A Resident’s Typical Day

Pediatric Intensive Care Unit (PICU)

PICU is a challenging yet exciting rotation given the high acuity, complexity and the fast-paced nature. The PICU teams manage medical and surgical patients, and coordinates care with a variety of consult services including: solid organ transplant, hematology/oncology, stem cell transplant, infectious disease, neurology, neurosurgery and general surgery amongst others. A typical day begins at 6:30 am to work up patients prior to discussion with the PICU preceptor around 7:30. The PICU team starts with a huddle at 8:00 followed by rounds ending around 11:30, during which the multidisciplinary team of physicians, nurse practitioners, and nutritionists develop a treatment plan. Residents provide recommendations and ideas to help optimize pharmacotherapy for patients. Which may include narrow therapeutic drug monitoring/dosing, renal dose adjustments and medication reconciliation follow up. Afternoons are spent working with providers and nurses to implement plans, follow up on drug information requests and learn more about prescribed therapies with the PICU pharmacist. The PICU environment is very conducive to learning and often the attending and fellow physicians provide patient-specific teaching, while consistently encouraging pharmacy and medical residents to contribute to these lessons. The PICU rotation is also a great opportunity to get hands-on experience managing medical emergencies, including Code Blue scenarios. Working in the PICU improves prioritization skills, clinical skills, and confidence as a clinical pharmacist.

Pharmacy Practice Resident (PGY-1), Class of 2019, from Regis University School of Pharmacy

Cardiovascular Intensive Care Unit (CVICU)

The CVICU rotation offers a challenging and rewarding experience to provide care for high-acuity cardiac patients with a range of unique heart conditions. Patients in the CVICU may be recovering from heart surgery, implanted with a VAD (ventricular assist device) or pre/post heart transplant. Each day in the intensive care unit may vary depending on the needs of patients, but it often begins with pre-rounding and communicating recommendations with your preceptor. Family-centered, multidisciplinary bedside rounds begin at 08:30, involving parents and healthcare providers of several different consulting teams, such as the Neonatal Intensive Care Unit (NICU) or Pediatric Advanced Cardiac Therapies Program (PACT). The CVICU team itself is comprised of several different members, including an attending physician, pediatric cardiology fellow, nurse practitioner, dietician, and pharmacist. The resident is responsible for providing recommendations for optimizing medications regimens, assessing appropriateness of drug therapies, identifying potential medication errors, and resolving other drug-related issues. Other responsibilities handled in the afternoon may include following up on patient care issues, verifying medication orders, and discussing therapeutic topics with your preceptor. While rotating through the CVICU, you also have the opportunity to attend and participate in Code Blue events for patients in cardiac or pulmonary arrest. This fast-paced environment allows pharmacy residents to develop valuable critical-thinking skills and strengthen their clinical knowledge as they continue to grow into successful pharmacists.

Pharmacy Practice Resident (PGY-1), Class of 2019, from University of California, San Francisco

General Pediatrics

The General Pediatrics rotation provides an opportunity for residents to gain exposure to a diverse patient population. Over the course of the rotation residents will spend time rounding with the general pediatrics team and a number of subspecialty teams including nephrology, cardiology, gastroenterology, and pulmonology. The first few days are generally spent in close collaboration with a pharmacist preceptor. Then, depending on comfort level, during the rest of the rotation residents will function as the primary pharmacist for one of the teams. Rounds begin around 8:45 and are conducted in a family-centered manner, which aims to involve patients and family members in order to provide highly individualized care. Rounds typically last anywhere from 1-3 hours, during which residents respond to drug information questions and make therapy recommendations to the medical team. After rounds, typical tasks include following up on drug information questions and performing drug level monitoring. Residents also assist in the discharge process, working with the medical team to have discharge prescriptions written correctly, on time, and sent to the right pharmacy. Lastly, residents will commonly perform medication teaching for patients who have started on new medications. This experience develops clinical skills and confidence in functioning as an independent clinical pharmacist.

Pharmacy Practice Resident (PGY-1), Class of 2019, from Regis University School of Pharmacy
Neonatal Intensive Care Unit (NICU)

The NICU rotation provides residents the opportunity to care for the youngest and smallest patients at LPCH. Our Level IV NICU provides nationally-recognized, family-centered care for neonates referred from outside hospitals in addition to babies born at LPCH. The NICU has three different multidisciplinary teams focusing on premature infants, congenital heart disease patients, and neonates with a variety of other critical illnesses. The teams consist of attending physicians, fellows, residents, nurse practitioners, and nurses. A typical morning will begin early with pre-rounding on assigned patients, attending radiology rounds to review images, and working closely with the team to initiate, adjust, or discontinue medications during bedside rounds. Due to the academic nature of the team, a large amount of time during rounds will be spent on discussion and education of neonatal specific disease states. Pharmacy residents will often be asked to contribute by educating the team on the pharmacotherapy applications of these disease states. Once rounds are complete, the resident will help the medical residents and nurse practitioners write and enter total parenteral nutrition (TPN) orders based on lab results and nutritional needs. In the afternoons, residents will respond to any questions that require further research and review medication plans to ensure the discussed medication changes are implemented. Daily afternoon meetings with the neonatal unit-based pharmacist provide an opportunity to extensively discuss patient cases and disease states. Additionally, there will be opportunities to participate in neonatal resuscitation program (NRP) mock codes to develop the skillset and knowledge required during this acute emergency. The NICU rotation is an enriching experience which allows residents to learn how to safely care for the complex and high risk neonatal population.

Pharmacy Practice Resident (PGY-1), Class of 2019, from University of Southern California

Oncology/Hematology/Stem Cell

A rotation in the Bass Center for Childhood Cancer and Blood Diseases is an opportunity to work with the unit-based pharmacist and two specialty teams: stem cell transplant and hematology/oncology. A typical day on either team starts early by pre-rounding on up to 24 admitted patients. Sit-down rounds take place in the work room with the attending, fellow, hospitalist, nurse practitioners, medical residents, medical students, case manager, nurses, and study coordinators. If hematology/oncology or stem cell transplant patients are admitted in an intensive care unit, the team will round with the ICU team as well. Pharmacist interventions include: alerting the team to potential drug interactions, therapeutic drug monitoring of medications such as immunosuppressants, antifungals, and our Vancomycin per Pharmacy protocol, suggestions regarding supportive care, ensuring appropriate infection prophylaxis is maintained, and recommendations on antimicrobial selection/dosing/renal adjustments. After sit-down rounds, the team visits each patient and their family to discuss the care plan. In the afternoon, the resident works with the unit-based pharmacist to verify chemotherapy for the next day. This process includes comparing the order with the treatment roadmap and ensuring the order is signed by two Bass Center providers. Pharmacists also assess if the chemotherapy dose should be adjusted for toxicities or if an interacting medication should be held during chemotherapy administration, and communicating recommendations to the provider. Other learning opportunities include topic discussions with the preceptor or attending, department meetings or care conferences. This rotation is a challenging opportunity where the resident will learn complex pediatric disease states as well as a unique pharmacy workflow based on high-risk medications.

Pediatric Resident (PGY-2), Class of 2018 and 2019, from University of California, San Francisco

Solid Organ Transplant

As one of the highest volume pediatric transplant centers in the nation, residents have a unique opportunity to work with children who are awaiting organ transplant or are already post-transplant. Residents work closely with the transplant pharmacist to provide care for liver, intestinal, kidney, heart and multi-organ transplant patients. A typical day begins with multidisciplinary rounds on all transplant patients in the hospital, including those who are freshly transplanted or still waiting for a new organ. Our patients can be located in the intensive care unit or general pediatrics unit, depending on the level of care required. Residents will attend weekly meetings to discuss patients who could potentially benefit from a transplant and updates on patients on the transplant waiting list. Afternoons consist of topic discussions with your preceptor or preparing/coordinating discharge medications. Medication teaching sessions on this service can be extensive to ensure safe and appropriate medication use after discharge. The goal of counseling is to assess the patient’s and family’s understanding of each medication’s purpose, side effects, and proper administration.

Pharmacy Practice Resident (PGY-1), Class of 2019 from University of California, San Francisco
Transitions of Care

The transitions of care rotation offers the pharmacy resident an opportunity to participate in a variety of inpatient and outpatient settings. The resident will primarily work with children who have complex medical conditions, are seen by multiple specialties, and are often at high risk for readmission. Each day presents new challenges as the resident learns how to coordinate care across multiple providers and settings. The resident works closely with the inpatient team (Connect Team) by attending daily rounds, conducting medication reconciliation upon admission, and providing extensive discharge medication counseling to families and patients. At least once a week, the resident will also provide services to the outpatient clinic (Complex Primary Care Clinic (CPCC)). Depending on the needs of the patient and family, the resident may provide education on new medication therapies, address medication issues regarding side effects or adherence, and provide resources and support for obtaining medications. The resident will not only communicate and clarify medication issues with the primary physicians at clinic, but also the other specialty physicians involved in the patient’s care. During the respiratory syncytial virus season, the resident will also be largely involved in the coordination of the outpatient administration of palivizumab (Synagis). Based on the resident’s interest, there are opportunities to participate in other outpatient experiences including the cystic fibrosis and pulmonology clinic, hematology and oncology clinic, home infusion pharmacy, and outpatient pharmacy. This rotation allows residents to understand the challenges our patients and families face throughout crucial transition points in the healthcare system and identify ways in which pharmacists can positively contribute to ensure safe and quality care.

Pharmacy Practice Resident (PGY-1), Class of 2019, from University of Southern California

Infectious Disease

Infectious disease is a consult service that provides care for all patients in the hospital that require escalated care in infection control and management. This rotation allows the pharmacy resident to work closely with the ID attending, fellow, and medical resident as a team member of the infectious disease consult service. The pharmacy resident also works closely with the Antimicrobial Stewardship Program (ASP) pharmacist to ensure the proper utilization of anti-infectives throughout the institution. A typical day starts by pre-rounding on the patients currently on the ID consult team. However, new cases are often added throughout the day as medical teams decide to escalate and consult infectious disease for their infection-related concerns. Therefore, the infectious disease team rounds on patients throughout the day to thoroughly understand the infection-related concerns and to create a plan for all patient consults. This provides the opportunity for the pharmacy resident to participate in the differential diagnosis in patients with a multitude of disease states and to determine appropriate anti-infective management. The team recognizes and values the role of the pharmacist and works closely with the ASP pharmacist and pharmacy resident to determine appropriate dosing to maximize utilization, minimize adverse effects, and apply therapeutic drug monitoring as indicated to ensure safety and efficacy. The pharmacy resident also answers drug information questions that require evaluation of anti-infective pharmacokinetics and provides in-service education to the infectious disease department. Lastly, this rotation provides additional learning activities including medical resident and fellow lectures as well as microbiology rounds. Overall, this rotation allows for the pharmacy resident to learn and gain the opportunity to work with a warm, welcoming team and to directly apply the provision of appropriate anti-infective utilization

Pharmacy Practice Resident (PGY-1), Class of 2019, from Northeastern University

Want to learn more?
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