



# RECORD OF TRAINING AND EXPERIENCE OF PROVISIONALLY REGISTERED PHARMACIST (PRP)



PHARMACY BOARD MALAYSIA  
MINISTRY OF HEALTH MALAYSIA

2021

**PERSONAL PARTICULARS**

**[to be completed by Provisionally Registered Pharmacist (PRP)]**

1. Name as in Identification Card (in capital letter) :
2. I/C Number :
3. Provisional Registration Number:
4. Telephone Numbers:
5. Home Address :
6. E-mail Address :
7. Qualification (Degree awarded/University/Year) :
8. Scholarship/Sponsor (Federal/MARA/PTPTN/Others) during degree:
9. Principal Training Place :
10. Duration of training: From (date) : .....to .....
11. Name & Contact Number of Person in case of emergency

**I confirm that the above information is true.**

Signature :

Date :

Name :

**Endorsed by the immediate preceptor/s of the section/unit.**

Signature :

Date :

Name :

## **1. INTRODUCTION**

- 1.1** The Registration of Pharmacists Act (Amendment) 2003 stipulates that a person who is provisionally registered shall be required to obtain experience immediately upon being provisionally registered, engage in employment as a pharmacist to the satisfaction of the Pharmacy Board for a period of not less than one year.
- 1.2** The engagement as a pharmacist must be in any premise accredited and approved by Pharmacy Board Malaysia (PBM).
- 1.3** The PBM may extend for not more than one year the period of training of a provisionally registered pharmacist (PRP) if the Board is not satisfied with the performance of the PRP.
- 1.4** The provisional registration of a person shall be revoked if that person fails to engage in employment as a PRP to the satisfaction of the Pharmacy Board for a period of not less than 52 weeks in any premise accredited and approved by PBM.
- 1.5** All PRPs are required to pass the Pharmacy Qualifying Examination for Registration as Fully Registered Pharmacist (FRP) conducted by the Pharmacy Board before starting their PRP training.

## 2. PRP TRAINING MODULES AND RECORD

- 2.1** This log book is designed primarily to guide PRP and preceptors of various pharmacy disciplines in the training organization in coordinating activities and programmes during the 52 weeks of training.
- 2.2** This logbook will be the basis for the appraisal by all preceptors, which will be submitted to the PBM for the purpose of registration as a Fully Registered Pharmacist (FRP).
- 2.3** There are 6 main areas of training for the PRP;
- 2.3.1 Public Hospital
  - 2.3.2 Community Pharmacy
  - 2.3.3 Private hospital
  - 2.3.4 Research and Development (Academia)
  - 2.3.5 Manufacturing Pharmaceutical Industry
  - 2.3.6 Non- Manufacturing Pharmaceutical Industry
- 2.4** The preceptor is required to complete the record by filling the following;
- 2.4.1 Endorse the completion of each task with signature, name and date in the column provided.
  - 2.4.2 Level of performance is based on the following scale;

Scale	Rating	Description
9 – 10	Excellent	Performance represents an extraordinary level of achievement and commitment in terms of quality and time, technical skills and knowledge, ingenuity, creativity and initiative.
7 – 8	Good	Performance exceeded expectation. All goals, objectives and targets were achieved above the established standards.
5 – 6	Satisfactory	Performance met expectations in terms of quality of work, efficiency and timeliness

3 – 4	Unsatisfactory	Performance failed to meet expectations and/or one or more of the targets were not met
1 – 2	Poor	Performance was consistently below expectations and/or reasonable progress towards achieving goals was not made. Significant improvement is needed in one or more areas.

The passing mark is 60 % for each respective section. The overall average should be not less than 60%.

2.4.3 The final **appraisal and Appendix A or Appendix A1** should be completed **by the Master Preceptor** at the end of the **12th month** of the training period. Certified copies of Appraisals and Appendix A or Appendix A1 shall be uploaded by PRP into Pharmacist Registration Management System (PRiSMA) for the Fully Registered Pharmacist (FRP) application. The **original log book** should be kept at the premise for a minimum period of three (3) years.

### 3. DUTIES AND RESPONSIBILITIES OF A PRECEPTOR

#### CRITERIA OF A PRECEPTOR

##### 3.1 Type of Preceptors

<b>Preceptor</b> <i>(registered pharmacist with PBM)</i>	Lecturer of the Faculty/School of Pharmacy (Preceptor to PRP ratio is 1:2)
<b>Principal Preceptor</b> <i>(could be a non-pharmacist)</i>	Head of Unit /Section of the Faculty/ School of Pharmacy/ Research Supervisor
<b>Master Preceptor</b>	Dean of the Faculty/School of Pharmacy

*Criteria of a preceptor:*

1. *Must be at least 3 years in service and minimum Master in qualification*
2. *Fulfill other criteria set by PBM*

##### 3.2 Responsibilities of a Preceptor

- 3.2.1 Serves as a learning resource for all PRP. Ensuring a PRP receives necessary training to develop skills and behaviors expected as a competent pharmacist.
- 3.2.2 To be available to answer queries or direct the PRP to the appropriate references and show those areas of learning that are still to be covered.
- 3.2.3 Serves as a role model instilling professional values and attitudes. It is also necessary to explain to the PRP reasons for your actions when called upon to make professional judgments.
- 3.2.4 To monitor that the PRP has been exposed to a full range of professional services and to provide positive and corrective feedbacks during their training.
- 3.2.5 Responsible for assessing PRP performances during their training. Discuss on the PRP's strengths and weaknesses, whenever possible.

## 4. DUTIES AND RESPONSIBILITIES OF A PROVISIONALLY REGISTERED PHARMACIST [PRP]

Being a Provisionally Registered Pharmacist [PRP], you should:

- 4.1 at all-times comply with the directives and orders given to you by the department head.
- 4.2 aim to become a competent registered pharmacist by the end of the training period.
- 4.3 undertake the training modules/ program with a positive attitude and a commitment to learn from the preceptor and other staff in the training environment.
- 4.4 remember that obtaining adequate working experience is your responsibility. Others will help, but it requires a conscientious effort on your own part, not just passive acceptance.
- 4.5 recognize that not all of the preceptor's time can be devoted to teaching, and you should therefore actively acquire knowledge and skills by observation, reading and questioning others.
- 4.6 be aware that, in addition to the daily activities, you should allocate time to consider activities outside working/office hours.
- 4.7 always actively participate in continuous professional development as it is essential to build on your undergraduate studies and keep abreast of current knowledge.
- 4.8. be aware that: the Certificate of Satisfactory Experience, required under Section 6A (2) Registration of Pharmacists Act (Amendment) 2003 will only be issued to you if;
  - (i) you have passed the Pharmacy Qualifying Examination for Registration as Fully Registered Pharmacist (FRP) which will be conducted by the Pharmacy Board in March/June/November.  
*[Please inform your immediate preceptor if you wish to sit for the test at least a month earlier]*
  - (ii) The average passing mark of your training performance must be at least 60% for each section and the sum total of all the sections.

4.9 Overview of Competency Training Modules:

During the entire duration of training, the PRP will be placed in Divisions/Departments under the guidance and supervision of the respective heads and supervised overall by a Master Preceptor. The duration of training in each module is as indicated in Table 1.1.

**Table 1.1: Training Time-table**

<b>COMPETENCY TRAINING MODULES</b>	<b>Duration (Weeks)</b>
<b>A. Fundamental of Pharmacy Practice [Hospital(private/government)]</b>	
<u>Out-patient Pharmacy Services</u> <ul style="list-style-type: none"> <li>• Out-patient pharmacy management</li> <li>• Dispensing of medication/ prescriptions</li> <li>• Patient medication counseling</li> <li>• Dangerous drugs and psychotropics management</li> <li>• Inventory control and store management</li> </ul>	8
<u>In-patient Pharmacy Services</u> <ul style="list-style-type: none"> <li>• In-patient pharmacy (include manufacturing and prepacking)</li> <li>• Ward pharmacy practice</li> <li>• Drugs and poisons information services</li> <li>• Parenteral nutrition/ IV additives, clinical pharmacokinetics services &amp; oncology pharmacy services (Optional)</li> </ul>	4
<b>B. Research and Development (R&amp;D) [Faculty of/ school of Pharmacy faculty in local universities / research institutions]</b>	
<ul style="list-style-type: none"> <li>• Preparation and presentation of a proposal</li> <li>• Conducting research</li> <li>• Presentation of a final report</li> <li>• Preparation and submission of a manuscript</li> <li>• Demonstration of positive attitudes in compliance with research ethics</li> </ul>	40
<b>TOTAL</b>	<b>52</b>



## **RESEARCH AND DEVELOPMENT (ACADEMIA)**

As a member of the health care team, the pharmacist plays an important role in the performance of the research. Provisionally Registered Pharmacists (PRP) who opts to pursue R&D training as pre- registration requirement will undergo intensive training under Research and Development (Academia) setting for a period of 52 weeks.

Training in Research and Development in a systematic and scientific manner is a good platform to produce PRP, capable of enhancing the pharmacy profession in all areas. Thus, in this training module, all research topics conducted should be relevant and achievable within the duration of the PRP training. Research that involves MOH personnel or conducted in MOH facilities or to be funded by MOH should be registered with National Medical Research Register (<http://www.nmrr.gov.my>). The procedure and process in conducting the research should follow the Malaysian National Institute of Health (NIH) Guidelines by the Ministry of Health (MOH) (Draft version 2.2.27, August 2007).

Under this PRP training, basic knowledge of pharmacy practice is also applied to further enhance their competencies.

The training is divided into two modules:

Module A : Fundamental pharmacy practice **(23%) – (12 weeks)**

Module B : R&D **(77%) - (40 weeks)**

Both modules shall run continuously.

**Module A - Fundamental of Pharmacy Practice (12 weeks)**

Competencies	Period	Training sites
<p><u>Out-patient Pharmacy Services</u></p> <ul style="list-style-type: none"> <li>• Out-patient pharmacy management</li> <li>• Dispensing of medications/ prescriptions</li> <li>• Patient medications counselling</li> <li>• Dangerous drugs and psychotropics management</li> <li>• Inventory control and store management</li> </ul>	8 weeks	Hospital (private/ government)
<p><u>In-patient Pharmacy Services</u></p> <ul style="list-style-type: none"> <li>• In-patient pharmacy (include manufacturing and prepacking)</li> <li>• Ward pharmacy practice</li> <li>• Drugs and poisons information services</li> <li>• Parenteral nutrition/ IV additives, clinical pharmacokinetics services &amp; oncology pharmacy services (Optional)</li> </ul>	4 weeks	Hospital (private/ government)

**Module B – Research & Development (40 weeks)**

Activity	Period	Training sites
<ul style="list-style-type: none"> <li>• Preparation and presentation of a proposal</li> <li>• Conducting research</li> <li>• Presentation of a final report</li> <li>• Preparation and submission of a manuscript</li> <li>• Demonstration of positive attitudes in compliance with research ethics</li> </ul>	40 weeks	Faculty of/ school of Pharmacy faculty in local universities / research institutions

## MODULE A - FUNDAMENTAL OF PHARMACY PRACTICE

### OUT- PATIENT PHARMACY SERVICES AND INVENTORY CONTROL AND STORE MANAGEMENT (Duration of Attachment: 8 weeks)

#### 1) OUT- PATIENT PHARMACY SERVICES (Duration of Attachment: 8 weeks)

##### 1.1 Outpatient pharmacy management

1.1.1 Knowledge of stock movement and control, patient waiting time, peak hour management (staff mobilization), staff training and handling of drug information requests.

##### 1.2 Dispensing of medication / prescriptions

1.2.1 Proficient in prescription ordering & supply system (including Integrate Medication Supply System) and verification

- Good communication skills and counter service.
- Documentation of relevant data and appropriate statistical analysis
- Interpretation of prescriptions and completeness prescription (e.g. drug name, dose, frequency, duration etc.).
- Proper skills of intervention.

1.2.2 Familiarity with drug range. Knowledge on generic names, proprietary names, pharmacological groupings, Ministry of Health / Hospital Formularies

1.2.3 Proficient in the screening of prescriptions (e.g. dosage regimen, polypharmacy, drug interactions, adequacy of instruction(s), contraindications, incompatibilities etc.). The screening of a prescription must be performed at any point of processing a prescription (e.g. during receiving, filling and dispensing).

1.2.4 Awareness of the importance of patient's medication record (e.g. warfarin medication card)

1.2.5 Ability to contact prescriber to discuss errors or ambiguous prescriptions.

1.2.6 Proficient in filling prescriptions.

1.2.7 Proficient in dispensing.

1.2.8 Knowledge on the pre-packing process, packaging and labeling of medication dispensed

*(Duration of attachment for 1.1 and 1.2 = 4 weeks)*

1.3 Patient medication counseling

1.3.1 Ability to advise/ counsel on patient drug regimen/ therapy, indications, storage conditions, precautions, side effects, food /drug interactions, dosage regimens, compliance and missed doses, use of devices (e.g. inhalers, insulin pens, interferon pens).

1.3.2 Ability to assist in conducting group counseling sessions.

*(Duration of attachment: 2 weeks)*

1.4 Dangerous / psychotropic drugs management

1.4.1 Knowledge of psychotropic and dangerous drugs distribution and disposal in accordance to the respective legislations:

- Dangerous Drugs Act 1952
- Poisons Act 1952
- Poisons (Psychotropic Substances) Regulations 1989

1.4.2 The activities include in this department are:

- Screening
- Filling
- Dispensing
- Medication Counseling

*(Duration of attachment: 1 week)*

**SECTION 1: SCREENING**

**WEEK 1**

Date	Type of Interventions				Point of Screening (*R/F/D)	Description of intervention(s)
	Incomplete Prescriptions	Inappropriate Regimens	Inappropriate Prescriptions	Other		

**Type of Interventions:**

- |                                |  |                          |                      |                                      |
|--------------------------------|--|--------------------------|----------------------|--------------------------------------|
| 1. Incomplete Prescriptions    | - (a) Frequency                          | (b) Duration             | (c) Signature & chop | (d) Countersignature                 |
| 2. Inappropriate Regimens      | - (a) Medicine                           | (b) Duration             | (c) Dose             | (d) Frequency                        |
| 3. Inappropriate Prescriptions | - (a) Spelling                           | (b) Wrong Identification | (c) Polypharmacy     | (d) Interaction (e) Contraindication |
| 4. Other                       | - (a) Not in the hospital drug formulary | (b) Authenticity         | (c) Illegibility     |                                      |

\* R: Receiving      F: Filling      D: Dispensing

Name of Preceptor:

Signature:

General Remarks:

**SECTION 1: SCREENING**

**WEEK 2**

Date	Type of Interventions				Point of Screening (*R/F/D)	Description of intervention(s)
	Incomplete Prescriptions	Inappropriate Regimens	Inappropriate Prescriptions	Other		

**Type of Interventions:**

- |                                |  |                          |                      |                                      |
|--------------------------------|--|--------------------------|----------------------|--------------------------------------|
| 5. Incomplete Prescriptions    | - (a) Frequency                          | (b) Duration             | (c) Signature & chop | (d) Countersignature                 |
| 6. Inappropriate Regimens      | - (a) Medicine                           | (b) Duration             | (c) Dose             | (d) Frequency                        |
| 7. Inappropriate Prescriptions | - (a) Spelling                           | (b) Wrong Identification | (c) Polypharmacy     | (d) Interaction (e) Contraindication |
| 8. Other                       | - (a) Not in the hospital drug formulary | (b) Authenticity         | (c) Illegibility     |                                      |

\* R: Receiving      F: Filling      D: Dispensing

Name of Preceptor:

Signature:

General Remarks:

**SECTION 1: SCREENING**

**WEEK 3**

Date	Type of Interventions				Point of Screening (*R/F/D)	Description of intervention(s)
	Incomplete Prescriptions	Inappropriate Regimens	Inappropriate Prescriptions	Other		

**Type of Interventions:**

- |                                 |  |                          |                      |                                      |
|---------------------------------|--|--------------------------|----------------------|--------------------------------------|
| 9. Incomplete Prescriptions     | - (a) Frequency                          | (b) Duration             | (c) Signature & chop | (d) Countersignature                 |
| 10. Inappropriate Regimens      | - (a) Medicine                           | (b) Duration             | (c) Dose             | (d) Frequency                        |
| 11. Inappropriate Prescriptions | - (a) Spelling                           | (b) Wrong Identification | (c) Polypharmacy     | (d) Interaction (e) Contraindication |
| 12. Other                       | - (a) Not in the hospital drug formulary | (b) Authenticity         | (c) Illegibility     |                                      |

\* R: Receiving      F: Filling      D: Dispensing

**Name of Preceptor:**

**Signature:**

**General Remarks:**

**SECTION 1: SCREENING**

**WEEK 4**

Date	Type of Interventions				Point of Screening (*R/F/D)	Description of intervention(s)
	Incomplete Prescriptions	Inappropriate Regimens	Inappropriate Prescriptions	Other		

**Type of Interventions:**

- |                                 |  |                          |                      |                                      |
|---------------------------------|--|--------------------------|----------------------|--------------------------------------|
| 13. Incomplete Prescriptions    | - (a) Frequency                          | (b) Duration             | (c) Signature & chop | (d) Countersignature                 |
| 14. Inappropriate Regimens      | - (a) Medicine                           | (b) Duration             | (c) Dose             | (d) Frequency                        |
| 15. Inappropriate Prescriptions | - (a) Spelling                           | (b) Wrong Identification | (c) Polypharmacy     | (d) Interaction (e) Contraindication |
| 16. Other                       | - (a) Not in the hospital drug formulary | (b) Authenticity         | (c) Illegibility     |                                      |

\* R: Receiving      F: Filling      D: Dispensing

**Name of Preceptor:**

**Signature:**

**General Remarks:**



**SECTION 2: FILLING OF PRESCRIPTIONS (Include Labeling and Recording)**

- **At least 5 complete filling processes must be assessed by a senior pharmacist**

Date of assessment	Patient Particulars	No. of Item in Prescriptions	Remarks	Name & Signature of Senior Pharmacist





**SECTION 4: MEDICATION COUNSELING (INDIVIDUAL – Minimum 8 sessions/ 2 weeks)**

- At least 4 counseling sessions must be directly observed and assessed by a senior pharmacist

**WEEK 1**

Date	Patients RN	Counseling Based On The Types Of Pharmacotherapy Management – minimum 2 patients/ type				Name & Signature of Preceptor
		Antidiabetics	Antihypertensives	Antiasthmatics	Others (Please Specify)	

**SECTION 4: MEDICATION COUNSELING (INDIVIDUAL – Minimum 8 sessions/ 2 weeks)**

- At least 4 counseling sessions must be directly observed and assessed by a senior pharmacist

**WEEK 2**

Date	Patients RN	Counseling Based On The Types Of Pharmacotherapy Management – minimum 2 patients/ type				Name & Signature of Preceptor
		Antidiabetics	Antihypertensives	Antiasthmatics	Others (Please Specify)	

**SECTION 5: DANGEROUS DRUGS & PSYCHOTROPICS**

Date	Dangerous Drugs and Psychotropic	
	Number Of Prescriptions Dispensed & Recorded (minimum 4 prescriptions/week)	Name & Signature of Pharmacist In-charge

**SECTION 6: PREPARATION / OBSERVATION / COUNTER-CHECKING OF JOB SHEET OF EXTEMPORANEOUS (MINIMUM 10 PREPARATIONS)**

- Ability to understand formulation and calculate the appropriate quantities required

**Extemporaneous Preparations**

Date	MRN	Name of Preparation	Remarks	Signature of Preceptor

# **ASSESSMENT**



**SECTION 7: OUTPATIENT PHARMACY MANAGEMENT**

No.	Task	Level of Performance										Comments	
		1	2	3	4	5	6	7	8	9	10		
1	Describe the drug range, generic names, proprietary names, pharmacological groupings, Ministry of Health / Hospital Formularies												
2	Describe the good dispensing procedure												
3	Describe the stock movement and inventory control												
4	Describe the patient waiting time and peak hour management (staff mobilization)												
5	Describe the psychotropic and dangerous drugs distribution and disposal in accordance to the respective legislations: <ul style="list-style-type: none"> <li>• Dangerous Drugs Act 1952</li> <li>• Poisons Act 1952 (Psychotropic Substances Regulations 1989)</li> </ul>												
<b>MARKS</b>													

**SECTION 8: COMPETENT ASSESSMENT**

No.	Demonstrate the skill of	Level of Performance										Comments	
		1	2	3	4	5	6	7	8	9	10		
1	Screening of prescription												
2	Filling of Prescriptions												
3	Dispensing												
4	Medication counseling												
5	Dangerous drug & psychotropic management												
6	Preparing / Counter-Checking of Job Sheet of Extemporaneous												
7	Outpatient Pharmacy Management												
<b>MARKS</b>													

$$\text{TOTAL MARKS} = \frac{\text{_____}}{130} \times 100\%$$

$$= \text{_____} \%$$

**Preceptor's Name & Signature:**

**General Comment on Attitude:**

**NOTE:**

1. % mark should not less than 60% for every units/ services

## **2) INVENTORY CONTROL AND STORE MANAGEMENT (Duration of Attachment: 1 week)**

### **2.1 STORE MANAGEMENT**

2.1.1 Knowledge and understanding of the principles of store management organization structure, inventory, stock movement and control, cleanliness & sanitation and security.

2.1.2 Knowledge of the store QAP indicators and statistic.

2.1.3 Knowledge and understanding of the principles of store management organization structure, procurement in accordance to Treasury Instruction (direct purchase, quotation and tender), stock movement and control in accordance to Procedures in Store Management.

### **2.2 PROCUREMENT AND DISTRIBUTION**

2.2.1 Knowledge of ordering process and monitoring of vendor performances:

- Financial management
- Modified Budgeting System
- No. of orders processed
- Quotations
- eSPKB (Sistem Perancangan Kewangan Belanjawan)
- e Perolehan
- Receiving of goods
- Data and statistical compilation and analysis for
- preparation of Drug Committee Meeting

### **2.3 STORAGE**

2.3.1 Knowledge of storage of biological, handling of cytotoxic drugs, refrigerated items, inflammables and corrosive items, safety measures, maintenance of cold chain on transit and storage in accordance to Good Storage Practice (GSP).

## **2.4 INVENTORY CONTROL**

2.4.1 Knowledge and understanding of drug usage patterns, identification of slow and non- moving stocks, maximum and minimum stock levels, cost accounting and expiry date monitoring:

- Monitoring of slow-moving items and generation of slow-moving list
- Disposition of non- conformance products
- Yearly stock check
- Condemn of drugs

## **2.5 DISPOSAL**

2.5.1 Knowledge of disposal procedures and it's documentation.

## **2.6 PRODUCT COMPLAINT**

2.6.1 Knowledge on handling of product complaints

## **2.7 PRODUCT RECALL**

2.7.1 Knowledge of product recall and reporting procedures

## **2.8 DANGEROUS / PSYCHOTROPIC DRUGS MANAGEMENT**

2.8.1 Knowledge of psychotropic and dangerous drugs distribution and disposal in accordance to the respective legislations:

- Dangerous Drugs Act 1952 & its Regulations
- Poisons Act 1952 & its Regulations
- Poisons (Psychotropic Substances) Regulations 1989

**SECTION: INVENTORY CONTROL AND STORE MANAGEMENT**

- Knowledge and understanding of the principles of procurement and distribution, storage, inventory control, disposal, product complaints ad product recall.

Date	Task	Level of Performance										Comments	Name and Signature of Preceptor
		1	2	3	4	5	6	7	8	9	10		
	<p><b>1.STORE MANAGEMENT</b></p> <p>Describe principles of store management organization structure stock movement, treasury instructions (direct purchase, quotation and tender), control, cleanliness and security</p>												
	<p><b>2.PROCUREMENT AND DISTRIBUTION</b></p> <p>Describe ordering process and monitoring of vendor performances (budget coding, HIS/ APPL, NON-APPL/ e-SPKB/ e-Perolehan and receiving of goods).</p>												
	<p><b>3.STORAGE</b></p> <p>Describe storage in accordance to Good Storage Practice (identify storage requirement of biological, cytotoxic drugs, refrigerator items, and inflammable and corrosive items; cold chain management).</p>												

Research and Development (Academia)

Date	Task	Level of Performance										Comments	Name and Signature of Preceptor	
		1	2	3	4	5	6	7	8	9	10			
	<p><b>4.INVENTORY CONTROL</b></p> <p>Describe drug usage patterns, identification of slow and non-moving stocks, maximum and minimum stock levels, cost accounting, vote book and expiry date monitoring.</p>													
	<p><b>5.DISPOSAL</b></p> <p>Describe the disposal procedures, documentation and disposal storage</p>													
	<p><b>6.PRODUCT COMPLAINTS</b></p> <p>Describe the handling of product complaints and reporting procedures</p>													
	<p><b>7.PRODUCT RECALL</b></p> <p>Describe the handling of product recall and reporting procedures</p>													
<b>MARKS</b>														

*Research and Development (Academia)*

$$\text{Total Marks} = \frac{\quad}{70} \times 100\%$$

$$= \quad \%$$

**Preceptor's Name & Signature:**

**General Comment on Attitude:**

**NOTE:**

1. % mark should not less than 60% for every units/ services.



**IN-PATIENT PHARMACY SERVICES (DURATION OF ATTACHMENT: 4 WEEKS)**

**3) IN-PATIENT PHARMACY (Duration of Attachment: 2 weeks)**

**3.1 Inpatient Pharmacy/ Satellite Pharmacy Management**

3.1.1 Knowledge of stock movement and control, peak hour management (staff mobilization), staff training, handling drug information requests, manufacturing and prepacking.

**3.2 In- Patient Dispensing**

3.2.1 Proficient in prescription ordering & supply system (UOU / UD / bulk indent order) and verification.

- Good communication skills and knowledge.
- Documentation of relevant data and statistics.
- Proficient in reading, interpreting and dispensing via medication profile indent books or ward requests.
- Proficient in screening of inpatient orders and/ or medication profile (e.g. dosage regimen, polypharmacy, drug interactions, adequacy of instructions, contraindications, incompatibilities) to ensure appropriateness of therapy.
- Knowledge of computerized / manual recording and labeling methods.

3.2.2 Familiarity with drug range and knowledge on generic names, proprietary names, pharmacological groupings, Ministry of Health / Hospital Formularies.

3.2.3 Ability to contact prescriber to discuss errors or ambiguous prescriptions.

3.2.4 Proficient in reviewing medication profiles.

3.2.5 Proficient in filling prescriptions.

3.2.6 Proficient in counterchecking

### **3.3 Patient Medication Counseling**

3.3.1 Ability to advice on indications, storage conditions, precautions, side effects, food/drug interactions, dosage regimen, compliance and missed doses, use of devices (eg. inhalers, insulin pens, interferon pens etc).

3.3.2 Discharge dispensing and counseling

### **3.4 Ward Inspection**

3.4.1 Stock handling

3.4.2 Identify storage requirements

3.4.3 Records

## **4) WARD PHARMACY PRACTICE (Duration of Attachment: 1 week)**

4.1 Knowledge of ward and pharmacy round procedures, presentation of case studies, medication chart monitoring, patient drug history taking, monitoring patient parameters, patient contact, questioning and counseling, collection of drug utilization review data and other statistics & forms involved.

4.2 Ability to read and comprehend patient's case notes.

4.3 Ability to discuss with prescriber.

4.4 Ability to recommend pharmacotherapy regimen and monitoring of patient progress.

4.5 Patient drug history taking for all new admissions in the designated ward within 24 hours of admission.

4.6 Case clerking and monitoring with complete medication profile.

4.7 Ward rounds including grand and pharmacists round.

4.8 Counseling.

4.9 Case reporting.

4.10 Case presentation/ discussion.

4.11 Detection of ADR (if any).

**5) DRUG AND POISON INFORMATION SERVICES (Duration of Attachment: 1 week)**

**5.1 Provision of Drug & Poison Information Service**

- 5.1.1 Ability to respond and gather information on the enquiry and requestor in an efficient manner.
- 5.1.2 Ability to locate, analyze and deliver the information required in a skillful, efficient and evidence – based manner to meet the needs of the requestor.
- 5.1.3 Ability to document enquiries and information given in a clear and systematic manner.
- 5.1.4 Knowledge in formulary development, evaluation and maintenance, and ability to provide support in Pharmacy & Hospital Drug Committee agendas.

**IN-PATIENT PHARMACY SERVICE**

**IN-PATIENT PHARMACY SERVICE (2 WEEKS)**

**SECTION 1: PROCESSING OF PRESCRIPTIONS / REVIEWING MEDICATION PROFILES**

(Min: 20 medication profile/ day)

**WEEK 1**

Date	Number of profiles reviewed	Number of Intervention	Types of intervention *	Number of Communications with doctors	Comments	Signature of Preceptor

**\* Code for Types of Intervention:**

- |                             |                      |
|-----------------------------|----------------------|
| 1: Incomplete Prescription  | 4: Interaction       |
| 2: Polypharmacy             | 5: Contraindications |
| 3: Wrong Dosage Form / Dose | 6: Countersignature  |

**SECTION 1: PROCESSING OF PRESCRIPTIONS / REVIEWING OF MEDICATION PROFILES**  
**(Min: 20 medication profiles / day)**

**WEEK 2**

Date	Number of profiles reviewed	Number of Intervention	Types of intervention *	Number of Communications with doctors	Comments	Signature of Preceptor

**\* Code for Types of Intervention:**

- |                             |                      |
|-----------------------------|----------------------|
| 1: Incomplete Prescription  | 4: Interaction       |
| 2: Polypharmacy             | 5: Contraindications |
| 3: Wrong Dosage Form / Dose | 6: Countersignature  |

**SECTION 2: COUNTERCHECKING OF PRESCRIPTIONS / INDENT ORDERS**  
**(Min: 20 prescriptions / indents per day)**

**WEEK 1**

Date	Number of Prescriptions / Indents	Number of Prescriptions wrongly filled	Descriptions of Error	Signature of Preceptor

**SECTION 2: COUNTERCHECKING OF PRESCRIPTIONS / INDENT ORDERS**  
**(Min: 20 prescriptions / indents per day)**

**WEEK 2**

Date	Number of Prescriptions / Indents	Number of Prescriptions wrongly filled	Descriptions of Error	Signature of Preceptor

**SECTION 3: PATIENT MEDICATION COUNSELING**

**Bedside Dispensing and Discharge Counseling (Minimum: 4 sessions/ week)**

- **At least 1 bedside dispensing and counseling must be assessed by a senior pharmacist**

**WEEK 1**

Date	Patients RN	Counseling Based On The Types Of Pharmacotherapy Management – minimum 1 patients/ type				Name & Signature of Preceptor
		Antidiabetics	Antihypertensives	Antiasthmatics	Others (Please Specify)	



**SECTION 4: WARD INSPECTIONS (Minimum: at least 1 ward/ unit inspections)**

Date	Ward/ Unit	Preceptor's Signature	Comments

**Notes:** Ward Inspection Report should be completed and submitted within a week after inspection

# **ASSESSMENT**

## **(In-Patient Pharmacy Management)**

**SECTION 5: IN-PATIENT PHARMACY MANAGEMENT**

No.	Task	Level of Performance										Comments	Name & Signature of preceptor	
		1	2	3	4	5	6	7	8	9	10			
1	Describe the staff management and training													
2	Describe drug range and generic names, proprietary names, pharmacological groupings, Ministry of Health / Hospital Formularies													
3	Demonstrate the ability to make manually record /computerized system and produce label													
	<b>MARKS</b>													

**SECTION 6: COMPETENT ASSESSMENT**

No.	Demonstrate the skill of	Level of Performance										Comments	Name & Signature of preceptor	
		1	2	3	4	5	6	7	8	9	10			
1	Prescriptions Processing / Reviewing Medication Profile													
2	Prescriptions Counterchecking / Indent Orders													
3	Patient Medication Counseling													
4	Ward Inspections													
5	In-Patient Pharmacy Management													
	<b>MARKS</b>													

$$\begin{aligned} \text{Total Marks} &= \frac{\quad}{80} \times 100\% \\ &= \quad \% \end{aligned}$$

**Preceptor's Name & Signature:**

**General Comment on Attitude:**

**NOTE:**

1. % mark should not less than 60% for every units/ services.





**SECTION 3: MEDICATION COUNSELING**

Bedside Counseling (Minimum 4 patients/ week)

- At Least 1 Bedside Counseling Must Be Assessed By a Senior Pharmacist

**WEEK 1**

Date	Patients RN	Counseling Based On The Types Of Pharmacotherapy Management – minimum 1 patient /type				Name & Signature of Preceptor
		Antidiabetics	Antihypertensives	Antiasthmatics	Others (Please Specify)	



**SECTION 4: WARD ROUND/ PHARMACIST ROUND – (TO BE DONE DAILY)**

**Discipline / Ward:**

**WEEK 1**

<b>Date</b>	<b>Name of Consultant/ Doctor/ Pharmacist Conducting the Round</b>	<b>Number of Interventions Done</b>	<b>Number of Queries Responded</b>	<b>Preceptor's Initial</b>

**SECTION 5: CASE REPORT (MINIMUM: 1 CASE)**

- To assess the ability in clerking case, comprehend patient's case note, complete case report study with evidence based approach and recommend related pharmaceutical care issues of the patients

Date	MRN	Topic	Remarks	Preceptor's Initial

**SECTION 6: CASE PRESENTATION (MINIMUM: 1 CASE)**

- Case presentation should be conducted in the clinical meeting or in the ward
- To assess the ability to comprehend case notes, devise therapeutic plan, communication and presentation of case to other healthcare personnel in order to enhance rational drug use

Date	Types of Case Presented	Remarks	Preceptor's Initial

**SECTION 7: ADR REPORT (MINIMUM: 1 CASE; IF ANY)**

- ADR can be reported from other activities
- To assess the ability to identify ADR and perform ADR report

Date	MRN	Suspected Drug Causing the ADR	Remarks	Preceptor's Initial

# **ASSESSMENT**

**SECTION 8: WARD PHARMACY PRACTICE MANAGEMENT**

No.	Task	Level of Performance										Comments	Name & Signature of preceptor	
		1	2	3	4	5	6	7	8	9	10			
1	Describe ward and pharmacy round procedures, presentation of case studies, medication chart monitoring, patient drug history taking, monitoring patient parameters, patient contact, questioning and counseling, collection of drug utilization review data and other statistics & forms involved.													
2	Clerking patient's case notes.													
3	Discuss with prescriber.													
4	Recommend pharmacotherapy regimen and monitoring of patient progress.													
5	Demonstrate in patient drug history taking for all new admissions in the designated ward within 24 hours of admission.													
<b>MARKS</b>														

**SECTION 9: COMPETENT ASSESSMENT**

Date	Demonstrate the skill of	Level of Performance										Comments	Name & Signature of preceptor	
		1	2	3	4	5	6	7	8	9	10			
1	Medication History Assessment													
2	Clerking & Reviewing Clinical Case													
3	Medication Counseling													
4	Ward Round / Pharmacist Round													
5	Case Reporting													
6	Case Presentation													
7	ADR Reporting (if any)													
<b>MARKS</b>														

$$\text{Total Marks} = \frac{\quad}{110} \times 100\%$$

$$= \quad \%$$

**Preceptor's Name & Signature:**

**General Comment on Attitude:**

**NOTE:**

1. % mark should not less than 60% for every units/ services.



**DRUG AND POISON INFORMATION SERVICE (DIS)**

**SECTION 1: RECEIVE, ANSWER AND DOCUMENT ENQUIRIES (Minimum: 5 / week)  
WEEK 1**

Date	No. of Enquiries	Type of Enquiries					Signature of Preceptor
		Poisoning	Indication/ dose	Interaction	Efficacy	Other	

**\* To be attached together with DIS Request Form**

# **ASSESSMENT**

## SECTION 2: DRUG INFORMATION SERVICE MANAGEMENT

No.	Task	Level of Performance										Comments	Name & Signature of preceptor	
		1	2	3	4	5	6	7	8	9	10			
1	Retrieve, analyze and deliver the information required in a skillful, efficient and evidence – based manner to meet the needs of the requestor.													
2	Document enquiries and information given in a clear and systematic manner.													
3	Develop, evaluate and maintain formulary, and provide support in Pharmacy & Hospital Drug Committee agendas.													
4	Describe and differentiate sources of information such as journals, bibliographic databases and books, for acquisition, retrieval and maintenance purposes.													
5	Compile appropriate data and produce reports on the enquiry													
<b>MARKS</b>														

### SECTION 3: COMPETENT ASSESSMENT

No.	Demonstrate the skill of	Level of Performance										Comments	Name & Signature of preceptor	
		1	2	3	4	5	6	7	8	9	10			
1	Receiving, Answering and Documenting Enquiries													
2	Drug Information Services Management													

$$\begin{aligned} \text{Total Marks} &= \frac{\quad}{70} \times 100\% \\ &= \quad \% \end{aligned}$$

**Preceptor's Name & Signature:**

**General Comment on Attitude:**

**NOTE:**

1. % mark should not less than 60% for every units/ services.

## **MODULE B – RESEARCH & DEVELOPMENT**

**Duration of training: 40 weeks**

During the training, the PRP should:

1. Prepare and present a project proposal comprising of:
  - Title
  - Introduction
  - Literature review
    - Select and organize a topic dealing with the current problem in the society
    - Distinguish between reliable and questionable sources, verifying the accuracy and usefulness of gathered information.
    - Use appropriate print, electronic databases and online resources to access information, organize ideas, and develop writing.
    - Organize and synthesize information from a variety of sources and present it in a logical manner
  - Justification/problem statement
    - Write the research question
  - Objectives
    - Identify objectives
  - Hypothesis
    - State the research hypothesis
  - Methodology
    - Identify scope of study
    - Design the solution based on theory, principal, method or approach
    - Sound methodology
    - Sound data analysis techniques
  - References
  - Contribution of knowledge according to the level of research and development

2. Conduct the research
  - Perform data analysis based on the research proposal systematically and scientifically
3. Present a final report
  - Present and defend research findings
  - Highlight contribution of knowledge according to the level of research and development
4. Prepare and submit a manuscript
  - Prepare a scientifically written manuscript in accordance with a selected formats
  - Submit manuscript for publication (extended abstract/ proceeding/ peer-reviewed full text paper/dissertation)
5. Demonstrate positive attitudes in compliance with research ethics
  - Understand plagiarism and its consequences, and identify ethical issues of research and documentation.
  - Demonstrate efficient use of time allocated
  - Demonstrate good research ethics

## ASSESSMENT OF COMPETENCY

The assessment of competency would be based on 6 different components as below:

### Distribution of Marks

No.	Type of evaluation	Percentage marks (%)
1.	Presentation of proposal	5
2.	Written research proposal	20
3	Research performance (project log book)	20
4.	Presentation of final report	20
5.	Manuscript	15
6.	Attitude and Research ethics	20
	Total	100

### Marking Guideline (total marks is 100%)

Percentage of marks (%)	Grade
75-100%	A
70-74%	A-
65-69%	B+
60-64%	B
55-59%	B-
50-54%	C+
45-49%	C
35-44%	C-
<35%	E

\* Minimum qualification marks for registration as FRP is 60% (grade B).



**SECTION A: ACTIVITIES OF PROVISIONALLY REGISTERED PHARMACISTS (PRP)**

No.	Activities	Duration		Comments	Signature	
		Start	End		PRP	preceptor
1.	Registration at the Faculty and endorsement of appointment of preceptor by the Faculty/ Research Institution.					
2.	Preparation and presentation of research proposal					
3.	Conducting the research					
4.	Presentation of a final report					
5.	Preparation and submission of a manuscript					

**SECTION B: EVALUATION OF LEVEL OF COMPETENCY**

No.	Competency/ Skills	Level of competency										Comments	Signature			
		1	2	3	4	5	6	7	8	9	10		PRP	Preceptor		
A.	<b>PRESENTATION OF PROPOSAL (5%)</b>															
	1. Demonstrate wide understanding of background knowledge.															
	2. Communicate ideas fluently in own words															
	3. Demonstrate in-depth understanding of experimental methods.															
	4. Display genuine interest and enthusiasm.															
	5. Demonstrate good mannerism, body language and communication skill.															
	Subtotal (20%) Scale to 5% for total 100%															

Research and Development (Academia)

No.	Competency/ Skills	Level of competency										Comments	Signature				
		1	2	3	4	5	6	7	8	9	10		PRP	Preceptor			
B.	<b>EVALUATION OF WRITTEN RESEARCH PROPOSAL (20%)</b>																
	1. Has an appropriate title.																
	2. Clearly expressed introduction and comprehensive literature review																
	3. Appropriately describe justification/problem statement, objectives and hypothesis.																
	4. Appropriately describe methodology.																
	5. Citation of relevant and recent references.																
	6. Appropriate format and use of written language																
	Subtotal (24%) Scale to 20% for total 100%																

No.	Competency/ Skills	Level of competency										Comments	Signature			
		1	2	3	4	5	6	7	8	9	10		PRP	Preceptor		
<b>C.</b>	<b>RESEARCH PERFORMANCE (PROJECT LOGBOOK*) (20%)</b>															
	1. Description of work performance/progress.															
	2. PRP insights/inputs on project progress															
	3. Progress according to the schedule.															
	4. Regular submission of the project logbook every 4 weeks.															
	5. Completion of project logbook.															
	Subtotal (20%) Scale to 20% for total 100%															

\*Format of project logbook is according to respective universities

Research and Development (Academia)

No.	Competency/ Skills	Level of competency										Comments	Signature			
		1	2	3	4	5	6	7	8	9	10		PRP	Preceptor		
<b>D.</b>	<b>PRESENTATION OF FINAL REPORT (20%)</b>															
	1. Demonstrate wide understanding of background knowledge.															
	2. Communicate ideas fluently in own words															
	3. Demonstrate in-depth understanding of experimental methods.															
	4. Display genuine interest and enthusiasm.															
	5. Demonstrate good mannerism, body language and communication skill.															
	6. Response to questions															
	Subtotal (24%) Scale to 20% for total 100%															

Research and Development (Academia)

No.	Competency/ Skills	Level of competency										Comments	Signature			
		1	2	3	4	5	6	7	8	9	10		PRP	Preceptor		
E.	<b>EVALUATION ON MANUSCRIPT (15%)</b>															
	<b>Abstract</b>															
	1. The abstract is 200-300 words long and contains all key information.															
	<b>Introduction</b>															
	2. Literature is critically reviewed and clearly associated with the chosen topic.															
	3. The objectives and justification of the research are clear															
	<b>Method</b>															
	4. The methodologies are appropriate.															
5. The presentation of the data/results are clear.																
6. Analysis is appropriate and thorough																

Research and Development (Academia)

<b>Discussion and Conclusion</b>													
7. Good interpretation of results in relation to the study's aim.													
8. Appropriate reflection about the study and good discussion of the issues raised													
9. Conclusions are relevant and concise													
10. Limitations and possibilities regarding future research of the study are addressed.													
<b>Format</b>													
11. Format, citations/ references and grammar are correct throughout the manuscript													
Subtotal (44%) Scale to 15% for total 100%													

Research and Development (Academia)

No.	Competency/ Skills	Level of competency										Comments	Signature			
		1	2	3	4	5	6	7	8	9	10		PRP	Preceptor		
F.	<b>ATTITUDE AND RESEARCH ETHICS (20%)</b>															
	1. Initiative															
	2. Work Ethics															
	3. Creative and innovative thinking.															
	4. Able to work according to specific time.															
	5. Communication skills in speaking and writing.															
	Subtotal (20%) Scale to 20% for total 100%															
<b>GRAND TOTAL (100%)</b>																



**SUPERVISION RECORDS**

<b>No:</b>	<b>Date:</b>	<b>Topics of discussion:</b>
<b>Note by PRP:</b>		

<b>Preceptor's signature</b>	<b>Date</b>	<b>PRP's signature:</b>	<b>Date</b>



**APPRAISAL BY MASTER PRECEPTOR**

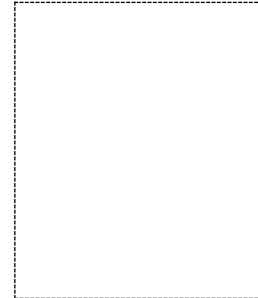
Setiausaha  
Lembaga Farmasi Malaysia  
Bahagian Perkhidmatan Farmasi  
Lot 36, Jalan Universiti,  
46350 Petaling Jaya, Selangor.

Name of Provisionally Registered Pharmacist:  
.....

I/CNumber:.....

PRP Registration Number.....

Place of Training: .....



**I certify that the above PRP has completed his / her training as required under subsection 6A(2) of the Registration of Pharmacist Act 1951.**

**1. Proposal:**

- 1A. *Certificate of satisfactory experience in accordance to sub-regulation 7(1) Registration of Pharmacists Regulations 2004 is **recommended** to given to him/her*
  
- 1B. *Certificate of satisfactory experience in accordance to sub-regulation 7(1) Registration of Pharmacists Regulations 2004 is **not recommended** to given to him/her*

**2. Preceptor's Details:**

Name:  
.....

Address of Training Premise:  
.....  
.....

Preceptor's Signature:

Date:

**APPRAISAL BY PRP OF PRECEPTOR (Optional)**

Setiausaha  
 Lembaga Farmasi Malaysia  
 Bahagian Perkhidmatan Farmasi Lot 36, Jalan Universiti,  
 46200 Petaling Jaya, Selangor.

Name of Provisionally Registered Pharmacist : .....  
 I/C Number : .....  
 PRP Registration Number : .....  
 Place of Training : .....  
 I have undergone training at the above mentioned place from (date): ..... To .....  
 Name of Preceptor : .....

No	Subject	Grade										Comments	
		1	2	3	4	5	6	7	8	9	10		
1	Facilities of Training Place												
2	Professional Exposure by the Preceptor												
3	Professional Guidance by the Preceptor												
4	Training Skills of the Preceptor												

**\*to be sent by PRP directly to Pharmacy Board Malaysia**

**PRP PERSONAL ASSESSMENT BY MASTER PRECEPTOR**

**SECTION 1: DEMONSTRATE A PROFESSIONAL APPROACH**

No.	Assessment	Level of Performance											Comments	
		1	2	3	4	5	6	7	8	9	10	NA		
1.	Action and attitudes are demonstrated which indicate a commitment to quality of pharmaceutical care of the patient													
2.	A polite and helpful manner is demonstrated													
3.	Dress code and behavior meet the requirements of the organisation													
4.	Reliability is demonstrated													
5.	Initiative is demonstrated													
6.	Recognition of personal limitation is demonstrated													
7.	Work is carried out in an organised manner and with attention to detail so that the desired result is achieved													
8.	Work is prioritised effectively													
9.	Tasks are pursued to completion and within agreed time limits (unless overriding circumstances make this impossible)													
10.	Problems or potential problems are identified and the appropriate corrective action taken or solution found													
11.	New situation are responded to with flexibility and willingness													
12.	Stressful situations are handled without undue agitation													
13.	Decisions are made which demonstrated the ability to think clearly, logically and with discretion													
14.	Tasks and situation are approached with due regard to													

No.	Assessment	Level of Performance											Comments	
		1	2	3	4	5	6	7	8	9	10	NA		
	legal implications and organisational policy													
15.	The safety of the working area is maintained to all times so that the health and safety of colleagues and the public is not compromised													
16.	The security of the premises is upheld at all times													
<b>TOTAL MARKS (SECTION 1)</b>														

### SECTION 2: TEAMWORK

No.	Assessment	Level of Performance											Comments	
		1	2	3	4	5	6	7	8	9	10	NA		
17.	A manner is demonstrated which indicates that due respect is given to the ideas and opinion of colleagues													
18.	Advice and criticisms are offered to colleagues in a manner unlikely to cause offence													
19.	Constructive criticism is receive in a positive manner													
<b>TOTAL MARKS (SECTION 2)</b>														

### SECTION 3: UNDERTAKE PERSONAL AND PROFESSIONAL DEVELOPMENT

No.	Assessment	Level of Performance											Comments	
		1	2	3	4	5	6	7	8	9	10	NA		
20.	The ability to self-evaluate and reflect on experiences is demonstrated													
21.	Feedback on performance is used effectively to improved													

No.	Assessment	Level of Performance											Comments	
		1	2	3	4	5	6	7	8	9	10	NA		
	competence													
22.	The ability to accept responsibility for meeting own development needs and achieving targets is demonstrated													
<b>TOTAL MARKS (SECTION 3)</b>														

#### SECTION 4: COMMUNICATION SKILLS

No.	Assessment	Level of Performance											Comments	
		1	2	3	4	5	6	7	8	9	10	NA		
23.	A sufficient command of the Bahasa Malaysia and English Language is demonstrated													
24.	Conversations (in person or over the telephone) are conducted in a manner which demonstrates due regard to confidentiality and the feelings of the other person													
25.	Questioning is used effectively to elicit necessary information and increase understanding													
26.	Responses in conversation are helpful and clear													
27.	Body language is appropriate to the situation													
28.	Clear, concise and well-structured written material is provided when required													
29.	All responses (whether spoken or written) are tailored to the needs of the recipient													
30.	A clear, polite and helpful telephone manner is demonstrated													
31.	Complaints or demands are responded to in a polite manner													
32.	An appropriately assertive manner is used when unreasonable demands or complaints are made													
<b>TOTAL MARKS (SECTION 4)</b>														

**SECTION 5: INTEGRITY**

No.	Assessment	Level of Performance											Comments	
		1	2	3	4	5	6	7	8	9	10	NA		
33.	The quality of being honest and having strong moral principles													
34.	Implementation of appropriate policies and procedures that ensure the effective, efficient and ethical management of pharmaceutical system (medicine regulatory system and medicine supply system).													
35.	Transparent, accountable, follows the rule of law and prevent corruption.													
36.	Telling the truth, being open and not taking advantage of others													
37.	Demonstrate responsibility, show respect and caring of others													
	<b>TOTAL MARKS (SECTION 5)</b>													
	<b>MARKS (%) (SECTION 1 – SECTION 5)</b>	<b>Marks = _____ X 100</b> <b>          = 370</b> <b>          = _____ %</b>												



**SUMMARY OF PERFORMANCE (%) FOR EACH SECTION**

<b>MARK (%) FOR FUNDAMENTAL OF PHARMACY PRACTICE (MODULE A)</b>		
<b>No.</b>	<b>Section</b>	<b>Mark (%)</b>
1.	<i>Out-patient Pharmacy Services</i>	
2.	<i>Inventory Control and Store Management</i>	
3.	<i>In-patient Pharmacy Services</i>	
4.	<i>Drugs and Poisons Information Services</i>	
5.	<i>Ward Pharmacy Practice</i>	
	<b>AVERAGE MARKS (A)</b>	$= \frac{\quad}{500} \times 23\%$
<b>MARK (%) FOR R&amp;D SECTION (MODULE B)</b>		
1.	<i>Presentation of Proposal</i>	
2.	<i>Written research proposal</i>	
3.	<i>Research performance (project log book)</i>	
4.	<i>Presentation of final report</i>	
5.	<i>Manuscript</i>	
6.	<i>Attitude and Research ethics</i>	
	<b>AVERAGE MARKS (B)</b>	$= \frac{\quad}{600} \times 77\%$
	<b>TOTAL MARKS (A)+(B)</b>	
<b>PRP PERSONAL ASSESSMENT AVERAGE PERFORMANCE</b>		
1.	<i>Demonstrate a Professional Approach</i>	
2.	<i>Work Effectively as Part of a Team</i>	
3.	<i>Undertake Personal and Professional Development</i>	
4.	<i>Communication Skills</i>	
5.	<i>Integrity</i>	
	<b>AVERAGE MARKS</b>	

Preceptor's Name, Signature & Stamp :

Date :

(TO BE FILLED BY PRINCIPAL PRECEPTOR FOR THOSE EXTENDED) SUMMARY OF PERFORMANCE (%) FOR EACH CLINICAL SECTION

<b>MARK (%) FOR FUNDAMENTAL OF PHARMACY PRACTICE (MODULE A)</b>				
No.	Section	Mark % prior to extension period	Mark % after extension period	Actual extension period
1.	<i>Out-patient Pharmacy Services</i>			
2.	<i>Inventory Control and Store Management</i>			
3.	<i>In-patient Pharmacy Services</i>			
4.	<i>Drugs and Poisons Information Services</i>			
5.	<i>Ward Pharmacy Practice</i>			
	<b>AVERAGE MARKS (A)</b>	= $\frac{\quad}{500} \times 23\%$		
<b>MARK (%) FOR R&amp;D SECTION (MODULE B)</b>				
1.	<i>Presentation of Proposal</i>			
2.	<i>Written research proposal</i>			
3.	<i>Research performance (project logbook)</i>			
4.	<i>Presentation of final report</i>			
5.	<i>Manuscript</i>			
6.	<i>Attitude and Research ethics</i>			
	<b>AVERAGE MARKS (B)</b>	= $\frac{\quad}{600} \times 77\%$		
	<b>AVERAGE MARKS (A)+(B)</b>			
<b>PRP PERSONAL ASSESSMENT AVERAGE PERFORMANCE</b>				
1.	<i>Demonstrate a Professional Approach</i>			
2.	<i>Work Effectively as Part of a Team</i>			
3.	<i>Undertake Personal and Professional Development</i>			
4.	<i>Communication Skills</i>			
5.	<i>Integrity</i>			
	<b>AVERAGE MARK</b>			

Preceptor's Name, Signature & Stamp :

Date :

**Committee Members/Participants during “Bengkel Semakan Semula Buku Log Provisional Registered Pharmacist (PRP) di Sektor Swasta, Seremban, 19-21 Oktober 2016”**

Puan Salwati Abd Kadir  
Pharmaceutical Services Division, Ministry of Health Malaysia

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Cyberjaya University College of Medical Sciences

Prof. Dr. Aishah Adam  
Universiti Teknologi MARA

Prof. Dr. Yeoh Peng Nam  
UCSI University

Prof. Madya Dr. Jamia Adina Jamal  
Universiti Kebangsaan Malaysia

Prof. Madya Dr. Mohd Makmor Bakry  
Universiti Kebangsaan Malaysia

Dr. Siti Hadijah Shamsudin  
International Islamic University Malaysia

Dr. Irna Elina Ridzwan  
International Islamic University Malaysia

Ms. Wong Pei Nee  
Taylor’s University

**Secretariat**

Mr. Mohammad Hafiz Othman  
Pharmaceutical Services Division, Ministry of Health Malaysia

**Advisor**

Tn. Hj. Mohd Yunos Shaari  
Pharmaceutical Services Division, Ministry of Health Malaysia