

**Advanced Community Rotation
Advanced Pharmacy Practice Experience
PHAR 7681**

The content in this syllabus must be supplemented with the Ben and Maytee Fisch College of Pharmacy "Experiential Education Manual". The syllabus is unique to each experiential rotation.

Course Description

Professional experiential rotation designed to provide experience in the delivery of pharmaceutical care in a community pharmacy setting.

Additional Course Information

This course is an advanced pharmacy practice experience where students, under the direct supervision of a pharmacist, will build on knowledge and skills acquired through didactic education and introductory pharmacy practice experiences and apply them in direct patient care activities in the community pharmacy setting. Students will participate in patient care services and patient-focused dispensing functions.

Course Credit

6 credit hours

Pre-Requisites

Students must have successfully completed all Introductory Pharmacy Practice Experiences and be a current P4 pharmacy student prior to beginning their Patient Care Elective Pharmacy Practice Experience.

Class Meeting Days, Time & Location

This rotation requires students to complete at least 40 hours per week with a maximum of 50 hours per week. The student's schedule will be determined by their preceptor. Most experiences will occur during the normal business hours from 8:00 a.m. – 5:00 p.m. However, some sites may require that the student work additional hours per week and/or work hours on evenings, nights or the weekend in order to experience various work "shifts" and new opportunities.

Course Coordinator

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Fisch College of Pharmacy (FCOP) and UT Tyler Policies

This is part 1 of the syllabus. Part 2 contains UT Tyler and the FCOP course policies and procedures. These are available as a PDF at <https://www.uttyler.edu/pharmacy/academic-affairs/files/fcop-syllabus-policies.pdf>. For experiential courses (i.e., IPPE and/or APPE), the Experiential Education Manual (<https://www.uttyler.edu/pharmacy/academic-affairs/files/experiential-education-manual.pdf>) contains additional policies and instructions that supplement the Syllabus Part 1 and 2. Please note, the experiential manual may contain policies with different deadlines and/or instructions. The manual should be followed in these cases.

Required Materials

1. Ben and Maytee Fisch College of Pharmacy Experiential Programs Manual
2. Most course required materials are available through the Robert R. Muntz Library. Required materials will be outlined by the individual preceptor for each elective rotation.
 - a. Lexi-Comp
 - b. Therapeutics textbooks

Course Format

The course may include, but are not limited to, the following activities:

- Patient care activities
- Projects
- Journal clubs
- Drug information responses
- Oral presentations
- In-services
- Topic discussions
- Patient interviews
- Documentation of clinical services/interventions
- SOAP notes
- Patient case presentations

Course Learning Outcomes (CLOs)

CLOs	PLO(s) Assessed for this CLO (1-15)	EPAs (1.1-6.1)	Assessm ent Methods	Gradi ng Meth od	PPCP Skill(s) Assess ed (1-5)	ACP E Std. 11 & 12 (1-4)
1. Develop, integrate and apply foundational knowledge to patient care.	1,2	1.2, 1.3, 1.4, 1.5, 3.1, 3.2, 3.3, 3.4, 5.1, 5.2	13	RUB	1-5	NA
2. Use the pharmacist patient care process to provide optimal pharmaceutical care.	2,5,6	1.1, 1.2, 1.3, 1.4, 1.5, 3.1, 3.2, 3.3, 3.4	13	RUB	1-5	NA
3. Utilize information technology and evaluate literature to optimize drug therapy.	1,2	1.2, 4.2	7, 13	RUB	NA	NA
4. Actively participate as a member of the healthcare team.	4,9,11,13	1.4, 2.1, 4.1, 5.1	7, 13	RUB	NA	11.1, 11.2, 11.3
5. Demonstrate effective communication skills, both verbal and non-verbal	7,11	1.4, 2.1, 4.1	7, 13	RUB	NA	11.1
6. Exhibit behaviors and values that are consistent with trust given to the profession.	3,8,12,13,15	6.1	13	RUB	NA	11.1

Course Assessment Methods

	Assessment Method	Description
7	Assignments	<i>There are required and optional assignments for the rotation. The preceptor may assign any project that corresponds with the learning outcomes of the rotation.</i>
13	Internship/Observation (Competency and Professionalism Evaluations)	<i>Students will be evaluated by preceptor at midpoint and final of each rotation. Preceptor will evaluate competencies demonstrated by the student and provide a final evaluation.</i>

Grading Policy & Grade Calculation

- Course grades: Grades will be determined based on the preceptor evaluation of competencies related to knowledge, practice and skills (Table 1) and graded assignments.
- Students will receive a letter grade.
- ****Students who receive a D or F for a rotation will be required to repeat the rotation.**
- *If any required assignment or competency, in any domain, is graded as “Significant Deficits Exist” on the final evaluations, this will result in failure of the rotation (grade of F). The student will be required to repeat the rotation.*
- *If 3 or more competencies, in any domain, are graded as “Needs Improvement” on the final evaluations, the student will receive a grade of a D for the rotation. The student will be required to repeat the rotation.*
- Assessment of competencies and graded assignments will be rubric-based (Table 2).
- Grades and Documents: Students cannot be awarded a rotation grade until all required assignments are completed and the following documents are submitted in CORE ELMS
 1. APPE Evaluation by Preceptor – Final Evaluations
 2. Rotation hours logged by student and verified by preceptor
 3. Evaluation of Preceptor, Evaluation of Site, and Student Self-Evaluations
 4. Grading forms for required assignments
 5. Longitudinal Checklist for each rotation
- Students are responsible for completing the rotation requirements and submitting required evidence to the practice site for successful completion of the rotation.

The final course letter grade will be determined according to the following grading scheme:

A	90 - 100 %
B	80 - 89.999 %
C	70 - 79.999 %
D	65.0 - 69.999 % **
F	< 65.0 % **

Table 1: Rotation Grading Components

Grading Components	Weight	Comments
Competency Evaluation	70%	<ul style="list-style-type: none"> – The competency assessment will be performed by the preceptor at mid-rotation and at the end of the rotation in CORE ELMS. The final evaluation will be credited toward your grade (i.e. midpoint = formative; final = summative). – The rubric allows for a Non-Applicable (N/A) if the student has not been exposed to a specific competency during the rotation. – Includes the following domains: foundational, patient care provider, practice management, information master, self-developer, population health, communication, professionalism, and interprofessional education.
Professionalism	15%	<ul style="list-style-type: none"> – Egregious lack of professionalism may result in immediate dismissal and/or failure of the rotation. For examples, please refer to the Honor Code in the FCOP Student Handbook.
Patient Interview	5%	<ul style="list-style-type: none"> - A patient interview is a required assignment of the rotation. The Patient Interview Grading Form must be used to derive grade. (Appendix 1)
Patient Counseling	5%	<ul style="list-style-type: none"> - Patient counseling is a required assignment of the rotation. The Patient Counseling Grading Form must be used to derive grade. (Appendix 2)
Other assignments	5%	<ul style="list-style-type: none"> - Preceptors may choose additional assignments as part of the rotation. Preceptors may choose to award a grade for any optional assignment(s). (Appendix 3-4) - If no additional assignments are chosen, the final grade awarded will be based from 95 points (e.g. 95/95 points = 100%).

Table 2: Competency Assessment Rubric

Exceeds Expectations (EE)	Meets Expectations (ME)	Needs Improvement (NI)	Significant Deficits Exist (SDE)
Student has excelled in performing competency	Student performed the competency at an acceptable level	Student has not consistently demonstrated the competency at an acceptable level	Student has rarely demonstrated the competency at an acceptable level
Student performs above expectations and requires minimal guidance from preceptor	Student has met expectations but requires occasional guidance from preceptor	Student requires frequent guidance from preceptor	Student requires continual guidance from preceptor and often does not complete tasks

Patient Care (CLO 2, 5)

1. Obtain and document patient medical and medication histories
2. Identify appropriate drug-related monitoring parameters for patients
3. Identify and prioritize drug-related problems for patients
4. Create patient-centered, comprehensive therapeutic plans
5. Document therapeutic recommendations for patients
6. Provide recommendations and counsel on over-the-counter products
7. Provide appropriate patient education on a point of care testing device
8. Provide medication counseling to patients by utilizing terminology to match patients' level of understanding, avoid use of medical jargon and confirm patient understanding with teach-back
9. Provide a verbal therapeutic recommendation to another healthcare professional
10. Perform medication reconciliation for patients
11. Counsel patients on therapeutic lifestyle changes
12. Administer a vaccine(s) and provide thorough patient education
13. Screen patients for appropriate vaccinations based on age, medical conditions, and patient interest using the CDC guidelines

Administration and Management (CLO 3)

1. Discuss and observe the wholesale ordering process and inventory, including nonprescription, controlled and non-controlled prescription drugs.
2. Discuss and observe storage, recordkeeping, ordering, perpetual inventory, and requirements for dispensing controlled substances.
3. Discuss financial aspects of drug pricing including average wholesale price, actual price paid by pharmacy, drug price submitted to insurance, and reimbursement of drug cost.
4. Discuss pharmacy manager duties including staff scheduling, reports to file, monthly goals, etc.
5. Discuss and observe opening and closing duties of the pharmacy.
6. Discuss and observe how to handle drug recalls in the pharmacy.
7. Discuss and observe pharmacy audits.

Dispensing and Distribution (CLO 1, 3)

1. Demonstrate knowledge regarding legal requirements for a prescription and the dispensing process.
2. Observe and conduct a patient search on the Texas Prescription Monitoring Program.
3. Receive and give prescription transfers.
4. Perform final verification of a prescription before distributing to a patient.
5. Discuss ways to reduce occurrence of medication dispensing errors and improve patient safety.

Literature Evaluation (CLO 3)

1. Access and evaluate appropriate drug information resources, including primary literature, and provide an accurate and credible answers to health care providers or patients.
2. Perform literature review on drug therapies and disease states as it applies to patient care or other rotation activities.
3. Provide at least one formal drug information response.

Communication (CLO 5)

1. Effectively communicate, both verbally and nonverbally, with patients and other healthcare providers.
2. Provide at least one formal case presentation
 - a. The case patient will be selected by the preceptor
 - b. The student should provide either a PowerPoint presentation or formal typed SOAP note (method determined by preceptor)
 - c. The presentation should include:
 1. Discussion of topic
 2. Discussion of drug therapy options
 3. Analysis and interpretation of the primary medical literature as it applies to the patient case
 4. Individualized drug therapy plan
 5. Conclusion and critique of therapy

Professionalism (CLO 6)

1. Demonstrate professionalism in all practice settings.

Interprofessional Education and Practice (CLO 4)

1. Engage as a member of health care team by collaborating with and demonstrating respect for other areas of expertise

Suggested Schedule of Required Learning Activities/Assignments

This is a suggested schedule for required learning and graded activities. Preceptors may rearrange this schedule to meet their needs.

Week	Activity/Assignment
1	Orientation (site and rotation schedule) Training (software) Review of activities (transfers, physician calls) First patient counseling First patient interview
2	Patient counseling (increase from week 1) Patient interview (increase from week 1) Review patient care services Discuss interprofessional practice activities Assign Inservice^ and/or DIQ^
3	Patient counseling and patient care services (increase from week 2) Review progress with core disease state knowledge Practice Patient Counseling* and provide feedback Practice Patient Interview* and provide feedback Midpoint Evaluation (end of week 3)

4	Patient counseling and patient care services (increase from week 3) Grade DI Question^ Final graded Patient Counseling* Final graded Patient Interview* Therapeutic interventions (verbally and written recommendations to physicians and/or other prescribers)
5	Patient counseling and patient care (increase from week 4) Check documentation of interventions Present Inservice^
6	Patient counseling and patient care (increase from week 5) Additional graded Patient Counseling or Patient Interview <i>(if needed)</i> ^ Re-present and/or re-submit graded Inservice or DI Question <i>(if needed)</i> ^ Final review of documentation of interventions Review progress with core disease state knowledge Final Rotation Evaluation

Note: At the discretion of the preceptor, assignments may be repeated until the student demonstrates competency

** Required assignments*

^ Optional assignments at the discretion of the preceptor

Course Withdrawal and Census Date

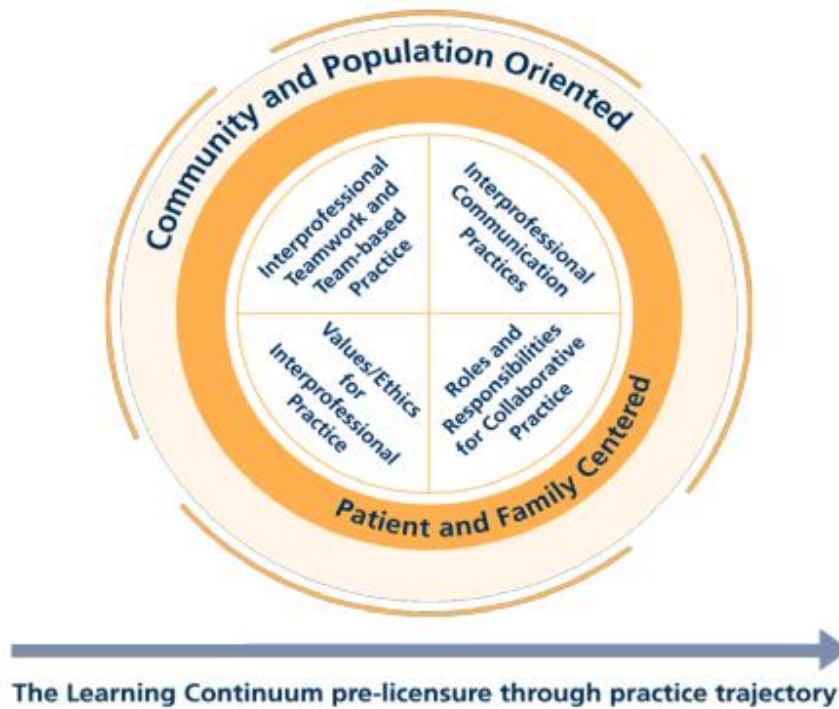
To withdraw from the course, students should initiate withdrawals with the course coordinator. The course coordinator is not responsible for officially withdrawing you from the class. If you do not withdraw by the official dates you will automatically receive a letter grade of "F".

The Census Date is the deadline for many forms and enrollment actions that students need to be aware of. These include:

- Requests to withhold directory information, approvals for taking courses as Audit, Pass/Fail or Credit/No Credit;
- Receiving 100% refunds for withdrawals. (There is no refund after the Census Date);
- Schedule adjustments (section changes, adding a new class, dropping without a "W" grade);
- Being reinstated or re-enrolled in classes after being dropped for non-payment;
- Completing the process for tuition exemptions or waivers through Financial Aid.

Rotation	APPE starts	Census date	Last withdrawal date	End date
Block 1	May 25	May 28	June 22	July 3
Block 2	July 6	July 9	July 31	Aug 14
Block 3	Aug 17	Aug 20	Sep 14	Sep 25
Block 4	Sep 28	Oct 1	Oct 26	Nov 6
Block 5	Nov 9	Nov 12	Dec 7	Dec 18
Block 6	Jan 4	Jan 7	Feb 1	Feb 12
Block 7	Feb 15	Feb 18	March 15	March 26
Block 8	March 29	April 1	April 26	May 7

Interprofessional Collaboration Competency Domain



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Pharmacists' Patient Care Process (PPCP)



Collect

The pharmacist assures the collection of the necessary subjective and objective information about the patient in order to understand the relevant medical/medication history and clinical status of the patient.

Assess

The pharmacist assesses the information collected and analyzes the clinical effects of the patient's therapy in the context of the patient's overall health goals in order to identify and prioritize problems and achieve optimal care.

Plan

The pharmacist develops an individualized patient-centered care plan, in collaboration with other health care professionals and the patient or caregiver that is evidence-based and cost-effective.

Implement

The pharmacist implements the care plan in collaboration with other health care professionals and the patient or caregiver.

Follow-up: Monitor and Evaluate

The pharmacist monitors and evaluates the effectiveness of the care plan and modifies the plan in collaboration with other health care professionals and the patient or caregiver as needed.

<https://www.pharmacist.com/sites/default/files/files/PatientCareProcess.pdf>

Joint Commission of Pharmacy Practitioners

APPENDIX 1.
Texas Consortium on Experiential Programs PATIENT INTERVIEW Grading Form

STUDENT NAME: _____ **DATE:** _____

SCORING

Exceeds Expectations (EE)	Meets Expectations (ME)	Needs Improvement (NI)	Significant Deficits Exist (SDE)
Student has excelled in performing competency	Student performed the competency at an acceptable level	Student has not consistently demonstrated the competency at an acceptable level	Student has rarely demonstrated the competency at an acceptable level
Student performs above expectations and requires minimal guidance from preceptor	Student has met expectations but requires occasional guidance from preceptor	Student requires frequent guidance from preceptor	Student requires continual guidance from preceptor and often does not complete tasks

	SCORE	COMMENTS
Greets Patient		
1. Introduces him/herself to the patient with name and title		
Determines Patient's Concerns		
2. Asks patient about reason for visit/why now		
3. Asks patient to prioritize concerns/what most worried about		
4. Asks patient what she/he thinks is going on		
5. Asks patient to describe symptoms		
6. Asks about treatments patient has tried so far		
7. Asks about impact of health problem on life; disease/symptom severity		
Elicits Information		
8. Uses open-ended, non-leading questions		
9. Asks concise and understandable questions.		
10. Uses smooth and appropriate transitions during the encounter.		
11. Summarizes information back to patient when appropriate.		
12. Uses minimal medical jargon		

13. Asks follow-up questions to clarify		
14. Checks for comprehension (teach back, closing loop)		
Listens actively		
15. Uses verbal expressions of interest throughout the interview		
16. Focuses on patient – not distracted by phone, staff, computer, writing		
17. Interrupts infrequently and appropriately		
Builds rapport		
18. Clearly explains health problem/medications to patient		
19. Shows personal interest in patient		
20. Engages in informal conversation when appropriate		
21. Expresses empathy		
22. Responds to patient's/family's questions		
23. Reassures patient/validates patient behavior		
Non-verbal Communication		
24. Makes frequent eye contact while I was speaking.		
25. Maintains an appropriate distance during the encounter.		
26. Body language and/or tone of voice communicates caring and concern.		
27. Uses effective pacing during the encounter (no rushing; not too much silence).		
28. Uses non-verbal expressions of interest (facial expressions, nods, appropriate touching, pauses, leans toward patient)		
Demonstrates professional behavior		
29. Conveys nonjudgmental/respectful attitude		
30. Engages in appropriate behaviors (no slang, did not chew gum, etc.)		
31. Dresses appropriately (white coat, etc.)		

Global Assessment		
Overall quality of interview		

Please elaborate here if you believe the student **exceeded expectations**. A student who **exceeds expectations** is someone who performed substantially better than students of the same level of education. Examples of a student exceeding expectations include, but are not limited to, excellent time efficiency, overcoming educational/cultural communication barriers, excellent delivery, and excellent interview of sensitive health condition (if applicable).

EVALUATOR NAME: _____

APPENDIX 2.
Texas Consortium on Experiential Programs PATIENT COUNSELING Grading Form

STUDENT NAME: _____ **DATE:** _____

SCORING

Exceeds Expectations (EE)	Meets Expectations (ME)	Needs Improvement (NI)	Significant Deficits Exist (SDE)
Student has excelled in performing competency	Student performed the competency at an acceptable level	Student has not consistently demonstrated the competency at an acceptable level	Student has rarely demonstrated the competency at an acceptable level
Student performs above expectations and requires minimal guidance from preceptor	Student has met expectations but requires occasional guidance from preceptor	Student requires frequent guidance from preceptor	Student requires continual guidance from preceptor and often does not complete tasks

For each of the following, indicate whether the student performed or failed to perform the activity.	SCORE	COMMENTS
Medication Counseling		
1. Asked the patient, “What did your doctor tell you this medication is for?” or something similar.		
2. Inform patient of medication’s generic & trade names		
3. Identified the medication’s use/indication .		
4. Identified the medication’s expected benefits (cure, eliminate/reduce symptoms, arrest/slow disease process, or prevent).		
5. Reviewed the medication’s onset of action .		
6. Explained the expected duration of therapy		
7. Explain the medication’s dosage form (tablet, capsule, nasal inhaler, suppository, etc.) & route of administration (oral, nasal, rectal, etc.)		
8. Explained what to do in the event of missed doses .		
9. Identified the dose & administration schedule for the prescribed medication.		
10. Provided directions for specialized medication preparation and administration <u>where applicable</u> .		

11. Discussed the proper storage of the prescribed medication.		
12. Review techniques for self-monitoring while taking the medication (efficacy &/or safety) <u>where applicable</u> .		
13. Identified common & severe adverse effects associated with the prescribed medication. Identified applicable contraindications for the prescribed medication.		
14. Discussed actions that may prevent or minimize adverse effect & what to do if they occur.		
15. Identified interactions common to the prescribed medication <u>where applicable</u> (include drug-drug, drug-food, & drug disease if needed).		
16. Discussed what to do if the patient does not experience medication effects in a timely manner.		
17. Check for patient understanding by asking the patient to repeat a pertinent piece of information from the counseling session (dose, directions, etc.)		
18. Told the patient if there are refills available (if applicable) for the medication.		
19. Provides contact information to patient or explains that contact information is on the bottle/label.		
Device Demonstration (if applicable)		
20. Utilized device correctly		
21. Integrated device well into counseling session (utilized at an appropriate time during the session)		
22. Device caused few/no distractions		
23. Allowed patient to utilize device (feel, hold, test)		
24. Checked for patient understanding by asking him/her to perform device teach back		
Delivery		
25. Introduced himself/herself with name and title.		
26. Created a friendly, non-threatening environment for the patient		

27. Pace, tone, volume appropriate enough to communicate clearly.		
28. Refrained from using inappropriate medical jargon .		
29. Maintained appropriate/comfortable eye contact with the patient		
30. Faced patient squarely, forward leaning, open body posture and no distracting gestures.		
31. Performed counseling in professional attire		

Please elaborate here if you believe the student **exceeded expectations**. A student who **exceeds expectations** is someone who performed substantially better than students of the same level of education. Examples of a student exceeding expectations include, but are not limited to, excellent time efficiency, overcoming educational/cultural communication barriers, excellent delivery, and excellent device demonstration (if applicable).

OVERALL COMMENTS:

EVALUATOR NAME: _____

APPENDIX 3.
INSERVICE Grading Form

STUDENT NAME: _____

DATE: _____

SCORING

Exceeds Expectations (EE)	Meets Expectations (ME)	Needs Improvement (NI)	Significant Deficits Exist (SDE)
<p align="center">Student has excelled in performing competency Student performs above expectations and requires minimal guidance from preceptor</p>	<p align="center">Student performed the competency at an acceptable level Student has met expectations but requires occasional guidance from preceptor</p>	<p align="center">Student has not consistently demonstrated the competency at an acceptable level Student requires frequent guidance from preceptor</p>	<p align="center">Student has rarely demonstrated the competency at an acceptable level Student requires continual guidance from preceptor and often does not complete tasks</p>

CRITERIA	SCORE	COMMENTS
I. ORGANIZATION		
The handout/PowerPoint slides are clear and concise without typos		
The content order flows well and makes sense		
The amount of information per slide is appropriate (no crowding of information)		
II. OBJECTIVES		
The learning objectives are directed toward the audience type		
The learning objectives contain action verbs and are measurable		
III. CONTENT		
All information provided supports the presentation objectives		
The information provided was accurate		
The amount and depth of information was appropriate		
Summary is included and reviews application to practice		
IV. PRESENTATION STYLE		
Transitions between topics and/or speakers are carried out in a smooth fashion		
The student appears confident.		
The student displays enthusiasm.		

The student speaks at an appropriate volume and rate		
The student uses language appropriate to the audience		
The student maintains good eye contact throughout presentation		
The student does not use excessive filler words (“um”, “well”, etc.)		
Avoids distracting mannerisms		
V. PREPARATION		
References are provided and are cited correctly (journal articles need to be used)		
The presentation represents the students own work		
The student did not require an unreasonable amount of guidance in research or preparation		
The amount of preparation time was appropriate for topic		
VI. QUESTIONS		
The student accepts questions and comments in a non-defensive manner		
Questions are answered accurately		
The student answers questions satisfactorily or readily acknowledges if they do not know the answer		
The student provides appropriate and timely follow up for questions not answered during presentation		
OVERALL COMMENTS:		

EVALUATOR NAME: _____

APPENDIX 4.

Texas Consortium on Experiential Programs DRUG INFORMATION INQUIRY Grading Form

STUDENT NAME: _____

DATE: _____

SCORING

Exceeds Expectations (EE)	Meets Expectations (ME)	Needs Improvement (NI)	Significant Deficits Exist (SDE)
Student has excelled in performing competency	Student performed the competency at an acceptable level	Student has not consistently demonstrated the competency at an acceptable level	Student has rarely demonstrated the competency at an acceptable level
Student performs above expectations and requires minimal guidance from preceptor	Student has met expectations but requires occasional guidance from preceptor	Student requires frequent guidance from preceptor	Student requires continual guidance from preceptor and often does not complete tasks

CRITERIA	SCORE	COMMENTS
I. DRUG INFORMATION QUESTION		
Clearly defined the drug information question		
Summarized the question or therapeutic dilemma		
Identified and retrieved pertinent data and information		
II. LITERATURE SOURCES		
Utilized appropriate literature sources		
Utilized a variety of primary, secondary, and tertiary literature sources (if available)		
Interpreted primary, secondary, and tertiary literature appropriately (e.g., does not indicate that one case study is applicable to an entire population)		
III. LITERATURE REVIEW AND EVALUATION		
Critiqued the literature utilized to answer the question		
Summarized available data		
IV. CONCLUSION/RESPONSE		
Reached an evidenced-based conclusion		
Applied information from critical analysis of literature (e.g., recommendation matches literature review)		

Applied therapeutic and pharmacologic knowledge		
V. FORMAT OF PRESENTED MATERIAL		
Written – Organized, concise response that is grammatically correct and has no typographical errors		
Verbal – Organized, concise explanation using appropriate language for the inquirer and good pace, volume, and tone of voice		
Fielded questions effectively		
Cited references		
VI. PROFESSIONALISM		
Worked independently (minimal assistance required)		
Prepared for follow-up questions		
Displayed initiative to understand information surrounding the specific drug information question (e.g., if asked about a hypertension medication, student is also able to describe guideline recommendations for hypertension management)		
Used available resources to critically think and make a final recommendation/conclusion (e.g., does not end question with “there needs to be more studies”)		
VII. TIMELINESS IN RESPONSE		
Answered question in an appropriate time based on the acuity of the situation		
OVERALL COMMENTS:		

EVALUATOR NAME: _____