

## PGY1 Residency Program Structure & Requirements

### Track A – General Practice & Track B – Ambulatory Care Emphasis 2017-2018

June 26 – July 28, 2017	7/31-8/25	8/28-9/27	10/2-10/27	10/30-11/24	12/2-12/8	11/30/17-1/20/18	1/22-3/2	3/5-3/30	4/2-4/27	4/30-6/1	6/4-6/29/18
Orientation	Rotation #1	R #2+ Proj	R #3	R #4	MCM, Project & CE	R #5 w/ 2 project weeks	R #6 + Proj	R #7	R #8	R #9	R #10
<b>Rotations Required for both Tracks:</b> Ambulatory Care (minimum of 2 rotations – one Primary Care and one elective), Acute Care (minimum of 2 rotations – one Internal Medicine and one adult critical care selective), Transitions of Care selective, Drug Information (4 weeks required), and Practice Management (4 weeks required). All R.1.1 objectives must be achieved for residency (ACHR), and 85% of all objectives must be achieved for residency (27 of 31 required objectives).											
<b>Project</b> (Preselected weeks & days may be negotiated.)	Project selection and proposal to RAC & IRB		Complete project: data collection, analysis, written summary and PowerPoint presentation				Formal presentation, Value Summary & formal manuscript				
<b>Presentations</b>	4 recitation sessions per year at College of Pharmacy (fall/spring)		Seminar to pharmacy staff (October)		ACPE-accredited C.E. for local pharmacists (March)			Project presentation at MSC (May)			
<b>Resident Conference:</b> Weekly 1-2 hour meetings on various topics such as journal club, teaching, literature evaluation, leadership, and other topics as requested by residents (PGY1 required + PGY2 optional)											
<b>Service Commitment:</b> ~34 hours per month Track A (General): every 3 <sup>rd</sup> weekend hospital unit coverage plus shifts from “open” schedule to equal four ~8-hour shifts per month Track B (Am Care): Two 13-hour weekend shifts and two 4-hour closing shifts per month in an assigned community pharmacy											
<b>Meetings</b>					ASHP Midyear + UHC-Vizient Conferences Dec 2-7, 2017 Orlando, FL			Mountain States Resident Conference (MSC) Salt Lake City May10-11, 2018			
<b>Medication Error Reviews:</b> Average of 2 med error review per month starting in September each year											
<b>Residency Portfolio:</b> Updated by resident weekly as an electronic, hyper-linked document in a shared computer drive											
<b>Optional:</b> <ul style="list-style-type: none"> <li>• Teaching Certificate with extra training sessions, teaching requirements, &amp; separate portfolio (strongly recommended)</li> <li>• Public Health Goal – volunteer for 2 activities that support the community at large (eg, health fairs, Utah Food Bank, etc.)</li> <li>• Ambulatory Care continuity clinic (full day clinic experience twice monthly or a panel of ambulatory patients to follow part of the year – optional for Track A and strongly recommended for Track B.)</li> </ul>											

#### Required Experiences

- Orientation
- Drug Information
- Practice Management
- Primary Care (RWHC) + Am Care selective
- Internal Medicine + Adult ICU selective
- Transitions of Care selective
- Staffing – Longitudinal
- Project – Longitudinal

#### Ambulatory Care Rotations Selectives:

- Cardiology
- Family Medicine
- Gastroenterology/Hepatology
- Gastroenterology/Rheumatology
- Geriatrics
- HIV
- Internal Medicine
- Neurology
- Primary Care - **Required**
- Thrombosis Service

#### Acute Care Rotations

- Bone Marrow Transplantation
- Cardiology
- Hematology
- Internal Medicine - **Required**
- Neurology
- Oncology
- Pulmonary Internal Medicine
- Surgery and Trauma

#### Critical Care Rotation Selectives:

- Required: 1 Adult ICU selective**
- Burn ICU
  - Cardiovascular ICU
  - Hematology/Oncology ICU
  - Medical ICU
  - Neurosurgical ICU
  - Surgical ICU

#### Transitions of Care Selectives:

##### **Required: 1 Transitions of Care selective**

- Cardiology Transitions
- Community Clinics Transitions
- Emergency Medicine
- Pulmonary Medicine/CF
- Solid Organ Transplant
- Thrombosis Transitions

#### Elective Rotations

- Infectious Diseases Consult
- Medication Safety
- Neonatal ICU
- Oncology Clinics/Infusion
- Sterile Compounding (2 weeks)
- Supply Chain Management
- Others as negotiated with RPD & RAC

**Note:** HSPA residents follow Track A.