University of Cincinnati
College of Pharmacy

Professional Experience Program
Advanced Pharmacy Practice Experience

“I hear and I forget;
I see and I remember;
I do and I understand.”

2017 - 2018
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Fourth Professional Year: Advanced Pharmacy Practice Experiences

You cannot acquire experience by making experiments. You cannot create experience. You must undergo it. (Albert Camus)

Introduction

The Advanced Pharmacy Practice Experiences (APPE’s) during the fourth professional year at the James L. Winkle College of Pharmacy is a full-time practical experience. The student receives academic credit for their experience as well as internship hours acceptable toward licensure by the Ohio State Board of Pharmacy.

The student will participate in nine training periods, each of which is one month in duration. The selection of sites as well as the sequence of rotations will be determined following an interview with each student and the APPE coordinator. The rotations are conducted in practice sites which are affiliated with the College of Pharmacy. These sites will be carefully chosen to ensure that all students have an opportunity to learn and participate in the direct care of acute and chronically ill patients. All students will complete 6 core rotations in 1 hospital medicine 2 hospital medical-surgical specialty 3 ambulatory care clinic 4 community pharmacy 5 health-system drug policy development, 6 direct patient care elective. Students will actively participate in assessing the drug therapy needs of individual patients, formulating safe and effective drug regimens and optimizing the pharmaceutical care of patients. Students will also have the opportunity to elect 3 rotations in direct or non-direct patient care settings.

During the Professional Experience Program, each student will train under the immediate supervision of faculty who serve as their preceptors. Preceptors will assist students in applying the knowledge gained in the classroom to the day-to-day practice of pharmacy. The preceptors serve as role models and mentors for students in their practice environment. The student will function as an extension of the preceptor within the guidelines and objectives established for that particular rotation. The preceptors will also evaluate student progress toward mastering those competencies necessary to enter the profession of pharmacy.
Student Learning Outcomes for APPE’s

Hospital Medicine rotations - are those that provide 4th year student pharmacists the opportunity to actively participate in the pharmacist patient care process in an acute care setting with the purpose of optimizing patient health and medication outcomes. The student will manage individual patients with a variety of diseases, disorders, symptoms, complications and patient specific pharmacotherapy.

Hospital Medical Surgical Specialty rotations - are those that provide 4th year student pharmacists the opportunity to actively participate in the pharmacist patient care process in an acute care setting with the purpose of optimizing patient health and medication outcomes. The Medical Surgical specialty rotation focuses on a specific content area and requires specialized interventions and interactions with multiple disciplines. These rotations may be unique services or consult services within an institution.

Ambulatory Care rotations - are those that provide 4th year student pharmacists the opportunity to actively participate in the pharmacist patient care process in an outpatient setting with the purpose of optimizing patient health and medication outcomes. The student will manage patients with a variety of diseases and/or a specific disease state/organ system, disorders, symptoms, complications and the patient specific pharmacotherapy.

Community Pharmacy rotations - are those that provide 4th year student pharmacists the opportunity to actively participate in the pharmacist patient care process in a traditional community pharmacy setting focusing on the development, implementation, and evaluation of an innovative pharmaceutical care model. The student will engage in direct patient care, management, and professional service activities that will foster personal growth, and improve patients’ quality of life.

Health-System Drug Policy Development/Medication Safety Management rotations - are those that provide 4th year student pharmacists the opportunity to actively participate in the pharmacist patient care process in an institutional setting through the dissemination of medication information to patients, health-care professionals, and health-care systems.

Direct Patient Care Elective rotations - are those that provide 4th year student pharmacists the opportunity to actively participate in the pharmacist patient care process in an acute, chronic, and/or ambulatory care setting with the purpose of optimizing patient health and medication outcomes.

Advanced Elective rotations - are those that provide 4th year student pharmacists the opportunity to actively participate in the pharmacist patient care process in practice settings that are of significant interest to the individual student. Elective rotations allow the student obtain additional learning experiences in practice areas that are required as well as unique areas that help the student become a more well-rounded practitioner.
Program Goals and Objectives

The primary goal of the APPE’s is to provide the student with an opportunity to utilize the knowledge gained in the classroom or laboratory environment in “real-life” professional practice environments. This will allow the student to mature in a continuous manner over the entire pharmacy program. Students will be expected to develop their professional, communications and managerial skills under the supervision of faculty preceptors. The rotations will be chosen to ensure that each student develops the professional judgment necessary to competently serve the public as a licensed pharmacist.

In order to achieve the stated goals of this program, preceptors serve as teachers, role models and mentors to provide the necessary training and education within the scope of their practice so that the students will learn and achieve the following goals and objectives as summarized below:

College Educational Outcomes

Domain 1 – Foundational Knowledge

1.1. Learner (Learner) - Develop, integrate, and apply knowledge from the foundational sciences (i.e., pharmaceutical, social/behavioral/administrative, and clinical sciences) to evaluate the scientific literature, explain drug action, solve therapeutic problems, and advance population health and patient-centered care.

Domain 2 – Essentials for Practice and Care

2.1. Patient-centered care (Caregiver) - Provide patient-centered care as the medication expert (collect and interpret evidence, prioritize, formulate assessments and recommendations, implement, monitor and adjust plans, and document activities).
2.2. Medication use systems management (Manager) - Manage patient healthcare needs using human, financial, technological, and physical resources to optimize the safety and efficacy of medication use systems.
2.3. Health and wellness (Promoter) - Design prevention, intervention, and educational strategies for individuals and communities to manage chronic disease and improve health and wellness.
2.4. Population-based care (Provider) - Describe how population-based care influences patient-centered care and influences the development of practice guidelines and evidence-based best practices.

Domain 3 - Approach to Practice and Care

3.1. Problem Solving (Problem Solver) – Identify problems; explore and prioritize potential strategies; and design, implement, and evaluate a viable solution.
3.2. Educator (Educator) – Educate all audiences by determining the most effective and enduring ways to impart information and assess understanding.
3.3. Patient Advocacy (Advocate) - Assure that patients’ best interests are represented.
3.4. Interprofessional collaboration (Collaborator) – Actively participate and engage as a healthcare team member by demonstrating mutual respect, understanding, and values to meet patient care needs.
3.5. Cultural sensitivity (Includer) - Recognize social determinants of health to diminish disparities and inequities in access to quality care.
3.6. Communication (Communicator) – Effectively communicate verbally and nonverbally when interacting with an individual, group, or organization.

Domain 4 – Personal and Professional Development
4.1. Self-awareness (Self-aware) – Examine and reflect on personal knowledge, skills, abilities, beliefs, biases, motivation, and emotions that could enhance or limit personal and professional growth.
4.2. Leadership (Leader) - Demonstrate responsibility for creating and achieving shared goals, regardless of position.
4.3. Innovation and Entrepreneurship (Innovator) - Engage in innovative activities by using creative thinking to envision better ways of accomplishing professional goals.
4.4. Professionalism (Professional) - Exhibit behaviors and values that are consistent with the trust given to the profession by patients, other healthcare providers, and society.

**The Pharmacist Patient Care Process (PPCP)**

Pharmacists use a patient-centered approach in collaboration with other providers on the health care team to optimize patient health and medication outcomes. This course contributes to attaining the highlighted (bolded) PPCP items listed below that distinguish graduates from our Pharm. D. program.

**Collect**
The pharmacist assures the collection of necessary subjective and objective information about the patient in order to understand the relevant medical/medication history and clinical status of the patient.

**Assess**
The pharmacist assesses the information collected and analyzes the clinical effects of the patient’s therapy in the context of the patient’s overall health goals in order to identify and prioritize problems and achieve optimal care.

**Plan**
The pharmacist develops an individualized patient-centered care plan, in collaboration with other health care professionals and the patient or caregiver that is evidence-based and cost-effective.

**Implement**
The pharmacist implements the care plan in collaboration with other health care professionals and the patient or caregiver.

**Monitor and Evaluate**
The pharmacist monitors and evaluates the effectiveness of the care plan and modifies the plan in collaboration with other health care professionals and the patient or caregiver as needed.
Assessment

Students on APPE rotations will be assessed in the following areas:

SECTION I: PROFESSIONALISM

1. Participates in the process of self-assessment and displays an interest in life-long learning and continuous professional development
2. Maintains a professional manner in both appearance and behavior at all times
3. Demonstrates courtesy and respect towards others and exhibited self-control in all interactions
4. Maintains confidentiality
5. Displays cultural sensitivity and tolerance
6. Arrives on time and prepared for all rotation activities
7. Demonstrates appropriate time-management skills and the ability to prioritize
8. Demonstrates initiative and responsibility for providing patient care and completing assignments

SECTION II: COMMUNICATION

1. Demonstrates active listening skills and empathy
2. Effectively communicates both verbally and in writing with patients and other health care professionals
3. Demonstrates the ability to establish effective relationships with other health care professionals and patients
4. Appropriately demonstrates a willingness to form an opinion, express observations and/or ask questions
5. Displays effective presentation skills
6. Demonstrates assertiveness and confidence when making recommendations
7. Responds to questions in a clear and concise manner with supporting evidence/rationale via written or verbal communication as appropriate to the situation

SECTION III: DRUG/DISEASE KNOWLEDGE

1. Demonstrates knowledge of disease states appropriate for this clinical setting
2. Describes the expected mechanism of action, therapeutic response, adverse effects, and monitoring parameters for a given drug or combination of drugs
3. Applies physical assessment skills as appropriate to assist in evaluating a patient and his/her medication therapy
4. Demonstrates knowledge of evidence based medicine and clinical practice guidelines

SECTION IV: APPLICATION

Problem Assessment

1. Utilizes a systematic problem-solving approach to patient care
2. Obtains and interprets information from the medical chart, computer system or patient to assess therapy
3. Consistently and accurately identifies and prioritizes all medication-related problems

Plan Development

1. Designs and evaluates regimens for optimal outcomes, incorporating pharmacokinetic, formulation data, and routes of administration into decision
2. Adjusts regimens based patient physiologic parameters and response to therapy
Monitoring Parameters
1. Create and implement a monitoring plan to assess the outcomes of drug therapy for a patient
2. Prospectively measure, record, and track a patient’s therapeutic response and toxicity to drug therapy
3. Identify, assess, and appropriately report drug related problems, adverse events, and toxicities
4. Assesses patient adherence to medications and risk factors for non-adherence

Use & Interpretation of Drug Information
1. Identifies and thoroughly evaluates current literature and effectively apply this information to patient care
2. Given a drug, health or operational information question, formulates a timely efficient, thorough and effective answer using appropriate sources of information
3. Provides and appropriately document references and resources

SECTION V: MEDICATION DISTRIBUTION / DISPENSING
1. Demonstrates proficiency in processing new and refill prescriptions/medication orders in accordance with regulatory requirements
2. Accurately selects and prepares appropriate medication for prescription or medication order
3. Develops a systematic approach for final verification to ensure the five principles of drug delivery: right drug, right patient, right dose, right time, right route
4. Using the concepts of pharmaceutics, and applying best practice guidelines, appropriately compounds products for patient use

SECTION VI: ADMINISTRATIVE SKILLS
1. Discusses use of management principles (e.g. planning, organizing, directing and controlling) for simple/individual tasks and complex activities
2. Discusses and/or participates in resource management related to time, people, finances and technology/informatics
3. Discusses and/or participates in quality assurance and/or patient safety activities
4. Discusses marketing principles and how they are applied
5. Identifies methods to enhance pharmacy services
6. Reviews and applies all site related policies and procedures
7. Demonstrates an understanding of leadership needs and opportunities in pharmacy practice
Criteria and Standards for Students and Preceptors

1. Must be an actively licensed pharmacy intern in the state of Ohio and Kentucky.
2. Must be a student in good standing at the college of pharmacy
3. Must be covered by University professional liability insurance
4. Must receive annual Blood Borne Pathogen Training
5. All students registered in the College of Pharmacy must provide the following information to student health services:
   A. Medical History and Physical completed by personal physician
   B. Documentation confirming previous immunization, natural infection or serologic immunity against measles, rubella and mumps signed by their personal physician.
   C. Documentation confirming previous immunization with Tdap
   D. Documentation confirming immunization with annual seasonal influenza vaccine
   E. Hepatitis B vaccination – Health care workers are at a high risk for Hepatitis B infection.
   F. Students are required to receive a complete Hepatitis B vaccination series and have a Hepatitis B surface antibody titer drawn to show serologic immunity.
   G. Chickenpox – All students with a negative history of chicken pox will be required to have a VZV titer drawn to determine immunity. Any susceptible students will be required to receive two doses of VZV vaccine.
   H. Baseline and annual TB testing is required. If testing is done by a personal physician or at the student’s place of employment supporting documentation will be required by the student health service. Those students who have not had TB testing in the past 24 months will be required to have “2 step” baseline testing 10 days apart. Chest x-ray documentation is required for PPD positive persons. This is available free of charge through the Cincinnati Health Department TB control clinic.
6. PY3 and PY4 students must have a current CPR card and immunization training certificate
7. Must have completed a background check as directed by the College of Pharmacy (upon admission and prior to starting the APPE rotations)
8. Must exhibit a professional appearance both in manner and dress and must adhere to the standards of dress and behavior specified by the preceptor at all times.
   A. Tattoos must be covered at all times while on rotation
   B. Ear/body piercings must comply with the requirements of the site. Sites will usually only allow for small ear piercings which are not numerous.
9. Must undergo HIPAA training and understand that the confidentiality of all information pertaining to patients, patient records and to the business conducted by the training site is not to be violated.
10. Should master, as soon as possible, the routine procedures of training site so that maximum time can be devoted to those facets of the practice which involve decision making.
11. Must maintain an open line of communication with the preceptors:
   A. By recognizing that all discussions with preceptors, other health practitioners and patients must be governed by courtesy and common sense.
   B. By realizing that feedback is a part of the learning process. It should not be interpreted as a personal attack but as a mechanism for improvement. The student should never publicly question the advice or directions of the preceptor. However, any differences of opinion should be openly discussed in privacy to enhance learning by both student and preceptor.
   C. By not hesitating to admit not knowing something and seeking help before acting without a full understanding of the matter at hand.
D. By being certain that professional decisions regarding the filling of prescriptions or advising patients on OTC products are consistent with the practices and policies of the preceptor.

12. Must keep in mind that the primary objective of Professional Experience is learning and self-improvement; that this is not accomplished in a passive manner but requires a commitment and expenditure of time and energy; and that the optimal learning experience requires mutual respect between the preceptor and the student.

13. Must realize he/she is on duty with the preceptor and must adhere to the criteria stated in the attendance policy.

14. Shall be responsible for periodic preparation of evaluation forms, a reflective journal and special assignments.

15. Must not receive any form of payment for the experience pertaining to the Professional Experience.

16. Exhibiting a positive attitude, professional concern for the tasks being accomplished and the patients being served, sensitivity to members of the opposite sex, different religions, ethnic groups or races and good moral and ethical conduct are mandatory.

17. Must comply with all drug laws. Any drug law violations or acts of unprofessional conduct will result in immediate suspension from the College of Pharmacy and appropriate disciplinary action.

18. Failure to demonstrate these attributes and acting in an unprofessional manner such as drug abuse, dishonesty, sexual misconduct, abusive language, disrespect, disruption of the operation of the training site, and cheating on the number of hours of training required will result in a failing grade for that rotation, and, can lead to disciplinary action including dismissal from the college.

The preceptor:

The James L. Winkle College of Pharmacy preceptors will be competent practitioners who are committed to pharmacy education, meet the standards below as appropriate for their practice site, and are positive and role-models for the student.

1. The preceptor(s) agree(s) to abide by all guidelines of the program.

2. The pharmacist preceptor must possess a current license from the boards of pharmacy for all states in which the pharmacist practices, practiced for at least the past 12 months, and shall be in good standing before all such board(s) of pharmacy.

3. Non pharmacist preceptors must have practiced in their discipline as a licensed practitioner, if required, for at least the past 12 months.

4. Prior to the placement of any students with a preceptor at the site, both the preceptor and site must meet all college requirements. In addition, the rotation must meet all college requirements for the assigned experience.

5. The preceptor demonstrates standards of professional practice and will present a professional image at all times.

6. The preceptor demonstrates good intra-professional, inter-professional, and health care provider-patient relationships.

7. The preceptor will be a health information provider who engages with patients in an effort to optimize education, prevention and early detection of disease.

8. The preceptor will have access to current drug information resources to optimally practice as a medication consultant and problem solver to patients and other health care professionals.
9. Within the scope of pharmacy practice, the preceptor shall retain and exercise the ultimate decision making authority for all patient-related decisions.
10. The preceptor will have a sincere interest in education, especially the teaching and mentoring of pharmacy students.
11. The preceptor will cooperate with the College of Pharmacy Faculty and positively support the teaching missions of the College.
12. The preceptor should show an interest in and a desire for professional growth and advancement of the profession as demonstrated by:
   A. Active participation in the local, state and national pharmacy organizations and/or
   B. Incorporation of current standards of care into his/her practice.
   C. A willingness to provide feedback on the program to the College.
13. The preceptor must be willing to allow students to make professional decisions with pharmacist supervision.
14. The preceptor must be willing to allow the student to actively participate in the activities of the training site, rather than to merely observe and listen.
15. The preceptor must be willing to evaluate the student's performance objectively, realizing that fair and constructive evaluation of the student's ability to perform designated activities is a serious responsibility. Constructive feedback can significantly influence the student's progress and subsequent performance as a practitioner.
16. The preceptor must be willing and able to maintain an open line of communication with the student:
   A. By detailed explanation of what is expected of the student regarding appearance, attitude and method of practice, making certain that all members of the staff involved in student learning adhere to the same standards.
   B. By open discussion of professional practice.
   C. By treating the student with respect and patience to ensure an optimal learning experience. The preceptor should understand that the student is not a finished product on arrival but one who should be guided to the highest possible level of competence.
   D. By offering constructive and corrective feedback.
17. The preceptor must fully understand that the student is enrolled in a college course for a learning experience
   A. The preceptor must recognize the student is not an employee working at a job.
   B. The preceptor will keep student evaluations/performance assessments in strictest confidence.
   C. Student activities should be consistent with the learning objectives of the pharmacy practice experience
   D. UC FERPA –  http://www.uc.edu/registrar/FERPA_and_recordsPrivacy.html
Activities and Assignments
To meet the stated goals and objectives students will actively participate in the daily activities of the rotation site under the guidance of the faculty preceptor. The students will be given assignments by the preceptor that will enable the student to enhance their learning.

Examples of possible activities and assignments are:
- devise pharmacotherapeutic regimens and monitoring of drug therapy of all patients assigned by the preceptor
- review of medication administration profiles on all patients on assigned units to prevent, identify and solve drug related problems
- present an inservice to pharmacy personnel or other health care providers
- provide medication counseling on selected patients
- participate and present a topic for discussion
- participate in journal club
- present selected patients to preceptor

1. Professional Experience Program Reflection
This serves as documentation of the student’s activities during their experiential training at each site. The student will submit a copy prior to the midpoint and final evaluation to their preceptor. The journal will be reviewed as part of the assessment of the student’s performance while at their training site. The reflective journal entries are an opportunity for a student to self-evaluate and self-assess their learning while on a rotation. Reflective journaling should include, but is not limited to, overview of patient cases, drug information questions, patient counseling, interactions with health care professionals, review of presentations attended or given, and self-evaluation and self-assessment. The preceptor will acknowledge the completion of each journal at the end of each week/rotation.

2. Activity Assessment
During the rotation the student and preceptor will choose a minimum of two activities to be assessed at the time each activity is being performed. This will give the preceptor the opportunity to provide support and feedback to the student about their performance and identify any areas for improvement.
**Student Assessment and Evaluation**

Student assessment is based on the stated goals and objectives for each of the Advanced Practice Experience courses. The competencies students will be assessed upon include:

- Professionalism
- Communication
- Drug Disease/Knowledge
- Application
- Medication distribution/dispensing
- Administrative Skills

Preceptors will assess the student’s performance at midpoint during the rotation and at the end of the rotation. The midpoint assessment will afford the student the opportunity to improve in any areas that a deficiency may have been identified.

**Grading:**

Grades will be awarded based upon an evaluation that is completed by the preceptor and assigned by the Director of Experiential Education. Grades will be determined based upon the following:

1. **APE Assessment Form**

   Each competency identified and evaluated by the preceptor will be given a score. Students will be assigned a letter grade for each rotation. Final grade for the rotation will be based on the average score for the all the evaluated sections based on following distribution.

   **Grading Scale**

<table>
<thead>
<tr>
<th>Grade</th>
<th>Average of Scores</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>≥3.5</td>
</tr>
<tr>
<td>B</td>
<td>≥ 2.5 to 3.499</td>
</tr>
<tr>
<td>C</td>
<td>≥ 2.0 to 2.499</td>
</tr>
<tr>
<td>F</td>
<td>&lt; 2.0</td>
</tr>
</tbody>
</table>

   *Successful completion of the rotation will be based on student achieving an average of ≥ 2.0 in all sections of the evaluation. If a score of < 2.0 in any section is obtained, a grade of “F” will be issued.* Should a student receive a failing grade for a rotation, the student will be asked to repeat the rotation. The student may be required to participate in remediation activities to support student learning and improvement.

2. **Therapeutic Controversy**

   The score for the presentation will be added to the APPE Evaluation during the month in which the presentation occurs. The score will be based upon evaluations received at the time of the presentation. The Director of Professional Experience Programs will average this score with the APPE scores.

   Class attendance is required from the start of the first presentation to the end of the last presentation. Attendance will be taken at both the beginning and end of class. Attendance is required unless rotation obligations prevent your attendance. **No absences are permitted – no exceptions.**

   If you have questions about an excused absence, contact Dr Doherty before the absence occurs.
3. **Peered mentoring experience student preceptor**

P4 students are responsible for a monthly interaction with the P3 student assigned to them for the Longitudinal Practice Experience. This will be noted on the APPE assessment form by the Director of the Professional Experience Programs.

**Attendance**

**Before the rotation** – the students should contact the preceptor of each rotation a minimum of 7 days before the beginning of the rotation to introduce himself/herself and to make arrangement for the first day of the rotation.

The schedule for rotations for is determined by the site that the student is assigned. Students are expected to be in attendance at rotations according to this schedule. Students are expected to be at rotation a minimum of 8 hours per day. There may be times when you are required to devote more than the scheduled time. Excused absences, anticipated and unanticipated, are based upon extenuating circumstances beyond the control of the student. Four areas fall into the category of extenuating circumstance:

1) medical necessity;
2) death of a family member;
3) pre-approved professional activities; or
4) extenuating circumstances unforeseen by this policy (requires the approval of the Experiential Office).

Absences lasting more than 1 day are to be reported to the preceptor and the APPE coordinator (Dr. Doherty) as soon as possible. Arrangements should be made with the preceptor to make up all missed time.

**More than 1 unexcused absence per rotation may result in a grade of F.**

**Inclement weather**

Students must follow the policy at the site and not the university

**Holidays**

Students must follow the policy at the site and not the university

Students that are interested in attending professional meetings during a rotation will need to do the following:

- Contact their preceptor for that rotation prior to making arrangements for the meeting. The student and preceptor will discuss how the student will make up the missed time.
- Notify the APPE coordinator in writing your plans to attend a meeting.
- Provide a summary of the meeting to the preceptor and the APPE Coordinator.

**Punctuality** is mandatory. Students are obligated to notify the preceptor as soon as possible and prior to the time involved if he/she will be late

**More than 2 unexcused tardiness per rotation may result in a grade of F.**
End of the rotation materials
The following must be completed by the student/preceptor each month in order for the student assignment for the month to be considered complete.

a. Assessment Form
   The preceptor completes this form on-line, discusses it with the student, submits the form online.

b. Complete evaluation of site – Completed online – Immediately available to preceptor

c. Complete evaluation of Preceptor – Completed online – Immediately available to preceptor - Encourage you to share form with preceptor at final evaluation

d. Have preceptor sign affidavit form

Turn in your experiential affidavits upon completion of your final APPE rotation

Removal from rotation
There are many reasons a student could be removed from an IPPE or APPE rotation. This policy is intended to describe the process and implications for being removed from a site. This policy is meant to outline the most common occurrences but cannot account for all circumstances and each circumstance is always reviewed on an individual basis.

1. Student requests to leave the site

   A. Medical
      i. In the event the student experiences a medical event that prevents the student from performing at the site. The student will be removed from the site and not permitted to return until a note is received from the managing physician clearing the student to return to that rotation or future rotations
      ii. In some, but not all cases, students may be able to complete projects from home while on leave in order to satisfy rotation requirements. This is based on the determination of the experiential coordinator and at the discretion and approval of the site and preceptor. The student will still be required to account for all rotation time and it may need to be completed at a later time either during a rotation free period or during the next available schedule block which may be during another semester or academic year depending on time and availability.
      iii. Students cannot be participating on more than 1 rotation at the same time
      iv. An SP grade will be issued until the student can successfully complete the rotation requirements. Students may need to register for addition hours in certain cases.

   B. Personal
      i. Students may ask to be removed from a site for a variety of reasons. In the event a student asks to be removed from a rotation site (for a non-medical reason), the student will be scheduled for another rotation at the next available rotation block which may be during another semester or academic year depending on time and availability.
      ii. The student will be required to complete a full rotation. No credit will be given for time prior to the student requesting to leave the site
      iii. An SP grade will be issued until the student can successfully complete the rotation requirements. Students may need to register for addition hours in certain cases.

2. Site requests that student be removed from the site
A. Professionalism
   i. In the event a student is requested to be removed from a site for what the site and/or college deems as unprofessional behavior which prevents a student from attending the site, the student will be immediately removed from the site
   ii. Student will receive an F grade for the rotation
   iii. The student will be required to register for the necessary rotation again during a subsequent semester or academic year.
   iv. The student will be scheduled at a different site during the next available rotation block the necessary rotation is available. This may not be the next block because of availability and may be during another semester or academic year.

B. Knowledge
   i. In the event a preceptor identifies and knowledge deficit in the student the experiential coordinator will work with the preceptor to create a plan of action for the student to clearly outline requirements to successful on the rotation. If the student does not show satisfactory improvement towards the requirements and is requested to be removed from the site due to the knowledge deficit, the student will be immediately removed from the site
   ii. Student will receive an F grade for the rotation
   iii. The student will be required to register for the necessary rotation again during a subsequent semester or academic year.
   iv. The student will be subjected to a remediation plan which may include but is not limited to:
       a. Rearrangement of rotations and the order and months to address deficiencies
       b. Participate in remediation activities at the college

C. Unforeseen site issues
   i. On rare occasion, unforeseen circumstances occur mid-rotation at the site or with the preceptor (not the fault or cause of the student) that require the student to be immediately removed from the site. In such cases the student will be immediately removed from the site.
   ii. The student will be scheduled for another suitable/appropriate rotation as quickly as possible
   iii. Students will receive credit for the time spent on rotation prior to the removal and will not be required to register for additional courses or rotations.
Health and safety

I. Student Health Insurance

All students registered in the College of Pharmacy must have health insurance from a U.S. Insurance Company with a U.S. based claims administrator offered through the University or have coverage through another U.S. Insurance Company that is equal to or greater than the coverage offered by the University.

II. Medical History and Immunizations

All students registered in the College of Pharmacy must provide the following information to student health services:

a. Medical History and Physical completed by personal physician
b. Documentation confirming previous immunization, natural infection or serologic immunity against measles, rubella and mumps signed by their personal physician.
c. Documentation confirming previous immunization with Tdap
d. Documentation confirming immunization with annual seasonal influenza vaccine
e. Hepatitis B vaccination – Health care workers are at a high risk for Hepatitis B infection. Students are required to receive a complete Hepatitis B vaccination series and have a Hepatitis B surface antibody titer drawn to show serologic immunity.
f. Chickenpox – All students with a negative history of chicken pox will be required to have a VZV titer drawn to determine immunity. Any susceptible students will be required to receive two doses of VZV vaccine.
g. Baseline and annual TB testing is required. If testing is done by a personal physician or at the student’s place of employment supporting documentation will be required by the student health service. Those students who have not had TB testing in the past 24 months will be required to have “2 step” baseline testing 10 days apart. Chest x-ray documentation is required for PPD positive persons. This is available free of charge through the Cincinnati Health Department TB control clinic.

III. Blood Borne Pathogen Training Policy and Exposure Plan

The Occupational Safety and Health Administration mandates that all employees who are at risk for exposure to blood borne pathogens in the normal course of their employment be trained on an annual basis. This federal regulation also applies to students enrolled in health professions schools where students are a reasonable risk for exposure. The employer must also work cooperatively with employees to develop practices and procedures that reduce the likelihood of exposure. The employer must also develop and distribute an exposure control plan to their employees.

The College of Pharmacy requires all individuals who may be at risk for exposure in the normal course of their daily activities be trained on an annual basis. If you meet any of the following criteria you must receive annual training on blood borne pathogens.

a. You work in or practice in a patient care setting
b. You work or handle human blood or other human body fluids
c. You participate in or supervise teaching activities that use or demonstrate use of sharp objects as defined by OSHA including but not limited to needles and syringe.
d. You supervise students in clinical or laboratory settings who have been identified as having a risk for exposure to blood borne pathogens.

The University of Cincinnati provides blood borne pathogen training programs for employees and students. A schedule of training activities is listed at: 
Http://ehs2.uc.edu/Training/courselisting.asp

The UC Medical Center has developed an on-line training program on blood borne pathogens. The training program is located at: 
Http://researchtraining.uc.edu

The University of Cincinnati Exposure Control Plan is located at:

http://ehs.uc.edu/Advisories/Advisory_12_1.PDF

IV. Accidental Injury

In the event of an injury or illness as a result of action taken by a student in the course of his/her education and training the following procedure should be followed:

a. Student is to report injury to their preceptor
b. Preceptor may administer first aid and then if student is in need of further medical attention the student should go to University of Cincinnati Student Health Services or the nearest emergency room. (Based on the student’s health insurance policy) If the student receives medical care at a site other than the UC Student Health Service, the UC Student Health Service should be notified of the occurrence.
c. If the preceptor works in a healthcare facility that has a policy/procedure in place that policy/procedure should be followed, however the student will also report to University Student Health Services at Holmes Hospital for further follow up.
d. The Director of Professional Experience Programs is contacted.
e. In the event of a needle stick – contact 558-STIX
f. Payment for charges incurred will be arranged between UC Student Health Services, the student’s health insurance and the student.

V. Liability Insurance

The University of Cincinnati, through its Office of Risk Management and Insurance, maintains a comprehensive program of self-insurance and commercially purchased insurance. Students are covered under this program for Professional (patient care) liability only, while engaged in clinical rotations at the request or direction of the University through a health care education program.

VI. Background Checks and Drug Screens

Some training sites may require background checks (separate from the Colleges background check) and drug screens of the students prior to the start of the education and training at the site. Students will be responsible for complying with these requirements.