

Lexington VA Pharmacy Residency Programs

Lexington VA Residency Video: <https://youtu.be/HnMcYyA3tX0>

Why Lexington VA Health Care System



Lexington Veterans Affairs Health Care System is a fully accredited, two-division, tertiary care medical center.

The Franklin R. Sousely Division, established in 1931, includes the following services:

- Community Living Center with hospice and respite services
- Primary care
- Home based primary care
- Optometry
- Mental health and substance abuse treatment
- Women's health
- Acute rehabilitation
- Post-traumatic stress disorder residential rehabilitation treatment

The Troy Bowling Division, established in 1973, was built adjacent to the University of Kentucky, and offers the following:

- Specialty outpatient care
- Inpatient acute medicine
- Inpatient neurology
- Inpatient psychiatry
- Surgical services
- Palliative Care
- Operational Pharmacy services

Lexington VA Health Care System operates community-based outpatient clinics in Somerset, Morehead, Hazard, and Berea, Kentucky. The medical center is part of the VA MidSouth Healthcare Network (VISN 9) and is affiliated with the University of Kentucky (UK). More than 33,000 Veterans receive their healthcare at the VA Medical Center and its facilities annually.

Mission Statement

To fulfill President Lincoln's promise "To care for him who shall have borne the battle, and for his widow, and his orphan" by serving and honoring the men and women who are America's Veterans.

Core Values

VA's five core values underscore the obligations inherent in VA's mission: Integrity, Commitment, Advocacy, Respect, and Excellence. The core values define "who we are," our culture, and how we care for Veterans and eligible beneficiaries. Our values are more than just words—they affect outcomes in our daily interactions with Veterans and eligible beneficiaries and each other. Taking the first letter of each word - Integrity, Commitment, Advocacy, Respect, Excellence – creates a powerful acronym, "I CARE," that reminds each VA employee of the importance of their role in this Department. The core values come together as five promises we make as individuals and as an organization to those we serve.

Integrity: Act with high moral principle. Adhere to the highest professional standards. Maintain the trust and confidence of all with whom I engage.

Commitment: Work diligently to serve Veterans and other beneficiaries. Be driven by an earnest belief in VA's mission. Fulfill my individual responsibilities and organizational responsibilities.

Advocacy: Be truly Veteran-centric by identifying, fully considering, and appropriately advancing the interests of Veterans and other beneficiaries.

Respect: Treat all those I serve and with whom I work with dignity and respect. Show respect to earn it.

Excellence: Strive for the highest quality and continuous improvement. Be thoughtful and decisive in leadership, accountable for my actions, willing to admit mistakes, and rigorous in correcting them.

Lexington VA HCS Residency Programs

PGY1 Pharmacy Residency

- 3 positions
- ASHP-Accredited
- Residency Program Director: Matthew Lane, Pharm.D., BCPS
- Residency Program Coordinator: John T. (TJ) Emmons, Pharm.D.
- Current Residents:
 - Emily Belcher, Pharm.D.
 - Kailen Combs, Pharm.D.
 - Mackenzie McGraw, Pharm.D.

PGY2 Psychiatric Pharmacy Residency

- 2 positions
- ASHP-Accredited
- Residency Program Director: Courtney Eatmon, Pharm.D., BCPP
- Residency Program Coordinator: Mary Roads, Pharm.D., BCPP
- Current Residents:
 - Sela Cathright, Pharm.D.
 - Victoria Kuryluk, Pharm.D.

PGY2 Ambulatory Care Pharmacy Residency

- 1 position
- ASHP-Accredited
- Residency Program Director: Rebekah Sipes, Pharm.D., BCACP
- Residency Program Coordinator: Jamie Knight, Pharm.D., BCPS
- Current Resident:
 - Makayla Wiles, Pharm.D.

PGY2 Pain Management and Palliative Care Residency

- 1 position
- ASHP-Accreditation Pending
- Residency Program Director: Lindsay Wells, Pharm.D., BCPS
- Residency Program Coordinator: Holly Cowley, Pharm.D., BCPS
- Current Resident:
 - Heath McLean, Pharm.D.

Lexington VA HCS Pharmacy Leadership and Program Directors

Kuehl, Pharm.D., MBA, BCPS, VHA-CM Chief, Pharmacy Service



Dr. Kuehl graduated from University of Iowa, a proud Hawkeye in 1997 and holds the distinction in his class of the shortest first job tenure - 8 days. He then began his VA career at the Iowa City VA Medical Center. He was hired as a hybrid staff/clinical pharmacist where he progressed in positions and responsibilities as a Clinical Pharmacy Specialist and then Program Manager for Ambulatory Care pharmacy. Along the way he achieved BCPS in 2000 and continued education graduating from University of Iowa Henry Tippie College of Business with his MBA in 2007. He accepted the position of Chief in Lexington mid-2007. Dr. Kuehl is proud to have overseen the expansion of pharmacy service and the residency programs during his tenure. In his spare time, he enjoys bourbon, gardening, cooking, shooting, reading,

bourbon, and cheering the Hawkeyes.

Matthew Lane, Pharm.D. PGY1 Residency Program Director



Dr. Lane received his Bachelor of Science in Pharmacy from the University of Kansas and Doctor of Pharmacy from the University of Kentucky. He completed the Pharmacy Practice and Critical Care Pharmacy Practice Residencies at the University of Kentucky Chandler Medical Center where he also served as Chief Resident. He maintains his board certification as a pharmacotherapy specialist since 1998. Dr. Lane has provided many clinical roles during his tenure at the Lexington VAHCS, including serving as the PGY1 residency director since 1996 as well as serving as the associate director of pharmacy for clinical and educational services for the majority of his VA tenure. Dr. Lane is an associate professor at the University of Kentucky College of Pharmacy. In his spare time, he is an accomplished woodworker,

enjoys sailing, and is an avid runner.

TJ Emmons, Pharm.D.
PGY1 Residency Coordinator



Dr. TJ Emmons received his Doctor of Pharmacy degree from Samford University's McWhorter School of Pharmacy. He completed a PGY1 residency at the Lexington VA Healthcare System. After completing residency, he worked with Humana Pharmacy Solutions in their clinical pharmacy review department performing formulary management functions. Dr. Emmons then returned to the Lexington VAHCS in 2009 as a medication reconciliation pharmacist where he worked until he transitioned to his current role as Formulary Manager which he has held since January 2012. In addition to being the Formulary Manager for the Lexington VAHCS, he also serves as the coordinator for the PGY1 residency program. His other practice responsibilities include medication safety reporting and serving as a preceptor for LEEP and PY4

students at the University of Kentucky College of Pharmacy. In his free time, he enjoys spending time with his wife and kids which often involves coaching his kids baseball and basketball teams or participating in school related activities.

Rebekah Sipes, Pharm.D., BCACP
PGY2 Ambulatory Care Residency Program Director



Dr. Sipes graduated from the University of Kentucky College of Pharmacy and is board certified in ambulatory care. After pharmacy school she completed her PGY1 and PGY2 Ambulatory Care Residency at the Lexington VA in Lexington, KY. After completing residency, she was the Outpatient Clinical Pharmacy Specialist Supervisor at WJB Dorn Veterans Affairs Medical Center for about two years prior to coming back to the Lexington VA. She worked in primary care briefly prior to becoming the Hepatitis C and Cardiology Clinical Pharmacy Specialist in 2015. She has been the PGY2 Ambulatory Care Residency Program Director since 2016. In her spare time, she enjoys spending time with her family and friends, trying new restaurants, watching and attending sporting events, and riding horses.

Lindsay Wells, Pharm.D., BCPS

PGY2 Pain Management and Palliative Care Residency Program Director



Dr. Lindsay Wells received her B.S in Pharmaceutical Sciences and Doctor of Pharmacy degrees from the University of Mississippi School of Pharmacy. She completed a PGY1 residency at the G.V. (Sonny) Montgomery VA Medical Center and PGY2 Pain Management and Palliative Care residency at the Central Arkansas Veterans Health Care System. She is board certified in pharmacotherapy. Dr. Wells first job was helping create a pain pharmacists' position as part of an Integrative Medicine patient aligned care team at the Little Rock Arkansas VA. Dr. Wells has worked at the Lexington VA Health Care System since 2015 as a clinical pharmacy specialist in pain management. She was the first pain management pharmacist at the Lexington VA. Her clinical practice areas include primary care and an interdisciplinary pain clinic. Dr. Wells is the residency program director for the PGY2 Pain Management and Palliative Care residency at the Lexington VA, established in 2019. She is also an adjunct faculty for the University of Kentucky College of Pharmacy. In her spare time, she enjoys spending time with her husband and daughter, watching reality television and eating snow cones.

Courtney Eatmon, Pharm.D., BCPP

PGY2 Psychiatric Pharmacy Residency Program Director



Dr. Eatmon received both her Bachelor of Science and Doctor of Pharmacy from the University of Kentucky. She completed a Psychiatric Pharmacy Residency at the Lexington VA Health Care System and became board certified in psychiatric pharmacy in 2008. Dr. Eatmon currently specializes in the area of substance use disorders but has also practiced in general mental health. She has leadership roles in VISN and national initiatives which aim to utilize improve psychopharmacology best practices. Dr. Eatmon serves as residency program director of the PGY2 Psychiatric Pharmacy Residency program and preceptor for the PGY1 and PGY2 Ambulatory Care and Pain and Palliative Care Residency Programs at Lexington VAHCS. Additionally, she serves in the role of Assistant Professor with the University of Kentucky Department of Pharmacy Practice and Science. In her spare time, she enjoys hanging out with her husband and daughter, cooking, reading, and watching college football.

PHARMACY PRECEPTORS

Sally Armstrong, Pharm.D., BCACP, CDCES

Jami Bailey, Pharm.D., BCPS

Bridger Bright, Pharm.D., LDE

Justin Butler, Pharm.D., BCPP

Holly Cowley, Pharm.D., BCPS

Kelly Davis, Pharm.D., BCPS, BCCCP

Lindsey Dodds, Pharm.D.

Brittany Dominick, Pharm.D.

Tara Downs, Pharm.D., BCACP, BCGP

Mary (Mimi) Roads, Pharm.D., BCPP

John (TJ) Emmons, Pharm.D.

Terry German, Pharm.D.

Carrie Isaacs, Pharm.D., CDCES, M-LDE

Rachel Hargreaves, Pharm.D.

Patrick Higginbotham, Pharm.D., BCPS

Jenna Houranieh, Pharm.D., BCOP

Jamie Knight, Pharm.D., BCPS

Anna Lockwood, Pharm.D.

Breanna Moody, Pharm.D., BCPP

Gina Puglisi, Pharm.D., BCACP, BC-ADM

Mary Roads, Pharm.D., BCPP

Jennifer Meyer Reid, Pharm.D., MPH, BCPS

Sandra Senft, Pharm.D., PT, MPA

Brent Simpkins, Pharm.D., BCACP

Rachel Simpkins, Pharm.D., BCACP, LDE

Lisa Strunk, Pharm.D.

Natalie Walker, Pharm.D.

2020-2021 Residents

PGY1

Emily Belcher



Dr. Belcher was born and raised in Florence, KY. She attended the University of Kentucky for two years of undergraduate studies before receiving her Pharm.D. from the University of Kentucky College of Pharmacy. She was actively involved in many student organizations including APhA-ASP, SSHP, Kentucky Society of Health-System Pharmacists, Kentucky Pharmacist Association, Kappa Psi, and Phi Lambda Sigma. Upon completion of her PGY-1 residency, she plans to pursue a PGY-2 position in ambulatory care. Eventually, she would like to obtain a position as a clinical pharmacy specialist and become board certified in ambulatory care. In her free time, Emily enjoys spending time with her husband and dog, playing board games, cooking new recipes, traveling, and cheering on the Kentucky Wildcats!

Kailen Combs



Dr. Kailen Combs Ashley is from Hazard, Kentucky. She attended the University of Kentucky for three years for her undergraduate studies where she majored in human nutrition and received her Pharm.D. from the University of Kentucky College of Pharmacy. While in pharmacy school Kailen was involved in KAPS and served as service chair for CPFI. During pharmacy school, Kailen worked as an intern during breaks at Appalachian Regional Healthcare in her hometown. Outside of pharmacy, Kailen enjoys wakeboarding, hiking and spending time with friends and family. After completing her PGY-1 residency training, Kailen hopes to pursue PGY-2 training in Psychiatric Pharmacy.

Mackenzie McGraw



Dr. Mackenzie McGraw was born and raised in Oskaloosa, IA. She graduated from Simpson College, where she played volleyball for 4 years and earned my B.A. in Biochemistry. She then went on to attain my Doctorate of Pharmacy at the University of Iowa in Iowa City, IA. During her time at the University of Iowa, she was involved in several student organizations such as APhA-ASP, ASHP-SSHP, College of Pharmacy Admissions Panel, and the Iowa Pharmacy Association. She also spent time volunteering in various settings such as the Free Mental Health Clinic and the Emergency Department at the University. Upon completion of my PGY1 residency, she hopes to pursue a PGY2 in either ambulatory care or psychiatry and eventually become a clinical pharmacist within the VA. In her spare time, she likes to do anything outside; but she especially likes to golf, hike, and be at the lake. She and her fiancé are avid sports fans and love to watch college football; they also have a 7 year old Maltese mix named Bronx who takes up most of their time!

PGY2 Ambulatory Care

Makayla Wiles



Dr. Makayla Wiles was born and raised in Elkton, Kentucky. She attended the University of Kentucky for two years of undergraduate studies before receiving her PharmD from the University of Kentucky College of Pharmacy in 2019. During her time at UK, she was actively involved in many student organizations including Lambda Kappa Sigma (LKS), Rho Chi, Phi Lambda Sigma (PLS), Christian Pharmacists Fellowship International (CPFI), Kentucky Alliance for Pharmacy Students (KAPS), ASHP, APhA-ASP, KSHP, KPhA, and NCPA. She served as first vice president and chaplain of LKS, PLS PY4 Alumni Coordinator, KAPS Professional Development and Recruitment Co-Chair and PY1 Liaison.

Additionally, she was a pharmacy intern for UK Health Care ambulatory care pharmacies and meds-to-beds program throughout pharmacy school. After graduating, Makayla completed her PGY1 pharmacy practice residency at the Lexington VA Health Care System and was able to stay for a PGY2 in Ambulatory Care. As a PGY1, she served on the KPhA Educational Programming Committee and she currently serves as the PGY2 representative for KSHP Kentucky Pharmacy Residency Network (KPRN). Dr. Wiles is looking forward to managing her own Primary Care Patient Aligned Care Team (PACT) and developing a HIV PrEP service. During her free time, she enjoys cheering on the Cats, hiking, traveling, and staying involved in her church.

PGY2 Pain Management and Palliative Care

Heath McLean



Dr. Heath McLean was born and raised in the rural town of Newbern, TN. He graduated from the University of Tennessee at Martin with a B.S. in Biology, before moving to Jackson, TN to pursue a Pharm.D. at Union University College of Pharmacy. While at Union, he was involved in APhA-ASP, and held multiple leadership roles including President of the Class of 2019. Heath completed his PGY-1 training at the Memphis VA Medical Center, before moving to Lexington to continue his residency training in Pain and Palliative Care. In his free time, Heath enjoys weightlifting, martial arts, and being outdoors. Upon completion of his PGY-2 training, he hopes to pursue a career as a Clinical Pharmacy Specialist in Pain Management or Palliative Care within the VA system.

PGY2 Psychiatry

Victoria Kuryluk



Dr. Kuryluk was born and raised in Queens, New York City, NY. She graduated from The University of Scranton in 2015 with a B.S. in Biology and Spanish and went on to complete her PharmD at The Ohio State University College of Pharmacy in Columbus, Ohio. While in pharmacy school, she was an active member of GenerationRx, Phi Lambda Sigma, and APhA-ASP. She also served as Student Chapter President of CPNP during her P3 year, when she established the first pharmacy student-run harm reduction clinic in the country. Victoria also worked with the curriculum planning committee to incorporate mandatory suicide prevention training and harm reduction experiences into Patient Care Lab curricula at OSU. After graduating in 2019, she completed her PGY1 Community Pharmacy Residency at The Centers for Families and Children in Cleveland, Ohio. She is currently one of the PGY2 Psychiatric Pharmacy Residents at the Lexington VA Health Care System and hopes to pursue a Clinical Pharmacy Specialist position in outpatient psychiatry or substance abuse treatment. In her free time, she loves throwing pottery, gardening, and trying to bake the perfect loaf of bread.

Sela Cathright



Dr. Cathright is originally from Columbus, GA. She received her Bachelor of Science degree in Nutrition Science from the University of Georgia. She furthered her education by earning a Doctor of Pharmacy degree from the University of Kentucky. As a pharmacy student, Sela was a member of the Student National Pharmaceutical Association (SNPhA) and enjoyed working towards its mission of improving healthcare for underserved communities. She completed her PGY1 residency with the Memphis VAMC. As a resident, her goal is to bridge the divide between patients and the healthcare system through increased access to healthcare, particularly in marginalized communities. Sela's professional interests include substance use disorders, neurodegenerative diseases, and serious mental illnesses. In her spare time, she enjoys attending concerts, shopping, and traveling. Sela is extremely grateful to complete her post-graduate training with the Veteran population at the Lexington VA Health Care System as a PGY2 psychiatric pharmacy resident.

PAST RESIDENTS

PGY1 RESIDENTS

2019-2020

- Matthew Hellman, Pharm.D.- Primary Care Pharmacist, Alexandria VA Health Care System, Fort Polk, LA
- Makayla Wiles, Pharm.D.- PGY2 Ambulatory Care, Lexington VAHCS, Lexington, KY
- Jake Matano, Pharm.D.- PGY2 Psychiatry, Salt Lake City VAHCS, Salt Lake City, UT

2018-2019

- Whitley Whitehead, Pharm.D., PGY2 Ambulatory Care Lexington VAHCS, Lexington, KY; Clinical Staff Pharmacist- Family Medicine Practice- University of Kentucky Healthcare, Lexington, KY
- Kelly Krieger, Pharm.D., BCPS - PGY2 Mental Health at Buffalo VAMC; Clinical Pharmacist- Humana
- Mency Zhu, Pharm.D. - Clinical Staff Pharmacist- Specialty Pharmacy Hematology/Oncology, University of Kentucky Healthcare, Lexington, KY

2017-2018

- Catie Ammerman Meier, Pharm.D., BCACP – PGY2 Ambulatory Care, Lexington VAHCS, Lexington, KY; Clinical Pharmacy Specialist- Anticoagulation, Cincinnati VAMC, Cincinnati, OH
- Sabrina Haskell, Pharm.D.- PGY2 Internal Medicine, William S. Middleton VAMC, Milwaukee, WI; Clinical Pharmacy Specialist- Internal Medicine, Robley Rex VAMC, Louisville, KY
- Breanna Moody, Pharm.D., BCPP- PGY2 Psychiatry, Lexington VAHCS, Lexington, KY; Clinical Pharmacy Specialist- Mental Health, Lexington VAHCS, Lexington, KY
- Holly Cowley, Pharm.D., BCPS – PGY2 Pain and Palliative Care Tennessee Valley HCS, Nashville, TN; Clinical Pharmacy Specialist- Pain Management and Palliative Care, Lexington VAHCS, Lexington, KY

2016-2017

- Stephanie Keca, Pharm.D., BCACP – PGY2 Ambulatory Care Lexington VAHCS, Lexington KY; Clinical Pharmacy Specialist-HBPC, Phoenix VAHCS, Phoenix, AZ
- Randal Steele, Pharm.D. – PGY2 Ambulatory Care Lexington VAHCS, Lexington KY; Clinical Pharmacy Specialist, Louisville VAMC, Louisville, KY
- Jenna Gilbert, Pharm.D., BCPP - Clinical Pharmacy Specialist- Behavioral Health, Parkview Health-Park Center, Inc., Fort Wayne, IN

PGY2 RESIDENTS AMBULATORY CARE

2019-2020

- Whitley Whitehead, Pharm.D., Clinical Pharmacy Specialist- Family Medicine, University of Kentucky Healthcare, Lexington, KY

2018-2019

- Catie Ammerman Meier, Pharm.D., BCACP- Clinical Pharmacy Specialist- Anticoagulation, Cincinnati VAMC, Cincinnati, OH

2017-2018

- Stephanie Keca, Pharm.D. BCACP - Clinical Pharmacy Specialist – Home Based Primary Care (HBPC), Phoenix VAHCS, Phoenix, AZ
- Randal Steele, Pharm.D., BCACP- Clinical Pharmacy Specialist-PACT, Robley Rex VAMC, Louisville, KY

2016-2017

- Ryan Albers, Pharm.D., BCACP – Clinical Pharmacy Specialist – Diabetes and Anticoagulation, Baptist Health - Louisville KY

PGY2 RESIDENTS PAIN MANAGEMENT AND PALLIATIVE CARE

2019-2020

- Nieka Jackson Pharm.D. – Clinical Pharmacy Specialist, Pain Management/Palliative Care, Carl Vinson VAMC, Dublin, GA

PGY2 RESIDENTS PSYCHIATRY

2019-2020

- Kelley Trent Pharm.D. – Clinical Pharmacy Specialist, Mental Health/Substance Use Disorders, Birmingham VAHCS, Birmingham, AL
- Steven Shofner Pharm.D. – Clinical Pharmacy Specialist, Mental Health, Corporal Michael J. Crescenz VAMC, Philadelphia, PA

2018-2019

- Breanna Moody Pharm.D., BCPP – Clinical Pharmacy Specialist, Outpatient Mental Health, Lexington VAHCS, Lexington, KY
- Caroline Richmond Pharm.D. – Clinical Pharmacy Specialist, Inpatient Mental Health, Memphis VAMC, Memphis, TN

2017-2018

- No Residents

2016-2017

- Zach Saghaian – Clinical Pharmacy Specialist, Mental Health, White City VAMC, White City, OR

Previous Resident Quotes:

- I was fortunate to have completed both my PGY1 and PGY2-Ambulatory Care residency years at the Lexington VAHCS. The diversity of available rotations and ability to guest lecture at one of the nation's top pharmacy schools allowed me to explore all of my clinical interests in pharmacy. Most importantly, the support from both the clinical and operational pharmacy staff not only created a comfortable learning environment, but also challenged me to reach my highest potential. The Lexington VAHCS served an invaluable role in shaping me into the pharmacist that I am today. -- Stephanie Keca, Pharm.D.
- My time as a PGY1 and PGY2 pharmacy resident at the Lexington VA Health Care System provided me with a wide variety of experiences that have molded me into the practitioner I am today. The PGY2 psychiatric pharmacy residency is one of the most comprehensive psychiatric training programs in the country offering experiences in both ambulatory and inpatient settings, as well as adolescent and specialty practice settings. More importantly, this program fosters strong mentor relationships and independence that prepares graduates to step directly into any psychiatric pharmacy position with confidence. It is an honor to continue this legacy of excellence as a preceptor in the program. – Breanna Moody, Pharm.D.
- My time as a PGY1 and PGY2 pharmacy resident at the Lexington VA Health Care System were two years of invaluable experiences that I would not trade for the world. After completing my PGY2 residency in ambulatory care, I was prepared and confident that I could have begun working in a variety of different ambulatory care clinics due to the strong clinic experience and the independence that my preceptors provided. The relationships that I gained with both my coresidents and preceptors were also aspects of the residency program that are second to none. The Lexington VA residency program allowed me to establish my identity as a Clinical Pharmacy Specialist and instilled in me a passion for patient care, a commitment to lifelong learning, and a desire to continue working with our Veteran population in chronic disease state management. – Catie Ammerman Meier, Pharm.D.
- During my PGY-2 tenure at the Lexington VA Health Care System, I was able to develop my skills as a clinical practitioner in the specialty of Pain Management and Palliative Care. As the first resident of this growing program, I was given numerous opportunities to create lasting relationships with healthcare providers, medical residents, pharmacy students, and medical specialists. These experiences fostered my development as independent clinician and allotted me the tools necessary to perform confidently. In addition, I gained life-long relationships with coresidents, preceptors, and pharmacy staff. The Lexington VA Health Care System provides support to their residents and truly cares about their success. The training and mentorship provided by this program well prepared me for my current role as a Clinical Pharmacist in Pain Management/Palliative Care. – Nieka Jackson, Pharm.D.

PGY1 Learning Experience Descriptions

PGY1 Pharmacy Practice Residency

The PGY1 pharmacy practice residency program is a one-year, full-time residency program accredited by ASHP currently with 3 positions available. The PGY1 pharmacy residency program builds on Doctor of Pharmacy (Pharm.D.) education and outcomes to contribute to the development of clinical pharmacists responsible for medication-related care of patients with a wide range of conditions, eligible for board certification, and eligible for postgraduate year two (PGY2) pharmacy residency training.

Clinical, operational, and educational aspects of pharmacy practice are emphasized during this training experience. Residents will complete rotations including ambulatory care, internal medicine, geriatrics, primary care, and anticoagulation. Other opportunities may be available based on resident interest. Residents will complete and present a primary research project. They will also participate in the UK College of Pharmacy teaching certificate program, which incorporates didactic lecturing, small group/lab facilitation and precepting Doctor of Pharmacy students on clerkship rotations. Longitudinal experiences are integrated into the program, including pharmacist coordinated clinics, (e.g., mental health, hepatitis c and pharmacotherapy clinics), formulary management and administration.

Core/Required Rotations

Acute Care/Internal Medicine (6 weeks)

The pharmacy resident will play an active role in managing patients admitted to one of the medicine services teams. These teams consist of an attending physician, medical residents, interns, students, and pharmacy resident. The pharmacy resident will serve as the pharmacy liaison to the team and provide drug information and patient-specific medication recommendations with the goal of improving patient outcomes. Other activities include participating in daily rounds, monitoring patient medication therapy, reporting adverse drug reactions, pharmacokinetic monitoring and performing medication reconciliations. Teaching opportunities include giving in-services to health care staff and precepting pharmacy students. The resident will also be responsible for completing admission and discharge medication reconciliations on patients.

Anticoagulation Clinic (4 weeks)

The resident will be involved in responding to consults and managing patients prescribed warfarin, long-term enoxaparin, and direct oral anticoagulants (DOAC). Management includes patient and family education, warfarin dose titration, lab monitoring to ensure appropriate DOAC dosing, and peri-procedure anticoagulation management. The clinic uses both face-to-face and telephone monitoring and counseling. The clinic is responsible for monitoring >2000 patients on a variety of anticoagulants.

Geriatrics

(Community Living Center (CLC) – 3 weeks and Home-Based Primary Care (HBPC)- 3 weeks)

The Geriatrics rotation involves managing patients through 2 settings unique to the VA, a Community Living Center (CLC) and Home-Based Primary Care (HBPC). Within the CLC, the resident will be involved in conducting Drug Regimen Reviews (DRRs) for patients who are residing within the living center while also participating in multidisciplinary team meetings. Patients residing within the CLC could be short-term or long-term rehabilitation or hospice and palliative care. Drug regimen reviews are completed every 30 days for each patient, with recommendations sent to the practitioner.

HBPC is service provided to veterans that facilitates their care at home rather than in a nursing home environment. You will participate in multidisciplinary patient care meetings while also providing DRRs every 90 days on enrolled patients. DRRs will be utilized to provide recommendations on drug therapy while focusing on dose adjustments and deprescribing.

Both CLC and HBPC services also provide targeted management for specific therapies such as anticoagulation and pain management.

Orientation/Hospital Introduction (6 weeks)

This experience will orient the resident to the hospital and pharmacy service. The resident will become familiarized with both the inpatient and outpatient pharmacy services provided by the staff. These activities include learning the computer system (CPRS/Vista) and how to enter notes; inpatient and outpatient order processing; process/check prescriptions; controlled substance inventory management; intravenous admixture preparation; medication reconciliation; counseling patients; and aspects of formulary management.

Pharmacoeconomics/Formulary Management (4 weeks)

The residents will be introduced to managed care principles involved with managing a health system pharmacy formulary by utilizing formulary management and pharmacoeconomic principles. The resident will gain an overall understanding of the VA hospital pharmacy service and the various clinical services provided. Familiarity and an understanding of the VA Formulary System and the role of National, VISN, and Local P&T committees will be developed. Skills developed will include medical literature searches to provide drug information, develop drug protocols, and for special project presentations. Understanding the process of performing a medication use evaluation (MUE) to evaluate drug use, provider prescribing patterns, and/or patient drug utilization to determine appropriateness of drug therapy will be gained. Additional skill obtained will include principles involved in the electronic formulary management process using medication use evaluation, case management, treatment guidelines/criteria for use, cost containment initiatives, non-formulary process, and understand the importance of utilizing formulary management and pharmacoeconomic principles in formulary decision making.

Primary Care (6 weeks)

Residents will be involved in a progressive primary care program with extensive clinical pharmacy involvement. Primary care clinical pharmacy specialists assist providers in chronic disease state management, primarily for diabetes, hypertension, and dyslipidemia. Our pharmacist-managed clinics are medication management clinics that offer scheduled individual appointments, walk-in visits, telephone follow-ups, and group clinic visits. The Primary Care Experience is a required PGY1 rotation that provides the resident exposure to various clinic sites to experience practice differences unique to different pharmacy practitioners and primary care teams. The primary preceptor will be assigned at the beginning of each rotation. The resident will be given more responsibility for direct patient care, progressively increasing toward independence at a pace determined by both the resident and preceptors. The pharmacy resident will develop skills in establishing collaborative professional relationships and partnerships with patients, conducting necessary physical assessment, providing patient education, and communicating appropriate drug information to both patients and health care personnel. By completion of this rotation, the resident should be able to provide evidence-based, patient-centered treatment for chronic illnesses, with emphasis on diabetes, dyslipidemia, and hypertension. Primary care clinical pharmacy specialists also provide a consult-based drug information/e-consult service for all Lexington VA primary care clinics and community VA clinics. As part of the Primary Care Experience, the resident will be also be responsible for answering drug information questions using appropriate references and formulating evidence-based responses. The pharmacy resident will develop skills in using drug information references and become a valuable drug information resource to the health care team.

Mental Health (4 weeks)

The resident will be required to complete one mental health focused experience and they can select from one of the following options to accomplish this:

Inpatient Mental Health

The resident will be an active member of the multidisciplinary team consisting of psychiatrists, psychologists, social workers, nurses, and students. Residents are integral in implementation of drug therapy, drug monitoring, providing drug information to the staff, and educating the patients. This rotation is designed to allow the resident to provide evidence-based, patient-centered medication therapy management with the psychiatry team. The resident is exposed to inpatient mental health patients with diagnoses including depression, anxiety and PTSD, schizophrenia and other psychotic disorders, bipolar disorder, sleep disorders, and substance abuse. The resident will participate in patient care rounds with the inpatient team in psychiatry Monday through Friday and perform medication reconciliation on patients admitted and discharged from the psychiatry unit. The resident will also gain experience in precepting fourth year pharmacy students.

Mental Health Residential Rehabilitation Treatment (MHRRTTP)

Mental Health Residential Rehabilitation Treatment Program (MHRRTTP) is a 30-bed unit residential treatment program for Veterans struggling with severe symptoms of PTSD and/or substance use disorder. The treatment team consists of psychologists, licensed clinical social workers, advanced practice registered nurses, a clinical pharmacist, and an attending physician. The resident will be responsible for providing evidence-based, patient-centered psychiatric medication therapy management. The resident will attend daily interdisciplinary care team meetings, meet with veterans to perform initial medication reconciliation interviews, work closely with prescribers to manage medication therapy during residential stay, lead educational group sessions, and provide discharge day counseling. You will also be responsible for providing overdose prevention/naloxone education and facilitating two group educational sessions per week. Journal club, disease state and patient-centered discussions occur throughout the experience. Residents may also attend non-pharmacy groups along with veterans when appropriate in order to gain a greater understanding of the recovery process.

Outpatient Mental Health

During this experience, the resident is involved in providing direct patient care to veterans seen in the mental health pharmacotherapy clinic. Additional experiences include providing responses to electronic drug information requests, participating in psychotropic drug safety initiatives, and attending interdisciplinary care coordination and Behavioral Health Interdisciplinary Program (BHIP) meetings. The resident will participate in disease state discussions, patient-centered discussions, and journal clubs scheduled throughout the month.

Outpatient Substance Use Disorder

This learning experience will allow residents the opportunity to work closely with the Substance Abuse Treatment Program (SATP) and engage with veterans in all areas of the Lexington VA Health Care System. The clinical pharmacist who specializes in treating veterans affected by substance use disorders works under an advanced scope of practice, providing direct patient care in group and one-on-one settings. This care may occur in a variety of settings including face-to-face, via telephone, or via virtual visits (i.e. telehealth, video on demand). Additional responsibilities of the pharmacist in this area include response to both oral and written drug information requests, participation in psychotropic drug or other facility initiatives, participation in interdisciplinary care meetings, and serving as liaison between pharmacy and specialty care areas.

Elective Rotations

Academic Detailing

Academic Detailing is a service for clinicians, by clinicians, that provides individualized, face-to-face outreach, to encourage evidence-based decision making to improve Veteran health outcomes. It is a scholarly approach that uses direct one-on-one social marketing techniques to provide service-oriented outreach for health care professionals using balanced, evidenced-based information. The overall goal of ADS is to improve evidence-based delivery of health care, disease management and preventative services nationally by resourcing front-line clinicians. Academic detailers use real time data and interact with front-line providers in order to understand the barriers to implementation. Detailers target educational outreach to where there is need and are able to tailor solutions and resources available to address the barriers applicable to each facility, clinical team and provider. Academic Detailing uses a strategic intervention to promote evidence-based treatments, improve quality of care, assess delivery models and resources which results in improvements for the healthcare system. The information is provided interactively so the detailer can: understand where the provider is coming from in terms of knowledge, attitudes, and behavior; modify the discussion appropriately; engage the provider; and conclude the visit with specific practice-change action items. Over time, the goal is for the detailer and provider to develop a trusted and synergistic relationship.

Acute Care/ICU

The 6 South ICU provides care to medical, surgical, and cardiac intensive care patients. The population includes patients that have undergone procedures including but not limited to cardiac catheterization, thoracic, colorectal, and vascular surgeries, and patients with acute conditions such as sepsis, septic and cardiogenic shock, respiratory failure and decompensated heart failure. The pharmacy resident on service is expected to attend interdisciplinary rounds 6 days a week, provide pharmacotherapy services to patients with critical illnesses, participate as an integral member of the Code 500 team and assist with post-surgical care. The resident on service is also expected to assist in precepting any pharmacy students on rotation to provide optimal patient care.

Administration

The resident will be involved in aspects related to pharmacy administration which may include a variety of experiences. Experiences will be based on the timing of the rotation but may include participating in any or all facets of the resident selection process; participating in administration related projects to evaluate current services or develop guidelines for the creation of new services; conducting additional medication use evaluations; and participation in projects related to medication safety.

Antimicrobial Stewardship

The purpose of this elective Antimicrobial Stewardship experience is to provide the resident with an opportunity to promote judicious use of antimicrobials in both the inpatient and outpatient settings in order to improve patient outcomes, reduce microbial resistance, and decrease the spread of infections caused by multidrug-resistant organisms. Throughout the rotation, the resident will perform facility antimicrobial stewardship duties, ensuring optimal antimicrobial selection, dose, route of administration, and duration of treatment for various infectious disease states. Successful completion of this rotation will require the resident to display initiative, autonomy, and effective communication strategies with other healthcare professionals.

Cardiology/Heart Failure

Residents will be involved with managing patient health needs based upon provider referrals in an outpatient setting. These patients are either managed through clinic appointments or telephone follow-up. Residents evaluate drug regimens for efficacy, adherence, and adverse effects, make appropriate adjustments to the medication regimen, and order necessary laboratory tests. Teaching opportunities include precepting pharmacy students and providing education to patients, caregivers, and staff.

GERIPACT

This learning experience is designed to give the resident an understanding of disease states and the associated treatment encountered in the geriatric patient. This rotation will stress the application of therapeutics in the care of the elderly patient and require the resident to develop the skills in proper drug therapy selection, patient monitoring, deprescribing and patient/staff education. Successful completion of this rotation will require development of intellectual independence, initiative, and appropriate interactive skills with other health care professionals.

Inpatient Mental Health

The resident will be an active member of the multidisciplinary team consisting of psychiatrists, psychologists, social workers, nurses, and students. Residents are integral in implementation of drug therapy, drug monitoring, providing drug information to the staff, and educating the patients. This rotation is designed to allow the resident to provide evidence-based, patient-centered medication therapy management with the psychiatry team. The resident is exposed to inpatient mental health patients with diagnoses including depression, anxiety and PTSD, schizophrenia and other psychotic disorders, bipolar disorder, sleep disorders, and substance abuse. The resident will participate in patient care rounds with the inpatient team in psychiatry Monday through Friday and perform medication reconciliation on patients admitted and discharged from the psychiatry unit. The resident will also gain experience in precepting fourth year pharmacy students.

Hematology/Oncology

The hematology/oncology rotational experience includes a wide range of patient care and educational activities. Residents will assist in the management of cancer patients and their chemotherapy in the outpatient oncology treatment center and through oral chemotherapy clinic. They will also assist in the care of cancer patients who have been admitted to the acute care environment, either as a complication of their disease process or because of their treatment. The resident will interact with patients and their family, medical staff and providers in developing treatment plans and assist in toxicity management in these patients. A working knowledge of accepted treatment guidelines and supportive care issues are emphasized throughout the rotation.

Mental Health Residential Rehabilitation Treatment (MHR RTP)

Mental Health Residential Rehabilitation Treatment Program (MHR RTP) is a 30-bed unit residential treatment program for Veterans struggling with severe symptoms of PTSD and/or substance use disorder. The treatment team consists of psychologists, licensed clinical social workers, advanced practice registered nurses, a clinical pharmacist, and an attending physician. The resident will be responsible for providing evidence-based, patient-centered psychiatric medication therapy management. The resident will attend daily interdisciplinary care team meetings, meet with veterans to perform initial medication reconciliation interviews, work closely with prescribers to manage medication therapy during residential stay, lead educational group sessions, and provide discharge day counseling. You will also be responsible for providing overdose prevention/naloxone education and facilitating two group educational sessions per week. Journal club, disease state and patient-centered discussions occur throughout the experience. Residents may also attend non-pharmacy groups along with veterans when appropriate in order to gain a greater understanding of the recovery process.

Outpatient Mental Health

During this experience, the resident is involved in providing direct patient care to veterans seen in the mental health pharmacotherapy clinic. Additional experiences include providing responses to electronic drug information requests, participating in psychotropic drug safety initiatives, and attending interdisciplinary care coordination and Behavioral Health Interdisciplinary Program (BHIP) meetings. The resident will participate in disease state discussions, patient-centered discussions, and journal clubs scheduled throughout the month.

Outpatient Substance Use Disorder

This learning experience will allow residents the opportunity to work closely with the Substance Abuse Treatment Program (SATP) and engage with veterans in all areas of the Lexington VA Health Care System. The clinical pharmacist who specializes in treating veterans affected by substance use disorders works under an advanced scope of practice, providing direct patient care in group and one-on-one settings. This care may occur in a variety of settings including face-to-face, via telephone, or via virtual visits (i.e. telehealth, video on demand). Additional responsibilities of the pharmacist in this area include response to both oral and written drug information requests, participation in psychotropic drug or other facility initiatives,

participation in interdisciplinary care meetings, and serving as liaison between pharmacy and specialty care areas.

Pain Management

During this learning experience, the resident will be exposed to chronic pain management services provided to Veterans at the Lexington VA Health Care System. The resident will gain knowledge and understanding through interaction with Veterans, healthcare providers, preceptor discussion, assigned readings, projects, and participation in the Pain Committee. The resident will provide efficient, effective, evidence-based, patient-centered treatment for Veterans requiring chronic pain medications for treatment of specified disease states. One day a week is spent at the Bowling Campus with the Chronic Pain Management Clinic. The interdisciplinary team is comprised of an anesthesiologist, pain psychologist and pain pharmacist. The CPMC provides face to face consultation or e-consult service to the Patient Aligned Care Teams (PACTs) to provide structured, interdisciplinary, multi-modal, collaborative care, emphasizing pain self-management skills with adjunctive treatments. The role of the clinical pharmacist within this setting includes: performing pain assessment and monitoring, prescribing non-opioid medications within a scope of practice, medication counseling, ordering relevant labs and monitoring results, opioid titration or tapering, naloxone education, provider education concerning medication or pain related topics, and answering drug information electronic consults. The resident will aid the clinical pharmacist specialist as the medication expert in the primary care setting.

Palliative Care and Hospice- Inpatient/Outpatient

The palliative care treatment team provides compassionate, individualized care for patients with advanced disease. Palliative care at the Lexington VA HCS is integrated into the acute medicine wards as an inpatient consultation program and serves the ambulatory care setting through outpatient telephone and face-to-face encounters. The interdisciplinary palliative care team consists of a provider (physicians), clinical pharmacist, psychologist, chaplain, and social worker. The team is experienced in working as a coordinated unit delivering patient-centered assessments and developing goals of care with vulnerable Veterans. The role of the clinical pharmacist within the palliative care team includes: actively participating in inpatient rounds to recommend and evaluate drug therapies for symptom management, answering drug therapy questions as they arise, creating and monitoring therapeutic care plans for patients in the outpatient setting, medication counseling, and team education concerning medication topics. The resident will aid the clinical pharmacy specialist as the medication expert on the palliative care team.

Research

If the resident selects research time, it will be expected that they will focus on their research project whether it is data collection/analysis or manuscript preparation. They may also be involved in aspects related to the investigational drug service and medication safety as available.

Off-Site Electives

There may be opportunities available to participate in rotations offered through the University of Kentucky Chandler Medical Center. These opportunities are subject to availability of clinical preceptors and that residents have the necessary licensure. Residents will be required to have Kentucky licensure and current ACLS provider certification for these rotations.

Required Longitudinal Experiences

Teaching and Education

This 12-month longitudinal teaching and education experience is designed to provide the resident an opportunity to lead didactic instruction, small group case facilitation, patient education sessions, and continuing education in-service presentations. This will be done in conjunction with meeting the requirements of your teaching certificate through the University of Kentucky College of Pharmacy. Additionally, the resident will gain precepting experience as he/she serves as co-preceptor to both LEEP and Advanced Pharmacy Practice Experience (APPE) students.

Research

The residency project is a required, longitudinal learning experience. Each resident is required to complete a major project. The project may be in the form of original research or evaluation and improvement of an aspect of pharmacy operations or patient care services. It is expected that, if required, the resident go through the process of project approval by the Veterans Affairs Institutional Review Board (IRB) and VA Research and Development (R&D) Committee. The finished project should be presented to a multidisciplinary group and of publishable quality.

Administration/Practice Management

These monthly meetings will be led by a variety of clinical pharmacy preceptors and will include topics related to pharmacy ethics, personnel issues, finance, pharmacy management, VA specific topics, formularies, and organizational structures and committees.

Medication Reconciliation/Staffing

This longitudinal required staffing rotation involves staffing one 4-hour evening shift (4:30-8:30 pm), every week (on a weekday M-F) in the inpatient pharmacy where responsibilities include processing inpatient and outpatient orders, preparing IV medications, checking medications to be sent to the floors, and providing discharge counseling when needed. Additionally, the resident will staff about every 3rd weekend on Saturday (outpatient pharmacy) and Sunday (medication reconciliation). Responsibilities in the outpatient pharmacy will include filling prescriptions (controlled and non-controlled), counseling patients, and troubleshooting outpatient medication related issues. Responsibilities in medication reconciliation include conducting admission interviews, processing discharge medications, providing discharge counseling, and managing the use of inpatient anticoagulants.

PGY1 Curriculum

Required Rotations (36 weeks)

- Orientation (6 weeks)
- Primary Care (6 weeks)
- Acute Care (6 weeks)
- Mental Health (4 weeks-choose one)
 - Inpatient Mental Health
 - Outpatient Mental Health
 - Outpatient Substance Use Disorders
 - Mental Health Residential Rehabilitation Treatment Program (MHR RTP)
- Anticoagulation (4 weeks)
- Formulary Management (4 weeks)
- Community Living Center (CLC) (3 weeks)
- Home Based Primary Care (HBPC) (3 weeks)

Required Longitudinal Experiences

- Teaching and Education
- Research
- Administration/Practice Management
- Medication Reconciliation/Staffing

Elective Residency Experiences (16 weeks)

- Repetition of any required learning experience
- Academic Detailing
- Acute Care/ICU
- Administration
- Antimicrobial Stewardship
- Cardiology/Heart Failure
- Geri PACT
- Inpatient Mental Health
- Hematology/Oncology
- Mental Health Residential Rehabilitation Treatment Program (MHR RTP)
- Outpatient Mental Health
- Outpatient Substance Use Disorder
- Primary Care Pain Management
- Inpatient/Outpatient Palliative Care and Hospice
- Off-Site Electives (available upon request and availability)

Required Residency Activities

- Completion of the University of Kentucky College of Pharmacy (UKCOP) Teaching Certificate Program
- Precept UKCOP LEEP students as assigned
- Complete and present major project at a regional or national conference
- Prepare publication-ready manuscript of research project
- Clinical Pearls Presentations
- Administrative tasks
 - P&T Minutes (at least 1 meeting)
 - Medication Use Evaluation
 - Newsletter

PGY2 Ambulatory Care Curriculum

Required Learning Experiences

- Primary Care (PACT) Clinic
- Anticoagulation Clinic
- Formulary Management
- Geriatric Primary Care (GeriPACT) Clinic

Required Longitudinal Experiences

- Cardiology Clinic
- Hepatitis C Clinic
- Endocrinology/Diabetes Clinic
- Renal/Epoetin alfa Dosing
- Neurology Clinic
- Women's Health
- Primary Care (PACT) Resident Clinic
- Administrative & Teaching experiences

Elective Learning Experiences

- Outpatient Mental Health Clinic
- Primary Care-Mental Health Integration
- Hematology/Oncology
- Academic Detailing
- Antimicrobial Stewardship
- Home Based Primary Care (HBPC)
- Primary Care Pain Management

Required Residency Activities

- Completion of the University of Kentucky College of Pharmacy (UKCOP) Teaching Certificate Program (if not completed during PGY1)
- Precept UKCOP LEEP students as assigned
- Complete and present major project at a regional or national conference
- Prepare publication-ready manuscript of research project
- Clinical Pearls Presentations
- Administrative tasks
 - P&T Minutes (at least 1 meeting)
 - Medication Use Evaluation
 - Newsletter
- Ambulatory Care Service Development Project

PGY2 Pain Management and Palliative Care Curriculum

Required Learning Experiences (40 weeks)

- Orientation (4 weeks)
- Acute Pain Management (6 weeks)
- Inpatient/Outpatient Palliative Care and Hospice (6 weeks)
- Outpatient Substance Use Disorder (6 weeks)
- Hematology/Oncology (6 weeks)
- Mental Health Residential Rehabilitation Treatment Program (MHR RTP) (6 weeks)
- Primary Care Pain Management (6 weeks)

Required Longitudinal Experiences

- Chronic Pain Management Clinic
- Teaching and Education
- Research
- Administration/Practice Management
- Medication Reconciliation/Staffing

Elective Learning Experiences (12 weeks)

- Repetition of any required learning experience
- Academic Detailing
- Geri PACT
- Outpatient Mental Health
- Geriatrics (Community Living Center)
- Bluegrass Care Navigators (Off-Site Hospice/Palliative Care)

Required Residency Activities

- Completion of the University of Kentucky College of Pharmacy (UKCOP) Teaching Certificate Program (if not completed during PGY1)
- Precept UKCOP LEEP students as assigned
- Complete and present major project at a regional or national conference
- Prepare publication-ready manuscript of research project
- Clinical Pearls Presentations
- Administrative tasks
 - P&T Minutes (at least 1 meeting)
 - Medication Use Evaluation
 - Newsletter

PGY2 Psychiatry Curriculum

Required Learning Experiences (34 weeks)

- Orientation (4 weeks)
- Outpatient Mental Health Clinic (6 weeks)
- Inpatient Psychiatry (6 weeks)
- Outpatient Substance Use Disorders (6 weeks)
- Mental Health Residential Rehabilitation Treatment Program (MHR RTP) (6 weeks)
- Primary Care Pain Management (6 weeks)

Required Longitudinal Experiences

- Teaching and Education
- Research
- Practice Management
- Medication Reconciliation/Staffing

Elective Residency Experiences (18 weeks)

- Repetition of any required learning experience
- Academic Detailing
- Geriatric Psychiatry
- Adolescent Psychiatry
- Chronic Inpatient Psychiatry
- Hematology/Oncology
- Palliative Care and Hospice- Inpatient/Outpatient
- Off-Site Electives (available upon request and availability)

Required Residency Activities

- Completion of the University of Kentucky College of Pharmacy (UKCOP) Teaching Certificate Program (if not completed during PGY1)
- Precept UKCOP LEEP students as assigned
- Complete and present major project at a regional or national conference
- Prepare publication-ready manuscript of research project
- Clinical Pearls Presentations
- Administrative tasks
 - P&T Minutes (at least 1 meeting)
 - Medication Use Evaluation
 - Newsletter

Application Information

PGY1 RESIDENCY

APPLICATION REQUIREMENTS

Applicant must be a U.S. Citizen who has completed a Doctor of Pharmacy curriculum from an accredited school of pharmacy. Only applicants from ACPE-accredited or pending accreditation schools of pharmacy will be reviewed and considered for an interview. All applicants must participate in the ASHP Residency Matching Process.

APPLICATION MATERIAL REQUIRED

- Letter of intent- 1 page
- Curriculum Vitae
- Official college transcripts
- Letter from pharmacy school indicating class rank
- Three (3) letters of recommendation using standard PhORCAS template
- VA Form 10-2850c (<https://www.va.gov/vaforms/medical/pdf/vha-10-2850c-fill.pdf>)

APPLICATION DEADLINE: 1/3/2021

PROGRAM NUMBER: 52300

NMS CODE: 172313

Please use Pharmacy Online Residency Centralized Application Service, PhORCAS, to apply at <http://www.ashp.org/phorcas>

PGY2 Ambulatory Care Residency

APPLICATION REQUIREMENTS

Applicants must be a U.S. citizen who has completed a Doctor of Pharmacy curriculum from an accredited school of pharmacy and has completed, or in the process of completing, a PGY1 ASHP accredited or pending accreditation residency program. All applicants must participate in the ASHP Residency Matching Process.

APPLICATION MATERIAL REQUIRED

- Letter of intent- 1 page
- Curriculum Vitae
- Official College Transcript
- Three (3) letters of recommendation using standard PhORCAS template
- VA Form 10-2850c (<https://www.va.gov/vaforms/medical/pdf/vha-10-2850c-fill.pdf>)

APPLICATION DEADLINE: 12/31/20

PROGRAM NUMBER: 52007

NMS CODE: 629865

Please use Pharmacy Online Residency Centralized Application Service, PhORCAS, to apply at <http://www.ashp.org/phorcas>

PGY2 Pain Management and Palliative Care Residency

APPLICATION REQUIREMENTS

Applicants must be a U.S. citizen who has completed a Doctor of Pharmacy curriculum from an accredited school of pharmacy and has completed, or in the process of completing, a PGY1 ASHP accredited or pending accreditation residency program. All applicants must participate in the ASHP Residency Matching Process.

APPLICATION MATERIAL REQUIRED

- Letter of intent – 1 page
- Curriculum Vitae
- Official college transcripts
- Three (3) letters of recommendation using standard template in PhORCAS (1 required from PGY1 residency program director)
- VA Form 10-2850c (<https://www.va.gov/vaforms/medical/pdf/vha-10-2850c-fill.pdf>)

APPLICATION DEADLINE: 1/5/2021

PROGRAM NUMBER: 52046

NMS CODE: 600273

Please use Pharmacy Online Residency Centralized Application Service, PhORCAS, to apply at <http://www.ashp.org/phorcas>

PGY2 Psychiatric Residency

APPLICATION REQUIREMENTS

Applicants must be a U.S. citizen who has completed a Doctor of Pharmacy curriculum from an accredited school of pharmacy and has completed, or in the process of completing, a PGY1 ASHP accredited or pending accreditation residency program. All applicants must participate in the ASHP Residency Matching Process.

APPLICATION MATERIAL REQUIRED

- Letter of intent
- Curriculum Vitae
- Official college transcripts
- Three (3) letters of recommendation using standard template in PhORCAS
- VA Form 10-2850c (<https://www.va.gov/vaforms/medical/pdf/vha-10-2850c-fill.pdf>)

APPLICATION DEADLINE: 1/5/2021

PROGRAM NUMBER: 52301

NMS CODE: 533066

Please use Pharmacy Online Residency Centralized Application Service, PhORCAS, to apply at <http://www.ashp.org/phorcas>

About Lexington Kentucky

Lexington is the second largest city in Kentucky and is known as the “Horse Capital of the World”. Fun fact: with 320,000 horses in Kentucky, there's one equine for every 12 state residents. Lexington is ideally located; within a day’s drive of two-thirds of the population of the United States. Lexington is strategically located at the intersection of interstates 64 and 75 in Fayette County, Kentucky. Lexington is accessible by air with non-stop flights to 17 destinations and connecting service to hundreds of destinations worldwide. The city is set up like a wheel with spokes, with main arterial roads running from downtown out into horse country. Lexington is also known for having an astounding array of non-chain restaurants. The thriving culinary scene is the product of collaborations between local farmers and chefs dedicated to creating inventive menus. With all that Lexington has to offer, we invite you to come experience Lexington and its southern hospitality, which will clearly lead you to choose Lexington as the city for your residency.

Additional Information:

<https://www.kentuckytourism.com/lexington/lexington>

<https://www.lexingtonky.gov/browse/recreation/tourism>

Popular Attractions:

<ul style="list-style-type: none">• Kentucky Horse Park• Keeneland• The Red Mile• Rupp Area• University of Kentucky• L’escalade (LEC)• Lexington Opera House• Raven Run Nature Sanctuary• Rebecca Ruth Candy• Veteran’s Park• Whitaker Bank Ballpark	<ul style="list-style-type: none">• Arboretum• Bourbon Distilleries• Local Breweries• Local Wineries• Gratz Park• Jacobson Park• Kentucky Castle• Manchester Music Hall• Nearby hiking at Red River Gorge
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Popular Places to Eat or Drink:

<ul style="list-style-type: none">• Joe Balogna’s• Parkette Drive-In• Ramsey’s Diner• Winchell’s• Alfalfa• Doodles• Magee’s Bakery• North Lime Donuts• Great Bagel	<ul style="list-style-type: none">• Spalding’s Bakery• Athenian Grill• Stella’s• Blue Door Smokehouse Red State BBQ• Malone’s• Carson’s• Crank and Boom• Old Kentucky Chocolates• DV8
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