

# PGY2 Oncology Pharmacy Residency



**Providence Alaska Medical Center**

Match Number: 500660

Anchorage, Alaska

## **Program Description and Requirements**



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## Providence Health System

Providence Alaska Medical Center (PAMC) in Anchorage consists of 401 acute care beds and is part of the integrated Providence health system across seven states. The Alaska region includes Providence Kodiak, Valdez and Seward Medical Centers, Providence Extended Care and Mary Conrad Center, Family Practice and General Medical and Senior Clinics, assisted living and drug abuse rehabilitation facilities and Outpatient Infusion Center. The health system supports a Family Practice Physician Residency program and provides training sites for the University of Alaska at Anchorage Nursing and UAA/Idaho State University pharmacy programs. Major service lines include Medicine, Oncology, Surgery, Emergency, Rehab/Neuro, Cardiovascular/ Critical Care, Behavioral Health and The Children's Hospital. Pharmacy services are supported by an electronic medical record with physician order entry and bedside barcoding. Formulary, clinical and operational systems and services are integrated with the other Providence ministries. PAMC is a Children's Oncology Group study site that also offers adult and pediatric oncology clinical trials as well as non-oncology clinical trials.

## PAMC Pharmaceutical Care Services Department

### General Pharmacy Department Information

The Pharmaceutical Care Services Department employs over 70 full-time pharmacists, technicians, and support personnel with 24 hour per day services including:

- Centralized unit dose distribution, order verification and IV Admixture service
- Decentralized Clinical Services including an Antimicrobial Stewardship Program
- ICU Satellite pharmacy and order verification
- Emergency Department
- Outpatient IV Infusion and Cancer Therapy Center

The pharmacy department is committed to providing and expanding their role in the delivery of quality pharmaceutical care. This includes:

**Routine Focused Medication Use Review** – Routine order screening and medication use trouble shooting, patient profile review, dosing and monitoring of aminoglycosides, warfarin, digoxin, anticonvulsants, pain medications, parenteral nutrition, drugs in renal impairment, and other targeted drugs; antibiotic use review, adverse drug reaction monitoring, therapeutic exchange program, medication reconciliation, transition of care services. All vancomycin dosing is done by pharmacists

**Interdisciplinary Rounds** – Family Practice, Hospitalist, Critical Care, Coronary Care, Pediatrics, Pediatric Intensive Care, Neonatal Intensive Care, Adult Oncology, Pediatric Hematology/Oncology, Tumor Board

**Patient Education** – Warfarin, Chemotherapy, Cardiac and Pulmonary Rehabilitation, Consults, and discharge counseling

**Medication Use Quality Improvement Activities** – Medication Use Guidelines and Policy Development, Drug Use Evaluation and Benchmarking, Newsletters, Core

Measure and National Patient Safety Goal Initiatives, Providence Quality Initiatives

**Drug Formulary Management** – Providence Pharmacy and Therapeutics Committee class reviews and monograph development

### Investigational Drug Program in Oncology, Cystic Fibrosis, and Infectious Disease

**Staff Education** – Weekly Clinical Meetings, Invited Speakers, Nursing In-services, Competency Programs

**Teaching** – Pharmacists, Pharmacy Interns, Medical Residents, Nurses, Public, and Pharmacy Association Presentations

## PGY2 Oncology Residency Program Mission/Purpose

Our ASHP-accredited PGY2 Oncology residency program builds on Doctor of Pharmacy (PharmD) education and PGY1 pharmacy residency programs to contribute to the development of clinical pharmacists within the specialty of oncology. This program seeks to prepare pharmacists to practice as an oncology specialist pharmacist in the inpatient and ambulatory clinic settings for adult and pediatric oncology patients.

## Oncology Program Description

The oncology residency program at Providence Alaska Medical Center (PAMC) is an intensive twelve-month clinical training program with our cancer center team. PAMC is a Commission on Cancer accredited hospital for oncology and a Children's Oncology Group affiliated hospital for pediatric and young adult cancer care. Our facility has interdisciplinary teams which take care of patients within our inpatient medical oncology floor, inpatient pediatric oncology unit, adult and pediatric infusion suites, and investigational drug service. PAMC is the largest referral cancer center for the state of Alaska and serves a geographical area approximately one fifth the size of the Lower 48 contiguous states. Given the large area served by the cancer center, pharmacists play an integral and unique role within our care teams. The resident will develop an extensive knowledge base and problem-solving skills through a variety of clinical experience in the acute and ambulatory care settings. The resident will be involved in maintaining and improving oncology practices by providing pharmacy services in various clinical settings, including both adult and pediatric patients. Upon completion of the residency, the resident will be prepared to practice in many different oncology care areas. This program is accredited by the American Society of Health-System Pharmacists.

## Program Goals and Objectives

Goals for residents within the program include:

- Demonstrate a high level of professional responsibility, dedication, skills, and maturity to practice in a clinical oncology environment.
- Develop a working knowledge of the pathology of common malignancies and an understanding of evolving medication therapies used to treat cancer.
- Attain a level of didactic knowledge that will enable the resident to confidently pass the Board Certified Oncology Pharmacist (BCOP) examination after completion of the residency.
- Serve as a professional role model and instructor for learners and other healthcare professionals in the oncology care setting.
- Demonstrate the motivation and responsibility for self-directed, independent study and life-long learning.
- Clearly, effectively, and appropriately communicate with health care professionals and with patients.
- Develop an understanding around the principles of clinical research through projects and management of patients enrolled on clinical trials.
- Develop a variety of skills that assures competent, confident pharmacy practice in a variety of oncology care settings.

### **The resident will demonstrate competencies in three core areas:**

- Direct patient care (pediatric and adult oncology)
- Staffing (clinical services and infusion center)
- Project management

Successful completion of the residency program involves meeting the residency program goals and objectives identified at the beginning of the residency year.

ASHP standards are used to define program objectives. An assessment of the resident's knowledge, skills, experiences, and interests will be performed prior to the beginning of the residency year. Objectives will be individualized for the incoming residents based on their previous learning experiences.

## Residency Hours

A minimum of 2000 hours (one year), are required for completion of the residency program. Residents are expected to dedicate the time and effort necessary to effectively complete the program objectives. Often it requires more than a 40-hour work week to obtain the maximum benefits of the program. The preceptors are responsible for ensuring that the residents understand the time requirements for each learning experience. The resident positions are considered "exempt" (salaried) positions by PAMC and not paid per hour. Presentation of the Residency Certificate is contingent upon completion of all program objectives and the residency project.

## Residency Learning Experiences (Rotations)

The following are learning experiences offered in the PAMC Oncology Residency. Descriptions of each experience and the corresponding preceptors can be found in the section titled Residency Learning Experience Descriptions.

### **Required Rotations:**

- Inpatient Adult Oncology (2 x 4-weeks each)
- Pediatric Oncology & Hematology (3 x 4-weeks each)
- Outpatient Oncology (3 x 4-weeks each)
- Bone Marrow Transplant (1 x 4 week)

### **Elective Rotations & Selective Experiences:**

- Pain/Palliative Care (longitudinal)
- Infectious Disease (4-weeks)
- Investigational Drug Services (4-weeks)
- Private Oncology Practice (longitudinal)
- Oral Oncology Pharmacy (4-weeks)
- Bone Marrow Transplant (4-weeks)
- General Pediatrics (2-week selective)
- Home Infusion (2-week selective)

## Evaluations

PharmAcademic is used to document the resident's progress throughout the program. Informal assessments and review of specified longitudinal goals with the RPD will occur quarterly during the year. Formative evaluations will occur during experiences and summative evaluations will occur at the end of each learning experience. Residents will self-evaluate throughout the residency. Residents will evaluate preceptors and learning experiences formally at the end of each learning experience.

## Project

The resident is required to complete a major project during the twelve-month program. The project shall focus on an aspect of oncology pharmacy practice.

The project may involve:

- Original clinical or administrative research
- Program development
- Interdisciplinary Medication Use Quality Improvement Project
- Other aspects of oncology pharmacy practice approved by the RPD

The project may be presented at the ASHP Clinical Midyear Meeting, UAA/ISU School of Pharmacy Grand Rounds and/or the Hematology Oncology Pharmacy Association Conference and must be completed in written manuscript form suitable for publishing prior to the completion of the residency year.

## Miscellaneous Requirements

The following are additional requirements of the residency program:

- Create or update a treatment guideline
- Complete medication safety improvement initiative
- Complete monograph or class review for system formulary workgroups
- Present 8 ACPE-accredited Oncology Lectures
- Complete two rapid-cycle improved projects as assigned by preceptors related to oncology
- Complete medication use evaluation within oncology

## Licensure

The resident must be licensed as a pharmacist in the state of Alaska **for a minimum of 2/3 of the residency year.** Questions regarding licensing should be directed to the Alaska Board of Pharmacy. **State of Alaska does not require MPJE exam for license.**

## Salary and Benefits

- Pharmacy residents qualify for employee benefits consistent with staff level positions at PAMC
- Combined PTO & sick leave: 37 working days. Residents are required to use PTO to cover holidays. 13 days will be kept in reserve to cover conferences, exam test dates, and professional activities.
- \$58,988.80 annual salary, paid in bi-weekly installments of \$2,268.80
- Extra staffing hours: Residents may work as staff pharmacists for additional pay outside of residency requirements if there is department need and it does not detract from the residency experience.

## Application Requirements

Applicants must submit the following via PhORCAS:

- A letter stating why you are interested in completing a residency at Providence Alaska Medical Center, why you are interested in additional training in oncology, and why you believe you would be a good fit for our program
- A Curriculum Vitae
- Three references via the Standardized Reference Form Available in PhORCAS. Please include a minimum of one reference from an oncology preceptor (may have been as a student or resident). Please also include one reference from your current residency program director. Third letter may be from preceptor of choice.
- PGY2 Oncology residency applications need to have completed or currently be enrolled in an ASHP accredited PGY1 Pharmacy program.

## Application deadline: January 5

We participate in the ASHP matching program. Our Residency Matching Program Code number is: 500660

The PGY2 Oncology Residency Program offers a local early acceptance process for interested PAMC PGY1 residents. **Outside applicants for the PGY2 program should inquire after third Monday in November to ensure the position will be open.**

If you are invited for an interview, a brief presentation (15 – 20 minutes) on an oncology subject of your choice is required during your interview. Presentation can be on a new therapy, patient case, or recent journal publication.

## Start date for the PGY2 program

As a site with a single PGY2 resident, **we can be flexible on the start date for the program.** We understand that PGY1 programs have variable start/end dates and coordinating a move to Alaska can be a stressful and long process. Our only requirement is that a resident must start at the beginning of a 2-week pay period. Most of our residents start on the 2<sup>nd</sup> or 4<sup>th</sup> Monday of July depending on the last day of their PGY1 program.

## Staffing Responsibilities

For the resident to adequately gain the understanding and confidence necessary to provide oncology pharmaceutical care, it is necessary that the resident spend time performing pharmacist staffing. The staffing requirement is every other Saturday in the outpatient Infusion Center and a total of seven cumulative weeks (or 40 days total) staffing for inpatient adult, outpatient infusion, and pediatric hematology/oncology services.

## Residency Learning Experience Descriptions

The following includes required and elective rotations. Additional elective rotations may be developed based on the resident's interest. Core rotations are repeated throughout the year to allow residents to grow on their knowledge from previous rotations and to mirror how clinical oncology services are often staffed in community oncology centers.

### Adult Inpatient Oncology I & II

*Preceptor: Ann-Chee Cheng, PharmD, BCPS*

Two, required, four-week rotations providing comprehensive pharmacy services to adult inpatients admitted to the hospital under the care of an oncology physician. Patients covered by this service are admitted for active chemotherapy treatment, bispecific antibody immunotherapy initiation, management of toxicities from chemotherapy and/or immunotherapy, and oncologic emergencies. This service also covers adult bleeding disorder patients while admitted in the hospital.

### Adult Outpatient Oncology I, II, & III

*Preceptor: Tarah Hibbs, PharmD, BCOP*

Three, required, four-week rotations providing comprehensive pharmacy services to adult outpatients referred for treatment in the cancer center. Patients are primarily referred from three local oncology clinics: Alaska Women's Cancer Care, Alaska Oncology & Hematology, and Katmai Oncology Group. Patients covered by this service are treated for a wide variety of tumor types (gynecologic, breast, thoracic, sarcomas, malignant hematology etc.) and managed closely within a clinical team. This service also covers many general medicine infusion patients who receive non-cancer directed therapies in the infusion center.

### Pediatric Hematology/ Oncology I, II, & III

*Preceptor: Kaite Kammers, PharmD, BCPS, BCOP*

Three, required, four-week rotations providing oncology-focused pharmaceutical care to pediatric patients admitted in the hospital and referred for treatment in the outpatient cancer center. Pediatric patients covered by this service are admitted for active chemotherapy treatment, management of toxicities from chemotherapy, oncologic emergencies, and patients referred by Alaska Pediatric Oncology to the outpatient setting. This service also covers pediatric bleeding disorder patients while admitted in the hospital, infusion patients referred by pediatric-subspecialty clinics (pediatric nephrology, endocrinology, neurology etc.) for treatment in the infusion center, and patients enrolled on clinical trials at PAMC.

### Bone Marrow Transplant

*Preceptor: Variable (determined by University of Washington)*

A required, four-week rotation providing comprehensive pharmacy services to patients receiving allogeneic and/or autologous stem cell transplants in the inpatient and/or outpatient setting. Patients covered by this service may also receive other types of cellular therapies. This rotation is not offered at PAMC and is arranged at an outside institution (typically at Fred Hutchinson Cancer Center/University of Washington). Travel expenses for this rotation are typically covered by PAMC.

### Investigational Drug Services

*Preceptor: Joshua Mark, PharmD, BCOP*

An elective, four-week rotation with the Investigational Drug Service at Swedish Cancer Institute in Seattle, Washington which manages 100+ clinical trials. Clinical trials covered by this service include mostly oncology patients and some non-oncology patients.

### Pain Management/ Palliative Care

*Preceptor: Variable (determined by Hospice & Palliative Medicine Fellowship program)*

An elective, four-week rotation, usually conducted in broken up weeks through out the year, rounding with the palliative care team at PAMC. Patients covered by this service include both oncology and non-oncology patients.

### Infectious Disease

*Preceptor: Shawna King, PharmD, BCPS*

An elective, four-week rotation with the infectious disease pharmacist focusing on infectious complications commonly seen in immunosuppressed populations. Patients covered by this service are admitted to several different clinical units at PAMC.

### Private Practice

*Preceptor: Kaite Kammers, PharmD, BCPS, BCOP*

An elective, four-week rotation usually conducted in broken up weeks through out the year, rounding with providers in the local oncology clinics. Clinics typically include Alaska Women's Cancer Care, Alaska Oncology & Hematology, Alaska Pediatric Oncology, and the Alaska Bleeding Disorder Clinic.

### Oral Oncology

*Preceptor: Ian Ingram, PharmD, BCPS, BCOP*

An elective, four-week rotation providing oncology-focused care to patients receiving oral oncolytics who are treated at the Providence Cancer Institute Franz Oral Oncology Clinic in Portland, Oregon.

# FAQS

## About Alaska

The scenic beauty of Alaska is second to none. Incredible mountain views and frequent wildlife sightings are just a few of the perks of living in Anchorage. There are numerous opportunities for outdoor enthusiasts in or within a short drive of the nation's northernmost major city. The most popular activities include hiking, fishing, camping, mountain-biking and both cross-country and downhill skiing. There are over two hundred miles of trails in Anchorage to bike or cross-country ski. Anchorage has ample cultural events, including a symphony, theater productions, multiple museums and art galleries. There are a wide variety of excellent locally owned restaurants and a farmer's market during the summer months. Many of our staff members are good friends and spend time outside of work together. Activities often include hiking, skiing, pub trivia, going to the movies, having dinner, brewing beer, fishing and hunting, walking pets, going to the theater or symphony, working out and going on vacation together. Many of the staff members are not originally from Alaska, so they often spend holiday celebrations together too.

## What are the strengths of your program?

Our oncology team has close relationships with physicians and nurses and are a valued member of the healthcare team. Being the largest referral cancer center in Alaska, we see a wide variety of disease states and patient presentations that one may not experience outside of a larger academic medical center in the lower 48. Our program does an excellent job at preparing pharmacists for the challenges of oncology pharmacy, and our graduating residents have a 100% first time pass rate for the BCOP exam after completion of residency. Graduates of our program are employed across the country in a wide variety of settings: small community cancer centers, university affiliated academic hospitals, bone marrow transplant, pediatric oncology, investigational drug services etc.

## How customizable is your program?

We are flexible in scheduling resident's elective rotations to match their clinical interests. Being part of a large healthcare system, we have the opportunity to provide outside rotations at other facilities in the Pacific Northwest, as long as they do not exceed 25% of the total residency learning experiences. If residents choose to do offsite rotations, we will attempt to coordinate around their scheduled Bone Marrow Transplant rotation (typically at Fred Hutchinson Cancer Center/University of Washington), to minimize travel costs for the resident.

## Are there opportunities to teach and precept students?

Our department hosts many pharmacy students on learning experiences and high school students interested in the profession. Residents are expected to act as preceptors for any type of student while on learning experience together. PGY2 resident may also be involved in precepting PGY1 residents if they choose to do an elective Oncology rotation. There are also opportunities throughout the year to provide education to pharmacy, nursing, medical and other hospital staff. The University of Alaska Anchorage campus is located across the street from the hospital and has a pharmacy school joint with Idaho State University and a large nursing program, which offers the potential for teaching. At times, there may be an opportunity to lecture to larger groups depending on community need. Presentations at the AKPhA Annual Meeting is optional. Completion of a Teaching Certificate program is optional, if not completed as a PGY1.

## What are you looking for in a resident?

The resident should expect a very demanding program with multiple simultaneous responsibilities. We seek candidates with a burning desire for learning, a willingness to think creatively about how to facilitate advanced cancer-care treatments in a rural setting, as well as good stress/ time management skills. An ability to communicate openly with maturity and emotional intelligence is important given the tight-knit, small nature of our team. We seek candidates who demonstrate an interest in improving the plight of the patient by promoting the profession, the role of pharmacy, and effectiveness of our services to that end. Previous involvement in clinical oncology projects and interest in new/emerging therapies demonstrate that desire. And finally, we are looking for residents who will work in partnership with our staff, find humor in their day, and love what they are doing.