

Documentation of **Integrated/Simulated** IPPE Hours

Name of Student: _____

Date of Admission to College of Pharmacy _____

Course	Integrated Activity	Hours	Date Completed
Intro to Pharmacy	BP Skills Practice	4	_____
	Immunization Skills Training (Simulation)	5	
Drug Information	Interview Skills (Simulation)	1	
Seminar II	DI Request	4	
Pharmacotherapy I	Complete Medication Review (CMR)	7	_____
	Service Learning Project	4	
Pharm Care 4 Lab	APhA Immunization Skills	10	_____
	ER Rotations	10	_____
	Patient Case	10	_____
	BP Screening	5	_____
	Interview Skills (Simulation)	1	
Community Pharmacy II	Medication Therapy Management (CMR)	4	
Total IPPE Hours = 65			

IPPE Coordinator _____

Date Signed _____