

“As a resident, how can I improve my student precepting skills?”

Tia Collier, Pharm.D.
PGY-1 Pharmacy Practice Resident
The University of Mississippi Medical Center
Jackson, MS

Many residents and new preceptors are concerned that they are inadequately prepared to be preceptors. Even though you may feel that your knowledge base is barely adequate and that you are still learning the ropes yourself, remember that you still have a lot to offer a pharmacy student.

You should ask the college of pharmacy to have your student contact you before the beginning of the rotation. At that time, you can find out whether the student is familiar with your experiential setting. You may need to provide information on how to use your computer systems. Make sure the student meets your organization’s requirements for interacting with patients (e.g., HIPAA training and up-to-date immunizations).

A good preceptor is organized. One of the most important aspects of being a good preceptor is the ability to clearly outline what is expected of the student. Start with a written document that clearly spells out which activities the student is responsible for as well as a calendar of where to be and at what times. Provide a way to contact each other (pager or cellphone). Never place students in a situation in which they are required to provide information that could influence a patient’s drug therapy when they have no experienced preceptor to turn to for guidance.

Find out what types of experiences your student has already had. If this is the student’s first experience in an ambulatory clinic or an acute care setting, you will need to explain how a typical day is organized. Be a role model and have the student shadow you for the first few days. Try to set aside some time each day that is dedicated to the student’s learning needs. This could be time to discuss patients or have topic discussions. Residents often think that a preceptor is there to teach students about pathophysiology, clinical pharmacology, and pharmacotherapy. Although students like to have topic discussions during rotations, several factors must be kept in mind. Students will have a much better chance of retaining information if they are active learners. Provide background readings before topic discussions. If there are several students at your institution, let them teach one another. As a preceptor, you can ask questions or clarify when the student has trouble understanding specific concepts.

Focus on the basic skills that will be transferable to any work environment. If you work with a highly specialized patient population, your student may have very little knowledge about the diseases and drugs you see everyday. You should not try to make the student an expert in your field. Students need to focus on basic skills, including:

- (1) Gathering information from a medical record and organizing the data in a way that enables a pharmacist to monitor the patient’s response to drug therapy
- (2) Learning how to prioritize the patient’s problems. Students will gravitate to the areas they know best, but those may not be the most important issues the patient is currently facing. This situation often occurs in the acute care setting, where students often have difficulty distinguishing the patient’s acute problem from his or her more chronic conditions.
- (3) Becoming efficient. Pharmacists are expected to manage their time and multitask. Clinical rotations are meant to prepare students for the workplace. Asking students to follow only two

or three patients does not prepare them for the “real world.” Students will become more efficient in working up patients the more chances they have to do that activity. This needs to be balanced with the types of required activities (e.g., journal club presentation, nursing in-service) you outline for each student.

- (4) Communicating directly with patients to gather subjective information regarding their response to drug therapy
- (5) Communicating in a clear, concise, and professional manner with patients and health care professionals

Always try to assess your student’s understanding and knowledge with respect to a specific patient. Examples of questions you can ask are:

- (1) What is the most important problem to consider?
- (2) How does that information pertain to this patient’s problem?
- (3) What additional information would be helpful?
- (4) Why do you think that?
- (5) What other alternatives might work?
- (6) Does this make sense? Is there anything here that seems contradictory?
- (7) How would _____ (e.g., renal insufficiency, hepatic insufficiency, lung disease) change the situation?

Students often cite the best preceptors as those who provide frequent feedback. You should try to provide specific feedback as often as possible. It is important to reinforce what was done correctly or what the student did well. It is equally important to correct mistakes. Give specific examples of how the student could improve his or her performance, or give an example of how something might be done differently.

As a preceptor, you will be asked by the college of pharmacy to provide an assessment of a student’s knowledge, skills, and behaviors. Make sure you understand the evaluation tool you are asked to fill out. Don’t hesitate to contact the experiential director if something is unclear. Make sure the student is aware of the evaluation tool you will be using. It is helpful to have the student do a written self-evaluation at the midpoint of the rotation; then, you can compare the two evaluations and see if there are significant differences. If a student is not performing at an acceptable level, he or she should be made aware of this as early as possible in the rotation and given clear guidance regarding what must be done in order to pass. Notifying the college’s experiential director about any significant problem with a student’s knowledge, skills, or behaviors will be appreciated.

The best preceptors are excellent role models, not only for their clinical knowledge but also for their interactions with the health care team and patients. They are organized and provide a detailed schedule at the beginning of the rotation. They make the student feel comfortable asking questions. They set high (but achievable) expectations.

Jean M. Nappi, Pharm.D., FCCP, BCPS-AQ Cardiology
Professor of Clinical Pharmacy and Outcome Sciences
Associate Director of Graduate Pharmacy Education
Medical University of South Carolina College of Pharmacy
Charleston, South Carolina