



UPMC Mercy PGY1 & PGY2 Pharmacy Residencies Residency Program Manual

INTRODUCTION

UPMC Mercy is a tertiary care teaching hospital in the UPMC Health System with a long-established history of training pharmacy residents. The PGY1 Pharmacy and PGY2 Emergency Medicine Residencies are separate 52-week programs that provide comprehensive training in health systems pharmacy with an emphasis on developing clinical pharmacy practice and educational skills. The resident practices and gains valuable experience as part of an interdisciplinary team in a dynamic acute-care setting.

OUR MISSION & CORE VALUES

UPMC's mission is to serve our community by providing outstanding patient care and to shape tomorrow's health system through clinical and technological innovation, research, and education.

At UPMC Mercy, our partnership with the Catholic Church expands our mission:
Mercy. Compassionate, Quality Care and Reverence for All.

Across UPMC, we carry out our mission through a commitment to these core values:

QUALITY & SAFETY

We create a safe environment where quality is our guiding principle.

DIGNITY & RESPECT

We treat all individuals with dignity and respect.

CARING & LISTENING

We listen to and care for our patients, our health plan members, our fellow employees, our physicians, and our community.

RESPONSIBILITY & INTEGRITY

We perform our work with the highest levels of responsibility and integrity.

EXCELLENCE & INNOVATION

We think creatively and build excellence into everything that we do.

The Department of Pharmacy at UPMC Mercy strives to achieve the organization's mission and core values through the provision of the highest quality, patient-focused pharmacy services. Through residency training, it is our mission to **train clinical pharmacists who are leaders in patient care through:**

- *clinical decision-making and application of evidence-based medicine.*
- *education of patients and other health care professionals.*
- *contribution to knowledge of medication usage and innovative practice models.*
- *perseverance in patient advocacy.*
- *commitment to patient safety.*

PURPOSE STATEMENTS

PGY1 Purpose: PGY1 residency programs build upon Doctor of Pharmacy (PharmD) education and outcomes to develop pharmacist practitioners with knowledge, skills, and abilities as defined in the educational competency areas, goals, and objectives. Residents who successfully complete PGY1 residency programs will be skilled in diverse patient care, practice management, leadership, and education, and be prepared to provide patient care, seek board certification in pharmacotherapy (i.e., BCPS), and pursue advanced education and training opportunities including postgraduate year two (PGY2) residencies.

PGY2 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.

RESIDENCY OUTCOMES, GOALS AND OBJECTIVES

The program's outcomes and their respective goals and objectives are designed to provide for the development of the resident's competency in four pharmacy areas of practice:

1. Patient care
2. Advancing practice and improving patient care
3. Management and leadership
4. Teaching, education, and dissemination of knowledge

ELIGIBILITY & LICENSURE

To be eligible for pharmacy residency at UPMC Mercy, an individual must be a graduate of an ACPE-accredited pharmacy program by the start of the residency year and be eligible for licensure in Pennsylvania. Residents in the PGY2 program must also have successfully completed an ASHP-accredited PGY1 residency.

Resident Pharmacist should make every effort to take the North American Pharmacist Licensure Examination (NAPLEX) and Multistate Pharmacy Jurisprudence Examination (MPJE) prior to July 1, if not already licensed. To meet the requirements for successful completion of the residency, residents must obtain a license to practice pharmacy in the Commonwealth of Pennsylvania by September 30. If the resident is unable to become licensed by September 30, the resident may be placed on unpaid leave as per UPMC HR policies. If the resident is not able to pass the exam by October 31, he or she may be dismissed from the program. A delay in licensure beyond September 30 may require extension of the program beyond the 12-month period to meet residency requirements, to be determined in consultation with the residency advisory committee (RAC). A minimum of two-thirds of the residency program must be completed with active licensure.

INTERVIEW INFORMATION

All candidates invited to interview for the PGY1 or PGY2 positions will be provided with the following information:

- Interview schedule
- Program manual, which contains the following:
 - Duty hours and moonlighting policy
 - Leave of absence policy
 - PGY2 required reading list

ORIENTATION



Each resident participates in a 5–6-week orientation program. This program is designed to introduce the resident to the operational responsibilities within the pharmacy department and to provide experience in specific activities under the guidance of full-time staff pharmacists. Residents participate in orientation activities for the UPMC Graduate Medical Education (GME), UPMC Mercy Department of Pharmacy, and the University of Pittsburgh School of Pharmacy.

ROTATIONS

The PGY1 core rotations are 4-5 weeks and include Critical Care (2 different ICU rotations), Infectious Diseases, Internal Medicine, Medication Safety, Emergency Medicine, and Management. There are 2 rotations for elective experiences.

The PGY2 core rotations are 5 weeks and include Emergency Medicine I – Introduction to Emergency Medicine, Emergency Medicine II, Emergency Medicine III – Teaching and Precepting, Emergency Medicine UPMC Shadyside, Toxicology, Pediatric ICU, Critical Care, Trauma Burn ICU, and Infectious disease. There are no elective rotations offered.

Residents can choose from the following specialty electives: Academia, Endocrinology, Nephrology, Trauma/Burn, Nutrition Support, Physical Medicine and Rehabilitation, Ambulatory Care, Outpatient Oncology, and Transitions of Care. In addition, there may be an opportunity to participate in off-site electives in disciplines not offered at UPMC Mercy.

INDIVIDUAL GOALS AND TRAINING PLAN

At the beginning of the year, the resident will complete a self-evaluation and develop goals for the program year. The resident will complete the ASHP Resident Entering Self-Assessment Form, which will be used by the RPD to help develop a customized residency training plan for the residency year.

Quarterly evaluation of each resident’s training plan and progress is performed by the RPD and updated in discussion with the resident.

ROTATION GOALS AND EVALUATIONS

Each resident will discuss with the preceptor specific goals at the beginning of each rotation. These goals should reflect the specific rotation, the resident’s interest, and identified areas of weakness.

After completion of each rotation, both the resident and the preceptor evaluations will be completed using PharmAcademic.

All evaluations should be completed within 7 days of a rotation’s end. In addition to the written evaluation, the resident and the preceptor must meet within 7 days to discuss the evaluation. An emphasis is to be placed on the extent of the resident’s progress toward achievement of assigned educational goals and objectives, with reference to specific criteria. Recommendations for how the resident might “achieve” that goal should be included in the evaluation.

The residents are encouraged in their evaluations of the learning experience to include at least one area in which the learning experience could be improved. This input is an important tool for continuing program self-assessment and development.

Regular, formal feedback should be provided by the preceptor to the resident during each learning experience. The frequency of this feedback may vary but at minimum should occur at the midpoint and conclusion of the rotation. Feedback must be documented by the preceptor in PharmAcademic. Preceptors are encouraged to provide informal feedback on at least a weekly basis, and it is recommended that this informal feedback also be documented in PharmAcademic.

EVALUATION RATINGS

The objectives for each learning experience will be evaluated using the ratings described below.

- **Needs Improvement (NI):** Resident performance could potentially result in patient harm or an unfavorable impression of the profession of pharmacy within the institution.
- **Satisfactory Progress (SP):** Resident performance is at an appropriate level for career stage; however, the resident is not yet ready to perform the objective independently.
- **Achieved (ACH):** Resident performance is an appropriate level for career stage and the resident could realistically perform the objective independently.
- **Achieved for Residency (ACHR):** Resident has demonstrated consistent independent performance and no longer requires formal assessment of the objective. This will be designated by the RPD.

STAFFING OBLIGATIONS

The pharmacy residents are responsible for the following shifts, subject to change based on department staffing needs. Permanent changes to the staffing obligations will be communicated at least 14 days prior to taking effect.

PGY1 Weekend A (Staffing): Saturday and Sunday, unit dose (9:30-6:00 PM).

PGY1 Weekend B (Clinical): Clinical (11 AM-4 PM)/unit dose (8-11 AM, 4-8:30 PM)

To promote rest following the completion of the clinical weekend, resident will be dismissed no later than 1:00 pm on the Monday after (or other day with preceptor/RPD approval).

PGY1 residents will work Weekend A and Weekend B on a 5-week rotating schedule, to be determined by the residents. Suggested arrangement is Weekend A > off weekend > Weekend B > off two weekends, repeat.

In addition to weekend shifts, residents will be responsible for working a daily 4:30-8 PM evening shift on a rotating basis, to be determined by the residents.

PGY2 ED Weekend: Saturday and Sunday unit-based shift in the ED (11am – 9 pm)

The PGY2 EM resident will work one weekend every 4 weeks (10 hr shifts). Upon completion of EMI and EMII rotations and the ED pharmacist training checklist, the resident will staff weekend shifts in the ED.

Holidays

PGY1 residents are required to work three holidays to fulfill the pharmacy staffing requirement.

PGY2 residents are required to work two holidays to fulfill the pharmacy staffing requirement.

Major holidays: Thanksgiving Day, Christmas Day, New Year's Day

Minor holidays: Labor Day, Christmas Eve*, New Year's Eve*, Martin Luther King Jr. Day, Memorial Day

*Only the evenings of these days are considered holidays. The daylight shifts are treated as normal working shifts.

Pharmacist Schedule



The pharmacist schedule is distributed monthly. The residents are responsible for checking this schedule and notifying the Operations Supervisor of any scheduling issues at the time of distribution of the schedule.

CLINICAL CONSULTS & INTERVENTION DOCUMENTATION

During the residency year, the resident will assist in the completion of pharmacy consults, based on rotation and the discretion of the preceptor. This includes involvement in the warfarin and pharmacokinetic consult services.

Residents will participate in the monitoring of pharmacy alerts and the documentation of interventions through the TheraDoc and iLum Systems.

REQUIRED PROJECTS

PGY1 and PGY2 residents are required to complete at least one formal medication use evaluation (MUE), a major project, and a drug class review/monograph/treatment guideline/protocol. The resident is required to present the project at the University of Pittsburgh School of Pharmacy Research Day in June of the residency year.

PROFESSIONAL MEETINGS

The resident is required to attend the ASHP Midyear Clinical Meeting in December and present a poster. Financial support will be provided by the department to cover costs of meeting registration, hotel, travel, and poster preparation expenses.

HOSPITAL CONFERENCES & COMMITTEES

The resident is encouraged to attend a variety of hospital conferences throughout the residency year. Medical resident noon conference should be attended daily by the PGY1 residents unless otherwise excused by the RPD or another preceptor. Preceptors may designate additional conferences or committee meetings based on rotation.

Each PGY1 resident will be assigned to participate in a pharmacist-led committee from among the following: Anticoagulation, Antimicrobial Stewardship, Diabetes, Formulary, Medication Safety, and Pharmacy & Therapeutics.

The PGY2 resident may participate in the following committees/meetings throughout the residency year: Geriatric Emergency Department Accreditation, Department of Emergency Medicine Attendings Meeting, Emergency Management Committee, Stroke Quality Committee, and Resuscitation Committee.

CLINICAL AND EDUCATIONAL WORK HOURS

Please see the Appendix A Duty Hours and Moonlighting attached to this document. Additional expectations and requirements regarding duty hours can be found on the ASHP website at [Duty-Hour Policy \(ashp.org\)](http://ashp.org).

Residents are expected to be present at the hospital each day no later than morning report unless off-site or otherwise excused by their preceptor. Residents should discuss expected rotation hours with their preceptor at the beginning of each rotation. Residents are expected to remain in the hospital until at least 4:00 pm to support the needs of the department or as scheduled by their preceptor.

Duty hours should be documented weekly in the UPMC MedHub Portal. These will be reviewed by the RPD monthly.

TIME AWAY FROM RESIDENCY

Leave of Absence



Please see Appendix B Leave of Absence Policy for UPMC Mercy found as an attachment to this document.

Vacation/Paid Time Off (PTO)

Residents will have 15 PTO days allotted to them and are required ensure the tracking log is accurate and updated. Up to three PTO days per rotation will be granted at the discretion of the preceptor. Requests for additional time off will be reviewed by the RAC. Vacation days will not be granted during the last two weeks of the residency program. Early departure from the residency program may be considered if the resident is moving from one post-graduate training program to another (maximum of two days). Unused PTO will be forfeited at the completion of the residency and will not carry over to subsequent training or employment.

Sick Days

The RPD and current preceptor must be notified as soon as possible if a sick day is needed. Sick time will be deducted from the available PTO days.

Interview/Testing Days

Residents are allotted five PTO days to participate in off-site interviews and/or licensure testing. Additional requests beyond five days will need to be taken from available PTO.

Conference Days

All residents are granted 5 conference days to attend the ASHP Midyear Clinical meeting. The PGY2 resident will be granted 2 conference days to attend EMPowerRx. These days are not deducted from the PTO allotment.

For vacation, interviews, and sick days, the resident must make a written request/notification and follow instructions as indicated. The vacation/sick/interview day allotments are subject to consideration of extenuating circumstances by the Resident Advisory Committee (RAC); deviations from the above will be considered on a case-by-case basis. If a resident exhausts the allotted days off, additional absences will require make-up days at the direction of the RAC. More than 37 days away from residency for any reason will require extension of the residency in accordance with GME policies. Inability to fulfill any required extension may result in withholding of Certificate of Completion.

CERTIFICATE OF COMPLETION

Upon successful completion of the residency year, the resident will receive a certificate indicating the completion of a Pharmacy Practice Residency accredited by the American Society of Health System Pharmacists. Criteria for successful completion of the residency are listed below.

All residents at UPMC Mercy must:

1. Obtain Pennsylvania pharmacist licensure by September 30 of the residency year and practice two-thirds of the year as a licensed pharmacist.
2. Complete all orientation materials including university modules and operational training requirements.

3. Attain a rating of “Achieved for Residency” for 80% of the goals and objectives established by the residency program as outlined in the ASHP 2022 Standards for a Postgraduate Residency Programs.
4. Complete the requirements of the individualized plans as developed by the RPD.
5. Complete all required learning experiences of their residency schedule.
6. Complete all required weekend inpatient pharmacy staffing and clinical coverage assignments.
7. Complete a major project and present the results at the University of Pittsburgh Pharmacy Resident Research Day.
8. Prepare manuscript based on their major project that is suitable for publication and identify a target journal with intent to submit their manuscript for review.
9. Meet the residency presentation requirements: 2 formal presentations, 2 journal club presentations, and 1 noon conference or alternative interdisciplinary presentation.
10. Complete a drug class review/drug monograph/treatment guideline/treatment protocol and a medication use evaluation.

Additionally, PGY2 residents must:

1. Provide PGY1 residency certificate within 7 days of the start of residency.
2. Maintain certification in BLS and ACLS.
3. Attain a rating of “Achieved for Residency” for all the objectives listed as critical.
4. Present a poster at ASHP midyear or other approved venue.
5. Complete emergency medicine required topics listed in the Appendix.

APPENDIX

A.



Duty Hours and
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B.



Leave of
Absence.docx

C. [PGY2 Emergency Medicine Required Topic List](#)