

**UNIVERSITY OF MISSISSIPPI SCHOOL OF PHARMACY
INTRODUCTORY PHARMACY PRACTICE EXPERIENCES**

Student: Date: / / Rotation Type: **AMBULATORY** Rotation #: 1 2 3 4
PHCY 650

Preceptor: Preceptor Signature:

Activity: Medication Assistance Program

Directions: Ask your preceptor to identify a patient who is receiving a medication that he/she cannot afford. Determine if there is a Medication Assistance Program (MAP) for this patient. Answer the questions below regarding these programs.

Medication: Current dose for patient:

Why is the patient taking this medication?

How often does the patient receive this medication?

What is the approximate price for the patient per month?

Who can complete the MAP form?

What additional information must be obtained from the patient and sent to the drug company?

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____
- 6) _____

Are there more affordable but equally efficacious medication options for the patient?

What are other ways you could help indigent patients obtain their medication?

AMBULATORY

Medication Assistance Program

ACPE Pre-APPE Core Domains: Insurance, Prescription Drug Coverage (Key Element 2.2); Mathematics (Key Elements 1.1, 2.2)
Core Entrustable Professional Activities: Patient Care Provider Domain-Establish a patient-centered care plan for a patient in collaboration with the patient caregiver(s), and other health professionals that is evidence-based and cost-effective.