Course Title: Clinical Preparation for Community Pharmacy Practice
Course Number: PHPR 479-01
Credits: 2 credits
Prerequisites: PHBM 434, PHBM 435, PHBM 436, PHBM 437
Semester: Fall 2016
Course Hours: Tuesdays 4:30pm – 6:15pm
Location: 318 Bayer

Course Faculty:

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Office Hours: By Appointment
Educational Technology Requirements:

A Blackboard site will be maintained for this course. Students should regularly check the Blackboard course site for announcements, handouts, instructions, assignments, etc. Educational Technologies required by the Mylan School of Pharmacy will also be used in this course. Students are responsible for assuring that their equipment is in working order and is up to date with these guidelines.

Course Description:

The majority of students graduating from schools of pharmacy enter community pharmacy practice. Duquesne University graduates must be prepared as the drug experts to practice clinical pharmacy as more innovative clinical pharmacy models focus on outcomes and cost management. An elective course based on community pharmacy permits students to practice applying important concepts from required, didactic courses to patient specific examples. Unique learning activities provided in this course will prepare students for daily activities as licensed pharmacists in community practice and increase their confidence as they transition into roles as healthcare providers.

Course structure includes interactive lectures and 3 group project presentations. Students will engage in discussions intended to improve their ability to apply foundational knowledge to patient care scenarios that commonly occur in community pharmacy practice. Topics include strategies for safely dispensing the most frequently prescribed drugs in the community setting; managing clinically significant drug-drug interactions; avoiding drug-disease state interactions; identifying common adverse drug reactions; and communicating more effectively with other healthcare professionals. Lectures provide information necessary to successfully complete course activities.

Course exercises and projects permit students to develop practical skills in a structured environment. All students will demonstrate to the class proper use of a commonly prescribed medical device. The second activity will discuss and reinforce proper technique and clinical skills for clinical interventions in the current programs starting to occur and grow community pharmacy such as immunizations, MTM services through Mirixa and Outcomes, RxAlly Performance Network, the EquiPP initiative with Pharmacy Quality Alliance and outpatient healthcare models rising from healthcare reform. The third project involves understanding third party insurances and formulary management. Students will write a drug product monograph, prior authorization criteria or step-therapy recommendations, then present substantiated conclusions on how this product would be covered for a patient with a specific disease state.
Required Textbook: None

Course Objectives

Upon successful completion of this course, the student will be able to:

1. Recount fundamental information about the Top 200 drugs including brand and generic associations, site identification, drug class, mechanism of action, indications, dosing ranges, contraindications, drug-drug and drug-disease state interactions, and common adverse effects
2. Demonstrate the proper operation of glucose monitors, insulin pens, multiple types of inhalers, a nebulizer and other medical devices
3. Design and deliver a presentation to teach themselves and classmates to use a medical device
4. Identify a medication that requires a prior authorization under a third party insurance and be able to evaluate the clinical criteria and analyze if the medication is appropriate for the patient at this time based on the current clinical literature. Furthermore be able to prepare an appropriate clinical application to a third party insurance for prior authorization approval.
5. Analyze patient-specific information in order to manage a common drug-drug interaction
6. Critique a patient profile in order to avoid a drug-disease state interaction or manage an adverse drug reaction
7. Interact and communicate more effectively with other students, faculty, patients and healthcare professionals
8. Identify the similarities between course exercises and activities that will occur in community pharmacy practice
9. Justify pharmacists as the healthcare professionals most qualified to manage drug therapy
10. Explain the value of the provision of clinical pharmacy services in a community practice setting
Methods of Evaluation:

Classroom Participation

The foundation for learning in this course is discussion. Therefore, it is expected that students prepare for class (i.e., do readings, assignments, etc.) and actively participate in class. A participation grade will be assigned to each student for 9 of the class sessions. Students will be allowed to drop one participation score from their final grade. *(See Policy for Late or Missed Assignments)*

Medical Device Demonstrations:

Students will be put into groups and assigned a medical devices such as glucose meters, insulin pens, etc. Each group will learn to operate the medical devices; write a two page paper describing the use of the device, the technology used, the benefits to patients and the place of the device within the market; write a one page step-by-step description of how to use the equipment; and then present the instructions to classmates so that all students understand the proper use of each device. Students may earn up to 100 points for the exercise.

Clinical Intervention Project:

Students will be put into to groups and given a patient profile containing a clinical outpatient dilemma. The student group dilemma will be either a traditional medication therapy management case, Equipp Initiative dilemma, Community Pharmacy Team Member of an Accountable Care Organization, Physician collaborative practice group or an RXALLY type performance network. Students will read the required readings on the clinical service model and identification of drug related problems in the ambulatory patient. Students may use appropriate drug information resources to critically evaluate the scenario. Students will write a SOAP like note outlining a plan to manage the drug related problems. The assessment must include problem solving for drug related problems including disease state management, formulary/cost management, prevention and reduction of ADRs, and drug/disease interactions. Each group will present their recommendations to their classmates so that the group can discuss potential solutions to the problem. Students may earn up to 100 points for the activity.

Third Party Insurance Formulary/Prior Authorization Project:

Students will be put into groups and given a case scenario of a patient with a prescription for a medication which is either a step therapy medication or requires prior authorization.
The student will need to identify and analyze the clinical relevance of the medication based on a clinical literature review of the medication. A bibliography of articles reviewed needs to be provided with the written project. A detailed product monograph needs to be done on the medication and written up to receive credit. The group needs to then identify what are the criteria for the medication to receive prior authorization for this specific insurance. A detailed product monograph, prior authorization criteria must be written by the group to receive credit. A 10 minute oral presentation will be done by each group and will present substantiated conclusions in regards to their patient receiving the medication that needs prior authorization. A rubric will be used to evaluate the work. Students may earn up to 100 points for the written assignment and presentation.

**Self-Care Newsletter and Presentation**

Each group will create and present a newsletter-type document based on an assigned self-care topic.

**Grading (Point Distribution and Policy):**

<table>
<thead>
<tr>
<th>Category</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Class Participation (8 @ 5 points)</td>
<td>40</td>
</tr>
<tr>
<td>Medical Device Demonstrations</td>
<td>100</td>
</tr>
<tr>
<td>Clinical Intervention Project</td>
<td>100</td>
</tr>
<tr>
<td>Formulary Project</td>
<td>100</td>
</tr>
<tr>
<td>Self-Care Newsletter and Presentation</td>
<td>50</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>390</strong></td>
</tr>
</tbody>
</table>

A = 90 – 100%
B = 80 – 89.9%
C = 70 – 79.9%
D = 60 – 69.9%
F = < 60%

*Faculty reserve the right to have unannounced quizzes, assign out of class work, etc. The point value for all such activities will be announced at the time of the assignments.*
<table>
<thead>
<tr>
<th>Date</th>
<th>Topic</th>
<th>Instructor(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>8/23/2016</td>
<td>Introduction to Course - The evolution and challenges of clinical practice in community pharmacy</td>
<td>Dr. Maher</td>
</tr>
<tr>
<td>8/30/2016</td>
<td>Overview of the Top Herbal/Complementary Products</td>
<td>Dr. Simmons</td>
</tr>
<tr>
<td>9/6/2016</td>
<td>Medical Device Demonstration Presentation</td>
<td>Dr. McConaha</td>
</tr>
<tr>
<td>9/13/2016</td>
<td>Strategies for Safely Dispensing the Top 200 Drugs Encountered in a Community Pharmacy</td>
<td>Dr. Skomo</td>
</tr>
<tr>
<td>9/20/2016</td>
<td>Managing Clinically Relevant Drug-Drug Interactions</td>
<td>Dr. Skomo</td>
</tr>
<tr>
<td>9/27/2016</td>
<td>Avoiding Drug-Disease Interactions</td>
<td>Dr. Stewart</td>
</tr>
<tr>
<td>10/4/2016</td>
<td>Patient Counseling in CP</td>
<td>Dr. Greco</td>
</tr>
<tr>
<td>10/11/2016</td>
<td>Documentation of Interventions in the Community Pharmacy</td>
<td>Dr. Greco</td>
</tr>
<tr>
<td>10/18/2016</td>
<td>Identifying Common Adverse Drug Reactions</td>
<td>Dr. Stewart</td>
</tr>
<tr>
<td>10/25/2016</td>
<td>MTM and Advance Clinical Initiatives in Community Pharmacy</td>
<td>Dr. Greco</td>
</tr>
<tr>
<td>11/8/2016</td>
<td>In class Group Intervention Presentation</td>
<td>Dr. Greco</td>
</tr>
<tr>
<td>11/15/2016</td>
<td>Understanding of Third Party Insurance in the Community</td>
<td>Dr. Maher (via video recording)</td>
</tr>
<tr>
<td>11/22/2016</td>
<td>No Class – Thanksgiving Break</td>
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<tr>
<td>11/29/2016</td>
<td>In Class Group Formulary Presentation</td>
<td>Dr. Maher</td>
</tr>
<tr>
<td>12/6/2016</td>
<td>Self-Care Newsletter and Presentation</td>
<td>Dr. McFalls</td>
</tr>
</tbody>
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CLASSROOM POLICIES

Please read, as these policies will be strictly enforced.

Attendance Policy:

Attendance at course lectures is highly recommended. Course lectures will provide the content that is essential for optimal performance in the course as well as in the future as a practicing pharmacist. Students are responsible for ALL class materials, whether or not they attend lectures. Lectures are used to supplement text materials, and may include concepts beyond those covered explicitly in texts.

Professional Classroom Behavior:

Classroom behavior is expected to be representative of a professional level program. The instructors endeavor to foster an environment of mutual respect and professionalism in the classroom. Disruptive behavior (loud or continuous talking, music, or other behaviors that disrupt learning) will not be tolerated. It is also expected that students will display proper respect to instructors and fellow students by turning off cell phones and pagers during class sessions. At any time, the instructors reserve the right to remove a student from a lecture for behavior that is deemed inappropriate, disrespectful, and/or distracting.

Policy for Late or Missed Assignments:

Classroom Participation

Students will be allowed to drop one participation score from their final grade. If a student has more than one absence from the class and it is excused (personal illness or death of an immediate family member), he/she will have the opportunity to do a brief written assignment as a make-up for participation. If a student has more than one absence from class and it is unexcused (work, job interview, or any other reason than stated above), he/she will receive a zero for participation for that class. The instructor should be contacted by the student (via telephone, email, or in person) before the class meets in order to discuss the absence.

Medical device demonstrations and Formulary/Clinical Intervention Project/Formulary Project:

Written portions of the activities are due to be posted in Blackboard by 4:00pm on the day of class when they are to be discussed. Anything submitted after 4:00pm that day will be considered late. For each 24 hour block of time that passes after 4:00pm on the due date, 2 points will be deducted from the written assignment score. If the assignment has not been posted within 1 week of the due date, the student will receive a zero for that written assignment. Presentations must be delivered in class on the scheduled date or the student will receive a zero for that portion of the activity. If a student misses the exercise
due to an excused absence, he/she can make up the assignment by completing an additional written exercise individually and submitting it to the coursemaster with an oral presentation within 1 week of the missed class. If the student does not turn in the assignment within 1 week of the missed class, he/she will receive a zero for that assignment.

**Presentation Tardiness Policy**

1. Tardiness is defined as arriving 30 minutes or more after the beginning of the exam. No student may leave the examination room prior to 30 minutes after the exam begins. Arrival less than 30 minutes after the exam begins does not grant extension of the exam time. Once tardiness is established, the missed exam policy, as stated in the syllabus, is in effect.

2. Tardiness must be reported by the coursemaster to the Assistant Dean for Professional Programs within 24 hours after the exam.

**Missed Presentation Policy**

1. If a student has missed an exam, he/she must contact the Assistant Dean (AD) on his phone [Dr. Livengood (412-396-5005)] as soon as possible to the scheduled exam time. Leave a message if no response and indicate which exam was missed, why, and expected date to return to campus, if appropriate. Also indicate how you can be contacted.
   a. The AD will immediately contact the faculty member(s) or course master. If the student contacts the faculty member first, they are to be instructed to contact the appropriate AD.
   b. The student will be required to submit evidence to corroborate the circumstances of their absence within a specified period of time.
   c. Failure to provide sufficient evidence to constitute an excused absence will result in a grade of zero for the missed exam.

2. Students who have been verified to have an excused absence for an exam, as determined by an AD, must be given an opportunity to make-up the exam.
   a. The make-up exam will typically be administered within two weeks after the missed exam.
   b. Failure of the student to take a make-up exam will result in a grade of zero for the missed exam.

3. Students who receive a ‘C’ grade, as determined by the syllabus, or better will be given a “pass” for the exam, and the score will not be used in calculating the student’s final grade. (For example, if there were a total of 5 exams for the course, then the student’s grade would be the average of 4 exam grades instead of 5.

4. Students who score less than a ‘C’ grade, as determined by the syllabus, on the makeup exam will NOT receive a “pass” grade. Instead, the score they earned on the make-up will be used in calculating the final grade for the course.

5. Unexcused absences, as determined by an AD, will automatically result in the grade of zero for the missed exam.

¹The term “Exam” includes lecture exams, laboratory assignments, IPA exam, or other course elements that require mandatory attendance.
Administrative Policies Governing All Courses

Exam Tardiness Policy
Missed Exams Policy
Grade Appeal Policy
Academic Integrity Policy
Services for Students with Disabilities
Audio/Visual Taping Policy

Students are required to review these policies in their entirety.
Complete copies of or links to the policies may be found on the Student Services Blackboard site, Policy and Procedures.