

PGY2 Ambulatory Care Orientation Checklist

Orientation item	Achieved	Date
1. Pharmacademic a. ASHP Entering Interests Form b. Objective-Based Self Evaluation c. Initial Development Plan	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
2. Research a. Choose Longitudinal Research Project b. Submit Research Timeline c. Submit Literature Evaluation Table	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
3. Schedule a. Rotation Schedule Overview b. Daytime Clinical Consult Schedule Overview	<input type="checkbox"/> <input type="checkbox"/>	
4. Miscellaneous a. Professionalism contract b. On-call bootcamp c. Graduation Checklist d. ASHP Topic List Overview	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

Resident (Print name)

Residency Program Director (Signature) Date

Resident (Signature) Date