

# Cover Sheet: Request 11771

## PHA 5XXX: Ambulatory Care Pharmacy

### Info

Process	Course New Ugrad/Pro
Status	Pending
Submitter	Whalen, Karen whalen@cop.ufl.edu
Created	8/17/2017 11:13:56 PM
Updated	8/17/2017 11:40:47 PM
Description of request	This course is proposed as a new elective that will be available to third year pharmacy students.

### Actions

Step	Status	Group	User	Comment	Updated
Department	Approved	COP - Interdisciplinary Studies	Whalen, Karen		8/17/2017
Added Course Policies » PharmD Curriculum » 2017-8.pdf					8/17/2017
Added Ambulatory Care Syllabus _Spring 2018 final 8-16-17.docx					8/17/2017
College	Approved	COP - College of Pharmacy	Beck, Diane Elizabeth		8/17/2017
No document changes					
University Curriculum Committee	Pending	PV - University Curriculum Committee (UCC)			8/17/2017
No document changes					
Statewide Course Numbering System					
No document changes					
Office of the Registrar					
No document changes					
Student Academic Support System					
No document changes					
Catalog					
No document changes					
College Notified					
No document changes					

# Course|New for request 11771

## Info

**Request:** PHA 5XXX: Ambulatory Care Pharmacy

**Description of request:** This course is proposed as a new elective that will be available to third year pharmacy students.

**Submitter:** Whalen, Karen whalen@cop.ufl.edu

**Created:** 8/17/2017 11:13:56 PM

**Form version:** 1

## Responses

**Recommended Prefix**PHA

**Course Level** 5

**Number** XXX

**Category of Instruction** Advanced

**Lab Code** None

**Course Title**Ambulatory Care Pharmacy

**Transcript Title**Ambulatory Care

**Degree Type**Professional

**Delivery Method(s)**On-Campus

Off-Campus

Online

**Co-Listing**No

**Effective Term** Spring

**Effective Year**2018

**Rotating Topic?**No

**Repeatable Credit?**No

**Amount of Credit**2

**S/U Only?**No

**Contact Type** Regularly Scheduled

**Weekly Contact Hours** 15

**Course Description** Introduces students to the practice of ambulatory care pharmacy. The course empowers students to manage complex chronic illnesses and promote wellness in ambulatory patients. Students will also explore strategic planning for ambulatory care models, methods to secure collaborative and interdisciplinary ambulatory care practices, and certifications for the ambulatory care pharmacist.

**Prerequisites** Satisfactory completion of all Pharm.D. coursework prior to and including Block 17.

**Co-requisites** None

**Rationale and Placement in Curriculum** This is an elective course in the PharmD curriculum. The course requires application of knowledge learned in years 1 through 3 of the curriculum and prepares them for the year 4 Ambulatory Care Advanced Pharmacy Practice Experience.

**Course Objectives**

1. Collect and organize all patient-specific information needed by the pharmacist to prevent, detect, and resolve medication-related problems.
2. Design appropriate evidence-based, patient-centered medication, non-medication, health improvement, wellness, and/or disease prevention recommendations in a complex ambulatory patient.
3. Implement effective communication strategies (verbal and non-verbal) when interacting with a provider or patient in an ambulatory setting.

4. Discuss the role of evidence based guidelines to decide patient specific therapeutic goals in an ambulatory care setting.
5. Explain the provision of realistic limits of treatment outcomes in the ambulatory setting.
6. Identify the patients' roles in determining therapeutic goals in the ambulatory setting.
7. Demonstrate strategic planning for ambulatory care services.
8. Demonstrate behaviors consistent with trust given to the pharmacy profession by patients and other health care providers.
9. Compare and contrast various pharmacist certifications in an ambulatory care practice.
10. Identify strategies to become an exceptional residency candidate.
- 11.

Describe the transition from student to resident.

**Course Textbook(s) and/or Other Assigned Reading**1. AccessPharmacy, McGraw-Hill Professional, New York, NY (This resource is available through the UF Health Science Center Library.):

- a. Dipiro, J, Talbert R, Yee G, Matzke G, Wells B, Posey L. Pharmacotherapy – A pathophysiologic approach. McGraw-Hill Professional, New York, NY, 10th Edition, 2017. ISBN-13: 978-1259587481; ISBN-10: 1259587487 (Available in Access Pharmacy)
  - b. Other available resources include: Multiple textbooks, Calculators, Pharmacotherapy Casebook and Care Plans, Cases, Self-Assessments and Multimedia Videos
2. Readings from the primary literature will also be assigned where appropriate.

**Weekly Schedule of Topics** See syllabus for contact hours and details

Week 1: Clinical Week

Module 1 - Communication (lectures/readings)

Active learning (best practices in communication; interviewing a patient)

Module 2 - Collect, Assess, and Plan (lectures/readings)

Active learning (complex patients; clinical controversies)

Module 3 - Pharmacists' Patient Care Process (lecture)

Active learning (SOAP note clinical pearls)

Week 2: Administrative Week

Module 4 - Strategic Planning for Ambulatory Care Practice (lectures/reading)

Active learning (collaborative practice, billing)

Module 5 - Advanced Certifications in Ambulatory Care (lectures/readings)

Prepare for certification presentation

Module 6 - Residency Challenges (readings)

Active learning (residency interviews and expectations)

**Links and Policies**Response:

<http://curriculum.pharmacy.ufl.edu/current-students/course-policies/>

(This is included as an attachment to the UCC request)

These policies are reviewed with students at the beginning of the year during orientation and are the same across all PharmD courses in years 1-3.

**Grading Scheme** Physician Letter 10%

Telephone Encounter 10%

Written SOAP note 10%

SOAP (Verbal Short Patient Case Presentation) 10%

Protocol/Clinical Proposal 10%

Credential Presentation 5%

Quiz 10%

Participation 5%

Written Assignments (glucose logs, food diary, interview, medication calendar/Log, patient assistant form, cheat sheet, reflection paper) 30%

**Instructor(s)** Shannon Miller, PharmD, BCACP

Katherine Vogel Anderson, PharmD, BCACP

Eric Dietrich, PharmD

Erin St. Onge, PharmD

James R. Taylor, PharmD, CDE, BCACP

**PHA 5XXX: Ambulatory Care Pharmacy**  
**Spring 2018 Elective - Block 18**  
**2 Semester Credit Hours    [A-E Grading]**

**Course Purpose:**

The purpose of this course is to introduce students to the practice of ambulatory care. The first half of the course empowers the students to treat complex chronic illnesses commonly encountered in ambulatory patients by exploring the patient care process. Through a chronic disease state simulation, care will center on a partnership with the patient emphasizing a holistic approach to patient wellness and exploring obstacles commonly encountered. The second half will focus on strategic planning in an ambulatory care center. Methods to secure collaborative and interdisciplinary ambulatory care practices will be explored. In addition, various pharmacy certifications benefiting an ambulatory care pharmacist will be discussed.

**Course Faculty and Office Hours**

**Teaching Partnership Leader:**

Shannon A Miller, PharmD, BCACP

Email: [smiller@cop.ufl.edu](mailto:smiller@cop.ufl.edu)

Office: Orlando Campus, Suite

Phone: 407-313-7005

**Teaching Partners/Facilitators**

Katie Vogel Anderson, PharmD, BCACP

Email: [kvanderson@cop.ufl.edu](mailto:kvanderson@cop.ufl.edu)

Phone: 352-273-6240

Eric Dietrich, PharmD

Email: [ead1129@cop.ufl.edu](mailto:ead1129@cop.ufl.edu)

Phone: 352-542-0068

Erin L. St Onge, PharmD

Email: [stonge@cop.ufl.edu](mailto:stonge@cop.ufl.edu)

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James R. Taylor, PharmD, CDE, BCACP

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Phone: 352- 273-6239

**Academic Coordinator**

TBA

Office: HPNP 4312    Phone: 352-273-5558

Office Hours: by email and appointment

**Instructional Designer**

TBA

Office: HPNP 4309    Phone: 352-273-6523

Office Hours: by email and appointment

**This Course Will Prepare You to Perform the Following Activities Which the Public Entrusts a Pharmacist to Perform:**

EPA A1. Gather patient information (subjective and objective data).

EPA A2. Interpret patient data, and identify medication-related problems and develop a prioritized problem list.

EPA A3. Formulate evidence-based care plans. (In collaboration with an interprofessional team)

EPA A4. Provide counseling about medications and health wellness (including referral when there are social determinants of health and disparities).

EPA A6 Present and defend in an evidence-based manner a succinct oral patient summary and plan to a health care provider.

EPA B1. Form clinical/practice-related questions and retrieve evidence to advance patient care.

EPA D1. Demonstrate soft-skills in daily practice including interprofessional team collaboration (e.g., interpersonal communication, professionalism, cultural sensitivity, innovative mindset).

EPA E2. Assist patients and care givers to obtain their medications and related para-pharmaceuticals in an affordable manner that meets their healthcare needs. (Requires utilization of knowledge of private and public health insurance options)

## Course-Level Objectives

1. Collect and organize all patient-specific information needed by the pharmacist to prevent, detect, and resolve medication-related problems.
2. Design appropriate evidence-based, patient-centered medication, non-medication, health improvement, wellness, and/or disease prevention recommendations in a complex ambulatory patient.
3. Implement effective communication strategies (verbal and non-verbal) when interacting with a provider or patient in an ambulatory setting.
4. Discuss the role of evidence based guidelines to decide patient specific therapeutic goals in an ambulatory care setting.
5. Explain the provision of realistic limits of treatment outcomes in the ambulatory setting.
6. Identify the patients' roles in determining therapeutic goals in the ambulatory setting.
7. Demonstrate strategic planning for ambulatory care services.
8. Demonstrate behaviors consistent with trust given to the pharmacy profession by patients and other health care providers.
9. Compare and contrast various pharmacist certifications in an ambulatory care practice.
10. Identify strategies to become an exceptional residency candidate.
11. Describe the transition from student to resident.

## Pre-Requisite Knowledge and Skills

1. Satisfactory completion of all Pharm.D. coursework prior to and including Block 17.

## Classroom:

1. **Gainesville:** All Active Learning Sessions are held in MDL-1 (CG-069 to CG-88 on the Ground Floor of Communicore). Live Lectures are held in room G-312 of the HPNP building.
2. **Jacksonville & Orlando:** Class Sessions are posted in the campus calendar.

***ALERT about Schedule:*** Please routinely check your campus calendar and the Canvas course site for any messages about changes in the schedule including meeting dates/times, deadlines, and room changes.

***Note:*** The Instructor Contact Hours listed below only designate structured learning that involves a faculty member. As noted by UF policy, for each 1 hour of "Instructor Contact," students are expected to spend a minimum of 2 hours of additional time completing learning activities. Example: If a week has 7 hours of Instructor Contact, the student should plan on a minimum of 14 hours of additional study. Therefore, the typical student will devote 21 hours of effort to the course that week. Note this is a "typical" student – some students will find they devote less time and others will find need to devote more time.

## Course Outline

**ALERT about Schedule:** Please routinely check your campus calendar and the Canvas course site for any messages about changes in the schedule including meeting dates/times, deadlines, and room changes.

Date	Instructor	Related Learning Objective	Topic/Learning Activities	Instructor Contact Hours
Week 1	Dr Miller	1,2,	<p><b>Module 1: Clinical Week</b>  <b>Patient Care Process: Communication</b></p> <p><b>Online/Individual Study:</b></p> <ul style="list-style-type: none"> <li>• Watch: <ul style="list-style-type: none"> <li>• Video lecture –Course overview/ successful communication</li> <li>• Video - Empathy: The Human Connection to Patient Care  <a href="https://www.youtube.com/watch?v=cDDWvj_q-o8">https://www.youtube.com/watch?v=cDDWvj_q-o8</a></li> </ul> </li> <li>• Read: <ul style="list-style-type: none"> <li>• Communication readings –see Canvas</li> <li>• Review patient assistant program websites</li> </ul> </li> </ul> <p><b>In-class Activities:</b></p> <ul style="list-style-type: none"> <li>• Discussion: Approach to interviewing difficult patient/overcoming barriers/resources</li> <li>• Discussion: Best practices to communicate with patients and providers</li> <li>• Case Study: Practice written communication (gallery walk)</li> <li>• Interviewing a patient and caregiver</li> <li>• Retrieving a record from a pharmacy</li> <li>• Materials given to students for simulation</li> </ul> <p><b>Post-class assignment:</b></p> <ul style="list-style-type: none"> <li>○ Weeklong chronic disease state simulation (see Canvas for details)</li> </ul>	<p>2.5 hrs.</p> <p>2 hrs.</p>
	Dr St Onge Dr Taylor	1,3,4,5	<p><b>Module 2: Pharmacists' Patient Care Process : Collect, Assess and Plan</b></p> <p><b>Online/Individual Study:</b></p> <ul style="list-style-type: none"> <li>• <b>Watch:</b> Video - Clinical Controversies and Treatment of the Patient <ul style="list-style-type: none"> <li>• <b>Read Clinical Controversies</b></li> <li>• <b>Quiz</b></li> </ul> </li> </ul> <p><b>In-class Activities:</b></p> <ul style="list-style-type: none"> <li>• Discussion: Working up a complex patient in ambulatory setting</li> <li>• Debate: Clinical controversy</li> <li>• Case Study: Clinical Decision Making/Clinical Controversies</li> </ul>	<p>1 hr.</p> <p>0.5 hrs.</p> <p>4 hrs.</p>

Date	Instructor	Related Learning Objective	Topic/Learning Activities	Instructor Contact Hours
			<b>Post-class assignment:</b> <ul style="list-style-type: none"> <li>Pharmacist/Patient pair meet               <ul style="list-style-type: none"> <li>Patient: Discuss adherence and challenges with glucose log, food diary, med calendar, patient assistance forms</li> <li>Pharmacist: Discuss medication recommendations with the patient that you will provide to the physician</li> </ul> </li> <li>Written Assignment: Prepare a reflective paper from a patient perspective</li> <li>Written Assignment: Prepare a SOAP note</li> <li>Written Assignment: Prepare a letter to a physician with recommendations</li> <li>Individual meeting with faculty preceptor to present SOAP note</li> </ul>	2 hrs.
	Dr Miller Dr Vogel Anderson	1,3,4,5	<b>Module 3: Pharmacists' Patient Care Process</b> <b>Online/Individual Study:</b> Reading: Watch: Video Lecture - Obstacles to Treatment  In-class Activities: <ul style="list-style-type: none"> <li>Discussion: SOAP note clinical pearls ; Disease clinical pearls, and Do's/Don'ts of SOAP note writing and effective presenting</li> <li>Discussion: Presentation with faculty preceptor highs and lows</li> <li>Workshop: Patient/physician obstacles to treatment</li> <li>Discussion: Review of faculty top references to stay up to date/Wrap up end of clinical week</li> </ul> <b>Post-class assignment:</b> None	1 hr.  2 hrs.
Week 2	Dr Dietrich	6,7	<b>Module 4: Administration Week: Strategic Planning for an Ambulatory Care Practice</b> <b>Online/Individual Study:</b> <ul style="list-style-type: none"> <li>Watch: Video - Lecture practice protocols/collaborative interdisciplinary practice agreements</li> <li>Reading: Pharmacists as mid-level practitioners/providers. Ann Pharm 2011 (Pgs. 810-812)</li> </ul>	3 hrs.



Date	Instructor	Related Learning Objective	Topic/Learning Activities	Instructor Contact Hours
			<ul style="list-style-type: none"> <li>Reading: Pharmacist Billing for Ambulatory Pharmacy Patient Care Services in a Physician-based Clinic and Other Non-Hospital-Based Environments—FAQ (PGS 1-9)  <a href="http://www.ashp.org/DocLibrary/Policy/Ambulatory-Care/Pharmacist-Billing-in-Physician-Based-Clinic-FAQ.pdf">http://www.ashp.org/DocLibrary/Policy/Ambulatory-Care/Pharmacist-Billing-in-Physician-Based-Clinic-FAQ.pdf</a></li> <li>Written Assignment: Prepare at least 5 Interview questions for an ambulatory care pharmacist</li> </ul> <p><b>In-class Activity:</b></p> <ul style="list-style-type: none"> <li>Workshop: Strategies to establish a collaboration agreement</li> <li>Workshop: Assessing current ambulatory pharmacy services/billing</li> <li>Discussion: Overcoming practice site challenges</li> </ul> <p><b>Post-class assignment:</b></p> <ul style="list-style-type: none"> <li>Observe and interview an ambulatory care pharmacist</li> <li>Written Assignment: Submit interview questions/answers</li> <li>Written assignment: Prepare practice protocol or agreement or develop a proposal for a new clinic.</li> <li>May use information gathered from an interview to prepare an assignment</li> </ul>	2 hrs.
	Dr Miller Dr St Onge	8	<p><b>Module 5: Administration :Advanced Certifications in Ambulatory Care</b></p> <p><b>Online/Individual Study:</b></p> <ul style="list-style-type: none"> <li>Watch: Finding Your Niche in Ambulatory Care</li> <li>Reading: <ul style="list-style-type: none"> <li>Assigned credential websites</li> </ul> </li> <li>Overview of Certifications (All read): <a href="http://www.pharmacycredentialing.org/files/certificationprograms.pdf">http://www.pharmacycredentialing.org/files/certificationprograms.pdf</a> (pgs. 2-11; 19-25; 31-37; 41-42)</li> <li>Groups as Assigned:</li> <li>BPS Specialties : <a href="http://www.bpsweb.org/bps-specialties/ambulatory-care/">http://www.bpsweb.org/bps-specialties/ambulatory-care/</a></li> <li>BPS Specialties: <a href="http://www.bpsweb.org/bps-specialties/pharmacotherapy/">http://www.bpsweb.org/bps-specialties/pharmacotherapy/</a></li> <li>Certified Diabetes Educator: <a href="https://www.ncbde.org/">https://www.ncbde.org/</a></li> <li>Advanced Diabetes Management: <a href="https://www.diabeteseducator.org/">https://www.diabeteseducator.org/</a></li> </ul>	3 hrs.

Date	Instructor	Related Learning Objective	Topic/Learning Activities	Instructor Contact Hours
			<a href="http://rg/education-career/becoming-a-diabetes-educator">rg/education-career/becoming-a-diabetes-educator</a> <ul style="list-style-type: none"> <li>• Certification of Anticoagulation : <a href="http://ncbap.org/">http://ncbap.org/</a></li> <li>• Geriatric Certification: <a href="http://ccgp.org/">http://ccgp.org/</a></li> <li>• HIV Credentialing: <a href="https://aahivm.org/credentialing/">https://aahivm.org/credentialing/</a></li> <li>• Written Assignment: Prepare a 3 minute review of an assigned topic to share</li> </ul> <p><b>In-class Activity:</b></p> <ul style="list-style-type: none"> <li>• Present pharmacy specialty certifications</li> <li>• Discussion : Perceived need for certifications</li> </ul>	3 hrs.
	Dr Vogel Anderson	9	<p><b>Module 6: Administration : Residency Challenges</b></p> <p><b>Online/Individual Study:</b></p> <ul style="list-style-type: none"> <li>• Reading: ACCP “What is a residency and how do I get one?”</li> <li>• Reading: <b>Strategies for successfully navigating the pharmacy residency interview process.</b> AJHP pgs. 33-35.</li> </ul> <p><b>In-class Activity:</b></p> <ul style="list-style-type: none"> <li>• Discussion: Preempting student challenges</li> <li>• Discussion: Residency expectations for both the student and the preceptor</li> <li>• Discussion: Transitioning from student to resident</li> <li>• Discussion: Residency interviews</li> <li>• Wrap up end of course</li> </ul>	2 hrs.  2 hrs.
			Total Instructor Contact Hours	30 hr.

## Textbooks

### The following textbooks are required:

- AccessPharmacy, McGraw-Hill Professional, New York, NY (This resource is available through the UF Health Science Center Library.):
  - Dipiro, J, Talbert R, Yee G, Matzke G, Wells B, Posey L. Pharmacotherapy –A pathophysiologic approach. McGraw-Hill Professional, New York, NY, 10th Edition, 2017. ISBN-13: 978-1259587481; ISBN-10: 1259587487 (Available in Access Pharmacy)
  - Other available resources include: Multiple textbooks, Calculators, Pharmacotherapy Casebook and Care Plans, Cases, Self-Assessments and Multimedia Videos
- Readings from the primary literature will also be assigned where appropriate.

## Materials and Supplies Fees: None

## Student Evaluation & Grading

### Evaluation Methods and how grades are determined

Assessment Item	Rubric - APPENDIX	Percentage of Grade
Written Assignments (glucose logs, food diary, interview, medication calendar/Log, patient assistant form, cheat sheet, reflection paper). (RUBRIC)	A,F	30
Physician Letter (RUBRIC)	B	10
Telephone Encounter (RUBRIC)	C	10
SOAP (written) (RUBRIC)	D	10
SOAP (Short Patient Case Presentation) (RUBRIC)	E	10
Protocol/Clinical Proposal (RUBRIC)	G	10
Credential Presentation (RUBRIC)	G	5
Quiz		10
Participation (RUBRIC)	H	5
<b>Total</b>		<b>100%</b>

### Grading Scale

92.50-100%	A	72.50-76.49%	C
89.50-92.49%	A-	69.50-72.49%	C-
86.50-89.49%	B+	66.50-69.49%	D+
82.50-86.49%	B	62.50-66.49%	D
79.50-82.49%	B-	59.50-62.49%	D-
76.50-79.49%	C+	< 59.50%	E

**Rounding of grades:** Final grades in Canvas will be rounded to the 2<sup>nd</sup> decimal place. If the decimal is X.495 or higher, Canvas will round the grade to X.50. The above scale depicts this policy and grades are determined accordingly. Grade assignment is made using this policy and **no exceptions** will be made in situations where a student's grade is "close."

### Educational Technology Use

The following technology below will be used during the course and the student must have the appropriate technology and software.

1. ExamSoft™ Testing Platform
2. Canvas™ Learning Management System

For technical support, navigate to [Educational Technology and IT Support Contact Information](#) at this URL:  
<http://curriculum.pharmacy.ufl.edu/current-students/technical-help/>

### Pharm.D. Course Policies

The Policies in the following link apply to this course. Review the [Pharm.D. Course Policies](#) carefully, at this URL: <http://curriculum.pharmacy.ufl.edu/current-students/course-policies/>

## Faculty and Staff: Who to Contact

**Academic Coordinator/Education Coordinator:**

1. Absence requests (Only the Academic Coordinator handles absence requests)
2. Questions about dates, deadlines, meeting place
3. Availability of handouts and other course materials
4. Assignment directions
5. Questions about grade entries gradebook (missing grades, wrong grade)

**Teaching Partnership Leaders/Course Directors**

1. Issues related to course policies (absences, make up exams, missed attendance)
2. Questions about grades
3. Concerns about performance
4. Guidance when there are performance problems (failing grades)
5. General questions about content

**Other Teaching Partnership Faculty Members**

1. Questions about specific content

**Technical Support:**

For technical support related to eLearning, educational videos, mobile learning tools and other course-related issues, contact **College of Pharmacy Educational Technology Support** at:

- Gainesville Office Hours: HPNP Rm. 4309 or 4312, Monday – Friday, 8:30 am to 4:30 pm
- E-mail: [edu-help@ahc.ufl.edu](mailto:edu-help@ahc.ufl.edu)
- Phone: 352-273-9492

Contact the **University of Florida Computing Help Desk** for issues related to Gatorlink accounts, UF e-mail, ONE.UF, myUFL and other centralized UF systems, contact UF Computing Help Desk at:

- Website: <https://my.it.ufl.edu/CherwellPortal/UFITServicePortal>
- E-mail: [helpdesk@ufl.edu](mailto:helpdesk@ufl.edu)
- Help Wiki: <https://wiki.helpdesk.ufl.edu/>
- Phone: (352) 392-4357

**Appendix A. Rubric for Written Assignments of Ambulatory Care Elective**

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

Evaluator: \_\_\_\_\_

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

Written Assignments	Not Completed (0 pts)	Needs Improvement (1 pts)	Professionally Acceptable (3 pts)	Exceptional (5 pts)
<b>Glucose Log</b>	Assignment was not submitted	< 50 % of blood glucoses were logged. Glucose was not checked at appropriate times.	50-79 % of blood glucoses were logged. Glucose was mainly checked at appropriate times.	80-100 % of blood glucoses were logged at appropriate times.
<b>Food Diary</b>	Assignment was not submitted	< 50 % of food/drinks were logged.	50-79 % of food/drinks were logged.	80-100 % of food/drinks were logged.
<b>Interview</b>	Assignment was not submitted	Little to no questions were insightful or showed student was prepared.	Majority of questions showed student prepared.	All questions were insightful and showed student prepared.
<b>Medication Calendar/Log</b>	Assignment was not submitted	< 50 % of medications were logged or reason for why the dose was missed is recorded.	50-79 % of medications were logged or reason for why the dose was missed is recorded.	80-100 % of medications were logged or reason for

				why the dose was missed is recorded.
<b>Patient Assistant Form</b>	Assignment was not submitted	< 50 % of the assistant form was completed or all information was incorrect.	50-79 % of the assistant form was completed correctly or some of information was incorrect.	80-100 % of the assistant form was completed correctly.
<b>Cheat Sheet</b>	Assignment was not submitted	Sheet was completed with old guidelines, no algorithms included, and missing references.	Sheet was completed with some errors and outdated information but references are included.	Comprehensive medication information, up to date, algorithms present, and references included.
<b>Reflection Paper</b>	Assignment was not submitted	Some but not all questions were answered. Paper did not meet length requirement.	All questions were answered but student did not expand on topics. Or all questions answered in detail but paper did not meet length requirement.	All questions were answered and student expanded on topics. Paper met length requirement.

Glucose Log \_\_\_\_\_  
 Food Diary \_\_\_\_\_  
 Interview \_\_\_\_\_  
 Medication Calendar \_\_\_\_\_  
 Patient Assistant Form \_\_\_\_\_  
 Cheat Sheet \_\_\_\_\_  
 Reflection Paper \_\_\_\_\_  
 Total score (Max 30): \_\_\_\_\_

Comments for Student:

## Appendix B Rubric for Physician Letter

Evaluation Component	Needs improvement (0 pts)	Professionally Acceptable (0.5 pts)	Exceptional (1 pts)	Comments
<b>Introduction and Chief Complaint / History of Present Illness</b>	Information is inaccurate or missing reason for patient visit and HPI or information provided would make it unlikely another provider would have the same understanding of reason for letter.	All information provided is accurate but minor omissions are made or non-relevant information is included	Introduction, chief complaint, and HPI is complete, relevant and accurate in every detail	
<b>Patient Background and Current Medication List</b>	Patient Background, Social History, Allergies/ADRs, and Med List is incomplete or inaccurate	All information provided is accurate but minor omissions are made or non-relevant information is included	Patient Background, Social History, Allergies/ADRs, and Med List are complete and accurate in every detail	
<b>Assessment</b>	Assessment is inappropriate or is missing patient disease states, goals, and clinical relevance or assessment is inconsistent with established guidelines or other clinical sources.	Assessment is appropriate but minor omissions are made or some clinical rationale is inappropriate	Assessment is complete and accurate in disease states, goals, and clinical relevance and assessment includes rationale from clinical sources	
<b>Plan</b>	Plan is inappropriate or missing specific recommendations (drug, dose, frequency, follow up, and monitoring) or is not consistent with the assessment	Plan is appropriate but has minor omissions or plan contains further assessment information	Plan is complete and appropriate including drug, dose, frequency, follow up, and monitoring	
<b>Grammar/ Structure</b>	Letter contains more than three grammatical errors or is inconsistent with example letter structure	Up to three grammatical errors and structure consistent with example letter	No grammatical errors and structure follows example letter	
	Total			<u>      </u> 5 pts

## Appendix C. Rubric for Telephone Encounter

Evaluation Component	Needs improvement (0 pts)	Professionally Acceptable (0.5 pts)	Exceptional (1 pts)	Comments
<b>Introduction</b>	Introductory statement is not included	Introductory statement is incomplete.	Introductory statement is complete and acceptable	
<b>Goals of Therapy</b>	Goals of therapy are missing for one or more conditions or are not consistent with appropriate patient care	Goals of therapy are complete, but minor omissions are made	Goals of therapy are complete and accurate in every way	
<b>Recommendation and Follow up</b>	Suggestions and Monitoring Plan are not consistent with appropriate patient care or are inconsistent with established guidelines w/o explanation or is otherwise clinically inappropriate	Suggestions and Monitoring Plan are appropriate but have minor omissions or contain further goals/drug therapy problem information	Suggestions and Monitoring Plan are complete and appropriate in every detail following clinically relevant sources.	
<b>Grammar/ Structure</b>	Letter contains more than three grammatical errors or is inconsistent with example letter structure	Up to three grammatical errors and structure consistent with example letter	No grammatical errors and structure follows example letter	
<b>Use of Patient Appropriate Language</b>	Letter contains more than three instances where inappropriate terminology is utilized for patient communication	Letter contains up to three instances where inappropriate terminology is utilized for patient communication	No instances of inappropriate terminology exist in the letter	
	<b>Total</b>			<u>      </u> <b>5 pts</b>

## Appendix D. Rubric for Written Soap Note

Criteria	Ratings				Pts
	Excellent	Competent	Needs Improvement	Not Acceptable	
<b>COLLECT</b>					
Subjective <ul style="list-style-type: none"> <li>• CC</li> <li>• HPI</li> <li>• SH</li> <li>• Pertinent Drug History</li> <li>• Allergies</li> </ul>	Complete and concise narrative of pertinent patient information; required elements included (3 pts)	Well-organized and concise summary of patient information. Missing some patient reported information important for assessing conditions/medication therapy (2 pts)	Poorly organized and limited summary of pertinent information, excessive, non-pertinent information (1 pts)	Markedly Lacking detail required to make an accurate assessment; incorrect information included; copied and pasted from previous notes (0 pts)	____/3
Objective <ul style="list-style-type: none"> <li>• Current medications</li> <li>• Vitals</li> <li>• Labs</li> <li>• Diagnostic tests</li> </ul>	Complete and concise summary of pertinent information; no extraneous information included; Complete medication list included. (3 pts)	Partial but accurate summary of pertinent information OR incomplete medication list. (2 pts)	Poorly organized and limited summary of pertinent information OR extraneous objective information included (1 pts)	Markedly lacking detail required to make an accurate assessment OR inaccurate information included OR no medication list included (0 pts)	____/3
<b>ASSESS</b>					
Assessment of current medical condition(s) <ul style="list-style-type: none"> <li>• Condition</li> <li>• Goal</li> <li>• Current Status</li> <li>• Drug therapy problem</li> <li>• Therapeutic Alternatives</li> <li>• Succinct patient-specific rationale</li> </ul>	Complete prioritized problem list generated. No extraneous information listed. An evidence-based, patient-specific assessment is present for each problem. (3 pts)	All problems identified but not in correct order of importance. Some extraneous problems listed. An evidence-based, patient-specific assessment for each problem is present but not optimal. Incorrect categorization of drug therapy problem(s), goal(s) present and optimal (2 pts)	Main problem present but lower priority problems(s) missing; Non-optimal assessment of conditions OR missing current status of condition(s), goal(s) present but not optimal (1 pts)	Missing main problem of the case OR assessment may cause patient harm OR no assessment of clinical conditions included OR missing goal(s) (0 pts)	____/3
<b>PLAN</b>					
Treatment Plan <ul style="list-style-type: none"> <li>• Medication dose, route, frequency, duration</li> <li>• Monitoring</li> <li>• Critical Patient Counseling elements</li> <li>• Follow-up</li> </ul>	Specific and appropriate recommendation(s) of medications, patient counseling, time-specified monitoring and follow-up of all problem(s) listed. (3 pts)	Mostly complete and appropriate for each identified problem. Plan may not be optimal or lacking proper patient counseling or optimal timing of follow-up. (2 pts)	Plan is not consistent with the assessment OR lacks enough specificity for another provider to follow plan. (1 pts)	Suggested changes may cause patient harm; plan lacks patient education or any recommendation for follow-up or	____/3



				monitoring. (0 pts)		
STRUCTURE						
<ul style="list-style-type: none"><li>• <i>Spelling/grammar</i></li><li>• <i>Unsafe abbreviations</i></li><li>• <i>Note elements in proper place</i></li></ul>	All elements of the note are in the correct location. Problems listed in the same order in the assessment and plan. No grammatical or spelling errors. No unsafe abbreviations used. (3 pts)	Subjective, objective, assessment or plan information misplaced 1 time OR 1 or fewer grammatical/spelling errors. (2 pts)	Subjective, objective, assessment or plan information misplaced multiple times OR 1 or fewer unsafe abbreviations used (1 pts)	No clear organization to note OR 2 or more grammatical/spelling errors OR 2 or more unsafe abbreviations used. (0 pts)	____/3	
Global Assessment						
<i>Consider consistency throughout note, sufficient detail for another provider to evaluate rationale, appropriateness of judgment/rationale throughout. Overall, did the SOAP note serve its purpose, document the interaction and provide sufficient detail for another provider to know what is going on with patient?</i>		Excellent (3 pts)	Competent (2 pts)	Needs Improvement (1 pts)	Not Acceptable (0 pts)	____/3
Total					____/60	

## Appendix E. Verbal Component of Soap Note Presentation

Knowledge				
	Needs Improvement (0 pts)	Professionally Acceptable (1 pt)	Exceptional (2.5pts)	Points
Knowledge of Disease State	Limited understanding of the disease state. Cannot discuss expected signs, symptoms, & lab values even if not indicated in this case with preceptor guidance.	Demonstrates understanding of the disease state. Discuss expected signs, symptoms, & lab values even if not indicated in this case with preceptor guidance.	Demonstrates in-depth understanding of the disease state. Discuss expected signs, symptoms, & lab values even if not indicated in this case without preceptor guidance.	____/2.5
Knowledge of Drug Therapy	Limited understanding of the drug classes in the case. Cannot recommend alternative therapies for specific disease state with preceptor guidance.	Demonstrates understanding of the drug classes in the case. Recommends alternative therapies for specific disease state with preceptor guidance.	Demonstrates in-depth understanding of the drug classes in the case. Recommends alternative therapies for specific disease state without preceptor guidance.	____/2.5
Performance				
Patient Assessment	Cannot form a problem list for patient. Cannot determine desired and undesired therapeutic outcomes.	Identifies some (not all) therapeutic problems. Determines either desired or undesired therapeutic outcomes, but not both.	Identifies therapeutic problems without including unnecessary information. Determines both desired and undesired therapeutic outcomes.	____/2.5
Therapeutic Plan Development	Cannot form a problem list for patient. Cannot determine desired and undesired therapeutic outcomes.	Develops a therapeutic plan that includes a change in therapy (addition, deletion, or modification) if appropriate. Does not provide adequate monitoring recommendations.	Develops a therapeutic plan that includes a change in therapy (addition, deletion, or modification of therapy) if appropriate. Provides adequate monitoring recommendations.	____/2.5
Communication with Audience	Does not communicate well with audience. Cannot offer or justify answers to questions about the case.	Inconsistent communication with audience. May/may not be able to offer or justify answers to questions about the case.	Communicates well with the audience. Consistently offers and justifies prepared answers to the questions about the case.	____/2.5
Presentation Style	Speaks too quickly or too slowly. Displays distracting mannerisms. Relies on audience/faculty to answer questions related to presentation.	Almost always speak at proper pace with few distracting mannerisms. Attempts to answer questions before deferring to audience or faculty for assistance.	Speaks at a proper pace with no distracting mannerisms. Displays enthusiasm. Maintains good eye contact.	____/2.5
Comments:				____/15 pts
Total Grade				15 pts

## Appendix F. Chronic Disease State Reflection Questions

1. Provide a detailed description of your experience as a patient with multiple chronic disease states.
2. What were some of the challenges of this experience?
3. What impact did it have on your lifestyle?
  - a) Did you find it difficult adhering to specific dietary recommendations?
  - b) Were you able to follow the lifestyle modifications recommended to you?
4. Over the course of the week, how often did you forget to check your glucose and/or blood pressure or take medications?
  - a) What caused you to forget?
  - b) What strategies did you use to help yourself remember?
5. How could this experience help you empathize with patients who have multiple chronic disease states?

Reference Appendix A - "[REFLECTION PAPER](#)" for grading rubrics.

### Appendix G. Proposal / Certifications Rubric

Evaluation Component	Needs Improvement (0pts)	Professionally Adequate (5pts)	Exceptional (10pts)	Comments
<b>Clinic Proposal</b>	Proposal was unclear, had numerous grammar or misspellings, practice would not be successful, or student applied little effort.	Proposal was slightly unclear, few grammar or misspellings, practice would most likely succeed as proposed, and showed student put effort into proposal.	Proposal was clear, well written, practice would have a high chance of success as proposed, and showed student put detailed thought into proposal.	
<b>Credential Presentation</b>	Presentation was difficult to understand, included incorrect information, unorganized, and significantly out of time requirements.	Presentation was slightly difficult to understand, included majority of correct information, slightly unorganized, and just fell outside time requirements.	Presentation was clear, included correct information, had a logical flow, and followed time requirements.	
	<b>Total</b>			<u>          </u> <b>20 pts</b>

## Appendix H. Rubric for Assessing Student Participation in Class

This document will be used to provide an assessment of the student's overall participation at the end of the course. Instructors will keep track of student participation during each session.

	<b>Exemplary (Score = 5)</b>	<b>Proficient (Score = 3)</b>	<b>Developing (Score = 1)</b>	<b>Unacceptable (Score = 0)</b>
<b>Frequency of participation in class</b>	Student initiates contributions more than once in each recitation.	Student initiates contribution once in each recitation.	Student initiates contribution at least in half of the recitations	Student does not initiate contribution and needs instructor to solicit input.
<b>Quality of comments</b>	Comments always insightful and constructive; uses appropriate terminology. Comments balanced between general impressions, opinions and specific, thoughtful criticisms or contributions.	Comments mostly insightful and constructive; mostly uses appropriate terminology. Occasionally comments are too general or not relevant to the discussion.	Comments are sometimes constructive, with occasional signs of insight. Student does not use appropriate terminology; comments not always relevant to the discussion.	Comments are uninformative, lacking in appropriate terminology. Heavy reliance on opinion and personal taste, e.g., "I love it", "I hate it", "It's bad" etc.
<b>Listening Skills</b>	Student listens attentively when others present materials, perspectives, as indicated by comments that build on others' remarks, i.e., student hears what others say and contributes to the dialogue.	Student is mostly attentive when others present ideas, materials, as indicated by comments that reflect and build on others' remarks. Occasionally needs encouragement or reminder from T.A of focus of comment.	Student is often inattentive and needs reminder of focus of class. Occasionally makes disruptive comments while others are speaking.	Does not listen to others; regularly talks while others speak or does not pay attention while others speak; detracts from discussion; sleeps, etc.

# PharmD Curriculum

College of Pharmacy

(<http://curriculum.pharmacy.ufl.edu>)

## Course Policies

*Policies Across All 1PD-3PD Courses:*

[Class Attendance & Excused/Non-excused Absences \(#attendance\)](#)

[Make Up Assignments \(#make-up\)](#)

[Professionalism Assessments \(#professionalism\)](#)

[Device Readiness \(#device\)](#)

[Quiz & iRAT/tRAT Policies \(#quiz\)](#)

[Exam Policy \(#exam\)](#)

[Make-up Quiz/iRAT/tRAT/Exam Policy \(#make-up-exam\)](#)

[University Grading Policies \(#university-grading\)](#)

[Concerns, Appeals, and Complaints \(#concerns\)](#)

[Academic Integrity Policy \(#integrity\)](#)

[Psychomotor and Learning Expectations \(#psychomotor\)](#)

[How to Request Learning Accommodations \(#accommodations\)](#)

[Faculty and Course Evaluations \(#evals\)](#)

[Computer and Other Technology Requirements \(#computer\)](#)

[Expectations In Class and Other Learning Activities \(#expectations\)](#)

[Communications \(#communications\)](#)

[Student Complaint Process \(#complaints\)](#)

[Religious Holidays \(#religious\)](#)

[Counseling and Wellness Center \(#wellness\)](#)

[Emergencies \(#emergencies\)](#)

[Student Crisis \(#crisis\)](#)

[How to Access Services for Student Success \(#success\)](#)

[Faculty Lectures/Presentations/Course Materials Download Policy \(#downloads\)](#)

[Faculty and Staff: Who to Contact \(#contact\)](#)

## ()Class Attendance & Excused/Non-excused Absences

Attendance and punctuality are expected of pharmacists in practice since they are essential elements in maintaining quality patient care including patient safety. The Pharm.D. program has firm policies about attendance in order to instill good habits that will be needed in practice and also because class participation is essential for developing

the knowledge, skills, and attitudes essential for success as a pharmacist. Class attendance is mandatory for active learning sessions such as problem-solving sessions, case discussions, laboratory sessions, and other activities that the instructor designates as required attendance. Similar to the employment expectations in pharmacy practice, tardiness and unexcused absences are not tolerated.

Student attendance may be excused in the following situations: serious illness (3 or more consecutive class days requires a health care provider note/documentation), serious family emergencies, military obligation, severe weather conditions, religious holidays, and other reasons of that are of serious nature or unexpected. Absences from class for court-imposed legal obligations (e.g., jury duty or subpoena) **will be** excused. The Pharm.D. calendar allows for participation in special curricular requirements (e.g., professional meetings). Consideration will be given to unusual situations that are communicated to the Academic Coordinator prior to start of the semester.

Students who have an infectious illness that is in the contagious phase should not come to class. This is an excused illness. The grade book will show EX or excused for the grade of a missed quiz or iRAT and the course grade will be computed without consideration of these missing points unless a makeup is assigned. If the instructor assigns a makeup assignment, the EX grade will be replaced with the grade earned on the makeup assignment.

Both excused and unexcused absences are tracked across the curriculum. Students with repeated absences (excused and unexcused) either during a course or across courses will be referred to the Associate Dean for Student Affairs. The student may be requested to provide a higher level of document.

## Requests for Excused Absence

A request for an excused absence must be communicated prior to the class session by email. The email format below must be used for all communications about absences.

A request for an excused absence tardiness must be communicated prior to the class session by email. The email format below must be used for all communications about absences and tardy's. The email must be addressed to:

1PD = [absent1PD@cop.ufl.edu](mailto:absent1PD@cop.ufl.edu) (<mailto:absent2PD@cop.ufl.edu>)

2PD = [absent2PD@cop.ufl.edu](mailto:absent2PD@cop.ufl.edu) (<mailto:absent2PD@cop.ufl.edu>)

3PD = [absent3PD@cop.ufl.edu](mailto:absent3PD@cop.ufl.edu) (<mailto:absent3PD@cop.ufl.edu>)

This message will be received by the Academic Coordinator, distant campus and Education Coordinator. The Academic Coordinator will communicate the information to the Teaching Partnership Leader/Course Director. If email is not possible the student should call the Academic Coordinator (see phone number in syllabus). The Academic Coordinator will coordinate all communications about the absence request and therefore, serve as the point of contact about decisions and other information. Students are encouraged to call the Academic Coordinator for assistance with excused absences.

*The following format is recommended:*

**To:** (insert absent email address for your class year)

**Subject:** PHA XXXX – Excused Absence request

Dear Prof. \_\_\_\_\_,

Explain your request for an excused absence in a professional and polite manner.

Explain the nature of conflict and rationale for receiving an excused absence.

Thank the faculty member for their consideration of your special request.

Salutation,

Type in your full name and last 4 digits of UF-ID #, and Campus Name

Failing to follow this policy will render the absence unexcused. The expectation of prior notification will be exempted in situations where there was an emergency situation such as an accident or similar serious situation.

A request for an “excused absence” does not guarantee acceptance. No precedence can be drawn from any courses in the College of Pharmacy or any other college within University of Florida.

The student is responsible for follow up and confirming whether the absence is excused or unexcused.



## ()Make Up Assignments

Make-up assignments will be provided for any excused absences when the instructor deems a make-up is indicated. Make-up assignment(s) shall be permitted a reasonable amount of time to make-up any excused absence(s). Due to the block curriculum model, students are encouraged to complete the make up **within one-week of the missed session(s)**. If the situation leads to missing multiple class sessions and makeup by end of the course becomes difficult, the student and Teaching Partnership Leader/Course Director will meet with the Associate Dean of Student Affairs to develop options such as a makeup/remediation plan or course withdrawal. The time period for this make up will be consistent with the UF attendance policies.

Please refer to the University Attendance Policy at

<https://catalog.ufl.edu/ugrad/current/regulations/info/attendance.aspx>

(<https://catalog.ufl.edu/ugrad/current/regulations/info/attendance.aspx>)

## ()Professionalism Assessments

Professionalism is an educational outcome of the Pharm.D. program and therefore, is continually assessed. Professional behaviors and attitudes are evaluated at each annual milestone to determine progression and eventual readiness for graduation.

Unprofessional behaviors and attitudes will result in a deduction of points in the overall course grade in which the event occurred. Unexcused absences are considered to be unprofessional behavior. Other forms of unprofessional behavior include: lateness to class resulting in missing the start of the application exercises/discussions unless permitted by instructor, classroom behaviors that are distracting or disruptive to others (e.g., loud talking that is off topic, derogatory statements towards faculty or other individual, off-topic jokes, cat calls, slamming items against furniture), use of cell/smart phones during class, reading emails/messages, use of social media, leaving class early without informing the faculty or staff member, disrespectful behaviors (e.g., culturally insensitive statements, jokes, discussing topics that make others feel uncomfortable) with faculty, staff, or other students, and inappropriate discussion board or social media postings. For incidents of lateness to class, an assessment will be made about the seriousness of the tardiness and this will be used to determine the course of action.

Nonadherence to the dress code policy is also considered unprofessional behavior. Students who do not comply with the dress code will be assessed as unprofessional and also asked to leave class as noted in the dress code policy.

Across the academic year, unprofessional behaviors will be tracked across all courses. Each offense will result in a grade deduction in the course the unprofessional behavior occurred in. The maximum grade deduction that will be applied to each course is **5% from the final course percentage grade**. Repeated unprofessional behaviors will also be evaluated as an end of year milestone and can negatively impact curricular progression.

## ()Device Readiness

1. Students are required to have a laptop that is compliant with the entry-level program computer requirements – <http://it.pharmacy.ufl.edu/student/requirements/pharmd-req/> (<http://it.pharmacy.ufl.edu/student/requirements/pharmd-req/>)
2. The student is required to use a personal laptop for all quizzes, exams and other classroom learning activities that are electronically administered.
3. For quizzes and exams, if a student's laptop is not functioning the student will be provided a paper-based format up to two (2) times during a semester. Any additional administrations of a paper-based quiz/exam must be approved by Associate Dean for Curricular Affairs.
4. The student is expected to have a nonfunctioning laptop fixed immediately. If the student encounters problems with having a laptop available, the student should immediately contact the academic/educator coordinator and provide a plan for securing a functioning laptop and achieving compliance with the entry-level program computer requirements.

## ()Quiz & iRAT/tRAT Policies

1. Students must bring their laptop or tablet to class in order to participate in the quiz/iRAT/tRAT.
2. All quizzes/iRATs/tRATs are closed book unless otherwise noted by the instructor.
3. At the start of the quiz/iRAT, the access code will be provided. Students who miss getting the access code because they were late will not be allowed to take the quiz/iRAT and a grade of zero will be assigned unless there is an excused absence.
4. When a student completes a quiz/readiness-assessment test (RAT), they must close their laptop or turn over their tablet to indicate they are finished with the assessment. These devices should not be used until the instructor has announced that the quiz/RATs have ended.
5. Students who miss the iRAT may take the tRAT if they are in class at the start of the tRAT. (The Academic or Education Coordinator will assess the time of arrival and indicate to students who enter the classroom late whether they can join their team and participate in the tRAT.)
6. Students may not leave the room during the iRAT and tRAT.
7. All students must remain quiet during the iRATs and as other team are completing the tRATs .
8. For tRATs, a team may appeal the answer to a question to the instructor after the active learning session within 24 hrs. The appeal must be evidence-based and in writing. Such an appeal process is not applicable to quizzes, iRATs, and exams.
9. Videosurveillance/recording via technologies may be used during quizzes and iRATs/tRATs and may be used as evidence of academic dishonesty.

# Exam Policy

## *During any Exam:*

1. Students must wait outside the testing room until the proctor enters
2. The following items are not allowed to be accessed during the exam: cell phones, other electronic or digital devices including smart watches, pagers, photographic devices, and recording devices. Any watches must be placed on the top of the desk for proctor review.
3. All backpacks, purses or other bags should be kept away from the student's designated testing space and must not be accessed during the exam. Nonessential materials (e.g., gloves, sunglasses, umbrellas) are NOT allowed at the student's desk during examination periods. Please leave all nonessential materials outside of or in the front of the examination room. Items allowed at the student's desk are a water bottle, laptop charger, and laptop mouse.
4. Students must arrive and be seated promptly to be eligible to take the exam. To maintain exam security, students who arrive late for the exam will not be allowed to start the exam if they are more than 30 minutes late or if another student has left the room after seeing the exam. Students who have valid reasons for arriving late at the exam may request a makeup exam as outlined below.
5. There must be no talking or other disruptive behavior during the distribution or taking of the exam.
6. Calculators must meet the following requirements: Only nonprogrammable calculators are allowed unless the course has a specific policy.
7. If you encounter calculator problems (e.g., dead battery), contact the Proctor.
8. Other exam rules may be instituted during the progression of the course.
9. Once the exam commences, students may not leave the room without first turning in the exam. Once the exam is turned in, the examination period for the student is considered complete and the student must leave the examination room.
10. Videosurveillance/recording via technologies may be used during exams and may be used as evidence of academic dishonesty.
11. If there is urgent need to use the restroom, the Proctor will provide guidance.

*Failure to follow exam rules may be considered as evidence of academic dishonesty.*

## After an Exam

### *Policy across All 1PD-3PD courses where ExamSoft is used:*

1. Students are required to upload the encrypted exam file immediately after completing the exam. Technical issues that prevent this from occurring must be immediately reported to a proctor to record the incident.
2. Graded exam appeals:
  1. There are no exam appeals/rebuttals except in instances where the student deems there is a possible grading/grade calculation error. Following release of the exam grades, the student has 3 business days to contact the Teaching Partner and Academic Coordinator to clarify questions and appeal any possible grading errors.

## ()Make-up Quiz/iRAT/tRAT/Exam Policy

Makeup exams are given only under special circumstances and only for excused absences. (The policies related to requesting an excused absence also apply to makeup requests for quizzes/iRATs and exams.) If the student is unable to take a scheduled assessment, the Teaching Partnership Leader/Course Director and Academic Coordinator must be notified before the assessment or if it is an emergency situation, as soon as possible. The instructor will arrange an alternate deadline for the assessment consistent with the University examination policies.

The questions on the makeup assessment may be in the form of essay, short answer, or multiple-choice and will be the same level of difficulty as the assessment administered during the scheduled time. With the exception of highly extenuating circumstances, failure to follow the prescribed procedures or failure to be present for the make-up assessment will result in a grade of zero for that exam. No precedence can be drawn from any courses in the College of Pharmacy or any other college within University of Florida.

## ()University Grading Policies

Please visit the following URL to understand how the University uses the course grade to compute your overall GPA:

<https://catalog.ufl.edu/ugrad/current/regulations/info/grades.aspx>  
(<https://catalog.ufl.edu/ugrad/current/regulations/info/grades.aspx>)

## ()Concerns, Appeals, and Complaints

Students who have concerns about their evaluation of performance and/or student-faculty relations should review the Student-Faculty Handbook for guidance. The Student-Faculty Handbook also outlines the chain of command for any appeals and/or complaints.

## ()Academic Integrity Policy

Students are expected to act in accordance with the University of Florida policy on academic integrity (<http://www.dso.ufl.edu/sccr/honorcodes/honorcode.php> (<http://www.dso.ufl.edu/sccr/honorcodes/honorcode.php>)). This Honor Code specifies a number of behaviors that are in violation of this code and the possible sanctions. Furthermore, you are obliged to report any condition that facilitates academic misconduct to appropriate personnel. If you have any questions or concerns, please consult the course's Teaching Partnership Leader/Course Director.

Students are also expected to abide by the UF Honor Code.

The following is the UF Honor Pledge: *We, the members of the University of Florida community, pledge to hold ourselves and our peers to the highest standards of honesty and integrity by abiding by the Honor Code.*

On all work submitted for credit by students at the University of Florida, the following pledge is either required or implied: *"On my honor, I have neither given nor received unauthorized aid in doing this assignment."*

## ()Psychomotor and Learning Expectations

Psychomotor expectations relate to the ability to meet the physical demands of the pharmacy curriculum. Physically impaired students and students with learning disabilities such as hearing impairment, visual impairment, dyslexia or other specific learning disabilities such as sensory deficit or sensory-motor coordination problems should cooperate with the faculty and staff in addressing these circumstances in order to meet academic standards.

## ()How to Request Learning Accommodations

Students with disabilities requesting accommodations should first register with the Disability Resource Center (352-392-8565, [www.dso.ufl.edu/drc/](http://www.dso.ufl.edu/drc/) (<http://www.dso.ufl.edu/drc/>)) by providing appropriate documentation. Once registered with the Disability Resource Center, students will receive an accommodation letter which must be presented to both the instructor and academic coordinator to utilize classroom accommodations. Students registered with the Disability Resource Center who are requesting clinical accommodations for rotations or clinical experiences should contact their Learning Specialist in the Disability Resource Center. Students with disabilities should follow this procedure as early as possible in the semester.

Additionally, students at all College of Pharmacy campuses are expected to provide a copy of the accommodation letter of the Office of Student Affairs by email ([carswell@cop.ufl.edu](mailto:carswell@cop.ufl.edu)), fax (352-273-6219) or in person at G235 (Student Services Suite) of the Health Professions, Nursing and Pharmacy Building since some learning activities, exams, and assessments require additional assistance. The College of Pharmacy highly encourages that this procedure be completed before each course begins. Being proactive in this process will ensure that accommodations are in place for each student's learning activities, exams, and assessments because grades cannot be retroactively changed.

## ()Faculty and Course Evaluations

Students are expected to provide feedback on the quality of instruction in every course based on 10 criteria. These evaluations are conducted online at <https://evaluations.ufl.edu> (<https://evaluations.ufl.edu>) . Evaluations are typically open around mid-semester and need to be completed by the established deadline. Summary results of these assessments are available to students at <https://evaluations.ufl.edu> (<https://evaluations.ufl.edu>) .

## ()Computer and Other Technology Requirements

Students are required to meet the following computer and technology requirements: <http://pharmacy.ufl.edu/education/student-affairs/admissions/student-computer-requirements/> (<http://pharmacy.ufl.edu/education/student-affairs/admissions/student-computer-requirements/>)

ExamSoft® is used for administration of exams and students are required to follow the procedures that are established for exam administration. Students must bring a laptop to class to complete exams and this laptop must meet the computer and technology requirements established by the College. Students must also complete mock exams prior to the actual exam to assure that all computer features are supported by ExamSoft®.

## ()Expectations In Class and Other Learning Activities

Students are expected to:

- Be diligent and timely in studying the course material.

- Be on time for class sessions, quizzes, and exams.

- Be prepared for group discussions and conference calls.

- Do your own work.

- Actively collaborate with peers when assigned to groups.

- Inform the Academic Coordinator about an absence from an exam or other assigned class activity at least 24 hours prior to the event.

- Dress appropriately for class sessions or clinically related activities.

- Turn cell phones and other electronic communication devices to silent mode during a class session or phone conference. Special circumstances may be discussed with professor (i.e. family emergency phone calls, etc).

- Be quiet during class sessions including peer presentations.

- Be focused and avoid distractive behaviors in class.

- Appropriately use the computer in class, i.e., do not be looking at unrelated information on the web site during class.

- Participate in class or group discussions.

Raise one's hand to be recognized before making a comment during a class session.

Be respectful to the teacher.

Be respectful to fellow students in discussions.

Be courteous, respectful, and civil when using discussion boards.

Focus on the course learning activities; it is not respectful to study for other coursework during the class session.

Address faculty with the appropriate title and name, i.e., Dr. (last name) or Professor (last name).

Address concerns about performance or course material directly with the Teaching Partnership Leader/Course Director.

Seek assistance with academic or personal difficulties as soon as possible.

## ()Communications

### Course–related Communications

Students with questions about course content should post questions on the discussion board. As noted in the attendance policy, communications about class attendance/absence should be emailed to the email address appropriate for your class year (i.e., [absent1PD@cop.ufl.edu](mailto:absent1PD@cop.ufl.edu), [absent2PD@cop.ufl.edu](mailto:absent2PD@cop.ufl.edu), [absent3@cop.ufl.edu](mailto:absent3@cop.ufl.edu)). The student may email the course leader for any other needs that are personal in nature (e.g., request for accommodations, personal issues such as illness, emergencies).

### Faculty member Response Time

1. The course faculty will work to respond to discussion board postings and email communications within 24 hours of the posting between Monday and Friday 12N. Responses on weekends and holidays will be sporadic. (On weekends when assignments are due, students are advised to post questions before 12 Noon on Friday.)

### Email Communications

1. When communicating with faculty via email, the subject line needs to include the course number & title.
2. At the end of the email, in addition to listing your name, list your academic year and campus/site.

### Discussion Board Policy

The purpose of the discussion board is to provide a venue for you to enhance your learning. This is accomplished by having a thread for each module where you can post questions to the course faculty. (A thread is a single link that is devoted to a topic.) The discussion board is also a place where your instructors may post virtual cases for you to work up.



Such interaction on the discussion boards with the instructors will allow you to clarify your questions and apply what you are learning in other parts of the course. The goal of these discussions is to help you learn.

#### Students Netiquette on the Discussion Board:

1. Post your comment on the correct discussion thread. If you have a question about Module 1, post it in the discussion thread for Module 1 and not the Module 2 thread.
2. The discussion board is not a place to complain. Complaints should instead be directed directly to the Teaching Partnership Leader/Course Director via a professional email. This allows the Teaching Partnership Leader/Course Director to quickly address your concern without causing distraction to other students who have limited time and want to focus on learning.
3. Use “netiqu” If you have never learned “netiquette” – please visit the following URL: <http://www.albion.com/netiquette/corerules.html> (<http://www.albion.com/netiquette/corerules.html>) If you follow the rules of netiquette described in this URL, you will avoid posting an embarrassing or inappropriate comment.
4. The discussion board has been designed to allow you a place to ask further questions on the material to clarify any confusion, gain a deeper understanding of the material, or ask general course questions. A question you might see on a discussion board is “What do I need to study for the exam?” Please reflect on how this question can be perceived by your lecturing faculty as well as your fellow classmates. Rewording the question to address a specific topic would be more appropriate. For example, “Dr. XX, you listed numerous side effects for drug XX on slide XX. Of those, what are the most relevant that we could expect to occur and monitor for in clinical practice.” The type of material that is covered in these classes is material that is important for patient care. All of this material is important. There are variations in courses, but please make use of your syllabus since there might be guidance on how to prepare for various exams in your classes.
5. In most situations, lectures are released as planned by the Teaching Partnership Leader/Course Director. Clarifying at the beginning of a semester on the planned release date/time, if not posted in the syllabus, is appropriate. Continual posts on the discussion board on weekly basis can become overwhelming for the teaching partners as well as your fellow students.

#### Question/Answer sessions in live class sessions

Time is usually reserved at the end of the class for questions regarding the material to clear up any confusion or expand on material covered in the particular section. This is a valuable time for all students and since time is limited, the questions should focus on the topics at hand. Questions such as, “What material will be covered on an upcoming exam?” or, “Do we need to know dosing for the exam?” are inappropriate during this time period. In our profession, all material is important. However, if this question does need to be asked, please consider using the discussion board to clarify any specific exam questions.

#### Student Complaint Process

Concerns about the course (e.g., course requirements, quizzes, exams) should first be discussed with the appropriate course instructor and the Teaching Partnership Leader/Course Director. If a satisfactory resolution is not achieved, the student may



appeal to the Associate Dean for Curricular Affairs and Accreditation who will also engage other individuals depending on the request (e.g., campus dean, department chair, Associate Dean for Student Affairs). If the student finds the decision unsatisfactory, the student may appeal to the Dean of the College of Pharmacy. If this decision is unsatisfactory, the student may appeal to the Ombuds office ([https://www.dso.ufl.edu/documents/UF\\_Complaints\\_policy.pdf](https://www.dso.ufl.edu/documents/UF_Complaints_policy.pdf) (PDF) ).

## **()Religious Holidays**

Please see the University policy on attendance and religious holidays: <https://catalog.ufl.edu/ugrad/current/regulations/info/attendance.aspx#religious> (<https://catalog.ufl.edu/ugrad/current/regulations/info/attendance.aspx#religious>)

## **()Counseling and Wellness Center**

Students who are experiencing issues and events that could adversely affect academic performance and personal health should be encouraged to meet with the Teaching Partnership Leader/Course Director or Associate Dean for Student Affairs for guidance. Students in the Gainesville area may contact the UF Counseling and Wellness Center for Gainesville students (352-392-1575; <http://www.counseling.ufl.edu> (<http://www.counseling.ufl.edu/>)). Students outside the Gainesville area may obtain similar contact information from the campus/program administrator.

## **()Emergencies**

Call the University Police Department for emergencies: 392-1111 or 9-1-1

## **()Student Crisis**

Your well-being is important to the University of Florida. The U Matter, We Care initiative is committed to creating a culture of care on our campus by encouraging members of our community to look out for one another and to reach out for help if a member of our community is in need. If you or a friend is in distress, please contact [umatter@ufl.edu](mailto:umatter@ufl.edu) (<mailto:umatter@ufl.edu>) so that the U Matter, We Care Team can reach out to the student in distress. A nighttime and weekend crisis counselor is available by phone at 352-392-1575. The U Matter, We Care Team can help connect students to the many other helping resources available including, but not limited to, Victim Advocates, Housing staff, and the Counseling and Wellness Center. Please remember that asking for help is a sign of strength. In case of emergency, call 9-1-1.

Students who are experiencing issues and events are also encouraged to contact their local crisis center. For Alachua County the Crisis Center number is 352-264-6789; for Jacksonville and Duval County 904-632-0600 and toll free for Northeast Florida at 1-800-346-6185; and for Orlando 407-425-2624.

The following national call numbers are also available for students who reside outside of the main COP campuses: a) 1-800-273-8255, and b) 1-800-784-2433.

## ()How to Access Services for Student Success

Students who need guidance for course success or who are having academic difficulty should contact the Teaching Partnership Leader/Course Director. In addition, students are encouraged to contact their advisor or Campus Director/Associate Dean for Student Affairs for assistance.

## ()Faculty Lectures/Presentations/Course Materials Download Policy

Photography, audio-visual recording, and transmission/distribution of classroom lectures, course materials, and discussions is prohibited unless there is expressed written permission.

Recorded lectures and class sessions are authorized solely for the purpose of individual or group study with other UF College of Pharmacy students enrolled in the same class. Such recordings may not be reproduced, shared, or uploaded to publicly accessible web environments. Students who do not adhere to this policy will be considered to be breaching COP copyrights and/or FERPA law.

## ()Faculty and Staff: Who to Contact

### Academic Coordinator/Education Coordinator:

1. Issues related to course policies (absences, make up exams, missed attendance)
2. Absence requests (Only the Academic Coordinator handles absence requests)
3. Questions about dates, deadlines, meeting place
4. Availability of handouts and other course materials
5. Assignment directions
6. Questions about grade entries gradebook (missing grades, wrong grade)
7. Assistance with ExamSoft® (Distant campus students may contact Education Coordinator for use of SofTest and assistance during exams. The Academic Coordinator is the contact person for issues related to grading and posting of ExamSoft grades.)

## Teaching Partnership Leaders/Course Directors

1. Questions about grades
2. Concerns about performance
3. Guidance when there are performance problems (failing grades)
4. General questions about content

## Other Teaching Partnership Faculty Members

1. Questions about specific content

## Technical Support

For technical support related to eLearning, educational videos, mobile learning tools and other course-related issues, see [College of Pharmacy Technology Support](http://curriculum.pharmacy.ufl.edu/current-students/technical-help/) (<http://curriculum.pharmacy.ufl.edu/current-students/technical-help/>).