SJGH PGY-1 Pharmacy Practice Residency - Schedule of Instructional Activities

		Rotational Learning Experiences						
Longitudinal Learning Experiences	Longitudinal Projects	No Team Assignment (July) Internal Med I (August)	Infectious Dis (September) Critical Care I (October)	Emergency Med (November) Project Time (December)	Internal Med II (January) Elective 1 (February)	Family Med (March) Critical Care II (April)	Elective 2 (May) Elective 3 (June)	
Inpatient Therapeutic Monitoring (July to June)	Antibiotic monitoring Anticoag monitoring	Document all clinical interventions daily.						
Ambulatory Pharmacotherapy (July to June)	See clinic schedule for assignments each month	 See clinic schedule for assignments. No clinic is assigned during critical care or project month. Residents rotate through Diabetes, Heart Failure, Geriatrics, and Transitions of Care clinics. 						
Drug Distribution (July to June)	Staff 8 hours/week Ward inspections monthly	Learn ward inspection Train in IP pharmacy Learn purchasing and contract information	rain in IP pharmacy earn purchasing and Staffing responsibilities include 8 nours per week, which may be split into two 4-hour shifts. Residents must coordinate their schedules so as not to overlap staffing coverage. Staffing responsibilities are to be completed on the weekend while the resident is on critical care retations.					
Drug Use and Practice Management (August to June)	Attend P&T Formulary Reviews Protocols/Guidelines MUE CROs/ADRs RCA/FMEA Dept & mgmt meetings Attend other committees Professional involvement	Attend MST monthly (3 rd Monday) P&T monthly (4 th Monday) Attend CSHP Seminar Attend ASHP Midyear			Attend MST monthly (3 rd Monday) P&T monthly (4 th Monday) CRO (medication error) assessment - February			
Teaching and Staff Development (September to May)	Lectures to MDs Insvcs – MD, RN, Phcy Case Based Learning at UOP	Complete precepting module(s)	Journal Club (Sep) Fam Med Lecture (Oct)		Journal Club (Feb)	Fam Med Lecture (Apr)		
Research Project (August to June)	WSC Project	Begin evaluating WSC project options (Jul) Select project (Aug) IRB approval (Sep)	Data collection	Data collection	Data collection WSC abstract due (Feb)	Complete data collection/analysis (Mar) Prep and finalize presentation (Apr)	CSHP RRS and WSC Presentation (May) Final manuscript due (Jun)	
Other Personal & Professional Development	Set Personal Goals Quarterly evals for all longitudinal LEs Quarterly assessment of resident training plan	Identify personal mission, vision, goals	1 st Qtr evals due (Sep) Review training plan	2 nd Qtr evals (Dec) Review training plan		3 rd Qtr evals due (Mar) Review training plan	4 th Qtr evals due (Jun) Final self- assessments	

Rotational learning experiences are four to five weeks in duration. Longitudinal learning experiences vary in duration and are not directly linked to a specific rotation. Longitudinal projects correlate with longitudinal learning experiences and are independent of clinical rotations.

All rotational and longitudinal learning experiences have at least one assigned preceptor to guide and mentor the resident.

ADRs – Adverse Drug Reactions; MUE – Medication Utilization Evaluation; P&T – Pharmacy and Therapeutics Committee; IRB – Investigational Review Board; RCA – Root Cause Analysis; FMEA – Failure Mode and Effects Analysis; WSC – Western States Conference (residency conference); RLS – Residency Learning System; CRO – Confidential Report of Occurrence (medication errors); ADR – Adverse Drug Reaction *Committee meetings may include Infection Control, Medication Safety, Health Information Management, Antibiotic Stewardship, and others as assigned.

[•] All rotation evaluations are due on the last Monday of the rotation so that preceptor/resident review is complete by the last Friday of the rotation.

[•] All quarterly evaluations (i.e., for longitudinal LEs) must be completed by the last Monday of the quarter so that preceptor/resident review is complete by the last Friday of the quarter.