

# ACCP Report

American College of Clinical Pharmacy

Michael S. Maddux, Pharm.D., FCCP; Executive Director

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## PRNs Provide Both Education and Networking Opportunities at Spring Forum

The 2008 Spring Practice and Research Forum/Pharmacotherapy Preparatory Course offers meeting attendees the chance to explore many of ACCP's 21 Practice and Research Networks (PRNs). Plan to look into specialty group events such as educational programs developed by the PRNs and individual PRN business meetings—networking forums April 5–9 in Phoenix, Arizona. Come see what these tailored interest groups can offer you professionally and how you can get involved in the PRN and ACCP.

Saturday evening, April 5, first-time ACCP meeting attendees are invited to attend the Newcomers Reception from 5:30 p.m. to 7:00 p.m. ACCP leadership and PRN officers will be available during the reception to welcome new attendees to the meeting and offer insight into taking advantage of the full meeting schedule. This is the perfect opportunity to mingle with leading ACCP and PRN members and to ask questions about both the PRNs and ACCP at-large. Sunday morning, PRN officers will meet from 11:30 a.m. until 1:30 p.m. to review old business from the previous year and discuss new agenda items slated for 2008.

On Monday morning, PRN focus sessions will get under way at 9:15 a.m. These 2-hour programs are developed by the PRNs and designed to meet specific educational needs expressed by PRN members. Several PRNs have collaborated to provide a broader look at hot topics in their specialty areas, including a joint effort of the Endocrine and Metabolism PRN and the GI/Liver/Nutrition PRN. Their program, "Treatment Options for Obesity: A Special Focus on Bariatric Surgery," will provide an update on the pharmacotherapy of obesity and review the general aftercare associated with bariatric surgery. Also starting at 9:15 a.m. is the Pediatrics PRN's focus session "Analyzing Treatment Options for Critical Neonatal and Pediatric Respiratory Disorders." This program will focus on controversial therapeutic issues and recent advances in treating respiratory disorders in neonatal and pediatric critical care settings.

Monday afternoon, those with an interest in infectious diseases should plan to attend a joint program developed by members of the ACCP Infectious Diseases PRN and members of the Society of Infectious Diseases Pharmacists. "Innovative Infectious Diseases Practice Models in the Community Setting" begins at 1:30 p.m. and will examine innovative community practice models and discuss opportunities for the development of such services in the



*The 2008 Spring Practice and Research Forum/Pharmacotherapy Preparatory Course • April 5–9 in Phoenix, Arizona.*

community setting. Also beginning at 1:30 p.m. on Monday is the Clinical Administration PRN – Adult Medicine PRN 3-hour focus session, "The Joint Commission—Strategies for Meeting Requirements." This session will review a number of national patient safety goals, including anticoagulation management, emergency medicine order review, and medication reconciliation.

Focus sessions beginning at 3:45 p.m. on Monday include the Geriatrics PRN's "Clinical Pearls and Controversies in the Treatment of the Elderly Patient." This program will explore several controversies facing geriatric practitioners, including the use of immunizations, vitamin D, and testosterone, and the treatment of diabetes. Also at 3:45 p.m., the Pharmaceutical Industry PRN presents "Clinical Pharmacists' Participation in Industry-Sponsored Research and Required Safety Surveillance Activities." This session is designed to provide education that facilitates collaboration between clinical pharmacists and industry to enhance patient care and safety.

Monday evening, join colleagues at the PRN Business Meetings and Networking Forums from 6:30 p.m. to 9:30 p.m. These reception-style gatherings, open to all meeting participants interested in joining a PRN, offer a chance to network with other attendees who share an interest in a given specialty area. Monday night's gatherings include the following PRNs: Cardiology, Critical Care, Drug Information, Geriatrics, Health Outcomes, Infectious Diseases, Nephrology, Pain and Palliative Care, and Women's Health.

Tuesday, April 8, PRN focus session programming continues at 9:15 a.m. with "Updates in Pediatric Neurology and Psychiatry," brought to you by members of the Central

Nervous System PRN. Discussion will focus on the factors influencing medication selection, efficacy, and outcomes in the treatment of neurological and psychiatric conditions in pediatrics. Also beginning at 9:15 a.m. is the Cardiology PRN's session "Issues in Cardiac Transplantation for the Non-Transplant Pharmacist." This program is designed to provide a broader understanding of three controversial issues in cardiovascular transplantation. Tuesday afternoon, the PRN focus sessions wrap up with "Pharmacy Practice-Based Research Networks: Overview, Implementation, and Application," presented by the Health Outcomes PRN. This session will introduce the concept of practice-based research networks and how they can be implemented in various practice settings.

On Tuesday evening, the second round of PRN Business Meetings and Networking Forums will be held by the following groups: Adult Medicine, Ambulatory Care, Central Nervous System, Clinical Administration, Education and Training, Pediatrics, Pharmaceutical Industry, and Pharmacokinetics/Pharmacodynamics. Like Monday night's gatherings, these events typically include a quick business meeting, dedicated time for socializing, and often a guest speaker or poster presentation. Take advantage of these informal gatherings—you need not be a PRN member to attend.

For more information on ACCP's PRNs, visit <http://www.accp.com/practice.php>. To begin planning

your Spring Forum itinerary, explore the meeting Web site at <http://www.accp.com/sf>. Take advantage of early-bird registration rates by registering before February 22. See you in Phoenix!

## Gunning, MacLaughlin Appointed to Pharmacotherapy Specialty Council

Karen Gunning, Pharm.D., BCPS, and Eric MacLaughlin, Pharm.D., BCPS, have been appointed by ACCP to 3-year terms on the Pharmacotherapy Specialty Council of the Board of Pharmaceutical Specialties (BPS).

The nine-member specialty council is responsible for developing and administering the pharmacotherapy certification examination given annually by BPS. Six board-certified specialist members of the council are appointed by ACCP as the recognized organizational sponsor of the Pharmacotherapy specialty. Other council members include specialists Rex Force (chair), Curtis Haas, Laura Hansen, and Julie Wright (vice chair). Nonspecialist members of the council are Mary Burkhardt, Joy Meier, and Scott Stolte.

For information about certification examinations in pharmacotherapy, nutrition support, oncology, psychiatry, and nuclear pharmacy, contact BPS at (202) 429-7591 or access the BPS Web site at [www.bpsweb.org](http://www.bpsweb.org).

## Nominations for Parker Medalist, ACCP Fellows, and 2009 Spring Awards Due February 15

Nominations for the 2008 Parker Medal, 2008 ACCP Fellows (FCCP), and 2009 Spring Awards (New Investigator, New Educator, and New Clinical Practitioner) are due soon. All nomination materials, including letters, vitae or resumés, and other supporting documents, should be submitted online to ACCP. The online nominations portal specifies the nominating materials required for each award. This portal is available at <http://www.accp.com/ClinNet/nomMenu.php>.

The nomination deadline for each of the awards below is February 15, 2008; additional information regarding award criteria may be obtained from ACCP headquarters.

**2008 ACCP Fellows:** Fellowship is awarded in recognition of continued excellence in clinical pharmacy practice or research. Nominees must have been full members of ACCP for at least 5 years, must have been in practice for at least 10 years since receipt of their highest professional pharmacy degree, and must have made a sustained contribution to ACCP through activities such as presentation at College meetings; service to ACCP committees, PRNs, chapters, or publications; or election as an officer. Candidates may be nominated by any two Full Members, other than the nominee, or by any Fellow. Current members of the Board of Regents and the Credentials: FCCP Committee are ineligible for consideration.

**2008 Paul F. Parker Medal for Distinguished Service to the Profession of Pharmacy:** Recognizes an individual who has made outstanding and sustained contributions to improving or expanding the profession of pharmacy in an area of professional service—including, but not

limited to, patient care, leadership, administration, finance, technology, information processing, service delivery, models of care, and advocacy. The award is not limited to pharmacists or ACCP members. All nominations must include the nominee's curriculum vitae, resumé, or biographical sketch, as available, and at least three letters of support that describe the individual's accomplishments relative to the award criteria. At least one letter of support must be from an individual outside the nominee's current practice locale. Current members of the Board of Regents, Selection Committee, or ACCP staff are ineligible.

**2009 New Clinical Practitioner Award:** This award will be given at the 2009 International Congress on Clinical Pharmacy, April 2009, in Orlando, Florida. Its purpose is to recognize and honor a new clinical practitioner who has made outstanding contributions to the health of patients and/or the practice of clinical pharmacy. Nominees must have been Full Members of ACCP at the time of nomination and members at any level for a minimum of 3 years, and it must have been less than 6 years since completion of their terminal training or degree, whichever is most recent. Fellows of ACCP (i.e., "FCCP") are not eligible. All nominations must include a letter of nomination detailing the nominee's qualifications for the award, the nominee's curriculum vitae, and two letters of support that describe the individual's accomplishments relative to the award criteria. At least one of the letters of support must be from an individual outside the nominee's current place of employment. Additional letters of support may be included. Current members of the Board of Regents, Awards Committee, or ACCP staff are ineligible. **Nomination deadline: February 15, 2008.**

**2009 New Educator Award:** This award will be given at the 2009 International Congress on Clinical Pharmacy, April 2009, in Orlando, Florida. Its purpose is to recognize and honor a new educator for outstanding contributions to the discipline of teaching and to the education of health care practitioners. Nominees must have been Full Members of ACCP at the time of nomination and members at any level for a minimum of 3 years, and it must have been less than 6 years since completion of their terminal training or degree, whichever is most recent. Fellows of ACCP (i.e., "FCCP") are not eligible. All nominations must include a letter of nomination detailing the nominee's qualifications for the award, the nominee's curriculum vitae, and two letters of support that describe the individual's accomplishments relative to the award criteria. At least one of the letters of support must be from an individual outside the nominee's current place of employment. Additional letters of support may be included. Current members of the Board of Regents, Awards Committee, or ACCP staff are ineligible. **Nomination deadline: February 15, 2008.**

**2009 New Investigator Award:** This award will be given at the 2009 International Congress on Clinical Pharmacy, April 2009, in Orlando, Florida. Its purpose is to highlight the research program of an ACCP member who has made a major impact on an aspect of clinical pharmaceutical science. Nominees must have been members of ACCP for more than 3 years; must have completed their terminal training or degree, whichever is most recent, less than 6 years earlier; and must have a research program with a significant publication record having a programmatic theme or an especially noteworthy single publication. Fellows of ACCP (i.e., "FCCP") are not eligible. All nominations must include a letter of nomination detailing the nominee's qualifications for the award, the nominee's curriculum vitae, and two letters of support that describe the individual's accomplishments relative to the award criteria. At least one of the letters of support must be from an individual outside the nominee's current place of employment. Additional letters of support may be included. Current members of the Board of Regents, Awards Committee, or ACCP staff are ineligible. **Nomination deadline: February 15, 2008.**

## Outstanding Mentors Will Serve as Founding Faculty for the Research Institute's Inaugural Focused Investigator Training (F.I.T.) Program

Do you want the opportunity to work with highly experienced and dedicated research experts in a close one-on-one environment? Are you ready to take your research proposals to the next level? Attend the F.I.T. Program in July 2008 and become fully engaged in a unique and career-changing experience.

The 2008 FIT Program mentors include Drs. Barry Carter, John Cleary, Courtney Fletcher, Reginald Frye, Jill Kolesar, Gene Morse, Mark Munger, Michael D. Reed, Julie Wright, and Gary Yee. To complement these experienced clinical scientist-mentors, highly experienced biostatisticians will be available to attendees throughout the program for individual consultation.

"The Research Institute is very excited about the slate of top-flight mentors we have attracted for the launch of the new FIT Program," Jacqueline Marinac, ACCP's Director of Research, said. "One mentor commented to me: 'I think this is the most important thing ACCP has ever done and am delighted to participate.'" This enthusiastic support has echoed among other founding mentors and within pharmacy



Above: The University of Utah campus

leadership as well. "I am so impressed that these highly experienced mentors are willing to share their time and talents with less-seasoned investigators for an entire week! The mentors truly believe in the conceptual structure and format of the F.I.T. Program. Their involvement ensures that this new Research Institute investigator training initiative will be a serious effort toward filling a critical, unmet need within the clinical pharmacy discipline," Marinac said.

Online applications are now being accepted, and participants will be selected based on a competitive review process. Application and program information are available at <http://www.accp.com/ri/fit/index.php>.

## President's Column

*Gary R. Matzke, Pharm.D., FCCP*

### Are You Under the Influence?

This is a question that tends to come up on when you least want to hear it—like when those multicolored lights guide you to the side of the road. Just as an exposure to a mind-altering substance may alter or influence one's driving and decision-making abilities, the interactions we have with media presentations, colleagues, and patients often are formative in establishing our pharmacotherapeutic practice perspectives. The influence of industrial entities on the professional decisions of health care professionals not only affects the individual but also, potentially, all the patients under his/her care. The College's position paper on Guidelines for Ethical Interactions Between Pharmacists and Industry ([http://www.accp.com/position/Guidelines\\_for\\_Ethical\\_Interactions\\_DRAFT.pdf](http://www.accp.com/position/Guidelines_for_Ethical_Interactions_DRAFT.pdf)) was recently revised and presented during the Town Hall Meeting at the 2007 Annual Meeting in Denver. This lively session focused on the rationale for many of the key issues addressed



in the guidelines, as highlighted below (see box on next page).

Recently, the influence of the pharmaceutical industry on the use of medications in the United States was scrutinized extensively. Several investigative reports, a wave of new and revised federal, industry, and organizational guidelines, and even a congressional hearing have addressed the impact of the pharmaceutical industry on many aspects of health care delivery. This impact applies to drug availability on institutional formularies, the development of consensus treatment guidelines, and individual clinician prescribing habits. Many critics believe that these efforts have altered the dialogue between patient and clinician, influenced practitioners' clinical judgments, and compromised therapeutic decision-making processes within our health care system.

In 2006, the pharmaceutical industry spent almost \$5 billion on direct-to-consumer advertising. In addition to this highly visible promotional effort directed toward patients, pharmaceutical companies spent an estimated \$19 billion to favorably influence clinicians. They have sponsored teaching programs and research at universities, given money to patient groups, and hired public relations firms to promote patient success stories in the media. The apparent effectiveness of these marketing efforts has prompted an outcry from some within the health care establishment. These critics say that patient health, the nation's health care budget, and, ultimately, the trust and esteem in which Americans hold their pharmacists and physicians are in jeopardy. However, this unfolding environment is just the tip of the iceberg according to some.

"The most effective marketing is the marketing you're not aware of," says Dr. Peter Rost, a one-time pharmaceutical company marketing executive who has become an Internet-based industry watchdog. "If you see an ad, you know it's marketing. But if a friend or your doctor talks to you about a drug, you don't" (Healy M. Sold on drugs: under the influence. *LA Times* August 6, 2007).

The drug development process is often the beginning point of influence as medical researchers, academic authorities, and influential specialists are courted to become key proponents of a new drug's commercial viability. Drug companies often establish commercial partnerships with universities, provide funds to endow academic programs, and pay academic medical centers to conduct pivotal clinical trials. In doing so, they court a cadre of respected experts who have extensive experience with the drug product as well as financial and collegial relationships with their industry counterparts. Drug company funding of biomedical research has risen from \$1.5 billion to \$55 billion during the past 25 years and now overshadows the federal government's investment in this area (<http://www.latimes.com/features/health/la-he-buildingthemarket6aug06.1.124572.story>). University-affiliated clinical experts often serve on or testify before U.S. Food and Drug Administration committees. By serving on these expert committees, which also develop clinical practice guidelines, these experts play a vital role in establishing and expanding markets for new and existing prescription medications. An April 2007 *New England Journal of Medicine* article found that developers of clinical guidelines were 41% more likely to have received payments from drug companies for consulting, lecturing, or trial recruitment than physicians not involved in guideline development (Campbell EG, Gruen RL, Mountford J, et al. A

national survey of physician-industry relationships. *N Engl J Med* 2007;356:1742–50). Furthermore, physicians teaching at medical schools were 67% more likely to have received such payments than those who did not teach.

Even though several professional organizations and the Pharmaceutical Research and Manufacturers of America adopted non-mandatory codes of conduct more than 5 years ago that discourage the offering or acceptance of non-educational items that bring "personal benefit" to a clinician, these practices are still rampant. The extent and scope of industry marketing efforts to the health care professional community is immense. Ninety-four percent of physicians in 2007 reported some type of relationship with a pharmaceutical company representative. Eighty-three percent received food in their workplace, 78% accepted drug samples, 35% received reimbursement for the cost of attending professional meetings or company-sponsored sessions, and 28% received payments for consulting, giving lectures, or enrolling patients in a study (Campbell EG, Gruen RL, Mountford J, et al. A national survey of physician-industry relationships. *N Engl J Med* 2007;356:1742–50).

In a *Los Angeles Times* series on industry and physician relationships, Shahram Ahari, a former drug representative with Eli Lilly and now a researcher at the UC San Francisco School of Pharmacy stated that, in many cases, the guidelines have given the practice of gift giving "a nice veneer of respectability" (<http://www.latimes.com/features/health/la-he-bribingthegatekeeper6aug06.1.7957877.story?coll=la-utilities-health>). However, the practice's impact is often unaltered and may even be greater than when drug representatives were permitted to offer extravagant gifts. Indeed, psychologists have shown that small tokens or gestures of friendship often inspire a stronger sense of obligation in the recipient than does a more "showy" gift for which reciprocation is impossible.

Professional health care societies and organizations have also been a target for the influential reach of the pharmaceutical industry. At a recent hearing of the Senate Committee on Aging, Dr. Jerome Kassirer of Tufts University School of Medicine described meetings of medical societies and associations as "mini-circuses, replete with enormous glittering displays." "Although couched as education," he adds, "these marketing efforts are thinly disguised bribes" ([http://aging.senate.gov/hearing\\_detail.cfm?id=277848&](http://aging.senate.gov/hearing_detail.cfm?id=277848&)). At almost every major pharmacy and medical meeting, there are opportunities to pick up free things that are clearly not intended to sharpen one's rational decision-making skills, but rather to have an impact on the medications that are available in our institutions and that we recommend for our patients. Pharmaceutical companies have often underwritten the programs we attend and, in some cases, the staff or leadership of the professional associations that organize the events. Many health care professional societies have become dependent on the infamous "unrestricted grant" from numerous pharmaceutical companies. Dr. J. Gregory Rosenthal, a retinal surgeon based in Toledo, Ohio, told the Committee, "In this context, 'unrestricted' means, 'Use this for whatever you want, but if you ever want another, don't displease us'" ([http://aging.senate.gov/hearing\\_detail.cfm?id=277848&](http://aging.senate.gov/hearing_detail.cfm?id=277848&)). In 2004, Warner-Lambert (now a division of Pfizer, Inc.) paid \$430 million to settle claims that it was using continuing education grants to promote off-label uses of Neurontin (<http://www.latimes.com/>

[features/health/la-he-bribingthegatekeeper6aug06.1.7957877.story?coll=la-utilities-health](http://www.latimes.com/features/health/la-he-bribingthegatekeeper6aug06.1.7957877.story?coll=la-utilities-health)). In 2005, Serono Laboratories paid \$704 million to settle claims in a case that alleged it used educational programs to boost sales of Serostim for off-label uses (<http://www.latimes.com/features/health/la-he-bribingthegatekeeper6aug06.1.7957877.story?coll=la-utilities-health>). To date, at least 30 states have enacted laws or have considered legislation that addresses this issue. Such legislation includes bills requiring the disclosure of gifts and payments by drug makers to physicians, limits on pharmaceutical companies' access to prescription information used for marketing purposes, advertising restrictions, and limits on pharmaceutical sales representative gift giving to doctors. California and Virginia have joined Vermont, Maine, and Minnesota—three states that have enacted the most sweeping laws on drug marketing—in requiring reports disclosing drugmakers' spending on advertising and marketing activities (Healy M. Sold on drugs: and now a push for change. *LA Times* August 6, 2007).

In summary, relationships between industry and health professionals may be ethically appropriate, educationally beneficial, and unavoidable. The challenge for each of us is to ensure that those relationships remain within acceptable boundaries and that we avoid interactions that have the potential to affect us negatively, as well as our profession and patients. As our roles as pharmacotherapy specialists evolve, we will continue to be challenged by ethical dilemmas; thus, we should be familiar with current guidelines and emerging policies to ensure that we have a sound decision-making framework when confronted with these ethical dilemmas. In closing, I encourage you to plan to attend the 2008 Annual Meeting and set aside time to participate in the “Tales from the Front: Ethics and Interacting with Industry” session. I am sure you will find it intriguing.

### ACCP Guidelines for Ethical Interactions Between Pharmacists and Industry

- **Guideline 1:** As health care professionals responsible for managing drug therapy, the welfare of patients should be the pharmacist's primary concern in all aspects of pharmacy practice, including interactions with industry.
- **Guideline 2:** Pharmacists should not solicit or accept gifts from industry that might influence or appear to influence objectivity, independence, or fairness in clinical and professional judgment.
- **Guideline 3:** Pharmacists should disclose financial, consulting, or other relationships that are or appear to constitute conflicts of interest. Although disclosure is an important tool in the management of potential conflicts of interest, it does not absolve pharmacists from avoiding situations in which potential conflicts would make their participation inappropriate.
- **Guideline 4:** Pharmacists who make decisions regarding the purchase, prescribing, or use of drugs or devices by others through formulary committees deliberations, clinical practice guidelines development, or administrative responsibilities should avoid financial, consulting, or other relationships with industry that are or appear to constitute conflicts of interest.

Pharmacists may serve as expert consultants at the request of formulary committees and clinical practice guideline panels; however, those with industry relationships should not participate in the final deliberations or vote. Furthermore, expert consultants must disclose all relationships with industry that might influence or appear to influence their objectivity.

- **Guideline 5:** Pharmacists who are members of an Institutional Review Board (IRB) should avoid any real, potential, or perceived conflicts of interest that could occur in connection with industry-related matters before the IRB.
- **Guideline 6:** Pharmacists who participate in industry-associated research should only do so if that research meets accepted ethical, regulatory, and scientific standards.
- **Guideline 7:** Pharmacists should only participate as authors for publications that meet accepted ethical, regulatory, and scientific standards. In addition, pharmacists who serve as peer reviewers should disclose any conflicts of interest that could be perceived and/or recuse themselves from reviewing a manuscript for which they have a relationship with a sponsor or competitor of the sponsor.
- **Guideline 8:** Pharmacists participating in continuing education programs or preparing written material on drug therapy should deliver fair and unbiased presentations. Pharmacists should disclose any apparent or potential conflicts of interest. The presentation of continuing education free from bias is in the best interest of health care providers, as well as patients.
- **Guideline 9:** Colleges of Pharmacy and post-graduate pharmacy training programs should incorporate formal instruction on professional ethics into their curricula for pharmacy students, residents, fellows, graduate students, preceptors, and faculty. These educational offerings should address appropriate relationships between pharmacists and industry. In addition, training programs should develop guidelines or formal policies governing interactions between trainees and representatives of industry.
- **Guideline 10:** Pharmacists should ensure that patient confidentiality is maintained for all industry interactions. The confidentiality of prescriber information should also be respected.

### Students: Check Out Student Programming at the ACCP Spring Forum

Attention, student pharmacists: join us in Phoenix for the ACCP Spring Practice and Research Forum, offered in conjunction with the acclaimed Updates in Therapeutics: The Pharmacotherapy Preparatory Course. The Spring Forum is your chance to network with clinical pharmacy leaders and to attend high-level educational offerings, including programming developed especially for students.

An ACCP national meeting is an invaluable opportunity to expand your knowledge base and professional network. Register today and take advantage of special student meeting registration rates, including discounts for groups of five or more students. When planning your meeting activities, be sure to consider the following program options:

- **The Professional and Personal Rewards Associated with Research: Why It's Worth a Closer Look** – Developed exclusively for students, this Saturday afternoon presymposium will open your eyes to the many exciting and rewarding opportunities associated with the pursuit of research.
- **Newcomers Reception** – Meet ACCP officers and leaders, network with other first-timers, and find out what ACCP can offer you.
- **Opening Reception** – All meeting attendees are encouraged to attend. Take this opportunity to network with your peers in a relaxed atmosphere.
- **Updates in Therapeutics: The Pharmacotherapy Preparatory Course** – Prepare for clinical rotations and enhance your knowledge and analytical patient care skills by attending case-based lectures on a variety of therapeutic topics and disease states.
- **PRN Business Meetings and Networking Forums** – Networking is essential to a successful career. This is a particularly good opportunity for those who are early in their pharmacy careers. All meeting attendees are invited to attend these reception-style gatherings.
- **Scientific Poster Sessions** – All student posters will be displayed on Monday, April 7.

A complete listing of Spring Forum student highlights, including specific session dates and times, can be found on the ACCP Web site at <http://www.accp.com/meetings/sf08/StudentHighlights.php>.



The 2008 Spring Practice and Research Forum • April 5–9 in Phoenix, Arizona.

## 2008 Spring Forum Student Travel Awards: Apply Now!

Have you thought about attending an ACCP meeting but have limited financial resources available to cover your travel and registration costs? ACCP and its members want to help.

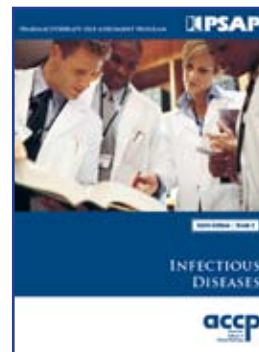
The Student Travel Award enables students to attend ACCP meetings by awarding travel stipends and/or complimentary meeting registrations. Apply online now for an award to attend the Spring Practice and Research Forum in Phoenix, April 5–9, 2008.

## How to Apply

Members of ACCP who are full-time pharmacy students pursuing their first professional pharmacy degree are invited to apply for the awards. Applicants are asked to submit a completed application, a curriculum vitae or resumé, two letters of reference, and a one-page essay. All application materials should be submitted online to the ACCP StuNet Awards Portal at <http://www.accp.com/stunet/stuMenu.php>. For more information, contact Jon Poynter at [jpoynter@accp.com](mailto:jpoynter@accp.com) or (913) 492-3311, ext. 21.

## Infectious Diseases Book is the Latest in PSAP-VI Series

The subject of infectious diseases is one of the most challenging and ever-changing areas that board-certified pharmacotherapy specialists encounter in practice. *Infectious Diseases* is the latest in the *Pharmacotherapy Self-Assessment Program*, Sixth Edition (PSAP-VI) series. The book provides an essential update on some of the most commonly encountered infectious diseases. Chapter topics include chronic management of HIV; upper respiratory tract infections; community-associated methicillin-resistant *Staphylococcus aureus*; vaccines; infections in the long-term care setting; endocarditis; and nosocomial pneumonia. The book's content is designed to enable the pharmacist to:



- Analyze antiretroviral treatment options for treatment-experienced patients and distinguish the advantages and disadvantages of each agent;
- Evaluate the appropriateness of antibiotic therapy based on local resistance patterns;
- Assess antimicrobial treatment options available for CA-MRSA infections with an emphasis on clinical effectiveness, toxicity potential, and role in therapy;
- Evaluate patient-specific information, including risk factors and precautions, for purposes of recommending appropriate vaccinations across the life span;
- Evaluate the appropriateness of antibiotic drug therapy in the long-term care setting based on clinical presentation and accompanying diagnostic data;
- Design a treatment plan for a patient with endocarditis caused by a pathogen with reduced susceptibility to first-line therapy; and
- Develop an optimal treatment plan for multidrug-resistant pathogens causing nosocomial pneumonia.

*Infectious Diseases* will be released January 15 and is the fifth installment in the 11-book PSAP-VI series. The book is available in both print and online formats. Continuing pharmacy education credit is available for successful completion of the self-assessment examinations provided with each module. The two modules offer a combined total of 11.5 hours of continuing pharmacy education credit. The

sixth edition of PSAP features several improvements over previous editions, including all-online testing; answer books in PDF format; shorter, more concise chapters; and expanded, annotated bibliographies.

Other books in the PSAP-VI series include *Cardiology; Nephrology; Neurology and Psychiatry; Science and Practice of Pharmacotherapy; Pulmonary and Critical Care; Women's Health and Men's Health; Health Promotion and Maintenance; Gastroenterology and Nutrition; Oncology; and Chronic Illnesses.*

PSAP is dedicated to offering the most up-to-date and comprehensive information available regarding recent drug therapy advances. Each book will expand the reader's knowledge in the therapeutic area covered. PSAP is priced as detailed below (please note that shipping charges will also apply):

	<u>Member Price</u>	<u>Nonmember Price</u>
<b>PSAP-VI Single Books</b>		
Print	\$60.00	\$80.00
Online	\$50.00	\$70.00
Print & Online	\$85.00	\$105.00
<b>PSAP-VI Series</b>		
Print	\$375.00	\$545.00
Online	\$330.00	\$490.00
Print & Online	\$545.00	\$705.00

For specific information pertaining to the release dates of future books, projected continuing education credits, and Accreditation Council for Pharmacy Education (ACPE) program numbers for each book, visit [http://www.accp.com/p6\\_se.php](http://www.accp.com/p6_se.php), where you can quickly and conveniently place your order through the ACCP online bookstore. Use code **BR0707** when ordering PSAP-VI.



PSAP-VI has been approved by the Board of Pharmaceutical Specialties (BPS) for use in Board Certified Pharmacotherapy Specialist (BCPS) recertification. ACCP is accredited by ACPE as a provider of continuing pharmacy education.

### Awards, Promotions, Grants, etc.

**James Clem**, Pharm.D., was recently named Acting Head of the Department of Pharmacy Practice at South Dakota State University College of Pharmacy....**George Davis**, Pharm.D., BCPS, has been appointed PGY1 Residency Program Director and Associate Adjunct Professor of Pharmacy Practice at the University of Kentucky College of Pharmacy....**Jimmi Hatton**, Pharm.D., FCCP, FCCM, BCNSP, has been named Interim Chair of the Department of Pharmacy Practice and Science at the University of Kentucky College of Pharmacy....**Dennis Hedge**, Pharm.D., was recently appointed Associate Dean at South Dakota State University College of Pharmacy....**Cynthia Jackevicius**, Pharm.D., M.S., BCPS, received \$426,477 from the Canadian Institutes for Health Research for a project titled, "Population-based Analysis of the Effectiveness and Adverse Effects of Medications in Patients with Atrial Fibrillation"....**John Murphy**, Pharm.D., FCCP, is co-principal investigator

on a project funded for \$737,000 by the Arizona Area Health Education Center to develop interprofessional training models....**Frank Romanelli**, Pharm.D., M.P.H., was recently elected a Distinguished Practitioner to the National Academies of Practice....**Melody Ryan**, Pharm.D., BCPS, has been appointed Director of International Professional Student Education at the University of Kentucky College

of Pharmacy....**John Swegle**, Pharm.D., BCPS, was recently promoted to the rank of Associate Professor of Clinical and Administrative Pharmacy at the University of Iowa College of Pharmacy.

Bethany Strickland  
Bridgette Therriault  
George Todd  
Daniel Tran  
Frank Tverdek  
Joshua Walsh  
Vanessa Williams  
Casey Woltz

### New Members

Rebecca Barnes  
Kellie Bennett  
Rucha Bond  
Yekaterina Bor  
Jamie Brown  
Summer Bryan  
Natalie Buening  
Zhiyu Chen  
Benjamin Colton  
Evangelia Davanos  
Christine Dearing  
Daniel Dobrian  
Cynthia Dorsch  
Charity Earnhardt  
Scott Fleming  
Joseph Ford  
Kimberly Frazee  
Cindy Gillis  
Sanaz Hamrah  
Thaddaus Hellwig  
Linsey Hocker  
Melissa Holland  
Jennifer Hunt  
Megan Kavanaugh  
Rodney Larson  
Dona Laslow  
Jeannie Lee  
Jessica Leister  
Sana Majid  
Jason Makii  
Valerie Mathieu  
Amanda McFee  
Lindsay McGrath  
Scott Meyers  
Monica Mineo  
Rachel Nielsen  
Jessica Njoku  
Shannon O'Hara  
Miroslava Orozco  
Jennifer Penrose  
Ian Ross  
Mira Samad  
Vanessa Sherwood  
Kelley Simms  
Corinne Solomon

### The following individuals recently advanced from Associate to Full Member:

Justin Frazer  
Meri Hix  
Anthony Ranno  
Mary Regan  
Yasar Tasnif

### New Member Recruiters

*Many thanks to the following individuals for recruiting colleagues to join them as ACCP members:*

James Beardsley  
Lisa Anne Boothby  
Jill Burkiewicz  
Marie Chisholm  
L. Nicky Corkum  
Daniel Diggins  
Lyuba Dragilev  
Susan Francis  
Susan Heineman  
Patricia Marshik  
Kristin Montarella  
Timothy Murray  
Lindsay Nissen  
Amy Barton Pai  
Steven Price  
Ryan Schubach  
Christopher Scott  
Katie Speidel  
Amy Valley  
Geoffrey Wall  
Susan Wilson

**Department Chairperson  
Department of Pharmacy Practice and Administrative Sciences  
Idaho State University**

This is a full-time, tenure-track position involving a 12-month contract. Rank (Associate Professor or Professor) will be based on qualifications. The Chairperson position can be located in either Pocatello or Boise, and the location will be negotiated with the Dean.

College, University, and Communities

Idaho State University (ISU) is classified as a Carnegie research-intensive institution, but it is moving toward research-extensive classification under new Presidential leadership. The college, and specifically the department, is a key participant in fulfilling that role. ISU is the academic institution charged with the health sciences educational mission for the state of Idaho and offers a variety of health-related programs in addition to pharmacy. ISU enrolls approximately 12,000 students and offers the sole pharmacy degree program in Idaho.

The Department of Pharmacy Practice and Administrative Sciences is one of two academic units within the college. The department is composed of approximately 30 full-time faculty members located in Pocatello, Boise, and Coeur d'Alene in Idaho and Reno in neighboring Nevada. The college offers a dynamic traditional and nontraditional Pharm.D. program, residency education, and graduate degree programs. The department successfully administers contracts for Idaho Medicaid Drug Utilization Review.

The main ISU campus is located in Pocatello. The college currently provides instruction to Pharm.D. students in Pocatello and Boise during the third and fourth years of the program. Recently, the college received a multi-million dollar gift enabling expansion of the Pharm.D. program to all 4 years on both campuses. A legislatively funded feasibility study is currently in progress to assess the need for medical education in Idaho. The college's existing solid foundation, coupled with the dynamic health care changes in Boise, creates many opportunities for a departmental leader with vision.

Idaho has one of the fastest growing economies in the nation. The Pocatello area, located in southeast Idaho in the western foothills of the Rocky Mountains, is home to 62,000 people. A 2-hour drive puts you on the doorstep of world-class resorts and several national parks. *Forbes* magazine recently listed Pocatello eighth among the "Best Small Places in America." Boise and the surrounding communities located in the "Treasure Valley" of southwest Idaho support a population of over 500,000 people. Boise is designated the "Tree City" and is home to over 50 parks, 7 community centers, numerous golf courses, and bountiful opportunities for outdoor recreation. Boise was recently listed as one of the Top 10 desired places to live and work and is rated within the Top 25 for businesses among all cities in the United States.

Responsibilities

The Chairperson is responsible for administration of the department. Responsibilities include the management of departmental budgets and the recruitment, development, evaluation, and retention of faculty. The Chairperson will facilitate and direct faculty-related endeavors in accordance with the expansion of the existing Pharm.D. program to the dual campuses in Boise and Pocatello. The successful candidate will foster the development of enhanced scholarship programs on both campuses while maintaining and building other collaborative relationships with other health care systems, academic institutions, private entities, and other disciplines at ISU. The Chairperson will represent the department at university, state, regional, and national levels.

Qualifications

A Pharm.D. and/or Ph.D. degree in a pharmacy practice-related discipline; an established record of extramural scholarship with a commitment to fostering departmental scholarship; a demonstrated commitment to a professional pharmacy curriculum and the profession of pharmacy; and excellent communication, interpersonal, and leadership skills. The preferred candidate will have completed residency, fellowship, or graduate education and possess previous administrative experience.

Salary

Commensurate with experience and qualifications; competitive benefits package.

Application Procedure

Please submit a letter of application, a curriculum vitae, statements of teaching and research interests, and a minimum of three current letters of reference to:

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Idaho State University  
Office of Human Resources  
Pharmacy Practice & Administrative Sciences Chair Search  
921 S. 8th, Stop 8107  
Pocatello, ID 83209-8107  
Fax: (208) 282-4976  
[E-mail: hr@isu.edu](mailto:hr@isu.edu)

Applications will be reviewed upon receipt, and the search will continue until the position is filled. For further information about the university and the college of pharmacy, please visit [www.isu.edu](http://www.isu.edu) or <http://pharmacy.isu.edu/live/>. Questions should be addressed to Dr. Karl Madaras-Kelly, Search Chair at [KMK@pharmacy.isu.edu](mailto:KMK@pharmacy.isu.edu), by telephone at (208) 422-1146 or by fax at (208) 422-1147.

Idaho State University is an AA/EEO Employer. Veterans are encouraged to apply.



**KAISER PERMANENTE®**

**Clinical Pharmacy Specialist  
Kaiser Permanente Colorado**

**Kaiser Permanente**, the nation's largest privately sponsored health care delivery system, has exciting opportunities for motivated clinical pharmacy specialists in cardiac risk, cardiology, formulary management, and primary care in the Denver/Boulder metropolitan area. Successful candidates will participate in the planning and implementation of region-wide programs to optimize drug therapy outcomes in this progressive managed care setting. Opportunities are available for educating pharmacy students and residents. Research participation is encouraged.

A Doctor of Pharmacy degree with a specialty residency and/or fellowship and a Colorado Pharmacist's license are required. Board certification is required within 3 years of one's date of employment.

Kaiser Permanente Colorado's Pharmacy Department employs more than 600 individuals with greater than 100 clinical pharmacy specialists and clinical pharmacists in clinical practice areas such as anemia growth factor, anticoagulation, asthma/allergy, cardiac risk, cardiology/heart failure, continuing care, diabetes, drug information, gastroenterology, infectious diseases, mental health, nephrology, neurology, oncology, palliative care, primary care, rheumatology, research, solid organ transplant, call center, and international travel.

We offer an excellent salary and benefits package. Support for continuing education, board certification, and professional memberships is included. Enjoy the Rocky Mountains while shaping the development of premier clinical pharmacy services in the not-for-profit managed care environment.

Qualified applicants should send a letter of interest, curriculum vitae, and three letters of reference to:

**Beth Chester, Pharm.D., BCPS**  
**Quality & Clinical Pharmacy Manager**  
**Kaiser Permanente Colorado**  
**16601 East Centretech Parkway**  
**Aurora, CO 80011**  
**Telephone: (303) 326-7612**  
**E-mail: [beth.chester@kp.org](mailto:beth.chester@kp.org)**

*Kaiser Permanente is an AA/EEO employer.*

**Healthcare Policy Fellow Position**  
**Medical College of Virginia/Virginia Commonwealth University**  
**American College of Clinical Pharmacy**  
**American Society of Health-System Pharmacists**

**Position Description — Postdoctoral Fellow Program:**

Applications are now being accepted for the Pharmacy Healthcare Policy Fellow Program, an innovative collaboration of the School of Pharmacy at the Medical College of Virginia/Virginia Commonwealth University (MCV/VCU), the American College of Clinical Pharmacy, and the American Society of Health-System Pharmacists. This year-long Washington, DC-based program, which is described in detail at <http://www.pharmacy.vcu.edu/sub/prog/publicpolicy.aspx>, 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/her development of legislative evaluation and policy development skills. He/she will also develop research and writing skills while integrating practical policy experience with theory. The Fellow will be expected to undertake a wide variety of responsibilities in a Congressional office, 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.

**Practice or research specialty/focus of the position:**

Health services policy development and research.

**Required or desired credentials or experience of applicants:**

Candidates must hold a Pharm.D. degree and have completed at least 1 year of residency training or equivalent postdoctoral experience; or hold a Master's or Ph.D. degree in the health sciences. Preference will be given to individuals with demonstrated awareness/activities regarding political and social issues.

**Stipend and support:**

Stipend support will be \$50,000 for the 1-year experience; an allowance for moving expenses of up to \$2,000; an allowance for professional travel of \$1,500; and health insurance coverage provided through the MCV/VCU School of Pharmacy.

**Application Process:**

The application period has been extended, and applications will be accepted until the position is filled. Guidelines for submission of applications are available at <http://www.pharmacy.vcu.edu/sub/prog/guidelines.aspx>. Finalists will be interviewed in Washington, DC, in spring 2008, and the successful candidate will be announced shortly thereafter. Further information or questions should be addressed to:

Gary R. Matzke, Pharm.D., FCCP, FCP  
Program Director  
Professor and Associate Dean for Clinical Research and Public Policy  
MCV/VCU School of Pharmacy  
Telephone: (804) 828-1388  
E-mail: [gmatzke@vcu.edu](mailto:gmatzke@vcu.edu)