

# Finding the Right Residency

**Anna M. Wodlinger Jackson, Section Editor**

## ■ Checklist: Securing a Pharmacy Residency

Complete this checklist to ensure adequate preparation and application for a residency. (Note: The acronyms are defined at the end of the checklist.)

### Throughout Pharmacy School (Start Early)

- Contemplate your career options and related residency requirements.
- Get involved and develop your leadership skills (e.g., organizations, extracurricular activities).
- Begin to network; get to know your faculty members and those in the pharmacy community.
- Obtain intern hours at a practice site that is consistent with your career goals, when known.
- Consider research opportunities (e.g., elective courses, work studies).
- Enroll in distinctive didactic electives oriented toward patient care.
- Develop and revise your curriculum vitae with input from others (faculty, friends, family).
- Consider developing a residency applicant portfolio.
- Compete in a local and potentially national competition:
  - ASHP Clinical Skills Competition
  - ACCP Clinical Pharmacy Challenge
  - APhA–ASP Patient Counseling Competition
  - NCPA Pruitt-Schutte Business Plan Competition
- Choose challenging APPEs with high-level, direct patient care activities.

- Attend the ASHP MCM (held annually in December) as an observer, if feasible.
- Attend local or regional residency showcases, where applicable.

### Final Professional Year

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|------------------|---|
| August           | <ul style="list-style-type: none"> <li><input type="checkbox"/> Construct a personal inventory (e.g., career goals, strengths, areas to improve).</li> <li><input type="checkbox"/> Plan travel to the ASHP MCM.</li> <li><input type="checkbox"/> Determine if you will use the ASHP Personnel Placement Service (not required)</li> </ul>   |
| September        | <ul style="list-style-type: none"> <li><input type="checkbox"/> For guidance, seek out previous graduates who enrolled in residency programs.</li> </ul>  |
| October          | <ul style="list-style-type: none"> <li><input type="checkbox"/> Revise your curriculum vitae with input from others (faculty, friends, family).</li> <li><input type="checkbox"/> Finalize your residency applicant portfolio, if developed.</li> <li><input type="checkbox"/> Attend local or regional residency showcases, where applicable.</li> </ul>   |
| November         | <ul style="list-style-type: none"> <li><input type="checkbox"/> Search the ASHP database for residencies that match your career interests.</li> <li><input type="checkbox"/> Develop a list of programs to consider at the MCM Residency Showcase.</li> <li><input type="checkbox"/> Request faculty and preceptors to serve as references.</li> <li><input type="checkbox"/> Collect and begin working on applications.</li> </ul>   |
| December         | <ul style="list-style-type: none"> <li><input type="checkbox"/> Provide references with necessary information early (e.g., materials, deadlines).</li> <li><input type="checkbox"/> Attend the ASHP MCM (schedule travel early).</li> <li><input type="checkbox"/> Attend the ASHP MCM Residency Showcase (map out each day in advance).</li> <li><input type="checkbox"/> Attend the ASHP Personnel Placement Service (if chosen to use)</li> <li><input type="checkbox"/> Send thank-you notes to midyear interviewers and references.</li> <li><input type="checkbox"/> Sign up for the match via NMS (the deadline is usually mid-January).</li> <li><input type="checkbox"/> Submit program applications (due mid-December to early January).</li> </ul> |
| January-February | <ul style="list-style-type: none"> <li><input type="checkbox"/> Sign up for the match via NMS (if not already completed).</li> <li><input type="checkbox"/> Interview with programs, where interviews are offered</li> </ul>  |

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|------------|---|
| March      | <input type="checkbox"/> Submit your rank order list to NMS (see website for exact date).<br><input type="checkbox"/> Match results are announced (see website for exact date).<br><input type="checkbox"/> Scramble if unmatched (address immediately when unfilled list is provided). |
| April-June | <input type="checkbox"/> Obtain pharmacy licensure promptly.<br><input type="checkbox"/> Check with residency program regarding unique requirements (e.g., credentialing).  |
| July       | <input type="checkbox"/> Start residency program.   |

## ■ Key Websites Related to Finding the Right Residency

(Note: The acronyms are defined at the end of the list.)

ASHP Residency Directory: [www.ashp.org/ResidencyDirectory](http://www.ashp.org/ResidencyDirectory)

ASHP Residency Accreditation: <http://www.ashp.org/accreditation>

ACCP Directory of Residencies, Fellowships, and Graduate Programs:  
[www.accp.com/resandfel/index.aspx](http://www.accp.com/resandfel/index.aspx)

APhA Community Pharmacy Residencies: <http://www.pharmacist.com/residencies>

AMCP Residency Opportunities: <http://www.amcp.org/residencies>

National Matching Services: [www.natmatch.com/ashprmp](http://www.natmatch.com/ashprmp)

## Acronyms

ACCP: American College of Clinical Pharmacy

AMCP: Academy of Managed Care Pharmacy

APhA: American Pharmacists Association

APPE: Advanced Pharmacy Practice Experience

ASHP: American Society of Health-System Pharmacists

ASP: Academy of Student Pharmacists

MCM: Midyear Clinical Meeting

NCPA: National Community Pharmacists Association

NMS: National Matching Services



# The Curriculum Vitae and Letter of Intent

Jason C. Gallagher

*If you call failures experiments, you can put them in your resume and claim them as achievements.*

—Mason Cooley

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## QUESTIONS TO PONDER

1. How should one compose a letter of intent?
2. What are the typical components of one's curriculum vitae (CV)?
3. How can the CV most optimally highlight a residency applicant's qualifications and make him or her stand out?
4. How does the CV evolve throughout one's career?
5. What are common errors when composing a CV?

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Nearly all students are familiar with the term *curriculum vitae*, though they may be less comfortable with the process of writing one and differentiating it from resumes prepared for past jobs. Resumes are not appropriate for residency candidates. The lack of fixed rules about CV writing can make the venture frustrating for students and young practitioners who are writing one for the first time. For residency applicants, concurrent with the submission of a CV is a letter of intent. A letter of intent acts as a notification of an individual's application for a residency or employment. It is an excellent

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**Resumes are not appropriate for residency candidates.**

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opportunity to highlight the virtues of one's CV and to fill in any gaps that may appear on a CV due to life circumstances.

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**The potential employer should be able to review a CV quickly to ascertain a candidate's work experience and educational background.**

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The term *curriculum vitae* literally means “course of one's life.” The CV has come to be a record of one's relevant professional history and accomplishments presented in a concise, readable format. This differs from a resume, which is a skill-based, extremely concise one- or two-page document written to obtain a particular position. The CV is more thorough and contains a complete record of one's experiences, not just a listing of skills and previous employers. The potential employer should be able to review a CV quickly to ascertain a candidate's work experience and educational background. The CV of a pharmacy residency candidate includes elements such as advanced pharmacy practice experiences completed, project experience, publications and presentations, extracurricular activities, and other pertinent facts.<sup>1</sup>

## GENERAL FORMATTING FOR CURRICULUM VITAE AND LETTERS OF INTENT

In general, the CV and letter of intent are printed on one side of good quality white (or near white) 8.5" × 11" paper. The layout should be highly organized with ample white space, justified to the left margin, and with 1-inch margins on all sides. The text font should be consistent, with preference oftentimes given to a sans serif font (e.g., Arial, Tahoma, Verdana). The fonts are generally 10–12 points and should never be less than 10 points. The formatting should be consistent throughout the documents.

For CVs, use boldface, capital letters, or underline to make category headings stand out, as appropriate. In addition, a varied design format (e.g., bullets, lines, shading) can be used to define transitions between sections. Information should be presented in a consistent format, either in chronological or reverse chronological order; the latter is most common and logical for residency candidates' CVs.

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**If the applicant anticipates sending documents via e-mail, consider saving the document as a PDF file.**

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If the applicant anticipates sending documents via e-mail, consider saving the document as a PDF file, which keeps the formatting consistent among computers. It is important to exclude information from CVs regarding physical characteristics and other personal information, such as age, gender, ethnicity, marital status, and political and religious affiliations.

## LETTER OF INTENT STRUCTURE

The structure of the letter of intent will vary based on the individual and the residency program to which the candidate is applying. The candidate should follow the application guidelines closely to ensure the letter includes all the required elements. Some programs have specific information that must be

included in the letter. Although there will be common items that can be cut and pasted from one letter of intent to another, each letter should be unique.

It is important for the applicant to write the letter in a professional way that follows a business letter format. The letter should be written in first person, but most people argue that the initial paragraph should not begin with “I.” By following a standard format, residency programs can consider the applicant quickly along with the probable high number of other applications. **Appendix A** of this chapter provides an example letter of intent.

### • Detailed Elements

The letter of intent starts with an introductory paragraph. This short section expresses the applicant’s interest in the program, which should identify the organization directly. The paragraph may also contain comments regarding how the applicant learned about the residency program, particularly if it is through a personal connection to the program, such as a former resident or a discussion with a program representative at a meeting. This paragraph may also highlight aspects about the program that are particularly attractive to the candidate—the more specific, the better.

The next section highlights abilities and why the applicant should be chosen for an interview. The goal is to show why the applicant is a valuable candidate the program should choose for an on-site interview. This section will vary greatly from one applicant to the next and may contain more than one paragraph. It is important to highlight any evidence that the applicant has leadership qualities, as well as any experiences that make the applicant stand out from others. The applicant should word this section to emphasize key attributes and abilities. Overt bragging is a negative, though the letter of intent is not a time to be humble, either. If any apparent gaps exist in an applicant’s CV or transcript, such as taking a year off from pharmacy school to attend to an ailing family member, it is important to explain the gaps here.

The final paragraph of the letter provides a conclusion. This short ending reiterates the specific name of the program and, at a minimum, expresses the applicant’s level of interest. This paragraph may also restate how the residency program could benefit from the applicant.

## CURRICULUM VITAE STRUCTURE

CVs differ greatly in their structure from person to person, and particularly from profession to profession. CVs for pharmacists should contain certain common elements. The applicant’s full legal name or first name, middle initial, and last name along with contact information should be prominent on the top of a CV, including permanent and current addresses and a professional e-mail address. Consider including phone numbers for day and evening and a fax number, if applicable. Headers or footers may include the name, date, page number (e.g., Page 2 of 6), and “Curriculum Vitae,” which are helpful if pages get misplaced or out of order.

The sections that follow are supplemented by an example residency applicant's CV, as shown in **Appendix B** of this chapter.

### • Detailed Elements

Listing a professional goal or objective is optional; if it is included, it should not be too vague or too specific. If the candidate is seeking a particular residency, the objective should be consistent with the position.

Educational experiences should include courses of study in all institutions attended, including prepharmacy work. Grade point averages (GPAs)

**Pharmacy schools  
in the United  
States award  
the *doctor of  
pharmacy degree*.**

may be included if greater than 3.0, but it is best to exclude them if the GPA from one course of study (e.g., prepharmacy curriculum) is greater than 3.0 but another (e.g., pharmacy school) is not. The level of academic distinction (e.g., magna cum laude) also may be included, as applicable. Be sure to correctly spell the name of each institution and signify degrees.

Pharmacy schools in the United States award the *doctor of pharmacy* degree, not a *pharmacy doctorate* or *doctorate of pharmacy*.

Licensure and certifications can be listed early in the CV. However, this section may need to be minimized if the residency applicant has few or no items to list. For those seeking a postgraduate year one (PGY1) residency, certificates and registered internships should be listed. Postgraduate year two (PGY2) residents should also list pharmacy licenses.

Work and professional experiences should contain a listing of jobs or internships previously and currently held. Some candidates also include bullet points about each position to describe the activities performed. If this is done, then several rules should be followed. First, a general rule of outlining is to include at least two points per position. Additionally, ensure that the tense of each position and task is correct (e.g., one does not “dispense” medication at a job that is no longer held). Nonpharmacy positions may be included, particularly for candidates with significant experience before attending pharmacy school. Ensure that there are no unexplained gaps in the work experience. Although education easily explains a lack of employment, a gap between jobs without concurrent schooling may look questionable to a potential employer. If such a gap exists, consider explaining it up front in the letter of intent.

A listing of pharmacy practice experiences (introductory and advanced) is given in a student pharmacist's CV, but the elements to include when listing them can be confusing. Include all completed and pending experiences (if they have been scheduled) on the CV, and for each one include the preceptor's correctly spelled name and credentials, site of the experience, and dates they were completed. Preceptor listings are more important than they may seem. These listings may serve as a conversation point during an interview or provide a personal connection between the applicant and the interviewer.

Other sections that may be listed at this point in the CV depend on the achievements of the applicant. Honors and awards should be listed



prominently in the CV if there are notable achievements. The same holds true for research experience, publications, and abstracts or posters.

Research experience is attractive to many residency programs, since the completion of a major project is an expectation of a residency. All research experience should be listed, from both pharmacy school and any undergraduate or other experience. Be sure to include the correctly spelled name of any advisors. Overall, research experience is a significant positive. However, be aware that residency programs are clinical programs, and they may question if a student with a very high degree of basic science research experience is well suited for a clinical training program. This can be explained in the letter of intent or during an interview.

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**Overall, research experience is a significant positive.**

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Publications are an obvious plus on any CV, especially for a young practitioner or student. Publications submitted for publication or in press (submitted and accepted) also may be listed. Most students will not have published anything at the time of the residency application process, and residency programs do not expect publications; however, articles in publications such as journals of local pharmacy associations, hospital newsletters, newspapers, and other nonscientific journals are worth listing. The formatting should follow the guidelines for biomedical journals. Check style guides such as *The Chicago Manual of Style* or the *AMA Manual of Style*. If the applicant has an abstract and/or poster, that can be listed separately.

The presentations area of a CV is one that can grow quite a bit while a student completes his or her educational program. Student pharmacists who are preparing a CV for the first time often wonder what counts as a presentation. Each presentation completed inside of the classroom and on advanced pharmacy practice experiences should be listed. This includes common presentations on rotations, such as journal clubs and case presentations. Never assume that the reader knows that students complete case presentations on rotations. Presentation on a CV may catch an interviewer's interest and spark a conversation about that topic that can help a candidate stand out. Some students include listings of journal club and case presentations, nursing in-services, and presentations to the medical team under the pharmacy practice experiences heading, but it is better to put them in a section of their own where they can stand out and are easier to read. In addition to the presentations that take place on rotations and in classes, any poster presentations at national, regional, or local meetings should be on the CV as well. Given the variety in types of presentations, it is important to include the type of presentation and audience to whom the presentation was given (e.g., lecture given to pharmacy faculty and students in Acute Care Elective (DPET 802), seminar given to pharmacy faculty and staff, in-service given to nursing and medical staff). A separate section of abstracts and posters is not a requirement, but it is an option that helps highlight a candidate's more unique work.

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**Never assume that the reader knows that students complete case presentations on rotations.**

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Many residency programs look specifically for evidence of leadership.

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Memberships in professional organizations, committees, and community activities should always be on a student's CV, either together or separately. Related to these items, leadership roles and positions on organizational committees should be highlighted. Many residency programs look specifically for evidence of leadership on candidates' CVs, and extracurricular

and professional organizations are good documentation. As with professional experience, this section may be an area where bulleted lists allow for elaboration on activities performed for a specific organization.

Finally, additional sections that some individuals may include are teaching experience and volunteer work outside of extracurricular activities. For teaching experience, list the job title (instructor, lecturer, teaching assistant) followed by the course title, including the course number. The affiliated institution should be included along with the date or date range during which the instruction was provided. Clinical and laboratory instruction also should be included.

### • **Translating Achievements into the Curriculum Vitae**

When composing a CV, it can be helpful to remember its purpose: to chronicle one's professional experiences and work. As such, it is important to be thorough, not humble, when listing achievements. Never assume that an interviewer is familiar with the applicant's academic program; even alumni of pharmacy schools cannot follow curricular changes. If something seems like a noteworthy accomplishment, it is, and it should be listed in the CV. Remembering past achievements, presentations, and positions can be challenging, so it is best to keep a CV current with each accomplishment as it is completed to avoid suffering from a lack of recall later. For all items listed on the CV, maintaining a folder of handouts, slides, and other related materials is helpful when it comes time to prepare for an interview (see Chapter 10, "The Residency Applicant's Portfolio," and Chapter 14, "The Onsite Interview").

### • **Is That Enough?**

Again, there are no fixed rules for how big a CV should be or even what content it should include. A CV grows as one's career progresses, and the relatively short CV of a student pharmacist midway through a professional program will become much longer after a year of advanced pharmacy practice experiences. Although it is important to be thorough in constructing a CV, the content must be legitimate. Experienced interviewers can easily identify a CV that is being stretched with obvious fluff. Anything listed on the CV is fair game during an interview, so be prepared to discuss any listed topic.

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## THE CURRICULUM VITAE AS A LIVING AND CHANGING DOCUMENT

As a record of professional accomplishments, the CV changes over time. Eventually, as one progresses from student to resident to clinician, the magnitude of accomplishments generally increases, and the content of the CV should follow. Student CVs often contain more detail about lower-level presentations, advanced pharmacy practice experiences, and course work compared to CVs of more experienced practitioners. There is nothing wrong with that, and the more content on a CV that can catch a reviewer's eye, the better. Pharmacy residents rotate through many clinical areas, complete multiple advanced pharmacy practice experiences, and design and implement clinical research projects. All of these areas should be included on a CV as they are achieved. The CVs of more experienced practitioners usually lack areas like rotations completed and in-house presentations like journal clubs; these are eventually replaced by poster and platform presentations at local or national meetings.

### • Dos and Don'ts

Although each person's CV is unique and few true rules exist for CV writing, there are a few things to avoid. Keep in mind that the CV is meant to be easily read, and any CV that confuses the reader has failed in its purpose of conveying experience clearly. A summary of common dos and don'ts is listed in **Table 9-1**.

**Table 9-1 Dos and Don'ts in CV Preparation**

<b>Do</b>	<b>Don't</b>
Keep the CV professional from start to finish.	Include spelling or grammatical errors.
Include current contact information, including a professional e-mail address.	List a casual-sounding e-mail addresses (e.g., "cheerfan23@email.com") or have an unprofessional voice mail greeting.
List the entire CV in either chronological or reverse chronological order.	Shift the order of the CV from section to section.
Use the correct tense when describing current and past positions.	Include personal information that would not be appropriate for interview discussion.
Spell all names correctly on the CV with correct degrees and other credentials.	Use a large font and wide margins to make the CV appear longer than it is.
List the degree or anticipated degree correctly.	Use CV or resume templates in word processing programs.

### • **Bragging Versus Explaining**

Someone reading a CV should quickly become familiar with the writer's body of professional work and accomplishments. Those accomplishments need to be listed in order to impress, but they should not be listed in a way that is disproportional to actual roles on projects or positions in organizations. For example, student pharmacists or residents who were lab technicians on funded studies should not list a \$1.5 million grant on their CV, but rather they should simply describe the activities performed as a study coinvestigator or coordinator. Additionally, wording group projects as solitary accomplishments can backfire if the CV reader is familiar with the other members of a group. Be complete, but be honest.

### • **Personal Versus Professional**

The CV is a listing of professional work, not one's personal life. Omit any content from the CV that could be seen as controversial. If an e-mail address can link someone to a page of photos from spring break, it is best to use another one (e.g., Gmail account).

## **STANDOUT FEATURES OF EXCELLENT CURRICULUM VITAE**

Neatness, professionalism, and appropriate content make a CV stand out from those in a crowd of similarly accomplished people. Nothing substitutes for content; however, more accomplished candidates may have an apparent advantage, but CVs that hide those accomplishments in poor organization, grammatical errors, or a lack of clarity are significant detractors. Ensure that there are *absolutely* no spelling errors on the CV. Proofread the CV several times and have it reviewed by a third party. It also may be helpful to have someone with no medical background review the CV to provide a different perspective.

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**Ensure that there are *absolutely* no spelling errors on the CV.**

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Students should not be intimidated by the more lengthy CVs of residents they work with or other more experienced practitioners. Everybody starts somewhere, and in time, the CV naturally grows.

### **KEY POINTS**

- A letter of intent acts as both a notification of an individual's application for a residency and an opportunity to highlight individual strengths.
- The CV has numerous standard components along with several areas that are optional based on the background of the applicant.
- The CV should be clear, thorough, honest, and professional; it also should be highly organized, devoid of spelling and grammatical errors, and easy to read.

- The CV should highlight positions of leadership and involvement in organizations outside the classroom; many residency programs actively look for evidence of leadership skills.
- Anything listed on a CV is fair game during an interview.

### REFERENCES

1. Gallagher JC, Wodlinger Jackson AM. How to write a curriculum vitae. *Am J Health Syst Pharm.* 2010;67:446–447.

## APPENDIX A

### Example Letter of Intent

December 19, 20XX

Jason C. Gallagher, PharmD, BCPS  
Director, Pharmacy Practice Residency  
Temple University Hospital  
Department of Pharmacy Services  
3401 North Broad Street  
Philadelphia, Pennsylvania 19140  
jason.gallagher@temple.edu

Dear Dr. Gallagher:

It is with great enthusiasm that I submit this letter of intent for the postgraduate year one (PGY1) pharmacy residency at Temple University Hospital. I learned of this program from one of my mentors, Dr. John Smith, and he spoke very highly of the program. Since learning about the residency, my interactions with the program leadership and current residents demonstrate this residency is exactly what I seek in postgraduate training.

The enclosed application materials and curriculum vitae provide an overview of my training and experience. I am a motivated, hardworking student who would excel during your residency. In May, I will graduate from the Bill Gatton College of Pharmacy, East Tennessee State University (ETSU). During my time at ETSU, I have been active both on local and statewide levels. Additionally, I have chosen to take on unique opportunities to grow and develop as a student pharmacist, including certificates, research opportunities, distinctive electives, and a publication. For one of my didactic electives, I enrolled in Pharmacy Practice Research/Scholarship. This experience gave me firsthand knowledge regarding research, and I was fortunate to present the study findings as a poster at the American College of Clinical Pharmacy Annual Meeting. I have also endeavored to complete challenging advanced pharmacy practice experiences (APPEs), including an extra APPE beyond program requirements. Overall, ETSU is a challenging Doctor of Pharmacy program that has developed my critical problem-solving skills.

The residency program at Temple University Hospital distinctively meets my professional goals. I am a goal-oriented individual that would excel in the program. I hope the residency selection committee looks favorably on my application.

Sincerely,

John J. Doe, BSc, Doctor of Pharmacy Candidate  
Bill Gatton College of Pharmacy  
East Tennessee State University

## APPENDIX B

### Example Curriculum Vitae

#### *Curriculum Vitae*

#### **John J. Doe, BSc, Doctor of Pharmacy Candidate**

114 Anywhere Avenue  
Johnson City, Tennessee 37614  
johnjdoe@gmail.com  
555-867-5309

*December 20XX*

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#### **Professional Goal**

To secure a postgraduate year one (PGY1) residency and excel as a pharmacist who provides direct patient care in a hospital setting.

#### **Education**

Doctor of Pharmacy Bill Gatton College of Pharmacy East Tennessee State University Johnson City, Tennessee Current GPA 3.7	Expected, May 20XX
Bachelor of Science in Chemistry Duke University Durham, North Carolina GPA 3.6	20XX–20XX

#### **Licensure and Certifications**

Advanced cardiac life support (ACLS)	20XX–present
Pharmacy-based immunization delivery certificate (APhA)	20XX–present
Pharmaceutical care for patients with diabetes certificate (APhA)	20XX–present
Basic life support (BLS)	20XX–present

**Work and Professional Experience**

Pharmacy Practice Intern  
East Tennessee State University  
Medical Center  
Johnston City, Tennessee

20XX–present

Pharmacy Practice Intern  
Crouch’s Ideal Drug Store  
Asheville, North Carolina

20XX–20XX

**Pharmacy Practice Experiences***Advanced*

Infectious Diseases Elective, APPE 7028  
Temple University Health System  
Jason C. Gallagher, PharmD, BCPS  
(AQ Infectious Diseases)

Expected, April 20XX

Cardiology Elective, APPE 7039  
University of North Carolina Hospitals  
Jo Ellen Rodgers, PharmD, FCCP, BCPS  
(AQ Cardiology)

Expected, March 20XX

Critical Care Elective, APPE 7019  
University of Arizona Medical Center  
Brian L. Erstad, PharmD, FASHP,  
FCCM, FCCP

Expected, February 20XX

Pediatrics Elective, APPE 7024  
Medical University of South Carolina  
Children’s Hospital  
Dominic P. Ragucci, PharmD, BCPS

Expected, January 20XX

Oncology Elective, APPE 7034  
East Tennessee State University  
Medical Center  
John B. Bossaer, PharmD, BCPS

November 20XX

Acute Care Practice II, APPE 6503  
East Tennessee State University  
Medical Center  
Freddy M. Creekmore, PharmD, BCPS

October 20XX



Ambulatory Care Practice I, APPE 6004 September 20XX  
 East Tennessee State University  
 Family Physicians  
 L. Brian Cross, PharmD, CDE

Acute Care Practice I, APPE 6003 August 20XX  
 East Tennessee State University  
 Medical Center  
 David W. Stewart, PharmD, BCPS

Community Practice, APPE 6002 July 20XX  
 Ukrop's Pharmacy  
 Jean-Venable Goode, PharmD, BCPS,  
 FAPhA, FCCP

Institutional Practice, APPE 6001 June 20XX  
 University of North Carolina Hospitals  
 Stephen F. Eckel, PharmD, MHA, BCPS,  
 FAPhA, FASHP

### ***Introductory***

Clinical (third year), PMPR 4341 20XX–20XX  
 East Tennessee State University  
 Medical Center  
 Johnson City, Tennessee

Institutional Practice (second year), PMPR 4332 Summer 20XX  
 East Tennessee State University  
 Medical Center  
 Johnson City, Tennessee

Community Practice (second year), PMPR 4322 Summer 20XX  
 Bob's Pharmacy  
 Johnson City, Tennessee

Institutional Practice (first year), PMPR 3141 Spring 20XX  
 East Tennessee State University  
 Medical Center  
 Johnson City, Tennessee

Community Practice (first year), PMPR 3141 Fall 20XX  
 SVC Pharmacy  
 Johnson City, Tennessee

## Honors and Awards

Rho Chi Honor Society, Bill Gatton College of Pharmacy (ETSU), 20XX

Dean's List (all semesters), Bill Gatton College of Pharmacy (ETSU), 20XX

Phi Lambda Sigma Pharmacy Leadership Society, Bill Gatton College of Pharmacy (ETSU), 20XX

Regent (President), Epsilon Zeta Chapter of Kappa Psi, Bill Gatton College of Pharmacy (ETSU), 20XX

Class President (first year), Bill Gatton College of Pharmacy (ETSU), 20XX

## Research Experience

Doe JJ, Crouch MA. A cost-effectiveness analysis of anticoagulation strategies in atrial fibrillation; 20XX–20XX.

## Publications

Doe JJ. New guidelines from US, international societies. *Cardiovasc Pharmacother Q Rep*. 20XX;3:4.

## Abstracts and Posters

Doe JJ, Crouch MA. A cost-effectiveness analysis of anticoagulation strategies in atrial fibrillation. Abstract presented at: 20XX ACCP Annual Meeting; October XX–XX, 20XX; Nashville, Tennessee.

## Presentations

Doe JJ. Statins for the acute treatment of aneurismal subarachnoid hemorrhage. Clinical Seminar II (PMPR 5461). Johnson City, Tennessee. Expected January X, 20XX.

Doe JJ. Drug-drug interactions with new oncology agents. In-service provided to healthcare professionals in oncology. November X, 20XX.

Doe JJ. Steroid use in patients with chronic obstructive pulmonary disease: a critical appraisal. In-service provided to healthcare professionals in adult medicine. October X, 20XX.

Doe JJ. An update of the American Diabetes Association (ADA) guidelines. In-service provided to healthcare professionals in the ambulatory care clinic. September X, 20XX.

Doe JJ. New anticoagulant strategies in atrial fibrillation. In-service provided to acute care team. August X, 20XX.

### Memberships

Tennessee Pharmacists Association	20XX–present
Rho Chi Honor Society	20XX–present
Phi Lambda Sigma Pharmacy Leadership Society	20XX–present
American College of Clinical Pharmacy (ACCP)	20XX–present
American Society of Health-System Pharmacists (ASHP)	20XX–present
Kappa Psi Pharmaceutical Fraternity	20XX–present

### Committees

Dean's Students Advisory Council (DSAC)	20XX–20XX
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### Community Activities

Johnson City Downtown Clinic Johnson City, Tennessee	20XX–present
Remote Area Medical (RAM) Bristol Motor Speedway Bristol, Tennessee	April 20XX

