Postgraduate Year Two (PGY2) Pediatric Pharmacy Residency Program

Introduction

The MUSC Medical Center is a 690-bed tertiary care academic medical center providing care for patients of Charleston and throughout the state of South Carolina. In addition to general medical and surgical services, MUSC offers a variety of specialty services including cardiothoracic, transplant and neuro surgery, level I trauma center, digestive disease, psychiatry and level III neonatal intensive care. The medical center is comprised of four hospitals, Ashley River Tower, Children's Hospital, Institute of Psychiatry, and University Hospital. Outpatient facilities include the Hollings Cancer Center, Ashley River Tower Clinics, Rutledge Tower Clinics, Family Medicine Center and affiliated faculty practice ambulatory care centers.

Included in the patient population served by MUSC is the MUSC Children's Hospital which is dedicated to enhancing the health of children throughout South Carolina and to providing an environment that supports excellence in pediatric patient care, teaching, and research. Built in 1987, the Children's Hospital is South Carolina's largest and most comprehensive pediatric health care center. MUSC Children's Hospital has earned top rankings from U.S. News & World Report, American Health Magazine, and The Best Doctors in America. Child magazine continues to rank MUSC Children's Hospital as one of the top pediatric facilities in the United States.

The Department of Pharmacy Services provides service to patients on a 24 hour basis through multiple inpatient and ambulatory pharmacies to fulfill the department's mission, vision, and goals of providing optimal pharmaceutical care to all patients. Pharmacy services for inpatient pediatric patients in the MUSC Children's Hospital include 24 hour per day comprehensive clinical pharmacy services provided by full-time pediatric clinical pharmacy specialists. Clinical pharmacy specialists are assigned to the pediatric, neonatal, and pediatric cardiothoracic intensive care units, general pediatrics, pediatric surgery, and pediatric hematology/oncology 12 months per year. Other services, as well as after hours and weekends, are covered by the 24 hour per day, 7 day per week Pediatric Clinical Pharmacy On-call Service. Pediatric ambulatory clinics are primarily housed in the Rutledge Tower Clinics which is served by the Rutledge Tower Pharmacy.

Purpose

The Postgraduate Year Two (PGY2) Pharmacy Residency in Pediatrics is designed to develop accountability; practice patterns; habits; and expert knowledge, skills, attitudes, and abilities in the area of pediatric pharmacy practice. The Pediatric Pharmacy Residency program builds upon the broad-based competencies achieved in a PGY1 residency, transitioning the resident from generalist care to providing specialized care to pediatric patients. It will equip the resident to participate as an integral member of an interdisciplinary team caring for children, assuming responsibility for pharmaceutical care of these patients. The resident is also prepared for practice leadership. Therefore,

the Pediatric Pharmacy Residency Program provides a resident with opportunities to function independently as a practitioner by conceptualizing and integrating accumulated experience and knowledge and transforming both into improved medication therapy for children. The residency also provides opportunities for teaching, research, and leadership. A resident who completes successfully an accredited PGY2 Pharmacy Residency in Pediatrics should possess competencies that enable success as a clinical pharmacist in the chosen area of clinical practice with skills in drug distribution as well as drug information; success as a clinical faculty member with responsibilities for a patient care and precepting pharmacy students and residents, and attainment of board certification in Pharmacotherapy (BCPS).

Outcomes

Specific residency goals and objectives will be established in the beginning of the residency modified according to the resident's interests and previous experiences, and the input of the resident's advisor, if applicable, and the residency program director (RPD). To meet the purpose of the residency, the resident will advance to achieve the following outcomes:

- Serve as an authoritative resource on the optimal use of medications in children.
- Optimize the outcomes of the care of children by providing evidence-based, patient-centered medication therapy as an integral part of an interdisciplinary team.
- Manage and improve the medication-use process in the MUSC Children's Hospital.
- Demonstrate excellence in the provision of training or educational activities for health care professionals and health care professionals in training.
- Promote health improvement, wellness, and disease prevention.
- Sustain the ongoing development of expertise and professionalism in the practice of pediatric pharmacy.
- Conduct pediatric pharmacy practice research.
- Publish on pediatric drug therapy-related topics.

The Residency Experience

The experiences that can be gained from this site by a pediatric pharmacy resident include a balance of acute and ambulatory patient care that spans the range of pediatric patients (general pediatrics, pediatric and neonatal intensive care, cardiology and cardiothoracic intensive care, surgery, hematology/oncology, psychiatry, neurology, pulmonary, and infectious diseases). The resident will be involved with and learn all aspects of providing pharmaceutical care to children in both the inpatient and outpatient settings. The resident will also have various levels of involvement in clinical research, department of pharmacy service projects, and teaching of doctor of pharmacy students as well as other health professions students and practitioners. Didactic work includes preparation/participation in bi-weekly Topic Discussions.

Learning Experiences	
Orientation(includes orientation to staffing), if applicable	1 month
Inpatient general pediatrics	1 month
Inpatient general pediatrics – teaching	1 month
Pediatric hematology /oncology	1 month
Pediatric intensive care	2 months
Neonatal intensive care	2 months
Pediatric surgery	1 month
Pediatric cardiothoracic intensive care	1 month
Electives (any of the above or Pediatric Infectious Disease, Pediatric Psychiatry, or others approved by the RPD)	1-3 months

Note: Either November/December or December/January is scheduled as a block so that one of the above 1 month rotations will be 2 months.

Teaching Requirements
Required

- Providing at least one lecture in the following:
  - Pharmacotherapy for PharmD students – usually during pediatric section
  - Pharmacology for Pediatric Nurse Practitioners

- Participating as small group facilitator for Foundatio ns Lectures for medical students completing pediatric rotations – topic asthma
- Co-preceptor of PharmD students on pediatric rotations at least one month
- Leading case and topic discussions with PharmD students.
- Inservices to pharmacy, medical, and nursing staff (inpatient and outpatient)

Preceptors

Kathy Chessman, PharmD, FCCP, BCPS, BCNSP
Professor, Clinical Pharmacy and Outcome Sciences; Clinical Pharmacy Specialist, Pediatrics; Residency Program Director
Research/practice: Pediatric surgery, nutrition, general pediatrics

Dominic Ragucci, PharmD, BCPS
Clinical Assistant Professor; Clinical Pharmacy Specialist, Pediatrics; Coordinator, Clinical Pharmacy Services, Pediatrics
Research/Practice: Pediatric hematology/oncology, general pediatrics

Sandra Garner, PharmD, BCPS
Associate Professor, Clinical Pharmacy and Outcome Sciences; Clinical Pharmacy Specialist, Pediatrics
Research/Practice: General pediatrics, neonatology, pulmonary

Toby Cox, PharmD, BCPS
Clinical Assistant Professor; Clinical Pharmacy Specialist, Pediatrics
Research/practice: Neonatology, general pediatrics

Don Wiest, PharmD, BCPS
Associate Professor, Clinical Pharmacy and Outcome Sciences; Clinical Pharmacy Specialist, Pediatrics
Research/Practice: cardiology, intensive care, general pediatrics

Jill Thompson, PharmD, BCPS
Clinical Assistant Professor; Clinical Pharmacy Specialist, Pediatrics
Research/practice: Pediatric ICU/pediatric surgery, pediatric emergency medicine

Walt Uber, PharmD
Clinical Professor; Clinical Pharmacy Specialist, Cardiothoracic Surgery/Heart Transplant
Research/Practice: Pediatric CTICU, heart transplant

Amy Vandenberg, PharmD, BCPP
Clinical Assistant Professor; Clinical Pharmacy Specialist, Psychiatry
Research/Practice: child psychiatry, psychiatry

The resident will also have significant interactions with the following leadership staff:

Matt Maughan, PharmD
Manager, Children's Hospital Pharmacy Services

Scott Loveland, PharmD
Coordinator, Children's Hospital Pharmacy

On-site interviews will be required.

For further information contact:

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