Post-match Scramble: How Does This Work and What do I need to Do?

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The Numbers...

The Scramble (post-Match) Process

• Unmatched applicants and programs with available positions are provided mutual lists of each other through PhORCAS immediately after the Match
• The application process starts over again for available positions
  – Program application requirements may change for the Scramble
  – Most programs will use PhORCAS but applications and position offers may still be made “off-line”
• ASHP has requested a wait time of one week after applicant submissions open before programs make offers

Opportunity Favors the Prepared

2013-2014 Timeline*
for Post-match Scramble

• 3/7/14 – Initial submission deadline for ranking programs
• 3/21/14 – Match results released to candidates and programs
  – PhORCAS re-opens with list of available programs/positions
  – Applicants can update materials in PhORCAS for “scramble”
• 3/24/14 – Applicants can apply to available programs
• 3/31-14 – Offers can be made post-match
  – One week after application submission opens!

Prior to Match Day...

• Seek suggestions/advice from mentors on how to best prepare in case you need to scramble
• Send thank you notes to all of your reference writers thanking them for their time
  – Mention you may contact them again if you need to “scramble”
• Add any updates to your CV since the initial application process and be ready to upload to PhORCAS

*Exact dates are likely to vary for 2014-2015 and future residency cycles
On Match Day (if unsuccessful)

• Identify available programs of interest that offer training consistent with career goals
  – Include programs previously contacted without success
• Contact programs of interest ASAP with questions about their expectations and application process
• Let reference writers know right away that you would like their help again on a relatively tight timeline
• Seek out anyone who may be able to help you network with contacts at programs of interest

Do Not:

• Apply to programs outside of your area of interest just for the sake of obtaining a residency
• Let yourself be pressured into accepting a program that is not a fit with your goals
• Commit to programs while continuing to evaluate other professional options
• Need to create a NEW PhORCAS account
• Underestimate the power of networking!!!

Tips for Success

• Anticipate the potential need to “scramble” ahead of time
• Contact references early in the scramble process for help
• Create new, individualized letter(s) of intent for programs of interest
• Prepare for interviews may be:
  – Different formats (telephone, Skype, etc.)
  – Shorter duration than standard interviews
• Re-check PhORCAS often for newly available positions!

Suggested Readings

ASHP Midyear Meeting: Steps to a Successful Residency Showcase Experience
Carol Heunisch, Pharm.D, BCPS

OBJECTIVES
- Understand general information about PGY1 residencies
- Reflect on reasons to complete a residency
- Describe factors to consider for program selection
- Develop a timeline for Midyear planning & preparation
- Tips for successfully navigating the residency showcase

WHY DO A RESIDENCY?
- Opportunity to apply didactic knowledge
- Work with interdisciplinary patient care team
- Sharpen critical thinking skills
- Learn about leadership characteristics
- Exposure to variety of pharmacist career paths
- Differentiate candidates through career
- Networking

RESIDENCY PROGRAM TYPES
- Postgraduate Year 1 (PGY1)
  - Provide “generalist” training
  - Variety of practice settings: Health system, managed care, community.
  - Focus on development of clinical judgment & problem-solving skills.
  - Pharmacy practice residency most common.

RESIDENCY PROGRAM TYPES
- Postgraduate Year 2 (PGY2)
  - Provide advanced training in focused area
    - Ambulatory care, Critical Care, Drug Information, Infectious diseases, practice management/administration, nuclear pharmacy—to name just a few!
  - Integrates PGY 1 experience to allow independent practitioner functioning.
  - Prepares for board certification in practice area.
RESIDENCY PROGRAM BASICS

- Program length 1 year, full-time commitment.
- Paid stipend and usually benefits (insurance).
- Areas of program focus/training: Administration, Infectious Disease, General Medicine, Critical Care, staffing, plus electives.

RESIDENCY PROGRAM STATISTICS 2014

- About 1200 PGY1 programs nationally-hospital, clinic, community practice or managed care settings.
- PGY1 applicants = 4142
- Matched = 64%
- Increased competition
- It’s critical to make yourself be a standout candidate!

PROGRAM SELECTION FACTORS

- Program accreditation
  - Accredited programs can be found at www.ashp.org in the “Residency Directory”
- Program quality
- Patient populations & services
- Teaching commitment
- Service commitment/expectations
- General work environment
- Projects

ASHP MIDYEAR CLINICAL MEETING

- Residency Showcase
  - Informal meetings with residents, program directors, and preceptors
  - Opportunity to ask questions and get program information
  - Programs listed by training site, not specific program type
- ASHP Personnel Placement Service (PPS)
  - Optional, additional fee for participation
  - Opportunity to schedule one on one interviews
  - Good to narrow potential programs for on-site interviews
  - Recruit for PGY1, PGY2 residents as well as fellowships
  - Search for “residency program postings” www.careerpharm.com

TIMELINE FOR MIDYEAR PREPARATION

- September
  - Draft CV and cover letter
  - Submit resident matching program application agreement form and fee
    - Residency candidates must sign up for Resident Matching Program. http://www.natmatch.com/ashprmp
  - October
    - Review ASHP Online Residency Directory
    - Contact programs of interest for additional information
    - Register to attend the ASHP Midyear Clinical Meeting (don’t forget to book hotel & travel)
    - Personnel Placement Service (PPS)?

- November
  - Finalize CV
  - Make selections for programs to visit at the residency showcase
    - Find out dates & times that the programs will be at the showcase
    - Look at the diagram to figure out where the program booth is located
  - Develop a list of questions
  - Do your homework—get to know the programs
RESIDENCY SHOWCASE

• Residency Showcase
  – Professional appearance
    • Wear clothes that fit well, comfortable yet professional shoes
    • Carry a folder or portfolio for papers, notes
  – Be respectful & make good use of everyone’s time
    – Articulate your interests up front
    – Be prepared with questions
    – Programs may or may not accept CVs
    – Take notes, collect names/business cards

RESIDENCY SHOWCASE TALKING TIPS

• Be prepared to ask:
  – Opportunities (teaching, research, rotations)
  – How does the program assess potential candidates?
  – Unique features of a program/what sets it apart
• Be prepared to answer:
  – Why you are interested in the program
  – Unique qualities YOU bring to the program
  – How the residency program will help YOU meet your career goals
• DON’T ask:
  – “So, tell me about your program…”
  – Pay, location, vacation

PERSONNEL PLACEMENT SERVICE (PPS)

• Largest & most widely attended recruitment event
• Registration (and fee) required
  – Registration opened September 10
  – October 22—candidates, employers & jobs become visible
• Interviews can be set up after October 22
• Separate exhibit hall, open Sunday December 7 through Wednesday December 10 (730A-530P)

RESIDENCY RESOURCES

• http://www.ashp.org
• http://www.natmatch.com/ashprmp
• http://www.careerpharm.com
• http://www.ichpnet.org
The Interview: Getting ready to be interviewed for a PGY1 Residency

Dr. Abby Kahaleh

Resource Link:

http://www.ichpnet.org/publications_resources/member_resources_and_toolkits/residency.php
Residency Interview Pearls

Abby A. Kahaleh, BPharm, MS, PhD, MPH
Roosevelt University College of Pharmacy

Main Goal of the Interview
• Residency program perspective:
  - Evaluate which candidate is the most qualified
  - Assess which candidate fits the best
• Residency applicant perspective:
  - Evaluate clinical, management, opportunities available at the program
  - Find the program that fits the best with your interest

Prior to the Interview (1)
• Research the program
• Familiarize yourself with the location of the interview
• Gather information from current or previous residents
• Make sure all your documents have been received
• Ask about formal presentations, number of interviewers, and expectations

Prior to the Interview (2)
• Have electronic and hard copies of your CV, letter of intent
• Select your references carefully
• Share with your references the residency programs that you are interviewing with
• Dress professionally and have a positive attitude
• Practice mock interviews with friends and/or family members

Types and Format Interviews
• Individual, group, combination
• Meetings with residents, preceptors, pharmacy directors, residency directors, staff
• Presentation, clinical case
• Tour of the facility
• Breaks/meals between interviews

Interview Questions
• Personal
• Behavioral
• Clinical
• Experiential
• Reflective
Personal Questions

• What are your short and long-term career goals?
• Why do you want to do a residency?
• What are your strengths and weaknesses?
• What is your greatest professional accomplishment?
• What makes you the best candidate?

Behavioral Questions

• Tell me about a time when you took the lead in a situation
• Share an example when you had a conflict with a colleague, preceptor, or supervisor
• Describe your approach to conflict resolution and stress management
• Based on your personal experience, explain the best strategy for handling mistakes

Clinical Questions

• Provide an example of a specific patient case during your rotations when you went above and beyond the call of duty
• Questions on clinical trials, patient cases, guidelines related to your presentation
• Share a specific example of a recommendation/suggestion that you made during rounds or at a clinical site

Experiential Questions*

• Describe your best clinical rotation
• Share the most significant contribution that you made during your rotations?
• Describe your most favorite and memorable patient?
• What would your first and last preceptor say about you?
• Who was your favorite preceptor?

Reflective Questions*

• What are your best and worst qualities?
• Why did you attend pharmacy school?
• Where do you see yourself after residency?
• What areas of pharmacy practice interest you?
• How would you define pharmaceutical care?

Tips of Answering Questions

• Listen carefully to the question
• Ask for a clarification, if you did not understand the question
• Be honest, confident, and straightforward
• Repeat the question if you need time to gather your thoughts
• Provide specific examples and link them to the question
• Know your strengths, weaknesses, and your plan of action

CV: The key to a top curriculum vitae

Karen M. Kelly, Pharm.D.
Pharmacy Manager
Evanston Hospital
NorthShore University HealthSystem

What is a curriculum vitae (CV)

• CV: Latin = course or outline of your life
• Written profile of your professional qualifications
• Organized list of achievements & experiences
• Focus on education, professional experience
• Varies in length, several pages
• Longer, more detailed than a resume
• Living document

What should be included in a CV

• Your contact information
  – Centered, top of page
  – Name, address, phone & email

• Licensure Status
  – include state & type of license

• Education
  – Most recent educational experience first
  – Spell out your degree, subject & school
What should be included in a CV

• Professional experience
  – Most recent experience first
  – Time employed, position title, name & location of employer,
    name & contact of supervisor
  – Description of position if not easily identifiable
  – Any notable accomplishments, improvements, contributions
    to pharmacy practice

• Clerkship rotations
  – Good to list if right out of school
  – Spell out names; no abbreviations

What should be included in a CV

• Presentations & Posters
  – Include title, name of group presented to, year

• Publications
  – Use official citation method

• Honors & Awards
  – List title & year
  – Deans list – include quarter & year

What should be included in a CV

• Specialized Training & Certifications
  – CPR, ACLS, BCPS, immunization training
  – Include the full certification name and the year earned
  – Membership in organizations

• Professional & Community Service
  – Name of group, office held, scope of work

• Other special experiences or skills
  – Any unique quality, language, training

• References – list out
Tips for a Top Notch CV

• Focus on professional, pharmacy-related information
• Include positive information about your achievements
• Use headings to identify each section
• For offices held, describe the scope of responsibilities & their impact
• Update regularly to reflect work experience, presentations

Tips for a Top Notch CV

• Identify your preceptors and supervisors by name, include their title
• Be honest in the content
• Use simple fonts – Times New Roman, Arial
• High quality, conservative paper
• Do not use abbreviations
• Do no use colors
• Watch for spelling errors
• Have someone proofread it for you

What do employers look for in a CV

• Professionalism
• Signs of achievement
• Patterns of stability & career direction
• Hard worker, continue to have the willingness to work hard
What NOT to Include in your CV

• Personal information: age, marital status
• Interests and hobbies
• Reason for changing jobs or no job
• Photo, unless requested
• Information prior to pharmacy school except for education, previous degrees, or unique achievements
  — exclude high-school

CV: Conclusion

• Be honest in your content
• Highlight your strengths & achievements
• Create a good first impression
• Your CV as an advertisement for YOU!

References

THE LETTER OF INTENT
ICHM Annual Meeting Student Session
Jen Phillips, PharmD, BCPS
September 13, 2014

The letter of intent is one important way for you to distinguish yourself from other candidates. Residency programs are looking for the candidate(s) who are the best “fit” for their institution. Often times, the “most qualified” applicant is not necessarily the “best fit” candidate. Residency programs determine “best fit” by evaluating a number of criteria including (but definitely not limited to) the following:

- Clinical interests
- Short and long term professional goals
- Clinical strengths/weaknesses
- Character strengths/weaknesses
- Learning style
- Strength of clinical rotations
- Level of professional involvement
- Clinical aptitude
- Personality

The letter of intent can significantly help or hurt your likelihood of getting an interview. Below are some helpful hints to consider when you are writing your letter of intent:

1. Include the following:
   a. Why you want to do a residency
   b. Why you want to do a residency at that particular institution
   c. A statement of your current areas of interest
      i. Clinical subject area (if known)
      ii. Preferred environment
   d. A statement of your short and long term goals

2. Do not include the following:
   a. List or summary of rotations (this information is already included in your CV)
   b. Negative experiences (pharmacy is a small world!)
   c. Hobbies or outside interests

3. Additional “hints”
   a. Proofread, proofread, PROOFREAD!!!
   b. Spend a lot of time thinking about your goals and preferences before writing.
   c. Be specific about people you have interacted with.
   d. Personalize your letter with specific experiences.
   e. Send a different letter of intent to each residency you are applying to!
Dear Dr. Burkewitz:

I am writing this letter to express my sincere interest in the residency program at the University of Illinois at Chicago Medical Center. I believe your residency program is a perfect match to my interests.

I have worked very hard during pharmacy school. I currently have a 3.9 GPA and I am a member of Rho Chi. I am also a member of pharmacy organizations like ICHP and IPhA. In addition, I consider myself to be a very well-rounded person. When I am not doing pharmacy, I enjoy bike riding and reading.

During my fourth year, I chose clinical rotations that matched my interests and prepared me well for a residency. Currently, I am on an infectious diseases rotation and I like it very much. I may consider going into this as a specialty area of pharmacy practice. I have also done rotations in internal medicine, community pharmacy, and ambulatory care. I am scheduled to do rotations in critical care and psychiatry.

I am a very hard-working and conscientious student; I think I will make a good resident. Attached you will find a copy of my application, three letters of recommendation, my transcript, and my questionnaire. If you have any additional questions, please feel free to contact me via e-mail, as this is the fastest way to get a hold of me.

Thank you for your time and consideration. I look forward to hearing from you.

Sincerely,

Rosie Glitazone
PharmD Candidate
December 1, 2013

Sarah Wieczorkiewicz, PharmD  
Residency Program Director  
Lutheran General Hospital  
1775 Dempster Street  
Park Ridge, IL  60068

Dear Dr. Wieczorkiewicz:

I am writing this letter to express my interest in the PGY1 Pharmacy Residency Program at Lutheran General Hospital. I had the pleasure of speaking with your infectious diseases pharmacist, Dr. Sarah Wieczorkiewicz, at the ICHP Residency showcase and with your current pharmacy resident, Dr. Lulu Jin at the ASHP Midyear Clinical Meeting. These interactions, combined with my own research, solidified my decision to pursue a residency at your institution. It was refreshing to hear Dr. Wieczorkiewicz and Dr. Jin speak about your residency program with such high regard and enthusiasm. I am very impressed with your program and the opportunities that are offered to residents.

I believe that the training offered by your program will help me achieve both my short and long term goals. My immediate goal is to obtain a PGY-1 residency in order to further develop my clinical and leadership skills as well as expand my skills in research and administration. I am excited about the fact that your institution is located in a large metropolitan area as this ensures a diverse patient population, which I consider to be ideal for learning. I am also very excited about the wide variety of critical care experiences that exist at your institution and about the fact that your institution offers a teaching certificate. After completion of a PGY-1 residency, my goal is to pursue a PGY-2 residency in critical care. After that, I aspire to obtain a faculty position as a clinical pharmacist within a teaching hospital where I will have the opportunity to precept students, give didactic lectures, and advance the role of pharmacists through involvement in professional organizations.

I am passionate about pharmacy practice. I have had a number of exciting and rewarding experiences during my clinical rotations and while working as a pharmacy technician at Rush University Medical Center. As a result of these experiences, I believe that I have the skills, motivation, character, and dedication necessary to succeed in your program. I am a very hardworking individual who values innovation and a team approach to providing optimal patient care. From my research and interactions with members of your clinical staff, it appears as if your institution has similar values.

My application materials are enclosed for your review. If you have any questions or concerns, please do not hesitate to contact me. I look forward to speaking with you and members of your department regarding my application. Thank you for your time in considering my candidacy for your residency program.

Sincerely,

XXXXXX
PGY-1 Residency Training Programs: What are my options?

Susan R. Winkler, PharmD, BCPS, FCCP
Midwestern University Chicago College of Pharmacy

PGY-1 Programs

• Separate accreditation standards for:
  – Pharmacy
  – Most common
  – Community
  – Managed Care
• Even programs following the same accreditation standard can have a different look, feel

PGY-1 Pharmacy

• Different Settings
  – Academic Medical Center/Community
  – Ambulatory Care vs. Ambulatory Care
  – College-based
• Different Patient Populations
  – Ambulatory Care
  – Pediatric Hospital
  – Veterans Affairs Medical Center

PGY-1 Pharmacy: Two Different Programs

Academic Health-Center Based
• Orientation
• Cardiology
• Internal Medicine
• Administration
• Drug Information
• Transplant
• Infectious Diseases
• Research/Project Month
• Internal Medicine II
• Ambulatory Care
• Pediatrics
• Longitudinal: Service/Staffing

College-based: Teaching & Ambulatory Care
• Amb Care I: Anticoagulation
  – Underserved Population
• Internal Medicine Inpatient
• Amb Care II: Diabetes
• Amb Care III: Medical Home
• Amb Care IV: Pulmonary
  – VA Setting
  – Community
• Community Practice
  – Service/Staffing/Management
• Longitudinal: Teaching/Precepting, Academia, Project

PGY-1 Program: Day in the Life

Patient Care
• Morning Rounds
  – Work rounds
  – Teaching rounds
• Patient appointments
• Medication Reconciliation
• Antibiotic Stewardship

Other
• Med Safety Meeting
• Topic Discussion with Students
• Project Meeting with Mentor
  – Data collection
• Staffing

PGY-1 Community

• Accredited by ASHP in partnership with APhA
• Various models exist for operation of residencies:
  – College of pharmacy and community pharmacy partnerships
  – Independent programs through colleges of pharmacy with their own pharmacies
  – Independent programs through community pharmacies or chain corporations
PGY-1 Community: Day in the Life

- Corporate experiences in leadership, practice management
- Development of business plan and implementation of pharmacy service
- Community Pharmacy Operations
- Community Pharmacy Clinical Services
- Ambulatory Clinic experiences
- Work within collaborative practice models
- Academic experiences
  - Didactic teaching
  - Practice-based research project
  - Grand Rounds

PGY-1 Managed Care

- Accredited by ASHP in partnership with AMCP
- Residencies often operated through large managed care systems and pharmacy benefit management companies
- Presidency focused on project management, leadership development, population-based care and MTM

PGY-1 Managed Care: Day in the Life

- Pharmacy benefit design/benefit manager experience
- Drug information/formulary management
- Ambulatory care experiences
- Medication safety
- Prior authorization
- MTM/Medication Use Management
- Research project
- Academic experiences

All PGY-1 Programs

- Service Commitment
  - Staffing
    - Responsibilities
    - Time: How much? When? (weekend, evenings, on-call)
- Teaching Commitment
  - Is this something you want?
  - Is there teaching-related training?
- Program Size

What next?

- PGY-1 Residency
- PGY-2 Program
- Position in Clinical Pharmacy
- Academic Position
- Clinical Specialist Position

Questions?