

PGY2 Infectious Diseases Pharmacy Residency Program Overview

National Matching Service Code: **509655**

<https://health.ucsd.edu/for-health-care-professionals/education-training/pharmacy-residency/programs/infectious-diseases/>

The UC San Diego Health Department of Pharmacy offers a one-year specialty residency in infectious disease pharmacy practice beginning either the last Monday of July, or first Monday of August, depending on the Human Resources orientation schedule and upon licensure in California (see below).

Scope:

UC San Diego Health (UCSDH) consists of three acute care hospitals (UC San Diego Medical Center in Hillcrest, Sulpizio Cardiovascular Center and Jacobs Medical Center which includes former Thornton Hospital) and associated outpatient clinics. UCSDH is also affiliated with Rady Children's Hospital-San Diego, the Veterans Affairs San Diego Healthcare System and the Sharp Memorial Hospital Joint Bone and Marrow Transplant Program. The Health System is affiliated with the UCSD School of Medicine and the UCSD Skaggs School of Pharmacy and Pharmaceutical Sciences (SSPPS). The Department of Pharmacy provides clinical services in both the inpatient and outpatient setting to a broad spectrum of patient populations including, but not limited to, internal medicine, surgery, cardiology, oncology, solid organ transplant, bone marrow transplant, infectious diseases, HIV/AIDs, nephrology, cystic fibrosis, pulmonary hypertension, neonatology, neurocritical, burn and trauma.

The Infectious Diseases (ID) service at UCSDH provides broad inpatient coverage via multiple consult teams, and in addition provides specialty consult services for Hematology and Oncology, Solid Organ Transplant, and HIV/AIDs. This specialty residency balances the provision of patient care with infectious diseases. Emphasis will be placed on antimicrobial stewardship, acting as an active and essential member of the Infectious Diseases Consultation Service(s) and the Antimicrobial Stewardship Program, active participation in microbiology laboratory rounds, and with emphasis on collaborations with the multidisciplinary teams in patient care, stewardship, projects and teaching opportunities. This flexible program is tailored to the individual's interest within the infectious diseases and antimicrobial stewardship discipline with opportunities to implement new or previously established services. There are many research and teaching opportunities that can be tailored to the resident's interest.

Program Purpose:

PGY2 pharmacy residency programs build on Doctor of Pharmacy (Pharm.D.) education and PGY1 pharmacy residency programs to contribute to the development of clinical pharmacists in specialized areas of practice. PGY2 residencies provide residents with opportunities to function independently as practitioners by conceptualizing and integrating accumulated experience and knowledge and incorporating both into the provision of patient care or other advanced practice settings. Residents who successfully complete an accredited PGY2 pharmacy residency are prepared for advanced patient care, academic, or other specialized positions, along with board certification, if available.

Program Description:

UCSDH is a university-affiliated teaching hospital system which provides the unique capability to engage each of our residents in direct patient care activities, projects/research, administration and project management and teaching. A primary goal of the UCSDH PGY2 Infectious Diseases Pharmacy Residency is to train and educate pharmacists in the delivery of exemplary pharmaceutical care to patients with infectious diseases. This residency embraces the concept that infectious diseases pharmacy practitioners share in the responsibility and accountability in collaborating and facilitating safe, effective and optimal drug therapy outcomes.

Infectious diseases pharmacy residents completing this program will aim to function independently as practitioners through conceptualizing, integrating, and transforming accumulated experience and knowledge into improved drug therapy for patients and overall antimicrobial stewardship. The core learning experiences are designed to allow for development of the knowledge and skills to understand and appreciate implications of antimicrobial therapy and manage treatment of infectious diseases for a diverse set of patients with numerous complexities and co-morbidities. Primary service responsibilities include antimicrobial stewardship, attending microbiology laboratory rounds, and participation in Infectious Diseases Consultation Service(s). Residents will be required to staff 16 weekends covering inpatient medicine patients in medication management, order verification, interdisciplinary collaboration of patient care. A number of electives are available for the resident to select from to tailor training to individual interests and deepen knowledge and skills in specific areas. Through longitudinal experiences, advanced practitioners will develop leadership and practice management skills, and develop proficiency in communication through educating and giving regular didactic presentations and teaching other health care professionals, patients, and students on infectious diseases issues. The

practitioners will develop the skills necessary to conduct an infectious diseases quality improvement and research/residency projects as well as demonstrate professional maturity by strengthening their personal philosophy of practice, monitoring their own performance, and exhibiting commitment to the profession. The resident will also be involved in a research project where scientific writing is strongly emphasized and the preparation of a manuscript suitable for publication will be expected. Graduates of this specialized program will create working career plans and possess intense, focused marketable job skills that should prepare them for career opportunities in Infectious Diseases and Antimicrobial Stewardship in addition to any advanced pharmacy practitioner: independent practice skills, multi-tasking and prioritization.

Number of residency positions available: 1 resident is accepted each year

Resident Pay and Benefits: Refer to UC San Diego Health Pharmacy Residency website (<https://health.ucsd.edu/for-health-care-professionals/education-training/pharmacy-residency/salary-benefits/>) for details on salary and benefits

Requirements of Residents Prior to Starting the Program:

Applicants for appointment to the post-graduate year 2 (PGY2) education training programs sponsored by UCSDH must meet the following criteria:

1. Graduate of an Accreditation Council for Pharmacy Education (ACPE) accredited PharmD degree program (or one in the candidate process), or have a Foreign Pharmacy Graduate Equivalency Committee (FPGEC) certificate from the National Association of Boards of Pharmacy (NABP)
2. Must be a United States Citizen or a Permanent Resident
3. Licensed or eligible for licensure as a pharmacist in the state of California
 - a. The residency is expected to begin on the last Monday of July, or first Monday of August, depending on the Human Resources orientation schedule. However, the pharmacy resident must have obtained their California pharmacist license prior to beginning residency (absolute deadline to start is November 1st)
4. Successfully completed an ASHP-accredited or candidate status PGY1 pharmacy residency
 - a. Upon receipt of application to the program, the RPD will contact the PGY1 program director if RPD/RPC is not writing a letter of recommendation
 - b. Prior to beginning the residency program, a signed residency certificate will be required. If a pharmacy resident cannot provide PGY1 certification of completion within 30 days of starting, the resident will be dismissed from the residency
5. Upon hire by UCSDH, along with any other requirements by UCSDH Human Resources:
 - a. Provide proof of United States citizenship or permanent residence (Green Card)
 - b. Provide PGY1 certificate of completion
 - c. Complete a full verification and criminal background screen
 - d. Attend new employee orientation (NEO)

Potential Residency Early Commitment:

We may invite internal PGY1 UCSDH residents to apply for Early Commitment to the PGY2 Infectious Diseases Residency. An application requires parts 1 – 4 below.

Residency Application:

All applicants must be enrolled in the Resident Matching Program. To facilitate this enrollment process and for further information, please visit the following website: www.natmatch.com/ashprmp. Applications will be accepted when PhORCAS opens and due by January 2nd. Applications should be submitted through PhORCAS and include the following:

1. Letter of intent. Please address the following items in your letter of intent and how you will play a role in these items. Your letter of intent should be no more than 2 pages in length.
 - Address where you feel infectious diseases pharmacy will be in 5 years.
 - Address your vision of an infectious diseases pharmacist practicing at the top of their license.
2. Current *Curriculum Vitae* with all experiential completed and anticipated rotations as well as pharmacy work experience.
3. **Three (3)** electronic references are required. **At least two (2)** of the letters should be from preceptors or supervisors who can directly comment on your clinical and practice skills.
Note: Please have recommendation writers complete the electronic reference form within PhORCAS with detailed characteristic and narrative comments. One to two areas of improvement or constructive feedback that the recommender feels the candidate should continue to work on as a PGY2 resident should be identified. No separate letter of recommendation is required.
4. Letter of endorsement from PGY1 Residency Program Director (if RPD is not one of the preceptor references listed above).

Interviews for ASHP Match (on-site or virtual to be determined) will be held late January through February.

Planned Program Structure

- 2-4 weeks of orientation/training (duration determined by the resident's previous experience).
- Core (required) - learning experiences (duration determined by the resident's previous experience and goals).
 - General Infectious Diseases (ID) (4 – 5 weeks)
 - Antimicrobial Stewardship (2 - 4 weeks)
 - Inpatient HIV (3 – 6 weeks)
 - Hematology/Oncology/BMT ID (3 – 6 weeks)
 - Solid Organ Transplant (SOT) / Ventricular Assist Device (VAD) ID (3 – 6 weeks)
 - Foundations in microbiology laboratory (3 –4 weeks, determined by laboratory availability and resident goals)
 - Advanced Antimicrobial Stewardship (3 – 6 weeks)
 - Advanced Infectious Diseases (4 – 6 weeks)
- Core – Teaching – ID/Therapeutics Workshop (Longitudinal ~6 months)
- Core – Longitudinal - Resident Project (Research Project) (Longitudinal, 12 months)
 - Includes participation in Research Primer Series
- Core – Longitudinal - Staffing (16 weekends annually, includes one minor and one major holiday) (12 months total)
 - Core - Longitudinal – Staffing Hillcrest (6 months)
 - Core - Longitudinal – Staffing La Jolla (6 months)
- Core – Longitudinal - Practice Management & Antimicrobial Stewardship (required) (12 months)
 - Committee Participation and Involvement: Antimicrobial Stewardship Program, Antimicrobial Utilization Committee (meets at least 1x quarterly), Infection Control Committee (1st Wednesday, Quarterly), and at least two Pharmacy and Therapeutics (P&T) Committee Meetings
 - Participation in the UC-Wide ID/ASP Collaborative and the UC-Wide ID Resident Network
 - Practice Management / Quality Improvement (Medication Utilization Evaluation (MUE), Orderset/ Monograph/ Guideline)
 - Infectious Diseases Appendix
 - Completion of competencies as assigned and required by department
 - Effective Education / Teaching / Presentations (Longitudinal, 12 months)
 - **for 2025 – 2026 residency year, moving these deliverables from a separate experience into the Practice Management longitudinal***
 - Grand Rounds (1 required)
 - Journal Club Presentation (at least 2 required)
 - Presentations to health care professionals or those in training (e.g. Pharmacy Clinical Forum, Infectious Disease Grand Case Conference) (at least 3 required)
 - In-services (at least 2 required)
 - Preparation of manuscript suitable for publication
- Elective – Learning experiences: (3 – 4 weeks each)
 - See list below

Required Learning Experiences:

PGY2 residents will gain the skills necessary to function as the primary ID/ASP pharmacist during their required learning experiences with the expectation that the resident will embrace the concept that ID/ASP pharmacists share in the responsibility and accountability for optimal drug therapy outcomes; participating, coordinating and/or handling all aspects of the antimicrobial medication process from culture/microbiologic identification/testing ordering to follow-up to auditing/feedback and reporting on quality metrics. The resident will be expected to build relationships within the interdisciplinary medical team, working proactively with a variety of disciplines (nurses, microbiologists, case managers, social workers, physicians and physician extenders, and learners) to achieve efficacy and safety and optimal antimicrobial medication therapy and outcomes. Depending on the core rotation, daily activities may include but are not limited to: attending daily multidisciplinary rounds on ID, serving as the first point of contact for ID pharmacy questions from students, residents (medical and pharmacy), pharmacists and ID fellows and ID attendings in a layered learning model, collaborating with physicians and other health care providers to discuss optimal pharmacotherapy, participating in patient education/consultation, performing pharmacokinetic monitoring on therapeutically monitored drugs, antimicrobial stewardship audit and feedback, participation in the set-up or optimization of antimicrobial medication orders/ ordersets/ guidelines and overseeing and directing PGY1 resident and pharmacy student activities. The interdisciplinary aspects of these required experiences prepare residents for any type of practice environment they may encounter in their future jobs by emphasizing the development of essential skills required for an advanced pharmacy practitioner including independent practice skills, proficiency in communication, leadership, ability to multi-task and prioritize duties and responsibilities.

Elective Learning Experiences:

The resident will have an opportunity to choose from 1 - 3 elective learning experiences (of 3 – 4 weeks in duration) depending on the length of the required learning experiences, based on previous residency background and/or current resident goals. The resident may choose to repeat a required rotation at a more advanced level (i.e Hematology/Oncology/BMT ID). Electives can be selected from the list below and there will also be opportunities to develop new elective learning experiences. The primary focus during these elective rotations would be the infectious diseases and antimicrobial stewardship associated with these patient populations.

- Elective - Antiretroviral Clinic
- Elective - Investigational Drug Service
- Elective - Cystic Fibrosis
- Elective - Hepatology / HCV Clinic
- Elective - Information Technology

Staffing:

Staffing will be incorporated into the residency experience with weekend shifts that provide the opportunity for PGY2 residents at UCSDH. The PGY2 resident will be required to staff 16 weekends (which includes 1 minor holiday weekend PLUS 1 major holiday (Thanksgiving, Christmas, or New Year's)). To help provide more formative feedback, residents are expected to seek feedback from at least one staff member each weekend they staff. The feedback will be solicited via an online survey which can be found on the [Pharmacy intranet page](#).

Residency Project (Research Project):

The resident will be responsible for conducting a resident project throughout the academic year that will be completed and presented at the UC Collaborative Annual Pharmacy Leadership Conference, or an equivalent conference. A Resident Research Primer Course has been developed by the UC San Diego Health Research Council to coach residents through the various aspects of the research process. PGY2 infectious diseases residents who have not previously completed the Research Primer Course are required to attend. PGY2 infectious diseases residents who have previously completed the Research Primer Course will be required to attend some, but not all, meetings. They will be required to complete all competencies. Passing competency score is 80%.

More information can be found in the Resident Manual. If time allows, the resident will be involved with the initiation of a second project. This initiation phase will involve defining the study design, writing up the protocol and beginning the IRB approval phase. This will facilitate subsequent infectious diseases residents who can then finish the projects that were started the previous year.

Research time will be given during the resident year. During research weeks, the resident is expected to be onsite for at least 8 hours daily; preferably between 6:00 am and 6:00 pm. Any excursions from this time must be discussed and approved by RPD prior to the day.

Local/Regional/National Meetings: The resident can attend a specialty meeting (e.g. IDWeek (IDSA), Infectious Diseases Association of California (IDAC) Symposia) if it is of interest. The resident will present their research project at the UC Collaborative Annual Pharmacy Leadership Conference (or an equivalent conference).

Practice Management and Antimicrobial Stewardship:

The PGY2 resident will track their progress and development in the areas of ongoing antimicrobial stewardship initiatives, practice management, clinical quality improvement projects (if not part of a year-long resident project), medication use evaluation, orderset review (and/or formulary monograph), and effective education or training to health care professionals or those in training through this longitudinal experience. Quarterly, the RPD and resident will complete a summative evaluation via PharmAcademic and update the resident's customized training plan, as needed. Items which are included and evaluated in this longitudinal rotation include committee participation (Antimicrobial Utilization Committee, Infection Control Committee), Quality improvement opportunities (orderset or guideline creation or review), and the resident's progress covering disease states listed in the ID Appendix and associated with the ASHP supplemental standard for an Advanced Practice Residency in Infectious Diseases.

Practice Management: The resident will be required to complete a formulary monograph or order set review and medication use evaluation. Each resident will be required to complete one annually. The projects will be larger in nature than PGY1 Pharmacy resident projects and focused on Antimicrobial Stewardship or Infectious Disease Topics.

Committee Participation/Meetings:

The resident will be required to participate in committees relevant to ID/ASP patient management at UCSDH in a longitudinal manner. These committees include participation in weekly Antimicrobial Stewardship Program team

meetings, Antimicrobial Utilization Committee meetings (meets at least 1x quarterly), Infection Control Committee (at least quarterly), and at least two Pharmacy and Therapeutics (P&T) Committee Meetings. These committees review antimicrobial use, ASP processes, and collaborate with multidisciplinary team members to strive to find ways to optimize efficacy and safety of antimicrobial use at UCSDH. The resident will be an active participant through meeting attendance, and presentation and discussion of practice management initiatives. The resident will also participate actively in the UC-Wide ID/ASP Collaborative (meetings ~1x monthly) and UC-Wide ID Resident Network.

Infectious Diseases Appendix:

The resident's progress in covering disease states listed in the Infectious Diseases Appendix (topics listed individually in learning experience descriptions) will be tracked through attestation during core, longitudinal or elective learning experiences and quarterly in the customized training plan.

Required Competencies:

The resident functions as a licensed pharmacist in patient care activities. Completion of competencies as assigned and required by the pharmacy department and expected of all clinical pharmacists.

Effective Education:

Effective education opportunities which will be evaluated will include grand rounds, presentations to health care professionals or those in training (e.g. Pharmacy Clinical Forum, Infectious Disease Grand Rounds) (at least 3 required), didactic forums or in-services, journal clubs (at least 2 required during residency) and teaching opportunities (SSPPS Therapeutics Conference Leader and Didactic lecture of an Infectious Diseases related topic at SSPPS).

Grand Rounds: The resident will deliver a 1-hour CE lecture to the pharmacy staff regarding a controversial topic in infectious diseases. The grand rounds presentation needs to be presented to the project preceptor at least 2 weeks in advance for feedback and comments. A full "run-through" presentation must be scheduled at least one week in advance of the planned presentation to provide a seamless educational lecture. Please refer to the Residency Manual for more information on timelines, expectations and evaluation strategies. An on-demand PharmAcademic evaluation will be used to track Grand Rounds completion. Progression towards completion of graduation requirements will be tracked via the Effective Education PharmAcademic evaluation, customized training plan, and/or via discussion with preceptors at RAC meetings.

Journal Clubs: Residents are required to present **at least** two formal journal club presentations during the year. Journal Club topics should be focus on critically analyzing a recently published journal article related to ID pharmacotherapy or Antimicrobial Stewardship. Presented journal clubs must be presented to the project preceptor at least one week in advance for feedback and comments. Failure to do so will result in delay of the presentation. An on-demand PharmAcademic evaluation by the RPD, learning experience preceptor, or clinical preceptor will be used to track Journal Clubs. Progression towards completion of graduation requirements will be tracked via the Effective Education PharmAcademic evaluation, customized training plan, and/or via discussion with preceptors at RAC meetings.

Presentations to health care professionals and those in training: The resident is required to present at least 3 presentations to health care professionals and those in training (e.g. Pharmacy Clinical Forum, Infectious Disease Grand Rounds) that are separate from learning experience-related presentations. Clinical Forums are typically clinically focused 20- minute presentations based on a recent patient case or pertinent topic. The resident is encouraged to discuss topics related to the ASHP supplemental Appendix for an Advanced Practice Residency in Infectious Diseases for those presentations. All topics and presentations should be presented to the project preceptor at least 1 week in advance for feedback and comments. An on-demand PharmAcademic evaluation will be used to track Clinical Forums and Journal Clubs. Progression towards completion of graduation requirements will be tracked via the Effective Education PharmAcademic evaluation, customized training plan, and/or via discussion with preceptors at RAC meetings.

In-Services: The resident is required to conduct two (2) in-services during the residency year. The remaining in-services can target an audience of the resident's choosing. The resident is expected to be proactive in determining the need for focused in-services as well as facilitating topics and logistics related to the in-service over the course of the residency year.

Teaching - Skaggs School of Pharmacy and Pharmaceutical Sciences: Involvement with UC San Diego's School of Pharmacy will vary depending on the preceptor but it is anticipated that the resident will participate in case conferences as a conference leader. There will also be an opportunity to provide didactic lecture(s) on an Infectious Disease related topic, and may include preparing the lecture syllabus and exam questions and working with a SSPPS Faculty Member. Direct student precepting would occur while on rotation with UC San Diego pharmacy students jointly with the preceptor and direct precepting of PGY1 residents on rotation. Progression towards completion of graduation requirements will be tracked via the Effective Education PharmAcademic evaluation, customized training plan, and/or via discussion with preceptors at RAC meetings.

Teaching Certificate: Participation in the Teaching Certificate program is optional and will be discussed on a case-by-case basis. Please refer to the Residency Manual for more information on these topics. If the resident elects to complete the Teaching Certificate, the RPD will work with the PGY1 RPD to add the resident to expected events.

Manuscript Suitable for Publication: The resident will be required to write a manuscript suitable for publication by the end of their residency year. The purpose of this requirement will be the development of scientific writing and communication skills. The types of publishable literature can include any of the following types of manuscripts: Case Reports with a review of relevant literature, primary research/original research, Medication Use Evaluation, meta-analysis of a disease state or therapy, review article

NOTE: Further development of guidance surrounding the use of artificial intelligence by trainees and staff are in process. Any activities in which artificial intelligence/machine learning are to be used should be addressed with preceptor(s) and RPD prior to use and may also need discussion with Residency Executive Committee and Pharmacy Chief. Failure to do so may result in disciplinary action.

Assessment Strategy – PharmAcademic:

The PGY2 Infectious Diseases Specialty Residency Program uses the ASHP on-line evaluation tool called PharmAcademic, which is available for all ASHP-accredited pharmacy residency programs.

Residents who are matched with this PGY2 specialty program are entered into PharmAcademic prior to their arrival in August. The incoming resident completes two pre-residency questionnaires that help the RPD design a residency year that is tailored to the specific needs and interests of the resident:

- ASHP Standard Entering Interests Form
- Goal-Based Entering Interests Form

Residents' schedules and assigned goals and objectives are entered into PharmAcademic. We have chosen to use the PharmAcademic evaluation tools for our Learning Experiences. For each Learning experience, the following Assessments are completed:

- Preceptor Assessment of Resident: Summative (for each Learning experience)
- Resident Self-Assessment: Summative-self (for each Learning experience)
- Resident Assessment of the Learning Experience
 - Resident assessment of Preceptor
 - Resident assessment of Learning Experience

Preceptors and residents are encouraged to exchange in on-going, daily verbal feedback throughout each rotation (learning experience). Six-week block rotations have a mid-point summative evaluation as well. The Resident and Preceptors are trained and reminded throughout the year to complete evaluations in a thorough (quantitatively and qualitatively) and timely manner. To this end, evaluations may be used, not only as assessment tools, but as tools that Preceptors may turn to for help in guiding Residents to improve, grow and achieve the residency programs and the residents' goals and objectives for the residency year. The RPD reviews all evaluations and solicits verbal feedback from preceptors and residents to provide guidance to help the resident maximize the residency experience.

The resident will discuss individualized program goals and interests on a quarterly basis (Quarterly Update and Customized Training Plan) with the RPD to evaluate where they are in meeting the residency goals and to set or modify goals for the remainder of the residency program. The resident may request to meet with the RPD outside of this quarterly meeting, as needed, if their interests change throughout the year. The resident may request schedule modifications throughout the residency year and the RPD will make all efforts to accommodate these requests. Assessment tools will be adjusted as changes are made.

The resident will be expected complete all relevant exit evaluations as well as a year-long evaluation of the residency program. The results of these year-end Program evaluations are reviewed by the RPD and Residency Advisory Committee (RAC) representatives for potential merit and potential action plans are developed in an effort to achieve continuous quality improvement.

Assessment Overview (PGY2 Infectious Diseases)

It is the resident's responsibility to initiate the evaluation process with each learning experience preceptor prior to the end of each learning experience and to schedule at least quarterly meetings with the residency director.

Learning Experience	Frequency	Resident Self-Assessment (summative)	Preceptor Assessment of Resident (summative)	Resident Assessment of Preceptor & Experience	On-demand Feedback via Pharm Academic
Orientation	Per learning experience	✓	✓	✓	
Required LE	Per learning experience	✓	✓	✓	
Elective LE	Per learning experience		✓	✓	
Grand Rounds	Per experience				✓
Presentations to health care professionals and those in training	Per experience				✓
Journal Club	Per experience				✓
Research	Quarterly	✓	✓		
	End			✓	
Staffing	Quarterly	✓	✓		
	End			✓	
Practice Management & Antimicrobial Stewardship	Quarterly	✓	✓		
	End			✓	
Program Evaluation	3 rd quarter residency				✓

* On-demand evaluations may be requested after inservices or presentations at required meetings. Intermittent on-demand evaluations may continually track progress of the ongoing projects. Feedback will also be provided via PharmAcademic

PGY2 Infectious Diseases Competency Areas, Goals and Objectives:

- Educational Outcome: broad categories of the residency graduates' capabilities.
 - Outcome R1: Patient Care
 - Outcome R2: Advancing Practice and Improving Patient Care
 - Outcome R3: Leadership and Management
 - Outcome R4: Teaching, Education, and Dissemination of Knowledge
- Educational Goals: Goals listed under each outcome are broad sweeping statements of abilities.
- Educational Objectives: Resident achievement of educational goals is determined by assessment of the resident's ability to perform the associated educational objective below each educational goal.
- The resident is encouraged to read detailed information about each goal at the ASHP website under [Required Competency Areas, Goals and Objectives for Postgraduate Year Two \(PGY2\) Infectious Diseases Pharmacy Residencies \(2017\)](#).
- For information about Goals and Objectives Taught/Taught and Evaluated in Learning Experiences, please visiting [PharmAcademic](#), go the 'Reports' tab, and click on 'Goals and Objectives Taught/Taught and Evaluated in Learning Experiences'.

PGY2 Infectious Residency Requirements for Completion/Graduation:

- Successful completion of all learning experiences.
 - All learning experience objectives must be marked satisfactory progress (SP), achieved (ACH) or achieved for residency (ACHR) by the final evaluation of all learning experiences. Any expectations of the residents that are not met or learning objectives marked as needs improvement (N/I) from an on-demand or scheduled evaluation will result in a meeting between the learning experience preceptor, RPD, and the resident where a plan of correction will be formulated. Failure to complete the plan of correction may result in disciplinary action.
- ≥90% of RLS objectives marked “Achieved for the Residency” by the end of the year (as evaluated by individual rotation preceptors or by the RPD upon final review of the resident's progress). All patient care related objectives (Outcome R1: Patient Care) must be achieved (ACHR). The remaining objectives need to be marked as satisfactory progress (SP) or achieved (ACH).
- Research Primer Course
- Completion of Disease State Appendix in PharmAcademic
- Creation and completion of required projects and presentations:
 - Grand Rounds (1)
 - Presentations to health care professionals and those in training (such as a Clinical Forum) (3),
 - Journal Clubs (2),
 - In-services (2),
 - Medication Use Evaluation (1),
 - Orderset/Order Panel review/creation or guideline review/creation (1),
 - Monograph/Drug Class Review (1)
 - Completion of a residency project; including presentation at a suitable conference/meeting and completion of a project ‘write-up’ in a manuscript suitable for publication (does not need to be submitted for publication)