Learning Experience Description
The pediatric developmental/complex care team manages a variety of patients on the general pediatric floors of Riley Hospital. Patient care needs can range from nutritional and growth issues, to medical complex patients that require coordination of several providers. The overall goal of this rotation is to develop in the resident an understanding of the nature and scope of pharmaceutical care necessary to promote safe and rational use of drugs within the pediatric population. The rotation will be tailored to the specific needs of the resident based on past rotation experience, past didactic lectures, and comfort level with the pediatric patient population. The resident will focus on collecting and analyzing patient information, the design, implementation and evaluation of evidence based monitoring plans, the redesign of regimens and monitoring plans as needed, documentation of direct patient care activities, problem identification and problem solving, and medication reconciliation. At the end of the rotation, the expectation is that the resident will be able to safely be able to assess the pharmaceutical needs of a pediatric patient and efficiently execute the plan based on the below goals and objectives. Based on patient census, the resident may also have an opportunity to assist with other services (e.g. pediatric orthopedics or pediatric neurosurgery).

Requirements of Learning Experience

**Daily rounding/patient care responsibilities**

- **Team Interaction**
  - The resident will participate in daily team rounds with the developmental team. The resident will provide drug therapy recommendations, monitoring recommendations, identification of drug-induced problems, and responses to drug information questions.

- **Maintain a Current Patient Profile**
  - The resident will maintain a patient profile (from medical chart, MAR, computer records) for each patient on service. This profile will be updated daily with demographics, drug list, laboratory values, etc., so the resident may accurately assess the patient’s pharmacotherapeutic plan and make timely recommendations/changes for the team.

- **Discharge Planning/Education**
  - The resident will provide drug counseling to those patients/families that require more information or assistance regarding the drug therapy. This would include, but is not limited to: adverse events, duration of therapy, timing of medications, and dosage measurement/administration. The resident will also assist the team with therapy adjustment to
aid in the home care therapy.

- **Pharmacokinetics**
  - The resident will be responsible for assessing all pharmacokinetic values/labs for patients on the developmental service. The resident will identify the differences in drug pharmacokinetic parameters that are unique to the developmental population, and apply that information to the patient’s therapy. The resident will calculate all PKIN parameters, recommend any dose adjustments and follow-up monitoring, add consultations to chart, and contact the medical team for necessary changes. All consults must be staffed with the preceptor or back-up clinical pharmacist.

**Required Pre-Rotation Activities**
- Resident will have a proficiency in utilization of the electronic and paper medical chart in order to maintain patient-care database and track medication histories (meds by history, clinic notes, past admissions)
- The resident will send an email at least one week before starting the rotation to the respective preceptor. The email should include, but is not limited to, the following:
  - Dates and times of required longitudinal commitments, Indiana Pharmacy Teaching Certificate seminars (if applicable), and Residency Forum (if applicable)
  - Dates and times of any mandatory activities (i.e., Pharmacy Grand Rounds) and other meetings as they are scheduled.
  - Paid time off approved by both the RPD and respective preceptor
- If desired and time allows, the resident may request reading assignments pertinent to the rotation prior to starting the rotation

**Required Attendance**
- The resident is required to attend daily rounds with the Complex Care team (with noted exceptions based on pre-rotation calendar).
- The resident should attend all code or CART situations for a patient on the Complex Care team when he/she is able to

**Required Meetings**
- Resident will attend monthly pediatric Grand Rounds or Pediatric resident noon conferences if applicable
- Resident will attend monthly pediatric journal club (based on schedule, may be presenter)

**Required Projects**
- While there are no routine pre-assigned projects with this rotation, the resident may be asked to assist with MUE or research projects in conjunction with daily patient care duties.

**Required Presentations**
- The resident will present at least one in-service to the Complex-Care medical team or SFT 8E nursing staff based in the needs of the team/nursing unit
  - Topic will be identified within the first week of the rotation
  - Time of presentation will be set and initial draft will be completed by the end of the second week of rotation
  - Presentation will be done by the third or fourth week of the rotation
Required Readings/Topic Discussions
- The resident will prepare for the meeting to sufficient depth of knowledge to be able to lead the discussion of the topic. Topics include but are not limited to: Inborn errors of metabolism, constipation, gastroesophageal reflux, ADHD, epilepsy, status epilepticus, cerebral palsy, autism
- As this may be the first pediatric experience for the PGY1 resident, the resident shall select three general pediatric topics to review and discuss. Examples could be: fluids and electrolytes, UTI, otitis media, pain management, CAP, medication administration issues

Learning Experience Evaluated Goals
Goal R2.4: Collect and analyze patient information.
Goal R2.7: Design evidence-based monitoring plans.
Goal R2.9: Implement regimens and monitoring plans.
Goal R2.10: Evaluate patients’ progress and redesign regimens and monitoring plans.
Goal R2.12: Document direct patient care activities appropriately

Learning Experience Activities, Assessment Criteria and Corresponding Learning Experience Goals/Objectives

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<th>Learning Experience Activity</th>
<th>Learning Experience Goal</th>
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<td>The resident will collect and organize all patient-specific information needed by the pharmacist to prevent, detect, and resolve medication-related problems and to make appropriate evidence-based, patient-centered medication therapy recommendations as part of the interdisciplinary team. The resident will serve as a liaison between the physicians, nurses and pharmacy. The resident will provide drug information to physicians, nurses, pharmacists and other health care professionals.</td>
<td>R2.4.1; R2.4.2; R2.4.3</td>
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<td>The resident must be prepared to conduct medical consultations and discharge medication counseling with patients and with the parents of patients.</td>
<td>R2.10.1; R2.10.2</td>
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<td>A patient profile (derived from the chart, progress notes, and MAR), including dose in mg/kg, will be maintained for each patient on the service. This profile must be updated daily so that ready reference can be made to demographic information, drug list, and appropriate therapeutic and laboratory monitoring parameters.</td>
<td>R2.12.1; R2.12.2</td>
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<td>The resident will assume responsibility for the health system’s ongoing adherence to its medication-use policies [i.e. medication use guidelines/policies, APIP, medication back order situations]. Resident will document all therapeutic interventions, adverse drug reactions and medication variances.</td>
<td>R2.12.1; R2.12.2</td>
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Perform therapeutic drug monitoring for any patient on the pediatric inpatient unit receiving a medication that requires serum concentration determinations and document pharmacokinetic recommendations in the medical record and maintain antibiotic pharmacokinetic monitoring forms (where applicable).

Perform anticoagulation monitoring and education for any patient on the pediatric inpatient unit receiving therapeutic or prophylactic anticoagulation and document recommendations in the medical record and maintain warfarin monitoring forms (where applicable).

**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.