

ACCP Report

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Vol. 23, No. 2; February 2004

Defining Clinical Pharmacy

As articulated in its strategic plan, ACCP's 20-30 year vision for the profession is that "pharmacists will be recognized and valued as the preeminent health care professionals responsible for the use of medicines in the prevention and treatment of disease." To achieve this vision, the profession must ensure that there will be an adequate supply of appropriately educated and skilled clinical pharmacists. Among the strategies that will help address this issue is to define and promote the core competencies of a clinical pharmacy practitioner. Hence, the ACCP Board of Regents has established the following objectives:

- publish a definition of clinical pharmacy and the core competencies of a clinical pharmacist;
- provide or endorse mechanisms for individual pharmacists to assess their clinical competencies against the defined core competencies, thereby facilitating their professional development; and
- ensure that ACCP provides educational programs to help develop and maintain the core competencies of a clinical pharmacist.

In August 2003, a workgroup composed of ACCP members and Regents drafted a proposed definition of clinical pharmacy. At its last two meetings, the Board of Regents has engaged in focused discussion leading to refinement of this definition and the development of a separate definition for the clinical pharmacist. The following *draft* definitions were adopted by the Board of Regents in January 2004 prior to seeking more broad-based input from ACCP members and the profession at-large:

Definition of Clinical Pharmacy (Draft)

A health science discipline that embodies the application and development, by pharmacists, of scientific principles of pharmacology, toxicology, therapeutics, clinical pharmacokinetics, pharmacoconomics, pharmacogenomics, and other life sciences for the care of patients.

Definition of Clinical Pharmacist (Draft)

A pharmacist who is involved in clinical pharmacy practice, research, and/or education.

The foregoing drafts will soon be circulated to a cross-section of ACCP members for further comment to establish consensus definitions. When finalized, the definitions will be published, together with accompanying background information and explanatory notes. Also, they will provide a foundation for the next step in this process, the creation of a set of core competencies for the clinical pharmacist. A future ACCP committee or task force will be charged with developing and publishing these competencies in 2005.

Wright Appointed to Pharmacotherapy Specialty Council—Carmichael Appointed to Second Term

Sowinski elected Chair—Carmichael Vice Chair

Julie Wright, Pharm.D., FCCP, BCPS, has been appointed by ACCP to a three-year term on the Pharmacotherapy Specialty Council of the Board of Pharmaceutical Specialties (BPS), and Jannet Carmichael, Pharm.D., FCCP, BCPS, was appointed to a second three-year term. In addition, Kevin Sowinski, Pharm.D., FCCP, BCPS and Carmichael were elected to serve as Chair and Vice Chair, respectively, for 2004.

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 sponsor of Pharmacotherapy. Other council members include specialists Rex Force, William Greene, Ila Harris, and Joseph Saseen. Nonspecialist members of the council are Paul Abramowitz, J. Chris Bradberry, and Patricia Kienle.

For information about certification examinations in pharmacotherapy, nutrition support, oncology, psychiatry, and

nuclear pharmacy, contact BPS at (202) 429-7591 or www.bpsweb.org.

2004 Updates in Therapeutics:

**The Pharmacotherapy Preparatory Course
June 5-8, 2004
Hilton Austin—Austin, Texas**

This is the *best* pharmacotherapy preparatory course around!



Austin's Sixth Street Entertainment District

The Pharmacotherapy Preparatory Course has three main goals:

- First, it provides a framework to help attendees prepare for the BCPS examination.
- Second, it is an excellent, up-to-date overview of disease states and therapeutics.
- Third, with a strong focus on thought process, the course offers attendees a unique learning experience that truly contributes to their ability to impact patient care.

For full course information, go to www.accp.com

Detailed Schedule

Saturday, June 5

- 1:00 p.m. Registration Open
3:00 p.m. Welcome
3:10 p.m. Biostatistics: A Refresher
Daniel M. Witt, Pharm.D., BCPS
4:20 p.m. Biostatistical Applications
Daniel M. Witt, Pharm.D., BCPS
5:30 p.m. Policy, Practice, and Regulatory Issues
Lisa Anne Boothby, Pharm.D., BCPS
6:30 p.m. Tex Mix Opening Reception—*Mingle with old compadres and new amigos! Enjoy the local cuisine and beverages.*

Sunday, June 6

- 6:30 a.m. Continental Breakfast
8:00 a.m. Announcements
8:10 a.m. Outpatient Cardiology
Anne P. Spencer, Pharm.D., BCPS
9:20 a.m. Geriatrics
Debbie Kennedy, Pharm.D., BCPS

- 10:30 a.m. Pharmacoeconomics: A Refresher
Scott A. Strassels, Pharm.D., BCPS
12:00 p.m. Industry Classrooms with lunch
2:20 p.m. General Psychiatry
William A. Kehoe, Pharm.D., FCCP, BCPS
3:30 p.m. Clinical Trial Design
Dannielle C. O'Donnell, Pharm.D., BCPS
4:40 p.m. Critical Care Cardiology
Sara D. Brouse, Pharm.D., BCPS
6:00 p.m. Armadillo Bistro—*Join the fun with amigos having similar interests at this fun mixer and bistro-style dinner.*

Monday, June 7

- 6:30 a.m. Continental Breakfast
8:00 a.m. Announcements
8:10 a.m. Pulmonary/Critical Care
Gretchen M. Brophy, Pharm.D., BCPS
9:20 a.m. Fluids, Electrolytes, and Nutrition
Mark A. Newnham, Pharm.D., BCPS, BCNSP
10:30 a.m. Endocrinology
Debra J. Barnette, Pharm.D., BCPS
12:00 p.m. Industry Classrooms with lunch
2:20 p.m. Pharmacokinetics: A Refresher
Curtis L. Smith, Pharm.D., BCPS
3:30 p.m. Nephrology
Harold J. Manley, Pharm.D., BCPS
4:40 p.m. Infectious Diseases
Curtis L. Smith, Pharm.D., BCPS
6:00 p.m. On your own for dinner

Tuesday, June 8

- 6:30 a.m. Continental Breakfast
8:00 a.m. Announcements
8:10 a.m. HIV/Infectious Diseases
Curtis L. Smith, Pharm.D., BCPS
9:20 a.m. Neurology
Melody Ryan, Pharm.D., BCPS
10:30 a.m. Oncology Supportive Care
Theresa A. Mays, Pharm.D., BCOP
12:00 p.m. Group Lunch
2:20 p.m. Pediatrics and Maternal Health
Kirsten H. Ohler, Pharm.D., BCPS
3:30 p.m. Gastroenterology
Brian Hemstreet, Pharm.D., BCPS
4:30 p.m. Adjourn

Washington Report

C. Edwin Webb, Pharm.D., MPH

Importation of Prescription Medications

For more than a decade, the increasing cost of prescription medications in the United States health care system has been a subject of major concern to health policy analysts, legislators, patients, insurers, and health



professionals. As both the number of medications and their costs have grown, attention to the “price of drugs” issue has dominated a wide range of policy debates at the national level. From the era of generic drug legislation in the 1970s through the Medicare outpatient drug benefit bill enacted by Congress in late 2003, medication costs have often been the central element in discussions regarding expansion or reduction of medication benefits within government and private health plans or programs.

The issue has taken on a more urgent, and perhaps more sinister, turn within the past year or so as a result of several interrelated issues impacting the cost of medications:

- Explosive growth in both the use and price of newer, “high-tech” medications, biotechnology products, and medication delivery systems;
- Increased reliance on prescription medications, especially in the expanding elderly population, as the primary treatment modality for most chronic diseases;
- Substantial price variations of pharmaceutical products for different purchasers and, in many cases, different nations;
- Use of the Internet for promotion, sale, and distribution (typically unregulated) of prescription medications—often, but not always, at prices substantially below those in the traditional United States health care system. Enhanced access to both product and pricing information via this mechanism has moved the debate on drug prices from the narrow realm of policy-makers, providers, and insurers into the home of the average senior citizen or patient with a chronic disease who has computer access.

As a result of these events, the public and political pressure to “do something” about the price of prescription drugs has never been greater. Among the “somethings” that have attracted the most attention recently, importation of prescription medications from Canada and other nations has been embraced by a range of individuals and groups, from patient advocacy organizations to state governors, as one method to blunt the impact of rising medication costs. Some have suggested that efforts to “legitimize” importation, such as through proposals that seek to reduce Medicaid drug costs (e.g., Illinois and Vermont) by purchasing imported pharmaceuticals, demonstrates the power of the issue with the public and its potential to significantly alter existing laws, regulations, and policy.

Recent efforts in Congress (e.g., H.R. 2427-The Pharmaceutical Market Access Act of 2003) to promote and/or legalize importation have been met to this point with resistance by the Food and Drug Administration, many health professional associations, and the pharmaceutical industry—each for their own, generally understandable, reasons. The recently passed Medicare outpatient drug benefit legislation addresses the issue ineffectively, and is unlikely to provide any substantive guidance on the issue as the drug benefit is designed and implemented over the next two years.

The ACCP Board of Regents reviewed and discussed the importation issue during its two most recent meetings and adopted the position statement accompanying this column at its January 2004 meeting. The position statement reflects the belief of ACCP’s leadership that expanded importation of prescription medications, under current systems of oversight,

Importation of Prescription Medications

Position Statement of the American College of Clinical Pharmacy

The American College of Clinical Pharmacy believes that current systems for assuring the composition, quality, purity, safety, and packaging integrity of prescription medications that are imported into the United States are insufficient to justify their routine use in patient care.

Until such time as appropriate systems are developed and broadly implemented, the existing legal prohibition against importation of prescription medications continues to serve the interests of patients’ health, safety, and welfare.

Significant and legitimate concerns exist regarding access to and cost of medications for many patients, including seniors, the uninsured, and those living on fixed or poverty-level incomes. Such concerns should be addressed through policies and practices that increase access to and affordability of the United States medication supply. They should not be addressed by promoting the importation of medications that, although perhaps less expensive to purchase, may present both substantial risks and additional costs associated with adverse effects or therapeutic failures.

Policy-makers, practitioners, the pharmaceutical industry, and other stakeholders should work collaboratively to establish reformed pricing policies that reduce the incentives, pressures, and temptations that have created the “commodity trading” atmosphere that currently exists in the pharmaceutical marketplace—and which drives much of the current interest in and support for importation.

The most expensive medication is the one that fails to achieve its intended therapeutic goal or causes significant adverse effects. Effective medication therapy management services provided by pharmacists can help ensure enhanced economy, as well as safety and effectiveness, in the use of medications by patients.

**Adopted by the ACCP Board of Regents
January 2004**

quality control, and product distribution security, presents a risk to patients (however difficult to quantify) that outweighs the economic savings that may be achieved. Furthermore, seeking to address the increasing cost of medications through importation represents essentially a symptomatic strategy that inadequately addresses the problem and runs the risk of having the “cure” only mask the “disease.” Therefore, it is vital that

the conditions and policies that contribute to the current allure of prescription drug importation be recognized and addressed by policy-makers in truly substantive ways. We welcome the opportunity to begin to work with interested parties to address these issues.

The integrity of the nation's medication supply is an essential, even foundational, element of the larger objective of rational, safe, and effective medication use for patients—an objective to which the members of ACCP commit their professional efforts each day. The value of a clinical pharmacist's judgment and skills in managing the complex drug therapy of an individual patient is negated, if not irrelevant, in a system of care in which the significant possibility exists that one or more of the medications that the patient is consuming is NOT, in fact, what she and her health care providers believe it to be, whether in content, effectiveness, or pharmaceutical quality. We must work to ensure that economic pressures and political responses do not override quality, clinical judgment, and, most important, patients' best interests.

Kent Nelson, Managed Care Clinician, Dies at 39

American College of Clinical Pharmacy Fellow and managed care clinician Kent Nelson passed away on January 25 at his home in Lakewood, Colorado, after a long illness. Nelson had spent his professional career at Kaiser Permanente of Colorado, beginning in 1993. As the Clinical Pharmacy Services Director, Nelson was involved with the development and implementation of innovative clinical pharmacy services within managed care.

A Board Certified Pharmacotherapy Specialist, Nelson led or was a member of several ACCP committees, including the Task Force on Ambulatory Practice and many Clinical Practice Affairs Committees. He participated in the Pharmacotherapy Preparatory Course as a speaker and as part of the planning committee, and spoke at other ACCP meetings. Nelson also was involved with the Pharmacotherapy Self-Assessment Program, serving as a reviewer for both the third and fourth editions. Nelson was a co-author of ACCP's position paper, *A Vision of Pharmacy's Future Roles, Responsibilities, and Manpower Needs in the United States*.

Contributing to his profession until the very end, Nelson presented *How Health Care Administrators Judge the Value of Patient Care Services When Resources are Limited* for ACCP in November 2003. Although ill at the time he was asked to participate, his response was, "This is too good to pass up." As it turns out, Nelson's presentation was too good to pass up! "As usual, he hit the nail squarely on the head. Kent was someone who always gave his best," commented Peggy Kuehl, ACCP Director of Education and Member Services.

Over his career, Nelson spoke, presented papers, and published many manuscripts relating to the development and implementation of clinical pharmacy services in the managed care environment, or to his area of therapeutic expertise,



cardiology. He received the Pinnacle Award from the American Pharmacy Association; the Best Practices Award from the American Society of Health-System Pharmacists; and several awards from Kaiser Permanente, including the Summit Excellence Award, the CARE Project of the Year, Leadership Award, Summit Award for Outstanding Salaried Employee, and the Golden Heart Award.

A memorial fund to honor Dr. Nelson has been established. Please send donations to the Kent M. Nelson Clinical Pharmacy Scholarship Fund, Kaiser Foundation Health Plan (KFHP), c/o Leslie Brown – Pharmacy Administration, 16601 E. Centretch Parkway, Aurora CO 80011.

Leadership Experience Empowers Attendees

The Leadership Experience continues to empower attendees by providing them with the knowledge of how to lead others effectively. Brad Boucher, a past president of ACCP, attended the course in September 2003 and says he is now more aware of what motivates people.



The Leadership Experience is a four-day program that focuses on individual development within group situations. The course will be held twice in 2004—March 1-4 and September 20-23—in Kansas City, Missouri. During the Leadership Experience, attendees interact with one another in a business simulation and deal with managerial and organizational issues. The content of the course is based on more than 20 years of research conducted by the staff of LeaderPoint, the company that presents the course in cooperation with ACCP.

Boucher took part in a similar leadership course through the University of Tennessee Leadership Institute. He signed up for the Leadership Experience thinking it would complement the previous course he attended, and he says it did.

"There were deficits in my understanding of individuals' behaviors," Boucher said. "Both leadership courses enlightened me and provided perspectives I did not have before. The Leadership Experience caused me to do some introspection as to how I have approached people and situations in the past. Now, I think I will be able to react more with awareness and less by instinct."

The business simulation exercise is a major component of the Leadership Experience. Boucher said working with other attendees to run a company was time well spent. "One activity throughout the experience was working with strangers to run a company. You learn to work together effectively as a business. I will definitely refer to this experience, the documents provided, and my notes."

Boucher said each participant was given a role to play during the business simulation, such as president, marketing director, and treasurer. Also, real-life events, such as business negotiations, took place. "I found the competitive environment very energizing," Boucher said.

The Leadership Experience is a blend of didactic presentations and hands-on exercises. Participants spend time discussing different types of leadership styles, employee

motivations, and the difference between organization and structure. "Organizational charts, according to the Leadership Experience, are really structural charts. Structure divides people. Organization is more about how people work together," he said.

The participants watched the movie, Twelve O'clock High and analyzed the attitudes in the film. "It was a very revealing exercise and a nice, fresh break from didactic presentations," he said.

Besides helping participants learn new ways to lead people, the course reaffirms positive strategies that attendees already use. "My attitude was reinforced with regard to delegation," Boucher said. "I have always been a firm believer in the importance of delegation. This is true for my work with ACCP and for people under my guidance in my work environment."

According to Boucher, the course teaches that it is important that supervisors let their employees take the lead on projects, so the leaders can focus on the bigger picture. The knowledge people gain from the course can help them outside of the workplace as well. Participants spend time discussing personality issues and how to resolve conflict. Boucher said that realizing why individuals react the way they do can help you become a more well-rounded person, whether you are at work or at home.

Furthermore, Boucher believes most everyone would benefit from the Leadership Experience. He points out that at some time everyone is a leader and a team player. "We are all in both roles," he said.. "We all have people we influence. But, even if you lead a group of 500, you still have a boss above you. The Leadership Experience is most suited for people in leadership roles, but there are a lot of different people who could benefit from this course."

Boucher said the Leadership Experience can help even those who believe they will never be effective leaders. "Some people instinctively understand the dynamics of leadership. But someone who thinks he or she can never be a good leader can be nurtured."

Besides gaining knowledge from the course, attendees are given books on leadership to take home with them. Overall, Boucher believes the course was well worth his time. "It was a very valuable experience," he said.

The special ACCP fee for taking this course is \$2300, a large reduction from the usual course fee. Participants in the Leadership Experience may receive up to 30 contact hours of continuing pharmacy education credit.

Complete information about the course is available online at www.leaderpoint.biz/accp.htm. For other questions, contact Peggy Kuehl, ACCP Director of Education and Member Services, at (816) 531-2177, pkuehl@accp.com, or Michael Laddin at LeaderPoint, (913) 384-3212, mladdin@leaderpoint.biz.

Save these Dates: Oncology Pharmacy Prep Course Set for May 21-23

Plan now to attend the 2004 Oncology Pharmacy Preparatory Review Course, co-sponsored by ACCP and the American Society of Health-System Pharmacists (ASHP). The course will be held at the Tampa Westshore Marriott, Tampa, Florida. Registration information and full details about the course will be available on the ACCP Web site in late February 2004. Members of ACCP and ASHP will be eligible to register for the course at a discounted member rate.

The course is designed to help pharmacists prepare for the Board of Pharmaceutical Specialties (BPS) Oncology Pharmacy Specialty Certification Examination. The program also is designed to increase the knowledge and skills of pharmacists interested in oncology. Course content is based on the BPS domains and knowledge areas tested on the examination. The program is supported in part by an educational grant from Amgen, Inc.

Watch the ACCP Web site, www.accp.com, for more information on the Oncology Pharmacy Preparatory Review Course, or call ACCP at (816) 531-2177 to receive a conference brochure by mail when it becomes available in late February.

Pharmacotherapy Pearls

Annual Acknowledgment of Academic Reviewers

Wendy R. Cramer, B.S., FASCP

Richard T. Scheife, Pharm.D., FCCP

The peer-review process is, indeed, the cornerstone of all quality scientific literature. We deeply respect and appreciate the amount of time and expertise that is required to perform a high-quality review. Each year in the December issue of *Pharmacotherapy*, it is our sincere pleasure to acknowledge the significant contribution of time and expertise of our academic reviewers. This listing represents those reviewers who have reviewed articles that were *published or rejected during the current year*. That is, it is not a listing of all reviewers who reviewed for *Pharmacotherapy* during the current year. It is important to us that our reviewers understand this distinction, as we would never want a reviewer to feel that their efforts were overlooked.

The editors and editorial board of *Pharmacotherapy* wish to extend their sincere thanks to the following professionals who have served in the invaluable capacity as academic reviewers of manuscripts that were published or rejected in 2003:

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Leading Edge Therapeutic Content Available When and How You Need It

Do you ever wish you could extract specific therapeutic content from ACCP's educational programs for student and resident education or as a professional development resource for staff pharmacists? PharmAssist on Demand is designed to do just that: offer supplemental content in nearly all areas of therapeutics for pharmacy education programs or professional development materials for practicing pharmacists.

Ready Access to a Comprehensive Catalog

PharmAssist on Demand is a product that provides licensed access to lectures and book chapters from ACCP's best-selling educational programs, made available to you in electronic format. PharmAssist on Demand includes the lectures from the Updates in Therapeutics series, an in-depth review of pharmacotherapy, nutrition support, oncology, and psychiatric pharmacy, with an emphasis on thought processes used to solve patient care problems. In addition, PharmAssist on Demand provides reprints of individual chapters in the Pharmacotherapy Self-Assessment Program (PSAP), a series of books that include review-style articles that focus on new advances in pharmacotherapy. With annotated bibliographies, case-based self-assessment questions, and explained answers, PSAP builds therapeutic knowledge and problem-solving skills.

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Research Institute Offers Expanded Grant Opportunities

The ACCP Research Institute will provide more than \$425,000 in support of clinical pharmacy research and research training during 2004 through its various Research Awards and Fellowships. This includes the College's new Frontiers Research Awards, Career Development Research Award, Investigator Development Research Awards, and Fellowship support.

New in 2004, the Frontiers Research Awards are made available through the generous contributions of ACCP members and others to the ACCP Frontiers Fund. The Frontiers Research Awards will support previously unmet or underserved areas of pharmacy-based health services research or clinical research. In addition to clinical research proposals, the Research Institute is especially interested in supporting rigorously designed health services research that examines the use, costs, quality, accessibility, delivery, organization, financing, or outcomes of clinical pharmacy services. More information about the Frontiers Fund Campaign itself, including how individual ACCP members can support the Campaign, can be found at <http://www.accp.com/frontiers/>.

Investigator Development Research Awards support the research efforts of ACCP members who qualify as new investigators (i.e., five or fewer years since completion of their formal training or first academic appointment). In addition to supporting a specific research project, a major purpose of these awards is to provide research support that will contribute to the development of the principal investigator's research career related to experimental therapeutics, pharmacoeconomics and outcomes, or pharmacy-related health services research. As noted from the following list of Investigator Development Research Awards available in 2004, funding is provided for a wide variety of therapeutic or practice areas:

- ACCP Pharmacotherapy Research Award
- Amgen Hematology/Oncology Research Award
- Amgen Nephrology Research Award
- AstraZeneca Cardiovascular Research Award
- AstraZeneca Health Outcomes Research Award
- Aventis Infectious Diseases Research Award
- Bayer Pharmaceuticals Infectious Diseases Research Award
- Kos Dyslipidemia Research Award
- Roche Laboratories Transplantation Research Award
- Sanofi-Synthelabo Central Nervous System Research Award
- Sanofi-Synthelabo Thrombosis Research Award
- TAP Pharmaceutical Products GI Research Award
- Watson Laboratories Anemia Research Award

The ACCP Career Development Research Award supports the research efforts of a midcareer scientist (i.e., more than five years since completion of formal training or first academic appointment). The area of research focus again can include experimental therapeutics, pharmacoeconomics and outcomes, or pharmacy-related health services research. The Career Development Research Award seeks to fund the research efforts of a mid-career scientist who demonstrates that this award will significantly facilitate development of an overall

research plan, and facilitate his/her obtaining additional extramural funding.

The ACCP Research Institute's 2004 Call for Proposals and more information about the above programs can be found at <http://www.accp.com/ClinNet/ricall.php>.

Congratulations: Additional ACCP Members Achieve Board Certification

Congratulations to the following individuals who were omitted from our January ACCP Report list of members who passed the Pharmacotherapy specialty certification examination offered by the Board of Pharmaceutical Specialties (BPS) in October 2003:

Tamara Adams
Allison Lindberg

New Members

Nnena C. Agwu
Hina Ahmed
Banke O. Akinjaiyeju
Ola Al-Omran
Geanina Alecsa
Tamra M. Arnold
Lynnette Audickas
Roger P. Austin
Abby L. Aversing
In Sook Bae
Sefan S. Bediakoh
Besty Bierman
Jessica R. Bonifas
Amy L. Brown
Sherrill Brown
Rodrigo Burgos
Karen Cao
Norman Cheung
Isabel Chong
Ya Huei Chu
Sherry Clayton
Charles E. Daniels
Sara Dugan
Martha C. Durham
Brooke M. Eisenhower
Molly H. El Gohary
Kristina Estes
Gary B. Fisher
Julie A. Flynn
Patrick J. Foley
Keith Forster
Justin M. Frazer
Normand P. Gaudreau
Deanna M. Gengler
Amy Giovino
June A. Griffith
John Gunn
Linda H. Hampton
Matthew Harris
Charles Hartis
Pam Heaton

James J. Hilao
James M. Hollands
Tibb M. Jacobs
Jennifer L. Johnson
Chad W. Jordan
Sarah Karish
Paul J. Kassebaum
Jennifer Katke
Kerry Kawato
Jamie R. Kayler
Julia A. Kelleher
Tabetha S. Kenefick
Melissa A. Kennedy
Jessica Kerr
Irene N. Kim
Sarah P. Larkin
Robert V. Laux
Michelle K. Lawrence
H. Ann Lee
Katherine E. Lee
Mikyung L. Lee
Sharon Leigh
Josephine Lienert
Lie-Huey Lin
Jancie L. Lindsey
Gary Loeber
Marya B. Margolis
Barbara J. Mason
Joshua McClure
Andrew Meadows
Sara Milhans
Ronald Moskal
Robert J. Moss
Andrea Murphy
Erin Y. N. Narus
Ronald D. Nelson
Ron Neyens
Margaret D. Nguyen
Daryn K. Norwood
Mark W. Obenauer
Marco Onoroto

Jan L. Opperman-James
Larry R. Palmisano
Andrea Phillips
Brenda A. Pierce
Kevin J. Powers
Asha Prasad
Kevin Pruitt
Elizabeth A. Puentes
Hwan-Seon Ryu
Kristin Santa
Brandee Schram
Mary Seddon
Hanady Sharabash
Amy Jo Slater
Michele Spence
David W. Stewart
Heather Sun
Cassandra Superak
Ami Teague Deaton
Dennis Teng
Nick Tessier
Thy Minh Truong
Stacy A. Vails
Edward G. Vonberg
Virginia Walker
Jessica Welker
Autumn S. Wells
Deidre Westbrook
Vicki S. Williams
Marva Williams-Lowe
John C. Williamson
Joanne C. Witsil
Julie Won
Edward N. Yale
Hongxia Zheng

The following individuals recently advanced from Associate to Full Member:

Tamara Adams
Eric W. Alexander
Najwa Abdulkareem
Al-Ghamdi
Teresa Allison
Celene M. Amabile
Jan Anderson
Linda M. Arts
Scott E. Ayres
Omar Badawi
Stacey Elizabeth Baker
Jeremy P. Baran
Kate E. Barbato
Cynthia E. Barlow
M. Craig Barrett
Amy J. Becker
Robyn H. Bilmes
Christopher M. Bland
Kathleen A. Blanton
Jason Blauwet
Yelena Bogus
Carla Bouwmeester
Kristen Bova Campbell
Donald Branam
David L. Burch
Stephanie Burch
Brian Burleson
Julianna A. Burzynski
Melissa Butler
Katie Carls
Hollie M. Carver
Emily E. Castelli
Larissa Chagan
Ursula Changela
Judy T. Chen
Elaine Chong
Sheryl Chow

David S. Chun
Daisy Chung
Owen Clark
Ronald D. Cloud
Catherine Cone
Brad L. Cook
Julie Cooper
Rebecca Corey
Kimberly Corpus
Craig Cox
Michael C. Cox
Wendy C. Cox
Katherine Cunningham
Denise Daly
Adam Decatur
Mark Decerbo
Deborah DeEugenio
Joshua Devine
Tracy A. DeWald
Amy R. Donaldson
Amy W. Dooley
John M. Dopp
Catherine G. Dormarunno
William B. Dreitlein
Teresa A. Duhancik
Monica A. Dunnam
Krystal L. Edwards
Edward H. Eiland
Shareen El-Ibiary
Shelly J. Enders
Jingyang Fan
Christie Fergus
Dielle Fernandes
Katherine M. Field
Lynn Flach
Amy S. Flusche
Alicia Forinash
Bradi L. Frei
Christopher Frei
Steven Gabardi
Douglas Geer
Amy Giovino
Marlea Givens
Donna Givone
Justine S. Gortney
Sarah E. Grady
Kelly A. Green Boesen
Shane Greene
Carla Gren
Gregory S. Guillory
Maureen Haas
Giselle Haettig
Elizabeth V. Hall
Ronald Hall
Darlene L. Hanif
Laura J. Hanson
Amy J. Hatfield
Rozelle R. Hegeman-Dingle
Jill Herendeen

Tamara L. Herring
Elora Hilmas
Traci Hindman
Gail S. Hirokane
Tricia Hodgman
Todd R. Holt
Stacey S. Hong
Charlene A. Hope
Helen S. Horng
Douglas Humphrey
Rebecca A. Hutton
Lindsay M. Huxtable
Rupali Jain
Karen M. Jensen
Misty Jensen
Jennifer R. Jones
Jennifer Kasiar
Sheila Lynn Kasten
Esther S. Kim
Shilpa Kinikar
Ty H. Kiser
Wendy Klein-Schwartz
Erika Kleppinger
Jennie Kleyman
Olga Klibanov
Kristy M. Klinger
Rick Knudson
Ada Z. Koch
Cedar Koetting
Brian Kopp
Lee A. Kral
Joan S. Kramer
Eric Kutscher
Christopher C. Lamer
Ginger Langley
Janet H. Laquet
Cheryl B. Lathum
Alyssa Le
Alice Lee
Jean E. Lee
Michael P. Lee
Julie M. Lehn
Jill K. Leslie
Jennica A. Lewis
Allison Lindberg
Brent J. Lindley
Dionne Marie Lowder
Conan MacDougall
Teresa M. Maddalone
Shane Madsen
Gregory E. Malat
Jodi L. Mann
Sirada Maphanta
Todd R. Marcy
Julie K. Martin
Cindy A. Mascarenas
Craig A. McCammon
Christopher M. McCoy
Helen McFarland

Matthew McNeill
Kathleen M. Melsha
Lisa M. Mican
Sarah C. Middleton
Heather Miller
Rickey C. Miller
Mark D. Mills
Karen Moeller
Laura A. Morgan
Spencer A. Morris
Kari Mount
Tracie Mulhern
Lisa M. Murphey
Timothy Murray
James D. Nash
Cynthia Naughton
Julie K. Offutt
Carmen S. Oitker
Carrie S. Oliphant
Amy B. Pai
Manjunath P. Pai
Allana Panzarella
Vivian Park
Nima M. Patel
Stephanie L. Paynter
Helen Fang Peng
Anthony Pepe
Cindy Perfect
Laura L. Pincock
Melanie W. Pound
Atsuko Powers
Frank Pucino
Mary Pung
Leigh Ann Reed
Summer S. Regel
Daniel Rehrauer
Britt A. Ritter
Gloria S. Rizkallah
Ann E. Roach
Alice H. Robbins
Charmaine D. Rochester
Holly E. Rogers
Sona Sahni
Dina Salman
Tracie J. Sannicandro
Beth A. Segars
Cindy K. Selzer
Randall B. Shafer
Rina Shah
Sachin Shah
Roberta L. Shanahan
Mary Beth Shirk
Judianne C. Slish
Norm Smith
Virginia Foley Smith
Laura Carter Smoot
Kelly Sprandel
Lesia Stebelsky
Sara Stichert

Ryan Stolcpart
Scott Sutton
Victoria Tamis
Christopher Thomas
Colby A. Thomas
Melinda J. Throm
Erin M. Timpe
Sheri M. Tokumaru
Erin R. Totleben
Cam Trinh
Kara Uram
Stephanie Uses
Shital Vaghani
Aungkana Vichiendilokkul
Edward G. Vonberg
Lan Vu
Allison Wallace
Stephanie Wan
Deborah A. Ward
Eric Warren
Macary Barba Weck
Heide J. Wehring
Casey White
Casey Williams
Monica I. Wilson
Shirley W. Wong
Thomas J. Worrall

New Member Recruiters

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

George Dydek
Brad Fujisaki
Alan Goldberg
Stephen F. Hamilton
Christina Israel
Kelly V. Johnson
David W. Jungst
Cynthia K. Kirkwood
Joseph L. Kuti
Scott R. McKibbin
S. Dee Melnyk

**Director of Clinical Pharmacy
University of Arkansas for Medical Sciences**

The University of Arkansas for Medical Sciences, Area Health Education Center of Fort Smith, Arkansas, has an opening for Director of Clinical Pharmacy. The ideal pharmacist will have expertise in drug therapy of conditions commonly encountered in family and internal medicine. Responsibilities include teaching of medical residents and medical students, direct involvement in Phase III-IV studies, providing direct patient care as part of an office-based interdisciplinary team, and rounding with the medical team.

The clinical pharmacist will be appointed to the College of Pharmacy faculty and participate in experiential teaching of Pharm.D. students. Pharm.D. with residency preferred.

UAMS/AHEC offers a competitive salary and benefits package.

Interested individuals send CV to:

**L.C. Price, M.D.
AHEC Director
612 South 12th Street
Fort Smith, AR 72901**

**Assistant/Associate/Full Professor
Department of Pharmacy Practice
College of Pharmacy
University of Nebraska Medical Center**

The Department of Pharmacy Practice at the University of Nebraska Medical Center (UNMC) currently is recruiting for one 12-month, tenure-leading faculty position. Rank is open; individuals with prior academic experience are particularly encouraged to apply.

Candidates for this position must possess a Pharm.D. degree, fellowship training or equivalent experience, and be eligible for pharmacy licensure in Nebraska. Although candidates with expertise in any specialty area will be considered, preference will be given to those with expertise in cardiology.

The responsibilities for this position include teaching professional Pharm.D. students in both didactic and clerkship courses, and providing clinical pharmacy services at the University Hospital and Clinic. The successful candidate will be expected to participate in scholarly activities that result in publications and extramural research funding. Numerous interdisciplinary collaborative research opportunities exist with investigators throughout UNMC and its affiliated institutions. Laboratory space and start-up funds also will be available.

Salary and rank will be commensurate with qualifications and experience. Applications will be accepted until the position is filled. Minorities and women are encouraged to apply. A letter of application, curriculum vitae, and names and addresses of three references should be submitted to:

**Timothy R. McGuire, Pharm.D., FCCP
Chairman, Search Committee
University of Nebraska Medical Center
986045 Nebraska Medical Center
Omaha NE 68198-6045
(402) 559-8224
E-mail: trmcguir@unmc.edu**

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WAYNE STATE
UNIVERSITY
EUGENE APPLEBAUM
COLLEGE OF PHARMACY
AND HEALTH SCIENCES

Assistant/Associate Professor (Clinical)

Wayne State University announces the availability of five nontenure-track positions within the Department of Pharmacy Practice. The department has 21 full-time faculty and in conjunction with the Department of Pharmaceutical Sciences is responsible for the education and training of 70 Doctor of Pharmacy students with plans to increase to 100 graduates annually. The pharmacy program is based in the Eugene Applebaum College of Pharmacy and Health Sciences, a 270,000 square foot, state-of-the-art education and research facility that opened in 2002. The university maintains affiliations with many health care systems in the metropolitan area, including Detroit Receiving Hospital, Harper University Hospital, Children's Hospital of Michigan, Henry Ford Health System, St. Johns Health System, Oakwood Health System, and William Beaumont Hospital.

All of the available positions are based at and partially funded by one of our affiliated health care institutions. The successful candidate will be responsible for the development of a clinical practice that supports patient care, clinical education of Pharm.D. students and residents, and a program of practice-based scholarship. Openings are available for individuals with specialty training in areas such as ambulatory care, nephrology, internal medicine, hematology/oncology, surgical critical care, or infectious disease. It is expected that the individuals filling these positions also will provide support in their area of expertise to the didactic portion of the Doctor of Pharmacy curriculum. Service to the university, the health care institution, and the profession is expected.

Applicants must have an earned doctorate (Pharm.D. or equivalent) with specialty residency training. Completion of a fellowship or equivalent experience in research, practice and teaching is highly desirable. Interested candidates should forward a letter of intent and a curriculum vitae to:

David J. Edwards, Pharm.D.
Chair, Department of Pharmacy Practice
Eugene Applebaum College of Pharmacy and Health Sciences
Wayne State University
259 Mack Ave., Detroit MI 48201
E-mail: dje@wayne.edu Telephone: (313) 577-0824

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