

# **Professional Development:**

- ✓ **Residencies**
- ✓ **the ASHP Midyear  
Clinical Meeting**
- ✓ **and more . .**

By  
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# Preface

This is a guide for those who are interested in applying for a residency training program following their pharmacy education. This information will help you prepare for the American Society of Health-System Pharmacists' Midyear Clinical Meeting, Residency Showcase, Personnel Placement Service, and Residency Matching Program. It contains information about writing a curriculum vitae, applying for residencies, and preparing for interviews. It was written by a recent graduate and edited by a program director and residency preceptor who have had recent experiences with the residency application process. This guide is intended to help you make informed decisions when applying for a residency.

Keep in mind that this guide is a starting point and not the final word on how to apply for a residency. We encourage you to complement this information by speaking to professors, current residents, and those who have completed residencies. We hope you enjoy hearing about and learning from our experiences. Just remember that the entire process is an interesting experience in itself—so enjoy!

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# Residency Training

## Definition

According to *Opportunities: The Source for Pharmacy Residency Information*, the American Society of Health-System Pharmacists' (ASHP) online publication, "a pharmacy residency is a structured, directed, salaried, postgraduate training program in a defined area of pharmacy practice, typically lasting one year." Generally, residencies provide advanced training to pharmacists in a variety of pharmacy practice areas. There are different types of residencies and practice sites. The two main types of residencies are pharmacy practice and specialty. This guide will mostly focus on pharmacy practice residencies.

### Pharmacy Practice and Specialty Residency Programs

ASHP states that "a pharmacy practice residency focuses on the development of competence, skills, and application of drug therapy knowledge in providing the broad scope of pharmaceutical services to patients. Pharmacy practice residencies with emphasis in acute care, community care, home care, long-term care, and managed care are available. Pharmacy practice residencies concentrate on direct patient care, drug information and drug policy development, practice management, and other pertinent areas specific to the practice setting." Most students enter a pharmacy practice residency following graduation.

A specialty residency is a program that provides training in a focused area of pharmacy practice (e.g., geriatrics). Specialty residencies utilize and build upon the fundamental practice skills acquired during a pharmacy practice residency, and are typically undertaken following completion of a pharmacy practice residency. Some specialty residency programs do not require a pharmacy practice or accredited residency; be sure to ask specific programs about their requirements. There are fifteen different types of specialty residencies accredited by ASHP (see Accredited and Non-accredited Residency Programs below). Other sources for specialty residency information include the American College of Clinical Pharmacy (ACCP) directory and the faculty at your school.

Specialty residency programs do not participate in the Residency Matching Program (see Residency Matching Program). Apply directly to the programs. Write letters or call the directors or coordinators of these programs in the fall. October and November are usually the best times to contact program directors because they may not have application materials ready before that time. Attendance at the ASHP Midyear Clinical Meeting (MCM) is a good way to meet numerous people from different programs. If you are truly committed to doing a specialty or pharmacy practice residency, attendance at the MCM is very important. It is also highly recommended that you participate in the Personnel Placement Service (PPS), which is conducted with the MCM (see Personnel Placement Service), if you are interested in pursuing a specialty residency.

## Accredited and Non-accredited Residency Programs

When a program is accredited, it has gone through an extensive evaluation process and a site visit by ASHP. The purpose of accreditation is to provide consistency in the training received by residents in different programs. Accredited residencies are structured in the experiences they provide for the resident. They also have criteria for the qualifications of the residency preceptors and directors. As an applicant you may want to consider that by applying for an accredited residency, ASHP has ensured that you receive the training you expect from the program. Some employers may specifically look for someone who has completed an accredited residency.

The decision regarding whether to do an accredited or non-accredited residency becomes especially confusing with specialty residencies. A non-accredited specialty residency may be preferred if you are seeking a specific type of pharmacy training. You may want to pursue a specialty residency to prepare you for a more unusual type of pharmacy practice.

There are also programs with an “accreditation-pending” status. This means that the programs have been initially approved by ASHP. In order to be fully approved, a resident must complete the program during its pending status. There are advantages and disadvantages to these programs as well as with newly accredited programs. One advantage is that the program is more likely to be flexible with your needs and you may be able to set groundwork for future residents. A disadvantage would be that you may be considered a “guinea pig.”

## Purpose

The purpose of a pharmacy residency is to prepare pharmacists for practice. Residency training is designed to provide residents the experience of working in a variety of different patient care settings. A residency is considered to be equivalent to three years of work experience. When you apply for a job after your residency, you will be able to compete with pharmacists who have worked in the field for a few years. Some places even require advanced pharmacy training to apply for their position.

A residency may not be for everyone. It is hard work. You will have long work hours, assignments to complete, and in-services or lectures to give. A residency program is for pharmacists who want to broaden and strengthen their clinical knowledge, skills, and competencies. Residency programs generally pay between \$24,000 and \$35,000 per year. Some programs include benefits such as health insurance, disability insurance, retirement, and faculty benefits such as discounts at the athletic center or the bookstore. Some programs pay in monthly increments and some pay every two weeks.

You may have student loans that are collecting interest as you read this guide. Try not to let this put a damper on your decision to do a residency. Most lending institutions will let you defer your loan payments (interest collects) or apply for forbearance (interest does not collect) for one to two years.

It is possible to wait to do a residency until after you have worked for a year or two. Keep in mind that you may not have as much access to professors and fellow students to commiserate with you. You will also have to find things on your own. If you attend the MCM, you will have to pay a pharmacist's registration fee instead of a student's fee. Will your employer be understanding when you need to take off one to two weeks for interviews? The faculty at your alma mater may have difficulty placing your name when you ask for letters of recommendation. Although you think you may only be interviewing locally, you may change your mind about where you would like to go after a year.

Overall, doing a residency is a great opportunity. In a residency you are paid to learn instead of paying to learn as you did in pharmacy school.

## Candidate Qualifications

What qualifications do residency programs want in a potential resident? This is by far the most frequently asked question by students who are thinking about doing a residency. Unfortunately, there is no definite answer. Are grades important? Yes, grades are important but they are only one factor in the selection process. Among the people that will be applying for residencies will be many students with excellent grade point averages. Although this is something that may initially put you in competition with other applicants, it will definitely not make you stand out. A student should not decide against doing a residency based on his or her grades.

There are many different experiences that may complement your academic achievements and improve your chances of being accepted for a residency. Your experiences should show that you are well-rounded (participate in both professional and social organizations) and that you have written and oral communication skills, organizational and time management skills, leadership ability, and good decision-making skills. The following are a few suggestions that may help you develop and demonstrate these skills:

- **Student Organizations.** Involvement in student organizations will provide you with leadership opportunities and demonstrate your interest in pharmacy. Getting involved with these organizations on the national level may help even more.
- **Research.** Research is a great way to stand out. Residency programs realize this takes extra time and effort outside of your normal school course load. It shows maturity, dedication, and good time management. Professors are a great resource for finding opportunities for research and receiving guidance.
- **Work-Study.** Students can also find research opportunities for projects through work-study programs.
- **Community Service.** Community service is a great way to participate in extracurricular activities. Most schools have many programs that need students to help with fundraisers or community service projects. The pharmacy student government or campus student government association might be one place to go for assistance. Activities in your own community or with your church or synagogue are also helpful, especially if you help plan or initiate the program.
- **Summer Internship.** ASHP and most of the other pharmacy organizations have summer internship programs for pharmacy students. The National Institutes of Health and pharmaceutical companies also offer competitive internships for students. Most companies will compensate you for your time with a modest stipend. You can contact these places directly for their summer internship applications.
- **Unique Rotations and Clerkships.** Other students have had opportunities to do rotations at different sites and in other countries. Through your experiential learning office, you can find out about opportunities your school may offer for doing these types of rotations. For example, the Indian Health Service has programs set up for pharmacy students to spend a month working at a hospital on an Indian Reservation.
- **Work.** Work experience is a controversial issue. Some residency programs feel that it is important for a pharmacy resident to have had prior pharmacy work experience. Depending on the program, you may spend a substantial amount of time staffing (checking carts, making IVs, or entering orders into the computer) and prior experience may be beneficial. It is unlikely that work experience would hurt you unless your grades suffer. If you are able to find a job that is somewhat unusual, such as working for a pharmaceutical company, the Food and Drug Administration, or a hospice pharmacy, it may help your chances.

We do not advise that you do something only because it will help you get a residency. If it is something you would rather not be doing, do not do it. Think of these experiences as something that will help you decide on what you would like to do in the future. They may also help you with organization and time management skills. They should not just be something to make you a more appealing applicant.

## Resident Activities

During your first month, you should receive an orientation to the institution and your schedule for the year will be decided. Be prepared to be totally confused and lost during your first few weeks. This is completely normal, but be sure to ask questions. Second-year residents are usually a very valuable source of information about your program.

You will complete several core and elective rotations that last anywhere from four to six weeks. Your residency core rotations depend on the program; however, almost all accredited programs will offer some type of experience with acute patient care, ambulatory patient care, drug information and drug use policy development, and practice management. Possible core rotations include administration, ambulatory clinic, burn center, cardiology, critical care, drug information, endocrinology, infectious disease, internal medicine, neonatology, nephrology, neurology, nutrition support, obstetrics, oncology, operating room pharmacy, pain service, pediatrics, poison center, psychiatry, surgery, transplant, and trauma. The core rotations of the program will depend on the institution's resources (e.g., a Veterans Affairs hospital will not have a pediatric site), preceptor availability, and the relationship between pharmacy and the specialty. If you have a particular area of interest, it is important to make sure that the program offers rotations in that area.

The number and type of elective rotations vary according to program. At the beginning of your residency, you will select your elective rotations. Your interests will probably change during the residency so try to keep some options open in terms of selecting electives. Depending on the program, you may not be able to do a desired elective rotation because of lack of availability or competition with other residents. Some programs will let you go off-site for an elective rotation, but this should be discussed with each specific program. Program directors may decide which month you will be doing which elective in order to make sure certain areas are covered.

During your residency, you will be required to do a major project. The topic of your project may or may not be of your choosing. Some programs will help you "brainstorm" and others may just tell you what they need done. Residents often have difficulty completing a research project during a one-year residency. For this reason, the residency projects tend to be geared toward a short project that gives you exposure writing a pro-posal and objectives, completing the work, and summarizing and presenting the results. Your residency project may involve a complicated drug utilization review, a retrospective study, or an administrative-type study. You may also have the opportunity to complete a project that was initiated by a previous resident or student.

If you have an interest in doing more scientific-type research on therapeutics or pharmacokinetics, you may want to find out what kind of support is available. A good way to find out the publishing or writing experiences of the residency preceptors is to perform a Medline literature search by author. This search will tell you if the preceptors are actively publishing and their research interests.

Once you have started working on your residency project, you may present the initial results at the ASHP MCM, one of the regional residency conferences, or at one of ACCP's meetings. Although stressful, the meetings are a great opportunity to work on presentation skills and to meet residents from other programs in a professional and social environment. Most programs provide some funding for travel to meetings.

During your rotations you will be expected to participate in direct patient care. Rounds are often an effective way to interact with the health care team and provide direct patient care. If you are at a community hospital, they may not have organized rounds, in which case you will need to follow the patients on your own. In a teaching hospital, you will almost always have rounds.

You may meet with your preceptor to discuss issues during each rotation. The frequency with which you will meet with your preceptor varies. This experience will not be like your experiential rotations at school. Most residency programs expect you to be competent enough to handle most problems and to need much less supervision than a student.

Staffing is a common requirement of a resident. This refers to the amount of time you spend entering orders, answering phones, making IVs, filling carts, and checking orders in the pharmacy. Most programs require you to staff every other weekend; other programs may require you to staff during the week. This may vary depending on the number of residents in a program and the staffing needs of the institution. By working in the pharmacy, you will have a better understanding of the system. The pharmacy staff may be much more willing to help you since they will have seen your face before. In the future, if you will be working for an institution that requires you to staff, they may feel better knowing that you have had some training during your residency.

Teaching may be another resident responsibility. If you are at a teaching institution affiliated with a school of pharmacy, you may see pharmacy students quite frequently. Some programs may ask you to precept these students. You may even be the primary person that they interact with on a daily basis. It is a little intimidating to go from being a pharmacy student to being a pharmacy resident supervising students. You will learn quickly about your limitations as a preceptor and how to develop a working relationship with students. You should consider whether teaching and precepting is something you want when applying for a residency. It is also a good idea to ask programs about didactic teaching if that is one of your interests.

Another activity that is required in some residency programs is code team participation. A code team is a group of physicians, nurses, pharmacists, etc. that respond to a patient who is having a medical emergency. Depending on the site, you may be assisting a pharmacist who routinely works on the code team or you may be the only pharmacist on the team. The amount of time a resident spends wearing the code pager varies from program to program. To be an effective member of the code team, most programs require and offer classes in advanced cardiac life support.

A few residencies require that residents participate in an "on call" program. This could mean that you answer pages regarding drug levels, parenteral nutrition, or any other possible drug-related question. The period of time you are on call varies. Sometimes you are on call 24 hours a day for a week at a time or possibly for a month. A few programs require that you stay in the hospital overnight while you are on call and rotate calls with other residents every few days. Taking calls can be beneficial to your learning experience because it teaches you to handle drug therapy problems in an efficient manner and allows you to take responsibility for the answers you provide. Most programs offer preceptor support so that you can call a faculty member if you are presented with a difficult question.

Other activities that you may do during your residency include giving in-services, visiting other residency sites, attending the ASHP MCM, participating on the Pharmacy and Therapeutics Committee, and writing articles for national journals or your hospital publication.

Keep in mind that residency programs can vary widely depending on the setting. The most important consideration for you is to think about what you want from a residency and find a program that fits as many of your needs as possible.

## Other Resources

ASHP's online publication, *Opportunities: The Source for Pharmacy Residency Information* is located at [www.ashp.org](http://www.ashp.org). (Click on "Residency Information.") It contains information about why to pursue a residency, frequently asked questions, how to select a residency, and a searchable list of current residencies. It also allows you to e-mail or print out a Residency Matching Program form.

To find out information about specific accredited pharmacy practice and specialty residencies, ASHP has published two Residency Directories annually. Starting in September 2001, the directories will be available on-line. Access to the Residency Directories are included with the registration fee for signing up for the Resident Matching Program. The cost of the Residency Directories is included with the registration fee for signing up for the Resident Matching Program.

Another place to look is ACCP. Every year they publish the *Directory of Residencies and Fellowships*, a compilation of accredited and non-accredited pharmacy practice and specialty

residencies. You can contact ACCP through their web site ([www.accp.com](http://www.accp.com)) or by phone, (816) 531-2177.

APhA also provides information about many U.S. and Canadian pharmacy residencies. Their web site is [www.aphanet.org](http://www.aphanet.org) and phone is (202) 628-4410.

## Fellowships

Fellowships are designed to train pharmacists to conceptualize, plan, conduct, and report independent research. The program is under the guidance of a researcher-preceptor who offers the fellow an individualized learning experience. That experience gives the fellow the training necessary to conduct collaborative research or to function as a principal investigator. The type of research performed can range from pharmacy policy to drug development to laboratory bench-type research.

Pharmacists in fellowship programs may spend some time in patient care but generally spend much less time than residents. Fellows may also have teaching responsibilities in addition to research activities. These programs are often longer than 12 months. One of the most important factors in selecting a pharmacy fellowship is matching your interests to the type of research being conducted by the fellowship preceptor. Participants may be expected to have some prior experience in the research area through practice during school or through a residency. While some programs consider a residency a prerequisite to a fellowship, some pharmaceutical company-sponsored fellowships at academic centers do not require them.

### ASHP-accredited specialty residency programs

- Clinical
  - Pharmacokinetics
- Critical Care
- Drug Information
- Geriatrics
- Infectious Diseases
- Internal Medicine
- Managed Care Pharmacy Systems
- Nuclear Pharmacy
- Nutritional Support
- Oncology
- Pediatrics
- Pharmacotherapy
- Pharmacy Practice Management
- Primary Care
- Psychiatric

### Other specialty residency programs

- Ambulatory Care
- Cardiology
- Emergency Medicine
- Family Medicine
- Gastroenterology
- Nephrology
- Neurology
- Pain Management
- Pharmacoeconomics
- Pharmacoepidemiology
- Rheumatology

Surgery  
Toxicology  
Transplantation

### For additional information . . .

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# P reparing for the Midyear

## Clinical Meeting

### General Information

Getting started well before the MCM is very important. In doing so you will most likely be better prepared, be less stressed, and make a better impression during the coming months of the residency matching process. When speaking with students at the Residency Showcase during the MCM, it is usually very obvious which students have carefully considered why they want to participate in a specific residency program versus those students who have not even begun to prepare for the process.

You can simply start your preparations by talking to people about residency programs. Ask where your professors, mentors, and friends did their residencies. What did they get out of the program? What did they like or dislike about the program? Share your interests and see if they can recommend a program.

Another helpful source of information is ASHP. ASHP's web site provides information to students who wish to pursue residency training, including more information about residency programs, the Residency Matching Program, PPS, and the MCM.

### Housing

Register for housing early since inexpensive rooms fill up quickly. Housing information is located on ASHP's web site and the MCM program. ASHP provides housing at hotels that are specially reserved for the MCM attendees. Sometimes these hotels will cost more than the other hotels in the area. They may, however, save you money on transportation since they provide shuttle service to and from the convention center. When deciding who to room with at the MCM, make sure it is somebody you can deal with when you are stressed. Also keep in mind how many people will need showers every morning to look their best for interviews.

### Apparel

You should plan to dress professionally. Most students participating in the Residency Showcase and PPS will be in suits. Women should make sure their suits are professional, so no plunging necklines or short skirts. As a general rule the more conservative the colors the better. You can never lose with navy, black, and gray suits. Any other colors unless dark and subtle may make you stand out a little. The same applies for the men, and make sure everything matches and shoes are in good shape. Make sure at least one person in your room brings an iron.

The shoes you wear should be extremely comfortable since you will be on your feet all day. Women should not wear high heels unless they can walk at least a mile in them. The convention centers are large and keep you walking for miles.

If you travel infrequently, speak to someone who does to consult about what you will need. Garment bags are great for suits but make sure you can carry it along with you. ~~Check the MCM, it may be set back on the Internet for the weather forecast for that region.~~

## Registration

### General

You can register for the MCM in early fall. There is no late fee for students, but you should register as soon as possible so you can begin to receive the program materials. You can register on ASHP's web site or call ASHP.

Once you have registered for the MCM, you will receive program information. One of the best places to look for specific information about the meeting is in the October 15<sup>th</sup> issue of the *American Journal of Health-System Pharmacy (AJHP)* and the Meetings and Education section of ASHP's web site. If you joined ASHP, realize that it may take up to six weeks before you begin receiving *AJHP*. Pay close attention to the Residency Showcase schedule (see Residency Showcase).

### Personnel Placement Service

Personnel Placement Service (PPS) is a career assistance program offered in conjunction with the ASHP MCM. Information about signing up for PPS and how it works is available at <http://pps.ashp.org>.

When registering for PPS, you will be asked to write a short personal ad about yourself in 50 characters or less. Most people state the position they are seeking, the school they are attending, brief information about work experience, pharmacy affiliations (e.g., fraternities, societies), and when they will be available. Here are two sample ads:

Pharmacy Practice Residency: Pharm.D. conferred in May 1999 (University of Iowa); Interests include primary care/ambulatory care, internal medicine, cardiology; Experience: Clinical clerkships in cardiology, family medicine, critical care, infectious disease, community pharmaceutical care; Oncology Research experience; Four years internship experience in a community pharmacy; Member: ASHP. Phone, E-mail or Contact: name, address.

Pharmacy Practice Residency: Pharm.D. May, 1999 (Oklahoma), B.S. Marketing (University of Oklahoma); Experience: hospital, community, clinical rotations; Interests: cardiology, oncology, ambulatory care, industry; Memberships (positions held): ASHP (Student Delegate), SOSHP (Vice-President, Historian), Kappa Psi (Treasurer), PLS (Vice-President), ASP (Student Delegate), NCPA, APhA; Available 7/99. Phone or contact: name and address.

The registration form allows you to select what type of position you are interested in and in what geographical area. Some positions may not contact you if you are not willing to leave your region. Keep an open mind for now since something really great might become available in a region where you were not originally interested in going.

Many residency programs do not participate in PPS. Therefore, before registering for PPS, you should ask the programs you are interested in applying to if they will be interviewing at PPS.

### Residency Matching Program

The Residency Matching Program is a separate function from the MCM. The MCM gives students an opportunity to learn about residency programs in one location. The Match occurs after the MCM and matches applicants and programs. For more information visit: [www.natmatch.com/ashprmp](http://www.natmatch.com/ashprmp).

## Contacting Programs

Once you receive residency information (e.g., ASHP Residency Directories), you need to consider which program(s) to pursue. How do you know what program is right for you? Try to define your career goals. Where would you like to see your career in the immediate future and long term? Consider what experiences you have liked and disliked during your education. Are there pharmacy practice areas of interest you want to pursue further or areas you want more experience in? Are there areas of practice that you would like to gain experience in to help you make a more informed career decision? What pharmacy practice area(s) do you not enjoy? Also, consider any geographical restrictions.

After reviewing the directories, you should consider requesting applications from residency programs for which you are interested. This information can usually be picked up during the Residency Showcase at the MCM; although, for programs in which you are interested, you may want to obtain the information sooner. Either send a letter or call to request information about the program. When calling to request an application, you do not need to ask for the residency director by name, just state that you are interested in receiving some information about the residency. Anytime you contact a program, speak clearly and slowly, be professional, and leave the necessary information for someone to contact you (e.g., name, phone, address, e-mail, fax) if needed. Be sure your voice mail message is clear and professional.

## Curriculum Vitae

You should begin writing your curriculum vitae (CV) well before the MCM. A CV is a several page, in-depth account of your education, achievements, and experiences (e.g., student organization participation, internships, rotations). Be sure the information is presented clearly. CVs may be confused with a résumé. Although the two are similar, a résumé is rarely longer than one page and contains basic information about education and experiences. A good CV takes a while to create, so do not put it off to the week before the MCM. Even if you are not going to the MCM, you will have to send it with your applications the first week of January.

If you are totally stumped on how to get started, ASHP and probably your medical bookstore sell a great book called *Résumé and Personal Statements for Health Professionals*, by James W. Tysinger. It provides a step-by-step approach to starting a CV and provides many sample CVs. Also ask current residents or professors for examples of CVs and guidance in preparing them. Another resource includes

Bucci, KK. How to prepare a curriculum vitae. *Am J Hosp Pharm.* (1993); 50:2298–9.

An important consideration to remember when putting together your CV is to be specific. Course numbers and course names, such as “Phase VI elective,” may mean something to you but it will mean nothing to people from institutions outside your area. You can try to use short phrases to describe the type of rotation, such as “Institutional, clinical pharmacy rotation” or “Community, distributional rotation.” You should definitely list month-long rotations on your CV; you probably should not list rotations that lasted less than two weeks. If you did ambulatory clinics in a longitudinal fashion (once a week for three months), list these but be specific about the time invested. You can include rotations that you will be scheduled to complete by writing “pending,” “to be completed,” or list the dates the rotations will be completed. Putting future dates will infer that you have not yet completed these rotations. Whether you include descriptions of rotations is up to you. Keep in mind how much your future employer may feel like reading. Unless activities during the rotation were unusual (e.g., writing a manuscript, compounding veterinary medications, etc.), you may want to leave out rotation descriptions. Make sure preceptor and employer names are spelled correctly and that you know all the degrees following their name (e.g., Pharm.D., BCPS, Ph.D., M.D., CDE, FASHP, R.Ph., MPH, MBA).

Be sure to include detailed information about your pharmacy-related job experience on your CV. If you had a job loosely associated with pharmacy (e.g., a business or management-related job in health care), include it if you think it is pertinent to your skills. You should probably leave out your life guarding and pizza delivery experience. If you received an unusual award (e.g., not Rho Chi or Phi Lambda Sigma) you may want to briefly describe it. This includes merit-based

scholarships. If you have publications, make sure they are referenced appropriately. Listing a publication that is “in press” is fine as long as it is really “in press.” This means that it has been accepted by a journal and that it will be published. It does not mean that it is sitting on your preceptor’s desk waiting to be submitted. Most people list items on their CV in reverse chronological order (most recent to least recent).

This is not the time to be humble. Describe your experiences in a way that makes you appear to be an extremely mature, qualified, and responsible individual. Do not fabricate information on your CV. Pharmacy is a small world, and employers can easily pick up on what is untrue—it may just take one phone call.

Once you have put together a rough draft, have someone review it and critique it for you. He or she can help you sort out what should and should not be on it. (See Appendix A for a sample CV.)

Be sure to print multiple copies of your CV and list of references on bond paper. Cotton is the nicest but is the most expensive. It can be found at any office supply store. Make copies of your CV onto your nice paper or have it done professionally since it may be difficult to print it yourself on a laser printer because of the weight of the paper. It is unnecessary to get business size envelopes that match the CV paper. You will be distributing your CV by hand or mailing it in a larger envelope with application materials.

## Other Preparations

### Letters of Recommendation

Begin thinking about whom you can ask to write letters of recommendations for you. Before leaving for the MCM, consider asking your professors, preceptors, supervisors, or those you know well and will have good things to say about you. Typically, residency programs will require three letters of recommendation. Kindly give the people who will be writing letters of recommendation at least one month’s notice. After you return from the MCM and finalize your application plan, you will need to provide them with more information (e.g., where to send letters) (see Residency Application Process, Recommendation Letters).

### Letters of Intent

Most residency programs will require you to write a letter of intent. This letter is usually a brief description about your career goals and why you are applying to the residency program. Each program may ask for somewhat different information, but many programs may want you to answer specific questions. Refer to each program’s specific requirements. This is something you can finish after you return from the MCM; however, at that time, you will only have a few weeks to get all your application materials ready (see Residency Application Process, Letters of Intent).

### Residency Showcase Questions

You should prepare questions to ask to help you differentiate among residency programs. Some questions that may help you differentiate among programs include

- How many residents do you have?
- What are some of the core and elective rotations?
- What are some of the required resident activities?
- What are the strengths and weaknesses of your program?
- What are the staffing hours?
- Do pharmacy students frequently rotate with residents?
- How much time do you spend with your preceptor?

This is a brief sampling of possible questions. The type and priority of questions depend on what characteristics of a residency are important for you. (For more questions, see Residency Application Process, Interviewing.)

# Midyear Clinical Meeting

## The Meeting

The ASHP MCM is the largest pharmacy and pharmacy student meeting that occurs once a year in December. The location of the midyear varies from year to year. Students may go to the MCM to interview for residencies, jobs, and fellowships. Pharmacists and pharmacy students come to learn more about their practice and to network with professionals in their field. Educational opportunities include workshops, lectures, poster sessions, and roundtable discussions. Most activities are included in the cost of registration with the exception of a few pre-meeting workshops.

The exhibit hall is an interesting part of the MCM experience. This is where the pharmaceutical industry displays and markets its products. It is almost a competition between the companies to see who can come up with the most interesting exhibit for their line of products. Once you register for the meeting, you will begin to receive brochures and pamphlets regarding these exhibit booths and educational sessions.

## Networking

The MCM is also a good place to meet students from other schools. A student reception is held at the MCM, usually on Sunday evening. This is also where the winners of the Clinical Skills Competition are announced. If you are interested in residencies in a particular city, meeting fellow pharmacy students from that area can be quite helpful. It is likely that a few of them have done rotations at that hospital.

The most important thing to remember about the MCM is to enjoy yourself while working hard. Your school of pharmacy may have an evening reception at the MCM. Graduates of your school who are in residency programs may be there to catch up with professors and classmates. They may be able to provide you with an interesting perspective on a residency program since they were trained at your school. There are also receptions offered by the different state societies, and a residency director or prospective employer may invite you to attend. These are great opportunities to get to know other people associated with the residency and the current residents. Do not hound the current residents if you can avoid it. Most of the time they are worn out at the MCM because they are interviewing for positions or residencies too. If you see them at a state society meeting catching up with old friends, it may be wise to just say hello and be on your way.

The current residents may do the initial screening to decide who will and will not get an interview. Be aware of the impression you are making with them.

It is imperative when you are at the MCM, even if you are miles from the convention center, to be on your best behavior. This may seem like an obvious point but every once in a while people do or say something that gets them in trouble because somebody saw them or heard them. In addition to hurting your chances of getting a residency, this also reflects poorly on your school of pharmacy. Just remember not to do anything that you would not want somebody seeing you doing.

## Schedule

When you arrive at your hotel, get acquainted with the schedule for shuttle bus service to the convention center. Pick up your registration materials and meeting program at the convention center. Supplemental lists of events are distributed daily at the convention center during the conference. Messages can be posted or picked up in a central area in the convention center. Periodically check the video screens for your name. This is a good way to keep in touch with others during the meeting.

Sunday features special student programming, and you should consider attending. Previous meetings have had lectures on writing résumés, interviewing techniques, applying for residencies, and preparing for NAPLEX. Students from all over the country also compete in the final round of the Clinical Skills Competition. There is an orientation session for first-time attendees of the meeting. The Pharmacy Student Forum spends some time on Sunday going over administrative issues.

The official first day of the meeting is Monday, which usually begins with the Opening Session. The speaker is usually a well-known public speaker or writer who offers insights about health care or professional development. The Opening Session is followed by lectures and poster sessions on different pharmacy topics. The sessions are grouped by specialty (e.g., primary care, pediatrics) so if you have a particular area of interest, you can plan to attend lectures or poster sessions dealing with that area. Residents often get their first exposure presenting on the national level at the MCM poster sessions.

The MCM is hectic, and the time will go by quickly. It is important to prioritize activities to make sure you have a productive meeting. If you plan to participate in PPS, it is advisable to leave your schedule as open as possible the first two days (Sunday and Monday) since you will not know when you will have free time to attend seminars until you get there. If you are not participating in PPS, take advantage of student programming on Sunday and various educational sessions throughout the week. At the information booth, a list of scheduled events in conjunction with the meeting is available. Described in this list are pharmaceutical company dinners (continuing education offered), state chapter meetings, pharmacy school alumni meetings, and other events (e.g., prayer breakfast). Most of these events are open to meeting attendees unless the events are full or unless invitations are recommended if you are not affiliated with the group (alumni events). These events occur mostly on Monday and Tuesday and are great opportunities to learn about drug-related topics or network with students and professors.

## Residency Showcase

The Residency Showcase is usually located in the back of the exhibit hall. This is where residency programs set up exhibit booths and allow students to get information and ask questions about different pharmacy practice residencies. The Residency Showcase is only open when the exhibit hall is open, from Monday to Wednesday or Thursday, depending on the number of programs participating. The Residency Showcase primarily exhibits accredited pharmacy practice residencies. You may be able to receive information about a specialty residency if a site that offers an accredited pharmacy practice residency also offers a specialty residency. Most of the time this is not the case. If you are interested in specialty residencies, it is best to sign up for PPS (see Personnel Placement Service).

Keep in mind that during the Residency Showcase you do not schedule times to meet with people. The exhibit booth may be overflowing with interested students. It is, however, a place to be on your best behavior and in your best suit. This will most likely be the first impression the program will have of you, and you want to make a good impression. Although it is an intimidating sight, make your way through and find out what you need to know about the program. Ask the questions you prepared for the programs that you are considering, and make sure you speak with one of the current residents. There will almost always be someone there who can be an invaluable source of information. This is your chance to get more specific information about the program and see what the current residents have to say about the program. It is fine to take short notes while talking to the residents and/or program directors. However, if you do not feel comfortable doing this or are not able to, before going to the next residency booth write down your thoughts or answers to the questions you asked so later you can recall what you learned about the program.

The hardest part is figuring out what makes them different. Since the residency booths can be very crowded and time to speak with current residents and program directors may be limited, the more information you can find out about the program before you get to the showcase, the better. This will allow you to focus your time and energy on programs that appeal to you.

Different programs are scheduled to be in the showcase on different days. Make sure you will be able to go to the showcase on days when the programs you are interested in will be there. This information is available on the ASHP Web site. The site provides detailed information about the programs, discussions, presentations, and posters sessions that will be held at the MCM.

The Residency Showcase should not be confused with PPS. They are completely separate and they rarely have anything to do with the other. You pay a fee to participate in PPS, while the Residency Showcase is free to meeting attendees.

Please do not carry bags of "stuff" (e.g., huge bags of free pens, literature, notepads, and keychains) from the exhibit hall to the residency booths. Plan to visit the exhibit hall after you are finished at the Residency Showcase. This will make more sense to you when you are at the meeting. If you want more information about this, just ask a professor or mentor who has attended an ASHP MCM. Students who show up at the Residency Showcase or PPS looking like a tourist lose any kind of professional impression. This is an opinion of many residency directors and employers. It is best to collect what you need at the exhibits and deposit the goods at your hotel before returning for professional activities.

## Personnel Placement Service

### **About the ASHP Personnel Placement Service (PPS)**

Each Midyear, PPS brings together some of the most highly-qualified and motivated applicants with hundreds of available positions in health-system pharmacy including residencies and fellowships. PPS features a new and improved web service for registrants to post a resume, search job/residency listings, and conduct other job placement activities online before the meeting. The web site also provides important tools including interview tips, critical dates, onsite message forms, and other useful references. At the Midyear, PPS registrants will be provided an exclusive area to participate in personal interviews.

PPS includes over 2,500 participants and the equivalent of three football fields in total square footage at the convention center! To get the most out of using this service, it's important to familiarize yourself with the procedures below and prepare for your role before arriving at the meeting. For additional information, including tips and photos, take the Virtual Tour at [pps.ashp.org/virtual\\_tours/applicant.html](http://pps.ashp.org/virtual_tours/applicant.html).

**Online PPS Registration.** Register for PPS online at <http://pps.ashp.org> using a credit card. Once your payment is approved and confirmed via e-mail (usually within one minute), you can prepare and review your own resume online. *Important Note:* If you are

a new ASHP customer (i.e., have never purchased from ASHP), please allow for a 2-hour delay between the time you purchase your PPS registration and when you can login to post your listing.

The deadline for advance online registration is October 15.

**Mail/fax PPS Registration.** If you prefer to register by mail/fax, simply return the PPS registration form and payment to ASHP. ASHP will process your payment, post your listing to the PPS web site, and send an e-mail confirmation directing you to login to the PPS web site and review your listing online. Please allow at least 7-10 days for processing. If you register by fax, print a copy of your fax confirmation for your records. The deadline for advance mail/fax registration is October 1.

### Logging into the PPS Web Site

To login to the PPS web site, you will need to use your ASHP ID (customer/member number) and password. If you have purchased through the online ASHP shopping cart or accessed member-only areas on the ASHP web site, you should already have an ID and password. If you don't know your password, follow the prompts on the login screen to verify this information via e-mail. Contact [webcustsvc@ashp.org](mailto:webcustsvc@ashp.org) for additional assistance.

**Midyear Registration** To participate in PPS, you must be registered for the Midyear. You can purchase PPS registration and post your resume *before* you register for the meeting (as long as you are registered for the Midyear before arriving at PPS onsite).

### Mail/Fax Registration

	By Oct 1 Advance <sup>1</sup>	Oct 2-Nov 20 Late <sup>2</sup>	Nov 21 and Onsite <sup>3</sup>
Applicant Listing	\$65	\$130	\$155
Student Applicant	\$60	\$85	\$110

	By Oct 15 Advance <sup>1</sup>	Oct 16-Nov 20 Late <sup>2</sup>	Nov 21 and Onsite <sup>3</sup>
Applicant Listing	\$65	\$130	\$155
Student Applicant	\$60	\$85	\$110

Important! New this year, mail/fax and online PPS registration will close at 6 p.m. on November 20. After this date, participants must register for PPS onsite at the Midyear.

<sup>0</sup> All Advance Listings will be posted on the PPS web site and published in the Advance Listings book mailed to purchasers prior to the meeting.

<sup>2</sup> All Supplemental Listings will be posted on the PPS web site and published in the Supplemental Listings book available onsite at the meeting

<sup>3</sup> Listings received after November 20 will be displayed electronically in the PPS area.

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## **Post a Resume**

If you register online, the PPS web site includes screens that walk you through the process to post your mini-resume with tips for completing each section. Drop-down menus will be provided to indicate the job title you are seeking, preferred practice area and location, start date, and other details. The drop down selections represent searchable fields employers will use to find your listing online. The same information is also requested on the mail/fax PPS registration form.

Space is also provided to describe the school you are attending/residency/current position, prior work experience, pharmacy affiliations (e.g., fraternities, societies), and special skills such as languages or computer expertise. This section is limited to approximately 50 words. The PPS web site will merge the drop-down selections and 50-word description to create your mini-resume for prospective employers. Once you post your resume online (or ASHP posts your resume), be sure to review it for accuracy and print a copy for your records. All listings received by October 1 (by mail/fax) and October 15 (by online registration) will be published in an Advance Listings Book for employers (in addition to being posted on the PPS web site). For maximum exposure for your resume, register by the advance deadline.

## **Search and screen listings.**

You can search all available jobs/residencies by type, practice area, location, salary, and other criteria in early November on the PPS web site. Listings will be continuously updated on the PPS web site until PPS registration closes November 20. Registrants may also create a "Search Alert" that will search the listings and notify you by e-mail when new listings meet your search criteria.

## **Printing Listings**

Registrants can print their own copies of the most current job listings directly from the PPS web site. You will need to reference information within each listing (such as contact address and mailbox number) when contacting employers for interviews.

If you prefer, purchase a bound copy of all Advance Job Listings (*received through October 15*) for \$20 (to be mailed 10 days prior to the meeting. Simply order the book on the PPS registration form or add the book to your shopping cart during online registration. All orders must be placed by November 20. Keep in mind that the book will only include listings received through October 15. The only way to review job listings received October 15-November 20 is via the PPS web site (before the meeting) or in a printed book of supplemental listings (available onsite at the meeting).

## **Scheduling Interviews.**

Employers will begin to search applicant resumes in early November and may contact you before the meeting to schedule an interview. Employers may also contact you onsite by sending you a message form asking you to sign up for an interview at their assigned interview space. (*Note: only applicants who are invited to do so may schedule interviews at an employer's assigned interview booth.*) Be sure to keep track of your scheduled interviews and the employer's assigned interview location so that you can find it onsite. For privacy reasons, ASHP does not release employer interview space locations during the meeting.

## **Onsite Mailboxes**

Each applicant and each position will be assigned a unique mail box number (noted at the top of each listing) that corresponds to a cubbyhole onsite. You will receive your mailbox number as soon as you post your resume. Once the meeting starts, you will contact employers by delivering message forms to their mail boxes to express your

interest in interviewing. Message forms will be available on the PPS web site. We strongly recommend that you address message forms to employers, attach your resume, and bring them to the meeting.

### **Important PPS Dates**

October 1                      Deadline for advance mail/fax PPS registration

October 15                     Deadline for advance online PPS registration

                                      Deadline to edit to PPS listings

                                      Deadline for PPS cancellation

Early November              Begin to search PPS listings and contact prospects

November 20                  Deadline for PPS registration

Last update date for PPS job listings (listings received after this date will be posted onsite)

Print job listings (only a limited number of display copies will be available onsite). Complete message forms (attach your resume) and hand-carry to meeting.

                                      Deadline to purchase Advance Listings Books

Late November                Prepare materials to bring to meeting including your instructions and assigned PPS mail box number, office supplies (pens, paper, paper clips, stapler, etc) and plenty of copies of your resume.

# Residency

## Application Process

### Applications

Return home and look at all the residency program information you acquired. Carefully decide where you would like to apply and interview. Begin to complete all the application requirements as soon as possible. If you have not yet requested an application, do so now. It may take anywhere from one week to one month to get the application in the mail. Most programs have application deadlines between December 27th and January 31st. This does not leave you much time after the MCM, so there are some things you should try to do before you leave for the MCM.

### Recommendation Letters

If you have not already been talking to a pharmacy professor about your plans, consider doing that now. The more a professor knows about you and what you want to do after pharmacy school, the better his or her recommendation letter will be. It cannot be emphasized enough that you should give your professors and employers plenty of time to write your recommendation letters—try to give at least one month's notice before letters are due. When providing materials for professors or employers that will be writing letters, make sure everything is in one envelope with your name on it so that letters will be less likely to be lost. Give them 1) a list of the programs you are applying to, 2) clear instructions about who to address the letter to and where to send it, and 3) addressed stamped envelopes for the letters to be mailed to each residency program. Including a copy of your CV with the paperwork you give to these people is extremely helpful to those who have to write your letters. You should also try to discuss your career goals with them, your reasons for selecting the residency programs you are going to apply to, your strengths and weaknesses, and any other information that will help them complete your letter(s) of recommendation. Letters that give specific examples of accomplishments of the applicant have much more of an impact than letters that state attributes very generally.

Be careful whom you choose to write the letters. If a professor you are considering is someone who consistently returns exams very late, think about how that person may handle your recommendation letter. Some professors or employers will say positive things about an applicant no matter what. Others will be blatantly honest about their opinion of the student. If you are even slightly in doubt about the professor's opinion of you, it is imperative that you ask one simple question before requesting letters of recommendation: "Would you feel comfortable writing a favorable letter of recommendation for me?" If the employer or professor says no, move on and ask someone else. It is better to ask someone who does not know you as well than to ask someone who will not write a glowing recommendation.

Some places may ask that you provide a recommendation letter from an employer. Ensure the person knows what is expected. Professors have probably written several recommendation letters; employers may not have had to write as many and may be unfamiliar with the length and format of a letter. There are various standard recommendation forms floating around that you may be tempted to use to save your professors time and energy. If you really care about your letters of recommendation, do not use these forms unless the program requires that you use them. Most professors just check boxes and keep comments to a minimum. A potential employer or preceptor can determine a great deal more about you from a positive or negative standpoint by reading a letter in the recommender's own words. Employers and residency directors tend to read between the lines on these letters since most letters have a favorable tone. If an employer reads, "he has excellent writing and communication skills but needs some improvement in time management," it really means, "he has problems turning things in on time."

Unfortunately, you will almost never get a chance to review your letters of recommendation before they are sent to the residency programs. Occasionally a professor will tell you what was in the letter. Residency programs will usually not accept letters that have been sent from the applicant unless they are in a sealed envelope with the signature of the professor over the envelope closure. Letters usually must be sent by the person writing them, not with your application material.

Lastly, remember to send thank you notes to those who took the time to write letters of recommendation for you.

## Transcripts

Most programs require transcripts. The office of records and registration will usually send transcripts directly to the program through their office. They are usually pretty good about getting transcripts to programs quickly. Waiting until the last minute is not advisable. Make sure the addresses you give them are legible. Occasionally a program will ask for a pre-pharmacy transcript, but this is not typical.

## Letters of Intent

Another important part of the application is the letter of intent. It is a brief description of your interest in the program. Some programs may ask for an essay as opposed to a letter format. In this document you may want to state why you want to do a residency, why you want to participate in the residency you are applying to, and what your career goals are. It should be no more than a page and it should be formal. You should review the application requirements for each program you are applying to and include any specific information requested in the correct format. No matter how well you know the preceptors and residents, the letter of intent should be taken seriously. A sample letter is supplied at the end of this guide (Appendix B).

## Personal Statements

Another important part of your residency application is your personal statement (Appendix C). The book titled *Résumés and Personal Statements for Health Professionals* (referenced in the section on CVs) provides many examples of personal statements. Keep in mind that this is not the same thing as a letter of intent. The personal statement should not be structured like a letter. Writing a personal statement usually takes a bit of soul searching. Most people write about how they ended up in pharmacy school or why they want to pursue a residency. If you have an amazing story about how you saved your dog from a lethal overdose of dog vitamins and how this is what pushed you to go to pharmacy school, go ahead and tell it.

It is usually not necessary to write a different letter of intent or personal statement for each residency program you are applying to. If a program asks for specific information, make sure you include it even if you have to do some slight editing.

Some programs may require only a letter of intent or personal statement, both, or a variation of the two. Once again, review the specific application material for each program and if you are unsure, just ask!

## Number of Applications

Think carefully about how many places you would like to apply. Generally, there is no correct number of programs that you should apply to; however, applying to just a few programs may limit your chances if the programs are considered competitive or if there is a chance you will not like the program once you have interviewed there. The most important issue is for you to apply only to programs that you would go if accepted. Try to be prepared for complete burnout some time in the interview process. It may be helpful to think about how many interviews you can attend realistically without losing your sanity. It is not recommended that you refuse an interview once you have been offered one. The program may only select so many people to interview and, by refusing, you may cause someone else to not be interviewed at their first choice. Also think about how much it will cost. Can you drive to most of the places or will you have to fly there? If you have applied to many places that are far away, scheduling may become an issue. While some places will be flexible if you have other interviews in the same area, it may be difficult to schedule interviews together if the interview days are booked up.

The fact that you should think hard about your plans for the future cannot be emphasized enough. Applying for a residency is not something you should enter into lightly. Seriously consider your decision early on. You have the ultimate power to decide to not do a residency up until the Match deadline date (see Residency Matching Program). The only binding agreement to do a residency occurs after you have turned in your match request in March or until you have signed an agreement to participate in a non-accredited or specialty residency. Once the Match occurs, you are expected to go to the program you matched with or the non-accredited or specialty program that you signed with instead of entering the Match.

## Final Submission

Make sure everything you send to each program is completely free of spelling and grammar errors. In addition to having your favorite professor check it for you, have a family member or friend read it to make sure it sounds reasonable and that it flows nicely (especially the letter of intent and personal statement). Your CV especially should be free of errors. Do not use white-out on anything you send; reprint it instead. Keep a copy of all application materials.

Send application materials early. Prior to the application deadline, contact the program to confirm receipt of your application and any other information. If your file is incomplete, follow-up to make sure the necessary information has been sent, especially information to be sent by others. Keep the residency program updated about missing information in your file.

Once the residency deadline has passed, residency programs review their applications and invite candidates for interviews. Keep in mind that most interviews will take place at the end of January or during the month of February. Match Rank Order Lists are due in early March. Now begins your first session of waiting. There is no way to predict how soon the programs will begin to get back to you. If you put an e-mail address on your CV or on your application, it is very likely that they will let you know that way. Check your e-mail at least daily since you want to be in touch with the program as soon as possible if you have been asked to interview. They may also contact you by phone since mailing generally takes too long at this point. Some programs that are turning down your request for an interview may notify you by mail. Keep this in mind if you are waiting for one more notification and you are holding a slot in your schedule for that interview.

Interview slots on Mondays and Fridays fill up the fastest and these days may be reserved for applicants that are flying in over a weekend. Be realistic about the type of schedule you are willing to tolerate. Remember that you are trying to make a good impression. Some suggest scheduling your first choice last. This recommendation may not always work, especially if you are tired by the time you have your interview, and you have a hard time showing any enthusiasm because of being burned out on interviewing. You may not want to schedule your first choice first

because you are still working into the interview process. The important thing is to schedule your interviews in a way that fits your needs.

## Interviewing

Once you have set up your interview date, you can start planning your trips. If you will be traveling long distances to several places near each other, try to schedule those interviews together. Some programs will pay for your hotel accommodations while you are interviewing, but this is not typical. Programs may offer to reimburse you for the cost of the hotel room but this may depend on whether you match with them. Try not to let the fact that the program has spent a lot of money on you affect your decision. Pay attention to the factors that should really affect your decision.

When packing for your trip, bring all materials relating to the sites where you will be visiting. If you have checked out the institution's web site, bring that information along. Ask to see an itinerary to help you prepare for the interview. Some programs will require you to do a presentation; others will not. You can re-read information about the programs the night before the interview to help you come up with questions to ask when you get there. Prepare questions to ask during your interview to try and get as much information as possible from the program. Get plenty of sleep the night before your interview, if possible. Avoid arriving by plane on the day of your interview since plane delays may cause you to miss it completely and may require you to reschedule. Make sure you know how you will be getting there and where you will be going. Call ahead of time if there is any confusion.

Follow the same rules about attire for midyear for interviews. Do not think that you will be sitting in someone's office all day since you may have a long tour of the institution. Therefore, do not wear shoes that are uncomfortable or something that is too hot or cold for a brief walk outside.

**You may want to refer to the following article for additional information about general interviewing advice: Hasegawa GR. How to be interviewed for a job. *Am J Hosp Pharm.* (1991); 48:1180-1183.**

It is most likely that you will be interviewing with the residency director and/or the program preceptors. If you are interviewing at a program that accepts several residents, there will probably be other applicants interviewing with you on the same day. Some activities such as lunch, the tour, and information sessions will be with other applicants. During the actual interviewing, you will be alone with one or more interviewers. You may not like the other applicants but try not to let it show. It is quite possible that you will be working with some or all of these people next year. Part of the residency involves working as a team so you need to portray that you can work well with others, even if you are in competition.

During your interview, you want to make sure you speak with the current resident(s). If you can get them away from the faculty or preceptors, they will provide the most insightful information about the residency. It is very important that you ask them at some point whether they would choose this residency again if given the chance. This will give you an idea about whether they felt the general experience was worthwhile. If they say no, be sure to ask them why. The reasons they give for not liking the program may be something that is irrelevant to your situation.

## Interview Questions

During your various interviews, you will be asked many questions. It is important that you mentally prepare answers to some of the most common questions before your interviews.

By no means will you get as many questions that are as hard as some of those listed above. This is just a random sampling to let you know what you might come across. Make sure that you know your CV backwards and forwards! Any question they ask you about is fair game. If you have done an in-service on a pharmacy-related topic and it is mentioned on your CV, review your notes or handouts prior to interviews since it is possible they may ask you something about it.

It is extremely important that you be prepared to ask plenty of questions. Interviewers often make judgments about you based on the type of questions that you ask. Some questions should

only be presented to residents if at all. Do not attempt to ask all of these questions at the MCM. Ask the most crucial question for the limited amount of time you have at the MCM and the remainder during your interview.

After your interview, be sure to write a formal and succinct thank you note. Thank you notes for the residents are a nice touch. You should mail them as soon as possible and before the deadline for submitting match results.

## Presentations

Although it is unusual for a pharmacy practice residency (not for a specialty) to require presentations during an interview, a few programs have asked applicants to give a presentation. Before you decide on a topic or format, ask the program director what is expected in the presentation. Find out what type of topic is preferred, whether AV equipment is required and if it will be provided, who your audience will be (e.g., pharmacists, physicians, students), and the desired length of your presentation. Do not be afraid to ask questions.

## Quizzes

Other programs have been known to give a small quiz during the interview. This is not something to be too concerned about since there will be no way to study for it. Of all possible scenarios during an interview, the one disliked the most by applicants is being asked clinical questions. Some of these questions can be extremely difficult and it can be very stressful. You should be fine if you keep a few important factors in mind. First, do not panic if you do not know the answer. In a calm voice say that you do not know the answer. Do not under any circumstances make something up or guess. Second, think through the question thoroughly and answer succinctly. Third, realize that the answer to the question may be to get more information. The reason programs will ask you clinical questions on interviews is to determine whether you can think on your feet, know not to guess or make something up, and know when to seek out additional information.

## Questions to answer

- ◆ Tell me about yourself.
- ◆ What are your goals?
- ◆ Where do you see yourself in the future?
- ◆ What would you offer this residency program?
- ◆ What do you want to get out of a residency?
- ◆ Why do you want to come here?
- ◆ Describe a clinical intervention you have made.
- ◆ What practice areas are you interested in?
- ◆ What are your strengths/weaknesses?

## Others

- ◆ How do you handle stress?
- ◆ How much hospital experience have you had?
- ◆ Have you ever had a major conflict with a preceptor/doctor and how did you handle it?
- ◆ What is one of the major issues facing pharmacy today?
- ◆ What would your pharmacy preceptors say about you?
- ◆ What would your colleagues say about you?
- ◆ How would you deal with an unmotivated student?
- ◆ What were your least favorite rotations and why?
- ◆ If you could be any drug, what drug would you be and why?

- ◆ Do you have any ideas for your major project?
- ◆ Scenario: You are the only pharmacist in the pharmacy. On the phone is a nurse wanting to know dosing for a dopamine drip for a patient who is crashing. At the window is a doctor who is ranting and raving about an enoxaparin order that wasn't approved. On the other line is a nurse calling about a patient with a vancomycin level of 15. In what order do you handle these problems?
- ◆ Would relocating be a problem?
- ◆ If you were alone on a desert island, what three medications would you bring with you?
- ◆ What makes you better for this position than other candidates?
- ◆ What do you anticipate a typical day in your career to be like?
- ◆ What qualities do you expect in a preceptor?
- ◆ Choose a topic relating to clinical pharmacy, and we'll ask you a question about it.
- ◆ Do you have any publications?

## Questions to ask

### In general

- ◆ How easy is it to get a desired elective rotation?
- ◆ How many hours of staffing are required per week/ month?
- ◆ Are residents ever pulled from clinical areas to staff?
- ◆ Can rotations be changed during the year?
- ◆ How is the topic of the residency project decided?
- ◆ Is code team participation required or optional?
- ◆ Are there any opportunities to teach or precept pharmacy students?
- ◆ Are there any opportunities to publish?
- ◆ Is it possible to do a rotation at another institution?
- ◆ How do you think this year's residents are doing?
- ◆ What are the current residents' research projects?
- ◆ What are the strengths/weaknesses of the program?
- ◆ What will participation in the program do for me?
- ◆ How are residents evaluated during the program?
- ◆ Do the pharmacy faculty ever work with the medical faculty on research projects?
- ◆ How would you describe the relationship between the distributional pharmacists and the "clinical" pharmacists or residents?
- ◆ Are residents given the opportunity to attend national pharmacy meetings? (e.g., ASHP, APhA, ACCP, SCCM, etc.) If so, is funding available?
- ◆ Do pharmacists or residents ever give lectures to medical housestaff?
- ◆ Can residents select their own ambulatory clinic? What clinics are available?
- ◆ Is it possible to tailor the structure of the residency to meet my interests (infectious disease, pediatrics, etc.)?

### Residents only

- ◆ What time do you get to work on average?
- ◆ Have you had any problems working with the residency director/preceptor?
- ◆ Do you ever spend time with the other residents outside of work?

- ◆ What do you plan to do next year?
- ◆ What would you change about this residency program?
- ◆ What are the best and worst things about this residency?
- ◆ Is photocopying paid for or is there an allowance?
- ◆ How accessible is the library?
- ◆ Are you ever on call?
- ◆ What do you do on the weekends?
- ◆ Do you have to pay for parking?
- ◆ Are the medical/nursing staff easy to work with at this institution?
- ◆ Are health/life/dental/disability insurance or retirement benefits provided or available?
- ◆ How many calls have you received in the middle of the night while on call?
- ◆ Do the current residents work well together?
- ◆ How far do you live from work? How long does it take you to get to work? Is the neighborhood near the institution safe?
- ◆ Have you had the opportunity to give lectures to pharmacy students? How many?
- ◆ Have you received enough positive or negative feedback throughout your residency?
- ◆ What is the policy with working holidays?
- ◆ Have you had the opportunity to write or publish during the residency (review articles, hospital newsletter articles, case reports)?
- ◆ Do you have free time after work? How do you spend your free time?
- ◆ Are your suggestions to medical staff taken seriously? How much do you have an impact on drug therapy decisions? Do they ask for your input?
- ◆ What is your typical day like?

# R residency

## Matching Program

### The Process

This is one of the most confusing components of the residency process. The Match applies only to ASHP- accredited pharmacy practice residencies. The matching process is administered by the National Matching Service (NMS). Most general questions regarding the Match can be directed to ASHP. The online publication, *Opportunities: The Source for Pharmacy Residency Information*, has a request for a Match agreement ([www.ashp.org](http://www.ashp.org), "Residency Information"). A request for the Match agreement can also be submitted at the NMS web site ([www.natmatch.com](http://www.natmatch.com)) under "Pharmacy Residencies." Sending in this form does not constitute signing up for the Match. When you receive the Match agreement package, you must read it completely and sign it. You must also send a registration fee to the NMS. The signed agreement and the registration fee must be received by early January. By signing the agreement, you are agreeing to participate in the Match and agreeing to accept the admission to the program you match.

If you decide not to participate in the Match, you have the option to withdraw from the Match. You simply enter "withdraw" on your Rank Order List and submit the list by the Match deadline. In this case, you will not be matched with any program and you are under no obligation to stay in the Match. This does not apply if you have put the names of any programs on your Rank Order List.

After you complete your interviews, carefully consider all the programs you visited. Making a list of the advantages and disadvantages of each program may help. Think about which programs you are still interested in and which ones are no longer of interest to you. Of those that you are still interested in, decide which would be your first choice, your second choice, etc. When making these decisions do not worry about whether or not you think the program is going to rank you, but consider your preferences. One of the most important things to know about the process is that you should only rank programs you want to go to. Do not rank any program that you are not interested in going to. If you do and you match, you will be expected to go. If you do not go to the program, it will be extremely difficult for you to find a residency position elsewhere. It will not look good for the start of your career either. You should only rank programs that you would like to go to.

Since every accredited pharmacy practice residency participates in the Match, they will not offer you a position in the program during your interview. If you are offered a position, you must remember to take this with a grain of salt. Also, you are under no obligation to rank this program first if they have stated that they will rank you high on their list. Do not let what the people say about how they will rank you persuade you into thinking you are definitely matching with them. Rank Order Lists are kept strictly confidential. The program will never know that you ranked them

last or not at all if you did not match. There is no way to know which programs ranked you high or ranked you low based on your match results.

Complete your Rank Order List and return it by the March deadline. If you do not turn in your Rank Order List by the deadline, you will not be doing an accredited pharmacy practice residency. Keep in mind that there is no correct number of programs to rank. The only right number is the one that you determine.

Once the NMS has received all rank order lists from all programs and applicants, they enter it into a computer and they start with an applicant's list. Nothing about this process is random. They tentatively match an applicant in his or her first choice regardless of where the program has ranked the applicant. When they attempt to match another applicant who has also listed that program first, they may bump the first person out of the slot if the program has ranked the second person higher. At this point, they attempt to match the person who was bumped out with his or her second program. Again, they then tentatively put this person into one of his or her second choice program's slots. It is important to remember that the process starts with the applicant's and not the program's list. This becomes extremely favorable to the applicant since the program does not have as much influence with who matches as the applicants have.

The following is an example of the process:

<b>Applicant Rank</b>		<b>Program Rank</b>			
John	1. Program X	Program X (2 positions)	1.	Susan	
	2. Program A		2.	John	
	3. Program C	3.	Kerry		
Walter	1. Program X	Program A (1 position)	4.	Walter	
	2. Program C		1.	Susan	
	3. Program A		2.	John	
Susan	1. Program X	Program B (1 position)	3.	Kerry	
	2. Program C		1.	Walter	
	3. Program A		2.	Susan	

#### **Match Results**

John	Program X
Susan	Program X
Walter	no match

If program X had only one position, Susan would get it because she ranked them first. John would go to Program A because he ranked them second and he is next on their list. Since Program X had two positions, both John and Susan would go to Program X. Walter did not match anywhere. None of these matching scenarios were arbitrary; each followed an ordered algorithm that placed them in the most appropriate slot. You will never be matched with a program that you did not rank on your list. Although Walter was first on Program B's list, he did not match with them because he did not put Program B on his list.

## **Couples Match**

Match participants who may wish to try to match at the same program or in the same city may match as a "couple." This requires a slightly different procedure involving submitting pairs of

program rankings. If this is to be done, the applicants must request a Couples Rank Order List to replace the original Rank Order List.

## Sending in the Rank Order List

So, it is early March and your Match Rank Order Lists are due. If you mail your Rank Order List to the NMS, be sure to include enough postage to get to Canada for all correspondence with NMS. By now you should have received in the mail your code number and your confidential personal identifier. Your code number should be made available to all programs with which you are interviewing. You can put this code number in your letter of intent, or you can let them know during the interview. They also receive a list of all applicants registered for the Match with their code numbers.

Once you submit your Rank Order List to NMS, the decision is final. If you have decided not to rank at this time, you will be instructed to write "withdraw" on your Rank Order List. If you faxed your list, you should call them two hours later to make sure they have received the fax. About ten days later, you are asked to call NMS to confirm your Rank Order List over the phone. Have your applicant code and personal identifier on hand.

## Match Results

The Match results will be released at the end of March. You will most likely receive a letter in the mail. You can also view the results on the World Wide Web, or call the NMS for the results. Inform those who wrote letters of recommendation for you, let them know the results, and thank them for their support. If you want to call the program that you matched with to confirm the results (or to let them know how happy you are), feel free to do so. By the end of April, you should receive a confirmation letter or document from the residency program. If you did not get your first choice in the Match, try not to be discouraged. Remember that you are going to a program that you wanted to go to. Do not call the other programs and ask why you are not going there.

If you do not match, do not panic. You should go directly to the NMS web site and enter your applicant code and personal identifier to access programs that did not fill their positions. These unfilled positions will be made available to everyone who turns in a Rank Order List. This list will be made available at the same time as the Match results. All programs that have any unmatched slots have access to the list of unmatched applicants. Applicants will never have access to the list of applicants who did not match.

Contact any programs that you are interested in as soon as possible. There will not be another Match. At this point it will almost seem like a more traditional job search (and possibly a first-come first-serve basis). You will most likely still need to send application materials and interview, and then the residency position will be offered directly to selected applicants.

Try not to get discouraged. Remember the search for a residency is very competitive, keep focused, and do the best you can through the second part of the process. Just because you did not match does not mean you are not a good candidate. And just because a program did not match or fill all their positions does not mean it is not a good residency program.

## Applying for Accredited, Non-accredited, or Specialty Programs

Some students apply for accredited pharmacy practice, non-accredited, and specialty residencies at the same time. It is advisable that you inform the program director at the non-accredited and specialty residencies that you signed up for the Match. You should make sure they are aware of the deadline to submit a Rank Order List so that they can accept you or turn you down for their program in enough time for you to submit a Rank Order List. Remember, it is best to be straightforward with the places to which you are applying and they will be much more understanding.

# C onclusion

A tremendous opportunity awaits students that are willing to put in the time and effort needed to obtain a residency. The market is becoming more competitive, but important changes are taking place. ASHP is pushing to get many more residency programs developed to accommodate the many students who wish to do residencies. There are also many more specialty pharmacy areas developing residency programs.

The residency matching process is a very challenging and tiring one. Do not be surprised if you feel a wide array of emotions during this time, if you change your mind several times, and if you feel overwhelmed. The few months that you will invest to acquire the residency will hopefully seem well worth it when the process is complete.

# Appendix A—Curriculum Vitae

## Random L. Student

### December 1997

835 W. Orioles St.  
Pharma, MD 21201  
(410) 555-5555  
random@pharm.edu

923 W. Rain Street  
Seattle, WA 98112  
(206) 555-5555

### Education

Doctor of Pharmacy  
(anticipated May 1998)

University of Pharma School of Pharmacy

Bachelor of Arts

Psychology; University of Anystate 1993

### Professional Experience

#### **Big Cheese Hospital, Compound, MD**

*Pharmacy student technician*

Filled unit dose prescriptions in the surgery pharmacy. Refilled Pyxis machines and starter doses on the intensive care units. Conducted pharmacy quality control inspections for the OR pharmacy to prepare for JCAHO surveys.

Supervisor: Marty Pants R.Ph.

November 1997–Present

#### **Old Bones Nursing Home, Pharmacare, MD**

*Assistant clinical consultant*

Processed and dispensed unit dose and multi-dose prescriptions for nursing home and assisted living residents. Surveyed medication administration records for mistakes and discrepancies. Packaged unit dose medications. Performed supervised compounding of topical agents for nursing home inpatients. Delivered medications to nursing home units and assisted living facilities. Made supervised therapy recommendations to nursing home medical staff. Collected clinical data for DUR studies on warfarin and phenytoin monitoring. Assisted with developing lab monitoring sheets for the medical office of an assisted living facility.

Supervisor: Belinda Colace R.Ph.

June 1995–July 1997

#### **Prescriptotech Pharmaceuticals, Reimburse, MD**

*Data entry technician*

Processed phase III clinical data for a large multi-center study investigating a new drug for heart failure patients. Corrected mistyped drugs and adverse events that were unrecognizable by the statistical database.

Supervisor: Stacey Freepens, M.S.

March 94–August 94

#### **Massive Discount Drugs, Retail, MD**

*Pharmacy technician*

Entered and filled prescription orders. Processed refill orders and called for refill approvals from physicians' offices. Answered insurance questions for customers and assisted them in filling out reimbursement forms. Reconstituted oral liquids and topicals for dispensing.

Supervisor: David Nard, R.Ph. July 93–August 94

Honors and Awards*University of Pharma*

Phi Lambda Sigma leadership honor society	October 1997
ASHP student leadership award	February 1997
Rho Chi recognition certificate for scholastic achievement	May 1997
University of Pharma School of Pharmacy leadership award	May 1997
State of Pharma Senatorial Scholarship for academic achievement	September 1995

*University of Anystate*

Hughes undergraduate biological science education grant	September 1992
Undergraduate research opportunity program grant	September 1992

Publications/ Poster Presentations/ Senior Thesis

Watkins LR, Wiertelak EP, Goehler LE, Student RL, Martin D, Maier SF. Characterization of cytokine-induced hyperalgesia. *Brain Research* 1994;654(1): 15–26.

Wiertelak EP, Student RL, Furness L, Mooney-Heiberger K, Mayr T, Maier SF, Watkins LR. Acute and conditioned hyperalgesic responses to illness. *Pain* 1994; 56(2): 227–34.

Watkins LR, Wiertelak, Goehler LE, Mooney Heiberger K, Martinez J, Furness L, Student RL, Maier SF. Neurocircuitry of illness-induced hyperalgesia. *Brain Research* 1994; 639(2): 283–99.

Watkins LR, Wiertelak EP, Furness L, Student RL, Martinez J, Maier SF. Neurocircuitry of centrifugal pain facilitory systems: anti-analgesia and hyperalgesia. Poster presentation. Society for Neuroscience annual meeting 1993.

LPS-induced hyperalgesia measured by both the tail-flick and formalin tests of pain sensitivity. *Senior Thesis*. University of Anystate, department of behavioral neuroscience, 1993.

Research Experience*University of Anystate*, department of psychology behavioral neuroscience laboratory

Assisted with development of a rodent model for illness induced hyperalgesia. Performed rodent spinal cord and brain dissection and other histology techniques for neurocircuitry studies. Conducted rodent conditioning sessions for studies of antianalgesia and conditioned analgesia. Assisted with rodent stereotaxic surgeries and performed post-op care duties. Trained other undergraduate students in rat handling and conditioning techniques.

Supervisor: Eric Rattails Ph.D.

September 1992–May 1993

*Old Bones Nursing Home*

Collected clinical data for a research study on anticoagulation strategies and warfarin monitoring in 5 different nursing home facilities. Results were presented in a poster session at the American Society of Consultant Pharmacists annual meeting, November 1997.

Supervisor: Belinda Colace, R.Ph.

December 1996–June 1997

Extracurricular Activities

American Society of Health-System Pharmacists, University of Pharma School of Pharmacy, student chapter founding member and president	Spring 1996–Spring 1997
American Society of Health-System Pharmacists, University of Pharma School of Pharmacy student liaison	Fall 1996–Spring 1997
Alpha Zeta Omega pharmacy fraternity member	Fall 1996–Present
Asthma & Allergy foundation of America Asthma care training instructor for children and their parents	Spring 1997

Presentations

New treatment options for Parkinson's disease Geriatric clinic in-service—Veterans Administration Medical Center	November 1997
Idiopathic thrombocytopenic purpura Pharmacy staff in-service—University Hospital	October 1997
Pathophysiology and treatment of sickle cell disease in adolescent patients Pharmacy staff in-service—University Hospital	October 1997

Experiential Rotations

Institutional pharmacy Inpatient pharmacy, <i>State Psychiatric Hospital</i>	Aug–Sept 1996 Janice Keys, R.Ph.
Community pharmacy <i>Small's pharmacy</i>	July–Aug 1997 Jonathan Pestle, R.Ph.
Community clinical pharmacy <i>Massive Discount Drug</i>	Aug–Sept 1997 Anita Vacation, R.Ph.
Institutional clinical pharmacy Pediatric pharmacy, <i>University Hospital</i>	Sept–Oct 1997 Samantha Smiles, Pharm.D. BCPS
Community clinical pharmacy Outpatient pharmacy, <i>University Hospital</i>	Oct–Nov 1997 Douglas R. Free, Pharm.D.
Outpatient clinic Anticoagulation clinic, <i>Catholic Hospital</i>	Aug–Oct 1997 Vivian Kay, Pharm.D.
Outpatient clinic Geriatric clinic, <i>VA Medical Center</i>	Oct–Dec 1997 Michael M. Mental, Pharm.D. BCPS
Elective pharmacy experience	Nov–Dec 1997

Pending Rotations

Institutional clinical pharmacy  
Solid organ transplant unit, *Research Hospital* Feb–Mar 1998  
Courtney Liver, Pharm.D.

Elective pharmacy experience  
Leukemia/BMT, *University Hospital* Mar–Apr 1998  
Denise Loveancare, Pharm.D.

Elective pharmacy experience  
*Poison Center* Apr–May 1998  
Ira Rinsewell, Pharm.D.

Elective pharmacy experience  
Drug Information Service, *University Hospital* May–June 1998  
Fred Depeedearr, Pharm.D. BCPS

Professional Organizations

American Society of Health-System Pharmacists 1996–Present  
Maryland Society of Health-System Pharmacists 1996–Present  
Academy of Students of Pharmacy 1994–1995  
Anystate Pharmaceutical Association 1994–1995

References

William Advisor, Pharm.D.  
Allied Health Building  
100 Drug St.  
Pharma, MD 11111  
(111) 555-3274

Robert Amcare Pharm.D. BCPS  
Allied Health Building  
100 Drug St,  
Pharma, MD 11111  
(111) 555-3267

Belinda Colace, R.Ph.  
Pharmaceutical Services  
6105 Memory Rd.  
Pharmacare, MD 20852  
(111) 555-2987

## *Appendix B—Letter of Intent*

835 West Orioles St.  
Pharma, MD 21201  
January 2, 1998

Steven L. Residency, M.S., R.Ph., FASHP  
Director, Pharmacy Services  
University Medical Center  
1501 North Compounding Avenue  
Pharmy, Wisconsin 55555

Dear Mr. Residency,

I am writing to express my interest in applying for the pharmacy practice residency at University Medical Center. There are several reasons why postgraduate residency training at UMC is of interest to me. First, I would like to gain more experience providing pharmaceutical care in an acute care setting. A multidisciplinary environment where a high level of expertise is required to care for very ill patients interests me, which is why I am drawn to acute care. Second, I would also like to have the opportunity to explore additional specialty areas that I was not exposed to during my clinical clerkships. Infectious disease, cardiology, critical care, and geriatrics are specialty areas that I find interesting.

Upon completion of my residency and/or fellowship training, I would like to pursue a career that would allow me to provide direct patient care, teach, and conduct research. Providing information that would benefit individual patients is appealing to me. During my residency training, I would like to have more opportunities to interact with patients and other health-care professionals. In addition, a residency program that would provide some teaching experience either through didactic teaching or student precepting on rotations would be ideal. The experience I have had with teaching and leadership has been extremely rewarding and educational. I also look forward to working on an independent research project during my residency training. The idea of making discoveries that can affect health and quality of life seems exciting to me.

I believe learning is a lifelong process that includes maximizing the opportunities available to become more experienced and teaching others so that they may benefit from what one has learned. I have no doubt that the program at the University Medical Center will greatly improve my clinical, teaching, and research skills. I look forward to having the opportunity to interview for one of the residency positions. Thank you for your time and consideration.

Sincerely,

Random L. Student  
ASHP matching #: 12345

## Appendix C—Personal Statement

While writing my curriculum vitae, I thought about what type of person would be represented by this document. I believe that it portrays a person who spent a lot of time learning research skills, developing leadership qualities, and excelling academically. These images say something about what I have accomplished and what I have learned. It does not, however, say anything about my motivations.

When I was given the opportunity to run for office in one of my school's new student groups, I jumped at the chance to make some changes. This was the student chapter of ASHP, an organization that can stand on its reputation in the pharmacy community alone. In the pharmacy school, however, the organization had to compete with many large, well-established student groups that had a lot to offer the students. I realized that the ASHP student chapter would have to provide a service to the students that was not being provided by another group.

I started by asking graduating students and the assistant dean what students were missing in their curriculum or in their participation with student groups. The students and faculty felt that career development was missing. While it was to the benefit of our new organization to entice students to join, what was more important to me was to meet the student's needs. With the help of the other students involved in the ASHP student chapter, we held career development workshops, residency information meetings, and an ASHP midyear survival strategy workshop. We also provided literature with information about career options in pharmacy. I had the opportunity to educate my own class about how the residency application process works. I realized that it was important for me to share with my classmates what I had learned from the midyear the previous year to help them with the process. I received phone calls all summer long from people who wanted to find out what they needed to do to get a residency after graduation. I loved helping my fellow classmates with this incredible challenge. I realized that this is what I loved about getting involved in leadership activities and what I loved about pharmacy—being able to help other people.

When I started receiving leadership awards the following spring, I was amazed. I knew that I had put a lot of hard work into starting this new student group, but the experience itself was reward enough for me. The pharmacy school also acknowledged my efforts by nominating me for *Who's Who Among Students in American Universities and Colleges*. This was a tremendous honor for which I am extremely proud.

I am interested in applying for a pharmacy practice residency so that I can become a proficient clinician and clinical pharmacy instructor. Training I receive during my residency will give me more experience with teaching and caring for patients so I can be prepared to work in an acute care specialty. Health Sciences University is of interest to me because of the strength of the institution in teaching and clinical pharmacy practice. A multi-disciplinary environment where a high level of expertise is required to care for very ill patients interests me, which is why I am drawn to acute care. I would also like to have the opportunity to explore additional specialty areas that I was not exposed to during my clinical clerkships. Infectious disease, cardiology, critical care, and geriatrics are specialty areas that I find interesting.

I believe that learning is a lifelong process that includes maximizing the opportunities available to become more experienced and teaching others so that they may benefit from what one has learned. I have no doubt that the program at the Health Sciences University will greatly improve my clinical, teaching, and research skills. I look forward to having the opportunity to interview for the pharmacy practice residency position. Thank you for your time and consideration.

## *Appendix D—Checklist for Residency Applicants*

### September

- Begin compiling residency program information.
- Begin work on CV and letters of intent.

### October

- Request residency matching program application agreement form from NMS.
- Review residency directories.
- Request additional information and applications from programs of interest.
- Register to attend the ASHP MCM; select programs to visit in the Residency Showcase; register for PPS; make necessary travel and housing arrangements.

### November

- Finalize CV.
- Using the preliminary PPS listing, select the residency programs for possible interviews at the MCM.

### December

- Attend the ASHP MCM.
- Request letters of recommendation.
- Complete all paperwork for applications, including ordering transcripts.

### January

- Schedule on-site interviews.
- On-site interviews begin.
- Submit the residency matching program application agreement form to the NMS if applying to accredited pharmacy practice residency.

### February

- Complete interviews.
- Narrow residency choices to programs that best meet your professional/personal needs and goals.

### March

- Submit Rank Order Form to NMS.
- Receive Match outcome.
- Unmatched candidates submit applications to programs with unfilled positions.

### July

- Most residencies begin.

