



University of
Pittsburgh

School of
Pharmacy

2021 Match Day Results

University of Pittsburgh School of Pharmacy

Summary created by Pitt Pharmacy's SSHP Chapter

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Description

This data was collected from Class of 2021 University of Pittsburgh School of Pharmacy students, following the second round of the ASHP Resident Matching Program. Student responses were anonymously compiled with the goal of better understanding the match process. Thirty students responded to the survey and provided answers to applicable questions.

The first section contains general survey results for all thirty students. It provides a visual representation of data regarding application to and results of the match. It also contains a list of programs students have matched with. For any questions specific to programs, please see the corresponding slide set (PDF) sent out by SSHP, to get in contact with respective students.

The second section contains general advice, written by students, about residency application preparation, ASHP Midyear (where the annual residency showcase is held), the interview process & ranking considerations.

The subsequent sections in this document are student reflections within several different areas of pharmacy practice. The sections with at least one response include: pharmacy practice (hospital/ambulatory care), community pharmacy practice, managed care, and fellowships. Within each area, there is information about the interviewing process, presentation and case solving requirements, and preparation strategies.

Please remember that each student experience is unique, and there are many resources to help you prepare for your own post-graduate training!

General Results

The following data was collected from the 30 students who responded to the survey:

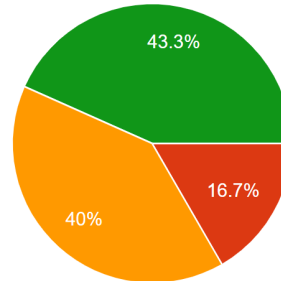
Number of residency programs applied to:

1 to 3 programs: 0/30 (0%)

4 to 6 programs: 5/30 (16.7%)

7 to 10 programs: 12/30 (40%)

11+ programs: 13/30 (43.3%)



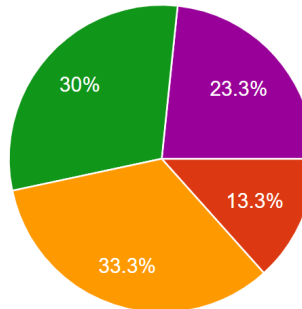
Number of interviews received:

1 to 3 interviews: 4/30 (13.3%)

4 to 6 interviews: 10/30 (33.3%)

7 to 10 interviews: 9/30 (30%)

11+ interviews: 7/30 (23.3%)



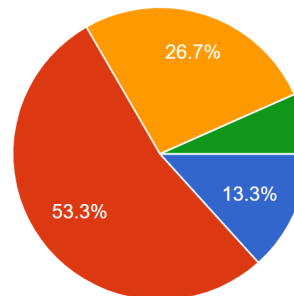
Out of all the programs you applied to, how many would you consider to be “reach” programs?

0 programs: 4/30 (13.3%)

1 to 3 programs: 16/30 (53.3%)

4 to 6 programs: 8/30 (26.7%)

7 to 10 programs: 2/30 (6.7%)



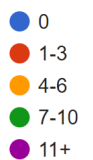
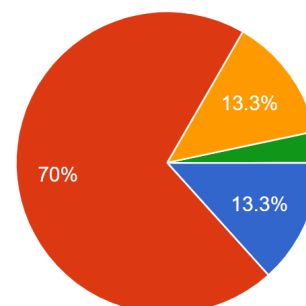
Out of all the programs you applied to, how many would you consider to be “safety” programs?

0 programs: 4/30 (13.3%)

1 to 3 programs: 21/30 (70%)

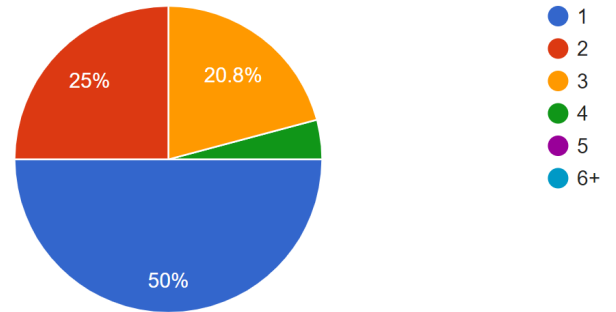
4 to 6 programs: 4/30 (13.3%)

7 to 10 programs: 1/30 (3.3%)



Of the 24 students who have matched & provided us with feedback:

- ❖ **12/24** students matched with their **#1 program** (as ranked on PhORCAS)
- ❖ **6/24** students matched with their **#2 program** (as ranked on PhORCAS)
- ❖ **5/24** students matched with their **#3 program** (as ranked on PhORCAS)
- ❖ **1/24** students matched with their **#4 program** (as ranked on PhORCAS)
- ❖ **0/24** students matched with their **#5 program** (as ranked on PhORCAS)



Residency/Fellowship Programs Pitt Pharmacy Class of 2021 Matched With:

- ❖ Kaiser Permanente Medical Center
- ❖ Ann & Robert H. Lurie Children's Hospital of Chicago
- ❖ UPMC Magee Women's Hospital
- ❖ Moses Cone Memorial Hospital
- ❖ University of Maryland Medical Center
- ❖ VA Pittsburgh Health Care System
- ❖ OhioHealth Riverside Methodist Hospital
- ❖ Lebanon VAMC
- ❖ Post-Doctoral Fellowship in Clinical Safety and Risk Management at Merck in affiliation with Rutgers University
- ❖ Indiana University Health
- ❖ Thomas Jefferson University Hospital
- ❖ The Centers for Family and Children
- ❖ Mountain Area Health Education Center (MAHEC)
- ❖ UC San Diego Health
- ❖ Capital Rx PGY1 Managed Care
- ❖ University of Washington Medical Center
- ❖ UPMC McKeesport
- ❖ Daiichi Sankyo Business Development
- ❖ Children's Hospital of Philadelphia
- ❖ Pennsylvania Hospital
- ❖ RevHealth with IPhO
- ❖ University of Kentucky HealthCare
- ❖ UPMC Presbyterian Shadyside
- ❖ Duquesne/St. Barnabas LTC/Geriatrics

General Advice

1. Preparation

- Get involved
 - I applied to general PGY1 acute care programs, and I really think the type of internship made a huge difference. I worked in a hospital for 3 years, and I think my peers with only community experience got less interviews. Type of internship is very often on the screening checklist, so try as much as possible to get a hospital internship
 - Do ambitious and exciting work ahead of time (during school) so you don't have to "sound cool" during interviews. You can just be yourself and talk about your experiences.
- Start early!
 - I highly recommend starting to prepare yourself for residency applications early. The initial selection for interviews is essentially based off meeting requirements on your CV (e.g. hospital internship experience, publications, research, presentations, leadership, involvement, rotations, etc.). If you know you potentially are seeking residency, then find a mentor early in pharmacy school to help prepare you for the application process!
- Build a strong CV
 - Have as many people as possible edit your cv and resume
 - Format of your CV does not matter. Do not spend a lot of time trying to find a format, but spend time making sure it looks clean, minimal white space, and try not to go over 6-7 pages
 - Keep you CV updated
 - I would recommend a max CV length of ~5-6 pages with all of your best accomplishments/involvement.
 - Keep your CV up to date as you do rotations! Be sure to have a lot of people review your CV as well.
 - Have people not in pharmacy or health sciences review your letters of intent and CV -- they will read more for format and grammar, which is helpful! Have as many people as possible read over them because after a while they all blend together and look the same.
- Network and form positive relationships
 - USE YOUR CONNECTIONS. Have professors and current residents read your CV/letters of intent. Reach out to alums of the Pitt program that are at those institutions and don't be afraid to network with anyone. This helps immensely.
 - Reach out to current PGY1s and past graduates! They are the ones that have the best information about the programs and understand the process of the applying. This year I met amazing people on rotations that seriously helped me through the application process. It is a lot of work and can be stressful, but it is worth it.
- APPE rotations
 - Get to know residents at your APPE sites as they will be a tremendous help and give you tips/tricks for applying since it is all so fresh for them.

- Be a "try hard" on your APPE rotations to gain great experiences and get good letters of recommendation. Write down different kinds of experiences you have (good patient encounters, experiencing conflict, working inter-professionally) so you remember them to talk about during interviews.
- Midyear residency showcase
 - Go to program showcases as much as possible and learn about as many programs as possible before deciding where to apply
 - Most of my interviewers remembered me from Midyear - make sure to make a good impression there. Not with your CV or anything, but by asking good questions - come prepared! You'll thank yourself later.
 - I highly suggest visiting 10+ programs during Midyear. I was able to gauge how well I would click with certain programs before even applying, and my initial list of programs changed because of Midyear conversations.

2. Application Process

- Apply to an appropriate range and quantity of programs
 - Apply to a range of programs because one type might like you better than another. Also if you can, don't let location limit you
 - Don't apply to too many places - obtaining too many interviews can put you at a disadvantage/ make an even more stressful interview season.
 - Be honest with yourself and don't feel the pressure to apply to a certain number of places. You need to save as much energy as possible for the programs you really care about!
 - Don't be afraid to apply all over the country! A lot of areas are very saturated and it can help if you a lot if you are willing to apply to less saturated cities/states. You will be very busy during residency year, so it doesn't matter if the hospital is somewhere "cool" or not because you will be spending most of your time at the hospital anyways.
 - Apply to a range of programs! Don't apply to all "reach" large AMC's that are top programs, but also other smaller programs. Some of my smaller programs I applied to ended up being at the top of my list because I felt way more connection and support from that program even in a virtual interview.
- Do your research
 - Work with your mentors and ask their opinions on the places you are applying to
 - Keep notes on the programs you apply to - from the info to their websites to your conversations with them at midyear - this will give you plenty of material for your letters of intent.
 - If you can, find out your dealbreakers and must-haves early on in the process and look for programs that match those. Also realize that there may not be a "perfect" program out there. When I submitted my rankings, I only had one program that I felt truly met all of my needs and wants.
 - Try to identify the things that are important to you (geography, # of coresidents, availability of rotations or PGY2s in your interest areas) and keep track of how the programs you are researching stack up.

- You still need work life balance in your residency. Yeah, it's supposed to be an intense year, but it's not ok if it breaks you down rather than building you up. Don't be afraid to ask about work hours and time commitment outside of work; you deserve to be happy in your residency.
- Talk to the current residents! This is often more important than talking to the RPDs/preceptors. The residents will often be realistic with you. Ask about work life balance and how they've managed - you may not always get a straight answer, but you can often tell if they're really stressed or not
- Don't think that the "big name" residency programs are the only options available. Do your research on other programs and include those in your application process as well.
- Stay organized
 - As far as the application, make sure to get organized ahead of time with program-specific letter of intent, CV, letter of recommendation, and supplemental requirements. I made a chart to keep it all straight.
- Know your interests and passions
 - I would say to make sure that you want to do a residency. It is a year-long commitment that is a lot of work. You should not do one just because you feel like you should or because your friends are doing one. You should do one because you want to do one. I would also say to trust your gut and go with the program that you feel is the best for you. This means you should consider location, learning opportunities, size of the hospital, research opportunities, etc. Make sure that you are only applying to and ranking programs that you could actually envision yourself working at and living in for at least a full year.
 - Don't worry about what programs your friends/peers are applying to - big name programs are not everything. Find the best program to fit YOU. If that's one that's a little less "prestigious" but really gives you what you need, then go for it! It's ultimately what you do in the residency, not the name of the program.
 - Only rank programs you're interested in and would be excited to match with
- Personalize/prepare your letter of intent
 - For LOI, you can use the same skeleton but change one paragraph to make it specific to the program.
 - The process of writing your LOI can be daunting. Just start writing and have lots of reviewers look at it throughout the process. It is best to have the skeleton of your LOI done prior to midyear and then you can add in extra program details to each one afterward as needed. Your LOI's don't need to be drastically different between programs. I changed 4-5 sentences for each one.
- Letters of recommendation
 - Ask for your letters of recommendation early and make sure to clarify with your letter writers that they can "strongly recommend" you
- Stay motivated and encouraged
 - The application phase can be draining! Take it one step at a time and you'll get through it.
 - You are a much better candidate than you think, be confident!

- Lean on others who went through or are going through the same process as you for support. It is a long and grueling process, but staying focused and motivated with others will help you maintain your sanity throughout.

3. Interview Advice

- Be your true self
 - Be yourself! You'll probably have to do presentations for interviews and the ones I got the best response were the ones I was most passionate about.
 - Always be yourself, but professionalism goes a long way.
- Brainstorm/research interview questions
 - Write down a list of stories from work, rotations, school, etc that you can use to answer "name a time when you _____" questions. It helps so much to have reminders on paper during interviews.
- Practice
 - Practice interview questions with professors, people who have been through the process
 - Make sure to also gauge your compatibility with the interviewers as well. Practice interview questions with your friends. Don't give up and stay persistent!

Helpful tips for interviewing:

- Compile a list of questions to ask at every interview so you can directly compare programs and also so you don't have to think of questions on the spot.
- Google "residency interview questions" and prepare answers for them. Think of tough situations that you had to deal with at work and on rotations. I would also briefly review big disease state Guidelines
- Just be comfortable and be yourself!
- Make sure that in the interviews, who you are as a person shines through. The program you're interviewing with wants to make sure that, above all, you are someone they want to work with for the next 1-2 years.
- Practice out loud A LOT. Have a "tell me about yourself" answer memorized because you will get asked it during every interview. Be yourself, try not to sound scripted/like a robot.
- Be prepared for situation/behavioral questions - try to think of examples from our rotations/internships that could apply to multiple scenarios. Be concise but answer the question fully. Always be positive and prepare a LOT of questions for you to ask at the end.
- Easier said than done, but don't stress too much. The night before each interview, I usually compiled a list of reasons why I applied there, and any questions I had that I was unable to find on their website or through Midyear. If I had my interviewer schedule ahead of time, I also briefly looked into each person at least to know their practice area or what elective they taught so I could ask about those. That was about the extent of my preparation unless there was a required presentation.
- During the interview, I would write down all my interviewers' names and a brief note about something we discussed - an elective, research opportunities, advice, etc - so I

could email them a quick, personalized thank you note afterwards. I would also recommend writing down pros and cons of each program right after interviewing - everything tends to blend together after the first few.

- The interview process is even more draining than the application phase, especially if you have several lined up in a row. It can be daunting, but take it one interview at a time.
- Be yourself, but take it seriously and be professional. Be ready to solve problems on the spot, it's not just "normal" interview questions. For example, I was asked to calculate the amount of trees in central park based on logic.
- The interview is REALLY important. Make sure you have "tell me about yourself", "why do you want to do a residency?" and "why this residency program?" down. Try to have various examples/situations to use for behavioral questions.
- Friendliness is underrated - being able to make small talk and show interest in your interviewers is really important.

Virtual experience:

- I feel like it was definitely less stressful
- I was able to have a lot of papers with notes about the program, prepared questions, stories I wanted to tell, etc right in front of me without the interviews seeing my materials, which was really helpful.
- I definitely felt like it was a more competitive year for applicants because you could essentially apply/interview anywhere, cost-permitting, without having to physically be there. I could have never interviewed at the number of programs I did, if they were not virtual. With that being said, the most difficult part was not getting to physically see the place where I will now call home and the place where I will work and spend 99% of my time. I missed that aspect of interviews.
- I focused more heavily about how I could make myself remembered by developing personal connections virtually. It's difficult to make that same impression, or make any impression at all, when you're all just looking at a screen, but I consciously tried to insert personal conversations or information about myself outside of school which helped me develop those relationships
- I tried to attend as many individual virtual program showcases instead of talking to the programs at ASHP Midyear. The individual showcases were more personal and I had the chance to talk to the RPD and residents one-on-one more.
- More awkward. Harder to gauge if the interviewers are engaged. It's very tempting to write out answers and read from the screen, but do not!! Virtual recruitment is less cut throat and allowed for more time for preparation because fellowship interviews are not crammed into one day. Do not take this extra time for granted and do your due diligence.
- I liked the virtual process financially and ease of interviewing during rotations, but it was definitely more difficult in the sense that you couldn't get as good of a feel for some programs or see the hospital if you haven't done a rotation or worked there. However, if you feel comfortable during an interview, definitely take that for face value because connecting virtually is not easy and I felt the most connected at the place where I matched !

Pharmacy Practice-Hospital & Ambulatory Care (24)

Overview

- Each interview was structured differently. However, most often I was given some time to work through the case and was then asked to present and discuss the case to preceptors or current residents.

Details about presentation experience

- For a clinical presentation, I used a patient case presentation I had made during a previous APPE. For another two interviews, I had to give a 5-10 min presentation about myself.
- My University of Kentucky interview utilized the MMI (multiple mini interview) format, which is unusual for residency interviews. They asked scenario-based questions that had nothing to do with pharmacy because they wanted to see what qualities and attributes you had as an individual. Some of the scenarios included explaining global warming to an 8-year-old, managing a high car accident rate in your town if you were the mayor, if you were the coach of a team and your star players were acting out, and more.
- When I gave a presentation, I just shortened a presentation I had given previously, if the presentation had to be on a pharmacy-related topic.
- Most of the presentations and cases that were asked of me were on the spot with the exception of an informal “About Me” presentation. Some cases allowed you to use resources while others did not. My APPE rotations prepared me well for these cases but reviewing major guidelines was also helpful in this process.
- Most cases were individual, but I did have one case where I worked with another candidate and presented our answers together - this was more about seeing how you work as a team than to see clinical knowledge. I'm sure they paid attention to things such as whether we took each other's ideas into account, how we responded if our ideas differed, etc. I don't think I would've prepared differently in the future because the type of case you get will be so unpredictable.

Details about clinical case experience

- During clinical cases I did not prepare beforehand. Sometimes they give you 10-15 mins to use resources to make a plan, or sometimes they just want you to answer off the top of your head.
- For the clinical cases, I recommend just reviewing general topics beforehand, such as insulin management in an inpatient, cardiology-issues, infectious diseases, etc. They do not expect you to know everything, so it is important to verbalize when you do not know what you would do in a situation and then explain your thought process of how you would find the answer. The programs love to see your problem-solving and critical thinking skills.
- Clinical case was given to me at the start of the interview, I had 30 minutes to write a problem list, assessment, and plan, and then present it.
- I used the RxPrep NAPLEX book to review common disease states (CAP, UTI, Heart Failure, ACS, COPD exacerbation, Diabetes, etc) and this seemed to cover most of the concepts I was asked about. If you do not know the answer, don't guess and make a mistake - it is generally better to explain your thought process or how you would look something up and then follow-up with that interviewer with your answer after the interview

Details about clinical questions

- Most clinical questions were given on the spot. The presentation I was able to prepare ahead of time, and I edited one that I previously used on a rotation (used the suggestions my preceptor gave me)
- I had a few clinical questions during interviews that were just thrown in that I had to answer on the spot.
- I had a mix of situations regarding clinical questions. For some interviews, I was given a list of topics to prepare for (UTI, CAP, PE/DVT). In those interviews, I was asked 1-2 clinical questions about those topics only.

Additional components: In addition to presentations, cases, and clinical questions, what were some unique interview components you were required to do?

- Presentation about yourself
- Answer situational questions
- Team presentations
- Group interviews
- Prepare pre-recorded presentations
- Multiple mini interviews
- Answer audio interview questions

Required to give a presentation: 23/24 (95.8%)

Required to solve a case: 22/24 (91.7%)

Required to answer clinical questions: 23/24 (95.8%)

ARCO participation:

- Pharmacotherapy Scholars: 9/24 (37.5%)
- N/A: 4/24 (16.7%)
- Geriatrics and Palliative Care: 4/24 (16.7%)
- Global Health: 3/24 (12.5%)
- Pediatrics: 2/24 (8.3%)
- CLIP: 1/24 (4.2%)
- Research: 1/24 (4.2%)

Mock interviews: 3/24 (12.5%)

Preparation

- Faculty review of resume/CV: 16
- Faculty review of LOI: 14
- Faculty/Preceptor support for activities:
 - Dr. Nolin
 - Dr. Benedict
 - Dr. Coons
 - Dr. Horn
 - Dr. Jonkman
 - Dr. Connor
 - Dr. Berenbrok
 - Dr. Carroll
 - Dr. Hake
 - Dr. Keith Hylwa
 - Dr. Howrie

Community Pharmacy Practice (4)

Details about interview/presentation experience

- All suggested I use a presentation I did during APPEs and to NOT create a new one just for this interview. I just updated a presentation I did during one of my previous blocks using feedback I got from my preceptor after that presentation.
- Presentation #1 topic: short presentation (5-10 minutes) on a topic of my choice (had to be non-pharmacy related); Presentation #2: a short (5 minute) presentation about myself; Presentation #3: short presentation (10 minute) about something I was passionate about; Presentation #4: On the spot presentation about Soliqua (diabetic drug), was given 30 minutes in the interview to make the presentation, then presented it.
- My clinical cases were all patient counseling scenarios; this is common for community pharmacy residency interviews. Make sure to practice for this part, too!

Required to give a presentation: 4/4 (100%)

Required to solve a clinical case: 2/4 (50%)

Required to answer clinical questions: 2/4 (50%)

ARCO participation:

- Geriatrics and Palliative Care: 1/4 (25%)
- Global Health: 2/4 (50%)

Managed Care (2)

Details about presentation experience

- Presentations I was told beforehand to prepare a Managed Care topic of my choice about 20 minutes in length. I used a presentation I had completed during one of my APPEs. The clinical case I was not given any information beforehand but because it was virtual I was able to use resources while I worked up the case and then submitted it via email.
- Case presentation was given on the spot. I would definitely review the top disease states (asthma, pain, diabetes, hypertension) and know the medications commonly used and guidelines associated. Regarding the presentation, I ensured that I had peers review the material for grammar and spelling and practiced giving it orally a lot.

Additional components

- Create prior authorization criteria

Required to give a presentation: 2/2 (100%)

Required to solve a case: 2/2 (100%)

Required to answer clinical questions: 1/2 (50%)

ARCO participation:

- CLIP: 1/2 (50%)

Mock Interviews: 1/2 (50%)

Preparation:

- Faculty review of resume/CV: 1/2 (100%)
- Faculty review of LOI: 1/2 (100%)
- Faculty/Preceptor support for activities: N/A

Fellowship (4)

Details about interview

- I was able to prepare a presentation beforehand and was given free range as to what topic I presented on. I took a research topic that I completed on one of my industry rotations and created a presentation that I presented to 5+ different companies.
- Answer questions related to pharmaceutical industry experience and be able to fully articulate what the role is that I was applying to, why I wanted that role and why I wanted that company
- One was a presentation on anything I wanted. I chose a slightly scientific topic (dreams and the available data). Two were presentations related to the industry I was applying to. Luckily, I used a presentation I created from rotations and tweaked them to make it relevant. Because of this, I was extremely prepared for questions and the interviewers were impressed.
- I had to talk about breast cancer and about an antibody drug conjugate that's being used for triple negative breast cancer.
- I was given the details of the presentation two days before and then had to present. I would have had a faculty member review the slides if I had the chance to do it again.

Required to give a presentation: 4/4 (100%)

Required to solve a case: 0/4 (0%)

Required to answer clinical questions: 0/4 (0%)

ARCO participation: Business Administration 2/4 (50%)

Mock Interview: 1

Preparation

- Faculty review of resume/CV: 3/4 (75%)
- Faculty review of LOI: 2/4 (50%)
- Faculty Review of Presentation: 1/4 (25%)
- Faculty/Preceptor support for activities:
 - Ryan Green (Preceptor from Merck APPE)
 - John Riley
 - Lily Duong
 - Sheila Ryan

Words of Encouragement

- ★ Be yourself! The best interviews are the ones where you are able to highlight your passions and true interests.
- ★ You are learning about the program as much as the program is learning about you! Ask questions that will nurture your professional growth and work-life balance.
- ★ You are more competitive than you think! Stay motivated and stick it through until the end!