

## PGY2 Pharmacy Pain Management and Palliative Care Residency



### **PGY2 Program Purpose**

PGY2 pharmacy residency programs build on Doctor of Pharmacy (Pharm.D.) education and PGY1 pharmacy residency programs to contribute to the development of clinical pharmacists in specialized areas of practice. PGY2 residencies provide residents with opportunities to function independently as practitioners by conceptualizing and integrating accumulated experience and knowledge and incorporating both into the provision of patient care or other advanced practice settings. Residents who successfully complete an accredited PGY2 pharmacy residency are prepared for advanced patient care, academia, or other specialized positions, along with board certification, if available.

### **Program Description**

The purpose of our PGY2 Pain Management and Palliative Care Residency Program with an emphasis on opioid reduction is to develop a pharmacist provider proficient in delivering individualized direct-patient care pharmacotherapy and care coordination services while functioning as a member of an interdisciplinary team. Residents will train alongside related disciplines (including but not limited to physician, physical therapy, psychiatry, nursing) as it relates to individualized comprehensive treatment plans. Ensuring training in evidence-based practices, the program will operate in an existing model following the latest clinical practice guidelines. Emphasis will be placed on maximizing individualized functional goals, quality of life, and minimizing patient risk. Completion of this residency will prepare the clinician for advanced clinical pharmacy practice in a multitude of pain management settings including chronic, acute, and palliative/hospice.

## Learning Experiences

The learning experiences provided have been developed to facilitate achievement of the required educational goals and objectives. The majority of learning experiences (required and elective) are longitudinal in nature. The below outline provides a basic overview of the core learning experiences.

- *Veterans Integrative Pain Management (VIPM) – Chronic Pain Management* (REQUIRED – Longitudinal)
  - Residents will spend an average of 16 hours weekly for 6 months (2 quarterly blocks) in this learning experience. The first block will be paired with the Mental Health learning experience and the second block will be paired with Substance Use Disorder learning experience. Residents will function as a member of an integrative interdisciplinary treatment team following the biopsychosocial approach to the treatment of chronic pain (team includes two physicians, a clinical psychologist, a chiropractor, and an acupuncturist). The resident will be responsible for direct patient care activities to include individualizing, implementing and managing chronic pain pharmacotherapy (opioid and non-opioid) as consulted as well as providing care coordination services as indicated. Responsibilities include opioid tapering, opioid rotations and/or adjustments, risk mitigation/opioid safety, as well as review and management of non-opioid pharmacotherapies within the context of a comprehensive treatment plan. Residents will be precepted by clinical pharmacy specialist(s) with DEA license and scope of practice allowing for full controlled substance prescriptive authority.
- *Outpatient Mental Health* (REQUIRED – Longitudinal)
  - Residents will spend 8-16 hours per week for 3 months in this learning experience. The Mental Health learning experience will be paired with the VIPM learning experience (part 1) due to the frequent overlap of chronic pain and mental health comorbidities. Responsibilities include the provision of direct patient care pharmacotherapy services, literature review, and topic discussions on common mental health conditions. The resident will collaborate with psychiatrists, psychologists, psychology interns, social workers, and nursing within the context of a comprehensive treatment plan.
- *Outpatient Substance Use Disorder* (REQUIRED – Longitudinal)
  - Residents will spend 8-16 hours per week for 3 months in this learning experience. The Substance Use Disorder (SUD) learning experience will be paired with the VIPM experience (part 2) due to the frequent overlap of chronic pain and SUD. The resident will function as an interdisciplinary team member focusing on medication assisted treatment for opioid use disorder.
- *Valor Hospice* (REQUIRED – Longitudinal)
  - Residents will spend approximately 16 hours per week for 3-6 months in the Hospice learning experience. This experience will be paired with the palliative care learning experience due to the similarity in treatment goals. Residents will be involved in patient care consultation, clinical team rounds, staff education, comprehensive medication assessment, clinical recommendations and interventions, patient/family interview, counseling, along with education, drug information requests, and literature searches.
- *Palliative Care* (REQUIRED – Longitudinal)
  - Residents will spend approximately 16 hours per week for 3-6 months in this experience. Residents will provide direct patient care pharmacotherapy services as a member of an interdisciplinary treatment team aimed at optimizing quality of life and mitigating suffering among veterans with serious, complex illness.

- *Inpatient/Acute Care Pain Management* (REQUIRED – Longitudinal)
  - Residents will spend approximately 8 hours per week for 2-3 months in this learning experience. Residents will round with the surgical team in the SICU and assist with perioperative pain management. Residents will also be available for surgical consultation regarding the management of patients considered to be high risk on high dose opioid therapy and/or patients on buprenorphine/naloxone pending a surgical procedure with expected needs for pain management.
- *Pain Education/Presentations* (REQUIRED – Longitudinal)
  - Residents will complete at least one presentation quarterly. The resident will present the pharmacotherapy section for the facility Chronic Pain Education Series during the quarterly series, pharmacotherapy specific to fibromyalgia to the men's and women's groups, as well as be part of the planning committee for the annual Mountain Area Health Education Center (MAHEC) chronic pain education retreat. The resident will present at least one lecture on pain related pharmacotherapy at the retreat. A one hour presentation on opioid overdose education and naloxone rescue kit distribution to nursing residents in the fall will also be required as well as at least one CE accredited presentation to a multidisciplinary audience.
- *Opioid Risk Review Team* (REQUIRED – Longitudinal)
  - Residents will function as a member of the facility interdisciplinary opioid risk review team. Residents will complete at least two high risk opioid therapy patient reviews per month including chart review, presentation to team, and documentation of findings/recommendations in the medical record.
- *Residency Project* (REQUIRED – Longitudinal)
  - Residents will be required to complete a major year long project designed to improve patient care through either a quality management project or formal research. Working with an assigned preceptor, residents will select a project from ideas submitted by the facility or develop their own project after being approved by the RPD. Responsibilities include development of an idea into a feasible project, writing a proposal or protocol, obtaining the necessary approvals, implementing the project, analyzing results, writing a manuscript suitable for publication and completing the documents required for manuscript submission to the selected journal.

### Requirements for Successful Completion

- Meet all ASHP PGY-2 Residency requirements including achieving all the required goals and objectives. A resident may be permitted to graduate with up to 3 objectives in a status of making progress as long as they are not major (critical) issues and in the judgement of the preceptors and residency program director, continued progress to the level expected of the objectives can occur as the resident continues to gain experience.
  - “Achieved” will be defined as – the resident has mastered this goal/objective for this rotation and can perform the task independently or upon request for this experience/population.
- Satisfactory completion of all rotations. If a rotation is not satisfactorily completed, appropriate remedial work must be completed as determined by the preceptors and program director.
- Completion of a residency project with presentation and a working manuscript including all the required forms for publication.
- Satisfactory completion of the required quarterly presentations.
- Completion of all assignments and projects as defined by the preceptors and residency program director.
- Compliance with all institutional and departmental policies.

### Application Requirements

- Graduation from an ACPE-accredited PharmD program (or equivalent)
- Completion of an ASHP-accredited PGY1 residency prior to beginning the PGY2
- Current and valid pharmacist license in any state
- Curriculum vitae
- Letter of intent
- Three formal letters of recommendation (clinical)
- United States Citizen
- Must submit application materials through PhORCAS

### Summary:

Duration:	12 months
Number of Positions:	1
Application Deadline:	January 2 <sup>nd</sup> , 2022
Starting Date:	On or around July 11 <sup>th</sup> , 2022
Estimated Stipend:	\$45,435

**About the Charles George VA Medical Center (CGVAMC)**

The CGVAMC is a Joint Commission accredited, tertiary referral, 1C facility serving nearly 48,000 Veterans residing in a 23-county area of Western North Carolina. Comprehensive health care is provided through the spectrum of primary care, tertiary care, and long-term care in areas of medicine, surgery, mental health, physical medicine and rehabilitation, spinal cord injury, neurology, oncology, dentistry, ophthalmology, women's health and geriatrics. The medical center has 119 authorized acute care beds (including 16-bed inpatient psychiatric unit), two state-of-the-art Intensive Care Units, 120 authorized Community Living Center (CLC) beds, and 18 authorized Substance Abuse Residential Rehabilitation Treatment Program beds. The medical center also operates community based outpatient clinics (CBOCs) in Franklin, Rutherford county, and Hickory, NC.



**Accredited**

The PGY-2 Pharmacy Pain and Palliative Care Residency conducted by the Charles George VAMC in Asheville, North Carolina is accredited by ASHP.

**Program Code:** 36087

**NMS Code:** 795273

**Point of Contact:**

Benjamin Michalove, PharmD, CPP

Director, Postgraduate Year Two Palliative Care/Pain Management Pharmacy

[Benjamin.Michalove2@va.gov](mailto:Benjamin.Michalove2@va.gov)