

Staffing Learning Description

Preceptor

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Critical Care Pharmacist

PGY2 Critical Care Residency Program Director

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General Description

The resident will be scheduled to staff one evening every week in the ICU satellite pharmacy until the completion of their Emergency Medicine learning experience, after which the resident will begin staffing out of the Emergency Department to further develop a comfort level caring for critically ill patients. The resident will also staff out of central pharmacy every 6th weekend. The resident will interact with hospital pharmacist, pharmacy technicians/interns, attending physicians, resident physicians, and 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 the area of critical care medicine.

Resident Expectations for the Learning Experience

- Attend and participate all *Code Blue*'s on the floors*
- Attend and participate in all Codes, Medical Resuscitations, and Traumas in the ED*
- Verify all ICU patient orders*
- Verify when not participating in any of the above activities
- Perform all operational duties expect of others when staffing on the weekend

**Required for Wednesday evening staffing/optional for weekend staffing as dependent upon workload*

Goals and Objectives to be evaluated

Activity	Objectives
Review orders in the queue and determine based on the medications orders which require immediate attention	2.2.1, 2.4.4
Review patients medication profile when verifying any new orders to assess for drug-drug or drug disease-state interactions, inappropriate therapies, duplicate therapies, etc.	2.4.1,2.4.2, 2.4.3
Utilization of the kinetic manual to dose both vancomycin and aminoglycosides as well as order necessary levels to monitor drug concentrations. Complete consults for all pharmacy to dose medications to assess patient's progress towards goals, or redesign therapy if they are not. Complete the worklist and document interventions for monitoring patients for renal dosing/warfarin per policy	2.8.1, 2.8.2, 2.9.1. 2.9.2
Actively participate in codes/medical resuscitations, and traumas. Through active participation, demonstrate ability to make quick decisions and take the lead if necessary. Establish an immediate plan to care for the patient and how to communicate this to the family in a caring, rather than strictly clinical manner. Use these experiences for self-reflection and identify ways to improve your performance.	1.1.1, 1.1.3, 1.3.3, 2.3.1, 5.1.1
Work alongside staff pharmacist to experience daily operations and practice order verification thru use of C.P.O.E.	Custom Objective 1: Demonstrate knowledge of basic pharmacy operations and order verification.
Work alongside pharmacy technicians/interns and actively participate in refilling PYXIS, obtaining medications from the Carousel and the narcotic vault.	Custom Objective 2: Demonstrate skills in refilling PYXIS, utilizing Talyst, and the narcotic vault
Work alongside pharmacy staff members and actively practice making IVs using aseptic technique as well as gain experience checking the work of technicians and interns. Actively engaged those technicians and interns that are interested in the work you are doing, ie allowing them to review with your direct oversight, the IV to PO report, antibiotic dosing and renal dosing.	1.3.2, Custom Objective 3: Prepare and dispense medications using appropriate techniques and following the organizations policies and procedures
Document all consults and any other pharmacy related interventions or activities in Cerner.	2.11

Disease States/Conditions

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

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