The Faculty of Pharmacy and Pharmaceutical Sciences has a long and proud history of achievement. It began as a department in the Faculty of Medicine on April 13, 1914. Two programs were offered at that time, a one-year Licensing Diploma (discontinued in 1918) and a two-year PhmB degree. Within three years the Department became a School under the Faculty of Arts and Sciences in 1917. The first three graduates of the newly approved Bachelor of Science in Pharmacy degree program obtained their degrees in 1921. The School continued to grow and prosper over the next two decades, with jurisdiction returning to the Faculty of Medicine in 1939. The School received Faculty status in 1955 and moved from a three to a four year program in 1969. Pharmacy became a five-year program (four years in the Faculty plus one preprofessional year) in the 1989-1990 academic year.

From the beginning, faculty members hired in pharmacy have had a focus on scholarship and thus graduate studies and research have always been strengths of the Faculty. A 1961 PhD graduate represented the first PhD degree granted by a School or Faculty of Pharmacy in Canada. In recognition of its flourishing graduate program in pharmaceutics, the Faculty received a new title in 1968: The Faculty of Pharmacy and Pharmaceutical Sciences. Since 1970, the Faculty has been active in the delivery of professional development programs for pharmacists.

The Faculty’s Vision is: Excellence and innovation in pharmacy education and research through learning, discovery and citizenship.

The Faculty’s Mission is: To provide pharmacy and graduate education designed to meet societal needs for safe and effective use of medications and to cultivate research and pharmacy practice.

The Faculty:
- Fosters high quality education and ongoing development of students and post-doctoral fellows
- Conducts world-class research in the basic and applied pharmaceutical sciences, clinical pharmacy sciences, and health services
- Seeks advancements and excellence in practice, research and education
- Partners with the profession, policy makers, other Faculties and Universities, and the public

Each year the Faculty admits 130 students who have met the prerequisite requirements (one year minimum) into the BSc
in Pharmacy program and currently has close to 60 graduate students. There are about 40 teaching and research faculty members. Our students excel nationally and have received the Burbidge Award for the highest combined score on the national Pharmacy Examining Board of Canada exam in 2005, 2009, and 2010.

Plans are in place for a new Doctor of Pharmacy (PharmD) program. This program includes didactic and advanced experiential education that can only take place after the completion of the BSc (Pharmacy) program. Students in the PharmD program have 1–2 years to complete the degree’s requirements. Licensure for the practice of pharmacy will not depend on a Doctor of Pharmacy but it will help graduates to:

- advance their career, and become leaders in the Pharmacy profession
- demonstrate a competitive advantage when applying for unique and interesting positions
- create and shape their jobs through an innovative patient-focused practices
- develop the skills and knowledge to become an advanced practitioners
- obtain and apply cutting-edge information
- possess the skills to be able to make a difference in complex pharmacotherapeutic situations

For more information see the Pharmacy website at www.pharm.ualberta.ca.

141 The Professors

141.1 Teaching and Scholarship

The Faculty’s undergraduate program is considered one of the best in Canada and has been a leader in developing new curricular approaches and experiential models. An external review committee has ranked our Graduate Studies and Research Programs among the top programs in North America. Faculty members have received numerous awards for their research and teaching in recent years.

The Faculty’s researchers attracted over $3 million in external research grants and contracts in 2011. The Faculty has also excelled in transferring its research technology to the marketplace. Several of the University’s spin-off companies originated in the Faculty of Pharmacy and Pharmaceutical Sciences

141.2 Members of the Faculty

Officers of the Faculty

Dean

JP Kohrer, PhD

Associate Dean (Research and Graduate Studies)

A El-Kadi, PhD

Associate Dean (Undergraduate Student Affairs)

D Brooks, PhD

Associate Dean (Undergraduate Programs)

F Schnidel, BSc, MCE

Assistant Dean (Administration)

F Hanta

Academic Staff

Professors

D Brooks, PhD

(PHARMACOKINETICS)

A El-Kadi, PhD (Drug Metabolism)

F Jamal, PhD (Pharmacokinetics)

JP Kohrer, PhD (Toxicology)

A Laszunski, PhD (Pharmacy)

R Leuenberg, PhD (Pharmacoeconomics)

S Majumdar, MD (Patient Health Management)

FM Pasutto, PhD (Medicinal Chemistry)

Associate Professors

HL Babh, BSc,Pharm, PharmD (Clinical)

M Deschak, MSc, PhD (Pharmacology of Bone Adaptation)

C Hughes, BSc,Pharm, PharmD (Clinical Infectious Diseases)

K Kaur, PhD (Medicinal Chemistry)

L Lazza, MSc, PhD (Biochemistry/Molecular Toxicology)

L Bourke, PhD (Educational Scholarship)

C Sadowski, BSc,Pharm, PharmD (Clinical Geriatrics)

JM Seubert, MS, PhD (Diabetes Pharmacology)

SH Simpson, BSc, PharmD, MSc, Diabetes Pharmacopeidology

H Yukeli, BSc,Pharm, PharmD (Clinical, Women’s Health)

Clinical Associate Professors

M Foy, BSc,Pharm, PharmD

K Hall, BSc,Pharm, PharmD

SL Mitchell, MPharm, PhD

TI Schnidel, BSc, MCE

Research Associate Professor

Hoon Sunwoo, PhD

Assistant Professors

L Garigu, BSc,Pharm, MSc, PhD

(Social Sciences in Pharmacy)

P Jurcz, PhD (Pharmacy)

R Sengupta, BSc,Pharm, PharmD (Clinical, Primary Care)

S Mann, PhD (Pharmacogenomics)

AG Shakal, PhD (Toxicology/Drug Metabolism)

C Velazquez, PhD (Medicinal Chemistry)

Clinical Assistant Professors

R Berthold, BSc,Pharm, PharmD

R Breault, BSc,Pharm, PharmD (Director, Practice Development)

K Ceco, BEd, MEd, PhD

M Gabel, BSc,Pharm

J Hall, BSc,Pharm, PharmD (Advanced Pharmacy, PharmD Program)

A Lindblad, BSc,Pharm, PharmD

M MacDonald, BSc,Pharm

B Mitchelmore, BSc,Pharm, PharmD

C Nektar, BSc,Pharm

J Palsak, BSc,Pharm

R Sanghva-Gerwal, BSc,Pharm

J Tabber, BSc,Pharm, PharmD

A Thompson, BSc,Pharm, PharmD

Walter, BSc,Pharm Coordinator (Experiential Education, PharmD Program)

Professors Emeriti

JA Badhamsby, PhD

DF Biggs, PhD

LG Chatten, PhD

RT Coutts, PhD, BSc

E Kraus, PhD

S McQuarrie, PhD

RE Moskalik, PhD

A Stoy, PhD

LG Stephens-Newham, PhD

L’Webe, PhD

Professional Officers

C Cox, BSc, MBA (Coordinator, Experiential Education)

141.3 Members of the Faculty

Officers of the Faculty

Dean

JP Kohrer, PhD

Associate Dean (Research and Graduate Studies)

A El-Kadi, PhD

Associate Dean (Undergraduate Student Affairs)

D Brooks, PhD

Associate Dean (Undergraduate Programs)

F Schnidel, BSc, MCE

Assistant Dean (Administration)

F Hanta

Academic Staff

Professors

D Brooks, PhD

(PHARMACOKINETICS)

A El-Kadi, PhD (Drug Metabolism)

F Jamal, PhD (Pharmacokinetics)

JP Kohrer, PhD (Toxicology)

A Laszunski, PhD (Pharmacy)

R Leuenberg, PhD (Pharmacoeconomics)

S Majumdar, MD (Patient Health Management)

FM Pasutto, PhD (Medicinal Chemistry)

Associate Professors

HL Babh, BSc,Pharm, PharmD (Clinical)

M Deschak, MSc, PhD (Pharmacology of Bone Adaptation)

C Hughes, BSc,Pharm, PharmD (Clinical Infectious Diseases)

K Kaur, PhD (Medicinal Chemistry)

L Lazza, MSc, PhD (Biochemistry/Molecular Toxicology)

L Bourke, PhD (Educational Scholarship)

C Sadowski, BSc,Pharm, PharmD (Clinical Geriatrics)

JM Seubert, MS, PhD (Diabetes Pharmacology)

SH Simpson, BSc, PharmD, MSc, Diabetes Pharmacopeidology

H Yukeli, BSc,Pharm, PharmD (Clinical, Women’s Health)

Clinical Associate Professors

M Foy, BSc,Pharm, PharmD

K Hall, BSc,Pharm, PharmD

SL Mitchell, MPharm, PhD

TI Schnidel, BSc, MCE

Research Associate Professor

Hoon Sunwoo, PhD

Assistant Professors

L Garigu, BSc,Pharm, MSc, PhD

(Social Sciences in Pharmacy)

P Jurcz, PhD (Pharmacy)

R Sengupta, BSc,Pharm, PharmD (Clinical, Primary Care)

S Mann, PhD (Pharmacogenomics)

AG Shakal, PhD (Toxicology/Drug Metabolism)

C Velazquez, PhD (Medicinal Chemistry)

Clinical Assistant Professors

R Berthold, BSc,Pharm, PharmD

R Breault, BSc,Pharm, PharmD (Director, Practice Development)

K Ceco, BEd, MEd, PhD

M Gabel, BSc,Pharm

J Hall, BSc,Pharm, PharmD (Advanced Pharmacy, PharmD Program)

A Lindblad, BSc,Pharm, PharmD

M MacDonald, BSc,Pharm

B Mitchelmore, BSc,Pharm, PharmD

C Nektar, BSc,Pharm

J Palsak, BSc,Pharm

R Sanghva-Gerwal, BSc,Pharm

J Tabber, BSc,Pharm, PharmD

A Thompson, BSc,Pharm, PharmD

Walter, BSc,Pharm Coordinator (Experiential Education, PharmD Program)

Professors Emeriti

JA Badhamsby, PhD

DF Biggs, PhD

LG Chatten, PhD

RT Coutts, PhD, BSc

E Kraus, PhD

S McQuarrie, PhD

RE Moskalik, PhD

A Stoy, PhD

LG Stephens-Newham, PhD

L’Webe, PhD

Professional Officers

C Cox, BSc, MBA (Coordinator, Experiential Education)
Likewise, advances in the use of information technology in pharmacy practice now allow pharmacists to spend more time educating patients and maintaining and monitoring patient records. As a result, patients have come to depend on the pharmacist as a health care and information resource of the highest caliber. Pharmacists, in and out of the community pharmacy, are specialists in the science and clinical use of medications. They must be knowledgeable about the composition of drugs, their chemical and physical properties, and their manufacture and uses, as well as how products are tested for purity and strength. Additionally, a pharmacist needs to understand the activity of a drug and how it will work within the body. More and more prescribers rely on pharmacists for information about various drugs, their availability, and their activity, just as patrons do when they ask about nonprescription medications.

If pharmacists develop a desire to combine their professional knowledge and skills with the challenge of the fast-moving community pharmacy practice, they will often consider a management position within a chain pharmacy practice or ownership of their own pharmacy. In chain practice, career paths usually begin at the store level with possible subsequent advancement to a position at the district, regional, or corporate level. Many chain companies have management development programs in marketing operations, legal affairs, third party programs, computerization, and pharmacy affairs. The spirit of entrepreneurship and motivation has enabled many pharmacists to successfully own their own pharmacies or, through establishing consultation services, to function independently.

Community Pharmacy and Consultant Pharmacists

Nearly everyone is familiar with community pharmacists and the pharmacy in which they practice. You probably visit the community pharmacist more often than you do any other member of the health team. Pharmacists talk to people when they are healthy and when they are sick; when they are seeking immunizations, such as the influenza vaccine; when they are “just browsing” or when they are concerned with an emergency; when they have specific needs as well as when they are seeking advice or information. Pharmacists are playing an increasing role in the “wellness” movement, especially through counseling about preventive medicine.

Pharmacists serve patients and the community by providing information and advice on health, providing medications and associated services, and by referring patients to other sources of help and care, such as physicians, when necessary. Likewise, advances in the use of information technology in pharmacy practice now allow pharmacists to spend more time educating patients and maintaining and monitoring patient records. As a result, patients have come to depend on the pharmacist as a health care and information resource of the highest caliber. Pharmacists, in and out of the community pharmacy, are specialists in the science and clinical use of medications. They must be knowledgeable about the composition of drugs, their chemical and physical properties, and their manufacture and uses, as well as how products are tested for purity and strength. Additionally, a pharmacist needs to understand the activity of a drug and how it will work within the body. More and more prescribers rely on pharmacists for information about various drugs, their availability, and their activity, just as patrons do when they ask about nonprescription medications.

If pharmacists develop a desire to combine their professional knowledge and skills with the challenge of the fast-moving community pharmacy practice, they will often consider a management position within a chain pharmacy practice or ownership of their own pharmacy. In chain practice, career paths usually begin at the store level with possible subsequent advancement to a position at the district, regional, or corporate level. Many chain companies have management development programs in marketing operations, legal affairs, third party programs, computerization, and pharmacy affairs. The spirit of entrepreneurship and motivation has enabled many pharmacists to successfully own their own pharmacies or, through establishing consultation services, to function independently.

Hospitals and Other Institutional Settings

As society’s health care needs have changed and expanded, there has been an increased emphasis on provision of care through organized health care settings. As a result, an increased number of pharmacists now practice in hospitals, nursing homes, extended care facilities, neighborhood health centers, and primary care networks. As members of the health care team composed of physicians and nurses, among others, pharmacists have an opportunity for direct involvement with patient care. The knowledge and clinical skills that the contemporary pharmacist possesses make this individual an authoritative source of drug information for physicians, nurses, and patients. In addition to direct patient care involvement, pharmacists in hospitals are responsible for systems which control drug distribution and are designed to assure that each patient receives the appropriate medication, in the correct form and dosage, at the correct time. Hospital pharmacists maintain records on each patient, using them not only to fill medication orders but also to screen for drug allergies and adverse drug effects.

Contemporary hospital pharmacy practice is composed of a number of highly specialized areas, including nuclear pharmacy, drug and poison information, and intravenous therapy. In addition, pharmacists provide clinical services in adult medicine, pediatrics, oncology, ambulatory care, and psychiatry. The nature and size of the hospital helps to determine the extent to which these specific services are needed. Because of the diversity of activities involved in pharmacy departments, there is also demand for management expertise, including finance and budgeting, personnel administration, systems development, and planning. As hospital pharmacists continue to become more involved in providing patient-oriented services, the demand for practitioners in this area of pharmacy continues to grow.

Pharmacy and Pharmaceutical Sciences

Pharmaceutical Review/Drug Use Evaluation

Pharmacists review drug utilization to determine which patients and prescribers are using particular medications. This allows the pharmacist to determine whether some drugs are inappropriately prescribed or used. With this knowledge in hand, the pharmacist and other care providers can then actively intervene in the patient’s care process to assure better outcomes.

The Pharmaceutical Industry

Another career option in pharmacy is represented by the pharmaceutical industry that produces chemicals, prescription and nonprescription drugs, and other health products. Pharmacists are engaged in careers such as marketing, research and product development, quality control, sales, and administration. Many pharmacists go on to obtain postgraduate degrees in order to meet the technical demands and scientific duties required in pharmaceutical manufacturing. Pharmacists with an interest in sales and administration can combine this with their technical background in pharmacy by serving as medical service representatives. These representatives call on a variety of health care professionals to explain the uses and merits of the products their firms produce.

Experienced and successful medical service representatives with administrative abilities often rise to supervisory or executive posts in the pharmaceutical industry. Pharmacists are also employed as sales representatives, supervisors, and administrators in wholesale drug firms.

Academic Pharmacy

Many pharmacy-trained faculty members work in the nation’s schools of pharmacy. They are involved in teaching, research, public service, and patient care. Others serve as consultants for provincial, national, and international organizations. Becoming a member of the faculty at a school of pharmacy usually requires a postgraduate degree and/or training (e.g., PharmD, PhD degree, or residency or fellowship training following the professional degree program). There currently exists a shortage of faculty, creating an array of excellent professional opportunities.

Pharmacy practice faculty members have significant responsibility for patient care, in addition to their work in teaching and research. These academicians often are called educator/practitioners, and they serve as role models for pharmacy students and residents in many education/practice settings. Faculty members in disciplines other than pharmacy practice are usually involved in pharmaceutical sciences research. The pharmaceutical scientists are mainly concerned with research that includes sophisticated instrumentation, analytical methods, and animal models that study all aspects of drugs and drug products. Moreover, social, economic, and behavioral science research often uses survey methods and statistical analyses to solve complex problems of drug utilization management, health care delivery, marketing, management, and other practice issues. To paraphrase one current pharmacy faculty member, “Perhaps no other job in pharmacy has such far-reaching effects on the profession as that of an educator. It is in academia that one can excite individuals about pharmacy and lay the groundwork for continuing advances in the field.”

Other Fields in Pharmacy

Pharmacists use their basic educational backgrounds in a host of federal, provincial, and professional positions.

At the federal level, pharmacists hold staff and supervisory posts in:
• Health Canada,
• in all branches of the armed services,
• many other agencies.

At the provincial level there are agencies charged with regulating the practice of pharmacy to preserve and protect the public health. These legal boards governing pharmacy practice usually have pharmacists employed as full-time executive officers and inspectors. All provinces have an active pharmacy association that employs a full-time executive officer, usually a graduate of a school of pharmacy.

Several national professional associations are also guided by pharmacists with an interest and specialized knowledge of organizational work. You may know other pharmacists who are engaged in highly specialized tasks. There are pharmacists in advertising, packaging, technical writing, magazine editing, and science reporting. There are pharmacists with legal training serving as patent lawyers or as experts in pharmaceutical law.

By now, it should be clear to you that the diversity of pharmacy is one of its chief strengths. And, in diversity lies your opportunity. In Canada, the vast majority of pharmacists practice in community or hospital pharmacies, or long-term and ambulatory care facilities. The remaining pharmacists follow one or another of the special fields you have just reviewed. The opportunity for success in any of these fields is wide open for men and women with ability, education, and imagination.

Excerpted with edits from a booklet entitled “Shall I study Pharmacy?” published by the American Association of the Colleges of Pharmacy (AACP).
142.2 Qualifications for Practice in Alberta

The Bachelor of Science degree in Pharmacy is the minimum academic requirement accepted by the Alberta College of Pharmacists to apply for registration to practice pharmacy in Alberta. To register as a pharmacist in Alberta, a graduate must complete a minimum of 900 hours of structured practical training through university curriculum rotations and placements. In addition, students must complete 100 hours of post-graduate internships. Applicants are required to complete the Pharmacy Examining Board of Canada Qualifying Exam Part I and II. This exam is offered twice a year, in May and November. A provincial Ethics and Jurisprudence Exam, administered by the Alberta College of Pharmacists prior to commencing structured practical training, must also be completed. Information concerning the regulations applying to practical experience in Alberta is available from the Registrar, Pharmacy Examining Board of Canada, 717 Church Street, Toronto, ON M4W 2M4.

Pharmacy students enrolled in a university program recognized by the council must register on the student pharmacist register with the Alberta College of Pharmacists. To register as a pharmacist in Alberta, applicants are required to complete the Pharmacy Examining Board of Canada Qualifying Examination, which may be obtained from the Registrar, Pharmacy Examining Board of Canada. The legislation governing the practice of pharmacy in the Province of Alberta is set forth in the Health Professions Act. See §§13 and 14 for general admission requirements to the University. Specific admission information for the Bachelor of Science in Pharmacy is set out in §15.12.

142.3 Faculty Accreditation

The BSc (Pharmacy) program at the University of Alberta has been granted Full Accreditation Status by the Canadian Council for Accreditation of Pharmacy Programs for a six-year term, 2011-2017.

143 Faculty Regulations

143.1 Admission

See §§13 and 14 for general admission requirements to the University. Specific admission information for the Bachelor of Science in Pharmacy is set out in §15.12.

143.2 Professional Ethics/Code of Student Behaviour

Students in the Pharmacy program are required to adhere to the professional code of ethics of the Alberta College of Pharmacists. Refer to §30.3.3 of the Code of Student Behaviour, and §15.12 for additional information. Amendments to the Code of Student Behaviour occur throughout the year. The official version of the Code of Student Behaviour, as amended from time to time, is housed on the University Governance website at www.governance.ualberta.ca.

143.3 Academic Standing

143.3.1 BSc in Pharmacy

(1) Grades

a. The means of assessing a student’s progress and determining a student’s grades may vary from one course to another, according to the nature of the course. Factors other than examination results may be used to a variable extent by instructors in determining grades. Students are informed at the beginning of each course how grades are to be determined.

b. Students must satisfactorily complete all components of all courses.

(2) Reexaminations: See §23.5.5

a. Students are advised that it is not possible to make a ruling regarding remediation or reexamination until all grades for a year are received and recorded.

b. The reexamination mark will replace the original final exam mark. Reexamination results do not alter the student’s class standing.

c. Any student who, after reexamination and/or evaluation, fails to meet promotion/graduation requirements, is deemed to have failed the year.

d. A student who does not take a reexamination within the time period prescribed by the Faculty will not be allowed to continue in the program.

e. Reexamination procedure:

i) The Associate Dean (Student Affairs) will specify by course the reexamination required of a failed student for the purposes of meeting promotion/graduation requirements.

ii) All students will take the reexamination as scheduled by June 30.

(3) Promotion and/or Continuation

a. Progression in the program is year by year and not by courses completed. Accordingly, all students in a particular year of the program normally should be registered in the same courses in each term (§144.1).

Students will not normally register in any core (i.e., non-elective) courses from a particular year of the program until they have satisfactorily completed core courses from the previous year of the program.

Students accepted into the MBA/BSc in Pharmacy Combined Degrees program will be permitted to delay entrance into the fourth year by one year with no loss in standing. The duration of the total MBA/BSc in Pharmacy Combined Degrees program must not exceed six consecutive calendar years from the time of admission to the Pharmacy program.

b. Academic standing is assessed on the basis of:

i) the pass or failure of individual courses and

ii) the GPA attained in a given year of the program (including courses taken in Spring Term). In computing the GPA, grades of W and CR/NC, and grades in courses accepted for transfer credit are not included.

Each student’s academic standing will normally be assessed at the end of the regular academic year, but in Years 1 and 2 of the program, such assessment will be delayed until grades are available for the practicums completed in Spring Term. Students who are on Academic Warning will be assessed at the end of each term. See §23.6.2(1).

c. A student who is awarded First-Class Standing or Satisfactory Standing, as defined below, will normally qualify for promotion:

First-Class Standing: Awarded to an undergraduate student who obtains a GPA of 3.5 or above and passes all courses while enrolled in the full normal academic course load in that year (Year 1, ★28.5; Year 2, ★32; Year 3, ★29.5). Note: First-Class Standing is not awarded in Year 4 given the limited number of graded units taken in that year.

Satisfactory Standing: Awarded to a student who achieves a GPA of 2.1 or above if no course is failed.

d. Conditional Standing: Assigned to a student who achieves a GPA of 2.1 or above but has failed one or more courses.

A student who is assigned Conditional Standing will be placed on Academic Warning and must retake and pass all failed courses. Other courses are to be taken, up to a normal course load, as scheduling permits and as approved by the Faculty.

Students on Academic Warning as a result of acquiring Conditional Standing will clear their Academic Warning upon passing the repeated courses and will qualify for promotion if they achieve Satisfactory Standing on the basis of all courses taken during Fall, Winter, and Spring terms. Students who fail a course a second time will be required to withdraw from the program.

e. Required to Withdraw: Any student failing to obtain a minimum GPA of 2.1 in any academic year is required to withdraw from the program. Such students are not normally readmitted to the program. Students who fail to provide satisfactory criminal record checks in connection with any practicum placement, or who fail to complete their degree requirements within the five calendar years, may be required to withdraw from the program.

f. Probation: Students who have been required to withdraw and who have successfully appealed that decision will be placed on Probation and required to repeat the program year.

To clear probation and qualify for promotion, the student must achieve Satisfactory Standing in the probationary year. Students who fail to do so will be required to withdraw. Any student in a probationary year who fails a course in Fall Term will be required to withdraw immediately and subsequent registration will be cancelled.

Only one year of probation is allowed while registered in the Faculty of Pharmacy and Pharmaceutical Sciences.
(4) Appeals and Grievances: Decisions on academic standing are made by the Faculty Council. Appeals may be made to the Academic Appeals Committee. Certain academic standing decisions made by the Faculty Academic Appeals Committee may be appealed to the General Faculties Council Academic Appeals Committee. Enquiries concerning standing in individual courses should be made to the professor in charge of the course. If the issue is still not resolved, the student may report the matter to the Office of the Dean for enquiry. See §23.8 (Appeals and Grievances) for further information.

The Faculty’s regulations governing academic appeals and grade appeals may be obtained in the Dean’s Office.

(5) Leave of Absence: Unless enrolled in a combined degree program, students must register in the pharmacy program on a continuous basis to ensure a place in the program. The Faculty does, however, recognize that important life events do occur that may prompt a student to request a Leave of Absence. Students who desire a temporary discontinuation of their program must obtain prior approval for a Leave of Absence by submitting a request to the Student Services Office. A Leave of Absence will not be granted automatically and will be considered only for acceptable reasons (e.g., incapacitating illness, severe domestic affliction). Discontinuance without permission requires the student to seek readmission to the program, which is not guaranteed.

Normally, a Leave of Absence is granted only if all the following conditions are met:

(a) A minimum of one full term must be completed within the degree program before a Leave of Absence is considered
(b) The student has a cumulative GPA of 2.1 in the pharmacy program
(c) The reasons for the absence are considered by the Faculty to be acceptable
(d) No transferable courses are being completed at another institution during the Leave of Absence period
(e) The leave of absence does not by itself extend the duration of the program beyond the normal limit for completion of the program

Note: An approved Leave of Absence will be granted for a maximum 12-month period of time, and will be granted only once in a student’s academic career within the Faculty.

143.3.2 Graduation

(1) Time Limit for Completion of Degree:

Normally, all students must complete their degree requirements within five calendar years from the time of their initial admission. This time limit includes all time during which a student is not in attendance, either for personal reasons [see §143.3.1(5)] or as a result of suspension or requirement to withdraw. Students should be aware of the need to provide a criminal record check for placement in the Experiential courses that are required for completion of the degree in pharmacy. Failure to provide a clean check can lead to delays or even the inability to fulfill these course requirements. This may lead to an inability to complete the program within the specified five-year period. Any failure or inability to complete the program within five years may be cause for Requirement to Withdraw from the program.

(2) Academic Performance for Graduation

Students must achieve Satisfactory Academic Standing in their final year of the program; present credit (CR or a minimum University of Alberta grade of D or equivalent) in all program requirements; and present a graduation average of at least 2.1. The graduation average is a cumulative measure of a student’s grade points obtained while registered in the Faculty in all years and terms, including Spring/Summer. It is the quotient of (a) the total number of grade points earned by a student in courses credited to the degree and (b) the total weight of those courses.

(3) Degree With Distinction

Degrees with Distinction shall be awarded to students who achieve a GPA of 3.5 or higher on the last ★4.5 that are taken in, or are approved specialization electives of, the Faculty and are included in the calculation of GPA.

143.3.3 Doctor of Pharmacy (PharmD)

(1) Grades

a. The means of assessing a student’s progress and determining a student’s grades may vary from one course to another, according to the nature of the course. Factors other than examination results may be used to a variable extent by instructors in determining grades. Students are informed at the beginning of each course how grades are to be determined.

b. Students must satisfactorily complete all components of all courses.

(2) Reexaminations: See §23.5.5

(3) Promotion and/or Continuation

a. Academic standing is assessed on the basis of:
   i) Performance in individual courses,
   ii) CR in credit/no credit courses,
   iii) A minimum letter grade of B- in all courses in which a letter grade is assigned, and
   iv) Students must take a minimum of one course in each term unless prior approval is granted by the Director of the PharmD program or the Assistant Dean (Student Affairs).

b. Credit by Special Assessment: Credit by Special Assessment is available in certain courses under specific circumstances. See §14.2.4, and contact the Faculty of Pharmacy and Pharmaceutical Sciences for any further information.

c. Proof of current licensure as a pharmacist with the Alberta College of Pharmacists and authorization to administer drugs by injection must be provided prior to the first rotation commencing and annually.

d. Satisfactory Standing: Students are in satisfactory standing when they have completed each required course with a minimum letter grade of B- or assigned a grade of CR in credit/no credit courses.

e. Conditional Standing: Students are placed in this category and placed on Academic Warning when upon a first attempt at a course, the student has not achieved a minimum grade of B- or a grade of CR in credit/non-credit courses. In such cases the student must retake the course involved the next time it is offered. Such students will clear their Academic Warning upon achieving a grade of B- or CR on the second attempt in order to be placed in Satisfactory Standing.

f. Required to Withdraw: Students who fail to achieve a minimum grade of B- or a grade of CR in credit/non-credit courses a second time will be required to withdraw from the program. Failure to provide documentation of current licensure and authorization to administer drugs by injection with the Alberta College of Pharmacists will necessitate withdrawal from the program.

143.3.4 Practicum Intervention Policy

The Dean, or Supervisor acting on behalf of the Dean, may immediately deny assignment of a student to, withdraw a student from, or vary terms, conditions or site of a practicum/clinical placement if the Dean or Supervisor has reasonable
grounds to believe that this is necessary in order to protect the Public Interest. Refer to §23.8.2 Practicum Intervention Policy for additional information.

143.4.1 Practicum Policies and Requirements

(1) Registration with Alberta College of Pharmacists: Section 2(1) of the Pharmaceutical Profession Act requires that pharmacy students be registered as students (restricted practitioners) with the College in order to practice in the exclusive scope areas of pharmacy to which they are exposed in a clinical rotation. All fees and other costs associated with this registration are the responsibility of the student.

(2) Criminal Record Check: Students should be aware that under The Protection for Persons in Care Act, they can be required to satisfy a criminal records check before being allowed to serve a period of internship, practicum placement, work experience, or to complete a course requirement. Refer to §23.6.3 for more information.

Students will be required to satisfy a criminal records check at entrance into the undergraduate program of the Faculty in order to meet PHARM 300 requirements. Subsequent criminal records checks must be satisfied for all practicum placements where it is required by the site, including all institutional site placements. All fees and other costs associated with obtaining security record checks are the responsibility of the student.

Students who have an unclear criminal record check may be unable to complete required experiential activities and may be required to withdraw from the program.

(3) CPR Certification: Students in the Faculty must obtain certification in cardiopulmonary resuscitation (CPR) Level C by the end of the Fall Term in which they are admitted. Please note that CPR Level C meets the requirements for providing injections. All fees and other costs for CPR certification are the responsibility of the student.

(4) Immunization and Bloodborne Pathogens Policy: Immunizations

To ensure, insofar as possible, both student and patient health and safety, the Faculty requires vaccination against, of proof of immunity to, poliomyelitis, diphtheria, tetanus, measles, mumps, rubella, varicella (chicken pox), and hepatitis B. As well, a one-step tuberculin skin test is required in the first year of the program. After completion of their training, students from health science faculties may be required to have tuberculin testing as part of their employment in a health care facility. It is recommended that all testing and vaccination be performed or confirmed by University Health Centre.

Bloodborne Pathogens

The University of Alberta recognizes its duty to minimize the risk of transmission of bloodborne pathogens to/by individuals studying/workers at the University. The GFC Bloodborne Pathogens Policy §108.12 limits the possibility of transmission of bloodborne pathogens within the educational setting. The University recognizes, however, that it is not possible to completely eliminate the risk of infection. The Faculty, in accordance with University policies and other current guidelines, has developed the following recommendations concerning bloodborne pathogens. These recommendations will be reviewed and adapted as further information on bloodborne pathogens becomes available.

Any exposure to human blood/body fluids shall be reported immediately according to the University of Alberta protocols. Refer to the Faculty Office for guidance.

Hepatitis B Virus (HBV): Current information indicates that there is a potential risk of transmission of hepatitis B from practitioner to patients in the clinical experience in practice settings. Therefore, applicants will be required to be tested for hepatitis B surface antigen by a personal physician or a physician at University Health Centre. Applicants who test positive for hepatitis B surface antigen will be further tested to help determine infectivity risk. Applicants who test positive for the antibody to hepatitis B surface antigen shall not require hepatitis B surface antigen testing.

For those applicants who test negative to hepatitis B surface antigen and are registered in the Pharmacy program, hepatitis B vaccination will be required. An exception will be made for those who have medical contraindications or for those who already have proof of hepatitis B immunity. After vaccination, students will be tested to determine if they have developed immunity. If they have not, further hepatitis B vaccination and counselling will be determined by the University Health Centre.

At all times students will follow Universal Precautions when there is a potential of exposure to human blood or body fluids.

Immunization requirements must be fulfilled by September 30 in the first year of the program. Students must sign a waiver if they are unable to meet immunization requirements due to medical contraindications.

144 Programs of Study

144.1 BSc in Pharmacy

144.1.1 General Information

The BSc in Pharmacy program is four years.

The courses to be taken in the first three years of the program are specified and are considered basic to the education of pharmacists. The fourth-year allows for some specialization through electives.

144.1.2 Program of Courses

Note: The following plan applies to students admitted to the BSc in Pharmacy program in 2010–2011 or later

Year 1 (Œ31.5)

(1) PHARM 300 ★1
(2) PHARM 301 ★2.5
(3) PHARM 304 ★0.5
(4) PHARM 305 ★4
(5) PHARM 306 ★2.5
(6) PHARM 307 ★2.5
(7) PHARM 316 ★1
(8) PHARM 321 ★2.5
(9) PHARM 322 ★2
(10) PHARM 326 ★1
(11) PHARM 331 ★3
(12) PHARM 334 ★1.5
(13) PHARM 341 ★2
(14) PHARM 342 ★2.5
(15) Option (★3)

Year 2 (Œ32)

(1) PHARM 311 ★1
(2) PHARM 315 ★2
(3) PHARM 327 ★2
(4) PHARM 330 ★3
(5) PHARM 347 ★1
(6) PHARM 391 ★2
144.2 Doctor of Pharmacy (PharmD)

144.2.1 General Information

The Doctor of Pharmacy (PharmD) degree is a one to two year program combining course work (18) and practice experience (36) following the completion of a BSc (Pharmacy) degree. For more information see the Pharmacy website at www.pharm.ualberta.ca.

144.2.2 Program of Courses

Year 3 (32.5)

(1) PHARM 372 (2)
(2) PHARM 382 (3)
(3) PHARM 387 (1.5)
(4) PHARM 407 (1.5)
(5) PHARM 417 (2.5)
(6) PHARM 430 (3)
(7) PHARM 437 (1.5)
(8) PHARM 447 (2)
(9) PHARM 467 (2)
(10) PHARM 477 (4)
(11) PHARM 497 (2)
(12) PHARM 499 (2)
(13) Option (3)

Year 4 (31)

(Students will be off campus in either the first or second term. Coursework will be completed in the opposite term.)

(1) PHARM 425 (16)
(2) Specialization electives (9)
(3) Options (6)

*Specialization Electives

Students wanting to further develop their intended pattern of specialization may want to select courses from the list of pattern-related electives identified by the Faculty of Pharmacy and Pharmaceutical Sciences. At least 3 of the 9 Specialization Electives must be taken as a PHARM course. A list of available Specialization Electives will be provided by the Faculty office. Specialization Electives must be University of Alberta courses and must be taken during year four of the program. Transfer credit is not accepted for Specialization Electives.

*Options

Options normally are selected from courses offered outside the Faculty of Pharmacy and Pharmaceutical Sciences. These courses allow students to pursue areas of personal interest and promote a liberal education.

Note: Only one junior course from each subject area is permitted. Junior courses are those numbered 199 or lower.

144.3 Graduate Study

Students may undertake graduate study leading to the degree of MPharm, MSc, or PhD. Any students contemplating such work should discuss their program with the Associate Dean (Research and Graduate Studies) of the Faculty of Pharmacy and Pharmaceutical Sciences. They should also familiarize themselves with the admission requirements, regulations, and procedures of the Faculty of Graduate Studies and Research. These may be found in §205, Graduate Programs.

145 Courses

Faculty of Pharmacy and Pharmaceutical Sciences courses can be found in §231, Course Listings, under Pharmacy (PHARM).