
ROTATION DESCRIPTIONS AND ACTIVITIES - 201.00

PHARMACY PRACTICE RESIDENCY

1. Required Learning Experiences:
 - A. Acute Care
 - 1) One 6-week surgery rotation
 - General Surgery
 - Neurosurgery
 - Orthopedic Surgery
 - 2) Three-four 6-week elective medicine rotations
 - General Medicine
 - Cardiology
 - Critical Care
 - Pediatrics
 - Infectious Diseases
 - Psychiatry
 - Oncology
 - Solid Organ Transplant (Liver, Kidney, Heart/Lung)
 - B. Ambulatory Care:
 - 1) One 12 week rotation involving multiple clinic experiences
 - Ambulatory Care Medicine
 - C. Practice Management/Hospital Policy Development
 - (1) Elective Experiences
 - Managed Care (approximately 6 weeks)
- Note: Rotations will be assigned based on each resident's choices but with consideration of staffing and precepting requirements to cover all clinical services.
2. In addition, residents participate in the following activities:
 - A. Code Blue coverage (cardiopulmonary resuscitation team)
 - B. Conference leader for therapeutic series coursework
 - C. Pharmacy and Therapeutics Committee Drug Evaluations
 - D. Inpatient Central Unit Dose Distribution and IV Additives Drug Distribution
3. Residents attend the following seminars:
 - A. Clinical Pharmacokinetics
 - B. Cardiopulmonary Resuscitation Certification
 - C. Code Blue Training
 - E. Research Design and Methods
 - F. Career Planning
 - G. Management Issues and Topics
 - H. Education and Teaching Methods
 - I. Presenting Research at Professional Meetings

4. Each resident is also responsible for undertaking a project to be completed during the residency year, under the direction and guidance of a faculty preceptor. The project should be one which results in a publishable paper.
5. Rotations Available: *
 - A. Inpatient Pharmaceutical Care:
 - 1) Cardiology
 - 2) Critical Care
 - 3) General Medicine
 - 4) General Surgery
 - 5) Infectious Diseases
 - 6) Neurological Surgery
 - 7) Oncology
 - 8) Orthopedic Surgery/Pain Consult Service
 - 9) Pediatrics
 - 10) Solid Organ Transplant (Liver, Kidney, Heart/Lung)
 - 11) Psychiatry
 - B. Ambulatory Pharmaceutical Care:
 - 1) Anticoagulation Clinic
 - 2) Depression Clinic
 - 3) Diabetes Clinic
 - 4) Epilepsy Clinic
 - 5) Family Health Clinic
 - 6) General Medicine/Primary Care Clinic
 - 7) HIV Clinic
 - 8) Memory Clinic
 - 9) Oncology Clinic
 - C. Managed Care
 - D. Hospital Policy, Information & Economics

* Please note: Rotations listed may be subject to change according to clinical needs and priorities.

ACUTE CARE SERVICES

Pharmacy residents assume the responsibilities of staff clinical pharmacists, including participation on work and attending rounds, monitoring patients (patient interviews, establishing patient profiles, working up drug information questions), giving in-service education to nurses and medical staff, participating on the CPR (code blue) team, documenting clinical activities and precepting pharmacy students.

CARDIOLOGY - 201.47

Intensive Cardiac Care and Ward Cardiology

Preceptors: Steven R. Kayser, Pharm.D., Nellie Namazi, Pharm.D., Dwight Utzman, Pharm.D., Jaekyu Shin, Pharm.D., and Jane Kim, Pharm.D.

The Cardiology rotation involves, but is not limited to, practice on the 10th floor of UCSF Medical Center. The Intensive Cardiac Care Unit (ICC) admits patients from the Cardiology service as well as the Cardio-thoracic surgery and Vascular surgery services. Patients awaiting cardiac or lung transplant as well as patients post transplantation are also admitted to the ICC. The rest of the 10th floor is composed of both transitional care as well as general admission telemetry monitored beds.

Residents will participate on both ICC and ward activities. Responsibilities will include, but not necessarily be limited to: reviewing patient charts, attending ICC and 10 ward Cardiology Rounds, interviewing patients, counseling patients, arranging and writing for discharge medications, precepting fourth year pharmacy students. Residents will have an opportunity to observe specialized cardiology procedures including programmed electrical stimulation (PES) for investigation of arrhythmias and cardiac catheterization (angiography and percutaneous coronary intervention (PCI)). Specialty conferences are also offered in various areas of cardiac care topics. Residents will also become familiar with routine ICC procedures.

Available full time for six weeks.

KIDNEY TRANSPLANT SERVICE - 201.42

Preceptor: Christine Borrromeo, Pharm.D. and Jennifer Liu, Pharm.D.

The Kidney Transplant Service is a primary care service with collaboration between the Departments of Surgery and Medicine, as well as Pharmacy, Nursing, and Social Work. The team consists of a surgery attending, medicine (nephrology) attending, pharmacy attending, surgery fellow, nephrology fellow, surgical intern, a surgical resident, pharmacy resident, transplant coordinator, medicine student, and pharmacy student. The pharmacy resident acts as a pharmaceutical care provider, consultant to the kidney transplant service regarding all medication related issues, and preceptor to pharmacy students.

Available full time for six weeks.

NEUROSURGERY - 201.44

Preceptors:

**Cheryl Amin, Pharm.D., Lenna Chakalian, Pharm.D.,
and Lori Reisner, PharmD**

This surgical rotation is one in which the clinical pharmacist plays a major role in the primary care of patients admitted to the Neurological Surgery service. The pharmacy resident is an integral team member, working closely with the neurosurgical resident, clinical nurse specialist(s), and hospitalist. The pharmacy resident functions independently as a health care provider for 15-20 critical and/or acute care patients. Additionally, the resident shares joint responsibility with the clinical pharmacy faculty members for precepting fourth year pharmacy students assigned to the service and providing on-site pharmacy services.

Available full time for six weeks.

GENERAL MEDICINE - 201.41

Preceptors: Eunice Tam, PharmD., Vicki Jue, PharmD., and Alan Tan, Pharm.D.

The resident works on the Adult General Medicine Service as a member of a medical team; the preceptors monitor all activities. Daily activities include participation in work rounds and attending rounds; monitoring patient drug therapies; providing drug information, pharmacokinetics, and toxicology consultations when necessary; precepting and evaluating fourth year pharmacy students, including assistance in preparing for required presentations and consultations; initial patient medication interviews; and patient, nursing, and housestaff education. The resident helps coordinate discharge medication counseling and follow-up for his/her patients. This is a hospitalist service with built in discontinuities of care. The resident must commit to facilitating these difficult transitions.

Available full time for six weeks.

GENERAL SURGERY PHARMACY SERVICE - 201.30

Preceptors: Marcin Rychlewski, PharmD, BCPS, Heidemarie Windham, PharmD

General Surgery is a unique experience for general practice pharmacy residents. Each General Surgery service (Blue and Red) typically consists of attendings, a fellow, a chief resident, first, second and/or third year surgery residents, nurse practitioners, a dietician, a social worker, a nurse case manager and a pharmacist.

The pharmacy resident will be responsible for the patients of either the Red or Blue surgery service. The resident will be responsible for knowing the medications of each patient, including proper dosing, monitoring parameters, indications, and duration of therapy. In addition, the resident will identify medication problems and formulate medication therapy plans. The resident will be responsible for communicating with his/her respective general surgery team.

For General Surgery patients in the ICU, our team is responsible for all aspects of care excluding sedation, pain and ventilation. The resident will work with the ICU pharmacists to play a vital role in providing continuity of care between the General Surgery service and the ICU team as appropriate. The resident will also work with the diabetes nurse specialist, infectious disease pharmacist, pain management team, and other specialists as appropriate for specific patient populations.

Available during the Winter II and Spring I rotation for six week intervals.

MEDICINE AND GENERAL SURGERY CRITICAL CARE CLINICAL PHARMACY SERVICE - 201.43

Preceptors: Marilyn Bedodo, Pharm.D., Fanny Li, Pharm.D., Cindy Loffler, Pharm.D. and Megan Pintens, Pharm.D.,

Critical care is an important experience for general practice pharmacy residents. At UCSF Medical Center, our Intensive Care Units (ICUs) are staffed by multidisciplinary teams. The Medicine/General Surgery/Cardiac and Neuro ICUs have attendings who are double-board certified in critical care and either anesthesia, pulmonary medicine, general medicine or nephrology. Each critical care team consists of an attending, 1-2 fellows, anesthesia residents, surgery residents, medicine residents, a dietician, respiratory therapists, nurse practitioners and pharmacists.

The ICUs are "open", and all patients in 8ICU and 9ICU are required to have an ICU consult. The ICU service primarily manages sedation, analgesia, pain and ventilation. The ICU service is the primary service (closed unit) for patients who are on an orthopedic, urology or oncology service.

The pharmacy resident is responsible for the patients of either the 9ICU or 13 ICU team. The resident will be responsible for the medications of each patient, knowing their indications, proper dosage, monitoring parameters, be able to identify medication problems and formulate medication therapy plans. The resident will be responsible for communicating with the ICU team and with the primary teams via other pharmacists and physicians. The resident will also be responsible for participating in and leading topic discussion and will review each of their patients with their preceptor daily.

INFECTIOUS DISEASES SERVICE - 201.61

Preceptors: Vicky Dudas, Pharm.D., Joe Guglielmo, Pharm.D., Conan MacDougall, Pharm.D. and Kathy Yang, Pharm.D.

The Infectious Diseases Service is a consulting specialty service within the Department of Medicine. The consulting team consists of infectious diseases attending physicians and fellows, medical residents, and clinical pharmacists. The clinical pharmacy component of the Service includes pharmacy students, the infectious diseases pharmacy resident and the pharmacy practice resident. The pharmacy practice resident has several major roles: 1) Institutional antimicrobial review through the utilization of the Antimicrobial Order Sheet, antimicrobial dosing cards, and the clinical microbiology database. 2) Consultant to the I.D. Service in antimicrobial pharmacology and pharmacokinetics 3) Reviewing antibiotics in the critical care setting

Available full time for six weeks.

LIVER TRANSPLANT - 201.49

Preceptor: David Quan, Pharm.D.

The Liver Transplant Service is a primary care service with collaboration between the departments of Surgery and Medicine as well as Pharmaceutical Services, Nursing, and Social Work. The team consists of: a transplant surgeon, hepatologist, pharmacist, transplant surgery fellow, gastroenterology fellow, two surgery and two medicine interns, in addition to medicine and pharmacy students. The pharmacy resident is actively involved in providing pharmaceutical care and coordinating the discharge medications for patients on the liver transplant service.

Available full time for six weeks.

PEDIATRICS - 201.45

Primary Preceptors: Lisa Englert, Pharm.D., Sarah Scarpace, Pharm.D.

Additional Preceptors: Julie Dong, Pharm.D., Ilexa Nicolau, Pharm.D., Penny Ngo, Pharm.D., Julie Tieu, Pharm.D., Minh Phan, Pharm.D., and Julie Wilson-Ganz, Pharm.D.

This rotation is designed to introduce the resident to drug dosing and management of the pediatric patient. While on rotation in the Children's Hospital, the clinical pharmacy resident functions as an active member of either the ward-based or the intensive care services. The resident will participate on work rounds and attending rounds, providing general pediatric drug information, including appropriate pediatric dosing, antibiotic therapy, pain and sedation management, and pharmacokinetic analysis. The resident, under the supervision of faculty, will monitor patient therapy and progression, consult with physicians and nurses, present in-service lectures to pharmacy staff and act as a preceptor for senior pharmacy students. Other activities include patient and parent interviews, discharge counseling and participation in a weekly pharmacy didactic teaching sessions and monthly journal club.

Available full time for six weeks.

Heart and Lung Transplant Service - 201.53

Preceptor(s): Rebecca Boettger, PharmD, Christine Hui, PharmD and Katie Watkins, PharmD

The Heart and Lung Transplant Service is a multidisciplinary team consisting of surgery, medicine (heart failure/transplant cardiologist and transplant pulmonologist), pharmacy, nursing, social work and dietary. The UCSF Heart and Lung Transplant Program currently follows approximately 300 outpatients (90 heart, 170 lung) with an average of 50-55 new transplants each year (20-25 heart, 40 lung/heart-lung).

The heart, lung, or heart-lung transplant patients may be admitted under several hospital services including Cardiothoracic Surgery (immediate post transplant), the Heart Failure/Transplant Service (heart transplant readmission), and the Medicine Service (lung or heart-lung transplant readmission). There will be opportunities to collaborate with various surgical and medical teams in addition to the primary transplant service personnel (ie. Transplant nurse coordinators). The pharmacy resident will act as the clinical

pharmacist for the heart and lung transplant service by assisting with all medication related issues.

The Heart and Lung Transplant pharmacists also provide medication reconciliation to the non-transplant patients admitted to the Cardiothoracic Surgery Service. In addition to their transplant duties, the pharmacy resident will also assist with medication reconciliation for the Cardiothoracic service and provide discharge teaching to these patients when asked.

Available full time for six weeks.

HEMATOLOGY/ONCOLOGY/BMT - 201.48

**Preceptors: Larissa Graff, Pharm.D., Helen Wu, Pharm.D., BCOP,
Rebecca Young, Pharm.D and Courtney Yuen, Pharm.D., BCOP**

As a member of the inpatient Hematology/Oncology/BMT team, the pharmacy resident actively participates in multidisciplinary rounds. The resident will provide pharmaceutical care for patients, and will provide symptom management including, but not limited to: chemotherapy induced nausea and vomiting, pain management, and nutrition. The resident will make recommendations in antibiotic therapy, and pharmacokinetic monitoring (especially aminoglycosides, vancomycin, methotrexate, and tacrolimus). The resident also manages TPN and electrolyte replacement. Teaching opportunities include precepting fourth year pharmacy students, leading journal club and giving inservices to the nursing and medical staff. Other responsibilities include chemotherapy order writing and review, pharmaceutical care documentation, patient interviews, discharge planning and patient education.

Available full time for six weeks.

ORTHOPEDIC SURGERY AND PAIN MANAGEMENT CLINICAL PHARMACY SERVICE - 206.46

**Preceptor(s): Peter J. S. Koo, Pharm.D., Sharon Tran, Pharm.D.
and Deke Shelton, Pharm.D.**

The pharmacy practice residents on the orthopedic surgery service have a very unique and active role in managing the postoperative orthopedic patients. Under the supervision of the preceptor, the pharmacy resident will make decisions on analgesic choice, and delivery systems for the post-surgical patients. The resident will utilize multiple methods of analgesia, as well as analgesic adjuncts for managing post surgical pain. In addition, the pharmacy team will collaborate with the surgeons in managing the pharmaceutical care needs of their patients. During this rotation, the residents will also learn about pharmacokinetics and pharmacodynamics of intrathecal, epidural, regional and systemic analgesics. The resident will work with the anesthesia acute pain management service for transitioning the patient from an inpatient analgesic regimen to an ambulatory care regimen, and eventually coordinating the patient's discharge. The resident will also be directly involved in educating and teaching the patients on the appropriate use of their medications.

The residents will also participate in managing patients post-operatively for chronic diseases such as hypertension, diabetes, anticoagulation, antimicrobial therapy, and degenerative joint diseases in the orthopedic patients. The pharmacy residents will also participate in managing post-operative ileus, nausea and vomiting, and drug withdrawals commonly encountered in the post surgical patient population. The residents will learn to anticipate adverse drug reactions and develop strategies for avoidance as well as in therapeutic regimen design and planning.

The pharmacy practice resident will be working very closely with the surgical team, the pharmacy preceptor, and the nursing staff in the management of these patients. The resident will be participating in providing pain management consultations to other medical and surgical services at the Moffitt-Long hospitals upon the request of their attending physicians. The residents will participate on daily discharge planning rounds with the discharge coordinators, nursing staff, rehabilitation services, and the surgical team to provide drug therapy guidance and input.

Teaching and precepting pharmacy student is a strong component of this rotation. Teaching and precepting skills are nurtured and strongly encouraged of every resident on this rotation with input from the preceptors. The resident will also be given the opportunity to work with pharmacy technicians to maximizing the utilization of resources.

Available full time for six weeks.

HOSPITAL POLICY, INFORMATION AND ECONOMICS - 201.21

Preceptor: Christine Cheng, Pharm.D. and Candy Tsourounis, Pharm.D.

Residents will develop a working knowledge of the emerging field of Hospital Policy, Quality Improvement and Economics and an understanding of the current health care environment. Through completion of projects or portions of projects residents will be exposed to several aspects of the Hospital Policy, Information and Economics processes at UCSF, including some of the following: medication usage evaluations, therapeutic interchange and other targeted drug implementations, medication use indicators, reduction of medication errors, formulary management, JCAHO standards, disease state management guidelines, quality improvement projects, proposal development and cost containment strategies. Residents will work with preceptors as they accomplish work in these areas. Residents will be asked to complete projects related to the work currently being conducted in these areas. A final written project report may be required. There will be opportunities to attend departmental meetings.

Available full time for six weeks.

AMBULATORY CARE MEDICINE AND SPECIALTY CLINICS - 201.50
San Francisco General Hospital (SFGH) & UCSF Medical Center

Preceptors: Brian Alldredge, Pharm.D., Jennifer Cocohoba, Pharm.D., Cathi Dennehy, Pharm.D., Betty J. Dong, Pharm.D., Steve Echaves, Pharm.D., Patrick Finley, Pharm.D., Cristina Gruta, Pharm.D., Steve Kayser, Pharm.D., Lisa Kroon, Pharm.D., Monica Lee, Pharm.D., Andrew L. Leeds, Pharm.D., Ian McNicholl, Pharm.D., Helena Tang, Pharm.D., Lisa Teng, Pharm.D., and Mike Winter, Pharm.D.

The resident participates in providing clinical pharmacy services in the general medical and specialty clinics at SFGH, UCSF and Mt. Zion Med Centers. The specialty areas served include Curry Senior Center, oncology, anticoagulation, diabetes, family health clinic, HIV/AIDS, memory, depression, and epilepsy clinics. Resident responsibilities include primary care, drug therapy consultations, physical assessment, patient education, and triage functions. Supervisory roles include precepting fourth year pharmacy students in their ambulatory care clerkships and shared responsibility for clinical pharmacy services with faculty preceptors. Residents evaluate new drug products and prepare monographs for the SFGH P&T Committee and UCSF Drug Information and Analysis Service.

Available full time for twelve weeks.

SPECIALTY CLINICS

ANTICOAGULATION CLINIC - 201.55

Preceptor: Steven R. Kayser, Pharm.D., Michael Winter, Pharm.D., and Cathi Dennehy, Pharm.D.

The Anticoagulation Clinic is a specialty clinic organized for the purpose of managing oral anticoagulant therapy and standard or low molecular weight heparin therapy. The patient population consists of referrals from the inpatient and outpatient settings at UCSF as well as any patient whose primary care provider is at UCSF. Residents who participate in the Anticoagulation Clinic will serve as members of an interdisciplinary health care team. Patient care responsibilities include reviewing patient charts, interviewing patients, ordering and monitoring proper laboratory values, performing point-of-care (POCT) testing for prothrombin times/INR, altering dosage regimens and providing patient instruction in the use of oral and parenteral antithrombotic medications. In addition, the resident may participate in conferences and act as a preceptor for pharmacy students rotating through the clinic.

Available 4 hours per week for 12 weeks.

EPILEPSY SUBSPECIALTY CLINIC - UCSF - 201.51

Preceptor: Brian Alldredge, Pharm.D.

The Epilepsy Subspecialty Clinic is organized and administered through the UCSF Epilepsy Center. The clinic accepts referrals from UCSF and non-UCSF providers, as well as patient self-referrals for evaluation and/or ongoing care. The clinic cares for a large population of patients with medically-intractable epilepsy who have failed numerous previous epilepsy therapies. Some of these patients are enrolled into company-sponsored compassionate use antiepileptic drug programs, investigational drug studies, or are considered candidates for epilepsy surgery or VNS (vagus nerve stimulation).

Residents participate in the Epilepsy Clinic as members of a multidisciplinary team that includes medical students, neurology residents, epilepsy fellows, attending epileptologists, nurses, and a pharmacy faculty member. The pharmacy resident can either see patients with the pharmacy faculty member or with another member of the team and they will assist in the interviewing of patients, determination and implementation of appropriate drug therapy, and

the laboratory and clinical monitoring of antiepileptic drug therapy. In addition, residents will participate in journal club discussions and clinic patient conference discussions.

Available 4 hours per week.

GERIATRICS/AMBULATORY CARE CENTERS/CURRY SENIOR SERVICES - 201.52

Preceptors: Andrew L. Leeds, Pharm.D. and Richard Zercher M.D.

Located at 333 Turk Street in San Francisco's Tenderloin district, the Curry Senior Services Clinic provides medical and social support services for low income and frail elderly residents of the area. Center programs include:

1. Health services (medical, nursing, podiatry, dental, social work), housecalls, and various health screening and health education programs.
2. Medication refill clinic.
3. Case management (i.e., coordination of medical and social services).
4. Alcoholism treatment and counseling.
5. Nutrition/Recreation (daily hot lunches for those over 60, music and film programs, discussion groups, and other social activities).

The Curry Senior Services Clinic is a multidisciplinary environment where the resident plays an active role in day to day clinic activities. Residents are responsible for the provision of quality pharmaceutical care to a diverse population of patients. This site provides an excellent opportunity for residents to gain valuable experience in interviewing and managing patients with chronic disease (e.g. diabetes, hypertension, CHF, asthma, psychosis). Pharmacy residents assume active roles as members of the multidisciplinary Curry Senior Services clinic team, performing a variety of activities to include: basic physical assessment, assessment of patient adherence, medication refill authorization and in performing home visits. Residents act as drug therapy consultants to clinic nurses and physicians.

Available 4 hours per week for 13 weeks.

PRIMARY CARE CHRONIC ILLNESS PROGRAM - 201.54

Preceptor: Andrew Leeds, Pharm.D. and Lisa Kroon, Pharm.D.

Residents may participate in the multidisciplinary chronic disease management program, as part of a primary care, rather than specialty, setting. The program promotes learning to care both for individual patients and populations of those with chronic illness by using a continuous quality improvement process. The primary focuses are patients with diabetes, hypertension and hyperlipidemia in a primary care, rather than an endocrinology specialty, clinic. Patients with other chronic illnesses may also be cared for. Other participants in the program include pharmacy and nurse practitioner students and medical residents. Interdisciplinary faculty preceptorship is provided by pharmacists, nurse practitioners and physicians.

**Oncology: Ambulatory Care Clinic at Comprehensive Cancer Center - 201.56
(UCSF/Mt Zion Campuses)**

Preceptors: Monica Lee, Pharm.D. and Julie Schwenka

I. ROTATION DESCRIPTION:

An elective offered as part of the Clinical Pharmacy Resident Ambulatory Care rotations. Residents will participate in the daily activities of the Infusion Center and/or the Ob/Gyn ambulatory care oncology clinics. The resident will review, calculate, evaluate, and prepare chemotherapy orders and chemotherapy drug products. The resident will participate in the management of patients with common oncologic disorders in the ambulatory care setting.

HOURS: Half days (8:00 AM to 12:00 N or 1:00 PM to 5:00 PM).

DEPRESSION CLINIC - 201.58

Preceptor : Patrick Finley, Pharm.D.

The *Medication Alliance Clinic (MAC)* is situated within the UCSF Womens Health Center of Excellence. It is designed to provide comprehensive, specialized care for primary care and OB/GYN patients suffering from mood disorders. The role of the pharmacists in this clinic is to assess psychopathology, design and prescribe a reasonable treatment regimen, and provide thorough follow-up through a combination of clinic visits and telephone contacts. In addition, pharmacists work closely with psychiatric mentors to ensure that appropriate levels of care are delivered.

POSITIVE HEALTH PROGRAM (HIV/PRIMARY CARE)

Preceptor: Ian R. McNicholl, Pharm.D., BCPS (I.D.)
Clinical Pharmacy Specialist, Positive Health Program/Department of Medicine
Assistant Clinical Professor, UC San Francisco, School of Pharmacy

Rotation Description:

The Positive Health Program (PHP) is a collaborative effort of the San Francisco Department of Public Health and the UCSF Department of Medicine at San Francisco General Hospital (SFGH). One of the oldest and largest HIV/AIDS clinics in the United States, the PHP cares for over 3200 HIV infected patients by providing comprehensive, integrated primary care along with access to specialty care providers.

Residents participate as members of a multidisciplinary team and will either see patients with the Clinical Pharmacy Specialist or independently. Residents will select patients, interview patients, determine/recommend appropriate drug therapy, order appropriate laboratory tests needed for the clinical monitoring of the medication regimen, reinforce medication adherence and schedule the appropriate follow-up. Residents will participate in journal club discussions, disease state reviews and clinic patient conference discussions.

Hours: 4 hours per week, clinic day may be selected by resident with prior arrangement and discussion with preceptor

OTHER ACTIVITIES

CODE BLUE - 201.72

Preceptors: Fanny Li, Pharm.D. and Sarah Scarpace, Pharm.D.

Residents share responsibility with staff and faculty for code blue coverage after receiving Advanced Cardiac Life Support (ACLS) and internal pharmacy training and certification. This activity involves carrying the code blue pager and medication bag and responding to code blue emergencies. Residents help provide code blue coverage seven days a week on a rotating basis. Specific responsibilities and activities are outlined in the Code Blue Manual.

TEACHING - 201.74

Residents gain teaching experience through active participation in all aspects of the clinical teaching program of the School of Pharmacy. This participation allows the opportunity to gain experience in lecture situations, leading conference groups, developing test materials and evaluating student performance. Residents also receive formal training in teaching and evaluation techniques. A teaching certificate is awarded upon completion of the residency program.

Residents serve as mentors for students participating in clinical clerkships in both the ambulatory and acute care settings. In addition, during one of the academic quarters, each resident will be a small (approximately 12 students) group conference leader for a weekly conference in the Therapeutics Series. As well as leading the conference, responsibilities include preparation of quizzes, case histories, examination questions and attendance at weekly pre-conferences for leaders. All residents will participate in oral final examinations of students at the end of Fall, Winter, and Spring Quarters. Additional information is available in the Residency Manual.

SEMINARS IN CLINICAL PHARMACOKINETICS - 201.75

Pharmacy 168

All residents will participate in a course in pharmacokinetics. The objective of this seminar series is to develop practical skills in therapeutic drug monitoring through the application of pharmacokinetic principles. The course is taught by Dr. Michael Winter and faculty. The course format is one of case history problem solving and group discussion regarding the application of pharmacokinetic principles to clinical cases and situations.

RESIDENCY PROJECTS - 201.73

All residents will participate in completing a project. The objective is to provide residents with the experience of developing, implementing, and presenting a project. The resident will meet regularly with the preceptor to develop the project, including: methodology and design, ensuring compliance with the established time lines, ensuring that the project is reasonable and can be completed given the time available, preparing an abstract for the Western States Residents Conference, and preparing a final project write-up. The completed project will be presented at the Western States Residents Conference and at a campus poster session sponsored annually by the Department of Clinical Pharmacy. Additional information is available in the Residency Manual.

QUALITY IMPROVEMENT (QI) PROJECTS

All residents will complete a QI/Medication Use project as part of the drug policy learning experience. The objective is to provide residents with the opportunity to better understand the QI/ Medication Use process and its impact on quality and safety of patient care at the Medical Center.

rotdes94.doc/93res5/93res2/jagares