

Kaiser Permanente Northwest (KPNW) PGY1 Pharmacy Residency

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

PGY1 pharmacy residency programs build on Doctor of Pharmacy (Pharm.D.) 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 (PGY2) pharmacy residency training.

Residency Overview

- PGY-1 Pharmacy Practice ASHP-accredited Residency
- 52 week program starting the end of June/beginning of July
- 2 resident positions
- Based in Portland, Oregon
- Ambulatory care focus within a managed care environment

Program Requirements

- Graduate or candidate for graduation of an ACPE accredited college of pharmacy program OR Degree in pharmacy meeting minimum educational requirements for pharmacist licensure in Oregon OR Foreign Pharmacy Graduate Examination Committee (FPGEC) certificate from the National Associations of Board of Pharmacy (NABP) upon hire/transfer.
- Licensure requirements:
 - Must be a licensed Oregon pharmacist within 120 days from the program start date. Residents who are not licensed as a pharmacist within 120 days from the program start date will have their term of appointment extended by the number of days the resident is without licensure past the 120-day deadline up to a maximum of 45 days. Failure to obtain a Oregon state pharmacist license within 165 days from the program start date will result in the resident being dismissed from the program and employment will be terminated.
- Clinical Pharmacy Services staffing (8 hour virtual shifts every other Saturday, starting in November; total of 12 Saturdays)
- Attendance at Professional Conferences:
 - Oregon Society of Health System Pharmacists (OSHP) Fall Conference (Portland, OR)
 - ASHP Midyear Clinical Meeting (subject to regional approval)
 - Northwestern States Regional Residency Conference (Portland, OR)

Benefits:

- Insurance
 - o Allowance to purchase comprehensive medical, dental and vision coverage for self, domestic partner & dependents
 - o Allowance includes option for basic life insurance and short-term disability, with option to pay for long-term disability
- Paid expenses to ASHP Midyear if presenting a poster (subject to regional approval)
- Time Off
 - o 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) = 17 paid days; Licensure Exams Up to 3 days; Professional Conferences 4 days for a total of 24 days
- Additional leave available under KPNW policies: Bereavement (up to 5 days), Jury Duty (1 day) for an overall total of 30 days

KPNW Application Process

ASHP Program Match Number: 750265

Application:

Interested applicants must electronically submit the following items via the Pharmacy On-line Residency Centralized Application Service (PhORCAS) by the application deadline: **January 2nd, 2027**

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

Program Contacts:

Tanya Ramsey, PharmD, BCACP

PGY1 Residency Program Director and PGY2 Ambulatory Care Residency Program Director

Kaiser Permanente Northwest - Clinical Pharmacy Services

Kaiser Permanente Building

500 NE Multnomah St

Portland, OR 97232

503-278-2872

Tanya.A.Ramsey@kp.org

Olivia Kim, PharmD, BCACP

PGY1 Residency Program Coordinator and PGY2 Ambulatory Care Residency Program Coordinator

Kaiser Permanente Northwest - Clinical Pharmacy Services

Kaiser Permanente Building

500 NE Multnomah St

Portland, OR 97232

971-710-8131

Olivia.M.Kim@kp.org

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

KPNW PGY-1 Required Experiences

Orientation (3 weeks): The Orientation learning experience is a required three-week onboarding rotation. Residents receive foundational training in residency expectations, pharmacy operations, clinical workflows, electronic medical record documentation, and core disease state management while gaining exposure to pharmacist practice models across the integrated healthcare system. Through structured training, assessments, and introductory clinical experiences, residents build the knowledge and skills needed to successfully transition into direct patient care and operational learning experiences.

Ambulatory Care I (3 weeks): Ambulatory Care I is a learning experience in which residents provide medication management services focused on blood pressure management, statin initiation and titration, and improving adherence to antihypertensive, oral diabetes, and statin medications. Residents apply evidence-based guidelines to optimize cardiovascular risk reduction, communicate recommendations to patients and providers, and develop skills in ambulatory care practice. During the rotation, residents also revise an existing collaborative drug therapy management (CDTM) protocol.

Ambulatory Care II (6 weeks): Ambulatory Care II is a learning experience focused on diabetes management and cardiovascular risk reduction. Residents provide medication management services for patients with diabetes, including lifestyle counseling, oral and injectable medication optimization, insulin management, and glucose monitoring, while also addressing hypertension and hyperlipidemia. Through patient outreach, education, and collaboration with healthcare providers, residents develop increasing independence in managing complex diabetes cases and delivering evidence-based care.

Anticoagulation, Ambulatory (4 weeks): The anticoagulation service manages over 10,000 patients. ACC pharmacists work in a multi-disciplinary team of physicians, registered nurses, pharmacists and medical assistants. ACC pharmacists specialize in initiation of warfarin with injectable anticoagulation, bridge therapy, pregnancy, managing warfarin drug interactions, and transition between warfarin and a direct oral anticoagulant. The resident will collaborate with other health care team members to provide safe and effective outpatient anticoagulant management services.

Drug Use Management (DrUM) (5-6 weeks): Drug use management pharmacists develop, coordinate, and implement drug initiatives and cost-effective conversions to ensure patients are provided safe, high-quality medications while offering a health plan that is affordable to members. This coordination includes provider, member, and information systems communications throughout the organization. The resident will be exposed to drug information and formulary management on a KP regional and national level. Projects include a drug monograph and a medication use evaluation. Additional learning opportunities include coordination of cost-effective and quality therapy such as a conversion from brand to generic, drug shortage plans and therapeutic equivalencies. Residents will also spend time with the Formulary Application Services Team, supporting the Regional Formulary and Therapeutics Committee by performing prior authorization review during new member season.

Infectious Diseases, Inpatient (4 weeks): This experience is designed to strengthen the resident's understanding of antimicrobial therapy and stewardship. The resident supports the ID department through inpatient rounds in which they will evaluate the safety and efficacy of the ID drug regimen. The resident works with an interdisciplinary team, develops communication skills, and provides drug information as it relates to the needs of the patient and ID service.

Glycemic Control, Inpatient (4 weeks): The resident will assist the Kaiser Sunnyside Medical Center glycemic control pharmacists in the management of hyperglycemic patients in all areas of the hospital. Glycemic control team pharmacists use clinical practice guidelines and collaborative drug therapy management protocols to manage a variety of hyperglycemic patients. The resident participates in clinical rounds and collaborates with clinicians, nurses, dietitians and transition pharmacists to manage patients and ensure quality of care and safety.

Medication Therapy Management (MTM) (4 weeks): The resident will gain clinical experience managing patients with multiple chronic disease states and advanced illnesses using a multidisciplinary approach to provide patient-centered care. The resident will complete comprehensive medication reviews for patients eligible for MTM. Clinical practice guidelines, best practices, protocols and other pharmacy resources will be used to complete these reviews. The resident will also effectively communicate with patients and healthcare providers telephonically, to provide quality medication therapy management that is both safe and cost effective.

Outpatient Pharmacy (2 weeks): The resident will experience outpatient distributive pharmacy services in an integrated health care environment. The resident will also be exposed to the role of refill protocol pharmacist by refilling medications and ordering labs utilizing collaborative drug therapy management protocols.

Transitions of Care (3 weeks): Transition pharmacists provide medication reconciliation and therapeutic interventions to patients' medication regimens upon discharge from the hospital, in coordination with the patient, hospitalist, patient's primary care provider, and chronic condition case manager. High-risk patients are prioritized, and pharmacists work collaboratively to ensure patients leave the hospital with an accurate list of medications.

KPNW PGY-1 Longitudinal Experiences

Anticoagulation, Ambulatory Longitudinal (32 – 34 weeks): The Clinical Pharmacy Services longitudinal staffing experience requires the resident to staff two Saturdays (eight hour shifts) each month, starting in October, within Clinical Pharmacy Services, as a pharmacist working in ambulatory anticoagulation. Please see the KPNW Required Experiences for a description of the Ambulatory Anticoagulation learning experience.

Leadership Development Longitudinal (48 weeks): This longitudinal learning experience, precepted by the PGY-1 and PGY-2 Residency Program Director(s), is designed to introduce residents to pharmacy leadership. The residents will meet with the RPDs during orientation, then after the first quarter for topic discussions around time management, burnout and resiliency, emotional intelligence, personnel management, resource utilization, mentoring, and other administrative issues. The resident (along with pharmacy interns) will participate in topic discussions with several pharmacy leaders regarding their area of expertise.

Residency Project Longitudinal (50 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-1 Pharmacy Residency and improves patient care.

KPNW PGY-1 Elective Experiences

Academia (2-4 weeks): The resident will learn all aspects involved in educating pharmacy students including syllabus design, development of didactic lectures, discussion session and presentation facilitation, grading and feedback. The resident taking this elective will complete the Oregon Pharmacist Teaching Certificate. The resident will also attend teaching workshops to improve his/her teaching skills, provide a didactic lecture, and facilitate pharmacy practice experiences at either Oregon State University College of Pharmacy or Pacific University School of Pharmacy. Obtaining the teaching certificate without doing the academic elective is also an option.

Mental Health, Ambulatory (3-4 weeks): Clinical pharmacy specialists support primary care providers and the mental health department through patient care, formulary management and education. The resident will work with pharmacists responsible for monitoring patients with depression and ADHD by utilizing collaborative drug therapy agreement protocols. This experience may also include benzodiazepine deprescribing, lithium, clozapine, and other mental health safety net monitoring and addiction medicine.

Intensive Care Unit, Inpatient (4 weeks): Sunnyside Medical Center's ICU consists of an 18-bed medical ICU and an 18-bed Cardiovascular ICU. The resident is responsible for identifying, preventing and resolving medication therapy issues for patients and serving as a drug information resource for nurses and physicians. This includes, but is not limited to, performing admission and discharge medication reconciliation, developing pharmaceutical care plans for patients with complicated medical histories as well as for those on high-risk medications, performing pharmacokinetic and pharmacodynamic assessments, screening medications for appropriate indications and dosing, and proactively identifying drug interactions. The resident will also participate as a member of the inter-disciplinary team during daily patient care rounds, where the resident will respond to patient-specific drug information questions and recommend appropriate medication regimens and monitoring plans.

International Travel Clinic (3 weeks): The International Travel Clinic provides evidence-based, patient-specific recommendations for medications, immunizations and general health advice for approximately 10,000 travelers per year. The experience provides the resident with opportunities to learn about the health risks faced by international travelers and strategies such as medications, immunizations and food/insect precautions that reduce these risks. The resident learns to develop patient-specific travel recommendations based on travel itinerary, lab values, medical conditions, and current medications.

Clinical Informatics (2-4 weeks): The Clinical informatics department is responsible for coordinating the development, implementation, and maintenance of all medication-related clinical content within the electronic medical record, in both ambulatory and inpatient environments. The resident will learn the principles of decision support tool design and evaluation. Moreover, the resident will also become familiar with our armamentarium which may be used to accomplish clinical goals or address a clinical problem. This experience may include development of clinical content, including gathering input from all stakeholders, coordination and communication of implementation, periodic review/maintenance, and effectiveness evaluation.

Pharmacy Administration (2-4 weeks): The resident will spend 2 to 4 weeks experiencing the day-to-day life of a clinical manager and learning to problem-solve personnel and service-related issues. The resident work with the manager and administrative team to implement and improve practices with the goal of maximizing outcomes. Over the course of this experience the resident will complete a management project.

Oncology/Hematology, Ambulatory (4-6 weeks): KPNW has a 29-chair ambulatory infusion center, where the resident interacts directly with patients. The resident will monitor chemotherapeutic agents and cytokine dosing. They will also consult patients on antiemetic needs, new medications and dosage changes. The resident will provide drug information support to the oncology department, including a medication use evaluation. Although this experience is ambulatory based, the resident will have the opportunity to round with the inpatient team, if desired.

Chronic Non-malignant Pain Management, Ambulatory (3-4 weeks): Pain management pharmacists are part of a team that provides co-management support to primary care and specialty care providers to help them better manage complex patients with chronic non-malignant pain on opioid therapy. The resident will have the opportunity to shadow members of the healthcare team in Pain Clinic, to participate in pain classes with patients and to assist in medication therapy management of pain. There is also an option to learn about the pharmacist's role in Medical Aid in Dying.

Kaiser Permanente Northwest PGY-1 Pharmacy Residency Program SAMPLE Sequence of Learning Experiences					
Week of:	Longitudinal Rotations			Resident 1	Resident 2
Week 1	Leadership Development Longitudinal	Anticoagulation. Ambulatory Longitudinal	Residency Project Longitudinal	Orientation (3 weeks)	Orientation (3 weeks)
Week 2					
Week 3					
Week 4				Outpatient Pharmacy (2 weeks)	Transitions of Care (3 weeks)
Week 5					
Week 6				Ambulatory Care I (3 weeks)	Medication Therapy Management (MTM) (4 weeks)
Week 7					
Week 8				Transitions of Care (3 weeks)	
Week 9					
Week 10				Medication Therapy Management (MTM) (4 weeks)	Outpatient Pharmacy (2 weeks)
Week 11					
Week 12				Ambulatory Care I (3 weeks)	
Week 13					
Week 14				Anticoagulation, Ambulatory (4 weeks)	Anticoagulation, Ambulatory (4 weeks)
Week 15					
Week 16					
Week 17				Elective (3 weeks)	Elective (3 weeks)
Week 18					
Week 19				ASHP Midyear	ASHP Midyear
Week 20					
Week 21				Elective, cont	Elective, cont
Week 22					
Week 23				Drug Use Management (DrUM) (5 weeks)	Drug Use Management (DrUM) (5 weeks)
Week 24					
Week 25					
Week 26				Infectious Diseases, Inpatient (4 weeks)	Infectious Diseases, Inpatient (4 weeks)
Week 27					
Week 28				Ambulatory Care II (6 weeks)	Glycemic Control, Inpatient
Week 29					
Week 30					Elective
Week 31		Glycemic Control, Inpatient			
Week 32		Ambulatory Care II (6 weeks)			
Week 33				Elective	
Week 34					
Week 35		Glycemic Control, Inpatient		Ambulatory Care II (6 weeks)	
Week 36					
Week 37		Elective			
Week 38					
Week 39		Elective		Elective	
Week 40					
Week 41		Elective			
Week 42					
Week 43		Elective			Elective
Week 44					
Week 45		Elective			
Week 46					
Week 47		Elective		Elective	
Week 48					
Week 49		Elective			
Week 50					
Week 51		Elective			
Week 52					
Week 52				Project/Wrap-up	Project/Wrap-up

* working last day is KP requirement