UNIVERSITY OF FLORIDA COLLEGE OF PHARMACY
PHA 5784: Pharmacotherapy IV
3 Semester Credit Hours
Fall 2016

PURPOSE: The purpose of this course is to provide an educational framework for students to expand upon their clinical knowledge, problem-solving skills, and communication (written and oral) through case-based learning and role-playing scenarios.

COURSE FACULTY & OFFICE HOURS:

Co-Coordinators:
Eric Dietrich, PharmD, BCPS
Clinical Assistant Professor | Family Medicine
Email: ead1129@ufl.edu
Tel: (352) 294-5648
Pager: (352) 413-2322
Office: HPNP 2301

Emily Huesgen, PharmD, BCACP, AAHIVP
Clinical Assistant Professor | HIV Medicine
Email: ehuesgen@cop.ufl.edu
Tel: (352) 273-6365
Office: HPNP 2302

TEACHING ASSISTANT: Bradley Stockard, PharmD bstockard@ufl.edu

CAMPUS FACILITATORS: Please refer to Appendix A

OFFICE HOURS: Available upon request

CLASS SESSIONS: Please refer to your campus schedule on the course website for specific class times and locations.

LEARNING OUTCOMES RELATED TO THE PHARM.D. PROGRAM: This course prepares the PharmD student to accomplish the following student learning outcomes (SLOs) upon graduation:

1. Learner (Learner) - Develop, integrate, and apply knowledge from the foundational disciplines (i.e., pharmaceutical, social/behavioral/administrative, and clinical sciences) to evaluate the scientific literature, explain drug action, assess and solve therapeutic problems, and advance population health and patient-centered care.
2. **Patient-centered care (Caregiver)** - Provide patient-centered care as the medication expert (collect and interpret evidence, prioritize patient needs, formulate assessments and recommendations, implement, monitor and adjust plans, and document activities).

3. **Health and wellness (Promoter)** - Design prevention, intervention, and educational strategies for individuals and communities to manage chronic disease and improve health and wellness.

4. **Problem Solving (Problem Solver)** – Identify and assess problems; explore and prioritize potential strategies; and design, implement, and evaluate the most viable solution.

5. **Inter-professional collaboration (Collaborator)** – Actively participate and engage as a healthcare team member by demonstrating mutual respect, understanding, and values to meet patient care needs.

6. **Communication (Communicator)** – Effectively communicate verbally and nonverbally when interacting with an individual, group, or organization.

7. **Professionalism (Professional)** - Exhibit behaviors and values that are consistent with the trust given to the profession by patients, other healthcare providers, and society.

**COURSE OBJECTIVES:**
- Develop a systematic approach to evaluating patients and clinical problem solving through case-based learning and role-playing exercises
- Formulate concise, evidence-based, patient-centered care plans
- **Identify and manage any drug-related problems, including drug-drug and drug-food interactions (If we don’t, then who will?)**
- Effectively and concisely communicate recommendations to healthcare providers
- Gather information from a patient who seeks self-care and develop an appropriate patient-specific care plan including guidance for follow up
- Triage self-care seeking patients based on assessment; Determine if symptoms can be treated with OTC medications or if a medical referral is required
- Make care plan decisions while taking into consideration medication costs, patient preferences, lifestyle factors, and potential barriers to adherence
- Select appropriate information resources and develop an evidence-based response to a drug information question
- Demonstrate ability to recognize knowledge limitations, and to follow-up and address additional learning needs

**PREREQUISITE:** Completion of Pharmacotherapy 1, 2, & 3
**COURSE STRUCTURE:** All class sessions are face-to-face and involve case-based learning. Laptops are necessary for most activities and should be brought to class. Depending on the week, the format for case-based learning may involve written assignments (e.g. SOAP notes, drug information response, in-class activity) or role-playing scenarios (e.g. oral case presentations & self-care scenarios) that are designed to test the student’s knowledge base, critical thinking skills and communication (written & verbal). Students will be randomly assigned to teams of 4-5 members to work on in-class activities, evaluation of patient cases, and the development of care plans (SOAP notes). Students will work individually on written drug information response, quizzes, self-care presentations and oral case presentations (main case & PK). Grading of these activities will reflect the individual’s performance only and will NOT be distributed to team members.

**COURSE OUTLINE:** (details provided in later section)

1. **Main Cases** – 6
2. **SOAP Notes** – 6 required for corresponding main cases
3. **PK Cases** – 2 cases or several “mini” cases (SOAP notes not required)
4. **Oral Case Presentations** (Main Case & PK) – minimum of 2 per student
5. **Self-care Presentations** – minimum of 1 per student
6. **Quizzes** – 19 “mini” quizzes; Lowest score/missed quiz dropped
7. **Written Drug Information Response** – 1 response per student
8. **In-Class Team Activities** - 2

**REQUIRED MATERIALS:**

1. Laptop

**ACTIVE LEARNING REQUIREMENTS:** Students will be randomly called on to answer questions and provide their recommendations during role-playing scenarios (oral case and self-care presentations).
STUDENT EVALUATION & GRADING

<table>
<thead>
<tr>
<th>Evaluation Technique</th>
<th>Points Possible</th>
<th>Percent of Final Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>SOAP Notes</td>
<td>600</td>
<td>38%</td>
</tr>
<tr>
<td>Oral Case Presentations</td>
<td>400</td>
<td>25%</td>
</tr>
<tr>
<td>Self-Care Presentations</td>
<td>200</td>
<td>13%</td>
</tr>
<tr>
<td>Quizzes</td>
<td>180</td>
<td>11%</td>
</tr>
<tr>
<td>In-Class Team Activities</td>
<td>100</td>
<td>6.5%</td>
</tr>
<tr>
<td>Written DI Response</td>
<td>100</td>
<td>6.5%</td>
</tr>
<tr>
<td><strong>Total Points:</strong></td>
<td><strong>1580</strong></td>
<td></td>
</tr>
</tbody>
</table>

SOAP NOTES (38%): There will be 6 SOAP notes in total (100 pts/each). A SOAP (Subjective data, Objective data, Assessment/Plan) note submission is required for each of the 6 main cases. Clinical pharmacists routinely document patient-care activities and communicate written patient information in the medical record. **If it wasn’t documented, then it didn’t happen!** A SOAP note is a common format for doing so. The purpose of this assignment is for students to practice collecting and reviewing patient data, identifying problems and formulating a plan, and documenting clinical recommendations. Students will work with their assigned team members to complete the SOAP notes. A template of the SOAP note rubric is available online for students to review. **SOAP notes should be submitted online using E-learning Canvas (1 SOAP Note/Team) and are DUE 3 hours** after the Preceptor Dialogue (the first main case class session). Refer to PTX-4 campus calendars online for details. Please be punctual. **Late SOAP note submissions will result in a score of 0.**

SOAP Note Tips:
Be concise. Subjective and objective data should be limited to information that pertains to the assessment and plan. Make sure to only include JCAHO-approved medical abbreviations. For the official “Do Not Use” abbreviation list, please refer to: [http://www.jointcommission.org/standards_information/npsgs.aspx](http://www.jointcommission.org/standards_information/npsgs.aspx). SOAP note styles vary, but a general example might include:

- **Subjective Information** – obtained **verbally** from patient or caregiver
  - Chief Complaint (CC)
  - History of Present Illness (HPI)
  - Past Medical History (PMH)
  - Social History (SH)
  - Family History (FH)
  - Medication History / Allergies

- **Objective Information** – information that can be directly **measured** or **observed**:
  - Vitals
  - Labs
  - Diagnostic testing & imaging results (e.g. EKG, CXR, CT/MRI)

- **Assessment** – conveys analysis/critical thinking and should include:
Prioritized problem list
- Identification of any drug-related problems
- Goals of therapy / comment on whether goals have been met
- Pros/cons of therapeutic alternatives

**Plan** – should include specific recommendations regarding:
- Medication therapy (drug, dose, route, frequency, and duration)
- Goals of therapy (if not listed in assessment) and monitoring parameters
- Lifestyle changes
- Follow-up
- Patient education (counseling points)

**Common SOAP Note Questions:**

- "Where should we put the patient’s medication history and allergies? I’ve seen this information included with both the subjective and objective information?"
  - Answer - We will accept either or, but please do not duplicate the information by placing it in both sections of the SOAP Note. Technically, if the information is obtained verbally (e.g. patient interview), it would make sense to place it in the “subjective” section. Alternatively, if the information is obtained strictly from the patient’s medical record or a pharmacy database, some pharmacists may place it in the “objective” section. Comment – Although the overall flow of the class SOAP note is consistent with clinical practice, the individual sections are not always labeled, especially the “subjective” and “objective” sections. In other words, we are more concerned with the student’s thought process, ability to identify drug-related problems, and convey key recommendations and follow-up versus the classification of certain data (as long as the information is written in a concise and logical fashion).

- "Is it okay if we combine the assessment and plan sections (A/P) or do they have to be separated?"
  - Answer - Yes, you can combine them or chose to list them as separate sections. Formatting is based on personal preference, so it’s entirely up to you (This author prefers to combine them, which involves less scanning/page scrolling.).

- "I’m unsure of where to put the patient’s vaccination history. I’ve seen it included in different sections of the SOAP note."
  - If the patient’s vaccination history was obtained from the medical records, it can be placed in the “objective” section. If the information was obtained from a patient interview (e.g. no documentation), you can place it in the “subjective” section.

**ORAL CASE PRESENTATIONS (25%):** Oral presentation days will occur for the 6 main cases and 2 PK cases. Main cases and PK cases will be distributed to students a week in advance. Students will be randomly selected to participate in a minimum of 2 oral case presentations (Main Case or PK) over the course of the semester (200 pts/each x 2). Presentation scores will be averaged for students randomly selected for > 2 case
presentations. The purpose of this exercise is for students to develop a formal approach to evaluating patients, formulating a care plan and communicating recommendations (in a concise & logical fashion) to other health care practitioners. Oral case presentations will be approximately 3 minutes long with a 1 minute break in between presentations. There will be two Main Case days (preceptor dialogue and verbal defense/class discussion). PK case days will consist of a verbal defense (similar to main case verbal defense. Rubric templates are available online for students to review. See below for additional details regarding the case presentations.

If the student does not know the answer to a question they have the option of saying “I’ll get back to you” to the case leader. Students utilizing this option will be required to post the correct answer to the question, with appropriate references, to the discussion board within 24 hours. Failure to post a correct response within 24 hours will result in a 10-point reduction in the performance grade (noted on rubric). Students electing to utilize this option who provide the correct answer on the discussion board will not miss as many points as students who say “I don’t know” and then do not address the question again on their performance grade.

Structure of Main Case Presentations:

1. **Preceptor Dialogue** – The first session of main case days will consist of a preceptor dialogue. Students will be randomly called on to participate in a 3 minute Q&A session with a faculty member playing the role of a “preceptor” or “healthcare provider” (e.g. MD, ARNP). This session will focus on the student’s communication skills and knowledge of pathophysiology, pharmacology, and/or pharmacotherapy. Potential topics discussed may include (list is not comprehensive):
   a. **Symptoms of the disease state and risk factors**
   b. **Pertinent labs used to identify the need for therapeutic intervention**
   c. **Overview of treatment options** (e.g. side effects, limitations, specific indications, etc.)
   d. **Goals of treatment**
   e. **Potential patient questions** (e.g. What questions would the student like to ask the patient? How would he/she ask these questions? Purpose of questions?)
   f. **Potential resources available to help formulate a therapeutic plan**

2. **Verbal Defense** – The second session of main case days will consist of the verbal defense followed by a class discussion. The verbal defense will focus on the student’s identification of patient problems and therapeutic recommendations. Potential topics discussed may include (list is not comprehensive):
   a. **Identification of main problems**
   b. **Identification of hidden (off-topic) drug-related problem**
   c. **Potential causes of problems identified** (e.g. new diagnosis (untreated problem), subtherapeutic/supratherapeutic dosing, omission of drug therapy, therapeutic duplication, drug interaction, patient-related factors)
(e.g. non-adherence – 2/2 cost, side effects, unstable environment, illiteracy, etc.), etc.]
d. **Prioritized problem list**
e. **Specific medication recommendations & rationale**
f. **Monitoring parameters for efficacy & toxicity**
g. **Follow-up plan**
h. **Resources/level of evidence used to formulate treatment plan**
i. **Patient counseling points**

**SELF-CARE PRESENTATION (13%)**: Students will be randomly selected to participate in a minimum of 1 self-care presentation over the course of this semester *(200 pts/each x 1)*. Presentation scores will be averaged for students randomly selected for > 1 self-care presentation. The purpose of this exercise is for students to develop the skills necessary to conduct a structured patient interview and obtain the necessary information to determine if the patient’s complaints can be treated with over-the-counter and/or herbal medications, or if a referral to a health care provider (e.g. PCP, emergency room, etc.) is warranted. Self-care presentations will last approximately 3 minutes with a 1 minute break in between scenarios. The focus of the self-care scenarios should include both information gathering and providing a recommendation. **A template of the self-care rubric is available online for students to review.**

**QUIZZES (11%)**: There will be 19 “mini” quizzes *(10 pts/each)*. Each quiz will consist of 5 multiple-choice questions pertaining to the current main case or self-care topic. Quizzes will be administered during the first 5 minutes of class on Main Case, PK, and Self-Care Scenario days and are designed to test the student’s knowledge of the material. The quizzes will be taken via Canvas; see course website for instructions related to setting up your electronic device to be able to take the quiz. Students arriving to class late will not be able to take the quiz; students who do not have their electronic device correctly set up when the quiz begins will not be able to take the quiz. Paper copies will be available for those students experiencing technical difficulties, but failure to arrive to class on time and set up your electronic device appropriately will not count as a “technical difficulty” warranting a paper version of the quiz. **Students will be allowed to drop one quiz score (lowest score / missed quiz).**

**IN-CLASS TEAM ACTIVITIES (6.5%)**: Today’s pharmacists work in collaboration with providers and other healthcare staff to optimize patient care (team-based approach). The importance of good communication and interpersonal skills **CANNOT** be overstated (regardless of the practice setting)! The purpose of this activity is to practice such skills. Students will work in assigned teams to complete 2 in-class team activities *(50 pts/each)*. Refer to your campus schedule on Canvas for activity dates. Teams will be responsible for submitting an in-class assignment during class for credit.

**DRUG INFORMATION QUESTION (6.5%)**: Students will be assigned a drug information (DI) question requiring a formal, written response *(100 pts total)*. Assigned DI questions and instructions will be posted to Canvas on **Wednesday November 16th, 2016**. Students
are required to complete this activity individually, not as part of a team. **DI Responses should be uploaded to Canvas by Wednesday November 23rd, 2016 at 5 pm ET.** The purpose of this exercise is for students to practice locating appropriate DI resources and clinically applying an evidence-based recommendation in a timely fashion.

**FINAL GRADES:** will be assigned based on the following percentages:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>&gt; 93%</td>
</tr>
<tr>
<td>A-</td>
<td>90 - 92</td>
</tr>
<tr>
<td>B+</td>
<td>87 - 89</td>
</tr>
<tr>
<td>B</td>
<td>83 - 86</td>
</tr>
<tr>
<td>B-</td>
<td>80 - 82</td>
</tr>
<tr>
<td>C+</td>
<td>77 - 79</td>
</tr>
<tr>
<td>C</td>
<td>73 - 76</td>
</tr>
<tr>
<td>C-</td>
<td>70 - 72</td>
</tr>
<tr>
<td>D+</td>
<td>67 - 69</td>
</tr>
<tr>
<td>D</td>
<td>63 - 66</td>
</tr>
<tr>
<td>D-</td>
<td>60 - 62</td>
</tr>
<tr>
<td>E</td>
<td>&lt; 60%</td>
</tr>
</tbody>
</table>

*Passing will be considered a grade of 73%. Note – Decimal points ≥ 0.5 will be rounded up.*

**POSTING SCORES:** Scores for graded SOAP notes (Main Case), quizzes, oral presentations (Main Case, PK, & Self-Care Scenarios), in-class team activities, and the written drug information response will be posted online in a timely fashion following completion of these assignments at all UF campuses. Additionally, answer keys for the SOAP note assignments and written drug information response will be posted online. Quiz keys will **NOT** be posted. Questions that were missed by a large percent of the class will be briefly discussed at the end of Self Care and during Main Case/PK; students desiring additional feedback related to Quizzes should contact their campus faculty member to set up a time to meet.

**RETURNING GRADED ASSIGNMENTS & QUIZZES:** Graded SOAP note rubrics will be available to student teams via Canvas in a timely fashion for feedback on the SOAP note assignments [Additional SOAP note commentary via track changes may be returned at the discretion of the faculty member(s) grading the assignment]. Graded rubrics for the Oral Presentations (Main Case & Self-Care Scenarios) will **NOT** be returned to students, but will be made available for viewing upon student request (For inquiries, please contact your local course facilitators); grades for these performance scenarios will be available in Canvas in a timely manner.

**ATTENDANCE POLICY:** Attendance is **REQUIRED.** Students will learn more from this course by attending class. **Students may have one unexcused absence without penalty** (e.g. point deduction from final grade), **but will NOT be allowed to make-up “missed” activities from that day** (e.g. will receive a score of 0 for any activities that day). Students with 2 or more unexcused absences will receive a 5% deduction from their final grade for each unexcused absence in addition to receiving a score of 0 for each missed activity during the class that was missed. **Excused absences** will be granted on a case-by-case basis, but must be done in **ADVANCE.** Excused absences should be directed to your campus facilitator by email as early as possible.

Students who arrive to class late will be counted as late. If a student arrives late to class two times it will count as one unexcused absence. Each additional two late arrivals to class
will also count as an additional unexcused absence. If the student arrives late on a day there is a quiz the student will not be able to take the quiz as they are late. The student will be able to rejoin the class and participate in the classroom activities once the quiz has ended.

**MAKE-UP POLICY:** Make-up quizzes/activities will only be given **IF** the student complied with the above criteria. The missed quiz for the first excused absence will not be eligible to be made up and will count as your dropped quiz. Future quizzes missed for excused quizzes will be allowed to be made up.

**ASSIGNMENT DEADLINES:** Please refer to your campus schedule posted on the course website.

**DRESS CODE:** Students are expected to dress professionally for class. On Self Care, Main Case, and PK days students are expected to dress professionally, which includes a UF College of Pharmacy white coat; white coats are expected to be worn for the duration of class. Professional dress is required throughout these classes as opposed to only during role-playing scenarios. For Team Activities students are expected to adhere to the UF College of Pharmacy dress code but professional dress is not required. Students violating the dress code will incur a 10 point penalty per offense; repeat offenders may incur additional penalties for lack of professionalism.

**PROFESSIONALISM:** Facebook is not considered a professional messaging platform and therefore should not be utilized during class time. Students caught using Facebook during class time will receive a 10-point reduction in grade for each offense. Also, students are not allowed to leave class early without securing permission from the faculty in advance. Students leaving early without prior approval will receive a zero for all class activities that day as well as a 1% reduction in the final grade. Unforeseen circumstances should be communicated to faculty as quickly as possible.

**GENERAL COLLEGE OF PHARMACY POLICIES:** For information regarding the UF Grading Policy, the Academic Integrity Policy, the Psychomotor and Learning Expectations, Faculty and Course Evaluations, Expectations of Students, Discussion Board policies, the UF Policy on Religious Holidays, and the Counseling and Student Health Center can be found at: [http://file.cop.ufl.edu/studaff/policies/General%20COP%20Course%20Policies.pdf](http://file.cop.ufl.edu/studaff/policies/General%20COP%20Course%20Policies.pdf)
APPENDIX A: DIRECTIONS FOR CONTACTING FACULTY

COURSE WEBSITE: The PHA 5784 course website will be maintained through E-learning Canvas at: https://elearning.ufl.edu. You will be able to access course announcements, course information, supplemental documents and grades through this website. Students are expected to check the course website regularly (daily) for updated information. Whenever possible, course coordinators will post announcements when significant information is added to the website.

COURSE COMMUNICATION: All course communication will occur during class sessions, the course website discussion board, and by announcement postings/email alerts. Discussion threads will be organized by assignment topics (e.g. Main Case 1, Self-Care 2, etc.). Additional follow-up assigned to students during their oral case presentations (Main Case or Self-Care), should be posted to the discussion board within 24 hours, for all to see and learn from! If you have a question, please post it to the appropriate discussion board. The course coordinator and content experts will check the discussion boards and respond to the question as promptly as possible. Please keep in mind the following guidelines regarding discussion board postings:

1. Please keep all communication and requests professional. Avoid sarcastic, negative, or insulting postings, or judging questions of others.
2. Please check recent discussion board posts and announcements before posting your message to ensure that someone else has not already asked the same question, or that it has not been addressed in an announcement.
3. Anonymous postings are not allowed.
4. Responses may come from course coordinators or lecturers. Please keep this in mind so that you are able to recognize a response from an instructor.
APPENDIX A: CAMPUS FACILITATORS

<table>
<thead>
<tr>
<th>Campus</th>
<th>Facilitator(s)</th>
</tr>
</thead>
</table>
| Gainesville   | Eric Dietrich, PharmD, BCPS  
Email: ead1129@ufl.edu  
Emily Huesgen, PharmD, BCACP, AAHIVP
Email: ehuesgen@cop.ufl.edu  
Kathryn Smith, PharmD
Email: KSmith@cop.ufl.edu |
| Jacksonville  | Lori Dupree, PharmD, BCPS  
Email: ldupree@cop.ufl.edu |
| Orlando       | Erin St. Onge, PharmD  
Email: stonge@cop.ufl.edu |
| St. Petersburg| Lindsey Childs-Kean, PharmD, MPH, BCPS  
Email: lchilds-kean@cop.ufl.edu |

APPENDIX B: PRONUNCIATION GUIDE

<table>
<thead>
<tr>
<th>Surname</th>
<th>Pronunciation</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Eric) Dietrich</td>
<td>“D-trick”</td>
</tr>
<tr>
<td>(Lori) Dupree</td>
<td>“Du-prene”</td>
</tr>
<tr>
<td>(Emily) Huesgen</td>
<td>“His-Kin”</td>
</tr>
<tr>
<td>(Erin) St. Onge</td>
<td>“Saint-ong”</td>
</tr>
<tr>
<td>(Lindsey) Childs-Kean</td>
<td>“Childs-Keen”</td>
</tr>
</tbody>
</table>