



PGY2 Pain Management and Palliative Care Learning Experience Descriptions

Required Learning Experiences

Orientation
Required, 3 weeks

Orientation will provide the resident with extensive exposure to the decentralized pharmacy practice model including established clinical activities and the medication distribution process at Lakeland Regional Health Medical Center. The resident will participate in general hospital orientation as well as CPOE training on Cerner. Rotating through the department will provide the resident an opportunity to meet and work with a various members of the pharmacy staff. The resident will participate in various clinical topic discussions as well as begin working on the required MUE and research project.

Inpatient Acute and Chronic Pain Management
Required, 4 months

Anthony Pazanese, PharmD
Katie Maples, PharmD
June Vasquez, PharmD, BCPS

The Inpatient Acute and Chronic Pain rotations will and refine the necessary skills in assessing and monitoring therapeutics, evaluating pharmacokinetics, reviewing drug information, communicating with an interdisciplinary health care members (written and verbal), and educating both health care professionals and patients for the treatment of the patients experiencing acute and/or chronic pain. During much of this time, the resident will function as a member of the pharmacy based pain management service, responding to pain consults and performing daily follow up on patients. One month will be spent assigned to a specific floor where they will be expected to round regularly to identify and resolve pharmacy and pain management related issues. Through these rotations, residents will gain exposure to a variety of pain conditions, including acute postoperative or trauma-related pain syndromes, chronic pain syndromes, and pain syndromes complicated by the presence of substance abuse. Exposure to emergency pain syndromes, oncologic pain emergencies, and pain issues in the intensive care units are a routine part of each rotation. The resident will also have opportunities to precept students. These experiences are the basis of the PGY2 residency year and are intended to provide the resident an opportunity to develop and refine the pharmacotherapeutic skills necessary to provide appropriate care. As the year progresses the resident will be expected to obtain proficiency and autonomy under the supervision and mentorship of dedicated Pain Management and Palliative Care Clinical Pharmacy Specialists.

Oncology

Required, 1 month

Angela Pearson, PharmD, BCPS

The Oncology experience will provide the resident an opportunity to develop and refine their pharmacotherapeutic skills related to the treatment of hematological and oncological disease states. The resident will provide care on the inpatient oncology unit, with a focus made on pain management and symptom management interventions. The resident will also be responsible for maintaining the Hematology/Oncology clinical notebook by responding to new dosing consults and monitoring/intervening as appropriate on existing consults and multi-day chemotherapy regimens.

Pain and Sedation in the Trauma ICU

Required, 1 month

Rebecca Rich, PharmD, BCPS, BCCCP
Jennifer Montero, PharmD, BCPS, BCCCP
Michael Semanco, PharmD, BCPS, BCCCP

Pain and Sedation in the Trauma ICU will allow the resident to develop and refine his/her pharmacotherapeutic skills related to the treatment of critically ill patients. The resident will provide comprehensive pharmaceutical care to patients within the Trauma ICU (TICU) while focusing on the acute assessment and treatment of pain, sedation, and agitation. The resident will assume full responsibility for the pharmacotherapeutic plan for each of his/her patients while paying special attention to patients with pain and/or sedation issues. The resident will participate in daily multidisciplinary rounds in TICU and in medical emergencies throughout the hospital.

Palliative and Hospice Care

Required, 2 months

Katie Maples, PharmD

The Palliative and Hospice Care experience is another basis of the PGY2 residency year, and will provide the resident further experience treating patients with pain and symptom management issues, including those who are actively dying, undergoing terminal extubation/withdrawal of life support, and experiencing spiritual and emotional pain along with dyspnea & terminal restlessness. The resident will spend time in the 31 bed inpatient Palliative Care Unit and round with physicians covering the palliative care service. They will also spend time at a local hospice house and round with physicians and physician extenders in the outpatient hospice setting at one of four local hospice companies after attending hospice orientation.

Psychiatry

Required, 1 month

Melody Stevens, PharmD, BCPS

The Psychiatry experience will provide the resident an opportunity to develop the pharmacotherapeutic skills necessary to care for psychiatric patients and patients with various substance use disorders. This will take place within the three inpatient Mental Health Units (Mental Health and Addictions Unit, Memory Disorder Unit, and Adolescent Psychiatry Unit), and will provide therapeutic knowledge and practical experience in psychiatry and how psychiatric conditions affect patients' reporting of pain.

Required Longitudinal Learning Experiences

Clinical Research

Required, longitudinal

Georgia Keriazes, PharmD, BCPS, BCOP
Assigned Research Advisor

The Clinical Research longitudinal experience will require the resident to complete an MUE and formal research project through the course of the year. The resident is the primary investigator and responsible for developing the research idea, obtaining IRB approval, data collection and analysis, and drawing conclusions with the assistance of research advisors. A poster presentation of the MUE results is taken to the ASHP Midyear Clinical Meeting. The research project results are presented at the Florida Residency Conference (FRC). Both projects are also presented at the pertinent LRH committees. A research project manuscript is prepared and submitted for publication prior to the completion of the residency year.

Leadership

Required, longitudinal

Brian Anger, PharmD, BCPS
Wendy Bailey, PharmD
Georgia Keriazes, PharmD, BCPS, BCOP
Anthony Pazanese, PharmD

The Leadership learning experience is designed to enhance the resident's skills as an effective leader in the health care environment. The resident will work with various pharmacy leadership members to gain knowledge of medication safety measures and their development through various hospital committees, integration of information systems in patient care areas, expanding automation within pharmacy, human resource management, strategic design, financial and operational planning and measures, and state and federal regulatory requirements. Residents will also attend topic discussions that directly relate to departmental and hospital operations, as well as complete quarterly discussions on the Harvey A.K. Whitney lectures.

Presentations

Required, longitudinal

Anthony Pazanese, PharmD

The Presentations longitudinal experience will provide the resident an opportunity to formally present pertinent topics in multiple formats to various members of the multi-disciplinary team. The purpose of these presentations is to educate other members of the healthcare team, learn how to present to professionals with a variety of expertise and healthcare experience, and gain confidence in public speaking. The resident is required to formally present once each quarter to the healthcare team, including physicians, nurses, respiratory therapists, and/or pharmacists. Additionally, a one hour continuing education presentation (seminar) to the pharmacy staff (along with members of the multidisciplinary team) is required.

Professional Development

Required, longitudinal

Selected Residency Advisor

The Professional Development longitudinal experience will foster the professional evolution and personal progression of the resident through a variety of non-patient care related activities. This experience will provide the resident opportunities to learn how to positively contribute to his/her own development as well as contribute to the healthcare system as a whole. The resident is required to present a P&T monograph or drug class review, participate in P&T and ICU Committee meetings, actively participate in the recruitment and selection of the next PGY2 Pain Management and Palliative Care resident, and complete the PGY2 Pain Management and Palliative Care Pharmacy Resident Topic Review List.

Staffing

Required, longitudinal

Assigned Staffing Advisor

The Staffing longitudinal experience allows the resident to provide complete patient care as a decentralized unit based pharmacist from 0700-1930 Saturday and Sunday when scheduled, as well as one night per week from 17:00 to 21:00. The resident will be responsible for verifying orders, providing pharmacotherapy consult services, ordering & monitoring TPNs, responding to Code 99s, resolving physician & nursing medication problems, and being present as a drug information resource. In addition, the resident is expected to review all patients' medication profiles and pertinent history in an effort to optimize outcomes by proactively intervening on patient medication issues.

Teaching Certification

Required (with exceptions), longitudinal

Anthony Pazanese, PharmD

The Teaching Certification Learning Experience is a longitudinal requirement for only those residents who have not previously completed a teaching certification. This encompasses all facets of the program, although specific requirements will be determined by the school of pharmacy or other program that hosts the certification. The purpose of this learning experience is to prepare the resident for their role as a clinical preceptor for students and residents, or as a faculty member at a school of pharmacy. The resident will be required to apply for a teaching certification program at a local school of pharmacy during the beginning of the residency year. Other presentations and requirements will be dependent on the specific program the resident is accepted to complete. If the resident applies for, but is not accepted into a teaching certification program, this rotation is not a requirement for residency completion.

Elective Learning Experiences (two months)

Addiction Recovery

Elective, 2 weeks

June Vasquez, PharmD, BCPS
Dennis DelVecchio, RPh, LMHC, CAP
Michael Strolla, DO, DipABAM, FASAM

The purpose of the Addiction Recovery rotation is to gain exposure to the outpatient management of substance use disorder and substance abuse rehabilitation, including opioids, alcohol, and illicit drugs. As a member of the interdisciplinary team, the resident will have the opportunity to attend one-on-one and group counseling sessions, group sessions of the 12 step program, and observe patients with histories of substance abuse including other medical professionals and adolescents, as well as other adult patients.

The resident will not have the opportunity to perform individual assessments or make treatment plans in this setting. However, they will be responsible for becoming an active member of the team under the supervision of preceptors and through direct patient contact. They will respond to drug information requests and make treatment recommendations to other healthcare team members as requested, in addition to educating patients about their medication therapy as appropriate.

Emergency Medicine

Elective, 2 weeks to 1 month

Brad Hall, PharmD
Kayla Wilson, PharmD, BCPS

The Emergency Medicine experience will provide an opportunity for the resident to develop and refine assessment and pharmacotherapeutic skills as related to the treatment of critically ill emergency department patients, with a focus on management of pain and, when necessary, sedation in this setting.

Interventional Medicine

Elective, 2 weeks

Anthony Pazanese, PharmD
Sunil Panchal, MD

Interventional Medicine is a two week long elective learning experience, which takes place at the outpatient pain management office of Dr. Sunil Panchal. The resident will actively participate in the management of chronic pain patients, participating in patient assessments and developing recommendations for medication management and non-pharmacological therapy. The resident will also gain further exposure to various types of interventional pain management procedures, including spinal cord stimulation, intrathecal pumps, and radiofrequency denervation.

Outpatient Headache Clinic
Elective, 2 weeks to 1 month

June Vasquez, PharmD, BCPS

The Headache Clinic experience will further advance or refine the necessary skills in the management of adult and adolescent patients experiencing a variety of conditions, including headaches, chronic migraines, trigeminal neuralgia, cervical dystonia, medication overuse headaches, neck and lower back pain, radiculopathy, extremity pain, and fibromyalgia. The resident will have the opportunity to observe practitioner interviews with new and follow-up patients presenting to the outpatient clinic, and to round with physical and occupational therapists, physicians, nurses, and psychologists. The resident will have opportunities to discuss complex therapy for patients in the outpatient program, as well as observe cognitive behavioral therapy, neuromuscular education, electromyography, biofeedback, and interventional procedures including trigger point and Botox injections.

Trauma
Elective, 1 month

June Vasquez, PharmD, BCPS

Trauma is an elective, one month learning experience that takes place primarily in the trauma step-down unit (5 East) with a focus on the general management of trauma patients. The purpose of the rotation is to allow the resident to develop and refine pharmacotherapeutic skills related to trauma patients throughout their hospital stay, with a focus on management of acute or chronic pain. The resident will follow all trauma patients admitted directly to this unit, or transferred from the trauma ICU.

Intensification of Required Learning Experience

Elective, 1 month

Preceptor - TBD

The resident may choose to intensify any required or elective rotation as an additional elective experience. These experiences will be developed at the discretion of the resident and will be highly tailored to the specific needs / requests of the resident. The experience may vary in length but will be at least two weeks in duration.