



# Drake University College of Pharmacy Experiential Education Office Newsletter

## Director's Notes

By Denise Soltis

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As I prepare to write an update from the Experiential Office, I looked over my last Director's Notes. I spoke of proposed changes in the Accreditation Council for Pharmacy Education Guidelines. In January of 2006, we received the approved guidelines. As expected, there were many changes with respect to Experiential Education. The early experiential program will require the largest change for our college to comply with new guidelines. Every school needs to provide close to 300 hours in the first 3 professional years of the program. Currently we provide less than 100 hours. Anticipating this change, I asked for and had approved a new position, Early Experiential Coordinator. Lauren Pedersen, PharmD, MBA, was hired as the Early Experiential Coordinator. Another new faculty member, Heidi Price RPh, MPA, was hired to work in the distribution practicum, and will be assisting in the early experiential program.

In May of 2006, a team from Drake attended the AACP Institute on Experiential Education to learn more about the changes and how they would affect Drake. Our main goal for the Institute

was to work on a new plan for the Early Experiential Program. The team came up with an initial outline which Lauren and I have been modifying and refining. We've been meeting with some of the stakeholders (site and preceptors) to see if sites are able to work with our students. This early experience will run concurrent with classes so we have to work around the student's schedules.

ACPE guidelines are asking for quality assurance in experiential Education. Drake uses our online evaluation system to track student evaluations of sites and preceptors. The District V group of experiential directors: Iowa, Minnesota, Nebraska, North Dakota and South Dakota, have been working together to come up with a comprehensive quality assurance program, in addition to coordinating schedules. The program will include improved evaluation forms, preceptor self-assessment, and every other year site visits.

Bottom line, what does this mean for our sites? We'll be asking sites and preceptors to consider working with



students earlier in the program. We'll be asking preceptors to do yearly self-assessments, and we will be dropping in occasionally to see how things are going. We will also be offering more development resources for our current preceptors to aid in teaching and practice development. **New** preceptors will be required to do mandatory training.

In December 2005, we welcomed Trudi Holst to our staff; formerly assistant director of Drake's study abroad program. In June, we said good-bye to long time employee Deb Hart whom returned to school full time. We are currently searching for an upper level position to help coordinate preceptor development. ■

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## Preceptor and Rotation Spotlight

### Dr. Geoff Wall, Iowa Methodist

By: Ana-Lee Lynch, (P4) PharmD Candidate



Dr. Geoff Wall, Assistant Professor of Pharmacy

Dr. Geoff Wall is one of the most respected associate pharmacy professors at Drake University. It is apparent that his students value him because he received the 2005 faculty preceptor of the year award, as well as, previous awards in years past including mentor of the year and faculty preceptor of the year.

Besides teaching many therapeutic and clinical pharmacokinetic lectures to third year pharmacy students, he spends most of his time educating and providing fourth

year pharmacy students the opportunity to take what they have learned in the classroom and apply it to real life situations. One student says "One of the most intelligent people I know; he never ceases to amaze his students with his extensive knowledge of pharmacy and medicine." One of the rotations Dr. Wall offers is an Internal Medicine rotation at Iowa Methodist Hospital. From day one, the students are active members

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*"One of the most intelligent people I know, he never ceases to amaze his students with his extensive knowledge of pharmacy and medicine."*

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of the internal medicine team, which consists of attending physicians, medical and pharmacy residents, medical students, Dr. Wall, and pharmacy students. The rotation involves working on the teaching service, which encompasses a select number of cases where the focus is clinical education and treating the patient. The teaching service provides excellent learning opportunities for residents and

students, with the service receiving some of the more challenging and interesting admissions.

The two internal medicine rotation students divide the patients on the service between themselves, each gathering the history of their patients, medication histories and other pertinent information such as lab values. Every morning the students update the patient charts with any changes made over night, document histories, and review the charts of any new patients admitted to the service. Next, the team meets before rounds to discuss each patient: Dr. Wall or the pharmacy resident talk with students about any problems

found and what changes or monitoring students would recommend. During rounds, the pharmacy team discusses each patient with the physician, makes recommendations for changes to patients' drug therapy, and answers any medication questions that may arise. Allowing the students to make the recommendations to the physicians during rounds gives students the opportunity to develop confidence and improve their ability to communicate with other health professionals. Students have several opportunities for patient counseling, during or after rounds.

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*"[Dr. Wall] takes the time to make sure his students have the knowledge they will need as future pharmacists."*

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Rounds occupy most of the morning. The afternoons are filled with lectures, discussions, and presentations. Dr. Wall gives a mini lecture almost every afternoon. These sessions are more than just a lecture. Students are involved, constantly being called on for answers and input. During the rotation, students are asked to do three projects. These include one journal club session, one general topic discussion, and one formal PowerPoint presentation on a disease state or drug. In addition to these projects, another benefit of the teaching service is continued education in the form of short lectures and presentations by various members of the internal medicine team.

By getting actively involved in Dr. Wall's rotation students feel they can solidify what was learned in the classroom as well as improve confidence in their pharmacy knowledge. One student says "He (Dr. Wall) takes the time to make sure his students have the knowledge they will need as future pharmacists. His interest in students does not stop there; he makes the whole experience fun. He wants us to enjoy what we do and make the most of our pharmacy careers." The rotation is the perfect combination of autonomy and guidance from Dr. Wall. His rotation gives students independence and responsibility but also enough direction to ensure they are getting a valuable experience. ■

## Pharmacy Facts & News

### Legislative Day:

**Who:** Drake Pharmacy Students P1s to P4s, Preceptors, and Pharmacists

**Where:** Embassy Suites Hotel downtown Des Moines, IA

**When:** Tuesday, February 13, 2007

**Why:** This is an all day event where pharmacy professors, staff, students, and the public are able to experience the importance of pharmacy in relation to politics and how we as a profession can make a difference. Attendees will have the chance to meet and visit with their legislators on issues relating to the profession of pharmacy during Legislative Day. Governor-Elect Chet Culver has been invited as the keynote speaker. In addition, participants will be able to witness a unique experience with a change in leadership at the state capital, making this a day you won't want to miss! Drake University encourages our students to attend this event and ask preceptors to please consider allowing your rotation students the option to attend. To learn more about the event log onto the IPA website at [www.iarx.org](http://www.iarx.org).

### New Faculty Members:

- ◆ Michelle Bottenberg, Assistant Professor of Pharmacy Practice, Internal Medicine
- ◆ Mathew Cantrell, Assistant Professor of Pharmacy, Well-Elderly
- ◆ Sheryl Gutierrez, Assistant Professor of Pharmacy, Ambulatory Care
- ◆ Karly Hegge, Assistant Professor of Pharmacy, Ambulatory Care
- ◆ Lauren Pedersen, Assistant Professor of Pharmacy, Introductory Pharmacy Practice Experiences
- ◆ Heidi Price, Instructor of Pharmacy Practice

### Delta Rx:

Delta Rx stands for 'Drake Entrepreneurial Leadership Tools for Advancement'. In addition to defining and further developing the concepts of entrepreneurial leadership, the DELTA Rx Institute facilitates the integration of these concepts into practice and pharmacists' professional lives by providing and increasing access to tools that have been developed to advance practice. For more information on this new program offered at Drake, log onto [www.deltarx.com](http://www.deltarx.com).

The percentage of students pursuing post-graduation training/education has continued to remain high since the first all-PharmD class graduated in 2002:

2002— 21%  
 2003— 24%  
 2004— 26%  
 2005— 22%  
 2006— 14%

#### Drake College of Pharmacy Post-Graduation Position Information

As has been the case for the past several years, the PharmD Class of 2006 (105) will be entering a variety of positions within the pharmacy profession:

Ambulatory Care— 2%  
 Community- Chain— 55%  
 Community— Independent— 8%  
 Hospital— Clinical— 6%  
 Hospital— Staff— 7%  
 Long Term Care— 2%  
 Other— compounding, home health care, etc— 1%  
 Ph.D./Masters Program/Law School— 2%  
 Residencies— 12%  
 Undecided/Unknown— 6%

## Rotation Spotlight: Belvedere Park Pharmacy, Australia

By: James Semrad, PharmD, Class of 2006



**Belvedere Park Pharmacy, Australia**

A previous student doing a rotation spotlight wrote, "Rotations are an opportunity for students to branch out and experience many different aspects the world of pharmacy has to offer." With rotation options currently available in the countries of Australia, New Zealand, Canada, France, and South Africa, there are definitely a lot of diverse and multicultural options for a pharmacy student at Drake to experience.

*"...by the end of the rotation being able to look at different healthcare systems and being able to analyze and compare what works in one vs. another."*  
- Mark Feldschuh

Belvedere Park Pharmacy in Australia is a retail pharmacy in Seaford, Australia which is about an hour outside of Melbourne. The pharmacy is an independently owned store by Mark Feldschuh who also happens to be one of the top members of the Australian Board of Pharmacy. The pharmacy won the title of "Pharmacy of the Year" for the state of Victoria in 2002 and is unique when it comes to others in Australia. In addition to the typical dispensing of prescriptions, Belvedere Park also offers the following non-pharmaceutical services: Podiatry, Naturopath, Nursing Clinic/Wound Care, Aromatherapy, Skin Care Analysis, Massage Therapist, Specialized Fragrance Houses, Kodak Express/

Minilab, Beauty Salon/Hairdressing, Ear Piercing, and even Makeovers!

In addition to these non-pharmaceutical services, this pharmacy also offers many professional pharmacy services including: Diabetes Management; Blood Pressure Monitoring; Bubblepacking (for those with difficulty managing their medications); and Compounding: including hormone replacement therapy, pain management, and veterinary products; Home Medication Reviews; and Free Delivery Service. Of all these services listed, perhaps the most intriguing is the Home Medication Review. A Home Medication Review is where a pharmacist, who has undergone additional training and is licensed to do so, goes to the house of a patient and conducts an interview with the patient. These patients are either referred by their physician to the pharmacy, or a pharmacist may write a formal request to the physician asking them for the approval to conduct an interview. Upon completion of the interview, a case similar to what a student at Drake might see in Therapeutics Discussion is completed. The formal write-up includes the patient's disease states and medications (both prescription and OTC) as well as any drug interactions, untreated conditions, or therapy ad-

justments that the pharmacist feels should be considered. The students also have the opportunity to interact with Australian students. Australian students go through 5 years of school with the 5<sup>th</sup> year basically being a year-long paid job in one location.



**Additional Services the pharmacy provides**

Mark Feldschuh, adds, "the important part of this rotation is not learning about pharmacy specifics and the drugs used in Australia, but rather by the end of the rotation being able to look at different healthcare systems and being able

to analyze and compare what works in one vs. another." He called this, "a life long lesson where we can demonstrate to potential employers that we are able to analyze information rather than just memorize and repeat something."

Being able to experience things first hand from two points of view is definitely the most educational part of the rotation and something that students who do this rotation will be able to fall back on as they embark on their own professional careers. ■



**Additional perks to an Australian rotation**

treated conditions, or therapy ad-

## Are you a Great Preceptor?

Students do not learn to be professionals from their textbooks, but rather from observing professionals in an experiential practice and functioning as health care providers.<sup>1</sup> Below are tips on how preceptors can help students get the most out of their rotational year.

<sup>1</sup> Cuellar L, Ginsberg D. Preceptor's Handbook for Pharmacists. Maryland: American Society of Health-System Pharmacists; 2005.

### Communication skills:

Using effective communication skills is the key component to success in the pharmacy field.

**1.** Preceptors can improve communication with students by asking open-ended question

*Example:*

**Preceptor:** Did patient X have a reaction to any of his new medications?

**Student:** Yes

**\*\* This would be the wrong way to ask, instead say...**

**Preceptor:** What reactions did patient X have to his amoxicillin?

**Student:** The patient complained of rash, shortness of breath, and hives on his chest.

**\*\* This would be the correct way to ask the same question with a more thorough response from the student. In this scenario, the student is clear on what medication the preceptor is inquiring about, and may then begin a further investigate on what else can be causing the reaction.**

**2.** Facial expressions, gestures, body language, posture, eye contact, tone of voice and inflection are aspects of communication that can be interpreted many ways. Slouching in a chair, wandering eyes, monotone or sarcastic tone of voice gives the student the impression you are not interested in teaching them. Take the time to teach instead of preach, pleasant tones with a relaxed body structure gives a very different message to the student than a stressed and rapid response.

**3.** Provide informal and formal feedback:

**Informal:** Catch the student in the cafeteria or make plans to meet outside of the working environment and chat about life goals, residency expectations/training, balancing family and career, applying for a job, and interview skills.

**Formal:** Formal feedback should be done on a weekly basis. Let the student know what they are doing well on and what needs improvement on, and allow the student to respond. Feedback is necessary to allow the student to make positive changes to their skills and to improve themselves as future pharmacists.

### Setting Goals:

1. *Set a deadline* for daily activities as well as projects. This gives the student an idea how he/she needs to manage his/her time each day and for the entire rotation.
2. *Set personal goals* for yourself of the rotation student. Ask yourself questions like; What do I want this student to know leaving this rotation? How can I encourage the student to do the best he/she can? Jot down your ideas on a piece of paper and occasionally look at them to remind you to incorporate them into your daily work with the student.
3. *Allow the student work time outside of the patient care setting*
4. Always *challenge the student*. Provide real life examples and situations that you deal with on a regular basis and give the student the opportunity to come up with what they would do in a similar situation.
5. "Confidence comes from not always being right but from not fearing to be wrong." (Peter T. McIntyre- pg.21)

Gaining confidence should be a primary goal of the student during his/her rotation. You, as a preceptor, can help by giving the students repetitive opportunities to express their knowledge by presentations, journal clubs, talking in front of physicians and other respected individuals, or counseling on OTC's and prescription drugs. In this way, the student is reassured in their knowledge, skills and capability of performing the tasks of a pharmacist.

### Teaching and Learning:

1. Make sure the student has enough to keep them busy throughout the day; but be careful, busy work does not equal learning. Students are anxious to learn, guide them in the daily activities of your workday.
2. *Constructive criticism* is beneficial for growth in any area, especially pharmacy. Therefore, failure to give feedback to the students can impede their growth and learning process.
3. *Interpersonal skills* are a key to success: friendliness, optimism, trust, and integrity.
4. It is important to lead the student in the right direction. Students are coming from five years of learning facts and concepts in a didactic setting: they are used to memorizing and regurgitating what was said in the classroom. One of the key roles of a preceptor is to *help the students make a transition from the classroom and apply* their knowledge to real patients. If you, as a preceptor, can successfully accomplish this, then give yourself a pat on the back because you are a *GREAT* preceptor. ■



*Drake University and the University of Iowa will be collaborating with the Iowa Pharmacy Association to offer programming for preceptors at the Educational Expo. There will be two sessions available for preceptors: they are on Friday, January 26th from 1:30-5:00pm entitled 'Preceptor Development: Preparing Future Practitioners' and from 3:30- 5:00 pm- 'How Do the New PharmD Standards Affect Me as a Preceptor?' Go to [www.iarx.org](http://www.iarx.org) for information on how to register for this event. This is a great way to connect with other preceptors across the state and get some CE at the same time!*

**We're on the web!  
[pems.drake.edu](http://pems.drake.edu)**



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