

APPE TRAILS

Official Newsletter for P3 and P4 Students at Manchester University College of Pharmacy, Natural and Health Sciences



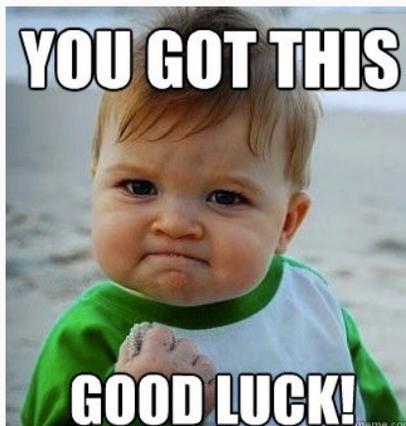
Documenting your APPE Year- READ!!!

BY DR. RYAN ADES

Congratulations, Class of 2023, you have made it through the didactic curriculum. All that is left is 1600 hours of advanced pharmacy practice experiences, and you will be full-fledged pharmacists ready to begin your careers. There is a rhythm to the progression through APPEs, and I encourage you to utilize the following as a guide to set reminders and establish that rhythm:

- Three weeks prior to every rotation: send an introductory email to your preceptor
- Two weeks prior to every rotation (or as otherwise instructed by the site): ensure that all of your site specific requirements have been completed. Fill out any forms with all of the information you are able to complete prior to requesting any signatures required from our office. Karen Failor will act as signatory of these forms. Once completed, mark your requirements complete in CORE ELMS.
- Wednesday of your 2nd week of every rotation: complete your Mid-Point Self-Evaluation
- Last week of every rotation: complete your Interprofessional Education Assessment Field Encounter
- Last day of every rotation: review your preceptor's final evaluation of your performance with your preceptor
- Last day of every rotation: complete your Evaluation of Site/Preceptor
- Last day of every rotation: complete your APPE Affidavit of Experience. Important Note: make sure to have your Indiana Intern License at the top of the form for every rotation, and include any other state license you may need for that rotation

The Office of Experiential Education is always available to help with any questions you may have. Please do not hesitate to reach out directly.



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Delivering Professional Presentations

Professional presentations over pharmacotherapeutic topics are incredibly informative and fun to deliver when done correctly. However, these presentations can also be challenging to deliver on APPE rotations and can certainly induce anxiety. Spending time adequately preparing for one of these presentations can help alleviate any anxiousness and help you give a great presentation! I came across a great post on Twitter about advice for giving professional presentations at conferences by @ArdenBarry and have modified and added in my thoughts to be applicable to presentations that you might give on APPE rotations.

1. Don't apologize for small font or busy slides. Just don't use them.

Keep texts on slides to a minimum so that your audience is listening to you instead of trying to read your slides. Consider re-creating your own tables pulling out what you consider the most important information to share.

2. Take responsibility for staying on time.

Your audience members will always be people that have other responsibilities. They have taken time out of their day to listen to your presentation. Staying on time helps demonstrate respect for those in the audience.

3. Leave time for discussion/questions.

This is a great time for you to share your expertise on the topic and learn more through the expertise of those in the room. Don't leave this out!

4. Know your audience and tailor your presentation appropriately.

If your audience is going to be mostly comprised of pharmacists, your presentation should be different than if presenting to pharmacy students.

5. Don't start by saying you are not an expert.

You are probably more of an expert than anyone in the room. I love this one because it is true! If you spend the right amount of time (and it can be a lot) reading about your topic and preparing your presentation, you will know significantly more than everyone else in the room in most settings.

6. Don't read off your slides.

Make it a point not to do this! Your presentation is much more engaging when you are looking your audience. This may help you emphasize the most important points.

7. Include references with journal, year, issue, and page number.

There are different ways to include references on slides. This is an easy way to link the slide information to your reference list. As @ArdenBarry says, "Nothing is worse than 'Jones et al 2016.'"

8. Use a plain background.

Projectors don't project color as well as it looks on your computer. A white background with white letter always works. Make sure your font can be easily read. Calibri works well.

9. Consider writing out your talk first, then build slide deck (if using PowerPoint).

This will help you organize your thoughts and help inform where you want to spend more time during your presentation. It may also reduce the amount of information that you include on your slide, as you are able to verbalize some of what you have written out.

10. Occasionally interject with personal anecdotes.

Have you seen or interacted with a patient who had the disease or received the medication that is the topic of your presentation? What happened? How did the patient respond to therapy? What was the patient's perception of the therapy or disease? All of these are great to include that help you drive home the important points to your audience.



It`s Quiz Time

NAPLEX Practice Questions

1. YT is a 65-year-old man who was recently diagnosed with prostate cancer and is initiated on leuprolide for androgen deprivation.

Which of the following agents should be added to his therapy to prevent "tumor flare"?

- A. Bicalutamide
- B. Finasteride
- C. Mitoxantrone
- D. Goserelin

2. Which of the following is an important counseling point on rifampin?

- A. This medication can cause your body secretions to be an orange-red color.
- B. This medication can increase the effectiveness of your oral contraceptives.
- C. This medication can cause you to need a decrease in your warfarin dose.
- D. This medication can cause your phenytoin concentration to increase.

3. A vial contains 10 g of a powdered drug for reconstitution prior to use in an IV infusion. The label states that when 18.5 mL of diluent are added, the concentration of the resulting solution is 500 mg/mL. A medication order calls for a drug concentration of 300 mg/mL. How many mL of diluent should be added to the vial?

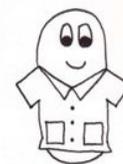
Calculations Corner

1. A patient is receiving 42 mg/hour of aminophylline. The patient is ready to be changed to oral theophylline. What would the daily dose of theophylline be that would equal 42 mg/h of aminophylline? Aminophylline's salt factor is 0.8.

2. DR is a hospitalized man who weighs 82 kg and has a BMI of 24 kg/m². What is his calculated daily fluid requirement?

3. A pharmacist adds 10 mL of a 20% w/v solution of a drug to 500 mL of D5W for parenteral infusion. What is the percentage strength of the drug in the infusion solution?

Coated aspirin.



Uncoated aspirin.





The Experiential Ed dog Team

BY THE OFFICE OF EXPERIENTIAL EDUCATION

Just because we were curious and it's funny....

https://www.buzzfeed.com/yunatelemans/which-dog-breed-are-you-43wbms04z6?utm_source=dynamic&utm_campaign=bfsharecopy_

Dr. Ryan Ades, Shiba Inu



Karen Failor, Labrador



Celia Elder, Corgi



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New Assistant Director for Experiential Education

BY THE OFFICE OF EXPERIENTIAL EDUCATION

Our office is excited to announce that we have filled the Assistant Director position in the Office of Experiential Education, which has been frozen since May of 2020. We are very excited to welcome Dr. Sara A. Thompson to our team. Sara began her professional career as a high school teacher before receiving her Doctor of Pharmacy degree from Belmont University College of Pharmacy in 2016. She completed a PGY-1 with the VA Caribbean Healthcare System in San Juan, Puerto Rico and then a PGY-2 with an emphasis in family medicine and academia at UTEP School of Pharmacy in El Paso, TX. She has a passion for Spanish fluency, underserved patient populations, oncology and providing students with every opportunity to succeed. Sara will begin her role on July 18th, 2022. Please join us in welcoming Sara to Manchester!

