



8

**Record of Training and
Experience for
Provisionally Registered
Pharmacist**

***PARENTERAL NUTRITION/
INTRAVENOUS ADDITIVE SERVICES***

PERSONAL PARTICULARS

1.	Name	:	_____
2.	I/C Number	:	_____
3.	Provisional Registration Number	:	_____
4.	Contact Number	:	_____
5.	Email Address	:	_____
6.	Qualification (Degree/University/Year)	:	_____
7.	Principal Training Place	:	_____
8.	Duration of Training	:	From (date): to
9.	Name & Contact Number of Person in Case of Emergency	:	_____
 I confirmed that the above information is true.			
Signature:		Date:	

1. INTRODUCTION

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 Provisionally Registered Pharmacist (PRP) to the satisfaction of the Pharmacy Board for a period of not less than one year.
2. The engagement as a PRP must be in any premises listed in the *Second Schedule* in order to be entitled for full registration.
3. The Pharmacy Board may extend the one-year period of employment of a PRP if the Board is not satisfied with the performance of that person as a PRP.
4. ***The provisional registration of a person shall be revoked if that person fails to engage in employment as PRP to the satisfaction of the Pharmacy Board for a period of not less than one year in any premises listed in the Second Schedule.***
5. ***All PRPs are required to achieve at least 60% marks for all the sections in the log book and average of at least 60% marks for the personal assessment to be qualified to register as a Fully Registered Pharmacist.***
6. ***All PRPs are also required to pass the Qualifying Examination to Practice Pharmacy conducted by the Pharmacy Board prior to full registration.***

2. TRAINING MODULES AND RECORD OF TRAINING AND EXPERIENCE FOR PROVISIONALLY REGISTERED PHARMACIST (PRP)

1. This record book is designed primarily to guide the provisionally registered pharmacists and their preceptors of various pharmacy disciplines in the training hospital/institution in coordinating activities and programmes during the one-year provisional training.
2. The number of cases in this logbook serves as a guideline and is subjected to the capacity of each hospital/institution.
3. This record book will be the basis for the appraisal by all preceptors, which shall be submitted to the Pharmacy Board for the purpose of registration as a Fully Registered Pharmacist at the end of the training.
4. The preceptor is required to complete the record of the following:
 - i. Endorse the completion of each task with signature, name and date in the column provided.
 - ii. 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	Very Satisfactory	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 toward achieving goals was not made. Significant improvement is needed in one or more areas.

5. The log book should be submitted to the Master preceptor at the 12th month of the training.
6. The final appraisal to be completed by the master preceptor and the original copy of the final appraisal to be sent to the Pharmacy Board.

***Lembaga Farmasi Malaysia
Bahagian Perkhidmatan Farmasi
Kementerian Kesihatan Malaysia
Lot 36, Jalan Universiti
46350 Petaling Jaya***

3. DUTIES AND RESPONSIBILITIES OF A PRECEPTOR

- i. Serves as a learning resource for all PRPs. Ensures a PRP receives necessary training to develop skills and attitude as a competent pharmacist.
- ii. Serves as a role model instilling professional values and attitude.
- iii. Evaluates PRPs performances during their training.

Note: Training of PRP should abide the Code of Conduct for Pharmacists and Bodies Corporate and related Malaysian pharmacy legislations.

4. DUTIES AND RESPONSIBILITIES OF A PROVISIONALLY REGISTERED PHARMACIST (PRP)

1. Fulfill the requirement of all the training modules in the log book within the stipulated time frame.
2. Undertake the training modules / programme with positive attitudes and commitments.
3. Acquire knowledge and skills by performing required tasks, observing, reading and asking questions.
4. Actively participate in professional development programme to keep abreast of current knowledge.
5. Adhere to the hospital / institution policies and procedures.

MODULE 8: PARENTERAL NUTRITION/INTRAVENOUS ADDITIVE SERVICES

(Duration of Attachment: 4 weeks)

Upon completion of training, PRP must:

1. have knowledge of aseptic technique.
2. be able to read and comprehend patient's case notes.
3. be able to discuss with preceptor.
4. be able to calculate and prepare worksheet.
5. be able to compound preparations.
6. be able to monitor patient progress.
7. be able to present case.

**SUMMARY OF ACTIVITIES FOR MODULE 8: PARENTERAL NUTRITION/INTRAVENOUS
ADDITIVE SERVICES**

Section	Task	Target (minimum)	Remarks
1.	Ability to Assist in Assessing Patient Suitability for Parenteral Nutrition	<ul style="list-style-type: none"> • 10 adult cases • 10 pediatric cases 	
2.	Calculation/ Worksheet	<ul style="list-style-type: none"> • 5 cases 	<ul style="list-style-type: none"> • All calculations must be counterchecked
3.	Compounding of Preparations	<ul style="list-style-type: none"> • 10 preparations • IV Additives: 20 preparations (if service available) 	-
4.	Patient Monitoring	<ul style="list-style-type: none"> • 10 cases 	-
5.	Case Presentation	<ul style="list-style-type: none"> • 1 case 	

**MODULE 8: PARENTERAL NUTRITION / INTRAVENOUS
ADDITIVE SERVICES**

BRIEFING CHECKLIST

No.	Date	Title	Briefing *	
			Yes	No
1.		Principles of laminar flow cabinet and clean room design		
2.		Maintenance of laminar flow cabinet and clean room <ul style="list-style-type: none"> • Cleaning of laminar flow cabinet and clean room • Quality Assurance Test 		
3.		Principles of aseptic techniques <ul style="list-style-type: none"> • Hand Washing • Gowning • Gloving • Removing Protective Clothing • Withdrawing of solution from ampoule • Adding diluent to an ampoule containing powder form • Adding of solution from ampoule to infusion bag • Adding diluent to the vial containing powder form • Withdrawing solution from vial • Transferring solution from bag/ bottle to syringe • Transferring solution from vial to bag • Transferring solution from ampoule to vial 		

MODULE 8: PARENTERAL NUTRITION / INTRAVENOUS ADDITIVE SERVICES

**SECTION 1: ABILITY TO ASSIST IN ASSESSING PATIENT SUITABILITY FOR PARENTERAL NUTRITION REQUEST
(Minimum 10 adult cases & 10 pediatric cases)**

WEEK 1

Date	Patient's R/N	Number of Interventions	*Type of Interventions	Preceptor's Initial

- *1. Incomplete Prescriptions
- 3. Inappropriate Prescriptions

- 2. Inappropriate Regimens
- 4. Others

MODULE 8: PARENTERAL NUTRITION / INTRAVENOUS ADDITIVE SERVICES

SECTION 1: ABILITY TO ASSIST IN ASSESSING PATIENT SUITABILITY FOR PARENTERAL NUTRITION REQUEST (Minimum 3 adult cases & 3 pediatric cases)

WEEK 2

Date	Patient's R/N	Number of Interventions	*Type of Interventions	Preceptor's Initial

*1. *Incomplete Prescriptions*
3. *Inappropriate Prescriptions*

2. *Inappropriate Regimens*
4. *Others*

MODULE 8: PARENTERAL NUTRITION / INTRAVENOUS ADDITIVE SERVICES

**SECTION 1: ABILITY TO ASSIST IN ASSESSING PATIENT SUITABILITY FOR PARENTERAL NUTRITION REQUEST
(Minimum 3 adult cases & 3 pediatric cases)**

WEEK 3

Date	Patient's R/N	Number of Interventions	*Type of Interventions	Preceptor's Initial

- *1. Incomplete Prescriptions
- 3. Inappropriate Prescriptions

- 2. Inappropriate Regimens
- 4. Others

MODULE 8: PARENTERAL NUTRITION / INTRAVENOUS ADDITIVE SERVICES

**SECTION 1: ABILITY TO ASSIST IN ASSESSING PATIENT SUITABILITY FOR PARENTERAL NUTRITION REQUEST
(Minimum 3 adult cases & 3 pediatric cases)**

WEEK 4

Date	Patient's R/N	Number of Interventions	*Type of Interventions	Preceptor's Initial

- *1. *Incomplete Prescriptions*
- 3. *Inappropriate Prescriptions*

- 2. *Inappropriate Regimens*
- 4. *Others*

MODULE 8: PARENTERAL NUTRITION / INTRAVENOUS ADDITIVE SERVICES

SECTION 2: CALCULATION / WORKSHEET
(Minimum 5 cases)

WEEK 1 – WEEK 4

Date	Patient's R/N	Type of cases (e.g colorectal, renal, post-surgery)	Description of Case	Preceptor's Initial

MODULE 8: PARENTERAL NUTRITION / INTRAVENOUS ADDITIVE SERVICES

SECTION 2: CALCULATION / WORKSHEET
(Minimum 5 cases)

WEEK 1 – WEEK 4

Date	Patient's R/N	Type of cases (e.g colorectal, renal, post-surgery)	Description of Case	Preceptor's Initial

MODULE 8: PARENTERAL NUTRITION / INTRAVENOUS ADDITIVE SERVICES

SECTION 3: COMPOUNDING OF PREPARATIONS

- Minimum 10 preparations
- IV Additives: minimum 20 preparations (if service available)

WEEK 1 – WEEK 4

Date	Patient's R/N	Number of Preparations			Preceptor's Initial
		Adult	Pediatric	IV Additive	

MODULE 8: PARENTERAL NUTRITION / INTRAVENOUS ADDITIVE SERVICES

SECTION 3: COMPOUNDING OF PREPARATIONS

- Minimum 10 preparations
- IV Additives: minimum 20 preparations (if service available)

WEEK 1 – WEEK 4

Date	Patient's R/N	Number of Preparations			Preceptor's Initial
		Adult	Pediatric	IV Additive	

MODULE 8: PARENTERAL NUTRITION / INTRAVENOUS ADDITIVE SERVICES

SECTION 4: PATIENT MONITORING
(Minimum 10 cases)

WEEK 1 – WEEK 4

Date	Patient's R/N	Monitoring (e.g BUSE/ Calorie & Fluid Requirements etc)	Description of Case	Preceptor's Initial

MODULE 8: PARENTERAL NUTRITION / INTRAVENOUS ADDITIVE SERVICES

**SECTION 4: PATIENT MONITORING
(Minimum 10 cases)**

WEEK 1 – WEEK 4

Date	Patient's R/N	Monitoring (e.g BUSE/ Calorie & Fluid Requirements etc)	Description of Case	Preceptor's Initial

MODULE 8: PARENTERAL NUTRITION / INTRAVENOUS ADDITIVE SERVICES

**SECTION 5: CASE PRESENTATION
(1 case)**

Date	Patient's R/N	Ward/ Unit	Regime	Diagnosis and Description of Case	Preceptor's Initial

ASSESSMENT – PARENTERAL NUTRITION / INTRAVENOUS ADDITIVE SERVICES

SECTION 6: MANAGEMENT OF PARENTERAL NUTRITION / INTRAVENOUS ADDITIVE SERVICES

No.	Knowledge	Level of Performance											Comments	
		1	2	3	4	5	6	7	8	9	10	NA		
1.	Principles of laminar flow cabinet and clean room design.													
2.	Principles of aseptic technique.													
3.	Maintenance of laminar flow cabinet and clean room <ul style="list-style-type: none"> • Cleaning of laminar flow cabinet and clean room • Quality assurance 													

ASSESSMENT - PARENTERAL NUTRITION / INTRAVENOUS ADDITIVE SERVICES

SECTION 7: COMPETENT ASSESSMENT

No.	Task	Level of Performance											Comments	
		1	2	3	4	5	6	7	8	9	10	NA		
1.	Ability to assist in assessing the patient suitability for parenteral nutrition request													
2.	Calculation and Worksheet Preparation													
3.	Compounding													
4.	Patient Progress Monitoring / Counseling													
5.	Case Presentation													

ASSESSMENT - PARENTERAL NUTRITION / INTRAVENOUS ADDITIVE SERVICES

SECTION 8: GENERAL COMMENT ON ATTITUDE

Marks = $\frac{\quad}{80} \times 100\%$

= $\frac{\quad}{\quad} \%$

Preceptor's Name & Signature:

PHARMACY BOARD MALAYSIA
MINISTRY OF HEALTH MALAYSIA

LOT 36, JALAN UNIVERSITI
46350 PETALING JAYA
SELANGOR, MALAYSIA