

# ACCP Report

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## April in Paris? It's Not Too Late!

There's still time to register for the 2<sup>nd</sup> ACCP-ESCP International Congress on Clinical Pharmacy, to be held in Paris April 28-30, 2004. The theme of the Congress, "Optimizing Outcomes in Pharmacotherapy," provides attendees with opportunities to attend sessions on patient safety, optimal use of clinical guidelines in a variety of practice and specialty settings, and development of a clinical pharmacy workforce to meet future pharmacotherapy demands.



Programming will focus on a variety of topics of interest to both specialists and generalists, including ambulatory care practice, antimicrobial therapy, pediatric pharmacotherapy, critical care guidelines, oncology practice guidelines, economic and humanistic outcomes, women's health issues, geriatric pharmacotherapy, and specific treatment approaches to problems such as thromboembolism and sepsis. Roundtable discussions, workshops, mini-symposia, and forums for ACCP PRN and ESCP SIG groups will maximize participants' learning and networking opportunities.

The Congress will be held in the "Palais des Congrès", located in the west side of Paris, near the "Place de l'Etoile" and the "Champs Elysées". Attendees will thoroughly enjoy this fascinating city, known for its many romantic, cultural, artistic, and dining attractions. To view the entire program in detail and to register on-line, click on the Congress link from the ACCP home page or visit <http://www.escpweb.org>.

## Institute Helps Advance ACCP's Research Mission

Key to the concept of clinical pharmacy as an evidence-based practice is that research conducted by pharmacists, other health professionals, and other scientists produces the "evidence" on which that practice is based. ACCP has long-

valued its commitment to extending the frontiers of *both* clinical pharmacy practice *and* research.

Professions exist to serve society. Included within pharmacy's societal purpose is a responsibility to create and disseminate knowledge related to drug entities, products, therapy, and use—that is, a research mission. As reported in the July 2003 issue of the ACCP Report (<http://www.accp.com/report/rpt0703/>), the stated research mission of ACCP is to advance human health and quality of life by facilitating the generation, dissemination, and application of new knowledge that promotes the safe, effective, and cost-effective use of medications. The College accomplishes its research mission by:

- supporting the training and development of clinical scientists;
- funding translational, clinical, and health services research;
- communicating research results to the health professions, policy-makers, and consumers;
- providing educational programs and publications that help health care practitioners translate research results into enhanced patient care; and
- advocating policies that support translational, clinical, and health services research.

The activities of and programs supported by the ACCP Research Institute are one way that the College works to advance its overall research mission. For example, in 2004 the Research Institute will provide more than \$425,000 in support of health services, clinical, and translational research, and research training. This includes the College's new Frontiers Research Awards, Career Development Research Award, Investigator Development Research Awards, and Fellowship support.

Almost all of the College's Fellowships and Investigator Development Research Awards—which support the research efforts of new investigators—are enabled by the Research Institute's corporate sponsors, and include the:

- 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  
 Ortho-McNeil Infectious Diseases Fellowship  
 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 mid-career scientist in experimental therapeutics, pharmacoeconomics and outcomes, or pharmacy-related health services research. New in 2004, the Frontiers Research Awards are made available through the generous contributions of individual College members and others to the ACCP Frontiers Fund. The Frontiers Research Awards expand the Research Institute's support of pharmacy-based health services or clinical research into areas of need that are not supported adequately by its other programs.

In addition to clinical research proposals, the Research Institute is interested in supporting through all of its programs rigorously designed health services research that examines the use, costs, quality, accessibility, delivery, organization, financing, or outcomes of clinical pharmacy services. For information on the ACCP Research Institute's 2004 Call for Proposals, visit <http://www.accp.com/ClinNet/ricall.php>. More information about the Frontiers Fund Campaign, including how individual ACCP members can provide their important support, may be found at <http://www.accp.com/frontiers/>.

### Definitions

**Basic Research:** advances fundamental scientific knowledge. Although basic research may be in fields with current or future commercial interest, it does not have specific immediate applications toward processes or products in mind.

**Clinical Research:** research conducted in humans (or with human tissues) to study the mechanisms, epidemiology, or prevention of disease; test therapeutic interventions; or develop new technologies.

**Educational Research:** assesses the role of content, delivery methods, evaluation techniques, and management on the outcomes of teaching and learning.

**Health-Services Research:** examines the use, costs, quality, accessibility, delivery, organization, financing, and outcomes of health care services (including pharmacy services).

**Translational Research:** transfer of knowledge gained from basic research to new and improved methods of preventing, diagnosing, and treating disease, as well as the transfer of clinical insights into hypotheses that can be tested and validated in the basic research laboratory.

## ACCP Partners with FDA to Notify Practitioners of Counterfeit Products

ACCP will partner with the Food and Drug Administration (FDA) in a new program that will inform pharmacists and other health professionals about the entrance of counterfeit medications into the nation's drug supply. As a member of the FDA's newly -formed Counterfeit Alert Network, ACCP will inform members and other health professionals regarding counterfeiting episodes and FDA-initiated preventive measures.

The Counterfeit Alert Network is composed of health professional organizations, industry trade organizations, and consumer representatives. Each partnering group will distribute urgent messages to its members, notifying them of occurrences of documented counterfeiting and strategies for identifying and reporting counterfeit products. Look for future ACCP communications designed to alert you about information that could be essential to protecting your patients from the dangers of counterfeit drugs.

### President's Column

John A. Bosso, Pharm.D., FCCP, BCPS

#### The Importance of Words

As I contemplate the state of our profession in general, and clinical pharmacy in particular, I realize the importance of words. That is, one's choice of the words used in everyday conversation can have profound influence on perceptions of the profession by ourselves, other pharmacists, fellow health care providers, and the general public. These words reveal not only what we think about ourselves but also influence how others think about us. As clinical pharmacists, I believe it's important that we use the right words to positively affect both our self-identities and our public image.



**Who are we?** Let's think about the use of the word "doctor." When the average American talks about her *doctor*, she means her physician. Similarly, when most health professionals (including pharmacists) use the word *doctor*, they're referring to physicians. When physicians talk about themselves, they use the word *doctor*. When the news media uses the word *doctor*... Well, you get the idea. Of course, *doctor* is a positive and flattering word that is usually associated with caring, integrity, and social status, among other things. Naturally, physicians like the label. Why are they the only people with doctoral degrees (the correct definition of *doctor*) who are routinely labeled as such in everyday conversation? Do you Pharm.D.s out there consider yourselves doctors? I do. I totally reject the notion that only physicians merit that title. When someone asks me if I'm a doctor, my answer is invariably and without hesitation, "yes." (To avoid confusion, I do clarify that I'm not a physician.) I further believe that when

pharmacists and pharmacy students refer to physicians as *doctors*, they are aggrandizing the medical profession and denigrating their own (not to mention their academic degrees). What do I do about it? I always refer to medical doctors as physicians; to me (and anyone who'll listen to me), *doctors* are people with doctorate degrees. Newsflash: the "D" in Pharm.D. stands for *doctor*.

A second terminology issue defining who we are involves the terms *clinical pharmacy* and *pharmaceutical care*. You may or may not be aware that the College is currently re-examining our definition of clinical pharmacy, not in an effort to change the core definition but perhaps to reframe it in the context of today's pharmacy and health care worlds. One of the reasons this exercise is necessary is that some have tried to redefine clinical pharmacy in a way that grossly short-changes the original spirit of the discipline. Some would have us believe that clinical pharmacy is a passive or reactionary practice in which pharmacists sit around waiting for some physician to ask a question, which they then answer. This activity may reflect one small aspect of the practice of clinical pharmacy, but the clinical pharmacy I was taught years ago used employed proactive behaviors in which pharmacists (often in conjunction with other health care providers) purposefully influenced or directly managed drug therapy in patients in an accountable manner. I suppose those who coined the term *pharmaceutical care* needed to recast clinical pharmacy in a limited (and somewhat pejorative) light in order to make pharmaceutical care sound like something new. It's not. To complicate matters, the term *pharmaceutical care* has quickly (and ironically) devolved into a non-specific, nonsense term, meaning "what I was already doing." Thus, we return to clinical pharmacy and the pressing necessity to clearly articulate what it is and how it fits within the general practice of pharmacy.

### Other important word choices

Ever think about the possible impact of other terms we use to describe ourselves, what we do, or where we practice? After six years of college, including four years of a professional curriculum, being told umpteen times that we're regarded as a respected health care profession, and having taken the pharmacist's oath, how can anyone ever conceive of the idea of referring to a *patient* as a *customer* or *client*? Why would the public consider pharmacy to be a true health care profession if we think of our patients as nothing more than customers? Are we truly committed to maintaining or improving our patients' health or do we exist only to sell prescriptions to customers? Do you work in a *pharmacy* or in a *drug store*? Of course, it's true that many community pharmacy settings are little more than latter day five- and ten-cent stores or large department/grocery stores that happen to have a pharmacy tucked away in the corner. We (pharmacists) can't do much about that, but it's not necessarily bad. Pharmacies in such locations are very convenient for patients and they allow pharmacy services to be maximally accessible. Also, we find more and more examples of community-based pharmacists who perform services far beyond simply processing prescriptions and completing insurance forms (neither of these activities would be termed *pharmaceutical care*, by the way). But for

heaven's sake, we work in *pharmacies* not *drug stores*. We're *pharmacists* (or perhaps *clinical pharmacists*), not *druggists*. We manage *patients'* health with *medicines*, not *drugs*, and we're *doctors*, not *Pharm.D.s*. (Besides, how many of you have actually succeeded in explaining to your families what a Pharm.D. is?)

So, honor this profession through the words you use to describe it—others will follow your lead, promoting enhanced respect for pharmacists and their many contributions to health care. Just one caveat: be certain that your professional behavior lives up to your words!

## Preparing for Specialty Board Certification

As part of ACCP's mission to advance human health and quality of life by helping pharmacists expand the frontiers of their practice and research, ACCP assists pharmacists in successfully sitting for specialty certification examinations through preparatory courses and other study aids. Visit ACCP's Web site on preparing for specialty board examination at [www.accp.com/board.php](http://www.accp.com/board.php). This site offers several resources, including:

- a helpful FAQ section
- online study groups for specialty certification
- a listing and comparison of common preparation methods
- online audio/slide presentation regarding the Board of Pharmaceutical Specialties (BPS) process and how to prepare for a specialty examination

ACCP offers courses in different formats to help you prepare for BPS specialty board examinations.

### Live Presentations

- [Oncology Pharmacy Preparatory Review Course](#). Cosponsored with American Society of Health-System Pharmacists, this course will be presented at the Tampa Marriott Westshore in Tampa, Florida, May 21-23, 2004. Take advantage of reduced registration fees by registering before April 9, 2004. This course is supported in part by an educational grant from Amgen.



- [Updates in Therapeutics: The Pharmacotherapy Preparatory Course](#) will be presented at the Hilton Austin in Austin, Texas, June 5-8, 2004. Take advantage of reduced registration fees by registering before April 30, 2004.

## Online Courses

- [Nutrition Support Preparatory Course, 2003 Edition](#)
- [Oncology Pharmacy Specialty Certification Examination Review Course, 2003 Edition](#). Registration for the 2003 Edition closes April 30, 2004. The 2004 Edition of this course will be available online July 1, 2004.
- [Pharmacotherapy Preparatory Course, 2003 Edition](#). Registration for the 2003 Edition closes May 31, 2004. The 2004 Edition of this course will be available online July 15, 2004.
- [Psychiatric Pharmacy Preparatory Course, 2003 Edition](#)

## Other Available Formats

Check the [ACCP online bookstore](#) to find out about other formats which may include:

- Print book
- Online book
- Audio tapes
- CD-ROM

## Council on Credentialing in Pharmacy Responds to Profession's Input on Pharmacy Technician Education and Training Standards

The Council on Credentialing in Pharmacy (CCP) has recommended that the pharmacy profession as a whole continue to engage in dialogue about the roles and qualifications of technicians and other supportive personnel. Toward this end, CCP has requested that the Joint Commission of Pharmacy Practitioners emphasize this issue in its current strategic planning process and conduct or commission further exploration and action on the topic. The CCP was established in 1997 to provide leadership, standards, public information, and coordination for the profession's voluntary credentialing programs. In addition to ACCP, current member organizations include the Academy of Managed Care Pharmacy, the Accreditation Council for Pharmacy Education, the American Association of Colleges of Pharmacy, the American College of Apothecaries, the American Pharmacists Association, the American Society of Consultant Pharmacists, the American Society of Health-System Pharmacists, the Board of Pharmaceutical Specialties, the Commission for Certification in Geriatric Pharmacy, the National Association of Boards of Pharmacy, the Pharmacy Technician Certification Board, and the Pharmacy Technician Educators Council.

The CCP's current recommendation on pharmacy technician issues is the result of an information-gathering process initiated more than over a year ago. In November 2002, CCP requested that the Accreditation Council for Pharmacy Education (ACPE, formerly the American Council on Pharmaceutical Education) initiate a profession-wide dialog concerning the possible development of national standards and an accreditation process for pharmacy technician education and training. This followed discussions on this issue at the 2002 national "Stepping Stone Summit Two: Pharmacy Technicians", at earlier CCP meetings, and at other professional meetings.

In February 2003, ACPE widely distributed an invitation to comment, and more than over 100 comments were received. The ACPE delivered a compilation of the submissions and a summary of the 10ten open hearings, held at national pharmacy meetings during 2003, to CCP at CCP's regular quarterly meeting on February 24, 2004. Members of CCP members and invited representatives from non-member groups, including the National Association of Chain Drug Stores, the National Community Pharmacists Association, and the Institute for the Advancement of Community Pharmacy, reviewed and discussed the submitted comments at length.

The CCP concluded that there is a need for better understanding and consensus on what this type of pharmacy employee is expected to know and to do in a variety of settings. It was noted that the Pharmacy Technician Certification Board is about to embark on an update of the practice analysis for Certified Pharmacy Technicians (CPhT). That process is designed to validate a comprehensive description of the work of CPhTs, including the functional areas and responsibilities in which they engage, and the knowledge required.

Members of CCP will remain available to assist in the credentialing-related aspects of this process, including development of definitions. In order to make the valuable information obtained through this exercise available to those interested in this topic, CCP will post background information, including the call for comments, and the full compilation of comments submitted in PDF format on its web Web site. This information may be accessed by selecting "Pharmacy Technician Education Discussion Materials" on the CCP home page: <http://www.pharmacycredentialing.org>.

## Highly Anticipated *Pharmacoeconomics and Outcomes: Applications for Patient Care*, Second Edition Now Available

Fully updated and substantially expanded, this second edition of the well-known ACCP publication, *Pharmacoeconomics and Outcomes: Applications for Patient Care*, will enable practicing pharmacists and pharmacy students to develop knowledge and skill to measure and evaluate economic and patient-based outcomes.

*Pharmacoeconomics and Outcomes: Applications for Patient Care* introduces the reader to the terminology and basic components of health economics, outcomes research, and pharmacoeconomics. The text identifies a strategy for designing a research question, a process for conducting a pharmacoeconomic evaluation, and sources of data for economic outcomes analysis.

The text includes an extensive series of economic and humanistic assessments, their purpose and application. Economic outcomes measures include cost-of-illness analysis, cost-minimization analysis, cost-benefit analysis, cost-effectiveness analysis, cost-utility analysis, decision analysis, Markov modeling, and sensitivity analysis. Humanistic outcomes measures include health status, patient satisfaction, work outcomes, and patient-based assessments.

## Expanded content and new features

The second edition has been completely updated and substantially expanded. New and updated chapters include:

- Evaluating and Justifying Clinical Services by Glen T. Schumock, Pharm.D., M.B.A., BCPS; and Melissa Butler, Pharm.D.
- Using Pharmacoeconomic Methodologies to Develop Health Policy by Judith L. Glennie, Pharm.D., M.Sc., FCSHP; and Neil MacKinnon, Ph.D.
- Markov Modeling by Dan Touchette, Pharm.D., M.A., ; and Daniel Hartung, Pharm.D.
- Types of Economic and Humanistic Outcomes Research Questions by Lisa Sanchez, Pharm.D., ; and Kathy Bungay, Pharm.D., FCCP
- Investigating the Outcomes Research Question by Jane Osterhaus, M.S., Ph.D., FCCP; and Gregory Boyer, Ph.D.
- The Structure of U.S. Health Care Delivery System by Jack E. Fincham, Ph.D.
- Measuring Work Outcomes by Debra Lerner, Ph.D., M.S., ; and Kathy Bungay, Pharm.D., FCCP
- Data Sources and Tools for Measuring Humanistic Outcomes by Michelle M. Chapman, Pharm.D., BCPS
- Cost-Minimization Analysis by Emily Cox, Ph.D.

An important new feature of the second edition is access to TreeAge Pro decision-analysis software, allowing the user to analyze decision models presented in the publication. TreeAge Pro has been designed to implement the techniques of decision analysis in an intuitive and easy-to-use manner.

## Pharmacoeconomics and Outcomes: Applications for Patient Care, Case Studies

New with the second edition is a companion book of case studies to reinforce learning. The case studies present real-world scenarios that enable users to apply concepts presented in the main text. Each case study contains answers and rationale to questions posed. Cases include:

- Cost-of-Illness Analysis, Calculation of the cost of migraine within a managed care organization by Emily Cox, Ph.D. Readers are given a scenario and guided through a six- step process to estimate the cost of treating patients with migraines within a managed care organization. On completion of this case study, readers will understand the advantages and limitations of collecting data retrospectively versus prospectively to estimate the cost of illness. Readers also will learn to discuss the various ways costs can be presented.
- Cost-Benefit Analysis by Jamie Barner, Ph.D. This 12- step case study guides the reader through a scenario based on a diabetes disease state management clinic in an ambulatory care setting, from defining the problem and identifying resource needs to implementing a program and monitoring its progress for documentation.
- Decision Analysis by Jeffrey J. Ellis, Pharm.D.; and James G. Stevenson, Pharm.D. This case study presents a scenario which is best addressed by decision analysis. Readers will construct and implement decision trees to display options and events, assignment of

probabilities and outcome values, and to calculate the expected values that will lead to an option selection by the decision maker.

Other case studies include:

- Cost-Utility Analysis by Duska M. Franic, Pharm.D., Ph.D.
- Cost-Effectiveness Analysis by Jeff Lee, Pharm.D., FCCP; James Spalding, Pharm.D.; Connie McLaughlin- Miley, Pharm.D.; and Mary Lou Chatteron, Pharm.D.
- Markov Modeling by Dan Touchette, Pharm.D., M.A.
- Sensitivity Analysis by Edward P. Armstrong, Pharm.D., BCPS, FASHP
- Measuring Health Status by Seema Dedhiya, M.S.
- Formulary Decision-Making Incorporating Humanistic Outcomes by Jon C. Schommer, Ph.D.
- Evaluating and Justifying Clinical Services by Melissa G. Butler, Pharm.D., M.P.H.; Glen T. Schumock, Pharm.D., M.B.A.
- Policy Implications of a Health Economic Study, Lessons Learned from the Czech Republic by Neil J. MacKinnon, Ph.D., R.Ph.; and Judith L. Glennie, Pharm.D., M.Sc.

	Member Price	Non-member Price
Text	\$64.95	\$94.95
Case Study Book	\$24.95	\$35.95
Text and Case Study Book	\$79.95	\$119.95

Order your Pharmacoeconomics Text and Case Study Book today! Mention **code PE0304** when you place your order by phone at (816) 531-2177 or at the ACCP Online Bookstore at <http://www.accp.com/bookstore.php>.

## Awards, Promotions, Grants, etc.

**Megaly Rodriguez de Bittner**, Pharm.D., BCPS, has been appointed as Associate Dean for Academic Affairs at the University of Maryland School of Pharmacy.....**John Foxworth**, Pharm.D., Associate Professor of Medicine, was honored as one of four recipients of this year's Elmer F. Pierson Teaching Award by the University of Missouri-Kansas City. The award recognizes Dr. Foxworth as one of the University's outstanding teachers.....**Jean-Venable "Kelly" R. Goode**, Pharm.D., BCPS, Associate Professor of Pharmacy at the Virginia Commonwealth University Medical College of Virginia, is the recipient of the 2004 APhA Academy of Pharmacy Practice and Management (APhA-APPM) Distinguished Achievement Award in Clinical/Pharmacotherapeutic Practice.....**Dennis K. Helling**, Pharm.D., FCCP, Executive Director of Pharmacy Operations and Therapeutics for Kaiser-Permanente, Denver, Colorado, is the recipient of the 2004 APhA- Academy of Pharmacy Practice and Management (APhA-APPM) Daniel B. Smith Practice Excellence Award.....**Robert "Buzz" Kerr**, Pharm.D., Professor of Pharmacy Practice, was selected as a Dean's Distinguished Educator for 2003 in recognition of his sustained accomplishments in education and the scholarship of teaching at the University of Maryland School of Pharmacy.....**Jean**

**Nappi**, Pharm.D., FCCP, BCPS, Professor of Pharmacy and Clinical Sciences at the Medical University of South Carolina College of Pharmacy, has been chosen to receive the Phi Lamda Sigma-Procter & Gamble National Leadership Award in recognition of her many leadership efforts as a practitioner and educator. ....**Gordon J. Vanscoy**, Pharm.D., Assistant Dean for Managed Care and Associate Professor of Pharmaceutical

Sciences at the University of Pittsburgh School of Pharmacy, has been awarded a \$355,000 unrestricted educational grant from Genentech, Inc. to educate pharmacists who make decisions on the use of fibrinolytics.

## New Members

Lamya Bakoss  
Nina Barchha  
Gina Biglane  
Scott R. Bolster  
Alex Boyd  
Chi-Ying Chang  
Christopher L. Cook  
Robert DaSilva  
Ryan G. Davis  
Joseph C. Depczynski  
Johanne-Hanh Le Chau Duong  
Lisa P. Easterling  
Megan Ehret  
Rosa Ephrem  
Daniel H. Gillis  
Rawley M. Guerrero  
Alice S. Hsu  
Vanessa Jeffrey  
Jeani T. Jow  
Peter I. Juve  
Anthony I. Kanu  
Agata B. Kowalski  
Alyssa Krieger  
Maria Lenis  
Jason Lennen

Brenda Ling  
Lori A. Luoma  
Kelly Masters  
Sindhu A. Mathew  
Michelle McElhannon  
Joanne P. McGurn  
Camille Moukwa  
Douglas Nee  
Minh Thu Nguyen  
Paul Phat Nguyen  
Brian G. Ortmeier  
Dean Overmiller  
Diana K. Page  
Jeegisha Patel  
Seema Patel  
Sunita J. Patel  
William Peppard  
Bethany S. Pfister  
Kancy Richard  
Kathy L. Riley  
Jennifer Robinson  
Jane Russell  
Stephanie Schultz  
Anna M. Selwyn  
Tihana Skaricic

Sweta Soni  
Kari Ann Stonely  
Alexander Hong Ta  
Aimee Tharaldson  
Rachel J. Thomas  
Thomas J. Thompson  
James D. Tislow  
Gina A. Upchurch  
Kyle Weant  
Danielle Wham  
Rene L. Williamson  
Valerie J. Wilson  
Aleksander P. Winiarski  
Eunkyung Yang

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

Miriam A. Ansong  
Jered B. Bauer  
Kevin S. Byrne  
Kimberly A. Elliot  
Rowland J. Elwell  
George C. Hurst

Myo-Kyoung Kim  
Joseph L. Kuti  
James H. Lichauer  
J. Kelly Martin  
Kerry A. Schwarz

### New Member Recruiters

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

Richard C. Carroll  
Elizabeth A. Farrington  
Elizabeth Heape  
Cynthia K. Kirkwood  
Amy B. Pai  
Holly Rickman  
Mary T. Roth  
Martha Stassinios

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## 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 curriculum vitae to:

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

**Manager  
Pharmacy Research Services  
Mayo Clinic Rochester**

Exceptional opportunity! This individual will provide leadership and direction for a rapidly growing pharmacy research practice. Responsibilities include oversight of all research services provided by the Pharmacy Department, including inpatient and outpatient settings. Responsibilities include collaboration with investigators on study development and execution; development of an independent research practice; direct supervision of about 12 full-time pharmacy research staff; development and maintenance of safe research distribution systems; participation in institutional IRB committees; and provision of research distributive activities, including drug preparation.

Qualified candidates will have a Pharm.D. degree and residency training. Experience in clinical research, including leadership and management experience, required.

Mayo Clinic is an internationally recognized health care organization providing exceptional patient care through integrated clinical practice, education, and research. Mayo Clinic is widely recognized for its progressive and comprehensive research practice that includes a large, NIH-funded inpatient and outpatient Clinical Research Center.

A competitive salary along with a comprehensive benefits package including educational opportunities, tuition reimbursement, and sick-child care is provided. Moving and incidental expense allowances are available.

Interested applicants should contact:

**Kevin R. Dillon  
Pharmacy Services  
Mayo Clinic  
Saint Mary's Hospital  
1216 2<sup>nd</sup> Street SW  
Rochester MN 55902  
Telephone: (507) 255-5866  
E-mail: [dillon.kevin@mayo.edu](mailto:dillon.kevin@mayo.edu)**

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**Clinical Faculty Position**

A full-time Clinical Faculty Position is available with the Department of Family and Community Medicine in San Antonio and The University of Texas College of Pharmacy. The position requires a Pharm.D. degree and at least one year of residency training. It will involve clinical practice, teaching, and scholarship. The individual will work with family practice residents in outpatient clinics and on an inpatient service to provide clinical services to patients, and will precept and teach medical/pharmacy students and residents. Great opportunities are available for career advancement in research and scholarship. The faculty member will be jointly appointed in the Department of Family Medicine and the College of Pharmacy. The applicant must be board certified in pharmacotherapy or board-eligible. Experience working with a family practice program is preferred but consideration will be given to individuals with equivalent training, experience, or interests. Expected start date is July/August 2004.

If interested, please submit a letter of interest, names of three references, and curriculum vitae to:

**Oralia V. Bazaldua, Pharm.D., BCPS  
Associate Professor  
The University of Texas Health Science Center at San Antonio  
Department of Family and Community Medicine  
7703 Floyd Curl Drive  
San Antonio, Texas 78229  
Office: (210) 358-3803  
Fax: (210) 358-5814  
E-mail: [Bazaldua@uthscsa.edu](mailto:Bazaldua@uthscsa.edu)**

*All faculty appointments are designated as security-sensitive positions. The University of Texas Health Science Center at San Antonio is an Equal Employment Opportunity/Affirmative Action Employer.*



## **FACULTY TENURE-TRACK POSITION PHARMACOKINETICS**

The Faculty of Pharmacy is seeking applications for a tenure-track position in pharmacokinetics. Applicants should have a Ph.D. or a Pharm.D. (Post B. Pharm.) and a minimum of two years of postdoctoral training or the equivalent. Preference will be given to candidates holding an undergraduate pharmacy degree and to those whose research activities correspond to priorities of the Faculty of Pharmacy (cardiovascular and CNS).

The successful candidate is expected to develop an independent, externally funded clinical research program; supervise graduate students; and teach undergraduate students in the area of pharmacokinetics and pharmacotherapy. Candidates should be available to start on September 1, 2004.

In accordance with Canadian immigration requirements, this advertisement is directed primarily toward Canadian citizens and permanent residents of Canada. Non-Canadians will be considered. In compliance with its employment equity program, Université Laval intends to hire women in half of its vacant positions.

For further information on our Faculty, visit our website at [www.pha.ulaval.ca](http://www.pha.ulaval.ca)

Applicants should send a letter of interest, a curriculum vitae and a description of their areas of interest by May 1, 2004 to:

**Monique Richer, Dean**  
**Faculty of Pharmacy**  
**Pavillon Ferdinand-Vandry**  
**Université Laval**  
**Québec (Québec)**  
**Canada G1K 7P4**  
**Telephone: (418) 656-5639**  
**Fax: (418) 656-2305**  
**E-mail: [Monique.Richer@pha.ulaval.ca](mailto:Monique.Richer@pha.ulaval.ca)**

**Pharmacist  
Pharmacy Research Services  
Mayo Clinic Rochester**

This is a great opportunity to become part of a rapidly expanding pharmacy-dedicated research team consisting of about 12 individuals. Responsibilities include collaboration with investigators on study development and execution; evaluation and pharmacy execution of approved research studies; provision of research distributive activities, including drug preparation; development of independent research projects; direct supervision of pharmacy research technicians; and participation in various research committees. Qualified candidates will have experience or an interest in the provision of pharmacy research services. Licensure or eligibility for licensure to practice pharmacy in Minnesota required.

Mayo Clinic is an internationally recognized health care organization providing exceptional patient care through integrated clinical practice, education, and research. Mayo Clinic is widely recognized for its progressive and comprehensive research practice that includes a large, NIH-funded inpatient and outpatient Clinical Research Center.

A competitive salary along with a comprehensive benefits package, including educational opportunities, tuition reimbursement, and sick-child care is provided. Moving and incidental expense allowances are available.

Interested applicants should contact:

**Kevin R. Dillon  
Pharmacy Services  
Mayo Clinic  
Saint Mary's Hospital  
1216 2<sup>nd</sup> Street SW  
Rochester MN 55902**

**Telephone: (507) 255-5866  
E-mail: *dillon.kevin@mayo.edu***