

Introductory Pharmacy Practice Experience Program Manual

A Guide for Preceptors



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Dear Husson University-School of Pharmacy Preceptors,

On August 30, 2010, I had the privilege of observing the start of our Pharmacy Lab course for our student pharmacists (P1's) at the School of Pharmacy, Husson University. Our student pharmacists' very 1st exercise in the Practicum of Pharmacy was to discuss the concept of "Professionalism" in small group format. They eagerly set to work and later made presentations about their discussions. Here is a tiny sample of the terms they used describing a true Professional:

"trustworthy, competent, patient, confident, caring, accountable, dedicated, compassionate, knowledgeable, hard-working....." and the list goes on.

When I asked one of the student pharmacists who they thought served as a role model for such positive attributes, the response was quickly "a Pharmacist I know". Attempting to be "teacher's pet", perhaps?—could be. Yet, with that quick response, the student pharmacist really seemed straightforward and sincere. Made me feel good. Better yet, the person I queried was from the Maine area, indicating that their concept of 'Professionalism' emanated from one of our outstanding area pharmacists.

All of you, as Preceptors for our student pharmacists in the Experiential Education curriculum at the School of Pharmacy at Husson University, should feel great, too. As Preceptors, you have shown commitment, energy and enthusiasm right from day one. You have already impacted and will readily continue, I am sure, to contribute and help mold our student pharmacists by your mentoring, sharing of best practices, innovative thinking and leadership. Our student pharmacists may one day forget many of the facts taught in our classrooms, but they will surely remember the valuable lessons learned from their interactions with their Preceptor.

Experiential education is a fundamental part of our pharmacy program at Husson University. You, as dedicated Preceptors, are crucial to the success of our future pharmacists---and for this, I and Dr. Abdelmageed are grateful to you! We are genuinely privileged to be able to work with all of you this coming year.

Respectfully,

Ronald C. Reed, B.S. PharmD
Professor and Chair, Dept. of Pharmacy Practice
School of Pharmacy, Husson University

PREFACE

Husson University has an academic schedule that fits well with incorporating IPPEs into the first three years of the professional program. Specifically, it has a January term (J-term) between the Christmas holiday and spring semester. There are 120 hours available each J-term, providing more than enough time for students to meet the ACPE 300 hour minimum IPPE requirements during the three years of the didactic curriculum.

The Pharmacy Practice Experiential Education program is designed to provide experiential education opportunities through supervised participation in pharmacy practice settings. The rotations were developed in response to the mission and vision of Husson University School of Pharmacy, the mandates of the Maine State Board of Pharmacy regarding Internship requirements, and the “Standards 2007” set forth by the Accreditation Council for Pharmacy Education (ACPE). Students will receive both academic credit and Internship hours toward the 1,500 total hours required for licensure by the Maine State Board of Pharmacy.

The primary goal of the Pharmacy Practice Experience is to make the transition for our students to become avid practitioners in a safe and effective manner under the guidance and mentorship of a licensed pharmacist. This transition is not a passive process but rather requires active participation and communication. The student should recognize that the preceptor’s responsibility is to guide the student’s thought process through real life situations and to pass on to the students critical thinking techniques used in making a sound therapeutic decision. It should also be recognized that the optimum learning experience requires mutual respect and courtesy between the preceptor and student. All criticism or constructive feedback from the preceptor should be completed in private and should be viewed by the student as a means of facilitating learning.

One of the primary purposes of the IPPE curricular components is to facilitate the student’s transition from a didactic learner to a competent, caring professional, who provides patient-centered care and assures optimal patient outcomes. During this transition, the student is expected to acquire the knowledge, skills, attitudes, and values that are important to the pharmacy profession.

Husson University School of Pharmacy would like to extend a warm welcome to you the preceptor and very heartfelt thank you for taking an active part in our students’ educational process. Your comments and suggestions are always welcome. Please feel free to contact the Director of Experiential Education with any ideas, questions, or concerns.

I- Introduction:

This manual represents a guide for the Introductory Pharmacy Practice Experience (IPPE) at Husson University School of Pharmacy. It is intended to be used as a planning tool, guide, form repository, and reference for preceptors. Through the collaborative efforts of preceptors, students, the Director of Experiential Education, administrative team, and faculty, an academically sound, practice experience can be provided that facilitates achievement of the competencies expected in pharmacy practice.

II- School's Mission:

The mission of the Husson University School of Pharmacy (HUSOP) is an extension of the institutional mission stating: "Graduates of the Husson University School of Pharmacy will be capable of providing patient- and population-centered pharmaceutical care. The educational outcomes of the program encompass disease management, health promotion, systems management, communication, problem solving, and professionalism. The School of Pharmacy is committed to delivering these outcomes by learned and diverse faculties who excel in teaching and contribute to the profession and community through scholarly activities and service."

III- Department of Pharmacy Practice Goals:

The Department of Pharmacy Practice goals embrace:

- a) Developing in every student an outcomes-based understanding of pharmacotherapy and problem solving
- b) Developing in every student the ability to communicate their pharmacotherapy related expertise to patients and other healthcare providers
- c) Providing students with an understanding of the roles and responsibilities of pharmacists in the interdisciplinary healthcare delivery system
- d) Reinforcing the role of the pharmacist as an independent and lifelong learner
- e) Developing faculty and preceptor expertise in the delivery of didactic and experiential education through the use of alternative learning strategies
- f) Creating an environment conducive to personal and professional growth for all faculty and preceptors within the department
- g) Providing leadership for the advancement of the pharmacy profession and the implementation of pharmaceutical care in the State of Maine
- h) Contributing to the advancement of the profession through active engagement in scholarly activities and service

IV- Preceptor Requirements:

All preceptors must....

- a) Be licensed and are in good standing with the State Board of Pharmacy
- b) Have submitted a completed Preceptor Affiliation Agreement and been approved by the Director of Experiential Education as a preceptor.
- c) Be willing and enthused to be a role model and a mentor to students

- d) Have at least 2 years of full-time pharmacy practice experience or experience in current position for non-patient care elective rotations
- e) For Acute General Medicine or a Pharmacy Specialty elective (cardiology, infectious disease etc.) the preceptor must have formal advanced training, such as residency or fellowship, in addition to the minimum 2 years experience mentioned above.
- f) Be willing to assist students in achieving stated objectives of rotation
- g) Be willing to assess student performance

V- Experiential Education:

Experience is not what happens to a man; it is what a man does with what happens to him.

- Aldous Huxley, Texts & Pretexts: Introduction

A- What is experience¹?

Experience refers to the nature of the events someone has undergone. Experience is what is happening to us all the time - as we long we *exist*.

- Experience, used in the present tense, refers to the subjective nature of one's current existence. Humans have a myriad of expressions, behaviors, language, emotions, etc. that characterize and convey our moment-to-moment experiences.
- Experience, used in the past tense, refers to the accumulated product (or residue) of past experiences e.g., after many hours of training and practice building furniture out of wood, we now consider him/her to be an *experienced* wood craftsman.

These two emphases of the word *experience* (present and past) emerge from a critical connection and philosophical issue: To what extent do one's past experiences influence one's current and future experience?

The idea that past experiences influence future experiences was termed continuity by John Dewey, an American psychologist, philosopher and educator. All experiences, argued Dewey, impact on one's future, for better or worse. Basically, cumulative experience either shuts one down or opens up one's access to possible future experiences.

B- What is experiential learning¹?

Experiential learning has come to mean two different types of learning:

1- Experiential learning by yourself

Learning from experience by yourself might be called "nature's way of learning". It is "education that occurs as a direct participation in the events of life". It includes learning that comes about through reflection on everyday experiences. Experiential learning by

yourself is also known as "informal education" and includes learning that is organized by learners themselves.

2- Experiential education

Experiential education is a philosophy and a methodology in which educators purposefully engage with learners in direct experience and focused reflection in order to increase knowledge, develop skills, and clarify values². It is often contrasted with *didactic education*, in which the teacher's role is to "give" information/knowledge to student and to prescribe study/learning exercises which have "information/knowledge transmission" as the main goal. Principles of experiential learning are used to design *experiential education* programs.

An experiential educator's, or a preceptor's, role is to organize and facilitate direct experiences of phenomenon under the assumption that this will lead to genuine (meaningful and long-lasting) learning. This often also requires preparatory and reflective exercises.

C- What is precepting³?

Precepting can be defined as teaching others the art and science of pharmacy practice in a health care setting (community pharmacy, hospital, clinic, etc.) with the goal of developing competent practitioners. Preceptors assure that their students attain competency at the practice of pharmacy much in the same way that master craftsmen supervise apprentices in developing the skills of their trade.

Elements of precepting

- Partnership
- Role modeling
- Education
- Coaching
- Evaluation
- Professionalism
- Teamwork
- Investment
- Negotiation
- Guidance

Preceptor core values

- Professionalism
- Desire to educate and share knowledge with students
- Willingness to mentor
- Time commitment for precepting
- Respect for others
- Willingness to work with a diverse student population

D- Necessary Skills to Be an Effective Preceptor³:

Here is an excerpt from Chapter 4 of ASHP- Preceptor's Handbook for Pharmacist, a useful tool for both new and well-seasoned preceptors:

1- Communication skills:

This is the most important ability for preceptors. Effective preceptors will communicate in a way to ensure that the student understands the information being presented.

An understanding of the basic communication model is important and applicable in all situations and will assist you, the preceptor, in becoming an effective communicator.

The basic model consists of five main components:

- Sender
 - The one that initiates the communication.
 - Potential problem: asking a closed ended question and wanting an open-ended question response. Scenario:
 - *Do you know the cross hypersensitivity between Penicillins and Cephalosporins?*
 - vs.
 - *What is the cross hypersensitivity between Penicillins and Cephalosporins?*
- Message
 - The most common place for miscommunication to occur.
 - The element that is actually transmitted from one individual to another through various means:
 - Facial expressions
 - Gestures
 - Body language
 - Posture
 - Eye contact
 - Tone of voice and inflection
- Receiver
 - The one that receives the message and tries to decode it to determine what is being asked or requested.
 - Potential problem: when there is no congruence between the *verbal* and *nonverbal* aspects of the message; i.e. the sender transmits a message saying one thing *verbally* and another *nonverbally*.
- Feedback
 - Receiver and sender change roles.
 - Can be both *verbal* and *nonverbal*
 - Makes communication a two-way process.
 - The place where miscommunication can be corrected.
 - Can be used to determine the level of understanding of the receiver
 - Must be provided to students throughout the rotation.
- Barriers
 - Anything that prevents effective communication and transmission of the message.
 - Can be physical, such as counters, talking on the phone, email and other forms of electronic communication.
 - Prevent receiver and sender to read and decode nonverbal communication.
 - Potential problem: e-mail messages are one-dimensional and can give the message a completely different meaning than the sender intended.



Fig.1 The interpersonal communication model

2- Questioning and listening skills:

- The key to getting the desired response is directly related to the type of question asked; e.g. the above example of asking a close-ended question and desiring an answer for an open ended question.
- When feedback is used effectively additional questions can be used to elicit the desired information.

Table 1- Types of questions	
Closed-ended	<i>Have you ever prepared a TPN solution?</i>
Open-ended	<i>What are your goals for this rotation?</i>
Leading	<i>How would you counsel this patient?</i>
Probing	<i>What else could be done to minimize the side effect profile of the current regimen?</i>

- “Active” listening takes focus and desire on the part of the listener. The listener must comprehend and evaluate the message prior to formulating a response.
- Potential problem: “selective” listening; nodding and mumbling “uh-huh”, “hmm” and “okay”. It conveys the message that the listener is not interested and the sender will stop asking questions.

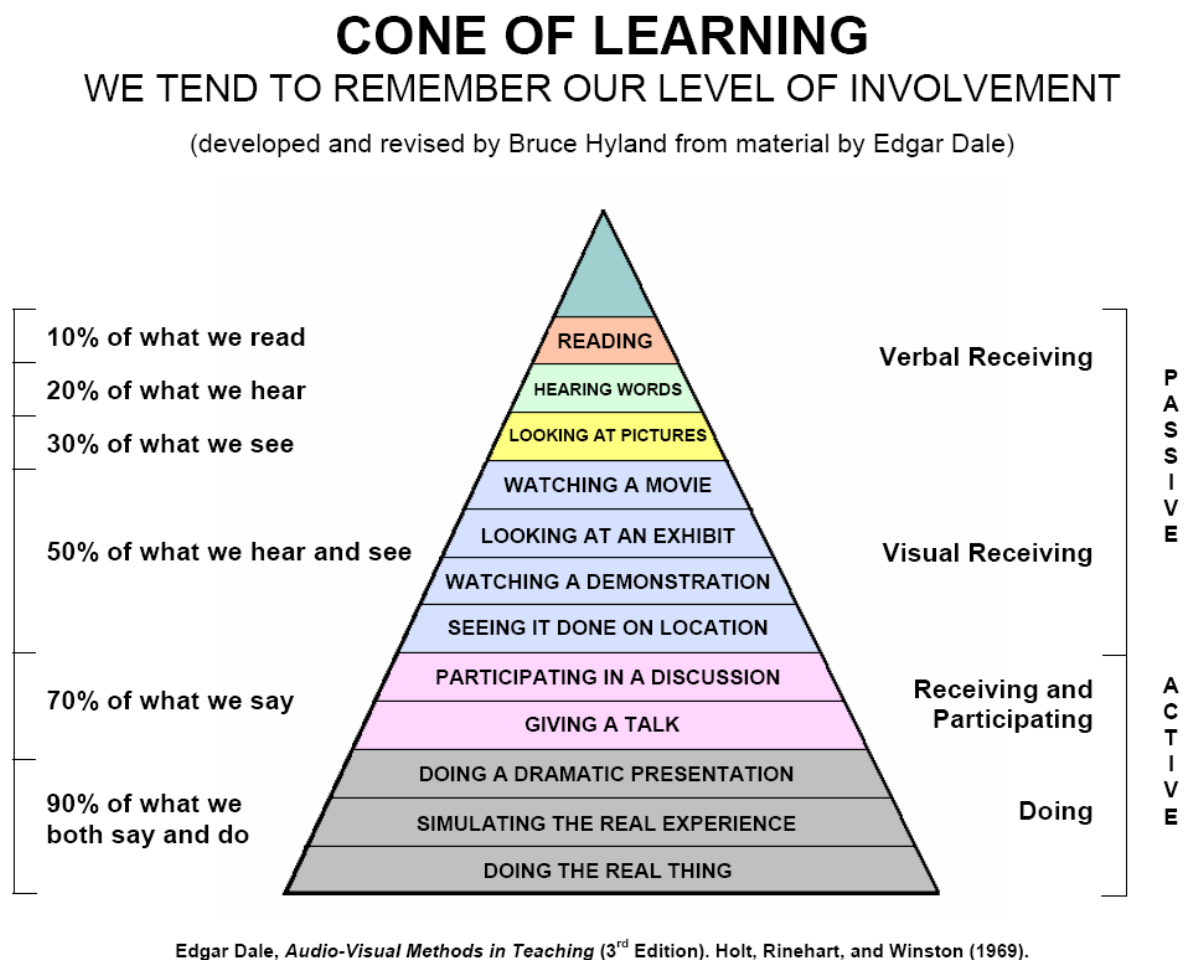
3- Professional relationship skills:

- Friendliness:
 - Your friendliness will make other people more comfortable coming to you with their medication-related questions or to ask your assistance on drug-related topics.
- Optimism:
 - Maintaining an optimistic confidence in the abilities of yourself and coworkers will often cause people to work even harder to live up to your expectations.
- Trust:
 - Trust occurs when others respect your judgment and know that they can relate on you for credible information that can be directly applied without the need for questioning.

- Integrity:
 - Integrity goes hand in hand with trust; once integrity of character has been developed it is much easier to gain trust and people will rely on you to provide honest and consistent answers and that you will be accountable for your actions.

4- Active vs. Passive learning:

- Today's students respond well in an active learning environment. They need to actually try out and apply the information that is being taught.



5- Leadership skills:

- Preceptors should be recognized as leaders within their practice sites and within the profession and should help their students to recognize and understand what skills are required to become a leader.
- Preceptors must set the example for professionalism for students to follow.
- Preceptors have the unique opportunity to teach students the importance of leadership within the workplace through leading by example, inspiring students to become actively involved and encouraging students to achieve success.

E- What are the characteristics of highly effective preceptors⁴?:

An excerpt from a student response to this question:

Allow me to learn and develop on my own with guidance as necessary

*

Let me come up with solutions for my own problems that arise

*

Let me be excited about pharmacy and the career that I'm forming while introducing reality checks as needed

*

Encourage me to try new things, read new things, learn new things

*

Challenge me daily

*

Allow me to ask questions

*

Praise me when I do something well

*

Encourage me to be a pharmacist, not just a worker bee

*

Build my confidence while helping me improve my weaknesses

F- HUSOP's Expectations of Preceptors:

- 1) The preceptor should always be in communication with the Director of Experiential Education in regards to any foreseeable questions, issues or concerns (e.g. scheduling conflicts, student performance, etc)
- 2) The preceptor should explain his/her expectations to students and ensure that the student is in compliance with the site's specific requirements; e.g. HIPAA requirements, professional appearance, responsibilities, parking etc.
- 3) The preceptor should review rotation schedule with students and set dates for completion of activities.
- 4) The preceptor should orient students to the site with appropriate introduction to staff.
- 5) An alternative person should be identified for the students to report their attendance on the days the preceptor is not on site.
- 6) The preceptor should be familiar with the IPPE objectives and be willing to assist students in achieving such objectives.
- 7) The preceptor should remain positive and constructive in criticism/evaluation of students and should do so privately and continuously throughout the students' rotation.

- 8) The preceptor is expected to be familiar with and be able to utilize provided tools for assessment of students and should give feedback to students on ongoing basis.
- 9) The preceptor must document and notify the Director of Experiential Education of serious issues which include, but are not limited to:
 - a) Repetitive tardiness.
 - b) More than two unexcused absences.
 - c) Improper or unprofessional behavior
 - d) Deliberate HIPPA violation

G- Available Resources:

Husson University School of Pharmacy values your contribution to experiential education, your time and your commitment. In an effort to make the experience more beneficial for you and your student, we offer the following resources as a token of gratitude:

- 1) E*Value
- 2) Pharmacist Letter Preceptor Training and Resource Network
- 3) Micromedex
- 4) Access to W. Tom and Bonnie Sawyer Library

Please refer to our website www.husson.edu/preceptor for information on how to access the above resources.

H- Students' Attendance, Hours and Evaluations:

Attendance is a grading criterion as well as a requirement for certification of experiential hours to the Maine State Board of Pharmacy. Experiential Hours are to be granted only for time spent at the experiential site or for assignments/projects scheduled by the preceptor and are **not** awarded for travel to and from the site, study time, or class time.

Students are required to contact their preceptor **at least two weeks** prior to the start of the rotation to determine the time and place to report. Students are expected to be punctual and adhere to the rotation schedule agreed upon with the preceptor and must check-in and check-out with their preceptor, or an identified designee, every experiential day.

At the end of each week during the rotation, you will be prompted to validate hours completed by the student on the Duty Hours Calendar in E*Value.

At the end of the rotation you will be prompted to fill out the evaluation of the student using the E*Value Evaluations tool.

I- FERPA⁵:

The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99) is a Federal law that protects the privacy of student education records. FERPA gives parents certain rights with respect to their children's education records. These rights transfer to the student when he or she reaches the age of 18 or attends a school beyond the high school level. Students to whom the rights have transferred are "eligible students."

- Eligible students have the right to inspect and review their education records maintained by the school.
- Generally, schools must have written permission from the eligible student in order to release any information from a student's education record. However, FERPA allows schools to disclose those records, without consent, to the following parties or under the following conditions (34 CFR § 99.31):
 - School officials with legitimate educational interest;
 - Other schools to which a student is transferring;
 - Specified officials for audit or evaluation purposes;
 - Appropriate parties in connection with financial aid to a student;
 - Organizations conducting certain studies for or on behalf of the school;
 - Accrediting organizations;
 - To comply with a judicial order or lawfully issued subpoena;
 - Appropriate officials in cases of health and safety emergencies; and
 - State and local authorities, within a juvenile justice system, pursuant to specific State law.

What this means to you, the preceptor, is that any information about the student or the student's performance is to be only discussed with the above mentioned parties or the student. If you would like to learn more about FERPA then please visit the U.S. Department of education website at the following link: <http://www.ed.gov/policy/gen/guid/fpco/ferpa/index.html>

J- HUSOP's Expectation of Students:

Students should appreciate the time and expertise that preceptors are providing for their education and training and should understand that often preceptors will provide reference concerning their knowledge, skills, and attitude in a positive and constructive manner as means and tools of education and mentoring.

1) Professionalism:

The profession of pharmacy is one that demands adherence to a set of rigid ethical standards. These high ideals are necessary to ensure the quality of care extended to the patients we serve. For a student of pharmacy, this does not start with graduation; rather, it begins with his/her membership in this professional community. Therefore, each student must strive to uphold standards of professionalism as they advance toward full membership in the profession of pharmacy.

2) Professional Appearance:

Students will be recognized by professionals and patients as representatives of HUSOP and the profession of pharmacy at the practice site. Therefore each student MUST conform to the following dress code in addition to any dress codes required by the practice site:

- (i) All students must maintain good hygiene; wear a bright white, clean and freshly ironed laboratory jacket, and a Husson University School of Pharmacy student nametag. Nametags from places of employment are unacceptable. If the rotation site requires its own student nametag, the student will be expected to wear both nametags unless otherwise directed by the Director of Experiential Education or designee. Preceptors may require an alternate dress code in portions of the site in compliance with special areas of practice (e.g. Psychiatry).
- (ii) White coats and name tags will be worn for all rotation activities and seminars. Students will not be allowed to participate if not dressed in appropriate attire. Rotation time missed due to inappropriate attire must be made up.
- (iii) Female students may wear skirts, dresses, or dress slacks with appropriate hosiery and/or socks and shoes. Leggings are not permissible.
- (iv) Male students must wear dress slacks, collared shirts, ties, socks and appropriate shoes.
- (v) Jeans, shorts, mini-skirts, thongs, T-shirts, jogging suits, hats, caps, etc., are considered inappropriate dress and are not allowed.
- (vi) Open toed shoes are inappropriate and not permitted.
- (vii) Tattoos, any body piercing other than the ears, and other forms of body art, are to be covered while at experiential sites.

3) Student Compensation:

Students shall not, under any circumstances, receive financial remuneration from the experiential site while participating in either an IPPE or an APPE. Failure to adhere to this policy will result in suspension and removal of the student from the rotation and receipt of a failing grade (F) in the course.

4) Student Transportation and Other Financial Obligations:

All financial obligations associated with the student's IPPE or APPE education are the responsibility of the student. These responsibilities include transportation, parking, food, lodging, and any other incidental costs related to off-site assignments. Preceptors may certainly assist the student in the process but not in any of the costs (e.g. preceptor may assist the student in finding a place to stay but not to help with the rent). It is however acceptable for a student to utilize discounts if provided by the site and are not requested/solicited by the student.

5) Excused Absence:

This is an absence from the assigned site where the preceptor **and** the Director of Experiential Education, or designees, were notified in advance and approved. The time missed may be made up at a time agreeable to both the preceptor and the Director of Experiential Education.

If excused absence is to be on three or more occasions, the student must submit an "Absence Request Form" to **and** make an appointment with the Director of Experiential Education to discuss the circumstances surrounding such absences.

6) Unexcused Absence:

Unexcused absence is defined as an absence from the assigned site without advanced notification to the preceptor **and** Director of Experiential Education. Students will be required to make an appointment with the Director of Experiential Education to discuss the situation and to determine need for corrective action.

Students may lose one letter grade for the first unexcused, unjustified, absence. After the second unexcused absence, they may be dropped from the course and/or assigned a failing grade.

7) Tardiness:

Attendance is mandatory and punctuality is expected. Any student who is tardy, delayed beyond the expected or proper time, on any **two** occasions will be considered as earning an unexcused absence and must make an appointment with the Director of Experiential Education.

Four (4) such absences will be considered excessive tardiness and will equate to two unexcused absences which may result in the student being dropped from the course and/or assigned a failing grade.

8) Dismissal from a Site:

Students are expected to behave in a courteous and professional manner. If, for any reason, a preceptor asks that a student be removed from the site, the student will be required to make an appointment with the Director of Experiential Education **and** the Pharmacy Practice Chair for further evaluation of the situation. Following a complete review of the circumstances leading to student's dismissal from a site, a decision will be made in regards to the grade and credit hours pertaining to the rotation.

9) Information confidentiality (HIPAA):

Out of respect for patients and in compliance with the Health Information Portability and Accountability Act (HIPAA), the student will respect confidences revealed during his/her

assignment including patient medical records, pharmacy records, fee systems, etc. Patient names, medical record numbers, social security numbers, date of birth, and other patient identifiers will not be used in discussion of cases or experiences outside the responsibilities at the site.

Proprietary information of the site, including fees and special formulations, must also be kept confidential. Students must pass a HIPAA Compliance learning module in their first year and must complete necessary paperwork as required by each practice site.

10) Substance abuse:

It is a violation of law, professional practice standards and University policy for any student enrolled in the School of Pharmacy or any program under the jurisdiction of the School of Pharmacy to engage in the synthesis, manufacture, distribution or sale of a controlled substance for unlawful purposes. Any student found to have violated this policy will be dismissed from the School of Pharmacy and any program administered by its departments.

Alcoholism and drug abuse are recognized as treatable illnesses and such treatment is encouraged by the University. Any student requiring assistance with an alcohol or other chemical dependency problem is encouraged to contact the Medical Professional Health Program (MPHP) by calling 207-623-9266. MPHP is a confidential, proactive program that advocates for colleagues whose health problems may compromise their professional and personal lives and the lives of their patients. This program is in compliance with all applicable state laws. All requests for information and/or assistance are held in strict confidence. An individual's chemical dependency problem is not reported to the board unless the impairment may result in patient harm.

11) Plagiarism:

As defined in the Student Handbook, Plagiarism is using, stating, offering, or reporting as one's own, an idea, expression, or product of another without the proper credit to its source. As defined by Webster, plagiarism is "an act or instance of stealing or passing off the ideas or words of another as one's own, using a created production without crediting the source, or presenting as new and original an idea or product derived from an existing source." (*Webster's Collegiate Dictionary*). A direct quote should be cited and placed in quotation marks. However, the student should also know that if the ideas of others are used, these must be referenced or they are guilty of an act of plagiarism. Neither plagiarism nor cheating in any form will be tolerated. This form of dishonesty will result in the student receiving a failing grade ("F") for the course, and possibly suspension.

E*Value

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I. What is E*Value?

E*Value is a web-based evaluation system designed to help manage one's medical education program. Being completely web-based, important information about evaluations, procedures, and the schedule is available to authorized users 24 hours a day from any computer with Internet access. E*Value was developed to help manage, collate, and analyze the overwhelming volume of information associated with a medical education program. Most users will be able to submit this information conveniently from their place of work or from home. It is hoped that E*Value will be easy for all to use, allow for a better rate of compliance, provide useful information to the program and its participants, and save everyone time in the process.

Managing Quality: E*Value allows you to submit required program evaluations electronically. Electronic submission can reduce paperwork as well as send evaluation information directly to the appropriate person in a more timely fashion. The evaluation information submitted through E*Value is placed into a database from which valuable reports are produced and informative analyses made.

By providing feedback about the pharmacy education program and its participants, you play an important part in shaping and improving the quality of the pharmacy education program. One of the most important goals of the program is to provide you with a valuable learning experience. Your feedback plays a vital role in being able to meet this goal.

II. Logging into E*Value:

To enter E*Value, you must first connect to the Internet with a browser.

Once the browser has opened, type E*Value's web address, <https://www.e-value.net>, into the address locator space near the top of the browser screen and press Enter or Go.

Since E*Value is a secure web-site, you may be warned about its secure nature. Click Continue. Once E*Value's web-site appears, take a moment to bookmark this site.



1. Type in your E*Value ID and Password, and then click the Login button.
2. If your institution has provided you with an institution code you will need to enter this information. If applicable enter in your E*Value ID, Password, and Institution Code combination, then click the Login button.

A) Forget Your E*Value ID or Password?

If you have forgotten your login/password click on the link labeled Forget your login information?

To access E*Value, enter your Login Name and Password.

Login Name:	Password:	Institution Code*:	
<input type="text"/>	<input type="password"/>	<input type="text"/>	<input type="button" value="Login"/>

[Forget your login information?](#)



Clicking this link will open the below screen:

Forget your Login or Password? No problem.
Type the characters you see in the picture below. This is a security measure.



1 (letters are not case-sensitive)

Next, enter in your email address and click Request Login.
This email address must be the one we have on record for you.
Enter your email address.

2

3

Once you receive the email, click on the URL in the email which will take you to a screen where you can create a new login and/or password. Don't delay, the URL will only be good for 24 hours.

1. Type in the characters that appear in the colored box. In this case the characters are 'rukzzrh'. This is a security measure that prevents your email address from being copied by other sites.
2. Enter in your email address. This must be the email address on file for you in E*Value.
3. Click the Request Login button.

Once you have clicked Request Login you will receive an email from Client Service.

This email will contain a link that includes your encrypted login and password. When you click on this link you will be logged in and directed to the Password Change screen so that you can create a new login and/or password.

Here is a sample of the email you would receive:

Dear E*Value User,

You have requested an automatic login link from E*Value. If you did not make this request change your E*Value password IMMEDIATELY. If you find that you can no longer login, contact your E*Value administrator IMMEDIATELY and have him or her change your password.

The following automatic login link will remain active for one day OR until you change the E*Value account password. Once you are logged into the system, change the password IMMEDIATELY to something you will remember.

In program Internal Medicine Residency, AI University for account Dr. Paul FM Abraham M.D. Click [HERE](#) to login.

Please note that the link in the email is live for only 24 hours. If you do not log in and change your password you will need to go back to the login screen and request your login again.

B) Changing Your Password

One of the security measures of E*Value is password protection. Only users who have an authorized login name and password are allowed into E*Value. Changing your password frequently helps deter anyone from guessing your password. It is strongly recommended that you change your password the first time you enter E*Value and frequently thereafter.

To change your password and/or login name, click on the "Password Change" menu button on the left side of your screen. On this screen you can change either your login, your password or both.

Type in your new password twice being careful to type it exactly the same way both times.



The screenshot shows a web form for changing login information. It is divided into two main sections. The first section is for the login name, with labels 'New Login:' and 'Confirm Login:' above two adjacent text input fields. To the right of these fields is a button labeled 'Update Login'. The second section is for the password, with labels 'New Password:' and 'Confirm Password:' above two adjacent text input fields. To the right of these fields is a button labeled 'Update Password'.

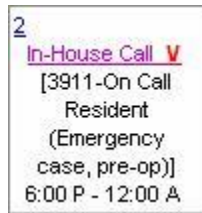
Passwords should be at least 6 digits in length and no more than 20, and must contain both numbers and letters. Passwords are not case sensitive. Next, click on the "Update Password" button. E*Value will let you know whether or not you have successfully changed your password.

You may also change your login name using the same procedure. E*Value will notify you if someone else is already using your desired login and will ask you to choose another one.

III. Validating Hours

Validating Hours

To validate a duty hour entry click on the red 'V' next to the entry.



IV. Evaluations

A- Completing an Evaluation

To complete an evaluation

1. Click on the "Pending" button in the Evaluations submenu on the left side of your screen.

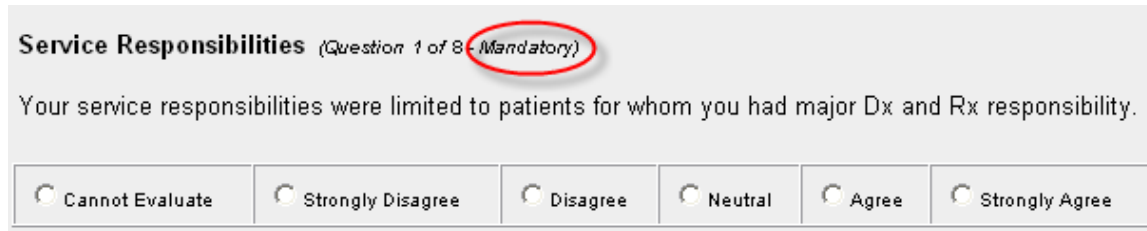
You will be shown the list of evaluations you have for each activity during specific time periods. Evaluations not yet completed will have an "Edit Evaluation" link.

If you are required to complete your oldest evaluations first, then your newer evaluations will remain in queue until your older evaluations are completed.

Activity: Evidence Based Medicine		Site: General Hospital				
Period: May 2004		Time Frame: 05/01/2004 through 05/31/2004				
Edit/Status	Suspend	Evaluation Type	Subject	Request Date	View Image	View Printable Evaluation
Edit Evaluation	Suspend	Resident	Paul Frazer	07/20/2004	View Picture	View/Print
Edit Evaluation	Suspend	Resident	Andrea Chancey	07/20/2004	View Picture	View/Print
Edit Evaluation	Suspend	Resident	Ben Porter	07/20/2004	View Picture	View/Print

2. Click on one of the "Edit Evaluation" links to open an evaluation and begin answering the questions.

Some questions may require a response. Mandatory questions are indicated by the word "Mandatory" next to the question number. You cannot submit an evaluation until at least all the mandatory questions are answered.



Service Responsibilities (Question 1 of 8 - **Mandatory**)

Your service responsibilities were limited to patients for whom you had major Dx and Rx responsibility.

<input type="radio"/> Cannot Evaluate	<input type="radio"/> Strongly Disagree	<input type="radio"/> Disagree	<input type="radio"/> Neutral	<input type="radio"/> Agree	<input type="radio"/> Strongly Agree
---------------------------------------	---	--------------------------------	-------------------------------	-----------------------------	--------------------------------------

You will notice at the top of the evaluation form that you are given the option of whether or not you want to auto-scroll through the evaluation. Auto-scrolling is a feature that brings you to the next question once you have chosen a response for the question. Your choice of whether or not to auto-scroll will be saved for subsequent evaluations.

B- Suspending an Evaluation

If an evaluation was incorrectly assigned to you or you did not interact with the person for an adequate amount of time, you may click the "Suspend" link next to the evaluation of interest

When you suspend an evaluation, E*Value asks that you enter a reason for suspending the evaluation. This reason will be sent to your E*Value Administrator who will then determine if the evaluation should be deleted or re-activated for you to complete.

Once you have entered the reason for suspending the evaluation, click the "Suspend Evaluation" button. If you decide you have made a mistake and should not suspend the evaluation, click on the "Cancel" button.

Evaluator: Nancy Chang
Time Frame: 05/31/2004
Activity: Ambulatory Clinic
Eval Type: Rotation
Subject: Ambulatory Clinic

I want to use the default reason for suspension ("I did not work with this person"): ☐ Yes ☒ No

Reason For Suspension:

Suspend Evaluation

Cancel

In your list of pending evaluations the word "Suspended" will appear in the Edit/Status column next to the evaluation you suspended

C- Printing an Evaluation

Because browsers do not reliably print the evaluation forms, E*Value offers a read-only option to either view or print an un-submitted evaluation prior to submission. To print an evaluation you have not yet submitted, click on the "View/Print" link next to the evaluation of interest in your list of pending evaluations.

1. Once the evaluation appears, you may click the gray "Print This Report" button to print the evaluation immediately from a printer linked to your computer.
2. Alternatively, you could click the gray "Email Me the Report" button to have the evaluation sent to you in PDF format as an e-mail attachment. This latter process generally takes a few minutes longer than printing to your printer, but is reliably formatted.

The screenshot shows two buttons at the top: "Print This Report" with a red circle containing the number 1 next to it, and "Email Me The Report" with a red circle containing the number 2 next to it. Below these buttons is a gray box containing the following text:

Activity:	Ambulatory Clinic	Site:	University Medical Center
Period:	May 2004	Dates of Activity:	05/01/2004 - 05/31/2004
Evaluator:	Nancy Chang	Eval Type:	Rotation
Participation Dates: 05/01/2004 To 05/31/2004 Completion Date:			

D- Saving an Evaluation

If you are unable to complete your evaluation, or wish to wait to submit it, you may click the "Save for Later" button at the bottom of the evaluation form. E*Value will let you know that you have saved your answers.

The screenshot shows a gray box with the following text in blue: "Review your answers in this evaluation. If you are satisfied with the evaluation, click the SUBMIT button below. Once submitted, evaluations are no longer available for you to make further changes." Below this text are two buttons: "Save For Later" and "Submit". The "Save For Later" button is circled in red.

Your saved evaluation will continue to appear on your list of pending evaluations until you submit it (see Submitting an Evaluation on). You will continue to receive reminder notices for any un-submitted evaluations according to the frequency determined by your program.

E- Submitting an Evaluation

Once you have completed an evaluation, you may submit it. To submit an evaluation, click on the "Submit" button at the bottom of the evaluation form. If you have not answered one or more of the mandatory questions, E*Value will highlight the unanswered mandatory questions in red.

Once you have successfully submitted your evaluation, E*Value will give you a message indicating your successful submission. **Once submitted, evaluations may no longer be edited.**

After you have completed an evaluation, you will be able to view it by clicking on the Completed button on the Evaluations submenu (see Viewing Your Submitted Evaluations).

F- Viewing Your Submitted Evaluations

Once you have completed an evaluation, you may view it. To view evaluations you have submitted, click on the "Completed" button in the "Evaluations" submenu on the left side of your screen. All of the evaluations you have been assigned and their status will be listed

To view a specific evaluation, click on the link next to the evaluation in the column titled "Evaluation Type". The single evaluation will then appear.

V. Viewing Documents

Any documents that have been uploaded into E*Value can be found by clicking on the Documents button.

1. Simply indicate the document collection (such as conferences for conference handouts)
2. Enter any key words, or leave blank to pull up the entire list of documents for that collection
3. Click on search



The screenshot shows a search form with the following elements:

- Document Collection:** A dropdown menu with "Conferences" selected.
- File Name:** A text input field.
- Max Rows:** A dropdown menu with "10" selected.
- Search:** A button.

You will then see a list of document links that most closely resemble your search criteria. Click on the link to view the document.