



University of
Pittsburgh

School of
Pharmacy

2023 Match Day Results

University of Pittsburgh School of Pharmacy

Summary created by Pitt Pharmacy's Student Society of Health-System
Pharmacists Chapter

Table of Contents

Description.....	Page 3
General Results.....	Page 4
General Advice.....	Page 6

Area-Specific Information

Pharmacy Practice.....	Page 11
Managed Care.....	Page 15
Words of Encouragement.....	Page 16

Description

This data was collected from the Class of 2023 University of Pittsburgh School of Pharmacy students, following the second round of the ASHP Resident Matching Program. Student responses were anonymously compiled with the goal of better understanding the match process. 29 students responded to the survey and provided answers to applicable questions.

The first section contains general survey results for all 29 students. It provides a visual representation of data regarding application to and results of the match. It also contains a list of programs students have matched with. For any questions specific to programs, please see the corresponding slide set (PDF) sent out by SSHP, to get in contact with respective students.

The second section contains general advice, written by students, about residency application preparation, ASHP Midyear (where the annual residency showcase is held), the interview process, and ranking considerations.

The subsequent sections in this document are student reflections within several different areas of pharmacy practice. The sections with at least one response include: pharmacy practice (clinical PGY1 or PGY1/PGY2), community pharmacy practice/ ambulatory care, and managed care. Within each area, there is information about the interviewing process, presentation and case solving requirements, and preparation strategies.

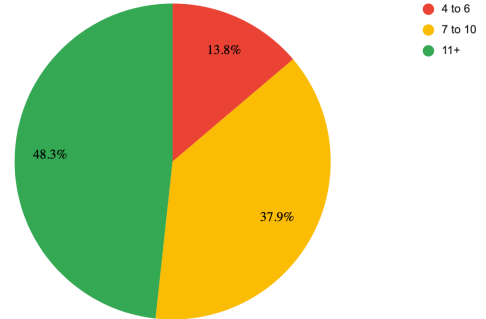
Please remember that each student experience is unique, and there are many resources to help you prepare for your own post-graduate training!

General Results

The following data was collected from the 29 students who responded to the survey.

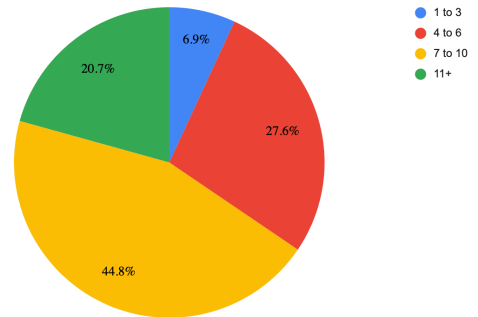
Number of residency programs applied to:

1 to 3 programs: 0% (0/29)
 4 to 6 programs: 13.8% (4/29)
 7 to 10 programs: 37.9% (11/29)
 11+ programs: 48.3% (14/29)



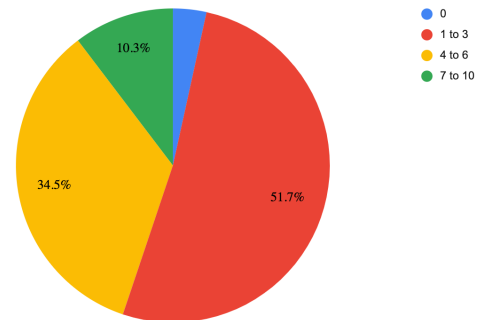
Number of interviews received:

1 to 3 interviews: 6.9% (2/29)
 4 to 6 interviews: 27.6% (8/29)
 7 to 10 interviews: 44.8% (13/29)
 11+ interviews: 20.7% (6/29)



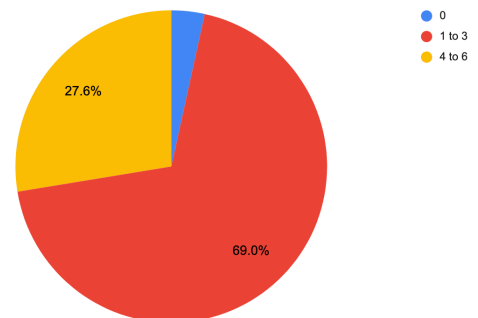
Out of all the programs you applied to, how many would you consider to be “reach” programs?

0 programs: 3.4% (1/29)
 1 to 3 programs: 51.7% (15/29)
 4 to 6 programs: 34.5% (10/29)
 7 to 10 programs: 10.3% (3/29)



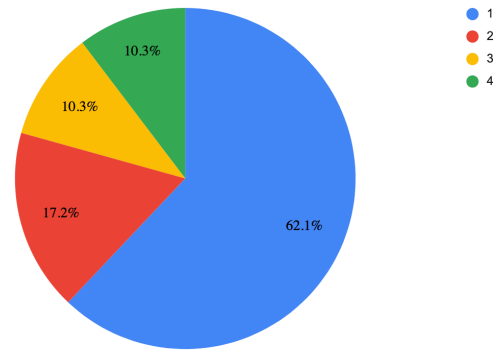
Out of all the programs you applied to, how many would you consider to be “safety” programs?

0 programs: 3.4% (1/29)
 1 to 3 programs: 69% (20/29)
 4 to 6 programs: 27.6% (8/29)
 7 to 10 programs: 0% (0/29)



Of the 29 students who have matched and provided us with feedback:

- ❖ 18/29 students matched with their **#1 program** (as ranked on PhORCAS)
- ❖ 5/29 students matched with their **#2 program** (as ranked on PhORCAS)
- ❖ 3/29 students matched with their **#3 program** (as ranked on PhORCAS)
- ❖ 3/29 students matched with their **#4 program** (as ranked on PhORCAS)



Residency Programs Pitt Pharmacy Class of 2023 Matched With:

- ❖ Asante Rogue Regional Medical Center
- ❖ CVS Health Managed Care
- ❖ Duke University Hospital
- ❖ Emory University Hospital
- ❖ Forbes Hospital and West Penn Hospital
- ❖ Highmark Health
- ❖ Hospital of the University of Pennsylvania
- ❖ Kaiser Permanente Mid-Atlantic States
- ❖ NYU Langone Health
- ❖ Pennsylvania Hospital
- ❖ PerformRx Managed Care
- ❖ Robley Rex VA Medical Center
- ❖ RWJBH Neward Beth Israel Medical Center
- ❖ Sentara Norfolk General Hospital
- ❖ Tampa General Hospital
- ❖ Tufts Medical Center
- ❖ University Health System San Antonio
- ❖ University of Illinois Chicago College of Pharmacy
- ❖ University of North Carolina Medical Center
- ❖ UPMC Mercy
- ❖ UPMC Shadyside
- ❖ VA Pittsburgh
- ❖ VA Puget Sound Healthcare System
- ❖ VA San Diego
- ❖ VA Tennessee Valley
- ❖ WVU Medicine

General Advice

1. Preparation

- Get involved
 - Try your best to be as involved as possible with research, teaching, projects, leadership positions, and volunteering.
 - Find something you are really passionate about and stick to it. You need to be able to show lots of different aspects for different situations.
 - During pharmacy school, be sure to involve yourself in a variety of things (leadership, research, projects, etc.), each unique experience adds to your application and adds something you can speak about during interviews!
- Form positive relationships
 - Have an idea of what APPE preceptors you want to write your letters of recommendation.
 - Form a good relationship with two professors and/or your advisor. These are amazing resources to revise your CV and letter of intent as most of our professors are residency directors or involved in the process in some way.
 - Have your CV and letter of intent reviewed by your letter writers, preceptors, faculty, etc. (the more people, the better).
 - Please rely on your friends who are also going through the same process and use each other as resources!
 - Communicate your goals with your preceptors and ask if they would be willing to write a positive letter of recommendation for residency.
- During rotations
 - Keep a notebook to write down key recommendations/experiences from each rotation.
- Midyear Residency Showcase
 - Midyear is useful if you're unsure what programs you are interested in and just want general info on as many different ones as you can get.
 - Start looking at potential programs early and use Midyear to really settle on a final list of where you want to apply.

- Be prepared for the financial burden as Midyear is expensive, plus \$110 gets you your first four applications, then you have to pay \$44 per application after that, which can really be a lot, especially if you apply to 10+ programs.
- Talking in person at Midyear is more important to try and form connections.
- If you financially cannot attend Midyear, info sessions are also super helpful too to get your questions answered!

2. Application Process

- Apply to a RANGE of programs
 - Apply to as many programs as you can afford, schedule APPE rotations in your potential areas of interest to determine what programs you really want to apply to.
 - Try not to limit yourself to one primary location or one type of residency (i.e. all big academic medical centers). I found that applying to a wide variety of locations and types of programs helped my chances of matching.
- Know your interests
 - Know what you want before you apply; don't settle for something else if it's not what you wanted in the first place.
- Conduct your research
 - Research programs early!
 - By researching programs in September and October, you can attend open houses in November and then have your list pretty narrowed down by Midyear!
 - Do a lot of research on the programs you're applying to and be picky with what you need from a program.
 - Start researching programs early! Have a list of "must-have" criteria (geographic location, PGY2s, elective rotations, etc.) that you are looking for in a program, which will help you slim down your list. Have a preliminary list of programs you are interested in before virtual open houses start.
 - Do your research - there are more programs out there than you think, and a robust resume will help you achieve your goals no matter where you want to complete your residency.
 - Start early! I started researching programs on my own around June/July so I could have a general idea of some programs I was interested in.
 - Work out what YOU want in a program and what factors are important to you.
- Consider if you want to do a PGY2

- Even though it might seem super early, consider if you are interested in a PGY2 and what areas. I knew I was interested in Pediatrics, so I mainly looked at places that offered a PGY2 Pediatrics, so I would have that option if I did want to pursue that field. That helped me narrow my search down because a lot of the programs can be very similar in terms of components.

3. Interview Advice

- Be your authentic self
 - Be yourself but be professional. Especially during in person interviews- consider ALL parts of the day part of your interview. They want to get to know you as a person but if you are having lunch with the residents/ pharmacists and acting unprofessional, it will not look good. The biggest thing they look for in an interview is that you will get along with the people at their program and that you're willing to learn.
 - Overall, just be prepared and be yourself! Try to have your personality shine through during the interview, but don't try too hard or it will come across as not genuine.
 - Be yourself, and be confident!
 - Really know why you want to pursue a residency. The interview is all about being yourself and being able to explain what you want to achieve in the next few years.
 - Make sure you come up with an introduction for yourself as well (your hometown, college, areas of interest, where you work).
- Practice, practice, practice
 - ASHP has good interview prep and questions. The STAR method is unbeatable and will help you answer pretty much any question. Calm your nerves and just have a conversation with your interviewers, they're just people too.
 - Do a mock interview!
 - Make a document of questions you could be asked on an interview and type out your answers. Come up with at least five different stories that could be applicable to multiple scenarios. In thinking about things you could improve, greatest strengths and weaknesses, look back at your eValue and see what your P4 preceptors said in your evaluations.
 - If you have time, review basic pharmacotherapy for major disease states (ACS, CHF, PNA, VTE, and pick a favorite antibiotic for each big bug!)

- Make sure to keep a record of meaningful encounters and interventions you have during P4 year so you can remember all of them. The ASHP website also has a document about interviewing tips and 100 practice questions.
- Try your best to NOT wait until you have already applied to residency programs. Compile a folder with as many interview questions as possible and try to develop answers to these questions as you have experiences on P4 rotations and through leadership/group/research experiences from P1 to P4 year.
- Practice with friends and family, write out/prepare answers to the common interview questions, use your CV/portfolio/rotation assignments to come up with scenarios you could talk about in interviews, after each interview write down as many questions as you can remember so that you can review and prepare for the next interview
- Practice, practice, practice with your friends! With your family! The more you practice, the better you will feel. Go through the list of interview questions that ASHP has online and have specific examples/ responses for each of them. And lastly, it will be okay!
- Background reading
 - Review common disease states ahead of your interviews- know basic treatment for CAP, UTI, HF, etc. Most of your interviews will have a clinical component (I had some where they didn't have a case) but don't stress too much about this.
 - Keep a log of projects and meaningful patient interactions from rotations to use as examples and study appropriate conditions for clinical cases.
 - Research your interviewers at each program before and have questions prepared.
 - Keep a short list of your favorite interventions from APPEs, have a favorite project/community involvement, and definitely come up with a time you failed or fell short. That will get you through 80% of every interview.
- What are some of the most common questions you were asked?
 - “Tell me about yourself”
 - “Tell me about a time”
 - “Why did you want to do a residency?”
 - “Why did you apply to this specific program?”
 - “Why did you choose pharmacy?”
 - “What is on your CV that you are most proud of?”
 - “What makes you the best candidate?”

- Helpful tips
 - Take notes as soon as you are done with an interview about what stood out to you/general information on the program/institution. If you go on a lot of interviews, they eventually blur together. I used my notes a lot after interviews to help me rank and looked at the details to see what was important when I ranked.

Pharmacy Practice (26/29)

Overview

- All programs I interviewed with involved answering clinical questions and solving clinical cases. Some programs required me to give a presentation, but this depended on the site.
- My experiences varied depending on the program. One program provided a case the day before and expected a presentation during the interview of an assessment and plan followed by specific clinical questions. Preparation for this was simple as I was able to use resources; however, it was obviously expected to cite all sources and not plagiarize. This was a relatively low stress presentation as I felt very comfortable with the disease state. Several other programs provided a case and gave us 15-30 minutes to prepare an assessment and plan followed by clinical questions. The majority of programs asked brief clinical scenario questions that were open-ended with little detail. The expectation is you ask what information you need to make a safe, optimal decision. Generally these programs seem to elicit your thought process more than your overall knowledge, but it does require you have some baseline foundational knowledge to understand which questions you need to ask to make a decision.

Details about presentation experience

- Case presentations were previous presentations I completed during APPE year that I had to present.
- Use presentations you have already made from rotations and modify them. Study hot topics for the specific kind of residency you are applying to.
- None of my presentations were on the spot- I knew which interviews I was required to present something. They were all fun ones where I presented about myself which was nice. I know some of my friends had to give clinical presentations but I did not. For presentations, you should definitely prepare ahead of time. Even if it is a simple one about yourself, you want to make sure you're prepared and can demonstrate your communication skills- they want to hear how you speak and answer questions.
- For all the presentations, I was notified well before the interview of what I would need to prepare/present (both easy ""about me"" presentations and case presentations). I had one case provided to me before the interview for presentation and review during, and all other cases were given on the spot.
- Presentation: Every program has different requirements, but those that required presentations typically asked for a patient case (I re-used something I presented during an APPE rotation, try to use something you have gotten feedback on), clinical pearls, or a personal ""about me"" presentation.

- I had to make an ""all about me presentation"", my best advice is do not be afraid to show off your personality. Programs do not want a “LinkedIn Profile,” they want the real you.

Details about clinical case experience

- Each clinical case I was given was on the spot. If I were to re-do the interviews, I would review more cardiology topics (especially anticoagulation for hospitalized patients). Overall, I made sure to clearly state my thought process or why I would lean towards one option over another even if I was unsure of the correct answer.
- Varies by program, most are closed book. Some will give you a case and around 30 minutes to work on it and then you'll present the patient/answer the given questions to a group of preceptors. They will then ask follow-up questions, so I found it helpful to be really prepared and try to anticipate the types of questions they would ask. Some programs will ask scenario-based clinical questions, but overall they just want to know what your clinical thought process is, so if you don't know the answer just talk through your thinking and cite the guidelines or where you would go to find that information.
- All cases from programs I interviewed with were given on the spot. Most did not allow me to use any references. A few allowed references with a limited amount of time to research. Review common disease states such as: pneumonia, UTI, heart failure.
- Make sure you know common disease state guidelines well. Be able to speak about your thought process and if you don't know the answer, tell the interviewer where you would look, then after the interview look up the answer and email it to them.
- For clinical cases, some programs gave me notice ahead of time that it would be in the interview, and some did not so be prepared for anything. They varied on how they would give the cases to you but they were always common disease states. Sometimes the preceptors would take me step by step through the case and ask questions along the way. Other cases I had to look over a patient sheet for a few min and come up with an A/P and we would walk through it together."
- Clinical cases I did were mostly about DKA, pneumonia, and UTI.
- Study over time to build a strong foundation of knowledge and to know what questions you need to ask. Never provide an answer unless you know it is absolutely correct. Do not guess. It is definitely variable for the interviewer, but it is probably wise to tell them what you are thinking if you have something in mind; state what resource you would use to double check your answer or how you would arrive at the answer.

Details about clinical questions

- Most clinical questions focused on: infectious disease (Pneumonia, UTI, skin and soft tissue infections, C. Diff, bacterial meningitis) and cardiology and hematology (Myocardial infarction, stroke, venous thromboembolism, general anticoagulation, atrial fibrillation and torsades). For infectious disease, general knowledge of causative organisms and an empiric regimen is generally

enough with basic antimicrobial stewardship strategies such as de-escalation. I think any clinical questions are fair game, but these are the most common I encountered.

- Clinical questions / solving clinical cases were on the spot - definitely need to review common disease states before interviews.
- I reviewed commonly asked disease states (ex. PNA, COPD, anticoagulation, HF, etc). One of the cases I got ahead of time and then had to answer more questions on it during the interview.
- It's definitely important to prepare for more common pharmacy disease states before the interview. I would say definitely prepare for questions on CAP, diabetes, and heart failure, but don't stress too much about it. If you are unsure of an answer, let them know what guidelines you would reference to figure it out.

Additional components: In addition to presentations, cases, and clinical questions, what were some unique interview components you were required to do?

- A few programs had me do situational questions where they give a bunch of tasks a resident needs to get done and have you prioritize them. They want to see your time management skills and how you handle stress!
- Stress case
- I was asked to act in a scenario where I was the pharmacist and I had a disagreement with a physician. This was a 20-minute segment acting scenario. In another interview I was asked what I would do if a hurricane went through Puerto Rico resulting in a drug shortage of metronidazole.
- Pretend counsel patients, educate providers, perform pharmacy calculations
- Teamwork scenarios
- Answer a clinical question as a group

Required to give a presentation: 23/26 (88.46%)

Required to solve a case: 26/26 (100%)

Required to answer clinical questions: 26/26 (100%)

ARCO participation: Pharmacotherapy Scholars (42%), N/A (7%), Geriatrics & Palliative Care (7%), CLIP (7%), Pediatrics (11%), Research (3%), Global Health (15%), Pharmacanalytics (3%)

Preparation

- **Faculty review of resume/ CV:** 23/26 (88.46%)
- **Faculty review of LOI:** 19/26 (73.10%)

Faculty/ Preceptor support for activities:

- | | |
|----------------------|--------------------------------|
| ❖ Dr. Coons | ❖ Professor Skledar |
| ❖ Dr. Benedict | ❖ Dr. Carroll |
| ❖ Dr. Rebitch | ❖ Dr. Devanathan |
| ❖ Dr. Schonder | ❖ Dr. Berenbrok |
| ❖ Dr. Lowry | ❖ Dr. Culley |
| ❖ Dr. Brianna Ordens | ❖ Dr. Shields |
| ❖ Dr. Iasella | ❖ Dr. Ballard (UPMC Shadyside) |
| ❖ Dr. Howrie | ❖ Dr. Snyder (UPMC Mercy) |

Managed Care (3/29)

Details about presentation experience

- Presentation was on a managed care topic of the students choice for all the programs I applied to. Most programs gave a heads up about clinical questions in an email prior to the interview. Focus on big disease states like diabetes, hypertension, CAP, etc.
- I was expected to prepare a presentation that was managed care/ healthcare related for the interview session followed by a Q&A. For all of my interviews, this meant being able to reuse my journal club presentation from my managed care APPE rotation. For the clinical case portion, the interviewers sent me the case at the hour that it was scheduled for. I had about 30 minutes to create a SOAP note after receiving the case which was to be submitted/emailed on time before entering the breakout room for the next session.
- I had to present different managed care related topics at each interview. For these, I chose a pipeline drug therapy and established prior authorization and other utilization management criteria. I had a previous managed care preceptor review the presentation before. I also had to solve prior authorization cases which I could not prepare for.

Required to give a presentation: 3/3 (100%)

Required to solve a case: 3/3 (100%)

Required to answer clinical questions: 3/3 (100%)

ARCO participation: N/A (33%), Research (33%)

Preparation

- **Faculty review of resume/ CV: 2/3 (67%)**
- **Faculty review of LOI: 1/3 (33%)**

Faculty/ Preceptor support for activities: Dr. Suh

Words of Encouragement

- ❖ You are interviewing the program, just as much as the program is interviewing you. Be yourself, and be true to yourself!
- ❖ When you get accepted for any interview it's important to remember that they have already decided you're capable enough to be a resident with them. Now it's your turn to stand out from other people interviewing by showing them your shining personality!
- ❖ Pitt prepares you well! Have confidence in yourself and realize you are more competitive than you think.