



Residents' Roar

Volume 3, Issue 2

Spring 2002

The Year In Review

Matthew Blommel, Pharm.D.
Kimberly Corpus, Pharm.D.
Umbreen Idrees, Pharm.D
Newsletter Editors

Over the past year, many memorable events have occurred. From meetings to informal gatherings and everything in between, the University of Pittsburgh pharmacy residents have had some adventurous times together. We have grown both professionally and personally this past year. In the following section, each of the pharmacy residents at the University of Pittsburgh Medical Center will recount some of our best events from the 2001-2002 year.

By Kimberly Corpus, Pharm.D

Eastern States Residency Conference

The conference in Baltimore was a very positive experience for all who attended. The opening speaker was Henri R. Manasse, Jr., Ph.D., Sc.D., who gave us insight regarding how Pharmacy Practice residents can facilitate their transition into leaders. There was also a poster session, where many residents presented their residency research projects. The first night was concluded with a buffet dinner and an evening of jazz. This gave the residents an opportunity to relax and unwind the night before our platform presentations. All of our presentations went well, and we also had an opportunity to learn about various resident research projects at other institutions in the Eastern States region. After a long day, all of the residents celebrated by going out to dinner in the Inner Harbor.

By Umbreen Idrees, Pharm.D.

A Holiday Affair

Holiday Pops! at Heinz Hall. The night was filled with seasonal flair. The Pittsburgh Symphony along with the Pittsburgh Ballet Company performed a Christmas pageant that should not have been missed. Both clinical faculty and residents enjoyed the festive show.

By Kimberly Corpus, Pharm.D.



Eastern States Conference: 5 Residents, 5 hour van trip

The annual Pharmacy Practice Resident trip to Baltimore for the Eastern States Conference was carried out this past April. The presentations went well and we even learned something (see previous article). What actually made the trip interesting is that all 5 residents were cramped in a minivan for 5 hours straight. As residents, we may have learned how to get along in a confined working space over the previous months, but it couldn't prepare us for being restrained in a vehicle, with no escape. No fights erupted and everyone did return alive. We got to know each other a little more than expected, or even wanted. After the road began to blur into the landscape, topics such as, "If we were to crash and were trapped without food, who would you eat first?" After this was debated without consensus, the conversation converted to: "What is the worst thing you did as a child?" And the grand finale was a heated debate over "What is the difference between a negotiator and a mediator in the event of a minivan-jacking?" The answers to these questions will be omitted from this issue of the Residents Roar, but perhaps after the residents have moved far, far away from Pittsburgh they will divulge their secrets.

By Aaron Steffenhagen, Pharm.D.

ASHP Midyear Meeting

The Midyear Meeting in New Orleans was an exciting experience for all of the residents who attended. Many of us were busy interviewing for residency positions or jobs, but we did find time to attend poster sessions and other educational seminars. The UMPC-Presby residents also volunteered at the Clinical Skills competition. In addition, we helped out with the recruitment process for next year by talking to potential candidates at the Residency Showcase. Despite all of the time spent at the conference center, we all made it a point to have some fun as well. The following ASHP "Snapshot" highlights one of the fun moments from the trip.

By Umbreen Idrees, Pharm.D.



Pitt Scores Again!

This past year was a major success for both the men's basketball and football teams at the University of Pittsburgh. The men's basketball team, led by Brandin Knight and Julius Page, finished 29-6 and made it to the Sweet 16 of the NCAA tournament for the first time in over a decade. The football team, led by standout WR Antonio Bryant, finished 7-5 with a win in the Tangerine Bowl. In addition, the pharmacy department showed their support by attending the Homecoming game against eventual national champion, Miami. Hail to Pitt!

By Ed Horn, Pharm.D.

ASHP "Snapshot"

Here is a fun story from the ASHP Midyear meeting in New Orleans. After the Pharmacia dinner at Nola, one of the Pharmacia reps told us about the web cameras on Bourbon Street. He called his friend at home to find where the closest camera was located and we set off on a mission to find it. We found the bar where the camera was located but couldn't see the camera. So as the rep was talking to his friend on his cell phone, he told the whole group of about eight of us where to move. Slightly to your left, no to your right, now left and back. As you are probably aware, most web cams only update the image every few minutes. So after about 15 minutes, we started getting strange looks from the people outside the bar who didn't know about the camera as we shuffled back and forth. The guys singing karaoke inside the bar thought we were watching them and tried to give us a little show. We finally found the right spot and a few weeks later, we received some fun images to remember our experience. And that was how we began another fun night on Bourbon Street.

By Iny Marks, Pharm.D.



Tracy Coxon, Pharm.D.
VA Pharmacy Practice Resident

Over the past year I have gained valuable knowledge and experience through the pharmacy practice residency at the VA Pittsburgh Healthcare System. I have been able to improve upon several areas that I felt needed improvement. Through my many case presentations, seminar, and inservices, I have been able to improve upon my speaking and communication skills. I consider this a great accomplishment for myself, as I previously had difficulty speaking in front of large and small groups. I had wonderful experiences working with students over the past year. In addition to didactic teaching, I had several opportunities to teach students who were completing rotations in ambulatory care, internal medicine, and infectious disease. I look forward to working with students in the future. As I look back at the past year, I am very happy with what I have accomplished, but will miss all of the pharmacists, pharmacy technicians, pharmacy students, and last, but not least, my co-residents. I will never forget all of the support and guidance that I received from the clinical pharmacy specialists. I was able to establish personal relationships with many of the inpatient and outpatient pharmacists and will never forget all the times I relied on their advice for helping me to make it through my weekend staffing responsibilities. Several pharmacy students had rotations here and some worked as interns here. Sometimes their experiences may have seemed rough, but I hope that they know how much I valued working with them and how much they taught me about teaching. And finally, I will miss my co-residents. I know they will never forget me, and I will never forget them. We had many of the same experiences, and we were always there for each other. I wish my co-residents at the VA good luck in all they do, as well as all of the residents at UPMC. Next year, I will be establishing my own ambulatory care practice with the VA at an outpatient clinic in Pueblo, Colorado. I will take with me all of the valuable lessons I have learned at the VA in Pittsburgh. There, I will be taking over the anticoagulation clinic and will be consulted by physicians to manage certain disease states (including hypertension and diabetes). The VA in Pittsburgh has prepared me well for this wonderful opportunity. In five to ten years I hope to be married and have children. As far as my future career, I could be anywhere. I could be with the VA working in ambulatory care, working outside the VA in ambulatory care, or doing something completely different. Again, I wish good luck to all of the residents and would like to thank all of my preceptors for everything that they have helped me become. I will miss all of you!!

Heather Balest, Pharm.D.
VA Pharmacy Practice Resident

The residency has been quite a learning experience for me. I have learned a great deal of clinical information and have gained experience teaching at the University of Pittsburgh and Duquesne University. I have also had the opportunity to precept students who have done rotations at the VA, and have provided feedback on SOAP notes for students at the University of Pittsburgh. I have strengthened my presentation skills and feel more comfortable when speaking amongst physicians and other pharmacists. I have also taken the opportunity to be exposed to another teaching hospital, Presbyterian Hospital, where I did a rotation in Cardiology with Amy Seybert.

The residency was educational, and everyone worked hard. However, we were also able to enjoy our free times. I have developed some wonderful friends from this experience and hope that we can all keep in touch after leaving. I had the time of my life in New Orleans; what a wonderful group we had. By day we worked hard (or some of us slept), and then at night we had fun going to dinners and spending our nights on Bourbon Street. The VA preceptors are the BEST. Anyway, I hope that all the residents attained their goals that were established at the beginning of the residency, and I hope that everyone had an enjoyable experience as well. I know that I have.

Kimberly Corpus, Pharm.D.
UPMC Pharmacy Practice Resident
Kacorpus@yahoo.com

I am a General Pharmacy Practice Resident at the University of Pittsburgh Medical Center. I went to the University of Toledo for both my Bachelor of Science in Pharmacy degree as well as my Doctor of Pharmacy degree. I decided to complete my residency at the University of Pittsburgh Medical Center because of the diversity of the pharmacy program and the small town feel associated with Pittsburgh.

Over this past year, some of the activities I have been involved in include clinical patient rounds and teaching of dental hygiene and pharmacy students. Other endeavors include my research project, precepting pharmacy students, and volunteering with the Program for Health Care to Underserved Populations. Of all the opportunities that I have experienced here at UPMCHS, I think the most enjoyable occurred in the variety of intensive care units. The quality of care from the staff as well as the team mentality were the two main reasons that I feel that I have learned as much as I have this past year. I feel that my accomplishments this year will help me in my next position as the Critical Care Resident at Henry Ford Hospital. After completion of the critical care residency, I plan on attaining a clinical pharmacy position, which will hopefully have some opportunities to teach.

Although there were some difficult times, I have enjoyed this year immensely overall. The other residents, faculty, and all other medical staff and faculty have made this year something that I will remember always. The adventure I had this past year in Pittsburgh will be one that I will never forget.

Jackie Dix, Pharm.D.
UPMC Pharmacy Practice Resident

The clinical pharmacy experience that I received during my pharmacy practice residency at the University of Pittsburgh Medical Center is priceless. I have had the opportunity to practice pharmacy in a number of various patient-care settings, ranging from critical care and transplant to the indigent care clinic. The settings that I most enjoyed learning were the liver transplant intensive care unit and the neurovascular intensive care unit.

Some of the activities, other than patient rounds, that I have been involved in include new drug evaluations for the P&T committee, didactic teaching at the universities dental hygiene college, research, and platform presentations. I have also had the opportunity to be a preceptor for a forth-year pharmacy student, spend time in the drug information center and main pharmacy distribution center. I recently finished a research project on atropine stability for use in chemical terrorism attacks. I will be presenting my results at the North American Congress of Clinical Toxicology in August as well as submitting my findings for publication.

After completion of my pharmacy practice residency, I will begin my clinical pharmacy career at Rush North Shore Medical Center in Skokie, IL. This clinical position includes providing both clinical and distributive functions in the medical and surgical intensive care units. I will also have P&T committee responsibilities and will work closely with the drug utilization program.

I feel that the pharmacy practice residency program at UPMC has prepared me to take the next step in my career. It has directed me towards a profession that will be both satisfying and challenging; something I have been striving for for many years now.

Ed Horn, Pharm.D.
UPMC Critical Care Resident
Hornet@msx.upmc.edu

Currently, I am the Critical Care Resident at the University of Pittsburgh Medical Center Health System. I decided to pursue post-graduate training after college to build on the foundation of clinical skills that I gained while attending the University of Pittsburgh School of Pharmacy. With many of my professors serving a dual functionality as both clinician and educator, I was provided with the proper role models after which I wanted to pattern my career. I became interested in critical care during my Pharmacy Practice Residency at Thomas Jefferson University Hospital. I was able to have clinical learning experiences in both medical and surgical ICU areas, and it was this that helped me decide on an area of specialty.

As the critical care resident at UPMCHS, I have been able to not only focus and refine my clinical skills in intensive care pharmacotherapy, but I have also done numerous elective rotations in the realm of transplantation. Along with the daily patient care activities, I have been involved with various Drug Use and Disease State Management (DUDSM) projects to enhance medication use and patient care, research with some of the renal transplant physicians, and education of pharmacy, nursing, and medical students. This educational experience is not just limited to precepting pharmacy students or conducting didactic lectures, but also includes inservices to nursing and medical staff, and presentations to the pharmacy staff. I also presented my resident seminar, which were the preliminary findings of my research with the renal transplant physicians. Before I complete my residency, I plan on writing a case report describing the use of valganciclovir to treat active CMV disease in a kidney transplant patient.

Upon completion of my residency, I will be moving on to The Johns Hopkins Hospital, where I will be the surgical ICU clinical pharmacy specialist. My major responsibilities will include rounding daily with the intensivist-led surgical ICU team, pharmacy and nursing staff development, precepting pharmacy students and residents, as well as participation in various interdisciplinary hospital committees. I will also be involved with Johns Hopkins' critical care pharmacy residency as well. This last year of residency has really prepared me to be an independent clinical pharmacist. I feel ready to begin my career as a critical care clinical pharmacy specialist as a result of my residency at UPMCHS.

Iny R. Marks, Pharm.D.
Eckerd Health Services PBM Resident
imarks@ehs.com

I am the Clinical Pharmacy Resident with Eckerd Health Services (EHS), a chain-based pharmacy benefits management firm. While in college I decided to pursue a residency in managed care to utilize my clinical knowledge in a setting other than retail or hospital. In the fall of 2000, I completed a four-week rotation at EHS where I gained first-hand experience of the various clinical opportunities this environment had to offer. I chose this residency for its dynamic environment that provides exposure to various PBM/managed care activities. I also chose this residency to strengthen my research, writing, and teaching skills. Time-management and project-management skills are also very important for this residency and I continue to improve them everyday.

Some of the activities I have been involved in include the development of clinical newsletters for clients and physicians, writing drug monographs for the P&T Committee, and researching drug information questions for various departments. Clinical activities that I am responsible for include reviewing prior authorizations and assisting in retrospective drug utilization review. I also compose a monthly health information web page called Clinical Tips, which can be found on www.ehs.com, and create informational pieces for the Extra Care program, which is an educational program for members over 65 years of age. I participate on committees that are evaluating and improving the prior authorization process for members and designing a web based prior authorization submission process for physicians. Other residency responsibilities included teaching a lecture about PBM activities at the University of Pittsburgh School of Pharmacy and precepting Pharm.D. students from University of Pittsburgh and Duquesne University who were on rotation at EHS. I presented a resident seminar at the University of Pittsburgh and a poster at the Academy of Managed Care Pharmacy Annual Meeting, both on a retrospective analysis of a trial prescription program that has been implemented with an EHS client. In recent weeks, I have begun writing two articles for publication; one about the trial prescription program analysis and the other about an analysis of drug-drug interactions identified by the Retrospective Drug Utilization Review (RetroDUR) program.

After completion of this residency, I plan to continue working at EHS as a Clinical Pharmacy Specialist in Product Development. My major responsibilities will include developing and implementing new RetroDUR programs, maintaining existing RetroDUR programs, and distributing RetroDUR program activity reports. Other responsibilities will include reviewing prior authorizations and supporting Pharm.D. student and future resident activities. This residency has been a great learning experience that I have enjoyed very much and I plan to remain working in the managed care industry for many years to come.

Aaron Steffenhagen, Pharm.D.
UPMC Pharmacy Practice Resident

steffenhagenal@msx.upmc.edu

Education:

University of Wisconsin-Madison, Pharm.D. 2001

Why Pittsburgh?

Among the numerous options available for a Pharmacy Practice Residency program, Pittsburgh was my first choice. No, it was not because of great Steeler football though. The extensive UPMC Health System offers great diversity and a wide variety of rotation options that I could tailor to my interests, which I have benefited from through the year.

Future Goals/Plans (what this residency has prepared me for):

Upon completion of this residency at the end of June, I will return to my home state of Wisconsin. Here I will begin the task of setting up a pharmacy presence in the emergency department (ED) at the University of Wisconsin – Madison. Currently pharmacy has little influence in this department, though it presents great opportunities for involvement in patient care and staff education. Other responsibilities will include developing and implementing new programs in the ED and operating room, as well as rotating through general internal medicine to keep up with the overall focus of hospital pharmacy. Since the UW-Hospital is strongly affiliated with the school of pharmacy, I will mentor PharmD students there and gradually begin lecturing at the school.

This residency program has given me the opportunity to gain the skills I need to move into my future position in Wisconsin. The program had the flexibility to adjust to my changes of interest by adjusting rotations and my activities accordingly. With the UPMC Health System being as large as it is, I have gained a diverse background being on rotation at three separate UPMC Hospitals, the Veteran's Affairs hospital, Children's Hospital of Pittsburgh, and the UPMC Health Plan. This diversity in rotations is by choice and is now what I consider one of the great benefits of this program.

Umbreen Idrees, Pharm.D.
UPMC Pharmacy Practice Resident

idreesu@hotmail.com

It is coming close to the end of my residency, and I am finally getting a chance (not really!) to reflect on how I have grown this year. I have had a great experience here, and a lot of this is due to the clinical staff at UPMC. All of my preceptors have been very dedicated to teaching and helping us meet our rotation/residency goals. They really spent a lot of time with me, and that is greatly appreciated. I was able to gain clinical experience in a variety of practice areas, including an Emergency Medicine rotation at the University of Southern California-Los Angeles County Hospital. This opportunity sparked my interest in Emergency Medicine and led me to my future plans.

Some of the activities I have been involved in include Drug Use and Disease State Management projects (Erythropoietin guidelines, UTI guidelines, Pulmonary Hypertension Medications), submitting to the Toxicology newsletter, platform presentations, my residency research project (Intravenous Amiodarone for the Treatment of In-hospital Pulseless VT/VF), and precepting pharmacy students.

In July, I will be starting a specialized residency in Emergency Medicine Pharmacotherapy at Detroit Receiving Hospital. As for plans beyond next year, I would like to obtain a clinical position in an Emergency Department in an academic institution. I enjoy teaching, so hopefully precepting opportunities will be available wherever I end up.

It has been a great year, and I hope to keep in touch with all of you!

Matthew Blommel, Pharm.D.
UPMC Pharmacy Practice Resident

It has been a long year of hard work and many rewards, but it seems like only yesterday that I was moving to Pittsburgh all of the way from Atlanta, Georgia. I went to pharmacy school in Atlanta at Mercer University Southern School of Pharmacy. Although it was quite a transition moving from the south to Pittsburgh, I have come to enjoy the colorful change of seasons and the beauty of the surrounding countryside. As I stated before this year has been a lot of work. With projects for drug use and disease state management, P+T meetings, ADR committee meetings, platform presentations, seminar, eastern states, and the clinical responsibilities during rotations, there definitely was never a time that was lacking something to work on. However, despite the long hours and hard work, I have gained many rewards and satisfaction from completing all of the aforementioned responsibilities. I have developed public speaking skills and feel much more at ease giving a presentation after this past year. I have also gained a great deal of confidence in my clinical abilities thanks to this year of practical experience and through the guidance and tutelage of the many outstanding clinical faculty that I have worked with. Finally, I would like to mention the strong dynamics of this year's group of residents. There were many types of people with different personalities comprising this year's resident class. While that may have the potential to develop into an explosive situation, this group of residents took the opposite approach and bonded into a cohesive, friendly group of people that continuously helped each other through this year of residency. I strongly feel that bond has enriched this year well beyond the professional rewards that we have gained. I have gained both professionally and personally this year, and I believe that is the best of both worlds.

Joshua Fredell, Pharm.D.
UPMC Health Plan Resident

Since I have only been in my residency for 5 months it is hard to summarize all that I have done since there is so much left to do. Up to this point, I have been focused mainly on improving the care provided to our Medicare members. It is an interesting challenge since these members love that fact that there is someone calling them, so they want to talk. I have heard stories of grandchildren, old cars, broken faucets, and many other areas that don't pertain to medications or health. I don't know about the rest of you but do you hear this from patients every once in a while, "I have grandchildren older than you, how can you be a pharmacist?" Just wondering.

It is conversations like that which have been some of the funniest and most enjoyable points of the residency so far. Beyond my Medicare responsibilities, I always have lots of the day-to-day activities which are usually what make a normally long day into a very long day, but I'm sure you all know all about that!

My plans for after my residency are not very clear at this time, probably because I have 7 months to go. I do know that managed care is where I want to stay. It is a field of pharmacy with a lot of problems and areas for improvement. Hopefully wherever I find myself in January 2003, I will be a part of what is helping make this field a little better. Besides that, my only other plan is to retire by the age of 35. Anyone is welcome to join me in that goal! Good luck everyone, and I'm sure we will meet again in this small world of pharmacy.

Congratulations to Next Year's Residents

UPMC Health System Pharmacy Practice

Aesha Debnam Pharm.D.
UNC-CH School of Pharmacy

Olanrewju O. Okusanya Pharm.D.
Texas Southern University College of Pharmacy

Christina E. Schober, Pharm.D.
Philadelphia College of Pharmacy

Critical Care

Rhonda Rea Pharm.D.
Duquesne University

Cardiology

James C. Coons, Pharm.D.
University of Pittsburgh School of Pharmacy

Oncology

J. Michael Vozniak, Pharm.D.
University of Pittsburgh School of Pharmacy

Drug Information

Bethany Fedutes, Pharm.D.
Duquesne University School of Pharmacy

Eckerd Health Services

Kristin Mitchem, Pharm.D.
University of Pittsburgh School of Pharmacy

VA Pharmacy Practice

Beth E. Baker, Pharm.D.
Duquesne University School of Pharmacy

Michael J. Fraundorfer, Pharm.D.
Duquesne University School of Pharmacy

Rebecca D. Roman, Pharm.D.
Ohio Northern University School of Pharmacy

Submissions were not received from the following:

Pittsburgh VA Hospital Pharmacy Practice Residents

Dante Grassi, Pharm.D.

UPMC Oncology Resident

Michael Cox, Pharm.D.