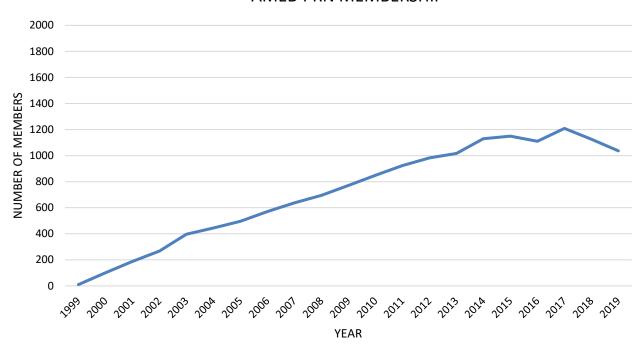
# Adult Medicine (AMED) PRN History 1999–2019

## Introduction

The AMED PRN was formed in 1999 at the ACCP Annual Meeting in Kansas City, Missouri, by Dr. Cari Brackett and nine other adult medicine practitioners. Together, they had the insight and vision to develop a forum for sharing the experience and expertise of clinicians and academicians in adult medicine pharmacotherapy. Now, in 2019, the AMED PRN is one of the largest and most diverse PRNs, encompassing pharmacists who practice in inpatient and outpatient settings, academia, and the pharmaceutical industry. The AMED PRN consists of practitioners, residents, and students who share an interest in shaping the practice of adult medicine through research and practice.

# AMED PRN MEMBERSHIP



Over the PRN's history, 52 AMED PRN members have become ACCP Fellows, and the number of members holding board certification in pharmacotherapy (BCPS) continues to increase each year. Members have participated in all facets of ACCP leadership, written Pharmacotherapy Self-Assessment Program (PSAP) chapters, conducted Board of Pharmacy Specialties (BPS) board reviews, served on editorial boards and committees, and given presentations at ACCP Annual and spring meetings.

In 2019, the PRN leadership surveyed the membership to better characterize its constituents, including training, certification, practice types and locations, and PRN priorities. Survey results show that around 95% of AMED PRN members have a Pharm.D. degree, 87% have completed a PGY1 residency, and 53% have completed a PGY2 residency or fellowship. Almost all survey respondents (92%) were board certified in pharmacotherapy, and around 20% reported other certifications (e.g., medication therapy management, certified asthma educator, or another BPS specialty). Eighty-nine percent of survey respondents serve as preceptors, with 64% serving as preceptors to both students and residents. More than 40% of respondents are faculty at a college or school of pharmacy. AMED PRN members practice in a variety of settings, including inpatient and outpatient settings, with most practicing in an inpatient

setting. Many members also provide specialized/consult services in anticoagulation, nutrition support, pain management, diabetes, hypertension, dyslipidemia, transitions of care, antimicrobial stewardship, and pharmacokinetics. In addition, 58% of respondents report they actively devote time to research.

# Leadership

A strong PRN requires a strong team of leaders. Since its inception, the AMED PRN has had leaders with a mission and vision (see the table that follows). These leaders have helped develop the AMED PRN into what it is today. They have pushed the PRN forward, establishing and conducting business meetings, networking forums, and PRN-designed and PRN-sponsored focus sessions presented at ACCP Annual and spring meetings.

AMED PRN Officers					
	Chair	Chair-Elect	Secretary/Treasurer		
1999–2000	Cari Brackett	_	_		
2000–2001	Don Brophy	_	Wanda (Kilzer) Stipek		
2001–2002	Wanda (Kilzer) Stipek	Teri Dunsworth	Jennifer Dugan		
2002–2001	Teri Dunsworth	Krystal Haase	Brian Hodges		
2003–2002	Krystal Haase	Brian Hodges	Brian Hemstreet		
2004–2005	Brian Hodges	Brian Hemstreet	Anne Spencer		
2005–2006	Brian Hemstreet	Sharon See	Suzanne Wortman		
2006–2007	Sharon See	Suzanne Wortman	Darcie Keller		
2007–2008	Suzanne Wortman	Darcie Keller	Sheri Herner		
2008–2009	Darcie Keller	Joel Marrs	Ann Canales		
2009–2010	Joel Marrs	Lindsay Arnold	Rolee Pathak		
2010–2011	Lindsay Arnold	Nancy Yunker	Melissa Badowski		
2011–2012	Nancy Yunker	Jessica Starr	Matthew J. Pike		
2012–2013	Jessica Starr	Rolee Pathak	Jacqueline Olin		
2013–2014	Rolee Pathak	Jacqueline Olin	Diane Rhee		
2014–2015	Jacqueline Olin	Sarah Anderson	Kurt Wargo		
2015–2016	Sarah Anderson	Kurt Wargo	Leigh Anne Hylton-Gravatt		
2016–2017	Kurt Wargo	Leigh Anne Hylton-Gravatt	Andrew Miesner		
2017–2018	Leigh Anne Hylton-Gravatt	Andrew Miesner	Ryan Owens		
2018–2019	Andrew Miesner	Ryan Owens	Carmen Smith		

Other notable leadership within the PRN includes:

- Julie Wright Banderas: Elected to the ACCP Board of Regents, serving as the ACCP Secretary in 2008–2011.
- Sharon See: Named the 2015 Chair of the BPS Specialty Council on Pharmacotherapy.

#### **Committee Formation**

Many AMED PRN members have chaired or served on ACCP committees and task forces. As the PRN has grown, members have sought avenues to reach out and collaborate with others in their areas of expertise and to provide opportunities for individual and PRN growth. The AMED PRN has established several committees to allow more members the opportunity to participate in the PRN's activities and determine its future direction.

 2004 – The Nominations and Programming Committees were established. The Nominations Committee is charged with facilitating and promoting nominations of AMED PRN members for

- ACCP Fellow status, research and practice awards, membership on the *Pharmacotherapy* Board of Directors, and service as PRN officers. The Programming Committee was formed to develop PRN focus sessions and other educational programming held at ACCP Annual and spring meetings. This committee develops topics, objectives, and formatting of programs; identifies speakers; and completes and submits proposals to ACCP according to established timelines.
- 2005 The Membership and Research Awards Committees were formed. The Research Awards Committee eventually evolved into the Training and Travel Awards Committee, which recognizes individual PRN member accomplishments. Initially, two \$1000 awards were given: the New Investigator Award and the Fellow/Resident Research Award. These have evolved over the years and now consist of three awards given annually before the ACCP Annual Meeting: the AMED PRN Practitioner Registration Award (early-bird registration covered for the ACCP Annual Meeting), the Resident/Fellow Travel Award (\$1000), and the Student Travel Award (\$1000). The practitioner award focuses on member involvement within adult medicine and the PRN, and the resident/fellow and student awards focus on research recognition.
- 2006 The Membership Committee evolved into the **Network/Social Committee**. This committee plans the networking activities for the meetings, submits applications for the business meetings, and developed a welcome packet, which has historically been e-mailed to each new member.
- 2007 The Newsletter and Walk-Rounds Committees were formed. A biannual newsletter, originally begun in 1999, was reinitiated in 2005. The Newsletter Committee is charged with soliciting contributions from the PRN, editing and formatting the information, submitting it to ACCP for approval, and distributing it to the PRN. The newsletter is posted on the PRN webpage as well. The Walk-Rounds Committee was formed to recognize PRN member posters and give members a chance to elaborate on their research. The committee determines which posters presented at ACCP Annual and spring meetings are of interest to the AMED membership, separates them into topics, and solicits volunteers to attend rounds for discussions of them at the meetings.
- 2008 The Research Grant vs. Mini-Sabbatical Feasibility Committee was created to assess the PRN's ability to fund PRN research or a mentoring program. This committee was transitioned in 2014 to the Research Committee, which was charged with developing the PRN's first-ever research project in conjunction with the ACCP Foundation (formerly, the ACCP Research Institute). The Research Committee also serves as a liaison between the AMED PRN and the ACCP Foundation/Frontiers Fund and develops mechanisms for AMED PRN members to discuss and collaborate on research initiatives.
- 2016 The Network/Social and Newsletter committees were transitioned into the External Affairs and Internal Affairs Committees. The External Affairs Committee was charged to increase member involvement and outreach through social media by creating a Facebook page (www.facebook.com/accpamedprn) and a Twitter account (@accpamedprn). These sites allow for PRN announcements, provide a focused place to congratulate member accomplishments, and supply real-time updates within adult medicine. The committee also implemented monthly journal club presentations led by pharmacy practice residents and began a mentorship program for PRN members in their first year of practice. Most recently, in 2018, the committee began to implement student case presentations as a venue for interested students to hone their presentation skills. The Internal Affairs Committee continues to maintain the production and editing of biannual PRN newsletters. This committee also is responsible for submitting member highlights and accomplishments to ACCP for inclusion in the ACCP Report, maintaining PRN email list document archives, and updating operation guidelines as needed.

#### **Communications**

One of the AMED PRN's core strengths is its vast networking capabilities, allowing members an opportunity to brainstorm on current issues, share practice ideas and research, discuss future programming needs, and socialize with colleagues. AMED PRN meetings at the ACCP Annual and spring meetings are well attended with enthusiastic participants.

The AMED PRN e-mail list is very active. Having the ability to interact through the PRN e-mail list with more than 1200 other knowledgeable pharmacists who face similar challenges is invaluable. The e-mail list not only provides opportunities to share clinical experience and expertise, but also serves as a forum for networking and support for all levels of clinical pharmacy practice (training/education program development, research endeavors, and administrative issues).

In addition, the AMED PRN webpage serves as a living document. It contains the PRN Handbook, a Document Archives Link, a Membership Directory, PRN newsletters, meeting minutes, PRN award information and applications, and the PRN history document. In response to member requests, the website was expanded to include a list of committee chairs and members and officer and committee charges and responsibilities. Most recently, a link to the PRN's monthly journal club presentation page was added for easier member access. To date, 50 journal club presentations have been given since implementation 3 years ago.

In 2007, an e-mail list document repository, or warehouse, was initiated. It was designed to organize and archive policies, protocols, preprinted orders, guidelines, etc., shared by members on the e-mail list to allow expedient, efficient retrieval by members. This continues to be maintained and updated by the Internal Affairs Committee.

### **Programming and Presentations**

Communication, collaboration, and the sharing of knowledge and experiences are major AMED PRN focuses. In addition to the scheduled PRN focus sessions (see the table that follows), educational presentations by practitioner, resident, and student AMED members occurred at business meetings during the fall of 2000 and then annually in 2004–2018.

Year	AMED PRN Focus Session	Collaborating PRN
2001	Controversies in Managing Venous Thromboembolism	
2002	Monitoring and Managing the Acute Care Patient	
2003	Collaborative Practices in the Inpatient Setting	
2004	Off-Label Uses for Labeled Drugs	
2005	Defining and Improving Transitional Pharmaceutical Care in the	Ambulatory Care PRN
	Medicine Patient	
2006	Medical Myths and Clinical Controversies	
2007	JCAHO Core Measures: Implications for the Clinician	
2008	Clinical Topics in Adult Medicine	
2009	The Great Adult Medicine Debates of 2009	
2010	Application of Science and Statistics in COPD Management	
2011	Update on Anticoagulant Use in Stroke Patients	
2012	A Breath of Fresh Air: Updates in Chronic Obstructive Pulmonary	
	Disease (COPD) Management	
2013	All Things Statin!	
2014	Beyond Acute Coronary Syndromes: Additional Indications for	
	Dual Antiplatelet Therapy and Considerations for Use	

Year	AMED PRN Focus Session	Collaborating PRN
2015	Transitions of Care Management: Best Practices	Ambulatory Care PRN
2016	An Update to the Management of Acute Bacterial Skin and Skin	
	Structure Infections: What Is the Utility of the New Agents?	
2017	Feeling the Burn of Proton Pump Inhibitor Therapy: When Do	
	the Risks Outweigh the Benefits	
2018	HIV Continuity, Part I: HIV Updates for the Inpatient Practitioner	HIV PRN

Other notable PRN programming and presentations include:

- The AMED PRN, in conjunction with the Endocrine and Metabolism PRN, was supported by an industry grant to produce a premeeting symposium in fall 2007 titled "Inpatient Glycemic Control."
- At the 2009 ACCP-ESCP International Congress on Clinical Pharmacy, the AMED PRN
  collaborated with the Ambulatory Care PRN and the Primary Care Special Interest Group of the
  European Society of Clinical Pharmacy to present a program titled "Transitional Processes of
  Care Across Inpatient and Outpatient Settings."

### **Publications**

AMED PRN members have served as expert reviewers for ACCP Frontiers Fund investigator development research awards. They have also served on the editorial boards of *Pharmacotherapy* and PSAP, as well as the editorial boards of many other notable and prestigious journals. Through the PRN and its membership, many important papers and books have been published. Some of the many notable published PRN accomplishments are as follows:

# **PRN Publications**

- 1999 Newsletter initiated; first editor was Wanda (Kilzer) Stipek; reinstituted biannual publication in 2005
- 2007 Welcome Packet by Rolee Pathak and Olga Hilas

# White Papers

- 2006 **Dobesh P**, Bosso J, **Wortman S**, **Dager B**, **Karpiuk E**, Ma Q, Zarowitz B. Critical Pathways: The Role of Pharmacy Today and Tomorrow. Pharmacotherapy 2006;26:1358–68.
- 2008 **Burke JM**, Miller WA, **Spencer AP**, Crank CW, Adkins L, Bertch KE, Ragucci DP, Smith WE, Valley AW. Clinical Pharmacist Competencies. Pharmacotherapy 2008;82:806–15.
- 2008 Haase KK, Smythe MA, Orlando PL, Resman-Targoff BH, Smith LS. Contributors: Herner SJ, Melnyk SD, Paolini NM, Porter KB, Rodgers PT, Spunt AL. Quality Experiential Education. Pharmacotherapy 2008;28:2193–227e.
- American College of Clinical Pharmacy, **Blair MM**, Freitag RT, **Keller KL**, Kiser TH, **Marrs JC**, McGivney MS, **Mohammad RA**, and Twedt EL. Proposed Revision to the Existing Specialty and Specialist Certification Framework for Pharmacy Practitioners. Pharmacotherapy 2009;29:3e–13e.
- American College of Clinical Pharmacy, Kirwin J, Canales AE, Bentley ML, Bungay K, Chan T, DobsonE, Holder RM, Johnson D, Lilliston A, **Mohammad RA**, Spinler SA. Process indicators of quality clinical pharmacy services during transitions of care. Pharmacotherapy 2012;32(11):e338-47.

#### **ACCP Position Statements**

- 2006 Murphy JE, Nappi JM, Bosso JA, Saseen JJ, **Hemstreet BA**, Halloran MA, et al. American College of Clinical Pharmacy's Vision of the Future: Postgraduate Pharmacy Residency Training as a Prerequisite for Direct Patient Care Practice. Pharmacotherapy 2006;6:722–33.
- Haase KK, Smythe MA, Orlando PL, Resman-Targoff BH, Smith LS. Ensuring Quality Experiential Education. Pharmacotherapy 2008;28:1548–51.

## **ACCP Commentaries**

2012 Rathbun RC, Hester EK, **Arnold LM**, Chung AM, Dunn SP, Harinstein LM, Leber M, **Murphy JA**, Schonder KS, **Wilhelm SM**, Smilie KB. Importance of direct patient care in advanced pharmacy practice experiences. Pharmacotherapy 2012;32(4): e88-97.

### **ACCP Guidelines**

- Lee M, Badowsi ME, Acquisto NM, Covey DF, **Fox BD**, Gaffney SM, Haines ST, Hilaire ML, Raymond A, Salvo MC, Turner K. ACCP Template for Evaluating a Clinical Pharmacist. Pharmacotherapy 2017;37(5):e21-29.
- Havrda DE, Engle JP, Anderson KC, Ray SM, Haines SL, Kane-Gill SL, Ballard SL, **Crannage AJ**, Rochester CD, Parman MG. ACCP White Paper: Guidelines for resident teaching experiences. Pharmacotherapy 2013;33:e147-61.

## **ACCP Opinion Papers**

- 2014 **Mohammad RA**, Bulloch MN, Chan J, Deming P, Love B, Smith L, Dong BJ. Provision of Clinical Pharmacist Services for Individuals With Chronic Hepatitis C Viral Infection. Pharmacotherapy 2014;34(12):1341–1354.
- Acute Care Management of the HIV-Infected Patient: A Report from the HIV Practice and Research Network of the American College of Clinical Pharmacy. Durham SH, Badowski ME, Liedtke MD, Rathbun RC, **Pecora Fulco P**. Pharmacotherapy 2017 May;37(5):611-629.
- 2019 Donihi AC, Moorman JM, Abla A, Hanania R, Carneal D, MacMaster HW. Pharmacists' role in glycemic management in the inpatient setting: An opinion of the endocrine and metabolism practice and research network of the American College of Pharmacy. J Am Coll Clin Pharm 2019;2:167-176.

# ACCP – Other Documents of Interest

2016 Schwinghammer TL, **Crannage AJ**, Boyce EG, Bradley B, Christensen A, Dunnenberger HM, Fravel M, **Gurgle H**, Hammond DA, Kwon J, Slain D, **Wargo KA**. The 2016 ACCP Pharmacotherapy Didactic Curriculum Toolkit. Pharmacotherapy 2016;36(11):e189-194.

#### **Awards**

Several AMED PRN members have received ACCP awards at the national level for exceptional accomplishments.

# National

2005 Frontiers Fund Award Recipient – Donald Brophy, Pharm.D., FCCP, BCPS. Virginia Commonwealth University, Richmond, VA. "Genetic Polymorphisms and Vascular Access Thrombosis"

- 2008 ACCP Clinical Practice Award William Dager, Pharm.D., FCCP, FASHP, University of California, Davis
- 2016 ACCP New Clinical Practitioner Award Mate M. Soric, Pharm.D., BCPS, Northeast Ohio Medical University and University Hospitals Geauga Medical Center
- 2017 ACCP New Investigator Award Diana Sobieraj, Pharm.D., FCCP, BCPS, University of Connecticut School of Pharmacy
- 2019 Pharmacotherapy Outstanding Reviewer Tiffany Pon, Pharm.D., BCPS, University of California, San Francisco

# **PRN Sponsored**

PRN-sponsored awards were initiated in 2006. Awards and recipients of these awards include:

New/Distinguished Investigator Awards

- 2008 Kristin A. Tuiskula
- 2008 Shazia Raheem
- 2009 T. Michael Farley
- 2013 Donald Brophy
- 2018 Diana Sobieraj

#### Clinical Practice Award

- 2010 Grant Sklar
- 2013 Joel Marrs
- 2017 Jennifer Twilla
- 2018 Sara L. Anderson

# **Mentoring Award**

- 2010 Krystal Haase
- 2012 Julie Murphy
- 2014 Abigail Yancey
- 2015 Linda Spooner
- 2016 Asha Tata
- 2017 Joel Marrs

#### Service Award

- 2012 Lindsay Arnold
- 2016 Jacqueline Olin

## Outstanding Paper of the Year Award

- 2015 Charles Seifert
- 2016 Kurt Wargo

# Practitioner Registration Award

- 2012 Mate Soric
- 2013 David Lourwood
- 2014 Jennifer Austin
- 2015 Antoine Jenkins
- 2016 Jamielynn Sebaaly
- 2017 Jennie B. Jarrett
- 2018 Jennifer Stark

## Resident/Fellow Research Award

- 2009 Renee M. Holder
- 2012 Kyle Sobecki
- 2013 Rachel Flurie
- 2014 Brittany L. Good
- 2015 Eunice Boo
- 2016 Ryan Owens
- 2017 Nichole Szczerbowski
- 2018 Marina Mae

#### Student Research Award

- 2012 Dante Gravino
- 2013 Rebecca Wolfe
- 2014 Elizabeth Moor
- 2015 Jennifer Brown
- 2016 Emily Shor
- 2017 Lauren Moore
- 2018 Caroline Dillon

#### **AMED PRN Financial Contributions**

In addition to the PRN awards given each year, the PRN provides support for member research. In 2015, the PRN provided an ACCP Foundation Mentored Research Investigator (MeRIT) scholarship to Rima Mohammed, Pharm.D., FCCP, BCPS. In 2016, the PRN contributed to the ACCP Foundation for its first-

ever PBRN study. In 2018, the PRN awarded a seed grant to Jennie B. Jarrett, Pharm.D., BCPS, for her project titled "Combating Implicit Bias in the Healthcare Team: A Pharmacist's Role." The PRN membership also continues to promote the ACCP Foundation's goals by contributing to the Frontiers Fund each year.

#### **AMED PRN Goals and Initiatives**

ACCP's purpose is to improve human health by extending the frontiers of clinical pharmacy. The AMED PRN supports this mission in the areas of family practice, internal medicine, and other pharmacotherapy practices in adults. As the PRN and its members look to the future, many goals are envisioned, which are best summarized by one of ACCP's core values: "Dedication to excellence in patient care, research, and education." The AMED PRN presents the following goals and initiatives.

# Dedication to Excellence in Patient Care and Service to Health Systems

- Support the structure of a clinical pharmacist on every health care team and collaborative practice to optimize patient care.
- Encourage documentation of services provided.
- Provide opportunities through the e-mail list to share clinical expertise and experience (as well as through archives, newsletters, and networking).
- Encourage PRN members to advocate legislation that increases reimbursement for cognitive services (and other programs to increase the recognition of pharmacists as health care providers).
- Maintain AMED PRN awards to recognize accomplishments of colleagues with unique contributions to the practice of adult medicine.
- Foster improved collaboration between health system and community-based pharmacists to enhance the continuity of pharmaceutical care.
- Support the development of clinical pharmacy services in areas where they may not be available
  or used to their full potential (e.g., nonteaching community hospitals, rural or critical access
  hospitals).

# Dedication to Excellence in Research

- Support the outcomes research needed to justify clinical services, such as demonstration of cost-benefit of services and improved outcomes (safety and efficacy).
- Fund member research through PRN-sponsored grant programs.
- Foster research among trainees through research travel awards for students, residents, and fellows.
- Allocate funds to the ACCP Foundation to advance knowledge through research.
- Conduct poster walk-rounds to foster interest in the work of colleagues.

# Dedication to Excellence in Education

- Maintain responsibility/commitment to teach present and future colleagues.
- Provide member education through member-developed programming (e.g., Annual Meeting focus sessions, online journal club presentations).
- Establish/expand pharmacy residencies and fellowships in adult medicine.
- Serve as preceptors for pharmacy fellows, residents, and students to foster qualified practitioners and help shape the future of clinical pharmacy.
- Participate in ACCP-developed programs to build interest in ACCP membership, mentor pharmacy students, and discuss career paths to help inspire pharmacy graduates to incorporate clinical pharmacy into their practices.

• Build partnerships between colleges of pharmacy and health systems to cultivate qualified practitioners, educators, and researchers who will develop clinical pharmacy programs.

#### Conclusion

The AMED PRN has grown from 10 adult medicine practitioners in 1999 to more than 1000 members in 2019. Over the years, PRN activities have included establishing a biannual newsletter, publishing white papers, and collaborating with other PRNs to create timely programming to advance clinical practice. AMED PRN members are very active within both the PRN and ACCP, with many holding leadership roles within both the PRN and the College. This PRN remains committed to the practice of evidence-based medicine and fosters leadership within the PRN and ACCP by promoting active involvement in scholarly activities, development and presentation of research, and educational opportunities.

The PRN remains committed to research and has contributed to the Frontiers Fund annually since 2003. Similarly, the PRN provides member support for the FIT and MeRIT programs and has established a PRN seed grant. Since 2012, the PRN has given a resident/fellow and student research award each year to support travel to the ACCP Annual Meeting, where recipients are given an opportunity to share their research with the PRN at the business meeting.

ACCP's 40th anniversary has provided AMED PRN members with an opportunity to reflect on the PRN's growth and accomplishments and determine its future direction.