

PGY2 Ambulatory Care Pharmacy Residency – Aurora Health Care Metro, Inc.

Program Structure

Residents completing the PGY2 Ambulatory Care Pharmacy – Aurora Health Care Metro, Inc residency program are based at Aurora St. Luke’s Medical Center (ASLMC), located in Milwaukee, WI.

Required (CORE) Learning Experiences		
Required Learning Experience	Typical Duration	Comments/Location
Orientation & Training	6 weeks	The resident completes Orientation & Training at ASLMC, and ASLMC Outpatient Pharmacy for 8 hours/day during the first 6 weeks of residency.
Abdominal Transplant Clinic	12 weeks (4 hours/week)	Abdominal Transplant Clinic Learning Experience occurs concurrently with other scheduled Learning Experiences throughout the residency year. Resident will spend 4 hours per week during a 12-week-quarter in the ASLMC Abdominal Transplant Clinic
Advanced Heart Failure Clinic	6 weeks (40 hours/week)	Advanced Heart Failure Clinic Learning Experience is a concentrated six week rotation. Resident will spend 8 hours per day for six weeks in the ASLMC Advanced Heart Failure Clinic (<i>excused for Outpatient Pharmacy Staffing shift every 3rd Friday</i>)
Anticoagulation Clinic	7 weeks (8 hours/week)	Anticoagulation Clinic Learning Experience occurs concurrently with other scheduled Learning Experiences throughout the residency year. Resident will spend 8 hours per week during a 7-week duration in the ASLMC Pharmacist-managed Anticoagulation Clinic.
Chronic Disease Management Clinic	41 weeks (8 hours/week)	Chronic Disease Management Clinic Learning Experience is longitudinal and occurs concurrently with other scheduled Learning Experiences throughout the residency year. Resident will spend 8 hours per week for 41 weeks throughout the residency year in the ASLMC Chronic Disease Management Clinic (<i>excused during Orientation/Training and six-week Advanced Heart Failure Clinic rotation</i>)

Endocrine Clinic	12 weeks (8 hours/week)	Endocrine Clinic Learning Experience occurs concurrently with other scheduled Learning Experiences throughout the residency year. Resident will spend 8 hours per week during a 12-week quarter in the ASLMC Endocrine Clinic Suite 260.
Malignant Hematology & Stem Cell Transplant Clinic	10 weeks (8 hours/week)	Malignant Hematology/Stem Cell Transplant Clinic Learning Experience occurs concurrently with other scheduled Learning Experiences throughout the residency year. Resident will spend 8 hours per week during a 10-week quarter in the ASLMC Vince Lombardi Cancer Clinic
Pulmonary Clinic	12 weeks (8 hours/week)	Pulmonary Clinic Learning Experience occurs concurrently with other scheduled Learning Experiences throughout the residency year. Resident will spend 8 hours per week during a 12-week quarter in the ASLMC Pulmonary Clinic.
Virtual Population Health	22 weeks (8 hours/week)	Virtual Population Health Learning Experience is longitudinal and occurs concurrently with other scheduled Learning Experiences throughout the residency year. Resident will spend two-4 hour half days per week for 22 weeks performing virtual population health responsibilities while based in an office space at ASLMC.
Transitions of Care	41 weeks (8 hours/week)	Transitions of Care Learning Experience is longitudinal and occurs concurrently with other scheduled Learning Experiences throughout the residency year. Resident will spend 8 hours per week for 41 weeks throughout the residency year alternating between inpatient pharmacy and outpatient pharmacy-related transitions of care tasks (<i>excused during Orientation & Training and concentrated Advanced Heart Failure Clinic rotation</i>) at ASLMC.

Continuing Education Presentation	12 weeks (2 hours/week)	<p>The Continuing Education Presentation is a learning experience that occurs concurrently with other Learning Experiences over a 12-week period. During this time, the resident will spend 2 hours/week to prepare and present a 1-hour CE presentation.</p> <p>The timeframe for the Continuing Education Presentation is staggered among all residents, and each resident's specific presentation date is determined during Orientation & Training.</p> <p>The Continuing Education Presentation will be presented at ASLMC through in-person and virtual presentation platforms.</p>
Medication Safety	46 weeks (2 hours/week)	<p>Medication Safety Learning Experience is longitudinal and occurs concurrently with other scheduled Learning Experiences throughout the residency year, following completion of Orientation & Training.</p> <p>Residents typically spend 2 hours per week on ambulatory care focused Medication Safety learning experience activities at ASLMC.</p>
Outpatient Pharmacy Staffing	46 weeks	<p>The Outpatient Pharmacy Staffing Learning Experience is longitudinal and occurs concurrently with other scheduled Learning Experiences throughout the residency year.</p> <p>Following completion of Orientation & Training, the resident will staff the equivalent of one 8-hour staffing shift per week over the entire residency year.</p> <p>When the resident is able to staff independently on weekends, the resident will transition to staff three 8-hour shifts every 3rd weekend to achieve the equivalent of one 8-hour staffing shift per week. The resident will also be assigned to staff two 8-hour holiday shifts throughout the residency year.</p> <p>When the resident is staffing weekends, they will typically staff three 8-hour shifts on Friday, Saturday and Sunday in the ASLMC Outpatient Pharmacy.</p>

Practice Management	46 weeks (3 hours/week)	<p>Practice Management Learning Experience is longitudinal and occurs concurrently with other scheduled Learning Experiences throughout the residency year, following completion of Orientation & Training.</p> <p>Residents typically spend 3 hours per week on ambulatory care focused Practice Management learning experience activities at ASLMC.</p>
Year Long Project	46 weeks (2 hours/week)	<p>Year Long Project Learning Experience is longitudinal and occurs concurrently with other scheduled Learning Experiences throughout the residency year, following completion of Orientation & Training.</p> <p>Residents typically spend 2 hours per week on Year Long Project learning experience activities at ASLMC.</p>

* Additional elective learning experiences may be developed based on resident interest and preceptor availability.

Example Resident Schedule

Quarter	Week	Learning Experience									
1	1-6 (6 wks) June-July	Orientation/Training									
	7-13 (7 wks) Aug - Sept	Medication Safety (Ave. 2 hours/week)	Practice Management (Ave. 3 hours/week)	Year-long project (Ave. 2 hours/week)	Transitions of Care (8 hours/week)	CDM Clinic (8 hours/week)	Anticoagulation Clinic (8 hours/week)				
	14-18 (5 weeks) Sept-Oct						Advanced Heart Failure Clinic (8 hours/day)				
	19-28 (10 weeks) Oct-Dec				Transitions of Care (8 hours/week)	Chronic Disease Management Clinic (8 hours/week)			Mal. Heme & Stem Cell Transplant Clinic (8 hours/week)	Virtual Population Health (8 hours/week)	
29-40 (12 weeks) Jan - Mar						Pulmonary Clinic (8 hours/week)					
41-52 (12 weeks) April - June					Endocrine Clinic (8 hr/week)	Abdominal Transplant Clinic (4 hr/week)	CE Presentation (2 hours/week)				
<p>Outpatient Pharmacy Staffing</p> <ul style="list-style-type: none"> • Every 3rd weekend: Fri, Sat, Sun (3 x 8 hr shifts) • 2 holidays (8 hr shift each) 											

**NOTE: Information above may be adjusted as needed

CDM: Chronic Disease Management

PGY1 Pharmacy Residency – Aurora Health Care Metro, Inc.

Program Completion Requirements

The Resident must complete all Completion Requirements to be eligible to receive a program completion certificate. Requirements in green are required in all WI-based Advocate Health Pharmacy Residency programs. Requirements in blue are specific to the program.

Completion Requirement	Required Learning Experience- the requirement is typically addressed (Associated Objective, if applicable)	Location of Documentation	Q1 Status Not started; planned for (month) In progress; anticipate completion (month) Completed (date)	Q2 Status Not started; planned for (month) In progress; anticipate completion (month) Completed (date)	Q3 Status Not started; planned for (month) In progress; anticipate completion (month) Completed (date)	End of Residency Completed (date) *if not completed, resident is not eligible for completion certificate
WI Pharmacist Licensure as per residency program policy	N/A	Workday and residency's portfolio				
PGY1 Certificate as per residency program policy	N/A	Resident's Portfolio and Resident Files in PharmAcademic™				
Completed Training Manual & Competencies	Orientation/Training	Returned to site manager/director				
Leadership Development Series: attendance and active participation	N/A	N/A				
Citywide Residency Conference: attendance and active participation	N/A	N/A				
Residency Leadership Position – fulfill role as described in the residency manual	N/A	N/A				
Development Plan: Initial + Quarterly Updates	N/A	Resident's Portfolio and Resident Files in PharmAcademic™				
PharmAcademic™ Tasks Completed	N/A	Resident's Portfolio and Resident Files in PharmAcademic™				

<p>ASHP-required educational objectives:</p> <ul style="list-style-type: none"> At least 66% (19 of 28) of ASHP-required objectives evaluated as “Achieved for Residency” (ACHR) <p>And</p> <ul style="list-style-type: none"> No objectives evaluated as Needs Improvement (NI) by the final time the objective is evaluated 	NA	PharmAcademic™				Final % ACHR:
<p>Required learning experiences</p> <ul style="list-style-type: none"> See each LED for required activities, projects, writing experiences, presentations, etc. Work products saved to resident portfolio Formative feedback saved to resident portfolio 	N/A	Resident’s Portfolio				
PGY2 Ambulatory Care Appendix requirements (see ASHP CAGOs document)	N/A	Resident’s Portfolio (See Appendix – PGY2 Ambulatory Care Conditions & Diseases Tracker)	<i>x/15 Completed</i>	<i>x/15 Completed</i>	<i>x/15 Completed</i>	<i>x/15 Completed</i>
<p>Complete Staffing Shifts:</p> <ul style="list-style-type: none"> 50 x 8-hour staffing shifts 2 x 8-hour holiday staffing shifts Staffing evaluation and self-evaluation forms saved to resident’s portfolio 	Outpatient Pharmacy Staffing	Resident’s Portfolio (Staffing tab within Residency Requirements Spreadsheet)				
PGY2 Ambulatory Care – Required Resident Work Products/Deliverables						
<ul style="list-style-type: none"> Five samples of de-identified patient health care records of notes discussing interventions, patient/caregiver education, and communication with multidisciplinary team. 	Abdominal Transplant Clinic (R1.1.5, R1.1.7)	Resident’s Portfolio				

<ul style="list-style-type: none"> Five samples of de-identified notes from patient health care records that discuss evidence-based care plans, interventions, any relevant monitoring plans, patient/caregiver education, and communication with multidisciplinary team. 	Advanced Heart Failure Clinic (R1.1.5, R1.1.7)	Resident's Portfolio				
<ul style="list-style-type: none"> Five samples of de-identified Anticoagulation Clinic notes or encounters from the patient health care record. 	Anticoagulation Clinic (R1.1.5, R1.1.7)	Resident's Portfolio				
<ul style="list-style-type: none"> Five samples per quarter of de-identified clinical notes for completed Comprehensive Medication Reviews and Assessments (CMR/A) and Disease State Management (DSM) visits 	Chronic Disease Management Clinic (R1.1.5, R1.1.7)	Resident's Portfolio				
<ul style="list-style-type: none"> Five samples of de-identified patient healthcare records for Comprehensive Medication Reviews (CMRs) and Disease State Management (DSM) visits 	Endocrine Clinic (R1.1.5, R1.1.7)	Resident's Portfolio				
<ul style="list-style-type: none"> One sample of de-identified patient healthcare record for pre-transplant drug interaction evaluation and recommended management plan with upcoming chemotherapy Five samples of de-identified patient healthcare records for evidence of analyzing, collaborating and communicating of calcineurin inhibitor plan with care team, including documentation of communication and education to patient/family member/caregivers 	Malignant Hematology & Stem Cell Transplant Clinic (R1.1.5, R1.1.7)	Resident's Portfolio				

<ul style="list-style-type: none"> Five samples of de-identified patient healthcare records for pulmonary pharmacy service (e.g. CMRs, pulmonary therapy monitoring, disease state management) encounters 	Pulmonary Clinic (R1.1.5, R 1.1.7)	Resident's Portfolio				
<ul style="list-style-type: none"> Five samples of de-identified patient healthcare records for disease management protocol (dose optimization or general medication management) encounters 	Virtual Population Health (R1.1.5, R1.1.7)	Resident's Portfolio				
<ul style="list-style-type: none"> At least 5 samples of de-identified patient healthcare records for outpatient pharmacy service telephone encounters (e.g. compliance packaging, comprehensive medication review (CMR), BP check, ADR, cost savings, device education, drug-drug interaction, immunization recommendation) 	Outpatient Pharmacy Staffing (R1.1.7)	Resident's Portfolio				
<ul style="list-style-type: none"> 15 samples of de-identified progress notes per residency year for follow-up telephone calls addressing barriers to medication adherence, and follow-up action 15 samples of de-identified provider communication notes per residency year provided to patient's primary care provider or clinic regarding discharge medication changes 	Transitions of Care (R1.1.7)	Resident's Portfolio				

<ul style="list-style-type: none"> Three samples of de-identified patient healthcare records with medication adherence barriers identified and resolved (from adherence encounters or other disease management) 	Virtual Population Health (R1.2.1)	Resident's Portfolio				
<ul style="list-style-type: none"> Presentation of proposed discharge workflow changes and creation of associated documents 	Transitions of Care (R2.1.1)	Resident's Portfolio & Resident Files in PharmAcademic™				
<ul style="list-style-type: none"> One new ambulatory clinic medication safety workflow for an ambulatory clinic learning experience throughout the residency year 	Medication Safety (R2.1.1)	Resident's Portfolio & Resident Files in PharmAcademic™				
<ul style="list-style-type: none"> Examples of resident participation in the preparation or revision of a protocol. (<i>revised workflow or new CPA</i>) 	Practice Management (R2.1.1)	Resident's Portfolio & Resident Files in PharmAcademic™				
<ul style="list-style-type: none"> One new best practice to improve patient medication safety in the clinic setting 	Medication Safety (R2.1.2)	Resident's Portfolio & Resident Files in PharmAcademic™				
<ul style="list-style-type: none"> Examples of resident participation in the development of a new ambulatory care pharmacy service or to the enhancement of an existing service. 	Practice Management (R 2.1.2)	Resident's Portfolio & Resident Files in PharmAcademic™				

<ul style="list-style-type: none"> Year-long project tracker Year-long project WPRC abstract Year-long project WPRC poster Year-long project WPRC slides WPRC presentation evaluation form Year-long project final manuscript Any additional deliverables & data collection tools 	Year-Long Project (R.2.2.6)	Resident's Portfolio & Resident Files in PharmAcademic™				
<ul style="list-style-type: none"> Continuing Education Presentation Slides/Handouts 	Continuing Education Activity (R4.1.2)	Resident's Portfolio & Resident Files in PharmAcademic™				
<ul style="list-style-type: none"> Two Clinical Corner articles in the Aurora Pharmacy Tablet 	Practice Management (R4.1.3)	Resident's Portfolio & Resident Files in PharmAcademic™				
<ul style="list-style-type: none"> Continuing Education Presentation audience, self, and preceptor evaluation forms 	Continuing Education Activity (R4.1.4)	Resident's Portfolio & Resident Files in PharmAcademic™				

Acknowledgements				
	Q1	Q2	Q3	End of residency
Resident	Signature:	Signature:	Signature:	Signature:
	Date:	Date:	Date:	Date:
RPD	Signature:	Signature	Signature	Signature
	Date:	Date:	Date:	Date:

Appendix – PGY2 Ambulatory Care Conditions & Diseases

The resident will explain signs and symptoms, epidemiology, risk factors, pathogenesis, natural history of disease, pathophysiology, clinical course, etiology, and treatment of diseases and conditions in areas listed below. The resident will also have experience managing patients in these areas.

The resident will explain the mechanism of action, pharmacokinetics, pharmacodynamics, pharmacogenomics, pharmacoeconomics, usual regimen (dose, schedule, form, route, and method of administration), indications, contraindications, interactions, adverse reactions, and therapeutics of medications and non-traditional therapies, where relevant, that are applicable to diseases and conditions in the areas listed below.

The resident will explain various forms of non-medication therapy, including life-style modification and the use of devices for disease prevention and treatment, for diseases and conditions in the areas listed below.

From the list of 15 areas below, residents are required to have direct patient care experience in at least eight areas. When direct patient care is not possible, up to two of these eight areas may be covered by case-based application through didactic discussion, reading assignments, case presentations, and/or written assignments.

Topic	When/How Topic was Discussed	Applied to Direct Patient Care (Y/N, date)
CARDIOLOGY		
DERMATOLOGY		
ENDOCRINOLOGY		
GASTROENTEROLOGY		
GERIATRICS		
HEMATOLOGY-ONCOLOGY		
INFECTIOUS DISEASE		

MEN'S HEALTH		
NEPHROLOGY		
NEUROLOGY		
PEDIATRICS		
PSYCHIATRY		
PULMONOLOGY		
RHEUMATOLOGY		
WOMEN'S HEALTH		