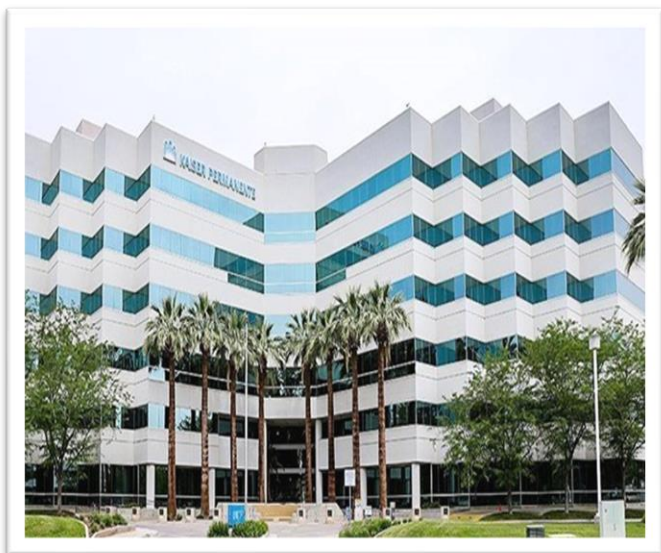


# KAISER PERMANENTE

## KERN COUNTY SERVICE AREA PGY1 PHARMACY RESIDENCY PROGRAM



### CONTACTS

#### **Alexis Roy, PharmD, APh**

Area Pharmacy Director  
Residency Program Director  
Email: [Alexis.L.Roy@kp.org](mailto:Alexis.L.Roy@kp.org)

#### **Laura Lum, PharmD**

Clinical Operations Manager  
Residency Program Coordinator  
Email: [Laura.E.Lum@kp.org](mailto:Laura.E.Lum@kp.org)

#### **Megan Shepherd, PharmD**

Resident Pharmacist 2023-2024  
Email: [Megan.E.Shepherd@kp.org](mailto:Megan.E.Shepherd@kp.org)

### ADDITIONAL INFORMATION

For additional information, please  
visit our website:

<https://pharmacyresidency.kaiserpermanente.org/job/pgy1-pharmacy-practice-kern-county-bakersfield/>

### QUALIFICATIONS

- Doctor of pharmacy graduate from an accredited institution
- Official transcripts, sent direct from the applicant's college or school of pharmacy
- Three letters of recommendation
- Letter of Intent
- Current Curriculum Vitae
- California Intern License obtained before start of residency program
- California Pharmacist Licensure obtained by **December 15, 2024**
- Registered in the National Matching Services, Inc. (NMS)

### DATES TO REMEMBER

- **January 2, 2024** – Application due on ASHP PhORCAS service
- **Mid-February 2024** – Residency Interviews at Kaiser Permanente Kern County
- **Early March 2024** – Deadline for residency ranking
- **March 2024** – Match results



## ABOUT KERN

Providing care for over 116,000 members, the Kern County Service Area, based out of Bakersfield, consists of nine medical office buildings and an affiliated 255-bed hospital.

This pharmacy residency is a 1 year post graduate program, using ASHP guidelines to help the resident achieve the following program purpose: PGY1 pharmacy resident programs build on Doctor of Pharmacy education and outcomes to contribute to the development of clinical pharmacists responsible for medication-related care of patients with a wide range of conditions, eligible for board certification, and eligible for postgraduate year two pharmacy residency training.

## CLINICAL SERVICES

### Advanced Care

The pharmacist conducts comprehensive medication reviews for patients with complex chronic medical, social, and medication needs and/or at high risk for hospital admission. The pharmacist may initiate, adjust, or discontinue medications as needed to improve therapeutic outcomes.

### Complete Care Management (CCM)

The pharmacist works with patients requiring complex medication-related interventions secondary to CVD (Diabetes, Hypertension, Cholesterol). The pharmacist performs a complete medication assessment and provides patient education to members.

### Heart Failure

The CHF pharmacist follows patients hospitalized for HF in the Transitional Care Program (TCP) and works with the hospital discharge pharmacist to contact patients post discharge. The pharmacist conducts a full medication reconciliation and will perform medication titrations to optimize outcomes and may also order a flexible diuretic plan and intravenous diuretics to prevent ER visits and hospitalization.

### Home Infusion

The home infusion pharmacist performs medication reviews, patient education, assistance with TPN, antibiotic therapy optimization, and management of drug levels.

### Medication Therapy Management (MTM)

The MTM program's goal is to optimize drug therapy outcomes through improved medication use. The MTM pharmacist performs a comprehensive medication review.

### Oncology/Infusion

The oncology pharmacist oversees the sterile preparation of intravenous chemotherapy and other infusion products. In addition, the pharmacist works under a collaborative practice agreement to manage medications for patients on oral chemotherapy and/or with chemotherapy-induced nausea/vomiting.

### Renal

The renal pharmacist assists primary care physicians and nephrologists in managing chronic kidney disease (CKD) patients at risk for progression by managing their chronic diseases. The pharmacist also rounds in the Peritoneal Dialysis clinic.

### Transition of Care (TOC)

The TOC Pharmacist is part of the case management/discharge planning team working within Adventist Health Bakersfield. The pharmacist completes a thorough medication review, reconciles any medication related issues upon discharge, makes recommendations based on evidence-based therapy, and coordinates care for further follow up.

## LEARNING EXPERIENCES

### CORE ROTATIONS

- Complete Care Management
- Drug Information
- Heart Failure
- Home Infusion
- Medication Therapy Management
- Orientation
- Oncology/Infusion
- Outpatient
- Precepting
- Renal

### ELECTIVE ROTATIONS

- Advanced Care
- Inpatient
- Transitions of Care

### LONGITUDINAL ROTATIONS

- Drug Use Management
- Management
- Research Project

### OTHER EXPERIENCES

- Book Club
- Journal Clubs
- Leadership Development
- P&T
- Patient Case Presentations

