Providence Health System
Providence Alaska Medical Center (PAMC) in Anchorage consists of 394 acute care beds and is part of an integrated health system including Providence Kodiak Medical Center, Providence Extended Care and Mary Conrad Center (310 long-term care beds), Home Health, Family Practice Clinic and assisted living and drug abuse rehabilitation facilities. In addition, PAMC operates an Outpatient Infusion Center and one outpatient pharmacy. The Health System supports a Family Practice Physician Residency program and provides training sites for the University of Alaska at Anchorage Nursing Program. Patient services are offered in Cardiovascular/Critical Care, Medicine/Oncology, Surgery/Musculoskeletal/Neuro, Behavioral Health, and the Children's Hospital. Pharmacy services are supported by an electronic medical record (Epic) with physician order entry and bedside barcoding. PAMC is a Children's Oncology Group study site and also offers adult oncology clinical trials and cystic fibrosis 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 order verification, unit dose distribution and centralized IV admixture program
- Decentralized pharmacy clinical services
- ICU Satellite
- 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 via complete profile review, pharmacokinetic dosing/monitoring (aminoglycosides, vancomycin, warfarin and parenteral nutrition), renal dosing, antibiotic use review, adverse drug reaction monitoring, abnormal serum drug concentration assessment, therapeutic drug interchange program, medication reconciliation, discharge counseling for high risk re-admit patients.

Interdisciplinary Rounds - Family Practice, Medicine Service, Critical Care, Pediatrics, Pediatric Intensive Care Oncology, Tumor Board, Palliative Care

Patient Education - Warfarin, Diabetes, Chemotherapy, Cardiac and Pulmonary Rehabilitation

Consultation - Drug information requests, Vancomycin, Aminoglycoside and Anticonvulsant Dosing, Parenteral Nutrition, Warfarin (Inpatient and Outpatient), Pain, etc.

Medication Use Quality Improvement Activities - Medication Use Guidelines and Policies, Drug Use Evaluation and Benchmarking, Physician Department Meeting Attendance, Newsletters, Medication Order Sets, Pharmacy and Therapeutics Committee, Core Measures, National Patient Safety Goals, Providence Health and Services Quality Initiatives

Investigational Drug Program - Manage inventory for adult and pediatric clinical trials

Staff Education - Staff meetings, weekly clinical meetings, invited speakers, nursing inservices, competency program, ACPE-accredited oncology lectures

Teaching Opportunities: Pharmacists, Pharmacy interns, Pharmacy student externships/clerkships, medical residents, nurses, public

PYG2 Oncology Residency Program Mission
The Pharmaceutical Care Services Department recognizes the need to participate in the development of training programs necessary to ensure the ongoing availability of pharmacy practitioners with the knowledge and skills required to promote, recommend, and deliver high quality pharmaceutical care services.
Our ASHP-accredited PGY2 Oncology residency program is dedicated to providing the resident with the knowledge, attitude, and skills necessary to assure optimal drug therapy outcomes, and to nurturing the life skills and professionalism required to contribute positively in the healthcare environment.

Program Purpose
The PGY2 Oncology pharmacy residency seeks to prepare pharmacists to practice as an oncology specialist pharmacist in the inpatient and outpatient ambulatory clinic settings for adult and pediatric oncology patients.

Program Goals and Objectives
The Providence Alaska Medical Center Oncology Residency Goals are as follows:

1. Serve as an authoritative resource on the optimal use of medications used to treat individuals with cancer.
2. Optimize the outcomes of individuals with cancer by providing evidence-based, patient-centered medication therapy as an integral part of an interdisciplinary team.
3. Manage and improve the medication-use process in oncology patient care areas.
4. Demonstrate excellence in the provision of training or educational activities for health care professionals and health care professionals in training.
5. Sustain the ongoing development of expertise and professionalism in the practice of oncology pharmacy.
6. Conduct oncology practice research.
7. Function effectively in oncology settings participating in clinical investigations.

The resident will demonstrate competencies in three core areas:

- Direct Patient Care
- Staffing
- Project management

Successful completion of the residency program involves meeting the residency program goals and objectives identified at the beginning of the residency year. The ASHP Residency Learning System (RLS) is 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.

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 regularly 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 will be presented at the ASHP Clinical Midyear Meeting and the Hematology Oncology Pharmacy Association Conference and must be submitted in written manuscript form suitable for publishing prior to the completion of the residency year.
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 Appendix.

Rotational
Required
- Inpatient Adult
- Outpatient Adult
- Pediatric

Elective
- Private Practice
- Palliative Care
- Infectious Disease
- Genetics in Oncology
- Nutrition in Oncology
- Bone Marrow Transplant (outside institution)

Longitudinal
Required: Staffing
Elective: Radiation Oncology

Residency Hours
A minimum of 2000 hours (1 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.

Staffing Responsibilities
In order for the resident to adequately gain the understanding and confidence necessary to provide pharmaceutical care, it is necessary that the resident spend time performing pharmacist staffing. The staffing requirement is one day per week on the Oncology service and one Saturday every four weeks in the Adult Outpatient Infusion Center.

Competency Programs
Completion of several basic competency programs and self-instructional modules is required prior to completion of orientation (3 weeks). The programs include:
- Aminoglycoside and Vancomycin Pharmacokinetics
- Warfarin Management
- Parenteral Nutrition Management
- Epic Training
- Aseptic Technique
- Basic Life Support

Miscellaneous Requirements
The following are additional requirements of the residency program:
- Participation in Medication Use Evaluation (DUE)
- Completion of yearly formulary Antineoplastic Review
- Presentation of twice monthly ACPE-accredited monthly Oncology Lectures
- Miscellaneous projects as assigned by preceptors
Licensure
The resident must become licensed as a pharmacist in the state of Alaska within 3 weeks of the residency start date. Questions regarding licensing should be directed to the Alaska Board of Pharmacy by calling (907-465-2589) or emailing license@alaska.gov. Application materials may be found at commerce.alaska.gov/dnn/cbpl/ProfessionalLicensing/BoardofPharmacy.aspx.
*If a pharmacist license is not acquired by the first day of orientation, the resident must have an Alaska pharmacy intern license.*

Health Screening
Health screening, including a urine drug screen, is required by the Human Resources department prior to the beginning of the residency program. This is arranged through Human Resources prior to starting the residency program. Providence does not hire nicotine users. This restriction applies to nicotine replacement products as well as actual tobacco use.

Hospital Orientation
Residents are required to attend hospital and service area orientation the first 2 days of the residency.

Employee Benefits
Pharmacy residents qualify for employee benefits consistent with staff level positions at PAMC.
- PTO: 10 working days. Additional paid leave is available for interviews and conference attendance
- $2500 sign on bonus
- Extra staffing hours: Residents may work as staff pharmacists for pharmacist wages outside of residency requirements, once licensed as a pharmacist and competent in all pharmacist duties, as long as this does not detract from the residency experience and if there is a departmental need.

Dress Code
Residents are expected to dress professionally. Pharmacy Resident nametags should be worn at all times. A photo ID is required of all PAMC employees. Photographs are taken at hospital orientation.

Business Cards
Business cards for residents will be provided by PAMC.

Voicemail, E-mail, Internet Access
A voice mailbox, e-mail and internet access will be established for each resident. Rules regarding confidentiality and PAMC business only uses must be followed.

Dismissal from the Residency Program
Dismissal from the residency program can occur as a result of gross misconduct as defined by Policy 640.102B Due Process and Dismissal of Resident from the Residency Program.

Contact
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Residency Learning Experience Descriptions
The following includes mandatory and elective rotations. Additional elective rotations may be considered based on the resident’s area of interest.

Adult Oncology Inpatient
Preceptor: Teresa Slagle, PharmD, BCOP
The Inpatient Oncology rotation consists of three 4 week rotations. The pharmacy resident is responsible for providing comprehensive pharmacy services to adult inpatients admitted under the care of an oncology physician. In addition, services provided during this rotation include:

- Development of pharmaceutical care plans
- Pharmacokinetic dosage evaluation and consultation
- Participation with attending oncologists and in interdisciplinary rounds
- Patient education
- Drug information
- Follow-up of patients seen in the IV Infusion Center
- Case coordination
- Drug therapy monitoring
- Anticoagulant dosing and monitoring
- IV to PO interchange
- Therapeutic interchange
- Renal Function Monitoring and Dose Adjustment
- Antimicrobial Monitoring
- Pharmacy consults (vanc/AG, warfarin, TPN)

Adult Oncology Outpatient
Preceptor: Elizabeth Jackson, PharmD
The Adult Oncology Outpatient rotation consists of two 6-week rotations providing comprehensive pharmacy services to outpatients. These services include:

- Development of pharmaceutical care plans for oncology patients
- Monitoring patients receiving infliximab, antibiotics, IVIG, and other infusion center services
- Care of patients with multiple sclerosis and nephrotic syndrome
- Consulting with physicians and nurses regarding patient management
- Preparation of sterile products
- Drug information
- Patient education
- Participation in interdisciplinary rounds

Pediatric Oncology
Preceptor: Tina Tweedley, PharmD and Ronda Nakoa, ANP
The Pediatric Oncology rotation consists of two 4-week rotations providing oncology-focused pharmaceutical care to patients in the hospital and the outpatient infusion center. These services include:

- Development of pharmaceutical care plans for oncology patients
- Monitoring patients receiving infliximab, antibiotic, IVIG, and other infusion center services
- Consulting with physicians and nurses regarding patient management
- Drug information
- Patient education
- Participation in interdisciplinary rounds
Private Practice
Preceptor: Teresa Slagle, PharmD and physicians TBD
A two week rotation consisting of one week each at two private medical oncology practices: Katmai Oncology Group and Alaska Oncology Hematology. This rotation develops the residents understanding of how patients are diagnosed and followed from the physician's perspective. The resident is expected to cultivate professional relationships and establish themselves as an oncology pharmacy specialist.

Radiation Oncology
Preceptor: Teresa Slagle, PharmD and Dr. John Halligan
A longitudinal rotation consisting of 4-6 Mondays rounding with the radiation oncologist. Review of radio-sensitizing chemotherapy, radiation induced toxicities, recommendations to the physician, and drug information consultation are components of this rotation.

Palliative Care
Preceptor: Teresa Slagle, PharmD and practitioner TBD
A 2 week rotation rounding with the palliative care team. Review of drug therapy, recommendations to the physician/ANP, pharmacokinetic, and drug information consultation are components of this rotation.

Infectious Disease
Preceptor: Ryan Stevens, PharmD, BCPS
A 2 week rotation rounding with an infectious disease pharmacist. Review of drug therapy, recommendations to the physician, pharmacokinetic, and drug information consultation and a day in the microbiology lab are components of this rotation.

Nutrition in Oncology
Preceptor: Sarah Wilson, RD
A 1-2 week rotation focusing on assessing the base nutritional status of a patient with cancer, monitoring for changes in a patient's nutritional status, and recognizing when intervention is necessary for the patient.

Genetics in Oncology
Preceptor: Maggie Miller, CGC
A 1-2 week rotation focusing on build a knowledge-base of genetics in oncology, and identifying individuals (patients or patients’ family) who may benefit from genetic counseling.

Bone Marrow Transplant
Preceptor: TBD
A 4 week rotation focusing on managing patients receiving allogeneic and/or autologous stem cell transplants in the inpatient and/or outpatient setting. This rotation is not offered at PAMC, but can be arranged at an outside institution.

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