A Resident’s Typical Day

**Pediatric Intensive Care Unit (PICU) Rotation**

Residents work in a high-acuity setting and work closely with a multidisciplinary team. My mornings involved chart review of the day’s patients prior to the start of 8:30am rounds. I assessed pertinent overnight events, morning labs, therapeutic drug levels, and verified the safety and efficacy of current patient medications. While on rounds, I provided recommendations and answered questions from the rest of the team. During critical code situations, I assisted the pharmacist preceptor in calculating patient specific doses and in preparing code medications for administration. In the afternoons, I spent time following up with any questions I received throughout the day and making any additional recommendations. Overall, I valued the fast-paced experience and the continuous opportunities to learn from the PICU team.

Helen Berhane, Pharm.D.
PGY-1 Pharmacy Resident

**Neonatal Intensive Care Unit (NICU) Rotation**

Residents focus on premature infants, neonates with congenital heart diseases and a variety of other critical illnesses. As a resident, I worked with patients, attended radiology rounds, and collaborated with the team to manage medications. After rounds, I followed up with drug information questions, assisted medical residents and nurse practitioners with entering total parenteral nutrition orders, and met with the neonatal pharmacists to discuss patient cases and disease states. This rotation was a challenging opportunity for me to learn how to safely care for an extremely high-risk population.

Jake Brockmeyer, Pharm.D.
PGY-2 Pediatric Pharmacy Resident

**Infectious Diseases (ID) Rotation**

Residents focus on delivering comprehensive care to patients with serious and complex infections. My day would begin with pre-rounding on patients on the ID service and reviewing new cases throughout the day as teams requested ID consults. By answering drug questions, I strengthened my ability to analyze primary literature, assess medication appropriateness and design therapeutic plans. With the Antimicrobial Stewardship Program pharmacist, I reviewed the institution’s antimicrobial utilization and provided recommendations on narrowing, or optimizing, therapy. I also enjoyed additional learning such as ID fellow lectures and microbiology plate rounds. My most-prized aspect of this experience was learning about optimal management of complicated and rare infections from experts in the field.

Christine Boulos, Pharm.D.
PGY-2 Critical Care Pharmacy Resident
General Pediatrics Rotation

Residents have the opportunity to work with subspecialty teams based on personal interests. During my first weeks, I pre-rounded on patients, followed by the gastroenterology and cardiology teams, and discussed recommendations with my preceptors. Rounding with the medical teams allowed me to build rapport with the staff and actively participate in multidisciplinary patient care. Depending on the type of patient, my preceptors would help me familiarize with common-disease states and medication-management strategies. After rounds, I followed up on medication-related questions, performed drug monitoring, provided medication teaching, and facilitated patients’ discharges. Overall, the rotation was an enriching experience that allowed me to further develop my critical-thinking and clinical skills.

Administration Rotation

Residents work closely with pharmacy administrators to improve, to innovate, and to implement changes. My morning started with Gemba, where I visited different pharmacy areas with managers to review and to discuss any questions, concerns, or issues from the staff. I attended the hospital-wide Gemba with our pharmacy leader to hear about issues from other departments, or to escalate pharmacy concerns. The rest of my day was filled with meetings and project time. Given that I worked with managers, I participated in a variety of committee meetings relating to quality and safety, medication administration, controlled substances, and hospital planning. I worked on projects that impact the pharmacy department and Lucile Packard Children's Hospital Stanford. From this experience, I learned pharmacy is intertwined with many departments and that the opportunities in pharmacy administration are limitless.

Hematology / Oncology Rotation

Residents work closely with hematology/oncology pharmacists and an interdisciplinary team. My day started by pre-rounding on my patients to prepare for sit-downs with members of the team. After sit-down rounds, I would round with the team and visit the patients to discuss new updates to treatment plans. Afternoons consisted of therapeutic-drug monitoring, verifying chemotherapy, completing topic discussions, and performing medication reconciliations and discharge teachings. From this experience, I was able to challenge myself and deepen my knowledge of pediatric hematology / oncology disease states, chemotherapy regimens, and supportive care therapies. I enjoyed the opportunity to work with and learn from a diverse interdisciplinary team to provide the best care for our pediatric hematology / oncology patients!

Transitions of Care Rotation

Residents care for children who have complex medical conditions in both inpatient and outpatient settings. My typical day began with rounding with the inpatient team, reconciling their complex medication lists, and working with the providers to ensure our patients received individualized care while transitioning into the hospital. I provided in-depth discharge counseling and coordinated with the outpatient pharmacy to ensure continued treatments. I also provided services at the ambulatory care clinic to help resolve any medication issues the patients could be facing at home. I evaluated medications for appropriateness, assisted in resolving barriers such as medication-insurance problems, and counseled on medication adherence and side effects. This experience provided an opportunity to look into transition points of a patient’s experience beyond the inpatient setting that ensure safe and quality care.