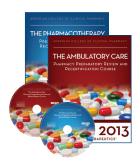
## **GCCP** Report

### **American College of Clinical Pharmacy**

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

Vol. 32, No.5; May 2013

Preorder the 2013 Ambulatory
Care Pharmacy Prep Course and
Pharmacotherapy Prep Course Home
Study Instructional Materials Now



Do you plan to take the Pharmacotherapy or Ambulatory Care Pharmacy Specialty Exam this October, but find it difficult to start reviewing? Do you question your understanding of some of the key concepts that may be covered on the specialty exam? If so, consider the home study version of the

2013 Ambulatory Care Pharmacy Preparatory Review and Recertification Course or the 2013 Pharmacotherapy Preparatory Review and Recertification Course to ensure that you're fully prepared for this year's examination! The home study versions contain the lectures from ACCP's internationally recognized live review course, held in Reno, Nevada, in April 2013. Instructional materials for both courses can be preordered today at <a href="http://www.accp.com/bookstore.">http://www.accp.com/bookstore.</a>

By purchasing the home study version of either the Ambulatory Care Pharmacy Prep Course or the Pharmacotherapy Prep Course, you can avoid time-consuming, costly travel while reaping the benefits of nationally recognized content experts, whose fast-paced, yet comprehensive reviews of the full scope of the pharmacotherapy/ambulatory care specialty will help you reaffirm your areas of strength and identify potential weaknesses. Each course offers a detailed two-volume workbook covering more than 20 key therapeutic areas and providing more than 350 case-based questions and feedback for effective learning and self-assessment. This home study course will be delivered directly to your home, office, or anywhere you have either a computer or broadband Internet access.

Instructional materials, which start at the low price of \$380 (ACCP member rate), are available in the following formats:

- Pharmacy Education (CPE). This package contains the complete course workbook and a CD-ROM that includes the presenters' audio-recorded lectures, synchronized to the slide presentations from the live program; the course is available in a downloadable MP3 file format as well. The CD-ROM and course workbook with CPE package also provide access to the Web-based posttests for CPE credit. The CD-ROM will ship on June 1, 2013. The course workbook will ship immediately.
- Web-Based Online Course with Continuing Pharmacy Education (CPE). This combination provides the online workbook and includes the presenters' audio-recorded lectures, synchronized to the slide presentations from the live program; the course is available in a downloadable MP3 file format as well. The online course additionally provides access to the Web-based posttests for CPE credit. The online workbook is available immediately; other course materials will be available on June 1, 2013.
- CD-ROM and Online Workbook with Continuing Pharmacy Education (CPE). This package includes the CD-ROM and complete course online workbook, plus access to the Web-based posttests for CPE credit. The online workbook is available immediately; other course materials will be available on June 1, 2013.

Individual instructional components are also for sale, starting at only \$150 (ACCP member price). All home study packages as previously described provide access to the content of the entire course. To receive CPE credit for any of the home study packages, you must successfully complete and submit the Webbased posttest to ACCP by October 31, 2014. Continuing pharmacy education credit is not available for individual instructional components. Orders for the Ambulatory Care Pharmacy Preparatory Review and Recertification Course or the Pharmacotherapy Preparatory Review and Recertification Course instructional materials may

be placed online at <a href="http://www.accp.com/bookstore">http://www.accp.com/bookstore</a>. Orders may also be placed by telephone at (913) 492-3311 or by fax at (913) 492-0088.

Learning objectives, faculty disclosures, target audience, program goals, technical requirements, and samples of each course are available at <a href="http://www.accp.com/bookstore">http://www.accp.com/bookstore</a>.

## Save the Dates: 2013 ACCP Virtual Poster Symposium, May 21–22

Mark your calendar for the second annual ACCP Virtual Poster Symposium, scheduled for May 21–22, 2013. Posters will be on display May 21 and 22 for asynchronous viewing and comment. In addition, two interactive sessions will be scheduled on both May 21 and 22, when authors will be available for real-time online questionand-answer sessions alongside their virtual posters. The technology required for attendees is minimal—a broadband Internet connection, an up-to-date Web browser,

and Skype (free software). To register for the ACCP Virtual Poster Symposium, please visit <a href="http://www.accp.com/myaccount">http://www.accp.com/myaccount</a>, log-in, and click on the link Register for ACCP Virtual Poster Symposium. Registration is free to all ACCP members.

#### **Enroll in the ACCP Academy Today**



The ACCP Academy is a continuous educational effort designed to deliver

a flexible, curricular approach to enhancing ACCP members' abilities in their main areas of responsibility.

The ACCP 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.

Established in 2006, the Teaching and Learning Certificate Program was the first program offered by the

#### **2013 Annual Meeting Call for Abstracts**

Submit abstracts online at <a href="http://accp.confex.com/accp/2013am/cfp.cgi">http://accp.confex.com/accp/2013am/cfp.cgi</a>.

All investigators in the field of clinical pharmacy and therapeutics, both ACCP members and nonmembers, are invited to submit abstracts to be considered for poster presentation at the 2013 Annual Meeting in Albuquerque, New Mexico.

Abstracts may be submitted in one of the following categories:

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

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

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

**Student Submissions:** Submission criteria are those of an Original Research presentation. Partly completed

data are acceptable for inclusion. Abstracts should provide an assessment of the likelihood of project completion by the 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.

#### **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 Poster Award competition. Judging of finalists will occur during the poster sessions at the meeting. The deadline to submit abstracts in Original Research, Clinical Pharmacy Forum, and Resident and Fellow Research-in-Progress categories is Sunday, June 16, 2013, midnight (PST). The deadline to submit abstracts in Student Submissions and Late Breakers is July 2, 2013. Authors will be notified by e-mail of acceptance of their papers by Thursday, August 15, 2013.

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

ACCP Academy. The Teaching and Learning Certificate Program is designed to assist in the recruitment, motivation, and preparation of clinical educators who can inspire students to advance the profession of pharmacy.

The Leadership and Management Certificate Program was the second program to be offered in the ACCP Academy. Released by ACCP in 2007, the program is designed to enable participants to better lead their personal lives as well as 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.

The Research and Scholarship Certificate Program, established by ACCP in 2008, is designed to develop basic clinical research and scholarly abilities of clinical pharmacists. The program integrates research theory with practical applications while involving the participant in scholarly work early in the curriculum.

In 2009, the ACCP Academy established the Career Advancement Certificate Program. The Career Advancement Certificate Program is designed to help both new and experienced practitioners advance their careers as clinicians, establish credible interprofessional and patient-centered roles, extend their clinical practices through mentoring and precepting, and employ practical strategies to enhance their professional standing and recognition.

At the inception of the ACCP Academy in 2006, there were only 43 participants in the Academy. Today, the Academy has about 500 active participants enrolled in one or more Academy certificate programs. Take advantage of this valuable professional development pathway and enroll in the ACCP Academy today. Visit the Academy's Web site at <a href="http://www.accp.com/academy">http://www.accp.com/academy</a> to learn more about each of the certificate programs and to complete an online program application.

## Helping Students Become Standout Pharmacy Residency Candidates



As the market for residency positions becomes increasingly competitive, ACCP continues to assist students in

maximizing their ability to secure a residency position upon graduation. First, *The ACCP Field Guide to Becoming a Standout Pharmacy Residency Candidate*, published in December 2012, offers a multiyear, stepwise approach for students to maximize their curricular and extracurricular experiences, beginning in the first year

of pharmacy school. Executive Editor Jerry L. Bauman, Pharm.D., FCCP, FACC; Associate Editor Keri A. Sims, Pharm.D., BCPS; and an expert team of authors and reviewers provide valuable insights and advice to students seeking to position themselves as standout residency candidates.

Second, ACCP's live 2-day program "Emerge from the Crowd: How to Become a Standout Residency Candidate" was held April 20-21 in conjunction with ACCP's Updates in Therapeutics® in Reno, Nevada. The program provided students with 11 hours of interactive programming designed to brief first-, second-, and thirdyear students on how best to secure a residency position upon graduation. The program's faculty panel was composed of leading clinical pharmacy residents, practitioners, educators, and scholars. These faculty presented expert advice on engaging in scholarly activity, gaining valuable work and professional experience, networking, achieving academic and experiential success in the classroom and during experiential rotations, developing CVs and portfolios, navigating the residency application process, and interviewing.

Watch for dates of the next offering of "Emerge from the Crowd" on the ACCP Students page at <a href="http://www.accp.com/stunet">http://www.accp.com/stunet</a>.

## ACCP National Student Network Advisory Committee Applications Due June 14

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 2013–2014 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-elect. Members generally serve a 1-year term, and the committee is typically composed of 8–12 members Leadership positions include the chair (1-year term), the vice chair (2-year term; serves first year as the vice chair and then assumes the chair position during the second year), and the secretary (1-year term). If you are a student interested in serving on the 2013–2014 ACCP National Student Network Advisory Committee, either as a member-at-large or in a leadership role, please visit <a href="http://www.accp.com/stunet/advisoryCommittee.aspx">http://www.accp.com/stunet/advisoryCommittee.aspx</a> for more information about the committee and how to apply. The deadline for applications is June 14, 2013.

## ACCP National Resident Advisory Committee Applications Due June 14

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 2013–2014 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 vice chair (1-year term).

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

The committee meets in person at the College's Annual Meeting in October and communicates by conference calls and e-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 <a href="http://www.accp.com/membership/rac.aspx">http://www.accp.com/membership/rac.aspx</a>. The deadline for applications is June 14, 2013.

#### **President's Column**



Curtis E. Haas, Pharm.D., FCCP, BCPS

## Board Certification—Creating a New Framework

Several recent positive developments related to Board of Pharmacy Specialties (BPS)-recognized board certification hold significant promise. But be-

fore getting into the details, it is important to provide some historical context....

ACCP has long been an advocate, sponsor, and staunch supporter of specialty board certification of clinical pharmacists and has acknowledged and maintained that BPS is and should be the profession's designated body overseeing the recognition of pharmacy

specialists.<sup>1-5</sup> ACCP has also invested considerable resources to develop and provide high-quality certification and recertification materials and programs across several BPS-recognized specialties. In fact, the first strategic direction of the ACCP strategic plan states: "Increase practitioner access to specialist certification, recertification, and other means of ensuring maintenance of competence." The objectives within this strategic direction pertain to an expanded recognition of specialties, with the intent of best meeting the certification needs of clinical pharmacists who provide direct patient care in multiple practice environments and specialties.<sup>6</sup>

ACCP has backed up this commitment with action. The College has been a co-petitioner or co-requestor on each recently considered new specialty, including ambulatory care, pediatrics, critical care, cardiology, and infectious diseases. We have also submitted preliminary requests for additional specialties in collaboration with partner organizations.

Certainly, ACCP is "all in" on the importance and relevance of board certification. The organization has published position statements, commentaries, and white papers expressing its belief that clinical pharmacists who provide direct patient care should be board certified in their specialty or board-eligible if specialty recognition is not yet available in their particular practice focus. This was most recently reiterated and clarified by the ACCP Board of Regents commentary published this spring (please see my March 2013 column for more details).

Although we celebrate the continued growth in the number of specialties recognized, it is important to remember that ACCP has expressed significant concerns about the current specialty framework for pharmacy that was first developed almost 40 years ago. Some of these concerns include the lack of alignment with contemporary specialty training (PGY2) and the practice of clinical pharmacy; inefficient and cost-ineffective processes for developing new specialties; and, until now, an overall lack of strategic thinking and professional dialogue about how the framework should be modified to best meet the needs of patients, professional colleagues, and clinical pharmacists.<sup>2</sup> For the past decade, ACCP has expressed its concerns to BPS regarding the specialty framework and has been joined in this discussion by other organizations. In 2009, ACCP published a white paper proposing a revision of the specialty framework that would employ a broad-based core or primary certification, followed by subspecialty certification in several relevant clinical pharmacy subspecialties.<sup>2</sup> The recommendations included in this white paper had previously been shared with BPS and other stakeholders, as early as 2007. Although BPS did commission an external study of the specialty framework during this time, BPS affirmed its intent not to revise this framework in 2010. This prompted an open letter from then-ACCP President James Tisdale, who expressed frustration with the lack of progress toward establishing a coherent, contemporary specialty framework, openly challenging BPS to reconsider its decision about revision. Tisdale's letter called for BPS to conduct a meaningful discussion with stakeholders about this issue.<sup>7</sup>

Why did ACCP continue to actively co-petition BPS for the recognition of new specialties when we were in disagreement with the current framework? Many of our members asked the same question on several occasions. There are several valid answers. (1) Despite a lack of agreement on the framework, the continued growth of specialty recognition was in the best interest of clinical pharmacists who were avidly seeking new certification options. (2) ACCP needed to remain engaged in the process to ensure that the petitions and specialty recognition standards would continue to meet the rigor and quality that ACCP members, other health professionals, and the public should expect. (3) The continued growth of recognized specialties (with relatively few board-eligible candidates) would further highlight and emphasize the need to rethink the overall structure of specialty recognition. Staying involved in the process and continuing to work with our colleagues at BPS would be much more productive and likely to address our concerns in the long run than would disengaging and pursuing specialty recognition outside BPS.

Fast-forward to two important announcements recently released by BPS. First, in January 2013, the BPS Board of Directors published a white paper that articulated its 5-year strategic plan. In this document, BPS discusses the plan "to create a scalable foundation on which to build future board certification activities for pharmacists." The vision expressed in the plan contains four points:

- The number of Board Certified Pharmacists will significantly increase to facilitate progress towards a future model where board certification will be the expectation for pharmacists engaged in direct patient care.
- BPS will recognize new pharmacy specialties and/ or subspecialties in areas that are consistent with, but not limited to, the growth of accredited postgraduate year 2 (PGY2) residency programs. In addition, BPS will evaluate the current specialty recognition structure and process and consider potential modifications.
- BPS will routinely gather and publish statistics on the number of Board Certified Pharmacists and

- will facilitate research related to the value of BPS board certification. Board Certified Pharmacists will be recognized, valued and compensated within healthcare delivery systems worldwide for their contributions to direct patient care.
- BPS will continually assess its model for recertification based on the principles of continuing professional development that ensure current knowledge consistent with the scope of the specialty.<sup>8</sup>

This white paper from the BPS Board is important for many reasons. First, it recognizes the importance of aligning the board certification of specialists with formal specialty training (PGY2). Second, it uses the terms specialty and subspecialty when referring to the specialty recognition process, consistent with the two-tiered framework proposed in the 2009 ACCP white paper. Finally, it acknowledges the need to evaluate the current specialty recognition structure and consider modifications. In the text of the document, BPS discusses the need for a streamlined specialty review process and consideration of the need to evolve to a process that includes a series of broad-based "primary certifications," with the development of pharmacy subspecialties within these primary areas. The paper discusses parallels with the American Board of Medical Specialties' structure to create efficiencies for smaller but important areas of practice. This strategic plan is well aligned with ACCP's viewpoint and is very encouraging to anyone seeking a more coherent, efficient, and well-aligned specialty recognition framework for pharmacy.

The second important BPS announcement was made in an April 24, 2013, memo from BPS Board Chair and Executive Director William Ellis to the chief staff officers of several stakeholder organizations. The memo detailed BPS's intent to embark on a 12-month process of evaluation to develop a scalable foundational model for the future specialty certification of pharmacists. The two stated goals of this evaluation are to (1) consider revisions in the overall petition submission process and (2) explore a potential subspecialty recognition model. BPS has expressed its commitment to maintaining the high standards of rigor and quality that characterize the current board certification process while considering ways to accommodate and encourage the growth of pharmacy specialty recognition. Unfortunately, this announcement also means a delay in the analysis of recently conducted role delineation studies addressing potential new specialties in cardiology and infectious diseases. Therefore, any decision relative to a call for petitions must await completion of this broader evaluation. Although unfortunate for clinical pharmacists who practice in these specialty areas, this is understandably a necessary decision, given the impact of the outcome of this evaluation on the consideration of additional new specialties and subspecialties in the future.

I applaud these recent steps by the current BPS leadership. In fact, many important decisions and analyses will arise regarding the specialty framework, the fate of currently recognized specialties and board-certified pharmacists, and the sustainability of any new model that is proposed. However, I believe these are clear indicators that BPS is moving in a positive direction to increase the relevance and professional alignment of specialty recognition. It will also be important that all stakeholders have input into this process and an opportunity to comment on and respond to whatever proposals come forth. It will not be easy to restructure the specialty recognition process—but truly worthwhile endeavors are rarely easy!

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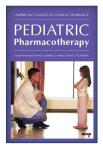
#### **ACCP Publications: Most Popular Titles**

At ACCP's April meeting in Reno, the on-site bookstore offered a large selection of books and other educational materials. Attendees were able to purchase titles to enrich their professional libraries and aid in their day-to-day practice. The following are the most popular choices from the recent meeting:



<u>Clinical Pharmacist's Guide to Biostatistics and Literature Evaluation</u> was developed to bolster the clinical pharmacist's knowledge and confidence in using biostatistical tools for interpreting the literature. With material drawn from ACCP's renowned Pharmacotherapy Self-Assess-

ment Program (PSAP) and ACCP's live preparatory course Updates in Therapeutics®, this review is designed to support the pharmacist's preparation for the Pharmacotherapy and Ambulatory Care Pharmacy Board of Pharmacy Specialties (BPS) examinations.

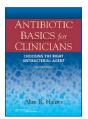


Pediatric Pharmacotherapy. Pharmacy literature has long been without a resource geared toward the unique therapeutic requirements of pediatric patients, but now, ACCP's newly released Pediatric Pharmacotherapy fills that void by focusing on the therapeutic needs of neonates, infants, children, and adolescents. Developed es-

pecially for students and trainees in pediatric pharmacy, this book is useful for practitioners at every level who are involved in pediatric patient care. *Pediatric Pharmacotherapy* is a necessary addition to the pediatric pharmacy literature.

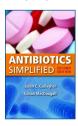


Pharmacotherapy Flash Cards contains 238 question-and-answer cards to sharpen your therapeutic decision-making skills. These cards provide a complete review of pharmacotherapeutic concepts for the major disease states most often encountered in practice.



Antibiotic Basics for Clinicians is a howto guide for applying your knowledge of pharmacology and microbiology in order to select the appropriate antibiotic. Rather than rely on rote memorization, you'll learn the rationale behind the recommended treatment of common infec-

tious diseases and pathogens. The text focuses on antibacterial agents, examining individual antibiotics and antibiotic classes as well as definitive and empiric therapies—providing a framework for prescription and clinical preparation.



Antibiotics Simplified is a succinct guide designed to bridge the knowledge gained in basic science courses with the standards in clinical practice for infectious diseases. This practical text reviews basic microbiology and how to approach the pharmacotherapy of a patient with a presumed infection. It also contains concise

Drug Class Reviews, with an explanation of the characteristics of various classes of antibacterial drugs and antifungal drugs.



Johns Hopkins ABX Guide continues to provide current, authoritative, and comprehensive information on antimicrobial agents, infectious diseases, and commonly encountered pathogens in one portable volume. Written by experts at the world-renowned Johns Hopkins University School

of Medicine, this guide features expert recommendations, clinical and diagnostic decision-making tools, and drug-to-drug interactions. Concise, thorough, and current, *Johns Hopkins ABX Guide* is designed for quick reference and comprehension. Information is featured in an easy-to-access format that facilitates the rapid application of knowledge at the point of care.



**Top 100 Drug Interactions.** This popular pocket-sized reference book contains information on more than 6800 individual, clinically significant drug interactions, each of which is grouped by object and precipitant drugs. The table listing CYP and

transporter substrates and modifiers includes in excess of 400 drugs and, unlike other sources, includes only data substantiated by human in vivo studies. Each drug interaction description includes a brief summary of the interaction. *Top 100 Drug Interactions* provides clear management options, allowing you to select an appropriate way to avoid potential adverse effects.



<u>Drug Information Handbook</u> continues the tradition of delivering trusted pharmacotherapy knowledge to health care professionals. This resource follows a user-friendly, dictionary-like format, providing clinicians with fast access to clear and concise drug information. *Drug Informa-*

tion Handbook covers more than 5500 medications. Each monograph encompasses up to 39 fields of information, including detailed content on dosage, drug interactions, and adverse reactions. Supplementing the drug information is a comprehensive appendix offering charts, tables, treatment guidelines and therapy recommendations, and a Pharmacologic Category Index that

lists all drugs within their unique pharmacologic class.



**Primer of Biostatistics** is a concise, engaging introduction to understanding statistics as they apply to medicine and the life sciences. This primer demystifies this challenging topic in an interesting and enjoyable manner that assumes no previous knowledge of the subject. You

will be able to understand test selection and evaluate biomedical statistics critically, knowledgeably, and confidently.



**Basic Skills in Interpreting Laboratory Data** is the only reference on this subject written by pharmacists for pharmacists. Students find this guide a clear and useful introduction to the fundamentals of interpreting laboratory test results. Practitioners value its help in assessing patient

responses to drug treatment.

You can purchase these titles for your collection as well. Simply visit the <u>ACCP online bookstore</u> to order your favorites today.

#### **Next PSAP Release Is Special Populations**



Special Populations, the next book in ACCP's popular Pharmacotherapy Self-Assessment Program (PSAP), will be released on July 15, 2013.

Leading the new edition are PSAP Series Editors John E. Murphy, Pharm.D., FCCP, FASHP; and Mary Wun-Len Lee,

Pharm.D., FCCP, BCPS. *Special Populations* Faculty Panel Chair J. Mark Ruscin, Pharm.D., BCPS, and a team of authors have developed chapters on:

- Urinary Incontinence in the Older Adult
- Benign Prostatic Hyperplasia
- Prostate Cancer
- Infertility in Women
- Pregnancy-Related Disease
- Chronic Diseases in Pregnancy
- Allergic Rhinitis
- Diseases of the Aging Eye
- Reimbursement and New Models of Pharmacy Practice

PSAP releases are online books (PDFs) with interactive features such as intra-document links from the table of contents; external links to official guidelines, tools, and resources; and in-text citations linked to the major research compilers. Purchasers of the Print Package also get a soft-cover print book. The E-Media Package

supplements the online book with a tablet-friendly version and the popular Audio Companion. The All-Format Package includes all the available learning formats.

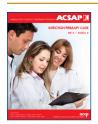
PSAP 2013–2015 books are available singly or as a six-book series. Other books in the series are *Cardiology/Endocrinology, Critical and Urgent Care, Chronic Illnesses, Infectious Diseases,* and *CNS/Pharmacy Practice.* For specific release dates, available CPE credits, and chapter samples in different formats, or to place your online order, visit the <u>ACCP Online Bookstore</u>. Books are priced as follows; shipping and handling charges apply only to the Print Package.

#### PSAP 2013-2015

SINGLE BOOKS	Member Price	Nonmember Price
Standard Release (Online Book)	\$65	\$90
E-Media Package	\$90	\$130
Print Package	\$90	\$155
All-Format Package	\$105	\$195
SIX-BOOK SERIES		
Standard Release (Online Book)	\$285	\$385
E-Media Package	\$385	\$555
Print Package	\$385	\$585
All-Format Package	\$445	\$785

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

## Infection Primary Care Is the Next ACSAP Release



Infection Primary Care, the next book in ACCP's new Ambulatory Care Self-Assessment Program (ACSAP), will be released on July 15, 2013.

Leading the new program are AC-SAP Series Editors Betty J. Dong, Pharm.D., FASHP, FCCP, AAHIVP; and

David P. Elliott, Pharm.D., CGP, FCCP, FASCP, AGSF. *Infection Primary Care* Faculty Panel Chair Ralph H. Raasch, Pharm.D., FCCP, BCPS, and a team of authors have developed chapters on:

- Antimicrobial Prophylaxis
- Bone and Joint Infections

- Skin and Skin Structure Infections
- Primary Care of the Patient with HIV Infection
- Tuberculosis
- Viral Hepatitis
- Management of Fungal Infections
- Urinary Tract Infections/Prostatitis
- Sexually Transmitted Infections
- Community-Acquired Pneumonia
- C. difficile/Infectious Gastroenteritis/Travel Medicine Prophylaxis

ACSAP releases are online books (PDFs) with interactive features such as intra-document links from the table of contents; external links to official guidelines, tools, and resources; and in-text citations linked to the major research compilers. Purchasers of the E-Media Package receive a tablet-friendly version in addition to the online book.

ACSAP 2013–2015 books are available singly or as a six-book series. Other books in the series are *Pulmonary and Preventive Care, Endocrinology/Rheumatology, Cardiology Care, Neurologic and Psychiatric Care,* and *Men's and Women's Care*. For specific release dates, available CPE credits, and chapter samples in different formats, or to place your online order, visit the <u>ACCP Online Bookstore</u>. Books are priced as follows:

#### ACSAP 2013-2015

SINGLE BOOKS	Member Price	Nonmember Price
Standard Release (Online Book)	\$65	\$90
E-Media Package	\$80	\$115
SIX-BOOK SERIES		
Standard Release (Online Book)	\$285	\$385
E-Media Package	\$345	\$485

ACCP is accredited by the Accreditation Council for Pharmacy Education (ACPE) as a provider of continuing pharmacy education. The Board of Pharmacy Specialties (BPS) has approved ACSAP for use in Board Certified Ambulatory Care Pharmacist (BCACP) recertification.

#### **ACCP Member Spotlight: Juliana Chan**



Dr. Juliana Chan is a clinical associate professor at the University of Illinois at Chicago (UIC) College of Pharmacy and in the College of Medicine in the sections of Digestive Diseases, Nutrition, and Hepatology. She earned her

B.S. degree in pharmacy and her Pharm.D. degree from the Massachusetts College of Pharmacy (MCP). She completed a Pharmacy Practice Residency (PGY1) and a Specialized Residency in Gastroenterology and Hepatology (PGY2) at the University of Michigan. She is a Board Certified Ambulatory Care Pharmacist who teaches and conducts research in gastroenterology and hepatology with a focus on viral hepatitis.

During the past decade, Dr. Chan had many opportunities to serve in several clinical capacities. In 2002, she established the first hepatitis C pharmacist-managed clinic at the University of Illinois Medical Center (UIMC) Outpatient Care Center, which was subsequently dedicated as the Bobbie and Marvin Fink Liver Clinic. She was the primary care provider for patients with hepatitis C when referred by the hepatologist to initiate hepatitis C therapy. Dr. Chan was responsible for all patient assessment and education, as well as for ordering and monitoring pertinent laboratory tests, providing therapy and dosage adjustments, and managing adverse drug effects associated with hepatitis C medications. The pharmaceutical care she provided allowed her to focus her efforts on maximizing the benefits of liver drug therapy, reducing complications and adverse effects, improving patient outcomes, and decreasing overall health care costs.

In 2007, Dr. Chan was named the assistant director of clinical pharmacy in ambulatory care at UIMC. Her clinical skills and expertise in creating the hepatitis C service revolutionized specialty pharmacy services at UIMC. Under her direction, rheumatology, neurology, and gastroenterology specialty pharmacy services were created, which mirrored and modeled the hepatology service she had established. In addition, during her tenure as assistant director, she focused her research efforts on pharmacy administration, including the management of Risk Evaluation and Mitigation Strategies (REMS), quality improvement, and medication safety.

Because of Dr. Chan's success in creating the pharmacist-managed hepatitis C clinic in early 2000, she was selected to spearhead the development of a novel telemedicine clinic at UIC. Established in 2010, the hepatitis C telemedicine program provides direct patient care to about 300 inmates with viral hepatitis within the Illinois Department of Corrections by video conferencing; Dr. Chan is currently the clinical pharmacist who oversees this program.

Dr. Chan has given many invited national and international presentations on gastrointestinal and liver topics, published her research in peer-reviewed professional and scientific journals, and written several book chapters. She has also presented many papers on pharmacy administration with a focus on REMS, specialty

pharmacy services, and quality improvement initiatives involving the Joint Commission requirements; these presentations have occurred at the University Health-System Consortium, American Society of Health-System Pharmacists, U.S. Food and Drug Administration, and ACCP.

Through the years, Dr. Chan's career has been enriched with several challenges and successes. She states that two individuals were of great influence to her, responsible for getting her to where she is today. The first is Professor Marion Hoar, her pharmaceutics professor at MCP, who taught her that perseverance is the key to success. Dr. Chan fondly recalls days in the pharmaceutics lab, making suppositories during intensely hot summer months. She felt punished and wondered "why me?" of all students chosen to make suppositories, a "not-so-nice" dosage form to be compounded in 90-degree weather. Although Dr. Chan pled with Professor Hoar to assign another item to compound, she was unsuccessful. Professor Hoar kept telling her "to keep trying and do not give up so easily." He always pushed students to their limits and never gave them an easy answer; instead, he encouraged and nurtured self-thinking, pushing his students out of their comfort zone. It certainly was a journey, going through the pharmaceutics course. Professor Hoar, however, taught her that determination and "giving it your all" would make everything worthwhile. Professor Hoar's constant guidance afforded her many "aha" moments...including a successful outcome when congealing a suppository, even in the warm weather.

The other individual who molded Dr. Chan into who she is today is Dr. Rosemary R. Berardi, professor emeritus of pharmacy at the University of Michigan College of Pharmacy. During Dr. Chan's PGY1 residency program in 1998, she was introduced to Dr. Berardi, who identified herself as the GI/liver clinical pharmacist who was encouraging/soliciting residents to be on her clinical service. Dr. Chan states that the first words of Dr. Berardi were, "If you want to learn and teach, then select my rotation," and that afterward, the professor left her curriculum vitae (CV) on the table and exited the room. Dr. Chan was petrified as she thought, Who would be "crazy enough" to be a clinical pharmacist specializing in constipation and diarrhea? However, at the same time, she was intrigued as she perused Dr. Berardi's unique CV and, without hesitation, selected her GI/liver rotation. Because this occurred during the first 2 months in the PGY1, Dr. Chan quickly realized that GI was more than bowel excretion. Dr. Berardi modeled the persona of an excellent clinician who treated every patient as though he or she were her own "mom or dad" and encouraged Dr. Chan to "always think outside the box!!!"

Dr. Berardi's mentorship solidified Dr. Chan's desire to pursue a PGY2 residency in GI/liver under her guidance. Dr. Chan has no regrets about the day she was selected to develop her knowledge and skills under Dr. Berardi's tutelage. She truly believes that many of her academic accomplishments were achieved through Dr. Berardi's guidance, mentorship, and, most importantly, friendship, through the years. Dr. Chan readily credits Dr. Berardi with her contributions to pharmacy and for being the thought leader in the gastroenterology and hepatology pharmacy world; without her being the "mother" and "creator" of this unique and specialized area, many of us would not be where we are today.

Dr. Berardi introduced Dr. Chan to ACCP and the importance of committee work. Dr. Chan maintains that without Dr. Berardi, there would be no GI/Liver/Nutrition PRN today. Dr. Berardi established the ACCP GLN PRN and invited Dr. Chan to be one of the founding members in 1999. Since then, Dr. Chan has been actively involved in national organizations, devoting most of her time and energy to ACCP. Among her contributions to ACCP are serving as a reviewer for annual and spring meeting abstracts for ACCP, for Pharmacotherapy, and for the Pharmacotherapy Preparatory Review Course on Gastroenterology Disorders. For the Clinical Administration PRN, she has served as a co-chair on the Programming Committee and has established the Scholarship Committee. She was also selected to be the GLN PRN secretary/treasurer for 2012–2013. In addition, she has been invited to write the Viral Hepatitis section for the ACCP Pharmacotherapy Self-Assessment Program in the ACCP Ambulatory Care New Practitioner Survival Guide/Resource Manual and will be an item writer for the GI/liver content in the ACCP National Student Competition. Dr. Chan follows Dr. Berardi's example and is giving back to students, residents, and junior faculty by participating as an ACCP CV reviewer, National Resident Advisory Committee mentor, and Teaching and Learning Academy mentor. She encourages all trainees to join ACCP early in their career, telling them that this organization will help them grow professionally.

Dr. Chan gives credit to ACCP and states, "Being a member has allowed me many opportunities never thought of more than a decade ago." Dr. Chan believes her success in the practice of pharmacy is directly because of those who taught and mentored her when she was a student and resident. To be successful in the everevolving health care system, Dr. Chan advises students and residents to (1) seize every opportunity when it appears; (2) accept criticism to decrease your blind spots, even if not presented in a constructive way; and (3) never be afraid/reluctant to voice your thoughts and/or opinions because you never know. Dr. Chan's motto is, "Ask and you may receive, give and you will receive."

#### From the Desk of the ACCP PBRN Community Advisory Panel Chair: Common Problems with Research Proposals



Rex Force, Pharm.D., FCCP, BCPS Chair, ACCP PBRN Community Advisory Panel

We are presently in the most competitive environment for health research funding in recent memory. Many projects with significant scientific merit will go unfunded because of reductions in budgets and increased competition for funding sources. Recently, for example, more than 3000 applicants vied for \$1 billion in CMS Health Care Innovation Awards. Ultimately, 107 applicants were funded to conduct 250 projects averaging \$4 million each, a funding rate of less than 3.5%.

So, how do we maximize our chances for receipt of funding? Careful development of research proposals and avoidance of common pitfalls are imperative. The Agency for Healthcare Research and Quality (AHRQ) has posted on its Web site a list of the most common issues with unfunded proposals<sup>1</sup>:

- Uncertainty whether research will produce significant information.
- Scientific basis not fully developed.
- No apparent translatability of research into practice or policy.
- Lack of a theoretical framework.
- Overly ambitious research plan; volume of proposed work unrealistic.
- Lack of original ideas.
- Proposed methods not appropriate to answer research questions.
- Research issues are more complex than investigator describes.
- Too little detail in the research plan (leads to reviewers questioning investigators' ability to carry out the research).
- Lack of focus in study hypotheses, aims, and/or research plan.
- Lack of generalizability of findings or methods.
- Investigator lacks expertise in methodology.
- Study team lacks expertise in all needed areas.
- Proposed time and effort of study team members insufficient.
- Lack of study controls.
- Lack of adequate preliminary data.
- Insufficient consideration of statistical needs.
- Inadequate attention to protection of human subjects and/or population representation.
- Lack of complete literature review.

The ACCP PBRN is equipped to assist investigators in addressing several of these key issues by providing support for budget and grant preparation, study feasibility testing within a national practice-based network, assistance with the submission of necessary IRB and regulatory documents, and data analysis and statistical support. I encourage any investigator developing a research proposal to consider the resources of the ACCP PBRN, the first national clinical pharmacy—based research network. For more information on how to collaborate with the ACCP PBRN, contact us at pbrn@accp.com.

 Agency for Healthcare Research and Quality. Common Problems Identified During Peer Review. Rockville, MD: AHRQ, January 2005. Available at http://www.ahrq.gov/funding/grants/ grant-app-basics/peerprob.html. Accessed May 8, 2013.

## Register Your Team for the 2013 ACCP Clinical Pharmacy Challenge



ACCP is currently accepting registrations for the 2013 Clinical Pharmacy Challenge. Now in its fourth year, this national pharmacy student competition 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 2013

ACCP Annual Meeting in Albuquerque, New Mexico.

Team registration is available online. Please note that all team registrations must be initiated by a current faculty member at the respective institution. Students interested in forming a team should contact their <u>ACCP College of Pharmacy Faculty Liaison</u>. All team registrations must be completed by **September 3, 2013.** Click <u>here</u> to register. Click <u>here</u> to view institutions that have are currently registered for the 2013 competition.

#### **Competition Overview**

The ACCP Clinical Pharmacy Challenge is a teambased competition. Teams of three students will compete against teams from other schools and colleges of pharmacy in a "quiz bowl"—type format. Only one team per institution can enter the competition. Institutions with branch campuses, distance satellites, and/or several interested teams are encouraged to conduct a local competition. ACCP will provide a written examination that may be used by institutions as a basis for their local competition, if they so desire. This examination is available by e-mail request, and it may be requested by the ACCP Faculty Liaison or registering faculty member. Please address your e-mail request to Michelle Kucera, Pharm.D., BCPS, at <a href="mkucera@accp.com">mkucera@accp.com</a>.

Preliminary rounds of the national competition will

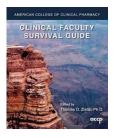
be conducted virtually in September. The quarterfinal, semifinal, and final rounds will be held live at the ACCP Annual Meeting in Albuquerque, New Mexico, October 12–14, 2013. <a href="http://www.accp.com/stunet/compete/eligibility.aspx#trSchedule\_title">http://www.accp.com/stunet/compete/eligibility.aspx#trSchedule\_title</a>. For additional information, practice examinations, and frequently asked questions, click <a href="https://example.com/here/en-albertal/en-albert

#### Gift Ideas for New Pharm.D., Resident, and Fellow Graduates



Each May, we pause to celebrate pharmacy student graduations and the forthcoming completion by residents and fellows in their training programs.

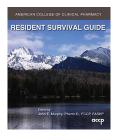
As these graduates transition to their next phase of professional life, a wonderful opportunity exists to share your gifts of knowledge and enhance their careers. ACCP Publications offers several titles that will be welcomed additions to the libraries of these new practitioners. Here are just a few of the titles available from the ACCP Bookstore.



<u>Clinical Faculty Survival Guide</u> provides practical information, advice, and encouragement to ensure success as a clinical faculty member in the varied roles of practitioner, teacher, researcher, and scholar. New faculty members will find this book helpful and easy to read as

they obtain a head start on a long and successful career. And if you are a more seasoned faculty member who serves as a mentor to younger colleagues, you will find the book's content useful and advantageous for imparting career advice.

Step-by-step suggestions and advice provide the knowledge and skill needed in the important subject areas of Clinical Practice; Leadership; Teaching, Precepting, and Mentoring; Research and Scholarship; and Lifelong Learning. Comprehensive references and links to useful resources are provided throughout.



The <u>Resident Survival Guide</u> is a detailed guidebook for clinical pharmacy residents as they embark on their residency experience. Once they make the important decision to seek a residency, they will find that their decision opens up many opportunities and presents

many challenges. Within the residency program, they will transition into superbly skilled and licensed professionals. They will acquire knowledge while confronting

heavy workloads, patient care responsibilities, challenging assignments, and demands on their time from preceptors, team members, and students. The *Resident Survival Guide* will assist them in meeting these challenges and taking advantage of these opportunities. The authors—leaders in the clinical pharmacy profession—offer potential and current clinical pharmacy residents insight and advice for understanding and learning to manage these challenges while gaining lifelong advantages from the residency experience.



Nourishing the Soul of Pharmacy: Stories of Reflection. ACCP has collected a series of essays that provide a reflective look at pharmacists' roles in patient care—essays developed to enhance practitioners' empathy for their patients and elicit deeper bonds among pharmacists as well as other health care profes-

sionals. This goal is consistent with the imperative for practitioners to show care and compassion for every patient they serve, as an essential ingredient in pharmacy's continuing evolution as a health profession.



Reflection in this volume refers to stories, particularly of patient encounters, that lead to complex insight and improved patient care. This book is intended for a variety of audiences: practitioners,

educators, and students as well as perhaps patients, caregivers, and health care professionals who seek a better understanding of pharmacists and the roles they perform.

Clinical Pharmacy in the United States: Transformation of a Profession is a comprehensive account of the evolution of clinical pharmacy, providing great insight to anyone who cares about the profession of pharmacy. Beginning with an overview of the profession's evolution and proceeding through the decade-specific chapters that follow, the authors trace the clinical pharmacy movement from its beginning to the present. The book's unique organization provides important context beyond the profession of pharmacy by including a concise overview of U.S. culture, politics, economics, technology, health, and other events, melded with the major clinical pharmacy-related events. A time line that chronicles the key events flows across the bottom of the page. Distributed throughout the book are reflective essays—personal accounts that provide an on-the-ground perspective and impart a "you-are-there" dimension.

This graduation season, visit the <u>ACCP bookstore</u> and purchase inspirational and useful books for these new professionals.

#### **New Members**

Kristin Abaonza Samar Abouelella Khalil Abufara Lisa Aditama Danielle Albright Ola Aldeeb Aimee Aloiau Tyler Alverson Osvaldo Antommattei Monica Arbogast Mohammed Aseeri Kathryn Astle Michell Balanda William Ballough Emileigh Barham Michael Barton Ali Bazzi **Emily Bean** Kholoud Bin Rafeea Amanda Bishop Maharjana Bogus Nyoman Kenneth Boley Jonathan Bourque Megan Brafford Amy Brokenshire Louisa Budiarti Watari Budiono Alloch Burton Nicholas Castro Tina Chang Mary Cheeley Breanne Chipman Helen Chong Mariam Chouman Haeiin Chun Joseen Chundamala Lindsay Coleman Shawn Dalton Mary Davis Jesse Decker Ukamaka Dike **Delford Doherty** John Eiezie Wael Elbaramawi Jennifer Esch Judy Eun Husni Fattayer Lynn Frendak Anthony Fryckberg David Gao Andrew Gawlikowski Andrew Gentles **David Gierhart** 

Robin Greaves **Amy Harig** Faith Harris **Justin Harris** Angela Haskell Christine Hayag Julia Hector Sara Heiner Jaime Heissler Erik Henricksen Alexandra Hilts-Horeczko Michelle Hines Christopher Holinei Valerie Hubert Courtney Hudson **David Hughes Neil Hunter** Aam Ingram Suppachai Insuk Jisha Jacob Macheala Jacquez Kelly Jaczynski Jami Jain Solmaz Keefe Mike Kelly Julie Kidd Audra Kilburg Ike Kim Jamie Kinscherff Morgan Kohls Franciscus Kristianto Brett Kuhn Shirly Kumala Nitty Kuruvilla Jennifer Kwon Leah Lawrence Ngoc Le William Le Susan Lee Vivian Lee YoonJung Lee Polina Lerner Jueli Li **Huimin Lin** Tara Lines Angela Livingood **Emily Lodwick** Katherine Lundin Adrienne Ma **Kyle Mains** David Margraf Hilary Martinez Jason Mayes Elise McCuiston Kim Mella Marlow Mitchell

James Gilmore

Marisca Evalina

Gondokesumo

Richard Molinaro
Elizabeth Moore
Mojdeh Moradi
Lauren Moushey
Shanthini Natarajan
Armenia Nazar
Lesley Ann Nelson
Khiet Nguyen
Lily Nguyen
William Huy Nguyen
Hyrum Nichols
Philomena Nwakasike
Imelda Palit

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Andrew Schmelz
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Stacey Shellberg

Tracy Shugar Imanuel Sianipar Caroline Siemer Sarah Slater Rebeca Socaciu Brian Spence Meryn Sweet Yasser Tashkandi

**Heather Short** 

Samantha Themas Laura Tiemann Lauren Titterington Kari Ann Torma

Kari Ann Torma Sandra Torossian

Bill Trinh Edgar Turner

Jessica Taylor

Kyle Turner Elly Usman

Elly Usman Kalena Van Leuven Jocelyn Van Vickle June Vasquez Juliana Veljanovski Lawrence Virgin Kristan Vollman Peter Wacko Elizabeth Walker Angela Walsh Ayrl Webb James Wengerd

Angela Walsh Ayrl Webb James Wenger Shari Wheeler Amy Whisler Cassie Wilson Anna Wyatt Melissa Young Ali Zaidi

Marina Zdorovyak David Zimmerman

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

Fahamina Ahmed Abdulmalik Alkatheri Phyllis Arakaki Katie Axford **Brandon Bailey** Steven Baldwin Tracie Balvanz Mark Bremick Canice Coan Rebecca Cripps Leanne Current Lidia DaCruz Adwoa Darkwa Mohammad Elfaour Sarah Engberg Graziella Furnari Amanda Gillion **Andries Gous** Sarah Hanigan Jillaine Hardee Shauna Jacobson Stephanie Karasick Thomas Kleyn Nathan Leedahl Alice Lim Saiani Mehta

Kathleen Perez

Jennifer Ryan

Jeri Sias

Amber Lanae Smith Pierre Voirol Kimberly Watson Ching-Ling Wei Jim Winegardner

#### **New Member Recruiters**

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

members:
Michelle Albin
Kevin Aloysius
Deborah Baker
Karen Bills
Shirley Bonanni

Mei Chang Danny Chong Anthony Dargush Caitlin Delabar Dave Dixon

Stephen Drackett

Erika Ernst
Judy Eun
Elaine Fosmire
Shannon Goldwater
Karen Gunning
Holly Gurgle
Stuart Haines

Stuart Haines
Joseph Heissler
Karissa Kim
Jason Kimbrel
Katie Kiser
Joseph Kuti
John Murphy

Julie Murphy Okey Nnate Amy Barton Pai Paul Price Brett Read

Anne Schullo-Feulner

Chasity Shelton
Jodi Taylor
James Thielke
Lindsey Uhrin
Tyler Vest
Edwin Walton
Kathryn Weber
Lisa Wendler

**Christopher Winslow** 

#### **Professional Placement Advertisements**



# The University of Missouri-Kansas City School of Pharmacy Division of Pharmacy Practice and Administration Nontenure-track Positions Kansas City and Columbia, Missouri

The University of Missouri-Kansas City (UMKC) School of Pharmacy is seeking highly creative and motivated individuals for the following positions.

## Nontenure-track Position in Specialty Pharmacy Practice Area (Kansas City, Missouri)

The faculty member will practice in an outpatient ambulatory care setting at the Kansas City Care Clinic. Practice subspecialty will be based on the candidate's clinical expertise and the university's institutional needs. In addition to developing a clinical service, the faculty member will play an integral role in developing the OSCE/TOSCE-based curriculum. Other responsibilities may include large- and small-group teaching and the mentoring of pharmacy students. Please contact:

Steven Stoner, Pharm.D., BCPP
Chair and Clinical Professor of Pharmacy Practice
Chair, Search Committee
Telephone: (816) 235-5464

E-mail: stoners@umkc.edu

## Nontenure-track Position in Specialty Pharmacy Practice Area (Columbia, Missouri)

The faculty member will practice in a family practice inpatient setting at the university hospital. In addition to developing a clinical service, the faculty member will be an integral part of the curriculum, facilitating large- and small-group teaching, establishing new clinical services, and mentoring pharmacy students. Please contact:

Kathleen Snella, Pharm.D., BCPS
Associate Dean and Clinical Associate Professor of Pharmacy Practice

Chair, Search Committee Telephone: (573) 882-1590 E-mail: snellak@umkc.edu

#### **General Responsibilities of Both Positions**

The faculty members' practices will support both senior rotational students and a longitudinal clerkship experience for junior-level students. Faculty are expected to

contribute to the educational, scholarly, and service missions of the school and university. Academic, community, and/or professional services are important for success in this position. The relative distribution of these responsibilities varies with the location of the position.

#### **University of Missouri-Kansas City School of Pharmacy**

The UMKC School of Pharmacy offers an entry-level Pharm.D. degree. The program is delivered at the Kansas City campus and at the distance location in Columbia, Missouri. The entering class size is 95 students in Kansas City and 30 students in Columbia. The Division of Pharmacy Practice consists of more than 30 energetic faculty members representing a broad array of disciplines. The new Health Sciences Building in Kansas City, opened in summer 2007, houses the school of pharmacy. The Columbia site is located on the University of Missouri campus, which includes health science programs in allied health, medicine, and nursing. Further information on the school can be accessed at http://pharmacy.umkc.edu.

#### Qualifications

A Pharm.D. degree, together with postdoctoral training or equivalent experience in the discipline, and a Missouri license are required for all positions. Academic rank and salary will be commensurate with experience. Applications may be submitted electronically at <a href="http://www.umkc.edu/hr/career-opportunities/">http://www.umkc.edu/hr/career-opportunities/</a>.

UMKC recognizes that a diverse faculty, staff, and student body enrich the educational experiences of the entire campus and greater community. To this end, UMKC is committed to recruiting and retaining faculty, students, and staff who will further enrich our campus diversity, and we will make every attempt to support their academic, professional, and personal success.

UMKC is an Equal Access, Equal Opportunity, Affirmative Action Employer that is fully committed to achieving a diverse faculty and staff. All final candidates will be required to successfully pass a criminal background check before beginning employment.