

The following table outlines the residents' requirements to complete the program. Other requirements include staffing, code blue participation, on call responsibility along with other rotation requirements.

REQUIREMENT	PGY1	Admin 1	PGY2	ID FELLOW	Admin 2
Clinical On-Call	✓	-	✓	✓	✓ *Admin & Clinical On-call
Sterile Compounding Certification	✓	✓	✓	✓	-
Disease State Topic List Completion	-	-	✓	✓	-
Project I (Major Project) (Change implemented and evaluated)	✓	✓	✓	✓	✓
Project II (Best Practice Improvement Project)	✓	✓	✓	✓	✓
Medication Use Evaluation	✓	✓	-	-	-
Pharmacy Practice: Drug class review, monograph, treatment guideline, or protocol (1-2 required)	✓	✓	✓	-	-
IRIS Reporting (minimum 5 per year)	✓	✓	✓	✓	✓
ASHP Poster (Project I)	✓	✓	-	-	✓
TSHP Poster (Project II)	✓	✓	-	-	-
Alcalde Presentation (Project I)	✓	✓	-	-	-
Pharmacy Rounds [Present both Project I (March) and Project II (May)]	✓	✓	✓	✓	✓
Resident/Fellow Seminar	✓	✓	✓	✓	✓
Case Conference x 1	✓	✓	✓	✓	✓
Journal Club x 1	✓	✓	✓	✓	✓
Vancomycin Consult Service Validation	✓	✓	✓	✓	-
Warfarin Consult Service Validation	✓	✓	✓	✓	-
Review article (Critique journal article submitted to major journal)	-	-	✓	✓	-
Submission of at least 1 manuscript for publication*	✓	✓	✓	✓	✓
Presentation submission to Fellowship Forum	-	-	-	✓	-
Thesis Submission to UH	-	-	-	-	✓
Submission to ID Conference	-	-	-	✓	-
Submission to ATC	-	-	✓ (SOT resident)	-	-
Submission to Critical Care Conference (may be after residency ends)	-	-	✓ (CC resident)	-	-
Submission to ACC	-	-	✓ (Cardiology resident)	-	-
Pharmacotherapy lab	✓	✓	-	-	-
Teaching & Scholarship in Academia Program	✓	✓	-	-	-

\*Must be by end of residency program. For Admin residents and ID fellows only, one manuscript must be submitted for each residency/fellowship year (total of 2 manuscripts). **SPECIAL NOTE: A residency/fellowship certificate will not be awarded until all of the above requirements are met. Any deviation of requirements must be approved by the Director of Residency and Fellowship Programs. This list is not inclusive of individual preceptor requests and other requests made based upon departmental needs.**