PGY2 Critical Care Pharmacy Residency Program Overview

National Match Service: 509952

https://health.ucsd.edu/for-health-care-professionals/education-training/pharmacy-residency/programs/critical-care/

The UC San Diego Health Department of Pharmacy offers a one-year specialty residency in internal medicine 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 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. UC San Diego Health is also affiliated with Rady Children's Hospital-San Diego, the Veterans Affairs San Diego Healthcare System, and the Sharp Memorial Hospital Joint Blood and Marrow Transplant Program. The Health System is affiliated with the UC San Diego School of Medicine and the UC San Diego Skaggs School of Pharmacy and Pharmaceutical Sciences (SSPPS). The Department of Pharmacy provides clinical services at all three hospitals, including ICU services in the surgical, medical, burn, neonatal and cardiovascular ICUs, as well as assorted other clinical services.

Purpose:

PGY2 residency programs build upon Doctor of Pharmacy (PharmD) education and PGY1 pharmacy residency training to develop pharmacist practitioners with knowledge, skills, and abilities as defined in the educational competency areas, goals, and objectives for advanced practice areas. Residents who successfully complete PGY2 residency programs are prepared for advanced patient care or other specialized positions, and board certification in the advanced practice area, if available.

Program Description:

UC San Diego Health is a university-affiliated teaching hospital which provides the unique capability to engage each of our residents in direct patient care activities, leadership development, project management, and teaching. Graduates from our program have taken a wide variety of critical care, emergency department and academia positions. Graduates will be prepared to sit for the Board Certified Critical Care Pharmacists (BCCCP) exam.

PGY2 residents will gain the skills to function as the primary ICU pharmacist during their required ICU learning experiences, with the expectation that the resident will handle all aspects of the medication process from ordering to administration and follow up. Primary responsibilities include rounding with the ICU team(s), designing, recommending, monitoring, and evaluating patient-specific therapeutic regimens that incorporate the principles of evidence-based medicine, addressing all pharmacokinetically-monitored medications, being an active member of the Code Blue team, validating pharmacy orders for ICU patients, and overseeing and directing PGY1 resident and pharmacy student activities. This integration of staffing and clinical services prepares 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: independent practice skills, multi-tasking and prioritization.

The resident will develop the leadership and project management skills during the residency year by participating hospital committees relevant to critical care patient management and also be involved in various projects, such as medication use evaluation, year-long project, and/or practice guideline/policy development. Scientific writing is strongly emphasized and the preparation and submission of a manuscript suitable for publication will be expected.

Teaching activities may include regular didactic presentations, leading ICU conferences for fourth year pharmacy students, involvement with UC San Diego SSPPS courses (e.g., conference leader for third year therapeutics course [optional], participation in Critical Care elective [required]), and, as warranted, clerkship preceptorship of PGY1 pharmacy practice residents and fourth-year UCSD pharmacy students. The ability to work independently and to supervise pharmacy students and residents will be emphasized.

Number of residency positions available: 2

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:

- 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)

Application Procedure:

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.

- Letter of intent: We no longer use a letter of intent to evaluate candidates. Instead, we will be asking all
 candidates to complete an online supplemental application. PhORCAS will require you to submit a letter of
 intent; please upload a blank document. The UCSDH supplemental application can be found on our residency
 website page PGY2 Critical Care Specialty Pharmacy Residency | UC San Diego Health (ucsd.edu)
- 2. Curriculum Vitae with all experiential rotations completed and anticipated learning experiences and pharmacy and non-pharmacy work experience.
- 3. Three electronic references are required. At least **two** of the references should be from preceptors or supervisors who can directly comment on your clinical practice skills.

Note: Please have recommendation writers complete the electronic reference form within PhORCAS with detailed characteristics and narrative comments. A separate letter of recommendation is not required and is discouraged.

Interviews will be held during late January-February.

Program Structure 2025-2026 Academic Year:

- 3-4 weeks of orientation/training (duration determined by the resident's previous experience)
- Required learning experiences: (Block, 4 5 weeks each, may be extended to account for blocks with holidays)
 - Unit/shift-based learning experiences;
 - C1 (Surgical and Trauma ICU) 5 weeks
 - C2 (Burn ICU and Burn step down) 4 weeks
 - C3 (Medical ICU) 5 weeks
 - J1 (Pulmonary/oncology/surgical ICUs) 5 weeks
 - J7 (Neuro ICU) 4 weeks
 - S1 (Cardiovascular ICUs) 5 weeks
 - Evening ICUs 4 weeks
- Elective learning experiences: (Block, 4 weeks each)
 - Typically service-based experiences See full list below
- Staffing (16 weekends, annually) (Longitudinal, 12 months)
 - o Staffing shifts are 8 or 10 hours depending on the shift assignment
- Resident Major project/research (Longitudinal, 12 months)
 - Includes participation in Research Primer Series
- Practice Management (Longitudinal, 12 months)
 - o Committee Participation (Code Blue Committee 6 months and Critical Care MERP 6 months)
 - o Practice Management (MUE, Monograph/drug class review, order set review/development)
 - Critical Care Appendix
- Effective Education (Longitudinal, 12 months)
 - o Journal club presentations (3 required, may choose to facilitate journal club for final 2)
 - Clinical forum presentation (3 required)
 - In-services (3 required, MD and RN in-services)
 - o Grand Rounds (1 required, may be completed with co-resident)
 - o Participation in SSPPS 274 Critical Care Elective (1 lecture required, may be completed with co-resident)
 - Pharmacy Advanced Resuscitation Training (ART) Refresher Course (max 2 sessions)
 - o BCCCP Lecture Series (optional)
 - Teaching Certificate (optional)
 - o Publication submission (does not have to be accepted)

Orientation:

The purpose of the orientation is to introduce the new pharmacy resident to aspects of UCSDH, the Department of Pharmacy, and the residency program. The pharmacy resident will attend a UCSDH New Employee Orientation (NEO) to learn about the benefits that they receive during their appointment. Following the NEO, the pharmacy resident will receive department and residency program specific orientation, as well as staffing training. The orientation schedule will be provided to residents, which is designed to complete within 3 - 4 weeks, depending on their PGY1 training. The staffing training may be separated into two parts and will be provided when residents switch to different staffing sites (Hillcrest or La Jolla campuses). More training time will be given to residents if needed.

Required Learning Experiences:

Descriptions of each learning experience can be found in PharmAcademic

PGY2 residents will gain the skills to function as the primary ICU pharmacist during their required learning experiences with the expectation that the resident will handle all aspects of the medication process from ordering to administration and follow up. Because required ICU experiences will focus on developing the skills necessary to effectively be the lead ICU pharmacist, they will primarily be assigned in the first half of the residency year. Rather than focusing on a specific team, the PGY2 resident will be expected to identify medication-related issues and manage the therapeutic plan of every patient in the unit, regardless of the primary service. The resident will be expected to build relationships with each medical team in the ICU and work proactively with other disciplines (i.e. physicians, nurses, respiratory therapists, dieticians, social workers, and case managers) to achieve efficient work flow and medication delivery. Daily activities will include: participation in rounds, carrying the Code Blue emergency pager as assigned by the Pharmacist's schedule, reviewing each patient's profile for appropriateness of drug therapy, performing pharmacokinetic monitoring on all therapeutically monitored drugs (TDM), validating pharmacy orders on all ICU patients, assisting medication distributions, and overseeing and directing PGY1 resident and pharmacy student activities. This integration of staffing and clinical services prepares 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: independent practice skills, multi-tasking and prioritization.

Elective Learning Experiences:

Descriptions of each learning experience can be found in PharmAcademic

There are a wide variety of learning experiences the resident can select as elective learning experiences. Elective learning experiences are listed below, and any of the required ICU learning experiences may be repeated as an elective. Elective learning experiences generally allow the PGY2 resident to learn about being a service-based pharmacist. This will allow the resident the flexibility to tailor their PGY2 experience to an area of interest. Elective learning experiences will generally be scheduled in the second half of the residency year (after the required ICU learning experiences are completed). Other elective learning experiences may be developed based on resident interest and preceptor availability.

- Required ICU learning experiences
- Abdominal Transplant
- Anesthesia Critical Care Medicine (ACCM)
- Bone Marrow Transplant
- Cardiology
- CT Transplant and Mechanical Assist Device
- Emergency Department (ED)
- Evening ICUs

- Infectious Diseases, La Jolla
- Informatics
- Neonatal ICU and obstetrics (NICU and OB)
- Neuro critical care (NCC)
- Pediatric ICU at Rady Children's Hospital
- Post-ICU Recovery Clinic (Longitudinal)
- Pulmonary Critical Care Medicine (PCCM)
- Trauma

Staffing:

Staffing will be incorporated into the residency experience with weekend shifts that provide the opportunity for PGY2 residents to cover 1-3 ICUs simultaneously. The resident will spend approximately 6 months (8 weekends) at each medical campus (Hillcrest and La Jolla Jacobs Medical Center). The residents may also cover the Emergency Department or neonatal ICU after completion of the respective electives and discussion with the pharmacists in that practice area. The PGY2 critical care residents are 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's intranet page.

Resident Year-Long Project/Research:

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 critical care residents who have not previously completed the Research Primer Course are required to attend. PGY2 critical care 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. The purpose of starting a second project is to facilitate subsequent critical care residents who can then finish the projects that were started the previous year. A list of project ideas will be generated from the ICU preceptors and the resident is expected to select a project during the first month of the residency year.

Research time will be given during the resident year. During research weeks, the resident is expected to work 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.

Practice Management:

The PGY2 resident will track their progress and development in the areas practice management and clinical quality improvement projects (if not a part of year-long resident project), medication use evaluation, order set review (and/or formulary monograph). Quarterly, the RPD and resident will complete a summative evaluation via PharmAcademic and update the resident's customized training plan to track the resident's progress. Items which are included and evaluated in this longitudinal rotation include:

Committee Participation: The resident will be required to participate in committees relevant to critical care patient management at UCSDH in a longitudinal manner; 6 months in Code Blue Committee and 6 months in Critical Care MERP. The Code Blue and Critical Care Medication Error Reduction Plan (MERP) Committees review medication use and strive to find ways to reduce errors and improve Code Blue (cardiac arrest) response at UCSDH. The resident will work with the pharmacist assigned to that committee to be an active participant through meeting attendance and investigating medication related events and solutions.

Practice Management: The resident will be required to complete a formulary monograph/review or order set review and 1 medication use evaluations. Residents may collaborate with the other critical care resident for completion depending on the project assignments. The resident may be assigned additional practice management activities, such as medication use guidelines, health system policies, or order set development, related to their committee participation or practice management/research projects.

Critical Care Appendix: The resident will demonstrate an understanding of the critical care relevant diseases and conditions and have the ability to design appropriate treatment regimens and treat and assess outcomes. For some diseases and conditions, direct patient care is required. For the other diseases and conditions, the resident will demonstrate understanding of the diseases and condition via didactic instruction, case-based application, simulation, or other appropriate approach. The resident's progress in covering disease states listed in the Critical Care Appendix (topics listed individually in learning experience descriptions) will be tracked through attestation during core, unit-based learning experiences and quarterly in the customized training plan.

Effective Education: The resident will have opportunities to provide effective education through presentation of grand rounds (1 required during residency, may be done with co-resident), clinical forums (3 required during residency), journal clubs (3 required during residency), in-services (3 required during residency), didactic teaching opportunities (SPPS 274 Critical Care elective), Pharmacy ART Refresher Course (max 2 sessions during residency), and submission of a manuscript for publication. Additional teaching/education activities are available; however, the resident is required to communicate and discuss such participation with the RPD.

Grand Rounds: The resident will deliver a 1-hour CE lecture to the pharmacy staff regarding a topic in critical care. This presentation may be made in collaboration with their PGY2 Critical Care Pharmacy co-resident, with each resident presenting approximately 30 minutes of material. Please refer to the Residency Manual for more information on timelines, expectations, and evaluation strategies.

Clinical Forums: The resident will be required to present 3 clinical forums during the year at our Pharmacy Clinical Forum. Clinical Forums are clinically-focused, 20-minute presentations based on a recent patient case or challenging clinical scenario. The resident is encouraged to discuss topics related to the ASHP Supplemental Appendix for an Advanced Practice Residency in Critical Care for these presentations. All Clinical Forum presentations need to 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. Please refer to the residency manual for more information and evaluation strategies.

Journal Clubs: The resident will be required to present **3** journal club presentations during the year. Journal Club topics should be focused on critically analyzing a recently published journal article related to critical care pharmacotherapy. During the second half of the year, the resident may choose to facilitate a PGY1 Journal Club in lieu of performing the final two of their required journal club presentations. 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. For facilitation, the resident assumes the role of the clinical preceptor and should critically analyze the article, coach the PGY1 resident through their analysis, and facilitate the discussion on the day of the presentation. Facilitators should provide feedback on their analysis and thoughts of the PGY1 one week prior to their presentation. Please refer to the residency manual for more information and evaluation strategies.

In-services: The resident will be required to present **3** in-services, including at least one nursing in-services and one physician in-services during the year. In-services are presentations/education provided to nurses or physicians in a variety of settings, for example committee meetings, staff meetings, during rounds, or other settings. Other interdisciplinary in-services may be required at the discretion of the preceptor according to the learning experience description.

Teaching - Skaggs School of Pharmacy and Pharmaceutical Sciences:

Involvement with UCSD's School of Pharmacy will vary but the resident is required to participate in the Critical Care elective (SPPS 274) and the UCSD Pharmacy Acute Resuscitation Training (ART) hands-on learning

experience at the Sim Lab. The resident may be asked to write up cases for therapeutics conference based on real patients, prepare a didactic lecture for therapeutic courses, or prepare exam questions based on the lectures presented. PGY2 Critical Care residents may also choose to be conference leader for one of the therapeutics courses for 3rd year pharmacy students or participate in OSCE (objective structured clinical experience) as facilitators. Residents will also have multiple opportunities to directly precept students and PGY1 residents who are currently on rotation with the resident.

BCCCP Lecture Series (aka Critical Care Bootcamp):

Critical care residents will have the option to participate in the BCCCP Lecture Series, aka Critical Care Bootcamp, throughout the year. These topics will be related to Critical Care Appendix or the BCCCP Preparatory Review Course and will be relevant to the patient population they are currently involved with from a learning experience perspective, when possible. All parties are welcome to attend, but the core ICU pharmacists are strongly encouraged to attend. This lecture series is held in conjunction with the San Diego Veteran's Affairs, Sharp Healthcare, and Scripps Mercy PGY2 critical care residents, giving the residents the opportunity to network with other critical care pharmacists in the area. If a resident chooses to take part in the BCCCP Lecture Series and present a topic, their presentation may be credited as a Clinical Forum presentation, provided it fulfills the presentation requirements.

Pharmacy Advanced Resuscitation Training (ART) Refresher Course:

Pharmacy ART program is a pharmacist-led advanced resuscitation training program that is considered equivalent to the Advanced Cardiovascular Life Support training at UC San Diego Health. The program consists of two parts, 1) 4-hour lectures on pharmacists' responsibilities at code emergencies at UCSDH, 2) 4-hour inperson simulation cases. Pharmacy ART is available twice a year for pharmacy residents and staff pharmacists. In addition, a Pharmacy ART refresher course will be hosted at the Hillcrest Medical Center by the PGY2 residents and the preceptor. The residents are expected to create one new patient care and a disease state topic discussion, as well as review one existing case and disease state presentation, and lead/participate in case-based simulations.

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.

Publication Submission:

The resident will be required to submit a manuscript for publication by the end of their residency. 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. Previous residents have completed case Reports with a review of relevant literature, primary research/original research, medication Use Evaluation, meta-analysis of a disease state or therapy, or review articles.

Resident Learning Experiences and Rotation Schedule (2025-2026 Example)

A minimum of 80% of rotation time must be completed on block learning experiences

Learning Experience	Dates#	R1	R2	Presentation Schedule or other items	Committees	Research (See Manual for updated schedule)
Orientation	7/28-8/1	Schedule (TBD)	Schedule (TBD)			Research Primer 1,2
Staffing Training	8/4 - 8/15	LJ	нс		R2-Code Blue R1- CC MERP	Research Primer 3, 4
1	8/18-9/19	J1	C3	In-service #1	R2-Code Blue R1- CC MERP	Research Primer 5
Project week	9/22-9/26					
2	9/29-10/24	J7	C1	Clinical Forum #1	R2-Code Blue R1- CC MERP	Research Primer 6
3	10/27-11/28	S1	C2	JC #1	R2-Code Blue R1- CC MERP	Fall Research Check-In
4	12/1-12/26	C2	S1	Grand Rounds	R2-Code Blue R1- CC MERP	
Project week	12/29-1/2	Research/Admin catch up and PGY2 candidate review			R2-Code Blue R1- CC MERP	
Orientation	1/5 – 1/9	HC	LJ			
5	1/12-2/13	C3	J1	Pharmacy ART Refresher Course	R1-Code Blue R2- CC MERP	
6	2/16-3/20	C1	J7	SPPS 274 Interviews	R1-Code Blue R2- CC MERP	
SCCM/ Project time	3/23-3/27			Clinical forum #2		
7	3/30-4/24	CTTxVAD	NICU	JC #2 (may facilitate or present)	R1-Code Blue R2- CC MERP	Spring Research Check-In
Project week	4/27-5/1					
9	5/4-5/29	ID	ED	In-service #3	R1-Code Blue R2- CC MERP	UC Pharmacy Collaborative Conference
10	6/1-6/26	NICU	ВМТ	Clinical forum #3	R1-Code Blue R2- CC MERP	
11	6/29-7/24	Evening ICUs	Evening ICUs	JC #3 (may facilitate or present)	R1-Code Blue R2- CC MERP	Submit manuscript

[#]C1, C3, J1, S1 rotations are 5 weeks. Other block learning experiences are 4 weeks.

Local/Regional/National Meetings:

The residents will have the opportunity to attend various professional meetings throughout the year. Travel funds are included in the annual salary. Residents are encouraged to attend a specialty meeting (e.g. Society of Critical Care Medicine Annual Congress). Attendance at UC Collaborative Annual Pharmacy Leadership Conference (or an equivalent conference) to present their resident project is mandatory.

<u>Assessment Strategy - PharmAcademic:</u>

The PGY2 Critical Care 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 anticipated start date. The incoming resident will complete a Self-Assessment as established by ASHP.

The RPD uses the Entering Resident Self-Assessment Form to create residents customized training plan. The Residency Requirement Checklist and Customized Training Plan will be discussed and modified (as necessary) through a collaborative effort between the RPD and resident. In addition, 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 RPD will share changes to the Residency Requirement Checklist and Customized Training Plan via PharmAcademic automatic emails to scheduled preceptors and during quarterly PGY2 Critical Care Residency Advisory Council (RAC) meetings.

Residents' schedules are entered into PharmAcademic. For each learning experience, the following assessments are completed:

- Preceptor Assessment of Resident: Summative (for each learning experience)
- Resident Self-Assessment: Summative-self (for required and staffing learning experiences)
- Resident Assessment of the Learning Experience
 - Resident assessment of Preceptor(s)
 - Resident assessment of Learning Experience

Preceptors and residents are encouraged to exchange in on-going, daily verbal feedback throughout each learning experience. Residents are expected to provide constructive feedback to the preceptor in their PharmAcademic evaluation at the end of the learning experience. This feedback, along with Preceptor self-evaluation, is helpful in developing worthwhile and relevant preceptor development programming. The Resident and Preceptors are trained and reminded throughout the year to complete evaluations in a thorough (quantitatively and qualitatively) and timely manner (within 7 days of learning experience end). 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.

Resident's will be required to complete a PGY2 Critical Care Program Evaluation during the 3rd quarter. Feedback will be discussed at the PGY2 Critical Care RAC meeting and agreed upon changes will be incorporated into the next academic year structure.

Assessment Overview (PGY2 Critical Care)

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

		Type of Assessment					
Learning Experience	Frequency	Resident Self- Assessment (summative)	Preceptor Assessment of Resident (summative)	Resident Assessment of Preceptor and Experience	On-Demand		
Orientation	Per learning experience		✓	✓			
Required LE	Per learning experience	✓	✓	✓			
Elective LE	Per learning experience		✓	✓			
Longitudinal LE	Quarterly		✓				
	End			✓			
Grand Rounds	Per experience				✓		
Clinical Forum	Per experience				✓		
Journal Club	Per experience				✓		
Teaching	Spring Quarter				✓		
Danasanh	Quarterly		✓				
Research	End			✓			
Staffing	Quarterly	✓	✓				
	End			✓			
Practice Management	Quarterly		✓				
	End			✓			
Effective Education	Quarterly		√				
	End			✓			

PGY2 Critical Care Competency Areas, Goals and Objectives:

- Educational Outcome: broad categories of the residency graduates' capabilities.
 - Competency Area R1: Patient Care
 - o Competency Area R2: Advancing Practice and Improving Patient Care
 - o Competency Area R3: Leadership and Management
 - Competency Area 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 (click on Critical Care Pharmacy (PGY2), 2016) PGY2 Competency Areas - ASHP
- 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 Critical Care Residency Requirements for Completion/Graduation:

- Successful completion of all learning experiences
 - All learning experience objectives marked satisfactory progress (SP), achieved (ACH) or achieved for residency (ACHR) by the final evaluation. Any expectations of the residents that are not met or learning objectives with needs improvement (N/I) from an on-demand or scheduled evaluation will result in a meeting between the learning experience preceptor, RPD, and resident and a plan of correction will be formulated. Failure to complete the plan of correction may result in disciplinary action. Please refer to program structure for all components of required learning experiences, including projects, presentations, and research.
- ≥90% of 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). The remaining objectives need to be marked as satisfactory progress (SP) or achieved (ACH). All patient care related objectives (Competency Area R1: Patient Care) must be achieved for residency (ACHR).
- Creation and completion of required projects and presentations. Please review the program structure for complete list of required presentations
- A manuscript submission for publication (dose not have to be accepted)