

PGY1 Pharmacy Residency



Providence Alaska Medical Center

Match Number: 135413

Anchorage, Alaska

Program Description and Requirements



Ballard K Saul, Pharm.D. , BCPS

Clinical Pharmacist – Family Medicine

PGY1 Residency Program Director

Providence Alaska Medical Center

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Pharmaceutical Care Services

Providence Alaska Medical Center (PAMC) in Anchorage consists of 401 acute care beds and is part of the integrated Providence health system across seven states. The Alaska region includes Providence Kodiak, Valdez, and Seward Medical Centers; Providence Extended Care and Transitional Care Centers; Family Practice, General Medical and Senior Clinics; assisted living and drug abuse rehabilitation facilities and Outpatient Infusion Center. The health system supports a Family Practice Physician Residency program and provides training sites for the University of Alaska at Anchorage Nursing and UAA/Idaho State University pharmacy programs. Major service lines include Medicine/Surgery, Oncology, Emergency, Neurology, Cardiovascular, Critical Care, Behavioral Health, and the Children's Hospital. Pharmacy services are supported by an electronic medical record with provider order entry and bedside barcoding. Formulary, clinical and operational systems and services are integrated with the other Providence ministries.

PAMC Pharmaceutical Care Services Department

The Pharmaceutical Care Services Department employs over 70 FTEs of pharmacists, technicians and support personnel with 24 hour per day services including:

- Centralized unit dose distribution, order verification and IV Admixture service
- Decentralized Clinical Services including an Antimicrobial Stewardship Program
- ICU Satellite pharmacy and order verification
- Emergency Department
- Outpatient IV Infusion and Cancer Therapy Center

The department is committed to providing and expanding the pharmacy's role in the delivery of quality pharmaceutical care. This includes:

Routine Focused Medication Use Review – Routine order screening and medication use trouble shooting, patient profile review, dosing and monitoring of aminoglycosides, warfarin, digoxin, anticonvulsants, pain medications, parenteral nutrition, drugs in renal impairment, and other target drugs; antibiotic use review, adverse drug reaction monitoring, therapeutic exchange program, medication reconciliation, transition of care services. All vancomycin dosing is done by pharmacists

Interdisciplinary Rounds – Family Practice, Hospitalist, Critical Care, Coronary Care, Pediatrics, Pediatric Intensive Care, Neonatal Intensive Care, Oncology, Tumor Board

Patient Education – Warfarin, Chemotherapy, Cardiac and Pulmonary Rehabilitation, Consults

Medication Use Quality Improvement Activities – Medication Use Guidelines and Policy Development, Drug Use Evaluation and Benchmarking, Newsletters, Core Measure and National Patient Safety Goal Initiatives, Providence Quality Initiatives

Drug Formulary Management – Providence Pharmacy and Therapeutics Committee class reviews and monograph development

Code Attendance – Cardiac, Stroke and Sepsis Alerts

Investigational Drug Program in Oncology

Staff Education – Staff Meetings, Weekly Clinical Meetings, Competency Program

Teaching – Pharmacists, Pharmacy Interns, Medical Residents, Medical Staff, Nurses, Public and Pharmacy Association Presentations

Residency Program Mission

The PGY1 Pharmacy Residency Program builds on the Doctor of Pharmacy (Pharm.D.) education and outcomes to contribute to the development of clinical pharmacists responsible for medication related care of patients with a wide range of conditions, eligible for board certification, and eligible for post graduate year two (PGY2) pharmacy residency training.

Program Goals and Objectives

The Providence Alaska Medical Center Residency Goals are as follows:

- Serve as an authoritative resource on the optimal use of medications used to treat a wide variety of medical conditions.
- Optimize outcomes by providing evidence-based, patient-centered medication therapy as an integral part of an interdisciplinary team.
- Demonstrate competency in medication order review and central pharmacy operations.
- Supervise and coordinate pharmacy technical staff.
- Work independently in various pharmacy service areas.
- Contribute to improvement of medication use, medication use systems and pharmacy services.
- Demonstrate excellence in the training and education of health care professionals.
- Sustain ongoing personal development of expertise and professionalism in pharmacy practice.

The resident will demonstrate competencies in four core areas:

- Patient Care
- Advancing Practice and Improving Patient Care
- Leadership and Management
- Teaching, Education and Dissemination of Knowledge

Resident Evaluation

Two-way verbal exchange regarding progress will occur regularly, at minimum weekly, during rotations. Formative evaluation will occur during experiences and summative at the end of each block learning experience or quarterly for longitudinal experiences. Residents will self-evaluate periodically throughout the residency. Residents will evaluate preceptors and learning experiences formally at the end of each learning experience.

Compensation/Benefits

PGY1: \$52,050 per year

Benefits will begin on the first day of employment and include:

- Medical
- Dental
- Vision
- Long Term Disability
- Company-Paid Basic Life Insurance
- Supplemental Life Insurance for employee, spouse, and/or children
- Supplemental Accidental Death & dismemberment
- Dependent Life and Accidental Death & Dismemberment Insurance for spouse and/or children
- Healthcare Reimbursement
- Dependent Care FSA (for work-related child- or elder-care expenses
- 403B retirement Program
- Meeting support for ASHP Midyear and Northwestern States Residency Conference

Residents have 10 work-days of vacation time, 11 professional leave days, and 8 sick days available to them. Residents work 1 major holiday and 2 minor holidays with others off.

Learning Experience Descriptions

Orientation (REQUIRED)

Preceptors: Ballard K Saul, Pharm.D., BCPS

Residents are introduced to and perform a variety of activities within the PAMC Inpatient Pharmacy and Medical Center. General orientation occurs over the first four weeks of the residency and consists of all aspects of new Pharmacist orientation. Three additional weeks are spent in the Central Pharmacy and critical care satellite learning medication safety, order verification, medication dispensing and checking operations technology, communication systems and processes. Weekend clinical orientation includes several weekends training on Medicine/Surgery and PCU services. Decentralized Clinical preceptors vary depending on service area.

Internal Medicine/Surgery (REQUIRED)

Preceptors: Mariah Cadavos, Pharm.D., BCPS

The resident rounds with the Hospitalists and serves general surgery patients on the hospitalist service.

Family Practice (REQUIRED)

Preceptors: Ballard Saul, Pharm.D., BCPS, Amy Paul, Pharm.D., BCACP

The resident rounds with the Family Practice Medical Resident Team and provides pharmaceutical care to these patients.

Progressive Care (REQUIRED)

Preceptors: Leah Twohy, Pharm.D.

An experience on the Progressive Care Unit with cardiovascular, intermediate care, nephrology, and neurology components.

Critical Care (REQUIRED and ELECTIVE)

Preceptors: Corrie Black, Pharm.D., BCPS, Stuart Burke, Pharm.D., BCCCP

Critical Care is an experience with pharmacists covering the Adult Intensive Care Units. Rounding occurs daily with the Intensivists. The resident will respond to Codes during the rotation. Completion of ACLS is a prerequisite.

Pediatrics (REQUIRED)

Preceptors: Nicole Phillips, Pharm.D., BCPPS, Carrie Stanfield, Pharm.D.

Pediatrics is an experience in the General Pediatric and Pediatric Intensive Care units serving patients from one week of age through adolescence. Residents round with the Intensivist and Pediatric Practice Teams.

Infectious Disease (REQUIRED and ELECTIVE)

Preceptor: Shawna King, Pharm.D., BCPS, Ben Westley, M.D.

The resident rounds with the antimicrobial stewardship pharmacist and an infectious disease physician. Review of drug therapy, recommendations to physicians, and pharmacokinetic and drug information consultations are components.

Emergency Department (REQUIRED and ELECTIVE)

Preceptors: Carlo Balmes, Pharm.D., BCPS,

The resident provides pharmaceutical care to selected patients admitted to the Emergency Department and those awaiting hospital admission. The resident also works with medication history technicians in transition of care activities and attends codes and traumas in the emergency room.

Ambulatory Care (REQUIRED and ELECTIVE)

Preceptors: Amy Paul, Pharm.D., BCACP, Emily Thomas, Pharm.D., BCPS

During this rotation the resident works with pharmacists who are license providers at Providence Medical Group Alaska and Providence Family Medicine Clinic. Resident will practice in the Patient Centered Medical Home Model and manage a variety of chronic disease states in the ambulatory care setting.

Operational and Clinical Staffing (REQUIRED, Longitudinal)

Central Pharmacy Preceptors: Brian Haviland, Pharm.D.

The longitudinal learning experience encompasses Central and Decentralized Clinical Pharmacy services. The resident is scheduled in the Central Pharmacy for four weeks of training at the beginning of the residency year.

Approximately every other weekend the resident provides services independently rotating in the following areas: Central Pharmacy, Medicine/Surgery or Progressive Care Unit.

Teaching Certificate (REQUIRED, Longitudinal)

The University of Connecticut School of Pharmacy ACPE-accredited Teaching and Learning modules are used for the teaching certification. In the comprehensive 23 CPE credit activity (additional 3.5 hours optional) residents will learn the concepts of teaching and learning as it relates to classroom, discussion group, and experiential learning. A Practice-based Certificate of Achievement will be awarded to those who complete all 4 modules.

Pharmacy Practice Management, Teaching, and Leadership (REQUIRED, Longitudinal)

Preceptors: Ballard K. Saul, Pharm.D., BCPS

During this longitudinal experience objectives will be completed through weekly staff and clinical meetings, assignment of resident projects, participation in interdisciplinary activities, P&T committee meetings, group discussions and teaching activities including didactic lectures and precepting.

Residency Project (REQUIRED, Longitudinal)

The residents work with a preceptor to identify a project, develop and submit a protocol to the IRB, collect and analyze data, develop and present a poster, develop and present a platform presentation, and draft a manuscript.

Informatics and Technology (ELECTIVE)

Preceptor: James Fischer, Pharm.D.

An elective rotation with an informatics pharmacist working on projects related to the electronic medical record and technology implementation and optimization.

Oncology (ELECTIVE)

Preceptors: Katie Kammers, Pharm.D., BCPS, BCOP, Tarah Hibbs, Pharm.D., BCOP

An elective rotation during which the resident is responsible for providing comprehensive pharmacy services to oncology patients, both adult and pediatric.

Neonatology (ELECTIVE)

Preceptors: Nicole Phillips, Pharm.D., BCPPS, Carrie Stanfield, Pharm.D.

Neonatology is an elective in the Neonatal Intensive Care Unit. Interdisciplinary rounds are attended daily. Pharmacists manage neonatal abstinence syndrome and antibiotic therapy among the pharmaceutical care services provided.

Pharmacy Operational and Clinical Management (ELECTIVE)

Preceptors: Karen Thompson, Pharm.D., BCSCP

A four-week elective experience working with the clinical manager and/or the operations Manager and the Medication Safety Officer/IV Additive Service Supervisor participating in clinical or operational management activities.

Staffing Responsibilities

In order for the resident to adequately gain the understanding and confidence necessary to provide pharmaceutical care, it is necessary that the resident spend some time staffing. This consists of approximately every other weekend in clinical or operational areas and independently managing each service at the end of required learning experiences. A resident should be competent to staff independently in clinical areas by October 1 and in Central Pharmacy by October 31.

FAQS

What is special about your program?

Providence Alaska Medical Center (PAMC) is the largest (401 beds), most advanced medical facility in the state serving patients statewide. It has Level II Trauma and Primary Stroke Center Certifications, extensive oncology services and the only dedicated Children's Hospital and Level III Neonatal Intensive Care Unit in Alaska. These result in a diverse patient population and an opportunity to help provide care to patients presenting with a wide array of medical conditions, including cardiac surgery.

PAMC is a not-for-profit community hospital supporting a Family Practice Medical Residency program. As a PGY1 pharmacy resident, you will round with the inpatient medical resident team, making medication recommendations and adjusting therapy.

Attending physicians and residents look forward to the time of year the pharmacy residents rotate with them. You also round with an interdisciplinary team on medicine, pediatrics, infectious disease, adult critical care, coronary care and in NICU, if it is chosen as an elective. PAMC also supports the University of Alaska/Idaho State University (UAA/IDSU) School of Pharmacy by offering student rotations. Our electronic medical record and physician order entry make our clinical work very efficient. We have all patient information at our fingertips whether in patient care areas or in the central pharmacy.

What are the strengths of your program?

Our biggest strength is the people we work with. The pharmacy department is highly respected and appreciated by other disciplines, including nurses and physicians. Clinical pharmacists have dedicated time and workspace on inpatient units and are integrated in patient care activities. Preceptors are excellent clinicians and have a passion for teaching.

The residency director and preceptors have a high level of commitment to the residents. Pharmacy residents spend most of their rotations with well-established clinical pharmacists who have close working relationships with the medical staff and a wealth of experience to share. Residents leave the program with the skills to become excellent practitioners. We have traditionally hired many of our residents after completion of the program.

What are the licensure requirements?

An Alaska intern license is required by the first day of orientation. The resident must become licensed as a pharmacist in the state of Alaska by August 31.

How customizable is your program?

Each resident must complete orientation and the following required 4-week learning experiences:

Pediatrics, Medicine/Surgery, Family Practice, Adult Critical Care, Ambulatory Care, Progressive Care, Infectious Disease, Emergency Department, and Clinical Staff Training. Residents also have longitudinal experiences including Pharmacy Practice Management, Teaching, and Leadership and Residency Project.

Two elective rotations are chosen by the resident from the following: Neonatal Intensive Care, Oncology, Clinical or Operational Management, Critical Care, Ambulatory Care, Infectious Diseases, Emergency Department, and Pharmacy Informatics and Technology.

The resident has some flexibility as to when a final decision is made on their electives. We know that as you experience the different areas of clinical pharmacy, your interests may change along the way. Our program is designed to give you a good foundation in major areas of clinical pharmacy and the resources for you to explore your interests.

If you are interested in doing a PGY2 specialty residency, we attempt to schedule a related rotation prior to the ASHP Midyear Clinical Meeting, if possible. The annual resident project may be done in that area of interest if there is an organizational need. The PGY2 Oncology Residency Program accepts early commitment applications (deadline November 1) and decisions are made by November 7.

What is a typical day like during your residency?

Residents act as decentralized clinical pharmacists on most days. They are responsible for complete patient profile reviews, managing consults, transition of care services and managing clinical issues that arise. Most rotations also have interdisciplinary rounds attended by pharmacy. Residents meet with their preceptor on a daily basis to discuss patients and pertinent drug or disease state topics. Time during the week is also spent educating patients and students, attending departmental and interdisciplinary meetings, completing journal clubs, case presentations, departmental projects and a residency project.

Are there opportunities to teach and precept students?

Our department hosts many pharmacy students on learning experiences and high school students interested in the profession. Residents are expected to assist with precepting students while on rotation together.

There are also opportunities throughout the year to provide education to pharmacy, nursing, medical and other hospital staff. The University of Alaska Anchorage campus located adjacent to the hospital has a large nursing program, and a Pharmacy School jointly with Idaho State University, offering the potential for teaching. There are opportunities to give didactic lectures to larger audiences in addition to educating small groups. An ACPE-accredited presentation at the Alaska Pharmacists Association Annual Meeting is required. Residents also teach pharmacist staff through case presentations and journal clubs, and teach patients in the outpatient Pulmonary and Cardiac Rehab classes.

What are you looking for in a resident?

The resident should expect a very demanding program with multiple simultaneous responsibilities. We seek candidates with a burning desire for learning, a willingness to put in many hours outside a normal work week and good stress/time management skills. An ability to communicate openly with maturity and emotional intelligence is very important.

We seek candidates who demonstrate an interest in improving the plight of the patient by promoting the profession, the role of pharmacy, and effectiveness of our services to that end. Previous involvement in clinical projects and extracurricular activities demonstrate that desire.

Our residents are expected to become competent in the central pharmacy and clinical areas quickly, so an excellent clinical foundation (some acute care rotations completed) and previous work in a hospital pharmacy are advantageous. A Pharmacy School GPA cut-off of 3.0 is used in our initial screening of applicants.

During the presentation done at the interview we look for the applicant's ability to create good visual aids and to present clinical information articulately, including analysis of pertinent literature.

And finally, we are looking for residents who will work in partnership with our staff, find humor in their day and love what they are doing.

About Alaska

The scenic beauty of Alaska is second to none. Incredible mountain views and frequent wildlife sightings are just a few of the perks of living in Anchorage.

There are numerous opportunities for outdoor enthusiasts in or within a short drive of the nation's northernmost major city.

The most popular activities include hiking, fishing, camping, skiing and biking. There are over two hundred miles of trails in the City of Anchorage to bike or ski.

Anchorage has ample cultural events, a symphony, theater productions, multiple museums and art galleries.

There are a wide variety of excellent locally owned restaurants and farmers' markets during summer months. Many of our staff members are good friends and spend time together outside of work. Activities often include hiking, skiing, pub trivia, going to the movies, having dinner, brewing beer, fishing and hunting, walking pets, going to the theater or symphony, working out and traveling together.

Many of the staff members are not originally from Alaska, so they often spend holiday celebrations together too.

Application Requirements

To be eligible for a Providence Alaska Medical Center Pharmacy Residency, applicants must submit the following via PhORCAS:

- A letter stating why you are interested in doing a residency at Providence Alaska Medical Center
- Curriculum Vitae
- Transcript (pharmacy)
- Three references via the Standardized Reference Form Available in PhORCAS. If you have worked in a hospital and/or or community pharmacy, please include a minimum of one reference from each supervisor at those institutions. Also include at least one reference from an acute care clinical rotation preceptor.

Application deadline: December 28

We participate in the **ASHP matching program**. The ASHP website has information regarding the process (www.ashp.com). Our Residency Matching Program Code number is: **135413**

If you are invited for an interview, a brief presentation (20 minutes plus 10 minutes of Q&A) on a subject of your choice is required during your interview.

Contact Information

Please feel free to contact us if you have any questions about our program. Thank you for your interest and we look forward to hearing from you.

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