Student Roundtable Sessions PGY2 Residencies September 12, 2009 Nancy L. Shapiro, PharmD, BCPS

Postgraduate Year 2—or PGY2—residencies provide advanced training in a focused area of patient care, including:

- Ambulatory care,
- Cardiology,
- Critical care,
- Drug information,
- Emergency medicine,
- Geriatrics,
- Immunology,
- Infectious diseases,
- Informatics,
- Internal medicine,
- Managed care pharmacy systems,
- Nuclear pharmacy,
- Nutrition support,
- Oncology,
- Pediatrics,
- Pharmacotherapy,
- Practice management or administration,
- Psychiatry, or
- Transplantation.

Note: You must complete a PGY1 (general practice) residency before going on to a PGY2 (specialized) residency.

Perceived Benefits of PGY2 Residency Training:

Gain additional knowledge, experience, and specialized training

Provides additional qualifications for pharmacists practicing in a specialized area.

Enhanced marketability and the desire to secure better employment opportunities.

Experience in the education of pharmacy students.

Workforce Implications in 2020—not even considering the PGY2's

Table 3. Statistics Pertinent to Need for Pharmacy Residency Training	
Variable	Value
Projected no. Pharm.D. graduates, 2007–20	150,000 (~12,000 annually)
No. residency positions needed for 75% of graduates	
to complete residency training by 2020	~9,000
Annual growth in no. residency positions needed to	
achieve 9,000 positions by 2020 (%)	13.7
Projected no. residency graduates, 2008–20	57,200ª
Current no. residency-trained pharmacists	~13,000
No. residency-trained pharmacists by 2020	70,000
No. residency-trained pharmacists needed by 2020	~300,000
No. residency-trained pharmacists needed by 2020	
minus no. available	230,000

<code>*1600 \times 13.7% annual increase in residency positions \times 13 years.</code>

From: Johnson TJ. Pharmacist work force in 2020: Implications of requiring residency training for practice. Am J Health-Syst Pharm. 2008; 65:166-70

Additional References:

Murphy JE, Nappi JM, Bosso JA, Saseen JJ, Hemstreet BA, Halloran MA, Spinler SA, Welty TE, Dobesh PP, Chan LN, Garvin CG, Grunwald PE, Kamper CA, Sanoski CA, Witkowski PL. American College of Clinical Pharmacy. American College of Clinical Pharmacy's vision of the future: postgraduate pharmacy residency training as a prerequisite for direct patient care practice. Pharmacotherapy. 2006 May;26(5):722-33.

For more information on the types of residencies available in programs across the U.S., check www.ashp.org

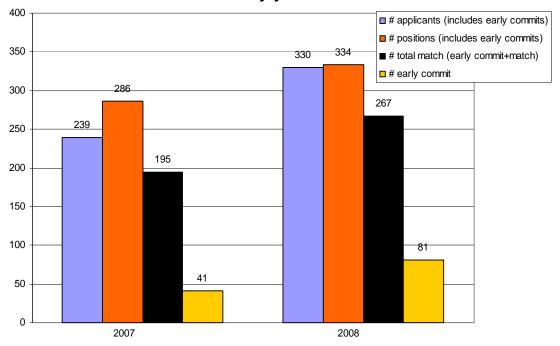
National Match Results 2009

PGY1

2,508 individuals participated in the match 1,873 positions were offered 1,651 individuals were matched with positions

PGY2

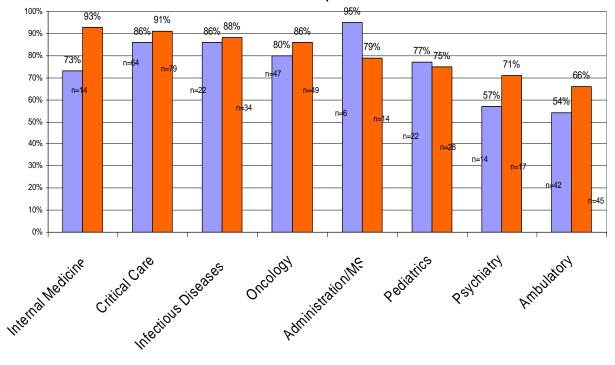
296 individuals participated in the match292 positions offered209 individuals were matched with positions88 additional positions were filled through the early commitment process



PGY2 match by year 2007-2008

PGY2 Match data 2007&2008 - Top filiing programs n= total number of postions available







Advice for residency candidates going to the Midyear Clinical Meeting

M ingling with 20,000 other pharmacists can be an intimidating experience for residency candidates at their first ASHP Midyear Clinical Meeting (MCM). A little bit of preparation on your part will improve your MCM experience and, most importantly, help you to identify residency programs that are a good fit for you.

Approximately 450 pharmacy practice residencies will be represented by about 1000 preceptors at the Residency Showcase. The Residency Showcase is held on Monday afternoon, Tuesday morning, and Tuesday afternoon; however, each program will exhibit only once. You will be joined by about 1200 other prospective residency candidates. Clearly, you will not be able to stop at each booth. You should identify programs in advance that you want to visit. Some candidates select programs by city and state, by size, or by college of pharmacy affiliation. Teeters¹ and Pochop² offer excellent advice about how to choose a residency, and I highly recommend that you read these articles in advance of the MCM.

Your goal at the Residency Showcase is to identify programs that are a good fit for your interests. The Residency Showcase is an excellent opportunity for you to interview preceptors and current residents. Ask questions designed to narrow your choices for onsite interviews to a manageable (and affordable) size. Structure your questions to find out if a particular program matches your goals, interests, and professional values. Do not worry if a program cannot offer every one of the experiences you would like to have, as you will likely change your mind over the next 18 months. Avoid asking questions that can be answered with yes or no or with a numerical value, such as how many residents are in the program and how much staffing is required. Instead, ask residency directors why they serve in this role and what they like the most about working with residents. Ask the residents at the booths if their staffing experiences contribute to their development as practitioners. Ask the residents what they like about their relationships with their preceptors and

with other pharmacists. Because of its size and the time limitations, collecting the information you need at the Residency Showcase is difficult, and I recommend that you practice ahead of time with pharmacy residents and preceptors that you meet during your clerkship experiences.

The residents' poster sessions, usually held on one day of the MCM, are too often overlooked by residency candidates. These sessions are less crowded and the atmosphere is much more relaxed than at the Residency Showcase. After all, what residents do not want to talk to interested parties about their own work? You will have plenty of time to discuss the residents' work and to find out about preceptor support, relationships with the medical staff, and the overall quality and scope of the residency.

You still cannot decide which programs to pursue? Search educational programming at the MCM using the names of program directors and preceptors, and view their posters and attend their presentations.

If you are not sure which aspect of health-system pharmacy interests you

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article must be received within three months of the article's publication.

Letters should be submitted electronically through http:// ajhp.msubmit.net. Authors without Internet access may mail one copy of their letter and a 3.5-inch high-density IBM-compatible disk containing the letter file to AJHP, 7272 Wisconsin Avenue, Bethesda, MD 20814-4836. The following



conditions must be adhered to: (1) the body of the letter must be no longer than two typewritten pages, (2) the use of references and tables should be minimized, (3) the number of authors should be no more than three, and (4) the entire letter (including references, tables, and authors' names) must be typed double-spaced. After acceptance of a letter, the authors are required to sign an exclusive publication statement and a copyright transferal form. All letters are subject to revision by the editors.

The Letters column is a forum for rapid exchange of ideas among readers of AJHP. Liberal criteria are applied in the review of submissions to encourage contributions to this column.

The Letters column includes the following types of contributions: (1) comments, addenda, and minor updates on previously published work, (2) alerts on potential problems in practice, (3) observations or comments on trends in drug use, (4) opinions on apparent trends or controversies in drug therapy or clinical research, (5) opinions on public health issues of interest to pharmacists in health systems, (6) comments on ASHP activities, and (7) human interest items about life as a pharmacist. Reports of adverse drug reactions must present a reasonably clear description of causality.

Short papers on practice innovations and other original work are included in the Notes section rather than in Letters. Letters commenting on an AJHP

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the most, check out the ASHP Section of Clinical Specialists and Scientists networking sessions. These are open forums where you will learn about the hot topics in a given area, and you may even enjoy the give-and-take enough to participate in a lively discussion.

With the right preparation and attitude, you can have an outstanding MCM and return to school with enthusiasm generated during the Meeting. As a residency preceptor, I want to thank you for your commitment to pursue residency training. I am envious of all the wonderful things you will accomplish in your professional career.

- 1. Teeters, JL. Pharmacy residency programs: how to find the one for you. *Am J Health-Syst Pharm.* 2004; 61:2254-9.
- 2. Pochop, S. Pharmacy practice residency programs. *Am J Health-Syst Pharm*. 2005; 62:1562-4.

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