Pre-Order Pharmacotherapy Preparatory Review and Recertification Course Instructional Materials

Home study materials can now be pre-ordered for the 2011 Pharmacotherapy Preparatory Review and Recertification Course. The course is ideal for pharmacy professionals who are preparing for the Pharmacotherapy Specialty Certification Examination administered by the Board of Pharmacy Specialties (BPS) and for those seeking a self-paced review and refresher of disease states and therapeutics. In addition, Board Certified Pharmacotherapy Specialists (BCPSs) seeking recertification by continuing education may use the course to earn recertification credit.

Presented live at ACCP’s Updates in Therapeutics, the Pharmacotherapy Preparatory Review and Recertification course content provides a comprehensive review of the knowledge domains covered in the pharmacotherapy specialty certification examination. The course uses a case-based approach, with strong emphasis on the thought processes needed to solve patient care problems in each therapeutic area.

The home study materials will be available in a variety of formats to best suit your learning style. The online course, print workbook and CD-ROM package, and online workbook and CD-ROM package are available for a maximum of 24.0 hours of continuing pharmacy education credit. Home study materials will be available on or about June 1, 2011.

Visit the ACCP Bookstore at www.accp.com/bookstore to pre-order the newest edition of the Preparatory Review and Recertification Course.

2011 Ambulatory Care Pharmacy Preparatory Review Course Instructional Materials Now Available for Order

Instructional materials are now available for the 2011 edition of Updates in Therapeutics: The NEW Ambulatory Care Pharmacy Preparatory Review, the same course that was presented live at Updates in Therapeutics 2011 in Columbus, Ohio.

Updates in Therapeutics: The NEW Ambulatory Care Pharmacy Preparatory Review is ideal for pharmacy professionals who are preparing for the new Ambulatory Care Pharmacy Specialty Certification Examination administered by the Board of Pharmacy Specialties and for those seeking a self-paced review and refresher of disease states and therapeutics. Developed by Board Certified Pharmacotherapy Specialists and Ambulatory Care Pharmacy practitioners, the course content provides a comprehensive review of the knowledge domains covered in the Ambulatory Care Pharmacy Specialty Certification Examination. The course uses a case-based approach, with strong emphasis on the thought processes needed to solve patient care problems in each therapeutic area.

Course materials are presented in a variety of formats to suit different learning styles. Continuing pharmacy education credit is available through successful completion of online posttests. The maximum number of continuing pharmacy education credits available for the preparatory course is 26.0 hours. Instructional materials are available in the following formats:

- **Course Workbook.** Presenter handouts are provided in a two-volume perfect-bound book. These materials include case studies, study questions with answer explanations, and literature citations for further reference.
- **Online Workbook.** Information contained in the printed course workbook is also available in this
online version. The online book provides access to course workbook contents as Portable Document Format (PDF) files.

- **CD-ROM.** The CD-ROM includes the presenters’ lectures, which are audio-synchronized to the slide presentations from the live program. The CD-ROM is both PC and Macintosh compatible and contains MP3 files of the presenters’ lectures. (The CD-ROM is not CD-Audio compatible.)

- **CD-ROM and Course Workbook with CPE.** This package includes the full course workbook and a CD-ROM, plus access to the Web-based posttests for continuing pharmacy education credit.

- **Web-Based Online Course with CPE.** This combination provides participants with the online workbook and includes the presenters’ lectures, which are audio-synchronized to the slide presentations from the live program. The online course also provides the MP3 files of the presenters’ lectures. In addition, the online course provides participants access to the Web-based posttests for continuing pharmacy education credit.

- **CD-ROM and Online Workbook with CPE.** This package includes the CD-ROM and full course online workbook, plus access to the Web-based posttests for continuing pharmacy education credit.

Instructional components also are priced for individual sale. Orders for Ambulatory Care Pharmacy Preparatory Course instructional materials may be placed online at [http://www.accp.com/bookstore/apc11.aspx](http://www.accp.com/bookstore/apc11.aspx). Orders may also be placed by telephone at (913) 492-3311 or by fax at (913) 492-0088. All products will be made available and/or shipped on June 1, 2011.

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### Continuing Education Credit

The American College of Clinical Pharmacy is accredited by the Accreditation Council for Pharmacy Education as a provider of continuing pharmacy education. The Universal Activity Numbers (UAN) for Updates in Therapeutics: The Ambulatory Care Pharmacy Preparatory Review Course are:

- Updates in Therapeutics: The Ambulatory Care Pharmacy Preparatory Review Course—Biostatistics, Clinical Trial Design, and Nephrology Activity No. 0217-0000-11-021-L01-P (2.5 contact hours)
- Updates in Therapeutics: The Ambulatory Care Pharmacy Preparatory Review Course—Diabetes Mellitus and Other Endocrine Disorders Activity No. 0217-0000-11-022-L01-P (3.0 contact hours)
- Updates in Therapeutics: The Ambulatory Care Pharmacy Preparatory Review Course—Gastrointestinal Diseases, Epilepsy & Headache/Migraine, and Neurology: Alzheimer Disease and Parkinson Disease Activity No. 0217-0000-11-023-L01-P (3.0 contact hours)
- Updates in Therapeutics: The Ambulatory Care Pharmacy Preparatory Review Course—Transplantation, Immunizations, and Respiratory & Smoking Cessation Activity No. 0217-0000-11-024-L01-P (3.0 contact hours)
- Updates in Therapeutics: The Ambulatory Care Pharmacy Preparatory Review Course—Psychiatric Disorders and Emergency Medicine Activity No. 0217-0000-11-025-L01-P (3.0 contact hours)
- Updates in Therapeutics: The Ambulatory Care Pharmacy Preparatory Review Course—Dermatology/EENT, Infectious Diseases, and HIV & AIDS Activity No. 0217-0000-11-026-L01-P (2.5 contact hours)
- Updates in Therapeutics: The Ambulatory Care Pharmacy Preparatory Review Course—Bone/Joint & Rheumatology, Obstetrics/Gynecology, and Men’s & Women’s Health Activity No. 0217-0000-11-027-L01-P (3.0 contact hours)
- Updates in Therapeutics: The Ambulatory Care Pharmacy Preparatory Review Course—Cardiology I Activity No. 0217-0000-11-028-L01-P (3.0 contact hours)
- Updates in Therapeutics: The Ambulatory Care Pharmacy Preparatory Review Course—Cardiology II Activity No. 0217-0000-11-029-L01-P (3.0 contact hours)

All continuing pharmacy education activities associated with Updates in Therapeutics: The Ambulatory Care Pharmacy Preparatory Review Course are application-based activities. To receive continuing pharmacy education credit, the Web-based posttest must be successfully completed and submitted to ACCP by October 31, 2012. Statements of credit for continuing pharmacy education will be available to participants immediately after the successful completion of each Web-based posttest at [www.accp.com/ce](http://www.accp.com/ce). Learning objectives, faculty disclosures, target audience, program goals, technical requirements, and samples of the Ambulatory Care Pharmacy Preparatory Course are available at [http://www.accp.com/bookstore/apc11.aspx](http://www.accp.com/bookstore/apc11.aspx).
Enroll in the ACCP Academy Today

The ACCP Academy is a unique educational effort designed to deliver a flexible, curricular approach to enhancing ACCP members’ abilities in their major areas of responsibility. 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.

Academy courses are designed to meet ACCP’s usual standards of excellence, and the program faculty include recognized experts in their fields. Relying on live, interactive instruction, the curricula provide opportunities to apply key principles to everyday professional pursuits. Those who complete the respective program’s curricular and portfolio requirements will receive a certificate and additional recognition as graduates of the ACCP Academy. Each track in the Academy curriculum consists of 18 hours of required modules and 10 hours of curricular-track elective modules. In addition to completing required and elective modules, each participant must assemble a formative portfolio that includes self-assessments and peer or mentor assessments.

Visit the ACCP Academy at www.accp.com/academy to learn more about each certificate program and to download a program application.

PBRN Research: Bring Your Ideas Forward NOW

Practice-Based Research Network (PBRN) research projects can take many forms. Viable project ideas can address questions that are observational or interventional, as well as studies that involve the comparative effectiveness of medication 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.
management in various disease states and conditions in “real-life” patients and situations. Studies that involve factors such as the process of care, delivery of health care, and guideline adherence are often explored within the PBRN laboratory with respect to finding and implementing best practices within sites.

One of the strengths of PBRN research is the clinician’s ability to produce research findings that are immediately relevant and that, in theory, are more easily translated into practice. Practice-Based Research Networks can link relevant clinical questions with rigorous research methods in real-life settings and produce scientific information that is not only externally valid, but also, in essence, easily assimilated into everyday practice.

Do you have the next ACCP PBRN project idea? Could you use the help of the 700 members of the ACCP PBRN to answer your research question in a more robust manner? Or do you need to use just one PRN/specialty group or clinical pharmacist who practices in the inpatient or outpatient site, for example? Do you need some help with research infrastructure, either a little or a lot? Do you need help developing your idea into a proposal? Is your idea compatible with PBRN research? Not sure? Although not comprehensive, the following questions may be worth pondering.

- Do you ever encounter a typical or customary practice with little or no evidence to support that specific practice norm?
- Under what circumstances would you like more evidence outside “tradition” to medically manage patients either in the inpatient or outpatient setting?
- Are off-label products commonly prescribed in your practice? Are you interested in finding out more about the circumstances surrounding these products through research?
- Are there special populations in your practice that require more research data?
- Are there functions, activities, procedures, processes, or situations within your day-to-day practice that could be improved? Do you want to know how others are dealing with such circumstances?
- Would you like to study whether the implementation of “best practices” actually works? Do you have a best practice within your site that might be worth piloting to others?

The ACCP PBRN is interested in establishing collaborative research efforts with both internal and external stakeholders. All investigators wishing to collaborate with the ACCP PBRN will be asked to contact pbrn@accp.com. Those of us at the ACCP PBRN look forward to hearing from you!

**The ACCP PBRN Contracts with CITI Program to Provide Human Subjects’ Protections and HIPAA Training at No Cost**

The ACCP Research Institute Board of Trustees and the ACCP PBRN central IRB have determined that all ACCP PBRN members must complete human subjects’ protections and HIPAA training before participating in any ACCP PBRN project in 2011. The ACCP Research Institute contracts with CITI Program to offer no-cost training for all ACCP PBRN members.

As of January 1, 2011, all ACCP PBRN members are required to complete CITI Program Training. No other training will be accepted. A total of 10 modules are required. To access the training program, go to [http://www.citiprogram.org](http://www.citiprogram.org) and select ACCP Research Institute as your affiliate institution. If you already use CITI Program Training at your site, you can also affiliate with the ACCP Research Institute by completing the necessary components of the ACCP PBRN that you may not have completed.

On successful completion of the required ACCP PBRN components, don’t forget to update your human subjects’ training information within your PBRNConnect portfolio. A list of FAQs regarding CITI Program Training is available on PBRNConnect under Step 3 at [http://www.accpri.org/signin/index.aspx](http://www.accpri.org/signin/index.aspx).

Questions? Contact us at pbrn@accp.com.

**BPS Issues Call for Members of the Critical Care Pharmacy and Pediatric Pharmacy Practice Analysis Task Forces**

During the BPS Board meeting held on April 9, 2011, the Board reviewed preliminary requests submitted by ACCP (available at [http://www.accp.com/careers/speRecog.aspx](http://www.accp.com/careers/speRecog.aspx)) to consider two new specialties: Critical Care Pharmacy and Pediatric Pharmacy. BPS will move forward with conducting role delineation studies for each of these proposed specialties. Conducting a role delineation study is a critical step in evaluating a proposed specialty. The purpose of these role delineation studies is to determine whether Critical Care Pharmacy and Pediatric Pharmacy are based on a specialized knowledge of the pharmaceutical sciences as well as specialized functions routinely performed by practitioners in these proposed specialties.

To begin moving forward with the role delineation studies in Critical Care Pharmacy and Pediatric Pharmacy, BPS will need the following:

- Names and resumes of subject matter experts in the areas of Critical Care Pharmacy and Pediatric Pharmacy (8–10 individuals will be selected to serve on each Practice Analysis Task Force). However,
in addition to these task forces, other subject matter experts can assist BPS by participating in a telephone interview, an e-mail–based external review of documents developed by the relevant task force, or the pilot test of the related survey. The link to the Call for Nominations is below, and self-nominations are welcomed from subject matter experts.

For Critical Care Pharmacy — https://www.surveymonkey.com/s/BPSCC
For Pediatric Pharmacy — https://www.surveymonkey.com/s/BPSPed

Due Date for both Critical Care Pharmacy and Pediatric Pharmacy Nominations: June 8, 2011.

BPS will announce the appointments on or about June 17, 2011.

- BPS will convene a 2-day meeting with the Critical Care Pharmacy Practice Analysis Task Force on July 26–27, 2011, in Washington, DC, to create a preliminary content outline for this proposed specialty. **Attendance by appointees to the Critical Care Pharmacy Practice Analysis Task Force at this meeting is required.** If you cannot attend this meeting and would like to be involved, please volunteer for one of the other activities outlined in the link above.

- BPS will then convene a 2-day meeting with the Pediatric Pharmacy Practice Analysis Task Force on August 2–3, 2011, in Washington, DC, to create a preliminary content outline for this proposed specialty. **Attendance by appointees to the Pediatric Pharmacy Practice Analysis Task Force at this meeting is required.** If you cannot attend this meeting and would like to be involved, please volunteer for one of the other activities outlined in the link above.

**President’s Column**

*William A. Kehoe, Pharm.D., M.A., FCCP, BCPS*

**Organizational Focus and Integrity**

I just returned from the annual meeting of the College of Psychiatric and Neurologic Pharmacists in Phoenix. One of the keynote speakers was Dr. Linda Strand. In her opening remarks, she said she’d be provocative and “direct.” She was. Dr. Strand made the point that the profession of pharmacy as a whole seems to lack a consistent approach to patient care that other health care disciplines recognize. To an extent, I agree with that. But she went on to say something that really grabbed my attention. In her opinion, we (i.e., those of us in the profession of pharmacy) have “2 years to get this fixed, not 10” if we’re to remain a vital contributor to health care. I’m not so sure about that because, to be honest, I’ve been concerned that the profession might eventually disappear since I graduated 30 years ago. However, I do agree with her that there is a sense of urgency to the profession’s developing a unifying theme for what we do for patients. We’re going to be left behind if we don’t. On that we agree.

One thing we know, especially those involved in pharmacy’s organizations, is that the profession is a behemoth with lots of inertia to overcome if it is to be redirected from its current course. And a change in course is necessary. Another point Dr. Strand made is that we’ve “lost dispensing.” Leaders in the profession have been saying for years that this aspect of practice will take less of the pharmacist’s time and be replaced by direct patient care activities. It is this concept that I’d like to talk about.

In my view, there are a couple of very important issues to address if pharmacists are going to focus mainly on direct patient care activities. First, I agree with Dr. Strand that we need to teach and implement a consistent approach to the provision of pharmaco-therapeutic care (call it pharmaceutical care or clinical pharmacy or whatever you like). Second, what knowledge and training will be required to provide the type of care that patients need and that a reformed health care system expects? I think ACCP has tried to address and provide leadership on both of these issues. But it’s the latter point I’m thinking about as I write this column.

Today’s ACCP reflects a lot of effort during the past 2–3 years to develop what I think of as organizational focus and action with integrity. Organizational focus involves a lot of things including clear mission, vision, and goal statements and alignment of organizational priorities and activities with the mission, vision, and goals. It also includes a sense of urgency toward accomplishing organizational goals. An organization displays integrity when its actions match its stated goals and priorities and when it does so in a consistent and ethical manner. I think ACCP is doing this, thereby providing that nudge the profession needs to change its course by a few degrees such that it’s on track toward establishing a primary emphasis on direct patient care.

Whenever you try to nudge someone or something, you run the risk of being misunderstood. Therefore, you must make clear in your own mind why you’re pursuing a given end and then strive to achieve the desired outcomes in a collegial and ethical manner. One example of this is the College’s position on specialization and certification. ACCP is on record as stating that (1) clinical pharmacists in the future should be board-certified specialists (*Pharmacotherapy* 2006;26:1816–25) and (2) there should be a reexamination of the current certification process to...
Despite the College’s recent work to promote specialist certification and accredited specialized (PGY2) residencies (Pharmacotherapy 2009;29:3e–13e). ACCP has made the expansion of certification opportunities a major priority during the past couple of years because we have a sense of urgency about it. It’s one way we’re trying to nudge the profession. (To keep up to date on this endeavor, visit the ACCP Web page designed to track our efforts at http://www.accp.com/careers/specRecog.aspx.) I’d like to make a few points about how we arrived at this organizational juncture.

- Surveys of our members have consistently shown that board certification opportunities are important to them and that they expect the leadership to support this view.
- ACCP’s recent strategic plans have included the expansion of specialty certification opportunities as an important priority. The College’s strategic planning process gathers input from individual members, focus groups, and stakeholders outside the organization. Increased availability of board certification opportunities has been a consistent theme that clearly influenced the development of the 2007 and 2010 ACCP strategic plans.
- As a major stakeholder in specialist certification, ACCP has maintained a long-standing relationship with the Board of Pharmacy Specialties (BPS). BPS has stated in the past year that it is interested in expanding specialist certification opportunities in a way that will allow consideration of more than one new certification at a time. BPS’s recent consideration of pediatrics and critical care as potential new specialties (see story immediately above) is of interest to ACCP because these two specialties have consistently been rated in member surveys as high-priority specialty practice areas. Other priority practice areas rated by ACCP members as potential new pharmacy specialties include cardiology and infectious diseases (both of which carry the added qualifications designation within the pharmacotherapy specialty) and organ transplantation. We will need continued input and leadership from ACCP’s PRNs to help make the case for the development of such new specialty certifications.
- Despite the College’s recent work to promote specialty expansion within the profession’s current certification system, ACCP continues to support a profession-wide examination of its certification framework to ensure that opportunities for certification are made available to as many pharmacy specialists as possible in the most effective and expeditious fashion. BPS is now undertaking a strategic planning process and will no doubt give substantial thought to this issue. In the meantime, they have made it possible to submit preliminary requests for consideration of possible new certifications within the existing framework, a process that should allow a much more efficient approach to establishing new pharmacy specialties in the short term.
- ACCP is a member of the Council on Credentialing in Pharmacy (CCP). Recently, CCP published a revision of “Credentialing in Pharmacy, a Resource Paper,” which outlines the various types of credentials available to pharmacists (www.pharmacycredentialing.org/ccp/Files/CCPWhitePaper2010.pdf). Specialist certification is one credential discussed in this paper, and I believe it will become an increasingly important one.

Some have asked whether ACCP is in the certification business. We are not, and it’s not our goal to become a certifying body. That is BPS’s role. But recall that the priorities stated in our strategic plan are to (1) develop clinical pharmacists, (2) advance clinical pharmacists, and (3) position clinical pharmacists as our health care system evolves. Board certification is only one, albeit important, aspect of our strategic plan to address these priorities. Our recent submission of preliminary requests for consideration of pediatrics and critical care as new potential specialties reflects our commitment to work with BPS and colleague organizations to meaningfully expand specialist certification. I am optimistic that we are moving in the right direction. Now that these preliminary requests have been approved, BPS will move forward by conducting role delineation studies of pediatric and critical care clinical pharmacists as part of its evaluation process for new potential specialties (see a brief summary of this process at http://www.accp.com/careers/specRecog.aspx). We are moving with a sense of urgency because we agree with Dr. Strand that the time to act is now. However, even as we move forward, we will seek input and collaboration from other professional organizations. We hope this will lend a positive nudge to the profession. And, unless members tell us otherwise, the ACCP Board of Regents will continue to lead this and other efforts designed to advance and position clinical pharmacists in the evolving health care system—because we believe that’s what you elected us to do.

Respond to 2012 Committee Charge and ACCP Priority Survey by May 16

To help ACCP determine the important issues it will address in the near future, please respond to the College’s annual survey at http://www.accp.com/misc/commsurvey.aspx by 11:59 p.m. (Central Time), Monday, May 16. The process of developing the College’s 2012 committee and task force charges begins with individual ACCP members. In addition, the College leadership is seeking high-priority “emerging issues” that should be incorporated into the ACCP strategic plan, now or in the future.
The Board of Regents and staff will draw on member suggestions, combined with input from other sources, to begin developing next year’s committee and task force charges; issues will also be considered in the College’s future strategic planning efforts. Even if you have several suggested areas for ACCP to pursue, the survey will require only a few minutes to complete.

Once next year’s charges have been developed, follow-up e-mails will be sent to all members in late June and early July to determine their willingness to serve on a 2012 committee or task force or to participate in other ACCP volunteer service activities. Responding to that follow-up e-mail will constitute the official communication to ACCP that members wish to serve on a 2012 committee or task force and/or participate in other College activities.

At this point, even if members have no time to be on a committee this year, the College hopes that they will share their ideas by visiting the link above and providing suggestions.

Register Your Team for the 2011 ACCP Clinical Pharmacy Challenge

ACCP’s novel national pharmacy student team competition enters its second year with a bigger and better configuration. Because of the unprecedented level of interest in the 2010 inaugural 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 available online. Go to http://www.accp.com/stunet/ to view current team registrations. 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 at http://www.accp.com/stunet/liaisons.aspx. All team registrations must be completed by the deadline of September 6, 2011. Go to http://www.accp.com/stunet/compete/overview.aspx 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 may enter the competition. Institutions with branch campuses, distance satellites, and/or several interested teams are encouraged to conduct a local competition (see http://www.accp.com/stunet/compete/eligibility.aspx#refEligibility_title). ACCP has created a local competition examination that institutions may use when determining their team representatives. ACCP Faculty Liaisons may obtain the local competition exam by sending an e-mail request to Michelle Kucera at mkucera@accp.com.

Preliminary rounds of the 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 (see http://www.accp.com/stunet/compete/eligibility.aspx#refSchedule_title). 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 full meeting registrations for students. 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 at http://www.accp.com/stunet/liaisons.aspx. 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.

**ACCP StuNet Advisory Committee Applications Due June 17**

Attention student pharmacists: Would you like to become more involved in 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 opportunities in 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. 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), Vice Chair (2-year term; serves first year as the Vice Chair and then assumes the Chair position during the second year), and 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.

Applications for Leadership Positions 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 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 a leadership position on the 2011–2012 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:

- 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 call 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. For 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 17, 2011.

The New Pharmacotherapy Web Site

On March 29, ACCP’s official journal, Pharmacotherapy, launched a new Web site. Although the journal continues to be hosted on an Atypon Systems platform, the new site allows Pharmacotherapy to deliver additional services to subscribers. This article points out some of the most important new features that will make your visits to Pharmacotherapy online a richer experience.

The URL of the new site is http://pharmacotherapy-journal.org.

If you use the old URL (www.pharmacotherapy.org), you will be immediately redirected to the new site. Members can also access the site by logging-in to the ACCP Web site at http://www.accp.com and then clicking on the link for Pharmacotherapy at the bottom of the member page—this will seamlessly redirect members to the journal Web site, and you will be logged-in automatically.

Because this new site was built from scratch, journal staff were unable to transfer old user account information to the new site. New account information was e-mailed to members at the end of March, and many members are now using the new site. If you have difficulty logging-in, don’t hesitate to contact journal staff by e-mail at editor@pharmacotherapy.org. Pharmacotherapy staff are now able to directly enter the Web site database and update records, which makes for much faster turnaround when helping with connection problems.

The search function on the new Web site has been considerably enhanced compared with that on the old site. There are simple and advanced search modes. You may search by author; key word in title, abstract, or the body of an article; or DOI. Searches can also be restricted to specific date ranges. Search results can be sorted by Title or Author.

When viewing the abstract of an article, you may also search for related articles using key words and/
or authors of the manuscript as search terms. Options include a link to Google Scholar and the ability to specify the sites to be searched: Pharmacotherapy, PubMed, or other articles registered with CrossRef, which provides the DOIs that are used increasingly to identify online locations of content. Also useful is a feature that allows you to save search parameters so that you can perform the same search using advanced search modes.

Articles of interest can be sent to citation manager software or downloaded in a format ready to be imported in software such as EndNotes. Articles can also be marked as Favorites so that you can quickly retrieve an article on future visits to the journal Web site. If you want to see other papers that have cited an article you are reading, you can find that as well.

As an aid to researchers, there is an e-mail function that allows the reader to quickly e-mail a link to colleagues so that they can view the article. All members of ACCP and other subscribers of Pharmacotherapy will be able to view the article for free. However, nonsubscribers must pay a fee to view the article.

As with our previous Web site, journal articles are available in both plain PDF format and PDF Plus format. PDF Plus includes links in the reference section of the article that allow the reader to call up papers cited by the article’s authors.

In addition to these new features, journal staff have completely reorganized the links within the Web site, assembling them at the top of the screen into a menu that is designed to speed you on your way to whatever information you are looking for, in a far more attractive environment.

Audio Companion Available for Oncology

Oncology, the current release in the PSAP-VII series, has evidence-based information on new indications and new drugs used in the medical management of patients with cancer and blood disorders.

The PSAP Audio Companion is a studio recording of the Oncology chapter text and learning objectives. Made available in MP3 format, the audio files can be downloaded to a listening device or burned onto a CD. Because the Audio Companion does not include the tables, figures, or self-assessment questions, no continuing pharmacy education (CPE) hours are associated with it.

The Oncology Audio Companion contains the following chapters:

- Cancer Screening and Prevention
- Supportive Care in Oncology Patients
- Nonmalignant hematology
- Pancreatic Adenocarcinomas and Endocrine Cancers
- Hepatic Cancer
- Head and Neck Cancers
- Gynecologic Cancers
- Non-Hodgkin Lymphoma
- Updates in Hematopoietic Stem Cell Transplantation

Audio Companions are also available for PSAP-VII Book 1 (Cardiology) and Book 2 (Critical/Urgent Care). Priced at just $25 for ACCP members, the Audio Companion is also available at a discount price when purchased as a package with the online book. To order, go to http://www.accp.com/bookstore/psap7ac.aspx.

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New Members

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Saeed Al Shemaili
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Mohammad Albolaihess
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Mona Alhusayyen
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Link Almogela
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Bader Alqannass
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Kenneth Andrews
Sam Ansong
Marie Antignac
Sergelyne Antoine
Kristie Arend
Elizabeth Arietta
Margo Ashby
Amanda Ashley
Kwadwo Asiam
Rabia Atayee
LaQuinta Atley
Katie Austin
Mona Awadh
Charles Babcock
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<th>Tim Mizak</th>
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<td>Ashley Mishoe</td>
<td>Nancy Pandolfi</td>
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The following individuals recently advanced from Associate to Full Member:

- Scott Budsberg
- Michaelia Dunn
- Naju Gangula
- Patrick Grove
- Kelly Henderson
- Brianna Herron
- Dustin Leitzel
- Pejman Pirmoradi
- Jennifer Severing
- Maria Tzefos

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

- Ananth Anthes
- Jeffrey Bruno
- Tim Church
- Jennifer Clements
- Douglas Covey
- Robert DeClue
- Shareen El-Ibiary
- Barbara Faircloth
- T. Michael Farley
- Andrea Goodrich
- Justine Gortney
- Barbara Hoeben
- Melissa Holland
- Lori Hornsby
- Joseph Lassiter
- Rose O’Flynn
- Sarah Scarpace
- Amy Weir
- Anders Westanmo
- Jim Winegardner
- Joan Yamada