



Duke University Hospital



Post Graduate Year Two (PGY2)

Infectious Diseases Pharmacy Residency

About the Department

Duke University Hospital (DUH) is a 970+ bed academic medical center and serves as the flagship of Duke University Health System (DUHS), which includes two community hospitals, Duke Regional Hospital and Duke Raleigh Hospital, as well as affiliations with other hospitals in the region, community-based primary care practices, homecare and hospice, and infusion services.

A tertiary and quaternary care facility, DUH is consistently rated as one of the top hospitals in the United States. It offers comprehensive diagnostic and therapeutic facilities, including the Duke Medicine Pavilion, a Level 1 regional emergency/trauma center, an extensive complement of major surgery suites, a comprehensive cancer center recognized as one of the 40 National Cancer Institutes across the country, an Eye Center, the Duke Heart Center and the Children's Health Center. The facility also functions as a research hospital with a federally-funded general clinical research unit where medical advances are achieved and applied and a teaching hospital for students of medicine, nursing, and the allied health sciences

The DUH Department of Pharmacy is recognized for quality and diversity of services, professional leadership and educational excellence. The accessibility of pharmacy services is advanced by the innovative use of personnel and technology. Employees work as a team to create an exceptional work environment.

Our Mission To deliver exceptional pharmacy services for a healthier tomorrow

Our Vision To be a distinguished global leader in pharmacy care

To achieve this mission, the Department employs multiple pharmacy practice models in both the inpatient setting and outpatient clinics. [Pharmacy services are provided by over 400 pharmacists, technicians and administrative staff using state-of-the-art technology systems to support their practices.](#) The implementation of Epic Maestro Care facilitates coordinated patient management – with a goal of one patient, one record, one health system. Medication preparation and distribution is also technology-based, with centralized distribution processes, profiled automated dispensing cabinets and dedicated sterile products operations. Outpatient pharmacies serve the needs of the ambulatory patients in four areas: Duke Clinic, Duke Cancer Center, Children's Health Center and North Pavilion.

Clinical pharmacy services are well-recognized for all medical and surgical services and include general medicine, hematology/oncology, critical care medicine, infectious diseases, surgery, solid organ transplant, pediatrics, adult and pediatric bone marrow transplantation, anticoagulation, pain management, emergency medicine and nutrition support.




Postgraduate Training Programs

For over 45 years, our program has been training residents to become confident and competent practitioners equipped with the knowledge and skills to meet the challenges facing pharmacy practice both now and in the future. We measure our success each year through the ability of our graduates to obtain the most competitive specialty residencies, fellowships, academic, and clinical positions available. Our commitment to continued excellence guarantees that our program will only strengthen in the future.

In addition to clinical activities, residents are involved in educational programs, including pharmacy conferences and journal clubs. Other teaching opportunities include co-precepting students from the University of North Carolina Eshelman School of Pharmacy and Campbell College of Pharmacy as well as medical and nursing in-services. Research skills are developed through completion of a research project and/or drug use evaluation. Residents attend the ASHP Midyear Clinical Meeting, the Southeastern Residency Conference, and have the opportunity to attend and participate in other state and local conferences.

DUH offers 11 distinct PGY1 and PGY2 pharmacy residency programs for the 2020-2021 academic year. The residency selection process is an important professional decision, an investment that will reap rewards for many years to come. We are pleased that you are interested in a Duke Residency and hope that you complete an application to our program.



PGY1 Pharmacy Practice

PGY1 and PGY2 Combined Health System Administration

PGY2 Ambulatory Care

PGY2 Cardiology

PGY2 Critical Care

PGY2 Drug Information (GlaxoSmithKline)

PGY2 Emergency Medicine

PGY2 Infectious Diseases

PGY2 Oncology

PGY2 Pediatric

PGY2 Solid Organ Transplant

PGY2 Internal Medicine

PGY2 Infectious Diseases Pharmacy

Introduction

The Duke University Hospital Postgraduate Year Two (PGY2) Infectious Disease Pharmacy Residency Program is designed to develop independent practitioners that have the knowledge and accumulated experience necessary to provide excellent care in infectious diseases pharmacy practice. The Infectious Diseases Residency Program builds upon the general competencies achieved during a PGY1 residency; expanding the resident's ability to provide care for complex infectious diseases. Training focuses on a full range of infectious disease states and disorders, along with the literature supporting medication management of such conditions. Rotations are designed to ensure experience is gained with the highest acuity patients in each sub-specialty area. In addition, residents are able to conduct research independently in the infectious diseases environment and should be confident educators in the multidisciplinary and pharmacy training environment. Graduates will be prepared to seek further training through fellowship and attain board certification (i.e. BCPS or BCIDP).

Purpose

PGY2 pharmacy residency programs build on Doctor of Pharmacy (PharmD) 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, thus allowing for 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, academic, or other specialized positions, along with board certification, if available.

The goal of the Postgraduate Year Two (PGY2) Infectious Diseases Pharmacy Residency Program is to prepare the resident to excel in the care of complex patients with infectious diseases in any setting. Excellence will be achieved by:

- Demonstrating accountability for patient care
- Modeling excellence in infectious diseases pharmaceutical care
- Serving as professional role models for pharmacy students and PGY1 residents
- Participating in clinical research and performance improvement projects focused on infectious diseases pharmacotherapy and antimicrobial stewardship
- Facilitating and leading infectious diseases/ antimicrobial stewardship pharmacotherapy discussions



Pre-Candidate

Outcomes

Goal R1.1: In collaboration with the health care team, provide comprehensive medication management to patients with infectious diseases following a consistent patient care process.

Goal R1.2: Ensure continuity of care during infectious diseases patient transitions between care settings.

Goal R1.3: Manage antimicrobial stewardship activities.

Goal R2.1: Demonstrate ability to manage formulary and medication-use processes for infectious diseases patients, as applicable to the organization and antimicrobial stewardship program.

Goal R2.2: Demonstrate ability to conduct a quality improvement or research project.

Goal R2.3: Manage and improve anti-infective-use processes.

Goal R3.1: Establish oneself as an organizational expert for infectious diseases pharmacy-related information and resources.

Goal R3.2: Demonstrate leadership skills for successful self-development in the provision of care for infectious diseases patients.

Goal R3.3: Demonstrate management skills in the provision of care for infectious diseases patients.

Goal R4.1: Provide effective medication and practice-related education to infectious diseases patients, caregivers, health care professionals, students, and the public (individuals and groups).

Goal R4.2: Effectively employ appropriate preceptor roles when engaged in teaching students, pharmacy technicians, or fellow health care professionals, about care of patients with infectious diseases.

The Residency Experience

The PGY2-ID at DUH is designed to give broad exposure to clinical care, program management, and research in infectious diseases. Rotations are offered in the inpatient, ambulatory care, and consultative settings. Inpatient rotations include adult antimicrobial stewardship as well as general and transplant adult infectious diseases consulting services. Extensive pediatric experiences are also offered with specific pediatric rotations in antimicrobial stewardship, general infectious diseases, and transplant infectious diseases. For both the pediatric and adult antimicrobial stewardship rotations, the resident will participate in the activities of the Antimicrobial Stewardship Evaluation Team (ASET) including prior authorization, audit and feedback, penicillin skin testing, and handshake stewardship rounds. The adult and the pediatric infectious diseases rounding services are multidisciplinary and often include medicine and physician assistant student learners, providing ample opportunities for the resident to not only ensure comprehensive medication management and guide current therapy but provide teaching on rounds. Additionally, the resident will have the unique opportunity to participate in consultant antimicrobial stewardship through a rotation with Duke Antimicrobial Stewardship Outreach Network (DASON). DASON provides assistance from liaison ID clinical pharmacists to community hospital sites throughout North Carolina and the Southeast to guide local personnel in developing stewardship practices. The resident will gain exposure to how liaison pharmacists manage the antimicrobial stewardship needs of multiple sites that vary largely in size and patient population. In addition, due to the critical need for knowledge in both infection prevention and microbiology, experience in these areas will also be offered. Finally, elective rotations (e.g. solid organ transplant, critical care, bone marrow transplant) are possible and supported by the preceptorship depending on the specific interests of the resident.

Rotations

Required Learning Experience	
Orientation (includes orientation to inpatient staffing)	1 month (July)
Adult Infectious Diseases Consults	2 months
Adult Transplant Infectious Diseases Consults	2 months
Adult Antimicrobial Stewardship/Microbiology	2 months
Pediatric Antimicrobial Stewardship/Consults	1 month
Ambulatory Infectious Diseases/HIV	1 month
Consultant Antimicrobial Stewardship	1 month
Allergy assessment and penicillin skin testing	Longitudinal (July-June)
Inpatient Staffing	Longitudinal (July-June)
Antimicrobial Stewardship Program Management	Longitudinal (July-June)
Research	Longitudinal (July-June)
Ambulatory Infectious Diseases/OPAT	Longitudinal (Jan-June)
Infectious Diseases Practice Management	Longitudinal (July-June)
Grand Rounds and Case Conferences	2 months (Fall: Grand Rounds, Spring: Case Presentation)
Elective Learning Experience	
<i>Options include, but are not limited to:</i> Solid organ transplant Critical care Bone marrow transplant Consultant Antimicrobial Stewardship II Research	2 months

Education and Teaching

Each resident delivers formal presentations at Pharmacy Noon Conference. Residents actively contribute in case study presentations and clinical teaching. Pharmacy residents will have the opportunity to teach allied health professionals including medical, nursing, and physical therapy students. Residents also have the opportunity to precept PGY1 residents and pharmacy students on rotation.

Research

The ongoing development of research skills is an essential component of a residency program. The resident completes a formal residency project suitable for publication in a selected area of pharmacy practice. Duke provides statistician support for the research project. Resident research projects are presented at a regional or national conference.

Staffing Experience

Staffing will be incorporated into the residency experience in decentralized areas within the Clinical and Patient Care Service Division. PGY2s will be invited to staff every 3rd weekend. Activities include verifying medication orders, providing pharmacokinetic consults, responding to drug information questions, providing patient education and attending codes.

Benefits

Stipend: The current annual stipend is approximately \$51,000

Paid Time Off (PTO): Resident accrue 35 PTO days during the 12-month program. Fifteen days of PTO may be used for scheduled personal leave. The remaining PTO is available for illness, attendance at professional meetings and interviews.

Health Benefits: Health coverage for you and your immediate family is available through optional Duke Health Care Plans. Please visit <http://www.hr.duke.edu> for more information.

Pagers: Each resident is provided with an alpha-numeric pager

On-Call Services: No formal in-house call is required; however, rotations are associated with after-hours service responsibility

Office Space: Offices are provided for the residents in the South Pharmacy area. Located within the office are a copier, fax machine, printers, phone with voicemail, and a refrigerator

Computer Services: The Department of Pharmacy is connected by a computer network allowing access to many different software and database programs. Residents are provided notebook computers.

Library Services: Residents have check-out and copier privileges at the Medical Center Library located on the Medical Center campus. The library also provides on-line access to numerous journals. <http://www.mclibrary.duke.edu>

Application Information

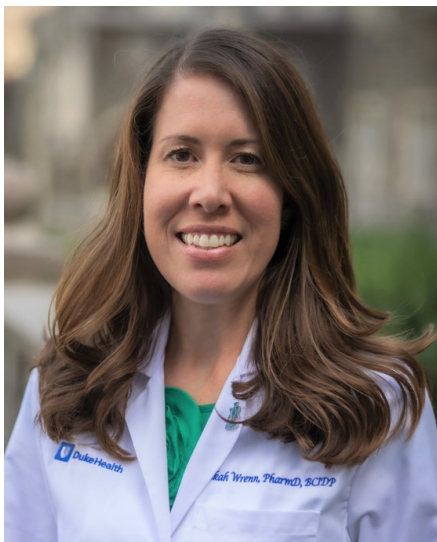
To apply for this residency, the following is required:

- Cover letter (approximately 1 page)
- Completed PhORCAS Application
- Curriculum Vitae
- Pharmacy College transcripts
- Complete recommendations (a minimum of three recommendations are required, at least two of which should be from clinical preceptors)
- Resident Matching Program number from the National Matching Service

Your cover letter, residency application, curriculum vitae, and college transcripts must be received into PhORCAS no later than **January 5th**. Qualified applicants will be notified to arrange an interview during select days in January or February. This full-day interview provides an excellent opportunity for residency applicants to become acquainted with the facilities, personnel, and residency program.

For questions please contact:
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Program Director



Rebekah Howell Wrenn, PharmD, BCIDP is the Manager of Infectious Diseases Pharmacy Services and an Infectious Diseases Clinical Pharmacist with the Duke Antimicrobial Stewardship and Evaluation Team (ASET). Dr. Wrenn obtained her PharmD from the University of North Carolina at Chapel Hill. She then completed her PGY1 Pharmacy and PGY2 Infectious Diseases Pharmacy residency training at Wake Forest Baptist Health. She is a member of the Vizient Research Committee, the Society for Healthcare Epidemiology of America (SHEA), and the Society of Infectious Disease Pharmacists (SIDP). She is an Medical Assistant Professor at the Duke School of Medicine and teaches didactically at the Duke Physician Assistant Program. Her research interests include penicillin allergy de-labeling, outpatient antimicrobial stewardship, and duration of antimicrobial therapy. In her free time, Rebekah enjoys playing soccer, hiking, gardening, eating yummy food, and going on adventures with her family.

Find more information about the program at the links below:

<https://pharmacy.duke.edu/residency-programs/infectious-diseases-pharmacy-pgy2>

<https://pharmacy.duke.edu/sites/pharmacy.duke.edu/files/DUH%20PGY2%20ID%20Residency%20Timeline%20%282020%29.pdf>

<https://pharmacy.duke.edu/sites/pharmacy.duke.edu/files/DUH%20PGY2%20ID%20Residency%20Timeline%20%282020%29.pdf>