

Requirements for Successful Completion of PGY-2 Solid Organ Transplant Residency Program

| Criteria | Completed Date | | | | | | | | | | | | | | | | | | | | | | |
|--|-----------------|-----------------|---|--|-----------------------|--|--|--|-----------------------|--|--------------------------|--|---------------------------|--|---------------------------|--|---------------------------|--|---------------------------|--|---------------------------|--|--|
| Attainment of Ohio pharmacist licensure as soon as possible, but must be licensed within 90 days of the start date | | | | | | | | | | | | | | | | | | | | | | | |
| Successful completion in each of the required rotation areas (see program structure) | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">Rotation</th> <th style="text-align: center;">Completion Date</th> </tr> </thead> <tbody> <tr><td>Orientation</td><td></td></tr> <tr><td>Kidney Transplant</td><td></td></tr> <tr><td>Liver Transplant</td><td></td></tr> <tr><td>Lung Transplant</td><td></td></tr> <tr><td>Heart Failure/Transplant</td><td></td></tr> <tr><td>Immunocompromised ID</td><td></td></tr> <tr><td>Independent Practice</td><td></td></tr> <tr><td>Outpatient Transplant</td><td></td></tr> </tbody> </table> | Rotation | Completion Date | Orientation | | Kidney Transplant | | Liver Transplant | | Lung Transplant | | Heart Failure/Transplant | | Immunocompromised ID | | Independent Practice | | Outpatient Transplant | | | | | | |
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| Orientation | | | | | | | | | | | | | | | | | | | | | | | |
| Kidney Transplant | | | | | | | | | | | | | | | | | | | | | | | |
| Liver Transplant | | | | | | | | | | | | | | | | | | | | | | | |
| Lung Transplant | | | | | | | | | | | | | | | | | | | | | | | |
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| Independent Practice | | | | | | | | | | | | | | | | | | | | | | | |
| Outpatient Transplant | | | | | | | | | | | | | | | | | | | | | | | |
| Completion of a residency research project | | | | | | | | | | | | | | | | | | | | | | | |
| Completion of at least one drug use evaluation (DUE) or quality improvement project | | | | | | | | | | | | | | | | | | | | | | | |
| Completion of at least one formulary review monograph | | | | | | | | | | | | | | | | | | | | | | | |
| A manuscript (in publishable form) submitted to the residency director prior to the end of residency year | | | | | | | | | | | | | | | | | | | | | | | |
| Completion of Appendix: Core Areas and Types of Patient Care Experiences | | | | | | | | | | | | | | | | | | | | | | | |
| Presentations | | | | | | | | | | | | | | | | | | | | | | | |
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| Transplant Journal Club 4 | | | | | | | | | | | | | | | | | | | | | | | |
| Present and/or attend the Ohio College of Clinical Pharmacy Spring meeting, American Society of Helath-System Pharmacists Midyear Clinical Meeting, and/or American Transplant Congress at the discretion of the Residency Program Directory and Residency Committee (based on travel limitations imposed by Cleveland Clinic) | | | | | | | | | | | | | | | | | | | | | | | |
| Staffing 15 weekends per year, 1 major and 1 minor holiday | | | | | | | | | | | | | | | | | | | | | | | |
| Participation in the pharmacy residency on-call program according to schedule (minimum 10 shifts) | | | | | | | | | | | | | | | | | | | | | | | |
| Successful completion of the residency goals and objectives as defined in the Successful Completion of the Residency Policy. The resident must achieve all goals in R1. A resident may have 2 goals in other domains that are not achieved. By the end of the residency, there can be no objectives that are rated as Needs Improvement. | | | | | | | | | | | | | | | | | | | | | | | |

My signature below attests to the accuracy of the completion dates listed above and acknowledges that all requirements have been met for successful completion of the PGY2 Solid Organ Transplant Residency Program.

 Jamie Eckardt, Pharm.D., BCPS, BCTXP
 Residency Program Director

 Date

 PGY2 Solid Organ Transplant Resident

 Date