University of Virginia Health System
Department of Pharmacy Services
PGY1- Community Pharmacy Residency Program Overview
2025-2026

Program Structure

The 2025-2026 University of Virginia (UVA) Health System PGY1 Pharmacy Residency program will begin in mid-June 2025 and end on June 30, 2026. All Residents must start mid-June in order to attend orientation with the entering medical residents through the graduate medical education (GME) department.

Orientation starts on June 23th, 2025 and is a 4 week experience. During the first month of the residency, residents rotate through various pharmacy department areas and develop skills required for the provision of services provided by the department. Residents will additionally undergo competency evaluations in select areas such as the pharmacy emergency response (Code) program, immunization hot needle protocol, patient counseling and pharmacy computer applications.

Rotations begin on Monday, July 21, 2024, and are 5 weeks in duration (except for orientation and the 9th elective rotation block which is 4 weeks). Required Longitudinal rotations including Extended Patient Care, Presentation, Research or Practice Innovation Project, Quality Improvement Project and Longitudinal Service will begin July 29, 2024 through June 30, 2025.
Required rotations include: Community Pharmacy I-III, Internal Medicine (Inpatient), Internal Medicine (Ambulatory), and Administration.

I. PGY1-Community Pharmacy Residency Rotations

Required Learning Experiences

- Orientation
- Community Pharmacy I: Pharmacy Operations
- Community Pharmacy II: Transitions of Care
- Community Pharmacy III: Population Health
- Internal Medicine (Inpatient)
- Internal Medicine (Ambulatory)
- Administration
- Extended Patient Care (longitudinal)
- Presentation
- Service
- Research or Practice Innovation Project or Quality Improvement Project

Elective Learning Experiences

- Specialty Pharmacy
- Pediatric and Adult Pulmonary Clinics
- Transplant
- Cardiology Clinic
- Family Medicine Clinic
- Geriatrics Clinic
- Stem Cell Transplant Clinic
- Teaching and Learning Certificate (TLC)

Longitudinal Service

- Residents will staff in the UVA Outpatient Pharmacy 16 hours approximately every third weekend and 4 hours approximately one night every other week for a total of 416 hours over 12 months. Residents will work one major holiday (4 day)

Residents will have up to 14 weeks (two 5 week and one 4 week rotations) available for elective rotations. To maintain compliance with the accreditation standard, no more than one-third of rotations can occur in a specific patient disease state or population and at least 2/3 of the year will be spent in direct patient care learning

experiences. Additional rotations may be developed based on resident interest and preceptor availability. Between the fourth and fifth rotation blocks (December), residents will have a mixture of research days and mini-rotations.

Practice Advancement Project Requirements

a. Completion of one Major project and one Minor project are requirements of the residency. Final reports must be submitted and approved by the Project Preceptor and Program Director.
b. One business plan for a new or enhanced pharmacy service is required, and may be a part of either the Major or Minor project.
c. During the first half of the year, residents will work to submit a project for poster presentation at the Vizient Pharmacy Council meeting held in conjunction with the ASHP Midyear Clinical Meeting.
d. During the second half of the year, residents will present a finalized and completed Major project presentation at a regional residency symposium or conference (see presentation requirements below).

Project and Presentation Requirements

a. Each resident is required and responsible to provide:
    a. Poster presentation at the Vizient Pharmacy Council meeting held in conjunction with the ASHP Midyear Clinical Meeting.
    b. Platform presentation on the results of their Major project at the regional residency conference.
    c. One seminar during the course of the residency year. The seminar is ACPE-accredited to provide continuing education (CE) to pharmacists.
    d. Completion of two (2) journal club presentations for pharmacists, two (2) presentations/in-services to medical staff, and two (2) presentations/in-services to nursing or allied health professionals.
    e. Completion of a business plan or SBAR (Completed during Administration learning experience)

Professional Leave for Meeting Attendance

a. Residents will attend the ASHP Annual Midyear Clinical Meeting and the regional residency conference. Base resident stipends were increased to support travel to professional meetings. Residents are responsible for all meeting-related travel expenses using the funds added to the annual stipends.

Longitudinal Service

a. Weekend distributive functions provide necessary training for the resident. The total staffing commitment is 416 hours.
b. Residents provide service in the distributive/clinical areas 16 hours every third weekend (on average) and 4 hours every other week of weekday evening coverage (on average). Residents will work one major holiday and the associated weekend (Thanksgiving and the day after, Christmas Eve and Christmas Day, or New Year's Eve and New Year's Day) and one minor holiday (Labor Day or Memorial Day).
c. Over the course of the year, residents work in various areas in the department including retail pharmacies, ambulatory care clinics, transitions of care areas and inpatient units focused on discharge.
d. Mini-rotations are abbreviated experiences (2-5 days in duration) held in December. These abbreviated experiences provide residents with exposure to areas in which 1) they do not have a scheduled rotation; 2) they would like repeat experiences beyond their scheduled rotations; or 3) they would like a varied experience beyond their scheduled rotations (ambulatory hematology/oncology vs. inpatient hematology/oncology). Additionally, there are select mini-rotations held with services/departments outside of the pharmacy (ie, nutrition services, toxicology).

Benefits (Vacation/Interview days/Holidays)

a. Each resident receives 15 days to be used for personal leave, vacation, or holidays. In order to avoid conflicts with rotation training experiences, residents should not miss more than 20% of a learning experience. Vacation may not be used for terminal leave. All residents are expected to be at work during the last week of the residency.
b. Each resident also receives up to 5 days to be used for interviews (professional leave).
c. Residents are provided up to 14 calendar days for sick leave. If there are additional sick days, vacation days must be used. Those sick for 2 or more consecutive days must present a physician's note to the Program

Director/Coordinator. In the case of extended illness or disability, please refer to the Leave or Request for Absence Policy.

Certification

a. Residents are required to complete ACLS training and certification. This training is offered through the Medical Center at no charge to the resident. Pharmacy residents participate in ACLS training during the orientation period. Residents respond to in house emergency response calls during the residency year.

Teaching

a. Residents have the option of earning a Teaching and Learning Certificate through UVA and Virginia Commonwealth University (VCU) School of Pharmacy.
b. Residents have the opportunity to interact with pharmacy students completing their third and fourth professional years at the UVA IPPE and APPE rotation sites.
c. All residents serve as laboratory teaching assistants and co-precept students on clinical rotations.
d. This optional/voluntary experience is longitudinal and spans the entire 52 weeks of the residency program.

Advisors

a. Each resident is matched with an advisor for the duration of the residency year. Matches are organized by the program director and are based on the career goals, specialty practice area interests, or other interests of the resident. Advisors serve as resources and mentors to the residents.
b. Residents will also have a primary preceptor for each of their required presentations, staffing, and major residency project (research or quality improvement). Residents and the program director identify appropriate preceptors for these requirements based upon the topic.