

VAMCHS Postgraduate Year Two (PGY2)
Geriatric Pharmacy Residency Program
Learning Experience Descriptions

VA



Orientation: Orientation is conducted at the VA Maryland Health Care System (VAMHCS) and in conjunction with the University of Maryland School of Pharmacy. During this experience, the resident will complete the VA requirements for New Employee Orientation. The resident will be granted computer access and will receive computer training for the hospital computer system. A general geriatric overview of practice sites will be provided with various preceptors. The resident will also orient at the School of Pharmacy with activities including introduction to Pharmacotherapy Rounds, and an overview of the wide array of teaching opportunities and other elective activities. The resident must participate in the teaching excellence day. The resident will orient to research, complete required research training and select a project by completion of orientation. The resident will also be provided with an overview to core longitudinal experiences during orientation.

Long-Term Care: The Loch Raven Community Living Center is a 100-bed long term care facility that cares for veterans with ≥ 3 impairments in activities of daily living. This block learning experience will provide the resident with an interdisciplinary experience in long term care, post-acute care, transitions of care, and rehabilitation. The resident will be exposed to long term care regulations for nursing homes, assisted living facilities, and hospice. The resident will perform drug regimen reviews, manage inpatient anticoagulation services, participate in medical and interdisciplinary team rounds, and serve as a drug information resources to the interdisciplinary team. Through these learning activities, core geriatric principles will be reviewed and emphasized through formal and informal methods (i.e. topic discussions, self-study, etc.).

Home Based Primary Care (HBPC): This is a longitudinal, ambulatory care clinic rotation. The HBPC program is part of ambulatory care services that serves generally geriatric patients who are homebound and thus unable to receive care in the VA primary care clinics. This program provides comprehensive primary care of the patient's chronic disease states. Because the goal is patient-centered care, each patient has an interdisciplinary team consisting of a clinical pharmacy specialist, nurse practitioner, registered nurses, social worker, psychologist, kinesiologist, dietician and administrative support staff that looks after them. Clinical Pharmacy Specialists participate on the team by assessing patient's overall medication management on home visits, telephone visits, and chart reviews, and by making therapy recommendations to providers. This rotation occurs at the VAMHCS Community Living Center/Loch Raven Campus.

Cardiovascular Lipid Risk Reduction Clinic: The lipid clinic serves as a centralized follow-up and monitoring service for patients with hyperlipidemia. Under supervision of the preceptor, the resident will provide direct patient care and provide consistent and appropriate follow-up to patients with hyperlipidemia. The resident will optimize patient care, with focus on older adults, through education, life-style modifications, and pharmacologic therapy based upon the most recent VHA guidelines and current literature. The resident will assist in the ordering and monitoring of laboratory tests. Medication titration and adjustment will be provided with timely follow-up to ensure patient safety with medication use.

Interdisciplinary Memory Disorders Clinic: This is an interdisciplinary, comprehensive geriatric assessment for high-risk elderly patients which assists primary care providers in the diagnosis and treatment of Alzheimer's Disease and other dementing disorders. The resident will be part of an interdisciplinary team and will be responsible for reviewing the medication regimens for appropriateness, adherence as well as assess the need for medications to address the consult questions.

HBPC Anticoagulation: The HBPC program is part of ambulatory care services that serves generally geriatric patients who are homebound and thus unable to receive care in the VA primary care clinics. Clinical Pharmacy Specialists add, discontinue, adjust, and monitor anticoagulation therapy in ambulatory care patients who requiring follow-up or perioperative management. Anticoagulation therapies typically include warfarin or direct oral anticoagulants (DOACs) but may also include low molecular weight heparin (LMWH) in patients being transitioned on or off oral anticoagulants where appropriate

Hospice/Palliative Care: The palliative care service provides end-of-life care to veterans at all three VAMHCS medical centers (i.e. Baltimore, Loch Raven, and Perry Point). They are an interdisciplinary team comprised of physicians, physician assistant, nurse practitioners, clinical pharmacy specialists, social workers, nurses, psychology, chaplaincy, and more. The resident will primarily practice at the Loch Raven Community Living Center in the 10-bed inpatient hospice ward but will also gain experience as part of the interdisciplinary team in the outpatient palliative care clinic once a week. The resident will be expected to actively participate in daily hospice patient care rounds, develop medication recommendations to optimize symptom management, implement their recommendations with the interdisciplinary team, and complete chart reviews.

Infectious Diseases/Antimicrobial Stewardship: The inpatient ID consult service assists the acute medical, intensive care (ICU), and community living center (CLC) teams with the management of various infectious syndromes. The ASP team (consisting of the infectious disease pharmacist and attending) monitors and evaluates antimicrobial use throughout the facility, including the CLC, and works in tandem with the ID consult service to ensure appropriate antimicrobial use. The resident will gain experience working with both teams, however the proportion of time spent with each team will be based on the needs/skills of the resident and at the discretion of the preceptor. Emphasis in this learning experience is placed on the pharmacotherapy of various infectious disease states and providing evidence-based, patient-centered medication therapy management.

Heart Failure Clinic: This clinic provides care to VA patients with heart failure. Patients are managed by physicians, nurse practitioners and a pharmacist. Patients are referred to this clinic for management of heart failure by other providers. These patients have been diagnosed with heart failure with a reduced ejection, secondary to either ischemic or non-ischemic cardiomyopathy. Patients' stages and symptoms range in severity. The pharmacist is responsible for a thorough evaluation of each patient they encounter, making therapeutic recommendations to the physicians, and counseling patients on medication therapy and non-pharmacological strategies to control their HF. When necessary, the pharmacist and other health care providers will consult other specialists to assist in the care of the patient.

Internal Medicine: The pharmacist is a permanent member of a dynamic teaching team. The clinical pharmacy specialists' roles include attending and actively participating in daily medicine attending rounds, providing pharmaceutical education to physicians, performing medication reconciliation throughout the hospital stay, processing discharge outpatient medications, providing face-to-face patient discharge counseling, providing new diabetic education, injection teaching, inhaler teaching, and documentation of patient care activities. The resident will gain experience working with the inpatient geriatric consult service.

Geriatric Pharmacy Administration: This learning experience will combine a variety of clinical pharmacy administrative activities and initiatives related to the geriatric population throughout the residency year. Different goals and objectives will be emphasized throughout the learning experience pending administrative needs at any given point throughout to allow the resident to gain insight and hands on experience with facility needs at any given point. Experiences include participation in updating pharmacy service Policies and/or Standard Operating Procedures, National and VISN initiatives such as cost initiative programs, multidisciplinary quality and performance improvement programs.

Residency Project/Research: The resident is required to conduct a residency project during the year. The project may be a service implementation/expansion project or may be a separate analysis of an existing ambulatory service or related to education or health care. Assistance with training requirements and navigating the Institutional Review Board (IRB) and VA Research and Development procedures is provided throughout the process if applicable. Residents are required to present at Eastern States Residents and Preceptors conference or other approved conference. Residents must prepare a report of their project in publishable format as part of the requirements for successful completion of their residency.

Pharmacy Education Series: (Journal Club, Case)

Journal Club: Journal Club is conducted on the 4th Thursday of every month throughout the residency year with the VAMHCS residents and preceptors. Journal club consists of presentations of a study from a high impact, peer-reviewed biomedical journal that evaluates use of drug therapy for the treatment or prevention of disease.

Case: The resident will also provide presentations and interactive workshops of case studies that highlight appropriate clinical management of a therapeutic problem.

Pharmacotherapy Rounds: The goal of Pharmacotherapy Rounds is to provide the participant's knowledge regarding the use of drug therapy to treat and prevent disease. Participants will learn to evaluate the scientific literature and discuss its applicability to clinical practice. Participant will learn to present complex concepts and scientific data in a clear and concise manner. Presentation of a minimum of one formal presentation is required. Residents are required to attend a minimum of 8 sessions.

Teaching: The resident will be responsible for co-teaching at the University of Maryland School of Pharmacy. A minimum of two teaching activities per semester must be conducted during the residency year and approved by the RPD or PGY 2 preceptor designee. Teaching activities may vary based on resident interest and experience, and include lectures, leading small group discussions, assessing Pharm.D. students on clinical skills. Residents work with faculty as they prepare for teaching activities. The resident is expected to attend Teaching Excellence Day and complete the teaching orientation at the University of Maryland School of Pharmacy.

Precepting: The resident will serve as a co-preceptor to APPE students assigned to Home Based Primary Care. The responsibilities of the PGY 2 resident as a co-preceptor will be based upon prior experience in the learning experience and prior teaching experience.

This program participates in the ASHP Residency Matching Program through the National Matching Service. The residency site agrees that no person at this site will solicit, accept, or use any ranking-related information from the residency applicant. This program is currently under ASHP Candidate Status.