The UC San Diego Health Department of Pharmacy and the UC San Diego Skaggs School of Pharmacy and Pharmaceutical Sciences (SSPPS) offers a one-year specialty residency in critical care pharmacy practice beginning August 1, 2017 (tentative).

Scope

UC San Diego Health consists of four acute care hospitals (UC San Diego Medical Center in Hillcrest, UC San Diego Thornton Hospital, Sulpizio Cardiovascular Center, and Jacobs Medical Center) 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. The Department of Pharmacy provides clinical services at all four hospitals, including ICU services in the surgical, medical, burn, neonatal and cardiovascular ICUs, as well as assorted other clinical services.

This specialty residency balances direct patient care, research, and teaching opportunities and is tailored to the individual. The resident will gain experience in the core ICUs: surgical, medical, cardiac, and burn intensive care units. Further, a broad range of electives are available for the resident to select from.

PGY2 residents will gain the skills to function as the primary ICU pharmacist during their required core ICU rotations, with the expectation that the resident will handle all aspects of the medication process from ordering to administration. 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.

Teaching activities include regular didactic presentations, leading ICU conferences for fourth year pharmacy students, involvement with UCSD SSPPS courses (e.g., conference leader for third year therapeutics course, lecturer for ICU elective), 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. The resident will also be involved in a research project. Scientific writing is strongly emphasized and the preparation and submission of a manuscript suitable for publication will be expected.
Number of residency positions available: 1-2 new residents are accepted each year.

Salary and Benefits: The annual stipend is currently $52,000. Benefits include medical, dental, and vision insurance. In addition, vacation, sick and professional leave are provided.

Requirements:

A virtual interview (via Skype) in early January is required for non-UC San Diego Health PGY1 residents. On-site will be held during late January through early March. This specialty residency program participates in the ASHP Resident Matching Program. 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

If matched with the UCSD Residency Program, matched candidates must have all of the following:

1. Graduated from an accredited school of pharmacy with a Doctor of Pharmacy degree
2. Successfully completed a PGY1 pharmacy practice residency
3. Obtained California pharmacy licensure prior to beginning residency (absolute deadline to start = November 1st). The residency offer may be rescinded if the resident does not take the CPJE prior to August 1st or does not pass the CPJE on the first attempt.

Application:

Applications for the 2017-2018 year will be accepted beginning December 1, 2016.

Deadline for application is January 4, 2017.

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 long.
   o Address where you feel critical care pharmacy will be in 5 years
   o Address your vision of a critical care 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 electronic references are required. At least 2 of the references 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.
Program Overview:

2-4 weeks of orientation/training/research (duration determined by the resident’s previous experience)

4 core rotations: Surgical ICU – 6 weeks long; Medical ICU – 6 weeks long; La Jolla ICU (mixed medical/surgical/cardiovascular) – 6 weeks long; Burn ICU – 4 weeks long

1 core elective (resident’s choice of SICU, BICU, La Jolla ICU, or MICU rotations) - 1 month long

5 - 1 month long electives (may repeat any of the ICU’s)

4 weeks research time (including time provided during orientation)

Core Rotations:

PGY2 residents will gain the skills to function as the primary ICU pharmacist during their required core rotations (SICU, MICU, BICU, LJ-ICU), with the expectation that the resident will handle all aspects of the medication process from ordering to administration. Because core ICU rotations 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 the nurses and physicians to achieve efficient work flow and medication delivery. Daily activities will include: participation in rounds, carrying the Code Blue emergency pager, 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, 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 Rotations:

There will be a total of 18 rotations that the resident can choose their five electives from. One of the electives must be a repeat core ICU rotation (e.g. SICU, BICU, MICU, La Jolla ICU) of the resident’s choice. The other electives can be selected from the list below and any of the core ICU rotations may be repeated again as a general elective. This will allow the resident the flexibility to tailor their PGY2 experience to an area of interest. Elective rotations will generally be scheduled in the second half of the residency year (after the core ICU rotations are completed).

- Abdominal Transplant
- Bone Marrow Transplant
- Burn ICU
- Cardiology
- CT Transplant/Mechanical Assist Devices
- Emergency Department
- Infectious Diseases
- La Jolla ICU
- Operating Room
- Medical ICU
- Neuro critical care
- Neonatal ICU
- Pediatric ICU
- Nephrology
- Neurosurgery
- Surgical ICU
- Transitions of Care
- Trauma
Staffing:

Staffing will be incorporated into the residency experience with weekend shifts that provide the opportunity for PGY2 residents to cover 1-3 ICU’s simultaneously. The PGY2 residents will be invited to staff 16 weekends (which includes 1 minor holiday weekend PLUS 1 major holiday (Thanksgiving, Christmas, or New Year’s). The resident will get 13 paid days for holidays and 12 sick days for the academic year. Vacation time will be in accordance with GME rules and will be defined as 20 days of vacation PLUS 5 days for professional leave to attend meetings or conferences.

Resident Project:

The resident will be responsible for conducting a resident project throughout the academic year that will be completed and presented at the Western States Conference or an equivalent conference. 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.

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 the literature
- Primary research /original research
- Medication Use Evaluation

- Meta-analysis of a disease state or therapy
- Review article
Meetings:

The residents will have the opportunity to attend various professional meetings throughout the year. The annual travel stipend is variable based on funding. In the past, residents have received a set stipend for the year which they can use at their discretion for registration, travel, accommodations, etc. The cost of attending Western States (or an equivalent conference) will be deducted from the travel stipend, along with any other conferences the resident chooses to attend. Residents are encouraged to attend a specialty meeting (e.g. Society of Critical Care Medicine Annual Congress). Attendance at Western States Conference (or an equivalent conference to present their resident project) is mandatory.

Presentations/Teaching:

The resident will have the opportunity to give many educational lectures to their colleagues throughout their residency year. Residents are expected to provide one inservice per rotation (to the physicians and/or nurses). Additional teaching expectations are listed below:

Grand Rounds. The resident will deliver a 1-hour CE lecture to the pharmacy staff regarding a topic in critical care. Residents can either present individual topics at various times of the year or they could present a topic together. The idea behind a joint presentation is to deliver an unbiased complete presentation of a controversial topic using pertinent literature to support your viewpoint and counter your “opponent.” The residents will have rehearsed their presentation together ahead of time in order to provide a seamless educational lecture.

ICU Pharmacy Clinical Forums. Residents are required to present 4 “mini” grand rounds and 4 journal club presentations during the year at our Pharmacy Clinical Forum. The mini grand rounds are 20-minute lectures on various didactic topics related to the ASHP supplemental standard for an Advanced Practice Residency in Critical Care and will be relevant to the patient population the resident is currently involved with from a rotational perspective. The objective of journal club will be to select and critically review a recently published journal article related to critical care.

Critical Care Conference. The resident will lead/coordinate a weekly critical care conference with the ICU students and PGY1 residents. Topics may vary according to the discretion of the resident, but typically include: how to work-up/present patients, sedation/analgesia/paralytics, Surviving Sepsis, hemodynamics, antibiotic review, acid-base, ACLS. Leading the conference provides residents the opportunity to practice a variety of teaching styles and improves their understanding of and ability to teach fundamental ICU topics.

Skaggs School of Pharmacy and Pharmaceutical Sciences:

Involvement with UCSD’s School of Pharmacy will vary but the resident may choose to be a conference leader for one of the therapeutics courses and/or present lecture(s) at the school at part of the ICU elective course for 3rd year pharmacy students. The resident may be asked to write up cases for therapeutics conference based on real patients and prepare exam questions based on the lectures presented. Residents will also have multiple opportunities to directly precept students who are currently on rotation with the resident.
• Successful completion of all core rotations (all rotation goals marked SP or ACH by the final evaluation)
• ≥80% of RLS goals 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)
• Twelve months maximum is allotted to successfully complete the core requirements. If a core rotation must be repeated, then elective time shall be used. If the above requirements are not met in full, the residency certificate may be withheld at the discretion of the residency director