

## Mentor or preceptor: What is the difference?

The terms *mentor* and *preceptor* are often used interchangeably. However, these two very important roles have defining features that make them quite different. The relationship between a mentor and mentee is a “naturally formed, one-on-one, mutual, committed, nonsexual relationship between a junior and senior person designed to promote personal and professional development beyond any particular curricular or institutional goals.”<sup>1</sup> This relationship is one of mutual benefit. Mentors provide direction, foster self-confidence, and instill the values mentees need to develop professionally. Serving as a mentor can provide a sense of pride and gratification. In addition, mentors often find their interest and passion for pharmacy renewed by the enthusiasm displayed by students and young professionals. Mentoring relationships tend to be long-term commitments and persist over many years. The mentor–mentee relationship should evolve over time to meet the mentee’s changing needs.

Unlike the mentor–mentee relationship, the preceptor–student relationship is prearranged, and neither the student nor the preceptor chooses the other. In this arrangement, the commitment to each other is short-term, with most rotations lasting only four to six weeks. Once students complete the rotation, their interaction with the preceptor likely ceases unless the interaction is continued with subsequent rotations. Similar to mentors and mentees, preceptors and students receive mutual benefits: Students gain the knowledge and skills necessary for them to become pharmacists, and preceptors are able to do what they enjoy—teach.

In addition to teaching a student, a mentor aids in the personal and professional development of the mentee. This is accomplished by partaking in more than professional activities together. Topics of discussion often include families, hobbies, frustrations, ambitions; the list goes on and on. Conversations of this nature may surface between preceptors and students; however, they may not be discussed in as much detail or depth as in a mentoring relationship.

Mentors are typically very knowledgeable and established in their field, which enables them to provide the expertise necessary to fulfill the mentee’s needs. On the contrary, preceptors may not have as many years of experience, and that is okay. Some of the best preceptors I had during my rotations were young faculty members just starting their careers.

So how do you become a mentor or mentee? Mentoring programs may be available through your school or work. If they are not available, ask yourself who you admire. Contact this person and ask if he or she would serve as your mentor. Another option is ASHP’s excellent online networking tool, the virtual mentoring program ([www.ashp.org/virtualmentoring](http://www.ashp.org/virtualmentoring)). This program allows you to find mentors in your interest areas who meet your criteria. Once you find someone, you can request that per-

son as a mentor. If he or she is available, you can begin seeking guidance and career advice.

As a new pharmacist, you may interact on a daily basis with aspiring pharmacy students or students on internship or clinical rotations. If you become a mentor or a preceptor for one of these students, remember to be patient, stay involved, and provide feedback to your mentee.<sup>2</sup>

I have been fortunate enough to serve as a preceptor for several students since the beginning of my residency year. This has been an enjoyable part of my job and helped me decide what I would like to pursue once my residency is complete. I appreciate my many preceptors and mentors, and I hope to provide the same service to students in the future so they may reap the same benefits. For me, there is nothing more rewarding than watching a student succeed and knowing I may have played a part in that success.

1. Rose GL, Rukstalis MR, Schuckit MA. Informal mentoring between faculty and medical students. *Acad Med.* 2005; 80:344-8.
2. Toffler WL, Taylor AD, Schludermann P. Pitfalls of precepting. *Fam Med.* 2001; 33:730-1.

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