New Course Outline

- The PharmD Approval Process for New Course Outlines document provides more information on next steps and approval timelines.
- The Course Outline Submission Overview document provides more detailed guidelines on course learning objectives, topic outlines/scheduling requirements, and assessment methods.
- The AFPC Educational Outcomes for Professional Programs document provides complete information on roles and key competencies for Pharmacy Degree Programs.

Course Number: PHM388H1

Course Title: Minor Ailments

Outline Version Code:

Course Description:
The management of minor, self-limiting and self-diagnosed ailments such as rashes, cold sores and hay fever is within the scope of practice for pharmacists. This course is designed to build and enhance students' knowledge and skills necessary for contemporary and future pharmacy practice in the area of self-care and minor ailments. This course will cover the management of conditions not covered in other courses and will provide the students' with a comprehensive understanding of nonprescription and prescription therapeutics as they relate to patient self-medication and minor ailments. Emphasis will be placed on the role and responsibility of the pharmacist in accurately assessing and triaging patients, determining the appropriate use of nonprescription and prescription drugs, by determining when to follow-up, refer, and how to document the patient's care. The student will be equipped with the clinical skills, confidence, and tools needed to gather and convey reliable minor ailment information to patients and healthcare providers in an effort to effectively and confidently assess and treat patients. With this knowledge and a structured framework for conducting a minor ailments assessment, students will be able to help patients make appropriate decisions and achieve optimal outcomes from their selected, evidence-based therapy. The main course material will be presented as case-based didactic lectures; student participation in class discussions and interactive classroom activities will be expected.

Semester: ☒ Winter

Course Type: ☒ Elective

1. Course Learning Objectives:
Upon completion of this course, students will have achieved the following level of learning objectives:
Introductory = knowledge and comprehension of concepts, definitions
Intermediate = application of concepts to simple situations
Advanced = application of concepts to more complex situations with ability to synthesize and evaluate
**Knowledge**

**Introductory Level:**
Differentiate between minor ailments and self-care. Describe the role of minor ailment schemes in Canada (and worldwide) and the utility for practicing pharmacists.

**Intermediate Level:**
Discuss the role of self-care in Canada and identify the risks and benefits associated with it. Analyze barriers and opportunities to improve access to evidence-based non-prescription medications and self-care practices. Identify commonly encountered ailments experienced by patients and the role of the pharmacist. Discuss the evidence of nonpharmacologic measures employed to treat various minor ailments. Discuss the impact of concomitant disease states, previous drug regimens, and patient demographics on the selection of medication(s) used for common ailments. Recognize the role of the pharmacist in non-prescription therapeutics and identify evidence-based products and strategies to optimize patient outcomes. Design, implement, monitor, evaluate, and modify or recommend modifications in non-prescription drug therapy to ensure safe and effective patient care. Summarize pharmacologic and non-pharmacologic approaches in minor ailments.

**Advanced Level:**
For the given minor ailments (see course schedule), summarize the etiology, epidemiology, clinical presentation, risk factors, and red flag signs and symptoms. Compare and contrast the available classes of medications used for the selected minor ailments based on the following criteria: indications, efficacy, safety, adherence, mechanism of action, pharmacokinetics, pharmacodynamics, pharmacogenomics, side effects, warnings/precautions, contraindications, drug interactions, convenience, cost, formulations, stability and patient preference.

**Skills**

**Introductory Level:**
Integrate a structured approach using the QuEST SCHOLAR tool to gathering patient information, conducting a thorough patient assessment and consultation in the management of selected minor ailments. Assess patients seeking self-care and recommend appropriate nonprescription medications in accordance with established model standards of practice.

**Intermediate Level:**
Analyze relevant information from subjective and objective sources to identify drug therapy problems, urgency, and priority for a given clinical situation. Evaluate patient self-care complaints and triage to other healthcare providers as appropriate. Justify the selection of a preferred alternative for a given therapeutic scenario based on the assessment of relevant therapeutic alternatives and specific patient population. Demonstrate the skills required to initiate therapy for. Schedule I substances for select minor ailments. Develop a care plan for a given clinical situation after appropriately triaging and conducting a thorough patient assessment and consultation. Locate reliable sources of information in the area of minor ailment therapeutics and self-care. Demonstrate the ability to critique and interpret results from observational studies, randomized controlled trials and meta-analyses in minor ailment and self-care literature. Develop patient-specific plans for monitoring and follow-up evaluation of the minor
ailment(s). Effectively and efficiently document the minor ailment consultation. Demonstrate the ability to prepare
documentation of interventions or recommendations so that other health care providers can utilize the information.

Advanced Level:

**Attitudes/Values:**

Introductory Level:

Intermediate Level:
The student will undertake assessment and care plan development activities in a manner that illustrates their
understanding of the importance of respecting patient autonomy and individual therapeutic goals. To develop a
sense of professional responsibility to become aware of, and informed about, emerging legislation and initiatives
with the potential to impact pharmacy practice via the introduction of minor ailment schemes. The student will
demonstrate a non-judgmental, empathetic, and professional attitude towards patients who have minor ailments.

Advanced Level:

2. Rationale for Inclusion in the Curriculum:
Pharmacists routinely help patients who present at the pharmacy with different symptoms of conditions such as
cough and cold, acne, and low back pain. Recent trends have indicated that the Canadian healthcare system could
save billions of dollars if only 10% of people who currently seek formal care as a first step in treating a self-treatable
illness were to treat themselves.

The future of self-care will require that consumers are supported by knowledgeable, empathetic and educated
pharmacists who can accurately triage, assess and provide appropriate care or referral when necessary for various
conditions.

3. Pre-requisites:
MTM courses

4. Co-requisites:
n/a
5. Course Contact Hours and Teaching Methodologies:

<table>
<thead>
<tr>
<th>Didactic (lecture)</th>
<th>Hours: 26</th>
</tr>
</thead>
<tbody>
<tr>
<td>Large group problem-based/ case-based learning (group size: )</td>
<td>Hours:</td>
</tr>
<tr>
<td>Laboratory or Simulation</td>
<td>Hours:</td>
</tr>
<tr>
<td>Tutorial/Seminar/Workshop/Small Group (group size: )</td>
<td>Hours:</td>
</tr>
<tr>
<td>Experiential</td>
<td>Hours:</td>
</tr>
<tr>
<td>On-line</td>
<td>Hours:</td>
</tr>
<tr>
<td>Other (please specify):</td>
<td>Hours:</td>
</tr>
<tr>
<td><strong>Total Course Contact Hours</strong></td>
<td>Hours: 26</td>
</tr>
</tbody>
</table>

6. Estimate and description of student's weekly out-of-class preparation time excluding exam preparation:

Review lecture materials, learning objectives, patient cases/assessments. Complete required readings, MAC assignment, minor ailment plan documents prepared for each disease state (2-4 hrs/week). Time commitment may be higher during weeks of case discussions and exam preparation.

7. Topics Covered and Lecture Specific Learning Objectives

**Week 1**
Lecture Topic: Course Intro & The Pharmacist's Role in Self-Care & Minor Ailments

Lecture Learning Objectives:

**Week 2**
Lecture Topic: Communicating with Patients Module

Lecture Learning Objectives:
Interviewing, Assessing & Triaging the Self-Treating Patient

**Week 3**
Lecture Topic: CNS Module

Lecture Learning Objectives:
Fever, Heat-Related Disorders, Temperature Measurement, Headache

**Week 4**
Lecture Topic: Nutrition Module

Lecture Learning Objectives:
Weight Management, Fad Diets, Energy Drinks
Week 5
Lecture Topic: Infant Care Module – Part 1

Lecture Learning Objectives:
Teething, Administration Techniques & Pediatric Counselling Tips

Week 6
Lecture Topic: Infant Care Module – Part 2

Lecture Learning Objectives:
Infantile Colic, Dehydration, Infant Formulas

Week 7
Lecture Topic: GI Module

Lecture Learning Objectives:
Non-infectious, Infectious, Chemo-induced Diarrhea

Week 8
Lecture Topic: Musculoskeletal Module

Lecture Learning Objectives:
Sports Injuries, Sprains, Strains, Low back pain, Osteoarthritis

Week 9
Lecture Topic: Oral Care Module – Part 1

Lecture Learning Objectives:
Oral Hygiene, Fluoride Use, Xerostomia

Week 10
Lecture Topic: Oral Care Module – Part 2

Lecture Learning Objectives:
Aphthous Ulcers, Halitosis
**Week 11**  
**Lecture Topic:** Women's Health Module – Part 1

**Lecture Learning Objectives:**  
Vaginal Hygiene, Vaginitis (with a focus on VVC, BV, Trichomoniasis)

---

**Week 12**  
**Lecture Topic:** Women's Health Module – Part 2

**Lecture Learning Objectives:**  
Dysmenorrhea, Premenstrual Syndrome/PMDD

---

**Week 13**  
**Lecture Topic:** Student Choice Module (students select 2-3 topics)

**Lecture Learning Objectives:**  
Student Choice Topics (Pick 2-3: Dry Eye, Cough & Cold, Acne, Constipation, Conjunctivitis, GERD, IBS)

---

8. Assessment Methodologies Used:

<table>
<thead>
<tr>
<th>Assessment</th>
<th>Course Learning Objectives Addressed</th>
<th>Assessment Method Used</th>
<th>Percent of Course Grade</th>
<th>For Group Work: Individualized or same mark for all group members</th>
</tr>
</thead>
<tbody>
<tr>
<td>☒ Assignment ☐ Presentation ☐ Participation ☐ Mid-term ☐ Final Exam</td>
<td>Students must be able to differentiate between the products that have the most evidence behind their use and be able to provide proper education, monitoring and a follow-up plan to the patient.</td>
<td>Students will be expected to write a patient case on an assigned minor ailment and then discuss what therapies would be appropriate, effective and safe after assessment of the patient today (in Ontario) vs. in the future (following the models set up in other provinces) where they can prescribe Schedule I substances.</td>
<td>20%</td>
<td>n/a</td>
</tr>
<tr>
<td>☐ Assignment ☐ Presentation ☐ Participation ☒ Mid-term ☐ Final Exam</td>
<td>Various depending on topics covered</td>
<td></td>
<td>40%</td>
<td>n/a</td>
</tr>
</tbody>
</table>
Expectation for pass grades for all Pharmacy courses is 60%

9. Policy and procedure regarding late assignments/examinations/laboratories:
Students who fail to submit an assignment by the specified due date will receive a deduction of 10% for each calendar day beyond the due date (including weekends/holidays), to a maximum of 50%. Assignments will not be accepted for grading after 5 late calendar days.

10. Policy and procedure regarding missed assignments/examinations/laboratories:
Students who miss an examination or a test and who have a valid petition filed with the Registrar's office will be eligible to complete a make-up examination or test. The format of this examination or test will be at the discretion of the course coordinator, and may include, for example, an oral examination.

11. AFPC Education Outcomes addressed (check all those that apply):
- Refer to [AFPC Educational Outcomes for Professional Programs](#) for further information about the role and key competencies.

As Care Providers, pharmacy graduates:

**CP1 – Practice within the pharmacist scope of practice and expertise**

- **CP1.1** Apply knowledge from the foundational sciences to make decisions relevant to the contemporary and evolving scope of pharmacist practice;
- **CP1.2** Integrate AFPC Communicator, Collaborator, Leader-Manager, Health Advocate, Scholar, and Professional roles in their practice of pharmacy;
- **CP1.3** Recognize and respond to the complexity, uncertainty and ambiguity inherent in pharmacy practice;
- **CP1.4** Explain the benefits, risks and rationale associated with pharmacist-provided care as an important step in obtaining and documenting consent to pharmacist care;
- **CP1.5** Recognize and take appropriate action when signs, symptoms and risk factors that relate to medical or health problems that fall into the scope of practice of other health professionals are encountered.
CP2 – Provide patient-centred care

☒ CP2.1 Collect, interpret, and assess relevant, necessary information about a patient’s health-related care needs;

☒ CP2.2 Formulate assessments of actual and potential issues and in collaboration with the patient and other health team members as appropriate, prioritize issues to be addressed in a given patient encounter;

☐ CP2.3 Create and document plans in collaboration with the patient and other health team members as appropriate, and make recommendations to prevent, improve or resolve issues;

☐ CP2.4 Implement plans in collaboration with the patient and other health team members as appropriate, including:

  CP2.4.1 obtaining consent
  CP2.4.2 making a referral or consulting others
  CP2.4.3 adapting, initiating, renewing/continuing, discontinuing or administering medication as authorized
  CP2.4.4a dispensing and/or
  CP2.4.4b compounding and/or
  CP2.4.4c delegating/authorizing such tasks to others appropriately
  CP2.4.5 engaging the patient or care-giver through education, empowerment and self-management, and
  CP2.4.6 negotiating the role of pharmacy and non-pharmacy team members in continuity and transitions of care.

☐ CP2.5 Follow-up by monitoring, evaluating progress toward achievement of the patient’s goals of therapy, adjusting plans in collaboration with the patient and health team members across the care continuum.

CP3 – Actively contribute, as an individual and as a member of a team providing care, to the continuous improvement of health care quality and patient safety

☐ CP3.1 Recognize and respond to harm and potential harm from health care delivery, including patient safety incidents;

☐ CP3.2 Adopt strategies that promote patient safety and address human and system factors;

As Communicators, pharmacy graduates:

CM1 – Communicate in a responsible and responsive manner that encourages trust and confidence

☐ CM1.1 Select and use oral, non-verbal and written communication strategies (tools, techniques, technologies, etc.) effectively so that the patient’s best interests are foremost;

☐ CM1.2 Provide timely, clear responses that are tailored to the context and audience;
☐ CM1.3 Express facts, evidence, opinions and positions accurately and effectively, with clarity and confidence;

☐ CM1.4 Listen, actively solicit and respond appropriately to ideas, opinions and feedback from others;

☐ CM1.5 Use language, pace, tone, and non-verbal communication that is suitable for:
   a) the intended outcomes of the communication, and
   b) the complexity, ambiguity, urgency and/or difficulty of a situation, conversation or conflict

☐ CM1.6 Seek and synthesize relevant information from others in a manner that ensures common understanding and where applicable, clarifies and secures agreement and/or consent;

☐ CM1.7 Compose and share oral, written, and electronic information in a manner that optimizes patient safety, dignity, confidentiality, and privacy.

CM2 – Communicate in a manner that supports a team approach to health promotion and health care

☒ CM2.1 Engage in respectful, empathetic, compassionate, non-judgmental, culturally safe, tactful conversations with patients, communities, populations, and health team members;

☒ CM2.2 Demonstrate awareness of the impact of one’s own experience level, professional culture, biases and power and hierarchy within the health team on effective working relationships, communication and conflict resolution with health team members and adapt the approach to the situation appropriately;

☐ CM2.3 Demonstrate accuracy and appropriateness of communication as well as respect for the role of other health team members when disclosing information about harmful or potentially harmful situations;

☐ CM2.4 In word and in action, convey the importance of teamwork in patient-centred care, patient safety, health care quality improvement and health program delivery.

As Collaborators, pharmacy graduates:

CL1 – Work effectively with members of the health team including patients, pharmacy colleagues and individuals from other professions

☐ CL1.1 Establish and maintain positive relationships;

☐ CL1.2 Recognize, respect and negotiate the roles and shared/overlapping responsibilities of team members;

☐ CL1.3 Join with others in respectful, effective shared decision-making.

CL2 – Hand over the care of the patient to other pharmacy team members and non-pharmacy team members to facilitate continuity of safe patient care
☐ CL2.1 Determine when and how care should be handed over to another team member;
☐ CL2.2 Recognize, respect and honour the negotiate shared and overlapping responsibilities of patients, pharmacy team members and other health members when handovers occur;
☐ CL2.3 Demonstrate safe handover of care, using oral, written, and electronic communication, during a patient transition to a different care provider or setting.

As Leader-Managers, pharmacy graduates:

LM1 – Contribute to optimizing health care delivery and pharmacy services
☐ LM1.1 Work with others to apply quality improvement strategies and techniques to optimize pharmacy care;
☐ LM1.2 Contribute to a culture of patient safety;
☐ LM1.3 Confirm the quality, safety, and integrity of products;
☐ LM1.4 Use health informatics to improve the quality of care, manage resources and optimize patient safety.

LM2 – Contribute to the stewardship of resources in health care systems
☐ LM2.1 Apply evidence and management processes to achieve cost appropriate care;
☐ LM2.2 Allocate health care resources for optimal patient care;
☐ LM2.3 Contribute to the management of finances and health human resources in pharmacy practice settings;

LM3 – Demonstrate leadership skills
☐ LM3.1 Demonstrate leadership skills to enhance pharmacy practice and health care.

LM4 – Demonstrate management skills
☐ LM4.1 Work with others to apply the principles of effective management and supervision of health human resources and medication use systems;
☐ LM4.2 Use effective strategies to manage and improve their own practice of pharmacy.

As Health Advocates, pharmacy graduates:

HA1 – Respond to an individual patient’s health needs by advocating with the patient within and beyond the patient care environment
HA1.1 Work with patients to address determinants of health that affect them and their access to needed health services or resources;
HA1.2 Work with patients to increase opportunities to adopt healthy behaviours;
HA1.3 Incorporate disease prevention, health promotion and health surveillance into interactions with individual patients.

HA2 – Respond to needs of communities or populations they serve by advocating with them for system-level change in a socially accountable manner

☐ HA2.1 Work with community or population to identify the determinants of health that affect them;
☐ HA2.2 Participate in health promotion and disease prevention programs.

As Scholars, pharmacy graduates:

SC1 – Apply medication therapy expertise to optimize pharmacy care, pharmacy services and health care delivery

☒ SC1.1 Use knowledge and problem-solving to arrive at recommendations and decisions that are appropriate, accurate, and practical;
☒ SC1.2 Use professional experience to solve routine, previously encountered problems;
☒ SC1.3 Use established decision-making frameworks and apply learning required to manage new situations and problems.

SC2 – Integrate best available evidence into pharmacy practice

☒ SC2.1 Generate focused questions related to needs for information, recommendations and decisions in practice;
☒ SC2.2 Use systematic approaches in the search for best available evidence;
☒ SC2.3 Critically appraise health-related research and literature;
☒ SC2.4 Incorporate best available evidence in the decision-making process.

SC3 – Contribute to the creation of knowledge or practices in the field of pharmacy

☒ SC3.1 Apply scientific principles of research and scholarly inquiry;
☐ SC3.2 Apply ethical principles that underlie research and scholarly inquiry.

SC4 – Teach other pharmacy team members, the public and other health care professionals including students
☐ SC4.1 Provide effective education to others;
☐ SC4.2 Employ appropriate teaching roles when teaching others;
☐ SC4.3 Deliver effective feedback in teaching and learning situations;
☐ SC4.4 Use appropriate learning assessment and evaluation strategies when working with patients, team members, students and teachers.

As Professionals, pharmacy graduates:

PR1 – Committed to apply best practices and adhere to high ethical standards in the delivery of pharmacy care

☐ PR1.1 Exhibit professional behaviour whether face-to-face, in writing, or via technology-enabled communication. Professional behaviour includes, but is not limited to:

   a) demonstrating honesty, integrity, humility, commitment, altruism, compassion, respect for diversity and patient autonomy;
   b) being accessible, diligent, timely and reliable in service to others;
   c) abiding by the principle of non-abandonment;
   d) maintaining appropriate interpersonal boundaries;
   e) maintaining professional composure, demeanor, and language even in difficult situations, and;
   f) maintaining privacy and confidentiality;

☐ PR1.2 Use ethical frameworks as one component of professional judgment;

☐ PR1.3 Recognize and respond to situations presenting ethical dilemmas, including conflicts of interest;

☐ PR1.4 Engage in activities that:

   a) protect the public, and;
   b) advance the practice of pharmacy.

PR2 – Able to recognize and respond to societal expectations of regulated health care professionals

☐ PR2.1 Take responsibility and accountability for actions and inactions;

☐ PR2.2 Demonstrate a commitment to patient safety and quality improvement;

☐ PR2.3 Honour the laws, ethical codes, and regulatory requirements (by-laws, standards, policies) that govern the self-regulated profession of pharmacy;

☐ PR2.4 Demonstrate an understanding of federal, provincial/territorial, and municipal laws, policies and standards that apply to pharmacy workplaces;
PR2.5 Demonstrate an ability to maintain competence to practice through evaluating areas for improvement and planning, undertaking learning activities to address limitations in competence and/or performance and incorporating learning into practice;

PR2.6 Identify and respond to unprofessional, unethical, and illegal behaviours in pharmacists, other pharmacy team members, and other health professionals.

PR3 – Committed to self-awareness in the management of personal and professional well being

PR3.1 Set professional and personal goals, priorities, and manage their time to balance patient care, workflow, and practice requirements;

PR3.2 Examine, reflect upon, and manage personal attributes (knowledge, skills, beliefs, biases, motivations, emotions, etc.) that could influence self-development and professional performance;

PR3.3 Adapt their practice of pharmacy to fulfill evolving professional roles;

PR3.4 Recognize and respond to self and colleagues in need.