Requirements for Successful Completion of PGY2 Critical Care Residency

Completion of the Residency Orientation Program
A formal orientation program for residents is scheduled at the beginning of the program. The resident is expected to complete all orientation activities. This orientation period is used to introduce the incoming residents to the Department of Pharmacy, Clinical Pharmacy Services, PGY2 Critical Care Residency Program, and to outline the expectations for the residency year.

Completion of all Rotational and Longitudinal Learning Experiences
The resident will complete all rotational and longitudinal assignments by the end of the rotational experience or at a prescribed deadline decided between the resident and preceptor/residency program director. If rotation goals and objectives are not of satisfactory progress (SP) or achieved (ACh), a status of needs improvement (NI) will be assigned on the experience. Items identified as requiring NI will be added to the resident's customized plan to develop a road map for achieving satisfactory progress (SP) in the respective area in future experiences. All PharmAcademic Evaluations must be completed prior to the end of the residency year.

Completion of a Residency Project
The resident is required to participate in a longitudinal project. The resident will collaborate with pharmacy preceptors and any collaborators to identify, design, execute and report the results of a critical care pharmacy practice research project. In addition, the resident is required to attend all applicable subsections of PRIME (Pharmacy Research Institute for Medication Use and Effectiveness) meetings as determined by the residency program director. Satisfactory performance as determined by the Residency Program Director and/or project preceptors is required for successful completion of the program.

Preparation of a Manuscript Acceptable for Publication
The resident is required to write at least one manuscript suitable for publication in a peer-reviewed biomedical journal. This manuscript may include a review article, case report/series, findings from their research project, etc. The topic of this written work will be determined by the resident and residency program director based on the resident's background, experience and goals. Editorial assistance by a preceptor is required. The resident must be first author and responsible for submission and revisions to a journal. The resident must submit a manuscript for publication within 6 months of graduation or risks losing primary authorship.

Completion of a Medication Use Evaluation
The resident is required to participate in a Medication Use Evaluation (MUE). MUEs will be performed in conjunction with the Residency Program Director and/or the Drug Information Center Preceptor. Satisfactory performance as determined by the Residency Program Director and/or Drug Information Center Preceptor is required for successful completion of the program. The findings of the MUE will be presented as a poster at the ASHP Midyear Clinical Meeting.

Completion of a Continuing Education Program and Other Required Presentations
The resident will present one continuing education program during the residency program. The goal of the presentation is to improve the resident's communication skills and techniques, literature evaluation, and understanding of the continuing education process. The seminar topic will be selected by the resident with guidance from at least one preceptor, and should involve a therapeutic or practice management controversy, developing clinical or practice management research, or therapeutic area. The resident is required to present at two journal clubs, two case-conference presentations, and the pharmacy morbidity and mortality.

Completion of a Medication Monograph and Development/Revising of a Medication Policy/Guideline
The resident is responsible for developing a medication monograph evaluating a medication that has been requested to be added to the system's medication formulary and revising/developing a policy/guideline for a medication. The medications selected for these experiences will be one relevant to a critically ill population. This experience will be performed in conjunction with a critical care preceptor and/or the Drug Information Center Preceptor. Satisfactory performance as determined by the Residency Program Director and/or Drug Information Center Preceptor is required for successful completion of the program. The resident will be responsible for presenting the work to the respective committee if scheduling within the residency year allows.
Completion of All Required Weekend Clinical ICU Staffing
The resident will be scheduled to cover an ICU clinical position every third weekend for the residency year.

Attendance and Presentation at the Great Lakes Residency Conference
The Great Lakes Residency Conference is held in the spring and is a forum where residents share experiences and expertise. The resident will prepare and deliver a presentation on their research project or MUE which will be evaluated by a preceptor outside of the program.

Attendance at Required Professional Meetings
The resident is required to attend the ASHP Annual Midyear Meeting to assist with recruitment of future residents. The resident is required to attend one additional professional meeting for critical care healthcare professionals.

Participation in Henry Ford Hospital Multi-Disciplinary Committee Meetings
The resident will join the system critical care council multidisciplinary committee as a non-voting member. The resident will report on progress to the residency program director

Involvement in a Community Event
The resident must be involved in the planning and conducting a community event for the department of pharmacy. This may be a fundraising event or participation in a multidisciplinary event to promote education about specific disease state.

Completion of Code Blue Experience and Completion of Pharmacy Department Competencies
The resident will obtain BLS and ACLS certification and maintain these certifications throughout residency. The resident will develop and execute a mock code simulation training for PGY1 residents. They will also complete all Department of Pharmacy Competencies. Satisfactory completion of departmental competencies will be determined by the Operational Pharmacy Manager.

Completion of the PGY2 Critical Care Disease State Checklist
The resident is responsible for completing the PGY2 Critical Care Residency Diseases and Conditions Checklist (i.e. Appendix 1 from the PGY2 Critical Care Program Residency Competency Areas, Goals, and Objectives).

Completion of an Exit Interview and Residency Portfolio
The resident will complete a formal exit interview with the RPD during the last rotation of the residency year. The resident is required to develop an electronic file that contains final items for the Research Project, MUE, Final CE Presentation, In-services, GLPRC Evaluations, Manuscript, Final Policy/Guideline, Final Monograph, Committee Work, PGY2 Critical Care Disease State Checklist, Miscellaneous Items (i.e. Rapid fire cases, Journal Club or Professional Development Presentations, fliers/plans for Community Fair, etc).

Achievement of PGY2 Critical Care Residency Learning Objectives
For successful completion of the residency, the resident MUST have “Achieved for Residency (ACHR)” for at least 80% of the Required Critical Care PGY2 Residency Objectives, including 100% of the objectives from R1: Patient Care and no “Needs Improvement”, as assessed by the PGY-2 steering committee. Verbal comments from preceptors and evaluations of the resident learning experiences will be used by the steering committee to determine whether or not the resident has earned a “Satisfactory Progress” or “Achieved” on an objective. This assessment will occur on a monthly basis. Should the Steering Committee determine that the resident has “ACHR” a learning objective, the objective will continue to be evaluated throughout the residency, so that the resident can benefit from additional preceptor comments.

For the PGY2 Critical Care Residency, the following definitions will be used in evaluating resident progress:
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; however, the resident is not yet ready to perform the objective independently.
Achieved (ACH) – PGY2 resident is performing practice skills independently and consistently.
Achieved for residency (ACHR) - PGY2 resident is performing practice skills independently and consistently and skill level is approaching that of an entry level clinical specialist in the practice area.

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