vary due to particular site, preceptor, and orientation.

**Purpose:** The purpose of the Adult Critical Care APPE is to develop the knowledge base, competencies, and clinical skills in the provision of pharmaceutical care for adult acute patients.

**Goals:**

1. To develop thorough understanding of physiology and pathophysiology of acute illnesses and conditions, including, but not limited to, the following areas:

**General Medicine**

*Chronic Renal Failure and End stage Renal Disease*

- a) Etiology/Clinical Presentation
- b) Renal Osteodystrophy and Hyperparathyroidism

- c) Therapeutic Management

*Acute Renal Failure*

- a) Classifications of ARF
- b) Complications of ARF
- c) Therapeutic Management
- d) Renal Replacement Therapies

*Upper Gastrointestinal Bleeds*

- a) Esophageal Varices/Bleeding Peptic Ulcers/Stress Ulcer Prophylaxis
- b) Nonpharmacologic Management
- c) Pharmacologic Management

*Endocrine*

- a) Diabetes Mellitis
- b) Thyroid dysfunction
- c) Adrenal Insufficiency

**Intensive Care**

*Shock Syndromes*

- a) Hypovolemic shock
- b) Septic shock

*Acute Respiratory Failure/ARDS*

- a) Modes of ventilation
- b) Drug administration to mechanically ventilated patients
- c) Sedation regimens and Neuromuscular Blockade
- d) Respiratory inotropes/stimulants
- e) Weaning Mechanical Ventilation

*Multiple Organ Dysfunction Syndrome/Systemic Inflammatory Response Syndrome*

- a) Clinical syndrome
- b) Clinical characteristics
- c) Organ specific pharmacotherapy

2. To develop necessary clinical skills in order to design, recommend, monitor, and evaluate individualized pharmaceutical care plans, integrating patient-specific data with disease-specific and drug-specific information while considering ethical and quality-of-life factors for patients.
3. To develop thorough understanding of the pharmacology of medications used to treat critically ill adults
4. To develop the written and verbal communication skills necessary to provide drug information/ education to patients and other healthcare providers regarding the use and monitoring of drug therapy
5. To develop the critical thinking, decision-making, and professional skills to optimize patient outcomes
6. To allow for exploration of areas of interest that will enhance student knowledge base and/or patient care

**Objectives:**

1. Assess patient/patient medical history in order to identify disease/condition, other medical problems and/or therapies or potential drug therapy problems and organize information in SOAP format
2. Identify primary reason for admission to MICU
3. Describe epidemiology and pathophysiology of disease state(s) in assigned patients
4. Formulate pharmacotherapeutic plan to include drug, route, dose, interval, therapeutic endpoint and monitoring parameters
5. Describe the following for medication(s) in pharmacotherapeutic plan:
  - a) Mechanism of action
  - b) Pharmacodynamics and Pharmacokinetics
  - c) Toxicities and adverse drug reactions
  - d) Clinically significant drug interactions
6. Demonstrate ability to evaluate effectiveness of drug therapy to determine dosage adjustments or alternate therapy
7. Demonstrate ability to research, review, and critically evaluate pertinent drug literature to respond to drug information questions
8. Demonstrate ability to communicate with patients and other healthcare providers regarding drug therapy
9. Identify cultural, psychological, and economic barriers which may inhibit patient compliance

**Activities:**

1. Assigned readings
2. Conduct patient physical assessment, organ systems review, interviews, and/or counseling sessions
3. Evaluate patient information from medical charts, records, laboratory tests, etc.
4. Construct and prioritize patient problem list
5. Devise and implement pharmacotherapeutic plans; maintain patient medication profiles
6. Develop effective follow-up plan to monitor and evaluate effectiveness of drug therapy
7. Meet with preceptor to discuss patient cases
8. Participate in attending rounds
9. Provide formal presentations and/or in-services to preceptor and/or other healthcare professionals on drug information inquiries, specific patient cases, special topics, etc.

**Disease State Management**  
*Clinical, Ambulatory Care*

The following goals, objectives, and activities are provided as a general overview only of the Disease State Management APPE; they are not specific to all disease state management rotations. Each rotation will vary due to site, preceptor, and orientation.

**Purpose:** The purpose of the Disease State Management APPE is to develop the knowledge base, competencies, and clinical skills in the provision of pharmaceutical care

in the outpatient treatment of one or more disease states including, but not limited to, diabetes, asthma, hypertension, and dyslipidemia.

**Goals:**

1. To develop thorough understanding of epidemiology and pathophysiology of diseases present in the community as disease states
2. To develop necessary clinical skills in order to design, recommend, monitor and evaluate individualized pharmaceutical care plans, integrating patient-specific data with disease-specific and drug-specific information while considering ethical and quality-of-life factors for patients
3. To provide effective patient education and counseling about specific disease state, drug therapy and the successful self-management of disease
4. To develop the written and verbal communication skills necessary to communicate effectively with referring practitioner or other healthcare professionals to ensure optimal therapy for the patient
5. To develop the critical thinking, decision-making, and professional skills to optimize patient outcomes
6. To allow for exploration of areas of interest that will enhance student knowledge base and/or patient care

**Objectives:**

1. Describe various aspects of disease state (s) including, but not limited to, pathophysiology, risk factors, progression, chronic and acute complications, long-term effects
2. Assess patient/patient medical history in order to identify disease state, other medical problems and/or therapies or potential drug therapy problems and organize information in SOAP format
3. Formulate pharmacotherapeutic plan to include drug, route, dose, interval, therapeutic endpoints and monitoring parameters
4. Describe the following for medications in pharmacotherapeutic plan:
  - a. Mechanism of action
  - b. Pharmacodynamics and Pharmacokinetics
  - c. Toxicities and adverse drug reactions
  - d. Clinically significant drug interactions
5. Demonstrate the ability to evaluate effectiveness of drug therapy to determine dosage adjustments or alternate therapy
6. Assess patient understanding of disease state and therapeutic plan, including dosage regimen
7. Demonstrate ability to research, review, and critically evaluate pertinent literature to respond to drug information questions
8. Identify cultural, psychological, and economic barriers which may inhibit patient compliance

**Activities:**

1. Assigned readings
2. Conduct patient physical assessment, interviews and/or counseling sessions
3. Evaluate patient information from medical charts, records, laboratory tests, etc.
4. Devise and implement pharmacotherapeutic plans

5. Document any drug and non-drug therapy problems in pharmacy records
6. Develop effective follow-up plan to monitor and evaluate effectiveness of drug therapy
7. Discuss patient cases with preceptor
8. Provide formal presentations and/or in-services to preceptor and/or other healthcare professionals on drug information inquiries, specific patient cases, special topics, etc.

**Family Practice/Primary Care**  
*Clinical, General Medicine*

The following goals, objectives, and activities are provided as a general overview only of the Family Practice APPE; they are not specific to all family practice/primary care rotations. Each rotation will vary slightly due to particular site, preceptor, and orientation.

**Purpose:** The purpose of the Family Practice APPE is to develop the knowledge base, competencies, and clinical skills in the provision of pharmaceutical care to a diverse population in a family practice setting.

**Goals:**

1. To develop thorough understanding of the pathophysiology of common diseases and medical conditions found in family practice settings including, but not limited to:
 

Common anemias	Diabetes Mellitus
Depression	Hypertension
Coronary artery disease	Peptic Ulcer Disease
Chemical dependence	Urinary Tract Infections
Upper respiratory tract infections	Gastrointestinal disturbances
2. To develop necessary clinical skills in order to design, recommend, monitor and evaluate individualized pharmaceutical care plans, integrating patient-specific data with disease-specific and drug-specific information while considering ethical and quality-of-life factors for patients
3. To develop thorough understanding of the pharmacology of medications used in treatment of illnesses found in primary care settings.
4. To develop written and verbal communication skills necessary to provide drug information/education to patients and other healthcare providers regarding the use and monitoring of drug therapy
5. To develop the critical thinking, decision-making, and professional skills to optimize patient outcomes
6. To allow for exploration of areas of interest that will enhance student knowledge base and/or patient care

**Objectives:**

1. Assess patient/patient medical history in order to identify disease, other medical problems and/or therapies or potential drug therapy problems and organize information in SOAP format

2. Formulate pharmacotherapeutic regimens to include drug, route, dose, interval, therapeutic endpoints and monitoring parameters
3. Describe the following for medication(s) in pharmacotherapeutic plan:
  - a. Mechanism of action
  - b. Pharmacodynamics and Pharmacokinetics
  - c. Toxicities and adverse drug reactions
  - d. Clinically significant drug interactions
4. Demonstrate the ability to evaluate effectiveness of drug therapy to determine dosage adjustments or alternate therapy
5. Demonstrate ability to research, review, and critically evaluate pertinent literature to respond to drug information questions
6. Demonstrate the ability to communicate with patients and other healthcare providers regarding drug therapy
7. Identify cultural, psychological, and economic barriers which may inhibit patient compliance

**Activities:**

1. Assigned readings
2. Conduct patient physical assessment, interviews and/or counseling sessions
3. Evaluate patient information from medical charts, records, laboratory tests, etc.
4. Construct and prioritize patient problem list
5. Devise and implement pharmacotherapeutic plans; maintain patient medication profiles
6. Develop effective follow-up plan to monitor and evaluate effectiveness of drug therapy
7. Meet with preceptor to discuss patient cases
8. Attend Family Practice grand rounds
9. Participate in Journal Club sessions
10. Provide formal presentations and/or in-services to preceptor and/or other healthcare professionals on drug information inquiries, specific patient cases, special topics, etc.

**Geriatrics**  
*Clinical Specialty*

The following goals, objectives, and activities are provided as a general overview only of the Geriatric APPE; they are not specific to all geriatric rotations. Each rotation will vary due to particular site, preceptor, and orientation.

**Purpose:** The purpose of the Geriatric APPE is to develop the knowledge base, competencies, and clinical skills in the provision of pharmaceutical care for the elderly population.

**Goals:**

1. To develop thorough understanding of the epidemiology/physiology/pathophysiology of conditions and disease states found in the geriatric patient, including, but not limited to:

Angina Pectoris	Bowel/Bladder Incontinence
Diabetes Mellitus	Hypertension
Insomnia	Osteoporosis
Pneumonia	Parkinson's Disease
Dementia	Depression
Anemia	Congestive Heart Failure
Alzheimer's Disease	Chronic Obstructive Pulmonary Disease

2. To develop necessary clinical skills in order to design, recommend, monitor and evaluate individualized pharmaceutical care plans, integrating patient-specific data with disease-specific and drug-specific information while considering ethical and quality-of-life factors for patients
3. To develop thorough understanding of the pharmacology of medications used to treat illnesses in geriatric patients
4. To develop thorough understanding of pharmacy-related issues concerning geriatric patients, including issues relating to compliance/adherence, patient education, cost-effectiveness, and non-prescription drug use
5. To develop written and verbal communication skills necessary to provide drug information to patients and other healthcare providers regarding the use and monitoring of drug therapy
6. To develop the critical thinking, decision-making, and professional skills to optimize patient outcomes
7. To allow for exploration of areas of interest that will enhance student knowledge base and/or patient care

**Objectives:**

1. Describe the physiologic changes that occur as the result of aging and how these changes effect the pharmacokinetic and pharmacologic actions of medication in the elderly
2. Assess patient/patient medical history in order to identify disease state, other medical problems and/or therapies or potential drug therapy problems and organize information in SOAP format
3. Formulate pharmacotherapeutic plan to include drug, route, dose, interval, therapeutic endpoint and monitoring parameters
4. Describe the following for medication(s) in pharmacotherapeutic plan:
  - a. Mechanism of action
  - b. Pharmacodynamics and Pharmacokinetics
  - c. Toxicities and adverse drug reactions
  - d. Clinically significant drug interactions
5. Demonstrate the ability to evaluate effectiveness of drug therapy to determine dosage adjustments or alternate therapy
6. Demonstrate ability to research, review, and critically evaluate pertinent literature to respond to drug information questions
7. Demonstrate the ability to communicate with patients and other healthcare providers regarding drug therapy
8. Identify cultural, psychological, and economic barriers which may inhibit patient compliance

**Activities:**

1. Assigned readings
2. Conduct patient physical assessment, interviews and/or counseling sessions
3. Evaluate patient information from medical charts, records, laboratory tests, etc.
4. Devise and implement pharmacotherapeutic plans; maintain patient medication profiles
5. Develop effective follow-up plan to monitor and evaluate effectiveness of drug therapy
6. Meet with preceptor to discuss patient cases
7. Perform Drug Regimen Reviews (DRRs)
8. Participate in attending rounds (inpatient setting)
9. Provide formal presentations and/or in-services to preceptor and/or other healthcare professionals on drug information inquiries, specific patient cases, special topics, etc.

### **Infectious Disease** *Clinical Specialty*

The following goals, objectives, and activities are provided as a general overview only of the Infectious Disease APPE; they are not specific to all infectious disease rotations. Each rotation will vary due to particular site, preceptor, and orientation.

**Purpose:** The purpose of the Infectious Disease APPE is to develop the knowledge base, competencies, and clinical skills in the provision of pharmaceutical care for the treatment of infectious diseases.

**Goals:**

1. To develop thorough understanding of epidemiology and pathophysiology of infectious diseases, including clinical manifestations and diagnostic procedures
2. To develop necessary clinical skills in order to design, recommend, monitor and evaluate individualized pharmaceutical care plans, integrating patient-specific data with disease-specific and drug-specific information while considering ethical and quality-of-life factors for patients
3. To develop thorough understanding of pharmacology of antimicrobial/antifungal therapies
4. To develop written and verbal communication skills necessary to provide drug information/education to patients and other healthcare providers regarding use and monitoring of antimicrobial regimens
5. To develop the critical thinking, decision-making, and professional skills to optimize patient outcomes
6. To allow for exploration of areas of interest that will enhance student knowledge base and/or patient care

**Objectives:**

1. Describe pathophysiology and epidemiology of given disease state
2. Assess patient/patient medical history in order to identify disease, other medical problems and/or therapies or potential drug therapy problems and organize information in SOAP format

3. Formulate antimicrobial regimen to include drug, route, dose, interval, therapeutic endpoints and monitoring parameters
4. Describe the following for medication(s) in pharmacotherapeutic plan:
  - a. Mechanism of action
  - b. Pharmacodynamics and Pharmacokinetics
  - c. Toxicities and adverse drug reactions
  - d. Clinically significant drug interactions
5. Complete blood count (WBC, segmented, and banded neutrophils)
6. Describe actions of all major antibiotic groups and to which organisms they are generally sensitive (penicillins, cephalosporins, quinolones, sulfonamides, aminoglycosides, macrolides, beta lactam combinatins, antistaphylococcal penicillins, antipseudomonal penicillins, vancomycin, quinoprisitin-dalfopristin)
7. Describe the classifications of organisms and appropriate antibiotic therapy for each (aerobes, anaerobes, gram positive, gram negative, atypicals, strep grp A, B, D, Enterococcus, Enterobacteriaceae, enterobacter)
8. Demonstrate the ability to evaluate effectiveness of drug therapy to determine dosage adjustments or alternate therapy
9. Demonstrate ability to research, review, and critically evaluate pertinent literature to respond to drug information questions
10. Demonstrate the ability to communicate with patients and other healthcare providers regarding drug therapy
11. Identify cultural, psychological, and economic barriers which may inhibit patient compliance

**Activities:**

1. Assigned readings
2. Conduct patient physical assessment, interviews, and/or counseling sessions
3. Evaluate patient information from medical charts, records, laboratory tests, etc.
4. Devise and implement pharmacotherapeutic plan; maintain patient medication profiles
5. Develop effective follow-up plan to monitor and evaluate effectiveness of antimicrobial therapy
6. Discuss patient cases with preceptor
7. Attend daily rounds
8. Participate in journal club sessions
9. Provide formal presentations and/or in-services to preceptor and/or other healthcare professionals on drug information inquiries, specific patient cases, special topics, etc.
10. Develop hospital antimicrobial biogram for Pharmacy and Therapeutics Committee

**Internal Medicine**  
*Clinical, General Medicine*

The following goals, objectives, and activities are provided as a general overview only of the Internal Medicine APPE; they are not specific to all internal medicine rotations. Each rotation will vary due to particular site, preceptor, and orientation.

**Purpose:** The purpose of the Internal Medicine APPE is to develop the knowledge base, competencies, and clinical skills in the provision of pharmaceutical care in the area of adult internal medicine.

**Goals:**

7. To develop thorough understanding of epidemiology and pathophysiology of various disease states
8. To develop necessary clinical skills in order to design, recommend, monitor and evaluate individualized pharmaceutical care plans, integrating patient-specific data with disease-specific and drug-specific information while considering ethical and quality-of-life factors for patients
9. To develop thorough understanding of the pharmacology of medications of assigned patients
10. To develop written and verbal communication skills necessary to provide drug information/education to patients and other healthcare providers regarding the use and monitoring of medications
11. To develop the critical thinking, decision-making, and professional skills to optimize patient outcomes
12. To allow for exploration of areas of interest that will enhance student knowledge base and/or patient care

**Objectives:**

8. Assess patient/patient medical history in order to identify disease state, other medical problems and/or therapies or potential drug therapy problems and organize information in SOAP format
9. Formulate pharmacotherapeutic plan to include drug, route, dose, interval, therapeutic endpoints and monitoring parameters
10. Describe the following for medication(s) in pharmacotherapeutic plan:
  - a) Mechanism of action
  - b) Pharmacodynamics and Pharmacokinetics
  - c) Toxicities and adverse drug reactions
  - d) Clinically significant drug interactions
11. Demonstrate the ability to evaluate effectiveness of drug therapy to determine dosage adjustments or alternate therapy
12. Demonstrate ability to research, review, and critically evaluate pertinent literature to respond to drug information questions
13. Demonstrate the ability to communicate with patients and other healthcare providers regarding drug therapy
14. Identify cultural, psychological, and economic barriers which may inhibit patient compliance

**Activities:**

1. Assigned readings
2. Conduct patient physical assessment, interviews and/or counseling sessions
3. Evaluate patient information from medical charts, records, laboratory tests, etc.
4. Construct and prioritize patient problem list

5. Devise and implement pharmacotherapeutic plans; maintain patient medication profiles
6. Develop effective follow-up plan to monitor and evaluate effectiveness of drug therapy
7. Meet with preceptor to discuss patient cases
8. Attend internal medicine grand rounds
9. Attend internal medicine conference sessions
10. Provide formal presentations and/or in-services to preceptor and/or other healthcare professionals on drug information inquiries, specific patient cases, special topics, etc.

## **Doctor of Pharmacy Competencies**

These competencies were developed by the faculty of the COP to describe the knowledge, skills and attitudes that the students will have acquired and achieved by the end of the Pharm.D. program. The APPEs should be structured to assist students to achieve these goals.

### **I. Foundation of Pharmaceutical Care**

- A. Describe the mechanisms of homeostatic control of human organs, systems, tissue injury, and disease processes.
- B. Describe dose-response and time-response relationships, drug-receptor interactions, and the therapeutic index.
- C. Describe the processes of drug absorption, metabolism, distribution, and elimination and factors that alter them.
- D. Describe the processes of drug discovery, development, and production.
- E. Describe the structure-activity relationships of drugs and how these properties influence their pharmacological actions.
- F. Apply the principles of pharmacogenomics to drug therapy.
- G. Know the trade and generic names, mechanisms of action, warnings, adverse effects, contraindications, drug interactions, dosage forms, and dosing regimens of the top 200 drug products and representatives from other major therapeutic drug classes.

## **II. Patient-Centered Care**

### **A. Conduct a complete patient assessment.**

1. Establish a pharmacist-patient relationship.
2. Obtain a patient's history (medical, social, medication, and financial).
3. Conduct a physical assessment and review of systems and interpret the results.
4. Review a patient's medical and drug records and extract information relevant to pharmacotherapy decisions.
5. Establish and prioritize a patient-specific problem list.

### **B. Design, implement, and document a care plan for a given patient.**

1. Establish therapeutic goals and objectives for individual patients.
2. Retrieve, manage, evaluate, and apply biomedical literature and other professional information in a critical and scientific manner.
3. Integrate current research findings with clinical expertise and patient values in the design and implementation of patient-specific pharmaceutical care plans.
4. Apply critical thinking skills to make decisions and solve problems in the application of pharmaceutical care.
5. Collaborate with interdisciplinary teams to ensure that patient care is continuous and reliable and to encourage necessary referrals.
6. Effectively communicate and counsel diverse patient populations by addressing language, educational, and cultural barriers.
7. Counsel a patient or caregiver on medication use, drug delivery system, non-drug therapy and other components of a disease-state management care plan.
8. Provide evidence-based recommendations for the use of over-the-counter health products.
9. Assess patient adherence to a care plan.
10. Assess the effectiveness of a patient's pharmacotherapy by selecting and interpreting laboratory tests and other monitoring tools.
11. Take responsibility for the outcomes resulting from pharmaceutical care recommendations.
12. Appropriately document patient care, counseling, interventions, and outcomes.

## **III. Dispensing and Administration of Medications**

**A. Determine the appropriate route of administration, dosage, and drug delivery system for a patient based upon individual needs and characteristics.**

**B. Determine the completeness, appropriateness, and accuracy of information in a drug order or prescription and clarify, add, and correct this information when necessary.**

**C. Accurately and appropriately prepare, compound, package, and label medications.**

- D. Administer immunizations and other medications when appropriate.
- E. Evaluate the bioequivalence and therapeutic equivalence of drug products.
- F. Demonstrate knowledge of automated medication dispensing systems and health care information systems.
- G. Understand drug procurement processes.
  - 1. Demonstrate the ability to document receipt and provide appropriate storage of all drugs in a pharmacy in accordance with state and federal regulations.
  - 2. Describe how to remove and document outdated and recalled medications; communicate this information to patients as necessary.
  - 3. Identify medication programs to meet the needs of the underinsured.

#### **IV. Health Promotion and Disease Prevention**

- A. Provide information to patients regarding disease prevention and the importance of a healthy lifestyle.
- B. Empower patients to become involved in their own health care.
- C. Identify individuals who are abusing medications and recommend appropriate action.
- D. Directly participate in community disease prevention activities.
- E. Provide emergency first aid treatment and cardiopulmonary resuscitation.
- F. Provide patients with access to poison prevention and treatment information.
- G. Demonstrate awareness of local emergency plans and national disaster response systems as they relate to health care systems.

#### **V. Professionalism**

- A. Make ethical professional decisions.
  - 1. Articulate ethical principles relevant to pharmacy practice.
  - 2. Maintain honesty, confidentiality, sensitivity, tolerance, and cultural appropriateness in professional interactions.
  - 3. Provide humane and compassionate patient care.
- B. Comply with federal, state, and local laws and regulations that affect the practice of pharmacy.
- C. Contribute to the profession of pharmacy.
  - 1. Develop, implement, and evaluate new procedures to improve pharmaceutical care.

2. Understand the importance of participating in professional organizations and contributing to pharmacy education.
  3. Promote the pharmacist as a caring, empathetic health care provider.
- D. Continue personal professional development.
1. Self-assess personal learning needs to identify areas of deficiency and interest.
  2. Engage in life- long learning activities to promote intellectual growth and continued professional competence.
- E. Communicate clearly, accurately, and persuasively with various audiences using a variety of methods and media.

## **VI. Health Systems Management**

- A. Identify, report, manage, and prevent adverse drug events.
- B. Participate in and communicate findings of medication use evaluations and drug utilization review activities.
- C. Function within a health system's formulary process and use appropriate data to recommend and support formulary changes.
- D. Contribute to the managerial aspects of pharmacy operations using appropriate data and procedures.
1. Understand staffing plans that maximize the provision of pharmaceutical care.
  2. Demonstrate knowledge of personnel management principles used to recruit, hire, train, develop, supervise, motivate, retain, and evaluate staff.
- E. Demonstrate knowledge of pharmaceutical product and service marketing

## **Doctor of Pharmacy Curriculum Class of 2008**

The curriculum for the Class of 2008 has been included below as a guide for preceptors to see the courses that students have completed prior to beginning their APPEs.

<u>Fall Semester</u>	<i>First Professional Year</i>	<u>Hours</u>
Pharm 701 Pharmaceutics I		4
Pharm 705 Pathophysiology		4
Pharm 707 Admin. Pharm		2
Pharm 709 Intro to Pharm. Prac.		1
Pharm 711 Medical Terminology		1
Biochem 423 Biochemistry		3
<b>Total</b>		<b>15</b>

<b><u>Spring Semester</u></b>	<b><u>Hours</u></b>
Pharm 702 Pharmaceutics II	3
Pharm 702L Pharm. Dosage Forms II	1
Pharm 708 Social & Epidemiological Pharmacy	2
Pharm 710 Mechanisms of Drug Action	5
Pharm 712 Student-Centered Problem-Based Learning	1
Pharm 714 Pharm Biotechnology & Immunology	3
Pharm 716 Practical Patient Exp.	1
<b>Total</b>	<b>16</b>

*Second Professional Year*

<b><u>Fall Semester</u></b>	<b><u>Hours</u></b>
Pharm 719 Self-Care Therapeutics	2
Pharm 725 Pharmaceutics III	3
Pharm 731 Mechanisms of Drug Action	5
Pharm 731L Mechanisms of Drug Action Lab	1
<b>Total</b>	<b>11</b>

<b><u>Spring Semester</u></b>	<b><u>Hours</u></b>
Pharm 726 Pharmacokinetics	2
Pharm 728 Drug Information/ Literature Evaluation	3
Pharm 732 Mechanisms of Drug Action	5
Pharm 772 Institutional Introductory Professional Practice Experience (Summer Months)	4
<b>Total</b>	<b>14</b>

*Third Professional Year*

<b><u>Fall Semester</u></b>	<b><u>Hours</u></b>
Pharm 727 Pharm Law & Ethics	2
Pharm 741 Student-Centered Problem-Based Learning	1
Pharm 745 Clinical Pharmacokinetics	3
Pharm 751 Pharmacotherapy I	6
<b>Total</b>	<b>12</b>

<b><u>Spring Semester</u></b>	<b><u>Hours</u></b>
Pharm 750L Physical Assessment & Clinical Skills	4
Pharm 752 Pharmacotherapy II	6
<b>Total</b>	<b>10</b>

*Fourth Professional Year*

<b><u>Fall Semester</u></b>	<b><u>Hours</u></b>
Pharm 770 Advanced Practice Experience	18
<b><u>Spring Semester</u></b>	
Pharm 770 Advanced Practice Experience	18
<b>Total</b>	<b>36</b>

*Note: Students are also required to complete 20 hours of non-professional electives and 6 hours of professional electives.*

## Preceptor Requirements and Benefits

### Requirements

To serve as a preceptor for the UNM College of Pharmacy, an applicant must submit to the Office of Experiential programs:

- *Application for Volunteer Faculty* with the UNM College of Pharmacy
- Goals and Objectives for the experience (rotation)
- Signed *UNM Health Sciences Center Affiliation Agreement*

See appendix for all *necessary forms*.

Once the application has been approved, further information will be forwarded from the OEP.

Prospective preceptors should also exhibit:

- the desire to teach and motivate students.
- the willingness to accept the responsibility and time commitment of teaching and training students.
- a high degree of professional competency, judgment, ethics, and ideals.
- the commitment to fostering student outcomes in conjunction with APPE goals and objectives.
- an interest in promoting effective professional relationships with other healthcare professionals and colleagues.
- an exceptional degree of concern for patients and patient care.
- respect and receptivity toward ideas and opinions of others.
- a high degree of cultural competency and sensitivity.

### Benefits

Pharmacists who serve as preceptors for the UNM College of Pharmacy are eligible for the following benefits. For more information on these benefits, contact the Office of Experiential Programs.



**UNM Faculty Appointment**-Preceptors are formally recognized for their contributions to pharmacy education through an academic appointment as an “Adjunct Clinical Assistant Professor” in the College of Pharmacy. All appointments are subject to approval by the Dean of the College of Pharmacy.



**UNM LoboCard**-This UNM-issued identification card allows access to Johnson Gym and the UNM library system and is required for many of the other benefits listed.



**Remote Access to UNM Health Sciences Center Library**-Remote access to the HSC Library's online databases and extensive collection of over 600 full-text online journals. Social Security number is required.



**Research Opportunities**-Preceptors may advise or participate in Pharm.D. student research projects. This may include co-authorship on papers or posters presented at regional or national meetings of professional pharmacy organizations.



**Professional Service Opportunities**-Preceptors may be invited to serve on committees or task forces, or may be invited to attend College of Pharmacy retreats.



**Parking**-Preceptors may obtain a complimentary one-day parking permit when visiting the College of Pharmacy.



**Museums**-Preceptors are eligible for free admission to the Fine Arts Museum, Maxwell Museum of Anthropology, and other museums on the UNM campus. Preceptors also receive a 10% discount on museum gift shop purchases.



**UNM Bookstore Discount**-Preceptors are eligible to receive a 20% discount off of non-text books at the UNM Bookstore with a LoboCard. Contact the UNM Bookstore at 277-5451 or 1-800-981-2665 for more information.



**Recreational Equipment**-Tents, camping gear, back packs, cross-country skis, and other recreational equipment are available for a nominal fee at Johnson Gym. Contact Recreational Services Outdoor Shop at 277-8182 for more information.



**UNM Computer Accounts**-Preceptors are eligible for a free email account. Contact Information Technology Services (ITS) at 277-4848 to set up an account.



**Student Union Facilities**-Restaurants, shops, movie theater, and more. Contact 277-5626 for more information.



**New Mexico Educators Federal Credit Union-NMEFCU** offers a full-range of financial products and Services. Contact 889-7755 or 1-800-347-2838 for membership information.

## **PRECEPTOR STANDARDS**

The Preceptor shall:

1. recognize that the relationship with the student is one of teacher-student rather than employer-employee.
2. recognize that learning requires mutual respect, courtesy, and communication between him- or herself and the student.
3. take responsibility for the professional and legal supervision of the student during the experience.
4. demonstrate the principles of professional ethics.
5. give the student a thorough orientation to the site and experience early in the rotation to facilitate a smooth transition and an optimal use of available resources.
6. clearly outline expectations of the student in regard to dress, conduct, scheduling of hours, and general characteristics of practice.
7. afford the student sufficient time, preparation, and patience for the learning experience.
8. not assume the student's level of competence but determine this by discussing previous experience with the student, and observing performance of basic skills.
9. expose and involve the student in all aspects of practice consistent with the student's ability, needs, and interests as determined by the goals and objectives as set forth by the College, preceptor, and the student.
10. establish a mutually agreeable schedule of student activities for the rotation in consultation with the student. If the schedule includes experiences with other practitioners, the preceptor should clearly communicate with these individuals and the student.
11. provide the student with constructive criticism and convey this information in a private manner.

12. familiarize all personnel with the experiential program objectives to avoid misunderstanding about the student's role during the rotation.
13. complete the evaluation of the student as soon as possible after the rotation in an accurate and objective manner.

## **Preceptor Guidelines**

The following are general policies and procedures for APPE preceptors. Some are expanded details of the Preceptor Standards listed previously.


### **PEMS (Pharmacy Education Management System)**

PEMS is the on-line system for UNM College of Pharmacy rotation scheduling and evaluation submission. Preceptors have access to PEMS 24 hours a day. Preceptors may access PEMS directly by clicking on the "Experiential Program" link on the UNM College of Pharmacy website, or by going to:

<https://www2.ems-webs.com/NewMexico/Login.asp>

The User ID is "first name.last name". If logging in for the first time, the password is the word "Password"; preceptors will then be prompted to change their password. Preceptors can view rotation schedules, including how many students have been assigned to them for the current year, for what month, and who the students are. Once logged in, the screen will appear similar to the screen below. Schedules can be viewed by clicking on "rotations" on the left-hand side of the screen.

- [Home](#)
- [Activity Logs](#)
- [Evaluations](#)
- [Password](#)
- [Rotations](#)

Affiliate Profile			
<b>Name:</b> <a href="#">Dr. Effective Preceptor.</a> <b>Email Address:</b> Epreceptor@healthpharm.com <b>Year:</b>		 Update Profile	 Address Request
Type	Address	Phone	Fax
<a href="#">Primary</a> Begin date 10/01/2007 End Date: 10/26/2007	2124 Drug Drive  Anywhere, NM, 00000	(505) 111-2222	(505) 111-2223

Student evaluations must be completed and submitted through PEMS. To complete and submit evaluations, click on the “evaluations” link on the left. Once the relevant areas have been selected and scored for each individual student, both the “Compute Score” button and the “Create” button at the end of the evaluation must be selected or the evaluation will not be saved. Any changes after the initial evaluation has been “created” will need to be “updated” in PEMS. See section on “Evaluations and Grading” for more information.

**Orientation**

Preceptors should provide students with a comprehensive orientation to the site and the experience within the first few days of the rotation. The orientation should clearly outline expectations of the student and what the student may expect from the experience. Students should be informed of their role and responsibilities at the site as well as the role of the preceptor. The orientation should include general information such as introductions to professional and office staff, a tour of the facility, location of drugs, materials and equipment, ID badges, parking, and other relevant information. The

orientation should also serve as an opportunity for preceptors to discuss the following with students:

1. The site's policies and procedures, as they apply to students including:
  - confidentiality
  - lines of authority
  - absence and tardiness procedures
  - safety and emergency procedures
2. Scheduling of student's hours
3. The goals and objectives for the experience as set forth by the College and the preceptor. Preceptors should ask the student if he or she has any goals of their own or specific areas of interest which might be incorporated into the experience.
4. How the experience will be structured and how preceptors plan to work with students. Preceptors should discuss when they plan to meet with the student and how that time will be spent, e.g. discussing patient cases, reviewing student activities or performance.
5. Activities the student can expect to do at the site, as well as written assignments and/or formal presentations which he or she will be required to complete.
6. Grading and evaluation-What areas will be evaluated and what level of performance will garner favorable evaluation marks.

### **Scheduling and Workload**

The following policies apply to student scheduling and workload. Preceptors are encouraged to work with students when determining a work schedule.

1. A minimum of 160 hours of participation is required between the start date of the APPE and the ending date. These do not have to be contact hours and may include research and writing time.
2. Normal hours should be scheduled Monday through Friday unless the needs of the site are such that weekend or evening work is necessary (some sites require such hours to meet patient care needs).
3. Outside employment should not interfere with APPE activities. The last professional year is not designed for additional student employment and preceptors should **not** schedule around additional employment work hours.

4. Workload will not be considered excessive unless it exceeds 12 hours per day of contact time and an additional 4 hours of study/research time daily.
5. Students may receive intern credit for up to a maximum of 10 hours per day and 48 hours per week. Although credit is limited to these maximums by New Mexico Board of Pharmacy regulations, students may be required to work longer as specified in item #4 above.
6. Students are not allowed to receive compensation under any circumstances for hours worked during APPEs.

### **Attendance**

1. Students must adhere to the predetermined work schedule. If a student cannot attend due to illness or family emergency, he or she must contact the preceptor as soon as possible. In the event that the preceptor cannot be reached directly, students must leave a message for the preceptor and then contact the Office of Experiential Programs. Students must inform preceptors of absences for employment or residency interviews as far in advance as possible.
2. Students must make up absences in order to fulfill internship and curricular requirements. It is at the preceptor's discretion to determine how and when students make up missed hours/days.
3. In the event of inclement weather conditions, the student should contact their preceptor to determine the need for reporting to the site.
4. Failure to notify the preceptor of an absence or tardiness should not be tolerated and preceptors should consider such incidents when evaluating students. Any student missing more than five days of any given rotation will not be allowed to progress to the next rotation until the Assistant Dean for External Programs is consulted and has given approval for the student to progress.

### **Holidays and Breaks**

UNM recognizes several federal and state holidays, which occur throughout APPE rotations. Pharmacy Practice Experiences are designed to place students in real-world situations; therefore, time off for holidays is subject to the operating hours and needs of the site and is at the discretion of the preceptor. Make-up time for any missed hours is also at the discretion of the preceptor. In addition to federal and state holidays, UNM schedules both a fall and spring break.

Students on APPE rotations will not be eligible for fall break (October). *Career Week* is a College of Pharmacy-sanctioned event that takes place during the final week of September and attendance is required of all fourth-year students; therefore, students will not be scheduled for rotations during this week. *Career Week* activities include sessions on resume/CV writing and interviewing skills, information about pharmacy practice residencies, as well as actual interviews with employers. *Career Day* will feature recruiters from various companies who will be on campus to talk to students. Preceptors interested in participating in *Career Week* by evaluating resumes/CVs, serving as a “practice” interviewer, or by exhibiting and recruiting at *Career Day*, may contact Assistant Dean Michel Disco or Dr. Megan Thompson, Director of Student Services.

Spring break typically takes place during the second or third week in March. Since APPE rotations are scheduled during the month of March, there is some flexibility in scheduling around the break. This rotation is scheduled for five weeks instead of four to allow for the break. Preceptors are encouraged to work with students to schedule spring break during the designated week, at the beginning of the rotation, or at the end of the month.

### **Evaluations and Grading**

APPEs are courses within the College of Pharmacy and students are strongly encouraged to treat them as they would any other course. Preceptors monitor student performance, identify strengths and weaknesses and provide necessary feedback to ensure student development in established competency areas. Preceptors must complete a student evaluation in PEMS for each student they precept. The evaluation is a series of 27 scales. The first five scales must be completed for all students. Other scales should

be used if applicable to the experience and site. Unused categories should be left blank. Preceptors must provide a numeric score for each scale, based on 100%. If there are other areas upon which students are evaluated, but are not listed, a custom category may be used. PEMS computes a final score upon which the corresponding letter grade is given to the student. Below are additional guidelines regarding student evaluations:

1. *Review the student evaluation with the student*-Preceptors are strongly encouraged to review the evaluation with students during the orientation to inform students which scales will be used and how performance will be evaluated. A final review is encouraged during the last few days of the rotation to avoid any misunderstandings regarding the evaluation. Preceptors should not expect the student to return to the site after the last scheduled date of the APPE to complete the evaluation.
2. *Plagiarism is a serious academic offense*-The College of Pharmacy will not tolerate plagiarism in any form and preceptors should notify Assistant Dean Disco of suspected plagiarism in written or oral assignments.
3. *The student evaluation must be completed and submitted in PEMS*-Preceptors who do not have internet access may contact the OEP to obtain a hard copy of the evaluation.
4. *Please complete and submit student evaluations in a timely manner*-Students will receive a grade of “incomplete” for incomplete evaluations or evaluations not submitted. If necessary, preceptors will be reminded by the OEP to submit their evaluations.

## **Feedback**

In addition to the guidelines above, preceptors should be aware that feedback is an integral part of the evaluative process and more importantly, integral to the development of the student. The following are some guidelines for preceptors regarding feedback:

1. *Feedback should be specific and based on direct observation*-Feedback should refer to actions that are specific and which the preceptor has observed first-hand. Feedback should also focus on behaviors that are related to the goals and objectives set forth by the College of Pharmacy, the preceptor, and the student.

2. *Provide feedback in a consistent and timely manner-* If possible, preceptors should provide feedback immediately after a task, patient-counseling session or other activity. As this is not always possible, a time should be determined for providing feedback to the student, once a week, for example. Preceptors should take notes as soon as possible after observing students and not rely on memory to ensure accurate and helpful feedback. Preceptors might find the *Student Pharmacist Drug Information/Healthcare Education Activity Form* and *Student Pharmacist Observation Form* helpful for recording observations. See appendix for these forms.
3. *Feedback should focus on remediable behavior and should offer suggestions for improvement-* Feedback should focus on behaviors that can be corrected. Feedback should not deal with assumed intentions or preceptor interpretations. Preceptors should provide suggestions to correct or improve the behavior; judgment statements should be avoided.

Effective feedback provides positive reinforcement for what the student is doing correctly and steps the student can take to improve those areas which need improvement.

Without appropriate feedback, students may miss crucial skills development and/or knowledge base enrichment.

### **APPE Activities and Assignments**

1. Clinical professional experiences may include up to 20% dispensing activities, but should include at least 80% clinical activities.
2. Advance Professional Practice Experiences should generally follow the progression of 1) explaining and demonstrating a skill to the student, 2) having the student practice the skill under close supervision and with preceptor feedback, and 3) having the student become responsible for performing the task with the preceptor available for supervision and support.
3. APPEs should include at least two written assignments and one verbal presentation. When possible, it is desirable to provide students with a degree of choice about specific aspects of assignments so they will have an opportunity to explore their interests.

Some examples of possible student activities/projects:

- Design patient educational pamphlets on particular topics
- Develop marketing materials for pharmacy or program in the pharmacy
- Develop or update website

- Present article to staff
- Present topic of current interest or new drug to pharmacist and/or technicians
- Develop screening program for specific patients

## **Supervision**

1. Students must conduct all clinical activities under a preceptor's direct supervision at all times as required by the New Mexico Board of Pharmacy.
2. Preceptors should not make assumptions regarding student abilities. A student's level of competency should be determined prior to the start of the rotation or during the orientation to the site.
3. Preceptors should expect students to accomplish tasks and activities appropriate to the site after careful and detailed instruction and direct observation. The student should then be allowed to perform tasks and make professional decisions with supervision.
4. Preceptors should monitor the progress of students at all times to assess competence and identify strengths and weaknesses.
5. Preceptors should be constructive and understanding in any criticism of the student and relate all comments to the student privately. Appropriate and useful feedback should be given to the student to assist in improvement and to reinforce exceptional skills.
6. The UNM College of Pharmacy empowers preceptors to structure the APPE as they desire. Students may be closely or loosely supervised, based on the preceptor's judgment.
7. Students should be held to the highest professional standards; particularly when providing direct patient care. They should be on time, dressed appropriately, and inform the preceptor in advance if they are ill or expect to be late.
8. If a student's work is not up to professional standards, they should be given feedback and an opportunity to develop the work further until it does meet professional standards.
9. Preceptors are to maintain student confidentiality at all times. Information pertaining to the student's performance and/or progress is to be shared only with the Assistant Dean for External Programs.
10. The Assistant Dean for External Programs should be notified of preceptor-student problems before they become irresolvable.

## **APPENDIX-Preceptor Forms**

- Application for Volunteer Faculty
- New Mexico Board of Pharmacy Preceptor Application
- UNM Health Sciences Center Affiliation Agreement
- Preceptor Availability Form
- Student Drug Information/Healthcare Education Activity Form
- Student Pharmacist Observation Form

**The University of New Mexico College of Pharmacy**  
Application for Volunteer Faculty

Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

If requesting one or both of the following, social security number is required: \_\_\_\_\_

- remote access to UNM Health Sciences Center Library (Authorization for Library Services Form must be attached)
- LoboCard for access to Johnson Center recreational facility

Anticipated Academic Title: **Clinical Assistant Professor**

Contribution: **Preceptor for Experiential Programs**

Graduate Faculty Appointment: \_\_\_\_\_ Yes  No

**Practice Site Information:**

Position: \_\_\_\_\_

Organization: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact

Info: \_\_\_\_\_

business phone                      business fax                      pager                      cellular, other

**Educational Background:**

Degree	Year	Institution	Location
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**Residencies/Fellowships:**

Year	Specialty	Institution	Location
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**Professional Certifications:**

Year	Specialty	Certifying Organization	Location
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Year	Specialty	Certifying Organization	Location
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**ATTACH A CURRENT CV OR COMPLETE PAGE 2**

**Professional Experience:**

Please list the organizations and locations where you have most recently practiced.

<u>From</u>	<u>To</u>	<u>Position</u>	<u>Organization</u>	<u>Location</u>	<u>Telephone</u>
___/___	___/___	_____	_____	_____	_____
___/___	___/___	_____	_____	_____	_____

**Honors and Awards:**

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**Professional Presentations:**

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**Professional Publications:**

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Please return completed form to:

University of New Mexico  
 College of Pharmacy  
 Office of Experiential Programs  
 MSC09 5360  
 1 University of New Mexico  
 Albuquerque, NM 87131-0001

or fax to (505) 272-5782

PRECEPTOR APPLICATION

I have been actively engaged in the practice of pharmacy for one year.

I am currently engaged in the full-time practice of pharmacy.

I have not been convicted of violations of any laws or regulations relating to pharmacy within three (3) years of this application.

I shall submit all required forms, affidavits, and evaluations to the board on or before due dates. Evaluations are done yearly or upon termination of employment of either intern or preceptor.

I shall be aware and responsible for following all regulations governing legal and ethical professional conduct as outlined in the Standards of Practice and train the intern in this area.

I shall notify the Board of any changes of employment address or location, in writing, within ten (10) days of such a change.

I shall not leave the intern alone to assume the responsibility of a pharmacist

I have read and fully understand the above requirements for a preceptor. I further understand that failure to comply with these requirements may serve as grounds for revocation of my preceptor license.

\*\*\*\*\*

**PLEASE PRINT OR TYPE ALL INFORMATION**

NAME: \_\_\_\_\_ RPH # \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE: \_\_\_\_\_

CITY \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

Does Pharmacy have a preceptor Training Number? \_\_\_\_\_ IF Yes, State Number \_\_\_\_\_

NAME OF PHARMACY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

For Official Use only
Preceptor number: _____
Training Area Number: _____
Date Issued: _____
By: _____

**UNIVERSITY OF NEW MEXICO  
HEALTH SCIENCES CENTER  
AFFILIATION AGREEMENT**

The Regents of the University of New Mexico, for its public operation known as the Health Sciences Center, specifically for the College of Pharmacy (“School”), and \_\_\_\_\_ (“Clinical Facility”), agree:

**I. RECITALS**

- A. The School offers its students a program in the field of pharmacy (“Program”) and wishes to provide students enrolled in the Program (“Students”) with coordinated clinical, educational, research and public service experience.
- B. The Clinical Facility wishes to cooperate in providing clinical education experience for the Students and believes that making its resources available to the School for the clinical education of the School’s Students will result in benefits to the Clinical Facility’s community.

**II. JOINT RESPONSIBILITIES OF THE PARTIES**

The School and Clinical Facility will:

- A. Establish the educational objectives for the clinical education experience, devise methods for their implementation, and evaluate the effectiveness of the clinical education experience.
- B. Determine the number of Students and the period of time to be spent by each Student participating in the Program at the Clinical Facility.
- C. Provide proper orientation of Students prior to their arrival at the Clinical Facility, including proper dress, proper identification badge, safety policies, health standards and code of conduct.

**III. RESPONSIBILITIES OF THE SCHOOL**

The School will:

- A. Assume full responsibility for the planning of the educational Program including administration, matriculation, promotion and graduation.

- B. Keep the Clinical Facility's clinical supervisor and instructors oriented to the Program's philosophy, course objectives, clinical instruction needs and evaluation requirements for the Students.
- C. Be responsible for assuring continuing compliance with the educational standards established by the Accreditation Council for Pharmacy Education.
- D. In consultation with the Clinical Facility, identify specific Students who will be assigned for clinical experience at the Clinical Facility and furnish the Clinical Facility with a list of assigned Students, schedules of Student assignments, and related information.
- E. Keep all records and reports of Students' clinical experience.
- F. Instruct Students regarding confidentiality of medical records of the Clinical Facility.
- G. Provide cardiopulmonary resuscitation (CPR) certification and OSHA education on blood-borne pathogens to each Student prior to assignment to the Clinical Facility.
- H. Ensure that students receive the following immunizations before they are assigned to the Clinical Facility: positive rubella titer or MMR shot, annual PPD, and hepatitis vaccine (or signed waiver).

#### **IV. RESPONSIBILITIES OF THE CLINICAL FACILITY**

The Clinical Facility will:

- A. Maintain standards that will make it eligible for approval as a clinical site for instruction of Students.
- B. Work with the School to develop a description of the clinical experience being offered.
- C. Advise the School of any changes in its personnel, operation or policies which may affect clinical experience.
- D. Designate a clinical supervisor who will be responsible for the planning and implementation of the clinical experience; adequate orientation of the Students to Clinical Facility programs, policies and proper channels of communication; regular exchange of information between the Clinical Facility and School; and interpreting changes in Clinical Facility policies and programs.
- E. Provide the clinical supervisor with time to plan and implement the clinical experience including, when feasible, time to attend relevant meetings and conferences.
- F. Permit Students to use its administrative, patient care, laboratory and library facilities and equipment for clinical training, as well as reasonable study and storage space, without charge.
- G. Provide each Student with a copy of the Clinical Facility's existing pertinent rules and regulations with which the student is expected to comply.

- H. Provide access to the same food services, reasonable parking areas, appropriate reference books and procedure manuals, and emergency medical care as offered to Clinical Facility employees at established Clinical Facility charges unless other arrangements are made by the parties.
- I. Assume ultimate responsibility for the treatment of patients. Students will not replace staff or be responsible for giving services to patients apart from their educational value.
- J. Permit access to medical records for educational use by Students, subject to the Clinical Facility rules and applicable laws and regulations regarding confidentiality.
- K. In its discretion, request that any Student whose unsatisfactory performance, health status, or behavior, might jeopardize patients, Clinical Facility staff, themselves or others be removed from the Clinical Facility. In such case the Clinical Facility will promptly notify the School so that appropriate action may be taken.
- L. Advise the School at least by midterm of any serious deficits noted in the ability of the assigned Student to achieve the stated objectives of the clinical experience, and work with the School to devise a plan by which the Student may be assisted to achieve the stated objectives.
- M. Evaluate the performance of Students on a regular basis using evaluation forms supplied by the School. Completed evaluation forms will be forwarded to the School within one week following conclusion of the Students' clinical experience.

## **V. RELATIONSHIP OF PARTIES**

- A. Students and employees of the School will not be considered employees of the Clinical Facility for any purpose, including, but not limited to, workers' compensation, insurance, bonding or any other benefits afforded to employees of the Clinical Facility. As trainees working under the direct control of Clinical Facility's clinical instructors, Students will be part of Clinical Facility's "workforce" for purposes of compliance with the Health Insurance Portability and Accountability Act of 1996, as codified at 42 U.S.C. Section 1320d ("HIPAA").
- B. Neither party has any express or implied authority to assume or create any obligation or responsibility on behalf of or in the name of the other party.
- C. The Clinical Facility may elect, in its sole discretion, to pay an appropriate stipend to Students assigned by the School to the Clinical Facility.

## **VI. INSURANCE AND LIABILITY**

- A. As between the parties, each party acknowledges that it will be responsible for claims or damages arising from personal injury or damage to persons or property to the extent they result from negligence of that party's employees or (in the case of School) Students. The School will provide professional liability insurance covering its Students and employees for their activities at the Clinical Facility, in accordance with the provisions of the New Mexico Tort Claims Act, Sections 41-4-1 *et seq.* NMSA 1978, as amended. The liability of Students and employees of the School will be subject in all cases to the limitations and immunities of the New Mexico Tort Claims Act.

- B. If a claim or suit is initiated or filed naming or otherwise involving a Student or employee of the School, the Clinical Facility will immediately provide written notice to the School's Director and the Executive Director of Risk Management for the School. If a claim or suit is filed or initiated against the Clinical Facility, naming or otherwise involving alleged actions or omissions of a Student, the School will manage and control all aspects of the defense on behalf of the Student in accordance with the New Mexico Tort Claims Act. To the extent permitted by the New Mexico Tort Claims Act, the School will coordinate its defense with that of the Clinical Facility.
- C. The Clinical Facility will not provide accident or health insurance to Students. In the event of injury to a Student at the Clinical Facility, the Student will seek treatment at a facility selected by the Student. If necessary, the Clinical Facility will provide emergency medical treatment to Students while they are assigned to the Clinical Facility. The cost of such treatment will be paid by the Student or the Student's third party payer.

## VII. TERM AND TERMINATION

This Agreement will become effective on \_\_\_\_\_, and will continue until terminated by either party by providing written notice of intent to terminate to the other party at least 60 days prior to the date of termination proposed in the notice. Such termination will not affect Students assigned to the Clinical Facility for the academic term in which notice is given.

## VIII. HIPAA COMPLIANCE

- C. The parties will comply with the applicable provisions of HIPAA and any current and future regulations promulgated thereunder, including without limitation, the federal privacy regulations, the federal security standards, and the federal standards for electronic transactions (collectively, the "HIPAA Requirements"). The parties will not use or further disclose any Protected Health Information or Individually Identifiable Health Information (as such terms are defined in the HIPAA regulations), other than as permitted by the HIPAA Requirements and the terms of this Agreement.
- D. The School will ensure that Students have been provided training with regard to the HIPAA Requirements, and will provide Clinical Facility with a certificate of training evidencing that this requirement has been met. Additionally, the Clinical Facility may require each Student to sign a Confidentiality Agreement and an Acknowledgement that the Student has received Clinical Facility's Notice of Privacy Practices.

## IX. MISCELLANEOUS

- A. **Entire Agreement.** This Agreement represents the entire understanding between the parties and supersedes any prior agreements or understandings with respect to the subject matter of this Agreement.
- B. **Modifications.** No changes, amendments or alterations to this Agreement will be effective unless in writing and signed by both parties.
- C. **Non-Assignability.** This Agreement will not be assigned by either party, nor will the duties imposed upon either party by this Agreement be delegated, subcontracted, or transferred by

either party, in whole or in part, without the prior written consent of the other party.

- D. Governing Law.** This Agreement will be construed, interpreted, governed, and enforced in accordance with the statutes, judicial decisions, and other laws of the State of New Mexico.
- E. Severability.** The invalidity or unenforceability of any term or provision of this Agreement will in no way affect the validity or enforceability of any other term or provision to the extent permitted by law.
- F. Marketing Materials.** Neither the School nor the Clinical Facility will use the other's name in any publicity or advertising material without prior written consent of the other party.
- G. Headings.** Headings and captions used in this Agreement are for convenience and ease of reference only and will not be used to construe, interpret, expand or limit the terms, conditions, or other provisions of this Agreement.
- H. Cooperation and Dispute Resolution.** The parties will meet as necessary to discuss and evaluate the School's Program at the Clinical Facility. The parties agree that, to the extent compatible with the separate and independent management of each, they will maintain effective liaison and close cooperation. If a dispute arises related to the obligations or performance of either party under this Agreement, representatives of the parties will meet in good faith to resolve the dispute.
- I. Third Parties.** Nothing in this Agreement, express or implied, is intended to confer any rights, remedies, claims, or interests upon a person not a party to this Agreement.
- J. Nondiscrimination.** Neither party will discriminate against Students, employees or patients on the basis of race, religion, national origin, sex, sexual orientation, age or handicap.
- K. Confidentiality.** The confidentiality of medical records of the Clinical Facility's patients and academic records of the Students will be maintained by the parties in accordance with applicable federal and state laws and regulations regarding confidentiality of medical records and Students' records.
- L. Eligibility for Participation in Government Programs.** Each party represents that neither it, nor any of its management or any other employees or independent contractors who will have any involvement in the affiliation under this Agreement, have been excluded from participation in any government healthcare program, debarred from or under any other federal program (including but not limited to debarment under the Generic Drug Enforcement Act), or convicted of any offense defined in 42 U.S.C. Section 1320a-7, and that it, its employees, and independent contractors are not otherwise ineligible for participation in federal healthcare programs. Further, each party represents that it is not aware of any such pending action(s) (including criminal actions) against it or its employees or independent contractors. Each party shall notify the other party immediately upon becoming aware of any pending or final action in any of these areas.
- M. Notices.** Any notice required to be given pursuant to the terms and provisions of this Agreement will be in writing and will be sent by certified mail, return receipt requested, postage prepaid, as follows:

**To Clinical Facility at:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**To School at:**

College of Pharmacy  
MSC09 5360  
1 University of New Mexico  
Albuquerque, New Mexico 87131-0001  
Attn: Dean John A. Pieper

**N. Binding Effect.** This Agreement is binding upon, and inures to the benefit of, the parties to this Agreement and their respective successors and assigns.

**CLINICAL FACILITY:** \_\_\_\_\_

By \_\_\_\_\_  
Typed Name: \_\_\_\_\_  
Title: \_\_\_\_\_

Date: \_\_\_\_\_

**SCHOOL: REGENTS OF THE UNIVERSITY OF NEW MEXICO,  
FOR THE COLLEGE OF PHARMACY**

By \_\_\_\_\_  
John A. Pieper, Pharm.D.  
Dean and Professor, College of Pharmacy

Date: \_\_\_\_\_

*Approved as to form by  
Harold Pope  
Assistant University Counsel  
11/13/03*

**2008-2009 Preceptor Availability**  
**UNM College of Pharmacy Course 770: Advanced Pharmacy Practice Experience**

Preceptor Name:

Phone:

Fax:

Email:

Site Name:

Site Address:

**Course Description**

PHARM 770 is the Advanced Pharmacy Practice Experience (APPE) course for students who have completed all didactic requirements of the Pharm.D. program. Student pharmacists must complete nine four-week, full-time experiences, totaling 160 hours each. Students in the Non-Traditional Pharm.D. program may complete PHARM 770 experiences on a part-time basis over a period of four to ten weeks.

Student pharmacists complete five to seven clinical experiences in which they provide direct pharmaceutical care and two to four elective (drug information, administrative or management) experiences. There are advanced community and institutional practice experiences available for students who want to continue to improve the skills that they developed during their introductory experiences.

**Classification**

Please indicate below any changes or additional experiences you would like to offer.

Type

Specialty

Current

Change:

Add:

**Availability**

Please fill out the calendar below by indicating the number of students you prefer to precept per month. Please note that there are no rotations for the months of December and May.

Summer 2008	# of Students	Fall 2008	# of Students	Spring 2009	# of Students
June 2 – June 27		August 25 – Sept. 19		January 5– January 30	
June 30 – July 25		Career Week: Sept. 22-26		February 2 – February 27	
July 28 – August 22		Sept. 29 -October 24		March 2 – April 3 <i>Spring Break: March 15-22</i>	
		October 27-Nov. 25		April 6 - May 1	

- I prefer only full-time Pharm.D students (4 week rotations)
- I prefer only part-time NTPD students (4 to 10 week rotations)
- I am willing to take both part-time and full-time students per rotation
- I am not available to precept Pharm 770 students for the 2008-09 academic year, but please keep me on the preceptor list:     Yes     No

**Description**

In order to give our students information about their rotations, please give a brief description below of the activities at your site. Please include any scheduling requirements you might have (occasional evenings, for example), or preliminary requirements such as an orientation session or health test, which students will have to complete before beginning the rotation.

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**Career Week**

September 22-26, 2008 is designated as “Career Week” at the College of Pharmacy. Students will not have scheduled rotations during this week so that they may participate in career week activities. These activities will include sessions on resume/CV writing and interviewing skills, as well as actual interviews with employers. Career Day will feature recruiters from various companies who will be on campus to talk to students.

If you would like to participate in Career Week by evaluating resumes/CVs, serving as a “practice” interviewer, or by exhibiting and recruiting at Career Day, please contact Assistant Dean Michel Disco or Dr. Megan Thompson at 272-3241.

**Spring Break**

March 15-22, 2009 is UNM’s spring break. Rotations scheduled for the month of March are five weeks long rather than the typical four. Working with preceptors, students may take the break during the normally scheduled week, or during the first or last week of the rotation.

**Holidays**

UNM recognizes federal and state holidays. Since the Professional Practice Experiences are designed to place students in real-world situations, holidays are taken at the discretion of the preceptor.

**Updated Information**

Please indicate changes in your contact information that have occurred in the past year:

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**Please mail or fax this completed availability form to:**

**University of New Mexico College of Pharmacy  
Office of Experiential Programs  
MSC09 5360  
1 University of New Mexico  
Albuquerque, NM 87131-0001**

**FAX: 505-272-5782**

**Phone: 505-272-9111 or 272-1508**

**Email: [copexperientials@salud.unm.edu](mailto:copexperientials@salud.unm.edu)**

## Student Pharmacist Drug Information/Healthcare Education Activity Form

Student pharmacist name:

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Date:

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Activity (Check one):

- written response to drug info. question       oral response to drug info. question
- patient counseling session                       Journal Club
- Other healthcare education presentation or written assignment:  
(please describe): \_\_\_\_\_

Presentation of Data:

- Material is organized and presented in logical manner
- Presentation is clear and concise without extraneous data
- Presentation is addressed in appropriate manner according to audience

Data presented:

- Problem/question/topic clearly identified and addressed
- If Drug information and/or therapy identified, the following information is included in presentation:
  - dosage
  - side effects
  - interactions
- If healthcare education topic identified, the information presented is thorough, relevant, and helpful

Research/Literature Review Skills

- Information presented is accurate and current
- Information presented is relevant
- Student pharmacist made proper use of primary and/or secondary and tertiary literature

## Student Pharmacist Observation Form

Student Pharmacist Name: \_\_\_\_\_

Preceptor Name: \_\_\_\_\_ Site: \_\_\_\_\_

Today's Date: \_\_\_\_\_

Use the following scale to rate the student pharmacist's daily activities:

- 5**-Student completed activity at level beyond expectations
- 4**-Student completed activity with minimal or no prompting from preceptor
- 3**-Student completed activity with moderate prompting from preceptor
- 2**- Student completed activity with extensive prompting from preceptor
- 1**- Student engaged in activity but was unable to complete the activity even with prompting and assistance or completed activity incorrectly

What activities did you see this student pharmacist perform today? **Score**

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What did the student pharmacist do particularly well?

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What improvements or suggestions should you provide the student pharmacist to increase his or her proficiency/skill level?

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