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**I’m Finally a Preceptor! Now what?**

Matthew Borden, PharmD, BCCCP  
Clinical Pharmacy Specialist  
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**Questions to answer**

- What are the four roles of a preceptor?
- How can newly appointed preceptors apply these roles in clinical teaching situations?

**The Four Roles of a Preceptor**

- Instructor
- Model
- Coach
- Facilitator

**Scenario**

- It’s the first week with your new APPE student and while on rounds in the SICU the team approaches you about plans to change a valproic acid dose based on recently low levels.
- You remember valproic acid is highly protein bound and this patient has low albumin.

“The object of teaching a child is to enable him to get along without a teacher.”  
Elbert Hubbard
Instructor

- Traditional instruction
  - Present information to learner
  - Passive learning
- Socratic method
  - Question based
  - Emphasizes critical thinking
  - Active learning

Instruction

- Student
  - "We have a low level I don’t understand why we don’t increase the dose of valproic acid?"
- Traditional instruction
  - "Well valproic acid is highly protein bound and only the unbound drug is active."
- Socratic method
  - "Does this patient have any abnormal lab values that could alter valproic acid availability?"

Modeling

- Learning to apply information
  - Walking to the lab
  - Examining chart data
  - Demonstrating a primary literature search
- Professional assimilation
  - Observed interactions
  - Communication
  - Teamwork

Coaching

- Student has more control
  - Kinetic dosing
  - Monitoring plans
- Review work and correct mistakes
- Question decision making
  - "What led you to choose this particular dose?"

Facilitation

- Independence and responsibility
- Potential examples
  - Medication reconciliation
  - IV/PO conversions
  - Vancomycin dosing service
- Reflection
  - "What do you feel is the most challenging aspect of the medication reconciliation process?"

True or False

The Socratic Method involves using questions to assess a student’s level of understanding.
- True
- False
True or False

When students deliver a correct response it should be assumed they fully understand the process.

True
False

Key Takeaways

- Preparation is important
  - Have planned activities that incorporate the four roles of a preceptor (i.e. kinetic dosing service, medication reconciliation, etc...)
- Look for teachable moments
  - Approach difficult clinical situations as learning opportunities.
  - “I don’t know but we’ll learn together.”
- Each student is different
  - Not all students will get to the facilitation step.

Students as pharmacist extenders: the student-obtained admission medication history

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Learning Objective

- Incorporate student-obtained admission medication histories into pharmacy practice

The Joint Commission says...

- NPSG.03.06.01: Maintain and communicate accurate patient medication information
  - Rationale: medication discrepancies affect patient outcomes

Medication Reconciliation

(True or False) Pharmacists are recognized as key leaders in establishing and maintaining effective medication reconciliation processes.

True
False
(True or False) Pharmacists are recognized as key leaders in establishing and maintaining effective medication reconciliation processes.

- True

Who should perform admission medication reconciliation?

- ASHP’s position
- Pharmacists are uniquely qualified to lead interdisciplinary efforts to establish and maintain an effective medication reconciliation process in hospitals and across health systems
- AHRQ’s Making Healthcare Safer II
- Reported that pharmacist-led processes could prevent medication discrepancies and potential ADEs after discharge

Elements of performance for NPSG 03.06.01

1. Obtain information on the medications the patient is currently taking when he or she is admitted to the hospital.
2. Compare the medication information the patient brought to the hospital with the medications ordered for the patient.
3. Provide the patient with written information on the medications he or she should be taking upon hospital discharge.

Which step do you think is the most time consuming?

Guiding students to obtain comprehensive medication histories

- Key elements of thorough medication histories:
  - Patient interview
    - Allergy assessment
  - Medication interview (Rx, OTC, supplements, etc)
  - Pharmacy/pharmacies used

(True or False) A best practice is to utilize two sources of information to confirm a patient’s medication list

- True
- False

(True or False) A best practice is to utilize two sources of information to confirm a patient’s medication list

- True
Guiding students to obtain comprehensive medication histories

- Key elements of thorough medication histories:
  - Initial patient interview
  - Allergy assessment
  - Medication interview (Rx, OTC, supplements, etc)
  - Pharmacy/pharmacies used
  - Confirmation with pharmacy
  - Address any discrepancies with the patient
  - How can we ensure students are thorough and consistent in their efforts?

Key Takeaways

- Pharmacists play a major role in successful medication reconciliation
- Pharmacy students are able to assist with obtaining complete and accurate medication histories
- A standardized medication history worksheet can help facilitate consistent high-quality medication histories from student-to-student and across the institution
References
- The Joint Commission National Patient Safety Goals 2016

“I didn’t say that!” – a brief look at non-verbal communication
Thais Gift, PharmD, BCPS
Dana Farber Cancer Institute

Objective
- To convey the importance of non-verbal communication and its impact on engaging the learner

On a beautiful Boston winter day
- The resident is doing an excellent job with their topic discussion
- I’m impressed, so I tilt my head
- Resident: “Oh no, I’m sorry! It’s wrong, I’ll try harder!”
- Me: “...??????”

How I thought I looked...

How I probably looked...
Non-Verbal Communication

“We communicate as many messages nonverbally as we do verbally.”

- Body language can be crucial in conveying the tone of the message
- “Facial expressions convey a wealth of information.”

Body language can be crucial in conveying the tone of the message.

“Facial expressions convey a wealth of information.”

Lunenberg, F. “Louder Than Words: The Hidden Power of Nonverbal Communication in the Workplace”

Self Assessment

True

False

Non-verbal communication has little to no impact on the message to be conveyed between a preceptor and a resident.

Key Takeaways

- Think of your non-verbal cues
  - Take a moment to make sure your body is conveying the same message as the spoken word.
  - Pay attention non-verbal cues from others
  - Their body language can hint to how they are feeling.
- Don’t forget all other factors that may play a role in non-verbal cues
  - Learning more about your resident/student’s background can aid in your teaching technique and improve their learning experience.

References


Millennials Precepting Millennials: Friend or Foe?

Ilona Grigoryan, PharmD
Kaitlin O’Rourke, PharmD, BCPS
Beth Israel Deaconess Medical Center Boston, MA
Objective

- Describe the advantages and disadvantages of precepting the Millennial generation

What is a Millennial?

<table>
<thead>
<tr>
<th>Generation</th>
<th>Years</th>
</tr>
</thead>
<tbody>
<tr>
<td>Traditionalists</td>
<td>Born before 1946</td>
</tr>
<tr>
<td>Baby Boomers</td>
<td>1946-1964</td>
</tr>
<tr>
<td>Generation X</td>
<td>1965-1979</td>
</tr>
<tr>
<td>Millennials</td>
<td>1980-2002</td>
</tr>
<tr>
<td>?</td>
<td>2003-present</td>
</tr>
</tbody>
</table>

What is a Millennial?

Millennial Characteristics – The Good

- Multitaskers
- Collaborate and cooperate
- Tech savvy
- Strive for the experience
- Value driven
- Confident
- Optimistic
- Highly educated

Millennial Characteristics – The Bad

- Self-absorbed
- Impatient
- Easily intimidated
- Unprepared for environments that do not provide a lot of positive reinforcement
- Expect to be entertained (e.g., active learning)

Why are they important?

- Approximately 80 million young adults considered millennials
- By 2020, will comprise about 46% of the workforce
- By 2025, will comprise about 75% of the workforce
- They want higher pay, flexible hours, promotion within the 1st year
Millennials in the Media

I suppose I could be President...but is politics really the truest calling of my heart? No...no that would be settling.

How does this affect us?

- Millennials are our:
  - Colleagues
  - Students
  - Post graduate residents
- Precepting Millennial generation
  - Advantages and disadvantages

Friend or Foe?

Advantages
- Relatable
- Not as intimidating
- Similar mentality
- Common interests
- Mutual friends

Disadvantages
- Overly confident
- Entitled
- Bold
- Do not see preceptor as authority figure
- Expect constant feedback
- Unrealistic expectations

Precepting Strategies

- Provide clear expectations
- Establish student/resident-specific goals including time frame
- Provide continuous individual feedback
- Take advantage of technology
- Utilize active learning experiences
- Engage students/residents
- Reflect
- Have fun

Maximizing Millennials

- Provide continuous learning opportunities
- E-learning opportunities
- Use teamwork approach
- Offer alumni networks
Scenario

GA is an enthusiastic PGY1 resident on the rotation you are precepting. You both graduated from the same pharmacy school within the last 5 years. You are finding that he is not meeting the appropriate deadlines for his assignments, and today he sent you a casual text message to let you know he is running late for his presentation again.

What is the best approach?

Do nothing, and comment in PharmAcademic
Text him a message back and reschedule the presentation
Send him written feedback
Provide him immediate feedback on expectations for the rotation

Key Takeaways

 Millennials are becoming the majority of our workforce, understanding their characteristics is beneficial to our practice
Utilizing their strengths:
- knowledge of technology, ability to collaborate, value driven

Anxiety is the New Black

Dealing with Perfectionism Anxiety

Kirthana R. Beaulac, PharmD BCPS
Tufts Medical Center
MSHP 2016 Preceptor Pearls

It Starts with One
- P1 students at St. Louis COP had higher PSS10 scores than:
  - The general population in the same age bracket
  - Undergraduates
  - Other first-year health profession students (medical, dental, nursing, mental-health)
- Coursework is consistently the top stressor among pharmacy students
  - Outside-class assignments, finances, and relationships/family

Moving on Up
- When compared to other pharmacy students, 4th year students have the lowest reported stress
  - Learned to cope
  - Adjusted to curriculum / stressful lifestyle
  - Different stressors

The M Word
![Graph showing number of applicants and number who matched from 2011 to 2015]

Evidence-Based Strategies
- Surveys show that pharmacy students with high stress levels rarely use college services or find them useful
- Spending time with family and friends are the most common de-stressors
- Consider relaxation techniques
  - Deep breathing
  - Coping techniques
  - Cognitive restructuring
  - Time management strategies
- Dearth of literature specific to experiential education

My Strategies - Empower the Learner to Learn
- Set the expectation on day 1 that learning is a key objective
  - Discuss learning styles to set the tone
- Use Socratic Methods to give small wins and work upwards from there
- Use Phrases like
  - “I’m glad to see you are able to build on your classroom knowledge”
  - “You wouldn’t be in school if you already knew everything”

My Strategies - Model Humility
- Engage the student in a conversation about lifelong learning
- Discuss cases or scenarios that include a gray-area
  - Take the student’s input into strong consideration or perhaps allow them to make the decision
- Explain when you make a mistake or overlook an important detail
- Learn from your student (and tell them that they taught you something)
My Strategies:
Coach through Research Methodology
- Ask the student to explain how they got to a particular decision or answer
  - Especially useful for anxiety paralysis
- Demonstrate drug lit skills that you routinely employ
- Ties back into humility- recognizing that practicing clinicians need to look things up as well

Reflection Question
Which of the following is NOT viewed as an effective strategy for dealing with perfectionism anxiety in APPE students?
- Walking through the resources you used to come to a conclusion
- Referral to the COP mental health services
- Self-evaluation of attitude towards learning
- Encouraging lifelong learning

Key Takeaways
- Key Takeaway #1
  - With evolving culture engendering cut-throat competition, students may develop anxiety with their inability to demonstrate perfection
- Key Takeaway #2
  - There isn’t a cookbook method to approaching perfectionism anxiety, but empowering students to feel comfortable as learners and modeling as a learner yourself can ease the situation

Directed Study: A Direct Way to Indirectly Precept Students
Monica V. Mahoney, PharmD, BCPS (AQ-ID)
Beth Israel Deaconess Medical Center

Objective
- Describe an alternative method of serving as a preceptor and mentor, without taking students on rounds
What is a directed study?
• A college “course” a student enrolls in, to satisfy elective requirements
• Geared towards performing research
• Studies under a university faculty member
  • Adjunct faculty
• Range: 1-3 credits
• Structure: determined by preceptor or preceptor/student

Advertisement
• Email/posting sent out to 5th year students describing project:
  This project, in collaboration with ID pharmacists and ID physicians at BIDMC would investigate the clinical use and outcomes of cidofovir treatment. Cidofovir is an antiviral medication with a spectrum of activity including cytomegalovirus (CMV), adenovirus, and BK virus. This study would review all inpatients who have received cidofovir from January 2008 to December 2015 (approximately 80 patients). Data collection will include dose and route of administration, disease/virus indication, duration of therapy, adverse events experienced, and clinical outcomes. This study will be submitted for IRB approval and it is expected that the results be presented at a national meeting and/or published. The student will be responsible for the data collection and some basic analysis. Data collection should be completed within two months’ time, so that the results can be analyzed and presented at the antibiotic subcommittee.

Consideration Requirement
• Email me directly with:
  • CV or resume
  • Brief narrative describing:
    • Goals post-graduation
    • Any experience with research
    • Interest in the project

Student Clearance
• Same as a student on rotation:
  • Health clearance
  • Background check
  • Computer access
  • HIPAA and other training
  • CITI training
  • IRB approval

Project Requirements
• Pull background articles
• Create data collection sheet
• Draft IRB proposal
• Collect data
• Import data to excel
• Perform basic statistics
• Draw conclusions
• Create powerpoint presentation
• Deliver presentation to PharmD/MDs
Optional Activities
• Submit poster to national/local meeting
• Prepare manuscript for publication
• Shadow clinical rounds for a day
• Co-peer-review a manuscript for publication
• CV preparation/review

Mutually Beneficial Relationship
• Student:
  • Gains research experience
  • Performs many duties a resident does
  • Acquires a mentor
• Preceptor:
  • Can precept a student for a longer period of time
    • Less day to day requirements
  • Completes a QA/QI project
  • Fosters a mentee

True or False?
A directed study is a time intensive alternative to the traditional pharmacy student rotation.

False.
It allows for more flexibility and less day to day interaction and oversight than a traditional rotation.

Key Takeaways
• Key Takeaway #1
  • Offering a directed study allows you to precept without much of the day-to-day oversight required
• Key Takeaway #2
  • Student(s) can help complete QA/QI projects on your to-do list
• Key Takeaway #3
  • Student(s) gain valuable experiences not obtained through standard rotations

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