PGY1 Pharmacy Residency Program

Lebanon Veterans Affairs Medical Center,
Lebanon, Pennsylvania
Current Residents (Left to Right)
Top Row: Jennifer Sobeck (PGY1), Janki Shah (PGY2 Am Care), Morgan Peterman (PGY1)
Bottom Row: Emalee Hribick (PGY1), Jennifer James (PGY1 Non-Traditional), Jinsun Paek (PGY2 Admin)
GENERAL INFORMATION

The American Society of Health-System Pharmacists’ (ASHP) accredited pharmacy residency at Lebanon Veterans Affairs Medical Center (LVAMC) is an individualized, organized training program designed to develop clinicians who can practice independently and excel in clinical services and teaching.

The LVAMC pharmacy residency trains residents to be well-rounded in inpatient and ambulatory care specialties while also allowing individuals the opportunity to concentrate on their primary interests.

The LVAMC is a teaching hospital affiliated with the Penn State University Medical School, based in Hershey. Over 250 medical residents, fellows, and students rotate through the LVAMC every year. As a result, this residency provides an excellent educational environment that emphasizes a multidisciplinary approach to patient care.

ROTATION SCHEDULE OVERVIEW

The LVAMC offers eight core required rotations and over five elective rotations throughout the year. The rotation schedule is flexible, allowing residents to tailor the program to their educational needs. Residents also have the option of completing one elective rotation off-site.

**CORE ROTATIONS**

- Acute Care
- Ambulatory Care
- Extended Care/ Palliative Care
- Management/Administration
- Patient Aligned Care Team (PACT)
- Drug Information - Longitudinal
- Hospital Pharmacy Practice - Longitudinal
- Epoetin Telephone Clinic - Longitudinal

**ELECTIVE ROTATIONS**

- Behavioral Health
- Oncology
- Diabetes Care
- Home Based Primary Care
- Anticoagulation Clinic
- Various Off-Site Rotations
- Others available depending on resident needs
AMBULATORY CARE
The Ambulatory Care rotation allows the resident to participate in a pharmacist managed Pharmacotherapy clinic (PT). The Clinical Pharmacy Specialists (CPS) practice under a broad Scope of Practice allowing them to prescribe, monitor, and follow-up on the following disease states: hyperlipidemia, diabetes, hypertension, and COPD. The CPS also make pharmacotherapy recommendations to providers on all primary care disease states. The PT clinic is a consult service used by Primary Care Providers as well as Specialists to help high risk patients, who are resistant to standard treatment, gain control of their disease states and reach their individual therapeutic goals. The main rotation site is at the LVAMC, but there is an option to gain additional experience at the Community Based Outpatient Clinics (CBOC). There are educational opportunities throughout the rotation for residents to participate in, including small group teaching for Veterans and other healthcare professionals, in-service programs for allied healthcare professionals, pharmacists, and primary care providers.

ACUTE CARE
This experience allows residents to develop expertise in the treatment of acute disease states commonly encountered in the inpatient internal medicine environment. The resident participates in daily medicine rounds with attending physicians, medical residents, and other healthcare professionals to ensure appropriate pharmacotherapy is used for our Veterans. The resident is expected to participate in the selection of therapy, respond to drug information questions, counsel patients on the use and side effects of medications, obtain medication histories, and monitor drug levels to make pharmacokinetic dosing recommendations. On this rotation, the pharmacy resident will present a patient case to the pharmacy staff and a lecture to the medical residents and students.

PATIENT ALIGNED CARE TEAM (PACT)
This required experience allows the resident to work as an integral member of the primary care team. The resident serves as a drug information consultant to clinicians and provides comprehensive pharmaceutical services with a strong focus on patient-centered care. The resident will have ample time to educate patients on their disease states as well as the proper use of their medications and devices. There is time for an in-service to the nursing staff, as well as presenting a patient case. The resident will also have the opportunity to participate in and eventually lead the tobacco cessation clinic twice per week.

EXTENDED CARE/ PALLIATIVE CARE
This experience allows residents to develop expertise in the treatment of inpatients requiring long-term treatment of chronic illnesses. The resident rounds with the extended care team; working with physicians and other members of the multidisciplinary team, they help ensure appropriate care of Veterans. The resident will also be an integral part of our Palliative Care team. Working jointly with our Palliative Care physician the resident will develop the necessary skills to appropriately manage our palliative care patients on both our inpatient service and our outpatient clinic. In addition, the resident gains a unique experience while working with Veterans in our weight loss clinic.
MANAGEMENT/ADMINISTRATION
Practice Management is a required learning experience. The resident participates on the pharmacy management team, which has the overall responsibility to plan, direct, and coordinate comprehensive pharmacy services throughout the Medical Center. The rotation is split into 2-two week blocks. The first block encompasses the broad aspects of pharmacy administration such as operations management, pharmacy policy, formulary management systems, and an introduction to general pharmacy practice. The second block focuses on the finer details of daily operations including the performance of the pharmacy service and personnel, clinical program development, and fiscal management.

DRUG INFORMATION
Drug Information is a required longitudinal experience which allows residents to develop competency in a range of drug information topics.

HOSPITAL PHARMACY PRACTICE
Hospital Pharmacy Practice is a required longitudinal learning experience, which allows residents to develop expertise in the process of preparing and dispensing drugs in the hospital environment.

EPOETIN TELEPHONE CLINIC
The anemia telephone clinic provides a longitudinal experience in providing patient centered care. Residents are expected to evaluate patient’s progress and redesign regimens and monitoring plans as necessary so that their assigned patients maintain their hemoglobin goal.

ANTICOAGULATION CLINIC
This elective will allow residents to develop expertise in managing patients on anticoagulation therapy. The resident will participate in daily warfarin clinic appointments and will be expected to provide appropriate patient follow up when needed. The rotation will include review of non-formulary drug requests for target-specific anticoagulants, patient education, and the opportunity to complete e-consults relating to peri-operative management of patients on anticoagulation. Literature reviews and topic discussions will be employed to develop knowledge base in the common disease states most associated with anticoagulation that include atrial fibrillation, VTE, antiphospholipid syndrome, and heparin induced thrombocytopenia.

HOME BASED PRIMARY CARE
This experience allows the resident to complete an initial medication review of new patients admitted to the home-based primary care service. Quarterly medication reviews will be completed for each patient within the service focusing on decreasing fall risk, minimizing cognitive impairment, and simplifying regimens in our older Veteran population. There is also opportunity to attend home visits with a visiting nurse.
BEHAVIORAL HEALTH
This experience is designed for the resident to develop expertise in the treatment of patients with mental illness and substance abuse disorders. The resident becomes an active member of the inpatient psychiatric interdisciplinary team and a liaison between pharmacy and Behavioral Health. The resident will gain proficiency in clozapine management. The resident will also have the opportunity to participate in and eventually lead the tobacco cessation clinic twice per week.

ONCOLOGY ROTATION
The resident practices at a pharmacy satellite located in an outpatient oncology clinic. This experience focuses on the safe handling and preparation of chemotherapeutic agents and the familiarization with the various regimens and protocols used to treat the most common malignancies found in the Veteran population. Experience will also be obtained in the management of erythropoietic stimulating agent therapy for patients with chronic kidney disease and cancer treatment related anemia.

DIABETES CARE
Endocrinology is an elective rotation for the pharmacy resident. This experience allows residents to develop expertise in the treatment of patients with type 1 and type 2 diabetes mellitus. Clinical experiences for the resident include individual and group diabetes education visits in the inpatient and outpatient settings. The resident is expected to become an important member of the interdisciplinary healthcare team with responsibilities that include: initiation, selection, and monitoring of drug therapy, including optimization of insulin regimens; patient and provider education; provision of drug information and outcome tracking. The resident is also expected to gain knowledge on disease states common in the diabetic patient population. Literature reviews, topic discussions, and direct patient care will be employed to develop expertise in disease states that include hypertension, hyperlipidemia, obesity, smoking cessation, vaccination, and peripheral neuropathy.

ADDITIONAL EXPERIENCES
Additional specialty electives are available at the Lebanon VA depending on the individual resident’s specific interests and needs. Residents have an opportunity to complete one rotation off-site. Residents may choose to complete their off-site rotation at nearby Hershey Medical Center, which offers rotations in pediatrics, transplant, anticoagulation, critical care, and others. Residents may choose to set up an off-site rotation, based on professional interests, as another option.
PRECEPTORS

Paul Carnes, PharmD, MS, FACHE  
Chief of Pharmacy Services  
BS Pharmacy, Philadelphia College of Pharmacy and Science, 1993  
PharmD, University of Arkansas, 2000  
MS, University of Florida, 2008  
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Kevin Koons, PharmD, BCPS  
Assistant Chief of Pharmacy, Residency Program Director  
PharmD, Ohio Northern University, 2001  
Pharmacy Practice Residency, Huntington VAMC WV, 2002  
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Carol Campbell, RPh  
Inpatient Pharmacy Supervisor  
BS Pharmacy, Philadelphia College of Pharmacy and Science, 1992  
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Christy Dayhoff, RPh  
Clinical Pharmacy Specialist – Hematology/Oncology  
BS Pharmacy, The Ohio State University, 1983  
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Ed Caudill, RPh, BCPS  
Clinical Pharmacy Specialist – Extended Care/Palliative Care  
BS Pharmacy, Temple University, 2000  
Pharmacy Practice Residency, Lebanon VAMC, 2005  
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Allen Ayala, PharmD, BCPP  
Clinical Pharmacy Specialist – Behavioral Health  
PharmD, Temple University, 2002  
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Dina Hunsinger-Norris, PharmD, BCPS  
Clinical Pharmacy Specialist – Primary Care  
PharmD, Temple University, 2000  
Primary Care Residency with a focus on education, Chicago College of Pharmacy, Midwestern University, 2001  
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Heather Ulrich, PharmD, BCPS, CDE, BC-ADM
Clinical Pharmacy Specialist – Endocrinology
BS Pharmacy, Duquesne University, 1997
PharmD, Duquesne University, 1998
Pharmacy Practice Residency, Temple University Hospital, 1999
Primary Care Residency, Providence Health System, 2000
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Michele Margut, PharmD
Clinical Staff Pharmacist—Primary Care
PharmD, University of Pittsburgh 2000
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Lisa McKee, PharmD, BCPS, CDE
Clinical Pharmacy Specialist – Primary Care
BS Pharmacy, Philadelphia College of Pharmacy and Science, 1998
PharmD, Philadelphia College of Pharmacy and Science, 1999
Primary Care Residency, Madison VAMC, 2000
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Inga Washington, PharmD, BCPS
Clinical Pharmacy Specialist – Primary Care
PharmD, Temple University, 2007
Pharmacy Practice Residency, Lebanon VAMC, 2008
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Louis Portas Jr, PharmD, BCPS
Clinical Pharmacy Specialist – Acute Care
PharmD, University of Pittsburgh, 2007
Pharmacy Practice Residency,
Penn State Milton S. Hershey Medical Center, 2008
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Monica Bowen, PharmD, BCPS
Clinical Pharmacy Specialist – Primary Care
PharmD, Wilkes University, 2009
Pharmacy Practice Residency, Lebanon VAMC, 2010
Ambulatory Care Residency, Lebanon VAMC, 2011
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Chelsea Fitzgerald, PharmD
Clinical Pharmacy Specialist – Primary Care/Endocrinology
PharmD, University of Pittsburgh, 2013
Pharmacy Practice Residency, Geisinger Medical Center, 2014
Ambulatory Care Residency, Lebanon VA Medical Center, 2015
Chelsea.Fitzgerald@va.gov
PRECEPTORS

Ashley Kelley, PharmD, BCPS
Clinical Pharmacy Specialist—Anticoagulation
LECOM School of Pharmacy- 2012
Pharmacy Practice Residency, Lebanon VA Medical Center, 2013
Internal Medicine/Academia Pharmacy Residency, University of Buffalo
General Medical Center, 2014
Ashley.Dorward@va.gov

Amanda Sturges, PharmD
Clinical Pharmacy Specialist – Anticoagulation
PharmD, Purdue University, 2014
Pharmacy Practice Residency, Robley Rex VAMC, 2015
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Lindsay Baun, PharmD
Clinical Pharmacy Specialist – Acute Care
PharmD, Wilkes University, 2011
Pharmacy Practice Residency, Lebanon VAMC, 2012
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RESIDENCY REQUIREMENTS

RESIDENCY PROJECT
Residents are required to design, develop, and conduct their residency quality assurance project, and present it at the ASHP Midyear Clinical Meeting and at the Eastern States Residency Conference. Residents inclined to publish their results in pharmacy journals are offered guidance and support to accomplish this task.

JOURNAL CLUBS/ CASE PRESENTATIONS
Residents are required to lead journal clubs and patient case/topic presentations throughout the year. Also, residents are expected to attend presentations led by other pharmacy staff, residents, and students.

ACPE
Residents are required to complete an hour long ACPE-accredited CE topic presentation. This will be presented to any staff member at the facility, with most attendance by pharmacists and technicians.

DRUG USE EVALUATION (DUE)
Residents will perform a DUE at least once during the year and present it to the Pharmacy and Therapeutics Committee.

STAFFING
Residents are scheduled to work one weekend per month in the inpatient pharmacy. Staffing activities include order entry, intravenous admixture including TPN preparations, and responding to physicians’ and nursing staff requests.

TEACHING
Residents have opportunities to assist in precepting fourth year pharmacy students on various rotations, perform nursing in-services, and give educational presentations for pharmacy staff and medical residents.

EVALUATION
Residents are required to complete preceptor and rotation evaluations as well as self evaluation following each rotation.

LICENSEURE
Residents are expected to obtain a pharmacy license in any state of the U.S. before or during the first month of residency. License transfer to Pennsylvania is not necessary.

U.S. CITIZENSHIP
It is a federal requirement for all employees of the VA system, including residents, to be U.S. citizens either by birth or by naturalization.
APPLICATION PROCESS

All applicants who have submitted the requested materials by the application deadline and have met the eligibility requirements below will be considered for on-site interviews. Interviews will be offered to candidates that the program feels will most likely be able to meet the goals of this residency program.

ELIGIBILITY REQUIREMENTS

- Doctor of Pharmacy or Bachelor of Pharmacy degree
- Participation in ASHP matching program
- Eligibility for pharmacy licensure in any state of the United States
- U.S. Citizenship

APPLICATION

- Cover letter
- CV
- Three letters of recommendation (Phorcas template)
- Official copy of academic transcripts from pharmacy school

Submission via Phorcas: http://www.ashp.org/phorcas

DEADLINE

All application materials must be received no later than **January 10th**. If any of the above materials are not received by the application deadline, the applicant will not be considered for an interview.

BENEFITS

- Residents’ office
- Use of portable tablet PC, with wireless access to the internet and electronic medical charts
- Support for attendance of pharmacy conference
- Stipend of $41,000 per year
- 10 paid federal holidays
- Four hours of vacation earned every two weeks
- Four hours of sick leave earned every two weeks
- Affordable health, dental, vision, and life insurance
- Use of on-site YMCA fitness facilities at no cost
- FREE parking

CONTACT INFORMATION

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Lebanon is located in South-Central Pennsylvania and is nestled between beautiful farmland and mountains. Lebanon has a small-town atmosphere with a quiet lifestyle and relatively low cost of living expenses. Easy commute with limited traffic in surrounding areas.

Cities within a short drive include Harrisburg, the state capital, and Lancaster, known for its vibrant art community and surrounding Amish farms. Nearby Hershey, the chocolate capital of the world, offers one of the nations finest theme parks, golf courses, and excellent restaurants.

Outdoor enthusiasts will enjoy hiking on the Appalachian trail, kayaking the Susquehanna, and skiing at Round Top, all within an hour drive. Historical areas, shopping outlets, and community theaters are also close to Lebanon.

Several major interstate highways intersect the county and provide easy access to many large cities such as Philadelphia, Baltimore, Pittsburgh, Washington D.C., and New York City.