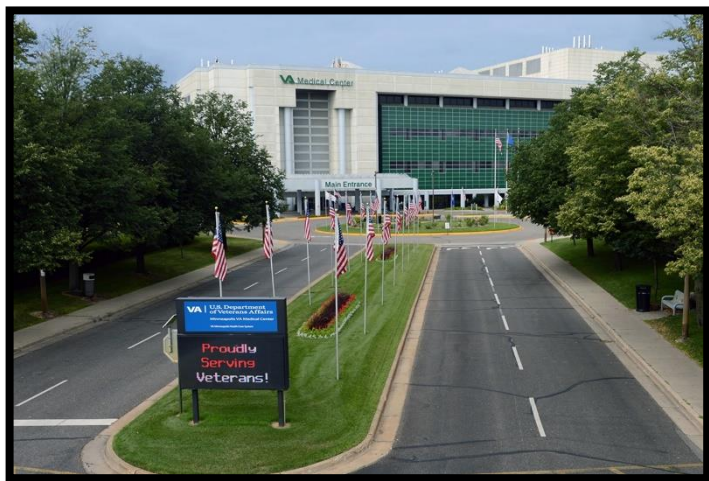


Minneapolis VA Health Care System (MVAHCS)

PGY1 Pharmacy Practice Residency 2024-25: Inpatient & Ambulatory Care

This post-graduate year one (PGY-1) pharmacy residency program at the MVAHCS (also known as the “Minneapolis VA”) is one of the first accredited residency programs with 60 years of continuous accreditation through ASHP. This program has been designed to develop practitioners with the high level of skill required to manage patient care as integral members of interdisciplinary teams. Graduates of this program have been successful in an assortment of clinical positions.



**U.S. Department
of Veterans Affairs**

ASHP-Accredited

PGY1 – Pharmacy Residency
PGY2 – Pain Management and Palliative Care
PGY2 – Psychiatric Pharmacy
PGY2 – Geriatric Pharmacy

The MVAHCS is one of the ten largest VA medical centers in the country, serving more than 100,000 veterans in a six-state area of the upper Midwest. The MVAHCS provides a full range of patient care services with state-of-the-art technology, educational resources, and research. More than 100 pharmacists play a vital role in the delivery of patient care; working as a team with physicians, nurses, and other health care practitioners to ensure America’s veterans receive the finest care. Pharmacists routinely interact one-on-one with patients providing consultation and guidance on the use of medications through an independent scope of practice. VA pharmacists fully utilize their skills and knowledge in their daily practice.

The VA clinics provide primary care as well as a wide variety of medical subspecialty care for Veterans throughout Minnesota and Wisconsin. During the ambulatory care blocks, residents co-manage patients as part of an interdisciplinary team in a practice that has evolved over the years, allowing pharmacists to practice at the top of their license. In addition to completing patient appointments, residents write progress notes for patients they assess and in collaboration with preceptors have authority to write prescriptions, order laboratory and other diagnostic tests, consult other services when indicated, and develop therapeutic and monitoring plans for patient follow-up. Care is provided via face-to-face, telephone, and video appointments. Within primary care, patients are seen for a variety of medical problems. As part of this service, residents provide interim care for patients between visits to primary care providers. Care in specialty clinics includes metabolic and endocrinology, cardiology, hepatology, gastroenterology, pulmonology, nephrology, infectious disease and HIV, neurology, spinal cord injury, hematology and oncology, pain management, anticoagulation clinics, and more. Residents also have the opportunity to develop formulary management skills.

The main hospital has over 300 beds and provides acute care services to psychiatry, spinal cord, neurology, surgery, cardiology, intensive care, and general internal medicine. There are also subacute beds in the Community Living Center (CLC). Residents spend their first or second block completing an inpatient rotation that serves as an orientation to acute care. This will assist the resident in becoming acclimated to inpatient pharmacy services and serve as a foundation for future acute care rotations and weekend staffing responsibilities. Additional inpatient rotations may include general medicine, ICU, cardiology, and rehab/transitional care wards.

Program Structure in 2024-25

| Area | Duration |
|---|--|
| Orientation | 4 weeks (2 block rotations) |
| Acute Care ¹ | 12 weeks (2 block rotations) |
| Ambulatory Care ² | 12 weeks (2 block rotations) |
| Leadership, Quality, & Management | 3 weeks (3 block rotations) |
| Electives ³ | 16 weeks (3-4 block rotations) |
| Interprofessional Experience (IPE) ⁴ | 4 weeks (1 block rotation) |
| Interprofessional Experience (IPE) ⁴ | Longitudinal (1 day per week for 11 months) |
| Project/Research/Teaching | Longitudinal (administrative) |
| Staffing | Longitudinal (1 Evening and 1 Weekend per month) |

- Acute Care: 2 required acute care block rotations. Choices include Cardiology, General Internal Medicine, or Surgery.
- Ambulatory Care: 2 required ambulatory care block rotations with at least one block being in Primary Care, Community Based Outpatient Care or Women’s Health. The second block can also be in Specialty Care (Metabolic/Endocrinology, Nephrology, Infectious Disease, Hepatology/Gastroenterology, Cardiology, Spinal Cord Injury, and more), Home Based Primary Care or Anticoagulation as well as the first 3 clinic options.
- Electives: 3-4 block rotations based on interest. To maintain a balanced first-year residency, one elective block rotation should be in ambulatory care and one elective block rotation in inpatient care.
- IPE: 4-week block and longitudinal IPE experience based on interest. Areas include Infectious Disease, Geriatric Research, Education and Clinical Center (GRECC), Academic Patient Aligned Care, Women’s Health, or Serious Mental Illness (SMI is aligned with the MH resident only).

Elective Learning Experiences

| Outpatient Focused | Inpatient Focused |
|--|--|
| Academic Detailing | Antimicrobial Stewardship |
| Addiction Recovery Services | Critical Care |
| Anticoagulation | Dementia Unit within Community Living Center (CLC) |
| Home Based Primary Care | General Geriatrics within CLC |
| Pain Management | Hospice and Palliative Care within CLC |
| Pharmacogenomics | Inpatient Psychiatry |
| Serious Mental Illness | Spinal Cord Injury |
| Women’s Health | Traumatic Brain Injury/Polytrauma/Rehab |
| Inpatient & Outpatient Focused | |
| Hematology/Oncology | Informatics |
| Prior Authorization/Formulary Management | Research |

*Other elective learning experiences may be developed based on the residents’ interests and preceptor availability

Project/Research/Teaching Requirements

The MVAHCS pharmacy residency programs use the inverted research model (IRM). During the first half of the year, residents are involved in implementation, data collection & analysis, and a final report as they finish this project. During the second half of the year, residents start a project to be finished the next residency year, performing the background research, developing the protocol, and obtaining IRB approval (if applicable). This allows residents to gain project management experience in two longitudinal projects during one residency year. Residents are expected to present a poster at the ASHP midyear clinical conference in December and orally present at the North Star Pharmacy Residency Conference in May. A medication use evaluation (MUE) is also required during the year. Lastly, all PGY-1s are required to participate in the national VA teaching certificate program which entails participating in preceptor development activities/seminars and developing a teaching portfolio. A portfolio is developed by providing education to pharmacy, nursing, medicine, and/or other disciplines during the year via writing pharmacy newsletters, continuing education presentations, journal clubs, in-service education, and more. MVAHCS is affiliated with the University of Minnesota (UMN) College of Pharmacy and School of Medicine and residents serve as preceptors to their IPPE and APPE students throughout the year.

PGY1 Pharmacy Practice Residency Application Procedure

ASHP Code: 63101; NMS Code General PGY1: 190813; NMS Code General PGY1 with MH Focus Longitudinal Experience: 190821

Applicants must be a graduate of an American Council of Pharmaceutical Education (ACPE) accredited School of Pharmacy with a Doctor of Pharmacy Degree (Pharm.D.). All residents will be required to successfully complete a state board examination. Licensure may be obtained through any U.S. State Board of Pharmacy. It is preferred that the Board Examination is completed prior to starting the residency, however there is flexibility. You must be licensed within 90 days of your start date. U.S. citizenship is required. The applicant must be registered with the American Society of Health System Pharmacists' Match Program. An interview is required for all applicants.

Application Requirements:

- Complete online application through PhORCAS
- All application materials must be submitted via PhORCAS by January 2nd of 2025
- Academic transcripts including pharmacy school transcripts with a description of the grading scale if not on a 4-point system
- Curriculum Vitae
- Question & Answer Style Letter of Intent
- Reference Letters (3) utilizing PhORCAS standardized form (hint: don't submit over 3 as only the first 3 will be read)

Some of the criteria considered in choosing residents include knowledge of professional practice, communication skills and ability to apply theory to practice, leadership ability, interest in the program, confidence, and professionalism.

See our website for additional information: <https://www.va.gov/minneapolis-health-care/work-with-us/internships-and-fellowships/pharmacy-student-and-residency-programs/>

PGY1 Pharmacy Practice Residency General Information and Benefits

General Information:

- Duration: 12 months
- Number of Positions: 3 general and 1 general with a mental health longitudinal experience
- Starting Date: June 30th, 2025
- Model Type: Teaching, Tertiary
- Estimated Stipend: \$52,069

Benefits:

- Competitive stipend
- 4 hours annual leave and 4 hours sick leave per pay period (2 weeks)
- 11 paid holidays per year
- Eligible for federal employee health
- Dedicated resident office space
- Free parking



Program Director

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Our Commitment to Diversity, Equity and Inclusion

the Minneapolis Veterans Affairs Health Care System, we are committed to fostering and sustaining an environment which celebrates diversity, provides equitable opportunities for employment and promotion, and supports inclusiveness in pharmacy culture. We embrace our differences as individuals and unite as a pharmacy team toward a common goal: to deliver optimal, patient-centered care for our nation's veterans.

Pharmacy Residents



PGY-1 Residents Top row: Mohamed Kamara, Minh Dinh, Karyssa Hurd, Priya Periakaruppan, Victoria Brooks, and Sammy Daas; PGY-2 Residents Bottom row: Claudia Epland, Jacob Mozer, Hannah VanTruong, and Steven Chen

| PGY-1 Residents | PGY-2 Residents |
|--|---|
| Victoria Brooks Email: Victoria.Brooks2@va.gov | Steven Chen Email: Steven.Chen1@va.gov |
| Sammy Daas Email: Sammy.Daas@va.gov | Claudia Epland Email: Claudia.Epland@va.gov |
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Twin Cities, MN

The Minneapolis-St. Paul metropolitan area has a combined population of over 2.4 million people. The Twin Cities are nationally recognized for their arts, most notable are the Guthrie Theater, Minnesota Orchestra, Minneapolis Institute of Art, Science Museum, and the Walker Art

Center. Not to mention the many art festivals throughout the year. The VA Medical Center is located very near to both the Mall of America and the airport. Recreational activities span the four seasons, and the state is home to seven professional sports teams: Twins, Vikings, Timberwolves, Lynx, Wild, Minnesota United FC, and St. Paul Saints. The Twin Cities are also known for music and food.

