accp Report
American College of Clinical Pharmacy
Michael S. Maddux, Pharm.D., FCCP; Executive Director
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Image courtesy Hyatt Regency O'Hare.

Act This Month and Save on Registration for ACCP's Updates in Therapeutics®

There is still time to take advantage of early-bird registration rates! Save up to 30% by registering no later than February 28. This opportunity includes receipt of your own electronic copy of the two-volume course workbook for either the "Ambulatory Care Pharmacy PreparatoryReview and Recertification Course" or the "Pharmacotherapy Preparatory Review and Recertification Course." Don't miss out; register today at www.accp.com/ut.

ACCP's Updates in Therapeutics® 2014, scheduled on April 11 – April 14, will emphasize preparation for specialty certification and ACCP Academy curricular-based professional development. Attendees will have expanded opportunities for specialty certification preparatory review, optimal scheduling for Academy programming, and dedicated networking.

All **ACCP Updates in Therapeutics® 2014** educational sessions and activities will be held at Chicago's Hyatt Regency O'Hare.Take advantage of room rates starting as low as $159 per night for a room that is just steps away from the session rooms. Attendees who stay at Chicago's Hyatt Regency O'Hare will have access to complimentary wireless Internet as well as complimentary shuttles to and from Chicago O'Hare International Airport. You can't afford to miss out on these savings! To obtain more information and to book your ACCP-discounted room today, visit www.accp.com/ut.

Meeting registration is available online at www.accp.com/ut. Go online today to register, reserve your hotel room, and begin planning your meeting itinerary. Register by February 28 for maximum savings!

ACCP to Deliver New "Updates to the Updates" Webinar Series to Supplement the 2013 Pharmacotherapy and Ambulatory Care Pharmacy Review Courses

Registration is now open for ACCP's new "Updates to the Updates" webinar series at www.accp.com/meetings/w-upup/. These webinars are designed to assist learners in preparing for the new spring administration of the Pharmacotherapy Specialty Exam or the Ambulatory Care Pharmacy Specialty Exam. Each webinar will provide brief concept overviews of the major guidelines released between April 2013 and December 2013 that are of relevance to Pharmacotherapy and/or Ambulatory Care Pharmacy. The webinar series is specifically designed to supplement the 2013 Pharmacotherapy and Ambulatory Care Pharmacy preparatory review courses, allowing purchasers of the 2013 courses to be completely up-to-date in preparation for the upcoming spring 2014 BPS examinations.

Relevant updates will be covered in a single, live, 3-hour session, to be facilitated by content experts. These sessions will also be available on demand for those unable to attend the live webinar. The Pharmacotherapy updates webinar will be offered on Tuesday evening, February 25, 2014. The Ambulatory Care Pharmacy updates webinar will be offered on Wednesday evening, February 26, 2014.

Five different content areas will be covered each evening:

Tuesday, February 25 – Pharmacotherapy

- Psychiatry Updates for Pharmacotherapy Specialists
- Oncology Updates for Pharmacotherapy Specialists
- Neurology Updates for Pharmacotherapy Specialists
- Cardiology Updates for Pharmacotherapy Specialists
- Gastrointestinal Disorder Updates for Pharmacotherapy Specialists

Wednesday, February 26 – Ambulatory Care Pharmacy

- Psychiatry Updates for Ambulatory Care Pharmacists
- Oncology Updates for Ambulatory Care Pharmacists
- Neurology Updates for Ambulatory Care Pharmacists
- Cardiology Updates for Ambulatory Care Pharmacists
- Gastrointestinal Disorder Updates for Ambulatory Care Pharmacists

Recordings of each session will be available beginning Thursday, February 27, for participants unable to attend the live presentations. Participants will earn continuing pharmacy education credit for attending the live presentations—or they can earn continuing pharmacy education credit for the recordings—as long as they pass the posttest.

Participating in the webinars is easy. To access the webinars on a computer, you will need broadband Internet access, an updated Internet browser, Adobe Flash Player, and speakers or headphones for audio. To access the webinars on a Wi-Fi–enabled mobile device, you will need a wireless Internet connection and the Adobe Connect application, free from the Apple App Store or Google Play.

Registration is only $69.95 per specialty webinar (either Pharmacotherapy or Ambulatory Care Pharmacy) for attendees of Updates in Therapeutics® 2013 or purchasers of an Updates in Therapeutics® 2013 product. The cost is $89.95 per specialty area for all other ACCP members and $129.95 per specialty webinar for nonmembers. Register today at www.accp.com/meetings/w-upup/.

ACCP Academy Programming to be Offered at Chicago's Hyatt Regency O'Hare

April 11–12 and April 12–13

Take advantage of ACCP Academy programming to be held in conjunction with ACCP's spring meeting, Updates in Therapeutics® 2014, at Chicago's Hyatt Regency O'Hare. The Academy provides four unique professional development programs leading to certificates of completion in Career Advancement, Leadership and Management, Research and Scholarship, and Teaching and Learning. Each Academy will concentrate its programming over a 2-day period to enable Academy participants to minimize both travel expense and time away from their practice. Registration includes all sessions within the ACCP Academy track of your choice, available continuing pharmacy education credit, and program handouts for the ACCP Academy track sessions you attend. An abbreviated schedule for each Academy track is summarized below. For a full programming schedule, consult the ACCP Web site at www.accp.com/acad.

ACCP Spring Meeting Academy Schedule

Academy	Courses	Schedule
Leadership and Management	Interpersonal Leadership Development (Module 2)	April 11
	Leadership Implications When Managing for the Future (Elective)	April 11
	Reflecting on Leadership (Elective)	April 11
	Attributes of a Leader (Module 3)	April 12
Research and Scholarship	Statistical Issues (Module 2)	April 11
	Conducting and Reporting Research (Module 4)	April 11
	Regulatory/Ethical Issues (Module 3)	April 12
Career Advancement	Extending Your Practice By Mentoring and Precepting (Module 2)	April 12
	Establishing Interprofessional and Patient-Centered Roles (Module 3)	April 13
	Entrepreneurship for Career Advancement (Module 4)	April 13
Teaching and Learning	Implementing Teaching and Learning Strategies (Module 2)	April 12
	Assessing Student Learning (Module 3)Securing Feedback to Improve One's Teaching (Elective)	April 13
	Experiential Education: Practical Tools for Enhancing the Clinical Experience (Elective)	April 13

To learn more about Academy programming at ACCP's Updates in Therapeutics® and to register online, please visit www.accp.com/acad.

Accepting Applications for the 2014 FIT Program

Are you a pharmacist-investigator interested in developing your research proposal for submission to a major funding agency? The ACCP Research Institute encourages you to consider submitting your proposal in an application to the **2014 ACCP Focused Investigator Training (FIT) Program**. The FIT Program is an annual, intensive, 5-day, hands-on program for up to 18 experienced pharmacist-investigators who have not yet been awarded significant peer-reviewed extramural funding as principal investigators. Working closely with expert mentors, the pharmacist-investigator will take necessary steps toward optimizing a K, R01, or similar investigator-initiated application for submission to the NIH or other major funding source.

The **2014 FIT Program** will take place **July 10–14, 2014,** at the University of Georgia College of Pharmacy in Athens, Georgia. The 2014 FIT informational brochure, FAQs, scholarship list, and application are available at http://www.accpri.org/fit/. There is still time to submit your **application by the March 31, 2014, deadline**.

Attention Students: Register Today for "Emerge from the Crowd: How to Become a Standout Residency Candidate"

Are you planning to complete a residency after graduation? You probably know that of the 3933 PGY1 applicants who participated in the ASHP Resident Matching Program in 2013, about 37% did not match with a program.[1] As competition among residency applicants continues to increase, it is important to know what type of candidates residency programs look for and learn the steps that can be taken now to distinguish yourself from the crowd.

Make plans now to join ACCP at Chicago's Hyatt Regency O'Hare this April for an informative and interactive program titled "Emerge from the Crowd: How to Become a Standout Residency Candidate." This unique program is designed to help first-, second-, and third-year pharmacy students maximize their ability to secure a residency position upon graduation.

Students attending this exciting new program will receive more than 11.0 hours of interactive programming over 2 days. The program will begin on Saturday, April 12, and conclude on Sunday, April 13, during ACCP's spring meeting, *Updates in Therapeutics® 2014*, at Chicago's Hyatt Regency O'Hare.

Students will learn from experts in the field of clinical pharmacy about the steps that they can take now to rise above the competition when applying for a residency during their final academic year. Topics include maximizing experiential education opportunities, engaging in scholarly activity, CV and portfolio development, interviewing successfully, and navigating the entire residency application process. Attendees will also have the opportunity to sit down face-to-face with current residents to learn from their perspectives and advice during a special roundtable session.

Register today at www.accp.com/ec. Questions? Contact us at (913) 492-3311 or e-mail accp@accp.com.

ASHP Resident Matching Program. Match Statistics. Available at http://www.natmatch.com/ashprmp/aboutstats.html. Accessed March 22, 2013.

ACCP Academy's Teaching and Learning Certificate Program Offers Live and On-Demand Webinars

The ACCP Academy Teaching and Learning Certificate Program is now offering 1-hour webinars as part of its enhanced 1-year curriculum. The purpose of the Teaching and Learning Certificate Program is to assist in the recruitment, motivation, and preparation of clinical educators who can inspire students to advance the profession of pharmacy.

Starting at only $69.00 for ACCP members and $99.00 for ACCP nonmembers, these live and on-demand webinars are an economical way to bring a real-time, interactive learning experience right into your home or office. Each webinar is made available to ACCP Academy graduates and current enrollees at no cost. Although participants do not have to be enrolled in the ACCP Academy to attend these webinars or to receive continuing pharmacy education credit, only enrollees in the Teaching and Learning Certificate Program will receive credit toward their certificate.

Register for the Upcoming Webinar on Case Writing

Join ACCP for this interactive 1-hour webinar aimed at enhancing your teaching and learning abilities. This webinar will be held Thursday, March 6, 2014, from 8:00 p.m. to 9:00 p.m. (EST). Presented by John M. Burke, Pharm.D., FCCP, FASHP, BCPS, professor of pharmacy practice and associate dean for postgraduate education at the St. Louis College of Pharmacy, this webinar will focus on the use of cases as a tool to enhance learning. The webinar will include a discussion of the types of cases used and the techniques for selecting cases to meet desired learning outcomes or specific learning situations. In applying the attributes of well-constructed cases, the participant will learn to construct cases that help achieve the intended learning outcomes.

This 1-hour webinar is designed for individuals participating in the Teaching and Learning Academy as well as for faculty interested in using cases as part of their didactic teaching. To receive 1.0 hour of continuing education credit, attendees must register and attend the webinar on March 6, 2014. Registration for "Case Writing" closes at midnight (CST), March 5, 2014. Take advantage of this learning opportunity by registering today. Participation in this webinar is limited to 100 registrants.

On-Demand Webinars Now Available

Prerecorded Teaching and Learning webinars are now available in the ACCP Bookstore. Simply visit the Bookstore at your convenience to view one or all of the prerecorded webinars, and then complete the associated posttest to earn 1.0 hour of continuing education credit. The following webinars are currently available for viewing:

- *Teaching and Technology Methods to Engage Students*
  Presented by Dr. Renato Cataldo, founder and chief executive officer of CrazyForEducation LLC, this webinar focuses on engaging students inside and outside class by applying technology to teaching and exploring methods to develop better peer-to-peer instruction scenarios. Participants will have the opportunity to review and select various electronic technologies to enhance pharmacy education. To view this webinar, visit the ACCP Bookstore.
- *Team-Based Learning in Pharmacy Education: Tools and Tips for Success*
  Presented by Dr. Andrea Franks, associate professor in the Department of Clinical Pharmacy at the University of Tennessee Health Science Center, College of Pharmacy, and in the Department of Family Medicine at the University of Tennessee Graduate School of Medicine, this webinar will provide an overview of team-based learning (TBL), highlighting its benefits for application in pharmacy education. Dr. Franks will describe key components of TBL, including team formation, the readiness assurance process, and team application exercises. Perceived barriers and potential solutions will also be reviewed. To view this webinar, visit the ACCP Bookstore.

Take advantage of these learning opportunities by registering for an upcoming live webinar or by accessing an on-demand webinar today. To learn more about the Teaching and Learning Certificate Program, visit www.accp.com/academy.

Preparing for a New Leadership Position? Enroll Now in the ACCP Academy's 1-Year Leadership and Management Certificate Program

The ACCP Academy's Leadership and Management Certificate Program helps prepare and motivate clinical pharmacists to meet the demands of assuming a leadership position. Established by ACCP in 2007, the program is designed to enable participants to better lead their personal lives and to guide and inspire their associates in the workplace. This enhanced ability will enable pharmacy leaders to better create the changes necessary to advance pharmacy's mission within the health care system. A certificate of completion is awarded to

participants who complete 26.0 contact hours, consisting of 18.0 hours of required modules and 8.0 hours of electives. The program's required modules are as follows:

- Prerequisite: Leadership Primer (6.0 hours)
- Module 1: Personal Leadership Development (4.0 hours)
- Module 2: Interpersonal Leadership Development (4.0 hours)
- Module 3: The Attributes of a Leader (4.0 hours)

Each elective module, consisting of 2.0 contact hours of instruction, is designed to meet the widely varied needs of program participants, focusing on specific areas of leadership and management not covered in-depth by the required modules.

Begin to position yourself as a leader in clinical pharmacy by enrolling in the ACCP Academy's Leadership and Management Certificate Program. Leadership and Management programming will be offered April 11–12 in conjunction with ACCP's Updates in Therapeutics® 2014 in Rosemont, Illinois.

Visit the ACCP Academy today at www.accp.com/academy to enroll and learn more about the Leadership and Management Certificate Program. To view the complete schedule and register for Leadership and Management programming this spring, visit www.accp.com/acad.

Washington Report

John McGlew
Associate Director of
Government Affairs

ACCP Medicare Initiative Update

Part B Comprehensive Medication Management Coverage vs. "Provider Status": Examining the Difference

ACCP has gone to great lengths to emphasize the importance of defining its Medicare Initiative as an advocacy effort to pursue legislation that would recognize the direct patient care services of qualified clinical pharmacists as a covered benefit under Medicare Part B, rather than a campaign to achieve "provider status."

There is, of course, a political aspect to this definitional nuance. Our experience working to address Part B coverage in 2001 as part of the multi-organizational "Pharmacist Provider Coalition" taught us that focusing on patients, rather than providers, and on "the what" (the specific services to be provided), rather than "the who" (the practitioner who provides the services), will undoubtedly resonate better with policy-makers. But the distinction we draw is much more than just a public relations exercise. It also reflects the recognition that Medicare doesn't make payments to providers simply because they are included "on the list" of practitioners who may comprise a health care team. Medicare pays for specific covered services delivered to patients by eligible providers. A legislative proposal that would add pharmacists to the list of eligible providers under section 1861 of the Social Security Act would do little to expand opportunities for delivering care to patients unless it were to include coverage for a defined process of care that pharmacists could bill for, whether under the existing fee-for-service structure or through evolving payment and delivery models.

While advocating for our initiative on Capitol Hill during the past 12 months, we have encountered several proposals from policy-makers and other key stakeholders that would recognize pharmacists as providers without addressing covered patient care services or the payment structure. ACCP believes that pursuing this "quick-fix" approach is the wrong tactic. We are committed to the ACCP Medicare Initiative because we believe it is right for the profession and right for patients. Simply "getting on the list" without addressing the specific types of services pharmacists can reliably provide would do little to advance the profession or to benefit patient care.

The Better Care, Lower Cost Act

On Capitol Hill, activity around Medicare payment reform clearly highlights the need to focus on coverage for services, rather than "status" for providers. A recently introduced piece of legislation would establish an integrated chronic care delivery program (Better Care Program or BCP) that promotes accountability and better care management for chronically ill Medicare patients while encouraging investment in infrastructure and redesigned care processes that result in high-quality, efficient service delivery for the most vulnerable and costly population.

This bipartisan, bicameral initiative, introduced by Senators Wyden (D-OR) and Isakson (R-GA) (S. 1932) and Reps. Paulsen (R-MN) and Welch (D-VT) (H.R. 3890), would allow groups of providers to establish "better care practices," which would in turn receive newly calculated, risk-adjusted, capitated payments rewarding better health outcomes for enrolled beneficiaries. Of importance, pharmacists were included on the list of BCP-eligible professionals, an indication of the growing awareness among lawmakers of the need to incorporate pharmacists as fully integrated members of the health care team responsible for managing complex medication regimens.

However, the legislative language—as currently written—states that only services currently included under Parts A and B of the Medicare program would be eligible for coverage under the proposed Better Care Program. So, although pharmacists would be recognized as "providers," the medication management services that pharmacists typically deliver would not be covered. In terms of improving patient care and advancing the profession, the provider "status" granted under the legislation seems more symbolic than substantive.

A Potential Legislative Vehicle?

ACCP has met with the offices of the original cosponsors of the Better Care, Lower Cost Act to thank them for their work to improve patient care for chronically ill Medicare beneficiaries and for their recognition that pharmacists should be incorporated into integrated patient-centered teams. During those meetings, we also highlighted the fact that without coverage for a defined set of services, the program will struggle to achieve its goal of enabling all members of the team to practice at the top of their licenses.

Recognizing that these recently introduced bills are unlikely to move forward until 2015 at the earliest, we believe the goals of this legislative proposal are entirely consistent with our own Medicare Initiative. We will continue to work with the cosponsors to discuss the possibility of incorporating our language into this much broader bill as it eventually emerges from committee.

The California Experience

The California law (S.B. 493) that recognizes pharmacists as health care providers and expands opportunities for pharmacists to deliver medication management services in formal collaboration with other members of the health care team went into effect on January 1, 2014. ACCP welcomed the passage of this important new law, which will improve patient access to basic health care services and establish recognition as Advanced Practice Pharmacists (APPs) for practitioners who earn certification in a relevant area of practice, complete a postgraduate residency program, or provide clinical services to patients for 1 year under a collaborative practice agreement.

However, the California law does not establish coverage for services under the state Medicaid program (Medi-Cal), nor does it include any mandate that would require private payers to cover pharmacists' services. The absence of any coverage requirement or payment structure in the California law highlights the important distinction between a legislative effort to achieve provider status and ACCP's initiative, which seeks to establish a new benefit under Medicare for a defined set of services.

In highlighting this distinction, ACCP does not intend in any way to detract from the achievement of pharmacists in California in securing passage of their bill, nor does ACCP question its importance in helping improve patient access to pharmacists' services. However, in the context of the Medicare program, ACCP believes that its own advocacy efforts are best focused on trying to ensure coverage for comprehensive medication management services, including payment structures, rather than on simply seeking recognition as providers.

Positioning for Alternative Payment Models in a Fee-for-Service Structure

ACCP's Medicare Initiative is designed to position clinical pharmacists to participate as fully integrated members of the health care team in evolving care delivery and payment models. The process of care we propose is consistent with the vision for medication management in the Patient-Centered Medical Home (PCMH) endorsed by the multidisciplinary Patient-Centered Primary Care Collaborative (PCPCC) and is a component necessary to achieve many of the quality measures that Accountable Care Organizations (ACOs) must meet. We have made it clear that our proposal is not designed to encourage individual pharmacists practicing in silos to "hang out their shingle" and bill Part B.

Positioning the profession for the future of the Medicare payment structure inevitably raises an important question from policy-makers wary of the potential political and financial consequences of adding a new benefit to an already overburdened Medicare program. If we expect that clinical pharmacists will provide direct patient care services as fully integrated members of health care teams under new payment models in the future, why is it necessary to amend section 1861 of the Social Security Act to add this new benefit in the first place? If the team values the contribution of clinical pharmacists in helping patients achieve clinical outcomes, won't market forces dictate that medication management services be included and pharmacists be compensated through the team-based payment structure?

The answer to this question is that despite all the hard work Congress has undertaken to replace the Sustainable Growth Rate (SGR) and develop new Medicare payment structures that reward outcomes rather than volume, Medicare is still operating under a fee-for-service structure, and it is unlikely that the program will entirely abandon this approach for many years.

In addition, as various proposals for alternative payment models emerge in Congress, section 1861 is almost invariably referenced as the guideline for the

services that will be covered under the new models. As a result, ACCP remains committed to amending section 1861, not to facilitate clinical pharmacist participation in siloed, fee-for-service billing, but to remove any remaining obstacles to the full integration of clinical pharmacists (delivering comprehensive medication management services to chronically ill Medicare patients who need them) under all the new payment and delivery models that Medicare adopts.

Medicare Initiative Advocacy Resources

ACCP has added a new document to its Medicare Initiative Resource Page. The Medicare Initiative One Page Summary provides a concise overview of our advocacy effort and why "getting the medications right" is an essential objective for a modernized, cost-effective, and quality-focused Medicare program.

In addition, ACCP members are encouraged to familiarize themselves with two important documents summarizing our legislative proposal:

Click here to access the Medicare Initiative Congressional Issue Brief.

Click here to access the Medicare Initiative Data Document

Please also visit our Legislative Action Center to learn more about supporting a comprehensive medication management benefit under Medicare Part B.

Your Contribution to ACCP-PAC Can Help Advance Our Medicare Coverage Initiative

The political reality is that a legislative initiative cannot move forward purely on the strength of its own merits—grassroots advocacy and financial contributions are key to demonstrating support for an initiative from districts and states well beyond the Beltway. ACCP calls on every member of the College to contribute to the ACCP-PAC.

If 100% of ACCP members were to participate in the PAC, it would send a very powerful message to candidates for office who ask for evidence of the level of support from the clinical pharmacy profession for our Medicare Initiative. We urge all ACCP members to make a contribution to the PAC, however small. A big war chest is always important when it comes to political contributions, but a PAC is not measured only in terms of dollars—participation is also important—and we call on all of our members to make a contribution to the PAC, no matter how small.

Only ACCP members are eligible to contribute to the PAC. With more than 14,000 members, ACCP is in a position to become one of the most prominent pharmacy PACs in Washington. But to do this, we need widespread support among the membership.

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

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From the Desk of the *Pharmacotherapy* Editor-in-Chief

PHARMACOTHERAPY
The Journal of Human Pharmacology and Drug Therapy

Lindsay Devane, Pharm.D., FCCP

Dear ACCP Colleagues:

A little more than a year has passed since I replaced Dr. Richard Scheife as editor-in-chief of *Pharmacotherapy*. In the future, I'll keep members abreast of new developments at the College's official journal through this regular column.

Pharmacotherapy continues to be a top choice among many of the College's most productive researchers and scholars for submitting their best work for publication. In 2013, almost 550 new submissions competed for publication space in the journal. The number of pages that can be devoted to scientific content, notably original research and therapeutic reviews, is limited by arrangement with our publisher, Wiley-Blackwell, to about 12 or 13 articles per issue. This means that the editors and reviewers need to be highly selective in accepting for publication the reports that contribute to the knowledge of human pharmacology and drug therapy for the greatest number of readers. These choices sometimes involve tough decisions that regrettably disappoint some authors.

In striving to publish the best scientific content in *Pharmacotherapy*, the scientific editors conduct a periodic review of the types of articles traditionally published in the journal. Case reports serve as one example. Many journals have discontinued the practice of publishing single case reports, as they represent anecdotal evidence from an "N of 1" study that is often uncontrolled and contains significant sources of potential bias. Nonetheless, in an editorial in the journal last February, I defended the need to publish case reports in *Pharmacotherapy*. Novel and significant events occur during the clinical use of drugs that justify occasionally

bringing the details of a single patient experience to our readers' attention.

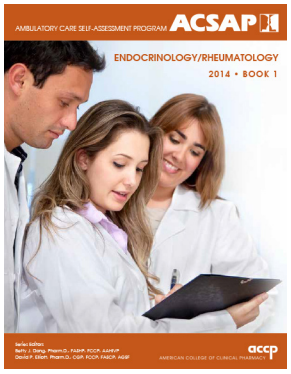
The journal's scientific editors recently reviewed another content area of the journal, the bibliographies of key articles, and recommended to the *Pharmacotherapy* Board of Directors that the publication of these articles be discontinued. Although of potential interest to ACCP members, these specialized reports have diminished value today compared to 2004, the year the journal first began publishing these collections of key citations. Access of College members to multiple sources of bibliographic data is substantially improved today. A citation analysis has shown a low citation rate for these articles. After considerable discussion and input from a variety of stakeholders, the Board of Directors accepted the scientific editors' recommendation last November to officially discontinue the publication of these articles.

The scientific editors, Editorial Board, and Board of Directors are seeking new ways to address the information needs of the ACCP membership. This year, the leadership of *Pharmacotherapy* will engage the PRN leaders in discussions of how to involve their respective members in producing articles of high value for the journal. Meanwhile, I encourage ACCP members interested in weighing-in on *Pharmacotherapy*-related issues to drop me a line at devanel@musc.edu. I look forward to hearing from you and to communicating with you regularly through this *ACCP Report* feature.

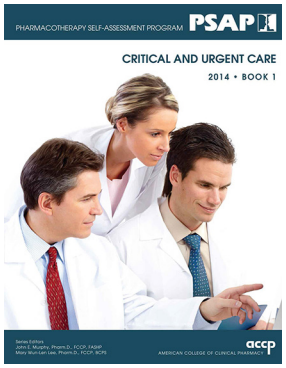
New Features and Content Added to ACCP E-Media Products for Recertification

In launching the E-media packages for ACCP recertification products last year, ACCP increased the portability of these products for "on-the-go" professional development. Now, the E-media versions of PSAP and ACSAP possess added functionality, providing a more complete rendition of graphics for viewing on tablets, e-readers, and smartphones. Boxes, tables, algorithms, and illustrations are now fully integrated into the E-media versions of both PSAP and ACSAP. This rendering allows images to be easily zoomed in, rotated, or moved for closer inspection.

E-media files can be accessed from the My Account page and downloaded to your favorite device. Formats provided include E-pub (compatible with most readers) and MOBI (for the Amazon Kindle family of products). Included in all E-media packages is the online book (interactive PDFs that can be downloaded to your desktop or printed). In addition, the E-media package for PSAP includes the popular PSAP Audio Companion, which provides MP3 files that can be downloaded to a listening device or burned onto an audio CD.



Endocrinology/Rheumatology, the current release in the *Ambulatory Care Self-Assessment Program* (ACSAP), presents evidence-based updates on a wide range of disorders, including the treatment of diabetes and obesity, adrenal/pituitary disorders, and the more common rheumatologic disorders. The deadline for submitting a required posttest for an available 18.5 hours of Board Certified Ambulatory Care Pharmacist (BCACP) recertification credit is May 15, 2014.



Critical and Urgent Care, the current release in the *Pharmacotherapy Self-Assessment Program* (PSAP), presents the latest evidence-based information on the pharmacologic management of the disorders commonly encountered in ICUs, emergency departments, and medical/surgical wards. The deadline for submitting a required posttest for an available 23.0 hours of Board Certified Pharmacotherapy Specialist (BCPS) recertification credit is May 15, 2014.

To access sample chapters, obtain faculty information, or place your order, please visit the ACCP Online Bookstore.

ACCP National Student Network Advisory Committee Applications Due June 13

Attention pharmacy students: Would you like to become more involved with the American College of Clinical Pharmacy? ACCP student members who wish to develop leadership skills, expand opportunities for pharmacy students within ACCP, and introduce other students to the many facets of clinical pharmacy are encouraged to apply for appointment to the 2014–2015 ACCP National Student Network Advisory Committee.

The National Student Network Advisory Committee is an ACCP committee composed of members appointed each year by the ACCP President. 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; this individual serves 1 year

as 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 2014–2015 ACCP National Student Network 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 13, 2014.

ACCP Volunteer Recognition

The following individuals have made significant contributions to ACCP during the past 2 years. ACCP congratulates these individuals for being nominated by their peers and thanks them for their significant contributions to the organization.

Middle East Chapter of the American College of Clinical Pharmacy

Adeline Saliba, Pharm.D., MBA, pharmacy/medication safety manager at the Corniche Hospital in Abu Dhabi, United Arab Emirates

2012–2013 ACCP National Student Network Advisory Committee

Kevin Chung, pharmacy student at the University of Southern California

Whitney Davis, pharmacy student at the University of North Carolina Eshelman School of Pharmacy

Norman Fenn, pharmacy student at the University of Colorado Skaggs School of Pharmacy and Pharmaceutical Sciences at the Anschutz Medical Campus

Roseann Gammal, Pharm.D., PGY1 resident at the University of North Carolina Hospitals

Andrew Himsel, pharmacy student at the Texas A&M University Health Science Center, Irma Lerma Rangel College of Pharmacy

Jared Mannen, Pharm.D., PGY1 resident at St. Joseph's Hospital

Cara Milburn, pharmacy student at the West Virginia University School of Pharmacy

Diwura Owolabi, Pharm.D., PGY1 resident at Allegheny General Hospital

Christine Puschak, Pharm.D., PGY1 resident at Thomas Jefferson University Hospitals

Courtney Watts, Pharm.D., PGY1 resident at the MD Anderson Cancer Center

Kimberly Won, pharmacy student at the University of Colorado Skaggs School of Pharmacy and Pharmaceutical Sciences at the Anschutz Medical Campus

Visit http://www.accp.com/membership/vrp.aspx to view the current listing of volunteers recognized and their specific contributions to the College.

ACCP National Resident Advisory Committee Applications Due June 13

Are you a resident or fellow who is interested in becoming more involved in ACCP? The American College of Clinical Pharmacy encourages postgraduate trainees who would like to enhance their leadership skills, network with colleagues across the country, and interact with clinical pharmacy leaders to apply for appointment to the 2014–2015 National Resident Advisory Committee.

The National Resident Advisory Committee is a standing committee composed of residents, fellows, or graduate students members appointed each year by the ACCP President-Elect. Members serve a 1-year term, and the committee is typically composed of 8–12 members. Appointed leadership positions include the Chair (1-year term) and the 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 resident 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-mail 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. To obtain additional information on the application process or to enter your application, please visit http://www.accp.com/membership/rac.aspx. The deadline for applications is June 13, 2014.

New Members

Yomna Abdel Aziz
Madison Adams
Sarah Adkins
Chanchal Agr
Nabeela Ahmed
Mandana Akhoondan
Troy Albrecht
Lincoln Alexander
Rayd Almehizia
Marwah Al-Nowais
Saeed Alzghari
Prisca Anamelechi
Artina Anderson
April Andreen
Rebecca Antonelli
Melissa Aquino

Christine Armbruster
Elizabeth Autry
Nicole Avant
Saima Ayub
Elisa Baddour
Reem Bahmaid
Akeem Bale
Peter Barakat
Melissa Bastacky
Dharmesh Bavda
Julia Belo
Renee Berube
Asif Bhagat
Ellen Bickel
Monique Bidell
Tyson Bigelow
Asha Birmingham
Ethan Blashford
Megan Bodge
Anna Bogdanowicz Suwada
Krystle Bouchard
Robert Bovara
Alexandra Braun
Margaret Brown
Kimberly Bucher
Natasha Burgener
Derek Burns
Jesse Butler
Taylor Buxton
Marlene Calix
Megan Carroll
Jovanna Casas
Michelle Cefaretti
Kevin Chamberlin
Connie Chan
Melanie Chan
Erin Chang
Felicia Cheng
Soyoung Chon
Supatat Chumnumwat
Jason Ciaramitaro
Jacqueline Clark
David Cunningham
Jessica Czapnik
Will Dai
Stephanie Daniels
Drusty Dave
Alyssa Davis
Debra Davis
Sarah Dawson
Alexandra DeChristopher
Elena Denisko
Caroline Derrick
Rachel Dispennette
Chris Dolan
Chris Dowden
Jacqueline Dunning
Johnathan Dykes
Craig Eaton
Paula Emerson
Andrea Evankovich
Walizada Fatima
Mallory Fay
Corinne Feehan
Leah Finn
Elise Fleishaker
Kelsie Flynn
Densley Francois
Jesse Fulmer
Christopher Gauger
Elizabeth Gavioli
Jessica Geiger-Hayes
Ginger George
Janetta Geronian
Merrideth Gilley
Karina Gonzalez-Rosario
Kavita K. Gopal
Elizabeth Gorski
Abigail Gregg
Alexandra Grochulski
Amanda Gronniger
Riti Gupta
Maureen Hagedorn
Alexis Hagenhoff
Beth Hager
Shawn Hagland
Ashley Hannings
Cameron Harmon
Micheal Harrington
Leslie Hart
Anna Heberle
Rachael Hiday
Jessica Ho
Dung Hoang
Olivia Hollot
Dayana Holzer
Gloria Huh
Tony Huynh
Andrea Ignacio
Jacqueline Iversen
Megan Jamison
Amorette Jeng
Eric Jenkins
James Jepson
Erin Johnson
Jessica Jones
Sarah Jorgensen
Sari Jouihan
Michelle Jung
Stephen Jung
Nami Kan
Angela Kao
Rohin Kasudia
Daniel Ketchum
Nehrin Khamo
Danny Kim
Ivanna Kireeva
Ryan Kirkpatrick
Kelsey Knotts
Priscilla Ko
Shawna Kraft
Mai Li Kross
Theresa Kruger
Lawrence Ku
Ninh (Irene) La-Beck
Josh Ladwig
Kieu Le
Brian Lee
Alyson Leonard
Patrick Lewis
Michelle Lighthart
Sarah Lindstrom
Victoria Lippert
Jason Lockhart
Tabitha Loomis
Misayo Lopez
Leighton Lugg
Matthew Lytle
Amy Mahlum
Hien Mai
Michelle Mancuso
Sana Mandal
Nicholas Massie
Stephanie Mathis
Lauren McCaulley
Issam McDoom
Ken Meier
Shelby Merchant
Joseph Merkel
Daniel Mickleborough
Alex Middendorf
Julie Miller
Suzanne Molino
Kerry Moore
Ryan Moore
Qamar Munawar
Kristen Nagy
Terri Newman
Edward Newton
Chi Nguyen
David Nguyen
Hieu Nguyen
Julia Nguyen
Linda Nguyen
My Nguyen
Paulina Nguyen
Tammy Nguyen
Thanh Nguyen
Tina Nguyen
Ethel Odiakosa
Ji Eun Oh
Adeola Oke
Lucas O'Neil
Marla O'Shea-Bulman
James Paarlberg
Ashley Pappas
Badal Patel
Jignasha Patel
Manisha Patel
Tushar Patel
Jason Pennell
Rachel Perry
Franklin Phan
Sarah Pierce
Devon Placides
Betsy Potteiger
Jeff Pustulka
Nicole Rabs
Fatai Raji
Kelley Ratermann
Stephanie Ratliff
Ethan Rauch
Valerie Ravenna
Jake Regnitz
Patrick Richardson
Nicole Rivera-Torres
Megan Robinson
Ryne Roseberry
Danya Roshdy
Dennis Russell
April Ruzicka
Mahshid Samiei-afshar
Elyse Schwab
Sarah Servid
David Shadick
Noopur Shah
Mohsen Shamai
Amanda Shelton
Ryan Shely
Berenice Sheridan
Kourtney Shewmaker

Sean Singletary
Evan Slagle
Nicole Smith
Cathy Spencer
Steve Stamos
Heather Stanton
Keri Stenger
Courtney Stouse
Lilly Tang
Melissa Tasripin
Leanne Thai
Scott Thelemaque
Steve Theodorou
Amanda Tobias
Rebecca Tombleson
Jena Torpin
Betsy Torres
Kathryn Tremolet De Villers
Matthew Trump
Duyen Truong
Shini Tsai
Kelsey Turcotte
Andrew Vanderwall
Bessie Vardianos
Benjamin Vermillion
Lauren Vernon
Sarah Vickey
Diep Vu
Kha Vu
Valerie Vuylsteke
Lindsay Waddington
Taneesha Watson
Jessica Whalen
Chelsea Wilson
Erica Wilson
Sarah Wisecup
Michele Wofford
Marissa Wolff
Jeanna Wong
Allyson Wunderlich
Lauren Wyatt
Esther Yi
Kyle Zacholski
Christopher Zhu
Jing Zhu

The following individuals recently advanced from Associate to Full Member:

Michael Armahizer
Aaron Bagnola
Samantha Bailey
Camille Beauduy
Jill Butterfield
Alice Ceacareanu
Dyan Cherry
Catherine Colandrea
Justina Damiani
Kyle Davis
Jennifer Dizney
Julio Duarte
Brianne Dunn
Megan Evans
Olabisi Falana
Alexander Flannery
Sarah Fogg
Cristy Gaddy
Sara Gaines
Matthew Geriak
Kathryn Hammer
Whitney Holmes
Megan Holsopple
Seth Housman
Michelle Huber
Arin Jantz
Katherine Johnson
Julie Ann Justo
Seferina Kim
Ethan Klein
Matthew Labreche
Maria Lenis
Lisa Li
Eric Maass
Juan Maldonado
Jason Mayes
Julie Ostrye
Monte Overcast
Isabel Pande
Khushbu Patel
Eric Paulus
Michelle Pisano
Natalie Rodenberg
Ajaydip Sahota
Joy Shea
Jennifer Splawski
Brandi Strauser
Lee Stringer
Rachel Swope
Kimberly Trobaugh
Vellivur Viswesh
Jonathan Wong
Rony Zeenny

New Member Recruiters

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Kristin Koziol
Lauren Moushey
Stefanie Nigro
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Patricia Orlando
Mary Temple Cooper
Jordan Weed
Elizabeth Wood
Mohammad Zaitoun
Kimberly Zitko