

## Prompt Activity #1

Example Prompt Using **C.R.A.F.T.S.** framework

- **Context:** *You are preparing an instructional activity for a third-year Pharm.D. course in the Pharmacotherapeutics sequence, focusing on infectious diseases. Students have recently completed foundational lectures on antimicrobial agents and are now transitioning to applied, patient-centered care models. The goal is to deepen students' understanding of how to apply antimicrobial stewardship principles in clinical scenarios.*
- **Role:** *You are a pharmacy educator and infectious disease specialist designing an active learning activity that promotes clinical reasoning, guideline application, and patient safety.*
- **Audience:** *The activity is intended for third-year Pharm.D. students with baseline knowledge of microbiology, antimicrobial classes, and resistance patterns but limited experience in applying this knowledge to real-world cases.*
- **Format:** *Design a 60-minute, small-group, case-based classroom exercise using a simulated patient scenario. The session should involve collaborative problem-solving, guided debriefing, and include instructor-facilitated feedback.*
- **Topic:** *The therapeutic topic is hospital-acquired pneumonia (HAP), with emphasis on empiric therapy selection, de-escalation strategies, duration of treatment, and monitoring for therapeutic effectiveness and adverse events.*
- **Strong Verb:** *Construct a multifaceted case study and corresponding learning materials that help students evaluate therapeutic choices, justify antibiotic selection based on clinical guidelines (e.g., IDSA/ATS), and formulate safe and effective treatment plans with attention to renal function, culture data, and resistance trends.*

## Prompt Activity #1b

Example Prompt using **C.R.A.F.T.S.**

- **Context:** You are developing lecture materials and formative assessment activities for a first-year Pharmacy Calculations course. Your goal is to design high-quality, realistic practice problems that reinforce key concepts in dilution, concentration, and compounding calculations. You would like to create varied and pedagogically sound problem sets with accompanying explanations.
- **Role:** Act as an experienced pharmacy educator and course coordinator responsible for teaching foundational calculation principles to Pharm.D. students. You ensure that problems align with ACPE competencies and foster accuracy, conceptual understanding, and application to real-world pharmacy scenarios.
- **Audience:** First-year Pharm.D. students enrolled in the Pharmacy Calculations course who have introductory exposure to ratio and proportion, dimensional analysis, and concentration expressions but are still developing fluency and confidence in applying these methods.
- **Format:** Generate a set of 10 structured practice problems that progressively increase in complexity. Each problem should include:
  - The full problem statement with all quantities and units clearly defined
  - A step-by-step solution using dimensional analysis or appropriate calculation methodology
  - The final answer, clearly stated with units
  - Two short conceptual reflection questions (e.g., “Why was this calculation method used?” or “How would the result change if...?”)
  - At the end, include a one-paragraph instructor note explaining how these problems can be used in active learning, small-group, or formative assessment contexts.
- **Topic:** Pharmacy calculation concepts focusing on allegation, dilution, and concentration problems commonly encountered in professional pharmacy practice - including IV admixture preparation, reconstitution of antibiotics, and adjusting concentrations for pediatric dosing.
- **Strong Verb:** Generate realistic, pedagogically sound, and progressively challenging pharmacy calculation problems with clear solutions, reflective questions, and instructor guidance that promote conceptual understanding and professional application.

## Prompt Activity #2

Example Prompt Using **R.I.S.E.N.** framework

- **Role:** *You are a clinical pharmacy specialist with expertise in cardiology, responding to a request from a pharmacy educator who is designing a module on heart failure pharmacotherapy for Pharm.D. students.*
- **Intention:** *The goal is to provide a detailed, evidence-based comparison of guideline-directed medical therapies (GDMT) for Heart Failure with reduced Ejection Fraction (HFrEF), highlighting key teaching points, clinical pearls, and common pitfalls students should recognize.*
- **Structure:** *Your response should be organized as:*
  - *Concise overview of HFrEF treatment goals*
  - *Comparison table of drug classes (e.g., beta-blockers, ARNIs, SGLT2 inhibitors) covering mechanisms, dosing, and landmark trials*
  - *Case-based example illustrating a patient's therapeutic journey*
  - *Teaching tips for addressing student misconceptions (e.g., "Why is hydralazine/nitrate combination still used?")*
- **Evidence:** *Support recommendations with:*
  - *2022 AHA/ACC/HFSA Heart Failure Guidelines*
  - *Landmark trials (e.g., PARADIGM-HF, DAPA-HF)*
  - *Real-world data on adherence challenges (e.g., cost/access barriers to ARNIs)*
- **Nuance:** *Balance depth (e.g., nuanced titration strategies) with accessibility for learners. Use a collaborative tone (e.g., "A common debate in practice is...") and highlight gray areas (e.g., when to prioritize SGLT2 inhibitors over ARNIs in specific populations).*

### Prompt Activity #3

Example Prompt Using **C.R.E.A.T.E.**

- **Clarify:** Design a 60-minute workshop for PharmD students to critically evaluate antibiotic prescribing in hospital-acquired pneumonia (HAP) cases. The goal is to reinforce antimicrobial stewardship principles, including spectrum selection, de-escalation, and duration of therapy, while aligning with IDSA/ATS guidelines.
- **Reflect:** Begin by asking learners to recall prior knowledge (e.g., "What are key risk factors for multidrug-resistant pathogens in HAP?"). Have them reflect on past clinical or classroom cases where inappropriate antibiotic use led to resistance or adverse outcomes.
- **Explore:** Facilitate small-group exploration of:
  - Case vignettes with real-world prescribing errors (e.g., overly broad empiric coverage, missed de-escalation opportunities).
  - Interactive debate on controversial scenarios (e.g., "Would you use piperacillin-tazobactam vs. cefepime in this ICU patient with renal dysfunction?").
- **Apply:** Task students with creating a stewardship intervention for a hypothetical hospital:
  - Develop a 1-page guideline summary for empiric HAP therapy.
  - Role-play a pharmacist-provider conversation advocating for de-escalation.
- **Transform:** Challenge learners to think beyond guidelines:
  - "How would you adapt stewardship strategies in a resource-limited setting?"
  - "Design an infographic to teach nurses about early culture stewardship."
- **Evaluate:** Conclude with a self-assessment (e.g., "Rate your confidence in HAP stewardship on a 1–5 scale") and group critique of one another's guideline summaries.

## Prompt Activity #4

Example Prompt Using **S.P.A.R.K.**

- **Situation:** *As a pharmacy educator preparing a lecture on anticoagulant therapies, you need to develop an engaging and informative session for students who will soon begin clinical rotations. With the increasing use of direct oral anticoagulants (DOACs) in practice, it's essential to ensure learners understand key differences between warfarin and DOACs, including dosing, monitoring, and patient counseling points.*
- **Purpose:** *The goal is to create a case-based learning activity that reinforces critical decision-making skills, help students compare and contrast anticoagulants, and prepares them to confidently manage patients on these medications in real-world settings.*
- **Audience:** *The content is intended for third-year PharmD students who have completed foundational pharmacology coursework but have limited clinical experience with anticoagulation therapy.*
- **Requirements:** *The activity must include:*
  - *A patient case (e.g., atrial fibrillation vs. DVT treatment)*
  - *Comparison tables (warfarin vs. DOACs: dosing, monitoring, reversal agents)*
  - *Interactive elements (e.g., polling questions, small-group discussions)*
  - *Common counseling points (e.g., dietary restrictions, signs of bleeding)*
- **Knowledge:** *Students should already be familiar with:*
  - *Basic coagulation pathways*
  - *Pharmacokinetics of warfarin and DOACs*
  - *INR monitoring principles*
  - *General principles of medication safety*