

PGY1 Course Description

Learning Experience Title: Longitudinal Staffing

Preceptor:

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Description:

The PGY1 staffing learning experience is a required longitudinal rotation. The resident will be scheduled to staff every fourth Friday in a location assigned based on patient care need. The resident will also staff out of central pharmacy every fourth weekend, usually from 10:30 AM to 7:00 PM. The resident will interact with hospital pharmacists, pharmacy technicians, attending physicians, resident physicians, medical residents and nursing staff. It is the goal of this learning experience that the resident will demonstrate their ability to be a competent and confident practitioner in overall hospital staffing functionality. The pharmacist in this role performs order verification, completes pharmacy consults, reviews the pharmacy worklist, checks medications for accuracy prior to administration to patients, and discusses drug therapy with other healthcare professionals.

Learning Experience Responsibilities:

- Staff as assigned on pharmacist schedule (see resident staffing schedule for dates).
- Verify orders based on Friday staffing assignment location.
- Complete clinical activities as needed for both weekend and Friday staffing assignments.
- Participate in reviewing the worklist and the pharmacy task list.
- Perform all operational duties expected of a pharmacist when staffing (order verification, dose checking, clinical monitoring, pharmacy to dose, phone answering and other duties as determined based on patient care needs.)

Disease States/Conditions:

- The resident can expect to be exposed to all previous disease states covered during the course of their residency.

Learning Experience Activities:

Activity	Objectives Covered
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Gather, organize, and analyze patient care information in order to develop a complete pharmacotherapeutic plan	R.1.1.3
Analyze patient and identify characteristics that may impact care decisions including health and functional status, risk factors, health data, cultural factors, health literacy, access to medications, immunization status, need for preventative care and other services, when appropriate, and other aspects of care, as applicable.	R.1.1.4
Design and compose therapeutic monitoring plans for pharmacy to dose consults (vancomycin, aminoglycosides, etc).	R.1.1.5
Compose drug therapy recommendations and monitoring plans within the healthcare team to achieve specific therapeutic goals	R.1.1.6
Operate in the best interest of patient care.	R.1.1.8
Critiques accuracy of medications dispensed, including correct patient identification, medication, dosage form, label, dose, number of doses, expiration dates, and properly repackaged and relabeled medications, including compounded medications (sterile and nonsterile).	R.1.3.1
Supports appropriate procedures regarding exceptions to the formulary, if applicable, in compliance with policy.	R.1.3.2
Concludes that non-formulary medications are dispensed, administered, and monitored in a manner that ensures patient safety.	R.1.3.2
Critiques the accuracy of the work of pharmacy technicians, clerical personnel, pharmacy students, and others according to applicable laws and institutional policies.	R.1.3.3

Objectives selected to be evaluated during learning experience:

- R.1.1.3 “Collect information on which to base safe and effective medication therapy”
- R.1.1.4 “Analyze and assess information on which to base safe and effective medication therapy”
- R.1.1.5 “Design or redesign safe and effective patient-centered therapeutic regimens and monitoring plans (care plans)”
- R.1.1.6 “Ensure implementation of therapeutic regimens and monitoring plans (care plans) by taking appropriate follow-up actions”
- R.1.1.8 “Demonstrate responsibility to patients”
- R.1.3.1 “Prepare and dispense medications following best practices and the organization’s policies and procedures”
- R.1.3.2 “Manage aspects of the medication-use process related to formulary management”
- R.1.3.3 “Manage aspects of the medication-use process related to oversight of dispensing”

Preceptor Interaction:

Preceptor will be available to answer questions and help direct the resident. If the preceptor is not on site, they may be contacted via email, pager, or by phone.

Method of evaluation:

Evaluation of the resident will be based on the ASHP activity learning experiences listed above. Each learning activity has a corresponding code following the experience which corresponds to the activity learning experience listed in PharmAcademic®. During the orientation to the rotation, the preceptor and the resident will review all the material contained in this learning experience description and sign a copy to be retained in the residents file.

The preceptor will solicit verbal and written feedback from staff members that interact with resident during staffing hours. The preceptor will provide feedback verbally (formative) throughout the course of the learning experience and electronically (summative) via PharmAcademic® at the conclusion of the experience. Once the resident is finished with all of the requirements for the experience, the preceptor and the resident will discuss the learning experience as a whole both formally and informally. The resident will also be responsible for providing both formative and summative feedback at the conclusion of the experience. All evaluations must be submitted by the conclusion of the learning experience.

I have read and acknowledged the responsibilities of the learning experience.

Pharmacy Resident

Primary Preceptor