This handbook, published by the PCP Dean’s Office, provides the most current information about the Philadelphia College of Pharmacy (PCP), the founding college of the USciences community, and its programs, policies and procedures. It is available in electronic format on the PCP Central Repository on Blackboard, in printed form in the PCP Dean’s Office in GH 2016, and at: http://www.usciences.edu/Media/Website%20Resources/documents/academics/collegesDepts/PharmPracticeAdmin/PharmD/PCP_Student_Handbook.pdf.

The information provided herein supplements the University-wide information found in the University Student Handbook and the University Catalog and supersedes that information as it relates to PCP-specific issues. Education, from admission through graduation, is under continuous review and quality improvement; as such, the information provided in this handbook is not considered a contract. PCP reserves the right to alter its rules, regulations, and requirements for admission or graduation, as needed. Communication of any modifications, revisions or updates to components of this document will be made solely via Blackboard announcement and/or University email.

Prepared by: Diane W. Morel, Ph.D.
Assistant Dean, Curriculum and Assessment
September 1, 2016
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PCP Student Handbook

I. General Information

Historical Perspective

The Philadelphia College of Pharmacy (PCP), established in 1821, is the first school of pharmacy in the western hemisphere, and the founding college of what is now known as the University of the Sciences in Philadelphia. PCP is proud of its rich history of inclusivity, neighborhood, regional, national, and global outreach and leadership, and innovations in research and education. PCP was one of the earliest initiators of the advanced professional practice degree, the Doctor of Pharmacy or Pharm D. The Doctor of Pharmacy (PharmD) degree was approved as the entry level program for all entering students seeking a career as pharmacy practitioners in 1994. PCP’s relatively uncommon BS programs, pharmacology/toxicology (approved 1979), and pharmaceutical sciences (approved 1999), have an emphasis on laboratory-based scientific investigation, complementing the more clinically-based PharmD program. Both programs prepare BS-level scientists for careers in pharmaceutical and biomedical research industries and serve as entrant degrees for graduate education. PCP also oversees several graduate programs, including the Department of Pharmacy Practice and Pharmacy Administration’s MS in Pharmacy Administration as well as post-doctoral residency and fellowship programs, and the Department of Pharmaceutical Sciences’s MS and PhD programs in Pharmacology/Toxicology and Pharmaceutics.

PCP offers this adage to prospective students who are interested in careers in pharmacy: Begin your pharmacy education where pharmacy education began. PCP graduates are known for innovation as founders of pharmaceutical industries and developers of therapeutic practices. As the profession of pharmacy and our understanding of science have evolved, so has the nature of the programs PCP offers, and the services our graduates provide to society as a whole. The roles of the pharmacy profession have expanded far beyond the dispensing of medication, to direct patient care, state-of-the-art research, medication therapy management, disease management, patient counseling, regulatory affairs, medical communication, managed care, drug information, and drug testing and development.

College Mission and Vision, Strategic Goals

The mission and vision statements of PCP have been updated through a strategic planning process to better emphasize PCP’s tradition of leadership and its legacy in maintaining public trust through impeccable professional ethics.

The mission of the Philadelphia College of Pharmacy is to educate and develop students to become leaders and innovators in patient care and research who are differentiated by their professional and ethical values.

The vision of The Philadelphia College of Pharmacy is that it will be globally recognized for excellence in advancing compassionate, evidence-based patient care through interprofessional collaboration, inspiring innovations in education, research and practice.

To this end, the college administers and supports a professional Doctor of Pharmacy (PharmD) program, two baccalaureate programs (BS PharmTox and BS Pharmaceutical Sciences) and five graduate programs (MS in Pharmacy Administration, MS and PhD degrees in Pharmacology/Toxicology and MS and PhD programs in Pharmaceutics), as well as post-graduate residency and fellowship training in pharmacy practice.

Based on its history and reputation, the true distinction of PCP is in its global impact on Pharmacy, through its advocacy and excellence in patient care, interprofessional collaboration, the development and validation of innovative practice models in pharmacy, and research and medication
development in pharmaceutical sciences. The core values of the Philadelphia College of Pharmacy are as follows:

- PCP is an inclusive and collaborative community of students, faculty, alumni and staff who together, pursue excellence in a setting focused on personal and professional growth.
- PCP is a scholarly community where students, faculty, alumni and staff collaborate in advancing the profession of pharmacy.
- PCP provides a student centered educational experience in which the development of students’ intellectual and professional strengths and emotional intelligence are of paramount importance.
- PCP equips students with the tools for critical thinking and life-long learning.
- Members of the PCP community conduct their affairs in a collegial manner with a clear sense of duty, integrity, accountability and caring.
- Members of the PCP community contribute to the broader communities in which they live and work.

The strategic goals, identified by strategic planning, allow PCP to accomplish its mission and vision as follows:

1. Provide academic programs focused on student centered learning experiences that develop professional competencies, build emotional intelligence and enable students to become leaders and innovators in patient care and research.
2. Cultivate a community of PCP students, alumni, faculty, and staff promoting a continuum of professional growth and leadership.
3. Establish PCP as the leader in pharmacy and pharmaceutical sciences education and research through a focus on scholarship, partnership, innovation, entrepreneurism and student success.
4. Insure academic excellence through a comprehensive and integrated strategic planning and assessment process.
5. Establish and maintain a diverse portfolio of programs, services and research activities that support and expand the financial base and physical resources of PCP.

PCP’s Educational Philosophy and Program Student Learning Outcomes (SLOs)

PCP is dedicated to students’ acquisition and integration of the requisite knowledge, skills, values and attitudes that enable them to become educated and responsible citizens, competent professionals, and life-long learners and leaders. Its educational philosophy is learner-centered and developmental, building knowledge, skills, and self-confidence in an incremental manner, with a focus on “learning and knowing by doing” (in the laboratory or with patients). The objectives of this approach are accomplished by the use of active learning techniques within the classroom, the development of analytical and problem solving skills through individualized and integrated application exercises, as well as extensive practice and research experiences that allow application of learned knowledge in and out of the classroom. Students are engaged as individuals and with their peers throughout the curriculum in a comprehensive fashion, from the classroom, to the laboratory and practice sites, with regular periodic assessment and feedback. In addition, students are engaged via co-curricular activities including college and professional organizations, and interactions with individual faculty mentors and advisors. PCP faculty believe that such a comprehensive and developmental approach to education facilitates students’ learning processes, sensitizes them to the issues and ethics of
practice and research, and instills in graduates analytical and problem solving skills and a commitment to life-long learning.

**BS program SLOs** focus on the knowledge within the disciplines of drug delivery and drug interactions with biologic systems, respectively, and the application of laboratory skills to pharmaceutical research and development. For the BS in Pharmacology/Toxicology program, every graduate will be able to conduct experiments using standard laboratory protocols; analyze and interpret data from ADME (absorption/distribution/metabolism/excretion); predict the biochemical and physiologic consequences of drug-receptor interactions; predict the biochemical and physiologic consequences of chemical toxicities; and identify, search for, analyze, and critique the biomedical literature, both in writing and orally. Likewise, SLOs for the BS in Pharmaceutical Sciences program state that upon graduation, students will be able to integrate concepts taught in basic courses into their professional courses; be proficient in basic laboratory skills required by departments of pharmaceutics in the pharmaceutical industry; be able to electronically retrieve relevant literature from scientific databases; and be able to effectively communicate both verbally and in writing.

**PharmD Program SLOs** are based upon a vision to create and foster dedicated pharmacists who will have a moral commitment to improve the quality of life of individual patients and to positively impact society by being an integral part of the healthcare team. Thus, our graduates will be compassionate, knowledgeable, skilled and innovative, ‘job-ready’ pharmacy practitioners, who will become trusted and respected leaders of the pharmacy profession. They will be able to adapt to the dynamic nature of the healthcare system and changing technology and serve as positive role models in the community. The program will foster these ideals by providing a strong scientific education and the skills and attitudes needed in entry-level pharmacists' roles now and in the future. Specifically, Programmatic Outcomes are based on the 2013 CAPE (Center for the Advancement of Pharmacy Education) Outcomes and the ACPE Standards for 2016; they specify that each graduate will be ‘job-ready’ in entry-level pharmacists' roles (see Appendix A) including:

- life-long learner
- medical caregiver (medication expert)
- medication use manager
- health and wellness promoter
- population-based care provider
- problem solver
- educator
- patient advocate
- interprofessional collaborator
- compassionate and caring includer (to recognize and diminish healthcare disparities and inequities)
- communicator
- self-aware individual
- leader
- innovator (and entrepreneur)
- trusted professional

There are three major tracks for the PharmD program: a direct entry track for students entering directly from high school; transfer/change of major track for students entering the first professional year (P1); and starting in fall 2016, a post-baccalaureate track, for students entering P1 with a previous baccalaureate degree and professional pre-requisite coursework. The professional phase of the curriculum is the same for all tracks. Appendices D and E illustrate the curricula for these tracks.
The PharmD program is transitioning to a ‘Ready+4’ model wherein ‘Ready’ describes the pre-professional phase (general education and professional pre-requisite coursework), and ‘+4’ refers to the four year professional phase (pharmacy-focused, competency-driven curriculum). The PharmD SLOs encompass twelve specific competency domains and their associated measurable activities (described in Appendix B).

The competency-driven professional curriculum, initiating in fall 2018, is comprised of a series of foundational modules in practice skills, professional behavior and communication, pharmaceutical sciences, and health care policy and law; a series of fourteen integrated Pharmacy Sciences, Disease and Therapeutics modules; a two module series focused on Medication Use Systems; a two module sequence focused on Drug Information and Literature Evaluation; an Applied Professional Behavior and Communication module; an Entrepreneurship module; two Integrated Practice Modules; and electives. These are interspersed with 300 hours of Introductory Pharmacy Practice Experiences (IPPEs) at off-campus sites during the P1-P3 years. The knowledge, skills, and attitudes of the student pharmacist are brought to a practice-ready level during the P4 year by a minimum of 1440 hours of Advanced Pharmacy Practice Experiences (APPEs). Interprofessional education, an educational approach that involves students in multiple professions learning about, from and with each other to improve collaboration is threaded throughout the professional curriculum.

In the competency-driven professional curriculum, the focus is on students developing the knowledge, skills, attitudes and behaviors for confident and collaborative patient-centered care, innovation and leadership right from day one of their first professional year. The curriculum will be delivered in a modular format, utilizing leading edge pedagogical and assessment best practices, with inter-professional and experiential education fully integrated with the didactic curriculum. Crucial to the success of the new curriculum is the personalized learning support students will receive, and the sequential, pre-planned assessments of competence at specific performance levels, both focused (within modules) and integrated across individual course modules. (See Appendix E)

**Accreditation**

The University is accredited by the Middle States Commission on Higher Education, the accreditation agency recognized by the US Secretary of Higher Education and the Council for Higher Education Accreditation. University of the Sciences in Philadelphia is fully accredited by Middle States.

The Doctor of Pharmacy (PharmD) program is accredited by the Accreditation Council for Pharmacy Education (ACPE), an autonomous and independent national agency whose board of directors (the decision- and policy-making body) includes pharmacy educators and practitioners, state board of pharmacy members/executives, and a public representative, who together with an advisory public interest panel ensure a public perspective in policy- and decision-making processes. Information about the standards, policies and procedures upheld by ACPE and the current accreditation status of all pharmacy programs can be found on the ACPE website at [www.acpe-accredit.org](http://www.acpe-accredit.org). The Philadelphia College of Pharmacy PharmD program is fully accredited by ACPE.

Institutional accreditation is essential to acceptance and recognition of the degree earned at the institution, which in turn is required for employment and other opportunities. Like other health professions, the practice of pharmacy is regulated by law through state regulation of licensure; the qualifications for licensure as a pharmacist include: graduating from an accredited pharmacy program (with a PharmD degree), completing internship hours (as determined by state), and passing licensure examinations required by the Board of Pharmacy within each state (e.g. North American Pharmacist Licensure Examination, NAPLEX, and Multistate Pharmacy Jurisprudence Examination, MPJE). Information about licensure exams and state-specific requirements can be found at the National Association of Boards of Pharmacy (NABP) website at [www.nabp.org](http://www.nabp.org). State internship hour requirements are not uniform, thus students must acquaint themselves with the relevant requirements and steps needed to qualify for practice in states of interest to them.
Student Complaints Policies

ACPE requires that colleges of pharmacy respond to any complaints related to the accreditation standards. Students should submit written complaints to the Office of the Dean of Pharmacy (GH-2016); the student will receive a written response to their complaint within two weeks of its receipt, which will provide an explanation and outline any next steps being undertaken to resolve the complaint. Alternatively, students can go directly to the ACPE website at www.acpe-accredit.org, to express concerns related to any of the ACPE accreditation standards. Information about the complaint policy is provided during student orientation and is reinforced each semester via class meetings (whose agenda and minutes are posted in the PCP Central Repository).

Several informal complaint processes are used to resolve issues or complaints that are not directly related to accreditation standards. Such complaints may be submitted anonymously to an online suggestion (discussion) board, or a locked suggestion box located in the hallway opposite GH-2016, and are periodically addressed by PCP Dean’s Office staff, with explanatory responses/actions taken posted the suggestion (discussion) board.

If a student, or group of students, has a complaint or concern about a specific course, the appropriate procedure is to (1) communicate and discuss the issue with the specific instructor in the course, (2) communicate and discuss with the course coordinator for the course, and (3) finally, communicate and discuss with the chair of the department that has responsibility for the course, in order to resolve the issue or concern. General feedback (complaints, suggestions, etc.) from students about courses is solicited via online course evaluations, and in certain cases, via in class or out of class surveys.

As above for ACPE complaints, students are apprised of the options for informal complaints in orientation and through class meetings. In addition, students are encouraged to share concerns or issues with their class representatives to PCP Student Council; issues or concerns addressed and/or resolved through PCP Student Council are recorded in the minutes of PCP Student Council meetings.

An informal student complaint that remains unresolved, specifically if an action (or lack of action) is perceived to be unfair; to be arbitrary, capricious, or unjust; or that does not comply with University policies fall under the University Student Grievance Policy. A student grievance is initiated through the Office of the Dean of Students, and may be resolved informally via mediation, or via a formal prehearing with each of the parties, followed by a grievance hearing through the Grievance Committee. Please see the University Student Handbook for details of the procedures involved in grievance resolution and the appeals policy for any outcomes from a grievance hearing.

II. College Structure

Departments

PCP is comprised of two departments: the Department of Pharmacy Practice and Pharmacy Administration (DOPP/PA) and the Department of Pharmaceutical Sciences (DPS). Faculty in DOPP/PA are responsible for PP and PA courses while faculty in DPS are responsible for PC and PH courses, and faculty from both departments are responsible for RX courses in the new competency-driven professional curriculum.

Each department is headed by a department chair who works, in conjunction with vice chairs and/or program directors, and with faculty to provide the best and most effective educational experiences for students in PCP programs; these functions include managing course offerings and delivery, course scheduling and resources needed for teaching and research, grading policies, etc. for the courses they deliver, within the policies and procedures outlined at the University level. In DOPP/PA, Dr. Cathy Poon serves as chair, and vice chairs include Drs. Steven Sheaffer (experiential education),
Jean Scholtz, Michael Cawley, and James Hollands. In DPS, Dr. Marvin Schulte serves as the chair, and currently there are no vice chairs.

The PharmD (Doctor of Pharmacy) program is a college-wide program, administered and supported by both departments. The PCP Dean’s Office serves as the coordination and communication hub for this college-wide program, with Deans Mandos and Morel focusing on day-to-day issues for students within the program. Dr. Mandos is also the program director for the BS in Pharmaceutical and Healthcare Studies program, a college-wide program which confers the BS degree ‘in transit’, to PharmD students midway through their professional years, or as a terminal degree, if a student is unable/uninterested in completing the PharmD program.

The BS in Pharm/Tox and BS in Pharm Sci programs, and graduate (MS/PhD) programs in Pharmacology/Toxicology and Pharmaceutics are administered and supported by DPS. Program Directors are as follows: Dr. Li for BS Pharm/Tox; Dr. D’mello for BS Pharm Sci; Dr. Chen for graduate Pharm/Tox, and Dr. Neau for graduate Pharmaceutics.

The MS in Pharmacy Administration program and the post-graduate residency and fellowship programs are supported and administered by DOPP/PA. Dr. McGhan serves as the program director for the MS program, Dr. Holland serves as the residency program coordinator, and Dr. Mandler serves as the industrial fellowship coordinator.

As described above under student complaints, the college and program structure is relevant to how issues or complaints about specific courses (e.g. instructors, grading, texts or other materials) are addressed and resolved. Courses and individual course matters are wholly within the purview of the faculty/departments providing the courses. Thus, issues/complaints related to courses with prefixes PC and PH are handled by DPS, whereas courses with prefixes PA and PP are handled by DOPP/PA, and based on the hierarchy proceed from instructor to course coordinator and then to department chair. General feedback (complaints, suggestions, etc) from online course evaluations and/or surveys is reviewed by faculty and departments, and in some cases, at the University level, may come back to the departments from student government (PCP Student Council, Student Government Association) or student organizations.

**PCP faculty and PCP Council**

PCP faculty are appointed by the University Board of Trustees. It is within PCP faculty purview to determine PCP curricula, PCP program academic standards, and admission and enrollment policies for PCP programs; in addition, PCP faculty continually monitor the quality and effectiveness of ongoing functions and plan for the future of the college. PCP faculty are responsible for teaching, research and/or clinical practice, and service to the college and the University. In addition, PCP faculty also serve as academic advisors for individual students; as advisors for student organizations; and as mentors for research, IPPEs, and APPEs; coordinators and mentors for the Cooper-Rowan IPE (Interprofessional education)-track program and other IPE activities and courses, as well as the CPR (Cardiopulmonary resuscitation) Leadership Team.

PCP Council, comprised of all Board-appointed faculty whose primary appointment is in PCP, is the primary decision- and policy-making body for college activities and programs. It participates in shared governance of education with the Dean of PCP, the University Faculty Senate, and University administration. As a College within the University, college or program-specific curricular components must align with University components (e.g. general education, physical education) but there may be differences in expectations, standards, or proficiency measures that are unique to specific programs within the college. The standing committees of PCP Council focus on the major areas of faculty purview and include: Academic Standards, Admissions, Assessment, Curriculum, Executive (which functions to elaborate charges for other standing committees), Planning, Faculty Affairs, Student Affairs, Research, and Graduate Studies. Committee composition and standing charges are outlined by PCP Council bylaws, with yearly membership and specific charges determined by the Executive Committee. Student
input/feedback relevant to PCP functions and activities is highly valued and is solicited from student members of Council standing committees (all except Executive Committee, Admissions Committee and Faculty Affairs have student members); as such, efforts are made to accommodate schedules of all members, including students, in the scheduling of meetings. On some committees, specifically Curriculum and Assessment, the student representatives (elected from PCP Student Council) have voting privileges.

**PCP Dean’s Office**

The PCP Dean’s office is comprised of the Dean, Dr. Lisa Lawson; the Associate Dean for Student Affairs and Admissions, Dr. Laura Mandos; the Associate Dean for Professional Affairs, Dr. John Gans; the Associate Dean for IPE, Dr. Cathy Poon; and the Assistant Dean for Curriculum and Assessment, Dr. Diane Morel. The Dean’s office also includes the following professional staff: a Pharmacy Program Academic Advisor, Mr. Jesse Swartz; the Director of the StEPP (Student Excellence in Professional Preparation) co-curricular program, Mr. Thomas Viola; an Instructional Technologist, Ms. Amy McLaughlin; a data analyst, Ms. Nicole Salamantin; the Assistant to the Dean, Ms. Estelle Sherrod; an Academic Specialist, Ms. Bernadette Kelly; and Administrative Coordinators, Ms. Nicole Battle-Walker and Mr. Bryan Park. The mission of the PCP Dean’s Office is to support the vision of the Dean in leading the Philadelphia College of Pharmacy in achieving its mission, by providing exemplary service to assist students in achieving their educational and professional objectives, supporting faculty and staff in fulfilling their responsibilities to the College, and promoting continued commitment to the professions.

The PCP Dean’s Office works to provide information about educational policies, procedures, and options; to help direct students to appropriate resources; to promote and enhance communication between and among student groups; to examine and communicate data regarding all aspects of the educational enterprise; to communicate with internal partners (e.g., different colleges, upper administration, Board of Trustees, etc.) and external partners (e.g. accreditation bodies, pharmaceutical industry, practice sites, other educational entities); and to secure funding for the College. The PCP Dean’s office monitors progression of individual students through their programs according to the curricula and academic standards established by faculty; enhances communication with, and receives input from, the student body through the PCP Student Council; maintains dialogue with students through the online suggestion box and through class meetings for the PharmD program; coordinates assessment reports to the Office of Institutional Effectiveness and reports to accreditation agencies for the departments and programs supported by the college; assigns professional advisors to students in the professional years of the PharmD program and works with the University advisors for pre-professional pharmacy students; addresses and coordinates requests and communication about leaves of absence (please see University Student Handbook for policies and procedures involving leaves); and sponsors and plans for events such as the PCP advisor meet and greet and White Coat Ceremony for rising P1 students, the BS conferment ceremony for the in-transit BS PHHCS degree awarded to Doctor of Pharmacy students at conclusion of their P2 year, the administration of the Pharmacy Curriculum Outcomes Assessment (PCOA) to P3 students and brunch to share and discuss college results, and other celebrations of student and/or faculty accomplishments, including NAPLEX and law review courses and graduation dinner for P4 students.

The White Coat Ceremony, scheduled in the fall semester of the P1 year for PharmD students, their families and PCP faculty marks the successful completion of the preprofessional component of the Doctor of Pharmacy program and welcomes student pharmacists into the professional component of their training, which includes off-campus experiential training. The white coat, PCP lapel pin, and ‘PCP Student Pharmacist’ name badges they receive, and their recitation of the Oath of a Pharmacist (see Appendix C) celebrates the transition from ‘student’ to ‘student pharmacist’, and challenges PharmD
students to embrace the skills, attitudes, behaviors and values of the pharmacy profession. A similar laboratory coat ceremony for students in the BS programs is held by DPS.

The BS conferment ceremony for P2 PharmD students, their families and PCP faculty occurs in conjunction with other professional programs at the University at the end of the spring semester. It marks the fulfillment of a breadth and depth of coursework worthy of a baccalaureate degree and promotes refocusing of students’ energies on professional development during the final two years of their education. Students continuing in the PharmD program are now considered as graduate students for financial aid purposes.

The PCOA, developed and administered by the National Association of Boards of Pharmacy (NABP), provides an assessment of knowledge competency in four key areas of didactic pharmacy education (basic biomedical sciences, pharmaceutical sciences, social/behavioral/administrative sciences and clinical sciences) for individual students and for the college relative to colleges of pharmacy nationwide. Individual score reports are sent to student pharmacists to promote self-assessment and reflection, while the college reviews class data as a component of the assessment of curricular effectiveness and data-driven curricular revision. The P3 PCOA brunch for P3 student pharmacists and faculty is an acknowledgement and thank you to students, and an opportunity for students and faculty to interact prior to students initiating their APPE rotations. NAPLEX and law review courses provided by the college are held on campus and provide additional support for students about to complete the program. This is followed by a celebratory graduation dinner for P4 students and faculty a few days prior to University commencement. A graduation dinner is held for BS students by DPS.

The PCP Dean’s Office works closely with faculty and professional staff through a number of subgroups to promote communication between administration, faculty and students within the college, as well as with administration outside the college with respect to college operation. These subgroups include:

- Dean’s office members appointed to PCP Council committees (aka Dean’s appointees)
- Administrative Group, comprised of the Deans, Department Chairs, PCP Council President, and the Assistant to the Dean, which focuses on overall operations of the college and certain strategic initiatives
- the Budget and Operations Group, comprised of the Dean and the Department Chairs, which focuses on personnel and budgetary concerns and funding for college functions, including requests from student organizations
- Brain Trust (BT), comprised of Associate Dean for Student Affairs and Assistant Dean for Curriculum and Assessment, student academic specialist, the Pharmacy Program Academic Advisor, and professional advisors from the University Office of Student Advising, which focuses on issues related to student advising such as curricular changes, new opportunities for students, concerns or issues raised by students, etc.
- Assessment Management Team (AMT), comprised of the Dean, the Data Analyst, the chair of the PCP Assessment Committee, and the Assistant Dean for Curriculum and Assessment, which collects, analyzes and disseminates assessment data to PCP Council and administrative groups for data-driven implementation of change and continued assessment.

In addition, the Dean may form more short term working groups of faculty to address targeted issues and provide needed data or recommendations to the Dean. Examples include the currently operational CIT (Curriculum Implementation Team- Department Chairs, Assistant Dean for Curriculum and Assessment, PCP Council Chair, PCP instructional technologist), which is responsible for planning the implementation of the new professional curriculum, and the FDG (Faculty Development Group-K).
Tietze, M.Schulte, T. Thomas, J. Holaska), which is responsible for developing a sustainable faculty development program for delivery of the competency-driven curriculum.

**PCP Administrative Group Contact Information:**

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<td>Cathy Y. Poon</td>
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<td>Jennifer Reinhold</td>
<td>President, PCP Council</td>
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**III. PCP Program Curricula**

The **Doctor of Pharmacy (PharmD)** program is a professional doctorate program comprised of two years of pre-professional coursework (U1, U2) followed by four years of professional coursework (P1-P4), which include both didactic and experiential elements. While most students complete the program in a total of six years from high school, some students may take longer to complete either the pre-professional component or the professional component of the PharmD program.

Students who entered the PharmD program as freshman in 2015 or earlier must complete the pre-professional component by the end of the spring semester of their U2 year. In order to advance to the professional curriculum, students must take all required courses at USciences, meet the academic standards for automatic progression, but do not need to make a separate application or take any additional admissions tests. Starting in fall 2016, students entering the ‘Ready +4’ PharmD curriculum, are no longer required to take all required coursework since matriculation at USciences, and have from 2-4 years to complete the pre-professional phase of the curriculum. Students with prior baccalaureate degrees who have completed all professional pre-requisites enter the PharmD:PB (post-baccalaureate) track, which allows them to be viewed as graduate students for financial aid purposes.

Once in the professional curriculum (P1-P4), all students have a maximum of six years to complete all degree requirements. As students enter the professional years of the program, they become ‘student pharmacists’, a milestone marked and celebrated by the White Coat Ceremony. Student pharmacists are assigned to academic advisors who are faculty in the Department of Pharmacy Practice and Administration and/or the Dean’s Office, and thus serve as mentors for professional as well as personal development. Students also begin their experiential education at off-campus sites through the Introductory Pharmacy Practice Experiences (IPPEs).

In general, professional courses are only offered once during an academic year because of the need to sequence the specialized content in a logical and sequential manner to build comprehensive
competency and confidence. Eligibility for such courses is determined by pre-requisites, co-requisites, and/or program year status. Expectations for student performance and course rigor are enhanced as students enter their first professional year and focus not only on knowledge acquisition but also skill development, integration and application of knowledge and skills across courses, engagement, as well as attitudes and behaviors appropriate to the healthcare workplace.

The current PharmD curriculum (for students already in the professional curriculum or U2 year, i.e. catalog years 2010-2015) and the new PharmD:PB curriculum (for post-baccalaureate students) are shown in Appendix D.

The PharmD curriculum for catalog years 2016 and beyond and the PharmD:PB curriculum (2018 entry to P1), i.e. the competency-driven professional curriculum, are shown in Appendix E.

The BS in Pharmaceutical and Healthcare Studies program provides an in-transit baccalaureate degree to Doctor of Pharmacy students, conferred at the end of their P2 year. This degree serves as a second milestone, marking the halfway point in their professional education, for those students who are willing and able to complete the PharmD program, or as a terminal degree for students who are no longer interested in or able to complete the PharmD. To receive this degree, a student must be a continuing PharmD student in good standing, or a PharmD student who meets the criteria for the BS PHHCS degree, including completion of all University general education requirements. Students in the PharmD:PB track are ineligible. The BS PHHCS degree is conferred to all eligible candidates at the end of their P2 year in a special Conferment Ceremony with other healthcare professions, assuming they filed a petition to graduate with the University registrar per University policy (see University student handbook), and have a cumulative GPA $\geq$ 2.00. The current BS in Pharmaceutical and Healthcare Studies curriculum for students in catalog years 2010-15 is shown in the curricular checklist in Appendix F, whereas that for catalog years 2016 and beyond is shown in Appendix E.

The BS in Pharmacology/Toxicology program is a four year baccalaureate degree program whose focus is on developing laboratory and research approaches at the interface of biology and chemistry. The how and why (mechanism) of chemical interaction with a biological system is of primary interest, leading to identification and targeting of new treatment modalities for disease management or cures. The program curriculum is shown in Appendix F.

The BS in Pharmaceutical Sciences program is a four year baccalaureate degree program which addresses the stability, manufacturing, and the laboratory and research methodologies needed to develop optimal modes of drug delivery. The program curriculum is shown in Appendix F.

Graduate Programs are managed by program directors in the two college departments. For information about Pharmacology/Toxicology programs, please contact Dr. Bin Chen. For information about Pharmaceutics programs, please contact Dr. Steven Neau. For information about the Pharmacy Administration program, please contact Dr. William McGhan.

IV. Admissions Policies and Procedures

PCP Program entry

Currently, the primary route for entry into either the Doctor of Pharmacy program or one of the BS programs is directly from high school. Admission evaluations are handled by the University Admissions Department, in consultation with program directors, and for the Doctor of Pharmacy program, the Associate Dean for Student Affairs and Admissions. The University admissions department also handles admissions of transfer students into the first undergraduate year or first professional year of the PharmD program, as well as into all years of the BS programs. For the class of 2018 (catalog year 2013) and beyond, students who are accepted into the PharmD program are sent a
technical standards acknowledgement form (see Appendix G) with their acceptance, and must return the signed form/acknowledgement prior to/upon matriculation. The technical standards that pharmacy students must meet are a set of motor, cognitive and behavioral attributes needed to perform the ‘essential functions’ of a pharmacist in a reasonably independent manner and without use of a trained intermediary (i.e., a student’s judgment and activities cannot be mediated by someone else’s clinical skills, professional knowledge, and integrative or interpretative abilities). Students are guaranteed reasonable accommodations under the American Disabilities Act (please see University Student Handbook for description of polices and procedures for soliciting ADA accommodations).

Entry into graduate programs requires a previous baccalaureate degree and follows the policies and procedures for graduate programs, which are listed on the University web page.

Change of Major

Changing from one major field of study to another at the University is often possible, but it is neither automatic nor guaranteed. Following consultation with his/her academic advisor, the student intending to change his/her major should meet with the college dean and program director responsible for the degree program into which the student desires to transfer. The PCP Council Admissions Committee evaluates change of major applications into the first professional year (P1) of the Doctor of Pharmacy program, change of major applications to the BS programs, transfer student applications into P1 of the Doctor of Pharmacy program, and readmission (for former USciences students) applications into PCP programs. The change of major process involves submission of an application form, resume, and personal statement, followed by interview(s), most commonly with the program director or a member of the Admission Committee. The interviewer(s) submit their recommendation(s) to the Admissions Committee, which then makes the final decision. The readmission process is similar, but per University policy, requires supporting materials, such as completion of college coursework, which indicate a likelihood of success (see University student handbook). Formal requests for change of major must be submitted to the student’s prospective college dean by the following dates: October 15 (all programs except PharmD) and April 1 of each academic year. Students who are withdrawn from the Doctor of Pharmacy program (e.g. if they cannot progress to the first professional year or are dropped from the program during the professional years) must change to a different major in the University by the end of drop/add period of the next semester, per University policy. Students must remain in that program at least four semesters before reapplying to the Doctor of Pharmacy program. If such a student is unsure of their desired major, they can choose the undeclared transition program, which gives them an additional semester to apply to a new major. For PCP programs as well as certain other University programs, students are strongly encouraged to apply for the change of major to the desired program by July 15 of each academic year to prevent being closed out if program capacity is exceeded. Application forms and information about these processes as related to PCP programs can be obtained from the PCP Dean’s Office; for programs outside PCP, the specific college policies and procedures should be followed. Starting in 2016, U4 (senior) students seeking a chance of major to the PharmD program must apply through the PharmCAS process (more information available from PCP Dean’s Office).

V. Program Requirements and Academic Standards

Residency: min and max

Students admitted into the first professional year of the program must be enrolled for at least four years (i.e., 8 semesters of at least 12 credits/semester) in residency at PCP, regardless of the extent or nature of previous academic experience. Completing the BS programs in PCP requires that students enroll at the University for at least half of the total number of credits required for graduation or that
students enroll at the University for a minimum of four fall and/or spring semesters of full time (at least 12 credits/semester) study.

The maximum amount of time to complete the BS programs in PCP is six years from freshman entry into the University to complete all degree requirements. For the PharmD program, students have a maximum of six years from entry into the first professional year (P1) of the program to complete all degree requirements. Inability to complete the degree in the allotted time frame will result in the student being withdrawn from the program. Approved leaves of absence are not counted as part of the maximum time to degree.

**Progression in PCP programs**

Progression in the PharmD program as defined by PCP faculty is the year-to-year advancement in the program, based on satisfactory completion of all coursework, achievement of minimum academic and program-specific grade point averages, and meeting any additional proficiencies in a timely manner. Thus, **students must satisfactorily complete all requirements of a given program year before advancing to the next program year**. This is of particular import in the professional component of pharmacy education because of the incremental nature of knowledge, skill, and attitude development, and the interplay between didactic coursework and experiential training. Given the integrated/coordinated nature of components of the Doctor of Pharmacy program, program year becomes an added restriction to pre-requisite and co-requisite coursework for eligibility in certain courses or experiences.

Generally, progression into the next program year can be determined after spring semester grades are complete; the registrar’s office officially advances students’ program year in the WebAdvisor system via a batch process prior to the beginning of the next academic year, after verification of successful completion of all required coursework and the absence of academic or conduct difficulties. In some cases, because of unsuccessful completion of a required course during the fall semester, progression will be affected earlier. Thus, lack of successful completion of one (or more) required, non-elective professional course(s) (with the prefixes PA, PC, PH or PP) WILL result in a delay in progression until that coursework can be successfully completed, at its next scheduled course offering (for policy, see below under course offerings and exam scheduling). A delay in progression WILL result in a longer time to complete the program (frequently a year for courses only offered once per academic year); the anticipated graduation date will be modified in WebAdvisor to reflect such a delay in progression.

For the BS programs, a similar perspective is applied to advancement in the program, but is somewhat more flexible being based on completing a majority of program specific coursework related to a given year in the program. For many specific courses in the BS program, program year does not determine eligibility to take specific courses; generally it is solely prerequisites and/or co-requisites. However, a delay in progression WILL result in a longer time to complete the program, and most likely delay graduation.

No one plan is optimal for students facing non-progression. To help clarify the options and identify resources available, frequently asked questions are addressed by the PCP Dean’s office in Appendix H.

**Pharmacy Student to Student Pharmacist transition: pre-professional to professional phase**

For graduating classes of 2014-21 (Catalog Years 2008-15), advancement from U2 (second undergraduate year) into P1 (first professional year) occurs when the following criteria are met: all required courses since matriculation are taken at USciences; all required first- and second-year coursework is successfully completed; BOTH a minimum cumulative GPA of 3.00 and a natural science/math GPA of 2.50 are achieved by the last day of the spring semester of second year; and a professional education readiness competency (PERC) interview is successfully completed. Students who fail to meet these requirements will be withdrawn from the PharmD Program. Students with a
cumulative grade point average of a 2.50 and above and who have successfully completed the PERC interview, will be automatically reviewed for readmission into the professional year of the PharmD program on a competitive basis, space permitting.

For graduating classes of 2022 and beyond (catalog years 2016 and beyond), progression from undergraduate status into P1 (first professional year) occurs when the following criteria are met: all required professional pre-requisites coursework and general education requirements excluding multidisciplinary inquiry are completed; BOTH a minimum cumulative GPA of 3.00 and a natural science/math GPA of 2.50 are achieved prior to entry into the P1 year; and a professional education readiness competency (PERC) interview is successfully completed. Students who do not meet these criteria will be withdrawn from the program; if their cumulative GPA is above 2.50, these students will be reviewed for readmission into the program on a competitive basis, space permitting. If not readmitted, students may apply to other programs. The BS PHHCS degree will be conferred upon successful completion of general education requirements and the specific coursework for the degree.

Students entering the PharmD program directly from high school (direct entry students) must enroll for a minimum of 12 credits hours each semester and be enrolled at the University for at least four semesters of pre-professional education. In the professional component of the PharmD program, all students (direct entry from high school, transfers and change of majors) must be enrolled during P1-P3 as full-time students (minimum of 12 credit hours per semester) for a minimum of an additional six semesters, plus a final year (P4) of Advanced Pharmacy Practice Experience (APPEs) distributed over a calendar year.

The PERC interview is a standardized, behavioral-based interview to assess students’ readiness for professional education, and is mandated for compliance with accreditation standards. It is separate and distinct from the academic standards for progression into the professional component of the Doctor of Pharmacy program. The standardized interview is a confidential, fifteen to twenty minute “conversation with a purpose”, between the student and two PCP faculty/professional staff (assured by confidentiality agreement, Appendix I). If the student is unsuccessful in his/her first attempt, a success plan with suggested readings and activities to improve the student’s knowledge base, confidence and ability to communicate their perspectives will be provided to the student. A second and final opportunity to successfully complete the PERC interview will be provided to students enrolled in the pharmacy program in the spring semester. If, after two opportunities, the student does not successfully complete the PERC interview, the student will be withdrawn from the PharmD program even if the other criteria for progression into the professional years are met. If such an event should occur, the student may opt to apply for a change of major to other PCP or University programs. Further information about the PERC interview process is communicated to students through class meetings and through the PCP Dean’s Office.

Students who are withdrawn from the PharmD program may apply to other programs at the University. Students may reapply to the P1 year of the Doctor of Pharmacy program as a change of major after the completion of four semesters within that major or completion of a BS degree. PCATs are not required for internal change of major applicants (in contrast to external transfer applicants), although a successful PERC interview is required and the process is competitive.

**Academic Standards (PharmD professional years)**

Application of academic standards to students is based on their catalog year, which is generally determined by when, and into what program year, they matriculate to the University (further information about catalog years can be found in the University Student Handbook). Both the University Catalog and the University Student Handbook outline the academic standards for student cohorts based on their catalog year. Changes in academic standards are generally made in advance of student matriculation into the program; an exception may occur if needed for reasons such as ensuring compliance with accreditation standards. The PCP Dean’s Office monitors compliance with all academic standards as
well as student progression through the program. Currently, PharmD students may be subject to different academic standards based on their catalog year (date of matriculation) but they are consistent throughout their program (from U1-P4). To promote clarity and understanding of the academic standards, all P1 student pharmacists in the PharmD program must acknowledge their understanding of the expectations of the professional program and their academic standards by reading and signing the Professional Expectations and Academic Standards Acknowledgement document (see Appendix E); the signed acknowledgement form is retained by the PCP Dean’s Office.

In the professional years of the PharmD program (i.e., P1-P4), students who achieve less than a semester GPA of 2.30 will receive a program probation. Students who exceed two program probations or do not complete program requirements within the maximum allowable residency time (see above under residency) will be withdrawn from the program.

All students enrolled into the PharmD program are subject to the “C- rule”; they must achieve a grade of “C-” (“P” if course is pass/fail) for satisfactory (successful) completion of all non-elective required courses with the prefix PA, PC, PH, or PP. This rule applies to all required professional courses offered by PCP from 100-600 level, and includes courses with credit hour values from 1-5 credits. Elective courses, even if required, are exempt, as are required courses from outside PCP.

Students who are unsuccessful (receive a grade less than C-) in such course(s), must retake the course(s) successfully, prior to moving on to subsequent courses for which said course(s) is(are) a prerequisite. The need to retake the course WILL result in a delay in progression, if the course(s) in which they were unsuccessful is(are) only offered once during an academic year, or if they are unsuccessful during the second offering of a course offered both semesters of the academic year. Course offering frequency is determined by enrollment projection (minimum of 10 eligible students per University policy), space and faculty availability, resources, and pedagogical criteria. In such cases, students will remain in the same program year for four semesters instead of two, and will have the opportunity to consider a minor, strengthening coursework, or employment/diversification opportunities. Students who achieve a grade less than “C-” upon repetition of the same non-elective required courses (with prefix PA, PC, PH, or PP) will be dropped from the program, and will have to change their major if they wish to remain at the University. If a student receives a grade of “F” in the same course twice, they will be dropped from the University rolls. As outlined in the University Student Handbook, students who are dropped from the University rolls for failing (grade of F) the same course twice are eligible to immediately apply for readmission to a different program at the University, contingent upon program capacity and ability to demonstrate likely success in new program.

It should be noted that many professional courses also indicate specific co-requisites. A co-requisite course is one designed to be taken with a given course simultaneously the first time the given course is taken; the rationale for co-requisite courses is based on the integration of knowledge and skill acquisition. However, if a student is not successful in a given course, but is successful in its co-requisite, the co-requisite course does not have to be retaken when the given course is repeated. In such a case, the student might be advised to audit or review co-requisite course material upon course repetition to maximize likelihood of success the second time through.

Additional PharmD Program and Experiential Requirements

Student pharmacists must be certified in basic life support (BLS) for healthcare providers (HCPs) through the American Heart Association, or CPR/AED for Professional Rescuers and HCPs through the American Red Cross, throughout the professional years (P1-P4) of the program (e.g. certification as P1 in fall and recertification as P3 in spring). Students in classes prior to 2018 must be certified in first aid/CPR according to the American Red Cross, BLS for HCPs, or CPR/AED, prior to P4, or as required by experiential training (IPPEs or APPEs). Training is readily available on campus, at a reduced cost compared to outside vendors, by the PCP faculty and student-led CPR Leadership Team.
Competence in pharmaceutical calculations must be demonstrated via successful completion of the Calculations Proficiency Exam in the final didactic semester on campus, prior to progressing to P4. Students are also required to undergo periodic criminal background checks and/or drug screens throughout the professional years to participate in the IPPE and APPE components of their training. Students may be required to participate in additional assessments (e.g. Pharmacy Curriculum Outcomes Assessment (PCOA), course evaluations, surveys, etc) to provide feedback to the college about courses, curriculum, and their experiences as student pharmacists.

Students and the University must satisfy requirements imposed by training sites as a condition of student participation in experiential education, starting with Introductory Pharmacy Practice Experience (IPPEs) in the first professional year (P1) and continuing through P2 and P3, and furthered in the Advanced Pharmacy Practice Experience (APPEs) in the final year of the program. In order to meet experiential education requirements, students entering P1, and as needed during the professional phase, must be able to:

- Provide a Social Security number.
- Provide a medical history including immunity to infectious diseases via documentation of infectious disease history (e.g., measles, rubella, hepatitis B) and/or vaccinations, including titers for certain agents, as requested by and per site or program schedule.
- Have a negative PPD or chest x-ray, if indicated.
- Document completion of a physical examination.
- Submit to a criminal background check and other background checks with disclosure to site of any convictions consistent with their criteria.
- Submit to a drug screen with disclosure to site of any positive findings for drugs that are taken without medical supervision.
- Provide evidence of and maintain personal medical insurance coverage at all times while at off-campus training sites.
- Provide clinical training certifications (e.g. CPR or BLS) that are required by site.
- Meet other requirements as determined by a training site.

Depending on the requirements of the affiliation agreement between the site and the University, the documentation requested may be coordinated by or at the training site, or facilitated by the University using campus-based programs, or an external agency. In all cases, the student is ultimately responsible for ensuring all prerequisites have been satisfied, with documentation submitted in a timely manner, per deadlines, and any associated costs. Placement in experiential sites will depend on timely completion of prerequisites and student identification of preferences, but may be subject to a lottery system if supply and demand are mismatched. Students are required to obtain their own transportation and to assume associated costs for their own automobile or public transportation to and from experiential sites.

Doctor of Pharmacy students are expected to agree and comply with the conditions of the Pharmacy Practice Professionalism Agreement during pharmacy practice experiential coursework. A student unable to comply with the agreement may be removed from a rotation, may fail a rotation, or may be administratively withdrawn from the Doctor of Pharmacy program.

If a student is unable to satisfy the requirements listed above, the University may be unable to place the student in an experiential education setting. As a result, the student may be unable to complete the graduation requirements outlined by the major and may be unable to obtain licensure. Specific licensure requirements for each state's board of pharmacy and licensure examination pass rates for graduates can be found at the National Association of Boards of Pharmacy website: https://nabp.net. Licensure pass rates, on time degree completion, and other programmatic measures for PCP's PharmD program are posted on the University website: http://www.usciences.edu/pharmd.
Academic Probation, Progression Delays, Leaves of Absence, and Missed Course Work/Credit

Academic Probation: For students in Catalog Years 2009 and later: The college deans will review the scholastic progress of all students at the end of each semester. Students, whether full-time or part-time, who have not achieved the required minimum cumulative grade point average of 2.00, or who have received a failing grade (“F”) in two or more courses in the most recent semester (whether full-time or part-time), will be placed on academic probation. A semester is a 15-week unit of instruction and assessment. Students on academic probation are required to meet with an academic advisor to develop and complete an Academic Improvement Plan (AIP) and comply with the Academic Improvement Policy (University Student Handbook).

Progression delays: Students who are unsuccessful (receive a grade less than C-) in a required professional course(s), must retake the course(s) successfully at the next offering, prior to moving on to subsequent courses for which said course(s) is(are) a pre-requisite. The need to retake a course at its next offering WILL result in a delay in student’s progression to the next program year, if the an unscheduled reoffering of course does not meet course offering frequency criteria or if student is ineligible because of multiple courses that need to be retaken. Course offering frequency is determined by enrollment projection (minimum of 10 students per University policy), space and faculty availability, resources, and pedagogical criteria.

Each semester college administrators determine if a required course will be offered sooner than as scheduled in the Master University Course Schedule for students who are unsuccessful in a professional course. Offering a course sooner is neither automatic nor guaranteed and is influenced by several complex and interwoven issues. These issues include, but are not limited to: university minimum enrollment policy for courses (minimum of 10 eligible students), availability of university resources such as classrooms, laboratories, and technology, availability of qualified faculty, finances, student interest, logistical considerations and pedagogical issues.

Leaves of absence: As described in more detail in the University Catalog and University Student Handbook, students may request a leave of absence. Short term leaves of absence (SLOA), of no more than 10 business days duration, are initiated by making contact with his/her college dean. The student may be asked to provide documentation to verify the circumstance. Upon approval, the college dean will notify the applicable chair, program director, course instructors, academic advisor, and the Division of Student Affairs.

A longer duration leave of absence (LOA) is intended for situations where the student is unable to complete the current semester and may be unable to attend the subsequent semester. Permitted reasons include, but are not limited to, medical, personal or financial problems, or military service. An authorized leave permits the student to leave the University at the designated time without the necessity of formal reapplication and admissions processing. An LOA for other than medical or psychological reasons is initiated by making contact with the college dean; medical leaves of absence are coordinated through the Dean of Students’ office, and must be initiated and approved there before the college dean implements notification, as described above.

Missed Course work/ credit: Academic records review performed at the end of each semester identifies students who have missed course work or credits. Students are required to complete all required courses and credits in order to progress to their next program year and ultimately in order to graduate.
Dismissal and Readmission

Dismissal: Students who achieve a grade less than “C-“ upon repetition of the same non-elective required courses (with prefix PA, PC, PH, or PP) will be dropped from the program, and will have to change their major if they wish to remain at the University. If a student receives a grade of “F” in the same course twice, they will be dropped from the University rolls. As outlined in the University Student Handbook, students who are dropped from the University rolls for failing (grade of F) the same course twice are eligible to immediately apply for readmission to a different program at the University, contingent upon program capacity and ability to demonstrate likely success in the new program.

Readmission: There is no guarantee of readmission following a separation from the University. The faculty reserves the right to readmit a student, and in this matter the faculty shall be the sole judge. Applications for readmission should be filed with the dean of the college in which they seek to reenroll per PCP admissions deadlines (April 1, all programs; October 15, BS or graduate programs). Students who were dropped from the rolls of the University for either three semesters with a cumulative grade point average less than 2.00 or conduct expulsion will not be granted readmission for at least one calendar year from the date of separation from the University.

As described in the University Student Handbook, the application for readmission must provide evidence of the student’s ability to complete his/her degree program, and must be accompanied by official transcripts of all course(s) taken at other accredited colleges or universities during the period of separation from University of the Sciences.

Students who leave the University to perform US military service will be readmitted with their previous academic status intact, for an absence of up to five years in length. Students must provide advance notice of their intent to perform US military service and must also provide notification of intent to reenroll. Due to the nature of professional education and the interplay between didactic and experiential coursework, there is significant risk to a student who leaves the University for military service for successful completion of the professional component of the PharmD program. As a result extensive documentation of expectations and more intensive monitoring by the PCP Dean’s Office may be required. This readmission policy, as well as the requirements for advance notice and notification to reenroll, is subject to exceptions as noted in the law.

Fresh Start readmission may be selected by a student under the following circumstances: 1) the student has left the University after failing to achieve good academic standing, and 2) the student will have been absent from the University for at least one year between the date of withdrawal and the start date of the semester for which readmission is sought. Please refer to the University Student Handbook for details on fresh start readmission.

Rights to Due Process and Appeals

At the end of each semester, transcripts of all students enrolled in PCP are reviewed to ascertain if students have met the academic standards and requirements of their programs. Faculty actions include “dropped from the rolls”, defined as dismissal from the University rolls, and “dropped from the program”, defined as dismissal from the PharmD program.

Students who are withdrawn from the Doctor of Pharmacy program or are dismissed by the University are requested to meet with a college Dean who reviews their situation, learns of any concerns
or issues that the student may raise and provides information regarding the Admissions Appeals policy (see Appendix L). The academic standards are applied, issues are resolved, or the student is referred to the University’s Grievance Policy (University Student Handbook). In exceptional cases, a student may appeal the faculty action because of an extenuating circumstance. The policy and procedure for the appeals process is included in Appendix L. The University’s Grievance Policy also includes an appeals process.

Professional (PharmD) Program Outcomes Measures and Program Effectiveness

The primary outcomes data for the PharmD program are first time pass rates on licensure exams, specifically the NAPLEX and the MPJE (law exam). These data are available on an annual basis from NABP (National Association of Boards of Pharmacy) through the following website: https://scores.nabp.net. These data are also summarized, and analyzed at least yearly, and posted on the PCP Central Repository (Faculty and Staff) in ACPE reports. Longitudinal performance data for the NAPLEX are shown here, indicating that program outcomes are met.

![NAPLEX FIRST TIME PASS RATE](image)

Program outcomes are also monitored by survey. PCP participates in a number of surveys conducted by AACP, the American Association of Colleges of Pharmacy, including the annual graduating student survey, faculty survey, preceptor survey and alumni surveys. These surveys provide feedback from different perspectives on various components of the program related to knowledge, values, attitudes and behaviors expected in the profession, as well as process components of the educational experience. The results from these surveys are examined by the Assessment Committee of PCP Council, PCP faculty, and the Dean’s office on a periodic basis and are used to drive continual quality improvement for the program and for the college. The experiential group collects data from IPPE and APPE preceptors regarding proficiency of students at their experiential sites.

Program effectiveness is monitored by a number of means, including additional in-house surveys as well as from AACP surveys in order to illuminate progression and retention data as well as information about student satisfaction, faculty satisfaction, job success post graduation, job satisfaction, job types and further training pursuits. In addition, the PCOA (Pharmacy Curriculum Outcomes Assessment), a standardized, national exam administered by NABP, based on a blueprint for the NAPLEX exam and national survey data regarding PharmD curricula, is required for P3 student pharmacists as a means to examine curricular effectiveness, and as part of accreditation reports; it allows
individual students to index their knowledge base against their same program year peers at PCP and nationally, and allows programs to index their students’ performance to that of student pharmacists at other colleges of pharmacy nationwide in order to drive adjustments and improvements to the program. These results are shared with the PCP community via PCP Council and Council Committees, PCP Student Council, class meetings, a P3 faculty-student brunch, as well as the university community via annual Institutional Effectiveness program SLO and operations assessment reports.

**Academic Standards for BS programs**

The academic standards for the BS programs in PCP are consistent with their nature as baccalaureate programs, and are aligned directly with the academic standards of other BS programs at USciences: a minimum cumulative GPA of 2.00 must be maintained in order to remain in good academic standing, and successful completion of courses requires a minimum grade of “D-“. Successful completion of a given course must be achieved prior to moving into subsequent courses for which the said course is a pre-requisite.

As described in the University Student Handbook, any student who has not achieved the required minimum cumulative GPA of 2.00 or who has received a failing grade in two or more courses in the most recent semester will receive an academic probation. They will be required to meet with a professional academic advisor to complete an Academic Improvement Plan. Students exceeding two consecutive or three nonconsecutive semesters of academic probation will be dropped from the rolls. If a student receives a grade of “F” in the same course twice, they will be dropped from the University rolls. As outlined in the University Student Handbook, students who are dropped from the University rolls for failing (grade of F) the same course twice are eligible to immediately apply for readmission to a **different** program at the University, contingent upon program capacity and ability to demonstrate likely success in the new program.

**VI. Undergraduate and Professional Education: Academic Expectations and Support**

**Academic Expectations**

All PCP students are expected to develop a strong knowledge base in their disciplines and to hone the ability to apply that knowledge to laboratory and clinical problems while continuing to develop skills which will allow them to become lifelong learners and leaders in their chosen profession or careers. They are expected to be fully engaged in their studies: i.e., to be able to learn independently, to take responsibility for their actions and their learning, and to be able to function cooperatively, in the classroom and outside, with peers and with instructors, to meet deadlines appropriately, and to reflect upon and enhance not only their acquisition of knowledge but its integration, analysis and application in solving problems. Students are expected to strive for excellence, maintain a high level of integrity, and respect themselves and the people with whom they interact.

For Doctor of Pharmacy students, professional education further demands a willingness to engage not only in the classroom but with patients, caregivers, preceptors and other individuals at practice sites; to build and integrate their knowledge from individual courses across those courses, across disciplines, and to their practice experiences; to sharpen their own mechanisms of self-motivation, self-confidence, self-reflection and assessment; and to express their compassion and concern for their patients and clients through communication and service. The challenge of professional education is in the development of attitudes and behaviors, in addition to knowledge and skills, that allows the student pharmacist to transition to a pharmacist professional and future colleague. Students coming into P1 are introduced to the elevated professional expectations of them as student pharmacists
and must sign an acknowledgement of those professional expectations (Appendix J). As shown below in a graphic developed by ACPE, the overall goal of the curriculum is to support student pharmacists’ evolution from knowing, to doing, to being.

Some expectations of professional education are largely implicit. For example, attendance is not required in many professional courses (see course syllabi for attendance policies), but it is likely expected by most, if not all faculty, in part because active learning exercises and even lecture-based delivery of information is not the same when only part of the group is engaged (or for that matter present in class). Academic integrity is an expectation (please refer to USciences Student Handbook), both in the classroom, in course assignments and assessment, in experiential training, and in face-to-face or electronic discourse. While an explicit and distinct honor code does not exist for PCP, the University is exploring implementation of a University-wide honor code. Respect for other persons, with open acceptance of diversity and differing points of view, is also an expectation in all communication from face-to-face, to emails and in social media. Harassment or discrimination in any form, including but not limited to age, race, religion, sexual orientation or circumstance, is not tolerated. Lastly, learning is a shared enterprise between students and faculty, but it is expected that the student, in taking responsibility for his/her own learning, will ask questions or seek support for any difficulties they encounter; only then can faculty provide individualized support (email, office hours, in class) and/or refer students for support services as needed.

**Course Offerings and Exam Scheduling**

Courses that are required in PCP curricula are offered by various departments to meet the needs of students in the programs they support. In PCP and other colleges, course offerings are determined by the department offering the course, in response to student need, faculty workload, and available resources such as available faculty, classroom space, and funding to support the offering. University policy requires a minimum enrollment of ten students for an undergraduate or professional course to be offered.

In general, course offerings are planned for the upcoming semester by the department and then communicated to the Registrar prior to the start of the pre-registration period (usually mid-semester). Considerations include, but are not limited, to program requirements and enrollment, faculty workload and available classroom space. For certain types of courses (e.g. laboratory courses, professional electives, especially therapeutics professional electives), registration is initially restricted to specific
class years and then opened to all eligible registrants later until the cap is reached. This is done to ensure on-time completion of requirements by all students per the program description.

Course and exam scheduling are done by departmental faculty in collaboration with the Registrar’s office, and for final exams, University policy dictates no more than three finals within a 24 hour period. Course faculty schedule exams during the semester as deemed pedagogically appropriate, usually during class or reserved time in class schedule, per identification of appropriate exam space in consultation with the registrar. Prior to the beginning of each semester, the Dean’s Office collects information from course coordinators about desired exam dates and works collaboratively across courses to assemble a PCP required exam schedule, in order to detect and resolve exam conflicts (less than 36h between exams) prior to the start of classes.

Issues and Conflict Resolution

Issues in PCP courses raised by students are, by policy, addressed according to a set ‘chain of command’: first, issues should be brought to the attention of the course instructor; if unresolved, then they should be brought to the attention of the course coordinator; and lastly, if still unresolved, they should be brought to the attention of the chair of the department offering the course. As described in greater detail above (Student Complaints Policy), broader concerns about aspects of the curriculum can be shared with the PCP Student Council or to PCP Council standing committees. PCP Student Council class representatives may work with the course coordinators as well as the Dean’s office to address broader academic issues. The University Student Grievance Policy also applies to issues arising in PCP (further information in the University Student Handbook).

Student Support Services

PCP students are eligible to receive and encouraged to solicit aid from the university Student Affairs Office, especially as related to accommodations for learning (ADA), student health and counseling (SHAC), student conduct, study abroad, financial aid, and student academic support services (SASS), including peer and professional tutoring, as well as career services. Refer to USciences Student Handbook for more details.

PCP Academic Advising

BS in Pharm/Tox and BS in Pharm Sci students are assigned academic advisors from within the Department of Pharmaceutical Sciences when they matriculate into the program, usually as entering U1 students. They may also enter the program later, as transfer or change of major students.

Doctor of Pharmacy students are usually assigned university professional academic advisors as they enter the program in the U1 year, and then are reassigned by the PCP Dean’s Office to PCP faculty, generally from DOPP/PA, who serve as academic advisors and mentors during the professional years of the program. A smaller group of faculty familiar with the IPE programs serve as advisors to those students in the IPE-program at Cooper. With course information and registration available electronically, registration advice or signatures are usually not needed.

The professional advising done by PCP faculty is oriented more toward an enhanced advisor-advisee mentorship, to facilitate goal setting, career planning discussions, and interactive feedback between advisors and their student pharmacist advisees. Rising P1 students are ‘matched’, where possible, with a faculty advisor/mentor with whom they share some initial career interest, as determined by survey. As students’ interests evolve through their experiences in the professional program, student pharmacists will be supported not only by their assigned advisor/mentor, but also by initiating and pursuing mentoring relationships with other faculty with whom they have common professional interests.
Extra- and Co-curricular opportunities

Mentored Research with a PCP faculty member is an available opportunity for all PCP students, and is recommended to those students who have an interest in research and development of new pharmaceuticals and/or therapies for disease.

There are a number of courses that students in all three PCP programs can take as electives to pursue their interest in research. They include: PA 495 (Research in Pharmacy Administration), PC 395 (Research Experience) and PC 495 (Independent Research); PH 399 (Research in Pharmaceutics) and PP 495 (Research in Pharmacy Practice). Registration for these courses requires permission from the faculty member who will serve as mentor, and per University policy, requires permission from the chair of the department providing the course. For Doctor of Pharmacy students, PCP laboratory courses required by the BS programs, e.g. PC 320 (Techniques in Pharmacology/Toxicology), PC 330 (Biometricals in Pharmacology/Toxicology), and PH 398 (Research Methods in Pharmaceutics) can be used to fulfill the required professional elective credits. However, these courses are subject to space limitations, and BS program students who are required to take these courses are accommodated first.

Other options for obtaining laboratory and/or research experience include: laboratory assistant positions through Work Study, student employment as research assistants with faculty who have externally funded grant support, and elective laboratory courses.

Of particular note for PharmD students is the wide array of opportunities to become involved in clinical research projects through the aforementioned PP 495 course. In addition, a relatively new option within experiential learning is the opportunity to take PP 496: IPPE Project in Pharmacy Practice as a patient-focused institutional elective. Not only are students gaining first-hand experience in clinical research, but also how it can be applied to change and improve patient care. Moreover, many students who participate in such clinical research have the opportunity to present their work at national pharmacy meetings. Forty five students in the graduating class of 2016 presented their research at national pharmacy meetings.

PCP students who are Honor’s Scholars (University’s Honors program) are required to participate in an independent, student-driven research project, in addition to participating in honors level sections of required courses, where available, and in specific events designed to enrich the academic experience (please see the University Catalog for further information).

The PCP Student Council has evolved into a University-recognized student-led organization to provide enhanced communication and engagement with PCP faculty and administrators. The organization includes class representatives from each class within PCP programs (Doctor of Pharmacy and the two BS programs), as well as representatives from PCP student organizations. The goal of the organization is to provide service to the students of the College, plus enhance communication and engagement between faculty/administration and students in different class years and programs. Meetings are held monthly, are open to representatives as well as any interested students, with a focus that switches each month from issues to opportunities and reports from students involved in organization and PCP Faculty Council Committees. Each year, the Dean of PCP charges the Student Council with specific tasks or information/perspective gathering, and the membership also establishes its own initiatives. Examples of Dean’s charges that have been met by the PCP Student Council include developing recommendations about academic ethics and honor code, providing feedback on the most recent accreditation self study and exploring underlying student perspectives reported in survey data, and enhancing visibility and engagement across campus. Examples of Student Council-led initiatives include University recognition as a student organization and a successful alcohol misuse awareness and safety campaign. PCP Student Council Executive Board for the 2016-17 year includes: President: Fatima Ali; Vice President: Sarah Park; Speaker of the House: Annmarie Cristiano; Secretary/Treasurer: Darius Sunny; and SGA Liaison: Maria Carilli.

PCP Council student representatives play an important function in forwarding students’ perspectives about the operations of the college. Most PCP Faculty Council committees have student
representation, and student representatives to the Curriculum Committee and the Assessment Committee are voting members. In addition, student chapters of professional organizations are represented on the PCP Student Council, and bring forward issues to Council for resolution, as well as provide information to the larger PCP community regarding events and activities, thus enhancing communication.

**Student-run organizations**, many with foci/interests related to aspects of professional development and/or networking related to programs within PCP, provide another mechanism for students to engage with each other as well as with faculty/administration, alumni, and to develop their professionalism and career opportunities. Such organizations may be student-run subsidiaries of national professional organizations within the University, or simply University committees. The PCP Dean’s Office funds membership to one student organization for P1 and P3 students. For further information, please refer to the PCP Central Repository (fss) on Bb, under information for students. Those student organizations of particular interest to PCP students include: ACA, AMCP, APhA-ASP, ASCP, DIA, NCPA, Phi Delta Chi, Phi Lambda Sigma, PPAG, Rho Chi, SSHP-PSHP and the Student Research Society (an amalgam of the former Pharm Sci and Tox Clubs). Further information about these organizations can be found in the University Student Handbook. PCP policies regarding student travel and student organization budgets is provided in Appendix L.

**The StEPP program** (Student Excellence in Professional Preparation) is a co-curricular program that focuses on promoting professional attributes of leadership and service in Doctor of Pharmacy students. The components of the program include engaging P1 students as StEPP mentors for underclassmen, helping to promote professional attitudes and behaviors in student pharmacists, and as a means to demonstrate their own developing leadership skills. Other areas include development of programming to advance career development, leadership skills, and professional service commitment in student pharmacists. Individualized student development will be assessed with the intent to promote more well-rounded, well-informed, competent, professional and satisfied pharmacy graduates.

The **Interprofessional Education (IPE)** program with Cooper Medical School at Rowan University (CMSRU) commenced in fall 2012 and has now reached maturation with the graduation of its inaugural group of pharmacy and medical students. This program initially engaged 24 P1 Doctor of Pharmacy students to learn and work with the inaugural class of 50 M1 medical students at Cooper during the 2012-13 academic year. These students have been able to learn first-hand about their respective professions and have worked together to provide patient care and medications at a student-run clinic in Camden, NJ. Each year, a new group of P1 students (~ 25-30) is recruited to work with entering M1 and returning M2, P2, and P3 students with expansion of the clinic first to 2 afternoons per week and now to three days/week, which will continue for the foreseeable future. For pharmacy students, this program provides an alternate longitudinal IPPE experience to the IPPEs described in the model curriculum, through an alternate series of IPE-IPPE courses (I-VI). These alternate IPPEs are characterized by earlier student pharmacist engagement in direct patient care, team building and co-learning with students of another healthcare profession, and expanded opportunities for clinical research and APPEs within a familiar healthcare system. (See PCP Dean’s Office (Dr. Morel), GH 2016, for further information)

Other IPE elective courses and activities engage students in multiple USciences health professions and also with other institutions such as the University of Pennsylvania. The goal is that IPE experiences will touch ALL students in the PharmD program, as described in the 2016 ACPE Standards. Moreover, IPE will be threaded throughout the competency-driven professional curriculum.
APPENDICES

Appendix A: Program Outcomes & Objectives for the PharmD program

PharmD Program OUTCOMES and OBJECTIVES
(approved by PCP Council, 4/17/14)

Program Outcomes:
PCP Doctor of Pharmacy graduates will be ready to enter the profession of pharmacy by demonstrating competency in entry-level pharmacists roles (as outlined in the 2013 CAPE Outcomes). Each graduate will possess the knowledge, skills, and attitudes as follows.

● as a life-long LEARNER: develop, integrate, and apply knowledge from the foundational sciences to evaluate scientific literature, explain drug action, solve therapeutic problems, and advance population health and patient-centered care.

● as a medical CAREGIVER: provide patient-centered care as the medication expert by collecting and interpreting evidence, prioritizing, formulating assessments and recommendations, implementing, monitoring and adjusting plans, and documenting activities.

● as a medication use MANAGER: manage patient healthcare needs using resources to optimize safety and efficacy of medication use systems.

● as a health and wellness PROMOTER: design prevention, intervention, and educational strategies for individuals and communities.


● as a PROBLEM SOLVER: identify problems, explore and prioritize potential strategies, and design, implement and evaluate a viable solution.

● as an EDUCATOR: educate ALL audiences and assess understanding of pharmacy information in the most effective and enduring manner.

● as a PATIENT ADVOCATE: assure that the patients' best interests are represented.

● as an interprofessional COLLABORATOR: actively participate and engage as a healthcare team member by demonstrating mutual respect, understanding, and values to meet patient care needs.

● as a compassionate and caring INCLUDER: recognize the social determinants of health to diminish disparities and inequities in access to quality care.

● as a COMMUNICATOR: effectively communicate verbally and nonverbally when interacting with an individual, a group, or organization.

● as a SELF-AWARE individual: examine and reflect on personal knowledge, skills, attitudes, beliefs, biases, motivation, and emotions that can enhance or limit personal or professional growth.

● as a LEADER: demonstrate responsibility and accountability for creating and achieving shared goals, regardless of position or environment.

● as an INNOVATOR: engage in innovative and entrepreneurial activities to accomplish professional goals through creative and proactive thinking.

● as a trusted PROFESSIONAL: exhibit values and behaviors such as altruism, integrity, and commitment to excellence consistent with the trust given to the profession by patients, other healthcare providers, and society.
## Appendix B: Competencies and Measurable Abilities (SLOs)

<table>
<thead>
<tr>
<th>Competency</th>
<th>Measurable abilities</th>
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| **1. Patient Safety - Accurately Dispense Medications:** Demonstrate a commitment to and a valuing of patient safety by assuring accurate preparation, labeling, dispensing and distribution of prescriptions and medication orders. | 1a. Accurately prepare and dispense medications or supervise the preparation of medications  
1b. Evaluate the acceptability and accuracy of a prescription and verify that the information is correct then correctly prepare the prescription and label for dispensing  
1c. Evaluate appropriateness of medication orders by correlating the order with patient-specific data and drug information  
1d. Compound parenteral and non-parenteral drug products using accurate calculations, pharmaceutical components, and techniques  
1e. Dispense medications and devices in accordance with legal requirements  
1f. Provide safe, accurate and time-sensitive medication distribution  
1g. Appropriately compound, dispense, or administer a medication, pursuant to a new prescription, prescription refill, or drug order  
1h. Accurately process and dispense medication pursuant to a new prescription, prescription refill, or drug order  
1i. Accurately evaluate and process a new prescription, prescription refill, and medication order in accordance to the law  
1j. Determine appropriate storage of compounded medications before and after dispensing |
| **2. Basic Patient Assessment:** Collect record and assess subjective and objective patient data to define health and medication-related problems. Patient information must be collected in a manner demonstrating knowledge of patient educational level, the unique cultural and socioeconomic situations of patients, and comply with requirements for patient privacy. | 2a. Collect patient histories in an organized fashion, appropriate to the situation and inclusive of cultural, social, educational, economic, and other patient-specific factors affecting self-care behaviors, medication use and adherence  
2b. Obtain, record, and interpret a history from a patient to minimally include drug allergies and reactions, drugs (prescription, OTC, and herbal) being taken, doses being used, cultural, social, educational, economic, and other patient-specific factors affecting self-care  
2c. Patient Assessment: Obtain and interpret patient information to determine the presence of a disease, medical condition, or drug-related problem(s), and assess the need for treatment and/or referral  
2d. Gather and organize accurate and comprehensive patient specific information  
2e. Obtain and interpret patient information, inclusive of cultural, social, educational, economic, and other patient-specific factors affecting self-care behaviors, medication use and adherence to determine the presence of a disease, medical condition, or drug-related problem(s), |
including a basic medication history from a patient to include drug allergies, a description of allergic reactions, drugs being taken, doses being used, over the counter medications being taken, and herbal/natural products used

2f. Obtain accurate and comprehensive patient history (including drug allergies, a description of allergic reactions, drugs being taken, doses being used, over the counter medications being taken, herbal/natural products being used, self-care behaviors, and adherence)
2g. Gather information necessary to evaluate patient drug therapy (both patient history and utilization of a chart)
2h. Record all patient information accurately, legally and succinctly
2i. Perform a basic review of a patient's medication profile to identify medication allergies, correct doses, duplicate medications, and important drug interactions
2j. Obtain and accurately record a patient's health and medication history
2k. Gather and accurately record a patient's health and medication information from his/her medical record
2l. Evaluate patient information to determine the presence of a disease, medical condition, or drug-related problem(s), and assess the need for treatment and/or referral
2m. Evaluate a patient's medication profile to identify medication allergies, appropriate doses and sigs, duplicate medications, and clinical relevant drug interactions
2n. Identify and prioritize a patient's drug-related problems

<table>
<thead>
<tr>
<th>3. Medication Information:</th>
<th>3a. Summarize key information related to the use of common (Top 200) medications</th>
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<tbody>
<tr>
<td>Demonstrates knowledge of and accepts responsibility for that knowledge of commonly used medications, formulations and drug products.</td>
<td>3b. Identify brand and generic names, dosage forms and usual dosing ranges for common (Top 200) medications</td>
</tr>
<tr>
<td>3c. Describe the mechanism of action of common medications (Top 200 medications) at the molecular, cellular, systems, and whole organism levels</td>
<td>3d. List and describe the mechanism(s) of common drug interactions</td>
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<tr>
<td>3e. Cite the spectrum and common indications for commonly used antibiotics</td>
<td>3f. Identify target drug concentrations for Narrow Therapeutic index drugs</td>
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<tr>
<td>3g. Determine the appropriate storage of compounded medications before and after dispensing</td>
<td>4a. Evaluating medication orders to identify drug related problems</td>
</tr>
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4. Identification and Assessment of Drug
**related Problems:**
Correlate drug related variables and patient related variables to identify and assess drug related problems. Evaluate how the unique characteristics of patients and patient populations impact on manifestations of drug-related problems.

|   | 4b. Assess the urgency and risk associated with identified drug related problems  
|   | 4c. Evaluate patient information and medication information that places a patient at risk for developing drug-related problems |

|   | 5. Mathematics applied to pharmaceutical calculations, compounded medications, dose calculations, and applications of pharmacokinetic calculations: Utilize pharmaceutical and pharmacokinetics mathematics to perform accurate medication calculations. Value the importance of total accuracy in performing and applying these calculations. |
|   | 5a. Perform accurate pharmaceutical calculations, especially involved in the preparation of compounded oral, topical, rectal, ophthalmic, or parenteral preparation, and pharmacokinetic calculation of appropriate doses  
|   | 5b. Apply mathematical principles (e.g., accurately perform dose calculations, kinetics) in pharmacy practice |

|   | 6. Ethical, Professional, and Legal Behavior: In all health-care activities, demonstrate knowledge of and sensitivity towards the unique characteristics of each patient. Comply with all federal, state, and local laws related to pharmacy practice. Demonstrate ethical and professional behavior in all practice |
|   | 6a. Professionalism: Demonstrate caring, ethical, and professional behavior when interacting with peers, professionals, patients, and caregivers  
|   | 6b. Demonstrate sensitivity and responsiveness to culture, race/ethnicity, age, socioeconomic status, gender, sexual orientation, spirituality, disabilities, and other aspects of diversity and identity when interacting with patients, caregivers, and other healthcare professionals  
|   | 6c. Comply with federal, state and local laws and regulations related to pharmacy practice  
<p>|   | 6d. Practice ethically, including maintaining patient confidentiality, responding to errors in care and professional misconduct (including |</p>
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<th>activities. plagiarism)</th>
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<tr>
<td>6e. Intentionally blank</td>
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<tr>
<td>6f. Maintain professional and ethical behavior in all practice environments, demonstrating ethical practice, empathy, cultural sensitivity, and professional communications in compliance with all laws, regulations, and professional standards</td>
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<td>6g. Professionalism: Demonstrate empathy, assertiveness, effective listening skills, and self-awareness</td>
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<tr>
<td>6h. Demonstrate professional and ethical behavior in all practice environments</td>
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<tr>
<td>6i. Apply legal and regulatory principles to medication distribution, use and management systems</td>
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<td>6j. Accept responsibility for patient care</td>
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<td>6k. Make and defend rational, ethical decisions within the context of personal and professional values</td>
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<tr>
<td>6l. Demonstrate empathy, assertiveness, effective listening skills, and self-awareness</td>
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</table>

7. **General Communication Abilities**: Demonstrate effective communication abilities in interactions with patients, their families and care givers, and other healthcare providers. Communication should be consistent with education level, cultural issues, and be empathetic. Elicit feedback validating understanding of communication.

| 7a. Communicate effectively using appropriate verbal, non-verbal, and written communication at a suitable level) with patients, caregivers, and other healthcare providers, at a suitable level for the partner in the interaction, to engender a team approach to patient care |
| 7b. Demonstrate effective communication skills (verbal, non-verbal, and written) at an appropriate level for patients, caregivers, healthcare providers, and the general public |

8. **Counseling Patients**: Provide effective health and medication information to patients and/or care givers and confirm patient and/or care giver understanding of the information being provided.

| 8a. Use effective written, visual, verbal, and nonverbal communication skills to provide patient/caregiver self-management education |
| 8b. Appropriately and accurately provide basic medication counseling to a patient or caregiver receiving a medication |
| 8c. Assess and validate the ability of patients and their agents to obtain, process, understand and use health- and medication-related information |
| 8d. Counsel patients on proper self-care and preventative care |
| 8e. Use appropriate methods of patient education to review indications, adverse effects, dosage, storage, and administration techniques |
| 8f. Use effective written, visual, verbal, and nonverbal communication |
| 30 | 
|---|---|
| **skills to provide education to the patient/caregiver on drug, drug use, self- or preventative care, or other health-related education to healthcare providers** | 8g. Communicate alternative therapeutic strategies to the prescriber to correct or prevent drug-related problems  
8h. Assist a patient in correctly selecting an over the counter preparation  
8i. Develop and provide drug, drug use, or other health-related education to consumers or health providers  
8j. Provide accurate response to drug information requests written and verbally  
8k. Use effective written, visual, verbal, and nonverbal communication skills to counsel and educate a patient or caregiver regarding appropriate medication use – prescription and self-care  
8l. Demonstrate and/or describe proper administration technique for various drug delivery systems (e.g., inhalers, eye drops, etc.) |
| **9. Drug Information Analysis and Literature Research: Assess information needs of patients and health providers and apply knowledge of study design and literature analysis and retrieval to provide accurate, evidence-based drug information.** | 9a. Collect accurate and comprehensive drug information from appropriate sources to make informed, evidence-based, patient-specific or population-based decisions  
9b. Recognize the type of content that is available in general (tertiary), secondary, and primary information sources  
9c. Collect, summarize, analyze and apply information from the biomedical literature to patient-specific or population-based health needs  
9d. Demonstrate utilization of drug information resources  
9e. Describe the type of content in commonly used drug and medical information resources.  
9f. Collect and interpret accurate drug information from appropriate sources to make informed, evidence-based decisions  
9g. Use effective written, visual, verbal, and nonverbal communication skills to accurately respond to drug information questions |
| **10. Health and Wellness – Public Health: Know and apply principles of health and wellness in provision of individual and population-based health and wellness information. Integrate unique characteristics of individuals and populations in design of** | 10a. Participate in activities that promote health and wellness and the use of preventive care measures  
10b. Promote to patients the importance of health, wellness, disease prevention (e.g., immunizations, tobacco cessation counseling), and management of their diseases and medication therapies to optimize outcomes  
10c. Provide preventative health services (e.g., immunizations, tobacco cessation counseling)  
10d. Public Health: Promote to patients the importance of health,
<table>
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<tr>
<th>health and wellness information.</th>
<th>wellness, disease prevention, and management of their diseases and medication therapies to optimize outcomes</th>
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<tbody>
<tr>
<td><strong>11. Insurance /Prescription Drug Coverage:</strong> Utilizing knowledge of a wide array of private and public health insurance options, assist patients and caregivers to obtain their medications and related para-pharmaceuticals in an affordable manner that meets their healthcare needs.</td>
<td>11a. Assist a patient or caregiver in problems related to prescription medication coverage, health insurance, or government healthcare programs</td>
</tr>
</tbody>
</table>
| **12. Innovation and Entrepreneurship:** Engage in innovative activities by using creative thinking to envision better ways of accomplishing professional goals. | 12a. Demonstrate initiative when confronted with challenges.  
12b. Develop new ideas and approaches to improve quality or overcome barriers to advance the profession.  
12c. Demonstrate creative decision making when confronted with novel problems or challenges.  
12d. Assess personal strengths and weaknesses in entrepreneurial skills  
12e. Apply entrepreneurial skills within a simulated entrepreneurial activity. |
Appendix C: Oath of a Pharmacist

At this time, I vow to devote my professional life to the service of all humankind through the profession of pharmacy.

- I will consider the welfare of humanity and relief of human suffering my primary concerns.
- I will apply my knowledge, experience, and skills to the best of my ability to assure optimal drug therapy outcomes for the patients I serve.
- I will maintain the highest principles of moral, ethical, and legal conduct.
- I will embrace and advocate change in the profession of pharmacy that improves patient care.
- I take these vows voluntarily with the full realization of the responsibility with which I am entrusted by the public.
### 1st YEAR (U1)

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<th>Cr.</th>
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<td>General Chem II</td>
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<td>BS103</td>
<td>General Biology I (reasoning skill, IT skill)</td>
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<td>BS104</td>
<td>General Biology II (info lit skill)</td>
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<tr>
<td>WR101</td>
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<td>WR102</td>
<td>Writing and Rhetoric II</td>
<td>3</td>
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<td>MA101</td>
<td>Math 101</td>
<td>3</td>
<td>MA102</td>
<td>Math 102 (Calculus)</td>
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### 2nd year (U2)

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<td>Organic Chemistry II</td>
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<td>CH203</td>
<td>Organic Chemistry lab I</td>
<td>1</td>
<td>CH204</td>
<td>Organic Chemistry lab II</td>
<td>1</td>
</tr>
<tr>
<td>PY205</td>
<td>Elements of Physics</td>
<td>4</td>
<td>BS240</td>
<td>Basics of Microbiology (with lab)</td>
<td>4</td>
</tr>
<tr>
<td>MDI 210-214</td>
<td>Multidisciplinary Inquiry</td>
<td>3</td>
<td>MDI 210-214</td>
<td>Multidisciplinary Inquiry</td>
<td>3</td>
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<tr>
<td>BS212</td>
<td>Human Anatomy/Histology</td>
<td>3</td>
<td>PA244</td>
<td>Intro to Pharmacy &amp; Healthcare</td>
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<tr>
<td>XXX</td>
<td>Social science disciplinary</td>
<td>3</td>
<td>XXX</td>
<td>Gen Ed Requirement</td>
<td>NS</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>15 + Gen Ed</td>
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</table>

### 3rd year (P1)

<table>
<thead>
<tr>
<th>FALL CRS #</th>
<th>CRS title</th>
<th>Cr.</th>
<th>SPRING CRS #</th>
<th>CRS Title</th>
<th>Cr.</th>
</tr>
</thead>
<tbody>
<tr>
<td>PC301</td>
<td>Physiology</td>
<td>4</td>
<td>PC302</td>
<td>Physiology II</td>
<td>4</td>
</tr>
<tr>
<td>CH346</td>
<td>Biochemistry</td>
<td>4</td>
<td>CH356</td>
<td>Molecular Biology &amp; Genetics</td>
<td>3</td>
</tr>
<tr>
<td>PH305</td>
<td>Pharmaceutical Calculations</td>
<td>1</td>
<td>BS358</td>
<td>Princ. &amp; Applicat Immunology</td>
<td>3</td>
</tr>
<tr>
<td>PP306</td>
<td>Intro to Clinical Skills</td>
<td>3</td>
<td>ST310</td>
<td>Biostatistics</td>
<td>3</td>
</tr>
<tr>
<td>CO101</td>
<td>Intro to Communications</td>
<td>3</td>
<td>XXX</td>
<td>Gen Ed Elective</td>
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<tr>
<td></td>
<td></td>
<td>15</td>
<td></td>
<td></td>
<td>16</td>
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</table>

### SUMMER P1-P2 or fall P2

PP320: Community Pharmacy IPPE 3 cr (as scheduled with Experiential Group)
### P2 Year

<table>
<thead>
<tr>
<th>CRS #</th>
<th>CRS title</th>
<th>Cr.</th>
<th>CRS #</th>
<th>CRS Title</th>
<th>Cr.</th>
</tr>
</thead>
<tbody>
<tr>
<td>PC411</td>
<td>Principles of Med Chem and Pharmacology</td>
<td>4</td>
<td>PC412</td>
<td>Pharmacology I</td>
<td>3</td>
</tr>
<tr>
<td>PP465</td>
<td>Principles of Therapeutics and Human Disease</td>
<td>3</td>
<td>PP466</td>
<td>Human Disease/Appl Therapeutics I</td>
<td>4</td>
</tr>
<tr>
<td>PP467</td>
<td>Practice Lab and Case Studies I</td>
<td>1</td>
<td>PP468</td>
<td>Practice Labs and Case Studies II</td>
<td>1</td>
</tr>
<tr>
<td>PH416</td>
<td>Pharmaceutics/Biopharm I</td>
<td>3</td>
<td>PH417</td>
<td>Pharmaceutics/Biopharm II</td>
<td>3</td>
</tr>
<tr>
<td>PA462</td>
<td>Pharmacy Management</td>
<td>3</td>
<td>PH418</td>
<td>Pharmaceutics Lab</td>
<td>1</td>
</tr>
<tr>
<td>PP469</td>
<td>Nonprescription Therapeutics</td>
<td>3</td>
<td>PP460</td>
<td>Research Design and Drug Information</td>
<td>3</td>
</tr>
</tbody>
</table>

**SUMMER P2-P3**

PP418: Institutional IPPE  2 cr (as scheduled with experiential group)

### P3 Year

<table>
<thead>
<tr>
<th>CRS #</th>
<th>CRS title</th>
<th>Cr.</th>
<th>CRS #</th>
<th>CRS Title</th>
<th>Cr.</th>
</tr>
</thead>
<tbody>
<tr>
<td>PP565</td>
<td>Human Disease/Appl Therapeutics II</td>
<td>4</td>
<td>PP566</td>
<td>Human Disease/Appl Therapeutics III</td>
<td>5</td>
</tr>
<tr>
<td>PP567</td>
<td>Practice Lab 7 Case Studies III</td>
<td>1</td>
<td>PP568</td>
<td>Practice Lab &amp; Case Studies IV</td>
<td>1</td>
</tr>
<tr>
<td>PC512</td>
<td>Pharmacology II</td>
<td>2</td>
<td>PA565</td>
<td>Applied Pharmacoeconomics</td>
<td>2</td>
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<tr>
<td>PP569</td>
<td>Clin Pharmacokinetics &amp; Indiv Drug Dosing</td>
<td>3</td>
<td>PA561</td>
<td>Law and Ethics</td>
<td>2</td>
</tr>
<tr>
<td>PP560</td>
<td>Drug Information/Literature Evaluation</td>
<td>1</td>
<td>PP561</td>
<td>Professional Seminar</td>
<td>1</td>
</tr>
<tr>
<td>PP519 or PP417 or PP469 or PP520</td>
<td>IPPEs</td>
<td>1-3</td>
<td>XXX</td>
<td>Professional Electives</td>
<td>2-4</td>
</tr>
</tbody>
</table>

**Advanced Pharmacy Practice Experiences (APPEs): 7 rotations/ 5weeks each + 3 weeks preparatory enrichment = 38 weeks**

**P4 Year**

<table>
<thead>
<tr>
<th>Courses (Credits)</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>2nd and 3rd week of May</td>
<td>PP 617 APPE Preparatory Enrichment (2 credits)</td>
</tr>
<tr>
<td>U Sciences spring break</td>
<td>PP 618 APPE Preparatory Enrichment 2 (1 credit)</td>
</tr>
<tr>
<td>7 x 5 weeks of rotations (PP 631-PP635 are required), as described in Experiential Calendar. Rotations are scheduled for individual students by the Experiential Group in advance (in conjunction with experiential sites) but the set of rotations begins in the late May and continues, per the Experiential Calendar, through the spring semester of following year.</td>
<td>(5 credits per rotation, <em>required) PP 631 APPE Community Pharmacy</em> PP 632 APPE Hospital Pharmacy* PP 633 APPE Ambulatory Care* PP 634 APPE Acute Patient Care* PP 635 APPE Patient Care Elective * PP 636 APPE Unrestrict Pt Care Elec I PP 637 APPE Unrestrict Pt Care Elec II PP 638 APPE Non-Pat Care Elective1 PP 639 APPE Non-Pat Care Elective2</td>
</tr>
</tbody>
</table>
PharmD: PB (post-baccalaureate) Curriculum
for students entering P1 in fall 2016 and fall 2017

Pre-requisites for entry:
- US Baccalaureate (BS or BA) degree, or equivalent (completion of general education per the degree-granting institution requirements)
- Successful PERC Interview
- Undergraduate coursework: 8 cr Biology with lab; 8 cr General Chemistry with lab; 8 cr Physics with lab; 8 cr Organic Chemistry with lab; 4 cr Microbiology with lab; 8 cr Anatomy and Physiology or equivalent; 3 cr calculus

P1 Year

<table>
<thead>
<tr>
<th>COURSES</th>
<th>Cr</th>
<th>COURSES</th>
<th>Cr</th>
</tr>
</thead>
<tbody>
<tr>
<td>PC301- Human Physiology I</td>
<td>4</td>
<td>PC302- Human Physiology II</td>
<td>4</td>
</tr>
<tr>
<td>PH305- Pharmaceutical Calculations</td>
<td>1</td>
<td>ST310- Biostatistics</td>
<td>3</td>
</tr>
<tr>
<td>PP306- Intro to Clinical Skills</td>
<td>3</td>
<td>BS358- Prin &amp; Applications of Immunology</td>
<td>3</td>
</tr>
<tr>
<td>CH346- Intro to Biochemistry</td>
<td>4</td>
<td>CH356- Molecular Biology/Genetics</td>
<td>3</td>
</tr>
<tr>
<td>PP306- Intro to Clinical Skills</td>
<td>3</td>
<td>BS358- Prin &amp; Applications of Immunology</td>
<td>3</td>
</tr>
<tr>
<td>Professional elective*</td>
<td>2</td>
<td>Professional elective*</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>14</td>
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<tr>
<td>30 credits</td>
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Summer P1-P2
PP320: Community pharmacy IPPE 3 cr (can take in fall P2 instead)

P2 Year

<table>
<thead>
<tr>
<th>COURSES</th>
<th>Cr</th>
<th>COURSES</th>
<th>Cr</th>
</tr>
</thead>
<tbody>
<tr>
<td>PC411- Principles of Medicinal Chemistry and Pharmacology</td>
<td>4</td>
<td>PC412- Pharmacology I</td>
<td>3</td>
</tr>
<tr>
<td>PP465- Principles of Therapeutics and Human Disease</td>
<td>3</td>
<td>PP466- Human Disease/ Appl Therapeutics I</td>
<td>4</td>
</tr>
<tr>
<td>PP467- Practice Lab and Case Studies I</td>
<td>1</td>
<td>PP468- Practice Lab and Case Studies II</td>
<td>1</td>
</tr>
<tr>
<td>PH416- Pharmaceutics/Biopharm I</td>
<td>3</td>
<td>PH417- Pharmaceutics/Biopharm II</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td></td>
<td>PH418-Pharmaceutics Lab</td>
<td>1</td>
</tr>
<tr>
<td>PP469- Nonprescription Therapeutics</td>
<td>3</td>
<td>PP460- Research Design and Drug Information</td>
<td>3</td>
</tr>
<tr>
<td>PA462- Pharmacy Management</td>
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<td></td>
<td></td>
</tr>
<tr>
<td></td>
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<td></td>
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<td>32 credits</td>
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SUMMER P2-P3
PP418: Institutional IPPE 2 cr (as scheduled with experiential group)

### P3 Year

<table>
<thead>
<tr>
<th>COURSES</th>
<th>Cr</th>
<th>COURSES</th>
<th>Cr</th>
</tr>
</thead>
<tbody>
<tr>
<td>PP565-Human Disease/ Appl Therapeutics II</td>
<td>4</td>
<td>PP566-Human Disease/ Appl Therapeutics III</td>
<td>5</td>
</tr>
<tr>
<td>PP567- Practice Lab &amp; Case Studies III</td>
<td>1</td>
<td>PP568-Practice Lab &amp; Case Studies IV</td>
<td>1</td>
</tr>
<tr>
<td>PC512-Pharmacology II</td>
<td>2</td>
<td>PA565- Applied Pharmacoeconomics</td>
<td>2</td>
</tr>
<tr>
<td>PP569- Clinical Pharmacokinetics &amp; Indiv Drug Dosing</td>
<td>3</td>
<td>PA561- Law and Ethics</td>
<td>2</td>
</tr>
<tr>
<td>PP560- Drug information/ Literature Evaluation</td>
<td>1</td>
<td>PP561- Professional Seminar</td>
<td>1</td>
</tr>
<tr>
<td>Professional Elective*</td>
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<td>Professional Elective*</td>
<td>2</td>
</tr>
<tr>
<td>IPPE: PP 519 or PP 417 or PP 496 or PP 520</td>
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<td></td>
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</table>

**27 credits**

### P4 Year

<table>
<thead>
<tr>
<th>Courses (Credits)</th>
<th>Courses (Credits)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Advanced Pharmacy Practice Experiences (APPEs): 7 rotations/ 5 weeks each + 3 weeks preparatory enrichment = 38 weeks</td>
<td>(total = 38 credits)</td>
</tr>
<tr>
<td>2nd and 3rd week of May</td>
<td>PP 617 APPE Preparatory Enrichment (2 credits)</td>
</tr>
<tr>
<td>U Sciences spring break</td>
<td>PP 618 APPE Preparatory Enrichment 2 (1 credit)</td>
</tr>
<tr>
<td>7 x 5 weeks of rotations (PP 631-PP635 are required), as described in Experiential Calendar. Rotations are scheduled for individual students by the Experiential Group in advance (in conjunction with experiential sites) but the set of rotations begins in the late May and continues, per the Experiential Calendar, through the spring semester of following year.</td>
<td>(5 credits per rotation, *required)</td>
</tr>
</tbody>
</table>

| PP 631 APPE Community Pharmacy* | PP 632 APPE Hospital Pharmacy* |
| PP 633 APPE Ambulatory Care* | PP 634 APPE Acute Patient Care* |
| PP 635 APPE Patient Care Elective * | PP 636 APPE Unrestrict Pt Care Elec I |
| PP 637 APPE Unrestrict Pt Care Elec II | PP 638 APPE Non-Pat Care Elective1 |
| PP 639 APPE Non-Pat Care Elective2 | |

**38 credits**

**Total= 133 credits**
### Appendix E: Catalog year 2016 and beyond PharmD Curriculum

PharmD (including BS PHHCS) curriculum (for students in catalog year 2016 and beyond): pre-professional (U1, U2) & 4 years professional (P1-P4)

#### 1st YEAR (U1)

<table>
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<tr>
<th>FALL</th>
<th>SPRING</th>
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</thead>
<tbody>
<tr>
<td><strong>CRS #</strong></td>
<td><strong>CRS title</strong></td>
</tr>
<tr>
<td>CH101</td>
<td>General Chem I</td>
</tr>
<tr>
<td>CH103</td>
<td>General Chem Lab I</td>
</tr>
<tr>
<td>BS103</td>
<td>General Biology I</td>
</tr>
<tr>
<td>WR101</td>
<td>Writing and Rhetoric I</td>
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<tr>
<td>MA107</td>
<td>Precalculus</td>
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<tr>
<td>PE101</td>
<td>Physical Education</td>
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<tr>
<td>PP 190</td>
<td>Pharmacy Orientation</td>
</tr>
<tr>
<td>XXX</td>
<td>Humanities (open) or SS(open) #</td>
</tr>
<tr>
<td></td>
<td>18</td>
</tr>
</tbody>
</table>

36 credits total-- #Courses with AR, CA, EN, ET, CR, GE, IT, LA, HI, MU, PL, WL prefix. HI101, HI102 provide oral & written communication skill; HU 301, HU303, PL313 written communication skill; EN307, EN314, EN330 ethics skill

#### 2nd YEAR (U2)

<table>
<thead>
<tr>
<th>FALL</th>
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</thead>
<tbody>
<tr>
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<td><strong>CRS title</strong></td>
</tr>
<tr>
<td>CH201</td>
<td>Organic Chemistry I</td>
</tr>
<tr>
<td>CH203</td>
<td>Organic Chemistry lab I</td>
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<tr>
<td>BS24X</td>
<td>Microbiology</td>
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<tr>
<td>XXX</td>
<td>Social Science course (open)## or Humanities (open) #</td>
</tr>
<tr>
<td>CO101 or CO204</td>
<td>Intro to Communication/ Intro to Public Speaking</td>
</tr>
<tr>
<td>BS310</td>
<td>Human Anatomy and Physiology I</td>
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<tr>
<td>PCxxx</td>
<td>A&amp;P sim lab</td>
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<td></td>
<td>18</td>
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</table>

36 credits total--##Courses with AN, CO (excluding CO101 and CO204), EC, PS, SO, or SS prefix. SO101, SO111 provide oral communication skill; PS101 written communication skill; SO347 oral communication & ethics skill; SO206 ethics skill

#### P1 YEAR: Foundations of Science and Practice

<table>
<thead>
<tr>
<th>FALL</th>
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</tr>
</thead>
<tbody>
<tr>
<td><strong>CRS #</strong></td>
<td><strong>CRS title</strong></td>
</tr>
<tr>
<td>RX100</td>
<td>Professional Orientation (pre-semester)</td>
</tr>
<tr>
<td>RX110</td>
<td>Practice Skills I</td>
</tr>
<tr>
<td>RX120</td>
<td>Professional Behavior/Communication I</td>
</tr>
<tr>
<td>RX130</td>
<td>Foundations of Biomedical Sciences</td>
</tr>
<tr>
<td>RX140</td>
<td>Foundations of Pharmaceutical Sciences I</td>
</tr>
<tr>
<td>RX150</td>
<td>iPSDT 1—(Intro to Therapeutics)</td>
</tr>
<tr>
<td>RX180</td>
<td>IPPE (100 h/y)</td>
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<tr>
<td>XXX</td>
<td>Professional elective*/MD^</td>
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</table>
P2 YEAR: Cultivating Science and Practice

<table>
<thead>
<tr>
<th>CRN</th>
<th>Course Title</th>
<th>Credits</th>
<th>CRN</th>
<th>Course Title</th>
<th>Credits</th>
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<tbody>
<tr>
<td>RX220</td>
<td>Practice Skills/Professional Behavior II</td>
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<td>RX225</td>
<td>Medication Use Systems II</td>
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<tr>
<td>RX230</td>
<td>Drug Information/Literature Evaluation I</td>
<td>3</td>
<td>RX235</td>
<td>Drug Information/Literature Evaluation II</td>
<td>3</td>
</tr>
<tr>
<td>RX240</td>
<td>Foundations of Pharmaceutical Sciences III</td>
<td>3</td>
<td>RX215</td>
<td>Foundations of Health Care Policy/Law</td>
<td>3</td>
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<tr>
<td>RX252</td>
<td>iPSDT 4—(CV 2)</td>
<td>3</td>
<td>RX253</td>
<td>iPSDT 6—(Endo/Repro)</td>
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</tr>
<tr>
<td>RX254</td>
<td>iPSDT 5—(Renal/Hepatic)</td>
<td>3</td>
<td>RX255</td>
<td>iPSDT 7—(Infec Dis 1)</td>
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<tr>
<td>RX280</td>
<td>IPPE (100h/yr)</td>
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<td>RX290</td>
<td>IPPE (100h/yr)</td>
<td>1</td>
</tr>
<tr>
<td>XXX</td>
<td>Professional elective*/MD^</td>
<td>2-3</td>
<td></td>
<td>(Professional elective*)</td>
<td>(2)</td>
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</tbody>
</table>

34-37 credits total

* 6 cr of MD to be completed prior to end of P2; completion may precede P1. MD courses often contain Gen Ed skills. Any MD course approved as a professional elective, will count towards both MD and professional elective requirements.  
* 6 cr of professional electives required by end of P3; () denotes optional professional electives, not included in credit minimum.

BS PHHCS = 143-145 credits

P3 YEAR: Evolving Practice

<table>
<thead>
<tr>
<th>CRN</th>
<th>Course Title</th>
<th>Credits</th>
<th>CRN</th>
<th>Course Title</th>
<th>Credits</th>
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<tbody>
<tr>
<td>RX310</td>
<td>Applied Professional Behavior and Communications</td>
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<td>RX335</td>
<td>iPSDT 12—(Immune/MS/skin)</td>
<td>3</td>
</tr>
<tr>
<td>RX320</td>
<td>Entrepreneurship</td>
<td>1</td>
<td>RX345</td>
<td>iPSDT 13—(Heme/Onc)</td>
<td>3</td>
</tr>
<tr>
<td>RX330</td>
<td>iPSDT 8—(Infec Dis 2)</td>
<td>3</td>
<td>RX355</td>
<td>iPSDT 14—(Infec Dis 3)</td>
<td>3</td>
</tr>
<tr>
<td>RX340</td>
<td>iPSDT 9—(CNS 1)</td>
<td>3</td>
<td>RX390</td>
<td>IPPE (100h/yr)</td>
<td>1</td>
</tr>
<tr>
<td>RX350</td>
<td>iPSDT 10—(CNS 2)</td>
<td>3</td>
<td>RX365</td>
<td>Integrated Practice I</td>
<td>3</td>
</tr>
<tr>
<td>RX360</td>
<td>iPSDT 11—(GI/Nutrition)</td>
<td>3</td>
<td>Rx375</td>
<td>Integrated Practice II</td>
<td>3</td>
</tr>
<tr>
<td>RX380</td>
<td>IPPE (100h/yr)</td>
<td>1</td>
<td></td>
<td>(Professional elective*)</td>
<td>(2)</td>
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<tr>
<td></td>
<td>(Professional elective*)</td>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

32-36 credits total

* 6 cr of professional electives required by end of P3; () denotes professional electives you may take to complete the required 6 credits of professional electives or in addition to the requirement.

P4 YEAR: Pharmacy Proven Everywhere
Advanced Pharmacy Practice Experiences (Rx4xx)  
36 credits  
1440 hours

36 credits total

**PHARMD = 211-217 credits**

---

**PharmD: PB (post-baccalaureate) Curriculum**

Entry into P1 in fall 2018 and beyond

**Pre-requisites for entry:**

**US Baccalaureate degree (BS or BA)**

**Successful PERC Interview**

**Undergraduate Coursework:**

- 8 cr General Biology with lab
- 8 cr General Chemistry with lab
- 8 cr Organic Chemistry with lab
- 8 cr Anatomy and Physiology with lab (simulated or live)
- 4 cr Microbiology
- 3 cr Calculus
- 4 cr Physics
- 3 cr Biostatistics
- 3 cr Writing
- 3 cr Speech
- 3 cr Social/Behavioral Science
- 3 cr Microeconomics

---

### P1 THEME: Foundations of Science and Practice

<table>
<thead>
<tr>
<th>Fall semester: 17 cr^</th>
<th>Spring semester: 18 cr*</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>MODULES</strong></td>
<td><strong>Cr</strong></td>
</tr>
<tr>
<td>RX-100 Professional Orientation (pre-semester^)</td>
<td>1</td>
</tr>
<tr>
<td>RX-110 Practice Skills I</td>
<td>3</td>
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<tr>
<td>RX-120 Professional Behavior/Communication I</td>
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<td>RX-180 IPPE 1 (100h/yr)</td>
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35 credits

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### P2 THEME: Cultivating Science and Practice

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<td><strong>MODULES</strong></td>
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<td>RX220 Practice Skills/Professional Behavior II</td>
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<td>RX230 Drug Information/Literature Evaluation I</td>
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<td>RX240 Foundations of Pharmaceutical Sciences III</td>
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<td>RX252 IPSDT 4—(CV 2)</td>
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34 credits
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<th><strong>P4 THEME:</strong> Pharmacy Proven Everywhere</th>
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<td><strong>Fall semester: 16 cr</strong></td>
<td><strong>Minimum 1440h, 36 cr; multiple semesters; majority of APPEs focused on patient care</strong></td>
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<td><strong>Spring semester: 18 cr</strong></td>
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<td>RX310 Applied Professional Behavior and Communications</td>
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<td>RX320 Entrepreneurship</td>
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<td>RX330 iPSDT 8—(Infec Dis 2)</td>
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<td>RX340 iPSDT 9—(CNS 1)</td>
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<td>RX350 iPSDT 10—(CNS 2)</td>
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<td>RX360 iPSDT 11—(GI/Nutrition)</td>
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<td>RX380 IPPE 5 (100h/y)</td>
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34 credits

*6 credits of didactic professional electives (P1-P3) are required; more can be taken pending availability

Total = 139 credits
# Appendix F: BS Program Curricular Checklists

Bachelor of Science in Pharmacology and Toxicology Curriculum (Class of 2020/entering fall 2016)

### First Year

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<th>Credit Hours</th>
<th>Spring Semester</th>
<th>Course Number</th>
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<th>Credit Hours</th>
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<th>Spring Semester</th>
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TOTAL MINIMUM CREDITS: 128/129

---

* Available both semesters

^a SO 101 recommended; SO 111 recommended for Medical School track;

^b ONE of these Multidisciplinary Inquiry courses should meet the General Education Ethics skills requirement.
# Bachelor of Science in Pharmaceutical Sciences Curriculum *(Class of 2020/entering fall 2016)*

## First Year

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## Second Year

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## Fourth Year

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**TOTAL MINIMUM CREDITS** 129

* Revised curriculum approved by Pharmacy Subcouncil on June 2, 2016.

**Available both semesters

a AN 101 or SO 101 recommended; SO 111 recommended for Medical School track;

b ONE of these Multidisciplinary Inquiry courses should meet General Education Ethics skills requirement.
Appendix G: Technical Standards Acknowledgement Document

Technical Standards for the Doctor of Pharmacy Program
Philadelphia College of Pharmacy
University of the Sciences in Philadelphia

Introduction:
The mission of the Philadelphia College of Pharmacy is to develop respected professionals and leaders in the science, practice and business of pharmacy. The PharmD professional curriculum is innovative, based upon a foundation of strong basic sciences, has extensive clinical and experiential content, and emphasizes the development of critical thinking, problem solving, and collaborative skills. Instructional activities will be driven by primary trait and core competency outcomes that all pharmacists are expected to competently perform in order to fulfill their professional responsibilities. The Doctor of Pharmacy Program is a rigorous and challenging professional academic program that requires students to possess specific characteristics and abilities within the cognitive, affective and psychomotor domains, referred to here as technical standards.

Doctor of Pharmacy candidates will be responsible for their own learning with guidance from the faculty, preceptors, administrators and their peers. Students must consistently and accurately demonstrate both academic and technical abilities to ensure minimal competency and adequate progression through the curriculum. Technical standards, as distinguished from academic standards, refer to the minimum cognitive, professional and behavioral abilities required for a student to matriculate into and satisfactorily complete of all essential aspects of the curriculum. To successfully progress in and ultimately complete the didactic, laboratory, clinical, and experiential components of the PharmD program, students must understand these qualifications. All students will be required to read and sign the following technical standards document to indicate they understand these qualifications. The signed document will be kept as a permanent part of the PCP Dean’s office student record.

A student should be able to perform the following essential functions in a reasonably independent manner and without use of a trained intermediary. The prohibition on the use of a trained intermediary means that a student’s judgment and activities cannot be mediated by someone else’s clinical skills, professional knowledge, and integrative or interpretative abilities.

Domain: Intellectual, Conceptual, Integrative, and Quantitative Abilities
The student must have/or be able to:
- Critical and logical thinking ability sufficient to engage in clinical judgment and problem solving to address issues and problems within all learning environments.
- Multi-task and to perform work in a logical and sequential manner.
- Memorize, perform scientific measurements and calculations, reason, analyze, and synthesize information.
- Demonstrate ability to retrieve (electronically and manually), read, understand, and interpret medical, scientific and professional information and literature.
- Demonstrate the intellectual and reasoning abilities required to develop critical thinking, problem solving, and decision-making skills.
- Demonstrate the ability to learn effectively through a variety of modalities including, but not limited to classroom instruction, small group discussions, practice lab, individual study of
materials, preparation and presentation of written and oral reports, and use of computers and other technology.

- Demonstrate ability to prioritize and complete tasks in laboratory, clinical, and patient care setting with time constraints.
- Perform a variety of duties accurately, often changing from one task to another without loss of efficiency or composure.
- Accurately and independently evaluate his/her own performance and formulate strategies for addressing deficiencies and improving professional skills.

**Domain: Communication**

- Read, write, speak, and comprehend English with sufficient mastery to communicate clearly (understanding and being understood) and professionally with faculty, preceptors, administrators, staff, peers, patients and other health care professionals in a mature, sensitive and professional manner that reflects the primary traits and the core values of the college.
- Communication includes both verbal and non-verbal expression, reading, writing, and computer skills essential to complete didactic and clinical curricular requirements.
- Retain, recall and deliver information in an efficient and timely manner
- Participate in class discussions/group projects/practice labs for the purpose of delivery and receipt of medical information.
- Recognize both verbal and non-verbal communication including facial expression and body language.
- Record accurately and legibly in patients’ records demonstrating the knowledge of the meaning and spelling of words, rules of composition and grammar.
- Explain to other health care professionals, to patients, and/or to caregivers reason for treatment, preventative measures, disease process and need for referral.
- Use computers and other technology to accurately record information and convey critical health-related documentation.

**Domain: Behavioral, Ethical and Professional Attributes**

- Recognize and show respect for differences in cultures, values and ethics among patients, faculty, peers, preceptors, staff, and administrators.
- Demonstrate maturity, integrity, compassion, and respect for others.
- Identify and demonstrate appropriate behaviors to protect the safety and well being of patients, faculty, peers, preceptors, staff and administrators.
- Demonstrate and possess the emotional health required to fully and appropriately use intellectual abilities, exercise good judgment, and promptly complete all responsibilities in the academic setting.
- Identify and take responsibility for actions during academic and experiential rotations.
- Demonstrate the ability to handle situations appropriately and professionally that may be physically, emotionally, and intellectually stressful, including situations that must be handled promptly and calmly.
- Demonstrate flexibility and adaptability to changing situations and uncertainty in the classrooms, laboratories, and experiential settings with appropriate coping responses.
- Appropriately adapt and be able to accept appropriate suggestions and constructive criticism in a mature, acceptable, and professional manner.
- Comply with the professional code of conduct that is part of but not limited to the experiential component of the pharmacy curriculum.
- Display compassion and concern for others in accordance with the mission of the college and the vision of the Doctor of Pharmacy Program.

**Domain: Visual/Auditory**
- Observe demonstrations, lectures, practiced-based activities, experiments in the basic and clinical sciences and other essential curricular exercises.
- Gather data from written reference material, computer-based programs, and from oral presentations.
- Utilize various types of physical assessment skills required for patient-centered care including reading digital or analog representations of physiologic phenomena.
- Have vision sufficient to read and interpret prescriptions, prescription labels, and medication labels.
- Observe patient activity and behavior at a distance and close-hand, noting non-verbal and verbal signals.

**Domain: Motor coordination and function**
- Elicit patient information through palpation, auscultation, and other diagnostic maneuvers and perform emergency procedures such as CPR in a clinical setting.
- Operate educational equipment and technology to fully participate in lectures, practice, and other laboratory experiences; including preparing an intravenous (IV) product, giving an intramuscular (IM) injection or subcutaneous (SQ) injection and dispensing pharmaceutical dosage forms such as capsules or tablets.
- Possess the manual dexterity sufficient to accurately compound and prepare pharmaceutical products for dispensing to patients.
- Transport oneself to a variety of off-site settings and experiential rotations in a timely manner.
- Consistently, quickly, and accurately integrate all information received by whatever senses are employed, along with the intellectual ability to learn, integrate, analyze, and synthesize data.

**Student Acknowledgement and Statement**

It is the responsibility of the student to request a reasonable accommodation in a timely manner. The student must be able to perform all of the essential functions with or without reasonable accommodations prior to matriculation into the Doctor of Pharmacy program.

I have read and understand the statement of technical standards as outlined above as performance standards necessary for successful matriculation into and completion of the Doctor of Pharmacy program. I understand that if I need further clarifications, I am able to contact the PCP Dean’s office, by phone (215) 596-8870 or by email pcp@uscience.edu.

---

Student Signature

Date...
Appendix H: Non-progression Frequently asked Questions (FAQs)

The purpose of this document is to answer some of the questions facing students who have not met progression standards in the PharmD program, and the options and implications of non-progression. In combination with a required meeting with an academic dean, and their academic advisor, this document should be used to assist with the creation of a success plan for and with the non-progressing student pharmacist.

What are my academic options for the upcoming year?
Typically, students choose one of three paths during their non-progression year.

- Full time – students who remain full time during this period may not enroll in courses beyond their academic standing, but often take advantage of this extra time by adding a minor to their academic experience. Most minor programs consist of 18 credits that could easily be completed during the non-progression year. Students who are considering a minor must meet with the minor program director in order to complete the required application and create a plan for the upcoming year.
  - Students considering a minor should consult the University Catalog for minor options and refer to the University Student Handbook for policies and eligibility requirements (page 56).
- Part-time - another option is to reduce credit load to part-time status during the upcoming academic year. Students who choose this path elect to focus mainly on the course(s) required for them to progress to the next professional year. For most, but not all, loan granting agencies – part-time means at least six hours – it is CRITICAL to meet with a counselor in Financial Aid to review the financial implications of part-time status.
- Leave of absence – A student may choose to take a leave of absence for a semester while waiting to retake required coursework. According to the University Student Handbook, all students considering a leave of absence must meet with their college dean to request the leave, as it could affect financial aid and health insurance coverage.

How will this affect my financial aid?
Many variables affect a student’s financial aid package. Full time/Part-time status, type of loans, and undergraduate/graduate standing are just a few of the many factors that are weighed. It may even be required for you to update your FAFSA application. For this reason, it is STRONGLY recommended that all students who do not progress discuss their personal situation with a representative from the Financial Aid office as soon as possible. The Financial Aid office can be reached at 215-596-8894.

It is especially important for P2 students to meet with a representative from Financial Aid. Your financial aid status will change between P2 and P3 years. Students who do not progress at this junction must meet with Financial Aid as soon as possible to update their aid packages.

Can I still earn a BS degree in Pharmaceutical Healthcare Studies if I get a D in a professional course?
Since fall P2 courses are required for the BS PHHCS degree and as pre-requisites for spring P2 courses, P2 students who are unsuccessful (fail to achieve at least a C-) in a course taken in the fall semester will be delayed by a year in obtaining this in-transit degree. However, a student who achieves at least a D- in a course taken in the spring semester will be able to attain the BS degree and participate in the ceremony – even though they will be delayed from progressing in their Doctor of Pharmacy program. Furthermore, a student who is not successful in a P&T course offered in the spring semester (PP 466 or PP 468) will still be able to attain the BS degree and participate in the ceremony – these courses are not required for that degree.

Will I run out of print credits as a result of extra time at the University?
At the time of non-progression, students may request an extra year’s worth of printing credit. According to Information Technology policy, students requiring extended time on campus should request that the Dean’s office or academic advisor submit a formal request for added prints.
How will this affect my long term standing in the pharmacy program?
Lack of successful completion of one (or more) required, non-elective professional course(s) will result in a delay in progression until coursework can be successfully completed. A delay in progression results in a longer time program duration (frequently a year for courses only offered once per academic year); thus, the anticipated graduation date in WebAdvisor will be delayed, with no other impact on standing in the program.

There are rare occasions in which an unscheduled reoffering of a required course may be offered earlier than its next planned offering. There must be more than 10 students who are **eligible** to take the course by virtue of it being the only course in which they were unsuccessful. In addition, space, adequate faculty expertise and availability, pedagogical considerations for the course material, and financial resources and learning materials are factors to be considered before and unscheduled reoffering of a required course. Students should contact the PCP Dean’s office to discuss the availability of additional course sections.

**Academic Progression Policies**

"C- Rule“ – This rule applies specifically to Doctor of Pharmacy students. It states: all students must achieve a grade of “C-“(P if pass/fail) for satisfactory completion of all non-elective required courses with the prefix PA, PC, PH, or PP. Unsuccessful students must retake the course at the next offering. Those who do not achieve at least a C- upon repetition of a non-elective required course will be dropped from the program. In this situation, students will be required to apply for a change of major in order to remain at the University.

**Academic Dismissal** – This University-wide rule applies to all students attending the University of the Sciences and can be found in the University Student Handbook. Students will be dropped from the rolls if they: Complete any three semesters, whether full time or part-time, with an academic record resulting in academic probation; or Fail the same course twice, whether at the University or another institution. According to University policy, if he/she fails the same course twice, a student who is dropped from the rolls may immediately apply for readmission to a **different** program.

**Is there any support for students in my circumstance?**

All students facing non-progressions must meet with the Associate Dean of PCP Student Affairs & Admissions (or their designees in the PCP Dean’s Office) and their academic advisor. During these meetings, students will be made aware of their options, helped to create a success plan, and guided toward other beneficial University services.

<table>
<thead>
<tr>
<th>University Resources for Success Plan Development</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Student Academic Support Services</strong></td>
</tr>
<tr>
<td>SASS offers a wide range of academic services for students. Popular services include college learning and study strategy sessions, group tutoring, and supplemental instruction.</td>
</tr>
<tr>
<td><strong>AD100, Developing Academic Success</strong></td>
</tr>
<tr>
<td>Suggested for all students facing non-progression, this course focuses on the development of skills necessary for academic success, such as developing effective time management and study skills, approaching faculty for assistance, and using campus resources. This course also serves as a support group so that students can learn from peers and recognize common issues. It is advised that professional year students register for the section taught by Jan Lyons which is designed specifically for upper level students.</td>
</tr>
<tr>
<td><strong>Pharmacy Program Academic Advisor</strong></td>
</tr>
<tr>
<td>The Pharmacy Program Academic Advisor is available to meet with students individually throughout the year. Advising sessions can focus on personal and career goals, time management, study skills and strategies, amongst many things. Regularly scheduled meetings often help students set and follow up on academic goals.</td>
</tr>
<tr>
<td><strong>Student Health and Counseling</strong></td>
</tr>
<tr>
<td>The SHAC strives to improve the health, academic, and emotional experiences of the student body. Students may utilize their services in an attempt to resolve personal, social, and academic concerns. All SHAC services are confidential.</td>
</tr>
</tbody>
</table>
Appendix I: PERC Interview Confidentiality Agreement

Professional Education Readiness Competency (PERC) Interview

STUDENT AGREEMENT OF CONFIDENTIALITY

Please read the expectations for confidentiality within the PERC interview process outlined below, and acknowledge your understanding and willingness to abide by these terms in order to participate in the interview process. You should read this document prior to your scheduled interview, and then bring a signed copy to the interview, or sign a printed copy at the interview.

I understand that one requirement for progression into the professional years of the Doctor of Pharmacy program is successful completion of a standardized, structured interview, a “conversation with a purpose”, with two PCP faculty/staff, and that this requirement is separate and distinct from other progression requirements, as outlined in the University catalog.

Strict confidentiality is attached to this interview because of its standardized nature and to maintain fairness and equality throughout the process. I understand that this means that neither I, nor the interviewers, are to discuss the specific questions, my responses, or my performance in the interview process. Failure to maintain confidence may constitute a student conduct violation.

The materials from the interview will be held in confidence in the PCP Dean’s office. I understand that the scoring sheet, but not the questions or the rubric, are considered part of my educational record and may be reviewed upon written request to the Dean’s office, according to Dean’s office procedure.

Signature: ________________________________

Printed name and ID Number: _______________________

Date: ________________
Appendix J: Professional Expectations and Academic Standards

Acknowledgement

Professional Education: Expectations & Academic Standards
STUDENT ACKNOWLEDGEMENT OF UNDERSTANDING

Introduction:
The mission of the Philadelphia College of Pharmacy is to develop respected professionals and leaders in the science, practice and business of pharmacy. The PharmD professional curriculum is innovative, based upon a foundation of strong basic sciences, has extensive clinical and experiential content, and emphasizes the development of critical thinking, problem solving, and collaborative skills. Doctor of Pharmacy candidates, as students receiving a professional education, must acquire responsibility and accountability for their own learning, the ability to integrate information from different disciplines and sources, and to apply it effectively to optimize patient care, protect public health, and to further advance the profession. They do so with guidance from the faculty, preceptors, administrators and their peers. All students in the professional component of the Doctor of Pharmacy program (aka STUDENT PHARMACISTS) will be required to read the PCP Handbook, especially Chapter V (Program Requirements and Academic Standards), as well as the summary below, and acknowledge their understanding by signing this document below. The signed document will be kept as a permanent part of the student’s record.

Student Comments and Complaints
ACPE requires that colleges of pharmacy respond to any written complaints by pharmacy students relating to the adherence to these standards, policies, and procedures of ACPE. Students should submit written comments or complaints to the Office to the Dean of Pharmacy (GH-2016), which will evaluate and respond to the commentary/complaint in writing. In addition, anonymous comments and complaints submitted to the online suggestion box or to the locked suggestion box located opposite GH-2016 are addressed and posted online in the PCP Central Repository (on Blackboard, formerly Angel). Students are also encouraged to visit the ACPE web site at www.acpe-accredit.org.

Summary of Professional Expectations and Academic Standards:
What distinguishes professional education from undergraduate education is the level of integration, both broad and deep, critical analysis, responsibility and accountability needed to successfully apply higher orders of thinking to real world scenarios and problems. Professional education goes beyond checking off a series of steps or courses to meet an objective. It places the onus on the student to utilize ALL the information and experience at hand, not just what is contained within a given course, to advocate for an optimal solution to a given problem. It requires that the successful student be flexible enough to adjust to different personalities or approaches to problems, yet be able to persevere for the long run.

The professional curriculum is structured to do this by providing courses that developmental and incremental in rigor and depth, and which emphasize peer interactions, problem solving, and communication. Because of the specialized expertise involved in professional education, course sequencing relies on mastery development and retention, as students move from one course to another (e.g. pre-requisite to subsequent course), and cross-course integration (e.g., co-requisite courses). As a result, frequently courses are only offered once per academic year. Course credits are assigned based on the number of contact hours needed to get material across, not the number of out of class hours needed to master the material, nor the relative importance of a given course to the curriculum or to the
Progression is the means by which individual and student cohort advancement in the program (program year to program year) is monitored, and requires successful completion of ALL coursework ascribed to a given program year. Delays in progression, most commonly resulting in delays in graduation, arise because of a lack of successful completion of one or more required courses in the requisite sequence.

The expectations for student performance in the Doctor of Pharmacy are more stringent than what is seen in undergraduate curricula, consistent with the difference between a baccalaureate degree and a doctorate. The “C- rule” for Doctor of Pharmacy students dictates that successful (satisfactory) completion of required non-elective PCP courses (with prefixes PA, PC, PH, or PP) is achieved by a minimum grade of “C-“. Pharm D students who achieve less than a “C-“ in a given course are given a second and final chance to demonstrate competency by retaking the course at its next offering. Since most professional courses are offered only once during an academic year, most likely progression will be delayed, and the student’s graduation date will change. Students who are unsuccessful (i.e., achieve less than a C-) the second time around will be withdrawn (dropped) from the program. Students who are successful the second time around will proceed with subsequent coursework and completion of the program, hopefully without further delays.

It should be noted that no exceptions or exemptions are granted by PCP because of external (life) factors, numbers of credits, personal issues, extracurricular involvement, or any other criteria. Students are not dismissed from the program because their progression is delayed. PCP faculty, advisors and the PCP Dean’s office are committed to working with students on an individual basis to elaborate a plan and provide support which will allow them to achieve success in the program, either via a delay in progression and extension of the anticipated graduation date, with added support through tutoring, auditing, or other support mechanisms, or by offering professional coursework out of schedule should demand (which meets University criteria) and resources be available to do so. However, it should be noted that multiple delays in progression can potentially lead to exceeding the maximum amount of time in professional program (six years), and thereby being withdrawn (dropped) from the program.

**Student Acknowledgement:**
I have read the PCP Handbook, and the above summary of professional expectations and academic standards, and understand the rules governing successful completion of the Doctor of Pharmacy program, including the possible ramifications of not meeting academic standards. I understand that if I need further clarifications, I am able to contact the PCP Dean’s office, by phone (215) 596-8870 or by email pcp@usciences.edu.

___________________________  __________________
Student Name (printed)     Student ID

___________________________  __________________
Student Signature          Date
Appendix K: Pharmacy Practice Professionalism Agreement

Pharmacy Practice Professionalism Agreement
For Advanced Pharmacy Practice Experiential Rotations: May 2012

As a student of Philadelphia College of Pharmacy at University of the Sciences in Philadelphia, I agree to participate in the active learning process during the Advanced Pharmacy Practice Experiences (APPEs) in my 6th year of the Doctor of Pharmacy Program.

Listed below are the terms and conditions I agree to as a participant in patient care and in my collaboration and interactions between myself and my preceptors, patients, other students, and health professionals and staff during each 5-week rotation.

During these professional experiences, I agree to the following terms and conditions (additional requirements may be associated with each rotation site):

- I will maintain a high standard of professional behavior including: attire, personal demeanor, verbal and written communications, and in the use of resources/facilities of each site.
- I will maintain patient confidentiality and the security of pharmacy services and access to patient records.
- I will take responsibility for my own learning and a willingness to engage patients, pharmacy personnel, health providers and others in provision of patient-focused services and care.
- I will apply my knowledge, experience and skills to the best of my ability to assure optimal drug therapy outcomes for patients encountered in my training experiences.
- I will take responsibility for and assure patient care needs or concerns are addressed in a timely and complete manner.
- I will comply with the responsibilities of the student as described in the Advanced Pharmacy Practice Policy Document, posted on EV Value Home Page and discussed during the APPE orientation and as otherwise mandated by a particular rotation site.

I understand that I may be removed from a rotation for any inappropriate actions or behaviors on my part—certain of which are listed below. Any such removal may result in a variety of sanctions including a failing grade (F) for the rotation (course). I understand that no sanction or failing grade will be assigned until after an investigation during which an incomplete (I) is assigned. Failing grades due to inappropriate actions or behavioral problems in any 2 rotations may result in administrative withdrawal from the Doctor of Pharmacy Program. Recurrence of similar behaviors may result in additional actions taken by the program administration. The following are examples of behaviors or actions, but not limited to these, that may result in removal from a practice site and a failing grade:

- Behavior deemed inappropriate/offensive by the particular rotation site and/or violations of prohibited conduct as defined in the University’s student handbook.
- Inappropriate behavior or actions considered disruptive to provision of patient care.
- Incident determined to be a violation of site policy including (but not limited to) patient privacy, security, property damage or destruction, theft, intoxication, falsification of records, etc.
- Violations of site or University policies after warning, if appropriate, including attendance, lateness, unauthorized departures, inappropriate attire or appearance, violation of patient privacy, etc.
- Failure to follow policies or procedures as instructed or irresponsible behavior that compromises patient safety or well being.
- Use of the internet, cell phone or text messaging for personal purposes other than as approved by the preceptor by site policy.
- Inability to accurately and effectively articulate patient care information to patients, caregivers, staff, or other health professionals that may compromise patient safety and/or well being.

*any reference to site includes the personnel or preceptors at the site.

I understand that I have read and understand the related policies for the Philadelphia College of Pharmacy Advanced Pharmacy Practice Experience and agree to the above:

______________________________  ______________________________
Student (Print Name)             Student Signature

______________________________  ______________________________
Date       Witness (Print Name)  Witness Signature
Appendix L: PCP Policies

POLICY AND PROCEDURE
Philadelphia College of Pharmacy

ADMISSIONS APPEALS PROCESS

POLICY

Requests from students enrolled in Philadelphia College of Pharmacy to appeal the faculty actions of “Dropped from the Rolls” or “Dropped from Program” are reviewed and approved or denied by faculty of PCP.

BACKGROUND

At the end of each semester, transcripts of all students enrolled in Philadelphia College of Pharmacy are reviewed to ascertain if students have met the academic standards and requirements of their program. Faculty actions include “Dropped from the Rolls”, defined as removal from the University rolls, and “Dropped from Program”, defined as removal from the Doctor of Pharmacy program. In exceptional cases, a student may appeal the faculty action because of an extenuating circumstance. These students may request that the faculty reverse the action by the appeals process. It should be noted that students questioning grades in individual courses should not use the appeals process.

PROCESS

1. Student submits a letter to the Dean of Pharmacy requesting to appeal the decision of being “Dropped from the Rolls” or “Dropped from Program”. The letter should state the basis of the appeal. Students are strongly encouraged to meet with the Assistant Dean of Pharmacy Programs (i.e. Associate Dean of Student Affairs and Admissions) or Director of Pharmacy Advising (i.e. PharmD program advisor) to discuss the process.

   The letter should include a description of extenuating circumstances that may have temporarily limited the student’s ability to perform academically as compared to their previous level of achievement. Supporting documentation, such as letters of support or letters from physicians, may also be submitted. The student should also describe specific steps to be taken in the future to improve academic performance. These may include changes in study time and methods, attendance, extracurricular activities, work schedule or use of the academic success and tutoring centers, or need for evaluation of a learning disability or improvement of other skills.

2. The Chair, Admissions Committee of Pharmacy Council and the Assistant Dean of Pharmacy Programs (i.e. Associate Dean of Student Affairs and Admissions) and Assistant Dean of Curriculum and Assessment review the appeal request and make a recommendation to approve or not approve.
3. The recommendation is submitted to Pharmacy Council Executive Committee for a decision to approve or not approve.

4. The decision is reported to the Dean of Pharmacy, Chairs, Vice Chair of Experiential Education, Admissions Committee, and Registrar.

5. The student is notified of the decision via a letter from the Dean.

6. Students have the opportunity to appeal once. The decision to approve or not approve the appeal is final.

7. If an appeal for Dropped from the Rolls is denied, the student may apply for readmission to any program at the University of the Sciences after sitting out one year from the date of separation from the University. If an appeal for Dropped from Program is denied, the student must change their major to another program to remain enrolled at the University.

8. Appeals are evaluated twice yearly. Appeals submitted by the third day of the beginning of the Fall or Spring semester will be evaluated by the end of the Drop/Add period of that semester.

Approved by Admissions Committee of Pharmacy Council: March 18, 2010.
Student Travel Policy

Travel Stipend Guidelines

The PCP Dean’s office is proud of our students and their scholarly activities. To show our support and to help defray some of the costs associated with traveling to a professional meeting, there is a stipend (up to $250) available for travel to a meeting pending acceptance of the poster or platform presentation. You must be attending the meeting AND presenting at your poster session in order to qualify. Please follow the directions listed below for stipend approval and reimbursement.

The presentation must be scholarly activity, including projects completed during APPEs, IPPEs, PA495, PH495, PC495, and PP495. This includes poster and platform presentations. Posters related to professional organization activities should NOT be submitted for reimbursement via this process. Those posters should be submitted to the respective professional organization faculty advisor(s) for support.

All accepted scholarly activity presentations, advised by full time faculty and preceptors will be reviewed provided that a request is submitted in a timely manner.

For travel stipend consideration, the PRIMARY PRESENTER must submit the presentation form by the end of business no later than three weeks prior to the meeting start. This form can be found on the Blackboard PCP Central Repository – Faculty, Staff, and Student Community Page. There is a folder entitled “Student Presentation”. Please complete the form, save it, and submit it to Dr. Mandos at l.mandos@usciences.edu.

Poster Preparation

If you have completed your scholarly activity with a full time faculty member or preceptor AND it has received USciences IRB approval, then you are encouraged to use the PCP Poster Template. If it has not gone through the USciences IRB approval process, then use of the university or college logo violates copyright laws and the University Logo Policy. You are able to designate whether you will need the Logo Template on the submission form.

If you are collaborating with a preceptor not associated with the University and need assistance, please contact Dr. Laura Mandos or Dr. Steve Sheaffer.

The PCP Dean’s office will pay for ONE printing per poster, if presentation submission form has been received and approved by Dr. Mandos. In order to give the poster printer enough time, please submit by the deadline – three weeks prior to the start of the meeting. On the presentation form, under “account number” – please write – “See list from Dr. Mandos”. Any additional printings will be the financial responsibility of the student(s) and/or project advisor(s).

Please be advised we may ask to use your poster as part of the recruitment events that take place during the spring or summer semesters.

Reimbursement

All approved students will receive up to a $250 stipend. There is a cap of $1000 per poster. If there are more than four students attending and presenting at the meeting, the funds will need to be equally divided among the student presenters.

If the student is travelling as part of a team to represent PCP at a national competition (e.g., ACCP Clinical Challenge, ASHP Patient Counseling Competition), the PCP Dean’s office will pay a travel stipend of up to $2000 for the team to help with costs. (The amount of stipend available for teams will be determined by the Dean’s Office Budget on a yearly basis). Other travel that falls outside of the above parameters such as the Walmart Scholarship or IPSF internship opportunities, will be examined on a case by case basis depending on the Dean’s Office Budget on a yearly basis.

EACH STUDENT must submit a travel reimbursement form, Internal Payment Voucher, within 4 weeks of completion of travel for processing. These forms are located in the Student Presentation Folder on the Blackboard PCP Central Repository – Faculty, Staff, and Students. Any reimbursement requisitions submitted without the appropriate forms and/or beyond the four week deadline will NOT be considered for any kind of reimbursement.
ORIGINAL receipts must be attached to the reimbursement form. If you are submitting for meals, you must submit an ITEMIZED receipt. Furthermore, the meals cannot exceed the PER DIEM meal allowance as stipulated by the GSA [www.gsa.gov/perdiem]. Reimbursement cannot occur prior to the meeting.

Please submit all reimbursement requests to Mrs. Estelle Sherrod in the PCP Dean’s office GH2000.

Any requests for the travel stipend must come through the PCP Dean’s office. Please do not send inquiries to any other offices within the University, such as the Office of Graduate Studies. If you are aware of opportunities for student funding, please direct them to Dr. Mandos and she will make the appropriate inquiries.

Student Organization Funding Request Policy

Purpose:

The Philadelphia College of Pharmacy (PCP) financially supports student organization memberships and activities. The process for allocating funds must be fair and equitable to all PCP student organizations and activities, therefore, the following policy and procedure has been implemented. PCP student organizations are also encouraged to continue with fund raising efforts as well as to seek financial support through the University’s Student Government Association funding request process.

Policy:

Any PCP student organization under the Philadelphia College of Pharmacy academic programs may submit a request for funding. The PCP Dean’s Office will consider all requests made on or prior to October 15th of each academic year. Funds, if available, will be allocated to the organization by November 1st. No requests will be honored if received after October 15th unless the request is received by the faculty advisor of the student organization.

Procedure:

1. All eligible PCP student organizations will be notified annually of the need to complete and submit a funding request proposal by October 15th of each academic year.
2. The PCP student organization president (or designee) or faculty advisor must complete the “PCP Student Organization Funding Request Form” located on the PCP Central Repository. Advisor approves the request with signature.
3. The form should be submitted electronically to the Dean’s office by October 15th of the academic year.
4. All funding requests will be reviewed and prioritized by the PCP Dean’s Office. Allocations will be made to student organizations, if there are funds available. Available funding is based on the budget each fiscal year, and therefore, it may vary. A decision on the amount of funding available to each organization will be provided to the requesting organization by November 1st. The requested funds will be transferred after notification to the requesting organization, but no later than November 15th.
5. In the event that a new opportunity arises after October 15th and funds are needed, a request may be submitted to the PCP Assistant to the Dean by the faculty advisor of the student organization. The same request form should be used which is located on the PCP Central Repository. Consideration of funding will be made on a case by case basis. Note: funding may be very limited for the late requests.
6. Funding requests will not be considered if they do not follow this policy and procedure.