Purpose: To develop a sophisticated health care practitioner with advanced skills in the practice of drug information, medication use policy development, literature evaluation, medical writing and editing, teaching and education, project management skills, and clinical and organizational problem solving.

The program is flexible to accommodate the interests of the resident. Graduates will be prepared for a variety of activities including medical writing, developing evidence-based materials for Pharmacy and Therapeutics Committees or staff development, presenting in a variety of settings including didactic lectures, leading medication policy development, managing drug shortages, and planning an educational experience for a student on rotation in drug information including mentoring the student in a call center and a medical writing project.

Site Description:
The Drug Information Service (DIS) at University of Utah Health Care is a comprehensive hospital-based drug information service also affiliated with the College of Pharmacy. The DIS responds to over 175 requests per month and supports the P&T Committee (and subcommittees including adverse drug reactions, anticoagulation safety, and medication safety) by managing the formulary, managing the medication management policies, preparing drug monographs, and coordinating adverse drug reaction reporting and medication use evaluation programs. The DIS supports the department of pharmacy by facilitating cost-savings programs such as therapeutic interchange and evidence-based use guidelines. The DIS provides very diverse services. The DIS also provides contract services on a national basis to organizations such as group purchasing organizations, and pharmacy benefits management programs. Contract activities include providing information on drug shortages, developing evidence based monographs, and P&T support. The DIS staff provide content for ASHP’s and Novation’s websites on shortages. The DIS is a training site for pharmacy students and residents.

Expected Outcomes:
Outcome R1: Demonstrate excellence in the provision of education, training, and evidence-based information for health care professionals and health care professionals in training.
Outcome R2: Contribute to the management of the organization’s medication-use policies or processes.
Outcome R3: Exercise leadership and practice management skills.
Outcome R4: Conduct drug information practice-related projects.
Outcome R5: Contribute to the management of the organization’s budget.
Outcome E1: Contribute to the management of the organization’s medication-use process.
Outcome E2: Contribute to the management of a drug information center/service.
Outcome E4: Participate in the provision of drug study services (elective)
Outcome E5: Demonstrate skills required to function in an academic setting (elective)

RLS Goals
R1.1 Provide effective education and training on medication-use or drug therapy topics to health care professionals and health care professionals in training.
R1.2 Employ advanced literature analysis skills to analyze and effectively communicate evidence-based information.
R1.3 Contribute to the biomedical literature.
R1.4 Prepare and deliver effective poster presentations.
R1.5 Create pertinent, evidence-based medication information for health care professionals.
R2.1 Enhance the quality of committee decisions on medication-use policies or processes.
R2.2 Identify opportunities for improvement in the organization’s medication-use policies or processes.
R2.3 Develop and implement plans for improvements to the organization’s medication-use process or policies.
R2.4 Develop strategies for improving an organization’s adverse drug event (ADE) monitoring and reporting program.
R3.1 Exhibit essential personal skills of a practice leader.
R3.2 Exercise superior communications skills.
R4.1 Conduct a drug information practice-related project using effective project management skills.
R5.1 Provide drug cost forecasting.
R5.2 Understand organizational decision-making for contracting for pharmaceuticals.
E1.1 Contribute to efforts to prevent and identify risk points in the medication-use process.
E1.2 Represent the pharmacy perspective to the organization’s design and application of its technology and automation systems.
E1.3 Collaborate with others in the organization to assure the availability of appropriate evidence-based medication information for the organization’s health care providers.
E2.1 Contribute to the management of a drug information center/service.
E2.2 Formulate the budget for a drug information center/service.
E4.1 Manage the use of study drugs according to established protocols and the organization’s policies and procedures (elective).
E5.1 Understand faculty roles and responsibilities (elective).
E5.2 Exercise teaching skills essential to pharmacy faculty (elective).

Required Rotations (approximately 9 - 10 months):
- Drug Information Practice I
- Drug Information Practice II
- Drug Information Administration
- Medication Use Policy
- Medication Safety
- Resident Project (longitudinal)
- Service requirement (longitudinal)
- Presentations (longitudinal)

Elective Rotations (up to 3 months): The resident may select from a variety of elective rotations to augment their specific area of interest. Potential electives include investigational drug service, supply chain, clinical faculty rotation, clinical rotations in any area of our health system, or rotations outside of our system (4 weeks maximum) such as the Utah Poison Control Center, Food and Drug Administration, or Novation. Many electives incorporate elective RLS Goals and Outcomes or relate to drug information practice.

Additional Expectations of the Resident During Rotations:
*Drug Information Service:* After the resident completes the initial Drug Information Practice I rotation, the resident will be integrated into the Drug Information Service as a staff member. This means that during required rotations, the resident will be assigned shifts in the call center 1 to 4 times per week, assist with orienting trainees, participate in journal club or drug information topic discussions, participate in drug shortage management activities, and write formulary monographs, newsletters, newsletter articles, or needed content for the P&T committee or subcommittees. Residents will also participate in a variety of departmental and organizational meetings. The overall project load and call center time will be adjusted based on the resident’s project load and other commitments as it is for any staff member. These additional expectations may be waived during elective rotations.

*Resident Conference:* In general, the resident is expected to attend the weekly resident conferences. Depending on the topic, required meetings for other rotations, or during elective rotations, the resident may be excused from the weekly conference. The resident is responsible for letting the coordinator of the
residency conferences know if they will not be attending. The resident should discuss attendance with the RPD if there is ever a question about whether or not a conference should be attended.

**Presentations:** The resident will present a minimum of 4 presentations each year:

1. A formal, academic seminar to the Department of Pharmacy Services staff.
2. An American Council of Pharmaceutical Education (ACPE)-approved, presentation developed and presented for area pharmacists, pharmacy students, and technicians on a topic that is of current interest to pharmacy practitioners. The continuing education presentation is subject to the guidelines provided by ACPE, and must include an evaluation of available literature.
3. Project presentation at the Mountain States Residency Conference
4. Lecture for students at the University of Utah College of Pharmacy (with the approval of the program director)