

Piedmont Athens Regional PGY1 Pharmacy Residency Frequently Asked Questions

1. What is the role of the pharmacist at Piedmont Athens?
 - The pharmacy department is well respected within the health system. Pharmacy leaders are involved in local and system level committees and initiatives within the system. Pharmacists provide services from the central pharmacy, an operating room satellite, and many decentralized locations throughout the facility. Pharmacists participate in multidisciplinary rounds, pharmacokinetic consults, patient education and serve as a drug information resource for nurses, physicians and other healthcare professionals. Clinical pharmacists practice in our high acuity areas of the emergency department, adult medical and cardiac ICU, neonatal ICU, as well as infectious disease, inpatient and outpatient anticoagulation management and ambulatory care clinics. PAR employs approximately 45 pharmacists

2. What are the resident's staffing responsibilities?
 - Pharmacy residents are required to staff every other weekend, Saturday and Sunday, 8am to 4:30pm. The residents work in the main pharmacy until 12:30pm and then complete all anticoagulation consults in the afternoon. Residents are also required to cover one of three holiday combinations:
 - Labor Day and New Year's Day, or
 - Memorial Day and Thanksgiving, or
 - Christmas Day

3. Are the residents required to take call?
 - Residents are required cover one week of call each month except orientation and the month of December. During the Ambulatory experience, the resident will cover the Anticoagulation Clinic call. Inpatient experiences will alternate Pharmacy Administrative call and Clinical call. The resident is responsible for responding to phone calls from patients, physicians and/or pharmacy staff. A preceptor is assigned for back up. The resident will not be required to be present at the hospital during their call week beyond their normal resident responsibilities.

4. What are some typical projects that the residents complete throughout the year?
 - Residents complete various projects throughout the year including Medication Use Evaluations, Formulary monograph/therapeutic interchange review, drug protocol development and operational procedures. Residents are also required to complete a year long project that impacts pharmacy practice within the institution or one of the pharmacy ambulatory clinics. Recently completed longitudinal projects include:

- Impact of Patient Assistance Programs on Hospital Visits in Patients with COPD or Asthma
 - An Evaluation of Time to Therapeutic Range of Intravenous Unfractionated Heparin after Transitioning from Direct Oral Factor XA inhibitors
 - Development, Implementation, and Evaluation of an Inpatient Warfarin Management Education Program for Pharmacists in a Community Hospital
 - Optimizing Pre-Operative Antibiotic Use Through Improved Penicillin Allergy Documentation
 - Evaluating Time to Clinical Improvement Using Escalated Meropenem Empiric Treatment for Late Onset Sepsis in the Neonatal Intensive Care Unit
 - Evaluation of Equivalence of IV Push versus IV Intermittent Infusion Administration of Cefepime in Critically Ill Patients
 - Impact of Pharmacists on Empiric Antibiotic Selection, Dosing and Initial Time to Administration in Patients with Open Fractures
 - Evaluation of Trough-based vs AUC-based Vancomycin Dosing in Number of Initial Therapeutic Vancomycin Levels
5. What does the interaction between pharmacists and physicians look like?
- Pharmacists work collaboratively with physicians throughout the hospital and several ambulatory clinics. Pharmacists interact with providers face to face during multidisciplinary rounds, over the phone and in written notes within the electronic medical record. Pharmacists are identified as part of the patient care team by nurses, physicians and medical residents.
6. What type of presentation opportunities are provided to the residents?
- Residents are required to present at least 2 formal presentations. Traditionally, these have been local or state level presentations and to other healthcare providers within the hospital system. Journal clubs, in-services for nursing, pharmacists and/or medical residents are scheduled during each rotation.
7. What teaching opportunities are available?
- Piedmont Athens Regional hosts approximately 25 students annually for IPPE and APPE rotations from the University of Georgia College of Pharmacy. Residents participate in the preceptor role for these students along with the primary preceptor.
 - Piedmont Athens Regional Graduate Medical Education program provides opportunities for pharmacy residents to participate in teaching roles with medical students and medical residents.
8. What type of positions are your residents accepting after completion of the program?

Resident Year	Name	Current Position
2019-2020	Brooke Gallman, PharmD, BCPS	Clinical Pharmacist, Emergency Department, Piedmont Athens Regional
	Lindsey Lawing, PharmD	Acute Care Pharmacist, Women’s and Infants Center, UAB Hospital, Alabama
2020-2021	Sarah Adams, PharmD, BCPS	Clinical Pharmacist, Critical Care/ED, Piedmont Athens Regional
	Felix Okotete, PharmD	Pharmacist, Mayo Clinic Health System, Minnesota
2021-2022	Zach Halbig, PharmD	Staff Pharmacist, Piedmont Athens Regional
	Devin Archer, PharmD	Clinical Pharmacist, Huntsville Hospital, Alabama
2022-2023	Amber Adams, PharmD	Clinical Pharmacist, Atrium Health, North Carolina
	Adrianna Reagan, PharmD	Clinical Pharmacist, Emergency Department, East Alabama Medical Center