



American Society of  
Health-System Pharmacists

**PHARMACY STUDENT FORUM**

16<sup>th</sup> Annual  
**Clinical Skills  
Competition**  
**Coordinator Handbook**  
**2011**

Sponsored by



## SPONSOR

### Competition Sponsor:

ASHP Research and Education Foundation



## FACULTY AND JUDGES

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Hoytin Lee Ghin, Pharm.D., BCPS

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Jody Jacobson Wedret, R.Ph., FASHP, FCSHP

Susan R. Winkler, Pharm.D., BCPS

### National Competition Judges — Final Round:

Kimberley Benner, Pharm.D., BCPS

Tim R. Brown, Pharm.D.

James Karboski, Pharm.D.

## 2010 NATIONAL COMPETITION WINNERS

### University of California, San Francisco School of Pharmacy

Jennifer Murphy and Rachelle Bermingham

**2<sup>nd</sup> Place** - University of Maryland School of Pharmacy - Lindsay McCann and Thomas Smoot

**3<sup>rd</sup> Place** - Drake University College of Pharmacy - Andrew Swartz and Kathryn Owen

## CASE WRITERS

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## **Dear 2011 Clinical Skills Competition Coordinator:**

**We are pleased to announce that the 15<sup>th</sup> annual ASHP National Clinical Skills Competition in 2010 attracted teams from 109 schools and colleges of pharmacy across the nation.** Teams that won preliminary competitions at their local pharmacy schools competed in the national competition held at the ASHP Midyear Clinical Meeting in Anaheim, California. The 2010 national competition winners were Jennifer Murphy and Rachelle Bermingham from the University of California, San Francisco.

Thank you for your efforts in coordinating your school's competition this year. Your role is vital to the success of this program both locally and nationally!

Please review the materials thoroughly and contact us with any questions. We hope that this handbook is a useful resource for you and welcome your feedback.

Here are some important points to remember that will help make your competition successful:

- Work with your respective ASHP state affiliate organization and/or student society of health-system pharmacy to promote, organize, and conduct the competition.
- Create awareness among student participants of the forms contained in this handbook.
- Omit participant names from the competition forms to preserve confidentiality and prevent bias. A number or letter may be used to identify teams on the forms.
- Students should receive feedback on their work by receiving copies of their forms and evaluators' comments.
- Recognize supporters and volunteers.
- Most importantly – HAVE FUN!!!

This handbook covers all you need to know to run a successful competition; however, you may contact the ASHP Pharmacy Student Forum staff with specific questions at [students@ashp.org](mailto:students@ashp.org).

Please note, the Clinical Skills Competition forms and cases are copyrighted and, thus, property of ASHP. Duplication and distribution of these materials is permissible for purposes of the competition only.

Good luck !!!

Joe Kishel, Pharm.D., BCPS, AQ-ID and Hoytin Lee Ghin, Pharm.D., BCPS  
ASHP Clinical Skills Competition Faculty Co-Coordinators

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## Introduction

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The purpose of the Clinical Skills Competition (CSC) is to encourage and recognize excellence in clinical skill development for pharmacy students. The CSC is designed to facilitate an interactive, team-based analysis of clinical scenarios for health-system pharmacists to help patients make the best use of their medications.

**The goals of the Clinical Skills Competition are to:**

1. Foster the development of clinical practice skills;
2. Reinforce the pharmacist's responsibility for optimal drug therapy outcomes;
3. Facilitate the effective use of a systematic approach to clinical problem-solving; and
4. Enhance written and oral communication skills.

In the CSC, students work on a timed case study in pairs. Teams compete by demonstrating their skills in assessing patient information and current therapy, identifying and prioritizing drug therapy problems, identifying treatment goals, and formulating a comprehensive pharmacy care plan. A panel of judges then determines the winner of the competition using a standardized set of evaluation criteria.

Schools and colleges of pharmacy are encouraged to conduct a Preliminary Round (school-level) Clinical Skills Competition on their campus in the Fall. One winning team from each ACPE-accredited institution is invited to advance to the national level Semi-Final Round competition held during the ASHP Midyear Clinical Meeting (MCM) in December. ASHP will provide each competing team of two students complimentary registration to attend the MCM.

## Important Dates & Deadlines - 2011

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### June – August

- Designate a faculty coordinator for the Preliminary Round (school-level) CSC
- Review CSC Coordinator Handbook
- Ask ASHP state affiliate to sponsor the CSC (provide lunch, prizes, etc.)
- Work with school to secure funding for winning student team to attend the ASHP Midyear Clinical Meeting
- Complete online Report Form A by August 19 (available at [www.ashp.org/clinicalskills](http://www.ashp.org/clinicalskills))

### September

#### *1st Week*

- Determine a date and time for the CSC (to be held before November 1)
- Reserve room in school for CSC (Ideally each table would have two chairs for teams to work)
- Reserve video equipment if recording oral presentations for judges
- Schedule an informational meeting for students to learn about the CSC

#### *2nd Week*

- Promote CSC in:
  - therapeutics classes
  - experiential rotations
  - pharmacy fraternities, sororities, organizations
  - other pharmacy student societies and ASHP state affiliate
- Display posters (enter your CSC's date/time) around your school to publicize the event (posters are shipped to faculty advisors with ASHP's student membership materials in August).
- Email and/or print promotional brochure with FAQs available online at <http://www.ashp.org/clinicalskills>
- CSC faculty coordinators receive **CONFIDENTIAL** case and answer key (These documents are password protected and log in information is emailed in late August.) *Please note: student coordinators are not eligible to receive these files.*

#### *3rd Week*

- Recruit judges for CSC (state affiliate members, experiential rotation preceptors, faculty, residents in local ASHP-accredited residency programs)
- Schedule judges' workshop

#### *4th Week*

- Students should receive the following upon registering:
  - Competition date, time, and location
  - Blank forms (Patient Database Form, Drug Therapy Assessment Worksheet, Care Plan)
  - Practice case and answer key from 2010 National CSC
  - A list of references available during the competition
  - Evaluation criteria
- Reserve hotel room(s) at the Midyear Clinical Meeting for the winning student team at <http://www.ashp.org/Midyear2011/Registration>.

### October

#### *1st Week*

- Judges should receive the following before the competition:
  - Competition date, time and location
  - Evaluation criteria
  - Official 2011 CSC Preliminary Round (school-level) case and answer key **[CONFIDENTIAL]**
- Conduct judges' workshop
  - Review case answer key, discuss scoring and questions for oral presentation round
- Remind students of the registration deadline to compete in the CSC

#### *2nd Week*

- Copy the Official 2011 CSC School-Level Preliminary Round case and the accompanying forms
- Gather references to be used in CSC

#### *3rd Week*

- Conduct CSC

#### *4th Week*

- Participants plan travel itinerary to arrive in New Orleans, LA on Friday, December 2.
- Submit names of winning team via Online Report Form B by **Tuesday, November 1** available at [www.ashp.org/clinicalskills](http://www.ashp.org/clinicalskills). Complimentary meeting registrations will be processed throughout the month of November due to the large number of CSC participants.
- Report the winners of the CSC to the state affiliate and pharmacy school administration
- Provide feedback to student participants. Return case materials to students, distribute answer key and hold debrief session to discuss case.

#### **November**

- Prepare winners to participate in the National Clinical Skills Competition.

## Preliminary Round (School-Level) Competition

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### Eligibility

**Preliminary Round (school-level)**—Eligibility to participate in the preliminary round (school-level) CSC is to be determined by the school-level CSC faculty coordinator or other officials. Schools may use the national-level CSC criteria and/or impose additional eligibility restrictions at their discretion. Note that while students are not required to be ASHP members to compete in the preliminary round (school-level) competition, only ASHP student members enrolled in ACPE-accredited pharmacy programs are eligible to advance to the national level competition. Schools must confirm membership status of the winning team members and provide valid ASHP member ID numbers when submitting this information to ASHP via Online Form B. We cannot process a complimentary Midyear Meeting registration for a student who is not a current member.

**Semi-Final and Final Rounds (national-level)**—Eligibility to participate in the national-level CSC is open to ASHP student members enrolled in a full-time ACPE accredited Doctor of Pharmacy program. One winning team of two (2) students from each ACPE-accredited (including “candidate” status) pharmacy program are invited to advance to the national-level competition. Note that only one Preliminary Round (school-level) competition may be held per ACPE-accredited school or college. Schools with more than one campus should collaborate to hold a joint competition and determine the winning team to represent the entire school.

NOTE: Students who are enrolled in a Doctor of Pharmacy program and are currently licensed practitioners are not eligible to participate in the CSC unless they have never practiced pharmacy in any state.

### Registration

Eligible students are encouraged to register in self-selected teams of two. However, individual students may sign up to be placed in teams of two by the Preliminary Round (school-level) CSC faculty coordinator. All registration should be completed no later than two weeks before the competition (sample registration form included in this handbook). There is no registration fee for the preliminary competition, although it is expected that the winning team from each school will participate in the national competition. Please review eligibility requirements for the national-level competition before selecting winning team.

### CSC Cases

ASHP will provide all participating schools or colleges of pharmacy with an electronic copy of the official school-level CSC case. The previous year’s CSC national case will be available on the ASHP website for students to download to practice and prepare for their Preliminary Round (school-level) competition. The website will contain national and school-level cases and answers keys for the three most recent years. The national case is generally more challenging than the school-level case. Please note that competition cases are not limited to a particular practice setting, disease state, or type of drug therapy.

## Clinical Skills Competition Format

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### **Part I: Written Case**

Each student team has two (2) hours to create a written Pharmacist's Care Plan for the case provided. ASHP will provide the official Preliminary Round (school-level) case to the CSC faculty coordinator for the school or college no later than August 31, 2011. The case will be e-mailed as a password-protected PDF file, and we will include instructions for accessing the case. Student coordinators are not eligible to receive the case materials.

Each team packet for the written competition should include the following documents:

- 1 CSC 2011 school-level Preliminary Round case
- 1 Pharmacist's Patient Database Form
- 1 Drug Therapy Assessment Worksheet
- 3 Pharmacist's Care Plans\*
- 2 sheets of blank paper

*\*several blank copies of these documents should be distributed to students upon registration (seven are used at the national level)*

#### ***Pharmacist's Patient Database Form***

This form contains the patient's demographic, administrative, medical, laboratory, drug therapy, behavioral, and socioeconomic information. This is the information students will need to make patient-specific drug therapy decisions that reflect pharmaceutical care. **This form is for the students' reference only—it will not be scored by the judges.**

#### ***Drug Therapy Assessment Worksheet***

This form serves as a guide to help students identify drug-related problems present in the patient case. **This form is for the students' reference only—it will not be scored by the judges.**

#### ***Pharmacist's Care Plan***

**The Pharmacist's Care Plan is the only document that will be reviewed and scored by the judges.** Ideally, each team's Care Plan should clearly outline each drug-related problem found in the case, including (but not limited to) treatment of all acute and chronic disease, resolution of all actual and/or potential drug-related problems, recommendation of additional healthcare services from which the patient may benefit, and identification of appropriate risk factor reduction and disease prevention strategies.

Students should be instructed to complete their Care Plans in the following manner:

- List all health care problems that need to be addressed in this patient in the "Health Care Problem" column.
- Prioritize the problems by indicating the appropriate number in the "Priority" column:
  - 1** = Most urgent problem (there can only be one urgent problem)
  - 2** = Problems that must be addressed immediately (during this clinical encounter)
  - 3** = Problems that can be addressed at the next clinical encounter
- For each problem, describe the following:
  - Therapeutic goals
  - Recommendations for therapy
    - Pharmacologic and non-pharmacologic therapies
  - Monitoring parameters and therapeutic endpoints
    - Frequency of follow-up
    - Endpoints should be measured using defined parameters
      - Clinical, laboratory data; quality of life, etc.
      - Set target dates for achieving endpoints

## **References**

Student teams should be provided with an adequate supply of references with which they may consult during the written portion of the competition (one copy of each reference for every 5 teams). We are grateful for the support of Lexicomp, Inc. This year's Lexicomp support will include a free trial of Lexi-Complete™ with AHFS Essentials™ for those students that do not already have a subscription. Competing students will access their free trial on their personal handheld device and will have full use of the product until December 5, 2011. Schools should inform participating students in advance which references will be available during the competition. Those that do not already have a Lexicomp subscription should go to [www.lexi.com/csctrial](http://www.lexi.com/csctrial) to sign up.

Core references should include texts that provide information on the following topics:

- Therapeutics
- Drug information
- Drug interactions
- Interpretation of laboratory data
- General medicine
- Pharmacokinetics

At the national-level CSC, approved references consist of copyrighted, printed texts and each team will have access to one iPod Touch device that has been preloaded with Lexi-Complete™ with AHFS Essentials™. Other computer software and/or electronic devices (PDAs), as well as the use of personal or classroom notes, are prohibited at the national competition. References available at the Semi-Final Round (national-level) CSC include:

- American Hospital Formulary Service (AHFS)
- Harrison's Principles of Internal Medicine
- Basic Skills in Interpreting Laboratory Data (Lee)
- Applied Therapeutics (Young, Koda Kimble)
- Pharmacotherapy (DiPiro)
- Clinical Pharmacokinetics (Murphy)
- Steadman's Concise Medical Dictionary
- Understanding Medical Terms
- Lexi-Comp
- Lexi-Complete™ with AHFS Essentials™
- Facts and Comparisons

## **Part II: Oral Case Presentation**

Upon completion of the written portion of the competition, each student team will give an oral presentation to the judges justifying their care plan recommendations. A total of 10 minutes will be allotted for each presentation, which includes a two (2) minute presentation period and an eight (8) minute question and answer period.

Two minute student case presentations should include the following:

- The students' names and school or college of pharmacy
- Brief summary of the patient's condition, listing all health problems that require immediate attention
- Complete treatment plan **for the most urgent problem only**, including therapeutic goals, recommendations for therapy, and monitoring parameters, endpoints

Example:

“Hello, my name is Michael Smith and this is my teammate Sarah Jones. We are students at the ACME University School of Pharmacy. Our patient SJ is a 62-year old male admitted with a CVA, hypertension, and probable bacterial pneumonia, all of which require immediate attention. The CVA is his most urgent problem. After ruling out hemorrhagic stroke with a CT/MRI, our therapeutic goals are to stop progression of the intracranial thrombosis, prevent further neurological damage, and minimize complications of therapy. We chose to begin IV alteplase (provide dose, frequency, duration of therapy, monitoring parameters, and therapeutic endpoints) . . . .”

### **Part III: Evaluation**

ASHP will provide all participating schools or colleges of pharmacy with an answer key written by the authors of the school-level preliminary round case. This answer key is intended to represent a Care Plan that a student team could reasonably be expected to produce during the two-hour competition period. Both the case and the answer key have been peer reviewed, but there are often several different approaches to improve therapy that may be deemed “appropriate” by the judges. ASHP asks that the evaluators use the official answer key to facilitate a more objective evaluation and to promote consistency among scoring.

ASHP recommends each school recruit 2–3 judges for the competition. If possible, the same judges should evaluate all teams. If a school is conducting a Preliminary Round on multiple campuses, it is suggested that all oral presentations be video recorded so that the judges can evaluate all teams at the same time. Judges should review the case summary and answer key prior to the competition, and use the forms provided to evaluate each team. ASHP also recommends that schools hold a brief workshop/overview for all judges to answer questions prior to the competition.

Judges will score the Pharmacist’s Care Plan and the oral presentation using the answer key and evaluation forms provided by ASHP. In the event of a tie, the team with the highest score on the Pharmacist’s Care Plan will be declared the winner of the school-level Preliminary Round competition.

## **Evaluation and Scoring of Pharmacist's Care Plan (100 points + 10 bonus points)**

### ***Problem Identification and Prioritization (40 points total)***

- The most urgent problem is correctly identified (20 points)
- Problems that need to be addressed immediately are identified (10 points)
- Problems that can be addressed one week or later are identified (10 points)

### ***Therapeutic Goals (15 points total)***

- Goals are individualized, appropriate, and realistic

### ***Recommendations for Therapy (30 points total)***

- Recommendations are individualized, realistic, and consistent with medical standards and principles of evidence-based medicine

### ***Monitoring Parameters and Endpoints (15 points total)***

- Parameters are practical and effective measures of the desired endpoint
- Endpoints are reasonable and appropriate choices for the patient
- Frequency is reasonable for the plan and appropriate for the patient

### ***Bonus Points***

- Judges may award up to 10 bonus points at their own discretion

## **Evaluation and Scoring of Oral Case Presentation (100 points + 10 bonus points)**

### ***Presentation Skills (20 points)***

- Verbal—clear, coherent, concise, complete, organized, convincing, confident
- Non-verbal—eye contact, facial expressions, body language, overall presence
- Interpersonal—warmth, compassion, tact, professionalism
- Time management—completed within the allotted 2 minutes

### ***Pharmacotherapy Knowledge (20 points)***

- Accuracy and understanding
- Completeness or thoroughness of the treatment plan

### ***Clinical Judgment (30 points)***

- Problem-solving and decision-making skills
- Application of pharmacotherapy knowledge to the individual patient

### ***Defense of Recommendations (30 points)***

- Therapeutic rationale
- Support (evidence-based medicine)

### ***Bonus Points***

- Judges may award up to 10 bonus points at their own discretion

**MAXIMUM TOTAL POINTS FOR ENTIRE COMPETITION = 200 POINTS + 20 BONUS POINTS**

## **Part IV: Competition Wrap-up**

At the conclusion of the school-level Preliminary Round Competition, the CSC faculty coordinator should submit the ASHP Clinical Skills Competition Report Form B available at [www.ashp.org/clinicalskills](http://www.ashp.org/clinicalskills) to ASHP **no later than November 1, 2011**. You will need to have the following information available in order to complete Report Form B:

1. the names of your two winning team members,
2. mailing addresses,
3. preferred email addresses,
4. ASHP member ID numbers. (They must hold current ASHP student memberships to participate in the national competition.)

Please let your team members know that complimentary MCM registrations will be processed throughout the month of November.

The coordinator should return the case and answer key to the student teams and hold a debriefing session to review the case.

## **Prizes/Awards**

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Awards may be provided locally by the school or college of pharmacy, student society of health-system pharmacists, or ASHP state affiliate.

ASHP provides complimentary registration to the Midyear Clinical Meeting to the winning student team from each school. If the school's winning team cannot participate in the national CSC, no substitute prizes will be awarded in lieu of the complimentary registration. Registration is transferable only to individuals participating in the national competition.

## **Important Tips for a Successful Preliminary School-Level Competition**

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- Publicize your competition to faculty members and students
- Distribute the practice case in advance of the competition
- Provide food or prizes for participants as an incentive for students to register for the competition
- Provide one set of references for every 5 teams participating in the competition
- Hold a brief workshop/learning session for judges; make sure there is a consensus on how the case will be scored
- Ask your state and/or local society of health-system pharmacy about sponsoring the competition by providing lunch for the participants or prizes for the winners

## National Competition at the ASHP Midyear Clinical Meeting

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The 2011 National Clinical Skills Competition will be held during the ASHP Midyear Clinical Meeting in New Orleans, LA. It is a two-day event, completed in two phases. Only student teams that have qualified at a School-Level Preliminary Round competition and are current ASHP members are eligible to participate in the national competition. Cases used in the national competition use the same format as the cases used in the school/regional competition, but have an advanced level of difficulty.

*This information is provided in detail to student teams who will advance to the national competition. Final details and the competition schedule will be emailed to school winners in mid- November. Please be sure to provide ASHP with the correct email addresses for your school's winners to ensure prompt receipt of these materials. Winners' contact information and ASHP member ID number is submitted to ASHP via Form B located at [www.ashp.org/clinicalskills](http://www.ashp.org/clinicalskills).*

**PLEASE NOTE: Convention center rooms are large and typically cold. Participants are encouraged to bring a sweater.**

### **Semi-Final Round (national-level): Written Case—Saturday, December 3**

Each student team has **2 hours** to complete the written portion of the competition. The written competition is a closed session—no visitors, faculty, or other students are permitted in the competition room at any time. Competition monitors will notify competitors when there are 60, 30, 15, and 5 minutes remaining in the competition. Teams may not take anything from or bring anything into the competition room while the competition is in progress. ASHP will provide all necessary materials including calculators, scratch paper, pencils, etc. for student teams to complete their written Pharmacist's Care Plans. No other personal items may be on the students' desks during the competition without permission of the competition monitors.

There are four (4) national-level semi-final round sessions scheduled on Saturday December 3, with the first registration session beginning at 7 AM. The competition schedule will be finalized and sent to all participating schools by the middle of November. It is **strongly encouraged** that student teams arrive in New Orleans on Friday, December 2 to avoid potential travel delays and to plan their trip from their hotels to the competition room in the convention center.

The top ten finalist teams will be announced during the first student event on Sunday morning. After the announcement is made, the list of teams will be posted at the CSC registration table, the Membership Info Center and at Meeting Info.

### **Final Round (national-level): Oral Presentation—Sunday, December 4**

As in the preliminary round competition, a total of **10 minutes** will be allotted for each presentation, which includes a **2 minute presentation period** and an **8 minute question and answer period**. The oral presentation should follow the same format described in the regional competition instructions. The top ten finalists present their cases in random order—students should be prepared to wait up to 4 hours in a holding room until they have presented. Teams are sequestered until they complete their oral presentation.

Other meeting attendees are invited to observe the final round of oral presentations. Winners of the national CSC will be announced during an awards ceremony on Sunday evening.

### **Prizes/Awards**

Members of the top ten finalist teams will each receive a \$100 ASHP gift certificate, an iPod Touch preloaded with Lexi-Complete™ with AHFS Essentials™ and a subscription to ASHP's PharmPrep Online, an online board exam preparatory tool. 1st, 2nd and 3rd place team members will also receive a drug information or pharmacy publication provided by ASHP as part of their prize package. In addition to these prizes, members of the first place winning team will each receive a \$500 cash award, individual first place trophies, and a large first place trophy for their school or college of pharmacy.

## **Appendix: Clinical Skills Competition Documents**

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- ASHP CSC Online Report Form A (Designate your CSC Coordinator)
- ASHP CSC Online Report Form B (Report your school-level winning team to compete at the national-level competition at the ASHP Midyear Clinical Meeting. ASHP member ID numbers must be included.)
- CSC Registration Form
- Pharmacist's Patient Database Form
- Drug Therapy Assessment Worksheet
- Pharmacist's Care Plan
- Evaluator Score Sheet – Written Case
- Evaluator Score Sheet – Oral Presentation

## ASHP CLINICAL SKILLS COMPETITION PRELIMINARY ROUND (SCHOOL LEVEL) REGISTRATION FORM

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Students should register **at least 2 weeks** before the competition. Upon registering, both members of the team should receive a practice case with answer key, blank forms, a list of acceptable references, and evaluation criteria.

**TEAM MEMBER 1**

**TEAM MEMBER 2**

1.

2.

3.

4.

5.

6.

7.

8.

9.

10.



ASHP CLINICAL SKILLS COMPETITION  
**PHARMACIST'S PATIENT DATA BASE FORM**

<b>Current Drug Therapy (Include OTCs, herbals, vitamins)</b>			
<b>Drug Name/Dose/Strength/Route</b>	<b>Prescribed Schedule</b>	<b>Duration Start-Stop Dates</b>	<b>Compliance/Dosing Issue</b>
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

<b>Medication History</b>	
1.	6.
2.	7.
3.	8.
4.	9.
5.	10.

<b>Allergies/Intolerances/ADRs</b>	
<input type="checkbox"/> No known drug allergies	
<b>Allergen</b>	<b>Reaction</b>

<b>Social Drug Use</b>
Alcohol
Caffeine
Tobacco

<b>Cost of Meds/month</b>
\$
Insurance: <input type="checkbox"/> Yes <input type="checkbox"/> No
Copay
Medicaid
Annual Income
\$

<b>Notes</b>

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## Drug Therapy Assessment Worksheet (DTAW)

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The Drug Therapy Assessment Worksheet (DTAW) will serve as a guide to identify any drug-related problems that your patient may have. You may make notes on the DTAW. **However, the Drug Therapy Assessment Worksheet will not be scored.** As you proceed through all the questions on the DTAW, you will accumulate a list of drug therapy problems. All of these problems should be assessed on your Pharmacist's Care Plan. Drug-related problems may be listed as separate items on your Pharmacist's Care Plan or addressed in your recommendations for therapy of the acute or chronic disease states that the medicines are being used to treat. Teams will be evaluated on identifying and making appropriate recommendations for drug-related problems in the following areas:

1. Correlation between drug therapy and medical problems
2. Appropriate drug selection
3. Drug regimen
4. Therapeutic duplication
5. Drug allergy or intolerance
6. Adverse drug events
7. Interactions: drug–drug, drug–disease, drug–nutrient, and drug–laboratory test
8. Social or recreational drug use
9. Failure to receive therapy
10. Financial impact
11. Patient knowledge of drug therapy

## ASHP CLINICAL SKILLS COMPETITION DRUG THERAPY ASSESSMENT WORKSHEET (DTAW)

Type of Problem	Assessment	Presence of Drug-Related Problem	Comments/Notes
Correlation between Drug Therapy and Medical Problems	<p>Are there drugs without a medical indication?</p> <p>Are any medications unidentified (are any unlabeled or are any—prior to admission/ clinic visit—unknown)?</p> <p>Are there untreated medical conditions? Do they require drug therapy?</p>	<ol style="list-style-type: none"> <li>1. A problem exists.</li> <li>2. More information is needed for a determination.</li> <li>3. No problem exists or an intervention is not needed.</li> </ol>	
Appropriate Drug Selection	<p>What is the comparative efficacy of the chosen medication(s)?</p> <p>What is the relative safety of the chosen medication(s)?</p> <p>Has the therapy been tailored to this individual patient?</p>	<ol style="list-style-type: none"> <li>1. A problem exists.</li> <li>2. More information is needed for a determination.</li> <li>3. No problem exists or an intervention is not needed.</li> </ol>	
Drug Regimen	<p>Are the prescribed dose and dosing frequency appropriate—within the usual therapeutic range and/or modified for patient factors?</p> <p>Is pm use appropriate for those medications either prescribed or taken that way?</p> <p>Is the route/dosage form/mode of administration appropriate, considering efficacy, safety, convenience, patient limitations, and cost?</p> <p>Are doses scheduled to maximize therapeutic effect and compliance and to minimize adverse effects, drug interactions, and regimen complexity?</p> <p>Is the length or course of therapy appropriate?</p>	<ol style="list-style-type: none"> <li>1. A problem exists.</li> <li>2. More information is needed for a determination.</li> <li>3. No problem exists or an intervention is not needed.</li> </ol>	
Therapeutic Duplication	<p>Are there any therapeutic duplications?</p>	<ol style="list-style-type: none"> <li>1. A problem exists.</li> <li>2. More information is needed for a determination.</li> <li>3. No problem exists or an intervention is not needed.</li> </ol>	
Drug Allergy or Intolerance	<p>Is the patient allergic to or intolerant of any medicines (or chemically related medications) currently being taken?</p> <p>Is the patient using any method to alert health care providers of the allergy/intolerance (or serious medical problem)?</p>	<ol style="list-style-type: none"> <li>1. A problem exists.</li> <li>2. More information is needed for a determination.</li> <li>3. No problem exists or an intervention is not needed.</li> </ol>	

## ASHP CLINICAL SKILLS COMPETITION DRUG THERAPY ASSESSMENT WORKSHEET (DTAW)

Type of Problem	Assessment	Presence of Drug-Related Problem	Comments/Notes
Adverse Drug Events	Are there symptoms or medical problems that may be drug induced? What is the likelihood that the problem is drug related?	<ol style="list-style-type: none"> <li>1. A problem exists.</li> <li>2. More information is needed for a determination.</li> <li>3. No problem exists or an intervention is not needed.</li> </ol>	
Interactions: Drug-Drug, Drug-Disease, Drug-Nutrient, and Drug-Laboratory Test	<p>Are there drug-drug interactions? Are they clinically significant?</p> <p>Are any medications contraindicated (relatively or absolutely) given patient characteristics and current/past disease states?</p> <p>Are there drug-nutrient interactions? Are they clinically significant?</p> <p>Are there drug-laboratory test interactions? Are they clinically significant?</p>	<ol style="list-style-type: none"> <li>1. A problem exists.</li> <li>2. More information is needed for a determination.</li> <li>3. No problem exists or an intervention is not needed.</li> </ol>	
Social or Recreational Drug Use	<p>Is the patient's current use of social drugs problematic?</p> <p>Could the sudden decrease or discontinuation of social drugs be related to patient symptoms (e.g., withdrawal)?</p>	<ol style="list-style-type: none"> <li>1. A problem exists.</li> <li>2. More information is needed for a determination.</li> <li>3. No problem exists or an intervention is not needed.</li> </ol>	
Failure to Receive Therapy	<p>Has the patient failed to receive a medication due to system error or noncompliance:</p> <p>Are there factors hindering the achievement of therapeutic efficacy?</p>	<ol style="list-style-type: none"> <li>1. A problem exists.</li> <li>2. More information is needed for a determination.</li> <li>3. No problem exists or an intervention is not needed.</li> </ol>	
Financial Impact	<p>Is the chosen medication(s) cost effective?</p> <p>Does the cost of drug therapy represent a financial hardship for the patient?</p>	<ol style="list-style-type: none"> <li>1. A problem exists.</li> <li>2. More information is needed for a determination.</li> <li>3. No problem exists or an intervention is not needed.</li> </ol>	
Patient Knowledge of Drug Therapy	<p>Does the patient understand the purpose of his or her medication(s), how to take it, and the potential side effects of therapy?</p> <p>Would the patient benefit from education tools (e.g., written patient education sheets, wallet cards, and reminder packaging)?</p>	<ol style="list-style-type: none"> <li>1. A problem exists.</li> <li>2. More information is needed for a determination.</li> <li>3. No problem exists or an intervention is not needed.</li> </ol>	
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## Pharmacist's Care Plan

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Using the patient's data and the DTAW, you will be able to develop an effective care plan for your patient. Clearly define the health care problems. Health care problems include treatment of all acute and chronic medical problems, resolution of all actual or potential drug-related problems, and identification of any other health care services from which your patient may benefit.

Remember to think about potential medical problems for which your patient may be at risk and disease prevention and disease screening activities that may be appropriate to recommend. Also, don't forget to consider specific patient factors that may influence your goals and recommendations for therapy (e.g., physical, psychological, spiritual, social, economic, cultural, and environmental).

To complete your care plan, specify all of your patient's health care problems that need to be addressed. Then prioritize the problems into one of three categories: (1) Most urgent problem, (2) Other problems that must be addressed immediately (or during this clinical encounter), OR (3) Problems that can be addressed later (e.g. a week or more later). Please note that only **one** problem should be identified as the "most urgent problem."

Then **for each problem** describe the (1) therapeutic goals, (2) recommendations for therapy, and (3) monitoring parameters and endpoints. Your monitoring parameters should include the frequency of follow-up and endpoints should be measurable by clinical, laboratory, quality of life, and/or other defined parameters (e.g., target HDL is greater than 50 mg/dL within 6 months).

## ASHP Clinical Skills Competition - Pharmacist's Care Plan

Evaluated for  
competition

### Problem Identification and Prioritization with Pharmacist's Care Plan

Team # \_\_\_\_\_

- A. List all health care problems that need to be addressed in this patient using the table below.
- B. Prioritize the problems by indicating the appropriate number in the "Priority" column below:
- 1 = Most urgent problem (Note: There can only be one most urgent problem)
  - 2 = Other problems that must be addressed immediately or during this clinical encounter; **OR**
  - 3 = Problems that can be addressed later (e.g. a week or more later)

*\*Please note, there should be only a "1", "2", or "3" listed in the priority column, and the number "1" should only be used once.*

Health Care Problem	Priority	Therapeutic Goals	Recommendations for Therapy	Monitoring Parameters and Endpoints

**ASHP Clinical Skills Competition - Pharmacist's Care Plan**

Evaluated for competition

**Problem Identification and Prioritization with Pharmacist's Care Plan**

Team # \_\_\_\_\_

Health Care Problem	Priority	Therapeutic Goals	Recommendations for Therapy	Monitoring Parameters and Endpoints

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# ASHP CLINICAL SKILLS COMPETITION

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## Evaluator Score Sheet

Evaluator's # \_\_\_\_\_ Evaluator's Name (optional) \_\_\_\_\_

Team # \_\_\_\_\_ Team Members' Names (optional) \_\_\_\_\_  
\_\_\_\_\_

### **WRITTEN Pharmacist's Care Plan (110 points: 100 Points + 10 bonus points)**

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Score \_\_\_\_\_  
(40 points)

#### **Problem Identification (40 Points Total)**

- |       |           |   |
|-------|-----------|---|
| _____ | 20 points | Identification of the <u>most urgent problem</u> (ranked Priority 1)  |
| _____ | 10 points | Identification of the problems to be <u>addressed immediately</u> or during this clinical encounter (ranked Priority 2) |
| _____ | 10 points | Identification of problems to be <u>addressed later</u> (e.g. a week or more later) (ranked Priority 3)                 |

#### **Prioritization (60 Points Total)**

Score \_\_\_\_\_  
(15 points)

#### **Therapeutic Goals**

Goals are individualized and realistic

Score \_\_\_\_\_  
(30 points)

#### **Recommendation for Therapy**

Recommendations are individualized, realistic, and consistent with medical standards and principles of evidence-based medicine

Score \_\_\_\_\_  
(15 points)

#### **Monitoring Parameters and Endpoints**

Parameters are practical and effective measures of the desired endpoint  
Endpoints are reasonable and appropriate choices for the patient  
Frequency is reasonable for the plan and appropriate for the patient

Bonus points \_\_\_\_\_

Judges may award up to 10 bonus points at their own discretion

Explanation: \_\_\_\_\_  
\_\_\_\_\_

**Total Score** \_\_\_\_\_

(Maximum Score—100 points with up to Bonus Points—110 points)

# ASHP CLINICAL SKILLS COMPETITION

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## Evaluator Score Sheet

Evaluator's # \_\_\_\_\_ Evaluator's Name (optional) \_\_\_\_\_

Team # \_\_\_\_\_ Team Members' Names (optional) \_\_\_\_\_  
\_\_\_\_\_

### ORAL CASE PRESENTATION (110 points: 100 Points + 10 bonus points)

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Score \_\_\_\_\_  
(20 points)

#### Presentation Skills

Verbal —clear, coherent, concise, complete, organized, confident, convincing  
Nonverbal—eye contact, facial, expressions, body language, voice, demeanor, presence  
Interpersonal —warmth, compassion, manners/tact, professionalism

Score \_\_\_\_\_  
(20 points)

#### Pharmacotherapy Knowledge

Accuracy and understanding

Score \_\_\_\_\_  
(30 points)

#### Clinical Judgment

Problem-solving and decision making  
Application of pharmacotherapy knowledge to the individual patient

Score \_\_\_\_\_  
(30 points)

#### Defense of Recommendations

Therapeutic rationale  
Support (evidence-based medicine)

Bonus points \_\_\_\_\_

Judges may award up to 10 bonus points at their own discretion

Explanation: \_\_\_\_\_  
\_\_\_\_\_

**TOTAL SCORE** \_\_\_\_\_ (100 points + 10 possible bonus points)

Written Score \_\_\_\_\_

Verbal Score \_\_\_\_\_

Overall Score \_\_\_\_\_

## Acknowledgments

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