Contact Us

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Postgraduate Year One Pharmacy Residency

About the Training Site

With a reputation for excellence, innovation, and extraordinary care of our Nation’s heroes, VA Puget Sound strives to lead the nation in terms of quality, efficiency, and public service through its proven record of innovation and extraordinary care of Veterans. As the primary referral site for the VA's northwest region, VA Puget Sound provides care for Veteran populations encompassing Washington, Alaska, Montana, Idaho, and Oregon.

Since 1923, VA Puget Sound Health Care System (VAPSHCS) has distinguished itself as a leader in teaching, research, and patient care while earning prestigious recognition as part of the largest health care network in the country. It is the privilege of everyone who works here to serve the health care needs of more than 105,000 Veterans living in the Pacific Northwest. A history of the American Lake and Seattle Divisions can be found online at www.pugetsound.va.gov.

VA Puget Sound Pharmacy Mission

The Mission of Pharmacy and Nutritional Care at VA Puget Sound is to provide patient centered Pharmaceutical and Nutritional Care to Veteran patients. It integrates the knowledge and skills of pharmacists, dietitians, pharmacy technicians and diet technicians to provide comprehensive care, and promotes acceptance of employee responsibility for nutritional and medication related outcomes.

VA Puget Sound Pharmacy Vision

To be recognized as the leader in the VA for integrated pharmaceutical and nutritional care excellence, operational effectiveness, and continual improvement through innovation and evidence-based practice.

Residency Purpose Statement

The VA Puget Sound Health Care System PGY1 pharmacy residency program builds on Doctor of Pharmacy (Pharm.D.) education and outcomes to contribute to the development of clinical pharmacists responsible for medication-related care of patients with a wide range of conditions, eligible for board certification, and eligible for postgraduate year two (PGY2) pharmacy residency.
Residency Program Structure

Clinical Rotations

The VA Puget Sound Health Care System PGY1 pharmacy residency program consists of 10 block and 3 longitudinal clinical rotations. The 12 month residency also includes a 4 week orientation and 4 administrative weeks placed at strategic times throughout the year. Block rotations are generally 4 weeks in length and currently include 8 required and 2 elective learning experiences. Longitudinal learning experiences consist of weekly half-day rotations that span 4 to 5 months. These experiences provide residents with continuity that block learning experiences may not be able to provide. Residents select 3 longitudinal rotations for the year. Rotations subject to change based on feedback and preceptor availability.

Other Longitudinal Experiences

Longitudinal Residency Project — Each PGY1 pharmacy resident will complete an original project, typically a quality assurance/quality improvement project. Residents are required to present their findings in a research poster at ASHP Midyear Clinical Meeting, a regional resident conference podium presentation, and a final manuscript.

Weekend Staffing — Residents are expected to complete a minimum of 12 staffing weekends per residency year in both the inpatient and outpatient pharmacy.

Clinical Conference (CE presentation) — Pharmacy clinical conferences are an opportunity to provide ACPE accredited continuing education (CE) to pharmacy staff. Topics range from specific drugs and/or drug classes to disease state management and updated practice guidelines.

Local Criteria For Use Development (CFU) — Residents are required to develop and present one local criteria for use to the Pharmacy and Therapeutics committee. Drug or drug class assignments are assigned by the formulary program manager based on local use of the drug or drug class and lack of national CFU

Chair of a Committee — To provide additional leadership opportunities and distribute workload, residents are required to actively and equally contribute to the preparation and planning for residency related events, conferences, and the annual recruitment cycle

Chief Resident Block — Each resident will be assigned a Chief Resident role for a six to seven-week period in which they will act as the liaison between the Residency Program Director and the resident cohort
Incoming PGY1 residents will have 4 weeks of scheduled orientation. Administrative tasks and orientation to the office and facility will take place at this time. This will include a full review of the program structure, policies and procedures, and all relevant accreditation standards, competencies, goals and objectives required for completion. Additionally, residents will be oriented to the pharmacy department at VA Puget Sound and will receive computer and EHR training as well as operational workflow training. Workshops will be held regarding QA/QI, burnout prevention, and time management. Lastly, residents will have opportunities to meet the preceptors and make selections for projects during this time.

**Primary Care Clinic—Seattle or American Lake**

The Primary Care Clinic (PCC) rotation provides the resident with the skills to perform the responsibilities of a primary care clinical pharmacy specialist. The resident attains a well-rounded knowledge base of primary care disease states and therapy guidelines. Residents perform comprehensive medication and disease state management for patients (primarily involving diabetes, hypertension and dyslipidemia) under their preceptor’s scope of practice. By the end of this rotation, residents develop the skills to conduct a pharmacy clinic visit that ensures safety and efficacy of medication therapy. The resident works directly with providers, nursing staff, and other team members to gain written and verbal communication skills to function as a patient-provider liaison. This rotation happens concomitantly with the COE rotation during an 8-week block. Primary care is located either at the Seattle or American Lake campus.

**Center of Education in Interprofessional Collaboration**

The VA Puget Sound, Seattle Division is maintaining a VA Center of Excellence (COE) legacy site in interprofessional primary care education. The COE’s mission is to promote the advanced education of interprofessional teams, thereby creating clinical leaders who are able to deliver patient-centered care, transform delivery of healthcare services, and improve health outcomes. Pharmacy residents will actively partake in this innovative program by providing hands-on didactic education and pharmacy consultation for medical residents and nurse practitioner students enrolled in this curriculum. Pharmacy residents will participate in weekly collaborative practice care plans as well as monthly panel management. This rotation happens concomitantly with the primary care rotation during an 8-week block. COE is located on the Seattle Campus.
General Internal Medicine

The resident will participate with a general medicine team in daily activities, which include rounding with the interprofessional team. The resident will monitor drug therapy and outcomes, provide drug information to the medical team, and provide patient/family education and medication counseling. The resident will be involved with warfarin and vancomycin monitoring as well as formulary management. The purpose of this general medicine rotation is to provide exposure and education in the care of patients requiring acute inpatient hospitalizations. The rotation will be focused on understanding pharmacotherapy and using evidence-based literature to develop therapeutic regimens.

Intensive Care Unit (Selective)

Surgical Intensive Care Unit (SICU)

The purpose of the SICU rotation is to allow the resident to gain experience in critical care medicine relative to surgery. It is designed to provide an intense focus on critical care, including pathophysiology and disease/medication management. Emphasis will be placed on evidence-based critical care concepts and pharmacotherapy while assuming responsibility for medication therapy outcomes. The resident will assert an active role as the pharmacist on the multidisciplinary team through development, assessment, and ongoing monitoring of medication therapy. They will be involved in daily activities and direct care involved in peri-operative management of patients in the SICU. The resident will work in collaboration with other healthcare providers (physicians/resident physicians, ARNPs, PA-Cs, nurses, nutritionists, and respiratory therapists) to understand, develop, and monitor therapeutic plans.

Medical Intensive Care Unit (MICU)

The goal of this clinical experience is to provide the pharmacy resident with unique opportunities to develop, manage, and optimize pharmacotherapeutic plans for patients who require an elevated level of medical care. These experiences are intended to form a framework for gaining insight into the realm of critical care medicine that may serve as the foundation for future career opportunities. Emphasis will be placed on evidence-based critical care concepts and pharmacotherapy while assuming responsibility for medication therapy outcomes. The resident will serve an active role on the multidisciplinary team, including presence on daily rounds. This will necessitate professional collaboration with other healthcare providers to ensure that pharmacotherapy is optimized for patients’ specific needs. Other valuable opportunities on this rotation will include education of medical, pharmacy, and nursing staff on topics pertinent to pathophysiology and disease state/medication management in the MICU.
Oncology

The resident will participate in daily activities in the care and management of patients receiving treatment for a variety of oncologic disorders including solid tumors, lymphomas, and leukemias. This rotation includes provision of care primarily in the outpatient/clinic oncology setting. Focus will be on understanding treatment, managing side effects, and managing symptoms related to patients’ disease process. By the end of this rotation, the resident will have developed pharmacy practice skills in medication review, appropriate laboratory monitoring, and implementation of treatment plans in the setting of a team-based multidisciplinary cancer care clinic.

Bone Marrow Transplant Unit

The resident will provide direct patient care to Bone Marrow Transplant Unit (BMTU) patients in collaboration with the multidisciplinary team. Direct responsibilities include attending interdisciplinary rounds, TPN management, and making recommendations to optimize drug therapy (immunosuppression, infection prophylaxis, etc.) throughout the transplant process. The resident will also have medication counseling opportunities and act as a preceptor to fourth year pharmacy students. Precepting responsibilities include facilitating topic discussions and helping students prepare for their presentations.

Pharmacy Administration and Management

The pharmacy administration and management rotation provides the resident with skills to perform pharmacy practice management and leadership. This rotation also allows the resident to become familiar with departmental planning and program management. The resident will work with members of the leadership team including clinical and operational supervisors, the formulary management team, medication safety pharmacist, and PGY1 residency program director. During this rotation, the resident will complete multiple projects including a medication use evaluation (MUE) to be presented to pharmacy leadership and P&T committee as relevant.

Outpatient/Formulary Management

The outpatient pharmacy and formulary management rotation provides the resident with the skills to perform operations and patient care within an outpatient pharmacy as well as become proficient in formulary management. The resident will become familiar with the common duties and responsibilities of an outpatient pharmacist including processing pending prescriptions, patient counseling, and triaging provider issues. Additionally, the resident will develop formulary management skills including the process of approving and denying non-formulary medications, adjudicating appeals, and working with the formulary and pharmacoeconomics team on projects. The resident will develop written and verbal communication skills involved in pharmacy practice management and leadership.
Elective Block Rotations

Home Based Primary Care

Home Based Primary Care (HBPC) is a unique model of interdisciplinary health care that provides primary care services to Veterans in their homes. Residents will deliver comprehensive care and develop skills to conduct pharmacy home visits as well as collaborate with nurse practitioners, psychologists, dietitians and various other disciplines to ensure safety and efficacy of medication therapy. Residents will attain a well-rounded foundation of primary care disease states and therapy guidelines and will function independently in providing teaching to nursing staff regarding medication therapy in older adults. Other responsibilities include performing extensive chart reviews and writing comprehensive new and 90-day medication review notes. The resident will also have opportunities to perform comprehensive medication management under the HBPC pharmacist scope of practice and participate in weekly interdisciplinary team meetings.

American Lake Primary Care (Elective)

The American Lake Ambulatory Care rotation allows the resident to gain experience working in both the Women's Health Clinic and Geriatric Clinic primary care interprofessional teams at the American Lake Campus. The resident will work directly with patients as well as providers, nursing staff, and other team members to provide optimal health care to Veterans. Responsibilities include performing disease state management (primarily hypertension, diabetes, women’s health, and hyperlipidemia), counseling patients on new medications, and serving as a drug information resource. There will also be opportunities to teach group classes (anticoagulation, diabetes, weight management) and participate in other specialty clinics at the site (Mental Health, Addiction Treatment Clinic, Hematology Clinic, and Clozapine Clinic).

Antimicrobial Stewardship

The Antimicrobial Stewardship/Infectious Disease rotation is a learning experience focused on providing care for patients with acute infectious disease processes while practicing antimicrobial stewardship. Residents participate in all aspects of multidisciplinary care as part of the Infectious Disease (ID) Consult Service and VA Puget Sound Antimicrobial Stewardship Program (ASP). The ID Service is a consulting specialty service which consists of infectious disease attending physicians, fellows, medical residents, and the antimicrobial stewardship pharmacist. The Antimicrobial Stewardship Program consists of a pharmacist and ID physician. In addition to the ID Consult Service, pharmacy residents will have the opportunity to work alongside the ID fellow in weekly HIV clinic. Other rotation opportunities involve contributing to antimicrobial stewardship projects, participating in microbiology rounds, creating weekly ID clinical pearls for pharmacy staff, and conducting a formal journal club or case presentation.
Mental Health

The mental health elective allows the resident to engage with Veterans in an ambulatory care setting and assist in the medication management of the Veterans’ psychiatric conditions, which can include PTSD, depression, anxiety, and bipolar disorder. There are numerous opportunities to lead individual patient visits, interact with the other mental health providers, and work collaboratively with the team to provide exceptional service to the patients. In addition, the resident will have the chance to conduct a comprehensive mental health intake for patients transferring care to the service. By the end of this rotation, the resident will have a strong foundation and understanding of mental health especially in the Veteran population.

Community Living Center (American Lake)

The American Lake Community Living Center (CLC) rotation allows the resident to gain experience with long-term, dementia, hospice, palliative, and respite care. The rotation is designed to provide education and exposure to geriatric syndromes, potentially inappropriate medications for the elderly, the management of primary care disease states in the elderly, and end-of-life care. Residents will actively participate in weekly interdisciplinary team meetings and work directly with physicians, nurse practitioners, nurses, and other disciplines to provide comprehensive care to Veterans. The rotation will focus on the utilization of evidence-based literature, guidelines, and patient-specific factors to develop personalized therapeutic regimens. The resident’s responsibilities include completing monthly comprehensive medication reviews, therapeutic drug monitoring, and formulary management. Residents will also have the opportunity to partake in a geriatric journal club and in falls committee meetings.

Advanced Practice General Internal Medicine

Per preceptor approval, the resident will participate at an advanced level with a general medicine team in higher level daily activities. This will include both attending rounds as well as acting as an internal medicine pharmacist by processing orders, monitoring drug therapy and outcomes, providing drug information to the medical team, and providing patient/family education and medication counseling. The resident will be involved with warfarin and vancomycin monitoring as well as formulary management and renal dosing protocols. The purpose of this general medicine rotation is to expand upon the initial general medicine rotation and build practical skills in serving as an internal medicine pharmacist. The resident will be expected to practice with greater autonomy on this rotation and therefore will need to be approved to take this rotation by the medicine preceptors.
Additional ICU Rotation

Per preceptor approval, for residents who have strong inpatient interest, it is possible to arrange the completion of a second, elective ICU rotation based on preceptor availability. Residents will complete a second rotation in the selective ICU rotation they are not completing as a part of their required rotation elements. Residents will not be able to duplicate ICU rotations (e.g. MICU twice). The resident will need to obtain preceptor availability and approval prior to being assigned an elective ICU rotation.

Longitudinal Rotations

Nephrology Clinic

The resident will attain a working knowledge base of chronic kidney disease (CKD) related chronic disease states. Diabetes, anemia, and hypertension are three most common disease states referred to the renal clinic pharmacist. The resident will work closely with the renal pharmacist preceptor to provide evidence-based drug therapy recommendations accompanied by appropriate safety and efficacy monitoring, follow-up, and documentation. This rotation provides extensive experience in managing refractory hypertension, volume overload, and electrolyte abnormalities in complex patients with multiple co-morbidities.

Cardiology Clinic

Residents will be involved in direct patient care activities related to cardiac disease state management in collaboration with cardiology providers. Residents will develop the necessary skills and knowledge base to provide pharmacologic management for conditions including, but not limited to, post-ACS/MI, HTN, dyslipidemia, and heart failure. Residents will assess medication adherence, tolerance, labs, physical assessments, disease progression, and social history to determine appropriateness of patients’ cardiology medication regimens. In addition, residents will be involved in medication use evaluations and serve as a valuable drug therapy resource for cardiology providers.

Women’s Health

Residents will be involved in daily activities in collaboration with primary care providers with a focus in women’s health. Direct patient care activities include conducting patient interviews, documentation, physical assessment, counseling opportunities, medication reconciliation, and serving as a liaison/resource for primary care providers. The resident will also have opportunities to participate in the Women’s Clinical Care conference with nursing staff, providers, and gynecologists.
**Infectious Disease Clinic**

The infectious diseases clinic longitudinal rotation provides an immersion into ambulatory HIV/PrEP and travel clinic responsibilities. Residents independently manage PrEP patients under the preceptor’s scope of practice and utilize VA specific dashboards to identify potential PrEP candidates or HIV patients that require intervention. The resident will gain presentation skills by spearheading a mini multidisciplinary quality improvement project throughout the course of the rotation. By the completion of the rotation, the resident will demonstrate the skills to independently manage travel medicine and PrEP patients and gain an understanding of current HIV treatment regimens. The resident may also be responsible for presenting at ID pre-clinic conference if the opportunities arise during the rotation block.

**Anticoagulation Clinic**

The anticoagulation medication therapeutic management clinical longitudinal rotation is designed to provide experience in managing anticoagulation pharmacotherapy. This rotation also allows the resident to develop independent judgment and accountability and to improve upon verbal and written communication skills. The goal of this rotation is to gain a foundation in becoming a proficient and effective anticoagulation clinical pharmacist.

**Oral Oncology Clinic**

The oral oncology clinic longitudinal rotation provides the opportunity for residents to manage patients on antineoplastic therapy in an interdisciplinary setting with oncologists and hematologists. Residents will have the opportunity to conduct patient interviews, assess patient medication compliance, counsel patients, monitor labs, determine appropriate follow up, document these direct patient care interactions, and serve as the liaison/resource for hematology/oncology providers. In the management of oral antineoplastic regimens, there is also opportunity to further develop primary care disease state management, as the toxicity profiles of many oral antineoplastic agents include hypertension, hyperglycemia, and other endocrine abnormalities.

**Academic Detailing**

This rotation provides an introduction to the skills and techniques of academic detailing. Residents can expect to gain a perspective of the entire healthcare system orchestration and how pharmacy services may be aligned to improve outcomes on various local- or national-level initiatives. The academic detailer is responsible for providing education relating to evidence-based medicine to staff on these topics. Academic detailing involves reviewing literature, developing and/or promoting educational pieces for staff or patients, providing academic detailing outreach visits to VA staff, presenting in-services, and identifying and resolving barriers to initiatives. The VISN academic detailing team also includes team members who specialize in Pharmacoeconomics and population health informatics.
The Ambulatory Clinical Pharmacy Management rotation provides the resident with skills to perform pharmacy practice management and leadership in clinical care coordination. The resident will become familiar with the common duties and responsibilities of the clinical program manager, as well as the leadership skills necessary to assume multiple roles in managing pharmacy clinics. The resident should be able to demonstrate the necessary skills to manage multiple clinical pharmacy teams, identify areas of improvement in clinic function and pharmacist activity, and develop plans of action to resolve or improve issues that may arise.

The longitudinal management rotation with focus in residency program development will train residents ASHP requirements for accreditation and the skills needed for residency program development. By the end of the rotation, the resident will have developed skills in program management, ASHP accreditation, and preceptor development. The resident will develop written and verbal communication skills to communicate with many different groups of stakeholders, and to present to pharmacists and associated health care providers. Additionally, the rotation will include leadership skill development through a leadership workshop presentation and demonstration of those skills through application.

The formulary program management longitudinal rotation prepares the resident to acquire the skills to perform pharmacy management, clinical program management, and formulary management responsibilities. The resident will work on long-term longitudinal projects in the area of program development, and/or formulary management. After completion of this rotation, the resident should attain a well-rounded knowledge base of VA local and national formulary policies, formulary program functions, health-systems root cause analysis, quality improvement, and quality assurance. The resident should demonstrate skills to respond to medication information inquiries to ensure safety and efficacy of medication therapy and to manage resources appropriately through the formulary.
Primary Care Mental Health Integration (PCHMI)

The purpose of this rotation is to prepare residents to function as a member of the interprofessional integrated behavioral health team in primary care. Residents will provide services such as walk-in consultation and intervention to Veterans enrolled in primary care, in-depth medication reconciliations, and evaluation of medications for safety, efficacy, and polypharmacy. Residents can expect training in multiple areas including risk assessment, consultation, and team-based collaborative care. Training will also comprise of immersion into the biopsychosocial model of illness, focusing on safe and effective medication therapy for complex health concerns. In conjunction with clinical and didactic work, this rotation also provides residents opportunities for teaching, administrative, and research experiences.

Benefits

The stipend and benefits are determined annually on a national basis by the VA and are adjusted per location. For the 2021-2022 year, the stipend for PGY1 Pharmacy Residents was $45,727. Each resident accrues 4 hours of vacation and sick leave each pay period (every two weeks). This results in a total of 13 days of both annual and sick leave.

Additionally, each resident is eligible for 11 paid holidays, medical, vision, dental and life insurance. All residents are provided administrative leave to attend educational conferences including the ASHP Midyear Clinical Meeting and the Western States Conference for Pharmacy Residents, Fellows, and Preceptors.

The program offers dual appointment, whereby residents are paid at pharmacist rates for staffing on weekends, which allows residents to obtain funding for professional development and travel. Additionally, residents may also complete voluntary outpatient prescription data verification for additional experience and compensation under their dual appointment.

The UW School of Pharmacy (UWSOP) Resident Teaching Program is an opportunity offered to residents at VAPSHCS and other local residencies. The program is entirely optional and tailored to enhance the resident’s experience in teaching and facilitating small groups. Additional teaching opportunities include precepting UWSOP students during their APPE rotations.

Pharmacy residents are granted designated computer workspace with dual screens in an office with windows. Free parking is available in the designated employee parking lot.
Qualification

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<th>Standard Application Requirements</th>
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<tr>
<td>United States citizenship</td>
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<td>Doctor of Pharmacy degree from an accredited school or college of pharmacy</td>
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<td>Eventual license in ANY state within 90 days of start of residency</td>
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<td>Participation in an interview process</td>
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<td>Participation in the ASHP Residency Matching Program</td>
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<th>Supplemental Application Requirements</th>
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<td>A 100-350 word essay response required (see following link for prompt: VA Pharmacy Residency Program - Pharmacy Benefits Management Services)</td>
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Application Procedure

Interested candidates may apply through the PhORCAS (Pharmacy Online Residency Centralized Application Service) application portal. Standard application materials include:

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<th>Basic demographics</th>
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<tr>
<td>Verified transcripts (pharmacy school ONLY)</td>
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<td>Letter of intent</td>
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<tr>
<td>Curriculum vitae</td>
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<tr>
<td>Submission of three letters of recommendation through PhORCAS</td>
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<td>Extracurricular information</td>
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ASHP Code: 95300
NMS Code: 191813

The deadline for application to the VA Residency is midnight December 26, 2021. The resident must participate in the American Society of Health-Systems Pharmacists (ASHP) residency matching program.
Please note: This residency site agrees that no person at this site will solicit, accept, or use any ranking-related information from any residency applicant.

### QUESTIONS
About the program and application process may be directed to:

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<tr>
<th>PGY1 Pharmacy Residents</th>
<th>Adrian Hughes, PharmD</th>
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<tr>
<td>Email: <a href="mailto:PharmacyResidents@med.va.gov">PharmacyResidents@med.va.gov</a></td>
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Current PGY1 residents outside the VA Puget Sound Medical Center from left:
Janelle Schweitzer, Vineet Tatla, Rachel Tsai, Leyla Sinyawski, Stephanie Dang, Meghan Hoffman, Jennifer Tu
Blanca Lake—a lake fed by the Columbia Glacier in the Cascade Mountains of Washington

Mount Rainier—Viewpoint at the top of Tolmie Peak