

# ACCP PRN Report

American College of Clinical Pharmacy

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## PRESIDENT'S COLUMN

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ACCP President



### Board Recertification

Every time I get a new volume of the *Pharmacotherapy Self-Assessment Program (PSAP)*, I do a quick calculation of how long I have left on my board certification, compare that to how many books are left in the series, and then tell myself, "you have 90 days to do this, and, worst-case scenario, there are more of these books left." Then, far into my recertification cycle, I realize I really do love oncology and can't wait to do that book. OK, that's a stretch. I do it because by the time I do that calculation, it doesn't matter if I love oncology or not, I've got to do it. That's been my pattern for the past 19 years. You're right, I need help. But I'm betting I'm not the only one.

ACCP was recently notified that our current proposal to the Board of Pharmacy Specialties (BPS) for an expanded professional development program for recertification in pharmacotherapy was approved. This is just in time for this chronic procrastinator. We can now get hours through PSAP by attending the live version of the "Pharmacotherapy Preparatory Review and Recertification Course" at the 2011 Updates in Therapeutics (or using the home study version of this course) and through the new live "Clinical Reasoning Series" that will be offered at future ACCP annual meetings. Like some of the other specialties, pharmacotherapy specialists now have options that allow them to learn in different ways and venues. I might just make it by 2013.

This isn't the only thing I'm optimistic about. BPS recently established a process whereby the development of new specialties can be expedited. Part of ACCP's strategic plan is to advocate for more opportunities for pharmacists practicing in specialized fields to become board certified, especially for practitioners exiting PGY2 residencies. This is a big deal to us. BPS may consider the development of as many as three new specialist certifications in the next year. Each of these will require a petition and a role delineation study. That is where the PRNs can play an important role. Many of you have asked ACCP leadership to advocate for new specialty certifications in your areas. With this new process, we will need PRNs to help us gather the data necessary to help demonstrate the capacity and uniqueness of additional pharmacy specialties. So you can expect us to call on

you in the next few years to help in this process.

BPS is also undergoing strategic planning this year by looking at its processes, including how new certifications are identified and made available. As BPS proceeds through this planning process, look for opportunities to provide input from your respective specialty or subspecialty. I've had the chance to speak with new BPS Executive Director Bill Ellis several times during the past few weeks, and I'm very optimistic that this process is going to help the profession expand the recognition of clinical pharmacy specialists and subspecialists. BPS is clearly seeking input from ACCP and its members on issues related to specialist certification.

Finally, I'd like to just thank all of you for the work you do on behalf of ACCP through the PRNs. I appreciate being able to call on you for help. Just the other day, a family practice physician asked me a nephrology question. I work predominantly in psychiatry, and the kidneys are just too removed, both literally and figuratively, from my area of expertise. I contacted a friend I met through the Nephrology PRN, and he gave me the help I needed. Once again, I was reminded of just how diverse ACCP is and how much specialized knowledge and experience our members possess. So thank you, and keep doing what you're doing. As always, feel free to drop me a note and let me know what you think about specialist certification or other issues critical to the College's strategic plan, through which we seek to foster the future development, advancement, and positioning of clinical pharmacists.

## PRNs TO HOLD ELECTIONS

The PRN election cycle is upon us. It is time for PRN members to begin the process of determining who will serve as officers in the coming year. If you are interested in being a PRN officer or in nominating someone, please contact your PRN's chair.



### Election Process

The Nominations Committee will consist of at least two individuals appointed by the PRN chair. These individuals may be the PRN's current elected officers. Those who are on a PRN's Nominations Committee will be ineligible to run for office in that PRN's election that year.

The Nominations Committee should prepare a slate of candidates and shall provide information to each candidate relative to the election procedures; the Nominations Committee shall also provide a timeline and a list of expected duties. When possible, two or three candidates for each office shall be up for election. If only one candidate can be identified, an election will still be held, with voters given the option of identifying a write-in candidate. When there are more than three possible candidates, the PRN's Nominations Committee will be responsible for making the final selection of candidates for the slate.

The Nominations Committee will obtain a brief (250 words) biographical sketch of the candidate.

### Voting

As in previous years, PRN elections will be held online. PRN members will receive an e-mail from ACCP that outlines the voting procedure. Members will use their log-in and password to access the ACCP Web site. Each member will then be able to access the ballot for each PRN of which he/she is a current member. Members should review their e-mail and the ACCP Web site for further news about online voting as the election draws closer.

### 2011 Election Timetable

PRN call for nominations	March 2011
Submission of slates and candidate biographies to ACCP	June 15, 2011
Electronic balloting opens	July 13, 2011
Electronic balloting closes	August 19, 2011
Committee contact notified of results	August 26, 2011
Nominations Committee notifies all candidates of election results	August 29, 2011
ACCP staff notifies new officers of meeting date and time at the Annual Meeting	September 2011
PRN Handbook made available electronically to each new officer	October 2011

### PRN NETWORKING BREAKFASTS DEBUT IN COLUMBUS



ACCP's PRNs provide a focal point for clinical pharmacists with common interests and needs in practice, research, and education. PRN members help ACCP develop educational programs and promote the activities of the PRNs.

In a departure from the traditional two-evening schedule for PRN business meetings and networking forums, ACCP's 2011 Updates in Therapeutics in Columbus, Friday, April 7 through Tuesday, April 12, will provide meeting registrants the opportunity to attend more PRN gatherings.

Join ACCP and your fellow meeting attendees for a complimentary continental breakfast daily, Saturday through Monday, from 7:30 a.m. to 9:00 a.m. (EDT) in the Regency Ballroom of the Hyatt Regency Columbus. The majority of PRNs will have a designated table where attendees can meet PRN representatives and learn how to become involved. A listing of PRNs hosting tables during each breakfast session is provided below.

#### Saturday, April 9, 2011

Ambulatory Care  
 Cardiology  
 Central Nervous System  
 Critical Care  
 Pediatrics  
 Pharmaceutical Industry  
 Pharmacokinetics/Pharmacodynamics

#### Sunday, April 10, 2011

Adult Medicine  
 Ambulatory Care  
 Cardiology  
 Central Nervous System  
 Emergency Medicine  
 Health Outcomes  
 Infectious Diseases  
 Women's Health

#### Monday, April 11, 2011

Ambulatory Care  
 Cardiology  
 Central Nervous System  
 Critical Care  
 Education and Training  
 Geriatrics  
 Health Outcomes

### PRN NEWS BRIEFS



#### Ambulatory Care PRN

The Ambulatory Care PRN is a large group of practitioners working in a variety of ambulatory care settings. As of March 2011, we have 1304 members. Below is a summary of the many exciting activities happening within the PRN.

#### Research and Scholarship

(Chair: David M. Hachey, Vice Chair: Andrew Smith)  
 The Research and Scholarship Committee has been working on two major charges this year. First, the committee has finalized the FIT scholarship application form and scoring rubric and has given notice to the PRN. The committee is just waiting on applications from members and will most likely receive those in April. After receiving applications,

the committee will meet to discuss and rank candidates and notify recipients. Second, Andrew Smith is heading the Seed Grant charge for the committee. He has a team of committee members who will begin working on this grant charge in July.

### **Nominations**

(Chair: Nicole Culhane, Vice Chair: Nancy Shapiro)

The Nominations Committee identifies and nominates deserving PRN members for ACCP Fall and Spring Awards such as the Clinical Practice Award, Parker Medal, and New Investigator and Educator Awards, to name a few. In addition, the committee nominates members for fellowship status and elected offices within the PRN and the College. The committee nominated Barry Carter for the Russell R. Miller Award. In early March, the committee will issue a call for nominations for PRN officers, and the selection process will take place in summer 2011.

### **Budget and Finance**

(Chair: M. Shawn McFarland, Vice Chair: Lori Wilken)

The Budget and Finance Committee has focused on operational procedures and has continued to help the PRN standing committees fund new ideas for implementation. Specifically, this committee has begun the process of having committees submit a budget/request for funds so that the committee can more accurately plan expenses for the upcoming year. In doing so, the committee has been able to identify and allocate extra funds to be provided in support of scholarships for PRN members to the FIT Program and an increase in the number of Student/Resident Travel Awards to the Annual Meeting. The committee has developed a communication tool to transfer budget decisions to incoming officers, making transitions smoother. Members of this committee have also tried to continue informing new members of opportunities within the PRN by sending out a welcome e-mail on joining.

### **Student and Resident Committee**

(Chair: Deanne Hall, Vice Chair: Kelly Lempicki)

This committee has divided its tasks among three small subcommittees to focus on the overall theme of increasing resident and student involvement within ACCP and the PRN. One group is focusing on the charge to develop and implement activities for the residents and students during the Ambulatory Care PRN business and networking forum at the 2011 Annual Meeting. The group is collating ideas and is to have a report to the chair by the end of March. The members of the committee will then schedule a conference call to review the ideas and discuss how to address implementation by the fall meeting.

The second and third groups are working closely together on resident membership. One group is evaluating the free dues program to determine whether it has had an impact on the increase in resident and student participation, as well as whether we can track that to their membership once they are practitioners. The other group is developing ideas to increase resident involvement and retention once they are practitioners within the PRN. Kelly Lempicki, the vice chair, is overseeing these two groups.

In addition, two committee members, Christine Schumacher and Kelly Lempicki, have been appointed representatives for the PRN to the StuNet Committee. The committee has also recommended increasing the number of supported ACCP Student and Resident Travel Awards from two to four, which was approved by the PRN Budget and Finance Committee.

### **Communications**

(Chair: Sarah Westberg, Vice Chair: Marissa Quinones)

The Communications Committee has several subgroups who have been actively involved in pursuing the committee's charges. Committee members monitor the active Ambulatory Care e-mail list to ensure adherence to e-mail list policies and procedures. In addition, a subgroup is reviewing and updating the current e-mail list policies and procedures. Another subgroup is working on the Spring Newsletter, to be released later this spring. The committee is reviewing the Ambulatory Care PRN *Survival Guide* and beginning to implement the steps necessary to have a new edition of this book published in 2013. Finally, the committee is getting ready to submit an abstract for a poster presentation at the Annual Meeting, highlighting the work of the Ambulatory Care PRN.

### **Education**

(Chair: Candice Garwood, Vice Chair: Jill Burkiewicz)

The Education Committee has been busy developing programming for the Ambulatory Care PRN focus session at the 2011 Annual Meeting. A survey of committee members to determine member educational needs showed that almost three-fourths identified hypertension and dyslipidemia as the most appropriate topics. Current program goals are aimed at providing the audience with updates on emerging trends and changes in the management of hypertension and dyslipidemia.

### **Networking**

(Chair: S. Dee Melnyk, Vice Chair: CoraLynn Trewett)

The Networking Committee has arranged to have Ambulatory Care PRN members at each of the daily breakfasts during ACCP's Updates in Therapeutics. The committee is actively planning for the Ambulatory Care business meeting to be held at the ACCP Annual Meeting in October.

### **Advocacy**

(Chair: Jeanette Altavela, Vice Chair: Sarah McBane)

The Advocacy Committee has circulated policy e-mails from major stakeholders (e.g., APhA, ACCP, AACP, APHA) among the committee membership to increase awareness of organizational advocacy activity. Several committee members have arranged an upcoming conference call with Ed Webb, ACCP staff, to discuss ways to connect with non-pharmacy organizations. The committee is developing a database of tips for hosting a legislator at a pharmacist's practice site. The committee hopes to stimulate contributions to the PAC and continues to brainstorm ways to increase ACCP member contributions.

## Cardiology PRN

The Cardiology PRN is pleased to report the following new and ongoing initiatives this year:

- (1) The Awards and Recognition Committee is soliciting nominations for the Junior Investigator Award, Mentoring Award, and Paper of the Year. Please contact committee cochairs Tien Ng and Rob DiDomenico with nominations.
- (2) A new ACCP research e-mail list, established by Jon Poynter, ACCP staff, is currently being piloted by the Cardiology, Critical Care, and Infectious Diseases PRNs. Contact the Cardiology PRN chair, Sheryl Chow, with questions about this e-mail list.
- (3) The Cardiology PRN is offering a new Student Travel Award to the ACCP Annual Meeting. Details will be posted on the StuNet and resident/fellow Web sites. Contact Sheryl Chow if interested.
- (4) The Cardiology PRN is currently offering a cosponsorship of one or two candidates for ACCP's FIT Program. Contact Sheryl Chow if interested.
- (5) A new Cardiology PRN-based research seed grant will be offered in the fall in the amount of \$2000. Details will be provided after ACCP's 2011 Updates in Therapeutics. (PRN Grant Committee Chair: Amber Beitelshes)
- (6) The Cardiology PRN is collaborating with the Heart Failure Society of America on a white paper delineating the role of the clinical pharmacist in the care of the patient with advanced heart disease. (White Paper Chair: Sherry LaForest)
- (7) ACC H2H – The Cardiology PRN is working with the American College of Cardiology on an initiative in collaboration with Cardiology PRN members. (Chair: Barbara Wiggins)
- (8) A new PRN mentor/mentee program is being developed, and a pilot will be initiated in the coming months. (Chair: Cynthia Jackevicius)

## Cardiology PRN Business Meeting and Networking Forum

Sunday, April 10, 2011, from 6:30 p.m. to 8:30 p.m. (EDT)  
Fairfield room, Hyatt Regency Columbus  
Sponsored by Novo Nordisk

The Cardiology PRN is also pleased to announce three resident platform presentations as part of the upcoming spring PRN business meeting on April 10, 2011: **Sarah Zukkor** will present "Bleeding Outcomes Associated with Coronary Artery Bypass Graft Surgery and Recent Clopidogrel Exposure," **Pamela K. Burcham** will present "Efficacy of Prophylactic Amiodarone in Decreasing the Incidence of Post-operative Atrial Fibrillation in Cardiac Surgery," and **Azita Hajhossein Talasaz** will present "Evaluating the Potential Effect of *N*-acetylcysteine on Early Remodeling Biomarkers of ST-segment Elevation Myocardial Infarction: A Double-blind Placebo-Controlled Study" and will also provide a brief presentation describing clinical pharmacy in Iran.

## Individual Member Accomplishments

### Awards, Academic Appointments, Promotions, and Leadership

- **Nathan Clark's** publication "Low-Molecular-Weight Heparin Use in the Obese, Elderly, and in Renal Insufficiency" was the most-often downloaded article from *Thrombosis Research* in 2010.
- **Paul Dobesh** was honored in fall 2010 with the Educator of the Year Award from the University of Nebraska College of Pharmacy.
- **Jennifer Donovan** was granted an adjunct academic appointment at the associate professor rank – Department of Medicine-School of Medicine – University of Massachusetts Medical School, Worcester, Massachusetts.
- **Shannon Finks** was awarded Most Influential Professor by the Class of 2012 at the University of Tennessee.
- **Abir Kanaan** was granted an adjunct academic appointment at the assistant professor rank – Department of Medicine-School of Medicine – University of Massachusetts Medical School, Worcester, Massachusetts.
- **Karen McConnell** was promoted to clinical associate professor, Department of Pharmacy Practice, University of Colorado Denver School of Pharmacy.
- **Laura Richardson** gained Added Qualifications in CV (BCPS-AQ), developed a leadership and clinical position for pharmacy for an expanding VAD program, and developed a new PGY2 Cardiology Residency at Abbott Northwestern Hospital, Minneapolis, Minnesota.
- **Sarah Spinler** became an Associate of the American College of Cardiology (AACC).
- **Robert Talbert** was selected as a member of the Expert Panel on Medicare Medication Guideline Revision for the USP.
- **C. Michael White** was a finalist for the Provost's Awards for Excellence in Public Engagement, University of Connecticut, Storrs, Connecticut. Dr. White also presented at the Centers for Medicare & Medicaid Services MedCAC Advisory Board in January 2011 on the impact of transfusion on allograft survival.
- **Michael Zeolla, Khuong An, and Karen Fraraccio** received board certification in pharmacotherapy.

### Publications

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- **Allen LaPointe N**, Al-Khatib S, Piccini J, Atwater B, Honeycutt E, Thomas K, Shah B, Zimmer L, Sanders G, Peterson E. Extent of and reasons for non-use of implantable cardioverter defibrillator devices among eligible patients with left ventricular systolic dysfunction in clinical practice. *Circ Cardiovasc Qual Outcomes* 2011. Available at <http://circoutcomes.ahajournals.org/content/early/2011/02/08/CIRCOUTCOMES.110.958603.abstract>. Accessed March 26, 2011.

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## Grants

- **Paul Dobesh** was a mentor and coinvestigator of a grant from the American Association of Colleges of Pharmacy (\$10,000) for the project “Impact of Ethnicity on Platelet Function and Response to Aspirin and Clopidogrel.”
- **Cynthia Jackevicius** was a coinvestigator on a grant from the Canadian Institutes for Health Research (4 years, \$250,000 per year) for the project “Measuring and Improving the Quality of ST-segment Elevation Myocardial Infarction (STEMI) Care.”
- **Kathryn Momary** received a New Pharmacy Faculty Research Award from the American Association of Colleges of Pharmacy for the project “Contribution of *CYP2C19* Genotype and Smoking Status on Clopidogrel Responsiveness.”
- **Benjamin Van Tassell** was awarded an American Heart Association Scientist Development Grant (4 years, \$77,000 per year) for the project “Interleukin-1 Induces beta1-AR Dysregulation in Heart Failure Through a PI3Kgamma-Dependent Mechanism.” Dr. Tassell was also selected to receive an NIH K12 award (3 years, \$25,000 per year plus 75% salary) for research involving inflammatory signaling in cardiac dysfunction.

## Central Nervous System PRN

At the 2010 Annual Meeting in Austin, members voted to direct \$500 for a Central Nervous System PRN student poster competition. The competition will be promoted through StuNet. The Nominations Committee will develop the details.

## Announcements

- Ronald Reed, Pharm.D., recently returned to academia after 10 years in pharmaceutical industry research and development and was appointed the new chair of the Department of Pharmacy Practice, Husson University, School of Pharmacy in Bangor, Maine.
- Collin Hovinga, Pharm.D., M.S., recently received an M.S. degree in epidemiology.
- Congratulations to newly board-certified members:
- Joseph Aloi, Pharm.D., and Lisa Garrity, Pharm.D., received certification in pharmacotherapy.
- Thanarat Suansanae, BPharm, MPH, received certification in psychiatric pharmacy.

## Grants

Timothy Welty, Pharm.D., and Mikiko Yamada, Pharm.D., his post-Pharm.D. fellow, received a 2010 Epilepsy Foundation Clinical Research Fellowship Grant for a pilot study examining the use of Kampo medication for the treatment of catamenial epilepsy.

## Publications

- Benson H. Sederholm, Pharm.D., BCPS, recently published the following two articles in *Seminars in Neuro-*

ogy: "Treatment of Immune-Mediated Neuropathies: Guillain-Barré syndrome and its clinical variants." (Semin Neurol 2010;30:365–72); and "Treatment of Immune-Mediated Neuropathies: Chronic Inflammatory Demyelinating Polyradiculoneuropathy, Multifocal Motor Neuropathy, and the Lewis Sumner Syndrome." (Semin Neurol 2010;30:443–56)

- Ronald Reed, Pharm.D., recently published the following two articles:
- Reed RC, Meinhold J, Dutta S, Liu W, Qiu Y. What do the suffixes – XR, ER, chrono, chronosphere – really mean as it pertains to modified-release antiepileptic drugs? *J Clin Pharm Ther* 2010;35:373–83.
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### Presentations

Several members are presenting, or have presented, in the board certification preparation review courses.

- Jacquelyn Bainbridge, Pharm.D., FCCP, will present "Epilepsy and Headache/Migraine" in the ACCP "Ambulatory Care Pharmacy Preparatory Review Course" in Columbus.
- J. Mark Ruscin, Pharm.D., BCPS, will present "Neurology: Alzheimer Disease and Parkinson Disease" in the ACCP "Ambulatory Care Pharmacy Preparatory Review Course" in Columbus.
- Melody Ryan, Pharm.D., MPH, FCCP, BCPS, CGP, will present "Neurology" in the ACCP "Pharmacotherapy Preparatory Review Course" in Columbus.
- Michele Y. Splinter, Pharm.D., M.S., BCPS, has presented "Migraine," "Parkinson Disease," and "Seizure Disorders" in the ASHP/AphA ambulatory care pharmacy review courses.

### Clinical Administration PRN

The Clinical Administration PRN consists of members in formal or informal leadership roles with medication management in health systems across the country. As politics and health care continue to intermingle to a larger extent, the need for leadership becomes even greater. The PRN's foci for the upcoming year include pharmacy in the realm of health care reform and other contemporary clinical leadership hot topics such as Risk Evaluation and Mitigation Strategies (REMS); advancing pharmacy practice models, and best practices pertaining to the education and training of pharmacy students, pharmacy residents, and pharmacy staff.

The PRN is diligently working to develop a grant to promote practice-based research and foster interest in clinical pharmacy leadership.

### Critical Care PRN

#### Congratulations to New ACCM Fellows

Five ACCP Critical Care PRN members were recently inducted as fellows of the American College of Critical Care Medicine. This distinction is granted to less than half of those who apply and signifies the individual's "outstanding contributions to the collaborative field of critical care." Members inducted in 2011 include Troy E. Batterton, Pharm.D., FCCM; Mitchell Buckley, Pharm.D., FCCM, BCPS; Jeremy D. Flynn, Pharm.D., FCCM, BCPS; Anthony T. Gerlach, Pharm.D., FCCM, BCPS; and Jeffrey P. Gonzales, Pharm.D., FCCM, BCPS.

#### Critical Care PRN to Award Travel Grants

The Critical Care PRN will award a travel grant of \$1250 to partly support the costs of travel and attendance of one critical care fellow/resident and one young investigator at the ACCP 2011 Annual Meeting in Pittsburgh, Pennsylvania. The recipients of this award will be required to present their project as a brief platform presentation at the Critical Care PRN networking forum and business meeting. To be eligible, the award candidate must meet the following criteria:

- (1) Current member of the Critical Care PRN
- (2) Currently completing training, or completed training within the past year, in a critical care residency or fellowship program under the direction of a Critical Care PRN member
- (3) Have an abstract accepted for presentation at the ACCP 2011 Annual Meeting

#### Committee Adding Services for Trainees

The ACCP Critical Care PRN Student/Resident/Fellow Committee was formed in 2010 and charged with increasing trainee membership and involvement, highlighting the successes of this group, and disseminating ACCP initiatives targeted at these individuals. Specifically, the committee will be able to offer a one-time free PRN membership to all residents/fellows, which the committee is working to highlight. The committee is also developing a "Guide to the Critical Care PRN" for new trainee members to help them maximize available services and opportunities for involvement. Further information will be available at the 2011 Annual Meeting, but questions in the interim can be directed to Erin Frazee, chair of the Critical Care PRN Student/Resident/Fellow Committee, at [frazee.erin@mayo.edu](mailto:frazee.erin@mayo.edu).

#### Upcoming Survey to Target Member Achievements

The ACCP Critical Care PRN Recognition Committee recently nominated several deserving Critical Care PRN members for major ACCP awards, including the Russell R. Miller Award, the Clinical Practice Award, and the Education Award. In the coming months, the committee will send out a survey to the membership in an effort to update

achievements such as board certifications and fellowships to continue the History Document, as well as to identify PRN member abstracts accepted at ACCP meetings. Member responses will be greatly appreciated!

## Drug Information PRN

The Drug Information Center at Medical University of South Carolina (MUSC) has gone international. It will have an article every other month in the RIPER (Raghavendra Institute of Pharmaceutical Education and Research) Poison & Drug Information Center (PDIC) Bulletin, through the RDT Hospital, Bathalapalli, A.P., and RIPER (located at Chiyvedu Post, Anantapur, India). In addition, Kelli L. Garrison, Manager, Medication Use Policy & Informatics, MUSC, was recently published: Miller DF, Fortier CR, Garrison KL. Bar code medication administration technology: characterization of high-alert medication triggers and clinician workarounds. *Ann Pharmacother* 2011;45:162–8.

Maisha Kelly Freeman, Pharm.D., BCPS, Director of Drug Information, McWhorter School of Pharmacy, Samford University, has completed the degree requirements for the M.S. degree in pharmacy at the University of Florida. Dr. Freeman completed the requirements as part of the Applied Pharmacoeconomics track. This program, offered by the Department of Pharmaceutical Outcomes and Policy, provides students the opportunity to critique, apply, and participate in a team effort to conduct applied pharmacoeconomics research to improve clinical decision-making.

## Education and Training PRN

The Education and Training PRN membership has grown to 335 members; they are advancing the PRN's mission of promoting dialogue and interaction to develop programs that enhance the knowledge and skills needed to provide education and training within clinical pharmacy. The PRN and its members have accomplished much during the past several months.

The PRN members conducted their 4th annual Mock Interviewing Skills Workshop at the 2010 ACCP Annual Meeting. Twelve students, six residents, and two fellows participated in this session to learn key interviewing skills from clinical faculty and practitioners in preparation for applying to postgraduate training programs or initial career positions.

The Membership Committee is focused on welcoming new members and expanding the PRN's membership. Forthcoming efforts include updating Web site information, personally inviting ACCP liaisons, and supporting Committee Chair Heather Whitley, who will send a "welcome e-mail" to all new members. Future activities may include initiating an annual campaign publicizing the PRN, distributing quarterly letters to the membership highlighting activities, and using social networking sites to help keep members informed.

The Scholarly Activities Committee is finalizing a position paper on implementing active learning in U.S. school of pharmacy curricula and is planning to develop a book that will

offer useful teaching tips for clinical faculty and preceptors.

At the upcoming ACCP 2011 Updates in Therapeutics meeting in Columbus, Ohio, the PRN will host a focus session on learner-centered teaching. This continuing education session is scheduled for Sunday, April 10, from 1:30 p.m. to 3:30 p.m., and is also available for elective credit to ACCP members who are participating in the Academy Certificate Program in Teaching and Learning or the Academy Certificate Program in Clinical Practice Advancement.

Education and Training PRN member achievements include:

### Heather P. Whitley, Pharm.D., BCPS, CDE

#### Presentations:

Whitley HP. "Alabama Obesity Task Force Update." Boshell Diabetes and Metabolic Disease Research Day, Auburn University, Auburn, Alabama: March 2011.

Whitley HP. "Utilizing the Incretin System for Diabetes Mellitus." Alabama Association of Diabetes Educators, St. Vincent's Hospital, Birmingham: September 2010. ASNA 5-68.0; ABN ABNP0222.

Whitley HP. "Teaming for Care in Rural Communities: A Novel Interdisciplinary Rural Medical Home in Parrish, Alabama: Capstone Rural Health Center." Rural Health Conference. The University of Alabama, Tuscaloosa: September 2010. ACPE I-0210-2.5.

Whitley HP. "Expanding a Novel Interdisciplinary Rural Medical Home." McWhorter School of Pharmacy, Samford University, Birmingham, Alabama: September 2010.

#### Awards:

Lifesaving Patient Safety Award. Alabama Primary Healthcare Association – Capstone. 2010 Patient Safety and Clinical Pharmacy Services; U.S. Department of Health and Human Services, Health Resources and Services Administration.

Health Outcome Management Award. Alabama Primary Healthcare Association – Capstone 2010 Patient Safety and Clinical Pharmacy Services; U.S. Department of Health and Human Services, Health Resources and Services Administration.

Outstanding Performance Award. Auburn University Harrison School of Pharmacy. 2010 Patient Safety and Clinical Pharmacy Services; U.S. Department of Health and Human Services, Health Resources and Services Administration.

### Tali M. Johnson, Pharm.D., BCOP

Dr. Johnson successfully completed the Academy Certificate Program in Teaching and Learning.

### Michael J. Peeters, Pharm.D., MEd, BCPS

#### Publications

Gallegos PJ, Peeters MJ. A measure of teamwork perception for team-based learning. *Curr Pharm Teach Learn* 2011;3:30–5.



Peeters MJ, Sahloff EG, Stone GE. A standardized rubric for student presentations. *Am J Pharm Educ* 2010;74:Article 171.

Peeters MJ, Cox CD. Using the OSCE strategy for APPEs? *Am J Pharm Educ* 2010;74:Article 13.

Vaidya V, Peeters MJ, Partha G, Potnis P. Effect of having a prescription drug plan on asthma patients' use of controller medications [poster abstract]. ISPOR 2011.

**Beth H. Resman-Targoff, Pharm.D., FCCP**  
Publication

Resman-Targoff BH, Cicero MP. Aggressive treatment of early rheumatoid arthritis: recognizing the window of opportunity and treating to target goals. *Am J Manag Care* 2010;16:S249–S258.

**Anna M. Wodlinger Jackson, Pharm.D., BCPS**

Dr. Jackson recently accepted a new position as PGY1 Pharmacy Residency program director at Inova Fairfax Hospital in Falls Church, Virginia.

**Sandra Benavides, Pharm.D., and Joshua Caballero, Pharm.D., BCPP**

Publication

Benavides S, Garcia AS, Caballero J, Wolowich WR. The impact of student faculty ratio on pharmacy faculty scholarship. *Am J Pharm Educ* 2010;74:Article 138.

## Emergency Medicine PRN

### Current Officers of the Emergency Medicine PRN

Chair: Pamela Lada Walker, Pharm.D., BCPS  
Chair-Elect: Kevin O. Rynn, Pharm.D., FCCP, DABAT  
Secretary/Treasurer: Mary Beth Shirk, Pharm.D.  
Media Chair: Wichitah P. Leng, Pharm.D.

### Emergency Medicine PRN Networking Opportunity

Please stop by the Emergency Medicine PRN table at the ACCP networking breakfast on Sunday, April 10, 2011, from 7:30 a.m. to 9:00 a.m. in the Regency Ballroom of the Hyatt Regency Columbus as part of the series of networking breakfasts during ACCP's Updates in Therapeutics 2011.

The Emergency Medicine PRN would like to acknowledge and congratulate all of its members on their accomplishments and achievements:

### Presentations

**Michael C. Thomas Pharm.D., BCPS**, will be presenting the Emergency Medicine section of the ACCP "Ambulatory Care Pharmacy Preparatory Review Course" on Sunday, April 10, 2011, from 9:00 a.m. to 12:20 p.m.

## New PGY2 Emergency Medicine Residency Programs

Tampa General Hospital, Tampa, Florida  
The Ohio State University Medical Center, Columbus, Ohio

### Publications

**Nicole M. Acquisto, Pharm.D., BCPS**

Acquisto NM, Hays DP, Fairbanks RJ, et al. The outcomes of emergency pharmacist participation during acute myocardial infarction. *J Emerg Med* 2010 Aug 31. [Epub ahead of print]  
Acquisto NM, Gelbard WB. Medication use during pregnancy. *Emerg Med Rep* 2011;32. In press.

Acquisto NM, Baker SN. Antimicrobial stewardship in the emergency department. *J Pharm Pract* 2011;24. In press.

**Katelyn R. Dervay, Pharm.D., BCPS**

Dervay KR. Medications you should know in the event of emergencies and disasters. *AACN Adv Crit Care* 2010;21:121–5.

**Asad (Sid) Patanwala, Pharm.D., BCPS**

Patanwala AE, Stahle SA, Sakles JC, Erstad BL. Comparison of succinylcholine and rocuronium on first attempt intubation success in the emergency department. *Acad Emerg Med* 2011;18:11–4.

Patanwala AE, Keim SM, Erstad BL. Intravenous opioids for severe acute pain in the emergency department. *Ann Pharmacother* 2010;44:1800–9.

Patanwala AE, Amini A, Erstad BL. Use of hypertonic saline injection in trauma. *Am J Health Syst Pharm* 2010;67:1920–8.

Patanwala AE, Hays DP. Pharmacist's interventions in trauma patients in the emergency department. *Am J Health Syst Pharm* 2010;67:1536–8.

Patanwala AE, Warholak TL, Sanders AB, Erstad BL. A prospective observational study of medication errors in a tertiary care academic emergency department. *Ann Emerg Med* 2010;55:522–6.

Chisholm-Burns MA, Patanwala AE, Spivey CA. Hemolytic anemia, hepatitis, orthostatic hypotension, and aseptic meningitis in a G6PD-deficient male taking trimethoprim-sulfamethoxazole. *Am J Health Syst Pharm* 2010;67:123–7.

### Other Notable Achievements

Nicole M. Acquisto, Pharm.D., BCPS, was promoted to assistant professor of emergency medicine, University of Rochester School of Medicine and Dentistry.

Asad (Sid) Patanwala, Pharm.D., BCPS, has started his term as an editorial board member for the *American Journal of Health-System Pharmacy*.

## Endocrine and Metabolism PRN

The Endocrine and Metabolism PRN is composed of members from a variety of practice settings. The PRN was formed to achieve the following goals and objectives: (1) provide an opportunity for pharmacists with an interest in endocrine and metabolism disorders to promote practice, research, and education in these areas; (2) provide a mechanism for members with similar interests to meet during ACCP meetings to network, perform problem solving, and discuss professional issues and opportunities; and (3) promote practice involvement; educational needs of health care professionals, students, and patients; and research activities in the areas of endocrinology and metabolism that may be favorably affected by this ACCP PRN effort.

During the past 6 months, some notable member accomplishments are as follows:

### Publications

- **Chad Gentry**
  - **Gentry CK**, et al. Retrospective analysis and patient satisfaction assessment of insulin pump therapy in patients with type 2 diabetes. *South Med J* 2011;104:24–8.

### Abstracts/Posters

- **Jennifer Clements, Michelle Rager, and Emily Vescovi**
  - **Clements J, Rager M, Vescovi E**. The impact of a pharmacist on a short term medical mission trip. Poster presentation at the ACCP Annual Meeting, October 2010.
- **June Johnson**
  - **Yarlagadda K, Gleason S, Johnson JF, Vaughan A, Bhargava A**. The effect of the combination of pioglitazone and extended-release niacin on HDL cholesterol in diabetes patients in a community endocrinology practice. Poster presentation at the ACCP Annual Meeting, October 2010.

### Other Accomplishments

- **Gary Cohen** created new online journal for health care professionals – *specialtypharmajournal.com*.
- **Chad Gentry, Pharm.D.**, passed the CDE examination in late 2010.
- The Endocrine and Metabolism PRN would like to congratulate the following members who passed the Pharmacotherapy specialty certification offered by the Board of Pharmacy Specialties in October 2010:
  - **Kristin Campbell**
  - **Jamie McCarrell**

- **Michelle Rager**
- **Parastoo Rezaei**
- **Andrea Traina**
- **Emily Vescovi**

- The Endocrine and Metabolism PRN has more than 220 members and represents a diverse group of clinical pharmacists dedicated to advancing clinical practice, teaching, and research. The Endocrine and Metabolism PRN would like to welcome the newest members of the group since September 2010:

- **Melissa Millo**
- **Leanne Wentz**
- **Gina Banks**
- **Daniel Dailey**
- **Michele Michaels**
- **Samaneh Pourali**
- **Drilon Saliu**
- **Ashley Stull**
- **Jeana Walton-Day**
- **Abdullah Alhammad**
- **Mary Klein**
- **Catherine Sheffield**
- **Deborah Wittman**

### PRN Officer and Committee Updates

#### Resident Travel Scholarship

The Endocrine and Metabolism PRN residency travel scholarship is intended to provide financial support for a resident-level member to ACCP's 2011 Updates in Therapeutics. The applicant must be a resident member (PGY1 or PGY2) in the ACCP Endocrine and Metabolism PRN. The applicant must provide a statement explaining why he or she is involved with the Endocrine and Metabolism PRN and how attending the meeting will assist in the applicant's career and/or residency goals. A current copy of the applicant's CV, highlighting professional organizations and community service, with one letter of recommendation is required for complete application.

Congratulations to Dr. Leena Deshpande, a PGY2 Ambulatory Care resident at the Texas Tech Health Sciences Center and Veterans Affairs North Texas Health Care System, who will receive the first ACCP Endocrine and Metabolism PRN Resident Scholarship. She will receive \$500 to attend ACCP's 2011 Update in Therapeutics meeting in Columbus, Ohio, in April.

#### Weekly Online Journal Club

The Communication Committee continues to lead the PRN in the weekly online journal club on its PRN e-mail list. The online journal club was implemented in February 2010, and so far, the committee has reviewed more than 100 articles in the past 12 months. The purpose of the online journal club is to provide an awareness of key articles that add new information to the fields of endocrine and metabolism. Members of

the PRN are asked to contribute articles and comments periodically. Active members from the Communication Committee have been soliciting journal club articles from the PRN e-mail list and have been posting two articles each week. The following members have been involved in continuing the weekly online journal club: Jennifer Clements (Communication Committee chair), Emily Vescovi (member), Craig Logemann (member), Richard Hess (member), Rohit Moghe (member), Kent Porter (member), and Amy Calabrese Donihi (member). Please contact Jennifer Clements, [jcrist2@su.edu](mailto:jcrist2@su.edu), for more information about the online journal club.

### 2011 Focus Session

The Education Committee is working on the programming for the fall 2011 focus session for the Annual Meeting in Pittsburgh, Pennsylvania, titled "Rapid Clinical Pearls and a Clinical Debate in Endocrinology and Metabolism." The goal of the session is to review several controversial topics in endocrinology and metabolism.

### Geriatrics PRN

The Geriatrics PRN represents a diverse group of clinical pharmacy practitioners, teachers, and scholars dedicated to advancing clinical practice, teaching, and research for the Geriatrics scholarly community. The PRN consists of almost 240 members with more than 30 student members and several members currently in residency training. Members of the PRN are actively involved in ACCP, hold leadership positions within other national geriatric organizations, and provide training integral to the continued development of geriatric clinical pharmacy practitioners.

Some notable member highlights, opportunities, and contributions to the profession include:

### Leadership Positions

- **Albert Barber, Pharm.D., FASCP, CGP**, is the current president of the American Society of Clinical Pharmacists (ASCP) and also serves as national faculty for the ASCP/APhA MTM Certificate Program and the ASCP Foundation Pain Traineeship in Cleveland, Ohio. He currently operates a fee-based, in-home pharmacy consulting practice.
- **Mary Beth O'Connell, Pharm.D., FCCP, FASHP, BCPS**, recently completed a 5-year appointment on the Advisory Committee for the National Institutes of Health Office of Research on Women's Health, and she has been appointed to the National Osteoporosis Foundation's editorial board for their *Osteoporosis Clinical Updates*.
- **Sharon K. Vire, Pharm.D., FASCP, CGP**, currently serves on the CCGP (Commission for Certification in Geriatric Pharmacy) Examination Development Committee for the CGP (Certified Geriatric Pharmacist) national certification examination.

### Promotions/Appointments

- **Carlos Rojas-Fernandez, BSc(Pharm), Pharm.D.**, was appointed the Schlegel-UW RIA research chair in geriatric pharmacotherapy at the University of Waterloo School of Pharmacy in Waterloo, Ontario, Canada.

### Publications

- **Rojas-Fernandez CH**, Miller LJ, Sadowski CA. Considerations in the treatment of geriatric depression: overview of pharmacotherapeutic and psychotherapeutic treatment options. *Res Gerontol Nurs* 2010;3:176–86.
- Robb AS, Andersson C, Bellocchio EE, Manos G, **Rojas-Fernandez C**, Mathew S, et al. Safety and tolerability of aripiprazole in the treatment of irritability associated with autistic disorder in pediatric subjects (6-17 years old): results from a pooled analysis of 2 studies. *Prim Care Companion CNS Disord* 2011;13:e1–e9.
- Byers MG, Allison KM, Wendel CS, **Lee JK**. Prazosin versus quetiapine for nighttime posttraumatic stress disorder symptoms in veterans: an assessment of long-term comparative effectiveness and safety. *J Clin Psychopharmacol* 2010;30:225–9.
- Romero JJ, **Lee JK**. Is one ceruminolytic more effective than another? *Ariz Geriatr Soc J* 2010;15:22–3.
- **Lee JK**. GI disorders and nutrition. In: Hutchison L, Sleeper-Irons R, eds. *Fundamentals of Geriatric Pharmacotherapy*. Bethesda, MD: ASHP Press, 2010:257–95.
- **Lee JK**, Mendoza DM, Mohler J, Morris SJ. Geriatrics. In: Chisholm-Burns MA, Wells BG, Schwinghammer TL, et al, eds. *Pharmacotherapy: Principles and Practice*, 2nd ed. New York: McGraw-Hill, 2010:7–21.
- **O'Connell MB**, Borgelt LM, Bowles SK, Vondracek SF. Drug-induced osteoporosis in the older adult. *Aging Health* 2010;10:501–18.
- Book published: Borgelt L, **O'Connell MB**, Smith J, Calis K. *Women's Health Across the Lifespan: A Pharmacotherapeutic Approach*. Washington, DC: ASHP Publishing, 2010.
- Estus EL, Hume AL, Owens NJ. An active-learning course model to teach pharmacotherapy in geriatrics. *Am J Pharm Educ* 2010;74:38.
- Forinash AB, Becker ES, Owens NJ. Anatomy and physiology. In: Hansen LB, O'Connell MB, Smith J, Calis K, eds. *Women's Health Across the Lifespan: A Pharmacotherapeutic Approach*. Washington, DC: ASHP Publishing, 2010:87–131.
- **Owens NJ**, Estus EL. Renal and urologic disorders. In: Hutchison LC, Sleeper RB, eds. *Fundamentals of Geriatric Pharmacotherapy: An Evidence Based Approach*. Bethesda, MD: American Society of Health-System Pharmacists, 2010:191–225.
- **Owens NJ**, Forinash A, Matson KL. Sex and gender differences. In: Hansen LB, O'Connell MB, Smith J, Calis K, eds. *Women's Health Across the Lifespan: A Pharmacotherapeutic Approach*. Washington, DC: ASHP Publishing, 2010:103–15.
- Aspinall SL, Zhao X, Handler SM, Stone RA, Kosmoski JC, Libby EA, Francis SD, Goodman DA, Roman

RD, **Bieber HL**, Voisine JM, Jeffery SM, Hepfinger CA, Hagen DG, Martin MM, Hanlon JT. The quality of warfarin prescribing and monitoring in Veterans Affairs nursing homes. *J Am Geriatr Soc* 2010;58:1475–80.

- **Hilas O**, Avena-Woods C. Neurocardiogenic syncope: a focus on the management of vasovagal episodes. *US Pharm* 2011;36:HS2–HS11.
- Lamore R III, Jacob E, Jacob S, **Hilas O**. Dalfampridine (Ampyra): an aid to walking in patients with multiple sclerosis. *P T* 2010;35:665–9.
- **Hilas O**, Patel PN, Lam S. Disease modifying agents for multiple sclerosis. *Open Neurol J* 2010;4:15–24.
- Bryan MK, Nguyen MT, **Hilas O**. Syndrome of inappropriate antidiuretic hormone associated with tolterodine therapy. *Consult Pharm* 2010;25:320–2.
- Avena-Woods C, **Hilas O**. Febuxostat (Uloric®): a new treatment option for gout. *Pharm Ther* 2010;35:82–5.

### Presentations

- **Elizabeth Sebranek Evans, Pharm.D., BCPS, CGP**, assistant professor of pharmacy practice at the University of Southern Nevada, Utah campus, will be presenting “Exploring the Mysteries of Alzheimer’s Disease: An Update for Pharmacists” as a Continuing Education Seminar for the University of Southern Nevada.
- On September 30, 2010, **Linda Weffald, Pharm.D.**, joined a group of more than 40 experts from academia, health care management, consumer advocacy, and government to address the safe use of pain medications in older adults. She presented the activities in which Kaiser Permanente-Colorado is involved to reduce preventable harm from pain medications in older adults to the U.S. Food and Drug Administration. A link to this is at <http://www.fda.gov/Drugs/DrugSafety/ucm231647.htm>.

### Grants

- **Jeannie Kim Lee, Pharm.D., BCPS**, received a \$2,000,000 (10% effort) grant titled “Arizona Geriatric Education Center” from the U.S. Department of Health and Human Services, Health Resources and Services Administration. The goal of the project is to train health professionals throughout the state in the care of older adults. Dr. Kim is the coinvestigator and faculty providing clinical pharmacy expertise and education related to pharmacology in aging, pharmacotherapy, and medication management and adherence.

### Geriatric Education and Training Opportunity

- The University of Pittsburgh Geriatric Pharmaceutical Outcomes and Gero-Informatics Research and Training Program is a joint collaboration between the Division of Geriatric Medicine and Gerontology and the Department of Biomedical Informatics in the School of Medicine. The overall goal of this interdisciplinary program is to serve as a hub for research and research training in geriatric pharmaceutical and gero-informatics research. The program

is co-directed by Drs. Joseph T. Hanlon and Steven M. Handler and supported by faculty throughout the schools of the health sciences. Prioritized research topics include pharmacoepidemiologic studies to document medication-related problems in older adults and clinical and/or translational informatics studies to improve suboptimal prescribing, monitoring, and medication adherence and to reduce adverse drug reactions in the elderly. In addition to conducting cutting-edge research, the program is committed to building a cadre of future researchers. To do so, the program will provide mentoring to postdoctoral fellows and graduate and professional students. Mentoring will be supplemented by providing didactic and hands-on learning through classroom and seminar educational experiences, including a yearly Visiting Professor Program. The Geriatric Pharmaceutical Outcomes and Gero-Informatics Research and Training Program will also provide access to and help with the analysis of databases to support ongoing pharmacoepidemiologic and clinical informatics research. To support emerging science, the program will also provide pilot funding to support innovative interdisciplinary research. Check out the Web site that just went live (<http://www.gerimedsafe.pitt.edu/>)!

### GI/Liver/Nutrition PRN

The GI/Liver/Nutrition PRN has increased to 155 members, and it continues to grow! We enjoyed a good turnout at the PRN business meeting at the 2010 ACCP Annual Meeting, which allowed members and guests to network and begin the planning process for the 2011 educational focus session.

The GI/Liver/Nutrition PRN has been busy planning an educational focus session at the 2011 ACCP Annual Meeting in Pittsburgh in October. We hope you will join us to learn about “Contemporary Issues in the Management of Total Parenteral Nutrition.” The topics covered will include management of TPN in patients with kidney disease, management of TPN in patients with obesity, and micronutrient supplementation and long-term adverse effects of TPN therapy.

### Hematology/Oncology PRN

The Hematology/Oncology PRN has 534 members, including 11 new members. It represents a group of clinical pharmacists in a variety of practice settings, specializing in hematology, oncology, bone marrow transplants, and pediatric hematology/oncology.

The Hematology/Oncology PRN is developing a new award, the PGY-2 Oncology Resident of the Year Award. The PRN is currently developing criteria for the award, which is planned to be offered for the first time later this year.

The Hematology/Oncology PRN will join with the Pharmaceutical Industry and the Pain and Palliative Care PRNs to present a joint focus session at the 2011 ACCP Annual Meeting to be held in Pittsburgh, Pennsylvania, October 16–19. The topic will be “The Role of Clinical Pharmacists in Risk Evaluation and Mitigation Strategies (REMS) Programs.”

## Notable Member Accomplishments

- Tali Johnson, Pharm.D., BCOP, completed the ACCP Teaching and Learning Certificate in October 2010.
- Philip D. Hall, Pharm.D., FCCP, BCPS, BCOP, was promoted to campus dean of the South Carolina College of Pharmacy, Medical University of South Carolina campus. Dr. Hall practiced in oncology for 25 years before this promotion.

Dr. Hall also published the following:

- Bossaer JB, Hall PD, Garrett-Mayer E. Incidence of vancomycin-resistant enterococci (VRE) infection in high-risk febrile neutropenic patients colonized with VRE. *Support Care Cancer* 2011;19:231–7.
- Deborah Hass, Pharm.D., BCOP, received BCPS certification in December 2010.

## Immunology/Transplantation PRN

### New Members

We would like to welcome the following students, residents, and members to the PRN and encourage them to get involved and be sure to provide suggestions and comments to make this PRN even better. The PRN has grown to more than 300 members.

Morgan Comee	Associate member
Amanda Hetland	Student
Cathy Hau	Resident
Puay Hoon Lee	Student
Kevin Lor	Resident
Nicholas Parrish	Member
Jaclyn Powell	Resident
Jessica Steffl	Member
Hussam Tulba	Affiliate member
Alexandra Centeno	Resident
Tam Khuu	Member
Katelyn Richards	Resident
Teresa Tan	Resident
Aileen Chi	Resident
Antonia Routh	Member
John Knorr	Member

### Transplant/Immunology Residency and Fellowship

More than 20 programs were recruiting for transplant residents and fellows for 2011–2012. The PRN would like to congratulate the following programs and individuals on their early commitments. This list is incomplete because the national match date is March 23. The PRN will send a complete list after the match has occurred.

University of Pennsylvania	Daniel Miglioizzi
Yale-New Haven Hospital	Teena Sam
Duke University	Mike Hurtik
University of Cincinnati	Basma Sadaka (Fellow)
University of Cincinnati	Nicole Schmidt (Fellow)
Barnes-Jewish	Jennifer Hagopian

## Publications

We would like to congratulate the following PRN members on their publications during the past several months.

1. Tremolada S, Akhan S, Otte J, Khalili K, Ferrante P, Roy-Chaudhury P, Woodle ES, **Trofe-Clark J**, White MK, Gordon J. Rare subtypes of BK virus are viable and frequently detected in renal transplant recipients with BK virus-associated nephropathy. *Virology* 2010;404:312–8.
2. Cimsit B, **Tichy EM**, Patel SB, Rosencrantz R, Emre S. Treatment of adenovirus hepatitis with cidofovir in a pediatric liver transplant recipient. *Pediatr Transplant* 2011 Jan 12. [Epub ahead of print]
3. **Fleming JN**, **Weimert NA**. Novel strategies for immune monitoring. *Adv Chronic Kidney Dis* 2010;17:63–77.
4. **Fleming JN**, Abbass AA, Patel A. Hepatorenal syndrome. *Crit Care Nurs Clin North Am* 2010;22:351–68.
5. **Maldonado AQ**, Davies NM, Crow SA, Little C, Ojogho ON, Weeks DL. Effects of plasmapheresis on mycophenolic acid concentrations. *Transplantation* 2011;91:e3–e4.
6. **Knorr JP**, Grewal KS, Balasubramanian M, et al. Falsely elevated tacrolimus levels caused by immunoassay interference secondary to beta-galactosidase antibodies in an infected liver transplant recipient. *Pharmacotherapy* 2010;30:339e–343e.
7. **Clifford TM**, Daily MF, Gedaly R. Immunosuppressive strategies in liver transplantation for hepatitis C. *Trends Transplant* 2010;4:78–85.
8. Lunsford KE, **Harris MT**, Nicoll KN, et al. Single-site laparoscopic living donor nephrectomy offers comparable perioperative outcomes to conventional laparoscopic living donor nephrectomy at a higher cost. *Transplantation* 2011;91:16.
9. **Walsh RC**, Everly JJ, Brailey P, **Rike AH**, Arend LJ, Mogilishetty G, Govil A, Roy-Chaudhury P, **Alloway RR**, Woodle ES. Proteasome inhibitor-based primary therapy for antibody-mediated renal allograft rejection. *Transplantation* 2010;89:277–84.
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### Member Accomplishments

The PRN would like to recognize the accomplishments of the following members.

- **Jennifer Trofe-Clark** – Reappointment as adjunct professor of medicine in the Renal Electrolyte Hypertension Division at the University of Penn School of Medicine

- **Eric Tichy** – Meritorious Achievement Award from the Connecticut Society of Health System Pharmacy
- **James Fleming** – Residency Preceptor of the Year, Henry Ford Hospital
- **James Fleming** – Shadow of Influence Award, Henry Ford Hospital
- **Tim Clifford** – Preceptor Appreciation Award, University of Kentucky College of Pharmacy
- **Teresa Cavanaugh** – Rho Chi Faculty Excellence Award
- **Adele Rike Shields** – Nominated for Innovator-Healthcare Hero of Cincinnati
- **Nicole Schmidt** – ATC Young Investigator Award
- **Basma Sadaka** – ATC Young Investigator Award
- **Gordon Ingle** – Promotion to regional scientific director, Novartis Transplant
- **Renee Weng** – Apples for Preceptors Award, UCSF School of Pharmacy
- **Barrett Crowther** – American College of Clinical Pharmacy Transplant/Immunology PRN Resident/Fellow Travel Award

### Announcements

- (a) Please mark your calendars for the ACCP Annual Meeting to be held October 16–19, 2011, in Pittsburgh, Pennsylvania, for a meeting heavy in transplantation topics. A joint ACCP/American Society of Transplantation (AST) session titled “Symposium on the Management of Complications After Organ Transplantation” will be held in addition to the PRN’s joint focus session with the Nephrology PRN titled “Long-term Management of the Renal Transplant Recipient” and the PRN’s business meeting. We will keep you posted on the finalized program.
- (b) Through collaborative efforts between this PRN and the AST Transplant Pharmacists Community of Practice (CoP), a white paper to provide an overview of clinical pharmacists and pharmacist-researchers practicing in transplantation has been approved by both ACCP and AST and has been submitted for publication to the *American Journal of Transplantation*.
- (c) Congratulations to the following PRN members who have had abstracts accepted to the 2011 American Transplant Congress (ATC), which will be held in Philadelphia, April 30 to May 4, 2011. One hundred six abstracts with 63 PRN members as authors will be presented. Thirty-three PRN members are first authors on 50 of those abstracts.

Rita Alloway  
Winston Ally  
Anastasia Anamisis  
Iman Bajjoka  
Holly Barrier  
Lyndsey Bowman  
Maya Campara  
Adrian Carlson  
Teresa Cavanaugh  
Alexandra Centeno  
Aileen Chi  
Rosemary Cross  
Barrett Crowther

Wana Manitpisitkul  
Kwaku Marfo  
Spencer Martin  
Pamela Maxwell  
David Min  
Ali Olyaei  
Jeong Park  
Nilufar Partovi  
Samir Patel  
Nicole Pilch (Weimert)  
Adele Rike-Shields  
Christin Rogers  
Basma Sadaka

Kyle Dawson  
Travis Dick  
Benjamin Duhart  
Matthew Everly  
Keith Fester  
James Fleming  
Jennifer Fosnot  
Steven Gabardi  
Reed Hall  
Lynley Heinrich  
Heather Hurley  
Pamala Jacobson  
Jamie Joseph  
Nicole Kenyon  
Amy Krauss  
Ruth-Ann Lee  
Sabrina Lee  
Lance Lindberg  
Kevin Lor

Kristine Schonder  
Michael Spinner  
Linda Stuckey  
Eglis Tellez-Corrales  
James Thielke  
Erin Ticehurst  
Eric Tichy  
Crystal Truax  
Christie B. Truscott  
Demetra Tsapepas  
Kimi Ueda  
Tracy Valania  
Christy Varughese  
Ashley A. Vo  
Jennifer Walker  
Carlin Walsh  
Anne Wiland  
Renee Weng

- (d) All PRN members attending ATC in May are invited to attend the AST Transplant Pharmacist CoP reception scheduled for Sunday, May 1, 2011, from 5:00 p.m. to 6:30 p.m. The agenda and location have not been finalized. Details will be forwarded by the PRN e-mail list when available.

### Infectious Diseases PRN

The Infectious Diseases PRN continues to be one of the largest and most active PRNs, with 1428 members (through February 2011). About 5% of the PRN's membership is internationally based, with members from countries such as Australia, Canada, Saudi Arabia, and Singapore, among others. On average, members exchange more than 40 e-mails a week, sharing ideas to promote best practices.

The Infectious Diseases PRN hosted its annual business and networking session on October 18, 2010, at the ACCP Annual Meeting in Austin, Texas. They honored Michael S. North, Pharm.D., recipient of the Resident Travel Award and a current resident at the University of New Mexico Health Sciences Center in Albuquerque, New Mexico. He presented his research on the relationship of microbiological and virulence characteristics to staphyloxanthin (STX) production in methicillin-resistant *Staphylococcus aureus* (MRSA).

This year, the Infectious Diseases PRN set aside funds to help support members who have been accepted to the Focused Investigator Training (FIT) Program. Members who are accepted into the program may qualify for reimbursement for a portion of their travel costs. Additional activities include hosting a welcome table at ACCP's 2011 Updates in Therapeutics meeting and session planning for the ACCP Annual Meeting to be held this fall in Pittsburgh, Pennsylvania.

The 2010–2011 officers for the PRN include the following:

- *Chair*: Vanthida Huang, Pharm.D., Associate Professor, Mercer University College of Pharmacy and Health Sciences; e-mail: [huang\\_v@mercer.edu](mailto:huang_v@mercer.edu)

- *Chair-Elect*: Jason Gallagher, Pharm.D., BCPS, Clinical Associate Professor, Temple University; e-mail: [jason.gallagher@temple.edu](mailto:jason.gallagher@temple.edu)
- *Secretary/Treasurer*: Kristi Kuper, Pharm.D., BCPS, Clinical Director, Infectious Diseases Cardinal Health; e-mail: [kristine.kuper@cardinalhealth.com](mailto:kristine.kuper@cardinalhealth.com)

The PRN would like to welcome all of its new members and congratulate all of the current members on their recent publications and professional accomplishments.

### Pain and Palliative Care PRN

The membership of the Pain and Palliative Care PRN is now more than 260 pharmacists strong...and growing! This PRN would like to welcome the following new members who have joined the PRN since October 2010:

- Chris Campbell
- Deepa Desia
- Jeanine Humphreys
- Michele Michaels
- Hannah Pennington
- Joseph Sawicki
- Ashley Stull

### Member News and Highlights

#### Albert Barber

- Elected president of the American Society of Consultant Pharmacists (ASCP) for 2010–2011
- Serves as a preceptor for the ASCP Foundation Pain Management Traineeship, which is held twice yearly in Cleveland, Ohio, and focuses on post-acute/chronic pain and hospice and palliative care pain management

#### Jeffrey Fudin

- Inducted as a Fellow of ACCP at the 2010 Annual Meeting

#### Lynn Hamil

- Successfully completed the Pain Management Practice-Based Certificate Program sponsored by the New York State Council of Health-System Pharmacists in May 2010

#### Michele Matthews

- Practice site (Pain Management Center at Brigham and Women's Hospital); was selected a 2011 Clinical Center for Excellence by the American Pain Society

#### Mary Lynn McPherson

- Selected as one of six multidisciplinary Mayday Fellows

### Update on Board Certification in Pain and Palliative Care

The Board of Pharmacy Specialties (BPS) reviewed the petition to consider Pain and Palliative Care a specialty practice at its October 22, 2010, meeting. In a letter to Chris Herndon, Pharm.D., who submitted the petition, BPS

indicated that the first step would be a Role Delineation Study. The goal of the study is to identify the specialized knowledge and functions performed by pain and palliative care pharmacists. Ultimately, the results of the study may be used to guide the development of a new pharmacy specialty certification program. This process will include the selection of experts from within the specialty to work on the role delineation study during the summer. Their work will result in a preliminary content outline for the specialty, which will be circulated during the fall as a validation survey to pharmacists working in pain and palliative care. The results of this survey will be used to compile a report to be presented to BPS in December 2011. The Board's final recommendation will determine the ability to move forward with the full petition and creation of an examination. The PRN would like to thank and acknowledge the hard work of the advisory board of the Mayday Pain Summit for making this a reality!

### **Pediatrics PRN**

The Collaboration Committee of the Pediatrics PRN has completed preliminary work on the pediatric pharmacy specialty opinion paper, including types of pediatric pharmacy residencies and pediatric pharmacy board certification, according to PRN Chair Katherine Smith. The group has identified and outlined seven domains for pediatric pharmacy as a specialty practice and will finalize the report to the PRN during the next 3 months. Committee members include Kelly Bobo, Gretchen Brummel, Sandra Caballero, Allison Chung, Dave Knoppert (PPAG president-elect), Tracy Hagemann, JoEllen Hanigosky, David Hoff, Audrey Kennedy, Joseph LaRochelle, Sherry Luedtke, Bernard Lee, Tara McCabe, Marsha Mehta, Rebecca Pettit, Hanna Phan, Karen Porter, Amy Posts, Tracy Sandritter, Jennifer Thackray, Holly Watson, and Mary Worthington. Project mentors are Marcia Buck and Elizabeth Farrington. Richard Parrish is project leader and committee cochair.

### **Accomplishments of PRN Members**

The University of Arizona College of Pharmacy has established PediaCats, the first pediatric pharmacy student organization recognized by the Pediatric Pharmacy Advocacy Group. The mission of PediaCats is to unite students in a joint effort to improve the well-being of children within our community while emphasizing pediatrics as a specialty. The student organization is overseen by its student board and faculty advisers, Hanna Phan, Pharm.D., BCPS, and Kathryn Matthias, Pharm.D., BCPS.

For more information,  
<http://www.ppag.org/en/art/951/>; <http://www.ppag.org/en/art/951/>  
<http://www.pharmacy.arizona.edu/students/stdorgs/pediacats>; <http://www.pharmacy.arizona.edu/students/stdorgs/pediacats>

### **Publications and Presentations**

- Steven Plogsted, Pharm.D., BCNSP, CNSC, presented “Drug-Nutrient Interactions” for the Nutrition Support Review Course at the American Society for Parenteral and Enteral Nutrition Clinical Nutrition Week 2011 on January 29, 2011, in Vancouver, British Columbia, Canada.
- Dr. Plogsted also presented “Pharmacotherapy and Nutritional Aspects of Intestinal Failure in the Pediatric Patient” at the University of Findlay College of Pharmacy Grand Rounds, February 22, 2011.
- Plogsted SW. The ketogenic diet. *ICAN* 2010;2:370–6.
- Dr. Plogsted was section editor for the *Pediatric Nutrition Support Handbook*. American Society for Parenteral and Enteral Nutrition, 2011.
- Plogsted SW. Gluten in medications and supplements. In: *Real Life with Celiac Disease: Troubleshooting and Thriving Gluten Free*. American Gastroenterological Association Press, 2010.

### **Leadership and Honors**

Steven Plogsted, PharmD, BCNSP, CNSC, was voted Ohio Society for Parenteral and Enteral Nutrition Member of the Year for 2010, and he is president-elect for 2011 for the Ohio Society for Parenteral and Enteral Nutrition.

### **Pharmaceutical Industry PRN**

The Pharmaceutical Industry PRN has more than 240 members, including over 30 student members. This PRN supports members working in the pharmaceutical industry and provides awareness and education to members who do not work in the industry. This year, the PRN's focus is on highlighting the accomplishments of its members and on networking with other PRNs to foster collaboration on a variety of projects.

### **PRN Business**

- The PRN is looking forward to meeting you at the networking breakfast on Saturday, April 9, at ACCP's 2011 Updates in Therapeutics meeting. Please join us to catch up with old friends and meet new colleagues.
- The Programming Committee is developing two separate, joint educational symposia for the ACCP Annual Meeting. The PRN is collaborating with the Hematology/Oncology and Pain and Palliative Care PRNs on an educational symposium focused on REMS programs. In addition, the PRN is collaborating with the Endocrine and Metabolism PRN on a separate educational symposium regarding drug dosing in obesity. The committee is now confirming speakers.
- The Nominations Committee is currently taking nominations for 2010–2011 PRN leadership positions and other ACCP awards.



## Achievements

We are honored to announce the following achievements of our fellow members:

- Jill Chappell, Pharm.D., has been selected to participate in the inaugural class of the Lilly Ambassadors. Eli Lilly has initiated an employee volunteer service program in partnership with Cross-Cultural Solutions (CCS) to allow 200 employees (“ambassadors”) to complete a 2-week, on-the-ground service experience to enhance cross-cultural learning and understanding in countries where many people lack resources or access to quality health care. As a volunteer, Dr. Chappell will go to Lima, Peru, this November to work alongside local people for a community organization that provides care, health care, teaching, and community development services in areas around Lima (<http://www.crosscultural-solutions.org/volunteering-abroad/who/working-professionals/Lilly.aspx>).
- Liza Takiya, Pharm.D., FCCP, recently presented an educational session on “Statistics: Real-life Examples” at the 2011 Medical Communications Workshop meeting of the Drug Information Association.

## Pharmacokinetics/Pharmacodynamics PRN

The Pharmacokinetics and Pharmacodynamics PRN is hosting a table at one of the complimentary networking breakfasts to be held during ACCP’s 2011 Updates in Therapeutics meeting in Columbus, Ohio. The breakfast will occur on Saturday, April 9, from 7:30 a.m. to 9:00 a.m. If you are attending ACCP’s 2011 Updates in Therapeutics, please join us for informal networking.

## Women’s Health PRN

### Member Achievements

#### Sally Rafie

Publication: Sauberan S, Lane J, Anderson P, Rafie S, Nguyen N, Rossi S. Breast milk hydrocodone and hydromorphone levels in mothers using hydrocodone for postpartum pain. *Obstet Gynecol* 2011;117:611–7.

#### Gerald Briggs

1. Invited to Japan by the National Center for Child Health and Development to give talks at a national conference and at the School of Pharmacy, Showa University;
2. Moderated and spoke at the OTIS 12th annual midyear research team meeting in Dallas, Texas;
3. Gave an invited 3-hour lecture on drugs in pregnancy and lactation to third-year pharmacy students at the University of Southern California, Los Angeles;
4. Invited to Virginia Commonwealth University, Richmond, to give lectures to pharmacy students and at a seminar for obstetricians and nurses, to meet with students and faculty members to promote inclusion of obstetric pharmacotherapy in the curriculum, and to meet

with representatives of the Virginia government to promote the involvement of pharmacists in state programs to improve pregnancy outcomes and child health;

5. In Alexandria, Virginia, will participate in a meeting of the AACP-FDA Women’s Health Curriculum Task Force;
6. In Jerusalem, Israel, will moderate a session at the joint meeting of OTIS and the European Network of Teratology Information Services (ENTIS);
7. In San Francisco, will give two talks at a Neonatal Pharmacology conference;
8. In San Diego, will moderate a session at the joint meeting of OTIS and the Teratology Society and, at this meeting, will give a talk at the Gerald Briggs Research Symposium;
9. The 9th edition of his book *Drugs in Pregnancy and Lactation* will soon be released;
10. Appointed a consultant to the Pregnatox Research Group at Georgetown University Medical Center in Washington, DC;
11. Appointed to the Scientific Advisory Board for the Mom-PREGMED Research Program, a new study being conducted by the University of Montreal that will draw subjects and controls throughout Canada.

#### Conchetta White Fulton

1. Elected secretary-treasurer of the Louisiana State Chapter of ASCP
2. Received her silver certificate from the Louisiana Board of Pharmacy in recognition of 25 years in the profession

#### Mary Beth O’Connell

1. Just finished a 5-year appointment on the Advisory Committee for the National Institutes of Health Office of Research on Women’s Health
2. Appointed to the National Osteoporosis Foundation’s editorial board for their *Osteoporosis Clinical Updates*.
  - Completed a 2-week visiting professorship for Global Awareness Inc., Study of Medical Plants and Culture in Amazonia, in Iquitos, Peru
3. Presentations:
  - “New Approaches to the Management of Osteoporosis.” American Pharmacists Association 2010 Annual Meeting, Washington, DC
  - “The Osteoporosis Piece of the Multi-morbidity Puzzle – Part 2. Osteoporosis Drug Interactions.” American Geriatrics Society 2010 Annual Meeting, Orlando, Florida
  - “Assessing the Complex Senior Patient: Hip Fracture: Part 2. Inpatient and Outpatient Osteoporosis Treatment.” Michigan Pharmacists Association Annual Convention and Exhibit, Detroit, Michigan
5. Abstract  
Mendez J, Afonso N, O’Connell MB, Stutrud C. “Reaching Beyond the Textbook in Teaching Geriatric Care: Implementing a Senior Home Visit Project in Undergraduate Medical Education.” Chicago, IL: Central Group on Educational Affairs, 2010.

6. Publications – Articles
  - O’Connell MB, Borgelt LM, Bowles SK, Vondracek SF. Drug-induced osteoporosis in the older adult. *Ageing Health* 2010;6:501–18.
7. Publications – Book chapters
  - Sias JJ, O’Connell MB, Birch J, Salie A, Taylor R. Ethnic and Religious Considerations in Women’s Health Across the Lifespan – A Pharmacotherapeutic Approach. Washington, DC: ASHP Publishing, 2010:21–38.
  - O’Connell MB, Patel N, Hame SL. Bone and joint disorders. In: *Women’s Health Across the Lifespan – A Pharmacotherapeutic Approach*. Washington, DC: ASHP Publishing, 2010:641–56.
  - O’Connell MB, Fritsch M. Musculoskeletal and connective tissue. In: *Fundamentals of Geriatric Pharmacotherapy: An Evidenced-Based Approach*. Washington, DC: ASHP Publishing, 2010:385–418.

#### Alicia Forinash

Forinash AB, Yancey AM, Pitlick JM, Myles T. Safety of the HPV bivalent and quadrivalent vaccines during pregnancy. *Ann Pharmacother* 2011 Feb 1. [Epub ahead of print]  
 Bollmeier SG, Wenger PJ, Forinash AB. Impact of online lecture-capture on student outcomes in a therapeutics course. *Am J Pharm Educ* 2010; 74:Article 127.

#### Alicia Forinash, Jamie Pitlick, and Kylie Barnes

Yancey AM, Pitlick JM, Forinash AB. What is the prophylactic role for the human papillomavirus quadrivalent vaccine in males? *Ann Pharmacother* 2010;44:1314–8.  
 Forinash AB, Pitlick JM, Clark K, Alstat V. Effects of nicotine replacement therapy during pregnancy. *Ann Pharmacother* 2010;44:1817–21.

## RESEARCH INSTITUTE UPDATE

As ACCP’s Updates in Therapeutics 2011 approaches, we wanted to share with you an update of the Research Institute’s activities as well as its successes. Thank you for supporting the ACCP Research Institute.

### MEDAP Study Is Now Closed

The Medication Error Detection, Amelioration, and Prevention (MEDAP) Study was launched on August 5, 2010, and closed on December 31, 2010. The purpose of the MEDAP Study was to gather information regarding interventions clinical pharmacists make across the country that are related to medication error detection, amelioration, and prevention. This was the sentinel feasibility project for the ACCP PBRN and was funded by the Frontiers Fund. Seventy clinical pharmacists documented more than 700 interventions related to medication errors. Data analysis is under way. Thanks to all ACCP PBRN members who participated in this important feasibility project!



## Be Part of the Next ACCP PBRN Study

Join the ACCP PBRN. Go to [accpri.org](http://accpri.org) to join by answering questions related to you, your practice site, and the clinical services you provide. You can complete the registry tool from within **PBRNConnect** ([www.accpri.org/pbrnconnect](http://www.accpri.org/pbrnconnect)). Once you join the registry, you need to complete a portfolio with **PBRNConnect** so that you can participate in any PBRN project ([www.accpri.org/pbrnconnect](http://www.accpri.org/pbrnconnect)).

### What is PBRNConnect?

The ACCP PBRN has created a one-stop resource for all PBRN-related materials called **PBRNConnect**. Located at [www.accpri.org/pbrnconnect](http://www.accpri.org/pbrnconnect), this resource allows ACCP PBRN members to view, print, and download all research and PBRN-related documents. In addition, **PBRNConnect** will serve as a repository for all PBRN-related training. Moreover, each ACCP PBRN member will need to upload his/her own portfolio documents within the secure **PBRNConnect** site to be eligible to participate in ACCP PBRN studies. ACCP PBRN members access this site using their usual *ACCP.com* log-in.

### Partner with ACCP PBRN

The ACCP PBRN is interested in establishing collaborative research efforts with both internal and external stakeholders. However, at this time, the Board of Trustees of the ACCP Research Institute has directed the ACCP PBRN to only solicit projects with funding available or project ideas that will be submitted for funding.

All project ideas are welcome. Because all 22 PRNs are represented within inpatient and outpatient practice sites, the ACCP PBRN membership mirrors the general ACCP membership. All investigators wishing to collaborate with ACCP PBRN who have funding or who are applying for funding will be asked to complete the ACCP PBRN Project Concept Description. A template for the ACCP PBRN Project Concept Description is available at <http://www.accpri.org/pbrn/partner.aspx>. Investigators are encouraged to contact the ACCP PBRN office at (913) 492-3311.

### New Platform Selected for PBRN Projects

The ACCP PBRN has chosen the **REDCap** system as an alternative method of electronic data capture. REDCap (Research Electronic Data Capture) is a secure, Web-based application designed exclusively to support data capture for research studies. The ACCP PBRN entered into a consortium agreement with Vanderbilt University to use this tool. The REDCap application has more than 11,710 end-users spanning numerous research focus areas across the consortium and the recently released REDCap Survey application.

There is no cost to the ACCP PBRN to join the consortium and use the software. The ACCP PBRN has hired a Web developer to assist clinical pharmacist-investigators in creating their data collection tools using REDCap for their PBRN projects.

### I have more questions. Where can I send them?

Contact us at [pbrn@accp.com](mailto:pbrn@accp.com) with any questions. Thank you.

### Contributing Members of the ACCP PBRN Registry

The ACCP PBRN is grateful for the individual contributions of the following clinical pharmacists, who granted permission to include their data for analysis in the manuscript titled "Characterizing the American College of Clinical Pharmacy Practice-Based Research Network (ACCP PBRN)" as published in *Pharmacotherapy* (2010;30:264e-273e). The manuscript and a list of all contributing members are available at <http://www.accpri.org/pbrn/index.aspx>.

The ACCP PBRN continues to grow since its launch in February 2009. We have more than 600 members to date, including members who have joined through existing PBRNs and whose data are not shown below. We encourage each of you to join!

#### ACCP PBRN Members (2/15/2011)

ACCP PBRN Members (2/15/2011)	PRN Name
77	Adult Medicine
157	Ambulatory Care
94	Cardiology
13	Central Nervous System
22	Clinical Administration
102	Critical Care
6	Drug Information
56	Education and Training
18	Emergency Medicine
24	Endocrine and Metabolism
19	Geriatrics
17	GI/Liver/Nutrition
14	Health Outcomes
45	Hematology/Oncology
31	Immunology/Transplantation
94	Infectious Diseases
20	Nephrology
25	Pain and Palliative Care
41	Pediatrics
5	Pharmaceutical Industry
15	Pharmacokinetics/Pharmacodynamics
16	Women's Health

### Donate to the Frontiers Fund

"Frontiers Fund" is the name of the ACCP Research Institute's development campaign. The Frontiers Fund is the means by which the Research Institute, a 501(c)(3) nonprofit organization, is able to meet its strategic goals. A gift to the Frontiers Fund is the manner in which donors show support for ACCP's research agenda.



Your tax-deductible donation will...

- develop researchers,
- build a research network called the ACCP Practice-Based Research Network (ACCP PBRN), and
- generate evidence

...to further document the value of clinical pharmacy services and advance pharmacy research.

You can also make online donations at <http://www.accpri.org>.

### Focused Investigator Training (FIT) Program Success: With Support from the PRNs



We thank the Ambulatory Care, Cardiology, Critical Care, Hematology/Oncology, and Infectious Diseases PRNs for offering tuition scholarships to 2011 FIT attendees. The Research Institute encourages all PRNs to consider this professional development opportunity for its members. The FIT Program, which will be held June 11-16, 2011 at the University of Arizona College of Pharmacy in Tucson, is an annual, intensive, 1-week, hands-on program for experienced investigators who have not yet been awarded significant peer-reviewed extramural funding as principal investigators. Through this mentored program, research-track faculty will take necessary steps toward preparing a K, R, or similar investigator-initiated application for submission to the National Institutes of Health (NIH) or other major funding source. Online applications close on April 15, 2011.

This program works! The amount of *new* grant funding for the 18 participants in the 2008 FIT class exceeds \$2.1 million. Grants include various K and R awards as well as industry grants. *Are you an experienced researcher, maybe at the associate or professor level, who has just not yet received that big federal grant as a principal investigator?* Submit your proposal to the FIT Program. There, NIH-funded experts will analyze, dissect, chew on, think about, rehash, and then help you rebuild your proposal during the course of 1 week.

### PPD Bioanalytical Fluid and Tissue Grant Award



The Research Institute is pleased to announce an investigator development opportunity for full and associate ACCP members and individuals in fellowship training programs. The PPD Bioanalytical Fluid and Tissue Sample Grant Award supports the bioanalytical research efforts of ACCP member-researchers. PPD is a leading global contract research organization (CRO) providing discovery, development, and post-approval services as well as compound partnering programs. The primary purpose of the in-kind support grant is to allow ACCP members the use of state-of-the-art PPD laboratory facilities for conducting their sample analyses. This grant is for in-kind support at either the Richmond, Virginia, or Madison, Wisconsin, sites of PPD using their advanced state-of-the-art facilities.

### **What is PPD?**

PPD is a leading global contract research organization (CRO) providing discovery, development, and post-approval services as well as compound partnering programs. PPD's clients and partners include pharmaceutical, biotechnology, medical device, and academic and government organizations. This grant was established by Fred Eshelman, Pharm.D., longtime ACCP member and former Board of Trustee of the Research Institute. Dr. Eshelman is founder and CEO of PPD.

### **What is the purpose of this grant?**

The PPD Bioanalytical Fluid and Tissue Sample Grant Award supports the bioanalytical research efforts of ACCP member-researchers. These awards provide funding for in-kind support of bioanalytical sample analysis. The grant will not support the research proposals involved in collecting the samples; funding for the grant is limited to in-kind support of the analysis.

Award winners will be reimbursed for the travel, housing, and per diem costs associated with the ACCP member's time at the PPD Bioanalytical Laboratory.

### **Who is eligible for this grant?**

The ideal candidates for this grant are ACCP full or associate members and fellowship trainees who have access to biologic samples that are ready for analysis at the time of his/her application. An additional requirement is that this investigator does not have access to the technical expertise, equipment, or financial resources necessary to perform the analyses at his/her home institution.

### **What types of bioanalytical assays are available?**

A complete listing of the PPD Bioanalytical Laboratory tests can be found by [clicking on this link](#).

Work can also be performed at the PPD Global Central Laboratories' services, located in Highland Heights, Kentucky (just outside Cincinnati). For a complete list of tests available at that facility, go to [http://www.ppdi.com/services/labs/global\\_central\\_labs/pdf/listofservices.pdf](http://www.ppdi.com/services/labs/global_central_labs/pdf/listofservices.pdf).

### **Where will I go to complete my bioanalytical sample work?**

At a state-of-the-art PPD Bioanalytical Laboratory facility in Middleton, Wisconsin, or Richmond, Virginia, the investigator will work with on-site scientists to perform the analyses. As a result of this unique experience, the investigator will become versed in the entire process of the bioanalysis. The intent is not to train the award recipient on how to perform the bioanalysis, but rather, to allow the recipient to experience the analysis close up in a hands-on manner and thus be able to understand the processes, limitations, and strengths of the bioanalytical technique. The investigator will become well-versed in the bioanalysis in order to better explain and defend the use of such bioanalytical techniques when presenting the results. As such, the ACCP member will not have the option of sending samples for analysis to PPD beforehand or of sending a technician or nonmember in his/her place. Dates for award recipient travel to the PPD facility will be determined at mutually agreed-on times.

More typical clinical laboratory tests can also be done at the PPD Global Central Laboratories' services, located in Highland Heights, Kentucky (just outside Cincinnati).

### **When will the call for applications be open?**

There is an open call for applications. ACCP and PPD will jointly review submitted grant applications and work with awardees to coordinate schedules and procedures.

## **ACCP ADVOCACY UPDATE**

On January 3, 2011, the 112th Congress was sworn in, with Congressman John Boehner (R-OH) succeeding Congresswoman Nancy Pelosi (D-CA) as Speaker of the House of Representatives. The Democratic Party held onto their majority in the Senate, with Harry Reid (D-NV) retaining his position as Majority Leader and Conference Chair.

### **Health Care Reform – Repeal, Replace, De-fund?**

Republicans swept to power in the House of Representatives on an aggressive campaign agenda that promised to roll back many of the initiatives established during the first 2 years of the Obama administration – particularly those authorized by the health care reform Accountable Care Act that passed in 2010.

Yet despite a clear endorsement of the GOP at the November elections, Republicans face their own challenges – their strong majority in the House of Representatives countered by Democratic control of the Senate and White House.

Republican freshmen are discovering that promises made on the campaign trail to roll back the size and scope of the federal government may be tough to deliver. Even the issue of the health care reform effort – central to the Republican message that Washington has overreached itself – is not straightforward.

According to polls conducted by Kaiser Family Foundation and Harvard School of Public Health,<sup>1</sup> certain provisions of the law retain broad support, including closing the Medicare prescription drug benefit doughnut hole (85% in favor), offering subsidies to those with low and moderate incomes to purchase health coverage (79%), establishing a voluntary long-term care insurance program (76%), and expanding Medicaid to encompass more Americans (67%).

A combined 47% want to either expand it or leave it as is, whereas 43% say it should be repealed and then replaced by something else. But the notion of de-funding provisions of the law – a strategy being considered by Republicans that would involve using their majority in the House to simply block funding for new provisions – is not popular.<sup>2</sup>

Almost the first order of business for the newly sworn in House of Representatives was to introduce, and then pass, legislation that would repeal the controversial 2010 law. This action was, for the most part, symbolic. Democrats still hold the majority in the Senate, where the bill was defeated on party lines by a margin of 51-47. President Obama also vowed to veto any repeal legislation that made it to his desk.

In short, it is inconceivable that the Democrats, with control of the Senate and White House, will allow the overhaul of the landmark legislation that formed the centerpiece of their legislative efforts during the past 2 years.

## Introducing the 112th Congress

### Senate

- Majority – 53 Democrats (including two independents that caucus with the Democrats)
- Minority – 47 Republicans

### Senate Majority (Democratic) Leadership

- President of the United States Senate: Joe Biden
- President pro tempore: Daniel Inouye (HI)
- Majority Leader and Conference Chair: Harry Reid (NV)
- Assistant Majority Leader (Majority Whip): Dick Durbin (IL)
- Conference Vice Chair and Policy Committee Chair: Chuck Schumer (NY)
- Senatorial Campaign Committee Chair and Conference Secretary: Patty Murray (WA)

### Senate Minority (Republican) Leadership

- Minority Leader: Mitch McConnell (KY)
- Assistant Minority Leader (Minority Whip): Jon Kyl (AZ)
- Conference Chair: Lamar Alexander (TN)
- Policy Committee Chair: John Thune (SD)
- Conference Vice Chair: John Barrasso (WY)
- National Senatorial Committee Chair: John Cornyn (TX)

### House of Representatives

Majority – 242 Republicans: 242 (55.6% voting share)  
Minority – 193 Democrats (44.4% voting share)

### Majority (Republican) Leadership

Speaker: John Boehner (OH)  
Majority Leader: Eric Cantor (VA)  
Majority Whip: Kevin McCarthy (CA)

### Minority (Democratic) Leadership

Minority Leader: Nancy Pelosi (CA)  
Minority Whip: Steny Hoyer (MD)  
Assistant Minority Leader: Jim Clyburn (SC)

### Key Committees

#### Senate Finance:

- Chair: Max Baucus (MT)
- Ranking Member: Orin Hatch (UT)

#### Senate HELP

- Chair: Tom Harkin (IA)
- Ranking Member: Mike Enzi (WY)

#### House Ways and Means:

- Chair: Dave Camp (R-MI)
- Ranking Member: Sander Levin (D-MI)

#### House Energy and Commerce:

- Chair: Fred Upton (MI)
- Ranking Member: Henry A. Waxman (CA)

#### House Appropriations

- Chair: Harold Rogers (KY)
- Ranking Member: Norm Dicks (WA)

## Health Care Reform – The Legal Challenge

As of November 2010, more than 20 separate legal challenges to the Affordable Care Act (ACA) had been filed in federal district courts across the country. The two challenges receiving the most media attention were filed by states; however, additional suits have been filed by state and federal legislators, universities, private citizens, and others. Although most of the cases have been filed by Republican governors and attorneys general, Republican legislators, and conservative organizations, a handful of cases have been filed by businesses and private citizens who oppose specific provisions of the law.

The cases mainly focus on the following areas of the ACA<sup>3</sup>:

- Individual responsibility – The law’s requirement that nonexempt individuals either maintain health insurance coverage or pay a penalty in the form of a tax
- Medicaid expansion – The law’s requirement that states participating in Medicaid expand their programs to cover non-elderly individuals with incomes below 133% of the federal poverty level, including individuals previously ineligible for federally assisted Medicaid benefits
- Insurance market reforms – Federal reforms aimed at curbing certain practices by health insurers, requiring insurers and self-insured group plans to issue and renew health insurance coverage without respect to the health status of individuals or groups; to offer coverage that is not subject to annual or lifetime limits; and to offer coverage that complies with certain other requirements
- Employer responsibility – The law’s minimum employer contribution responsibilities in the case of employers that either offer no plan or offer a plan with inadequate subsidies, with contribution responsibilities tied to the number of employees who qualify for a subsidy

Democrats and other proponents of health care reform remain quietly confident that the legal challenges to overturn the new law will ultimately prove unsuccessful. According to reports from the White House, “similar legal challenges to major new laws – including the Social Security Act, the Civil Rights Act, and the Voting Rights Act – were all filed and all failed.”<sup>4</sup>

Yet in December 2010, a federal judge in Virginia ruled that it was unconstitutional for the government to compel Americans to buy health insurance. The ruling, made by U.S. District Judge Henry E. Hudson, concluded that requiring most people to get insurance or pay a fine – as the law mandates starting in 2014 – is an unprecedented expansion of federal power and cannot be justified under Congress’s authority to regulate interstate commerce.

“It’s important to distinguish between the theater and the politics, and the implementation [of the law], which is still being carried out,” said Drew E. Altman, president of the Kaiser Family Foundation, a health care research and policy organization, to ensure supporters of the new law that the implementation process will not be impeded by legal challenges.<sup>5</sup>

## Health Care Reform – ACCP Advocacy Outlook

ACCP and its colleague organizations in Washington remain committed to working to fund and implement the clinical pharmacy provisions we fought to secure in the health reform law. We continue to meet with Republican and Democratic congressional offices to discuss the role of the clinical pharmacist as part of the multidisciplinary health care team and the importance of medication management in the patient-centered approach to health care delivery.

Because the congressional budget battle threatens a government shutdown, we must be realistic about the likelihood of securing additional appropriations. Accordingly, we have been exploring alternative approaches to funding the clinical pharmacy provisions to minimize the impact of the deficit.

## Medication Therapy Management (MTM) Grant Program

Section 3503 of the Patient Protection and ACA called for an MTM grant program that reflects a collaborative, multidisciplinary, inter-professional approach to providing services that “improve the quality of care and reduce overall cost in the treatment” of individuals with chronic illness.

With little in the way of specific guidance regarding the structure and scope of the grant program, the pharmacy community has been working closely with legislators and staff at the Agency for Healthcare Research and Quality (AHRQ) – the federal agency charged with delivering the grant programs.

During a series of meetings, the following research questions were developed to identify the type of evidence necessary to build highly effective MTM services and facilitate refinements in payer policies to promote the growth of services that benefit patients:

- Determine ways to optimize the effectiveness of MTM services as reflected in overall health outcomes?
- Which patients benefit the most from MTM services, and how do we ensure that these patients receive MTM?
- How do we enhance patient and provider engagement and satisfaction in MTM services?
- What methods and performance measures are useful in evaluating MTM services?

With AHRQ expected to issue a call for proposals (or Request for Applications) within a competitive grant process, ACCP has called on the agency to support research on a variety of models for MTM services through demonstra-

tion projects in a variety of settings with sufficient funding to ensure a robust test of MTM. Individual demonstration projects will likely require funding in excess of \$5 million dollars for a multi-year study, and we believe that four to six distinct projects may be necessary to generate the evidence necessary to guide future policy decisions.

Further refinement of the grant program will be facilitated by compliance of the Secretary with legislative language requiring consultation with experts in the design and implementation of the MTM grant program. ACCP also urged AHRQ to solicit the input of MTM providers and patients, as well as the input of research experts, when designing the grants program.

Our proposal to AHRQ highlights the importance of studying best practices for implementing MTM services and for engaging patients in these services so that pharmacists can be of maximal help to their patients.

## Patient-Centered Medical Home

Section 3502 of the Patient Protection and ACA establishes a federal grant program to assist with the development of community health teams that provide support to patient-centered medical homes (PCMHs).

The PCMH is a health care setting that provides comprehensive primary care by facilitating partnerships and care coordination between different health care professionals, including primary care providers, individual patients, and, when appropriate, the patient’s family.

Of importance, section 3502 specifically lists pharmacists as members of the proposed interdisciplinary, inter-professional team of health care providers. The law also requires that these health teams provide access to pharmacist-delivered medication management services, including medication reconciliation.

Although section 3502 of the ACA authorized this federal grant program, the program must be funded on an annual basis through the congressional budget and appropriations process. ACCP is working with its colleague organizations to educate lawmakers on the importance of this grant program in order to secure the funding.

ACCP’s Associate Executive Director, C. Edwin Webb, Pharm.D., MPH, has been working for more than 2 years with the Patient-Centered Primary Care Collaborative (PCPCC) ([www.pcpcc.net](http://www.pcpcc.net)) to develop resource documents that define the core structures and services of PCMHs.

PCPCC is a 600+ member coalition of health professional societies, clinicians from the principal health care professions, health plans, employer groups, patient care quality organizations, hospitals, and others. This coalition has worked together for more than 3 years, particularly during the health care reform debate in Congress, to define and advocate for comprehensive changes in the way primary care services are structured, coordinated, financed, and delivered.

Of special note and meaning for clinical pharmacists is the publication of the resource titled “The Patient-Centered Medical Home: Integrating Comprehensive Medication Management to Optimize Patient Outcomes” (please see

<http://www.accp.com/docs/positions/misc/CMM%20Resource%20Guide.pdf>.

The resource guide provides a descriptive framework for the provision of team-based comprehensive MTM services in the PCMH. Also included in the guide are examples of approaches, evidence of effectiveness, and an understanding of the close alignment between the principles of the PCMH and the purposes and outcomes to be achieved through a comprehensive approach to medication management that is team based and that actively engages the patient in the clinical care and goal-setting processes.

For more information on ACCP's work with the PCPCC, see [www.accp.com/report/index.aspx?iss=0810&art=9](http://www.accp.com/report/index.aspx?iss=0810&art=9).

## ACCP Advocacy – Get Involved!

ACCP's [Legislative Action Center](#) contains a wealth of information about your elected officials and allows you to communicate with your members of Congress.

## Invite Your Legislators to Tour Your Practice Setting

Perhaps the single greatest challenge facing the pharmacy community in Washington is the enduring perception that pharmacists are drug dispensers who do not play a role in patient care.

The most effective step an ACCP member can take to help members of Congress understand the differences between a traditional retail pharmacy and the patient care services provided by a clinical pharmacy is to invite members to tour a practice setting and to see firsthand what clinical pharmacy is all about.

ACCP has prepared a guide to help you reach out to members of Congress and schedule a visit. ACCP has even drafted a letter you can send directly from the Legislative Action Center inviting your federal officials to tour your facility. [Click here](#) to visit the site and send a letter yourself!

NOTE – Please make sure to secure the necessary approval from your organization before requesting that members of Congress tour your practice setting.

Please also be sure to work closely with ACCP staff in Washington to ensure that your practice tour is as effective as possible. We can help you prepare for the event and follow-up.

Contact John McGlew at (202) 621-1820 or [jmoglew@accp.com](mailto:jmoglew@accp.com) to discuss how to conduct a successful meeting with a lawmaker and how to maximize your political impact with that lawmaker.

## Urge Your Senators to Cosponsor the Pharmacist Loan Repayment Eligibility Act of 2011 (S. 48)

On January 25, 2011, Senators Inouye (D-HI), Begich (D-AK), and Reed (D-RI) introduced the Pharmacist Student Loan Repayment Eligibility Act of 2011 (S. 48).

This bill would provide for the participation of pharmacists in the National Health Service Corps (NHSC) loan repayment program.

The purpose of this legislation is to increase patient access to patient-centered, team-based health care services for underserved populations. Specifically, this bill recognizes the vital role that pharmacists can play on the health care team by providing incentives for pharmacists to participate in the NHSC.

ACCP encourages you to contact your senators TODAY and urge them to cosponsor S. 48 and support its passage through the Senate. [Click here to take action.](#)

## Support the Preserving Access to Life-Saving Medications Act (S. 296)

Senators Amy Klobuchar (D-MN) and Robert Casey (D-PA) introduced S. 296, the Preserving Access to Life-Saving Medications Act.

The legislation directs the U.S. Food and Drug Administration (FDA) to address drug shortages by requiring drug manufacturers to notify the FDA about when problems occur regarding manufacturing or when a drug product will be discontinued, and it requires the agency to maintain an online list of drugs in shortage situations and revises the FDA's definition of "medically necessary." [Click here to take action.](#)

## Protect Funding for Poison Control Centers

On February 19, the U.S. House of Representatives passed a bill that would effectively eliminate the federal poison control program.

The House plan would cut \$27.3 million from the current \$29.3 million in funding, a cut that would lead to the closure of many of the nation's poison centers and result in skyrocketing health care costs and an erosion in public health.

To ensure public safety, these cuts must be curtailed. You can help by sending a letter to your senator alerting him/her to the disaster this could cause and urging him/her to protect funding for poison centers. [Click here to take action.](#)

## ACCP/ASHP/VCU Pharmacy Policy Fellow Program

In 2006, ACCP, the Virginia Commonwealth University (VCU) School of Pharmacy, and the American Society of Health-System Pharmacists (ASHP) established the country's first Pharmacy Healthcare Policy Fellow program.

Under the leadership of Gary R. Matzke, Pharm.D. (VCU School of Pharmacy), Ed Webb, Pharm.D., MPH (ACCP), and Brian Meyer (ASHP), the program was developed to provide active learning in multiple policy environments.

The first month of the program consists of an orientation curriculum conducted by the faculty of the VCU School of Pharmacy and the government affairs staff of ACCP and ASHP. Fellows then spend 1 year working as special assistants/fellows on the staff of a congressional committee or the personal staff of a U.S. senator or representative. The program provides a unique health care policy

learning experience that allows the Fellow to make practical contributions to the effective use of scientific and pharmaceutical knowledge in government decision-making.

The Fellow will be actively mentored during his or her development of legislative evaluation, policy development skills, and research and writing skills as they integrate practical policy experience with theory.

The Fellow will also be expected to undertake a wide array of responsibilities in the congressional office he or she serves, including researching and writing briefs on health care issues, assisting with policy decisions, drafting memoranda, and planning, organizing, and contributing to the management objectives of the office.

## Introducing the Pharmacy Healthcare Policy Fellows

**2006–2007.** The program's inaugural fellow – George Neyarapally, Pharm.D., MPH – worked in the Office of the Assistant Secretary for Preparedness and Response (ASPR) within the U.S. Department of Health and Human Services (DHHS) for 6 months, followed by almost 6 months in the office of Senator Joseph I. Lieberman (Independent-Connecticut).

Dr. Neyarapally went on to serve as a policy scientist in Pharmaceutical Outcomes Research in the Center for Outcomes and Evidence at the Agency for Healthcare Research and Quality (AHRQ) and is currently a pharmacist at the Office of Surveillance and Epidemiology within the Center for Drug Evaluation and Research at the FDA.

**2007–2008.** Our second Pharmacy Healthcare Policy Fellow – Anna Legreid Dopp, Pharm.D. – took leave from her position as a clinical assistant professor at the University of Wisconsin, School of Pharmacy to move with her husband to Washington, DC.

Dr. Legreid Dopp also worked on health care issues in the office of Senator Lieberman. Dr. Legreid Dopp returned to Wisconsin with her husband John and baby Krista and is currently serving on the pharmacy group at the Access Community Health Center, part of the Wisconsin Education Association (WEA) Trust, providing insurance as well as retirement and investment services to Wisconsin public school employees and their families.

**2008–2010.** Our third Pharmacy Healthcare Policy Fellow, Stephanie Hammonds, Pharm.D., served on the majority staff of the Senate Health, Education, Labor and Pensions (HELP) Committee under the leadership of Senator Ted Kennedy (D-MA).

Dr. Hammonds was also selected as the 2009–2010 Fellow on the basis of her strong desire to continue her contribution to the health care reform initiatives overseen by the Senate HELP Committee.

After her fellowship, Dr. Hammonds joined the Health Resources and Services Administration in the Office of Pharmacy Affairs, where her work focused on the Patient Safety and Clinical Pharmacy Services Collaborative and ACA Provisions related to the patient-centered health home,

care coordination during transitions of care, and clinical pharmacy services.

Dr. Hammonds is currently the manager of the Hospital Acute Care Pharmacies for Lifebridge Health in Baltimore, where her work blends policy and practice to develop a new community pharmacy business model.

**2010–2011.** Joshua P. Lorenz of Columbus, Ohio, is the 2010–2011 Congressional Healthcare Policy Fellow. Dr. Lorenz earned his Pharm.D. degree in 2009 from the Butler University College of Pharmacy and Health Sciences in Indianapolis. While enrolled at Butler, he also earned an MBA. He also recently completed a PGY1 pharmacy practice residency affiliated with The Ohio State University.

Dr. Lorenz began his fellowship on September 1, 2010, spending 1 month with the ASHP government affairs staff and 1 month with the ACCP government and professional affairs staff. Dr. Lorenz is currently serving as a Health Policy Fellow for the Minority Staff on the U.S. Senate HELP Committee under Senator Mike Enzi.

## Applications for 2012–2013 Pharmacy Healthcare Policy Fellow Program

Interested candidates should visit the Pharmacy Healthcare Policy Fellow program's [Web site](#) for more information and instruction on submitting and application.

**Contact Us!** For more information on any of ACCP's advocacy efforts, please contact:

John K. McGlew  
American College of Clinical Pharmacy  
1455 Pennsylvania Ave. NW  
Suite 400  
Washington, DC 20004-1017  
Telephone: (202) 621-1820  
Fax: (202) 621-1819

- 1 Source: WSJ article – Kaiser Poll: Mixed Feelings on Health Law but Opposition to Defunding. Available at <http://blogs.wsj.com/health/2011/01/25/kaiser-poll-mixed-feelings-on-health-law-but-opposition-to-defunding/>. Accessed January 28, 2011.
- 2 Source: Politico article – Republican Party eyes choking health law funding. Available at <http://www.politico.com/news/stories/0810/40536.html>. Accessed January 28, 2011.
- 3 Source: Health Reform GPS – Legal Challenges to the Affordable Care Act. Available at <http://healthreformgps.org/resources/health-reform-and-the-constitutional-challenges/>. Accessed January 28, 2011.
- 4 Source: The White House blog – Today's Health Care Court Ruling. Available at <http://www.whitehouse.gov/blog/2010/12/13/today-s-health-care-court-ruling>. Accessed January 28, 2011.
- 5 Source: Washington Post article – Federal Judge in Va. Strikes Down Part of Health-care. Available at <http://www.washingtonpost.com/wp-dyn/content/article/2010/12/13/AR2010121302420.html>. Accessed January 28, 2011.



## POSTGRADUATE TRAINEE LEADERSHIP OPPORTUNITY: APPLY NOW TO SERVE AS CHAIR OR VICE CHAIR OF THE 2011–2012 NATIONAL RESIDENT ADVISORY COMMITTEE.

The College encourages postgraduate trainees who want to enhance their leadership skills, network with colleagues across the country, and interact with clinical pharmacy leaders to apply for appointment to a leadership position on the 2011–2012 National Resident Advisory Committee.

The National Resident Advisory Committee is a standing committee composed of residents, fellows, or graduate students appointed each year by the ACCP president-elect. Members serve a 1-year term, and the committee is typically composed of 8–12 members. Appointed leadership positions include:

- Chair (1-year term)
- Vice Chair (1-year term)

The committee serves in an advisory capacity to the ACCP Board of Regents and staff, providing feedback and assistance in developing new programs and services for postgraduate trainee members, consistent with the College's vision of clinical pharmacy practice, research, and education.

The committee meets in person at the College's Annual Meeting in October and communicates by conference calls and e-mails to complete its assigned charges. Appointees to the National Resident Advisory Committee will receive a complimentary meeting registration to attend the ACCP Annual Meeting held during their committee term. Applicants can find additional information about the committee or enter their application at <http://www.accp.com/membership/rac.aspx>. The deadline for applications is June 17, 2011.

## STUDENT INITIATIVES UPDATE

### Student Member Demographics

We thank the many PRN members and liaisons who have encouraged students to consider professional membership in ACCP. Your efforts to reach out to students have considerably helped expand opportunities for students within the organization. During the past 4 years, the number of ACCP student members has more than tripled, reaching 1650 members as of March 2011.

### 2011 ACCP Clinical Pharmacy Challenge Registration Now Open

ACCP's novel national pharmacy student team competition returns with a bigger and better configuration. Because of the unprecedented level of interest in the 2010 competition, ACCP has expanded the Clinical Pharmacy Challenge, adding more online rounds and increasing the number of teams invited



to participate in live competitions during the ACCP Annual Meeting. Team registration is now available online. Please note all team registrations must be initiated by a current faculty member at the respective institution. Students interested in forming a team should contact their ACCP [faculty liaison](#). All team registrations must be completed by the deadline of September 6, 2011.

Eligible teams will have the opportunity to compete in up to four online rounds, with the top eight teams advancing to the live quarterfinal competition at the 2011 ACCP Annual Meeting in Pittsburgh, Pennsylvania, this October.

The ACCP Clinical Pharmacy Challenge is a team-based competition. Teams of three students will compete against teams from other schools and colleges of pharmacy in a “quiz bowl”-type format. Only one team per institution may enter the competition. Institutions with branch campuses, distance satellites, and/or several interested teams are encouraged to hold a local competition. ACCP will provide a written examination that institutions may use as a basis for their local competition, if they so desire. This examination will be available on or after April 4, 2011, and may be requested by the ACCP Faculty Liaison or registering faculty member by e-mail. Please address your e-mail request to Michelle Kucera, Pharm.D., BCPS, at [mkucera@accp.com](mailto:mkucera@accp.com). For more information on local competition, [click here](#).

Preliminary rounds of the national competition will be conducted virtually in September. The quarterfinal, semifinal, and final rounds will be held live at the ACCP Annual Meeting in Pittsburgh, October 15–17, 2011.

Each round will consist of questions offered in the three distinct segments indicated below. Item content used in each segment has been developed and reviewed by an expert panel of clinical pharmacy practitioners and educators.

- Trivia/Lightning
- Clinical Case
- Jeopardy-style

Each team advancing to the quarterfinal round held at the ACCP Annual Meeting will receive three complimentary student full meeting registrations. Each team member will receive an ACCP gift certificate for \$125 and a certificate of recognition. In addition to the above, semifinal teams not advancing to the final round will receive a semifinal team plaque for display at their institution. The second-place team will receive a \$750 cash award (\$250 to each member) and a commemorative team plaque. The winning team will receive a \$1500 cash award (\$500 to each member), and each team member will receive a commemorative plaque. A team trophy will be awarded to the winning institution.

Students are not required to be members of ACCP to participate. Team registration may be submitted online and must be initiated by a current faculty member at the respective institution. Students interested in forming a team should contact their ACCP [faculty liaison](#). If no ACCP Faculty Liaison has been identified, any faculty member from the institution may initiate the registration process. The registering faculty member must confirm the eligibility of all team members and/or alternates online before a team will be permitted

to compete in the Clinical Pharmacy Challenge. **The deadline to complete team registration and confirm eligibility is September 6, 2011.**

### ACCP National Student Advisory Committee

Initiated as a working group in 2006, the National StuNet Advisory Group became a standing committee of the College in 2007, whose members are appointed by the ACCP president-elect. The present 10-member committee serves in an advisory capacity to the ACCP Board of Regents and staff, providing feedback and assistance in developing new programs and services for student members. The current committee's work has focused on two distinct charges:

(1) Develop a brief commentary for publication in *Pharmacotherapy* that describes optimal approaches to conducting IPPE from the student's perspective.

(2) Provide content for the new ACCP student newsletter and updates for the Clinical Compass on an ongoing basis.

### Applications for the 2010–2011 National StuNet Advisory Committee Now Open

Please encourage students at your institution who are interested in learning more about clinical pharmacy to apply for appointment to the 2011–2012 National StuNet Advisory Committee. This is an excellent opportunity for students to enhance their leadership skills, network with students across the country, and interact with clinical pharmacy leaders. Students appointed to the committee will receive a complimentary student meeting registration to attend the 2011 Annual Meeting.

Applicants must submit a current copy of their CV, a 500-word essay detailing their interest in serving on the committee, and a letter of recommendation from an academic dean. Applications are due June 17, 2011. To learn more about the StuNet Advisory Committee or to access the online application portal, please visit <http://www.accp.com/stunet/advisoryCommittee.aspx>.

## PLAN NOW TO ATTEND THE 2011 ACCP ANNUAL MEETING

### October 16–19, 2011, in Pittsburgh, Pennsylvania

Join your colleagues for the 2011 Annual Meeting, October 16–19, at the “green-certified” David L. Lawrence Convention Center, located in the hub of Pittsburgh's cultural, business, and entertainment district. The “city of bridges” offers meeting attendees a bustling downtown and an extensive cultural and entertainment district.

The educational programming developed for the Annual Meeting provides attendees with new, high-quality information that will be both challenging and applicable to their practice. The 2011 Annual Meeting will offer many high-level educational programs in these curricular tracks:

- The Immunologic Basis of Pathophysiology and Therapeutics
- Innovative Pharmacy Practices and Expanding the Scope of Pharmacy
- Clinical Pharmacy and Global Health

The lineup of educational activities also includes programs within each of ACCP's four Academy Certificate Programs and PRN-developed focus sessions. The Annual Meeting schedule of events will again include scientific paper platform presentations and poster sessions, the Town Hall Meeting, and pharmacy industry forum exhibits. Once again, ACCP will conduct the semifinal and final rounds of the second annual ACCP Clinical Pharmacy Challenge for students.

Registration for the 2011 Annual Meeting will open in June. Watch the ACCP Web site for details. See you in Pittsburgh!

## PRN CONTACT INFORMATION

For more information about a specific PRN, please contact the individuals below:

Adult Medicine	<a href="#">Lindsay M. Arnold, Pharm.D., BCPS</a>
Ambulatory Care	<a href="#">Mitzi Wasik, Pharm.D., BCPS</a>
Cardiology	<a href="#">Sheryl L. Chow, Pharm.D., BCPS (AQ Card)</a>
Central Nervous System	<a href="#">Michele Y. Splinter, Pharm.D., BCPS</a>
Clinical Administration	<a href="#">Herbert G. Mathews III, Pharm.D.</a>
Critical Care	<a href="#">Ty H. Kiser, Pharm.D., BCPS</a>
Drug Information	<a href="#">Cathy H. Turner, Pharm.D.</a>
Education and Training	<a href="#">Sandra Benavides, Pharm.D.</a>
Emergency Medicine	<a href="#">Pamela Lada Walker, Pharm.D., BCPS</a>
Endocrine and Metabolism	<a href="#">Dawn E. Havrda, Pharm.D., FCCP, BCPS</a>
Geriatrics	<a href="#">Joseph P. Vande Griend, Pharm.D., BCPS</a>
GI/Liver/Nutrition	<a href="#">Brian A. Hemstreet, Pharm.D., BCPS</a>
Health Outcomes	<a href="#">Rolin L. Wade, RPh, M.S.</a>
Hematology/Oncology	<a href="#">Deborah A. Hass, Pharm.D., BCOP</a>
Immunology/Transplantation	<a href="#">Kimi R. Ueda Stevenson, Pharm.D.</a>
Infectious Diseases	<a href="#">Vanthida Huang, Pharm.D., BSPharm</a>
Nephrology	<a href="#">Thomas D. Nolin, Pharm.D., Ph.D.</a>
Pain and Palliative Care	<a href="#">Michele L. Matthews, Pharm.D.</a>
Pediatrics	<a href="#">Katherine P. Smith, Pharm.D., BCPS</a>
Pharmaceutical Industry	<a href="#">Liza Takiya, Pharm.D., BCPS, CDE</a>
Pharmacokinetics/Pharmacodynamics	<a href="#">Julie H. Oestreich, Pharm.D., Ph.D.</a>
Women's Health	<a href="#">Alicia B. Forinash, Pharm.D., BCPS</a>

## PRN MEMBERSHIP TOTALS

Ambulatory Care	1292
Adult Medicine	905
Clinical Administration	306
Cardiology	895
Central Nervous	162
Critical Care	1508
Drug Information	268
Education and Training	349
Emergency Medicine	322
Endocrine and Metabolism	228
Geriatrics	246
GI/Liver/Nutrition	151
Health Outcomes	138
Hematology/Oncology	529
Immunology/Transplantation	293
Infectious Diseases	1420
Nephrology	207
Pain and Palliative Care	270
Pediatrics	589
Pharmacokinetics/Pharmacodynamics	159
Pharmaceutical Industry	262
Women's Health	156
<b>Totals</b>	<b>10,655</b>