

Clinical Skills Competition

2011 Student Handbook

Dear Student,

Thanks for your interest in the Clinical Skills Competition. This handbook has been put together just for you, the student. It contains some useful information about what the competition is, how the competition works at your school and at the national level during the Midyear Clinical Meeting, and gives you some advice for competing while learning how to develop your clinical skills and making some new friends along the way.

Here are some useful definitions if you are not familiar with the competition:

- Clinical Skills Competition – A 2-hour written assessment and oral presentation in which you analyze a patient case with a teammate of your choice
- Preliminary Round, Local Clinical Skills Competition – This phase of the competition takes place at your local school where you will complete a written assessment and oral presentation of a patient case. You work in a team of two competing against your local classmates. Your cases are evaluated by local faculty. The winning team from this phase is invited to compete on the national level during the Midyear Clinical Meeting
- National Clinical Skills Competition, Semi-Final Round – This phase of the competition takes place at the Midyear Clinical meeting on the Saturday before the meeting officially opens. This phase is invitation only, open to the winning team of the Local Clinical Skills Competition. This is when the students complete the written portion of the case.
- National Clinical Skills Competition, Final Round – This phase of the competition takes place at the Midyear Clinical meeting on the Sunday before the meeting officially opens. This phase is open only to the top ten teams from the semi-final round. This is where the teams make their oral presentation to a panel of three judges.

Some common questions (See the following document for more details):

- Does it cost anything? – No
- Who can compete? – Any student, who has not practiced as a licensed pharmacist, and who attends an accredited school of pharmacy
- What do I get? – You develop your clinical skills, you make friends along the way, you get something to talk about during an upcoming job interview, and there are prizes for winning the national competition. The winning team of the local competition gets a free registration to the Midyear Clinical Meeting, which currently costs \$325 for student non-members.
- How do I sign up? – Register for the competition with your local coordinator. If you don't know who that is you can ask your local student activities director or email us and we can help you students@ashp.org
- When is the competition? – The local competition is held at the discretion of the local coordinator, but must be held before November 1. The national level competition is held during the Saturday and Sunday before the Midyear Clinical Meeting officially starts.

We hope you enjoy the competition, please feel free to contact us at students@ashp.org with any questions.

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



American Society of
Health-System Pharmacists

PHARMACY STUDENT FORUM

16th Annual
**Clinical Skills
Competition**
Student Handbook
2011

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FACULTY AND JUDGES

Faculty Co-Coordinators:

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Hoytin Lee Ghin, Pharm.D., BCPS

National Competition Judges — Semi-Final Round:

Jennifer M. Belavic, Pharm.D., FASCP

Kimberley Benner, Pharm.D., BCPS

Laura Borgelt, Pharm.D., FCCP, BCPS

Mary M. Bridgeman, Pharm.D., BCPS

Tim R. Brown, Pharm.D.

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Terry Schwinghammer, Pharm.D., FASHP, FCCP, BCPS

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

2nd Place - University of Maryland School of Pharmacy - Lindsay McCann and Thomas Smoot

3rd Place - Drake University College of Pharmacy - Andrew Swartz and Kathryn Owen

CASE WRITERS

2010 Local Case Writer:

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Ernest Mario School of Pharmacy

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Introduction

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.

Preliminary Round (School-Level) Competition

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.

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.

Part I: Written Case

Each student team has two (2) hours to create a written Pharmacist's Care Plan for the case provided.

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 are provided with a supply of references with which they may consult during the written portion of the competition. Students competing in the competition will also have access to 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 will 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/csctrail to sign up.

Core references 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

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

Prizes/Awards

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.

National Competition at the ASHP Midyear Clinical Meeting

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 your local coordinator has your correct contact info.

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.

ASHP CLINICAL SKILLS COMPETITION
PHARMACIST'S PATIENT DATA BASE FORM

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

Medication History	
1.	6.
2.	7.
3.	8.
4.	9.
5.	10.

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

Social Drug Use
Alcohol
Caffeine
Tobacco

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

Notes

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Drug Therapy Assessment Worksheet (DTAW)

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"> 1. A problem exists. 2. More information is needed for a determination. 3. No problem exists or an intervention is not needed. 	
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"> 1. A problem exists. 2. More information is needed for a determination. 3. No problem exists or an intervention is not needed. 	
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"> 1. A problem exists. 2. More information is needed for a determination. 3. No problem exists or an intervention is not needed. 	
Therapeutic Duplication	<p>Are there any therapeutic duplications?</p>	<ol style="list-style-type: none"> 1. A problem exists. 2. More information is needed for a determination. 3. No problem exists or an intervention is not needed. 	
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"> 1. A problem exists. 2. More information is needed for a determination. 3. No problem exists or an intervention is not needed. 	

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"> 1. A problem exists. 2. More information is needed for a determination. 3. No problem exists or an intervention is not needed. 	
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"> 1. A problem exists. 2. More information is needed for a determination. 3. No problem exists or an intervention is not needed. 	
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"> 1. A problem exists. 2. More information is needed for a determination. 3. No problem exists or an intervention is not needed. 	
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"> 1. A problem exists. 2. More information is needed for a determination. 3. No problem exists or an intervention is not needed. 	
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"> 1. A problem exists. 2. More information is needed for a determination. 3. No problem exists or an intervention is not needed. 	
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"> 1. A problem exists. 2. More information is needed for a determination. 3. No problem exists or an intervention is not needed. 	

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Pharmacist's Care Plan

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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