KPNW PGY2 Ambulatory Care Residency Overview

Visit: pharmacyresidency.kp.org

Kaiser Permanente

Kaiser Permanente is committed to helping shape the future of health care. We are recognized as one of the leading healthcare providers and nonprofit health plans in the United States. Caring for our communities for over 75 years, our mission is to provide high-quality, affordable healthcare services and to improve the health of our members and the communities we serve. Kaiser Permanente serves over 12 million members nationwide across 7 different regions, including Northern California, Southern California, Colorado, Georgia, Hawaii, Mid-Atlantic States, Northwest, and Washington.

Kaiser Permanente Northwest

For more than 75 years, Kaiser Permanente Northwest (KPNW) has provided integrated health care services to members throughout Oregon and Southwest Washington. KPNW serves more than 600,000 members and includes two hospitals, a broad network of medical offices, dental clinics, pharmacies, and specialty care services across the region. The service area extends from the Portland metropolitan area south to Eugene, Oregon, and north to Longview, Washington. Northwest Permanente, the physician group supporting KPNW, includes more than 1,300 physicians and clinicians representing over 30 medical specialties.

Purpose

PGY2 pharmacy residency programs build on Doctor of Pharmacy (PharmD) education and PGY1 pharmacy residency programs to contribute to the development of clinical pharmacists in specialized areas of practice. PGY2 residencies provide residents with opportunities to function independently as practitioners by conceptualizing and integrating accumulated experience and knowledge and incorporating both into the provision of patient care that improves medication therapy. Residents who successfully complete an accredited PGY2 pharmacy residency should possess competencies that qualify them for clinical pharmacist and/or faculty positions and position them to be eligible for attainment of board certification in the specialized practice area (when board certification for the practice area exists).

Residency Overview

- ASHP Accredited PGY-2 Ambulatory Care Residency
- 52 week program starting in early July
- Two resident positions
- Based in Portland, Oregon

Program Requirements

- ACPE accredited School of Pharmacy graduate
- PGY-1 residency completion
- Licensure requirements:
    - Oregon intern license by the start of the residency
    - Pharmacist licensure in Oregon by 120 days from the start of the residency
    - Pharmacist licensure in Washington by 180 days from the start of the residency
- Longitudinal staffing in Primary Care (8 hours weekly; weekday dependent on other block rotations)
- Other longitudinal opportunities provides residents with opportunities to volunteer within the local community. Depending on availability, these opportunities may include:
    - Coordinating with local schools of pharmacy to implement vaccination clinics, weekend blood pressure clinics for patients with limited healthcare access, and assisting with Kaiser Permanente vaccination clinics
- Attendance at Professional Conferences:
    - ASHP Midyear Clinical Meeting (pending regional approval) if presenting a poster
    - Northwestern States Regional Conference (Portland, OR)

Benefits

- Paid expenses to ASHP Midyear if presenting a poster (subject to regional approval)
- Insurance
    - Allowance to purchase comprehensive medical, dental, and vision coverage for self, domestic partner & dependents
    - Allowance includes the option for basic life insurance and short-term disability, with the option to pay for long-term disability
- Time Off
    - Paid Time off (includes vacation, sick time, interviews, personal and religious days) and Paid Holidays (New Year's Day, MLK Day, Memorial Day, Independence Day, Labor Day, Thanksgiving Day, and Christmas Day) for a total of 17 paid days
    - Licensure Exams: Up to 3 days; Professional Conferences: 4 days; additional leave available under KPNW policies: Bereavement (up to 5 days), Jury Duty (1 day)

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KPNW Application Process

ASHP Program Match Number: 750265

Interested applicants must electronically submit the following items via the Pharmacy On-line Residency Centralized Application Service (PhORCAS) by the application deadline:

- Letter of Intent
- Curriculum Vitae
- Three standardized PhORCAS reference forms
- Official College of Pharmacy transcripts

Program Contacts:

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Deadline:

January 2, 2027

Appointment is contingent on the following:

- American Society of Health System Pharmacists (ASHP) Residency Matching Program "match."
- Kaiser Permanente screening criteria including:
    - Drug & health screen
    - Criminal background check
    - Prior employment & education verification
    - License, certification & registration verification

Kaiser Permanente agrees that no person at this site will solicit, accept or use any ranking-related information from any resident applicant.

KPNW PGY-2 Required Experiences

Orientation (1-3 weeks)
The Orientation learning experience provides a comprehensive introduction to Kaiser Permanente Northwest (KPNW), Clinical Pharmacy Services, and the PGY2 Ambulatory Care Pharmacy Residency Program. Over one to three weeks, residents complete organizational onboarding, ambulatory care service training, and residency orientation while developing foundational skills in chronic disease management, population health, and clinical pharmacy workflows. Residents gain exposure to the role of ambulatory care pharmacists within an integrated, interdisciplinary healthcare system and become familiar with the tools, resources, and services that support patient care across the region. Through structured training, self-assessment, and professional development activities, residents are prepared to successfully transition into direct patient care learning experiences.

Primary Care I (4-6 weeks)
The ambulatory care resident will work as part of an integrated healthcare team within our National Committee for Quality Assurance (NCQA) accredited medical home to optimize patient care with a population-based approach. Primary Care I (PC I) focuses on solidifying clinical knowledge and skills through direct clinical interventions for diabetes, dyslipidemia, and hypertension. Learning opportunities include pharmacist-run blood pressure clinics, decentralized telephonic communication for disease state management, and drug consultations for primary care clinicians.

Primary Care II (6 weeks)
Primary Care II (PC II) expands upon the experiences of PC I with the additional opportunity to explore and develop clinical teaching roles through preceptorship. The resident will be a primary preceptor for an advanced pharmacy practice experience (APPE) student. Preceptor experiences include but are not limited to, developing structured learning experiences, setting goals and responsibilities, and providing constructive feedback.

Leadership and Administration (4-6 weeks)
The Leadership and Administration section provides a comprehensive understanding of the day-to-day life of a clinical pharmacy services manager. The resident will learn to problem-solve personnel and service-related issues, work with the manager and leads team to implement and improve practices, and participate in meetings around pharmacy administration and population health and quality. Since the clinical manager is also the PGY-1 and PGY-2 Residency Program Director, the resident will be involved in residency-related performance improvement projects related to the ASHP Standards. This section is designed to enhance the resident's communication and interpersonal skills while developing time management strategies.

Neurology (4-6 weeks)
The Neurology learning experience provides residents with direct patient care experience as part of a multidisciplinary team within Kaiser Permanente Northwest's ambulatory Neurology Clinic. Residents develop proficiency in the management of neurologic conditions including multiple sclerosis, epilepsy, migraine and headache disorders, Parkinson's disease, and neuropathic pain through patient consultations, medication management, laboratory monitoring, and patient education. Working closely with a Neurology Clinical Pharmacy Specialist and neurologists, residents gain experience optimizing complex medication regimens, addressing medication-related problems, and collaborating with providers to improve patient outcomes. As the rotation progresses, residents assume increasing responsibility for clinical consults and patient care activities, preparing them for more autonomous ambulatory care practice.

Mental Health (4-6 weeks)
The Mental Health learning experience provides residents with direct patient care experience as part of a multidisciplinary behavioral health team serving patients across Kaiser Permanente Northwest. Residents develop skills in the management of common psychiatric conditions, including ADHD, depression, anxiety disorders, and schizophrenia, through medication management, patient education, and consultative care. Working closely with the Mental Health Pharmacist, residents gain experience optimizing psychotropic therapy, supporting providers, and improving medication-related outcomes. As the rotation progresses, residents assume increasing responsibility for patient care and interdisciplinary collaboration.

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KPNW PGY-2 Longitudinal Experiences

Leadership Development Longitudinal (50-51 weeks)
Experiences in leadership development are designed to introduce residents to pharmacy leadership. Several pharmacy leaders will have topic discussions with the resident regarding their area of expertise. The resident will also participate in topic discussions around time management, burnout and resiliency, emotional intelligence, personnel management, resource utilization, mentoring, and other administrative issues.

Primary Care Longitudinal (44-46 weeks)
This experience will expand upon the resident's responsibilities in Primary Care I and II. These experiences include optimization of patient specific medication therapy plans for diabetes, dyslipidemia, and hypertension. In addition, the resident will provide education to the clinicians through consultation and in-service presentations. Depending on what is needed, residents may also collaborate with clinicians to establish and/or provide unique healthcare interventions to close gaps in health care disparities. This longitudinal experience is designed to enhance the resident's skills in communication and relationship building with both patients and the integrated healthcare team as well as understanding the long-term effects of chronic disease state management. The resident will staff weekly (weekday to be decided depending on the rotation block) in primary care for approximately 8 hours.

Community Outreach Longitudinal (46-48 weeks)
Community Outreach will provide the residents with a closer interface with the community in which we live in. Residents will gain an understanding of education, health, and social services resources within our community to promote wellness. Residents will have the opportunity to develop and facilitate outreaches with local organizations and colleges of pharmacy. Residents will also engage in teaching opportunities by precepting pharmacy students. The goal is for the residents to become skilled in utilizing available community resources to facilitate the prevention of chronic medical conditions commonly seen in the outpatient setting.

Residency Project Longitudinal (50-51 weeks)
The residency project is intended to provide the resident with the opportunity to conduct research and project development in a managed care environment, to collect and analyze data, and to prepare a manuscript for potential submission to a peer-reviewed pharmacy or medical journal. The resident will work with the Residency Program Director, pharmacy leadership and preceptors to choose a project that meets the goals and objectives of the ASHP PGY-2 Ambulatory Care Residency and improves patient care.

KPNW PGY-2 Elective Experiences

Academia (2-4 weeks)
This learning experience and certificate training program is partnered with the Oregon State University College of Pharmacy faculty and Pacific University School of Pharmacy. It will provide opportunities to develop teaching and group facilitation skills in the pharmacy practice case-based and therapeutic course. The resident will assist in developing learning objectives and cases on therapeutic topics and evaluating student activities for the ambulatory care portion of the pre-APPE readiness block. In addition, there are experiences that help the residents evaluate their interest in academia and provide them with tools to precept pharmacy students in clinical settings. The resident will also have the option to complete the Oregon Pharmacist Teaching Certificate (OPTC). This includes attending teaching workshops that will give the resident hands-on academic experience, including syllabus design, development of didactic lectures, discussion session facilitation, presentations, grading, and feedback.

Anticoagulation (4-6 weeks)
The Kaiser Permanente Northwest Anticoagulation Program (ACC) manages approximately 10,000 patients on warfarin within a multi-disciplinary setting using pharmacists, registered nurses, licensed practical nurses, pharmacy technicians, and medical assistants. The pharmacy resident will be responsible for providing anticoagulation management services to patients in the outpatient setting and collaborating with clinicians, nurse care managers, outpatient pharmacists, and other healthcare team members to manage patients to ensure quality of care and safe use of anticoagulants. The resident will use clinical practice guidelines, best practices, and protocols to manage a higher acuity patient population requiring anticoagulation, including anticoagulation in pediatrics and pregnancy, warfarin in combination with high-risk medications (e.g. rifampin, sulfamethoxazole), patients with new thromboembolic events, bridging warfarin with injectable anticoagulants for procedures, interrupting target-specific oral anticoagulants for procedures, and transitions to and from warfarin and target-specific oral anticoagulants.

Clinical Informatics (4-6 weeks)
During this learning experience, the resident will learn the principles of clinical decision support tool design/evaluation within the electronic medical record and may have the opportunity to collaborate with regional, inter-disciplinary, and/or inter-regional teams. This experience may include developing clinical content within the electronic medical record, gathering input from all stakeholders, coordinating and communicating implementation, conducting periodic reviews/maintenance, and evaluating effectiveness. The learning experience can be somewhat tailored to the resident's background and interests or provide a general overview of Ambulatory Pharmacy Informatics.

Dermatology/Gastroenterology (4-6 weeks)
The gastroenterology department consists of 20 providers, while the dermatology department has 18 providers, all of whom are supported by the clinical pharmacist. The resident will provide direct patient care via telephone visits and assist the clinical pharmacist with administrative services, including formulary management, cost-saving initiatives, and development of clinical decision-making tools in the electronic health record, as well as provide drug information consults for the gastroenterology and dermatology teams. The resident will gain proficiency in the following disease states: inflammatory bowel disease, GERD/H pylori/peptic ulcer disease, psoriasis, acne, and dermatitis.

Endocrinology (4-6 weeks)
Endocrinology provides the resident with learning opportunities within a telephonic, direct patient-care model that utilizes evidence-based clinical guidelines and collaborative practice agreements for disease state management. The resident will build on skills obtained in Primary Care I to manage a more complex patient population. The primary focus is insulin management of high acuity diabetic patients, including end-stage renal disease/hemodialysis, recent cardiac surgery, enteral nutrition, oncology, steroid-induced hyperglycemia, and other stress-induced hyperglycemia or hypoglycemia. The resident will also shadow the Endocrinology Diabetes Clinic, which focuses on the management of type 1 diabetes mellitus, and get hands-on experience with various insulin pump devices and continuous glucose monitoring systems. Additionally, the resident will be exposed to formulary management projects, which may include presenting new medications for formulary consideration, updating/creating prior authorization criteria for insurance coverage, and addressing any pharmacy-related endocrinology questions/concerns that may arise.

KPNW PGY-2 Elective Experiences Continued…

Hepatology/Immunizations (4-6 weeks)

The Hepatology/Immunizations learning experience provides residents with a unique blend of direct patient care and population health–focused practice. In hepatology, residents manage patients receiving treatment for hepatitis C and metabolic dysfunction-associated steatohepatitis (MASH), providing medication management, laboratory monitoring, and patient education as part of a multidisciplinary care team. In immunizations, residents gain experience evaluating new vaccine recommendations, developing clinical and educational resources, and supporting health-system implementation of immunization initiatives. Through progressive responsibility, residents develop expertise in both specialty medication management and system-level clinical program development.

Oncology/Hematology (4-6 weeks)

The oncology clinical pharmacists are part of a multi-disciplinary team that supports adult hematology/oncology patients across three ambulatory oncology infusion locations. The clinical pharmacists are responsible for evaluating chemotherapy orders through the High Alert Medication Program (HAMP) procedure, making recommendations for managing chemotherapy-related side effects, and providing chemotherapy and supportive care patient education. The resident is expected to gain proficiency in oncology therapeutics through literature review, topic discussion, and/or direct patient care experience, including hematologic cancers, solid tumors, common complications in cancer patients, and supportive care. The resident will also assist with administrative responsibilities, including evidence reviews, drug utilization evaluations, and protocol development, as well as provide drug information consults for the oncology team.

Rheumatology (4-6 weeks)

The clinical pharmacist in rheumatology is embedded in the clinic and supports six rheumatology providers across three medical offices. The resident will provide direct patient care via telephone visits, which includes medication management for gout and assisting with step-down therapy for the following disease states: rheumatoid arthritis, psoriatic arthritis, inflammatory polyarthritis, and ankylosing spondylitis. The resident will also assist the clinical pharmacist with administrative services, including formulary management, cost-saving initiatives, and the development of clinical decision-making tools in the electronic health record, as well as provide drug information consults for the rheumatology team.