

**Medical Outreach Experience**  
**PHRD 5066 (CRN 62318)**  
**Tuesdays 2:00-3:50, Bienville 170**  
**Credit - 2hrs**

**I. Contact Information**  
**Coordinator:**

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Preferred method of communication: Email or phone

**II. Course Prerequisites/Corequisites**

Students must be in second semester of the second professional year or beyond  
Prerequisites or Corequisites: PHRD 4058, PHRD 4074, PHRD 4081, PHRD 4083

**III. Course Description**

Introduction to principles of pharmaceutical care to underserved populations worldwide, with specific focus on the history, medical practices, health care availability, and current needs of one geographic area. Students will work with an interdisciplinary medical team during a medical outreach experience to that location.

**IV. Curricular Objectives and Outcomes**

**CAPE**

**Domain 1 – Foundational Knowledge**

**1.1. Learner (Learner)** - Develop, integrate, and apply knowledge from the foundational sciences (i.e., **pharmaceutical, social/behavioral/administrative, and clinical sciences**) to evaluate the scientific literature, explain drug action, solve therapeutic problems, and advance population health and **patient-centered care**.

**Domain 2 – Essentials for Practice and Care**

**2.1. Patient-centered care (Caregiver)** - Provide **patient-centered care** as the medication expert (collect and interpret evidence, prioritize, formulate assessments and recommendations, implement, monitor and adjust plans, and document activities).

**2.2. Medication use systems management (Manager)** - Manage patient healthcare needs using human, financial, technological, and physical resources to optimize the safety and efficacy of medication use systems.

**2.3. Health and wellness (Promoter)** - Design prevention, intervention, and educational strategies for individuals and communities to manage chronic disease and improve health and wellness.

**Domain 3 - Approach to Practice and Care**

**3.1. Problem Solving (Problem Solver)** – Identify problems; explore and prioritize potential strategies; and design, implement, and evaluate a viable solution.

**3.2. Educator (Educator)** – Educate all audiences by determining the most effective and enduring ways to impart information and assess understanding.

**3.3. Patient Advocacy (Advocate)** - Assure that patients' best interests are represented.

**3.4. Interprofessional collaboration (Collaborator)** – Actively participate and engage as a healthcare team member by demonstrating mutual respect, understanding, and values to meet patient care needs.

**3.5. Cultural sensitivity (Includer)** - Recognize *social determinants of health* to diminish disparities and inequities in access to quality care.

**3.6. Communication (Communicator)** – Effectively communicate verbally and nonverbally when interacting with an individual, group, or organization.

#### **Domain 4 – Personal and Professional Development**

**4.1. Self-awareness (Self-aware)** – Examine and reflect on personal knowledge, skills, abilities, beliefs, biases, motivation, and emotions that could enhance or limit personal and professional growth.

**4.4. Professionalism (Professional)** - Exhibit behaviors and values that are consistent with the trust given to the profession by patients, other healthcare providers, and society.

#### **ACPE APPENDIX 1**

**Cultural Awareness:** Exploration of the potential impact of cultural values, beliefs, and practices on patient care outcomes.

**Ethics:** Exploration of approaches for resolving ethical dilemmas in patient care, with an emphasis on moral responsibility and the ability to critically evaluate viable options against the needs of patients and other key stakeholders.

**Professional Communication:** Analysis and practice of verbal, non-verbal, and written communication strategies that promote effective interpersonal dialog and understanding to advance specific patient care, education, advocacy, and/or interprofessional collaboration goals. Exploration of technology-based communication tools and their impact on healthcare delivery, healthcare information, and patient empowerment.

**Professional Development/Social and Behavioral Aspects of Practice:** Development of professional self-awareness, capabilities, responsibilities, and leadership. Analysis of contemporary practice roles and innovative opportunities, and inculcation of professional attitudes, behaviors, and dispositions.

**Medication Dispensing, Distribution and Administration:** Preparation, dispensing and administration of prescriptions, identification and prevention of medication errors and interactions, maintaining and using patient profile systems and prescription processing technology and/or equipment, and ensuring patient safety. Educating about appropriate medication use and administration.

**Patient Assessment:** Evaluation of patient function and dysfunction through the performance of tests and assessments leading to objective (e.g., physical assessment, health screening, and lab data interpretation) and subjective (patient interview) data important to the provision of care.

**Pharmacotherapy:** Evidence-based clinical decision making, therapeutic treatment planning, and medication therapy management strategy development for patients with specific diseases and conditions that complicate care and/or put patients at high risk for adverse events. Emphasis on patient safety, clinical efficacy, pharmacogenomic and pharmacoeconomic considerations, and treatment of patients across the lifespan.

**Public Health:** Exploration of population health management strategies, national and community-based public health programs, and implementation of activities that advance public health and wellness, as well as provide an avenue through which students earn certificates in immunization delivery and other public health-focused skills.

#### **V. Course Specific Objectives and Outcomes**

##### **1. Communication**

- A. Communicate accurately, effectively, and clearly with interdisciplinary team members, peers, patients, and public in a variety of different settings and formats

- B. Mature presentation preparation and delivery skills in order to educate audiences appropriately
  - C. Objectives
    - a. Confidently recommend therapeutic options for treatment or alternatives to therapy
    - b. Provide patients with medication and disease state education both with use of informational leaflets and verbal encounters
    - c. Present patient cases to faculty member in a clear, concise manner including pertinent background information and explanations of therapeutic decisions
2. Public Health
- A. Promote health improvement, wellness, and disease prevention in indigent or at-risk populations in cooperation with patients and other health care providers
  - B. Objectives
    - a. Become familiar with current customs and cultures through research and reading
    - b. Consider availability and economical resources before instituting therapeutic initiatives in patients
    - c. Discuss and implement methods of follow-up for indigent patients
    - d. Carry out duties in accordance with ethical, cultural, and legal guidelines
3. Pharmaceutical Care
- A. Clinical Practice-
    - a. Design, implement, monitor, and adjust patient-specific pharmaceutical care plans
    - b. Develop and implement population-specific, evidence-based disease management programs and protocols based upon analysis of epidemiologic and pharmaco-economic data, medication use review, and risk reduction strategies.
    - c. Identify, resolve, or prevent drug related problems in patient or population
  - B. Patient Counseling-
    - a. Monitor and counsel patients regarding the purpose, use, and effects of current prescription and nonprescription medications
    - b. Promote overall health and wellness by encouraging specific non-medicinal lifestyle changes
  - C. Objectives
    - a. Practice physical assessment skills by participating in triage of patients (including blood pressure and glucose screening, vital signs)
    - b. Mature interview skills by conducting patient medication histories to determine relevant past medical history and current treatments
    - c. Outline a therapeutic plan based on physician assessment and diagnosis
    - d. Intervene in drug-related situations to offer alternative therapies, dose related changes, adverse event prevention, or answer drug information questions
    - e. Practice dispensing and checking prescriptions for accuracy, clarity, and appropriateness in a timely and efficient manner
    - f. Gain documentation skills through daily recordings of therapeutic interventions
    - g. Communicate appropriately and effectively with patients in counseling sessions
    - h. Demonstrate compassion and care for patients by having positive attitude and sincere exchanges
4. Systems Management
- A. Coordinate safe, accurate and time sensitive medication distribution to patients
  - B. Manage work flow and pharmacy procedures in a temporary setting
  - C. Objectives
    - a. Set-up and coordinate the pharmacy area in an appropriate manner that facilitates ease of use and reduces chance of errors
    - b. Develop a formulary of available drugs for use by physicians
    - c. Appropriately label medications for easy interpretation by patients and in accordance with any legal stipulations

## VI. Course Topics

Public Health, Systematics of medical outreach, Diabetes, Hypertension, Heart Failure, Asthma, COPD, Infectious Disease, Pain Management, Bites & Stings, Wounds, Physical Assessment Techniques, Pregnancy and Pediatric Concerns

## VII. Instructional Methods and Activities

Semester will be split into 3 general sections: Preparation, Outreach experience, and Reflection. Instructional techniques will vary between these 3 sections, but will roughly follow the outline below:

- A. **Preparation:** The majority of class time will be spent in discussion format. The goal of this time is to introduce students to the role of pharmacy in medical outreach and to prepare them to lead and participate on future medical trips. Professor will cover information pertaining to each day's topic and students will be strongly encouraged to participate. Class time may be allocated for working on specific projects relevant to that day's topic. Assigned readings will be discussed and applied to likely situations that will occur. When therapeutics topics are presented students will be expected to be able to apply information in case-based formats. Common disease states will be covered in a review fashion with emphasis on established guidelines for treatment and considerations in international low-resource settings.
- B. **Outreach Experience:** Faculty members will be assigned students (no more than 3) and will rotate students throughout the week. Instruction will be in experiential practice format with faculty members acting as preceptors for the week. Faculty members will facilitate therapeutic discussions with students and evaluate student's performance by overseeing student throughout the week.
- C. **Reflection:** After returning from the mission trip, faculty will facilitate a de-briefing meeting. This meeting will consist of question and answer about what was learned, what was good or bad, what needs improving, how this trip impacted your life, etc. Reflection papers will be submitted and discussed and then the class will be finished.

## VIII. Evaluation and Grade Assignment

Methods of assessment will vary depending on the section of the course (Pre, Trip, Post). No formal tests or quizzes will be administered, but preparedness will be measured through discussion participation, quality of pharmaceutical interventions, and additional assignments outlined below. Students are expected to read assigned materials prior to each class session. Grades will be determined on a point scale, with each class section allotted a set number of points to equal **240** total.

### GRADING

<b>Preparation – 60% of total grade</b>	<b>120 points</b>
● Ethics discussion	10 points
● Disease state guides	10 points
● Patient cases	20 points
● Interpreter activity	20 points
● Pre-trip OSCE	30 points
● Participation/attendance	30 points
<b>Outreach Experience - 40% of total grade</b>	<b>80 points</b>
● Professionalism/communication	10 points
● Participation in clinical duties	10 points
● Documentation of clinical interventions	20 points
● Journal of daily experiences	20 points
● Participation with faculty mentor in daily case discussions	20 points

### ASSIGNMENT DESCRIPTIONS

**OSCE.** Will focus on patient interviews and patient counseling using the disease states discussed in class. You will be given a patient case, followed by time to interview the patient, formulate a care plan, and counsel the patient. May be conducted via Zoom.

**Journal.** Students are expected to write a daily journal entry while on the trip. Personal entries should be kept elsewhere, as entries in this journal may be used in the future of recruitment or other purposes by instructor. Entries should not be limited to just pharmacy issues, but can elaborate on anything that impresses them throughout the trip. There is no requirement for length of entry each day, but points may be deducted for obvious lack of effort.

**Daily group discussions.** At the end of each day you will meet with the group to discuss cases that were seen that day. The facilitator will ask questions for the purpose of discussion and learning. If you made an intervention that day then those cases will be discussed in more detail and the student is expected to know relevant background information and more in-depth knowledge of appropriate management.

**Return duties (TBA).** This includes a couple of things: a slide presentation or video for marketing of the class within the school and a write-up for the Hawkeye, ULM press release, and SOP alumni newsletter. We will discuss details when we return.

Other projects may be assigned at the discretion of individual instructors.

### **Grading Scale (based on percentage of total available points)**

A	89.5 – 100%
B	79.5 – 89.4%
C	69.5 – 79.4%
D	59.5 – 69.4%
F	<59.5%

## **IX. Class Policies and Procedures**

At a minimum, all policies stated in the current ULM *Student Policy Manual & Organizational Handbook* should be followed (see <http://www.ulm.edu/studentpolicy/>). Additional class policies include:

### **A. Textbook(s) and Materials:**

- Pharmacotherapy: A Pathophysiologic Approach, 7<sup>th</sup> edition; Edited by Joseph DiPiro, et al.
- Additional reading may be posted on Moodle for weekly class sessions
- Student will be expected to have a personal stethoscope and manual blood pressure monitor
- Students must have a passport or have applied for passport prior to the first class period

### **B. Attendance Policy:**

- Class attendance is regarded as an obligation as well as a privilege, and students are expected to know attendance regulations and to attend regularly and punctually at classes in which they are enrolled. Failure to do so: (1) may prevent access to the classroom during regularly scheduled times; (2) may jeopardize a student's scholastic standing; and (3) may lead to suspension from the college or University. Students shall follow the ULM SOP Excused Absence Policy. Please refer to official document for details. All excused absences must be validated by OSPA according to the policy timeline. The course coordinator is the only person who can grant an "excused absence". Professors shall accept an official University excuse. With the following exceptions professors are to determine whether absences are excused or unexcused: 1) Absences arising from authorized trips away from the University or from special duties at the University shall be excused. 2) Absences arising from a student's confinement in a hospital or other in-patient facility or doctor's excused absences shall be excused. Students are responsible for verifying this information to the faculty. 3) Absences arising from a death in the immediate family shall be excused. The immediate family is defined as spouse, child, step-child, mother, father, sister, brother, grandmother, grandfather, step-mother, step-father, step-brother, step-sister, aunt, uncle, mother-in-law or father-in-law.
- Each unexcused absence will result in a 5 point deduction from participation grade in the pre-mission section.
- Students will not receive a passing grade if the outreach experience is not attended for some reason other than is excused. If a student has any idea that they may not be able to attend the trip, they should not sign up for this course since space is very limited. Those enrolled in this course are expected to take it seriously and make every effort to attend each class meeting.
- If the student misses the trip for one of the aforementioned excused reasons, then the student will be required to participate in local medical projects. This could include spending afternoons volunteering at local free medical clinics or other opportunities deemed appropriate by the professor.

### **C. Make-up Policy:**

- Assignments not turned in on time will be subject to a 1-point deduction for every day that it is late.

b. An assignment is considered on-time if submitted before class time on the day it is due.

**D. Academic Integrity:** Faculty and students must observe the ULM published policy on Academic Dishonesty (see Page 4 in ULM *Student Policy Manual* - <http://www.ulm.edu/studentpolicy/>).

**E. Course Evaluation Policy:**

- a. At a minimum, students are expected to complete the on-line course evaluation.
- b. A pre- and post- survey will be administered on the first and last day of class to assess the effectiveness of this elective.

**F. Student Services:**

Information concerning student services in the School of Pharmacy can be found in the School of Pharmacy Student Handbook. In particular, students should pay special attention to the School's technical standards and policies concerning students with special needs. ULM student services, such as Student Success Center (<http://ulm.edu/cass/>), Counseling Center (<http://ulm.edu/counselingcenter/>), and Student Health Services, is available at the following Student Services web site <http://ulm.edu/studentaffairs/>

**G. Emergency Procedures:**

Please review the emergency escape plan in the classrooms and hallways of the Bienville Building. Move quickly and orderly to the appropriate stairwell and exit the building. The meeting place for this class will be at the ULM School of Pharmacy sign on the lawn in the front of the Bienville building. Under no circumstances is the elevator to be used for emergency evacuation. Any student needing assistance should notify the professor immediately.

**H. Discipline/Course Specific Policies:** Not applicable

**X. Course Specific Concerns**

**Cost/Fundraising**

Students are responsible for costs associated with trip. Approximate cost for trip is \$2500-3000. Exact costs will be given when exact plans are determined. Class will provide opportunities for fundraising. Money made through fundraiser will be equally distributed to all who participate. Money not made through fundraiser is student's responsibility, although instructor will be glad to assist in ideas for acquiring support. Money will be due by the date listed in course outline. Please remember that this class is offered to limited numbers of people and anticipation of costs is necessary in determination of enrollment, as to not prevent others from being able to participate.

**Spirituality Concerns**

Enrollment in this course is not discriminatory towards any religion, faith, or spirituality. That said, the outreach site may hold Christian church services and nightly Bible devotion times. Students are not required to participate in these activities, but should be aware that they will occur. Lack of participation will not affect course grades in any way. If a student is uncomfortable with these situations, the instructor should be made aware prior to the departure for the trip.

**Professionalism**

Professional behavior is expected at all times. During the outreach experience, there will be opportunities for free time and students are expected to behave appropriately. During working hours, students are expected to behave with respect and integrity as if working in a hospital/retail setting in the U.S. Patient information should be treated as confidential and should not be shared with students not participating in trip. Students should treat other team members, including other disciplines, with respect. Inappropriate behavior as determined by faculty and pharmacist preceptor will result in reductions from participation scores and possible removal from team activities.

**Travel Requirements**

Students are required to have a passport prior to travel. It takes up to 12 weeks to get a passport. Therefore, students who do not have a current passport will need to apply for one prior to or within the first week of class. If you have a current passport, it should be valid for at least 6 months beyond the start date of the trip. Students will also need to be current on all recommended destination-specific vaccinations prior to departure. Recommendations from the CDC (<https://wwwnc.cdc.gov/travel>) will be used to determine which vaccinations and preventative medications will be necessary. Students are responsible for obtaining the vaccines and medications at least 2 months prior to travel.

**Insurance and Forms**

Students will be provided with supplemental **short-term medical and life insurance through the host organization** (cost included in the price of the trip). Students will be required to supply personal information to the organization. Students may also be required to sign a waiver from the school.

### **Trip Cancellation**

If for any unforeseen reason the trip must be cancelled, students will still be expected to spend the week of Spring Break participating in local medical outreach. These opportunities could include volunteering at free medical clinics, hosting a health fair, etc. The exact activities will be planned by the class with guidance from the instructor in the event that the trip cannot occur.

### **Host Organization**

The organization which will be hosting our trip is Until They Know (<https://www.utk223.org/>).

## Tentative Course Schedule

Tuesdays 2:00-3:50pm, Bienville 170

(Instructor reserves the right to adjust class schedule as needed.)

1/14	Orientation – Syllabus, Team Introductions, Logistics Q&A with 2019 participant Ethics of short-term missions	Welch
1/21	Formulary management Access to essential medicines	Jennifer Smith, PharmD, BCPS Welch
1/28	Common disease state review Make pocket references	Welch
2/4	Intro to working with interpreters Patient cases – Common disease states	Welch
2/11	Cultural competency Practice counseling via interpreter	Welch <b>(in Monroe)</b>
2/18	Travel wellness	David Caldwell, PharmD, AAHIVE
2/25	Mardi Gras Break- no class	
3/3	Social determinants of health Millennial development goals	Welch
3/10	Field dermatology (tentative)	Wally Thomas, PA
3/17	Communication/safety/emergency preparedness Stop the Bleed certificate	Shawn Patrick
3/24	OSCE (assessment & counseling)	Welch
3/31	Country presentation (tentative)	Brad Jenkins
4/7	Personal wellness Pack supplies	Kristen Shealy, EdM, CAS, LPC
4/14	MEDICAL OUTREACH TRIP	
4/21	Debrief Role of the pharmacist in global health	Welch
4/28	<b>Journal reflections due via Moodle</b> No class	