General Pediatrics Rotation PGY1

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Learning Experience Description
The resident on this rotation will encounter general pediatric and specialty medicine (pulmonary, GI/neurology, or cardiology). The resident will provide pharmaceutical care for patients on their assigned service, make appropriate drug therapy recommendations, and perform medication reconciliations by reviewing home medications to ensure continuity of care. The resident will be the pharmacist for the team, taking care of all the daily responsibilities, including pharmacokinetics, monitoring for drug interactions, and drug information.

A typical day will start with preparing for patients, and attending morning conference. After morning conference, the resident will participate in patient rounds. The rounding team is multidisciplinary; a typical rounding team consists of a ward attending, a specialty medicine attending, fellows, medical residents, medical interns, medical students, dietitians, and case managers. After rounds, the resident will follow-up on any outstanding medication-related issues/drug information questions. The resident will meet with the preceptor in the afternoons to discuss patients and assigned topics as needed.

Topics to be covered could include developmental pharmacology, cystic fibrosis, asthma, rule out meningitis/sepsis in febrile neonates, bacterial infections, congenital heart defects, nephrology, small bowel syndrome, seizures in infants and children, and other disease states that arise throughout the month.

Learning Experience Goals
R1.4: Demonstrate ownership of and responsibility for the welfare of the patient by performing all necessary aspects of the medication-use system.
R1.5: Provide concise, applicable, comprehensive, and timely responses to requests for drug information from patients and healthcare providers.
R2.1: As appropriate, establish collaborative professional relationships with members of the health care team.
R2.2: Place practice priority on the delivery of patient-centered care to patients.
R2.3: As appropriate, establish collaborative professional pharmacist-patient relationships
R2.4: Collect and analyze patient information.
R2.5: When necessary, make and follow up on patient referrals
R2.6: Design evidence-based therapeutic regimens.
R2.7: Design evidence-based monitoring plans.
R2.8: Recommend or communicate regimens and monitoring plans.
R2.9: Implement regimens and monitoring plans.
R2.10: Evaluate patients’ progress and redesign regimens and monitoring plans.
R2.11: Communicate ongoing patient information
R2.12: Document direct patient care activities appropriately
R3.1: Exhibit essential personal skills of a practice leader.
R6.1: Utilize medical informatics
E6.1: Identify a core library, including electronic media appropriate for the practice setting
E2.5: Resolves conflicts through negotiation.
E7.2: Communicates effectively
E7.3: Balance obligations to one-self, relationships; and work in a way that minimizes stress
E7.4: Manage time to effectively fulfill practice responsibilities.

**Daily Schedule**

The resident will be responsible for rounding on each patient either with their team or individually depending on the service for morning rounds. Identification of potential drug therapy problems, design and modification of drug regimens, identification of adverse drug reactions, therapeutic drug monitoring, provision of drug information, identification of drug interactions and patient counseling are core components of the rotation.

The preceptor will be available to the resident throughout the rotation for consultation, patient review, topic discussions, etc. The resident’s learning is predicated not only on the above responsibilities but also dedication to patient care and professional interaction.

**Learning Experience Requirements/Responsibilities**

- Effectively use the institution’s technology and automation systems (StarPanel, HEO, HMM, AdminRx) to collect, analyze, and monitor patient data relating to pharmacotherapy (R1.4, R2.4, R2.6)
- Attend conferences and other meetings as appropriate (R2.1, R2.4)
- Actively participate in rounds (R2.1, R2.2, R2.3, R2.8, R2.9, R2.10, R3.1, RE2.5, E8.2)
- Participate in the education of team members with regards to pharmacotherapy-related questions/issues (R1.5, R2.1, R3.1)
- Review profiles for patients and communicate therapy recommendations to the team (R2.1, R2.2, R2.3, R2.8, R2.9, R2.10, R2.11, RE2.5, E7.4, E8.2)
- Discuss patient cases and disease topics with preceptor (R2.5, R2.6, R2.9)
- Assist with precepting PharmD students who may be concurrently training on the service (R3.1)
- Actively participate in the ADR reporting program (Veritas) (R1.4)
- Complete projects/in-service presentations as requested by preceptor (E7.4)

**Optional: (PGY1 Residency Requirements)**

- Care Plan with Self Evaluation (R2.1-2.10; E7.2; E6.1)
- Drug Therapy Problem Solving with Self Evaluation (R1.2; R1.4; RE 2.5)
- Patient Counseling with Self Evaluation (E7.2)
- Documentation with Self Evaluation (R2.12)
- Researched Drug Information (R1.5)

**Method of Evaluation:**

Evaluation of residents will be based on the Resident Learning System (RLS). Evaluation will consist of a summative evaluation upon rotation completion, in addition to any criteria-based checklists submitted by the resident. The specific goals and objectives, on which the resident will be evaluated, will be provided at the beginning of the rotation. Residents will be requested to complete a self-evaluation for all evaluations. Residents will also be required to complete a learning experience evaluation and a preceptor evaluation. Evaluations are completed in the evaluation database. All work to be evaluated on rotation must be turned in for review no later than the last day of the rotation.