



Progress Report – Clinical Pharmacology

Trainee details						
Trainee name and MIN <i>Title, preferred name, surname, MIN</i>				Training Phase		
Dr Clary Fairchild, 245710				1 - Specialty foundation		
Rotations						
Please list the rotation plan(s) for the training period this rotation progress report covers.						
Plan type	Training Setting	Start date	End date	FTE	Rotation type	Rotation supervisors
Accredited	Clinical Pharmacology Department – Tertiary Teaching Hospital	3/07/2025	3/10/2025	1.0	Click or tap here to enter text.	Dr Eddie Walzer Dr Walter White
Choose an item.	Click or tap here to enter text.	Select date	Select date	FTE	Click or tap here to enter text.	Click or tap here to enter text.
Trainee leave						
Please enter any leave taken during the rotation (excludes periods of interruption already applied for). Refer to the RACP Education policies for leave types.						
Leave type	Start Date – End Date		Number of workdays			
Standard	14/08/2025 – 18/08/2025		5 days			
Standard	20/09/2025 – 22/09/2025		3 days			
Choose an item.	Click or tap here to enter text.		Click or tap here to enter text.			
Choose an item.	Click or tap here to enter text.		Click or tap here to enter text.			
<input checked="" type="checkbox"/> I confirm I have not taken any other leave during this training period, which is NOT already covered as an Interruption of Training.						
Assessments completed during the rotation						
Learning captures completed			Observation captures completed			
3			3			



Learning goals			
Learning goals		Trainee Assessment	Rotation Supervisor Assessment
<p>The curriculum is available on the RACP Online Learning website.</p>		<p>Make a self-assessment against each of the learning goals, refer to the learning opportunities outlined in your rotation plans as well as the expected standards for each goal in Appendix 1.</p>	<p>Assess the trainee against each of the learning goals, refer to the expected standards for each goal in Appendix 1.</p>
	<p>1. Professional behaviours</p>	<p>5 - Consistently behaves in line with all 10 domains of professional practice</p>	<p>5 - Consistently behaves in line with all 10 domains of professional practice</p>
<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Entrustable Professional Activities (EPA)</p>	<p>2. Team leadership: Lead a team of health professionals</p>	<p>3 - Able to act with indirect supervision (e.g. supervisor is physically located within the training setting)</p>	<p>3 - Able to act with indirect supervision (e.g. supervisor is physically located within the training setting)</p>
	<p>3. Supervision and teaching: Supervise and teach professional colleagues</p>	<p>3 - Able to act with indirect supervision (e.g. supervisor is physically located within the training setting)</p>	<p>3 - Able to act with indirect supervision (e.g. supervisor is physically located within the training setting)</p>
	<p>4. Quality improvement: Identify and address failures in health care delivery</p>	<p>3 - Able to act with indirect supervision (e.g. supervisor is physically located within the training setting)</p>	<p>3 - Able to act with indirect supervision (e.g. supervisor is physically located within the training setting)</p>
	<p>5. Clinical assessment and management: Clinically assess and manage the ongoing care of patients</p>	<p>4 - Able to act with supervision at a distance (e.g. supervisor available to assist via phone)</p>	<p>3 - Able to act with indirect supervision (e.g. supervisor is physically located within the training setting)</p>
	<p>6. Management of transitions in care: Manage the transition of patient care between health care professionals, providers, and contexts</p>	<p>3 - Able to act with indirect supervision (e.g. supervisor is physically located within the training setting)</p>	<p>3 - Able to act with indirect supervision (e.g. supervisor is physically located within the training setting)</p>
	<p>7. Longitudinal care: Manage and coordinate the longitudinal care of patients with chronic illness, disability and/or long-term health issues</p>	<p>3 - Able to act with indirect supervision (e.g. supervisor is physically located within the training setting)</p>	<p>3 - Able to act with indirect supervision (e.g. supervisor is physically located within the training setting)</p>

Learning goals			
Learning goals <i>The curriculum is available on the RACP Online Learning website.</i>		Trainee Assessment <i>Make a self-assessment against each of the learning goals, refer to the learning opportunities outlined in your rotation plans as well as the expected standards for each goal in Appendix 1.</i>	Rotation Supervisor Assessment <i>Assess the trainee against each of the learning goals, refer to the expected standards for each goal in Appendix 1.</i>
	8. Communication with patients: Discuss diagnoses and management plans with patients	3 - Able to act with indirect supervision (e.g. supervisor is physically located within the training setting)	3 - Able to act with indirect supervision (e.g. supervisor is physically located within the training setting)
	9. Prescribing: Prescribe therapies tailored to patients' needs and conditions	3 - Able to act with indirect supervision (e.g. supervisor is physically located within the training setting)	3 - Able to act with indirect supervision (e.g. supervisor is physically located within the training setting)
	10. Investigations: Select, organise, and interpret investigations	3 - Able to act with indirect supervision (e.g. supervisor is physically located within the training setting)	3 - Able to act with indirect supervision (e.g. supervisor is physically located within the training setting)
	11. Clinic management: Manage an outpatient clinic	3 - Able to act with indirect supervision (e.g. supervisor is physically located within the training setting)	3 - Able to act with indirect supervision (e.g. supervisor is physically located within the training setting)
Knowledge guides	12. Foundations of clinical pharmacology	3 - Know how to apply the knowledge in this knowledge guide to specialty practice (knows how)	4 - Frequently show I can apply knowledge in this knowledge guide to specialty practice (shows how)
	13. Clinical pharmacology by system	3 - Know how to apply the knowledge in this knowledge guide to specialty practice (knows how)	4 - Frequently show I can apply knowledge in this knowledge guide to specialty practice (shows how)
	14. Prescribing	4 - Frequently show I can apply knowledge in this knowledge guide to specialty practice (shows how)	4 - Frequently show I can apply knowledge in this knowledge guide to specialty practice (shows how)
Trainee comments Provide overall comments about your rotation period for your Rotation Supervisor to consider. These comments may also be viewed by your other supervisors and the Progress Review Panel.			

What did you do well during this rotation of training?

During this rotation, I successfully managed therapeutic drug monitoring for aminoglycosides and vancomycin, ensuring appropriate dosing in patients with renal impairment. I participated in weekly multidisciplinary meetings to review complex polypharmacy cases and contributed to antimicrobial stewardship rounds. I also developed protocols for managing severe adverse drug reactions, including Stevens-Johnson syndrome and hepatotoxicity. These experiences strengthened my ability to apply pharmacokinetic principles and communicate effectively with clinical teams.

What could you do to improve in the future?

I aim to improve my ability to design structured medication review frameworks for high-risk patients and incorporate pharmacoeconomic considerations into formulary decisions. I also plan to take on more leadership roles in teaching junior staff about safe prescribing practices.

- I have had the opportunity to discuss the content of this report with my supervisor(s).
- I understand my obligation to complete the training requirements outlined in the relevant curriculum
- I understand the College may share this information with current and future supervisors. This information may also be shared with other Training Committees if I'm a dual trainee or change training programs.
- I understand my obligation to comply with the relevant College education policies.

Date completed by trainee

4/10/2025

Supervisor review

Provide your feedback on the trainee's progress throughout the rotation. Your comments will be visible to the trainee, other supervisors, and the Progress Review Panel.

What did the trainee do well during this rotation of training?

Dr Fairchild demonstrated strong analytical skills in pharmacokinetics and pharmacodynamics. She independently adjusted doses for high-risk medications and provided evidence-based recommendations during ward rounds. Her involvement in formulary reviews and ADR reporting was commendable. She is on track to meet the expected performance standards for this phase and should progress to Level 4 supervision for prescribing in the next rotation.

What could they improve on in the future?

Dr Fairchild should focus on taking a more proactive role in teaching and mentoring junior staff about safe prescribing and pharmacovigilance, developing structured medication review frameworks for high-risk patients, incorporating deprescribing principles and cost-effectiveness analysis, expanding involvement in antimicrobial stewardship activities including leading audits and presenting findings to governance committees, improving documentation and communication of complex pharmacotherapy plans in electronic medical records to ensure continuity of care, and engaging in research or quality improvement projects related to adverse

drug reaction reporting and pharmacoeconomic evaluations.	
Has the trainee demonstrated the ability to plan and manage their learning and complete their learning and assessments in a timely manner? Yes	Is the trainee on track to meet the RACP's expected performance standard for the phase? Yes
Progression recommendation This trainee is progressing satisfactorily	
Comments/Notes General comments are optional, however if the progression recommendation is that a trainee is NOT progressing satisfactorily, please provide additional comments to support your recommendation.	
<input checked="" type="checkbox"/> I have had the opportunity to discuss the content of this report with my trainee. <input checked="" type="checkbox"/> I have discussed the trainee's progress with other supervisors if required.	
Completed by Name: Dr Walter White Email: WW145412@qldhealth.gov.au	Date completed 7/10/2025
Additional supervisor assessment Feedback and a progression recommendation has already been provided by another supervisor for this progress report. If you agree with their assessment of the trainee, please check the box below and provide optional feedback for the trainee and other supervisors to see. If you would prefer to complete your own assessment, use the Additional Supervisor - Rotation Progress Report .	
<input checked="" type="checkbox"/> Agree with the assessment and recommendation	
Comments on recommendation (optional) I agree with the primary supervisor's assessment. The trainee demonstrated steady progression across both clinical and professional domains appropriate for the Specialty Foundation Phase, and is well prepared for more independent responsibilities in the next phase of training.	
Completed by Name: Dr Eddie Walzer Email: EW4512@qldhealth.gov.au	Date completed 8/10/2025
Trainee reflection (optional) Provide any comments or reflections relating to your supervisor's comments or the rotation in general.	

<p>Reflection</p> <p>I appreciated the opportunity to apply clinical pharmacology principles in a real-world hospital setting. Managing therapeutic drug monitoring and contributing to antimicrobial stewardship rounds enhanced my confidence in evidence-based prescribing. I also gained valuable experience in identifying and reporting adverse drug reactions, which reinforced the importance of pharmacovigilance. Moving forward, I aim to strengthen my skills in medication review frameworks and incorporate pharmacoeconomic considerations into formulary decisions. This rotation has highlighted the critical role of collaboration with multidisciplinary teams in optimising patient safety.</p>	<p>Date</p> <p>10 October 2025</p>
--	---

— End of report —

		Entry criteria	Progression criteria		Completion criteria
	Learning goals	Entry into training <i>At entry into training, trainees will:</i>	Specialty foundation <i>By the end of this phase, trainees will:</i>	Specialty consolidation <i>By the end of this phase, trainees will:</i>	Transition to Fellowship <i>By the end of training, trainees will:</i>
Be	1. Professional behaviours	Level 5 consistently behaves in line with all 10 domains of professional practice	Level 5 consistently behaves in line with all 10 domains of professional practice	Level 5 consistently behaves in line with all 10 domains of professional practice	Level 5 consistently behaves in line with all 10 domains of professional practice
	2. Team leadership: Lead a team of health professionals	Level 2 is able to act with direct supervision	Level 3 is able to act with indirect supervision	Level 4 is able to act with supervision at a distance	Level 5 be able to supervise others
Do	3. Supervision and teaching: Supervise and teach professional colleagues	Level 4 be able to act with supervision at a distance	Level 4 be able to act with supervision at a distance	Level 4 is able to act with supervision at a distance	Level 5 be able to supervise others
	4. Quality improvement: Identify and address failures in health care delivery	Level 3 is able to act with indirect supervision	Level 4 be able to act with supervision at a distance	Level 4 is able to act with supervision at a distance	Level 5 be able to supervise others
	5. Clinical assessment and management: Clinically assess and manage the ongoing care of patients	Level 3 is able to act with indirect supervision	Level 3 is able to act with indirect supervision	Level 4 is able to act with supervision at a distance	Level 5 be able to supervise others
	6. Management of transitions in care: Manage the transition of patient care between health care professionals, providers, and contexts	Level 3 is able to act with indirect supervision	Level 3 is able to act with indirect supervision	Level 4 is able to act with supervision at a distance	Level 5 be able to supervise others
	7. Longitudinal care: Manage and coordinate the longitudinal care of patients with chronic illness, disability, and/or long-term health issues	Level 2 is able to act with direct supervision	Level 3 is able to act with indirect supervision	Level 4 is able to act with supervision at a distance	Level 5 be able to supervise others
	8. Communication with patients: Discuss diagnoses and management plans with patients	Level 3 is able to act with indirect supervision	Level 4 is able to act with supervision at a distance	Level 4 is able to act with supervision at a distance	Level 5 be able to supervise others
	9. Prescribing: Prescribe therapies tailored to patients' needs and conditions	Level 4 be able to act with supervision at a distance	Level 4 is able to act with supervision at a distance	Level 5 is able to supervise others	Level 5 be able to supervise others
	10. Investigations: Select, organise, and interpret investigations	Level 2 is able to act with direct supervision	Level 3 is able to act with indirect supervision	Level 4 is able to act with supervision at a distance	Level 5 be able to supervise others
	11. Clinic management: Manage an outpatient clinic	Level 2 is able to act with direct supervision	Level 3 is able to act with indirect supervision	Level 4 is able to act with supervision at a distance	Level 5 be able to supervise others

		Entry criteria	Progression criteria		Completion criteria
	Learning goals	Entry into training <i>At entry into training, trainees will:</i>	Specialty foundation <i>By the end of this phase, trainees will:</i>	Specialty consolidation <i>By the end of this phase, trainees will:</i>	Transition to Fellowship <i>By the end of training, trainees will:</i>
Know	12. Foundations of clinical pharmacology	Level 2 knows the topics and concepts in this knowledge guide	Level 3 knows how to apply this knowledge to practice	Level 4 frequently shows they apply this knowledge to practice	Level 5 consistently demonstrates application of this knowledge to practice
	13. Clinical pharmacology by system	Level 2 knows the topics and concepts in this knowledge guide	Level 3 knows how to apply this knowledge to practice	Level 4 frequently shows they apply this knowledge to practice	Level 5 consistently demonstrates application of this knowledge to practice
	14. Prescribing	Level 3 knows the topics and concepts in this knowledge guide	Level 4 frequently shows they apply this knowledge to practice	Level 5 consistently demonstrates application of this knowledge to practice	Level 5 consistently demonstrates application of this knowledge to practice