



Experiential Education Manual

2024-2025

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University at Buffalo

School of Pharmacy and Pharmaceutical Sciences

Mission and Vision

Our Mission

To improve healthcare quality and outcomes through educating the next generation of pharmacists and pharmaceutical scientists in an environment fostering intellectual curiosity, through pursuing impactful basic and applied research, and through developing and evaluating models of clinical practice.

Our Vision

To be a recognized global leader in developing solutions for evolving healthcare challenges.

Our Values

Diversity: We best serve our communities by embracing students, staff, faculty, preceptors, community stakeholders, and alumni from all backgrounds, with a range of skill sets and points of view.

Equity: We work tirelessly to contribute to a more just world, specifically through providing educational opportunities and advocating for equitable access to health care.

Integrity: We earn the trust of our stakeholders and partners by being ethical and responsible in everything we do, and by instilling these principles in our students.

Commitment: We will support and advance our communities through evidence-based practices in education, research, and clinical practice.

Impact: We achieve the greatest contribution through collaborative education, research, and clinical practice with our communities, partners, and alumni.

Excellence: We are committed to cultivating the highest quality in research, education, and service at the local, national, and international level.

Standards of Professional Conduct: The Honor Code

The faculty, staff and students at our school are aware that honor and integrity are essential to the pharmacy profession, and we will actively support these concepts.

Establishing and maintaining the highest concepts of honor, honesty, truth and personal integrity during pharmacy school is critical to our training as pharmacists. It is our responsibility to take definite measures to terminate unethical actions on the part of a colleague by addressing concerns with our peers or, if necessary, by reporting such actions to the Student Academic Affairs Committee. This will ensure that the standards of academic integrity are upheld while at the same time the individual's rights are ensured. The following outlines the minimum behavior expected by University at Buffalo School of Pharmacy and Pharmaceutical Sciences students.

Student Pharmacists represent the University at Buffalo, the UB School of Pharmacy and Pharmaceutical Sciences and the profession of pharmacy. Student Pharmacists are expected to conduct themselves in a professional manner in and outside of the classrooms and at practice sites as befits pharmacy interns and future pharmacists. Professional conduct means, for example, dressing and behaving according to usual standards employed by members of a profession. Student Pharmacists are expected to be forthcoming, honest and honorable. All communication with the faculty and staff of the UB School of Pharmacy and Pharmaceutical Sciences (verbal, written or electronic) must be legible, truthful and complete. A student pharmacist cited for unprofessional conduct in this regard may be suspended from the program until such time as the Student Academic Affairs Committee can make a decision as to the proper course of action. Absent improvement, the Student Academic Affairs Committee will further advise the student pharmacist. Continued unprofessional conduct may lead to required counseling of the student pharmacist in acceptable social behavior by the University Counseling Center. A student pharmacist may have an advisor with them for guidance. In no case shall the advisor be an attorney, unless he or she is a member of the UB faculty who is not acting in the legal capacity on behalf of a principal. An advisor may not speak on behalf of or advocate for a principal or otherwise address members of the hearing committee (UB policy, Fall 2007).

Student Pharmacists should understand the types of conduct that are considered unacceptable and are violations of the school's policy, refrain from any activity that might be considered a violation and report any circumstance that raises suspicion to the Office of Student Affairs and Professional Relations.

Faculty must understand the procedures for documenting suspected violations to the school's policies and create an environment that encourages academic integrity in the classroom and rotations.

Respect for Patients

First among the student pharmacist's professional duties is to the patient. Utmost care must be taken to ensure respect and confidentiality for all patients whom the student pharmacist encounters in all aspects of care (e.g., rotations, during working hours, at wellness fairs, etc.).

- i. **Confidentiality:** Great care should be taken at all times to maintain confidentiality of patient information. Medical and/or personal information about the patient should only be shared with health professionals directly involved in the patient's care. To avoid an accidental breach in confidentiality, student pharmacist should not discuss patient care in public areas, including, but not limited to, hospital elevators, cafeterias, lounges, and hallways. This includes audio and/or videotaping. It is also important to keep medical records and notes concerning patients in a safe place. Students must be in compliance with the Health Insurance Portability and Accountability Act and the NYS Confidentiality law through a training program designated by the University at Buffalo and the School of Pharmacy and Pharmaceutical Sciences. This training may be on the students' own time.
- ii. **Safety and Modesty:** Students should abide by the medical principle "first do no harm." student pharmacist should demonstrate respect for their patients through language and actions. In all patient encounters, student pharmacist should use non-threatening, professional, and non-judgmental language and behavior. Student pharmacist should obtain consultation whenever appropriate or desired by the student, the patient, or the family of the patient. Relationships formed with the patient and their family should be professional and appropriate. A patient's privacy and modesty should be maintained as much as possible during the taking of a medical history, physical examinations, and in any other contact.
- iii. **Honesty:** Honesty is essential in the student pharmacist's relationship with a patient. It is important to be truthful with patients and not intentionally mislead or give false information. Student pharmacists are encouraged to ask their supervising preceptor for consultation when they feel uncomfortable answering patient questions or when they do not have the information requested. While honesty is important, the student pharmacist should avoid disclosing information to the patient that only the patient's physician should disclose.

Truthfulness, Legibility, and Completeness in All Written Communication Regarding Patients and Their Care

It is crucial to maintain the integrity of medical records and documents. The written medical record is not only important in effective patient care and communication between health care providers, but it is also a legal document and available to the patient for review. As such, all written medical documents regarding patients and their care must be legible, truthful, complete, and accurate to the best of student pharmacists' knowledge and ability. Written documents regarding a patient should not contain offensive or judgmental statements.

Accuracy In All Verbal Communication Regarding Patients and Their Care

In the clinical setting, medical information about patients is often communicated verbally. Information that student pharmacists communicate verbally to physicians, classmates, and other health care providers may influence patient care and the learning process. Verbal communication regarding a patient should be neither offensive nor judgmental. It is crucial to maintain the integrity of patients' medical information by reporting only accurate information, information of which the student pharmacist has direct knowledge, and all pertinent information of which the student pharmacist is aware, all to the best of the student pharmacist's ability.

Respect for Faculty, Staff, Colleagues, and Health Professional Personnel

Also, among the professional duties of a student pharmacist is to exhibit respect for faculty, staff, colleagues, health professional personnel and others, including, but not limited to, hospital personnel, guests, and members of the general public. This respect can be demonstrated by prompt execution of reasonable instructions and by exhibiting deference to those with superior knowledge, experience, or capabilities. Student pharmacists in disagreement with a faculty member should express their views in a calm, mature and professional manner. In addition, student pharmacists should maintain an even disposition and display a judicious use of others' time and mature handling of private information. Student pharmacists are required to attend all required classes or sessions. Student pharmacists are expected to arrive at the scheduled time for all required courses, sessions, clinical rotations, and other mandatory academic obligations. Leaving a class or session prematurely, without the express consent of the instructor, is considered inappropriate and only serves to disrupt others there to learn. In addition, student pharmacists should avoid behavior and attire that may be disruptive to the learning environment. Student pharmacists may not display any behavior that may be construed as unwanted and/or inappropriate sexual contact that may include touching or verbal abuse. This also includes verbal communication, body language or inappropriate attire in a professional environment with other student pharmacists, instructors, or faculty and staff whether in a didactic or clinical rotation setting.

Respect for Property

The student pharmacist must abide by all hospital, institutional and pharmacy policies during their clinical experiences and training. Property, including equipment and medications, will not be for the student pharmacist's personal use. Student pharmacists should show respect for the tools and equipment by preventing damage or misuse.

Student Safety

Always follow your site's safety protocols. These protocols help protect you from many types of dangers such as: Needle sticks, COVID-19, TB Exposures, Hazardous Drug Exposures, etc. If you THINK others at the site are violating a safety protocol do not follow their behavior, you should continue following the safety protocol until you can get clarification from your preceptor.

If you feel unsafe at any time or for any reason (Hazardous Drug Exposures, COVID-19, TB Exposures, Needle Sticks, etc.) at your site contact your preceptor and/or the Office of Experiential Education immediately. Your safety and the safety of those around you is a priority.

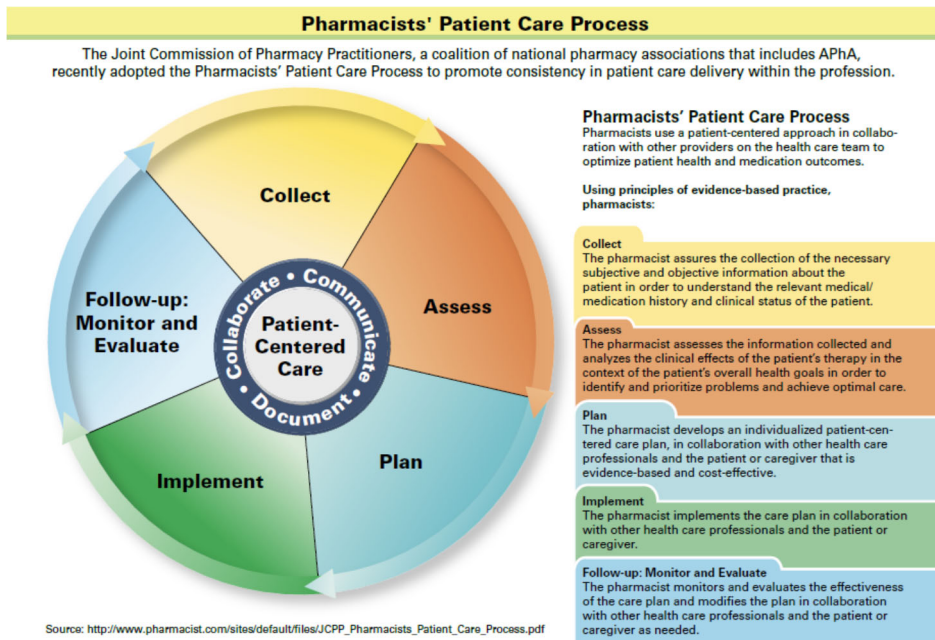
Experiential Education (IPPE and APPE) Program Outcomes

Program Outcome	COEPA Outcome
<p>1. Possess the knowledge and skills essential to the practice of pharmacy.</p>	<p>Demonstrate use of core knowledge and skills in current and emerging trends in biomedical, pharmaceutical, socio-behavioral, clinical, regulatory, and epidemiological sciences, which support exemplary pharmacy practice. (COEPA 1.1 Scientific Thinking - Learner; 2.4 Person-Centered Care - Provider)</p> <p>Apply an integrated knowledge of basic, preclinical, translational, and clinical sciences to patient-centered care. (COEPA 2.4 Person-Centered Care - Provider)</p> <p>Apply effective critical thinking and problem-solving skills to patient-centered care. (COEPA 2.1 Problem-Solving Process - Problem-solver)</p> <p>Locate, evaluate, apply, and communicate evidence based medical and scientific research findings to direct and indirect patient care. (COEPA 2.6 Medication-Use Process Stewardship - Steward)</p> <p>Employ the framework of the Pharmacists' Patient Care Process to provide effective, high quality, evidence-based patient-centered care. (COEPA 2.1 Problem-Solving Process – Problem-solver; 2.2 Communication – Communicator; 2.4 Person-Centered Care – Provider; 2.6 Medication-Use Process Stewardship -Steward)</p>
<p>2. Utilize healthcare and medication use systems to demonstrate their value within those systems.</p>	<p>Manage and use the resources of the health care system to best serve the needs of patients and populations. (COEPA 2.6 Medication-Use Process Stewardship -Steward)</p> <p>Utilize and improve the medication use system to assure the safety, effectiveness, and cost-efficiencies in providing patient-centered care. (COEPA 2.6 Medication-Use Process Stewardship -Steward)</p> <p>Understand methods, tools, measures, and standards related to quality of care and medication safety. (COEPA 2.6 Medication-Use Process Stewardship -Steward)</p>
<p>3. Provide culturally appropriate and socially aware pharmaceutical care which promotes inclusion, embraces diversity and advocates for justice to advance health equity.</p>	<p>Advocate and address health equity for diverse populations and communities. (COEPA 2.2,;Communication - Communicator; 2.3 Cultural and Structural Humility – Ally; 2.5 Advocacy - Advocate)</p> <p>Provide holistic, culturally appropriate, patient centered care for diverse patient populations. (COEPA 2.3 Cultural and Structural Humility - Ally; 2.4 Person-Centered Care - Provider)</p> <p>Assess social determinants of health in the delivery of patient centered care. (COEPA 2.3 Cultural and Structural Humility - Ally)</p>

Program Outcome	COEPA Outcome
<p>4. Uphold the highest standards of professional and ethical behavior.</p>	<p>Demonstrate the values, attitudes and behaviors embodied by an ethical, trusted pharmacist, as highlighted in the Oath of a Pharmacist and the Pharmacist Code of Ethics. (COEPA 2.9 Leadership - Leader; 3.1 Self-Awareness - Self-aware; 3.2 Professionalism - Professional)</p> <p>Be professionally responsive in interactions with patients and caregivers, health care professionals, and members of society. (COEPA 3.1 Self-Awareness - Self-aware; 3.2 Professionalism - Professional)</p> <p>Be accountable with all legal, professional, ethical, and regulatory requirements related to pharmacy practice. (COEPA 2.4 Person-Centered Care - Provider)</p>
<p>5. Engage responsibly and accountably within a team.</p>	<p>Effectively participate with an interprofessional health care team to promote safe, effective patient- and population-centered health care. (COEPA 2.2 Communication - Communicator; 2.7 Interprofessional Collaboration - Collaborator)</p> <p>Advance the profession of pharmacy and overall health through innovation, interprofessional team-based care. (COEPA 2.1 Problem-Solving-Process - Problem-solver; 2.7 Interprofessional Collaboration - Collaborator; 2.9 Leadership - Leader)</p>
<p>6. Engage in self-reflection and independent, lifelong learning.</p>	<p>Develop and implement continuous professional development plans, involving life-long learning and professional growth. (COEPA 3.1 Self-Awareness -Self-aware; 3.2 Professionalism - Professional)</p>
<p>7. Apply principles of public health using an evidence-based approach aimed at improving health, wellness, and disease prevention.</p>	<p>Promote improved health, wellness and disease prevention using evidence-based population-based data. (COEPA 2.3 Cultural and Structural Humility - Ally; 2.8 Population Health and Wellness - Promoter)</p> <p>Practice with consideration for the welfare of humanity and relief of suffering. (COEPA 2.3 Cultural and Structural Humility - Ally; 2.8 Population Health and Wellness - Promoter)</p>
<p>8. Provide effective and empathic communication with members of the healthcare team, patients, and their care partners.</p>	<p>Utilize appropriate communication approaches while interacting with patients and their care partners, health care professionals, and the public. (COEPA 2.2 Communication - Communicator; 2.4 Person-Centered Care - Provider)</p> <p>Demonstrate communication skills that result in effective verbal, nonverbal, and written exchanges of information with patients, care partners, and professional associates. (COEPA 2.2 Communication - Communicator; 3.1 Self-Awareness - Self-aware; 3.2 Professionalism - Professional)</p>
<p>9. Engage in creative problem solving to advance patient care.</p>	<p>Advance innovations in pharmacy practice through leadership and advocacy, clinical practice, education, and / or research. (COEPA 2.1 Problem-Solving Process - Problem-solver; 2.9 Leadership - Leader)</p> <p>Integrate pharmaceutical science and pharmacotherapy concepts, science-based theory, and systems knowledge into the creation and assessment of new practice approaches for patient care. (COEPA 1.1 Scientific Thinking - Learner; 2.1 Problem-Solving Process - Problem-solver; 2.4 Person-Centered Care - Provider)</p>

JCPP PPCP

Pharmacists use a patient-centered approach in collaboration with other providers on the health care team to optimize patient health and medication outcomes. An essential first step is the establishment of a patient–pharmacist relationship that supports engagement and effective communication with patients, families, and caregivers throughout the process. In addition, at the core of the process, pharmacists continually collaborate, document, and communicate with physicians, other pharmacists, and other health care professionals in the provision of safe, effective, and coordinated care. This process is enhanced through the use of interoperable information technology systems that facilitate efficient and effective communication among all individuals involved in patient care.



DIRECT PATIENT CARE

Direct patient care is defined as any interaction a student pharmacist has WITH or FOR a patient. This can be delivered in-person, telephonically or by telemedicine. This can include activities such as dispensing medications, counseling, education, discharge counseling, transition of care activities, optimizing outcomes, self-care, and using evidence-based medicine in decision making, among others.

All four required APPE rotations (Community Pharmacy, Hospital/Health System Pharmacy, Ambulatory Patient Care and Inpatient Adult Patient Care) will all allow you to deliver direct patient care. In addition, at least one of your three elective rotations will also allow you to deliver direct patient care. Drug dispensing, in any outpatient or inpatient setting, will allow you to deliver direct patient care.

Interprofessional Education

Interprofessional education (IPE) "occurs when two or more professions (students, residents and health workers) learn with, about, and from each other to enable effective collaboration and improve health outcomes" [World Health Organization. [Framework for Action on Interprofessional education and Collaborative Practice](#). 2010.]

Benefits of IPE

IPE prepares health professions students from different professions to work in a collaborative, team environment to provide highly effective patient- and population-centered care. Interprofessional teams enhance the quality of patient care, lower healthcare costs, decrease patients' length of stay, and reduce medical errors. ([Institute of Medicine](#)) Patients receive safer, high quality care when health professionals work effectively in a team, communicate productively, and understand each other's roles.

Pharmacy Education and IPE

The curriculum within the PharmD program will prepare you to provide entry-level, patient-centered care in a variety of practice settings as a contributing member of an interprofessional team. Throughout the curriculum you will be given the opportunity to practice and refine your skills in interprofessional team dynamics (articulating the values and ethics that underpin interprofessional practice, engaging in effective interprofessional communication, including conflict resolution and documentation skills, and honoring interprofessional roles and responsibilities); interprofessional team education (gain an understanding of the abilities, competencies, and scope of practice of team members); and, interprofessional team practice (participate as a healthcare team member in providing direct patient care and engaging in shared therapeutic decision-making. You will participate in experiential educational activities with prescribers/student prescribers and other student/professional healthcare team members, including face-to-face interactions that are designed to advance interprofessional team effectiveness.

Educational Strategy

Our IPE Curriculum is guided by the [Exposure - Immersion - Competency IPE Framework](#) and is designed to develop student pharmacists who are proficient in the [IPEC Core Competencies for Collaborative Practice](#). You will be introduced to the key components of effective interprofessional collaborative practice early in the curriculum and will be given the opportunity to practice and reinforce these skills during the didactic and Introductory Pharmacy Practice Experience (IPPE) components of the curriculum. Competency of these skills is demonstrated in the Advanced Pharmacy Practice Experience (APPE).

For more information about the University's IPE program, please see: <http://www.buffalo.edu/ipe>

General Information

ROTATION GUIDELINES

1. During the experiential education program, it may be necessary to curtail your commitment to outside work experiences. Take note that the experiential education program is a rigorous experiential endeavor, which incorporates all the didactic education provided to date with the clinical application to patient care.
 - a. It is recommended that student pharmacists minimize the number of hours committed to other obligations (employment, non-professional electives, extracurricular activities).
2. The School cannot guarantee that student pharmacists will be placed in clinical rotation sites within UB transportation. Therefore, as a student pharmacist, you will be responsible for providing your own transportation throughout all four professional years.
3. The experiential education program schedule is a complex process incorporating site and preceptor availability as well as student pharmacist rotation requirements. Scheduling is done through a web-based database called CORE ELMS. Student pharmacists will be given access to this database, trained on its use and advised when it is time to begin making rotation preferences.
4. Once a student pharmacist's rotation schedule is assigned the student pharmacist cannot change it except for emergency situations. Student pharmacists must request the change by contacting the Office of Experiential Education (OEE). The OEE will then approve/deny the request and provide further instruction to the student pharmacist.
5. No guarantee can be made as to specific rotation site assignments or geographic locations. Therefore, all student pharmacists must be prepared to commute within the Western New York area, which includes Buffalo and surrounding area. The counties that make up the Western New York area include Allegany, Cattaraugus, Chautauqua, Erie, Monroe, Niagara, Orleans, Wyoming, and Genesee. This is approximately a 90-mile radius surrounding UB SPPS.
6. All Student Pharmacists are required to check e-mail accounts **DAILY** for messages pertinent to the experiential education program. This is the only method of communication the experiential education program has with the student pharmacists once they are off-site. The University at Buffalo provides every student pharmacist with a UB e-mail account while they are enrolled in any academic program.
 - a. This account (@buffalo.edu) is recognized as the official means of communicating with student pharmacists for on-line instruction, list-servers, course-instructor evaluations, and other systems as developed.
 - b. If a student pharmacist elects to have correspondence from their UB e-mail forwarded to another e-mail account, it is his/her responsibility to ensure that they are receiving all forwarded documents and information.
 - c. A student pharmacist will be responsible for all university, school and course information or correspondence that is provided via his/her UB e-mail account. Faculty and staff members will not make provisions or accommodations for a student pharmacist if he/she misses this information or course material because it was forwarded to another e-mail account.
7. The School of Pharmacy and Pharmaceutical Sciences does NOT reimburse student pharmacists for any incidental expenses associated with the experiential education program which include but are not limited to airline flights or flight cancellations, meals, parking expenses, tolls, gasoline, mileage or lodging, drug testing or criminal background checks incurred before or while on the experiential education program rotations.
8. Student pharmacists may need to adjust their rotation schedules according to respective preceptor availability. It is the student pharmacist's responsibility to clarify daily rotation schedules at the beginning of the rotation.
9. Student work schedule is not a valid reason for requesting a rotation schedule change (see #1 above).

CONTACTING PRECEPTOR

It is the student pharmacist's responsibility to contact his/her preceptor at least **10 to 21 days before** commencement of a new rotation component (via e-mail or telephone) to determine on-site hours and discuss parking, security, and other issues.

It is highly recommended that student pharmacists scheduled outside of the WNY area should contact their preceptors **more than 21 days** prior to the start of the rotation and/or making travel and housing arrangements to ensure that the rotation is still being offered, that the site is still open and/or the preceptor still works there. It is the **student pharmacist's** responsibility to follow up with their preceptor to confirm communication via e-mail **OR** phone.

POLICIES AND PROCEDURES

Experiential Education – Student Pharmacist Contract – 2024-2025

This contract is a summary of the Student Pharmacist's responsibilities as fully articulated in the University at Buffalo School of Pharmacy and Pharmaceutical Sciences Experiential Education Manual. Every Student Pharmacist is expected to sign and date the Contract, declaring he/she has read, understands, and will uphold the Contract. The signed and dated Contract is to be kept readily available by the Student Pharmacist for related queries at practice sites. In addition, Student Pharmacists are to upload the signed contract into their CORE ELMS profile.

The Experiential Education – Student Pharmacist Contract is an Agreement made between the University at Buffalo School of Pharmacy and Pharmaceutical Sciences (hereinafter the "School") and each Student Pharmacists enrolled in the Doctor of Pharmacy program (hereinafter the "Student"). Whereas, pharmacy practice experiences (aka rotations) are a required component of the Doctor of Pharmacy curriculum, the School has entered into affiliation agreements with practice sites and affiliate faculty/preceptors at those practice sites to train, guide, supervise, and evaluate Student Pharmacist performance relative to the learning objectives of each course/rotation. In turn, each Student is required to satisfactorily fulfill the School's explicit policies and responsibilities when gaining pharmacy practice experiences with preceptors in practice sites. Failure to meet the terms of this contract will result in failure of the rotation.

1. **PROFESSIONALISM:** I will dress, speak, and act professionally and be actively engaged at all times, upholding the School's Standards of Professional Conduct: The Honor Code and the School's Social Media Policy.
2. **PREREQUISITES FOR ROTATIONS:** I will submit evidence of fulfilling all School requirements for rotations and any other requirements of the assigned site(s) by specified due dates, I understand that I may fail the rotation should I not fulfill these requirements by specified due dates. I understand that sites may decline to allow me on rotation if I have not fulfilled all requirements. This includes, but is not limited to, being medically compliant to participate in rotations (e.g., updated Annual Immunization Review Form, PPD, annual influenza vaccine, etc.).
3. **ROTATION EXPENSES:** I understand that I am responsible for all rotation expenses (e.g., housing, parking, transportation, purchase of a vehicle, ticket etc.).
4. **REMUNERATION:** I understand that I must not receive any remuneration from the UB SPPS, assigned practice site or preceptor for any expenses related to rotations.
5. **CONTACT THE PRECEPTOR:** I understand that I am required to communicate with each assigned preceptor at least 10 to 21 days in advance of the start of my rotation(s) or as required by the site.
6. **ROTATION PREPARATION, HOURS, AND ASSIGNMENTS:** The primary objective of experiential rotations is learning. Therefore, as an adult learner, I will actively prepare for and be actively engaged in my rotation(s) to maximize my learning. I will fulfill the required number of hours and I understand that extended hours including evenings and weekends may be necessary. I will take assignments and deadlines seriously, as I know this is a measure of professionalism and maturity and I will adjust my outside working hours as needed to ensure rotation(s) are my first priority.
7. **ATTENDANCE:** I understand that leaving early or leaving the site during rotation hours without permission is not permitted. I will contact my preceptor(s) immediately in the event of unscheduled circumstances, such as illness, bereavement, traffic delays, failed alarms, etc. with the reason for my tardiness and my expected time of arrival. I understand that tardiness, unexcused absences, or leaving early without approval may result in failure or grade penalty of my rotation. I also understand that I must follow the site's policy and decision to close for inclement weather.
8. **ABSENCES:** I understand that I must contact preceptors as soon as possible in the event that I cannot report to the assigned site on a given day with the reason for absence. I understand that preceptors will require me to make up any absences from that rotation due to accreditation requirements. I understand that I should take the initiative to contact UB if I anticipate a prolonged absence (3 or more days) from rotation so a plan can be put in place for successful completion of the rotation requirements. I understand that I must meet all rotation requirements, including required rotation hours.
9. **COVID-19:** I certify that I reviewed the COVID-19 information for Healthcare Workers provided by the Centers for Disease Control and Prevention including: <https://www.cdc.gov/coronavirus/2019-nCoV/hcp/index.html>. I will adhere to my site's requirements, and I will also monitor myself daily for the signs and symptoms of COVID-19.
10. **ILLNESS:** I understand that I must contact preceptors as soon as possible in the event that I am sick (eg; flu, COVID, strep, etc.). It is my responsibility to get medically cleared before returning to rotation. I will always follow site protocol for illness. I understand that I must meet all rotation requirements, including required rotation hours.
11. **INAPPROPRIATE USE OF TECHNOLOGY:** I understand that smartphones are not routinely used in all practice settings as a device for accessing pharmacy-related research and references. Therefore, I will seek permission from my preceptor(s) to use my personal smartphone for pharmacy-related references and research. Student must not make an electronic audio and/or video recording of the site or preceptors, support staff, pharmacy faculty and administrative personnel, patients, and other health care providers without the express written consent of the student's preceptor.

12. INITIATIVE, DISCRETION, AND CONFIDENCES: I will take initiative in communicating and engaging with my preceptor(s), pharmacists, staff, other healthcare professionals, and patients, but I will not step beyond the realm of professional courtesy, common sense, or preceptor supervision. I understand that I should never publicly challenge the advice or directions of my preceptor(s), but should discuss any concerns or disagreements in private. I will respect any and all HIPAA confidences revealed during each rotation, including patient information, pharmacy records, fee systems, professional policies, etc. I understand that audio/video recording a preceptor and/or patient interaction and/or any HIPAA protected information while on site violates HIPAA and if done will result in failure of the rotation.
13. PROFESSIONAL LIABILITY: When completing assigned rotations, I understand I must be compliant with the University's health and malpractice insurance requirements throughout **all** community, hospital or other site-based training experiences (e.g., updated immunization records within the past twelve months and liability coverage at the \$1 million/\$3 million level). Please note: Students doing an Advanced Pharmacy Practice Experience (APPE) rotation in Canada must have \$2 million/\$4 million coverage)
14. HEALTH RELATED EXPENSES: I understand that neither the school nor the practice sites will be liable for any medical expenses incurred by me participating in the program (e.g., personal illness, needlestick or other BBP exposure). For example, any student or patient costs associated with a needle stick will be the responsibility of the student.
15. POLICIES AND PROCEDURES; LAWS AND REGULATIONS: I will follow all policies, procedures, and requirements of each rotation site in addition to the policies, procedures, and requirements of the School of Pharmacy. I will obey all laws and regulations that govern pharmacy practice and seek clarification when I am uncertain. I will not accept compensation during any school assigned rotation that I am receiving academic credit for.
16. Student pharmacists may not provide drug information with other health care providers without first discussing information directly with assigned preceptor or designee.
 - o All student pharmacists must provide literature documentation.
 - o Student pharmacists are not allowed to make entries into medical charts unless specified by site standards and preceptor. All written entries must be co-signed by their supervising preceptor to maintain legality of entry.
17. EVALUATIONS AND HOURS TRACKING: I understand that I am required to complete all rotation evaluations on time. I will not lobby the preceptor for a higher grade. Doing so may result in a reduction of the Professionalism score. I understand that I am expected to update my rotation hours in Hours Tracking of CORE ELMS daily. Failure to do so will result in final grade penalties.
18. INCOMPLETE AND FAILED ROTATIONS: If for any reason I cannot start a rotation, do not complete a rotation, or fail a rotation, I understand that I may have to wait until the start of the next regularly scheduled rotation to complete or repeat that rotation. I understand that rotation assignment(s) will be based upon preceptor availability and any terms associated with any academic probation, medical leave of absence, or administrative leave of absence could delay my graduation.
19. ROTATION CHANGE REQUESTS: I understand that after rotation assignments are announced, I cannot contact a preceptor to attempt to arrange or change a rotation. I understand that changes are made only when the preceptor or site becomes unavailable, or if the Office of Experiential Education approves a change after I submit documentation describing my substantial problem that prevents participation.
20. HEALTH AND IMMUNIZATION STATUS: I understand rotation sites require students to provide proof of health and immunization status and other information in order for me to complete rotations there. For my convenience, I hereby grant the staff and faculty working in the UB SPPS Office of Experiential Education permission to send any and all Protected Health Information to a potential rotation site through unsecured UB email on my behalf.
21. IMMUNIZATION PRIVILEGES: When eligible, I will acquire and maintain an active NY State Immunization Certification, acquire, and maintain Bloodborne Pathogen certification and CPR (not-virtual) certification until I graduate from the UBSPPS.
22. Completing rotations at a site where you work. Completing a rotation at the same site you work at is discouraged, however in certain circumstances this cannot be avoided. We want to remind you of a few simple rules to follow to protect you and your employer:
 - a. If you work at a retail/community pharmacy, you should not do an IPPE or APPE at that same company, we have enough other similar type rotations so you can meet your requirements.
 - b. If you work at a hospital/institutional site, managed care organization or a Physicians group, you can do a rotation at that same facility if: (1) you are not being paid for the hours you're on site, (2) your preceptor isn't your direct report/boss and (3) the activities you are doing are DIFFERENT than what you would do as a paid intern.

If you have questions about any of these scenarios, it is the student's responsibility to reach out to OEE to discuss it and potentially get rescheduled.

POLICY FOR STUDENT EXPOSURE TO BLOODBORNE PATHOGENS

1. If an incident occurs, immediately wash the affected areas with soap and water. If it is an eye splash injury, flush the eye with water for 10 minutes.
1. Report the incident immediately to your preceptor and promptly seek medical attention based on your preceptors' recommendations
2. If the incident occurs off campus on a rotation, go to that facility's ER or occupational health department if they have one. If not, go to the nearest ER or urgent care center. Please ask that copies of any lab results and other medical records be sent to the infectious disease physician at Student Health:

<p>Dr. John Sellick UB Student Health Services 4350 Maple Road Amherst, NY 14226 Phone: 716-829-3316 Fax: 716-829-2564</p>	<p>Please then call Student Health Services to make an appointment for follow up as listed below:</p> <p>If student pharmacist was started on PEP (Post-Exposure Prophylaxis) for HIV at the time of the incident, the follow up should be immediate (within hours). If no PEP, student pharmacist should follow up in 6 weeks.</p>
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3. Any medical costs incurred due to an injury on-site is the financial responsibility of the student pharmacist. The University and/or site is not financially responsible for any personal costs due to medical events.
4. "In addition to contacting UB Student Health Services, student should follow all site policies and procedures"

ACCESSIBILITY RESOURCES

If you have any disability which requires reasonable accommodations to enable you to participate in this course, please contact the Office of Accessibility Resources in 60 Capen Hall, 716-645-2608 and also the instructor of this course during the first week of class. The office will provide you with information and review appropriate arrangements for reasonable accommodations, which can be found on the web at: [Accessibility Resources](#).

ABSENCES

Student pharmacists must contact preceptors as soon as possible in the event they cannot report to their assigned site on a given day with the reason for absence. If a student pharmacist will miss >8 hours on any individual rotation, the student and preceptor should contact the Office of Experiential Education (eeoffice@buffalo.edu). The preceptor may excuse the student pharmacist for valid reasons (illness, family death, accidents, interviews, religious observances, public emergencies, professional organization meetings, etc.). It is expected that by the end of the rotation the student pharmacist will have met all rotation requirements, including required rotation hours.

All student pharmacists must complete the minimum number of required hours for each rotation (IPPE or APPE). All absences need to be discussed with the preceptor in advance (when able). Some absences will require the student to "make up" the missed hours and some will not. Refer to the chart below.

Hours do not need to be made up for conferences since these are an educational experience that furthers your education and knowledge base. Match Day, holidays, illness, and weather do not facilitate further knowledge attainment and therefore the hours need to be made up.

Reason for Missed Rotation Time	Hours Must be Made Up?	Student to add Comment in Hours Section of CORE ELMS and log hours in CORE ELMS
ACCP Meeting (up to 16 hours)	No	Yes
ASHP Residency Showcase (up to 24 hours)	No	Yes
APhA Annual Meeting and Exposition (up to 24 hours)	No	Yes
Other Professional Meeting Attendance (hours to be determined with consult of OEE)	No	Yes
Match results day, Phase I and/or II	Yes	Yes
Religious Holiday or Holiday	Yes	Yes
Illness/Inclement Weather	Yes	Yes

All student pharmacists must complete and document in CORE ELMS at least the minimum number of required hours for each rotation. Students should add a comment in the hours section of CORE ELMS describing the reason for the missed hours.

Preceptors reserve the right to require the student pharmacist to make up ANY absences from that rotation at their discretion.

1. Personal plans (vacations, picnics, weddings, parties, sporting events, sporting clubs, employment, etc.) are **NOT** valid reasons for being excused and will **NOT** be accepted.
2. Any student pharmacist requiring surgery or experiencing a medical condition which requires prolonged medical care or treatment must provide a doctor's excuse to justify the absence. This written excuse must be submitted to the Office of Experiential Education (eeoffice@buffalo.edu) as soon as possible.
3. Student pharmacists need to be aware that having a contagious illness, or exposure to a contagious illness, may prevent them from entering a patient care facility or area even if the student pharmacist feels well enough to participate in the rotation activities. Student pharmacists must contact their preceptor as well as the Office of Experiential Education in the event that they cannot be on site due to illness (e.g., COVID, flu). A determination will be made regarding student pharmacist placement. It may be necessary for the Office of Experiential Education to place the student pharmacist in a non-patient care rotation. It is inappropriate for student pharmacists to contact preceptors and negotiate a reduced level of rotational activities due to their illness.
 - a. When a student pharmacist is able to return to the rotation, a doctor's note must also be submitted indicating that the student pharmacist is medically cleared and able to participate in rotation activities.
4. Remedial activities for the student pharmacist will be organized through the Office of Experiential Education and the preceptor.
5. If the University declares a closing (such as poor weather, etc.) student pharmacists may not be required to go to their rotation site depending on weather conditions at the site. The student should communicate with the preceptor to determine if it is safe to go to the site. If the student does not go to the rotation site, then the preceptor can create a plan to make up for the missed hours. All required hours must be completed prior to the end of the rotation.
6. If the need arises for a student pharmacist to attend professional activities above and beyond their assigned rotation, they must inform the preceptor as soon as possible to make arrangements accordingly.
7. Student Pharmacists must inform their preceptor of specific religious national holidays they will acknowledge.
8. Students complete Experiential Education rotations based on the availability of the sites and preceptors. Therefore, students may complete rotations during the weekends and on official holidays. Sites may also require students to work any shift.

****Unexcused absences will not be tolerated and may cause the student to receive a failing grade. The course coordinators will be notified immediately of this unprofessional behavior.**

PROFESSIONALISM

Throughout all experiential education rotations, student pharmacists are expected to maintain the highest standard of professional behavior (**see Standards of Professional Conduct: The Honor Code**). Student pharmacists who do NOT comply with the standards outlined below and in the Honor Code, will be removed from respective rotation site. No alternative rotation site will be assigned until the student pharmacist demonstrates remedial actions. This will prolong program completion. Student pharmacists must comply with the following areas:

APPEARANCE AND PERSONAL ATTIRE

1. A clean long-sleeved white coat of suit coat length (short lab coat) will be worn when you are at a small group session or clinical setting in which you will interact with patients. The white coat serves to identify you as a medical student.
2. ID badges must be worn and easily viewable.
3. Your appearance and mode of dress should be that of a professional and neither provocative nor offensive. It is recommended that you dress conservatively and appear neat and clean (hair controlled, nails clipped and clean, etc.).

4. Clothing should not be restrictive, nor revealing. Blue jeans should not be worn. Jewelry should be kept to a minimum. Products with a strong fragrance should be avoided.
5. As a University at Buffalo School of Pharmacy and Pharmaceutical Sciences student, you are a guest of our clinical partners, and as such, should respect the dress code of each site they attend. Observe and model the style of dress of the other professionals at each location, and if you are unsure, please ask what is expected.
6. Lab coats worn on rotations must include the school patch on the pocket. Some sites may require usage of an in-house identification tag.
7. Student pharmacists must wear a nametag on their lab coat that indicates as follows:

Student Name
Student Pharmacist/Pharmacy Intern
University at Buffalo

8. As always, the student pharmacist must follow and adapt to any specific modifications of the above policies due to preceptor and/or site preferences.

Policy approved and adopted from [Diversity, Inclusion and Learning Environment](#) (DIALE) Committee : 3/25/2021

PSYCHOSOCIAL SKILLS

1. Student pharmacists must interact politely, tactfully and in a professional manner with preceptors, staff and patients at all times. Insubordination is inexcusable and is grounds for lowering student pharmacist's grade or possible ejection from the rotation.
2. Student pharmacists should not hesitate to ask for assistance and/or clarification as needed at the respective site. Mistakes due to overconfidence or failure to obtain clarification will not be tolerated and are considered unprofessional conduct. Knowledge and acceptance of one's limitations is a vital skill.
3. Student pharmacists should attempt to resolve misunderstandings in a constructive manner.

ACADEMIC INTEGRITY

Academic integrity is a fundamental university value. Through the honest completion of academic work, student pharmacists sustain the integrity of the university and of themselves while facilitating the university's imperative for the transmission of knowledge and culture based upon the generation of new and innovative ideas. For more information, please refer to the [SPPS Academic Integrity and Professional Conduct Policy](#).

Plagiarism detection software may be used by individual instructors or the institution to aid in determining the originality of student work.

The following actions constitute major forms of academic dishonesty among student pharmacists:

1. **Submission:** submitting academically required material that has been previously submitted in whole or in substantial part in another course, without prior and expressed consent of the instructor;
2. **Plagiarism:** copying material from a source or sources and submitting this material as one's own without acknowledging the particular debts to the source (quotations, paraphrases, basic ideas), or otherwise representing the work of another as one's own;
3. **Cheating:** receiving information from another student, with the intent to deceive while completing an examination or a preceptor specific assignment. ;
4. **Falsification of academic materials:** fabricating laboratory materials, notes, reports or any forms of computer data; forging an instructor's name, initials or submitting a report, paper, materials, computer data or examination (or any considerable part thereof) prepared by any person other than the student responsible for the assignment) procurement, distribution or acceptance of examinations, laboratory results, or confidential academic materials without prior and expressed consent of the instructor;
5. **Procurement,** distribution or acceptance of examinations, laboratory results, or confidential academic materials without prior and expressed consent of the instructor;
6. **Theft of drugs or other merchandise, equipment, etc.** from the School or any rotation site;
7. **Altering incorrectly compounded "prescriptions"** in the Professional Practice Laboratory, or deliberately compounding a prescription incorrectly, with intent to deceive the instructor;
8. **The use of electronic devices** (computers, calculators, palm pilots) during an examination with the purpose of procuring answers or intent to deceive, without the express permission of the instructor;
9. **Inviting or having knowledge** of other people in an examination that are not current members of the class without express permission of instructor;
10. **Other** instances as defined by the Student Academic Affairs Committee

A case of academic dishonesty shall be referred to the Student Academic Affairs Committee. Generally, the University's "Disciplinary Procedures for Academic Infractions" shall be followed. A proven case of academic dishonesty against a student may result in his/her expulsion from the School of Pharmacy and Pharmaceutical Sciences and the University at Buffalo.

INTERN PERMIT

New York State Intern Permits

PharmD student pharmacists must obtain a New York State Intern Permit **prior to participating in the Experiential Education Program**. Student pharmacists should carry their original copy of their current intern permit to all their rotation sites. A copy must be uploaded into CORE ELMS and the expiration date should be noted. **An intern permit is good for five years from the date of issue.**

Out of State Intern Permits

Requirement

Student pharmacists may need to obtain an intern permit in the state they will be completing their rotation, and it is the responsibility of the student pharmacist to seek out and comply with all applicable pharmacy state laws and regulations.

Process

Each state board of pharmacy has a different set of requirements. Applications must be obtained by the student pharmacist.

- You are responsible for mailing the original application with the appropriate fee directly to the Board of Pharmacy.
- Visit the State Board of Pharmacy website in which you are seeking licensure (as a pharmacist or an intern): <https://nabp.pharmacy/>
- Read application instructions carefully and complete the appropriate application. Do not complete any of the School's section. Use your official conferral date of **May 16** on any application.
- Each application will require documentation to be completed by our office. Scan a copy of your completed application to: pharm-advise@buffalo.edu.
- If you complete the application online, please make sure you print a copy to send to the school and/or send a pdf or receipt of application. Also keep a copy for your records.
- Note for P1's: we will not sign off on intern permit forms until after the spring grade review and successful completion of P1 coursework.

MALPRACTICE INSURANCE REQUIREMENTS

All student pharmacists must be compliant with the University's health and malpractice insurance requirements throughout **all** community, hospital, or other site-based training experiences (e.g., updated immunization records within the past twelve months and liability coverage at the \$1 million/\$3 million level).

Please note: student pharmacists doing an APPE rotation in Canada must have \$2 million/\$4 million coverage

ANNUAL IMMUNIZATION REVIEW FORM

Expiration dates on Annual Immunization Review Forms or malpractice insurance policies are noted and will be enforced (e.g., immunization updates must be repeated after 12 months). Keep in mind you are considered a "health related" student pharmacist. Therefore, you will need to complete the entire Annual Immunization Review form (MMR, TB Screening, Hepatitis B immunity, Tetanus/Diphtheria, Varicella immunity and yearly Influenza vaccine).

Student pharmacists must complete either an "**Annual Immunization Review Form**" (AIR) with their private physician's office (an RN or MD can fill it out) or at the UB Student Health Center (SHS). **Records must be updated at Student Health yearly**. Student pharmacists who choose to go to an outside provider for services must submit the AIR form to SHS in person, via fax or through USPS mail. Student Health cannot accept records via email.

When student pharmacists update their records at Student Health they will be provided with an "Immunization Record". These forms are record of current immunizations and also include proof of updated Measles, Mumps Rubella (MMR) TB Screening, Hepatitis B immunity, Tetanus/Diphtheria, Varicella immunity, yearly Influenza Vaccine and COVID-19 vaccine. This information **must** be on file with the University at Student Health by **November 1st** in order to participate in any clinical training activities. Student Health will verify all information is up-to-date and indicate compliance on Brightspace in the "Student Health Information for Pharmacy Students" Brightspace site.

PLEASE NOTE: Submission of records to Student Health does not automatically equal compliance. Records need to be reviewed by SHS staff to ensure all requirements have been met before a student can be marked compliant in Brightspace. This can take days to weeks depending on the time of year, staffing levels, etc. Precedence is given to student pharmacists in programs who are in the midst of their deadline times.

Student pharmacists have access to their Immunization Record through Patient Link online at <https://patientportal.buffalo.edu/login.aspx>. Updated Immunization Records must be uploaded to CORE ELMS to by students on a yearly basis by **December 1st**. Student Health does NOT have access to CORE ELMS. EE does not have access to Student Health records.

The sites/preceptors have the right to deny student pharmacists access to the site for training activities until student pharmacists supply requested documents (e.g., copies of immunization records, criminal background check, etc.)

HEALTH AND IMMUNIZATION STATUS

Students should understand that some rotation sites require students to provide proof of health and immunization status in order for the student to complete rotations at their sites. Students will be asked to grant the staff and faculty working in the UB SPPS Office of Experiential Education permission to send any and all Protected Health Information to a potential rotation site through unsecured UB email on their behalf. The permission for this sign-off is item #18 on the Experiential Education Student Pharmacist Contract.

Student pharmacists completing international rotations must ensure that they receive all required immunizations before traveling outside of the United States.

TB SCREENING

TB screening is one of the several health requirements for participation in the experiential education program. If the test is not read within the specified time period, the test is invalid and must be re-administered. In order for a PPD to be considered valid, it must have the date placed, date read and the reading in numeric form. Student pharmacists who have had a BCG vaccination should check with their physician before submitting to the TB test.

HEPATITIS B IMMUNITY

University at Buffalo requirements indicate that the hepatitis B immunity or sufficient titer (a three-shot series) is **REQUIRED FOR ALL UB STUDENT PHARMACISTS**.

VARICELLA IMMUNITY

A history of Varicella Disease, Vaccine, or Immunity is also required by the University at Buffalo

INFLUENZA VACCINE

All PharmD student pharmacists are required to obtain the yearly influenza vaccine. **Student pharmacists MUST keep a copy of the proof of influenza vaccine that is given to Student Health Services as individual rotation sites will/may ask for proof of the influenza vaccine. A copy of the vaccine form must also be uploaded to CORE ELMS. A copy of the vaccine form must also be uploaded to CORE ELMS.**

COVID-19 VACCINE

See <https://www.buffalo.edu/coronavirus/latest-update.html> for university updates.

NOTE: For more information regarding University at Buffalo health requirements for student pharmacists in Health Related Programs, please go to the Student Health website at www.buffalo.edu/studentlife/health. The required form can be found at that website.

Rotation sites have the right to request the withdrawal of any student whose health or performance is a detriment to patient well-being.

CRIMINAL BACKGROUND CHECKS

All student pharmacists are required to have a criminal background check once per year from [Certiphi](#) (vendor approved by UB-SPPS) at the student's expense.

Student pharmacists currently enrolled in the PharmD program must receive an updated CBC from the School's approved vendor **prior to May 1 of every year**. Failure to request the CBC in a timely manner may delay a student's progression into the following year. If you need to have your background check sent out to a third party, such as a rotation site, you may login to Certiphi and use the myReport Delivery Manager Tool on applicationstation.com. If a facility requires that the student's results from the CBC be forwarded to the facility as a condition of student acceptance, the Office of Experiential

Education will notify the student in a timely fashion. The student will then request that his/her CBC be sent directly to the facility. Facilities may request that a student submit to a CBC at any time prior to or during the time of the rotation. Student pharmacists who have a break in enrollment of at least one semester (e.g., leave of absence) will be required to repeat a CBC prior to reentering the program.

The Office of Experiential Education will be working to ensure that all student pharmacists entering their P2, P3 and P4 year have completed their criminal background check. No student will be allowed to begin their rotations without an updated CBC from the spring prior to the start of each year. Updated CBCs should be uploaded to CORE ELMS.

- Some sites may require a more updated criminal background check. For example, students going to Montefiore are required to get an updated CBC no more than 30 days prior to the start of their rotation. Students may need to get a 2nd CBC if it is a site requirement.
- Some sites may require a drug screening before starting your rotation. Check the “Site Requirements” in CORE as soon as possible to see if any of your sites have this requirement. You should also check the “Specifics” and “Docs” section of your preceptor account in CORE ELMS for information regarding site policies. Student Health Services can assist with the drug screening requirement. If you are away from Buffalo, you can request a drug screening at your local urgent care facility.

BLOOD BORNE PATHOGEN TRAINING

Evidence of Blood Borne Pathogen training must be uploaded to CORE ELMS **by May 1st of every year**. Training is available here: <https://www.buffalo.edu/administrative-services/forms-catalog/facilities/bloodborne-pathogen-training-request.html> and in CORE ELMS following the CEI link (a fee will apply through CEI).

CPR CERTIFICATION

It is the responsibility of the Student Pharmacist to maintain CPR certification (for healthcare providers with use of AED) for the entirety of their time as student at UB completing either IPPE or APPE rotations. This certification card should be uploaded in CORE ELMS **by May 1st of each year**.

DISCRIMINATION AND HARASSMENT POLICY

UB does not have a policy that limits or favors current UB students, transfer or out-of-state applicants. All applicants are considered equally. UB SPPS is committed to a nondiscriminatory admission policy and philosophy. In accordance with federal and state laws, no person, in whatever relationship with the University at Buffalo, shall be subject to discrimination on the basis of age, religion or creed, color, disability, national origin, race, ethnicity, sex, marital or veteran status. Learn more about the University at Buffalo’s Non-Discrimination Policy at <https://www.buffalo.edu/equity.html>

SOCIAL MEDIA POLICY

UB SPPS Official policy can be found here: https://pharmacy.buffalo.edu/news-events/social-media/social-media-policy.html#title_909606897

Introductory Pharmacy Practice Experience (IPPE)

Purpose

IPPEs expose student pharmacists to common contemporary U.S. practice models, including interprofessional practice involving shared patient care decision-making, professional ethics and expected behaviors, and direct patient care activities. IPPEs are structured and sequenced to intentionally develop in student pharmacists a clear understanding of what constitutes exemplary pharmacy practice in the U.S. prior to beginning APPE.

Outcomes and Rotation Structure/Courses - See IPPE Omni syllabus (Appendix D) for more information.

REQUIRED DOCUMENTATION FOR ALL IPPE ROTATIONS

The following documentation is required to be completed by the student by the respective time point (e.g., midpoint) to avoid a grade penalty.

START	MIDPOINT	FINAL
<ul style="list-style-type: none">Hours Tracking (daily)	<ul style="list-style-type: none">Student to complete Self-Evaluation of EPAs, Educational Outcomes, and ProfessionalismStudent to review Preceptor's Evaluation of their Professionalism and Skills Evaluation with PreceptorHours Tracking (daily)	<ul style="list-style-type: none">Student to review Preceptor's Evaluation of their Professionalism and Skills Evaluation with PreceptorStudent to complete Self-Evaluation of EPAs, Educational Outcomes, and ProfessionalismPatient Characteristics and Interprofessional EngagementIPPE ReflectionHours Tracking (finalize)Evaluation of Preceptor and Site

Evaluation of EPAs, Educational Outcomes, and Professionalism

- Location: CORE ELMS > Evaluations > Self-Evaluations
- Purpose: This evaluation will be completed by both the student and the preceptor at the midpoint and end of the rotation. This evaluation will provide the student with an overall assessment of their achievement of learning outcomes.

Patient Characteristics and Interprofessional Engagement

- Location: CORE ELMS > Evaluations > Self-Evaluations
- Purpose: This evaluation will be completed by the student at the end of the rotation. This form is intended for the student to log the different patient populations, conditions and interprofessional experiences they had during the IPPE rotation.

IPPE Reflection

- Location CORE ELMS > Field Encounters
- Purpose: This brief, self-reflection will be completed by the student at the end of the rotation. The student is required to discuss this reflection with their preceptor at the end of the rotation. This reflection and discussion will assist the student with understanding how this IPPE rotation affects their professional development.

Hours Tracking

- CORE ELMS > Hours Tracking
- Purpose: Student pharmacists are also required to complete their on-line **daily duty hours in Hours Tracking** on CORE ELMS as documentation of the hours devoted to rotation activities. The log must be updated regularly and approved by the preceptor at the time of the midpoint and final evaluation and at any other time requested by the preceptor. Hours are not official by the Office of Experiential Education until confirmed by the preceptor.

Evaluation of Preceptor and Site

- CORE ELMS > Evaluations > Evaluation of Preceptor/Site
- Purpose: This evaluation must be completed by the student at the end of the rotation. This form is intended for the student to review and provide feedback regarding the preceptor/site. All responses will be anonymized and reported in aggregate to the preceptor at the end of the year.

Advanced Pharmacy Practice Experience (APPE)

PURPOSE

APPE follows IPPE and ensures that student pharmacists have multiple opportunities to perform patient-centered care and other activities in a variety of settings. Collectively, APPE hones the practice skills, professional judgment, behaviors, attitudes and values, confidence, and sense of personal and professional responsibility required for each student to practice independently and collaboratively in an interprofessional, team-based care environment. APPEs integrate, apply, reinforce, and advance the knowledge, skills, attitudes, abilities, and behaviors developed in the pre-APPE curriculum and in co-curricular activities.

Key Elements:

1. **Patient care emphasis:** Collectively, APPEs emphasize continuity of care and incorporate acute, chronic, and wellness-promoting patient-care services in outpatient (community/ambulatory care) and inpatient (hospital/health system) settings.
2. **Diverse populations:** In the aggregate, APPEs expose student pharmacists to diverse patient populations as related to age, gender, race/ethnicity, socioeconomic factors (e.g., rural/urban, poverty/affluence), and disease states.
3. **Interprofessional experiences:** In the aggregate, student pharmacists gain in-depth experience in delivering direct patient care as part of an interprofessional team.
4. **Learning activities:** The APPE curriculum, in the aggregate, includes but is not limited to: (1) direct patient care, (2) interprofessional interaction and practice, (3) medication dispensing, distribution, administration, and systems management, and (4) professional development.
5. **Geographic restrictions:** Required APPEs are completed in the United States or its territories or possessions. All quality assurance expectations for U.S.-based experiential education courses apply to elective APPEs offered outside of the U.S.

Outcomes and Rotation Structure/Courses - See APPE Omni syllabus (Appendix F) for more information.

REQUIRED DOCUMENTATION FOR ALL APPE ROTATIONS

Please be aware that the below on-line evaluation is MANDATORY for every APPE rotation. The APPE Coordinator is notified of all students who do not complete these on-line evaluations at the end of each rotation. Students who do not complete this evaluation by the deadline posted in the Advanced Pharmacy Practice Experience (APPE) section of the Experiential Education Manual will receive a grade penalty as listed in the APPE Section of the EE manual.

START	MIDPOINT	FINAL
<ul style="list-style-type: none"> • Hours Tracking (daily) • Student submits EPA scores on past required rotations (Ambulatory Patient Care, Inpatient Adult Patient Care, Hospital/Health Systems, Community Pharmacy) via EPA longitudinal form. 	<ul style="list-style-type: none"> • Evaluation of EPAs, Educational Outcomes, and Professionalism • Hours Tracking (daily) 	<ul style="list-style-type: none"> • Evaluation of EPAs, Educational Outcomes, and Professionalism • Patient Characteristics and Interprofessional Engagement • Hours Tracking (finalize) • Evaluation of Preceptor and Site

Evaluation of EPAs, Educational Outcomes, and Professionalism

- Location: CORE ELMS > Evaluations > Self-Evaluations
- Purpose: This evaluation will be completed by both the student and the preceptor at the midpoint and end of the rotation. This evaluation will provide the student with an overall assessment of their achievement of learning outcomes.

Patient Characteristics and Interprofessional Engagement

- Location: CORE ELMS > Evaluations > Self-Evaluations
- Purpose: This evaluation will be completed by the student at the end of the rotation. This form is intended for the student to log the different patient populations, conditions and interprofessional experiences they had during the APPE rotation.

Hours Tracking

- CORE ELMS > Hours Tracking
- Purpose: Student pharmacists are also required to complete their on-line **daily duty hours in Hours Tracking** on CORE ELMS as documentation of the hours devoted to rotation activities. The log must be updated regularly and approved by the preceptor at the time of the midpoint and final evaluation and at any other time requested by the preceptor. Hours are not official by the Office of Experiential Education until confirmed by the preceptor.

Evaluation of Preceptor and Site

- CORE ELMS > Evaluations > Evaluation of Preceptor/Site
- Purpose: This evaluation will be completed by the student at the end of the rotation. This form is intended for the student to review and provide feedback regarding the preceptor/site. All responses will be anonymized and reported in aggregate to the preceptor at the end of the year.

MIDPOINT EVALUATION PROCESS

A midpoint evaluation does not directly impact a student pharmacists' final grade. This is your opportunity to self-reflect on your performance over the first half of the rotation and the preceptor's opportunity to evaluate the student pharmacist early in the module to document their progress and ability to complete the rest of the rotation satisfactorily. Both positive and negative comments should be identified, and a plan should be presented, if necessary, so that the student is aware of their progress early in the rotation and therefore can adapt to the feedback provided to be able to successfully complete the rotation over the remaining weeks. The preceptor will see your self-evaluation and comments in real-time for the midpoint Evaluation of Professionalism and Skills.

MIDPOINT DEADLINES (6-week rotations)			
MODULE	ROTATION DATES	STUDENT TO COMPLETE BY 11:59 PM OR PENALTY WILL BE GIVEN	PRECEPTOR TO GRADE
1	May 20 – June 28, 2024	Tuesday, June 4, 2024	Friday, June 7, 2024
2	July 1 – August 9, 2024	Tuesday, July 16, 2024	Friday, July 19, 2024
3	August 12 – September 20, 2024	Tuesday, August 27, 2024	Friday, August 30, 2024
4	September 23 – November 1, 2024	Tuesday, October 8, 2024	Friday, October 11, 2024
5	November 4 – December 13, 2024	Tuesday, November 19, 2024	Friday, November 22, 2024
6	January 6 – February 14, 2025	Tuesday, January 21, 2025	Friday, January 24, 2025
7	February 17 – March 28, 2025	Tuesday, March 4, 2025	Friday, March 7, 2025
8	March 31 – May 9, 2025	Tuesday, April 15, 2025	Friday, April 18, 2025

MIDPOINT DEADLINES (4-week rotations)			
MODULE	ROTATION DATES	STUDENT TO COMPLETE BY 11:59 PM OR PENALTY WILL BE GIVEN	PRECEPTOR TO GRADE
1	June 3 – June 28, 2024	Tuesday, June 11, 2024	Friday, June 14, 2024
2	July 15 – August 9, 2024	Tuesday, July 23, 2024	Friday, July 26, 2024
3	August 26 – September 20, 2024	Tuesday, September 3, 2024	Friday, September 6, 2024
4	October 7 – November 1, 2024	Tuesday, October 15, 2024	Friday, October 18, 2024
5	November 18 – December 13, 2024	Tuesday, November 26, 2024	<i>Monday, December 2, 2024*</i>
6	January 20 – February 14, 2025	Tuesday, January 28, 2025	Friday, January 31, 2025
7	March 3 – March 28, 2025	Tuesday, March 11, 2025	Friday, March 14, 2025
8	April 14 – May 9, 2025	Tuesday, April 22, 2025	Friday, April 25, 2025
<i>* Delayed due to Thanksgiving Holiday</i>			

MIDPOINT DEADLINES (3-week rotations) – VA WNY site ONLY			
MODULE	ROTATION DATES	STUDENT TO COMPLETE BY 11:59 PM OR PENALTY WILL BE GIVEN	PRECEPTOR TO GRADE
1a	May 20 – June 7, 2024	Tuesday, May 28, 2024	Wednesday, May 29, 2024
1b	June 10 – June 28, 2024	Tuesday, June 18, 2024	Wednesday, June 19, 2024
2a	July 1 – July 19, 2024	Tuesday, July 9, 2024	Wednesday, July 10, 2024
2b	July 22– August 9, 2024	Tuesday, July 30, 2024	Wednesday, July 31, 2024
3a	August 12 – August 30, 2024	Tuesday, August 20, 2024	Wednesday, August 21, 2024
3b	September 2 – September 20, 2024	Tuesday, September 10, 2024	Wednesday, September 11, 2024
4a	September 23 – October 11, 2024	Tuesday, October 1, 2024	Wednesday, October 2, 2024
4b	October 14 – November 1, 2024	Tuesday, October 22, 2024	Wednesday, October 23, 2024
5a	November 4 – November 22, 2024	Tuesday, November 12, 2024	Wednesday, November 13, 2024
5b	November 25– December 13, 2024	Tuesday, December 3, 2024	Wednesday, December 4, 2024
6a	January 6 – January 24, 2025	Tuesday, January 14, 2025	Wednesday, January 15, 2025
6b	January 27– February 14, 2025	Tuesday, February 4, 2025	Wednesday, February 5, 2025
7a	February 17 – March 7, 2025	Tuesday, February 25, 2025	Wednesday, February 26, 2025
7b	March 10 – March 28, 2025	Tuesday, March 18, 2025	Wednesday, March 19, 2025
8a	March 31 – April 18, 2025	Tuesday, April 8, 2025	Wednesday, April 9, 2025
8b	April 21 – May 9, 2025	Tuesday, April 29, 2025	Wednesday, April 30, 2025

FINAL EVALUATION PROCESS

At the Final Evaluation, this is your opportunity to self-reflect on your performance on your rotation and the preceptor's opportunity to evaluate the student pharmacist and document their progress and ability in the specific rotation satisfactorily. The preceptor will see your self-evaluation and comments in real-time for the final Evaluation of Professionalism and Skills

FINAL DEADLINES (6-week rotations)			
MODULE	ROTATION DATES	STUDENT TO COMPLETE BY 11:59 PM OR PENALTY WILL BE GIVEN	PRECEPTOR TO GRADE
1	May 20 – June 28, 2024	Tuesday, June 25, 2024	Wednesday, July 3, 2024
2	July 1 – August 9, 2024	Tuesday, August 6, 2024	Wednesday, August 14, 2024
3	August 12 – September 20, 2024	Tuesday, September 17, 2024	Wednesday, September 25, 2024
4	September 23 – November 1, 2024	Tuesday, October 29, 2024	Wednesday, November 6, 2024
5	November 4 – December 13, 2024	Tuesday, December 10, 2024	**Friday, December 13, 2024
6	January 6 – February 14, 2025	Tuesday, February 11, 2025	Wednesday, February 19, 2025
7	February 17 – March 28, 2025	Tuesday, March 25, 2025	Wednesday, April 2, 2025
8	March 31 – May 9, 2025	Tuesday, May 6, 2025	**Friday, May 9, 2025
**These rotation deadline dates have been moved back due to university grading deadlines and/or commencement			

FINAL DEADLINES (4-week rotations)			
MODULE	ROTATION DATES	STUDENT TO COMPLETE BY 11:59 PM OR PENALTY WILL BE GIVEN	PRECEPTOR TO GRADE
1	June 3 – June 28, 2024	Tuesday, June 25, 2024	Wednesday, July 3, 2024
2	July 15 – August 9, 2024	Tuesday, August 6, 2024	Wednesday, August 14, 2024
3	August 26 – September 20, 2024	Tuesday, September 17, 2024	Wednesday, September 25, 2024
4	October 7 – November 1, 2024	Tuesday, October 29, 2024	Wednesday, November 6, 2024
5	November 18 – December 13, 2024	Tuesday, December 10, 2024	**Friday, December 13, 2024
6	January 20 – February 14, 2025	Tuesday, February 11, 2025	Wednesday, February 19, 2025
7	March 3 – March 28, 2025	Tuesday, March 25, 2025	Wednesday, April 2, 2025
8	April 14 – May 9, 2025	Tuesday, May 6, 2025	**Friday, May 9, 2025
**These rotation deadline dates have been moved back due to university grading deadlines and/or commencement			

FINAL DEADLINES (3-week rotations)			
MODULE	ROTATION DATES	STUDENT TO COMPLETE BY 11:59 PM OR PENALTY WILL BE GIVEN	PRECEPTOR TO GRADE
1a	May 20 – June 7, 2024	Tuesday, June 4, 2024	Wednesday, June 12, 2024
1b	June 10 – June 28, 2024	Tuesday, June 25, 2024	Wednesday, July 3, 2024
2a	July 1 – July 19, 2024	Tuesday, July 16, 2024	Wednesday, July 24, 2024
2b	July 22– August 9, 2024	Tuesday, August 6, 2024	Wednesday, August 14, 2024
3a	August 12 – August 30, 2024	Tuesday, August 27, 2024	Wednesday, September 4, 2024
3b	September 2 – September 20, 2024	Tuesday, September 17, 2024	Wednesday, September 25, 2024
4a	September 23 – October 11, 2024	Tuesday, October 8, 2024	Wednesday, October 16, 2024
4b	October 14 – November 1, 2024	Tuesday, October 29, 2024	Wednesday, November 6, 2024
5a	November 4 – November 22, 2024	Tuesday, November 19, 2024	Wednesday, November 27, 2024
5b	November 25– December 13, 2024	Tuesday, December 10, 2024	**Friday, December 13, 2024
6a	January 6 – January 24, 2025	Tuesday, January 21, 2025	Friday, January 29, 2025
6b	January 27– February 14, 2025	Tuesday, February 11, 2025	Wednesday, February 19, 2025
7a	February 17 – March 7, 2025	Tuesday, March 4, 2025	Wednesday, March 12, 2025
7b	March 10 – March 28, 2025	Tuesday, March 25, 2025	Wednesday, April 2, 2025
8a	March 31 – April 18, 2025	Tuesday, April 15, 2025	Wednesday, April 23, 2025
8b	April 21 – May 9, 2025	Tuesday, May 6, 2025	**Friday, May 9, 2025
**These rotation deadline dates have been moved back due to university grading deadlines and/or commencement.			

Grade Penalties for late midpoint and final evaluations. Check APPE Omnisyllabus for more information on grade penalties.

Preceptor Manual

ATTRIBUTES OF PRECEPTORS

Preceptors serve as positive role models for students by demonstrating the following qualities (as applicable to their area of practice):

- Practicing ethically and with compassion for patients
- Accepting personal responsibility for patient outcomes
- Having professional education, experience, and competence commensurate with their position
- Utilizing clinical and scientific publications in clinical care decision-making and evidence-based practice
- Desiring to educate others (patients, caregivers, other healthcare professionals, students, residents)
- Demonstrating the willingness and ability to advocate for patients and the profession
- Demonstrating creative thinking that fosters an innovative, entrepreneurial approach to problem solving
- Having an aptitude for facilitating learning
- Being competent in the documentation and assessment of student performance
- Having a systematic, self-directed approach to their own continuing professional development and actively participate in self-directed lifelong learning.
- Collaborating with other healthcare professionals as a visible and contributing member of a team
- Being committed to their practice organization, professional societies, and the community

PRECEPTOR EVALUATION OF STUDENT

Preceptors will evaluate students based on achievement of the Educational Outcomes and Entrustable Professional (EOs) Activities (EPAs). The student's rotation grade will be based on the Educational Outcomes scores. The EPAs are considered formative feedback for the students and are competency based. Each rotation type will require assessment of specific EOs and EPAs, please see the paragraphs below for the details. This does not preclude the preceptor from requiring students to demonstrate the achievement of additional EPAs or EOs based on the nature of the rotation. In addition, P4 students must achieve a level 3 at least once for each EPA during their 4 required (core) rotations. The EOs, EPAs and suggested activities are listed in **Appendix A**. The suggested activities are just that "suggested", a preceptor may add other activities that align with the EPAs and are needed for the rotation.

EXPERIENTIAL EDUCATION PROGRAM ROTATION CATEGORIES (hours listed are minimums)

IPPE Rotation Structure

P2 Year: Requirement, 1 rotation in community pharmacy, other rotation must be community pharmacy or ambulatory care.

2 x 80-hour rotations (student entered program 2023 or later)

2 x 60-hour rotations (student entered program 2022 or before)

P3 Year: Requirement, minimum of 1 institutional pharmacy rotation, other rotation(s) may be community or ambulatory care, or other type of DPC rotation.

1 x 75-hour institutional rotations and 1 x 80-hour community pharmacy or ambulatory care. (student entered program 2023 or later)

1 x 75-hour institutional rotations and 2 x 60-hour community or ambulatory patient care rotations. (student entered program 2022 or before)

ROTATION TYPES and Required EPAs/Educational Outcomes

All IPPE rotations are Direct Patient Care (DPC) Note: Students entering PharmD program in 2022 or before would complete 60 hours, students entering 2023 or later would complete 80 hours.

IPPE Ambulatory patient care (60 or 80 hours)

An outpatient clinical rotation that provides the student with direct patient care activities. The student is also expected to actively participate as part of an interprofessional team. Depending on the actual site there may also be dispensing activities going on concurrently, however the main objective of this type of rotation is to provide medication therapy management and education for patients' chronic diseases.

P2 & P3 Educational Outcomes: 1-13

P2 & P3 EPAs: 1-6, 8-9

IPPE Community pharmacy (60 or 80 hours)

A community rotation provides the student with direct drug distribution and counseling activities. There may also be clinical activities going on concurrently, however the main objective of this type of rotation is to dispense medications in a safe and timely manner following all legal and regulatory requirements of the site/state. Practice management will also be emphasized.

P2 and P3 Educational Outcomes: 1-13

P2 EPAs: 7,8,11,13

P3 EPAs: 1,2,5,7,10-11

IPPE Institutional (75 hours)

The purpose of this rotation is for the student to understand how the right medication gets to the right patient at the right time. This usually includes exposure to the drug distribution system, IV admixture preparation, controlled substance management, inventory control, among others. The student is also expected to actively participate as part of an interprofessional team. The focus is on system management and continuous quality improvement.

Educational Outcomes: 1-13

EPAs: 1-7, 9-10, 13

APPE ROTATIONS AND PRECEPTOR CATEGORIES

Ambulatory patient care (240 hours)

An outpatient clinical rotation that provides the student with direct patient care activities. The student is also expected to actively participate as part of an interprofessional team. Depending on the actual site there may also be dispensing activities going on concurrently, however the main objective of this type of rotation is to provide medication therapy management and education for patients' chronic diseases.

Educational Outcomes: 1-13

EPAs: 1-6, 7-8, 11-12

Community pharmacy (160 hours)

A community rotation provides the student with direct drug distribution and counseling activities. There may also be clinical activities going on concurrently, however the main objective of this type of rotation is to dispense medications in a safe and timely manner following all legal and regulatory requirements of the site/state. Practice management will also be emphasized.

Educational Outcomes: 1-13

EPAs: 1-2, 5, 7, 10-13

Hospital/health-system pharmacy (160 hours)

The purpose of this rotation is for the student to understand how the right medication gets to the right patient at the right time. This usually includes exposure to the drug distribution system, IV admixture preparation, controlled substance management, inventory control, among others. The focus is on system management and continuous quality improvement.

Educational Outcomes: 1-13

EPAs: 1-7, 9-10, 13

Inpatient adult patient care (240 hours)

A general medicine rotation provides the student with direct patient care experience in the inpatient setting utilizing a rounding service. The student will manage a diverse patient population with a variety of common conditions seen in adult care patients. The student will also actively contribute as a member of an interprofessional healthcare team.

Educational Outcomes: 1-13

EPAs: 1-7, 9-10, 13

Electives (240 hours rotations, at least 1 elective rotation must be Direct Patient Care

Elective APPEs are meant to allow students to explore areas of potential practice interest. This may include practice, research, or other areas of interest for pharmacy students. An elective may include a repeat of the core rotations listed above. In addition, preceptors must submit their own learning objectives.

Direct Patient Care (DPC)

Educational Outcomes: 1-13

EPAs: Optional

Non-Direct Patient Care (DPC/DPC)

Educational Outcomes: 1-4, 10, 11, 15

EPAs: None

STUDENTS COMPLETING ROTATIONS AT EMPLOYMENT SITES

For our students to get the best possible experience out of their rotations, we wanted to remind you of some guidance we use when scheduling student rotations. We discourage students from completing IPPE and APPE rotations at the same company they are employed with and certainly they cannot complete a rotation where the rotation preceptor is also their boss/SP. We do allow some crossover especially in our larger hospital systems where the activities the student is doing for a rotation is different than what they do when they are an employee getting paid. We are not asking that you be responsible for any of this, it is the student's responsibility to reach out to the Office of Experiential Education if there is a potential conflict, we just wanted you to be aware of the guidance we try to follow when scheduling these rotations.

NEW ROTATION DEVELOPMENT

A preceptor can develop a specific rotation in conjunction with the Office of Experiential Education, which includes the following: written rotation activities and objectives, coordination of rotation activities and pharmacy input with the assigned physician supervisors, integration of PharmD Student Pharmacists into the ongoing pertinent educational activities of the specific site. [Specific educational activities that student pharmacists should be included in during a clinical rotation are journal club, discussion of pertinent disease states, therapeutic controversies, and designated review of primary or secondary literature.] The final approval of these rotation activities is under the auspices of the Office of Experiential Education.

PRECEPTOR QUALIFICATIONS

HEALTHCARE PRECEPTORS

1. Be licensed and in good standing in the jurisdiction in which they practice. Note, during the fourth year an APPE student may have one Elective rotation with a non-pharmacist preceptor. All other rotations must be with a pharmacist. All IPPE rotations must be precepted by US licensed pharmacists.
2. Provide selected information on Preceptor Information Form to the Experiential Education Faculty Advisory Committee, which will be kept on file for all experiential education preceptors. The submission of an updated resume or curriculum vitae is recommended but not required.
3. Maintain high professional standards (i.e., ACPE standards below*).
 - a. The college or school should identify preceptors who will be positive role models for student pharmacists and who, in general, demonstrate the following behavior, qualities, and values (as applicable to their area of practice):
 - i. practice ethically and with compassion for patients.
 - ii. accept personal responsibility for patient outcomes.
 - iii. have professional training, experience, and competence commensurate with their position.
 - iv. utilize clinical and scientific publications in clinical care decision making and evidence-based practice.
 - v. have a desire to educate others (patients, care givers, other health care professionals, student pharmacists, pharmacy residents)
 - vi. have an aptitude to facilitate learning.
 - vii. be able to document and assess student performance.
 - viii. have a systematic, self-directed approach to their own continuing professional development.
 - ix. collaborate with other health care professionals as a member of a team.
 - x. be committed to their organization, professional societies, and the community.

4. Be willing to participate in School of Pharmacy and Pharmaceutical Sciences sponsored preceptor meetings (either live or via Zoom for out-of-town preceptors).
5. Be willing to provide the instruction, supervision and evaluation needed for student pharmacists to achieve competency in the objectives corresponding to the designated rotation(s).
 - a. This requires that preceptors provide evaluation information and reports on student pharmacists, including feedback on areas such as professional skills, personal characteristics, professional ethics and overall performance.
6. Completion of preceptor development activities.
7. Demonstration of a pharmacy practice which expands the role of a pharmacist.

ELECTIVE PRECEPTORS - NON-HEALTHCARE

1. be an active research investigator in academic, research or industrial setting or senior scientist/manager in pharmaceutical industry **AND**
2. prepare the following in conjunction with the EE Director:
 - a. written rotation activities and objectives;
 - b. coordination of student rotation activities
4. Maintain high professional standards (i.e., ACPE standards below*).
 - b. The college or school should identify preceptors who will be positive role models for student pharmacists and who, in general, demonstrate the following behavior, qualities, and values (as applicable to their area of practice):
 - ii. accept personal responsibility for outcomes
 - iii. have professional training, experience, and competence commensurate with their position
 - iv. utilize scientific publications in decision making and evidence-based practice
 - v. have a desire to educate others
 - vi. have an aptitude to facilitate learning
 - vii. be able to document and assess student performance
 - viii. have a systematic, self-directed approach to their own continuing professional development
 - ix. collaborate with other professionals as a member of a team
 - x. be committed to their organization, professional societies, and the community

NOTE: Pharmacists who serve only as an administrative contact person and pharmacists who occasionally supervise students during a rotation need not complete the application for preceptor.

SCHEDULING

Preceptors are asked to arrange the student pharmacist's schedule to optimize on-site learning experiences and accommodate respective obligations beyond the rotation. Schedules should be discussed prior to or on the first day of the rotation to prevent any misunderstandings. At the beginning of the rotation, establish a brief, regular (e.g., weekly) time to meet with the student to discuss his/her progress, etc. Additionally, it is advisable to discuss the schedule for the Midpoint evaluation, any additional activities you would like the student to complete, and final evaluation at the beginning of the rotation.

PRECEPTOR ACTIVITIES OVERVIEW

1. Establish the student pharmacists' rotation schedule. During this process, note dates for preceptor-student meetings, deadlines for additional activities you would like the student to complete, and evaluations.
2. Provide an orientation for the student. Major items to address include site policies and procedures, curricular issues, preceptor expectations, the student pharmacists' entry-level skills and corresponding learning needs, and evaluation.
3. Provide adequate supervision and clear, objective feedback to student pharmacists throughout the rotation (i.e., weekly basis)
4. Review and evaluate student activities, including providing feedback regarding the student's perception and ability to self-assess all of their coursework. If this is not done, the preceptor can reflect this time management deficiency on the Evaluation of Professionalism and Skills form.
5. Complete and discuss the electronic Midpoint and Final Evaluation with the student.

PRECEPTOR RESPONSIBILITIES

1. The preceptor should supervise the written and verbal recommendations made by the PharmD student. All written recommendations made by the PharmD student must be co- signed by the designated preceptor and comply with the legal expectations of the specific institution.
2. A PharmD fellow or resident may oversee the clinical activities of assigned PharmD student pharmacists; however, evaluations of the PharmD student should be done solely by their actual assigned preceptor. All preceptor generated student activities and/or final evaluations must at least be signed by the student's preceptor.
3. The preceptor should orient the student to the required objectives and activities of the rotation as well as the site at the beginning of the rotation.
4. The preceptor should interact with the student by either of the following:
 - a. At least three times per week for 1-to-2-hour intervals. During this time, discussions concerning pertinent patient cases, assigned topics/therapeutic controversies and other issues pertinent to the rotation should be included.
 - b. Alternatively, preceptors can schedule 8-12 hours per week (community pharmacy or medical rounds) where the student takes on the primary role of the pharmacist and the preceptor monitors, coaches and mentors the student under direct supervision.
5. Preceptors should be readily available to the student either through beeper or designated meeting times for the scheduled rotation time.
6. If the preceptor is out of town during a rotation period, then an alternate preceptor should be assigned over the period of absence to deal with any student problems.
7. The PharmD preceptor should provide a mid-rotation evaluation of the student's performance as well as an exit evaluation. No supportive personnel (e.g., Nurse, Fellow, Resident) can give the PharmD student an evaluation.

START	MIDPOINT	FINAL
<ul style="list-style-type: none"> • Preceptor to review expectations of rotation and collaborate on setting goals with student. • APPE only: Review students previous EPA scores from required rotations when applicable. Discuss results with students and create strategies for future success. • 	<ul style="list-style-type: none"> • Review Student's Self-Evaluation of EPAs, Educational Outcomes and Professionalism • Evaluation of EPAs, Educational Outcomes, and Professionalism • Confirm hours (daily/weekly) 	<ul style="list-style-type: none"> • Review Student's Self-Evaluation of EPAs, Educational Outcomes and Professionalism • Complete Student's Evaluation of EPAs, Educational Outcomes, and Professionalism with Student • Review Student's IPPE Reflection (last week) [IPPE students ONLY] • Confirm hours (daily/weekly)

NOTE: It is frequently necessary to spend some time with student pharmacists outside the general activity times, particularly for orientation and evaluation discussions.

ORIENTATION

Preceptors should provide student pharmacists with an orientation on the first day of the rotation or as soon as possible thereafter. An initial orientation can reduce the incidence of misunderstandings and expedite student pharmacists' ability to focus on learning experiences rather than on-site familiarization activities. Topics one may need to address during the orientation will vary by type of training site. However, some basic topics are listed below.

PRECEPTOR EXPECTATIONS

1. Clarify your overall expectations for the student relative to curricular issues, compliance with site policies and procedures, and psychosocial issues including problem or conflict resolution. Discussing one's expectations can minimize misunderstandings, particularly when student pharmacists receive a lower-than-expected rating in an area in which acceptable and unacceptable performance was clearly defined.
2. Clarify your grading policy for each respective student. Remember that a high score should be reserved for a student with "Excellent performance".

3. Be familiar with the CORE ELMS system for all electronic forms including Midpoint evaluations and final grading forms.

SITE

1. Tour of Facility
 - a. Information on parking, as needed.
 - b. Lunch facilities.
 - c. Library or resource availability.
 - d. Storage areas.
2. Personnel
 - a. Personnel with whom the student will interact and/or work, including names, preferred title(s), and responsibilities.
 - b. Specifically identify any personnel who will be involved in the student's training.
 - c. Include personnel from other departments in the orientation as appropriate (e.g., head of nursing, medical records, etc.).
3. Site policies
 - a. Proper dress and identification tags, as appropriate.
 - b. Access to patient information and confidentiality.
 - c. Punctuality and notice of illness or absences during scheduled rotation time.
 - d. At community sites, items such as charges, check cashing, use of the cash register, sales to employees, shoplifting, etc., should be covered.
4. Site procedures
 - a. Emergency procedures including code blue (cardiac arrest), fire, robbery, etc.
 - b. Opening and closing procedures.
 - c. Proper telephone procedures.
 - d. Computer procedures.
5. Security issues
 - a. Appropriate parking locations
 - b. Availability of shuttles or escort service
 - c. Specific safety issues
6. Production Processes

CURRICULAR ISSUES

1. Review the rotation's goals and objectives and indicate any additional objectives you have for the student to achieve. After identifying student learning needs, discuss how you plan to structure activities to facilitate student learning.
2. Discuss the activities and/or preceptor generated assignments you would like the student to complete.
3. Establish a schedule of routine preceptor-student meetings (e.g., minimally three times per week) during which student progress will be discussed. Student pharmacists need feedback and guidelines from their preceptors throughout the rotation so that weaknesses are identified and can be addressed before the end of the rotation and final evaluation.
4. Clarify your approach to clinical teaching and your criteria for evaluating student achievement.
5. Review and discuss your evaluation of the student with him/her. Your feedback will help the student focus on areas needing improvement.

SITE STANDARDS

All pharmacy sites participating in the Experiential Education program must meet and maintain the basic training site standards listed below:

1. Meet and maintain standards set by all government agencies including the state board, Drug Enforcement Agency, Food and Drug Administration, and the New York Bureau of Narcotic Enforcement.
2. Present a clean, orderly, and professional image.
3. Maintain and utilize patient medication profiles to facilitate ongoing prospective identification of drug related problems.

4. Provide the volume and variety of contemporary experiences related to prescription, non-prescription and health-related items to furnish a wide range of general pharmacy practice experiences.

NOTE: Student pharmacists are to be assigned to learning areas that correlate with the objectives of the rotation and to the student pharmacist's weaknesses, e.g., patient consultation and problem solving. The use of student pharmacists to fulfill staffing needs should be minimized.

5. Provide health care information to patients and/or other health care professionals. Printed information should supplement, not substitute for, pharmacist consultation.
 - a. Patient counseling (ideally in a private consultation area) should be a consistent and visible component of community pharmacy service.
 - b. In hospital settings, we encourage pharmacists to provide a role model of patient contact, e.g., medication histories and discharge medication counseling.
 - c. We encourage hospital pharmacists to provide patients with a record of medication use at discharge, which would assist a community pharmacist in providing a continuum of care.
6. Provide services to meet expanded public health responsibilities (e.g., supply health information and provide screening programs).
7. Provide adequate resources (either on-line and/or textbooks) for a student to be able to review drug and health related information if necessary. If access to certain materials/literature is unable to be provided, allowing the student time to utilize University resources (e.g., Health Sciences Library, etc.) as needed is highly recommended.

DISCRIMINATION AND HARASSMENT POLICY

UB does not have a policy that limits or favors current UB students, transfer or out-of-state applicants. All applicants are considered equally. UB SPPS is committed to a nondiscriminatory admission policy and philosophy. In accordance with federal and state laws, no person, in whatever relationship with the University at Buffalo, shall be subject to discrimination on the basis of age, religion or creed, color, disability, national origin, race, ethnicity, sex, marital or veteran status. Learn more about the University at Buffalo's Non-Discrimination Policy at <https://www.buffalo.edu/equity.html>

STUDENT EVALUATION OF PRECEPTOR AND SITE

To be completed by the student pharmacist at the end of each IPPE and APPE rotation. Data are reported in aggregate at the end of the academic year to preceptors, to protect student pharmacist anonymity. Preceptors that have only one experiential education student pharmacist will have their results withheld until there are >1 evaluation completed, again to protect student pharmacist anonymity.

Preceptor Questions

Please rate the preceptor on the following items using the following scale: Almost Never, Seldom, Sometimes/Occasionally, Frequently, Almost Always.

- Provided an orientation to the site, rotation and various learning activities
- Provided formative (i.e., ongoing) evaluation and feedback
- Provided summative (i.e., final) evaluation and feedback
- Provided feedback that identified BOTH weaknesses and strengths
- Communicated his/her expectations
- Demonstrated effective interpersonal skills with staff, patients and student pharmacists
- Was willing to discuss other points of view
- Demonstrated interest in teaching and student pharmacist progress
- Used effective teaching methods
- Suggested or provided readings/citations to support recommendations and decisions
- Was available for adequate supervision, discussion and consultation

Site Questions

Please rate the site on the following items using the following scale: Poor, Fair, Satisfactory, Good, Excellent.

- Ability to achieve rotation's objectives at this site
- Interactions with other health professionals at this site
- Overall rating of this clinical training site
- Variety of clinical patient-oriented learning experiences
- Volume (i.e., number) of clinical learning experiences
- Number of non-patient-oriented learning experiences available (e.g., rotation specific conferences)
- School administration/coordination of this rotation, overall

Rotation Questions

Please rate the rotation on the following items using the following scale: Poor, Fair, Satisfactory, Good, Excellent.

- School administration/coordination of this rotation, overall
- My P1-P3 didactic (non-experiential) courses prepared me for this rotation

Appendix A

EPA Suggested Activities

EPA 1: Collect information necessary to identify a patient's medication-related problems and health-related needs.

Example tasks to observe student:

- Collect a history from a patient or caregiver.
- Collect a medication history from a patient or caregiver.
- Collect a patient's experience with medication.
- Collect information related to barriers for patients to take their medication(s).
- Collect objective information from the patient (e.g., physical exam, point of care testing).

Collect data from a patient's electronic health, digital health, or medication record.

EPA 2: Assess collected information to determine a patient's medication-related problems and health-related needs.

Example tasks to observe student:

- Assess the indication of the medication treatment plan.
- Assess the safety of the medication treatment plan including drug interactions.
- Assess the effectiveness of medication treatment plans, including existing, previous, and new medications.
- Assess the alignment of the medication plan with the patient's goals, needs, abilities, values, and beliefs.
- Assess the relative priority of each health-related need of the patient to create a prioritized problem list.
- Assess if a patient requires a referral for their health-related needs.

Assess whether a patient is eligible for CDC-recommended immunizations.

EPA 3: Create a care plan in collaboration with the patient, others trusted by the patient, and other health professionals to optimize pharmacologic and nonpharmacologic treatment.

Example tasks to observe student:

- Create person centered treatment goals.
- Create a prioritized list of evidence-based and patient-centered treatment options to discuss with members of the healthcare team/patient/caregiver(s).
- Create a person-centered treatment plan.
- Create a plan to mitigate the risk of drug interactions and polypharmacy.
- Create a treatment plan that incorporates potential strategies to minimize cost for the patient, such as formulary review, patient assistance programs, medication discount programs.
- Create a plan to monitor the safety and efficacy of the treatment plan.
- Create an individualized education plan for the patient and/or caregiver.

EPA 4: Contribute patient specific medication-related expertise as part of an interprofessional care team.

Example tasks to observe student:

- Explain a pharmacist's role and responsibilities to a healthcare team.
- Apply the PPCP as a member of an interprofessional team.
- Communicate a patient's medication-related problems(s) to the healthcare team.
- Provide recommendations to the healthcare team to resolve and/or monitor medication-related problems.
- Provide evidence-based drug information to the healthcare team.

EPA 5: Answer medicine related questions using scientific literature.

Example tasks to observe student:

- Ask clarifying questions to identify and address the true question.
- Perform a systematic search of tertiary, secondary, and primary resources.
- Identify and retrieve high-quality scientific literature.
- Analyze scientific literature.
- Provide a written or verbal response to the true question, including findings and recommendations.

EPA 6: Implement a care plan in collaboration with the patient, others trusted by the patient, and other health professionals.

Example tasks to observe student:

- Initiate, modify, or discontinue therapy.
- Present necessary information to a colleague during a handoff or transition of care.
- Schedule follow-up care as needed (e.g., labs or tests, follow-up appointments).
- Document the findings, recommendations, plan, and pharmacy services provided.

Discuss the care plan with a patient and/or other trusted by the patient.

EPA 7: Fulfill a medication order. Site dependent process, which may mean to complete order entry/order verification, prepare medication (pull from shelf/count/activate/compound), label medication, dispense/administer to patient.

Example tasks to observe student:

- Enter an order or prescription into an electronic health or pharmacy record system.
- Perform calculations required to compound, dispense, and administer medications.
- Perform a prospective drug utilization review.
- Adjudicate a third-party claim.
- Provide education and self-management training to the patient or caregiver.
- Assess the learning needs of a patient and others trusted by the patient.
- Select a method for providing education in the given environment.
- Actively engage the patient in the education session.
- Identify, select, or develop supportive education materials (e.g., written, models, demonstration devices, videos).
- Adapt the terminology and verbal delivery of information.
- Determine the effectiveness of education provided by assessing a patient's understanding and/or their ability to demonstrate the technique.
- Reinforce key points, correct misunderstandings, or address gaps with the patient as needed.

EPA 8: Educate the patient and others trusted by the patient regarding the appropriate use of a medication, device to administer a medication, or self-monitoring test.

Example tasks to observe student:

- Identify and manage drug therapy problems.
- Consider formulary preferred medications when making recommendations.
- Complete an authorization process for a non-preferred medication.
- Assist a patient to acquire medication(s) through support programs.
- Prepare non-sterile and/or sterile medications.
- Perform a quality assurance check on prepared medications prior to dispensing.
- Dispense and administer a product including injectable medications and immunizations.
- Adhere to state and federal laws/regulations and site quality and safety procedures.

EPA 9: Monitor and evaluate the safety and effectiveness of a care plan.

Example tasks to observe student:

- Collect monitoring data at the appropriate time interval(s).
- Evaluate the selected monitoring parameters to determine the therapeutic and adverse effects related to the treatment plan.

Recommend modifications or adjustments to an existing medication therapy regimen based on patient response.

EPA 10: Report adverse drug events and/or medication errors in accordance with site specific procedures.

Example tasks to observe student:

- Identify factors of system(s) (e.g., personnel, infrastructure, interfaces) associated with errors or risk of errors.
- Determine points of intervention within system(s) to prevent or minimize medication-related errors.

Report and document adverse drug events and medication errors to stakeholders.

EPA 11: Deliver medication or health-related education to health professionals or the public.

Example tasks to observe student:

- Give a brief (~10 minutes) drug presentation to the pharmacy and or medical team. Consider using new drug information.
- Lead a discussion regarding published primary literature and its application to patient care (e.g., journal club).
- Develop and deliver a verbal, digital, or written medication or health-related educational program to health professional(s), a community, or other groups.

EPA 12: Identify populations at risk for prevalent diseases and preventable adverse medication outcomes.

Example tasks to observe student:

- Perform a screening assessment to identify patients at risk for prevalent diseases in a population and triage, when needed.
- Evaluate individual and/or aggregated patient data to determine patients or populations at risk for a disease.

EPA 13: Perform the technical, administrative, and supporting operations of a pharmacy practice site. Site dependent and includes but is not limited to: Inventory management, Scheduling, and Controlled Substance Monitoring.

Example tasks to observe student:

- Execute pharmacy policies and procedures.
- Delegate work activities to pharmacy team members.
- Provide formative feedback on pharmacy team dynamics, workflow, processes, and operations.
- Manage pharmacy workflow to ensure efficiency and safety.
- Use technology to support the pharmacy workflow.
- Execute pharmacy quality improvement activities.
- Procure inventory to ensure continued pharmacy operations.
- Prepare for regulatory visits and inspections.

Appendix B

Student Educational Outcomes

	<i>Student Educational Outcomes</i>	<i>ACPE Standard</i>	<i>COEPA Outcome</i>	<i>Assessment Method(s)</i>
1	Learner: Seek, analyze, integrate, and apply foundational knowledge of medications and pharmacy practice (biomedical; pharmaceutical; social, behavioral, administrative; and clinical sciences; drug classes; and digital health.	2.1.a	1.1	Preceptor evaluation
2	Problem solver: Use problem solving and critical thinking skills, along with an innovative mindset, to address challenges and to promote positive change.	2.1.b	2.1	Preceptor evaluation
3	Communicator: Actively engage, listen, and communicate verbally, nonverbally, and in writing when interacting with or educating an individual, group, or organization.	2.1.c	2.2	Preceptor evaluation
4	Ally: Mitigate health disparities by considering, recognizing, and navigating cultural and structural factors (e.g. social determinants of health, diversity, equity, inclusion, and accessibility) to improve access and health outcomes.	2.1.d	2.3	Preceptor evaluation
5	Provider: Provide whole person care to individuals as the medication specialist using the Pharmacists' Patient Care Process.	2.1.e	2.4	Preceptor evaluation
6	Advocate: Promote the best interests of patients and/or the pharmacy profession within healthcare settings and at the community, state, or national level.	2.1.f	2.5	Preceptor evaluation
7	Steward: Optimize patient healthcare outcomes using human, financial, technological, and physical resources to improve the safety, efficacy, and environmental impact of medication use systems.	2.1.g	2.6	Preceptor evaluation
8	Collaborator: Actively engage and contribute as a healthcare team member by demonstrating core interprofessional competencies.	2.1.h	2.7	Preceptor evaluation
9	Promoter: Assess factors that influence the health and wellness of a population and develop strategies to address those factors.	2.1.i	2.8	Preceptor evaluation
10	Leader: Demonstrate the ability to influence and support the achievement of shared goals on a team, regardless of one's role.	2.1.j	2.9	Preceptor evaluation
11	Self-aware: Examine, reflect on, and address personal and professional attributes (e.g., knowledge, metacognition, skills, abilities, beliefs, biases, motivation, help-seeking strategies, and emotional intelligence that could enhance or limit growth, development, & professional identity formation).	2.1.k	3.1	Preceptor evaluation
12	Professional: Did the student exhibit attitudes and behaviors that embody a commitment to building and maintaining trust with patients, colleagues, other health care professionals, and society.	2.1.l	3.2	Preceptor evaluation
13	Professional Skills and Attitudes: Activities and experiences, intended to advance professional, personal, and career development, are purposely designed and implemented to ensure an array of opportunities for students to document competency of advocacy, self-awareness, leadership, and professionalism. These activities complement and advance the learning that occurs within the formal curriculum and can occur, outside, alongside, and/or within the curriculum.	2.1.m		Preceptor evaluation
14	Team: Demonstrates the ability to influence and support the achievement of shared goals with others or in a team.			Preceptor evaluation
15	Develop strategies to actively promote inclusivity, equity, and social justice in academic, and professional environments.			Preceptor evaluation

Appendix C

Educational Outcomes Assessment Rubric

- **Does Not Meet Expectations (1):** The performance falls significantly below the expected standards. There are numerous errors or deficiencies in understanding, execution, or completion of the task. The work does not meet the basic requirements and demonstrates a lack of effort or comprehension.
- **Approaches Expectations (2):** The performance partially meets the expected standards. There are some errors or deficiencies in understanding, execution, or completion of the task. While aspects of the work may be satisfactory, overall, it falls short of meeting all requirements and demonstrates room for improvement.
- **Meets Expectations (3):** The performance meets the expected standards. It demonstrates a solid understanding and execution of the task with minimal errors or deficiencies. The work meets all requirements and may also include additional elements that enhance its quality and completeness.
- **Exceeds Expectations (4):** The performance goes above and beyond the expected standards. It demonstrates a thorough understanding and exceptional execution of the task with no significant errors or deficiencies. The work not only meets all requirements but also includes additional elements that significantly enhance its quality, creativity, and/or innovation.

#	EPAs (Suggested activities for each EPA)
1	Collect information necessary to identify a patient's medication-related problems and health-related needs.
2	Assess collected information to determine a patient's medication-related problems and health-related needs.
3	Create a care plan in collaboration with the patient, others trusted by the patient, and other health professionals to optimize pharmacologic and nonpharmacologic treatment.
4	Contribute patient specific medication-related expertise as part of an interprofessional care team.
5	Answer medication related questions using scientific literature.
6	Implement a care plan in collaboration with the patient, others trusted by the patient, and other health professionals.
7	Fulfill a medication order. Site dependent process, which may mean to complete order entry/order verification, prepare medication (pull from shelf/count/activate/compound), label medication, dispense/administer to patient.
8	Educate the patient and others trusted by the patient regarding the appropriate use of a medication, device to administer a medication, or self-monitoring test.
9	Monitor and evaluate the safety and effectiveness of a care plan.
10	Report adverse drug events and/or medication errors in accordance with site specific procedures.
11	Deliver medication or health-related education to health professionals or the public.
12	Identify populations at risk for prevalent diseases and preventable adverse medication outcomes.
13	Perform the technical, administrative, and supporting operations of a pharmacy practice site. Site dependent and includes but is not limited to: Inventory management, Scheduling, and Controlled Substance Monitoring.

EPA ASSESSMENT RUBRIC

- **Level 1:** Learner is permitted to observe only. Even with direct supervision, the learner is not entrusted to perform the activity or task.
- **Level 2:** Learner is entrusted to perform the activity or task with direct and proactive supervision. Learner must be observed performing tasks in order to provide immediate feedback.
- **Level 3:** Learner is entrusted to perform the activity or task with indirect and reactive supervision. Learner can perform task without direct supervision but may request assistance. Supervising pharmacist is quickly available on site. Feedback is provided immediately after completion of an activity or task.
- **Level 4:** Learner is entrusted to perform the activity or task with supervision at a distance. Learner can independently perform tasks. Learner meets with supervising pharmacist at periodic intervals. Feedback is provided regarding overall performance based on sample work.
- **Level 5:** Learner is entrusted to independently decide what activities and tasks need to be performed. Learner is entrusted to direct and supervise the activities of others. Learner meets with supervising pharmacist at periodic intervals. Feedback is provided regarding overall performance based on broad professional expectations and organizational goals.

**Introductory Pharmacy Practice Experiences
Omni Syllabus 2024-25**

Class Date/Time/Delivery Mode:

Classes, if required, will be held on Thursdays in person. IPPE rotations will be completed in-person at assigned clinical practice sites.

You have specific time blocked off in your schedule TO COMPLETE IPPE ROTATIONS. Your first priority should be to complete IPPE hours, NOT WORK for your employer.

Number of Credits:

Course	Credit Hours	Appendix	Course Coordinator
PHM 683 (P2 Fall)	2	A	Nicole Cieri-Hutcherson [necieri@buffalo.edu]
PHM 684 (P2 Spring)	2	B	
PHM 781/783 (P3 Fall)	2	C	
PHM 782/784 (P3 Spring)	2	D	

Course Coordinator:

Nicole Cieri-Hutcherson, PharmD, BCPS, MSCP
Assistant Director of Experiential Education
E-mail: necieri@buffalo.edu
Office Hours: By appointment

IPPE Experiential Coordinator:

Sarah Frontera
E-mail: sns4@buffalo.edu

Office of Experiential Education	
<p>Richard F. O'Brocta, PharmD Director, Office of Experiential Education Division of Education and Teaching Innovation Clinical Associate Professor 224 Pharmacy Building, Buffalo, NY 14214 Phone: 716-645-4628 Email: robrocta@buffalo.edu</p>	<p>Nicole E. Cieri-Hutcherson, PharmD, BCPS, NCMP Assistant Director, Office of Experiential Education Division of Outcomes and Practice Advancement Clinical Associate Professor 217 Pharmacy Building, Buffalo, NY 14214 Phone: 716-645-3635 Email: necieri@buffalo.edu</p>
<p>Kris A. Jordan, A.A.S. Coordinator, Advanced Pharmacy Practice Experience Program (APPE) (P4) Division of Education and Teaching Innovation 225 Pharmacy Building, Buffalo, NY 14214 Phone: 716-645-4799 FAX : 716-829-6092 Email : kajordan@buffalo.edu</p>	<p>Sarah Frontera, Ed.M. Coordinator, Introductory Pharmacy Practice Experience Program (IPPE) (P2-P3) Division of Education and Teaching Innovation 225 Pharmacy Building, Buffalo, NY 14214 Phone: 716-645-4791 FAX: 716-829-6092 Email: sns4@buffalo.edu</p>
Experiential Education Course Coordinators	
<p>Erin Slazak, PharmD, BCPS, BCACP Clinical Assistant Professor Division of Outcomes and Practice Advancement Division of Education and Teaching Innovation IPPE Ambulatory Care Advisor 210 Pharmacy Building, Buffalo, NY 14214</p>	<p>Christopher Daly, PharmD, MBA, BCACP Clinical Assistant Professor Division of Outcomes and Practice Advancement IPPE Community Pharmacy Advisor 204 Pharmacy Building, Buffalo, NY 14214 Phone: 716-645-4793</p>

Phone: 716-645-3931 Email : emslazak@buffalo.edu	Email: cjdaly@buffalo.edu
Collin Clark, PharmD, BCPS, BCGP Clinical Assistant Professor Division of Outcomes and Practice Advancement IPPE Hospital Health Systems Pharmacy Advisor 312 Pharmacy Building, Buffalo, NY 14214 Phone: 716-645-4762 Email : collincl@buffalo.edu	

Course Description:

Class of 2027

PHM 683/684 [see Appendices A & B]:

Yearlong course sequence during P2 year. Students will complete (2) Community IPPE rotations. Students will work under supervision of a U.S. licensed pharmacist in a community environment while learning about the medication use system. Students will provide direct patient care and demonstrate core practice skills: communication, pharmacy calculations, ethics, wellness and health promotion, informatics and critical thinking. **Total experiential education time requirement: 160 hours.**

Students may have in person activities but the majority of reserved time will be available for students to complete experiential education activities off-campus. Classroom activities may include the following:

- Group presentations and reflection sessions
- Professional training and development exercises (infection control, smoking cessation, etc.)
- Guest speakers from various pharmacy practice settings
- Possible quizzes and other in-class activities

PHM 781/783/782/784 [see Appendices C & D]:

Class of 2027

Yearlong course sequence during P3 year. Students will complete (1) Institutional IPPE rotation and (1) other 'patient care' rotation (e.g., ambulatory care, hospice, or community). Students will work under the supervision of a U.S. licensed pharmacist in institutional and community/outpatient environments while learning about the medication use system. Students will learn about pharmacy management and medication distribution systems, including the scope of clinical pharmacy services. Students will demonstrate core practice skills: communication, pharmacy calculations, ethics, medication safety, technology, informatics and critical thinking and interprofessional interactions. **Total introductory experiential education time requirement to be completed by the end of the P3 year is 155 hours**, which must be composed of a minimum of 75 Institutional hours and a minimum of 80 'Other' hours. Rotations count towards IPPE hours if (1) the setting involves direct patient care (a patient is involved), (2) occurs under the supervision of a licensed pharmacist, (3) an evaluation occurs, and (4) occurs in the U.S.

Class of 2026

Yearlong course sequence during P3 year. Students will complete (3) IPPE rotations: (1) Institutional IPPE and (2) any other 'patient care' rotation (e.g., ambulatory care, hospice, or community) IPPEs. Students will work under the supervision of a U.S. licensed pharmacist in institutional and community/outpatient environments while learning about the medication use system. Students will learn about pharmacy management and medication distribution systems, including the scope of clinical pharmacy services. Students will demonstrate core practice skills: communication, pharmacy calculations, ethics, medication safety, technology, informatics and critical thinking and interprofessional interactions. **Total introductory experiential education time requirement to be completed by the end of the P3 year is 315 hours**, which must be composed of a minimum of 75 Institutional hours and a minimum of 120 'Other' hours. Rotations count towards IPPE hours if (1) the setting involves direct patient care (a patient is involved), (2) occurs under the supervision of a licensed pharmacist, (3) an evaluation occurs, and (4) occurs in the U.S.

Students may have in person activities, but most reserved time will be available for students to complete experiential education activities off-campus. Classroom activities may include the following:

- Group presentations and reflection sessions
- Professional training and development exercises
- Guest speakers from various pharmacy practice settings
- Possible quizzes and other in-class activities

Direct Patient Care:

Direct patient care is defined as any interaction a student pharmacist has WITH or FOR a patient. This can be delivered in-person, telephonically or by telemedicine. This can include activities such as dispensing medications, counseling, education, discharge counseling, transition of care activities, optimizing outcomes, self-care, and using evidence-based medicine in decision making, among others. At the end of each rotation students will be asked to reflect on which direct patient care activities were completed.

All IPPE-2 and IPPE-3 rotations will allow you to deliver direct patient care.

Course Materials:

Applicable materials required to complete experiential education can be found in the **Experiential Education Manual 2024-2025 (EE Manual)** posted to CORE ELMS and the individual course syllabi associate with IPPE (PHM 683/684/781/783/782/784) posted in each respective UBlerns administrative course (IPPE-2 or IPPE-3).

IPPE COURSE OUTCOMES:

Educational Outcomes:

	<i>Student Learning Outcome</i>	<i>ACPE Standard</i>	<i>COEPA Outcome</i>	<i>Assessment Method(s)</i>
1	Learner: Seek, analyze, integrate, and apply foundational knowledge of medications and pharmacy practice (biomedical; pharmaceutical; social, behavioral, administrative; and clinical sciences; drug classes; and digital health.	2.1.a	1.1	Preceptor evaluation
2	Problem solver: Use problem solving and critical thinking skills, along with an innovative mindset, to address challenges and to promote positive change.	2.1.b	2.1	Preceptor evaluation
3	Communicator: Actively engage, listen, and communicate verbally, nonverbally, and in writing when interacting with or educating an individual, group, or organization.	2.1.c	2.2	Preceptor evaluation
4	Ally: Mitigate health disparities by considering, recognizing, and navigating cultural and structural factors (e.g. social determinants of health, diversity, equity, inclusion, and accessibility) to improve access and health outcomes.	2.1.d	2.3	Preceptor evaluation
5	Provider: Provide whole person care to individuals as the medication specialist using the Pharmacists' Patient Care Process.	2.1.e	2.4	Preceptor evaluation
6	Advocate: Promote the best interests of patients and/or the pharmacy profession within healthcare settings and at the community, state, or national level.	2.1.f	2.5	Preceptor evaluation
7	Steward: Optimize patient healthcare outcomes using human, financial, technological, and physical resources to improve the safety, efficacy, and environmental impact of medication use systems.	2.1.g	2.6	Preceptor evaluation
8	Collaborator: Actively engage and contribute as a healthcare team member by demonstrating core interprofessional competencies.	2.1.h	2.7	Preceptor evaluation
9	Promoter: Assess factors that influence the health and wellness of a population and develop strategies to address those factors.	2.1.i	2.8	Preceptor evaluation
10	Leader: Demonstrate the ability to influence and support the achievement of shared goals on a team, regardless of one's role.	2.1.j	2.9	Preceptor evaluation
11	Self-aware: Examine, reflect on, and address personal and professional attributes (e.g., knowledge, metacognition, skills, abilities, beliefs, biases, motivation, help-seeking strategies, and emotional intelligence that could enhance or limit growth, development, & professional identity formation).	2.1.k	3.1	Preceptor evaluation
12	Professional: Did the student exhibit attitudes and behaviors that embody a commitment to building and maintaining trust with patients, colleagues, other health care professionals, and society.	2.1.l	3.2	Preceptor evaluation
13	Professional Skills and Attitudes: Activities and experiences, intended to advance professional, personal, and career development, are purposely designed and implemented to ensure an array of opportunities for students to document competency of advocacy, self-awareness, leadership, and professionalism. These activities complement and advance the learning that occurs within the formal curriculum and can occur, outside, alongside, and/or within the curriculum.	2.1.m		Preceptor evaluation
14	Team: Demonstrates the ability to influence and support the achievement of shared goals with others or in a team.			Preceptor evaluation
15	Develop strategies to actively promote inclusivity, equity, and social justice in academic, and professional environments.			Preceptor evaluation

EPAs Assessed

1	Collect information necessary to identify a patient's medication-related problems and health-related needs.
2	Assess collected information to determine a patient's medication-related problems and health-related needs.

3	Create a care plan in collaboration with the patient, others trusted by the patient, and other health professionals to optimize pharmacologic and nonpharmacologic treatment.
4	Contribute patient specific medication-related expertise as part of an interprofessional care team.
5	Answer medication related questions using scientific literature.
6	Implement a care plan in collaboration with the patient, others trusted by the patient, and other health professionals.
7	Fulfill a medication order. Site dependent process, which may mean to complete order entry/order verification, prepare medication (pull from shelf/count/activate/compound), label medication, dispense/administer to patient.
8	Educate the patient and others trusted by the patient regarding the appropriate use of a medication, device to administer a medication, or self-monitoring test.
9	Monitor and evaluate the safety and effectiveness of a care plan.
10	Report adverse drug events and/or medication errors in accordance with site specific procedures.
11	Deliver medication or health-related education to health professionals or the public.
12	Identify populations at risk for prevalent diseases and preventable adverse medication outcomes.
13	Perform the technical, administrative, and supporting operations of a pharmacy practice site. Site dependent and includes but is not limited to: Inventory management, Scheduling, and Controlled Substance Monitoring.

These competencies are based on the ACPE Standards 2025 and the COEPA.

Learner Activities:

See **Experiential Education Manual, Appendix A** for a listing of suggested rotation activities. It is expected that the number and extent of activities will vary by preceptor, student, site, and rotation type. However, all rotations at least provide some exposure (even if limited) to each of these major competency areas each rotation. Students should be given multiple opportunities at each activity to improve their skill, gain confidence, and meet their preceptor's expectations.

The following documentation is required to be completed by the student by the respective time point (e.g. midpoint) to avoid failing the rotation and/or the course.

START	MIDPOINT	FINAL
<ul style="list-style-type: none"> Hours Tracking (daily) 	<ul style="list-style-type: none"> Evaluation of educational outcomes and professionalism Hours Tracking (daily) 	<ul style="list-style-type: none"> Evaluation of educational outcomes and professionalism Patient Characteristics and Interprofessional Engagement IPPE Reflection/Direct Patient Care Reflection Hours Tracking Evaluation of Preceptor and Site Direct patient care reflection

Assignments

Preceptors may have students complete specific assignments and evaluate those assignments to provide formal feedback. Assignments and associated feedback are intended to be formative.

Pharmacists' Patient Care Process:

Using principles of evidence-based practice, pharmacists use a patient-centered approach in collaboration with other providers on the health care team to optimize patient health and medication outcomes.

In this course specifically, we will cover:

- Collect
- Assess
- Plan
- Implement
- Follow-up: Monitor and Evaluate

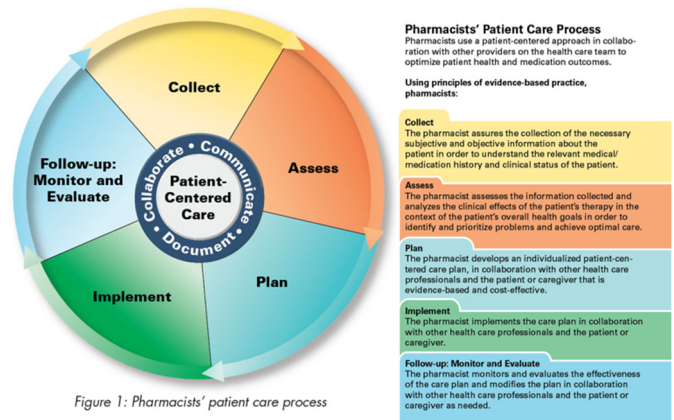


Figure 1: Pharmacists' patient care process

IPPE Requirements:

The IPPE Curriculum is comprised of 2 main elements:

1. Experiential Rotations

- You are required to complete (pass) all scheduled rotations. [Refer to the specific course syllabus for further detail]
- There are several other 'rotation specific requirements' (e.g., reflection) that also need to be completed. [Refer to the specific course syllabus for further detail]
- If a student earns a grade of "FAIL" on a rotation, the student will get an "MU" at midpoint and an "I" as the final grade until the rotation can be made-up. Only one "FAIL" may be received throughout the course of the IPPE curriculum.

2. Course Requirements (PHM 683 | PHM684 | PHM781/783 | PHM782/784)

- See Appendix A for specific course syllabus for PHM 683.
- See Appendix B for specific course syllabus for PHM 684.
- See Appendix C for specific course syllabus for PHM 781/783.
- See Appendix D for specific course syllabus for PHM 782/784.

Course Grading Policy:

The following scale will be used to determine the final overall grade:

	Original Graduation Year 2025	Original Graduation Year 2026
Required Activities	Corresponding grade	Corresponding grade
1. Receives ≥ 43 points on educational outcomes grade 2. Received a "Pass" on professionalism question 3. Student meets all other rotation and course requirement deadlines (details outlined in each specific course syllabus)	Pass	Honors
1. Receives 34-42 points on educational outcomes grade 2. Received a "Pass" on professionalism question 3. Student meets all other rotation and course requirements		Satisfactory
1. Received < 34 points on educational outcomes grade 2. Did not complete one or more rotation or course requirements 3. AND participated beyond the 60% point of the class	Fail F1	Unsatisfactory U1
1. Received < 34 points on educational outcomes grade 2. Did not complete one or more rotation or course requirements 3. AND started participating but then stopped participating prior to the 60% point of the class, or	F2	U2

1. Received <34 points on educational outcomes grade	F3	U3
2. Did not complete one or more rotation or course requirements		
3. AND did not participate in the class		

ROTATION GRADE DISTRIBUTION

All IPPE rotations will be graded as: Honors, Satisfactory, or Unsatisfactory for students entering the program prior to Class of 2026.

Educational outcomes-based grading. Students must also receive a “Pass” on professionalism to receive and H or S or Pass (Class of 2025 and earlier).

H/S/U or P/F grades:

Sum of points	Original Graduation Year 2025	Original Graduation Year 2026
43-48	Pass	Honors (H)
34-42		Satisfactory (S)
<34	Fail	Unsatisfactory (U)

- Student pharmacists are not to lobby the preceptor for a higher grade. Doing so may result in a reduction in the professionalism score
- Student pharmacists who are found falsifying hours in CORE will immediately fail that rotation and be brought up on Academic Dishonesty charges with the Office of Academic Integrity.

IPPE PROGRESSION POLICY

Progression through all IPPE rotations, IPPE-2 and IPPE-3 are dependent on successfully completing each rotation.

- Earning a grade of Fail on an IPPE rotation:
 - Earning a grade of “fail” on a scheduled rotation, will require the student pharmacist to repeat that rotation type experience as a remediation. The student pharmacist is therefore not eligible for a grade of “honors”. The student pharmacist’s graduation date may be delayed.
 - If a student pharmacist earns a grade of fail on a remediation rotation (over the entire IPPE curriculum), the student pharmacist will receive a course grade of “Unsatisfactory”

INCOMPLETE GRADE POLICY

- When a student cannot complete the required rotation or course activities (e.g., student illness, family deaths), a grade of "Incomplete" (I) with a default grade of "Unsatisfactory" (U) will be given. Documentation of the specific reasons why the student will be receiving an Incomplete must be submitted to Sarah Frontera (sns4@buffalo.edu) by the student as soon as possible and no later than the Monday of the last week of that module. Once the information is reviewed, a written plan and timeline will be devised between the preceptor, student, and the Office of Experiential Education for making up the unfinished coursework.
- Failure to satisfactorily complete the agreed upon plan for fulfilling the requirements of the “Incomplete” rotation or course activity will result in a grade of Unsatisfactory (U).
- Student pharmacists who are required to repeat IPPE rotations are ineligible to advance to APPE until all IPPE requirements are met.

Suggested Rotation Activities:

Can be found in Appendix A of the EE Manual.

Academic Integrity:

[Academic integrity](#) is critical to the learning process. It is your responsibility as a student to complete your work in an honest fashion, upholding the expectations your individual instructors have for you in this regard. The ultimate goal is to ensure that you learn the content in your courses in accordance with UB’s academic integrity principles, regardless of whether instruction is in-person or remote. Thank you for upholding your own personal integrity and ensuring UB’s tradition of academic excellence.

Accessibility Resources:

If you have any disability which requires reasonable accommodations to enable you to participate in this course, please contact the Office of Accessibility Resources in 60 Capen Hall, 716-645-2608 and also the instructor of this course during the first week of class. The office will provide you with information and review appropriate arrangements for reasonable accommodations, which can be found on the web at: <http://www.buffalo.edu/studentlife/who-we-are/departments/accessibility.html>.

Course Intervention and Remediation:

Course Intervention: If a student pharmacist fails a rotation, they are allowed to repeat that same “type” (e.g. community) of rotation, this is called a *remediation* rotation. A grade of “pass” must be earned on that *remediation* rotation. If a student pharmacist is unable to successfully pass (e.g., fail) the *remediation* rotation, they will earn a grade of fail (class of 2025) or unsatisfactory (class of 2026 and beyond) for the respective course grade. This remediation rotation will only be offered ONCE per academic year.

Course Remediation: This course will follow the School’s Intervention and Remediation Policy. Please see the school website for further detail.

<https://pharmacy.buffalo.edu/content/pharmacy/departments-offices/our-offices/student-affairs-professional-relations/student-policies-pw/academic-intervention-and-remediation.html>

Syllabus Change Policy:

This syllabus is a guide for the course and is subject to change with advance notice.

Appendix A: Course Syllabus for PHM 683TUT: Introductory Pharmacy Practice Experience (IPPE) – 2a

PHM 683 TUT: Introductory Pharmacy Practice Experience (IPPE)-2a

Refer to the **EE Manual** for more detailed information about these courses and your responsibilities related to Experiential Education.

Direct Patient Care:

All IPPE-2 rotations will allow you to deliver direct patient care. Drug dispensing, in the community settings, allows for direct patient care.

Course Requirements:

This course is graded on an H/S/U basis and is comprised of 3 main elements:

1. Experiential Rotations

- a. You are required to pass (receive an H or S) in two (2) Community Pharmacy rotations, each for 80 hours, for a total of 160 hours. [This is over the course of the entire year PHM683 & PHM684]
- b. There are several other 'rotation specific requirements' that also need to be completed. See the section below "*Successful Completion of a Rotation*".

2. Other rotation related components (listed in the table below)

- a. Immunization Records (due November 1st)
- b. Malpractice Insurance (checked-off in PHM682)
- c. Blood Borne Pathogen Training (checked-off in PHM678)
- d. Intern permit uploaded to CORE (see chart below)

3. Course specific activities

- a. Attendance at any scheduled class meetings (see schedule below)
- b. Viewing of any videos, if applicable (see UBlerns)
- c. Earning a satisfactory grade on any quizzes given, if applicable (see UBlerns)
- d. Update CORE Profile
 - i. Picture
 - ii. Last 4-digits of SSN (put in the "previous name" section)
 1. [if you do not have a SSN, just say "no SSN" in that section]
 - iii. Date of birth
 - iv. Phone number
 - v. Also list an emergency contact in one of the phone slots [e.g., xxx-xxx-xxxx (emergency)]

This course is graded as “Pass”, “Fail” OR “Honors”, “Satisfactory” or “Unsatisfactory” depending on class year. A student’s final grade will be based on completion of the following:

ACTIVITY	TO EARN A GRADE OF “PASS” Original Graduation Year 2025	TO EARN A GRADE OF “H”	TO EARN GRADE OF “S”	TO EARN GRADE OF “U” or, “F” for Original Graduation Year 2025
Rotation [^] : Community rotation 1	<ol style="list-style-type: none"> 1. Receives ≥34 points on educational outcomes grade 2. Receives a “Pass” on professionalism 3. Student meets all other rotation requirements <ul style="list-style-type: none"> • Upload Health Requirement to CORE (Dec. 1st) • Intern Permit uploaded to CORE (by Aug. 1st or before 1st scheduled rotation, whichever is first) • Upload Reflection for rotation into CORE • Complete the minimum 60 hours for each rotation and track hours as you complete them in CORE 	<ol style="list-style-type: none"> 1. Receives ≥43 points on educational outcomes grade 2. Receives a “Pass” on professionalism 3. Student meets all other rotation requirements <ul style="list-style-type: none"> • Upload Health Requirement to CORE (Dec. 1st) • Intern Permit uploaded to CORE (by Aug. 1st or before 1st scheduled rotation, whichever is first) • Upload Reflection for rotation into CORE • Complete the minimum 80 hours for each rotation and track hours as you complete them in CORE 	<ol style="list-style-type: none"> 1. Receives 34-42 points on educational outcomes grade 2. Receives a “Pass” on professionalism 3. Student meets all other rotation requirements 	<ol style="list-style-type: none"> 1. Received <34 points on educational outcomes grade <p>OR</p> <ol style="list-style-type: none"> 2. Receives a “Fail” on professionalism <p>OR</p> <ol style="list-style-type: none"> 3. Did not complete one or more rotation requirements
Rotation [^] : Community rotation 2	<ul style="list-style-type: none"> • Upload Health Requirement to CORE (Dec. 1st) • Intern Permit uploaded to CORE (by Aug. 1st or before 1st scheduled rotation, whichever is first) • Upload Reflection for rotation into CORE • Complete the minimum 60 hours for each rotation and track hours as you complete them in CORE 	<ul style="list-style-type: none"> • Upload Health Requirement to CORE (Dec. 1st) • Intern Permit uploaded to CORE (by Aug. 1st or before 1st scheduled rotation, whichever is first) • Upload Reflection for rotation into CORE • Complete the minimum 80 hours for each rotation and track hours as you complete them in CORE 		
Rotation [^] : Remediation Rotation	<ol style="list-style-type: none"> 1. Receives ≥34 points on educational outcomes grade 2. Receives a “Pass” on professionalism 3. Student meets all other rotation requirements 	N/A**	<ol style="list-style-type: none"> 1. Receives ≥34 points on educational outcomes grade 2. Receives a “Pass” on professionalism 3. Student meets all other rotation requirements 	<ol style="list-style-type: none"> 1. Received <34 points on educational outcomes grade <p>OR</p> <ol style="list-style-type: none"> 2. Receives a “Fail” on professionalism <p>OR</p> <ol style="list-style-type: none"> 3. Did not complete one or more rotation requirements
Immunization Records Updated AIR	Updated Immunizations due to Student Health by Nov. 1st AIR form uploaded to CORE by Dec. 1st	Updated Immunizations due to Student Health by Nov. 1st AIR form uploaded to CORE by Dec. 1st	AIR uploaded to CORE by end of semester	Did NOT upload AIR to CORE
Viewing of any videos, if applicable	View 100% of the posted videos by the given deadline	View 100% of the posted videos by the given deadline	Viewing >90% of the posted videos	Did not view or viewed ≤90% of the posted videos
Quizzes, if applicable	If a quiz is posted, you must complete it satisfactorily (≥90%), by the given deadline	If a quiz is posted, you must complete it satisfactorily (≥90%), by the given deadline	Earn a grade of ‘satisfactory’ (≥70%) on the quiz OR earn a grade ≥90%, but after the deadline	Earn a grade of ‘unsatisfactory’ (<70%) on the quiz
Attendance at all scheduled classes	Attendance at all scheduled classes	Attendance at all scheduled classes	Attendance at all scheduled classes	Miss a scheduled class without a valid excused absence
Update CORE Profile	Profile modules (listed above) are completed by Nov. 1st	Profile modules (listed above) are completed by Nov. 1st	Profile modules (listed above) are completed by end of semester	Profile modules not updated by end of semester

*The first rotation completed will count in the PHM683 course. The second rotation that occurs will count in the PHM684 course. A student can fail and remediate one (1) rotation for the entire IPPE curriculum.

^ If a student earns a grade of “FAIL” on a rotation, the student will get an “MU” at midpoint and an “I” as the final grade until the rotation can be made-up. Only one “FAIL” may be received throughout the course of the IPPE curriculum. If you earn a “fail” on a rotation, you will meet with OEE to develop a performance improvement plan

and get scheduled for a remediation rotation. If you earn a grade of "fail" on this remediation rotation, this will result in **failure of the course**.

**Student is not eligible to earn a grade of "honors" if they must complete a remediation rotation.

CPR and BBP training must be current. You are responsible for updating your certification prior to its expiration. You cannot go on rotation with expired credentials.

Schedule:

Date	Time	Location	Topic	Instructor(s)
TBD	Live, synchronous	PB190	PHM683 Course Overview and IPPE updates	N. Cieri-Hutcherson

Grading Policy:

Per omni syllabus grading



PHM 684: Introductory Pharmacy Practice Experience (IPPE)-2b

Refer to the **EE Manual** for more detailed information about these courses and your responsibilities related to Experiential Education.

Direct Patient Care:

All IPPE-2 rotations will allow you to deliver direct patient care. Drug dispensing, in the community settings, allows for direct patient care.

Course Requirements:

This course is graded on an H/S/U basis and is comprised of 3 main elements:

1. Experiential Rotations

- a. You are required to pass (receive and H or S) in two (2) Community Pharmacy rotations, each for 80 hours, for a total of 160 hours. [This is over the course of the entire year PHM683 & PHM684]
- b. There are several other 'rotation specific requirements' that also need to be completed. See the section below "*Successful Completion of a Rotation*".

2. Other rotation related components (listed in the table below)

- a. Malpractice insurance
- b. Blood Borne Pathogen Training (checked-off in PHM678)

3. Course specific activities

- a. Attendance at any scheduled class meetings (see schedule below)
- b. Viewing of any videos, if applicable (see UBlearns)
- c. Earning a satisfactory grade on any quizzes given, if applicable (see UBlearns)

This course is graded as “Pass”, “Fail” OR “Honors”, “Satisfactory” or “Unsatisfactory” depending on class year. A student’s final grade will be based on completion of the following:

ACTIVITY	TO EARN A GRADE OF “PASS” Original Graduation Year 2025	TO EARN A GRADE OF “H”	TO EARN GRADE OF “S”	TO EARN GRADE OF “U” or, “F” for Original Graduation Year 2025
Rotation ^{**} : Community rotation 1	<ol style="list-style-type: none"> 1. Receives ≥ 34 points on educational outcomes grade 2. Receives a “Pass” on professionalism 3. Student meets all other rotation requirements <ul style="list-style-type: none"> • Upload Health Requirement to CORE (Dec. 1st) • Intern Permit uploaded to CORE (by Aug. 1st or before 1st scheduled rotation, whichever is first) • Upload Reflection for rotation into CORE 4. Complete the minimum 60 hours for each rotation and track hours as you complete them in CORE 	<ol style="list-style-type: none"> 1. Receives ≥ 43 points on educational outcomes grade 2. Receives a “Pass” on professionalism 3. Student meets all other rotation requirements 4. Upload Reflection for rotation into CORE 5. Complete the minimum 80 hours for each rotation and track hours as you complete them in CORE 	<ol style="list-style-type: none"> 1. Receives 34-42 points on educational outcomes grade 2. Receives a “Pass” on professionalism 3. Student meets all other rotation requirements 	<ol style="list-style-type: none"> 1. Received < 34 points on educational outcomes grade <p>OR</p> <ol style="list-style-type: none"> 2. Receives a “Fail” on professionalism <p>OR</p> <ol style="list-style-type: none"> 3. Did not complete one or more rotation requirements
Rotation ^{**} : Community rotation 2				
Rotation ^{**} : Remediation Rotation	<ol style="list-style-type: none"> 1. Receives ≥ 34 points on educational outcomes grade 2. Receives a “Pass” on professionalism 3. Student meets all other rotation requirements 	N/A ^{**}	<ol style="list-style-type: none"> 1. Receives ≥ 34 points on educational outcomes grade 2. Receives a “Pass” on professionalism 3. Student meets all other rotation requirements 	<ol style="list-style-type: none"> 1. Received < 34 points on educational outcomes grade <p>OR</p> <ol style="list-style-type: none"> 2. Receives a “Fail” on professionalism <p>OR</p> <ol style="list-style-type: none"> 3. Did not complete one or more rotation requirements
Malpractice Insurance Complete and purchase from April 1 st – May 1 st . Copy of certificate due no later than May 1 st .	Proof submitted in CORE by May 1st	Proof submitted in CORE by May 1st	Obtained and handed in malpractice insurance certificate	Did NOT obtain and/or hand in malpractice insurance certificate
Blood Borne Pathogen Training^{***} BBP documentation needs to be up-to-date	Updated date of training in CORE by May 1st	Updated date of training in CORE by May 1st	Updated date of training in CORE	Did NOT update date of training in CORE
CPR^{***} CPR documentation needs to be up-to-date	In date documentation in CORE by May 1st	In date documentation in CORE by May 1st	Updated documentation in CORE	Did NOT update date of training in CORE
Criminal Background Check Uploaded to CORE	Updated document uploaded to CORE by May 1st	Updated document uploaded to CORE by May 1st	Updated documentation in CORE	Did NOT update date of training in CORE
Attendance at all scheduled classes	Attendance at all scheduled classes	Attendance at all scheduled classes	Attendance at all scheduled classes	Miss a scheduled class without a valid excused absence

*The first rotation completed will count in the PHM683 course. The second rotation that occurs will count in the PHM684 course. A student can fail and remediate one (1) rotation for the entire IPPE curriculum.

^ If a student earns a grade of “FAIL” on a rotation, the student will get an “MU” at midpoint and an “I” as the final grade until the rotation can be made-up. Only one “FAIL” may be received throughout the course of the IPPE curriculum. If you earn a “fail” on a rotation, you will meet with OEE to develop a performance improvement plan

and get scheduled for a remediation rotation. If you earn a grade of "fail" on this remediation rotation, this will result in **failure of the course**.

**Student is not eligible to earn a grade of "honors" if they must complete a remediation rotation.

***CPR and BBP training must be current at the time of submission. You are responsible for updating your certification prior to its expiration even if this falls sooner than the May 1 deadline. You cannot go on rotation with expired credentials.

Schedule:

Date	Time	Location	Topic	Instructor(s)
-		--	PHM684 Course Overview and IPPE updates	N. Cieri-Hutcherson
TBD	10 – 11:50AM	125	IPPE3 Orientation	R. O'Brocta N. Cieri-Hutcherson S. Frontera

Grading Policy:

Per omni syllabus grading



PHM 781/783 TUT: Introductory Pharmacy Practice Experience (IPPE)-3a

Refer to the **EE Manual** for more detailed information about these courses and your responsibilities related to Experiential Education.

Direct Patient Care:

All IPPE-2 and IPPE-3 rotations will allow you to deliver direct patient care. Drug dispensing, in the community or institutional settings, allows for direct patient care.

Course Requirements:

This course is graded on an H/S/U basis and is comprised of 3 main elements:

1. Experiential Rotations

- a. Class of 2027:
 - i. You are required to pass (receive and H or S) in two (2) rotations – one institutional for 75 hours and one community or ambulatory care rotation for 80 hours, for a total of 155 hours. [This is over the course of the entire year PHM781/783 & PHM782/784]
- b. Class of 2026:
 - i. Students will be required to pass (receive and H or S) in three (3) IPPE rotations: one (1) Institutional IPPE rotation with 75 hours and two (2) of any other 'patient care' rotation (e.g., ambulatory care, hospice, or community) IPPE rotations for 60 hours each, for a total of 195 hours. [This is over the course of the entire year PHM781/783 & PHM782/784]
- c. There are several other 'rotation specific requirements' that also need to be completed. See the section below "*Successful Completion of a Rotation*".

2. Other rotation related components (listed in the table below)

- a. Immunization Records (due November 1st)

3. Course specific activities

- a. Attendance at any scheduled class meetings (see schedule below)
- b. Viewing of any videos, if applicable (see UBlearns)
- c. Earning a satisfactory grade on any quizzes given, if applicable (see UBlearns)

This course is graded as “Pass”, “Fail” OR “Honors”, “Satisfactory” or “Unsatisfactory” depending on class year. A student’s final grade will be based on completion of the following:

ACTIVITY	TO EARN A GRADE OF “PASS” Original Graduation Year 2025	TO EARN A GRADE OF “H”	TO EARN GRADE OF “S”	TO EARN GRADE OF “U” or, “F” for Original Graduation Year 2025
Rotation 1*^	<ol style="list-style-type: none"> 1. Receives ≥ 34 points on educational outcomes grade 2. Receives a “Pass” on professionalism 3. Student meets all other rotation requirements <ul style="list-style-type: none"> • Upload Health Requirement to CORE (Dec. 1st) • Intern Permit uploaded to CORE (by Aug. 1st or before 1st scheduled rotation, whichever is first) • Upload Reflection for rotation into CORE 4. Complete the minimum hours for each rotation and track hours as you complete them in CORE 	<ol style="list-style-type: none"> 1. Receives ≥ 43 points on educational outcomes grade 2. Receives a “Pass” on professionalism 3. Student meets all other rotation requirements <ul style="list-style-type: none"> • Upload Health Requirement to CORE (Dec. 1st) • Intern Permit uploaded to CORE (by Aug. 1st or before 1st scheduled rotation, whichever is first) • Upload Reflection for rotation into CORE 4. Complete the minimum hours for each rotation and track hours as you complete them in CORE 	<ol style="list-style-type: none"> 1. Receives 34-42 points on educational outcomes grade 2. Receives a “Pass” on professionalism 3. Student meets all other rotation requirements 	<ol style="list-style-type: none"> 1. Received < 34 points on educational outcomes grade <p>OR</p> <ol style="list-style-type: none"> 2. Receives a “Fail” on professionalism <p>OR</p> <ol style="list-style-type: none"> 3. Did not complete one or more rotation requirements
Rotation 2*^				
Rotation 3*^ (For Class of 2026 only)				
Rotation*^: Remediation Rotation	<ol style="list-style-type: none"> 1. Receives ≥ 34 points on educational outcomes grade 2. Receives a “Pass” on professionalism 3. Student meets all other rotation requirements 	N/A**	<ol style="list-style-type: none"> 1. Receives ≥ 34 points on educational outcomes grade 2. Receives a “Pass” on professionalism 3. Student meets all other rotation requirements 	<ol style="list-style-type: none"> 1. Received < 34 points on educational outcomes grade <p>OR</p> <ol style="list-style-type: none"> 2. Receives a “Fail” on professionalism <p>OR</p> <ol style="list-style-type: none"> 3. Did not complete one or more rotation requirements
Immunization Records Updated AIR	Updated Immunizations due to Student Health by Nov. 1st AIR form uploaded to CORE by Dec. 1st	Updated Immunizations due to Student Health by Nov. 1st AIR form uploaded to CORE by Dec. 1st	AIR uploaded to CORE by end of semester	Did NOT upload AIR to CORE
Viewing of any videos, if applicable	View 100% of the posted videos by the given deadline	View 100% of the posted videos by the given deadline	Viewing $> 90\%$ of the posted videos	Did not view or viewed $\leq 90\%$ of the posted videos
Quizzes, if applicable	If a quiz is posted, you must complete it satisfactorily ($\geq 90\%$), by the given deadline	If a quiz is posted, you must complete it satisfactorily ($\geq 90\%$), by the given deadline	Earn a grade of ‘satisfactory’ ($\geq 70\%$) on the quiz OR earn a grade $\geq 90\%$, but after the deadline	Earn a grade of ‘unsatisfactory’ ($< 70\%$) on the quiz
Attendance at all scheduled classes	Attendance at all scheduled classes	Attendance at all scheduled classes	Attendance at all scheduled classes	Miss a scheduled class without a valid excused absence

*Class of 2027: The first rotation completed will count in the PHM781/783 course. The second rotation that occurs will count in the PHM782/784 course. A student can fail and remediate one (1) rotation for the entire IPPE curriculum.

*Class of 2026: The first rotation completed will count in the PHM781/783 course. The second rotation that occurs will count in the course closest to its completion. The third rotation will count in the PHM782/784 course.

^ If a student earns a grade of “FAIL” on a rotation, the student will get an “MU” at midpoint and an “I” as the final grade until the rotation can be made-up. Only one “FAIL” may be received throughout the course of the IPPE

curriculum. If you earn a “fail” on a rotation, you will meet with OEE to develop a performance improvement plan and get scheduled for a remediation rotation. If you earn a grade of “fail” on this remediation rotation, this will result in **failure of the course**.

**Student is not eligible to earn a grade of “honors” if they must complete a remediation rotation.

CPR and BBP training must be current. You are responsible for updating your certification prior to its expiration. You cannot go on rotation with expired credentials.

Schedule:

Date	Time	Location	Topic	Instructor(s)
TBD	11am – 12:50pm	190 PB	1. PHM781/783 Course Overview and IPPE updates video	N. Cieri-Hutcherson
--	Asynchronous	--	2. APPE Basics video (quiz must be done before class)	R. O'Brocta K. Jordan
TBD	11am – 12:50pm	190 PB	3. Out of Region and Longitudinal rotation discussion	R. O'Brocta K. Jordan
--	Asynchronous	--	4. Quiz (on topics 1, 2, and 3)	N. Cieri-Hutcherson

Grading Policy:

Per omni syllabus grading



PHM 782/784: Introductory Pharmacy Practice Experience (IPPE)-3b

Direct Patient Care:

All IPPE-2 and IPPE-3 rotations will allow you to deliver direct patient care. Drug dispensing, in the community or institutional settings, allows for direct patient care.

Course Requirements:

This course is graded on an H/S/U basis and is comprised of 3 main elements:

1. Experiential Rotations

- a. Class of 2027:
 - i. You are required to pass (receive and H or S) in two (2) rotations – one institutional for 75 hours and one community or ambulatory care rotation for 80 hours, for a total of 155 hours. [This is over the course of the entire year PHM781/783 & PHM782/784]
- b. Class of 2026:
 - i. Students will be required to pass (receive and H or S) in three (3) IPPE rotations: one (1) Institutional IPPE rotation with 75 hours and two (2) of any other 'patient care' rotation (e.g., ambulatory care, hospice, or community) IPPE rotations for 60 hours each, for a total of 195 hours. [This is over the course of the entire year PHM781/783 & PHM782/784]
- c. There are several other 'rotation specific requirements' that also need to be completed. See the section below "*Successful Completion of a Rotation*".

2. Other rotation related components (listed in the table below)

- a. Malpractice insurance (checked-off in PHM782/784)
- b. Blood Borne Pathogen Training (checked-off in PHM778)

3. Course specific activities

- a. Attendance at any scheduled class meetings (see schedule below)
- b. Viewing of any videos, if applicable (see Ublearns)
- c. Earning a satisfactory grade on any quizzes given, if applicable (see Ublearns)

This course is graded as “Pass”, “Fail” OR “Honors”, “Satisfactory” or “Unsatisfactory” depending on class year. A student’s final grade will be based on completion of the following:

ACTIVITY	TO EARN A GRADE OF “PASS” Original Graduation Year 2025	TO EARN A GRADE OF “H”	TO EARN GRADE OF “S”	TO EARN GRADE OF “U” or, “F” for Original Graduation Year 2025
Rotation 1 [^]	<ol style="list-style-type: none"> 1. Receives ≥34 points on educational outcomes grade 2. Receives a “Pass” on professionalism 3. Student meets all other rotation requirements 4. Complete the minimum hours for each rotation and track hours as you complete them in CORE 	<ol style="list-style-type: none"> 1. Receives ≥43 points on educational outcomes grade 2. Receives a “Pass” on professionalism 3. Student meets all other rotation requirements 4. Upload Reflection for rotation into CORE 5. Complete the minimum hours for each rotation and track hours as you complete them in CORE 	<ol style="list-style-type: none"> 1. Receives 34-42 points on educational outcomes grade 2. Receives a “Pass” on professionalism 3. Student meets all other rotation requirements 	<ol style="list-style-type: none"> 1. Received <34 points on educational outcomes grade <p>OR</p> <ol style="list-style-type: none"> 2. Receives a “Fail” on professionalism <p>OR</p> <ol style="list-style-type: none"> 3. Did not complete one or more rotation requirements
Rotation 2 [^]				
Rotation 3 [^] (For Class of 2026 only)				
Rotation [^] : Remediation Rotation	<ol style="list-style-type: none"> 1. Receives ≥34 points on educational outcomes grade 2. Receives a “Pass” on professionalism 3. Student meets all other rotation requirements 	N/A ^{**}	<ol style="list-style-type: none"> 1. Receives ≥34 points on educational outcomes grade 2. Receives a “Pass” on professionalism 3. Student meets all other rotation requirements 	<ol style="list-style-type: none"> 1. Received <34 points on educational outcomes grade <p>OR</p> <ol style="list-style-type: none"> 2. Receives a “Fail” on professionalism <p>OR</p> <ol style="list-style-type: none"> 3. Did not complete one or more rotation requirements
Malpractice Insurance Complete and purchase from April 1 st – May 1 st . Copy of certificate due no later than May 1 st .	Proof submitted in CORE by May 1st	Proof submitted in CORE by May 1st	Obtained and handed in malpractice insurance certificate	Did NOT obtain and/or hand in malpractice insurance certificate
Blood Borne Pathogen Training^{***} BBP documentation needs to be up-to-date	Updated date of training in CORE by May 1st	Updated date of training in CORE by May 1st	Updated date of training in CORE	Did NOT update date of training in CORE
CPR^{***} CPR documentation needs to be up-to-date	In date documentation in CORE by May 1st	In date documentation in CORE by May 1st	Updated documentation in CORE	Did NOT update date of training in CORE
Criminal Background Check Uploaded to CORE	Updated document uploaded to CORE by May 1st	Updated document uploaded to CORE by May 1st	Updated documentation in CORE	Did NOT update date of training in CORE
Attendance at all scheduled classes	Attendance at all scheduled classes	Attendance at all scheduled classes	Attendance at all scheduled classes	Miss a scheduled class without a valid excused absence

*Class of 2027: The first rotation completed will count in the PHM781/783 course. The second rotation that occurs will count in the PHM782/784 course. A student can fail and remediate one (1) rotation for the entire IPPE curriculum.

*Class of 2026: The first rotation completed will count in the PHM 781/783 course. The second rotation that occurs will count in the course closest to its completion. The third rotation will count in the PHM782/784 course.

[^] If a student earns a grade of “FAIL” on a rotation, the student will get an “MU” at midpoint and an “I” as the final grade until the rotation can be made-up. Only one “FAIL” may be received throughout the course of the IPPE curriculum. If you earn a “fail” on a rotation, you will meet with OEE to develop a performance improvement plan and get scheduled for a remediation rotation. If you earn a grade of “fail” on this remediation rotation, this will result in **failure of the course**.

^{**} Student is not eligible to earn a grade of “honors” if they must complete a remediation rotation.

^{***} CPR and BBP training must be current at the time of submission. You are responsible for updating your certification prior to its expiration even if this falls sooner than the May 1 deadline. You cannot go on rotation with expired credentials.

Schedule:

Date	Time	Location	Topic	Instructor(s)
--	Asynchronous	--	PHM782/784 Course Overview and IPPE updates	N. Cieri-Hutcherson
TBD	9AM – 12PM	PB190	APPE Orientation	R. O'Brocta K. Jordan N. Cieri-Hutcherson S. Frontera

Grading Policy:

Per omni syllabus grading

Appendix D
APPE Omni Syllabus 2024-2025



University at Buffalo

**School of Pharmacy and
Pharmaceutical Sciences**

Advanced Pharmacy Practice Experience (APPE) Program

Omni Syllabus 2024-2025

PHM843: Ambulatory Patient Care

PHM844: Community Pharmacy

PHM845: Hospital Health System Pharmacy

PHM846: Inpatient General Medicine

PHM847: Elective 1, Direct Patient Care

PHM848: Elective 2, Direct or Non-Direct Patient Care

PHM849: Elective 3, Direct or Non-Direct Patient Care

PHM850: Professional Development

INTRODUCTION

This syllabus is meant to be an overarching document that explains course rationale, policies and procedures that are common between all the APPE Experiential Courses in tandem with the EE Manual. Individual Course Outcomes are given for each individual course syllabi.

Required Pre-Requisites

A. STUDENT ELIGIBILITY FOR APPE

Students in the Advanced Pharmacy Practice Experience Program that are in good standing, and not presently on probationary status (see below) as determined by the UB SPPS Student Academic Affairs Committee, may be eligible for APPE rotation assignments when the student has satisfactorily completed the following:

1. All required and elective courses as assigned by the School of Pharmacy and Pharmaceutical Sciences Curriculum Committee that pertain to that class year.
2. Attendance at entire APPE orientation session in May of each year

NOTE: Once all the above have been completed, students will then be allowed to progress onto their APPE year.

COURSE DESIGN & STRUCTURE

Course Number	Course Title	Course Coordinator	Minimum # of Clock Hours	Academic Credit Hours
PHM 843	Ambulatory Care	Dr. Erin Slazak	240 hours	6
PHM 844	Community Pharmacy	Dr. Chris Daly	160 hours	4
PHM 845	Hospital Health Systems Pharmacy	Dr. Collin Clark	160 hours	4
PHM 846	Inpatient General Medicine	Dr. Ray Cha	240 hours	6
PHM 847	Elective 1 Direct Patient Care	Dr. Calvin Meaney	240 hours	6
PHM 848	Elective 2 Direct or Non-Direct Patient Care	Dr. Calvin Meaney	240 hours	6
PHM 849	Elective 3 Direct or Non-Direct Patient Care	Dr. Calvin Meaney	240 hours	6
PHM 850	Professional Development (Spring Semester)	Dr. Richard O'Brocta	N/A	1

Student pharmacists must complete a minimum of 1520 hours of APPE, which is equivalent to 38 weeks of full-time experience and 38 hours of course credit.

OFFICE OF EXPERIENTIAL EDUCATION: PROGRAM ADMINISTRATION 2024-2025

Office of Experiential Education	
<p>Richard F. O'Brocta, PharmD Director, Office of Experiential Education Division of Education and Teaching Innovation Clinical Associate Professor 224 Pharmacy Building, Buffalo, NY 14214 Phone: 716-645-4628 Email: robrocta@buffalo.edu</p>	<p>Nicole E. Cieri-Hutcherson, PharmD, BCPS, NCMP Assistant Director, Office of Experiential Education Division of Outcomes and Practice Advancement Clinical Associate Professor 217 Pharmacy Building, Buffalo, NY 14214 Phone: 716-645-3635 Email: necieri@buffalo.edu</p>
<p>Kris A. Jordan, A.A.S. Coordinator, Advanced Pharmacy Practice Experience Program (APPE) (P4) Division of Education and Teaching Innovation 225 Pharmacy Building, Buffalo, NY 14214 Phone: 716-645-4799 FAX : 716-829-6092 Email : kajordan@buffalo.edu</p>	<p>Sarah Frontera, Ed.M. Coordinator, Introductory Pharmacy Practice Experience Program (IPPE) (P2-P3) Division of Education and Teaching Innovation 225 Pharmacy Building, Buffalo, NY 14214 Phone: 716-645-4791 FAX: 716-829-6092 Email: sns4@buffalo.edu</p>
Experiential Education Course Coordinators	
<p>Erin Slazak, PharmD, BCPS, BCACP Clinical Assistant Professor Division of Outcomes and Practice Advancement Division of Education and Teaching Innovation Course Coordinator, PHM 843: Ambulatory Care IPPE Ambulatory Care Advisor 210 Pharmacy Building, Buffalo, NY 14214 Phone: 716-645-3931 Email : emslazak@buffalo.edu</p>	<p>Christopher Daly, PharmD, MBA, BCACP Clinical Assistant Professor Division of Outcomes and Practice Advancement Course Coordinator, PHM 844: Community Pharmacy IPPE Community Pharmacy Advisor 204 Pharmacy Building, Buffalo, NY 14214 Phone: 716-645-4793 Email: cjdaly@buffalo.edu</p>
<p>Collin Clark, PharmD, BCPS, BCGP Clinical Assistant Professor Division of Outcomes and Practice Advancement Course Coordinator, PHM 845: Hospital Health Systems Pharmacy IPPE Hospital Health Systems Pharmacy Advisor 312 Pharmacy Building, Buffalo, NY 14214 Phone: 716-645-4762 Email : collincl@buffalo.edu</p>	<p>Raymond Cha, B.S., PharmD Clinical Associate Professor Division of Clinical and Translational Therapeutics Course Coordinator, PHM 846: Inpatient General Medicine IPPE General Medicine Advisor 212 Pharmacy Building, Buffalo, NY 14214 Phone: 716-645-4790 Email: rcha@buffalo.edu</p>
<p>Calvin Meaney, PharmD Clinical Associate Professor Interim Division Head, Division of Outcomes and Practice Advancement Course Coordinator PHM 847: Elective 1 Direct Patient Care PHM 848: Elective 2 Direct or Non-Direct Patient Care PHM 849: Elective 3 Direct or Non-Direct Patient Care 218 Pharmacy Building, Buffalo, NY 14214 Phone : 716-645-2826 Email : cjmeaney@buffalo.edu</p>	

APPE COURSE OUTCOMES: Educational Outcomes:

	Student Educational Outcomes	ACPE Standard	COEPA Outcome	Assessment Method(s)
1	Learner: Seek, analyze, integrate, and apply foundational knowledge of medications and pharmacy practice (biomedical; pharmaceutical; social, behavioral, administrative; and clinical sciences; drug classes; and digital health.	2.1.a	1.1	Preceptor evaluation
2	Problem solver: Use problem solving and critical thinking skills, along with an innovative mindset, to address challenges and to promote positive change.	2.1.b	2.1	Preceptor evaluation
3	Communicator: Actively engage, listen, and communicate verbally, nonverbally, and in writing when interacting with or educating an individual, group, or organization.	2.1.c	2.2	Preceptor evaluation
4	Ally: Mitigate health disparities by considering, recognizing, and navigating cultural and structural factors (e.g. social determinants of health, diversity, equity, inclusion, and accessibility) to improve access and health outcomes.	2.1.d	2.3	Preceptor evaluation
5	Provider: Provide whole person care to individuals as the medication specialist using the Pharmacists' Patient Care Process.	2.1.e	2.4	Preceptor evaluation
6	Advocate: Promote the best interests of patients and/or the pharmacy profession within healthcare settings and at the community, state, or national level.	2.1.f	2.5	Preceptor evaluation
7	Steward: Optimize patient healthcare outcomes using human, financial, technological, and physical resources to improve the safety, efficacy, and environmental impact of medication use systems.	2.1.g	2.6	Preceptor evaluation
8	Collaborator: Actively engage and contribute as a healthcare team member by demonstrating core interprofessional competencies.	2.1.h	2.7	Preceptor evaluation
9	Promoter: Assess factors that influence the health and wellness of a population and develop strategies to address those factors.	2.1.i	2.8	Preceptor evaluation
10	Leader: Demonstrate the ability to influence and support the achievement of shared goals on a team, regardless of one's role.	2.1.j	2.9	Preceptor evaluation
11	Self-aware: Examine, reflect on, and address personal and professional attributes (e.g., knowledge, metacognition, skills, abilities, beliefs, biases, motivation, help-seeking strategies, and emotional intelligence that could enhance or limit growth, development, & professional identity formation).	2.1.k	3.1	Preceptor evaluation
12	Professional: Did the student exhibit attitudes and behaviors that embody a commitment to building and maintaining trust with patients, colleagues, other health care professionals, and society.	2.1.l	3.2	Preceptor evaluation
13	Professional Skills and Attitudes: Activities and experiences, intended to advance professional, personal, and career development, are purposely designed and implemented to ensure an array of opportunities for students to document competency of advocacy, self-awareness, leadership, and professionalism. These activities complement and advance the learning that occurs within the formal curriculum and can occur, outside, alongside, and/or within the curriculum.	2.1.m		Preceptor evaluation
14	Team: Demonstrates the ability to influence and support the achievement of shared goals with others or in a team.			Preceptor evaluation
15	Develop strategies to actively promote inclusivity, equity, and social justice in academic, and professional environments.			Preceptor evaluation

EPAs ASSESSED

1	Collect information necessary to identify a patient's medication-related problems and health-related needs.
2	Assess collected information to determine a patient's medication-related problems and health-related needs.
3	Create a care plan in collaboration with the patient, others trusted by the patient, and other health professionals to optimize pharmacologic and nonpharmacologic treatment.
4	Contribute patient specific medication-related expertise as part of an interprofessional care team.
5	Answer medication related questions using scientific literature.
6	Implement a care plan in collaboration with the patient, others trusted by the patient, and other health professionals.
7	Fulfill a medication order. Site dependent process, which may mean to complete order entry/order verification, prepare medication (pull from shelf/count/activate/compound), label medication, dispense/administer to patient.
8	Educate the patient and others trusted by the patient regarding the appropriate use of a medication, device to administer a medication, or self-monitoring test.
9	Monitor and evaluate the safety and effectiveness of a care plan.
10	Report adverse drug events and/or medication errors in accordance with site specific procedures.
11	Deliver medication or health-related education to health professionals or the public.
12	Identify populations at risk for prevalent diseases and preventable adverse medication outcomes.
13	Perform the technical, administrative, and supporting operations of a pharmacy practice site. Site dependent and includes but is not limited to: Inventory management, Scheduling, and Controlled Substance Monitoring.

EDUCATIONAL OUTCOMES ASSESSMENT RUBRIC

- **Does Not Meet Expectations (1):** The performance falls significantly below the expected standards. There are numerous errors or deficiencies in understanding, execution, or completion of the task. The work does not meet the basic requirements and demonstrates a lack of effort or comprehension.
- **Approaches Expectations (2):** The performance partially meets the expected standards. There are some errors or deficiencies in understanding, execution, or completion of the task. While aspects of the work may be satisfactory, overall, it falls short of meeting all requirements and demonstrates room for improvement.
- **Meets Expectations (3):** The performance meets the expected standards. It demonstrates a solid understanding and execution of the task with minimal errors or deficiencies. The work meets all requirements and may also include additional elements that enhance its quality and completeness.
- **Exceeds Expectations (4):** The performance goes above and beyond the expected standards. It demonstrates a thorough understanding and exceptional execution of the task with no significant errors or deficiencies. The work not only meets all requirements but also includes additional elements that significantly enhance its quality, creativity, and/or innovation.

EPA ASSESSMENT RUBRIC

- **Level 1:** Learner is permitted to observe only. Even with direct supervision, the learner is not entrusted to perform the activity or task.
- **Level 2:** Learner is entrusted to perform the activity or task with direct and proactive supervision. Learner must be observed performing tasks in order to provide immediate feedback.
- **Level 3:** Learner is entrusted to perform the activity or task with indirect and reactive supervision. Learner can perform task without direct supervision but may request assistance. Supervising pharmacist is quickly available on site. Feedback is provided immediately after completion of an activity or task.
- **Level 4:** Learner is entrusted to perform the activity or task with supervision at a distance. Learner can independently perform tasks. Learner meets with supervising pharmacist at periodic intervals. Feedback is provided regarding overall performance based on sample work.
- **Level 5:** Learner is entrusted to independently decide what activities and tasks need to be performed. Learner is entrusted to direct and supervise the activities of others. Learner meets with supervising pharmacist at periodic intervals. Feedback is provided regarding overall performance based on broad professional expectations and organizational goals.

ROTATION TYPES

Ambulatory patient care (core-240 hours)

An outpatient clinical rotation that provides the student with direct patient care activities. The student is also expected to actively participate as part of an interprofessional team. Depending on the actual site there may also be dispensing activities going on concurrently, however the main objective of this type of rotation is to provide medication therapy management and education for patients' chronic diseases.

Educational Outcomes: 1-13

EPAs: 1-6, 7-8, 11-12

Community pharmacy (core-160 hours)

A community rotation provides the student with direct drug distribution and counseling activities. There may also be clinical activities going on concurrently, however the main objective of this type of rotation is to dispense medications in a safe and timely manner following all legal and regulatory requirements of the site/state. Practice management will also be emphasized.

Educational Outcomes: 1-13

EPAs: 1-2, 5, 7, 10-13

Hospital/health-system pharmacy (core-160 hours)

The purpose of this rotation is for the student to understand how the right medication gets to the right patient at the right time. This usually includes exposure to the drug distribution system, IV admixture preparation, controlled substance management, inventory control, among others. The focus is on system management and continuous quality improvement.

Educational Outcomes: 1-13

EPAs: 1-7, 9-10, 13

Inpatient adult patient care (core-240 hours)

A general medicine rotation provides the student with direct patient care experience in the inpatient setting utilizing a rounding service. The student will manage a diverse patient population with a variety of common conditions seen in adult care patients. The student will also actively contribute as a member of an interprofessional healthcare team.

Educational Outcomes: 1-13

EPAs: 1-7, 9-10, 13

Electives (3-240 hours, at least 1 elective rotation must be Direct Patient Care (DPC))

Elective APPEs are meant to allow students to explore areas of potential practice interest. This may include practice, research, or other areas of interest for pharmacy students. An elective may include a repeat of the core rotations listed above.

Direct Patient Care (DPC)

Educational Outcomes: 1-13

EPAs: Optional

Non-Direct Patient Care (DPC/DPC)

Educational Outcomes: 1-4, 10, 11, 15

EPAs: None

DIRECT PATIENT CARE (DPC)

Direct patient care is defined as any interaction a student pharmacist has WITH or FOR a patient. This can be delivered in-person, telephonically or by telemedicine. This can include activities such as dispensing medications, counseling, education, discharge counseling, transition of care activities, optimizing outcomes, self-care, and using evidence-based medicine in decision making, among others.

NON-DIRECT PATIENT CARE ROTATIONS

The APPE experience may also include non-direct patient care rotations. For non-direct patient care rotations the learning objectives and activities performed will be provided by your preceptor and posted in CORE.

ACTIVITIES AND EVALUATION PROCESS

Required Hours

1. Students are expected to be engaged in experiential activities for a MINIMUM of 240 hours (to achieve the ACPE-mandated hours) for a 6-week rotation, worth 6 credit hours or 160 hours (to achieve the ACPE-mandated hours) for a 4-week rotation, worth 4 credit hours. The weekly schedule will be determined by the preceptor and students should not necessarily expect that APPE activities will occur Monday through Friday during the hours of 9am to 5pm. It is not unreasonable for preceptors to expect students to start earlier in the day, work longer hours or require that rotation activities be performed at night or on weekends.
2. Students are required to complete on-line Daily Duty Hours in Hours Tracking on CORE as documentation of the hours devoted to rotation activities. The log must be updated daily and electronically signed off on by the preceptor at the time of the midpoint and final evaluation and at any other time requested by the preceptor.
3. While students are required to be on-site for a minimum number of hours each week, the actual number of hours needed to satisfy the requirements of this rotation, and acquire proficiency in the delivery of pharmaceutical care, may well exceed this minimum. Students will be responsible for patient care, regardless of the time required to meet those obligations. In addition, completion of all assignments may need to be done outside of the designated time scheduled at the site. For these reasons, it is recommended that students minimize the number of hours committed to other obligations (employment, non-professional electives, extra-curricular activities) until such time that he/she becomes accustomed to the time commitment necessary to meet APPE responsibilities.
4. A full accounting of the policies and procedures surrounding absences can be found in the EE Manual.

Meetings with Preceptor(s)

Students are expected to meet with their preceptor(s) and/or his/her designee, at least three (3) times per week (daily if possible) to present and discuss all assigned patients with an emphasis on patient management from the Pharmaceutical Care perspective. This may include discussions of disease state presentation, appropriate therapy, drug therapy monitoring, drug specific pharmacology/ pharmacokinetics/ pharmacodynamics, dispensing medications, counseling, and assessment of outcome as outlined in performance objectives.

Assignments

Preceptors may have students complete specific assignments and evaluate those assignments to provide formal feedback. Assignments and associated feedback are intended to be formative. The summative assessment of the students' skills will occur during the midpoint and final APPE Evaluation of Professionalism and Skills.

GRADING, PENALTIES, GRADE DISTRIBUTION AND EVALUATION PROCESS

GRADE DISTRIBUTION

All rotations are graded based upon the interpretation of the preceptor's cumulative global feedback submitted to the school (primarily based upon the APPE Evaluation of the Educational Outcomes). The final grade posted to Brightspace for each module will be reviewed and systematically determined by the corresponding faculty course coordinator of that rotation type.

Throughout all APPE rotation courses it is expected that the typical student will receive around a "S" or "B" grade. Only exemplary performance will be rewarded with a grade of A or A-. Any of the following grades can be earned while on a rotation (H,S,U, A, A-, B+, B, B-, C+, C, C- or F).

Required Rotations and Direct Patient Care Electives for Class of 2025

Grade	A	A-	B+	B			B-	C+	C	F
Sum of points	46-48	43-45	42	40-41			39	37-38	34-36	<34

Required Rotations and Direct Patient Care Electives for Class of 2026 and Beyond

Grade	Sum of points
Honors (H)	43-48
Satisfactory (S)	34-42
Unsatisfactory (U)	<34

Direct and Non-Direct Patient Care Electives for Class of 2025

Grade	A	A-	B+	B	B-	C+	C	F
Sum of points	31-32	31-32	31-32	31-32	31-32	31-32	31-32	31-32

Direct and Non-Direct Patient Care Electives for Class of 2026 and Beyond

Grade	Sum of points
Honors (H)	29-32
Satisfactory (S)	21-28
Unsatisfactory (U)	<21

GRADE PENALTY INFORMATION FOR CLASS OF 2025

A student will lose a **HALF LETTER GRADE** (e.g., A to A-, B to B-, etc.) if **any** of the following occur:

MIDPOINT

- Late completion of Student Midpoint Evaluation of Professionalism and Skills

FINAL

- Failure to complete a requirement, including pre-rotation requirements, as requested by preceptor/site/school in a timely fashion
- Late completion of Student Final Evaluation of Professionalism and Skills
- Late completion of Student Evaluation of Preceptor and Site form
- Late completion of Patient Characteristics and Interprofessional Engagement
- Failure to complete Hours Tracking demonstrating a MINIMUM of 160 or 240 hours

Student pharmacists are not to lobby the preceptor for a higher grade. Doing so may result in a grade reduction of a half letter grade. All grading questions should be directed to the Office of Experiential Education.

INCOMPLETE GRADE

1. When a student cannot complete the required rotation activities (e.g., student illness, family deaths) or his/her preceptor indicates the need for improvement, a grade of "Incomplete" (I) with a default grade of "Failure" (F) will be given. Documentation of the specific reasons why the student will be receiving an Incomplete must be submitted to the Office of Experiential Education (eeoffice@buffalo.edu), in writing, no later than the Monday of the last week of that APPE module. Once the information is reviewed, a written plan and timeline will be devised between the preceptor, student, and the Office of Experiential Education for making up the unfinished coursework.
2. Failure to satisfactorily complete the agreed upon plan for fulfilling the requirements of the "Incomplete" rotation" will result in a grade of Failure (F)
3. If extraordinary circumstances occur (i.e., surgeries, accidents, life-threatening illness, family deaths), the student must inform the Office of Experiential Education (eeoffice@buffalo.edu) and Dr. Nicole Albanese (npaolini@buffalo.edu) and provide appropriate medical documentation to the Office of Experiential Education and the Dean for Student Affairs.
4. Student pharmacists who are required to repeat APPE rotations (i.e., due to health issues) will be ineligible to take any Board Examination for pharmacy licensure in June, due to delayed graduation.

FAILING GRADE

1. A student who receives a final grade of "F" or "U" on an APPE rotation will fail that APPE rotation. The student will be immediately removed from the APPE program and referred to the Student Academic Affairs Committee (SAAC).
2. A student that is removed from an APPE rotation prior to the completion of that APPE rotation due to issues including, but not limited to, professionalism or skills will be immediately removed from the APPE program and referred to the Student Academic Affairs Committee (SAAC).
3. If a student receives a "U", "C-", "C" or "C+" on a rotation, that student will be placed on probation. If the student receives a second "U", "C-", "C" or "C+", the student will be removed from the APPE program.

GRADING AND PROBATION STATUS

CRITERIA FOR SUCCESSFUL COMPLETION OF APPE		
Rotation	Final Grade	Consequence
All rotations	A, A-, B+, B, B-H, S	Student passes rotation and may proceed to the next module of the program.
All rotations	C-, C or C+	<p>If this is the first C-, C or C+ the student has received after completing an APPE module, the student passes the rotation. However, the student will be placed on academic probation.</p> <p>If a second C-, C or C+ grade is received after completing any future module, the student will be removed from the Advanced Pharmacy Practice Experience Program (APPE). The student will not be able to proceed to future rotations. As such, the student's graduation will be delayed. The Student Academic Affairs Committee will decide on the appropriate remediation actions (e.g., coursework, projects etc. through interactions with APPE) that the student must fulfill. Only after successful completion of the assigned work will the student be allowed to repeat the rotations with the achievement of a grade better than a C. All repeated rotations are contingent upon availability and may occur outside the immediate WNY area.</p>
All rotations	F, U	A student who receives a final grade of "F" or "U" on an APPE rotation will fail that APPE rotation. The student will be immediately removed from the APPE program and referred to the Student Academic Affairs Committee (SAAC).

ACADEMIC INTEGRITY

Academic integrity is a fundamental university value. Through the honest completion of academic work, students sustain the integrity of the university and of themselves while facilitating the university's imperative for the transmission of knowledge and culture based upon the generation of new and innovative ideas. For more information, please refer to the [SPPS Academic Integrity and Professional Conduct Policy](#).

Plagiarism detection software may be used by individual instructors or the institution to aid in determining the originality of student work. More information about SafeAssign can be found in the EE Manual.

BASIC SCHEDULING GUIDELINES

The Office of Experiential Education in the School of Pharmacy and Pharmaceutical Sciences coordinates all students' APPE rotation assignments with prior approval by respective APPE preceptors. However, specific on-site rotation schedules are negotiated between students and their preceptors within the parameters established by the School. Specific details surrounding when to contact your preceptor can be found in the EE Manual.

EXPERIENTIAL EDUCATION MANUAL

Additional requirements related to general guidelines and conduct while completing all APPE rotations are available in the Experiential Education Manual and should be reviewed as part of the course syllabus. Specific course syllabi for each type of course/rotation should also be consulted as part of this syllabus.

CURRICULAR RESPONSIBILITIES

1. Students are expected to achieve the basic program objectives as well as those of the preceptors.
 - a. Your preceptor(s) may add objectives and/or assignments that capitalize on the learning experience available at his/her site or address specific student needs.
 - b. Although the School coordinates the basic curriculum for your rotations, your preceptor of record is the "immediate" instructor directing that specific learning experience. He/she may assign additional learning activities as deemed appropriate and assumes the primary responsibility for completing all evaluation components and submitting them to the school.
2. All students must attend APPE orientation sessions prior to their respective rotation assignments.
3. Students may need to use educational resources based on a preceptor's requirements. All students have access to the UB Library Systems (including online access) which offers a plethora of pharmacy/medical information and resources. Should you have any questions about using the library please contact our Pharmacy Liaison Librarian Molly Maloney. Email: mkm9@buffalo.edu or phone at 716-645-1336. [Pharmacy and Pharmaceutical Sciences Research Guide](#) is a link that may be helpful.

GRADING

Educational outcomes for Ambulatory Patient Care, Community Pharmacy, Inpatient Adult Patient Care, Hospital/Health Systems, Direct Patient Care Electives. (Total Points = 48)

Letter grades for Class of 2025:

Grade	A	A-	B+	B	B-	C+	C	F
Sum of points	46-48	43-45	42	40-41	39	37-38	34-36	<34

H/S/U grades for Class of 2026 and Beyond

To receive an H or S the student must achieve the required points shown below and pass the professionalism assessment question.

Grade	Sum of points
Honors (H)	43-48
Satisfactory (S)	34-42
Unsatisfactory (U)	<34

Educational outcomes for Non-Direct Patient Care Electives. (Total Points = 32)

Letter grades for Class of 2025

Grade	A	A-	B+	B	B-	C+	C	F
Sum of points	31-32	29-30	27-28	25-26	23-24	22	21	<21

H/S/U grades for Class of 2026 and Beyond

To receive an H or S the student must achieve the required points shown below and pass the professionalism assessment question.

Grade	Sum of points
Honors (H)	29-32
Satisfactory (S)	21-28
Unsatisfactory (U)	<21

COURSE APPENDIX

COURSE WORKLOAD

For time management purposes, approximately 40 hours of rotation work is equal to 1 credit hour. This is a rough estimate as some weeks may require more work based on your knowledge and skills.

ATTENDANCE AND PROFESSIONAL BEHAVIOR

Your preceptor will provide you with the attendance/virtual requirements for the rotation. Most rotations are in-person. Professionalism is expected, violations will result in failure.

You may be justifiably absent from classes due to religious observances, illness documented by a physician or other appropriate health care professional, conflicts with university sanctioned activities (i.e., Professional Conference attendance), public emergencies, and documented personal or family emergencies. You are responsible for notifying your preceptor, Mrs. Kris Jordan (kajordan@buffalo.edu) and Dr. O'Brocta (robrocta@buffalo.edu) for APPE absences. Notify your preceptor, Mrs. Sarah Frontera (sns4@buffalo.edu) and Dr. Cieri-Hutcherson (necieri@buffalo.edu) for IPPE absences. The notification should be in writing with advance notice of required absences and in a timely manner. Preferably ~1 month prior to the start of the rotation. In the event that a student is attending a professional conference, the absence shall only be considered excused during the official conference dates.

It is recognized that certain absences, especially illness, emergencies, or University sanctioned activities may not be known at the beginning of a semester. Absences for University sanctioned activities shall be certified in writing by an appropriate senior University administrator, e.g., the Vice President for Student Affairs, Dean for Student Affairs, Director of Athletics, or the Vice Provost for Academic Affairs. Absences should be communicated immediately (same day) to Mrs. Kris Jordan, Mrs. Sarah Frontera, Dr. Cieri-Hutcherson, and Dr. O'Brocta (kajordan@buffalo.edu, sns4@buffalo.edu, necieri@buffalo.edu, and robrocta@buffalo.edu).

For unforeseen excused absences (illness documented by a physician or other appropriate health care professional, documented personal or family emergencies), notification of the excused absence must be communicated immediately (same day) to your preceptor, Mrs. Kris Jordan (kajordan@buffalo.edu) and Dr. O'Brocta (robrocta@buffalo.edu) for APPE absences. Notify your preceptor, Mrs. Sarah Frontera (sns4@buffalo.edu) and Dr. Cieri-Hutcherson (necieri@buffalo.edu) for IPPE absences. Documentation detailing the excused absence (proving the absence qualifies as an excused absence) must be sent to the contacts listed in this paragraph within 3 days of absence. If documentation of the nature of the excused absence is not provided within 3 days the student may need to make up the rotation hours missed.

ACADEMIC INTEGRITY AND PROFESSIONAL CONDUCT

Academic integrity and Professional Conduct are fundamental values of the school and profession. The school's policy is here: [UB SPPS Policy on Academic Integrity and Professional Conduct](#).

ACCESSIBILITY RESOURCES

UB SPPS respects and welcomes students of all backgrounds and abilities. Within the scope of adherence to the Technical Standards, our school works with students to responsibly approach any barriers to success. In the event you encounter any barrier(s) to full participation in a course or rotation due to the impact of an ongoing or sudden disability, please contact the Accessibility Resources Office. The access coordinators in the Office of Accessibility Resources can meet with you to discuss the barriers you are experiencing and explain the eligibility process for establishing academic accommodations.

You can reach the Office of Accessibility Resources through www.buffalo.edu/studentlife/accessibility; (716) 645-2608; 60 Capen Hall (North Campus) or 1 Diefendorf Hall (South Campus).

EQUITY, DIVERSITY, AND INCLUSION

UB SPPS is dedicated to fostering a safe learning environment that embraces Equity, Diversity, and Inclusion for all students, regardless of their backgrounds. We are committed to the highest standards of decency, compassion, and mutual respect towards all, and we are committed to promoting an atmosphere free of abusive and demeaning treatment. We promote understanding and tolerance towards all students and value each student in our classroom." If SPPS faculty, staff, and students have any questions or concerns pertaining to Equity, Diversity, and Inclusion, you are encouraged to utilize these resource areas.

If SPPS faculty, staff, and students have any questions or concerns pertaining to Equity, Diversity, and Inclusion, you are encouraged to utilize the following resource areas: <https://pharmacy.buffalo.edu/about-us/diversity-and-inclusion/edi-resources-for-spps-community.html>.

COUNSELING SERVICES (MENTAL HEALTH)

As a student you may experience a range of issues that can cause barriers to learning or reduce your ability to participate in daily activities. These might include strained relationships, anxiety, high levels of stress, alcohol/drug problems, feeling down, health concerns, or unwanted sexual experiences. Counseling, Health Services, and Health Promotion are here to help with these or other concerns. You learn can more about these programs and services by contacting:

Counseling Services: 120 Richmond Quad (North Campus), phone 716-645-2720

202 Michael Hall (South Campus), phone: 716-829-5800

Health Services: Michael Hall (South Campus), phone: 716- 829-3316

Health Promotion: 114 Student Union (North Campus), phone: 716- 645-2837

SEXUAL VIOLENCE

UB is committed to providing a safe learning environment free of all forms of discrimination and sexual harassment, including sexual assault, domestic and dating violence and stalking. If you have experienced gender-based violence (e.g., intimate partner violence, attempted or completed sexual assault, harassment, coercion, stalking), UB has resources to help. This includes academic accommodations, health and counseling services, housing accommodations, helping with legal protective orders, and assistance with reporting the incident to police or other UB officials if you so choose. Please contact UB's Title IX Coordinator at 716-645-2266 for more information. For confidential assistance, you may also contact a Crisis Services Campus Advocate at 716-796-4399.

Please be aware UB faculty are mandated to report violence or harassment based on sex or gender. This means that if you tell me about a situation, I will need to report it to the Office of Equity, Diversity, and Inclusion. You will still have options about how the situation will be handled, including whether you wish to pursue a formal complaint. Please know that if you do not wish to have UB proceed with an investigation, your request will be honored unless UB's failure to act does not mitigate the risk of harm to you or other members of the university community. You also have the option of speaking with trained counselors who can maintain complete confidentiality. UB's Options for Confidentially Disclosing Sexual Violence provides a full explanation of the resources available, as well as contact information. You may call UB's Office of Equity, Diversity, and Inclusion at 716-645-2266 for more information, and you have the option of calling that office anonymously if you would prefer not to disclose your identity.

COURSE PIRACY

All materials prepared and/or assigned by me for this course are for the students' educational benefit. Other than for permitted collaborative work, students may not photograph, record, reproduce, transmit, distribute, upload, sell or exchange course materials, without my prior written permission. "Course materials" include, but are not limited to, all instructor-prepared and assigned materials, such as lectures; lecture notes; discussion prompts; study aids; tests and assignments; and presentation materials such as PowerPoint slides, Prezi slides, or transparencies; and course packets or handouts. Public distribution of such materials may also constitute copyright infringement in violation of federal or state law. Violation of this policy may additionally subject a student to a finding of "academic dishonesty" under the Academic Integrity Policy and/or disciplinary charges under the Student Code of Conduct.

SYLLABUS CHANGE POLICY

The course schedule may be changed as needed. The course requirements, assignments, assessments, and grading policy may be changed with advance notice, and with consideration of fairness to all students.

USE OF GENERATIVE AI (e.g., ChatGPT)

Please ask your preceptor if you are permitted to use AI for assignments.

2024-2025 APPE ROTATION SCHEDULE

Summer 2024

Module 1 (6 weeks):	May 20 – June 28, 2024	
Module 1 (4 weeks):	June 3 – June 28, 2024	
Module 1a (3 weeks):	May 20 – June 7, 2024	VA WNY Rotations ONLY
Module 1b (3 weeks):	June 10 – June 28, 2024	VA WNY Rotations ONLY
Module 2 (6 weeks):	July 1 – August 9, 2024	
Module 2 (4 weeks):	July 15 – August 9, 2024	
Module 2a (3 weeks):	July 1 – July 19, 2024	VA WNY Rotations ONLY
Module 2b (3 weeks):	July 22– August 9, 2024	VA WNY Rotations ONLY
Module 3 (6 weeks):	August 12 – September 20, 2024	
Module 3 (4 weeks):	August 26 – September 20, 2024	
Module 3a (3 weeks):	August 12 – August 30, 2024	VA WNY Rotations ONLY
Module 3b (3 weeks):	September 2 – September 20, 2024	VA WNY Rotations ONLY
Module 4 (6 weeks):	September 23 – November 1, 2024	
Module 4 (4 weeks):	October 7 – November 1, 2024	
Module 4a (3 weeks):	September 23 – October 11, 2024	VA WNY Rotations ONLY
Module 4b (3 weeks):	October 14 – November 1, 2024	VA WNY Rotations ONLY
Module 5 (6 weeks):	November 4 – December 13, 2024	
Module 5 (4 weeks):	November 18 – December 13, 2024	
Module 5a (3 weeks):	November 4 – November 22, 2024	VA WNY Rotations ONLY
Module 5b (3 weeks):	November 25– December 13, 2024	VA WNY Rotations ONLY
Module 6 (6 weeks):	January 6 – February 14, 2025	
Module 6 (4 weeks):	January 20 – February 14, 2025	
Module 6a (3 weeks):	January 6 – January 24, 2025	VA WNY Rotations ONLY
Module 6b (3 weeks):	January 27– February 14, 2025	VA WNY Rotations ONLY
Module 7 (6 weeks):	February 17 – March 28, 2025	
Module 7 (4 weeks):	March 3 – March 28, 2025	
Module 7a (3 weeks):	February 17 – March 7, 2025	VA WNY Rotations ONLY
Module 7b (3 weeks):	March 10 – March 28, 2025	VA WNY Rotations ONLY
Module 8 (6 weeks):	March 31 – May 9, 2025	
Module 8 (4 weeks):	April 14 – May 9, 2025	
Module 8a (3 weeks):	March 31 – April 18, 2025	VA WNY Rotations ONLY
Module 8b (3 weeks):	April 21 – May 9, 2025	VA WNY Rotations ONLY

Student Pharmacists must inform their preceptor of specified religious national holidays they will acknowledge.

University Schedule Changes

The University may change the recognized holiday schedule. Preceptors and student pharmacists should call the Office of Experiential Education, 645-4799 if questions regarding University holidays arise. If the University declares a closing (such as poor weather, etc.) student pharmacists may not be required to go to local, in-region sites and may have to make up missed time as per the preceptor's discretion.