Residency Update:  
*Tis the Season!*

Writing Letters of Recommendation

by Jacob P. Gettig, Pharm.D., MPH, BCPS
Assistant Dean for Postgraduate Education

A pharmacy student planning to apply for pharmacy residency positions may ask you to write a letter of recommendation on his or her behalf. The American Society of Health-System Pharmacists (ASHP) Midyear Clinical Meeting is where many students get information about programs and finalize their list of desired residency positions. This large conference will take place December 8-12, 2013, in Orlando, FL. While it is difficult to say “no” to a student asking for a letter of recommendation, you should ask yourself a few things before agreeing to do so:

1. **Can you, with no hesitation, write a positive letter of recommendation for that student?** That is, would you recommend or highly recommend that student for a residency program? You may want to direct that student elsewhere if you are not, in good conscience, able to write that student a positive letter of recommendation.

2. **Do you have the time to write a thoughtful letter of recommendation or complete the standardized recommendation forms with well thought-out comments about the student?** Most students are applying to 8 to 12 residency programs. And while the Pharmacy Online Residency Centralized Application Service (PhORCAS) has made it easier and quicker for reference writers to submit multiple letters or forms for the same student, if you intend to individualize your letters/forms to each residency program, you will need to make sure you have the time to do so.

3. **Are there any conflicts of interest that you should consider?** Do you sit on the committee that makes decisions about which residency candidates to interview or rank? If so, writing a recommendation letter for a student applying to the program you’re involved in is probably not a good idea.

If you agree to write a letter of recommendation for a student, make sure you have the following information:  

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Ask the Office of Experiential Education
by Avery Spunt, RPh, M.Ed., FASHP

Dear Avery,

My friend and I are both preceptors for colleges of pharmacy in the Chicago area and work at different practice sites. Recently my friend revealed a situation that I feel is wrong, but I do not know what to say to him. My friend had a student that was very difficult to precept. This student did not like to be questioned, did not accept feedback, was very argumentative, and above all, did not have a good understanding of therapeutics.

When final evaluations were due, my friend was so worn down from arguing with the student that he gave the student a great evaluation, instead of giving a true evaluation with feedback. Is there something I could have done to help my friend?

Dear Preceptor,

This is a very complex situation, and your friend should reflect on his desire to continue to be a preceptor. If he wants to continue teaching, I would certainly recommend that he consider being re-trained and mentored.

Evaluating a student by giving him or her an untrue assessment is not fair to the student, to patients, or to future preceptors of this student. When future preceptors try to work with this behavior, it will be even harder for that preceptor to help the student change. The student will be under the impression that this behavior was acceptable before, so why is it not acceptable now?

My advice is that whenever a preceptor from any school has a problematic student, he or she should contact that school’s Experiential Director for help in working with these issues. Acceptable and unacceptable behaviors need to be clearly stated, and unacceptable ones need to have consequences within the parameters set forth by school’s published policies. I really hope you have an open discussion with your friend to help him see the consequences of not confronting this situation properly. If you have any concerns please call me at 630-515-6477.

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Preceptor Pearl: A Student’s Perspective

Editor’s Note: This installment of Preceptor Pearl offers a viewpoint from Morgan Joyce, a fourth-year student at CCP. Here she offers her insights on the most effective preceptor she has experienced thus far in her pharmacy education.

The first day I walked into my IPPE-3 Clinical Rotation I knew I was in for a challenging experience. I had heard that this preceptor was an extremely smart individual with high expectations of students. I was both nervous and excited to be entering a setting where I would have the opportunity to apply the clinical knowledge I had learned in the classroom.

After becoming acclimated with the site, the other students and I were assigned patients to review before going on rounds with the pharmacy residents, medical residents, and attending physicians. We weren’t given much direction; we were told that we would have 30 minutes to prepare. My nerves set in, but I thrived on this new challenge.

Upon discussing each of the patients with my preceptor, he seemed appreciative of my work, but also guided me in thinking about more clinical aspects of each patient case. If I had chosen a therapeutic plan that may not have been optimal, he asked me why I chose what I did. From there, he would ask me about other therapeutic options that I considered and had me explain the reasoning behind each choice. By justifying my choices, I was forced to think more in depth about each clinical situation I was asked to assess. My preceptor never told me that I was assessing the patients incorrectly, or diminished the work I had done.

Each day that I arrived at rotation, I knew I was in for a challenge. I knew I’d be faced with patients, cases, and questions that would force me to utilize my critical thinking skills. With each challenge, I knew my preceptor would be looking to me to see how I reacted in each situation; did I accept the challenge or back away from it?

Although I will admit that I didn’t receive as much feedback throughout the rotation as I would have liked, I still felt that my preceptor trusted me. He didn’t hover over me or constantly check in on me. My preceptor expected a lot out of me, but never made me feel inadequate. I felt a sense of pride when he would end a discussion with a statement as simple as “good job.” The final evaluation that my preceptor completed allowed me to see that a highly respected preceptor and clinician had confidence in me as a student pharmacist.

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Letters of Recommendation  
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1. **A clear understanding of why the student is applying to each program.** Meet with the student to discuss his or her career goals and residency interests in more detail before writing your letter(s).

2. **Any pertinent details about the residency programs to which the student is applying.** Ask the student for information about each of the programs he or she is applying to.

3. **Any details the student might want you to specifically comment on.** For example, some students choose a variety of letter writers. Some can comment more on their clinical abilities, while others may be better able to comment on their leadership or academic abilities. Engage a student in a discussion about which aspects he or she thinks you might understand the best.

4. **A schedule of due dates for your letters of recommendation or recommendation forms.** The application deadline for most residency programs is in early January.

5. **Some specific examples of how the student demonstrated a given type of aptitude to you.** Those who review letters of recommendation can easily spot generic letters that appear to be written by those who only peripherally know candidates rather than letters that are very specific and provide clear examples of how candidates demonstrated clinical abilities, communication abilities, etc.

Most residency programs are using PhORCAS to manage application submissions, including letters of recommendation. Once a student lists you as a reference writer and submits this to PhORCAS, you should receive an email notifying you. These emails may go to your spam filter, so if a student has told you that he or she submitted your name, and you still haven’t received an email from PhORCAS, make sure you check your junk mail.

There are additional resources, including a video and tips for reference writers, available at www.ashp.org/phorcas. I encourage you to review information on the PhORCAS website before writing and submitting via PhORCAS.

Although writing letters of recommendation can be time consuming, it is highly valued by students for whom the letters are written, as well as appreciated by residency program directors and selection committees who use the information in your letters to make important decisions about candidates. 'Tis the season for letters of recommendation, so get ready!

**College Connection**

Interested in **precepting** in either Introductory Pharmacy Practice Experience (IPPE) or the Advanced Pharmacy Practice Experience (APPE)? Contact Associate Dean Avery Spunt at 630.515.6100 or aspunt@midwestern.edu.

Interested in **getting more involved in the CCP Alumni Council?** Contact CCP Dean Nancy Fjortoft at 630.971.6417 or nfjort@midwestern.edu.

**Calendar**

**UNCORKED! A CCP Reunion and Social**

Thursday, November 14, 2013; 6:00 - 9:00PM
Seasons 52 in Oak Brook, IL
Information & RSVP: www.midwestern.edu/uncorked.html

**Alumni and Friends Reception at the ASHP Midyear Clinical Meeting**

Sunday, December 8, 2013; 5:30 - 7:00PM
Barrel Springs Room at the Hyatt Regency (previously known as the Peabody Hotel)
Orlando, FL

**Keep in Touch**

Let us know what’s new with you or update your contact information. You may contact Damienne Souter, Assistant to the Dean, at 630-515-7373 or dsoute@midwestern.edu or the Office of Development and Alumni Relations at 800-962-3053 or alumni@midwestern.edu.

You may also go to [www.midwestern.edu](http://www.midwestern.edu) and click on MWUNET to access the Alumni Directory, check the Job Finder, or update your contact information. Simply login the same way you did when you were a student. Still need some assistance? Then feel free to call the IT Help Desk at 630-515-7361 from 8:00 AM to 4:30 PM CST.

**Contact Us**

With any questions, concerns or future submissions, please contact Damienne Souter, Assistant to the Dean, at 630-515-7373 or dsoute@midwestern.edu.