**PRESIDENT’S COLUMN**

**Establishing Clinical Pharmacist Core Practice Competencies**

Several pharmacy organizations have recently addressed the need to establish competency in our profession among students, residents, and practitioners. In the past 3 months, the American College of Clinical Pharmacy (ACCP) has released two new guidelines: the updated ACCP guideline on clinical pharmacist competencies (www.accp.com/docs/positions/guidelines/Competencies_Final_2.25.17.pdf) and the accompanying ACCP template for evaluating clinical pharmacists (www.accp.com/docs/positions/guidelines/Lee_3.3.17.pdf). Both papers are available on our website and will soon be published in *Pharmacotherapy*. These guidelines update the 2008 paper on clinical pharmacist competencies and the original 1993 “Template for the Evaluation of a Clinical Pharmacist” and were written by the 2016 ACCP Certification Affairs and Clinical Practice Affairs committees, respectively.

The “ACCP Clinical Pharmacist Competencies” paper includes six core competencies necessary for providing clinical pharmacy services in team-based, patient-centered care settings: direct patient care, pharmacotherapy knowledge, systems-based care and population health, communication, professionalism, and continuing professional development. These domains are intended to ensure clinical pharmacists’ competency to provide comprehensive medication management as defined in the 2014 ACCP Standards of Practice (www.accp.com/docs/positions/guidelines/StndrsPracClinPharm_Pharmac8-14.pdf) and are in general alignment with the core competencies for practicing physicians established by the Accreditation Council for Graduate Medical Education (ACGME; www.ecfmg.org/echo/acgme-core-competencies.html).

The updated “ACCP Template for Evaluating a Clinical Pharmacist” relies on assessment of tasks associated with the six core clinical pharmacist competencies. The authors include criteria for evaluating several optional tasks as well, such as serving in leadership roles, conducting pharmacotherapy-related research, and educating health care professionals. The template design includes suggestions for evaluating performance in each domain and provides a column for users to insert their own criteria to define success within the clinical pharmacist’s specific practice environment.

The timing of these new ACCP guidelines coincides with that of several other pharmacy or health care–related competency-based documents. In 2016, the Interprofessional Education Collaborative released an update of its Core Competencies for Interprofessional Collaborative Practice (https://ipecollaborative.org/uploads/IPEC-2016-Updated-Core-Competencies-Report_final_release_.PDF). The document includes four competency areas: working with individuals of other professions to maintain a climate of respect and shared values; using the knowledge of the individual’s own role as well as the roles of other professions to assess and direct the health care needs of patients and promote and advance the health of populations; communicating with patients, families, communities, and other professionals to support a team approach to the promotion of health and prevention and treatment of disease; and applying relationship-building values and the principles of team dynamics to plan, deliver, and evaluate patient- and population-centered care. This document, designed for use in interprofessional education as well as clinical practice, is further divided into subcompetencies and serves as a useful tool for either individual or team-based assessment. It may also be useful as a supplement to the ACCP clinical pharmacist evaluation template when the team as a whole needs to be evaluated to add context to clinical pharmacist performance.
Other recent guidelines include those of the American Society of Health-System Pharmacists, which released the latest revision of the Accreditation Standard for Postgraduate Year One (PGY1) Pharmacy Residency Programs in 2016 (https://www.ashp.org/professional-development/residency-information/residency-program-directors/residency-accreditation/accreditation-standards-for-pgy1-pharmacy-residencies). This is the latest update of the major revision in the 2014 standard. An updated standard for postgraduate year two (PGY2) programs was released in 2015, with competency areas, goals, and objectives for programs in critical care, oncology, pediatrics, and psychiatry released in 2016. Documents for the remaining PGY2 programs are expected to be released later this year. These new standards and accompanying competency areas, goals, and objectives were developed to better reflect current pharmacy practice, with greater emphasis on team-based practice and process improvement, further streamlining of the evaluation process, and provision of increased consistency across programs. Although these residency competencies don’t currently align closely with the ACCP or ACGME competencies, they reflect iterative progress toward better defining the patient care–related learning outcomes achieved during postgraduate training.

In late 2016, the American Association of Colleges of Pharmacy (AACP) also released a new document, “Core Entrustable Professional Activities for New Pharmacy Graduates” (www.aacp.org/governance/councilfaculties/Documents/coreEntrustableProfessionalActivitiesforNewPharmacyGraduates.pdf). This document was designed to reflect similar efforts in academic medicine to define the activities that can be entrusted to new medical school graduates in 2014 by the Association of American Medical Colleges (AAMC), “Core Entrustable Professional Activities for Entering Residency: Curriculum Developers’ Guide” (https://members.aamc.org/eweb/upload/Core%20EPA%20Curriculum%20Dev%20Guide.pdf). Moreover, the AACP entrustable professional activities (EPAs) document for pharmacists aligns with the AAMC EPAs for medical school graduates. The six domains listed in the AACP document are patient care provider, interprofessional team member, population health promoter, information master, practice manager, and self-developer. Although the medicine and pharmacy documents differ, there is considerable agreement within the knowledge, patient care, population health, communication, professionalism, and continued professional development components that contribute to the respective EPAs.

I believe the emphasis on establishing and updating professional competencies is a very positive sign for the pharmacy profession because it reflects our continued professional evolution toward team-based, patient-centered care. Better definitions and evaluations of our clinical competence will no doubt contribute to improved patient medication-related outcomes.

PRNs Prepare for Elections

Introduction
It is time for the PRNs to determine 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’s 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 related to election procedures to each candidate. The Nominations Committee shall also provide a timeline and 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 narrowing the slate to three candidates. The Nominations Committee will obtain a brief (250 words) biographical sketch or candidate statement from each 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 website. Each member will then be able to access the ballot for each PRN of which he or she is a current member.
2017 Election Timetable

<table>
<thead>
<tr>
<th>Event</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>PRN call for nominations</td>
<td>March 2017</td>
</tr>
<tr>
<td>Submission of slates and candidate biographies to ACCP</td>
<td>June 9, 2017</td>
</tr>
<tr>
<td>Electronic balloting opens</td>
<td>August 14, 2017</td>
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<tr>
<td>Committee contact notified of results</td>
<td>August 17, 2017</td>
</tr>
<tr>
<td>Nominations Committee notifies all candidates of election results</td>
<td>August 23, 2017 (within 10 days of the election)</td>
</tr>
<tr>
<td>27 ACCP staff notifies new officers of meeting date and time at the ACCP Annual Meeting</td>
<td>September 2017</td>
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</tbody>
</table>

As the election nears, members should review their e-mail messages and the ACCP website for further news about online voting.

NEW ACCP ANNUAL MEETING TEMPLATE

New Meeting Template for the 2017 ACCP Annual Meeting

Join us October 7–10, in Phoenix, Arizona, for the 2017 ACCP Annual Meeting. Beginning in 2017, the American College of Clinical Pharmacy (ACCP) will debut a new Annual Meeting template, reconfigured to better meet the needs of the College’s diverse membership. The first full day of programming will begin Saturday, October 7, and the conference will conclude one day earlier, Tuesday, October 10.

The new meeting template offers members the quality, cutting-edge clinical education programming that ACCP has always consistently delivered. This year’s educational sessions will address a variety of issues facing the clinical pharmacy profession, including the opioid epidemic, antibiotic resistance, mobile health technology in the treatment of the modern-day patient, and the long-term effects of newer agents for diabetes. ACCP will also continue to offer specialized clinical programming, including Practice and Research Network (PRN) focus sessions, Academy programming, advocacy initiatives, and scientific poster sessions. Student participants can learn how to “Emerg from the Crowd” as residency candidates, and residents and fellows will find programming designed to meet their specific needs as they transition into new practitioners.

New this year, ACCP professional recruitment opportunities will be expanded to include a forum for new practitioners as well as sessions dedicated to members seeking residency or fellowship training. Participants will be able to meet face-to-face with employers offering a variety of postgraduate training and entry-level positions.

Practitioners seeking Board of Pharmacy Specialties recertification credit will have ample opportunity to earn recertification credit during the Annual Meeting, with the Clinical Reasoning Series in Ambulatory Care, Critical Care, and Pharmacotherapy or the BCOP Clinical Sessions cosponsored by ACCP and the American Society of Health-System Pharmacists.

Registration for the 2017 ACCP Annual Meeting will open June 1. Early-bird registration rates will be available until September 1. Please visit www.accp.com after June 1 for complete Annual Meeting information.

PRN NEWS BRIEFS

Adult Medicine PRN

Members of the AMED PRN work tirelessly to expand the frontiers of clinical pharmacy by improving patient care, conducting research, and providing education in their everyday practices. This is no better demonstrated than by the 95 posters presented by AMED PRN members at the 2016 ACCP Annual Meeting in Hollywood, Florida. These included the AMED PRN Poster of the Year, “Identification of Risk Factors Associated with Urinary Tract Infections Caused by ESBL Organisms in a Community Hospital” (by Tiffany Dickey, Pharm.D.; Victoria Seaton, Pharm.D.; and Bradley Gann, Pharm.D.), which was also a runner-up for ACCP Best Poster Award. Since the Annual Meeting, there has been a flurry of activity in the PRN. In the fall of 2016, the AMED PRN reformed its committee structures to include a merged Internal Affairs Committee and a new External Affairs Committee. The AMED PRN also launched social media sites in November 2016, including a Facebook page (www.facebook.com/accpamedprn) and a Twitter account (@accpamedprn). Follow us and use the hashtag #amedprn! In 2017, we began monthly online journal clubs led by pharmacy practice residents and started a mentorship program for PRN members in their first few years of practice. We are excited about our new programs and activities and are proud of our members’ recent accomplishments (outlined below). We hope you join us in congratulating them!

Promotions

- **Michael D. Novario:** Regional Director of Pharmacy Operations for OSF HealthCare.
- **Mate M. Soric:** Vice Chair, Practice-Based Research, Northeast Ohio Medical University College of Pharmacy.
Grants

- Sarah L. Anderson: Project title: Qualitative and Quantitative Assessment of Electronic Examination Implementation. Funding Agency: University of Colorado Skaggs School of Pharmacy and Pharmaceutical Sciences. Direct costs: $2175.00.

Awards

- Mate M. Soric: American College of Clinical Pharmacy New Clinical Practitioner Award.

Alexandra Vance:

- Navy Pharmacy’s Civilian Pharmacist of the Year, October 2016.
- Naval Hospital Jacksonville Senior Civilian Employee of the Year (for 2016), February 2017.

Publications


New ACCP Fellows

• Sarah A. Nisly
• Kurt A. Wargo
• Abigail M. Yancey

Other Notable Achievements


• Kelly Covert: Assistant Professor of Pharmacy Practice, East Tennessee State University Bill Gatton College of Pharmacy.


• Andrew Miesner: BCPS recertification.

• Beth Resman-Targoff: “Rheumatoid arthritis in the geriatric patient, secondary prevention, polypharmacy and challenges” and “Interprofessional case discussion.” Invited talks at: Clinical Focus Course, Association of Rheumatology Health Professionals; November 12, 2016; Washington, DC.

• Jon Wietholter: July 2016: Facilitator’s Workshop: Clinical Pharmacy in South Africa. Presented at: University of the Western Cape in Cape Town, South Africa.

Ambulatory Care PRN

Promotions

• Mate M. Soric: Vice Chair, Practice-Based Research.

Awards

• Marissa Salvo: 2016 University of Connecticut School of Pharmacy’s Faculty Preceptor of the Year Award.

• Mate M. Soric: American College of Clinical Pharmacy New Clinical Practitioner Award.

Grants

• Sarah L. Anderson: University of Colorado Skaggs School of Pharmacy and Pharmaceutical Sciences.

• Ashley Crowl: New Investigator Award, AACP (with mentors Sarah Shrader and Crystal Burkhardt): Best Practices for Assessment of Interprofessional Team-Ready Behaviors on APPEs.

• Glenn Herrington: Alliance for Patient Medication Safety Gaps in Diabetes Care Residency Incentive Grant.

• Adriane N. Irwin: Principal Investigator, 2017 AACP New Investigator Award: Exploring Patient Perceptions of Pain Contracts and the Role of the Pharmacist, $9988.

Publications


• Wong A, Amato MG, Seger DL, Slight SP, Beeler PE, Dykes PC, Fiskio JM, Orav EJ, Eguale T,


Other Notable Achievements


- Eric Burke: SE Alaska Chair, Alaska Pharmacists Association Board of Directors.

- Dave L. Dixon: BCACP certification.

- Regina Ginzburg: CDE and BC-ADM certification.

- Lucas G. Hill: Director, Operation Naloxone: Interprofessional opioid overdose prevention program for college campuses, health professionals, and community members.

- Wendy Mobley-Bukstein: Health and Wellness Coach (CHWC) certification.

- Jordan Sedlacek: BCACP certification.

- Katie Traylor: BCACP and BC-ADM certification.

Oral Presentations

• **Martin MT.** Updates on gastrointestinal disorders. CPE presented at: American College of Clinical Pharmacy Updates in Therapeutics® 2017 Ambulatory Care Preparatory Review and Recertification Course; February 18, 2017; Jacksonville, FL.

• **Martin MT.** The future of HCV management for managed care: differentiating therapy by patient characteristics. CE presented for: PRIME at the Academy of Managed Care Pharmacy (AMCP) Ohio-Kentucky Chapter Meeting; September 20, 2016; West Chester, OH.

• **Martin MT.** Optimizing HCV treatment continuity and outcomes: empowering pharmacists to take action. CPE presented at: Pharmacy Learning Network Regional Meeting; March 4, 2017; Orange County, CA.

### Cardiology PRN

#### Promotions

• **Jessica Bellone:** Associate Professor, Concordia University Wisconsin.

• **Brie Dunn:** Associate Dean, Outcomes Assessment & Accreditation, University of South Carolina College of Pharmacy.

#### Awards

• **Sally Arif:** Outstanding Faculty Advisor Award, Midwestern University Student Senate.

• **Jason Karnes:** University of Florida Outstanding Young Alumnus.

#### Grants

• **William L. Baker:** AHRQ Grant $355,000: Pharmacologic Management of Asthma. Role, Coinvestigator.

• **Leo Buckley:** Pharmacometabolomic Response to Interleukin-1 Blockade in Patients with Recently Decompensated Heart Failure (Heart Failure Society of America to Leo Buckley [Principal Investigator]).

• **Jason Karnes:** American Heart Association Scientist Development Grant.

#### Publications


• **Baker WL.** Treating arrhythmias with adjunctive magnesium: identifying future research directions. Eur Heart J Cardiovasc Pharmacother 2016 Sep 15. [Epub ahead of print]


• **Trankle CR, Canada JM, Buckley LF, Carbone S, Dixon DL, Arena R, Van Tassell BW, Abbate A.** Impaired myocardial relaxation with exercise
determines peak aerobic exercise capacity in heart failure with preserved ejection fraction. ESC Heart Fail 2017. In press.


- **Dobesh PP, Fanikos J. Reducing the risk of stroke in patients with nonvalvular atrial fibrillation with direct oral anticoagulants: is one of these not like the others? JAFIB 2016;9:66-74.


- **Jennings DL. Heart failure therapy in 2016: SHIFTing the PARADIGM from antiquated


- Thompson AN, McKinzie BP, **Nappi JM, Haney JS,** Pilch N. Making the transition from student to resident: a method to individualize a PGY1 program. Pharmacy 2016;4:31.

- **Ng TM,** Menon R, Hauptman PJ. Reconfiguring the hospital-to-home transition into an active treatment period for patients with heart failure. JAMA Cardiol 2017.


- Mitrugno A, Sylman JL, Ngo ATP, **Pan J,** Sears RC, **Williams CD,** McCarty OJT. Aspirin therapy reduces the ability of platelets to promote colon and pancreatic cancer cell proliferation: implications for the oncoprotein c-MYC. Am J Physiol Cell Physiol 2017;312:C176-80.


• Floroff CK, Palm NM, Steinberg DH, Powers ER, Wiggins BS. Use of higher maximum doses and infusion rates compared with those used in standard unfractionated heparin therapy is associated with adequate anticoagulation without increased bleeding in both obese and nonobese patients with cardiovascular indications. Pharmacotherapy 2017.

Presentations

• DePatis K, McLaughlin M, Kliethermes MA, Quinones-Boex A, Kolanczyk D, Schmidt J, Tran T, Vest KM. Factors influencing fourth year pharmacy student pursuit of research. Student poster presented at: ASHP Midyear Meeting; December 2016; Las Vegas, NV.

• Masic D, Greenhalgh E, Kolanczyk DM. Evaluation of appropriate prescribing of rivaroxaban and apixaban and clinical outcomes in a large academic medical center. Student poster presented at: ASHP Midyear Meeting; December 2016; Las Vegas, NV.

New ACCP Fellows

• Amber Beitleshees
• Dave Dixon
• Sherry LaForest
• Harminder Sikand
• Kyle Weant

Other Notable Achievements

• Dave L. Dixon: BCACP certification.
• Jason Haney: BCCCP certification.

James E. Tisdale:

• Board of Directors, AZCERT.
• Electrophysiology Section Leadership Council, American College of Cardiology.

Brian J. Trevorrow: Present at: Seventh Annual Seminar on Therapeutics and Clinical Practice of Pharmaceutical Care:

• “Competence and Performance Assessment for Clinical Pharmacists.”
• “Methods on Becoming an Outstanding and Qualified Clinical Pharmacist.”
• “Anticoagulation and Antithrombotic Therapy Management in Hospitalized Patients.”

Pharmacist educational symposium offered at Tongji University School of Medicine in conjunction with Department of Pharmacy, Shanghai Yangpu District Central Hospital, Yu Zicheng, M.Sc., Ph.D., Director; August 2016; Shanghai, PR China.

Toby C. Trujillo:

• CVT Member, Cardiovascular Team Section Leadership Council, American College of Cardiology.
Chair, Research and Scholarship Committee, Cardiology PRN, American College of Clinical Pharmacy.

Member, Legislative Committee, Colorado Pharmacists Society.

Central Nervous System PRN

Promotions

• Joshua Caballero: Chair, Department of Clinical and Administrative Sciences, Larkin Health Sciences Institute, Miami, Florida.

Awards

• Stephanie Nichols: Cardinal Health Generation Rx Champion Award (for excellence in community-based prescription drug abuse prevention).

Grants

• Joshua Caballero: Health Literacy Assessment and Intervention to Reduce Disparities: FLIGHT/VIDAS II. Supplement PA16-288:3R01MD010368-01S1. 2016. $51,950. Co-Principal Investigator (awarded).

Publications


• Sitges M, Aldana B, Reed RC. Effect of the antidepressant sertraline, the novel anti-seizure drug vinpocetine and several conventional antiepileptic drugs on the epileptiform EEG activity induced by 4-aminopyridine. Neurochem Res 2016;41:1365-74.


New ACCP Fellows

• Ronald Reed

Other Member Accomplishments

• Stephanie Nichols: Adjunct Clinical Assistant Professor of Psychiatry, Tufts University, School of Medicine.

• Ronald Reed: Fellow, American Epilepsy Society (FAES), as of December 2017.

• Tim Welty: Chair-Elect, Council on Clinical Activities, American Epilepsy Society.

Clinical Administration PRN

Promotions

• Eric Harvey: Director, System-wide Clinical Pharmacy, Swedish Medical System, Seattle, Washington.

• Andrew Lucas: Research Assistant Professor, UNC Eshelman School of Pharmacy.

Awards

• Angela Black Smith: NC Governor’s Award for Excellence.

Critical Care PRN

The Critical Care PRN Recognition Committee has been completing its charges for the year. Several members have been nominated for ACCP offices and awards. The Critical Care PRN honors its members by presenting its own awards every year. Nominations are currently...
open for these awards and will close in August 2017. PRN members were recognized for their achievements at the PRN business meeting at the 2016 ACCP Annual Meeting. If you are interested in joining the Recognition Committee, please e-mail Nick Peters (npeters.butler@gmail.com).

Promotions
- **John Allen**: Division Director, Infectious Diseases Pharmacy, HCA West Florida.
- **Kisha Grant**: Pharmacy Clinical Coordinator, Slidell Memorial Hospital.
- **Kimberly Levasseur-Franklin**: Senior Clinical Pharmacy Specialist, Critical Care, Tufts Medical Center.
- **Hesham Mourad**: Assistant Professor of Pharmacy, Mayo Clinic College of Medicine.
- **Nick Peters**: Residency Coordinator, Suburban Hospital, Johns Hopkins Medicine.

Awards
- **Sarah Blackwell**: New Practitioner of the Year, Alabama Society of Health-System Pharmacists.
- **Scott Bolesta**: Presidential Citation, SCCM.
- **Mitchell Buckley**: ASHP Foundation Pharmacy Practice Research Literature Award.
- **Sonia Everhart**: Best Practices Award, ASHP.

Leslie Hamilton:
- AACP Walmart Scholar.
- University of Tennessee Most Influential Professor.

Drayton Hammond:
- Arkansas chapter of American College of Clinical Pharmacy New Clinical Practitioner Award.
- American College of Clinical Pharmacy Critical Care PRN Leadership Award.
- Arkansas Association of Health-System Pharmacists New Practitioner of the Year.

Desiree Kosinsky:
- ASHP Best Practices Award.
- SCCM Clinical Pharmacy and Pharmacology Section Young Pharmacist Investigator Award.
- **Eric Mueller**: University of Cincinnati James L. Winkle College of Pharmacy Distinguished Alumni Award.
- **Joseph Muench**: Pharmacy Times 2016 Technology Innovator of the Year Finalist.

Grants
- **Bolesta S**: Advancing the Cardiovascular Science of Vitamin C in Cardiac Surgery Patients. Submitted August 2016; Wilkes University. Amount requested: $10,000 in direct costs. Funding period: 01/01/2017-12/31/2017. Receiving agency/agent: Wilkes University.

Publications
- Flannery AH, Oyler DR, Weinhouse GL. The impact of interventions to improve sleep on delirium


- Thompson AN, McKinzie BP, Nappi JM, **Haney JS**, Pilch N. Making the transition from student to resident: a method to individualize a PGY1 program. Pharmacy 2016;4:31.


**New ACCP Fellows**

- **John Allen:** American College of Critical Care Medicine.
- **Pete Johnson:** Pediatric Pharmacy Advocacy Group.

**Other Notable Achievements**

**Karen Berger:**

- Board Certified Critical Care Pharmacist (BCCCP)
- New York City Chapter of Health-System Pharmacists President-Elect
- **Kara Birrer:** Chair-Elect of Perioperative Care PRN
- **Mitchell Buckley:** Board Certified Critical Care Pharmacist (BCCCP)

**Elizabeth Beckman:**

- BCCCP certification.
- Vice Chair, Advanced Knowledge Assessment in Pediatric Critical Care Committee (AKAPCC), SCCM.

**Sarah Blackwell:** BCCCP certification.

**Scott Bolesta:** Secretary-Treasurer, SCCM Research Section.

**Mitchell Buckley:**

- 2017 American College of Clinical Pharmacy Annual Meeting Planning Committee.
- Blame the benzos for ICU delirium! Culprit or innocent bystander? Platform presentation at: ASHP Midyear Meeting; December 2016; Las Vegas, NV.

**Alexander Flannery:**

- PGY2 Critical Care Residency Program Director at UK HealthCare.
- Vice Chair, American College of Clinical Pharmacy 2018 Annual Meeting Program Committee.
- American College of Clinical Pharmacy Research and Scholarship Academy Certificate.
Kisha Grant:
• BCPS certification.
• Secretary, Louisiana Society of Health-System Pharmacists.

Leslie Hamilton: Committee Co-chair, AACP Pharmacy Practice Section Awards.

Drayton Hammond:
• Chair-Elect, American College of Clinical Pharmacy Critical Care PRN.
• President, Arkansas chapter of American College of Clinical Pharmacy.
• Vice Chair, Professional Development Committee, American College of Clinical Pharmacy Education and Training PRN.
• Programming Site Co-coordinator, SE chapter of SCCM.
• Charge Leader, Mentor-Mentee Program for the Membership Committee for CPP, SCCM.
• Charge Leader, Journal Club Presentations for the Education Committee for CPP, SCCM.
• AACP Walmart Scholars Program Mentor for PGY1 Resident.

Jason Haney: BCCCP certification.

Desiree Kosmisky:
• Impact of television-ICU services across a healthcare system. Poster presented at: Annual Meeting; October 2016; Hollywood, FL.
• ePharmacy services: how they can make a difference. Presented at: Philips Connect2Care Conference; October 2016; Orlando, FL.
• Tele-ICU pharmacist impact on glycemic control across a large healthcare system. Poster for best practices presented at: ASHP Midyear Meeting; December 2016; Las Vegas, NV.
• Characterization of telepharmacist interventions in hyponatremia management. Abstract accepted for presentation as a Research Snapshot at: SCCM Annual Congress; Honolulu, Hawaii (research snapshot presented by Sonia Everhart).

Kimberly Levasseur-Franklin: BCCCP certification.

Angel Maldonado: BCCCP certification.

Eric Mueller: Chair, Operations Committee, Critical Care Pharmacotherapy Trials Network.

Joseph Muench:
• Creator, online Critical Care Pharmacy Academy.
• Host, critical care pharmacy podcast, “The Elective Rotation.”
• Manager, the Slack group, which surpassed 600 members in December 2016.

Katie Nault: BCCCP certification.

Megan Rech:
• BCCCP certification.
• Chair-Elect, SCCM CPP Research Committee.

Susan Smith: BCPS certification.

Ann Spry: Director-at-Large, Kansas Council of Health-System Pharmacy.

Trevor Warner:
• BCCCP certification.
• President, Northern Michigan Society of Health-System Pharmacists.

Cory Weaver: BCCCP certification.

Natalie Winings: BCCCP certification.

Drug Information PRN

Promotions
• J. Russell May: Associate Department Head, University of Georgia College of Pharmacy, Augusta.

Publications
Society of Health-System Pharmacists, 2016.
In preparation.


**Presentations**

- **Brown JN**. Implementation and outcomes of a post-graduate pharmacy residency learning experience in medical writing. Poster presented at: ASHP National Residency Preceptors Conference; 2016; Washington, DC.

- Johnson A, **Thornby K**. #Evidence-based? Exploring challenges with the quality, reporting, and transparency of evidence in healthcare research. Presented at: ASHP Midyear Meeting; December 2016; Las Vegas, NV.

**Education and Training PRN**

The EDTR PRN was founded in 2002 after 22 ACCP members identified a need for educators to network with others having similar interests and to facilitate collaborative work to advance pharmacy education and training. The EDTR PRN now has over 600 members, and its mission statement still emphasizes the same values the PRN was created under. The mission statement for the EDTR PRN is “to promote dialogue and interaction among members and to develop programs that enhance the knowledge and skills of members involved in education and training within clinical pharmacy.”

The EDTR PRN again hosted mock interviews for students and residents attending the 2016 ACCP Annual Meeting in Hollywood, Florida. Over 50 students and residents took part in this opportunity to learn key interviewing skills from clinical faculty and practitioners in preparation for residency or initial career position interviews. Most participants were able to complete at least two rounds of mock interviews, receiving valuable feedback from several interviewers. We look forward to offering this activity at the 2017 Annual Meeting and ask that you encourage the students and residents who attend to take advantage of this opportunity. We also held an auction at the Annual Meeting to raise funds for the PRN. Fifteen items were donated by PRN members, and we raised $267.

The Student and Postgraduate Trainee Support Committee worked with the PRN membership to continue offering three travel awards (two student awards and one postgraduate trainee award) for the Annual Meeting last year, which will be continued for the 2017 Annual Meeting. Watch the EDTR e-mail list for additional information as well as the Student and Resident sections of the ACCP website. In addition, together with the Professional Development Committee, the EDTR conducted poster walk-rounds at the Annual Meeting for PRN members presenting their scholarly work.

**Promotions**

**Joshua Caballero**: Chair, Department of Clinical and Administrative Sciences, Larkin Health Sciences Institute, Miami, Florida.

**Cher Enderby**:
- Program Director, PGY1 Pharmacy Residency, Mayo Clinic, Florida.
- Coordinator, Education and Staff Development, Mayo Clinic, Florida.
Mate M. Soric: Vice Chair, Practice-Based Research, Northeast Ohio Medical University.

Awards

- **Ashley Crowl**: New Investigator Award AACP (with mentors Sarah Shrader and Crystal Burkhardt): Best Practices for Assessment of Interprofessional Team-Ready Behaviors on APPEs.
- **Alex Isaacs**: Indiana Distinguished Young Pharmacist Award 2016 (Indiana Pharmacists Alliance).
- **Lindsay Saum**: Distinguished Alumni for Alpha Phi Chapter of Phi Delta Chi.
- **Mate M. Soric**: American College of Clinical Pharmacy New Clinical Practitioner Award.

Grants

- **Joshua Caballero**: Health Literacy Assessment and Intervention to Reduce Disparities: FLIGHT/VIDAS II. Supplement PA16-288:3R01MD010368-01S1. 2016. $51,950. Co-Principal Investigator (awarded).

Publications

- **Corbo JM, Delellis TM, Hill LG, Rindfuss SL**: ACE inhibitors or ARBs to prevent CKD in patients with microalbuminuria. Am Fam Physician 2016;94:652-3.
- **Baki G, Borden MJ, Peeters MJ**: Introducing an undergraduate degree of cosmetic science and formulation design within a college of pharmacy. Inov Pharm 2017;8:Article 9.

New ACCP Fellows
• Joshua Caballero
• Sarah A. Nisly

Other Notable Achievements
Emily Christenberry:
• Clinical Assistant Professor, UTEP School of Pharmacy, Department of Pharmacy Practice and Clinical Sciences.
• BCPS certification.
Beth Resman-Targoff: “Rheumatoid arthritis in the geriatric patient, secondary prevention, polypharmacy and challenges” and “Interprofessional case discussion.” Invited talks at: Clinical Focus Course, Association of Rheumatology Health Professionals; November 12, 2016; Washington, DC.
Katie Traylor: BCACP and BC-ADM certification.

Presentations
• DePatis K, McLaughlin M, Kliethermes MA, Quinones-Boex A, Kolanczyk D, Schmidt J, Tran T, Vest KM. Factors influencing fourth year pharmacy student pursuit of research. Student poster presented at: ASHP Midyear Meeting; December 2016; Las Vegas, NV.
• Masic D, Greenhalgh E, Kolanczyk DM. Evaluation of appropriate prescribing of rivaroxaban and apixaban and clinical outcomes in a large academic medical center. Student poster presented at: 2016 ASHP Midyear Meeting; December 2016; Las Vegas, NV.

Emergency Medicine PRN

Awards
• Katie Hiles: Patient Hero Award for Sepsis in the ED. Indianapolis Coalition for Patient Safety, Franciscan Health Indianapolis.
• Darrel W. Hughes: Clinical Specialist, Emergency Medicine Pharmacy Residency Program Preceptor of the Year, University Health System.

Promotions
• Hussain Bakhsh: Assistant Professor, Clinical Pharmacy Department Faculty of Pharmacy, King Abdulaziz University.
• Megan Musselman: PGY1 Pharmacy Residency Coordinator, North Kansas City Hospital.
• Ruben Santiago: Associate Residency Program Director, PGY2 Emergency Medicine Pharmacy Residency Program, Jackson Memorial Hospital.
• Jennifer Splawski: Clinical Pharmacy Specialist – Emergency Medicine MacNeal Hospital.

Publications
• Kuroski JE, Young S. Comparison of the safety and efficacy between 3-factor and 4-factor prothrombin complex concentrates for the reversal of warfarin. Am J Emerg Med 2017 Jan 24. [Epub ahead of print]


### New ACCP Fellows

• **Kyle Weant**: Emergency Medicine Clinical Specialist, Medical University of South Carolina.

### Other Notable Achievements

• **William Eggleston**: President-Elect, New York State chapter, American College of Clinical Pharmacy.

• **Megan Musselman**: Emergency Neurological Life Support (ENLS) certification, Neurocritical Care Society.

• **Ruben Santiago**: Emergency Neurological Life Support (ENLS) certification, Neurocritical Care Society.

### Endocrine and Metabolism PRN

### Publications


Other Notable Achievements

Krystal Edwards: Associate Dean of Career Development, Texas Tech School of Pharmacy – DFW campus.

Maryam Fazel: American College of Clinical Pharmacy Ambulatory Care PRN 2016 Member Recognition Award.

Benjamin Gross: ASH-CHC (American Society of Hypertension Certified Hypertension Clinician) certification.

• Alshehri AA, Fazel MT, Slack MK, Valencia J. Joint pharmacist-physician patient visits billing model and its impact on reimbursement. Presented at: ASHP Midyear Meeting; December 2016; Las Vegas, NV.

• Roman M, Rizvi A, Chang D, Madison C. Evaluating the outcome of pharmacy speaker events on student perceptions of the evolving role of pharmacists. Poster presented at: Third Annual Roseman University of Health Sciences Research Symposium; March 2017; Henderson, NV.


Geriatrics PRN

Promotions

• Tiffany Hopkins: Faculty Appointment, University of North Texas.

• Reem A. Lhaj: Kaiser Permanente Pharmacist.

Awards

• Margaret Noyes Essex: 2016 American College of Clinical Pharmacy Virtual Symposium, AmCare Best Poster Award.

• Tiffany Hopkins: 2016 ASCP Feldman Scholarship.

• Jeannie K. Lee: University of Arizona Academic Leadership Institute, 2016.

• Emily Peron: VCU Center for Interprofessional Education and Collaborative Care Emerging Leader in Interprofessionalism.

• Heather Sakely: Practice Change Leaders Program.

Grants

• Lisa Hutchison: National Center for Interprofessional Practice and Education. Project: Accelerating Interprofessional Community-Based Education and Collaboration for Older Persons with Mental Health Disparities.

• Jeannie Lee:
  • National Science Foundation at Arizona Tech Launch I-Corps. Project: Medication Education Decision Support Reminding and Monitoring (MEDSReM).
  • Banner Health Innovations Grant. Project: Supporting Function in At-Risk Elders: Early Identification of Frailty in an Ambulatory Setting.

Publications


• Essex MN, Cheung R, Li C, Xie L. Safety of greater than 3 days of therapy with parecoxib injection in the management of postoperative pain. 2016 American College of Clinical Pharmacy Virtual Poster Symposium; May 2016.


• Rubin SE, Gendron TL, Peron EP. Reciprocity and shared experiences through transgenerational creative arts. Public Pol Aging Rep 2016;26:111-3.


Other Notable Achievements

• Crystal Burkhardt, Angela Livingood, and Lori Miyashiro: CGP certification.

• Margaret Noyes Essex: NYU and Weill Cornell Pharmaceutical Medicine Elective Steering Committee member.

• Haley Phillippe: BCPS certification.

Presentations


• Lam S. Community outreach programs to enhance health knowledge in the elderly. Presented at: American College of Clinical Pharmacy Annual Meeting; October 2016; Hollywood, FL.

• Nieves S, Lam S. Evaluation of oral iron replacement therapy in geriatric patients. Eastern States Residency Conference; May 2016; Hershey, PA.

• Yunusova T, Cummings C, Lam S. Pharmacy students’ perception of taking Drug Induced
Diseases Course before vs. after experiential clinical rotations. Presented at: ASHP Midyear Meeting; December 2016; Las Vegas, NV.

**Jeannie Lee:**
- Steps to a good night’s sleep. In: University of Arizona Health Sciences blog. [http://uahs.arizona.edu/blog/2016-03-17/steps-good-night%E2%80%99s-sleep](http://uahs.arizona.edu/blog/2016-03-17/steps-good-night%E2%80%99s-sleep). March 2016.

**GI/Liver/Nutrition PRN**

The GILN PRN would like to congratulate its members on the following accomplishments from September 2016 to February 2017.

**Awards**

**Charles F. Seifert:**
- 2015–2016 TTUHSC School of Pharmacy P3 Teacher of the Year
- 2016 TTUHSC Student Government Association School of Pharmacy Outstanding Didactic Teacher of the Year

**Grants**

- **Kelsey Rife:** Hepatitis C Innovation Team Grant. $200,000. Funded by VA HIT Collaborative.

**Publications**

- **Martin MT, Faber DM.** Patient satisfaction with the clinical pharmacist and prescribers during hepatitis C virus management. J Clin Pharm Ther 2016;41:645-9.

**Presentations**

- **Martin MT.** Updates on gastrointestinal disorders. CPE presented at: ACCP Updates in Therapeutics® 2017 Ambulatory Care Preparatory Review and Recertification Course; February 18, 2017; Jacksonville, FL.
- **Martin MT.** The future of HCV management for managed care: differentiating therapy by patient characteristics. CE presented for: PRIME at the Academy of Managed Care Pharmacy (AMCP) Ohio-Kentucky Chapter Meeting; September 20, 2016; West Chester, OH.
- **Martin MT.** Optimizing HCV treatment continuity and outcomes: empowering pharmacists to take action. CPE presented at: Pharmacy Learning Network Regional Meeting; March 4, 2017; Orange County, CA.
- **Rife K.** Applications of telehealth and lean six sigma to hepatitis C. Presented at: Cleveland Society of Pharmacy Residents; October 2016; Cleveland, OH.
### Poster Presentations

### Other Notable Achievements
- **Steve Polgsted**: Chair-Elect, Pediatric Section of ASPEN.

### Global Health PRN
Our PRN has been creating connection opportunities for our members! We recently started an ACCP Global Health PRN Facebook page: feel free to “like” us!

Our PRN has also started a mentor/mentee program to facilitate mentorship for those interested in pursuing global health activities. So far, six pairs of mentors/mentees have signed up to be part of the program.

Our founder and past chair, Renee Holder, recently died. She was passionate about the ACCP Global Health PRN; therefore, we wanted to commemorate her efforts through a memorial travel award for our members in her honor. Applications for the award open soon, and the award recipient will be notified before the October 2017 ACCP Annual Meeting.

Our newsletter is off to a great start! So far, we’ve developed two newsletters, with three future newsletters slated for the rest of 2017. The newsletter is composed of spotlight sections on pharmacists and students, global health news from other organizations, and a country spotlight.

### Awards
- **Sonak Pastakia**: Jefferson Science Fellowship.
- **Emily Peron**: VCU Global Education Office Quest Global Impact Award.

### Publications

### New ACCP Fellows
- Sonak Pastakia

### Health Outcomes PRN

### Promotions
- **Bonnie C. Greenwood**: Assistant Professor, Department of Family Medicine and Community Health, School of Medicine, University of Massachusetts.
- **Hannah M. Renner**: Fellow in Community Pharmacy Research, University of Pittsburgh School of Pharmacy.

### Grants

### Publications


**Hematology/Oncology PRN**


• Knepper TC, Bell GC, Hicks JK, Padrón E, Teer JK, Vo TT, Gillis NK, Mason NT, McLeod HL, Walko CM. Key Lessons learned from Moffitt’s Molecular Tumor Board: the Clinical Genomics Action Committee experience. Oncologist 2017;22:144-51.


• Pham AN, Bubalo JS, Lewis JS II. Posaconazole tablet formulation at 400 milligrams daily achieves desired minimum serum concentrations in adult patients with a hemato logic malignancy or stem cell transplant. Antimicrob Agents Chemother 2016;60:6945-7.


• Holle LM, Harris CS, Chan A, Fahrenbruch RJ, Labdi BA, Mohs JE, Norris LB, Perkins J, Vela CM. Pharmacists’ roles in oncology pharmacy services:


• Baruel Okumura PC, Okumura LM, Reis WC, Godoy RR, Cata-Preta BO, de Souza TT, Fávero ML, Correr CJ. Comparing medication adherence tools scores and number of controlled diseases among low literacy patients discharged from a Brazilian cardiology ward. Int J Clin Pharm 2016;38:1362-6.

• Cohn AL, Day BM, Abhyankar S, McKenna E, Riehl T, Puzanov I. BRAFV600 mutations in solid tumors, other than metastatic melanoma and papillary thyroid cancer, or multiple myeloma: a screening study. Onco Targets Ther 2017 Feb 17;10:965-71.


• Chen CC, Parikh K, Abouzaid S, Purnomo L, McGuiness CB, Hussein M, Wade RL. Real-world treatment patterns, time to next treatment, and economic outcomes in relapsed or refractory multiple myeloma patients treated with pomalidomide or carfilzomib. J Manag Care Spec Pharm 2017;23:236-46.

• Walko C. Quantitation of targetable somatic mutations among patients evaluated by a personalized medicine clinical service: considerations for off-label drug use. Pharmacotherapy 2017 Feb 24 [Epub ahead of print]


• Walko C. Key Lessons learned from Moffitt’s Molecular Tumor Board: the Clinical Genomics Action Committee experience. Oncologist 2017;2:144-51.


Other Notable Achievements

• Larry Buie and LeAnn Norris: HOPA Board At-Large Directors.

New ACCP Fellows

• LeAnn Norris

Interviews


Poster Presentations

• Xu F, Siu C, Barada F, Martino M. Evaluation of workflow within outpatient oncology infusion pharmacies at a large academic medical center using LEAN methodology. Presented at: Northwestern Memorial Hospital, Department of Pharmacy; Chicago, IL.

HIV PRN

The HIV PRN brings together almost 300 members and trainees with a dedicated interest in providing services to individuals living with HIV. PRN members are encouraged to share their diverse clinical practices, complex cases, research, education, and training experiences as they network with other members as well as seek clinical advice.

The PRN had a successful 2016 ACCP Annual Meeting in Hollywood, Florida. Our focus session on HIV in Special Populations was well attended; and the following business and networking meeting was a great opportunity to share ideas among the membership. In addition, the paper that the PRN membership worked on regarding acute care management of HIV-infected patients was recently published in Pharmacotherapy (March 2017).

Additional notable achievements are as follows.

Awards

• Milena McLaughlin: Shining Star Award, Illinois Society of Health-System Pharmacists.

• Kim K. Scarsi: New Investigator Award, University of Nebraska Medical Center.

Publications


Other Notable Achievements

- **Lori A. Gordon**: President, Southeastern Louisiana Society of Health-System Pharmacists.
- **Robert C. Macky**: Expanded collaborative practice agreement within the Mid-Atlantic Region of the Bureau of Prisons.

Immunology/Transplantation PRN

Awards

- **Ian Doyle**: Fellow, Oregon Society of Health-System Pharmacists (FOSHP), November 2016.
- **Christin Rogers**: ASHP Foundation Expansion Grant for Solid Organ Transplant PGY2 Program.

Publications

- **Casale JP, Doligalski CT**. Pharmacologic considerations for solid organ transplant recipients who become pregnant. Pharmacotherapy 2016;36:971-82.
- **Fleming JN, Taber DJ, Pilch NA**, Srinivas TR, Chavin KD. Yes, we do still need IL-2 receptor antagonists [peer-reviewed letter to the editor]. Am J Transplant 2016.
- Higdon LE, **Trofe-Clark J**, Liu S, Margulies KB, Sahoo MK, Blumberg E, Pinsky BA, Maltzman JS.
Cytomegalovirus responsive CD8+ T cells expand after solid organ transplantation in the absence of CMV disease. Am J Transplant 2017 Feb 15. [Epub ahead of print]


Poster Presentations


- Fleming JN, Lai JC, Te H, Said A, Spengler EK, Rogal SS. Opioid and opioid substitution therapy in liver transplant candidates: a survey of center policies and practices. American Transplant Congress; May 2017; Chicago, IL.

- Moorman AF, H urtik ML, Pekarek A, Laskar S, Gupta D. Markers of coagulation and hemostasis activation in left ventricular assist device recipients. International Society of Heart and Lung Transplantation 37th Annual Meeting; April 2017; San Diego, CA.


Oral Presentations

- Alloway R. Workshop on patient-focused drug development in transplantation. U.S. Food and Drug Administration, Department of Health and Human Services, CDER/Division of Special Pathogen and Transplant Products (Organizing Committee and Speaker); September 27, 2016.

- Fleming JN. Pharmacology of opioids: drug interactions and screening methods. American Transplant Congress; May 2017; Chicago, IL.

- Fleming JN, Jonassaint N, Satoskar R, Shapiro S, Dubay D, Chavin KD. LIVE-C free (LIVEr transplant for hepatitis C: recurrence FREE). AHPBA; March 2017; Miami Beach, FL.

- Fleming JN, Perez C, Sobhani an M, Taber DJ, Chedister G, Axelrod DA, Chavin KD. Share35: increasing biliary complications and healthcare

• Roach K, Meredith E, Lyon M. Impact of ritonavir on graft function in human immunodeficiency virus infected kidney transplant recipients. American Transplant Congress; May 2017; Chicago, IL.

• Thielke J. Updates in anti-viral therapy session: Featured Allied Health Symposium III. American Transplant Congress; May 2017; Chicago, IL.

• Trofe-Clark J. Invited speaker to present on immunosuppression in pregnancy and breast-feeding. Pregnancy after Transplantation: Research and Practicalities Symposium, Transplant Pregnancy Registry International - Gift of Life Institute; October 2016; Philadelphia, PA.

• Trofe-Clark J. Identification and management of high pharmacologic risk candidates. Invited faculty member to present at: Optimizing Pharmacologic Risk Assessment of Transplant Recipients and Living Donors Sunrise Symposium, Annual Meeting of the American Transplant Congress; May 2017; Chicago, IL.


Promotions

• Jessica Cottreau: Chair, Department of Pharmacy Practice, Rosalind Franklin University of Medicine and Science.

• Chris Frei: Appointee, Task Force on Infectious Diseases Preparedness and Response for Greg Abbott, Governor of Texas.

Awards


• Elias Chahine: Forerunner Award, 2016 Florida Society of Health-System Pharmacists.

• Tiffany Dickey: First Place, Best Poster Award, and First Runner-up Poster Award, 2016 American College of Clinical Pharmacy Adult Medicine PRN.

Khalid Elijaaly:

• 2016 IDWeek Trainee Travel Award.

• Inaugural Jonathan Freeman Travel Scholarship from SHEA.
Chris Frei: Top 10 Faculty and Mentor of the Year Awards (Pharmacotherapy Division), University of Texas at Austin College of Pharmacy.

Wesley Kufel: 2016 American College of Clinical Pharmacy and the 2016 Triangle College of Clinical Pharmacy Resident/Fellow Travel Awards.

Milena McLaughlin: Shining Star Award, Illinois Society of Health-System Pharmacists.

Krutika Mediwalia:
- 2016 IDWeek Mentorship Travel Grant.
- 2016 American College of Clinical Pharmacy ID PRN Distinguished Research Trainee Award.

Publications

- Heo ST, Aitken SL, Tverdek FP, Kontoyiannis DP. How common is subsequent central nervous system toxicity in asymptomatic patients with hematologic malignancy and supratherapeutic voriconazole serum levels? Clin Microbiol Infect 2017 Jan 7. [Epub ahead of print]


- Barber KE, Bell AM, King ST, Parham JJ, Stover KR. Impact of piperacillin-tazobactam shortage on antimicrobial stewardship: implications for antimicrobial stewardship programs. Braz J Infect Dis 2016 Sep 5. [Epub ahead of print]


- **Timbrook TT**, Hurst JM, **Bozzo JA**. Impact of an antimicrobial stewardship program on antimicrobial utilization, bacterial susceptibilities, and financial expenditures at an academic medical center. Hosp Pharm 2016;51:703-11.


- Gentry CA, **Williams RJ II**. A propensity score-matched analysis of the impact of minimum inhibitory concentration on mortality in patients with *Pseudomonas aeruginosa* bacteremia treated with cefepime or ceftazidime. Diagn Microbiol Infect Dis 2017;87:376-81.


**Other Notable Achievements**

- Sarah Blackwell: BCCCP certification.
- Wesley Kufel: AAHIVP and BCPS certification.
- Krutika Mediwala, Lucas Okumura, and Jamie Wagner: BCPS certification.
- Tracy Zembles: MAD-ID Advanced Antimicrobial Stewardship Training Program.

**Nephrology PRN**

The Nephrology PRN is actively improving its member benefits by increasing its presence on social media and the PRN website. We are also working on our focus session programming for the 2017 ACCP Annual Meeting. We recently elected two new representatives to the Kidney Health Initiative (KHI). KHI brings together industry, nephrologists, patients with kidney disease, pharmacists, government agencies, and other interested parties to improve research for our patients.

**Publications**


• Pham AQ, Sexton J, Wimer D, Rana I, **Nguyen T**. Managing hyperkalemia: stepping into a new frontier. J Pharm Pract 2016 September

**Other Notable Achievements**

• **Wasim El Nekidy**: Outcomes of vancomycin guidelines recommended dosing in outpatients undergoing hemodialysis, a retrospective analysis. Poster to be presented at: 27th European Congress of Clinical Microbiology and Infectious Diseases; April 2017; Vienna, Austria.

• **Joanna Q. Hudson**: Will be on the spring 2017 ballot as a candidate for American College of Clinical Pharmacy Secretary, Board of Regents.

• **Melanie Joy** and **Amy Barton Pai**: Newly elected Nephrology PRC representatives to the Kidney Health Initiative.

• **Timothy Nguyen**: Honorary member of the Phi Lambda Sigma Pharmacy Leadership Society, Beta Kappa Chapter, in recognition of outstanding leadership and service to the pharmacy profession.

• **Wendy St. Peter** and **Harold Manley**: Developed a Medication Reconciliation Measure for Dialysis Patients through work with the Kidney Care Quality Alliance Measure Feasibility and Testing Workgroup. Endorsed by the National Quality Forum.

**Pain and Palliative Care PRN**

**Promotions**

• **Sandra DiScala**: Clinical Pharmacy Specialist, West Palm Beach VAMC.

• **Mary Lynn McPherson**: Executive Director, Advanced Post-Graduate Education in Palliative Care, University of Maryland School of Pharmacy.

**Publications**


**Presentations**


• **Essex MN**, Cheung R, Li C, Xie L. Safety of greater than 3 days of therapy with parecoxib injection in


Other Notable Achievements


Margaret Essex:

- NYU and Weill Cornell Pharmaceutical Medicine Elective Steering Committee member.
- Founding Member of the Steering Committee for the Pharmaceutical Medicine Medical School Clerkship, monthly lecturer and preceptor.

- Mary Lynn McPherson: Professor and Executive Director, Advanced Postgraduate Education in Palliative Care, Department of Pharmacy Practice and Science, University of Maryland School of Pharmacy.

- Jennifer Pruskowski: Chair, Pharmacotherapy SIG, American Academy of Hospice and Palliative Medicine.

- Richard Wheeler: Member, Joint Commission Standards Review Panel focused on proposed standards revisions related to Pain Assessment and Pain Management.

Pediatrics PRN

Promotions

Kalen B. Manasco:

- Clinical Professor, University of Florida College of Pharmacy and UF Health Shands.
- Associate Chair, Department of Pharmacotherapy and Translational Research.

Awards

Allison Blackmer:

- Recognition as writing one of the top 10 articles from Pharmacotherapy in 2016.
- Innovations in Teaching Award, AACP, July 2016.

Publications


Other Notable Achievements

• Allison Blackmer: BCPPS certification, December 2016.

• Pete Johnson: Fellow, Pediatric Pharmacy Advocacy Group, 2016.

Perioperative Care PRN

The Perioperative Care PRN celebrated its 2 years in existence at the 2016 ACCP Annual Meeting. Membership has rapidly grown to over 110 members! This PRN was established to provide education and resources related to the overall treatment of perioperative patients. Areas of interest range from regulatory requirements to early recovery after surgery to multimodal pain management and beyond.

The Perioperative Care PRN is actively working on the 2017 ACCP Annual Meeting focus session with an emphasis on enhanced recovery after surgery (ERAS) protocols and the pharmacist’s role. Other 2016–2017 initiatives include increasing our web presence, increasing our membership, and developing a possible webinar series on perioperative topics and a white paper on pharmacy perioperative care. We have been soliciting interest from Perioperative Care PRN members for participation in writing the white paper.

The Perioperative Care PRN is pleased to recognize the following members for their awards and accomplishments:

Awards

• Richard H. Parrish II: 2017 Distinguished Alumnus, Ohio State University College of Pharmacy.

Publications


New ACCP Fellows

• Suzanne A. Nesbit

Other Notable Achievements

Richard H. Parrish II:


• Member, Board of Pharmacy Specialties, Inaugural Employer.

Pharmacokinetics/Pharmacodynamics/Pharmacogenomics PRN

Awards

• Mary Ensom: 2016 Canadian Society of Hospital Pharmacists BC Branch Publication Award (Original Research Category).

• Jason Karnes: University of Florida Outstanding Young Alumnus.
Tony Kiang: Canadian Society of Hospital Pharmacists (British Columbia branch) Primary Research Publication Award.

Grants

Jason Karnes: American Heart Association Scientist Development Grant.

Publications


Women's Health PRN

Publications


• Rowshanrad S, Kneebusch J, Rafie S. Medical management of sexual assault survivors at an academic medical center. JWRH 2016;1.


Other Notable Achievements

• Gerald Briggs: Finished copyediting the 11th edition of Drugs in Pregnancy and Lactation, due in May.

Julie Kelsey:

• Invited to speak at the Clinical Pharmacy Conference in Austria on women’s health topics—heart disease, depression, osteoporosis, and fibromyalgia.

• Spoke at the ASHP meeting on “PE in Pregnancy.”

Sally Rafie:

• President, San Diego County Pharmacists Association.

• Member, Preconception Health Council of California.

• Advanced Practice Pharmacist license in California (new license as of February 2017).

Abigail (Abby) Yancey:

• ACCP Fellow.

• Faculty, St. Louis College of Pharmacy, St. Louis.

RESEARCH INSTITUTE UPDATE

ACCP Research Institute

We want to share a quick update on select programs, activities, and successes of the RI. We also invite you to visit our website ([www.accpri.org](http://www.accpri.org)) for updates and program announcements. Thank you for supporting the ACCP RI.

ACCP PBRN Interactive Series Posted Online with Testimonials

The ACCP The PBRN has released a three-part, interactive series, “Get to Know Your Network,” to better acquaint ACCP members with the PBRN, its resources, and how clinicians and researchers can work with their colleagues on research studies within their own areas of clinical interest. This series addresses the basics of practice-based research, what the ACCP PBRN does, and how clinicians and researchers alike can become more involved in network collaborations.

The first two parts of this series, “The PBRN: A Research Resource” and “Collaborating with the ACCP Practice-Based Research Network (PBRN),” were delivered in September 2016 in an interactive webinar platform. The final part of the recorded series, “Testimonials from ACCP PBRN Participants,” details the personal experiences of current members who have worked with the PBRN on various research activities. We invite you to enjoy the entire series on our website ([www.accpri.org/pbrn/whyJoin.aspx](http://www.accpri.org/pbrn/whyJoin.aspx)).
How Do I Join the ACCP PBRN?
Joining the ACCP PBRN is free to all ACCP members. You can join the PBRN as an individual or as part of an existing network by completing our online registry at www.accpri.org/pbrn/registration.aspx. We invite you to browse our “Now Recruiting” and “Ongoing” studies by visiting our website (www.accpri.org/pbrn/researchProjects.aspx) or share your idea for a potential PBRN study at any time (www.accpri.org/pbrn/StudySuggest.aspx). You can also sign up to receive e-mail notifications about future studies.

Calling All Researchers!
The ACCP PBRN is interested in establishing collaborative research efforts with both ACCP PBRN and other external investigators. If you have a funded project or are applying for funding and are interested in collaborating with the ACCP PBRN, we invite you to complete our Project Concept Description Template at www.accpri.org/pbrn/partner.aspx. Please contact PBRN staff with any questions, or for assistance with developing a clinical question into a PBRN study, at (913) 492-3311 or pbrn@accp.com.

ACCP PBRN New Study Invitation: Clinical Pharmacist–Hospitalist Physician Practices Study
• Who: Clinical pharmacists.
• What: Cross-sectional survey of clinician pairs (clinical pharmacists and hospitalist physicians).
• Where: Inpatient settings.
• How: Complete online survey using REDCap in less than 1 hour.

The ACCP Practice-Based Research Network (PBRN) invites all clinical pharmacists who work on care teams with hospitalist physicians to consider participating in a survey-based research study. The survey will be administered to clinical pharmacist–hospitalist physician pairs; multiple clinical pharmacists from the same practice site may participate in the survey as long as unique clinicians (i.e., clinical pharmacist and hospitalist physician) are identified per pair. Study goals are to characterize clinical pharmacist–hospitalist physician collaborations and determine the challenges to successful relationships. Study results will be applied to either develop or refine existing best practices to effective use of these joint working relationships, given that both groups have the goals of optimizing patient care and reducing health care costs.

Survey Eligibility Criteria
1. Clinical pharmacist is interested in participating in the survey on behalf of his or her clinical pharmacist–hospitalist physician pair.
2. Clinical pharmacist practices in an inpatient setting.
3. Clinical pharmacist can identify at least two or three hospitalist physicians or providers from his or her practice site who are interested in participating in the survey.

To find out more about this study, including how you can participate, please contact our PBRN staff at pbrn@accp.com.

UPDATE ON PRN-RI LIASONs
To establish and maintain relationships between the RI and each PRN, the RI recently encouraged PRNs to consider creating volunteer positions within their respective networks for individuals who wish to serve as liaisons between their membership and the RI. Broadly, these individuals will facilitate bidirectional communication of research-related ideas and activities between the PRN and the RI, including:
• Assisting the PRN with identifying opportunities for collaborative research with the ACCP PBRN,
• Disseminating information about and supporting PRN member applications to the RI’s funding and investigator training programs,
• Communicating PRN educational and infrastructure needs for research to the PBRN, and
• Communicating PRN research and programming ideas to help the RI better meet PRN needs through ACCP Annual Meeting programming/activities that support PRN member involvement in research.

Since announcing this opportunity, several PRNs have identified individuals to serve in these positions, and they routinely meet with RI staff to discuss collaborative opportunities. We are very encouraged by the enthusiastic response so far and look forward to future collaborations.

ACCP RI Announces 2017 Futures Grants Request for Applications
The ACCP Research Institute Futures Grants program invites student, trainee, and early-career ACCP members to apply for developmental research grants. Futures Grants may range from $5000 to $40,000, depending on applicant eligibility and the proposal’s requisite budget. Up to $100,000 in mentored, developmental research awards will be granted through the Futures Grants program in 2017.

Before completing an application, applicants must complete the eligibility assessment. This assessment will guide each qualified applicant to either the Junior Investigator or the Student/Resident application. Completed applications are due by June 1, 2017. To access detailed instructions and complete the online
eligibility assessment and application, visit www.accpri.org/futuresapp. For all other questions, contact Carla Scarborough (cscarborough@accp.com).

**Investigator Development Programs**

Are you ready to accelerate your growth as a clinical pharmacy researcher? The Research Institute can meet your needs! Plan now to attend our next Mentored Research Investigator Training (MeRIT) or Focused Investigator Training (FIT) program June 26–30, 2017, on the campus of the University of Michigan College of Pharmacy.

MeRIT is an individualized, 2-year longitudinal program designed to mentor pharmacist-investigators from research idea through study design, IRB and funding application, data collection, results presentation, and manuscript submission.

FIT is an intensive 5-day grant enhancement and refinement program for experienced pharmacist-investigators pursuing NIH (National Institutes of Health) research funding. This proven combination of critical grant review, revision, and mentoring by experienced and funded faculty will maximize the competitiveness of your submission (or resubmission).

Applications for FIT and MeRIT will close March 31, 2017. For an informational brochure about the FIT and MeRIT programs or a copy of the application materials, please visit www.accpri.org/investigator/. Please contact Carla Scarborough (cscarborough@accp.com) with questions about either program.

**WASHINGTON UPDATE**

**Washington Update**

**ACCP Testifies Before House Committee on Appropriations**


The Appropriations Committee, together with its Senate counterpart, has jurisdiction over all government expenditures. The Subcommittee on Labor, Health and Human Services, and Education controls overall spending for the Department of Health and Human Services (HHS), including the entire Medicare program, the federal portion of the Medicaid program, and agencies including the Agency for Healthcare Research and Quality (AHRQ), Centers for Disease Control and Prevention (CDC), U.S. Food and Drug Administration (FDA), and National Institutes of Health (NIH).

In his testimony, Webb specifically urged the subcommittee to provide AHRQ with at least $334 million in budget authority, consistent with current fiscal-year levels. AHRQ is the only federal agency with the sole purpose of evaluating and disseminating research that determines how to make care as effective, efficient, and affordable as possible. AHRQ supports research and communication programs that are perfectly aligned with ACCP’s commitment to advancing a patient-centered, collaborative healthcare approach that delivers better care, smarter spending, and healthier people.

Webb went on the highlight the critical need to integrate coverage for comprehensive medication management (CMM) within the Medicare program as part of the overall effort to move all health care to a more value-based, collaborative, and efficient system.

The federal government is currently responsible for more than $1 trillion per year in health care spending, and mandatory programs (including Medicare) are projected to overwhelm the entire federal budget. Webb therefore urged the subcommittee to provide adequate resources to ensure that health care delivery organizations, health providers, policy-makers, and the people they serve make informed choices about how to obtain the best care while addressing costs and protecting patient safety.

As part of this effort, ACCP has called on Congress to take action to meaningfully address problems associated with suboptimal and inefficient medication use and truly help patients “get the medications right” by promoting and advancing coverage for CMM services delivered under collaborative, patient-centered payment and delivery structures.

Click here to view a video of Webb’s testimony.
Click here to read the written testimony in full.

**ACA Repeal-Replace: Collapse of the American Health Care Act**

H.R. 1628, the “American Health Care Act” (AHCA), released on March 6, 2017, was expected serve as the legislative vehicle through which Republicans would fulfill longstanding pledges to repeal and replace the Affordable Care Act (ACA), also known as Obamacare.

Instead, by the evening of March 24, House Speaker Paul Ryan (R-WI)—who had personally championed the legislation—canceled a planned vote on the bill and informed President Donald Trump that in the absence of Democratic support, his party lacked the votes necessary to pass the plan.

**What Did the Republican Plan Look Like?**

Central to the challenges facing the GOP was the fact that despite its political posturing, the AHCA would not
have delivered a full repeal of the ACA. Certain key ACA provisions would have remained in place. In particular, the repeal bill retained several popular patient protections related to insurance coverage reform, such as the ACA’s requirements that health plans:

- Cover preexisting conditions.
- Guarantee availability and renewability of coverage.
- Cover adult children up to age 26.
- Cap out-of-pocket expenditures.

The bill would also have protected the ACA’s prohibitions against:

- Health status underwriting.
- Lifetime and annual limits.
- Discrimination on the basis of race, nationality, disability, age, or sex.

A Congressional Budget Office (CBO) analysis of the cost and social impact of the bill projected that if the AHCA were enacted, the number of uninsured would grow by 24 million by 2026 because of the elimination of the Medicaid expansion and the individual and employer coverage mandates. CBO found that the bill would reduce the budget deficit by $337 billion over 2017–2026, through cutting Medicaid by $880 billion and eliminating $673 billion in ACA subsidies. In addition, the agency found that the bill would reduce taxes by $883 billion. However, a large portion of these tax cuts would disproportionately benefit higher earners—almost $300 billion in savings would have applied only to individuals earning over $200,000 per year.

A Divided Republican Party

Immediately after the November 2016 elections, as Trump secured the presidency and the Republican Party retained control of both chambers of Congress, repeal of Obamacare seemed almost inevitable. On the campaign trail, Trump repeatedly stated that repeal was a top policy priority and a key reason he was running for president. Over the previous 6 years, congressional Republicans had voted to repeal President Barack Obama’s signature legislation on more than 50 occasions. Yet when presented with the opportunity to finally deliver on these promises, Republicans were unable to coalesce around a unified strategy to move forward.

Despite full control of Congress, Republicans are deeply divided over how to replace Obamacare while Democrats remain fully united in their opposition to the repeal. Ultimately, it was the refusal of the members of the conservative Republican Freedom Caucus to support the proposal that led to its demise, based on their belief that the bill would keep too much of Obamacare intact. But there was also widespread concern among more moderate Republicans that the AHCA would cause millions of Americans to lose health coverage without contributing in a truly significant way to deficit reduction.

At the same time, there were suggestions that Trump had blundered politically by putting pressure on Congress to fast-track passage of the legislation and issuing a “take-it-or-leave-it” ultimatum to the Freedom Caucus to support the AHCA or walk away. Members of the Freedom Caucus, in response, criticized the “binary choice” they faced in supporting either the AHCA or Obamacare.

What’s Next?

It’s clear that the collapse of the AHCA effort calls into question Trump’s reputation as a skillful negotiator and dealmaker and casts doubts over the congressional Republicans’ ability to build consensus within an ideologically divided party. But already, tentative discussions are emerging on Capitol Hill around legislative concepts that could possibly yield broad Republican support. Most Republicans will admit that strategically, mistakes were made in their approach to the repeal-and-replace process. Yet the party remains unequivocal in its opposition to Obamacare. As the White House acknowledges that the health care reform process is far more complicated than it anticipated, there is a glimmer of optimism that a renewed effort to replace Obamacare will be more thoughtful, consensus-driven, and even, possibly, bipartisan.

ACCP Board of Regents Approves Position Statement: “Optimizing Specialty Drug Use”

National spending on prescription medications has steadily—and significantly—increased. Although advanced science and technology have led to new therapies with tremendous promise, their associated cost to providers, patients, and payers in many cases limits access to these therapies across the spectrum of health care delivery. Moreover, specialty medications (i.e., medications with a total average cost greater than $1000 per prescription or an average daily cost greater than $33 per day) account for a disproportionate share of these costs.

The “right prescription for the right patient” has always reflected one of pharmacists’ fundamental commitments to their patients. However, its meaning must evolve to “getting the medications right” for all patients by incorporating a commitment to ensuring the selection of the right patients for such expensive therapies. Combining comprehensive medication management (CMM) with value-based pricing strategies promises more rational and economical use of specialty medications by optimizing their use for patients and health systems.

In response to this issue, the ACCP Board of Regents approved a new position statement, “Optimizing Specialty Drug Use,” in February during the 2017 Updates in Therapeutics® meeting in Jacksonville, Florida. This
statement is intended to express ACCP’s position on optimal specialty drug use and to emphasize that CMM is necessary to achieve optimal specialty medication use in order to ensure the best possible outcomes for patients and the health care system.

Please review the pre-publication version of the statement and contribute to our dialogue about the importance of clinical pharmacists’ work in “getting the medications right” in the context of specialty drug use.

Click here to read the statement in full.

ACCP-PAC Contributions Support Bipartisan Health Care Leaders in Congress

The partisan divide in Washington has reached unprecedented levels. Amid this sometimes toxic political environment, ACCP is targeting true health care leaders from both parties who are willing to work with colleagues across the aisle to enact health care legislation focused on team-based, patient-centered care that measures and rewards quality and outcomes.

However, these moderate, bipartisan legislators will inevitably face primary challenges from the fringes of their parties. ACCP must provide support for such leaders in order to ensure they remain in Washington and continue to advance policies that meaningfully address the health care issues our nation currently faces.

With the Affordable Care Act (ACA) repeal and replace now under way and entitlement reform (including potentially significant changes to Medicare payment and delivery structure) on the horizon, a well-funded PAC is essential.

Only ACCP members are eligible to contribute to the PAC and allow us to make these vital political contributions. With its more than 18,000 ACCP members, ACCP is in a position to become one of the most prominent pharmacy PACs in Washington. To do this, we need the widespread support of our membership.

If each ACCP member contributed just $25, ACCP-PAC would raise over $350,000. All ACCP members should consider donating at least $25 to ACCP-PAC. CLICK HERE to support your PAC today!

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

John K. McGlew
Director, Government Affairs
American College of Clinical Pharmacy
1455 Pennsylvania Ave. Northwest
Suite 400
Washington, DC 20004-1017
(202) 621-1820
jmcglew@accp.com

STUDENT INITIATIVES UPDATE

ACCP Student Chapter Growth

With the growing interest in clinical pharmacy, ACCP expanded opportunities for student involvement in the College by formally recognizing student chapters in October 2013. Since then, 80 student chapters have been formed.

Benefits of Student Membership

Students can benefit from ACCP membership in many ways, including:

- Leadership development experiences (as student liaisons and as members of the National Student Network Advisory Committee);
- Options to explore clinical pharmacy specialties (by taking advantage of complimentary student membership in up to one PRN);
- Opportunities to expand and showcase their knowledge (through scientific poster presentations and the Clinical Pharmacy Challenge); and
- Career development guidance (through the CV Review Service, the “Emerge from the Crowd: How to Become a Standout Residency Candidate” sessions, and career development programming at national meetings).

Creating a student chapter is a great way to help pharmacy students learn about clinical pharmacy and get involved in ACCP. Any ACCP college of pharmacy faculty liaison can establish a formally recognized student chapter by submitting an official chapter application. If the application is approved, the liaison will be invited to serve as the chapter’s primary faculty adviser. To obtain complete information on establishing a student chapter and to download a New ACCP Chapter Application, please visit www.accp.com/stunet/studentliaisons.aspx.

For more information about student chapters, e-mail us at membership@accp.com.

2017 ACCP Student Chapter Awards—Applications Due June 30

ACCP recognizes two awards for Student Chapter members: the Outstanding Student Chapter and the Outstanding Student Chapter Member. These honors will be awarded annually. Application for each award is submitted as part of the Annual Chapter Report and is due June 30, 2017. A description of each award follows.

Outstanding Student Chapter Award

This award recognizes the ACCP student chapter that has exemplified strength in leadership, dedication in patient care, and passion for professional development through
its activities and membership. The chapter’s activities should address ACCP’s core values of extending the frontiers of clinical pharmacy and promoting dedication to excellence in patient care, research, and education. A key component of all the core values is the clinical pharmacist’s ability to work collaboratively within the health care environment. Each chapter must demonstrate its ability to work with other health disciplines.

An announcement will be featured on the ACCP website, and an article highlighting the winning chapter’s accomplishments will be published in StuNews and the ACCP Report. A commemorative plaque and $1000 in cash will be awarded to the winning chapter. The faculty liaison/adviser and one appointed student liaison from the winning chapter will receive complimentary full 2017 ACCP Annual Meeting registrations, and each will receive a $250 travel stipend to attend.

Members of student chapters who wish to apply for the award will complete an application form as part of their end-of-year report, due June 30. As part of the application process, each chapter is required to submit a rationale statement (250 words or less) outlining the plan for using the $1000 in award funds, should it be selected as the winner.

Outstanding Student Chapter Member
This award recognizes a student who has enhanced student involvement from his or her ACCP chapter at the local, state, or national level and who has expanded ACCP’s presence through community engagement, education promotion, research opportunities, and/or professional stewardship. The activities of the student selected should address ACCP’s core values of extending the frontiers of clinical pharmacy and promoting dedication to excellence in patient care, research, and education.

Each chapter award recipient will receive a certificate suitable for framing and recognition in an ACCP Report article, a StuNews article, and the Annual Meeting News. In addition, student award winners in attendance at the award-year ACCP Annual Meeting will be recognized during the Clinical Pharmacy Challenge semifinal round of competition. Each recognized student chapter will select its recipient for Outstanding Student Chapter annually and submit the winner’s name to the ACCP national office as part of its year-end report, due June 30.

ACCP SNAC Now Accepting Applications for 2017–2018
Initiated as a working group in 2006, the National Student Network Advisory (SNAC) group became a standing committee of the College in 2007. Members are appointed by the ACCP president-elect. The present 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 students. Student members who are interested in serving on the ACCP SNAC, either as a member-at-large or in a leadership role, may apply for appointment. All applicants must submit a CV, personal essay, and letter of recommendation from a professor, preceptor, or academic dean or his or her designee. Application for appointment to the 2017–2018 SNAC is available online. Applications are due June 16, 2017.

PGT UPDATE

Postgraduate Trainee Update
All resident, fellow, and graduate student members of ACCP currently receive a monthly electronic newsletter, Experts in Training. The readers would like to thank all the PRNs, residency programs, and clinical pharmacists who have contributed to the publication. You may view the archives here. For topics you’d like to see covered in future editions, submit your ideas to ksims@accp.com.

ACCP will continue to offer resident/fellow-specific educational programming at the 2017 ACCP Annual Meeting. Residents and fellows will also be able to speak to recruiters and preview early practitioner positions in the new Professional Placement Forum. Consider representing your institution’s residency, fellowship, or new practitioner position at the 2017 ACCP Annual Meeting Professional Placement Forum.

In addition to the live programming, ACCP offers two, free, live webinars each year for residents and fellows. The webinars, archived on the ACCP website, each provide 1.0 contact hour of continuing education.

Fifty-one postgraduate trainee members of ACCP are currently participating in the 2016–2017 Mentoring Program. Mentors are ACCP members who have at least 5 years of professional experience and have volunteered to participate in the program. Mentor/mentee pairs are encouraged to correspond at least monthly and are provided with timely topics of discussion. A call for mentors goes out each year in August.

The College is currently accepting applications for all positions on the 2016–2017 National Resident Advisory Committee. The committee is a working group composed of resident, fellow, or graduate student members of ACCP. Applications for chair, vice chair, and member-at-large positions are due by June 16, 2017.

All resident and fellow members are encouraged to follow #ACCPpostgrads on ACCP social media accounts.
### PRN MEMBERSHIP TOTALS

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<th>Practice and Research Network</th>
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<td>Pharmacokinetics/Pharmacodynamics/Pharmacogenomics PRN (PKPD)</td>
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### PRN CONTACT INFORMATION

For more information about a specific PRN, please contact the PRN's incoming chair, identified as follows.

<table>
<thead>
<tr>
<th>PNR TITLE</th>
<th>PNR CONTACT</th>
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<tbody>
<tr>
<td>Adult Medicine</td>
<td>Sarah L. Anderson, Pharm.D., BCPS</td>
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<tr>
<td>Ambulatory Care</td>
<td>Daniel M. Riche, Pharm.D., BCPS, CDE</td>
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<tr>
<td>Cardiology</td>
<td>Toni L. Ripley, Pharm.D., FCCP, BCPS</td>
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<td>Central Nervous System</td>
<td>Jeffrey Bishop, Pharm.D., M.S., BCPP</td>
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<td>Clinical Administration</td>
<td>Angela B. Smith, Pharm.D., BCPS, MHA</td>
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<td>Pamela L. Smithburger, Pharm.D., M.S., BCPS</td>
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<td>Drug Information</td>
<td>Dianne W. Ma, Pharm.D., BCPS</td>
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<td>Education and Training</td>
<td>Joshua Caballero, Pharm.D., BCPP</td>
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<td>Asad Patanwala, Pharm.D., BCPS</td>
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<td>Endocrine and Metabolism</td>
<td>Amy Calabrese Donihi, Pharm.D., BCPS</td>
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<td>Amber N. McLendon, Pharm.D., BCPS</td>
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<td>Michael A. Smith, Pharm.D., BCPS</td>
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<td>Global Health</td>
<td>Renee M. Holder, Pharm.D.</td>
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<td>Health Outcomes</td>
<td>Karen Smith, RPh, Ph.D.</td>
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<td>Hematology/Oncology</td>
<td>David L. DeRemer, Pharm.D., BCOP</td>
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<td>Melissa Badowski, Pharm.D.</td>
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<td>Christopher R. Ensor, Pharm.D., BCPS</td>
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<td>Christopher M. Bland, Pharm.D., FIDSA, BCPS</td>
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<td>Mary Vila, Pharm.D.</td>
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<td>Jane E. Pawasauskas, Pharm.D., BCPS</td>
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<td>Pediatrics</td>
<td>Christina Cox, Pharm.D.</td>
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<td>Perioperative Care</td>
<td>Stacey Bortlik (Moultrie), Pharm.D.</td>
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<td>Pharmaceutical Industry</td>
<td>David R. Luke, Pharm.D., BScPharm, FCCP</td>
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<tr>
<td>Pharmacokinetics/Pharmacodynamics/Pharmacogenetics</td>
<td>Keith A. Moore, Pharm.D., BCPS</td>
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<tr>
<td>Women's Health</td>
<td>Brooke L. Griffin, Pharm.D.</td>
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