

# Resident Recap

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## *The UF Health Shands Hospital Residency Newsletter* **Julie Cash's New Role**



The start of the 2016-2017 residency year has coincided with many exciting changes and growth for some of our staff here at UF Health Shands. One of these exciting changes has been the introduction of a new position, the Pharmacy Education Coordinator. One of our own clinical pharmacy specialists, Julie Cash, PharmD, BCCCP, transitioned to this role on June 6<sup>th</sup> from her former role as Clinical Pharmacy Specialist in the Burn ICU.

The responsibilities of the Pharmacy Education Coordinator will include a variety of already existing roles as well as some new ones. First, Julie will be transitioning into the PGY-1 Residency Program Director over the next year and will fully take on this responsibility beginning with the 2017-2018 residency class. Julie states that she is "very much looking forward to working more closely with some our residents." Another role Julie will be taking on is responsibility for both the IPPE and APPE student block programs. Some of her responsibilities surrounding this will include gathering preceptor availability, interviewing future block

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## **The Birth of a New NICU**

On November 1<sup>st</sup>, UF Health Shands Children's Hospital completed the first phase of the Neonatal Intensive Care Unit (NICU) renovations. The first phase consisted of opening a new NICU. This new NICU now houses the babies in three neighborhoods: Dragonfly, Ladybug and Bumblebee. Bumblebee and Ladybug are open space neighborhoods broken down into pods that now allow for more space and privacy for each baby and family members. The Dragonfly neighborhood now offers private and semi-private rooms for babies and their family members. Having this privacy will help transition families for the discharge process, allowing space and time for educating family members on their babies' needs.

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## The Birth of a New NICU – Cont.

On November 1<sup>st</sup>, all of the babies from NICU III were moved to their new neighborhoods. This allows for Phase 2 of our NICU expansion in the Shands Children's Hospital to now begin which will increase our NICU bed count to 68 beds. NICU III will now undergo renovation to form our fourth NICU neighborhood, Hummingbird. Once Phase 2 is completed in the Spring of 2017, our intermediate care babies from NICU II will move into the newly renovated Hummingbird neighborhood. Hummingbird will feature a larger waiting area for family members as well as a play area for the siblings.

This new transition has also expanded the pharmacy aspect of the NICU. Upon completion of Phase 2, a unit based pharmacist will join the NICU team and our current NICU clinical pharmacy specialist, Keliana O'Mara. The new space has also increased our Omnicell count from 2 to 5 Omnicells. Not only are we expanding our Omnicell count, but patient medications are now being stocked in patient specific bins within our Omnicells. Our pharmacy technicians and pharmacists have been working very hard with this transition to ensure each baby's medications is readily available for them. Now on to Phase 2! ■

*Sarah Gattoline, PGY1*



## Julie Cash's New Role – Cont.

students, and scheduling their rotations while working closely with the UF College of Pharmacy.

As for the employees here at UF Health, Julie will be responsible for overseeing the training of any new hires as well as training our existing staff on any new initiatives; this will include development of any necessary training materials. Additionally, she will be responsible for coordinating all annual competency requirements for both pharmacists and technicians and aid in the development of the competency materials as required.

One additional role Julie has taken on within her new position is coordinating the new pharmacy technician training program. The pilot of the program led to three trainees successfully passing their board exam and transitioning into pharmacy technician roles within our department. Julie is particularly excited about taking part in this new training program and hopes to work more closely with all of our technicians in the future to aid in their training. Another goal Julie has for her new position is to improve overall employee retention within the pharmacy department and further develop the training materials that are currently available to our staff. ■

*Melissa John, PGY1*

## New Practitioner Welcome



Over the past several months, UF Health Shands has welcomed many new faces to clinical specialist roles within the growing pharmacy department. Among those joining us since July are **Bethany Shoulders, PharmD**, and **Tara Veasey, PharmD, BCPS**, both of whom have stepped into newly-created positions as recent residency graduates.

Bethany started in her new role in July 2016 and will be serving as both a clinical specialist in the trauma intensive care unit and a Clinical Assistant Professor at the University of Florida College of Pharmacy. Her partner in this shared faculty role is Dr. Stacy Voils. Bethany grew up in Maryville, TN before attending Freed-Hardeman University in Henderson, TN, where she majored in biochemistry. As a sophomore, Bethany attended an informational panel led by pharmacists at her school and decided that pharmacy was the career for her. She then attended the University of Tennessee Health Science Center, where she obtained her Doctor of Pharmacy in 2014.

Tara also joined the UF Health pharmacy team in July of this year, where she will be serving as the clinical specialist in heart and lung transplantation. Tara grew up in the small town of Calera, AL before obtaining her Bachelor of Science degree from the University of Alabama. She entered her undergraduate studies with the intention of becoming a pharmacist, but it wasn't until she shadowed a clinical faculty member as a first-year pharmacy student that she discovered her interest in clinical practice. Tara then went on to receive her Doctor of Pharmacy from Auburn University in 2014.

Following graduation from their respective colleges of pharmacy, both Bethany and Tara went on to complete PGY-1 and PGY-2 residencies. Bethany finished her PGY-1 at The Johns Hopkins Hospital in Baltimore, MD before completing a specialty residency in critical care at the University of Pittsburgh Medical Center. When reflecting upon her training, Bethany says the most difficult part of her residencies was maintaining productivity in the residents' office. Meanwhile, while completing both her PGY-1 and critical care PGY-2 at the Medical University of South Carolina, Tara says her greatest challenge was learning to prioritize what is most important and accept that not everything will be perfect, especially while juggling the many tasks of a resident.

Now that they've had a few months to grow accustomed to Gainesville and UF Health, Tara and Bethany are enjoying both their new positions and the geographical perks of the fall in Florida. Tara says she loves Gainesville's proximity to the many beaches in Florida, and Bethany's favorite part of the city so far is its extended summer (and the additional pool-time that it has brought). With regard to their new areas of practice, Tara says she has enjoyed making "social calls" on her patients to counsel and discuss their transplant medications, which isn't something she expected to enjoy as a critical care-trained pharmacist. In the trauma ICU, Bethany has enjoyed the challenges that come with providing care to patients in both pre- and post-operative roles, and she also noted that she is looking forward to building a relationship within a

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## Ralphie's Take

With each new year, I am greeted by shining faces brimming with excitement as they enter the next phase of their lives. Some are familiar to me. Welcome home Sasha, Jarred, and Luke! It almost feels as if you all never left!

Though, I am saddened that Sasha and Jarred are no longer in the office; I get to feel your presence every time Jarred comes to leave a Diet Dr. Pepper in our fridge. And Sasha, though your visits are fewer and further between, I know that you mean well and I feel extra special when you stop by specifically for me. Luke, I believe you are a worthy successor to my past tenure as a chief resident. Work hard in your position.

Of course, it wouldn't be the beginning of the year without acknowledging our new friends. I feel it is my duty to lay down the ground rules. It is only right as the PGY9 of the class that I let my cute little underlings in on the secrets to my success.

A big key is to make Shands your home for the foreseeable future. Creature comforts like pillows and blankets really make the late nights the best. I would not say no if someone brought the giraffe that I have heard so much about from upstairs.

Snacks are also necessary to keep your energy levels high. Sometimes an evening delivery isn't enough to satisfy the munchies, but please stop leaving pickles in the fridge. No one eats them and I think they're starting to grow fur.

But enough of the ramblings of this gorilla. I must greet everyone properly!

Sarah, your niece is absolutely adorable! You simply must bring her by sometime. I would be happy to babysit. Why I had a great uncle who was simply marvelous at protecting a woman named



## New Practitioner Welcome – Cont.

single team and unit, as opposed to creating brand new relationships month after month while completing residency rotations.

Perhaps the best part of working in their new positions, however, is that both Tara and Bethany are no longer residents! When asked what she looked forward to most about life post-residency, Tara responded jokingly (maybe?) that it was her new five-day work weeks. It seems that each of them is very excited to focus on crossing a few non-pharmacy items off of their bucket lists in the coming months and years. Bethany hopes to someday appear on the Tonight Show with Jimmy Fallon and also hopes to take a biking and camping trip along the Danube River, from the Black Forest of Germany to the Mediterranean Sea. In addition to traveling, Tara added that she would love to go skydiving in the near future.

Welcome to your new positions, Tara and Bethany! We are happy to have you at UF Health, and we wish you good ■

*Luke Orth, PGY2 Pediatrics*

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## New PGY-2 Pediatrics Residency Directors



This year marks a “changing of the guard” as two of our current pediatric preceptors, Drs. Keliana O’Mara and Tara Higgins, will be stepping into their new roles as the Program Directors of the PGY-2 Pediatric Pharmacy Practice Residency here at UF Health Shands.

Keliana O’Mara, PharmD, BCPS, completed her pharmacy education at University of North Carolina Eshelman School of Pharmacy at Chapel Hill (Go heels!) and subsequently went on to Women’s Hospital in Greensboro, NC to complete a NICU Fellowship. She has been a NICU Specialist since 2010. She has been actively involved with the residents here at UF Health Shands, heading the research committee for all residents, both PGY-1 and PGY-2, and has many research interests of her own. Currently, she is working on three neonatal nutrition studies, with one involving empiric lipid restriction for abdominal surgery and another an industry-sponsored study concerning insulin-like peptide oral supplementation for babies with short gut. She is also working on two neurology-focused studies, involving melatonin for neuroprotection and precedex use for sedation in HIE

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## Therapeutic Drug Monitoring of Beta-lactam Antibiotics

Antibiotic dosing in critically ill patients is known to be challenging and complicated. Rapid physiologic changes may cause unpredictable pharmacokinetic alterations affecting antibiotic exposure. Wide pharmacokinetic variability of beta-lactams in critically ill patients poses a significant challenge to clinicians in prescribing appropriate antibiotic doses. There is an increase in the potential for suboptimal antibiotic concentrations due to unpredictable pharmacokinetics in critically ill patients. Beta-lactams are the most commonly prescribed antibiotic class and expansion of therapeutic drug monitoring (TDM) has not been widely tested as a routine intervention. These patients being described encompass a large portion of patients being treated at UF Health Shands Hospital.

To account for inadequate dosing, the UF Health Shands Pharmacy department has developed a policy that will allow pharmacists and practitioners to order and evaluate beta-lactam concentrations. Patients at risk for sub therapeutic drug concentrations, as defined by the policy, will have levels placed by infectious disease fellows and attendings or any pharmacist. The ordering pharmacist will open an initial i-vent to document timing of the levels for pharmacist evaluation. Of note, beta-lactam serum concentrations are performed by the Infectious Diseases Pharmacokinetics Lab (IDPL) and are run only on Monday, Wednesday, and Friday. The samples collected should be available to the core lab by no later than 8 am on the day the levels are run by IDPL. Once levels have been evaluated, the primary team should be contacted by the pharmacist responsible for the service and provide recommendations for optimizing therapy.

Beta-lactam TDM is a potentially valuable intervention that can help optimize antibiotic exposure at UF Health Shands Hospital. Several studies have demonstrated that this intervention can be useful in critically ill patients. This is an exciting new addition to the policies at UF Health Shands Hospital that can further enhance the great care provided to our patients each and every day. ■

*Jarred Bowden, PGY2 Infectious Disease*

## The Joint Commission

The Joint Commission (TJC) recently approved new antimicrobial stewardship standards which will be effective on January 1, 2017 for hospitals, critical access hospitals, and nursing care centers. TJC is part of a large group of health organizations, food companies, retailers, and animal health organizations who are committed to implementing changes over the next five years to decrease the emergence of resistant bacteria, analyze resistant strains, maintain efficacy of our current antimicrobials, and prevent the spread of resistant infections.

TJC recommends several elements of performance to implement in antimicrobials stewardship programs. The first being to establish antimicrobial stewardship as an organizational priority. This can include performance improvement plans, infection prevention plans, accountability documents, or other measures the hospital chooses. The hospital needs to educate their practitioners and staff members on these efforts. Specially, those who are involved in the ordering, dispensing, administration, and monitoring of antimicrobials. Those that are part of the organization should be familiar with the stewardship efforts. Additionally, it is recommended to also educate the patients and their families regarding appropriate use of antibiotics. The antimicrobial stewardship team should be multidisciplinary, and include an infectious disease physician, infection preventionists, pharmacists and other practitioners, when available in the health care setting.

There are several elements that the stewardship program should include as core elements. Leadership is needed to identify and dedicate the necessary human, financial, and information technology resources. A leader is also important so there is someone that held accountable. There may be several leaders, including the physician leader, as well as a single pharmacist leader who is responsible for working on antibiotic use. TJC recommends certain actions be implemented, such as the “antibiotic time out” after 48 hours, to evaluate culture information and necessity to antibiotics and opportunities for narrowing of therapies. Tracking is helpful in order to monitor the stewardship program’s efforts, as well as prescribing and

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## New PGY-2 Directors – Cont.

patients. Outside of work, her other interests include CrossFit, the infamous leggings-over-pants mentality, and her dog Pearl, who is the prettiest pitbull puppy in the world. She hopes that the PGY-2 Pediatrics Residency Program will continue to grow, offering more rotations with more preceptors and also involving decentralized pharmacists with more active precepting roles. She also hopes that PGY-2 pharmacy practice residents may have more direct preceptor experiences in their areas of interest.

Tara Higgins, PharmD, completed her pharmacy education at the University of Rhode Island College of Pharmacy and her PGY-1 at Mass General Hospital in Boston. She then went on to the University of Kentucky to complete a PGY-2 in pediatrics and worked there for one year as a pharmacist in the Pediatric ICU. She has been here at UF Health Shands as a specialist in pediatric hematology-oncology for six years. Her current research focuses on pharmacist interventions in pediatric oncology clinic particularly involving adherence issues. She has served as FSHP Educational Affairs Council Chair and was the Fall Meeting Planner for Pediatric Pharmacy Advocacy Group this past year. Her interests outside of work include reading (as her two cats Alice and Bella can attest) and going to theme parks. Her hopes for this program include emphasizing the specialty areas within pediatrics somewhat akin to the “PGY-3” mentality, increasing the number of preceptors, and perpetuating the layered learning model going forward. ■

*Anna Cosnahan, PGY1*

## The Joint Commission – Cont.

resistance patterns. This allows for the ability to report this information, such as an antibiogram, for use by physicians and practitioners in the hospital.

TJC recommends that organizations use multidisciplinary protocols, such as antibiotic formulary restrictions, preauthorization requirements for specific antimicrobials, guidelines for antimicrobial use in adults, and care of the patients with *Clostridium difficile*. TJC recommends that all of this data is collected, analyzed, reported, and the hospital takes actions to continually improve its antimicrobial stewardship program.

UF Health Shands Hospital has an antimicrobial stewardship program that meets these recommendations. The stewardship program's multidisciplinary team is continually working on ways to improve antimicrobial use at Shands. ■

*Gabrielle Furgiuele, PGY1*

## Ralphie's Take – Cont.

Ann despite certain undesirables attempting to do her harm.

Kay, I believe a real kinship will form between us one day because of our mutual love of spicy foods. The akabanga of yours is truly a delightful treat, and I am sure you and I will be able to kick it up another level with a Carolina Reaper.

Anna, I will say that I am hurt that you never invite me to barre classes. I'll have you know that gorilla barre is one of the toughest workouts in the world. I think one day you should join me and we can really work up a sweat.

Melissa, I've heard great things about how you follow some of the wonderful cuddly creatures of the world on instagram. You absolutely must watch the infant gorilla livestream. They are so cute, your heart will burst.

Gabby, I swear I must have met one of your relatives in the past. With so many pharmacists in your clan, pharmacy must be in your blood. I think that perhaps one day you and I will have a full chat about our family trees.

But no matter who you are, I am glad to have so many friends, new and old. I think altogether we'll be great. ■

*Ralphie G. Rilla*

## Personal and Professional Updates

### Recent Publications

Ataya A, Somoracki A, **Cope J**, Alnuaimat H. Transitioning from parenteral to inhaled prostacyclin therapy in pulmonary arterial hypertension. *Pulm Pharmacol Ther*. 2016 Oct;40:39-43.

**Gamble G, Cope J, Ashton J, Voils S**, Ataya A, **Klinker K**, Alnuaimat H. 667: IDENTIFYING RISK FACTORS FOR INVASIVE CANDIDIASIS IN THE CRITICALLY ILL. *Crit Care Med*. 2016 Dec;44(12 Suppl 1):243.

**Lee JY**, Moffett BS. Treatment of pediatric hyperkalemia with sodium polystyrene sulfonate. *Pediatr Nephrol*. 2016;31(11):2113-7.

Ataya A, **Cope J**, Shahmohammadi A, Alnuaimat H, Do patients with submassive pulmonary embolism benefit from thrombolytic therapy? *Cleveland and clinic Journal of Medicine*. 2016 Nov; 83:11

**Franco K, O'Mara K**. Impact of computerized provider order entry on total parenteral nutrition in the neonatal intensive care unit. *J Pediatr Pharmacol Ther* 2016;21(4):348-354

**Lahey MD, Kamel AY**. Thiamin, Pyridoxine, Vitamin D, and Carotene Deficiency in a Malnourished Patient Following Billroth II Gastrectomy. *Nutr Clin Pract*. 2016 Nov 3.

**Griffin SP, Nelson JE**. Impact of a Clinical Solid Organ Transplant Pharmacist on Tacrolimus Nephrotoxicity, Therapeutic Drug Monitoring, and Institutional Revenue Generation in Adult Kidney Transplant Recipients. *Prog Transplant*. 2016 Sep 14.

**Antigua, A, Voils, S**. Unanswered Questions about VTE Prophylaxis in Critically Ill Obese Patients. *Intensive Care Medicine*. *Intensive Care Med*. 2016 September; 42(9): 1506-1507

**Antigua, A, Tran, J, Lemon, S, Zhang, Y**. Challenges of Administering Pancrelipase in Pancreatitis Patients. *J Am Coll Nutr*. 2016 May-Jun;35(4):334-8

### Posters & Presentations

Richter C, Taylor J, **Wright J**, Fletcher B, Clinical Validation of R-T Estimation for CoaguChek XS INR Results. 2016 Oct. # 16E. Poster Presentation at the ACCP Annual Meeting. Hollywood, FL. October 2016.

**Smith III D**, Elsey A, Johnson J, Cavallari L, Weitzel K. Feasibility of "implementing a personalized approach to chronic pain management using cytochrome P450 2D6 genotype in a primary care clinic" Poster Presentation at the ACCP Annual Meeting. Hollywood, FL. October 2016.

**Antigua A, Voils, S**. "International Survey of Pharmacologic VTE Prophylaxis Practice in Critically Ill Obese Patients" Poster Presentation at the ACCP Annual Meeting. Hollywood, FL. October 2016.

**Venugopalan V**, Davanos E, Digregorio R. Development and Pilot of a Standardized Pharmacy Residency In-Service Examination. Poster Presentation at the ACCP Annual Meeting. Hollywood, FL. October 2016.

**Antigua A, Voils S**. "International Survey of Pharmacologic VTE Prophylaxis Practice in Critically Ill Obese Patients." Poster Presentation at the ACCP Annual Meeting. Hollywood, FL. October 2016.

**Levy H**. "Applying explicit criteria in patient care: a look at AGS Beers and STOPP/START" ASCP annual meeting. Dallas, TX. November 2016.

Mo Y, Thomas M, **Antigua A, Ebied A**, Karras G. "Continuous Lidocaine Infusion as Adjunctive Analgesia in Intensive Care Unit Patients" Poster presentation at the SCCM Annual Congress. Honolulu, HI. January 2017.

**Personal Updates**

**Ashley Richards** named PGY2 Oncology Residency Program Director

**Jessica Cope** and **Jennifer Ashton** named PGY2 Critical Care Co-directors

**Keliana O'Mara** and **Tara Higgins** named PGY2 Pediatrics Program Co-directors

**Kara Krzan** got married and was promoted to Assistant Director of Ambulatory Pharmacy at UF Health Shands Hospital.

**Lisa Thames** appointed as Director of Education Programs at UF Health Shands Hospital.

**Abigail Antigua** took a new position as a Clinical Pharmacist at North Florida Regional Medical Center

**Growing Pharmily**

**Julie Cash** had a baby in September 2016

**Erin Wright** had a baby in September 2016

**Joelle Nelson** had a baby in October 2016

**Shimaa Ghonim** had a baby in November 2016

**Newly Board certified**

**Aimee Gowler, Abby Antigua, Jess Cope, Sola Apena and Bethany Shoulders** got their BCCCP

**Sasha Premraj and D. Max Smith** received their BCPS

**Residents and Preceptors Having Fun!**



2016 Christmas Party

Daily Life



2016 International Night



Midyear 2016 in Las Vegas



Team Building at Lake Wauburg

