PGY1 Critical Care Rotation: Surgical ICU
Indiana University Hospital
Indiana University Health

Preceptor
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Learning Experience Description

The one-month rotation is designed to develop the resident’s knowledge and skills in the pharmaceutical care of acutely ill patients in the surgical ICU population. The pharmacy practice resident will round daily with a team consisting of surgery and anesthesia residents providing care to approximately 15 patients in the surgical ICU. Establishing collaborative professional relationships with members of health care team, prioritizing delivery of care, follow-up on patient referrals and designing evidence-based monitoring plans are emphasized through daily encounters with the surgical ICU team and other healthcare providers.

Requirements of Learning Experience

Required Attendance
- The resident will attend assigned clinic and will be available to all service areas until all pharmacy related issues are addressed and resolved. Absences must be approved in advance.

Required Presentations
- The resident will present patient care recommendations to the medical team. Residents must prepare, to sufficient depth of knowledge, and be able to lead the discussion of core ICU disease states with team.

Required Meetings
- Resident will attend applicable weekly grand rounds, pharmacy resident topic discussions, Critical care pharmacy journal club (variable, 12:00, 4th Wed. of every month) and ICU resident topic discussions (variable, 12:00).

Required Readings/Topic Discussions
- Daily discussions will be held between the instructor and resident to discuss individual patients and selected topics. The resident will prepare for such meetings with sufficient knowledge to be able to lead topic discussions. Topics included but not limited to:
  - Analgesia/sedation/neuromuscular relaxants
  - Sepsis and septic shock
  - VAP
  - ARDS
  - Hypotension and fluid resuscitation
Central line infections and foley catheter infections
Glucose control
Nutrition and electrolyte management
Perioperative atrial fibrillation
Anticoagulation (prophylaxis and treatment)
Antibiotic resistance development

Learning Experience Evaluated Goals

Goal R2.1: As appropriate, establish collaborative professional relationships with members of the health care team
Goal R2.2: Place practice priority on the delivery of patient-centered care to patients.
Goal R2.5: When necessary, make and follow up on patient referrals.
Goal R2.7: Design evidence-based monitoring plans.

Learning Experience Activities and Corresponding Learning Experience Goals/Objectives

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<thead>
<tr>
<th>Learning Experience Activity</th>
<th>Learning Experience Objectives</th>
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<tr>
<td>Determine therapeutic priorities in managing acute and chronic problems of the patient.</td>
<td>OBJ R2.2.1</td>
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<td>Apply pharmacokinetic and pharmacodynamic principles to recommend initial drug regimens and communicate information to physicians and inpatient pharmacists.</td>
<td>OBJ R2.1.1; OBJ R2.2.1</td>
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<td>Create therapeutic interventions to stabilize a patient, based on hemodynamic status.</td>
<td>OBJ R2.1.1; OBJ R2.2.1</td>
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<td>Design a patient-centered, evidence based monitoring plan for patients with varying acuity.</td>
<td>OBJ R2.7.1</td>
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<td>Synthesize accurate information regarding patient's preadmission medication use and aid in reconciling that list with the current clinical scenario for physicians.</td>
<td>OBJ R2.1.1; OBJ R2.2.1; OBJ 2.5.1; OBJ 2.5.2</td>
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<tr>
<td>Describe accurate drug information to physicians</td>
<td>OBJ R2.1.1</td>
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<td>A patient profile (derived from the chart, progress notes, and MAR) will be maintained for each patient on service. This profile must be updated daily so that ready reference can be made to demographic information, pertinent medical history, drug list and appropriate therapeutic and laboratory monitoring parameters. If the census is large, the preceptor will instruct the resident on what patients to follow in depth. At a minimum, the resident should know home medications and the start/stop date of all antibiotics for every patient</td>
<td>OBJ R2.2.1; OBJ R2.5.2; OBJ R2.7.1</td>
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Methods of Evaluation
Evaluation of residents will be based on the above learning experience goals and objectives. The preceptor and resident will review the resident’s customized plan and the learning experience rotation document on the first day of rotation. Feedback will include, but not be limited to: verbal and/or written mid-point and end of rotation evaluations of the resident, preceptor and learning experience.