

ACCP Report

American College of Clinical Pharmacy

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

Vol. 30, No. 4; April 2011

ACCP Progress Report: Seeking Recognition of New Clinical Pharmacy Specialties

As summarized in the March issue of the *ACCP Report* (see <http://www.accp.com/report/?iss=0311&art=2>), the College is working closely with the Board of Pharmacy Specialties (BPS) and other professional organizations to establish specialist recognition in focused clinical practice areas not yet recognized by BPS as pharmacy specialties. After reviewing the results of last month's ACCP member opinion survey regarding new specialties (visit www.accp.com/docs/misc/SurveySpecCertif.pdf to view the survey's results), the College submitted to BPS preliminary requests for consideration of new specialties in critical care pharmacy practice and pediatric pharmacy practice. Shortly before publication of this issue of the *ACCP Report*, BPS communicated to ACCP that it had approved these requests and that it will be moving forward to conduct a role delineation study (RDS) for each specialty. The BPS process for consideration of new specialties is summarized nearby.

At its meeting last week, the ACCP Board of Regents determined ACCP's next steps toward expanded specialty recognition. First, while awaiting results of the BPS evaluation of the RDS documents for pediatrics and critical care, the College will seek the support of other professional organizations for these potential specialties. Second, working with clinical pharmacists practicing in cardiology and infectious diseases, ACCP will submit to BPS preliminary requests for consideration of those focused practice areas as new specialties. Toward that end, during the next few weeks, the College will seek input from the leadership of the Infectious Diseases PRN, the Cardiology PRN, and other interested stakeholders, including other professional organizations that may wish to serve as co-supporters in this effort. Third, the College will reach out to other PRNs and members practicing in focused areas to identify additional potential specialties for which preliminary requests should be submitted to BPS in the near future.

(Continued on next page)

BPS Process for Considering a New Specialty

1. An organization (with or without cosponsoring organizations) submits to BPS a brief proposal for consideration of a new pharmacy specialty following the guidelines issued by BPS, "Preliminary Request for the Board of Pharmacy Specialties to Consider a New Specialty." These guidelines call for the preliminary proposal to include the name of the practice area of the proposed specialty; a description of the specialty practice area, the pharmacists engaged in it, and its overall impact on society; estimates of the number of pharmacists who might seek such certification; and documentation of organizational funding support to develop a full petition to BPS and to support implementation of the specialty before the receipt of candidate fees.
2. BPS evaluates the preliminary request described in No. 1 above. If the request is judged to support the potential viability of the proposed specialty, BPS will undertake a formal role delineation study (RDS) to determine and analyze the tasks performed by practitioners in the specialty.
3. BPS reviews the results of the RDS; if the Board finds that the RDS validates the area as a potential pharmacy specialty, a call will be issued for a formal petition requesting recognition of the specialty. Such petitions must include extensive documentation and justification of the potential specialty. This process typically requires several months to complete background research and petition preparation before submission to BPS.
4. Once a petition supporting a new specialty is developed and submitted, BPS evaluates the petition, seeks profession-wide input on the petition and specialty, and then acts on the petition to either approve or deny the new specialty. During this process, the petition's sponsoring organization(s) may be asked to amend or otherwise modify the petition.

Through its 2010 ACCP Strategic Plan (see http://www.accp.com/docs/about/ACCP_Strategic_Plan.pdf), the College has established an objective that, by 2015, at least 12 clinical pharmacy specialties will be recognized or in the process of being recognized. At present, there are six recognized BPS specialties (ambulatory care pharmacy, nuclear pharmacy, nutrition support pharmacy, oncology pharmacy, pharmacotherapy, and psychiatric pharmacy). If successful, current and future efforts to establish cardiology, critical care, infectious diseases, pain and palliative care (see <http://www.accp.com/report/?iss=0311&art=2>), and pediatrics would bring that total to 11 recognized specialties. Hence, ACCP's objective of having 12 specialties either approved or under consideration by BPS in 2015 is clearly within reach. To monitor the progress of the College's efforts to establish new specialties, including survey results, preliminary requests submitted to BPS, and other pertinent information, please visit <http://www.accp.com/careers/specRecog.aspx>.

2011 ACCP Clinical Pharmacy Challenge Registration Is Now Open

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

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

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

Competition Overview

The ACCP Clinical Pharmacy Challenge is a team-based competition. Teams of three students will compete against teams from other schools and colleges of pharmacy in a "quiz bowl"-type format. Only one team per institution can enter the competition. Institutions with branch campuses, distance satellites, and/or several interested teams are encouraged to conduct a [local competition](#).

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

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

- Trivia/Lightning
- Clinical Case
- Jeopardy-style

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

Students are not required to be members of ACCP to participate. Team registration may be submitted online and must be initiated by a current faculty member at the respective institution. Students interested in forming a team should contact their ACCP [faculty liaison](#). If no ACCP Faculty Liaison has been identified, any faculty member from the institution may initiate the registration process. The registering faculty member must confirm the eligibility of all team members and/or alternates online before a team will be permitted to compete in the Clinical Pharmacy Challenge. **The deadline to complete team registration and confirm eligibility is September 6, 2011.**

Click [here](#) for more information, or contact Michelle Kucera, Pharm.D., BCPS, at mkucera@accp.com.



2011 Annual Meeting Call for Abstracts

Submit abstracts online at <http://accp.confex.com/accp/2011am/cfp.cgi>.

All investigators in the field of clinical pharmacy and therapeutics, both ACCP members and nonmembers, are invited to submit abstracts to be considered for poster presentation at the 2011 Annual Meeting. The meeting will be held October 16–19, 2011, in Pittsburgh, Pennsylvania.

See complete submission instructions and guidelines at <http://accp.confex.com/accp/2011am/cfp.cgi>. Abstracts may be submitted in one of the following categories:

Original Research: Abstracts must describe original research in education, health sciences, therapeutics, pharmacokinetics, pharmacodynamics, pharmacoeconomics, pharmacoepidemiology, or pharmacogenomics. Encore submissions are welcome.

Clinical Pharmacy Forum: Abstracts must describe the delivery, development, justification, or documentation of innovative clinical pharmacy services. Abstracts addressing payment or cost analysis are encouraged. Encore submissions are welcome.

Resident and Fellow Research-in-Progress: Submission and evaluation criteria are those of an Original Research presentation except that the research effort is ongoing. The presenting author must be a resident or fellow.

Student Submissions: Submission criteria are those of an Original Research presentation. Partially completed data are acceptable for inclusion. Abstracts should provide an



assessment of the likelihood of project completion by date of presentation. The presenting author must be a student.

Late Breakers: Abstracts must describe original research in education, health sciences, therapeutics, pharmacokinetics, pharmacodynamics, pharmacoeconomics, pharmacoepidemiology, or pharmacogenomics. Encore submissions are welcome.

Submission Deadline

All abstracts accepted for presentation (with the exception of Encore presentations) in the Original Research, Clinical Pharmacy Forum, and Late Breaker categories will automatically be entered in the Best Paper Award competition. Judging of finalists will occur during the poster and platform sessions at the meeting. The deadline to submit abstracts in the Original Research, Clinical Pharmacy Forum, and Resident and Fellow Research-in-Progress categories is Wednesday, June 15, 2011, 11:59 p.m. (Pacific Daylight Time [PDT]). The deadline to submit abstracts in Student Submissions and Late Breakers is Wednesday, July 6, 2011, 11:59 p.m. (PDT). Authors will be notified by e-mail of acceptance of their papers by Monday, August 15, 2011.

For more information about the Call for Abstracts, contact Emma Webb, ACCP Project Manager – Education, at (913) 492-3311, extension 20, or emmawebb@accp.com.

Applications for a Leadership Position on the 2011–2012 National Resident Advisory Committee Due June 17

Are you a resident or fellow who is interested in becoming more involved in ACCP? The College encourages postgraduate trainees who want to enhance their leadership skills, network with colleagues across the country, and interact with clinical pharmacy leaders to apply for appointment to a leadership position on the 2011–2012 National Resident Advisory Committee.

The National Resident Advisory Committee, appointed annually by the ACCP President-Elect, is composed of residents, fellows, and graduate students. Members serve a 1-year term, and the committee is typically composed of 8–12 individuals. Appointed leadership positions include:

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

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

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

Seeking a Special Gift for a New Graduate? Consider *Clinical Pharmacy in the United States: Transformation of a Profession*

As we enter the graduation season, ACCP has the perfect gift suggestion for the graduating pharmacy student, resident, or fellow.

Drs. Robert M. Elenbaas and Dennis B. Worthen have written a compelling historical analysis of the profession of clinical pharmacy. Detailed accounts of the development of clinical pharmacy are presented, including lively personal reflections from key players in the profession's history. These stories are told in the context of the social, cultural, political, economic, and scientific developments of the past century. This fully illustrated book will educate and enlighten newcomers to the profession as they begin their careers.

[Click here](#) to order your copy of *Clinical Pharmacy in the United States: Transformation of a Profession*. The member price is \$39.95; the nonmember price is \$59.95. To ensure that your copy arrives in time for graduation, please allow 7–10 days for shipment.



Washington Report

John McGlew
Associate Director
of Government Affairs



Celebrating 5 Years of the Congressional Healthcare Policy Fellow Program AND More News Regarding Current Government Affairs Initiatives

ACCP is pleased to announce that Sarah J. Steinhardt, Pharm.D., J.D., M.S., of West Lafayette, Indiana, will serve as the fifth Congressional Healthcare Policy Fellow.

The Fellow program is a partnership of the American College of Clinical Pharmacy (ACCP), Virginia Commonwealth University (VCU) School of Pharmacy, and the American Society of Health-System Pharmacists (ASHP).

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

Dr. Steinhardt earned her Pharm.D. degree from Purdue University, her J.D. degree from Indiana University School of Law–Indianapolis, and her master's of science in pharmacy administration from the University of

Pittsburgh. Dr. Steinhardt also completed a rotation through the ASHP Government Affairs Division.

Dr. Steinhardt's training and experience in the three professional career fields of pharmacy, law, and management, as well as her strong personal interest in health care policy, legislation, and regulation, provide her with a diverse range of skills that will prove invaluable throughout her time in Washington, DC.

Dr. Steinhardt commented, "As a practicing pharmacist for 7 years, I have experience in both hospital and retail pharmacy that would be useful in working out details for legislation involving healthcare provider roles and finding a place for pharmacists within the changes in the delivery of medical care brought about by healthcare reform."

Dr. Steinhardt is expected to begin her Fellow program in September 2011 and plans to attend the 2011 ACCP Annual Meeting in Pittsburgh, Pennsylvania.



About the ACCP/ASHP/VCU Pharmacy Policy Fellow Program

In 2006, ACCP, the VCU School of Pharmacy, and ASHP established the country's first Pharmacy Healthcare Policy Fellow Program.

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

The program provides a unique health care policy learning experience that allows Fellows to make practical contributions to the effective use of scientific and pharmaceutical knowledge in government decision-making.

Fellows are actively mentored during their development of both legislative evaluation and policy development skills and research and writing skills as they integrate practical policy experience with theory.

Fellows also undertake a wide array of responsibilities in the congressional office they serve, including researching and writing briefs on health care issues; assisting with policy decisions; drafting memoranda; and planning, organizing, and contributing to the management objectives of the office.

Introducing the Pharmacy Healthcare Policy Fellows

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

Dr. Neyarapally went on to serve as a policy scientist

in the Outcomes for Pharmaceutical Outcomes Research in the Center for Outcomes and Evidence at the Agency for Healthcare Research and Quality. He currently serves as an interdisciplinary scientist at the Office of Surveillance and Epidemiology within the Center for Drug Evaluation and Research at the U.S. Food and Drug Administration (FDA).

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

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

Dr. Legreid Dopp was recently selected as the next editor of the *Journal of the Pharmacy Society of Wisconsin*.

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

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

Dr. Hammonds' work focused on quality and delivery system improvement initiatives during the national health reform debate. She was instrumental in securing the inclusion of Section 3503 of the Affordable Care Act (H.R. 3590), Medication Management in the Treatment of Chronic Diseases, which was unanimously accepted as a "noncontroversial" amendment to H.R. 3962 by the U.S. House of Representatives Committee on Energy and Commerce.

After her Fellowship, Dr. Hammonds joined the Health Resources and Services Administration in the Office of Pharmacy Affairs, where her work focused on the Patient Safety and Clinical Pharmacy Services Collaborative and Affordable Care Act Provisions related to the patient-centered health home, care coordination during transitions of care, and clinical pharmacy services.

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

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

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

Applications for the 2012–2013 Pharmacy Healthcare Policy Fellow Program

Interested candidates should visit the Pharmacy Healthcare Policy Fellow Program's [website](#) for more information and instructions on submitting an application.

ACCP Advocacy – Get Involved!

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

Invite Your Legislators to Tour Your Practice Setting

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

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

ACCP has prepared a guide to help you reach out to members of Congress and schedule a visit. We've even drafted a letter you can send directly from the Legislative Action Center inviting your federal officials to tour your facility.

[Click here](#) to visit the site and send a letter yourself!

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

Please also make sure to work closely with ACCP staff in Washington to ensure that your practice tour is as effective as possible.

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

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

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

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

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

ACCP encourages you to contact your senators TODAY and urge them to cosponsor S. 48 and support its passage through the Senate.

[Click here to take action.](#)

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

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

The legislation directs the FDA to address drug shortages by requiring drug manufacturers to notify the FDA when there are manufacturing problems or when a drug product will be discontinued; requires the agency to maintain an online list of drugs in shortage situations; and revises the FDA's definition of "medically necessary."

[Click here to take action.](#)

Protect Funding for Poison Control Centers

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

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

To ensure public safety, these cuts must not be allowed. You can help by sending a letter to your senator, alerting him/her to the disaster this could cause and urging him/her to protect funding for poison centers.

[Click here to take action.](#)

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

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

ACCP StuNet Advisory Committee Applications Due June 17

Attention student pharmacists: would you like to become more involved in ACCP? Student members who want to develop leadership skills, expand opportunities for student pharmacists within ACCP, and introduce other students to the many facets of clinical pharmacy are encouraged to apply for appointment to the 2011–2012 ACCP National StuNet Advisory Committee.

The National StuNet Advisory Committee is an ACCP committee composed of members appointed each year by the ACCP President-Elect. Members generally serve a 1-year term, and the committee is typically composed of 8–12 members. The leadership of the committee is also appointed by the ACCP President.

Leadership positions include the Chair (1-year term), the Vice Chair (2-year term; serves first year as the Vice Chair and then assumes the Chair position during the second year), and the Secretary (1-year term). If you are a student interested in serving on the 2011–2012 ACCP National StuNet Advisory Committee, either as a member-at-large or in a leadership role, please visit <http://www.accp.com/stunet/advisoryCommittee.aspx> for more information about the committee and how to apply. The deadline for applications is June 17, 2011.

Pharmacotherapy Pearls

The Pharmacotherapy Top 10 List

Stephen E. Cavanaugh, B.A.

Last year, there were 329,980 views of articles on *Pharmacotherapy's* online journal, which was hosted at Atypion-Link (at <http://www.atypion-link.com/PPI/loi/phco>). This is an 8% increase from 2009's 306,684 views. This year's most frequently viewed article was downloaded 3613 times versus last year's top-viewed article at 2665 times! Overall, 2010's top 10 had significantly more views (22,946) than 2009's (18,001). Subscribers view articles for free, whereas nonsubscribers view abstracts for free but pay to view the articles. The number of times an individual article is viewed is an unofficial index of the clinical utility and importance of that article. The top 10 *Pharmacotherapy* articles viewed from January 2010 through December 2010 are listed below:



| Issue | Article | Total Access | Authors | Journal Dept. |
|-------------------------------|---|--------------|--|-------------------------------|
| Vol. 30, No. 3, March 2010 | Drug Interaction Between Clopidogrel and Proton Pump Inhibitors | 3613 | Tina J. Liu, Pharm.D., and Cynthia A. Jackevicius, Pharm.D., M.Sc. | Review of Therapeutics |
| Vol. 29, No. 5, May 2009 | Antimicrobial Dosing Concepts and Recommendations for Critically Ill Adult Patients Receiving Continuous Renal Replacement Therapy or Intermittent Hemodialysis | 2548 | Brett H. Heintz, Pharm.D., Gary R. Matzke, Pharm.D., FCCP, FCP, FASN, and William E. Dager, Pharm.D., FCSHP, FCCP, FCCM | Review of Therapeutics |
| Vol. 30, No. 1, January 2010 | Drug Fever | 1937 | Ruchi A. Patel, Pharm.D., and Jason C. Gallagher, Pharm.D. | Review of Therapeutics |
| Vol. 29, No. 6, June 2009 | Attention-Deficit-Hyperactivity Disorder: An Update | 2545 | Julie A. Dopheide, Pharm.D., and Steven R. Pliszka, M.D. | Review of Therapeutics |
| Vol. 27, No. 8, August 2007 | Antimicrobial Dosing Considerations in Obese Adult Patients: Insights from the Society of Infectious Diseases Pharmacists | 2513 | Manjunath P. Pai, Pharm.D., and David T. Bearden, Pharm.D. | Special Article (SIDP) |
| Vol. 30, No. 6, June 2010 | Consensus Summary of Aerosolized Antimicrobial Agents: Application of Guideline Criteria: Insights from the Society of Infectious Diseases Pharmacists | 1970 | Jennifer Le, Pharm.D., Elizabeth Dodds Ashley, Pharm.D., MHS, Melinda M. Neuhauser, Pharm.D., MPH, et al; and Society of Infectious Diseases Pharmacists Aerosolized Antimicrobials Task Force | Review of Therapeutics (SIDP) |
| Vol. 30, No. 4, April 2010 | Ceftaroline: A New Cephalosporin with Activity Against Resistant Gram-positive Pathogens | 2009 | Molly E. Steed, Pharm.D., and Michael J. Rybak, Pharm.D., MPH | Review of Therapeutics |
| Vol. 30, No. 2, February 2010 | Role of Lactobacillus in the Prevention of Antibiotic-Associated Diarrhea: A Meta-analysis | 1909 | Pramodini B. Kale-Pradhan, Pharm.D., Harjot K. Jassal, and Sheila M. Wilhelm, Pharm.D. | Original Research Article |
| Vol. 29, No. 10, October 2009 | Treatment of Hepatorenal Syndrome | 2125 | Tyree H. Kiser, Pharm.D., Robert MacLaren, Pharm.D., and Douglas N. Fish, Pharm.D. | Review of Therapeutics |
| Vol. 30, No. 8, August 2010 | Impact of Proton Pump Inhibitors on the Effectiveness of Clopidogrel After Coronary Stent Placement: The Clopidogrel Medco Outcomes Study | 1777 | Rolf P. Kreutz, M.D., Eric J. Stanek, Pharm.D., Ronald Aubert, Ph.D., et al | Original Research Article |

ACCP Academy Mentoring Opportunities

The ACCP Academy provides four unique professional development programs leading to certificates of completion in Clinical Practice Advancement, Leadership and Management, Research and Scholarship, and Teaching and Learning. Designed to provide professional development in your main areas of responsibility, the ACCP Academy's certificate programs use a curricular-based approach to enhance your abilities.

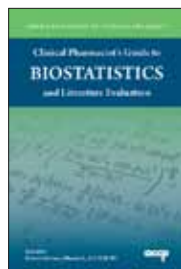
Enrollees in the Academy attend interactive, live programs at ACCP meetings to earn credit toward a certificate of completion. In addition to live programming, enrollees participate in mentoring opportunities and self-assessment activities and develop electronic portfolios that demonstrate their application of concepts learned in Academy courses.

One-on-one mentoring is among the most effective

strategies to develop the knowledge, skills, attitudes, and values of clinical pharmacy leaders, researcher-scholars, and teachers. Therefore, Academy enrollees are asked to identify a mentor (preferably from their home institution, if possible) with whom they will meet throughout the time participants are enrolled in the Academy program. Mentors are expected to assist each participant in achieving program outcomes, meet regularly with their protégés, and provide opportunities for the protégé to observe and (if feasible) participate in the mentor's activity. To aid your mentoring experience, review the article "[A Guide to Mentoring—and to Being Mentored](http://www.accp.com/docs/academy/leadershipAndManagement/AcademyNewsletter_1_1.pdf)" (http://www.accp.com/docs/academy/leadershipAndManagement/AcademyNewsletter_1_1.pdf) written by Robert E. Smith, Pharm.D., Chair of the ACCP Academy Leadership and Management Certificate Program.

Interested in serving as an Academy mentor? E-mail Zangi Miti at zmiti@accp.com.

Clinical Pharmacist's Guide to Biostatistics and Literature Evaluation



Are you preparing for the Pharmacotherapy or Ambulatory Care Board of Pharmacy Specialties examination? Would you like to bolster your knowledge of and confidence in the use of biostatistical tests? Are you teaching literature evaluation to students or residents? ACCP has developed the *Clinical Pharmacist's Guide to Biostatistics and Literature Evaluation* to assist you in preparing for the certification examination and/or applying this knowledge in other settings.

Contents of the guide include sections on the Basics of Biostatistics and Statistical Tests, including how to choose the appropriate statistical test for your application, and Literature Interpretation and Application to Patient Care, with chapters on interpreting results from clinical trials and pharmacoepidemiology.

Each chapter includes a selected bibliography and self-assessment questions designed to test your understanding of the material. A table of helpful equations appears at the front of the book, to help as you work through the questions. And the answers to the self-assessment questions are included in the back of the book.

If you are involved in interpreting the medical literature to optimize patient care, improve health outcomes, or generate hypotheses for research, an understanding of biostatistics is essential to your success. The *Clinical Pharmacist's Guide to Biostatistics and Literature Evaluation* is available now through the ACCP Bookstore at http://www.accp.com/bookstore/ro_01cpgbl.aspx.

ACCP PBRN Expands as It Enters the Next Phase of Development

The ACCP Research Institute recently welcomed two new staff members, Rachel Chennault, Ph.D., Assistant Director of the ACCP PBRN, and Nicholas Butler, Web developer. "The addition of Rachel and Nicholas to the Network greatly expands our capabilities," said Dan Touchette, Pharm.D., M.A., Director of the ACCP PBRN.

Rachel will be in charge of the day-to-day operations of the Network, while Nic will lead the development and database management of new projects within the new ACCP PBRN Web-based platform, known as REDCap. [See story immediately below.] REDCap, in conjunction with PBRN-Connect for data and record storage, together with the addition of these key personnel, will form a solid foundation of infrastructure support for the Network as we move forward.

"With the successful completion of our feasibility project, the MEDAP (Medication Error Detection, Amelioration, and Prevention) Study, we have set a track record for

successful multisite research," states Dr. Touchette. He continues:

Data for the MEDAP Study are undergoing analysis. We are ready to accept new proposal ideas from ACCP members and external stakeholders as we build the network and move into a growth phase. Please contact me with your questions and ideas as we move forward (dtouchette@accp.com).

ACCP PBRN Selects REDCap as New Data Collection Tool



The REDCap (Research Electronic Data Capture) system was recently adopted by the Network to replace the Discovere tool as the preferred method of electronic data capture. REDCap is a secure, Web-based application designed exclusively to support data capture for research studies. REDCap is composed of 146 active institutional partners, and it supports the following: two secure Web-based applications (REDCap and REDCap Survey) designed exclusively to support data capture for research studies; a streamlined process for rapidly building a database; an intuitive interface for data entry (with data validation); audit trails for tracking data manipulation and export procedures; automated export procedures for seamless data downloads to common statistical packages (SPSS, SAS, Stata); procedures for importing data from external sources; and advanced features, such as branching logic and calculated fields.

The REDCap application is currently in production use or development build-status for more than 3750 studies with over 11,710 end-users spanning numerous research focus areas across the consortium, and the recently released REDCap Survey application is now being adopted rapidly by consortium partners. There is no cost to ACCP to belong to the consortium and use the REDCap software for PBRN activities.

The ACCP PBRN encourages interested investigators to contact the PBRN with their project ideas. The ACCP PBRN can build the data collection forms for the investigator using the REDCap tool for those wanting the PBRN to conduct their projects. Whether a lot of assistance is needed or a little, the ACCP PBRN is available to support the practice-based research efforts of our membership. Contact us today at pbrn@accp.com.

Oncology Is the Latest PSAP-VII Release

The care of patients with hematologic and oncologic conditions is the focus of the sixth book in the *Pharmacotherapy Self-Assessment Program*, seventh edition

(PSAP-VII). *Oncology* provides evidence-based information on a wide range of problems seen in this patient population.

Oncology, which will be released April 15, has three learning modules offering a total of 16.5 continuing pharmacy education credits. The book describes new indications and new drugs used in the medical management of patients with cancer and blood disorders. The first module has chapters on supportive care of the patient with cancer; screening for common cancers and prevention of cancer, including pharmacologic treatment of patients who are at high risk; and nonmalignant hematology, including primary immune thrombocytopenia and paroxysmal nocturnal hemoglobinuria. The second module has updates on the treatment of pancreatic cancer and neuroendocrine tumors, hepatic cancer and hepatic metastases, and head and neck cancer. The third module contains chapters on gynecologic malignancies; non-Hodgkin lymphomas; and applications of bone marrow transplantation in multiple myeloma, germ cell tumors, and hematologic malignancies.



Oncology is designed to assist pharmacists who want to:

- Design appropriate supportive care regimens for patients with gastrointestinal effects, hypercalcemia, and osteoporosis associated with cancer and its treatment, and assess and improve drug adherence in patients with cancer.
- Plan appropriate screening for common cancers in patients who are at normal or high risk, and recommend chemopreventive therapy for patients who are at risk of developing breast, colon, prostate, and cervical cancer.
- Devise treatment plans for patients with primary immune thrombocytopenia and paroxysmal nocturnal hemoglobinuria, incorporating drugs that have been marketed recently, and assess the impact of treatment on quality of life.
- Design appropriate treatment regimens for patients with pancreatic cancer and neuroendocrine tumors, considering patient characteristics, impact of treatment on survival, and adverse effects of treatment.
- Evaluate the efficacy and toxicity of surgery, transplantation, locoregional therapy, and systemic therapy for patients with primary hepatic carcinoma and hepatic metastases from colon cancer.
- Develop a treatment plan for a patient with head and neck cancer, including local treatment, chemotherapy, targeted therapy, and supportive interventions.
- Assess the risk of gynecologic malignancies, discuss prevention options, and design treatment plans for

patients with newly diagnosed or recurrent cancers of the endometrium, cervix, and ovary.

- Assess the prognosis of and develop a treatment plan for an indolent, aggressive, or highly aggressive non-Hodgkin lymphoma, including management of adverse effects.
- Discuss the role of hematopoietic cell transplantation in patients with multiple myeloma, non-Hodgkin and Hodgkin lymphomas, acute leukemias, chronic myeloid leukemia, aplastic anemia, and germ cell tumors and develop supportive care plans for patients with these conditions.

All PSAP-VII books are available in both print and on-line formats and as either single books or the full series (11 books). Other books in the series are *Cardiology; Critical and Urgent Care; Women's and Men's Health; Pediatrics; Chronic Illnesses; Geriatrics; Science and Practice of Pharmacotherapy; Infectious Diseases; Neurology/Psychiatry; and Gastroenterology/Nutrition*.

Each PSAP-VII book offers the most up-to-date and comprehensive information available on recent drug therapy advances and will expand your knowledge in the therapeutic area covered. For specific information on the release date, continuing pharmacy education credits, and program numbers for each book, or to place your online order, visit www.accp.com/bookstore/psap7.aspx. Books are priced as follows; shipping and handling charges apply to print books only.

| PSAP-VI | Member Price | Nonmember Price |
|--------------------|--------------|-----------------|
| Full-Series Print | \$125 | \$200 |
| Full-Series Online | \$110 | \$185 |
| Full-Series Combo | \$185 | \$260 |
| Single Print Book | \$25 | \$40 |
| Single Online Book | \$25 | \$40 |
| Single Combo Book | \$35 | \$50 |



ACCP is accredited by the Accreditation Council for Pharmacy Education (ACPE) as a provider of continuing pharmacy education. The Board of Pharmacy Specialties (BPS) has approved PSAP-VII for use in Board Certified Pharmacotherapy Specialist (BCPS) recertification.

New Web-Based CPE Program Available on the ACCP Web Site



A new, on-demand continuing pharmacy education (CPE) activity, **Atrial Fibrillation: Focus on Stroke Prevention**, is now available on the ACCP Web site.

This activity provides an overview of current guidelines, quality measures, and clinical data related to preventing stroke in patients with atrial fibrillation. Emerging issues regarding new drug therapies and clinical controversies in the care of these patients are explored. Audience response questions are integrated into the activity, allowing participants to apply the information as it's presented. The activity is approved for 2.0 hours of CPE credit, and there is no fee to participate. Click [here](#) to link to the program.

New Members

| | |
|----------------------|-------------------|
| Sarab Ahram | Lucas Hill |
| Joy Alonzo | Cynthia Hinds |
| Naaseha Amir | Katie Hinkle |
| Erin Baguley | JiEun Hong |
| Matthew Baker | Wesley Hood |
| Lisa Beers | Tina Hsieh |
| Jessica Bennett | Ted Humburg |
| Stacy Bolf | Ian Hutchinson |
| Mary Beth Brinkman | Suong Huynh |
| Kristen Campbell | Sarah Jang |
| Daniela Castaneda | Clayton Johnston |
| Jennifer Chen | Amy Jones |
| Anna Christensen | Kayla Jones |
| Christina Chung | Maha Kebir |
| Stacy Coffee | Maqsood Khan |
| James Constable | Naveed Khan |
| Alyson Cornbower | Masoud Kholghy |
| Jordan Cottam | John Knorr |
| Leanna Davis | Kelsey Konrardy |
| Melinda Deen | Mark Lawson |
| Nnenna Dinney | Alison Lee |
| Thomas DiPiro | Michael Leifheit |
| Kathleen Donoghue | Meng Li |
| Nicholas Dotta | Robin Lockhorst |
| Trinina Dove | Carolyn Ludwig |
| Pierre-Alex Duvivier | Soriya Ly |
| Nina Elk | Judy Mac |
| Mohammad El-Sakkary | Spencer Martin |
| Fallon Enfinger | Betzaida Martinez |
| Walderez Franco | Megan McAlpin |
| Rachel Freytag | Deborah McCray |
| Melanie Furjanic | Melanie McKain |
| Benjamin Georgiades | Sajani Mehta |
| Patty Ghazvini | Shelly Mudd |
| Veronica Gonzales | Matthew Murphy |
| Nikki Griffis | Ramesh Neerpat |
| Tyler Gums | Isabelle Nguyen |
| Andrew Hendrickson | Van Nguyen |
| Paulin Heng | Kathryn Nighorn |
| Emily Henson | Lara Ogle |
| Sarah Hess | Heidi Olson |

Helen Park
 Ashley Parrott
 Pinal Patel
 Jason Pelletier
 Jeffrey Pereira
 Tri Pham
 Diana Pinto
 Patrick Plas
 Russell Poisson
 Jessica Pritchett
 Thuy Purdy
 Ashley Reilly
 Kristina Reyes
 Stephanie Riley
 Mary Rojas
 Anne Rolle
 Danya Roshdy
 Marsie Ross
 Mike Royal
 Lina Saadat
 Seyhoon Samandari-Gupta
 Rachel Sass
 Sara Schepcoff
 Swati Shah
 Leah Sheffer
 Angela Singh
 Bridgette Slaughter
 Greg Slevin
 Corinne Smith
 Hasan Sofihussein
 Kevin Steele
 Anne Stegeman
 Greta Sweney
 Nadia Syed
 Frank Szczerba
 Elizabeth Tesch
 Mark Tesell
 Wendy Toler
 Ashley Toner
 Jb Topol
 Vicky Tran
 Sara Triglia
 Laura Van Deventer
 Kiengkham Vouthy
 Thao Vuong
 Diana Walick
 Erika Walters
 Anne Westerman
 Amanda Wieman
 Natalie Williams
 Alexander Wilson
 Kathryn Wolf
 Pei Shieen Wong
 Adam Yeargin
 Elton Yip

The following individuals recently advanced from Associate to Full Member:

Nathem Akhras
 Christopher Bigness
 Mark Bremick
 Diane Ignacio
 Maureen Ketz
 Quang Le
 Amy Martin
 Shambria Nolan
 Rodhelen Paluyo
 Erik Schindler
 Jeanine Shahin
 Deanna Shube
 Daniela Simjanovski

New Member Recruiters

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

Houry Abajian
 Jessica Allender
 Miranda Andrus
 Jennifer Arnoldi
 Rodney Brumbelow
 Frank Caligiuri
 Judy Cheng
 Allison Chung
 Amanda Corbett
 Stephen Drackett
 Alexander Flannery
 Jennifer Goldman-Levine
 Michelle Jacobs
 Michael Kays
 Anandi Law
 Eric MacLaughlin
 Juan Maldonado
 Lisa Murphy
 Nami Park
 Andrew Smith
 Adams Solola
 Jodi Taylor
 Katherine Vogel Anderson
 Ali Zalpour