## Introductory Pharmacy Practice Experience (IPPE) Student Log Community Practice

Use the grid below to record a minimum of one example of prescription processed (P) by you or observed (O) by you (i.e., you observed your preceptor processing the Rx) each day. Use additional sheets if necessary

<b>Prescription Proces</b>	ssing				<u>.                                    </u>
Drug name (Brand/generic)	Dose/ frequency	Sig	Special instructions/auxiliary labels	Counseling required	O 01 P

## Job Description of Pharmacy Personnel: Provide a brief description of various personnel at the site:

Role	Description	Number of personnel of this type
Pharmacist In Charge		
Pharmacist (day)		
Pharmacist (evening)		

Pharmacist (any other special shift or	
role)	
Technician	
Clerk	
Manager	

Other (describe role)	

Describe below the general workflow of the pharmacy prescription processing from receipt of prescription to dispensing to patient:

## **Patient Counseling:**

Record one example of an Rx product counseling session in which you participated:

Drug	Indication	Counseling provided (how to take, dose, special instructions, drug interactions, side effects, etc.)

Provide one example of an OTC product counseling session in which you participated

Drug	Indication	Counseling provided (how to take, dose, special instructions, drug interactions, side effects, etc.)

<b>Drug Information Questions:</b>	(exact question to be assigned by preceptor)		
	d and your response; indicate where you found the answer/references used.		
<b>Drug interactions between two</b>			
Question	Response		
Can a medication be crushed?			
Medication	Response		
What is the dose of a medicati	on for a specific indication?		
Question (medication and	Response (dose)		
indication)	Response (dose)		
,			
What are the special handling or storage concerns of a particular medication?			
Medication	Handling or storage concerns		

References available at the site (please list):

Please insert any copies of education materials or other written projects you complete on rotation or copies of any additional materials that you feel document your interventions or activities while on rotation.

Please check the activities below that you have observed/participated in while on your IPPE rotation: \_compounding (if so, check if \_\_\_\_IV \_\_\_\_oral \_\_\_\_suppositories \_\_\_\_\_topical \_\_\_\_\_other) prescription profiling \_dispensing of prescriptions filing of hard copies of prescriptions processing of controlled drug substances (observation, discussion, or actual processing) inventory procedures (for regular drugs and controlled substances) ordering procedures (for regular drugs and controlled substances) marketing/advertising public health initiatives (screenings, brown bags, etc) assistance with OTC medication selection \_durable medical equipment third party insurance issues