

UNIVERSITY OF MISSISSIPPI SCHOOL OF PHARMACY
ADVANCED PHARMACY PRACTICE EXPERIENCES

Student: _____ Date: ___/___/___ Rotation Type: **AMBULATORY CARE** Rotation # _____

Preceptor: _____ Preceptor Signature: _____

APPE Ambulatory Care PRCT 587 New Drug Review

Directions: Answer the following questions related to a new drug review.

Have there been any new drugs approved applicable to your rotation practice setting within the past two years? If so, identify them by generic and brand name, indication, usual dosage, availability, and most common adverse effects. (Question 1 of 4 - Mandatory)

Are there any new drugs in the pipeline (any phase of clinical trials) that are applicable to your rotation practice setting? If so, give their current name and stage of development. (Question 2 of 4 - Mandatory)

Give a presentation, formally or informally, at the discretion of your preceptor, of any new drug that has been approved within the past two years. Present the information to your preceptor or other health care professionals. Identify below the generic and brand name of the drug you have selected, the indication, usual dosage, availability, and most common adverse effects. Also, describe the impact you think the drug will have in the marketplace. (Question 3 of 4 - Mandatory)

Describe various methods to learn of new drug approvals. (Question 4 of 4 - Mandatory)

Review your answers in this evaluation. If you are satisfied with the evaluation, click the SUBMIT button below. Once submitted, evaluations are no longer available for you to make further changes.