

Infectious Diseases PGY-2 at South Texas Veterans Health Care System

Audie L. Murphy Hospital, San Antonio, TX

in conjunction with The University of Texas at Austin College of Pharmacy

This Specialty Practice Residency in Infectious Disease is designed to provide a challenging training opportunity for individuals desiring to develop clinical competency in the specialized area of infectious diseases pharmacotherapy. The 12-month training period incorporates both outpatient and inpatient rotations devoted to the development of skills essential for the delivery of pharmaceutical care with a primary focus on infectious diseases.

LOCATION:

San Antonio, Texas

LENGTH OF RESIDENCY:

1 year

START DATE:

July – at the beginning of a pay period

REQUIREMENTS:

U.S. Citizen

Pharm.D. degree from an ACPE-accredited institution

Eligible for licensure in Texas

Completion of an ASHP accredited Pharmacy Practice Residency

STIPEND:

Competitive salary plus accrued vacation and sick leave and 10 federal holidays. Health insurance is available.

CORE ROTATIONS (9 months): The resident spends three months as an active member of the Adult Infectious Disease Consult Service, providing services in both the STVHCS and the affiliated county teaching hospital of University Health System. Together, these facilities represent approximately 600 adult inpatient beds. The ID Consult Service sees approximately four new consults daily, and maintains an active patient load of around 12 to 16 patients. As a member of the ID Consult Service, the ID pharmacy resident is responsible for participating in the design and implementation of appropriate therapeutic regimens, monitoring the outcome of therapy, assisting in the application of pharmacokinetic principles to individualize therapy as needed, and in the provision of patient, disease and drug specific information to other members of the multi-disciplinary consult service. A significant number of patients seen by the

ID Consult Service are cases of acute or chronic fungal infections, cases of infective endocarditis or tuberculosis, and serious infections in post-trauma/surgery patients.

The resident spends one month assigned to the Inpatient HIV Service. The resident will be actively involved in the care of acutely ill HIV-infected patients, with a variety of associated opportunistic infections.

The resident will spend one month in the Immunosuppression and Hepatology clinics. This rotation allows the resident to become fully engaged in the outpatient setting. Knowledge gained during this month will assist the resident in the longitudinal experience and inpatient HIV service.

Three months of Antibiotic Management / Stewardship are required. This rotation involves reviewing daily cultures and antibiotics throughout the hospital and enforcing formulary use of antimicrobials. Additional projects may be completed in conjunction with the Antimicrobial Stewardship Committee including presentation of ongoing activities at committee meetings.

The resident also spends time rotating through the microbiology, fungal and viral laboratories. This experience provides a chance for the resident to appreciate the sophisticated procedures employed in these areas and to establish basic skills in microbiology techniques.

ELECTIVE ROTATIONS (3 months): Elective rotations are offered based on the particular strengths and weaknesses of the resident. Available elective rotations include: solid organ transplant, stem cell transplant, oncology, general medicine, MICU, academia, and laboratory or clinical research. The resident may also choose to gain additional experience in any of the core rotations. This variety of options allows the program to provide important experience and training in selected areas that will enable the resident to be broadly functional and competitive for future career options.

LONGITUDINAL RESPONSIBILITIES: The resident is assigned a longitudinal clinical practice site in the Immunosuppression Clinic (HIV Clinic) for one half-day per week for half of the residency year. The resident learns how to care for HIV-infected patients in an ambulatory care setting, observing the natural history of the disease and its therapy. The resident is responsible for participating in the design of antiretroviral regimens, interpreting resistance tests, monitoring the outcome of therapy, and intensive patient counseling.

The resident will also have a clinical practice site in the Hepatology Clinic for one half-day per week for the second half of the year. The resident will participate in initiation and follow-up of HCV treatment in the ambulatory care setting. The resident is responsible for assessment of potentially significant drug interactions and patient counseling regarding appropriate administration of and adherence to HCV treatment regimens.

The resident will be responsible for an independent longitudinal research project. In addition, the resident is expected to participate in ongoing collaborative research projects. The primary

nature of these protocols centers on antibacterial, antiviral, and antifungal therapeutics and drug development.

The resident will lead weekly ID journal club and infectious disease topic discussions. These small group discussions are attended by pharmacists, physicians, pharmacy residents and pharmacy students. The resident also has the opportunity to attend several weekly didactic lectures and case conference discussions.

The resident will give a major presentation at UTHSCSA Pharmacotherapy Rounds. These presentations are well attended by pharmacists, residents and students and focus on new and interesting or controversial pharmacotherapy topics.

The resident is also expected to significantly contribute to a manuscript to be submitted for publication in a professional journal. This can be a book chapter, case report with literature review, original research article, or review article.

FACULTY APPOINTMENT: The resident is jointly appointed as a Clinical Instructor in the Department of Pharmacology, The University of Texas Health Science Center at San Antonio and The University of Texas at Austin College of Pharmacy. In this capacity, the resident participates in the supervision of Doctor of Pharmacy students assigned to the ID elective rotation, the HIV elective rotation, and in didactic lectures in infectious disease therapeutics.

EVALUATIONS: To ensure that the goals and objectives established for each resident are being met, the resident meets regularly with the primary preceptors to discuss patients, assigned topics, or other issues as necessary. During the course of the year, readings on major ID topics will be assigned and discussed with the resident. Formal evaluations are completed using PharmAcademic.

The residency will follow the ID specific Specialty Residency Standards and Objectives established jointly by ASHP and SIDP.

CONTACT:

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