Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Evaluator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

| **Patient Counseling Vaginal Ring Contraceptive (ethinyl estradiol/etonogestrel) NuvaRing® Grading Rubric - CONTENT** | **Points** |
| --- | --- |
| * **Student stated the name of the medication** * Nuvaring**®** [vaginal ring contraceptive containing an estrogen (ethinyl estradiol) and a progestin (etonogestrel)] | \_\_\_\_\_/ 1 point |
| **IHS Question: What did your prescriber tell you the medication is for?** |  |
| * **Student verified understanding or appropriately described the indication(s) for the medication.** * This is a vaginal ring that prevents pregnancy, helps acne, and/or improves menstrual cycle irregularities. * Student may say “"Some women use contraception to improve their menstrual cycle control, while others use it to prevent pregnancy. So that I can better inform you about the issues involving this vaginal ring, what is your primary goal for using this product?" | \_\_\_\_\_/ 2 points |
| **IHS Question:**  **How did your prescriber tell you to take the medication?** |  |
| * **Student assessed patient’s previous knowledge of starting oral contraceptives.** * e.g., Have you ever used the vaginal ring before? When will you be starting the ring? Have you chosen the back-up method that you will use when starting this product? * Student may say “"When did the doctor tell you to start using this ring and what did he/she tell you about how to use it?" * **Student verified understanding of or described dosing/duration of the prescribed product. (\* must verify dosing instructions from Rx label)** * e.g., The instructions state to insert one vaginal ring once monthly. | \_\_\_\_\_/ 4 points  2 pts. for each correct bullet. |
| * **Student explained the quantity dispensed and number of refills. (\* must verify quantity/refills from Rx label)** * e.g., The prescription is for 1 ring with 11 refills. | \_\_\_\_\_/ 1 point |
| * **Student described and demonstrated administration/specific instructions for use of the medication** * Wash and dry hands * Remove the vaginal ring from the foil pouch * Holding the vaginal ring between your thumb and index finger, press the sides together * Insert the vaginal ring while lying down, squatting, or standing with one leg up (whatever is most comfortable) * Gently push the folded ring into your vagina. * The exact position of the vaginal ring is not important for it to be effective. * If you feel discomfort, the ring is probably not inserted far enough into the vagina. Gently push it farther into the vagina. * Once inserted, keep in place for 3 weeks in a row * When removing, hook your index finger under the forward rim or hold the rim between your index and middle finger. Gently pull out. * Dispose of the vaginal ring in a waste receptacle out of the reach of children and pets. Do not throw it in the toilet. * Verify when patient is starting vaginal ring and method of back-up contraception (use x7 days unless same day start) * Discusses importance of adherence and what to do if patient misses time of proper ring insertion * Emergency contraception is available if doses were missed and intercourse occurred within the last 5 days * Advise patient when she can expect to have her menstrual period * Advise patient to alert pharmacist or doctor if/when starting a new medication | \_\_\_\_\_/ 7 points  0.5 pts. for each correct bullet, max 7 points. |
| * **Student described storage and expiration of the product** * Once dispensed to you, store the vaginal ring at room temperature (59-86oF) up to 4 months * Avoid storing vaginal ring in direct sunlight or temperature above 86oF * Expiration date should not exceed four months from date of dispensing or expiration date on box | \_\_\_\_\_/ 1 points  0.5 pt. for each correct bullet, max 1 point. |
| **IHS Question:**  **What did your prescriber tell you to expect?** |  |
| * **Student verified understanding of or described goals or benefits of therapy** * You will have enough hormone in your body within 7 days of vaginal ring insertion to prevent pregnancy. * It may take several weeks to months to notice improvement in acne or menstrual cycle changes. | \_\_\_\_\_/ 2 points |
| * **Student described relevant adverse effects and/or precautions associated with the medication and non-pharmacologic management if pertinent.** * Most common side effects are breakthrough bleeding, spotting, breast tenderness, and nausea. * Advise that most mild side effects will usually subside within 3 months of using the ring. * Important for you to remain tobacco free to maintain low risk of cardiovascular complications. * The vaginal ring will not protect against sexually transmitted infections. If you are at risk for a STI, use a male or female condom every time you have sexual intercourse. | \_\_\_\_\_/ 4 points  1 pt. for each correct bullet. |
| * **Student** **advised the patient of signs and symptoms that indicate the need for further medical attention** * Contact your health provider if you have symptoms involving abdominal pain, chest pain, headache (severe), eye problems, or severe leg pain (ACHES). * Contact your health provider if you develop severe mood swings or depression, become jaundiced (yellow-colored skin), miss your period during the placebo week, or have signs of pregnancy. * Contact pharmacist or prescriber if any adverse effect becomes too bothersome or if you have any questions on how to use your contraceptive pill. | \_\_\_\_\_/ 3 points  1 pt. for each correct bullet. |

**Comments:**

**TOTAL CONTENT POINTS: \_\_\_\_\_\_\_\_ out of 25 possible points**

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Evaluator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Patient Counseling Vaginal Ring Contraceptive (ethinyl estradiol/etonogestrel) NuvaRing® Grading Rubric - COMMUNICATION** | **Achievement of outcome** |
| **Initiated communication** by introducing self, identifying self as pharmacy student, and describing the encounter (e.g., “I’d like to talk to you about how to use this product. Would that be okay?”) | Performed (1)   * Performed incompletely (0.5) * Did not perform (0) |
| Asked **“What did your doctor tell you the medication was for?”** or similar open-ended question to assess understanding of drug indication | Performed (2)  Did not perform (0) |
| Asked “**How did the doctor tell you to take this medication?”** or similar open-ended question to assess baseline understanding of appropriate use | Performed (2)  Did not perform (0) |
| Asked **“What did the doctor tell you to expect?”** or similar open-ended question to assess baseline understanding of expectations of therapy | Performed (2)  Did not perform (0) |
| **Verified patient understanding** by asking patient to state back at least one major point in a non-judgmental way (e.g., “To make sure I explained things clearly, show/tell me how you will…..e.g. start your vaginal ring, store your vaginal ring, manage a missed dose) and re-taught the missed information with a different approach or confirmed that patient had clear understanding. | Performed (2)  Performed incompletely or incorrectly (1)   * Did not perform (0) |
| **Concluded the encounter** by asking if there was anything else patient would like to discuss or any further questions; invited patient to call if questions or concerns arise | * Performed (1) * Performed incompletely (0.5) * Did not perform (0) |
| **I feel confident about my ability to use this product safely and effectively.** | * Yes * No |

|  |  |
| --- | --- |
| **Established a trusting relationship**   * Actively listened to patient, was nonjudgmental, conveyed personal concern and desire to help, showed respect, built rapport * Conveyed empathy and understanding for patient feelings and concerns, acknowledged and responded to patient feelings | * Most of the time (3) * Some of the time (2) * Rarely (1) * Never (0) |
| **Used effective verbal & nonverbal communication**   * Demonstrated appropriate professional nonverbal behaviors (eye contact, head nods, posture, body language, distance, absence of barriers, etc); wore appropriate attire * Spoke loud enough; used appropriate pace and tone of voice; used correct pronunciation; did not use fillers (e.g., “uh,” “um”) * Conveyed confidence; used label and packaging material appropriately to reinforce oral communication (i.e., did not read instructions verbatim off box) | * Most of the time (3) * Some of the time (2) * Rarely (1) * Never (0) |
| **Elicited information from the patient**   * Elicited patient questions, concerns, reasons for visit * Used open-ended questions appropriately * Clarified vague or incomplete patient responses; if non-adherence or misuse of medications is revealed, assessed reasons for non-adherence * Avoided leading, loaded, double-barreled, or biased questions | * Most of the time (3) * Some of the time (2) * Rarely (1) * Never (0) |
| **Provided patient-friendly education**   * Used plain language a patient would likely understand, avoided medical jargon or defined necessary medical terms, provided clear instructions * Emphasized key information with a rationale for importance * Tailored education based onpatient’s baseline knowledge; did not repeat in detail what patient already knew * Avoided overloading with information, was concise | * Most of the time (3) * Some of the time (2) * Rarely (1) * Never (0) |
| **Organized the encounter**   * Organized patient education in a logical manner; summarized periodically when appropriate * Used time efficiently, maintained control and direction of encounter | * Most of the time (3) * Some of the time (2) * Rarely (1) * Never (0) |

**Comments:**

**TOTAL COMMUNICATION POINTS: \_\_\_\_\_\_\_\_ out of 25 possible points**