**DESCRIPTION**

The Lions Gate Hospital Oncology rotation is an elective rotation of the LMPS Hospital Pharmacy Residency Program. Lions Gate Hospital was the first site to implement Cerner, an electronic health record system. The chemotherapy unit is an outpatient day clinic that is staffed by medical oncologists, chemotherapy certified nurses, pharmacists, a nutritionist and a social worker. The Resident will have the opportunity to integrate with the multidisciplinary team operating in the clinic and provide pharmaceutical care to the patients and staff here.

**GOAL**

The Resident will develop the organizational and clinical skills to provide pharmaceutical care in the clinic. The Resident should be able to function effectively and independently in this setting upon completion of the rotation.

**LEARNING OBJECTIVES**

Per those listed in the Direct Patient Care ITER, available at

http://www.vhpharmsci.com/residency/resources/evaluation\_resources.html

**ROTATION-SPECIFIC OBJECTIVES**

1. Demonstrate competence in discussing the pathophysiology, clinical features and therapeutics of the following malignancy states/processes:

Breast Cancers

Gastrointestinal Cancers

Lymphoma/Myeloma

Option of Lung Cancers, Gynecologic Cancers, Melanoma (as time permits)

2. Demonstrate competence in the management of patients receiving different chemotherapeutic agents used for the treatment of the more common malignancies and those used for supportive care of oncology patients.

**RESIDENT’S OWN OBJECTIVES**

1.

2.

3.

**REQUIRED ACTIVITIES**

The Resident will:

1. Provide pharmaceutical care to the medical patients in the clinic as per the objectives above. This involves daily patient evaluation for efficacy and toxicity of existing therapy as well as detecting and solving potential drug-related problems. Patient load will be determined based on the Resident’s previous experience and proficiency and will be modified at the discretion of the preceptor.

2. Assist in the initiation and continuation of appropriate drug therapy

3. Provide medication counseling and perform medication histories on all patients under his/her care when appropriate.

4. Liaise with community pharmacists and/or physician whenever indicated (via letter, verbal)

5. Document all clinical activities in the patient’s electronic health record. Notes should be discussed with the preceptor BEFORE placing them in electronic chart.

6. Attend pharmacy education sessions (e.g. scheduled presentation) or any education session in the clinic

7. Attend all morning multi-disciplinary rounds in the clinic

8. Prepare/review two topics per week. These may include topics pre-selected by the preceptor as well as specific topics on which the student would particularly like to expand their knowledge base. These topics may be incorporated into patient discussions with the preceptor. Didactic discussions will be done with each tumor site as outlined above.

9. Meet daily with preceptor to discuss the patients being followed, issues of interest, therapeutic controversies, ongoing evaluation and specific topics (outlined in #9)

10. Other activities as assigned by preceptor.

**COMMUNICATION EXPECTATION**

1. The Resident will discuss all chart notes with the preceptor prior to placing them in the electronic chart, with the exception of medication histories and allergy clarifications, unless otherwise arranged with the preceptor.

2. The Resident will notify the preceptor in advance of required off-site activities and absences.

3. The Resident is encouraged to provide on-going feedback to the preceptor to assist in enriching his or her own learning experience throughout the course of the rotation.

**PRECEPTOR RESPONSIBILITIES**

1. Introduce the Resident to the other members of the clinic’s multi-disciplinary team.

2. Provide orientation to satellite pharmacy and the clinic.

3. Take report of all patients.

4. Be available for consultation with Resident whenever possible and provide on-going feedback to the resident throughout the course of the rotation.

5. Provide Residents with a list of relevant disease states/processes that the resident is responsible for.

6. Provide feedback on notes written in the health record.

7. Schedule dates for presentations.

8. Keep the Resident informed regarding their availability for consultation and meetings.