MaineHealth Maine Medical Center Portland (MHMMCP) Pharmacy Residency
PGY2 Oncology Appendix 2025 – 2026

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ORAC Membership: All PGY2 preceptors + MHMMCP Director of Clinical Services

Program Structure

The program structure for required, elective and longitudinal learning experiences is outlined in the table below.

Learning Experiences	Preceptor(s)	Typical Duration
Required Learning Experiences		
Advanced Inpatient Adult Hematology/Oncology	Brady Quinn, PharmD, BCOP	4 weeks
Advanced Outpatient Adult Hematology/Oncology	Dorothy Wang, PharmD, BCOP	4 weeks
Bone Marrow Transplant	Alison Carulli, PharmD, BCOP	4 weeks
Gynecologic Oncology	Dorothy Wang, PharmD, BCOP	2 weeks
Infusion Center Pharmacy Management	Amanda Snow, PharmD, BCOP	3 weeks
Inpatient Adult Hematology/Oncology	Brady Quinn, PharmD, BCOP	6 weeks
Investigational Drugs (Concentrated)	Barbara Wiernek, PharmD, MBiotech, PhD	2 weeks
Oral Oncolytic Clinic	Julia Schwechheimer, PharmD, BCOP	5 weeks
Orientation	Brady Quinn, PharmD, BCOP	3 weeks
Outpatient Adult Hematology/Oncology	Dorothy Wang, PharmD, BCOP	6 weeks
Pediatric Hematology/Oncology	Matthew St Onge, PharmD, BCPS	6 weeks
Elective Learning Experiences		
Oncology Infectious Diseases	Kristina Connolly, PharmD, BCIDP	4 weeks
Anticoagulation	Kyle Herod, PharmD	4 weeks
Required Longitudinal Learning Experiences		
Guideline/Protocol Development and Implementation	Project dependent	
Investigational Drugs (Longitudinal)	Barbara Wiernek, PharmD, MBiotech, PhD	
Medication Use Evaluation	Project dependent	
Oncology Formulary Management and Value	Jonathan Angus, PharmD, BCOP	
Oncology Grand Rounds	Topic dependent	
Pharmacy Practice (Inpatient Staffing)	Brady Quinn, PharmD, BCOP	
Pharmacy Practice (Outpatient Staffing)	Dorothy Wang, PharmD, BCOP	
Research Project	Research dependent	
Resident Well-Being and Resilience	Resident dependent	

Duty Hours

The resident should document all duty hours using the PharmAcademic Duty Hour Attestation Form that is sent on the last day of each month. Weekends are included. Submit PharmAcademic Duty Hour task no later than 1 week after it is available.

Pharmacy Practice – Staffing Commitment

The resident's weekend service commitment is two 8-hour inpatient shifts approximately every 3 weeks (16 total weekends are required). Residents will generally be assigned to the inpatient oncology service-based staffing. The oncology resident will also staff two 8-hour outpatient shifts every month at the South Portland IV Therapy location.

Research Project

RPD and ORAC preceptors will supply the resident with a list of possible research projects to consider within the first month of the residency. The resident will be able to add to the list of ideas, if it is feasible within the year-long residency. Project selection and CITI training should be completed prior to the end of the orientation experience. Research project timeline will be determined by the RPD, project preceptor and resident. Residents will be expected to complete at least one (1) research project each year. A completed manuscript will be submitted to RPD and primary project preceptor for the research project **at least 2-weeks before graduation** with the understanding that articles suitable for publication will require additional work that may occur after residency completion.

Lectures/Presentations

The resident will have multiple presentation opportunities throughout the residency year. The minimum required presentations/in-services for graduation are as follows:

- Journal Clubs: 2
- Formulary Review: 1
- Patient-case Presentation: 2
- Medication-use Evaluation: 1 (see below for details)
- In-services: 3
- Oncology Grand Rounds: 1

Longitudinal Experiences

Longitudinal experiences for the oncology resident include the following: Developing an oncology-related guideline/protocol development and implementation, performing a medication-use evaluation, oncology formulary management and value, oncology grand rounds, pharmacy practice (staffing) and a research project.

Medication Use Evaluation (MUE)

Each resident will complete a minimum of one (1) Medication Use Evaluation. The resident will be provided with a list of potential MUE topics generated by the RPD and ORAC preceptors. The resident will be able to add to the list of ideas, if it is feasible within the year-long residency. The resident will conduct the MUE under the guidance of a preceptor. Results from the MUE(s) will be presented to the appropriate stakeholders within the hospital/enterprise.

Meeting Attendance
The resident will have the opportunity to attend various professional meetings throughout the year. The resident typically attends HOPA. Other meeting attendance may be discussed and reviewed on a case-by-case basis.

Oncology Appendix Tracking
The resident will track the required (direct patient care and case-based) and elective Adult Oncology Pharmacy-focused Program topic areas in PharmAcademic utilizing the Appendix tab. This appendix should be updated, at a minimum, on the last day of each month and completed **1-week prior to** the end of the residency year.

Portfolio
The resident will upload and maintain their resident portfolio on Smartsheet. This should be updated, at a minimum, on the last day of each month and completed **1-week prior to** the end of the residency year.

Evaluation Strategy
The PGY2 Oncology Pharmacy Residency Program utilizes the ASHP on-line evaluation tool called PharmAcademic. Resident will complete the ASHP pre-residency Self-Assessment form that helps the RPD design a residency year that is tailored to the specific needs and interests of the resident.

The RPD uses the ASHP Self-Assessment form to create the resident's Customized Development Plan. The Customized Development Plan will be discussed and modified (as necessary) through a collaborative effort between the RPD and the resident. In addition, the resident may request schedule modifications throughout the residency year and the RPD will make all efforts to accommodate these requests. Assessment tools will be adjusted as changes are made. The RPD will share changes to the Customized Development Plan via Smartsheet automated emails to scheduled preceptors and during regularly scheduled PGY2 Oncology Residency Advisory Committee (RAC) meetings.

The residents' schedule is entered into PharmAcademic. For each learning experience, the following assessments are completed:

Block or Learning Experiences of < 12 weeks				
Resident Evaluation of Learning Experience	Resident Evaluation of Preceptor	Preceptor Verbal Midpoint Evaluation of Resident	Preceptor Summative Evaluation of Resident	Resident Self-Summative Evaluation
End	End	Midpoint	End	End

Longitudinal Learning Experiences of > 12 weeks			
Resident Evaluation of Learning Experience	Resident Evaluation of Preceptor	Preceptor Summative Evaluation of Resident	Resident Self-Summative Evaluation
Midpoint and End	End	Quarterly (or Midpoint and End, max 12 weeks between evaluations)	Quarterly (or Midpoint and End, max 12 weeks between evaluations)

Summative Evaluations

- Summative evaluations assess the residents' mastery of the 40 required ASHP residency objectives. Summative evaluations of these objectives will be completed by both preceptors and residents based on the following standardized scale:

Rating Scale	Definition
Needs Improvement (NI)	• Deficient in knowledge/skills in this area • Often requires assistance to complete the objective • Unable to ask appropriate questions to supplement learning
Satisfactory Progress (SP)	Resident is performing and progressing at a level that should eventually lead to mastery of the goal/objective • Adequate knowledge/skills in this area • Sometimes requires assistance to complete the objective • Able to ask appropriate questions to supplement learning • Requires skill development over more than one rotation
Achieved (ACH)	• Fully accomplished the ability to perform the objective independently in the learning experience • Rarely requires assistance to complete the objective; minimum supervision required • No further developmental work needed
Achieved for Residency (ACHR)*	Resident consistently performs objective independently at the Achieved level, as defined above, across multiple settings/patient populations/acuity levels for the residency program

- Summative Evaluations should be completed using Criteria Based Feedback statements.
- Preceptors and residents should complete their own summative assessments, save and then meet to discuss/review together. Any changes to the evaluation should be made in PharmAcademic, then finalized and sent for 'Cosign'.
- **Summative evaluations MUST be completed within 7 days (1 week) of rotation completion.**
- Evaluations are cosigned by the rotation preceptor as well as the RPD. The RPD may send an evaluation back for revision for the following reasons:
    - Significant misspellings
    - Patient names mentioned within document
    - Criteria-based qualitative feedback statements not utilized
- Signing an evaluation (both preceptors AND residents) indicates that the evaluation has been read and discussed.

The resident will complete a PGY2 Oncology Pharmacy Residency Program exit survey in the last month of residency year. Feedback will be discussed at the PGY2 ORAC meeting and agreed upon changes will be incorporated into the next academic year structure.

PGY2 Oncology Residency Requirements for Completion/Graduation:

- Objective achievement: ≥ 90% of program-required objectives are marked as "Achieved for Residency" by the end of the residency year (see criteria for achievement of objectives in shared residency manual under "Development Plan")
- Completion of all required learning experiences
- Completion of all assigned evaluations in PharmAcademic
- Completion of Medication Use Evaluation and presentation at an appropriate committee meeting
- Completion of all assigned presentations:
    - Journal Clubs: 2
    - Formulary Review: 1
    - Patient-case Presentation: 2
    - Medication-use Evaluation: 1
    - In-services: 3
    - Oncology Grand Rounds: 1
- Completion of formulary drug review and/or develop/revise treatment guideline/protocol and presentation at an appropriate committee meeting
- Presentation of major research project at residency conference and/or other professional platform (e.g. national meeting, MSHP, Pharmacy Grand Rounds)
- Completion of manuscript of major project in publishable form, signed off by primary project preceptor
- Submission of 15 reports in safety reporting system (e.g. safety, adverse drug reports)
- Completion of documentation of all required direct patient care and case-based oncology topic areas in PharmAcademic Appendix tab along with any elective topics
- Completion of all assigned staffing shifts
- Completion of all attendance related and duty hour fulfillment and reporting requirements
- Submission of residency portfolio: Upload all projects, presentations, work products to Smartsheet