Learn to Design, Conduct, and Publish Meta-Analyses - June 18-20, 2018

Are you seeking to increase your scholarly activity and explore the feasibility of adding meta-analyses to your list of current or future publications? ACCP has partnered with the Center for Health Outcomes & PharmacoEconomic Research at the University of Arizona College of Pharmacy (the HOPE Center) to make the center’s recognized hands-on training program in meta-analysis available to ACCP members at a significantly reduced registration rate.

By integrating in-depth instruction and action-oriented workshops, this program will teach participants to design protocols, perform effective searches for data sets, screen studies and extract data, and conduct and interpret meta-analysis and meta-regression. The 3-day curriculum is designed for professionals and trainees with entry to intermediate levels of prior knowledge in meta-analysis.

To further encourage members to publish meta-analyses pertinent to clinical pharmacy practice and research, in addition to reducing their registration rate, ACCP will competitively award up to three $500 scholarships on the basis of applicants’ meta-analysis projects and commitment to present and submit their work for publication. These scholarships can be used for lodging, travel, meals, and any other expenses associated with attending the training program.

To view the detailed program agenda and registration information, click here.

Register for ACCP’s Regional Board Certification Prep Courses

ACCP’s newest educational offering—regional Board Certification Prep Courses—will be presented April 21–22, 2018, at the Western University of Health Sciences College of Pharmacy in Pomona, California. The program will include preparatory courses in Ambulatory Care Pharmacy and Pharmacotherapy, as well as two new prep courses in Cardiology Pharmacy and Infectious Diseases Pharmacy.

The new regional ACCP Board Certification Prep Courses will be condensed for presentation over a 2-day period to minimize attendees’ travel time, expense, and time away from practice. Registration will include the live weekend programming plus the on-demand supplemental course content available online following the live sessions. This is an excellent opportunity to learn from recognized expert faculty in each course’s focused area of therapeutics.

The registration deadline is April 16.

2018 ACCP Global Conference on Clinical Pharmacy Call for Abstracts Now Open

Important Dates:
- **Regular Decision** (accept/decline notification by August 15, 2018)
  - June 15, 2018: Regular decision submission deadline for Original Research, Systematic Reviews, Case Reports, Clinical Pharmacy Forum, and Advances in International Clinical Pharmacy Practice, Education, or Training abstracts.
  - July 15, 2018: Regular decision submission deadline for Research-in-Progress abstracts (Students and Residents and Fellows).

To review the complete submission instructions, guidelines, and review criteria or to submit an abstract, visit the [ACCP website](http://www.accp.com). All abstracts presented, except for “Encore” and “Research-in-Progress” presentations, will be published online in an official ACCP journal. Only the abstract title, authors, and original citation will be published for “Encore” presentations. All accepted abstracts will be provided full-text in the ACCP Meeting App.

The Global Conference will be held at the Washington State Conference Center in Seattle, Washington, October 20–23, 2018.
Pharmacotherapy Publications, Inc. (PPI) Releases New Strategic Plan

The PPI Board of Directors recently completed a strategic planning process and approved the final version of the new strategic plan at its winter 2018 board meeting. The plan is designed to guide increased efforts to advance and disseminate scholarship, deliver value, and enhance PPI’s publications and services.

ACCP wishes to thank the members of the PPI Board of Directors and staff for their work throughout this process: Leigh Ann Ross (chair), Jerry Bauman, Lindsay DeVane, Brian Hemstreet, Michael Maddux, William Miller, and Keri Sims (PPI/ACCP staff).

The PPI Board of Directors is now focused on implementing the strategic plan—look for the rollout of new PPI initiatives, including the release of the Journal of the American College of Clinical Pharmacy (JACCP), in October.

Figure. Overview of the 2018 Pharmacotherapy Publications, Inc. (PPI) strategic plan.

Our Mission
To improve human health through the dissemination of pharmacotherapeutic and clinical pharmacy scholarship.

Our Vision
To be the leader in worldwide dissemination of cutting-edge pharmacotherapeutic and clinical pharmacy scholarship.

Our Priorities

Advance & Disseminate Scholarship
PPI will advance and disseminate scholarship in pharmacotherapy and clinical pharmacy worldwide by:
- Increasing the impact and relevance of Pharmacotherapy as a journal dedicated to clinical pharmacology and pharmacotherapeutics.
- Establishing JACCP as the journal of choice for publication of papers relevant to clinical pharmacy practice.
- Promoting Pharmacotherapy and JACCP to authors and readers.

Deliver Value
PPI will deliver value to authors, readers, and reviewers by:
- Publishing content that is highly relevant to clinical pharmacology and clinical pharmacy audiences.
- Supporting, developing, and promoting prospective and current authors.
- Optimizing recognition of authors and reviewers.

Enhance Publications & Services
PPI will enhance its publications and services by:
- Continually improving the quality of Pharmacotherapy and JACCP.
- Expanding the readership of Pharmacotherapy and JACCP.
- Establishing a long-range plan to develop, support, and enhance PPI offerings that advance scholarship in pharmacotherapy and clinical pharmacy worldwide.
The journal’s editorial board consists of scholars representing the many different facets of clinical pharmacy practice. The board is committed to producing a journal that will benefit clinical pharmacists and their practices.

The first issue will be published in October 2018, and all ACCP members will receive both JACCP and Pharmacotherapy with no increase in membership dues.

**There’s Still Time to Apply: Applications for MeRIT and FIT Programs Due March 31**

The ACCP Research Institute’s Mentored Research Investigator Training (MeRIT) and Focused Investigator Training (FIT) programs will be held June 25–29, 2018, on the campus of the University of Michigan College of Pharmacy in Ann Arbor, Michigan.

For more information about the FIT and MeRIT programs or to download an application form, visit the RI’s Investigator Development page at www.accpri.org/investigator/. Applications will close March 31, 2018. All inquiries about these programs and completed applications should be sent by e-mail to Carla Scarborough at cscarborough@accp.com.

**Emerge from the Crowd: How to Become a Standout Residency Candidate**

On April 21–22, ACCP will conduct two 1-day Emerge from the Crowd workshops at the Western University of Health Sciences College of Pharmacy in Pomona, California. This unique program has been designed to help first-, second-, and third-year pharmacy students maximize their ability to secure a residency position upon graduation.

The quotes above are just a small sampling of the feedback received from students who attended a 2017 Emerge from the Crowd workshop. Students can attend one of these 1-day workshops and walk away with tangible results, including a revised curriculum vitae and a letter of intent—vital components that can significantly influence the success of one’s residency application. Workshop participants will also take part in interactive sessions focused on navigating the ASHP Midyear meeting, approaching the residency application process, and interviewing successfully. Registration is open at www.accp.com/meetings/ec18/. For information on group rates, please contact Jon Poynter (jpoynter@accp.com).

**2018 ACCP Clinical Research Challenge: Round 2 Is Under Way**

ACCP is pleased to announce that competition is under way in the third annual Clinical Research Challenge (CRC). Research and scholarship contributes to improved health outcomes for patients and advancement of the clinical pharmacy discipline. Critically evaluating and applying primary literature is an essential skill for students pursuing a career in clinical pharmacy.

This innovative and unique competition offers teams of three students (those in the first two professional years of their degree program) the opportunity to compete and advance through three rounds of competition. The competition began February 12 with 79 teams participating in round 1: The Online Journal Club. The Online Journal Club examination was based on the following literature:


Teams achieving the top 40 scores advanced to round 2: Letter of Intent (LOI) Submission. These teams were given a clinically focused research question and had 2½ weeks to develop and submit a letter of intent following the criteria outlined here. The LOI submissions were due March 2, 2018, and are currently under evaluation by the CRC Review and Oversight panels. Teams advancing to round 3 will be announced March 23. To view a list of teams participating in each round of the competition, please click here.
Please join ACCP in recognizing and thanking the members of the CRC Review and Oversight panels for their contributions and service to the College in advancing this important program for the College’s student members.

2018 CRC Oversight Panel
Beth Phillips, Pharm.D., FCCP, BCPS (Oversight Panel Chair)
Sandra Benavides, Pharm.D., FCCP
Lori Dickerson, Pharm.D., FCCP
Doug Fish, Pharm.D., FCCP, BCPS-AQ ID
Anne Hume, Pharm.D., FCCP, BCPS
Asad Patanwala, Pharm.D., FCCP, BCPS

2018 CRC Review Panel
Rita Alloway, Pharm.D., FCCP, BCPS
Scott Benken, Pharm.D., BCPS
Kyle Burghardt, Pharm.D.
Jennifer Cocohoba, Pharm.D., BCPS
Robin Corelli, Pharm.D.
Erika Ernst, Pharm.D., FCCP, BCPS
Mike Ernst, Pharm.D., FCCP, BCPS
Rob MacLaren, Pharm.D., FCCP, FCCM
Scott Micek, Pharm.D., FCCP, BCPS
Tien Ng, Pharm.D., FCCP, BCPS
Daniel Riche, Pharm.D., FCCP, BCPS
Phillip Rodgers, Pharm.D., FCCP, BCPS
James Tisdale, Pharm.D., FCCP, BCPS
Zachary Stacy, Pharm.D., M.S., BCPS
Joseph Vande Griend, Pharm.D., FCCP, BCPS


President’s Column
Direct-to-Consumer Marketing of Genetic Tests May Result in Widespread Clinical Implementation of Pharmacogenomics, Regardless of Health Professional Involvement

Jill M. Kolesar, Pharm.D., M.S., FCCP, BCPS

On March 6, 2018, 23andMe was granted the first FDA approval for a direct-to-consumer genetic test to assess cancer risk. The 23andMe test includes three variants of the BRCA1 and BRCA2 genes that are associated with breast and ovarian cancer. Until now, genetic testing for cancer risk was conducted exclusively by physicians, often in collaboration with a genetic counselor. Insurers typically paid for the test if eligibility criteria were met. The cost ranged from about $500 to $4000, depending on the manufacturer and the number of mutations tested in the BRCA1/2 gene. With the approval of the 23andMe BRCA1/2 test, individuals can now order a test kit online or in a pharmacy, spit in the tube, and access their results via a web portal. The test is now paid for by the consumer and costs about $200. In its FDA filing, 23andMe reported a high level of accuracy (greater than 99% concordance with standard sequencing) and precision (greater than 99% reproducibility and repeatability). In addition to evaluating assay accuracy and precision, 23andMe assessed user comprehension of the reports as 90% or greater.

Direct-to-consumer genetic tests are not new and, before 2013, were marketed by manufacturers without FDA oversight. However, in 2013, the FDA, citing concerns of inaccurate test results and consumer safety, forced companies to stop marketing consumer tests that evaluated genetic-based risks of diseases and began to classify genetic health risk tests as medical devices, requiring a stringent approval process for individual tests. In late 2017, the FDA relaxed its stance on these tests and exempted genetic-based risk tests from premarket approval.1 Manufacturers of these types of tests now need a one-time FDA review, after which new tests can be developed and marketed without further FDA oversight.

Proponents of direct-to-consumer genetic testing cite a patient’s right to access this information and engage in his/her own health assessment. Opponents of consumer-driven genetic testing describe lack of actionability, poor quality of tests and access to data analysis, and concerns over patient understanding of the results. However, whether pharmacists are in favor of or opposed to direct-to-consumer genetic testing is largely irrelevant. Given that DNA sequencing services are now both reasonably priced and available to consumers, the crucial issue has become not whether the testing should be done, but if and how pharmacists should incorporate direct-to-consumer genetic test results into their practice.

Pharmacogenomic testing services are already available in some community pharmacies. In this type of testing, which is typically a collaborative service between a physician and a pharmacist, the physician orders a small panel test, and the pharmacist interprets the report and provides recommendations to the physician for adjusting medications. Insurance coverage may be sought in these instances but is not always approved.

Clinical pharmacists also offer pharmacogenomic services, for which multiple models have been developed. Most common among these models are the provision of preemptive genotyping of all patients,2 the use of drug-focused clinics where a patient taking a specific medication is referred to a pharmacist-managed clinic,3 the implementation of personalized
medicine with pharmacogenomic consult services, and the application of precision medicine within molecular tumor boards. Similar to efforts in the community pharmacy, health systems–based models usually involve pharmacist-physician collaboration, with coverage of the cost of the testing and visit sought from a third-party payer or covered by the institution. Additional information about current models of pharmacist-run pharmacogenomic services is forthcoming in the white paper currently being developed by the 2018 ACCP Clinical Practice Affairs Committee.

Because of FDA regulatory changes, direct-to-consumer tests are now both less expensive and more accessible than the current genetic testing services offered by health systems; as a result, more patients will likely present to either pharmacists or physicians with results in hand. As the recognized leader in implementing clinical pharmacogenomics, the pharmacy profession must develop evidence-based standards and best practices for incorporating direct-to-consumer testing into contemporary clinical practice. Given that 90% of all consumers can both read and understand a 23andMe report, failure to at least evaluate the value of consumer-driven genetic testing could result in the clinical implementation of pharmacogenomics outside the traditional U.S. health care system.

References:


ACCP Member Spotlight: Kalynn A. Rohde

Dr. Kalynn A. Rohde, Pharm.D., BCCCP, is a critical care pharmacist at the University of North Carolina Medical Center in Chapel Hill, North Carolina, where she is involved in quality improvement projects, clinical research, and precepting and mentoring both pharmacy students and residents. Rohde also serves in a unique role as the heparin-induced thrombocytopenia stewardship pharmacist at her practice site. She earned her Pharm.D. degree from the University of Wisconsin-Madison. She then completed a PGY1 pharmacy practice residency and a PGY2 specialty residency in critical care at the University of North Carolina Medical Center. Rohde is board certified in critical care pharmacy.

At the suggestion of her high school guidance counselor, Rohde attended “Discovery Day” at the University of Wisconsin School of Pharmacy. During this event, Rohde was determined to become a clinical pharmacist, yet her pathway to critical care was not as straightforward. After her fourth year in pharmacy school, she became interested in infectious diseases. However, during her PGY1 training, she rotated through the neurosciences intensive care unit and “absolutely fell in love with critical care.” In this practice setting, Rohde states that she feels “challenged every day—there is always something new to learn. I enjoy the complexity of the patient population and the endless quality improvement and research opportunities.”

Rohde first became involved in ACCP as a second-year pharmacy student when her abstract was accepted for presentation at the 2011 Annual Meeting. During this meeting, her research was recognized as runner-up for Best Student Poster. She continued her involvement as a resident by serving as both member-at-large and chair of the National Resident Advisory Committee. Now, as a new practitioner, Rohde remains active in ACCP by serving as a member of the Critical Care PRN and as treasurer/secretary of the local ACCP chapter, the Triangle College of Clinical Pharmacy. According to Rohde, ACCP has been “one of her professional organization homes.” She reflects,

ACCP provides opportunities for growth in clinical research, education, and leadership, which are all key components of my career as a clinical pharmacist. It is also a great platform for networking with colleagues from across the nation.

Outside her practice responsibilities, Rohde is a certified scuba diver. Besides diving in local areas around North Carolina and Virginia, she has traveled to the Caribbean, where she has explored numerous underwater sites.
2018–2020 NAM Fellowship in Pharmacy—Call for ACCP Nominations

The ACCP Board of Regents, in collaboration with the American Association of Colleges of Pharmacy (AACP) Board of Directors, is pleased to announce the call for nominations for the 2018–2020 National Academy of Medicine (NAM; formerly the Institute of Medicine) Fellowship in Pharmacy. The NAM Fellowship in Pharmacy program enables talented, early-career health policy or health science clinicians and scholars to participate actively in the work of NAM and to further their careers as future leaders in the field. During this 2-year fellowship, Fellows are expected to continue working at their current institution while assigned to a health-and medicine-related board of the National Academies, attend its meetings, and actively participate in the work of an appropriate expert study committee or roundtable. Required materials for the 2018–2020 fellowship must be submitted by e-mail to kpham@accp.com no later than 5:00 p.m. (ET) June 1, 2018, to be considered by the ACCP Board of Regents for nomination for the 2-year period beginning October 1, 2018.

For more information, including details about the nomination process, click here. Please address questions about the nomination process to Kathy Pham at (202) 621-1855 or kpham@accp.com.

ACCP Research Institute Grants Available

Online Application Due: June 1, 2018

The ACCP Research Institute Board of Trustees invites applications for its 2018 Futures Grants. Up to $100,000 in mentored, developmental research awards will be granted through the Futures Grants program in 2018. Individual grants may range from $5000 to $40,000, depending on applicant eligibility and the proposal’s requisite budget.

Futures Grants are designed to support the development of research skills among student, trainee, and early-career ACCP members, with a goal of establishing sustained interest and careers in clinical pharmacy research.

To access detailed instructions, visit www.accpri.org/futures, or to complete the online eligibility form and full online grant application, visit https://accp.com/18futuresapp. For all other questions, contact:

Jessie Culley, Project Coordinator
ACCP Research Institute
(913) 492-3311
E-mail: jculley@accp.com

Washington Report

ACCP Submits Comments to Senate Finance Committee on How to Improve Medicare and Medicaid Responses to the Opioid Epidemic

John K. McGlew
Director of Government Affairs

Following the Trump administration’s October 2017 announcement directing the Department of Health and Human Services to declare the ongoing opioid crisis a public health emergency, health policy leaders on Capitol Hill have been working to develop legislation that would impose new rules to restrict access to opioid painkillers and open up access for opioid addiction treatment.

As part of this process, in February 2018, Senate Finance Committee Chairman Orrin Hatch (R-UT) and Ranking Member Ron Wyden (D-OR) issued a request for feedback from health care stakeholders across the country on how to improve Medicare, Medicaid, and human services program responses to the opioid epidemic.

Citing alarming data that indicate opioid prescriptions made up $4 billion in Medicare Part D spending in 2016 and that services and care for those with opioid use disorders amounted to $9 billion in Medicaid spending in 2015, Hatch and Wyden called for “policy recommendations along the continuum that spans from addressing the root causes that lead to, or fail to prevent, opioid use disorder and other substance use disorders to improving access to and quality of treatment.”

In response to this request, ACCP submitted comments to the Senate Finance Committee, calling on Congress to include reforms to the Medicare program that offer coverage of comprehensive medication management (CMM) services provided by qualified clinical pharmacists as members of the patient’s health care team.

Specifically, ACCP’s comments focused on how pharmacists providing CMM identify appropriate goals for opioid therapy in individual patients, recommend alternatives if these goals are not met, and monitor adverse effects of opioids to mitigate the risks of oversedation and overdose. The comments also described how clinical pharmacists assist in:

- Ensuring that patients reach the medication-related clinical goals established through shared decision-making with all members of the health care team.
- Addressing opioid use and/or misuse, when applicable.
- Educating patients and health care providers about acute and chronic pain therapies.
- Evaluating and implementing clinical pathways and systems to optimize the therapeutic use of opioids and other controlled substances.

In addition, the comments recommended increased use of clinical pharmacists to (1) administer naloxone and provide appropriate education on its use in patients experiencing an opioid overdose and (2) ensure that patients identified as having opioid use disorder are appropriately referred to treatment centers to address their addiction.

On February 27, a bipartisan group of senators introduced legislation that would establish a 3-day initial prescribing limit on opioids for acute pain, increase the availability of treatment, and improve services to promote recovery. This Senate bill authorizes $1 billion in additional funding that includes:

- $10 million to fund a national education campaign on opioids.
- $300 million to increase training for first responders and their access to opioid overdose reversal drugs.
- $300 million to expand medication-assisted treatment.
- $200 million to help build more recovery support services.

On the House side, the Energy and Commerce Committee is working on legislation aimed at combating the opioid epidemic. Chairman Greg Walden (R-OR) indicated that he hopes to pass the measures out of the House by the Memorial Day weekend.

Click here to read ACCP’s comments in full.

Click here for more information on the Senate effort to reauthorize and expand the Comprehensive Addiction and Recovery Act of 2016.

For more information on any of ACCP’s advocacy efforts, please contact:

John K. McGlew  
Director, Government Affairs  
American College of Clinical Pharmacy  
1455 Pennsylvania Ave. Northwest  
Suite 400  
Washington, DC 20004-1017  
(202) 621-1820  
jmcglew@accp.com
ACCP-PAC Contributions Support Bipartisan Health Care Leaders in Congress

Although the political environment in Washington remains challenging amid partisan stalemate on Capitol Hill and concerns over the executive branch’s unconventional approach to governing, ACCP remains convinced that significant progress is being made in the College’s effort to establish Medicare coverage for comprehensive medication management services provided by qualified clinical pharmacists as members of the patient’s health care team.

From the incremental changes made to Medicare Part D that acknowledge the fundamental structural flaws in the medication therapy management program to the participation of representatives from the Centers for Medicare & Medicaid Services at ACCP’s recent Patient-Centered Team-Based Practice Forum in Jacksonville, it is clear that ACCP’s message is resonating with policy-makers.

However, as the 2018 mid-term elections approach, ACCP must be positioned to provide support for its advocates on Capitol Hill in order to ensure that these leaders remain in Washington and continue to advance policies that meaningfully address the health care issues the nation currently faces.

ACCP-PAC is the only means by which the College can provide financial support for candidates for Congress. With its more than 16,000 members, ACCP is becoming one of the most prominent pharmacy PACs in Washington. To maintain this position, the College needs the widespread support of its members.

If each ACCP member contributed just $25, ACCP-PAC would raise over $400,000. All ACCP members are encouraged to donate at least $25 to ACCP-PAC. CLICK HERE to support your PAC today!

2018 ACCP Clinical Pharmacy Challenge: Are You Ready?

Online Team Registration Open; Local Competition Exam Available

ACCP’s novel pharmacy student team competition returns for its ninth season. The ACCP Clinical Pharmacy Challenge offers eligible teams the opportunity to compete in up to four online rounds, with the top eight teams advancing to the live quarterfinal competition at the ACCP Global Conference on Clinical Pharmacy in Seattle, Washington, October 20–23, 2018. Team registration is now available online. Plan now to participate this fall.

Competition Overview

The ACCP Clinical Pharmacy Challenge is a team-based competition in which teams of three students compete against teams from other schools and colleges of pharmacy in a “quiz bowl”–type format. Only one team per institution may enter the competition. Institutions with branch campuses, distance satellites, and/or several interested teams are encouraged to conduct a local competition. ACCP provides a local competition exam that institutions may use in selecting their team. Faculty members interested in using the exam may send an e-mail request to Michelle Kucera, Pharm.D., BCPS, at mkucera@accp.com.

Preliminary rounds of the national competition will be conducted virtually in August and September. The quarterfinal, semifinal, and final rounds will be held live at the ACCP Global Conference in October.

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 Global Conference 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, 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 need not be ACCP members 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 4, 2018.

For more information on the 2018 ACCP Clinical Pharmacy Challenge, including the competition schedule, sample items, and FAQ section, please click here.
ACCP National Student Network Advisory Committee Applications Due June 15

Attention student pharmacists: Would you like to become more involved with the American College of Clinical Pharmacy? 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 ACCP National Student Network Advisory Committee.

The National Student Network Advisory Committee is an ACCP committee composed of student members appointed each year by the ACCP president. Members generally serve a 1-year term, and the committee typically has 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 the 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 ACCP National Student Network Advisory Committee, either as a member-at-large or in a leadership role, please visit www.accp.com/stunet/advisoryCommittee.aspx for more information about the committee and how to apply. The deadline for applications is June 15, 2018.

ACCP National Resident Advisory Committee Applications Due June 15

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 want to enhance their leadership skills, network with colleagues across the country, and interact with clinical pharmacy leaders to apply for appointment to the ACCP National Resident Advisory Committee.

The National Resident Advisory Committee is a standing committee composed of residents, fellows, and graduate students members appointed each year by the ACCP president-elect. Members serve a 1-year term, and the committee typically has 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 will meet in person at the ACCP Global Conference on Clinical Pharmacy in October and communicate via 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. For additional information on the application process or to enter your application, please visit www.accp.com/membership/rac.aspx. The deadline for applications is June 15, 2018.

Register for the Next ACCP Academy Teaching and Learning Webinar

The Teaching and Learning Academy is offering an upcoming webinar on team-based learning. Open to both ACCP members and nonmembers, the webinar will offer 1.0 hour of CPE credit. Participants enrolled in the Teaching and Learning Academy will also earn credit toward their program certificate of completion. Details about the webinar are as follows:

Team-Based Learning in Pharmacy Education: Tools and Tips for Success

Wednesday, March 28, 2018; 7:00 p.m. – 8:00 p.m. (EDT)
Presented by Andrea Franks, Pharm.D., BCPS
Associate Professor
Department of Clinical Pharmacy
University of Tennessee Health Science Center
College of Pharmacy
Knoxville, Tennessee

To learn more about the webinar, please click here. Participation in the webinar is limited to 100 registrants. For more information on the ACCP Teaching and Learning Academy programs, visit www.accp.com/academy.

Role Delineation Study Update for Nutrition Support Pharmacy: Request for BPS Survey Participants

ACCP is cooperating with the Board of Pharmacy Specialties (BPS) to reach out to ACCP members involved in nutrition support to participate in a survey on the roles and responsibilities of Nutrition Support Pharmacy Specialists. BPS conducts an updated role delineation study (RDS) for each existing and recognized practice specialty every 5 years to ensure that the certification content outline remains valid, accurate, and relevant to contemporary practice.

This survey is designed to (1) gauge the clinical relevance of the BPS certification examination in Nutrition Support Pharmacy, (2) solicit feedback broadly from pharmacists engaged in Nutrition Support Pharmacy, and (3) validate the performance domains, tasks, and knowledge areas developed by an expert panel convened as part of the BPS RDS for Nutrition Support Pharmacy.
This process is an essential component of the criteria and policies for competency assessment established by BPS test development standards, and as such, ACCP member participation in this effort is highly valued.

To access the survey, please visit http://aphanet.az1.qualtrics.com/jfe/form/SV_6mR74hwKNhL6p7 and complete the survey by March 19, 2018. The survey may take 20–30 minutes to complete. Results will be reported only in the aggregate, and individual responses will not be identified or released. If the entire survey cannot be completed in one sitting, survey responses can be saved and completed at a later time.

If technical problems associated with the survey arise, please contact BPS at tmuckle@aphanet.org.

Member Recruiters

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

- Wesley Bickler
- Corey Bradley
- Wasim El Nekidy
- Samuel Felix
- Gary Fong
- Anthony Hawkins
- James Hicks
- Shahriar Hossain
- Douglas Jennings
- Stephanie Jin
- Ada Koch
- Kathy Makkar
- Michelle Martin
- Eric Norrington
- Jonathan Ogden
- David Parra
- Brianna Patacini
- Adam Peele
- Jeanette Prignano
- Heather Stanton
- William Taylor
- Cassandra Welsh
- Julianne Woo
- Melanie Yerondopoulos