

PGY1 – Pharmacy Practice Learning Experience 1, 2 & 3

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Learning Coaches: Michael Johnson, RPh; Tresa Scolaro, Pharm.D.; Kevin Joy, Pharm.D.

Schedule:

Hours: 0600-1630 or per shift scheduled that day

Pharmacy Practice 1: 5 days a week (10 hr days) for four weeks (Total of 200 hrs)

Pharmacy Practice 2 & 3: After training, staffing will occur per staffing expectation described in the Resident Training Manual

Overview

Pharmacy Practice 1 is four weeks (approx 50 hrs/week) of intensive training and experience in the proper distribution of drugs and associated documentation and clinical practice. Based on a skills and abilities assessment at the end of Pharmacy Practice 1, the resident will move on to independent staffing responsibilities. During Pharmacy Practice 2 and 3 (and beyond) residents will complete staffing cycles consisting of 10-hour days, approximately three days a month for a total of approximately 30 hours per month. Pharmacy Practice 2 and 3 are each 12 weeks long and are intended to evaluate competence demonstrated in a real, independent practice situation after training is complete. Days may vary. A summative assessment of objectives will occur at the end of each rotation. Future focused learning will be based on these assessments.

During these rotations each resident will be provided opportunities to improve their skills in preparing, dispensing, and managing medications to support safe and effective therapy for patients. The pharmacy practice experience provides a series of responsibilities and interactions with the preceptor, other pharmacists, and health care practitioners. Residents will gain understanding about order processing, pharmacy consults, and various drug preparation and checking requirements. Residents will gain experience running an IV room and staffing a central pharmacy. Residents will have opportunities to work a variety of shifts and will be exposed to many of the responsibilities of a staff pharmacist. Residents will gain breadth in this experience by working with a variety of pharmacists from Three River Medical Center and through independent practice.

Responsibilities and Activities

During this rotation you will receive training in EPIC, Image Now, Micromedex, Up-To-Date. You will learn about use of the Omnicell, how to modify bins, resolve discrepancies, check the status of an item, and about Omnicell billing procedures. You will learn about the pharmacy unit dose system, reconciliation of cart fill, checking cart fills, floor stock, inspection of nursing units for outdates, and filling prescriptions for patients requiring financial assistance. During this rotation you are responsible for the supervision of technicians, including checking technician calculations and work, and inspection of final IV products. You will learn about TPN ordering for adults. You will be exposed to inventory, ordering and billing processes to include



destruction of drugs and hazardous waste, drug recall, entering charges and credits, obtaining drugs from other sources, and ordering office supplies. You will also learn about documentation during order entry, initial kinetic monitoring, initial warfarin consults, herbal and home medicine policies.

Pharmacy Practice Training Checklist

The resident is expected to be familiar with all the following after completion of Pharmacy Practice 1 and fully competent by the completion of Pharmacy Practice 3.

Goals and Objectives

Resident achievement of goals is determined through assessment of ability to perform associated objectives. The table below demonstrates the relationship between activities performed on the learning experience and the assigned goals/objectives to the learning experience.

Competency Area R1: Patient Care		
GOAL R1.1 In collaboration with the health care team, provide safe and effective patient care to a diverse range of patients, following a consistent patient care process.		
Objective Number	Objective	Associated Activities
1.1.1	(Applying) Interact effectively with health care teams to manage patients' medication therapy.	<ul style="list-style-type: none"> • Work with prescribers and nurses to resolve issues found when reconciling patients' medications prescribed on admission with medications taken as outpatient. Contact prescribing physician via Doc Halo, face-to-face, or telephone to resolve issues found when verifying medication orders. • Work with nurses and other health care providers (such as Pharmacy Technicians, Clerks, Pharmacists) to resolve missing doses and other medication distribution issues brought to your attention while staffing. • Interactions are cooperative, collaborative, communicative, and respectful. • Demonstrates skills in negotiation, conflict management, and consensus building. • Demonstrates advocacy for the patient and/or family members. • Demonstrates ability to contact physicians and other clinicians • Understands how to contact the pharmacy manager or supervisor
1.1.3	(Applying) Collect information on which to base safe and effective medication therapy.	<ul style="list-style-type: none"> • When verifying orders, review patient's profile, medical record, and interview patient, if necessary, to help assess potentially problematic medication orders. • Consults relevant resources to base safe and effective medication therapy

		<ul style="list-style-type: none"> ● Collection/organization methods are efficient and effective. ● Collects relevant information about medication therapy, including: <ul style="list-style-type: none"> ○ History of present illness. ○ Relevant health data that may include past medical history, health and wellness information, biometric test results, and physical assessment findings. ○ Social history. ○ Medication history including prescription, non-prescription, illicit, recreational, and non-traditional therapies; other dietary supplements; immunizations; and allergies. ○ Laboratory values. ○ Adverse drug reactions. ○ Medication adherence and persistence. ○ Patient lifestyle habits, preferences and beliefs, health and functional goals, and socioeconomic factors that affect access to medications and other aspects of care. ● Sources of information are the most reliable available, including electronic, face-to-face, and others. ● Recording system is functional for subsequent problem solving and decision making. Clarifies information as needed. ● Displays understanding of limitations of information in health records. ● Know locations of and utilizes online Clinical Links ● Demonstrates ability to pull up Phone and Pager Lists ● Able to locate phone numbers / work schedules as needed from the Physician Directory / Hospitalist's Calendar ● Able to access online the Epic Tip Sheets
1.1.4	(Analyzing) Analyze and assess information on which to base safe and effective medication therapy.	<ul style="list-style-type: none"> ● Actively question orders in real time to determine the appropriateness of drug orders (<i>e.g.</i>, indication, dose, route, frequency, rate of administration, drug interactions, compliance, cost, <i>etc.</i>) ● Analyze assigned patient-specific profiles, medication administration records, and pertinent clinical data / documentation records on a daily basis. ● Accurately assess the patient's health and functional status, risk factors, health data, cultural factors, health literacy, access to medications, immunization status,

		<p>need for preventative care and other services when appropriate, and other aspects of care as applicable.</p> <ul style="list-style-type: none"> • Identify any issues with medication therapy and be prepared to discuss issues identified with preceptor.
1.1.8	(Applying) Demonstrate responsibility to patients.	<ul style="list-style-type: none"> • Prioritize patient problems and work to resolve all existing or potential medication therapy issues before leaving for the day. • Communicate any medication therapy issues not resolved by the end of the day to the appropriate evening shift pharmacist. • Ensure patients have information and/or access to resources to obtain prescribed medication therapy. • Informs patients how to obtain their medications in a safe, efficient, and most cost-effective manner. • Reports RERs when errors are discovered
Goal R1.3: Prepare, dispense, and manage medications to support safe and effective drug therapy for patients.		
Objective Number	Objective	Associated Activities
1.3.1	(Applying) Prepare and dispense medications following best practices and the organization's policies and procedures.	<ul style="list-style-type: none"> • Perform order verification, check IV solutions prepared by technicians, and check other patient-specific medications prior to dispensing. • Correctly interpret appropriateness of a medication order before preparing or permitting the distribution of the first dose, including: <ul style="list-style-type: none"> ○ Identifying, clarifying, verifying, and correcting any medication order errors. ○ Considering complete patient-specific information. ○ Identifying existing or potential drug therapy problems. ○ Determining an appropriate solution to an identified problem. ○ Securing consensus from the prescriber for modifications to therapy. ○ Ensuring that the solution is implemented. • Prepares medication using appropriate techniques and following the organization's policies and procedures and applicable professional standards, including: <ul style="list-style-type: none"> ○ When required, accurately calibrates equipment. ○ Ensuring solutions are appropriately concentrated, without incompatibilities, stable, and appropriately stored.

		<ul style="list-style-type: none"> ○ Adheres to appropriate safety and quality assurance practices. ○ Prepares labels that conform to the health system's policies and procedures. ○ Medication contains all necessary and/or appropriate ancillary labels. ○ Inspects the final medication before dispensing. ● When dispensing medication products: <ul style="list-style-type: none"> ○ Follows the organization's policies and procedures. ○ Ensures the patient receives the medication(s) as ordered. ○ Ensures the integrity of medication dispensed. ○ Provides any necessary written and/or verbal counseling. ○ Ensures the patient receives medication on time. ● Maintains accuracy and confidentiality of patients' protected health information (PHI). ● Obtains agreement on modifications to medication orders when acting in the absence of, or outside, an approved protocol or collaborative agreement. ● Performs a credible double check of technician's work ● Assessment of aseptic technique by use of a GroMed test completed ● USP797 competencies completed and passed ● Demonstrates proper cleaning and garbing technique ● Understands pneumatic tube "dos and don'ts" ● Understands and applies policies regarding return and reuse of sterile products ● Assures medications are labeled appropriately ● Inspects final product before dispensing ● Understands stock solution process ● Performs appropriate labeling process for TPN ● Understands and applies appropriate beyond use dating ● Ensures the patient receives the medication on time Peds/NICU Double Check Process <ul style="list-style-type: none"> ● Utilizes weight based dosing for Peds/Neonates ● Demonstrates co-sign process
1.3.2	(Applying) Manage aspects of the medication-use process related to formulary management.	<ul style="list-style-type: none"> ● Work with other pharmacists on shift to check all products prepared by technicians and check products independently once competency evaluated by primary preceptor ● Follows appropriate procedures regarding exceptions to the formulary, if applicable, in compliance with policy.

		<ul style="list-style-type: none"> • Performs appropriate therapeutic interchanges according to policy • Ensures non-formulary medications are dispensed, administered, and monitored in a manner that ensures patient safety. • When a non-formulary or “patient’s own drug” is prescribed, ensure bar-coding of the medication is completed before dispensing. • Recommend formulary therapeutic alternatives for non-formulary medications, as appropriate.
1.3.3	(Applying) Manage aspects of the medication-use process related to oversight of dispensing.	<ul style="list-style-type: none"> • When appropriate, follows the organization’s established protocols. • Demonstrates commitment to medication safety in medication-use process. • Effectively prioritizes work load and organizes work flow. • Checks accuracy of medications dispensed, including correct patient identification, medication, dosage form, label, dose, number of doses, expiration dates, and properly repackaged and relabeled medications, including compounded medications (sterile and non-sterile). • Checks the accuracy of the work of pharmacy technicians, clerical personnel, pharmacy students, and others according to applicable laws and institutional policies. • Promotes safe and effective drug use on a day-to-day basis. • Understands the barcode process • Familiar with freight process of checking in the order & scanning each product • Understands the starter pack process • Tech check Tech program • Recognizes when light protection is indicated and performs accurate expiration dating

Competency Area R2: Advancing Practice and Improving Patient Care

Goal R2.1: Demonstrate ability to manage formulary and medication-use processes, as applicable to the organization.

Objective Number	Objective	Associated Activities
2.1.4	(Applying) Participate in medication event reporting and monitoring.	<ul style="list-style-type: none"> • Performs daily error reporting • Use currently available technology and automation that supports a safe medication-use process.



		<ul style="list-style-type: none"> Investigate, report, track and trend adverse drug events, medication errors and efficacy concerns using accepted institutional resources and programs
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Evaluation

The preceptor will provide both written and verbal formative feedback during the course of the rotation. Additional customized assessments and/or snapshots may be conducted at the discretion of the preceptor or directive of the RPD to assess the resident’s skill in a particular area.

PharmAcademic will be used for documentation of scheduled evaluations (both formative and summative per the chart below). The resident and preceptor will independently complete the evaluations. The resident and preceptor will then compare and discuss the evaluations. This discussion will provide feedback both on performance of the activities and resident self-assessment skills. Following discussion, preceptor will provide documentation of the discussion and correlation of resident self-assessment on the preceptor evaluation prior to submitting evaluation in PharmAcademic. Evaluations will be completed no later than due date specified.

What	Who	When – Due Dates (otherwise specified)
Learning Experience Summative Evaluation	Preceptor	End of each rotation
Preceptor Evaluation	Resident	End of each rotation