

Program Structure

The 2009-2010 residency will begin on Wednesday, July 1, 2009 and end on Wednesday, June 30, 2010. Residents are **required** to attend housestaff orientation that is held on Monday June 29, and Tuesday June 30, 2009.

During the month of July, residents rotate through various Pharmacy Department areas and develop skills required for the provision of services provided by the department including drug information, inpatient unit dose, and IV admixture service. Residents will additionally undergo competency evaluations in select areas such as the Cardiac Arrest (Code 12) program, aseptic technique, and the Pharmacy computer applications program.

Rotations begin on Monday, July 27, 2009. All rotations are 5 weeks in duration. Required rotations include: acute care, ambulatory care, critical care, drug information, and practice management.

PGY1 Pharmacy Residency Rotations

Required Rotations* (at least two required rotations must be completed during the first half of the residency year)

***Ambulatory Care-** in the Adult Internal Medicine Clinic

***Drug Information-** in the Department of Pharmacy Drug Information Center

***Practice Management** – with the Director of Pharmacy Services (additional conferences will be held monthly throughout the year)

***Critical Care-** available choices below

***Acute Care-** available choices below

◆ **Critical Care rotations**

- Coronary Care Unit (CCU)
- Medical Intensive Care (MICU)
- Neonatal intensive care (NICU)
- Neurosciences Intensive Care (NNICU)
- Pediatric intensive care (PICU)
- Surgical Trauma/Burn (STICU)
- Thoracic/Cardiovascular Surgery (TCVPO)

◆ **Acute Care rotations**

- Emergency Medicine
- Hematology/Oncology
- Infectious Diseases
- Internal Medicine
- General Pediatrics
- *Transplant (clinical specialist position vacant)*
- Women's Health

Residents may spend up to three rotations (15 weeks) in electives to pursue areas of particular career needs and interest. In order to maintain compliance with the accreditation standard, no more than 3 rotations can occur in a similar practice area (eg, critical care). Additional rotations may be developed based on resident interest and preceptor availability. Between the third and fourth rotation blocks (November and December), residents will have a mixture of research and retraining days and mini-rotations. Mini-rotations will consist of one 2-week or two 1-week experiences (week of 11/16 and 12/14) of concentrated experience in any pharmacy clinical specialist practice area.

Research Activities

- a. Completion of a major project is a requirement of the residency. The final reports must be submitted in manuscript style that is acceptable for submission to a peer-reviewed biomedical journal and formally approved by all members of the Project Advisory Committee.
- b. During the first half of the year, each resident will complete a medication use evaluation (MUE) on a selected therapeutic agent(s). Completed projects will be submitted for poster presentation at the University HealthSystem Consortium meeting held in conjunction with the ASHP Midyear Clinical Meeting. Results of the MUE are written up in a manner consistent with a manuscript for submission to a peer-reviewed biomedical journal and are presented to the Pharmacy and Therapeutics (P&T) Committee or appropriate P&T Work Group.

Presentation Requirements

- a. Residents are required to present their project as a platform presentation at the Eastern States Conference for Pharmacy Residents and Preceptors.
- b. Each resident is responsible for presenting two seminars (Fall and Spring) and one technician talk during the course of the residency year. One of the seminars must be in a “case-based” format.
- c. The Spring Seminar and the Tech Talk will be ACPE-accredited to provide continuing pharmaceutical education. To obtain CE credit, the presentations must have appropriate, measurable learning objectives, post-test questions that correlate with the learning objectives, and some component of audience participation/ active learning.

Weekend Distributive Function

- a. Weekend distributive functions provide necessary training for the resident and are a requirement of the ASHP residency accreditation standard.
- b. Residents are assigned to weekend distributive functions within the inpatient pharmacy every other weekend throughout the year. Each resident will spend 5 weeks of the year in decentral clinical activities and 10 weekends each in the inpatient unit dose and sterile products (the IV clean room) areas.
- c. Residents will be retrained during various times throughout the year.

Certification

- a. Residents are encouraged but not required to complete ACLS training and certification. This training is offered through the Medical Center at no charge to the resident. Pharmacy residents may participate in ACLS training during the orientation period or during November/ December.
- b. Residents respond to Code 12 calls during the residency year. Residents are accompanied by a clinical specialist preceptor. At each code response, the resident and clinical specialist responder complete snapshot self-evaluations and evaluations, respectively.