PGY-2 Critical Care Pharmacy Residency
University of Virginia Health System
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RESIDENCY PROGRAM
Type/Duration: 12 month/full-time residency
Number of Positions: 1
Application Deadline: Received by January 4, 2013
Starting Date: July 1
Estimated Stipend: $48,250
Interview Required: Yes

Special Features:
This residency provides opportunities for clinical pharmacy practice in a variety of adult and pediatric intensive care units (surgical ICU, medical ICU, pediatric ICU, neonatal ICU, neurology/neurosurgery ICU, coronary care unit, cardiac surgery ICU) in a large academic medical center. We are also a training site for schools of pharmacy and offer teaching opportunities to assist in the precepting of both students and PGY-1 residents.

Fringe Benefits:
Health, dental, and liability insurance, 10 days vacation, 2 days sick leave, 10 holidays, educational and travel allowances.

Special Requirements for Acceptance:
Advanced degree or equivalent experience, ASHP accredited PGY-1 residency, Virginia licensure by September 1, letter of intent, college transcript, curriculum vitae, and three letters of recommendation.

TRAINING SITE
Type: Hospital
Owner/Affiliate: State
Model Type: Teaching
Professional Staff: 80
Non-Professional Staff: 80
Total Beds: 600
Average Daily Census: 550

Special Features:
Comprehensive pharmacy services are supported by decentralized clinical pharmacy teams, state of the art automation/technology and IV clean room, an electronic medical record, bar code medication administration, and computerized prescriber order entry. The University of Virginia Health System is a regional teaching and referral center offering a broad range of specialty services and supporting nationally recognized schools of medicine and nursing. Starting in August 2012, UVa became a branch campus for the Virginia Commonwealth University School of Pharmacy.
**Program Structure**

The 2013-2014 PGY-2 Critical Care Pharmacy Residency will begin on July 1, 2013 and end on June 30, 2014. New residents are required to attend housestaff orientation.

During the month of July, residents rotate through various Pharmacy Department areas and develop skills required for the provision of services provided by the department. These services include ambulatory care, drug information, inpatient pharmacy, and centralized intravenous admixture. Residents will additionally undergo competency evaluations in select areas such as the Cardiac Arrest (Code 12) program, aseptic technique, the electronic medical record, and pharmacy information system.

Rotations will begin on Monday, July 29, 2013 (tentative date) and are each five weeks in duration.

**Residency Rotations**

a. **Required**
   - Surgical/Trauma ICU
   - Medical ICU
   - Neurosurgical/Neurological ICU
   - Neonatal or Pediatric ICU
   - Cardiology/Cardiac Care Unit or Thoracic/Cardiovascular ICU
   - Emergency Medicine
   - Infectious Diseases (General or Immunocompromised)

b. **Elective**
   - Additional experience with a required rotation for advanced specialized training in a specific area of interest

c. **Mini-Rotations and Research Days**
   - Between the third and fourth rotation blocks (November and December), residents will have a mixture of research days and mini-rotations.

**Research Activities**

a. Completion of a major project is a requirement of the residency. Final reports must be submitted in manuscript style and approved by the Project Advisor and Program Director.

b. During the first half of the year, each resident will also complete a Medication Use Evaluation on a selected therapeutic agent(s). Completed projects will be submitted for poster presentation at the University Health System Consortium meeting held in conjunction with the ASHP Midyear Clinical Meeting.

**Publications**

a. Submitting a manuscript for publication is a requirement of the residency. Manuscripts must be formatted according to the stated author’s requirements for the journal, newsletter or other publication.

**Presentation Requirements**

a. Residents are required to provide a program suitable for the public that focuses on the care of critically ill patients.

b. Each resident is responsible for presenting one seminar and two case conferences. The Seminar will be ACPE-accredited to provide continuing pharmaceutical education and will be scheduled twice to allow more staff participation.

**Professional Leave for Meeting Attendance**

a. Residents will attend the ASHP Annual Midyear Clinical Meeting and the SCCM Annual Congress Meeting.

b. Additionally, the residency class may coordinate with the Program Director to develop a residency site visit for select programs in the region. Organizing the residency trip is the responsibility of the residents.
**Weekend Distributive Function**

a. Weekend distributive functions provide necessary training for the resident and are a requirement of the ASHP residency accreditation standard.

b. Residents are assigned to weekend distributive functions within the inpatient pharmacy approximately once every 4 weeks. Residents work in clinical ICU verification roles.

**Benefits (Vacation/ Interview Days/ Holidays)**

a. Each resident receives 10 days to be used for personal leave or vacation. In order to avoid conflicts with rotation training experiences, the maximum amount of time off permitted in a rotation is 5 days. Vacation may not be used for terminal leave; all residents are expected to be at work during the last week of the residency.

b. Each resident also receives up to 5 professional days to be used for interviews.

c. Residents are provided up to 2 calendar days for sick leave. If there are additional sick days, vacation days must be used. Those sick for 2 or more consecutive days must present a physician’s note to the Program Director/ Coordinator. In the case of extended illness or disability, please refer to the Leave or Request for Absence Policy.

d. Residents also have the following holidays: Independence Day, Labor Day, Thanksgiving and the day after, Christmas Eve, Christmas Day and the day after, New Year’s Eve, New Year’s Day, and Memorial Day. However, the exception is the holidays that fall during weekends where residents are assigned to work (July 4, December 25, January 1).

**Certification**

a. Residents are required to complete ACLS training and certification. This training is offered through the Medical Center at no charge to the resident. Pharmacy residents participate in ACLS training during the orientation period. Residents respond to Code 12 calls during the residency year.

b. Residents have the opportunity to participate in the Certificate in Public Health Sciences for Resident and Fellow Physicians. ([http://www.healthsystem.virginia.edu/internet/phs/phpp/CertPrgrm.cfm](http://www.healthsystem.virginia.edu/internet/phs/phpp/CertPrgrm.cfm)). Those interested in this opportunity must indicate this interest to the Program Director and apply through the GME office in the late spring.

**Advisors**

a. Each resident is matched with an advisor for the duration of the residency year. Matches are organized by the program director and are based on the career goals, specialty practice area interests, or other interests of the resident. Advisors serve as resources and mentors to the residents.

b. Residents will also have a primary preceptor for each of their required presentations as well as their MUE and residency project. Residents and the program director identify appropriate preceptors for these requirements based on the topic.