



# William S. Middleton VA Hospital

## Pharmacy Residency Programs



William S. Middleton  
Memorial Veterans Hospital  
in Madison, Wisconsin

### Clinical Rotations Required

Excellence  
in  
Patient Care  
and  
Teaching

**Medication Management** - Residents manage care of their patients by ordering and interpreting labs, and prescribing and adjusting medications. They are responsible for the education and follow-up of their patients and staff care plans with attending physicians or clinical pharmacists. Patients seen in this clinic are referred by their primary provider for co-management of chronic conditions including hypertension, hyperlipidemia, diabetes, and BPH.

**Hypertension** – Patients with more complicated or more difficult to control hypertension are referred to this clinic for evaluation and treatment including patients on 3 or more medications and those with secondary hypertension due to renal artery stenosis, hyperaldosteronism or other factors. Residents manage all aspects of the patients care in conjunction with an MD attending and Pharmacist preceptor.

**Rheumatology** – Patients with a wide variety of rheumatologic disorders are cared for in this clinic. Residents provide direct patient care including physical assessment, and development of therapeutic and monitoring plans. These patients are co-managed with Pharmacist preceptor and Rheumatologist attending physicians.

**Diabetes** – Patients with more complicated and difficult to control diabetes are referred to this clinic. The clinic uses a multidisciplinary approach to the management of Type 1 and Type 2 Diabetes. Residents see patients in both a Pharmacist-managed clinic as well as a clinic which has both Pharmacist and Endocrinologist attendings. The resident is responsible for all aspects of the patient's diabetes-related care. The program is structured to provide the resident the opportunity to monitor the safety and efficacy of drug therapy in ambulatory care settings, including medical record review, patient interview, and targeted physical assessment, interpretation of laboratory data, consultation with staff and patient education to achieve optimal patient outcomes. In addition to clinic, patient home glucose monitoring done between clinic visits is assessed and patients are managed by telephone.

**Smoking Cessation** – This service is provided in group cessation together with a Social Worker whose specialty is addiction therapy. Residents provide the medication management support for this service including nicotine replacement and bupropion. Group sessions are held weekly and are done in face to face meeting, by teleconference and video conferencing.

**Osteoporosis** – Patients with osteoporosis or history of non-traumatic fractures are evaluated for secondary causes of osteoporosis and for management of their reduced bone density. Residents assess patients, order bone density studies and other tests needed to look for risk factors and provide bisphosphonates and other treatments to improve the problem.

**Anticoagulation** – The clinic manages most patients receiving warfarin from our hospital and cares for over 700 patients. Residents see patients in clinic as well as in telephone follow-up to assure safe and effective anti-thrombosis. They also initiate therapy and transition patients from inpatient to outpatient care. The clinic manages both long-term patients as well as those on short-term post-operative prophylaxis. They also coordinate warfarin interruptions for procedures using low molecular weight heparin if warranted. The clinic is Pharmacist managed. Madison is one of 7 sites chosen nationally for the ASHP Antithrombotic Pharmacotherapy Trainee program.

**Epilepsy Clinic** – Residents independently evaluate patients with a wide range of seizure disorders. Residents will also gain experience evaluating patients with various psychiatric comorbid disorders including major depression, bipolar disorder, and anxiety. The resident is responsible for obtaining a medical history, symptom and disease history, performing a short neurological exam, and monitoring AED therapy for these patients. The resident works closely with Barry E Gidal, Pharm.D., a nationally recognized epilepsy clinical specialist, as well as the epilepsy nurse case manager and an attending neurologist to provide optimal patient care. Residents may also be asked to provide telephone follow-up to selected patients when antiepileptic drug therapy has been recently initiated or modified. The resident is also responsible for assisting in precepting fourth year pharmacy students who rotate through this clinic.

**Home-Based Primary Care** – The Home-Based Primary Care (HBPC) team is an interdisciplinary team that is comprised of nurse case managers, nurse practitioners, rehab therapy, a social worker, a clinical psychologist, a clinical dietitian, and a clinical pharmacist. Patients are referred to the HBPC team by their primary care providers if they have difficulty coming to clinic. Residents work closely with the managing clinical pharmacist and are responsible for performing initial and 90-day reviews of patient charts, medication reconciliation and management, identifying opportunities to simplify patients' medication regimens, long-term monitoring of anticoagulation and diabetes control, and participating in home visits for new and established patients.

**Formulary Management** - Residents are responsible for a variety of duties during this rotation, including completion of one drug monograph and one medication use evaluation (MUE), documentation of adverse drug reactions, clinical reviews pertaining to non-formulary medication requests, and updating providers about formulary changes and patient safety alerts. Residents are also required to attend Madison P&T, regional P&T, and regional PBM meetings during this rotation.

**Allergy and Asthma** – Residents are responsible for independently interviewing and monitoring patients with allergic rhinitis, sinusitis, and asthma. The resident will obtain a medical history, symptom and disease history, perform a brief physical exam including ears, nose, throat and lung assessments, and monitor medication efficacy, safety, and adherence. The resident will learn to effectively evaluate spirometry and symptoms to determine medication appropriateness and efficacy. An allergist oversees the clinic and staffs with the resident to provide optimal patient care.

**Pain Management** – The Pain Management team is an interdisciplinary team that is comprised of a neurologist, rehabilitation medicine specialist, nurse practitioner, clinical psychologist, and clinical pharmacist. Patients are referred to the clinic for chronic pain management with an emphasis on improvement of quality of life. Residents are responsible for reviewing patients' pain medication histories prior to their first visit with the clinic and assisting with selection of appropriate medication

treatment. Residents are also required to perform telephone follow-ups with patients following any changes in their pain medication regimen.

**Psychiatry** – This rotation provides residents with a broad interdisciplinary experience. Residents experience medication management in a pharmacist run clinic, including participation in our centralized intake system. Objectives include experiential learning of different DSM-IV axial diagnosis, clinical interview skills, psychopharmacology initiation, monitoring and evaluation as well as participation in mental health service journal club meetings.

**Pharmacotherapy Lab** – This rotation is designed to introduce the resident to academia. Residents will be co-teaching at the UW-Madison School of Pharmacy in the Pharmacotherapy laboratory. The Pharmacotherapy lab is set up as an experiential learning setting. Residents will have hands on teaching experience in both small and large groups. Teaching modules relate directly to the resident's clinical experience in areas including hypertension, epilepsy, smoking cessation, anticoagulation, and hyperlipidemia. Residents are also given the opportunity to present a didactic lecture to the second year doctor of pharmacy students.

**Teaching Certificate Program** – The teaching certificate is a separate program that complements the experiences obtained in the laboratory. Residents are taught strategies to teach the adult learner, facilitate discussions and design a lecture. A certificate, signed by the Dean of the School of Pharmacy, will be presented to the resident after successful completion of this program. Secondary causes of osteoporosis and for management of their reduced bone density. Residents assess patients, order bone density studies and other tests needed to look for risk factors and provide bisphosphonates and other treatments to improve the problem.

## ***ELECTIVES***

**Family Practice Clinic** – Residents spend one afternoon a week during this rotation at the Wingra Family Practice Clinic. This clinic serves a diverse population, with many patients being uninsured or having limited access to healthcare. Residents spend time doing a variety of activities including anticoagulation, diabetes management, prescription preparation through the patient assistance program, and shadowing and helping staff medical residents.

**Dermatology** – Residents work with attending dermatologists in addition to dermatology fellows and medical residents. Emphasis is placed on recognizing common dermatologic problems and their management.

**Hepatitis C** – The pharmacist co-manages patients with the gastroenterology team to evaluate and treat patients with the hepatitis C virus. Patient education, lab ordering, monitoring, dose adjustments and side effect management are needed monthly throughout drug treatment and are largely the responsibility of the pharmacist.

**Infectious Disease** – The ID clinic serves as the primary care clinic for all HIV+ patients at the Madison VA. It is also a consult clinic for patients with severe or chronic infectious diseases. All patients on home IV antibiotics are followed by the ID clinic. Experience during the rotation would likely include HIV, home infusion, diabetic or ischemic ulcers, treatment of osteomyelitis, endocarditis, wound care, etc.

**Women's Health** – Participation in this elective rotation is an opportunity for the resident to refresh knowledge and skills related to the female patient. Residents spend time observing and consulting with clinic providers.