Sign Up for and Attend the ACCP Virtual Poster Symposium – It’s Free!

Mark your calendar for the 12th annual ACCP Virtual Poster Symposium, scheduled for May 21–22, 2024. Two interactive sessions are scheduled for 7:00 p.m. to 9:00 p.m. (ET) on May 21 and 22, when authors will be available for real-time, online question-and-answer sessions alongside their virtual posters. Many authors may individually choose to offer an option for video chat as well. Posters will be on display May 19 through May 26 for asynchronous viewing and comment. An up-to-date web browser is the only technology required to participate in the interactive session. Attendance is free. All are invited to attend – ACCP members, colleagues, friends, and family. To set up an account, review posters, create a personal schedule, and attend the Virtual Poster Symposium, visit https://accp.confex.com/accp/2024vp/meetingapp.cgi.

ACCP Billing and Contracting for Outpatient Clinical Pharmacy Services Academy

ACCP’s newest Academy was developed for clinical pharmacists and clinical pharmacy administrators interested in identifying revenue-generating or cost-saving strategies for outpatient clinical pharmacy services. The ACCP Billing and Contracting for Outpatient Clinical Pharmacy Services Academy certificate program provides participants with the knowledge and skills to explore, identify, and implement fee-for-service billing and value-based contracting strategies. The program is delivered primarily through self-paced, on-demand modules developed by experts. The asynchronous content is supplemented with live consultancy sessions where participants learn through case-based discussions and network with peers and experts. To address the complexities of billing and contracting opportunities that vary depending on state, region, and health system/clinic, the program focuses on teaching participants to navigate the landscape to identify the strategies relevant to their unique practice and offers focused content on these strategies through learner-selected elective sessions.

Certificate requirements include 10 hours of required content, 3 hours of live (virtual) consultancies/live case discussions, and 5 hours of learner-selected electives.

- Module 1: Primer
- Module 2: Foundations: Fee-for-Service
- Module 3: Foundations: Value-Based Care
- Live case discussions
- On-demand electives

Don’t miss out on this essential content! Enrollment is open now, and course materials are available beginning Monday, June 17. Take advantage of special introductory rates on preorders through Friday, June 14. Learn more and register here.

ACCP Member Spotlight: Alexandra Mihm

Alexandra Mihm, Pharm.D., BCPS, is an assistant professor at Wingate University School of Pharmacy. Mihm earned her Pharm.D. degree from Butler University College of Pharmacy and Health Sciences in Indianapolis, Indiana, in 2016 and completed her 24-month pharmacotherapy residency at the University of Tennessee Medical Center and University of Tennessee Health Science Center College of Pharmacy in Knoxville, Tennessee. After practicing as an internal medicine clinical pharmacist at Atrium Health Wake Forest Baptist Medical Center in Winston-Salem, North Carolina, for 4 years, she transitioned to her current embedded clinical faculty role, maintaining her same practice site.

Mihm serves as one of the five zone coordinators for the school of pharmacy, developing rotation sites,
coordinating rotation schedules, and mentoring the students who move to the Winston-Salem area for their advanced pharmacy practice experience (APPE) rotations. In addition, she recently increased her responsibilities in the didactic curriculum while still precepting the required internal medicine APPE.

In her role as the institution’s pharmacy internship program research coordinator, Mihm works with first-through third-year pharmacy students from various colleges and schools of pharmacy in the state. She has played an integral role in developing and executing the program’s annual research boot camp series, which provides short didactic lectures on the research process and direct application of these principles to a group research project that is completed over one academic year.

When asked what led to her role in academia, Mihm responded:

My interest in academia developed through interactions with my professors and preceptors during pharmacy school. The time and effort they spent developing their students professionally and personally was apparent, and I knew I wanted to play an active role in preparing and inspiring the next generation of pharmacists to provide the best care possible to their patients.

Outside her professional pursuits, Mihm hopes to travel internationally with her family in the future. Cinque Terre in Italy, Australia and New Zealand, and a trip to see the Northern Lights currently rank highest on her list of travel destinations.

President’s Column
Clinical Practice, Wellness, and Thoughts from Neil Young: I Believe We Are at 11!

Brian Hemstreet, Pharm.D., FCCP, BCPS

In his 1979 song “My My, Hey Hey (Out of the Blue),” Neil Young delivered one of the most enduring phrases in music history: “It’s better to burn out than to fade away.” This has been quoted many times over the years in various contexts, including in many subsequent songs by other artists. In his 2016 interview with Dan Rather, Young states that the reference is to the potential adverse effects of the rock and roll lifestyle and environment on passionate and talented artists who are often at the height of their success. Alternatively, he states that life in general is much different and has many more meaningful components, such as family and relationships, to which this famous phrase does not apply.

Although Young’s observations were focused on the impact of the environment on musicians, our passionate and talented health care providers, including clinical pharmacists, are facing ongoing issues of burnout in the workplace that in many instances are causing them to leave direct patient care roles at the peak of their success, or in some instances leave their profession. Ultimately, this not only significantly affects clinician well-being but may also potentially reduce patient access to their providers – causing high-quality care to slowly fade away as highly skilled clinicians leave practice. The issue of burnout is pervasive among all health care disciplines and has been identified as a major priority by the U.S. Surgeon General (https://www.hhs.gov/surgeongeneral/priorities/health-worker-burnout/index.html). For ACCP, an organization composed largely of experienced clinicians, educators, and researchers on the front lines of patient care, this is truly an important issue that has also risen to the forefront of ACCP members’ minds.

Recent publications by ACCP members have explored the multifactorial causes of burnout while raising awareness of and recommending approaches to addressing burnout in a variety of professional settings. Most of these appear in the Journal of the American College of Clinical Pharmacy and include emphases on both current practitioners and trainees. They include systematic reviews, commentaries with calls to action on both burnout and attrition, and guidance on assessing and studying well-being within clinical pharmacy. Recent discussions at the April Board of Regents meeting and a priority by the U.S. Surgeon General (https://www.hhs.gov/surgeongeneral/priorities/health-worker-burnout/index.html). For ACCP, an organization composed largely of experienced clinicians, educators, and researchers on the front lines of patient care, this is truly an important issue that has also risen to the forefront of ACCP members’ minds.

From an organizational perspective, ACCP’s leadership recognizes that addressing burnout and fostering member well-being are high priorities. This was a topic of discussion at the April Board of Regents meeting and is a priority in the updated ACCP strategic plan. Your ongoing feedback and input on how ACCP can meet member needs with respect to burnout and well-being will be essential in this discussion, and I encourage you to share your ideas and thoughts with us. ACCP also continues to work with other pharmacy organizations to address other systematic issues facing the profession, such as improving workplace efficiency, structure, and support. Although it seems that addressing burnout and well-being is a monumental task, our efforts as an organization will be critical in both supporting ACCP’s members and sustaining the ability to deliver high-quality clinical pharmacy services.
In closing, when reflecting on my presidential theme for this year, “What’s Next for Clinical Pharmacy? Rising to the Challenges, Leading the Way, and Turning It Up to 11,” I sincerely feel that the needs of the clinical pharmacy workforce and the concerns surrounding burnout are issues where our attention has been turned up to 11. It’s only with ongoing dialogue and action that we can continue to make progress toward meaningful change. Similarly, although I am a dedicated fan of Neil Young, in the context of clinical pharmacy and patient care, it’s definitely not desirable to burn out or fade away. Thank you again to members who continue to dedicate themselves to providing direct patient care despite continuing challenges and to the ACCP membership as a whole for serving as an ongoing network of support. Be well—and have a great summer.

References

2024 Futures Grants: Mentored Research Funding Opportunity

The 2024 ACCP Foundation Futures Grants program invites student, trainee, and early-career ACCP members to apply for developmental research grants. Futures Grants awards range from $5000 to $40,000, depending on applicant eligibility and budget approval. Up to $100,000 in mentored, developmental research awards will be distributed through the Futures Grants program in 2024. To access detailed instructions about this grant award program, visit www.accpfoundation.org/futures.

The grant application portal will open May 15, 2024, and completed applications will be due no later than September 1, 2024. Grants will be reviewed and scored by the translational category of the research in addition to the applicant’s eligibility level.

All applicants must complete a set of online eligibility questions before applying. Applicant responses will provide an immediate determination of eligibility for the student/resident or junior investigator awards as well as applicant access to the appropriate online application form. Responses to the eligibility questions and partly completed applications may be saved and completed later by retaining the return access code provided.

For questions, please contact:
Shelly Enders, Pharm.D.
ACCP Foundation
(913) 492-3311
Email: senders@accp.com
Supported by the ACCP Foundation Frontiers Fund.

Calling All Interested Clinical Practice or Research Traineeship Preceptors
Preceptor Application Deadline – July 1, 2024

The purpose of the ACCP Foundation’s Immersive Mentored Skill Development Program (IMMERSE) is to fund and facilitate focused opportunities for full members of ACCP to acquire new skills that will expand and/or enhance their clinical practice or research programs.

To apply for funding to precept a training experience, click here.

During the 2024 IMMERSE pilot program, three PRN-cosponsored preceptors will be funded by the Foundation to deliver a skill development experience to a full member of ACCP.
Preceptor Eligibility: Preceptors must have an established practice site or research program, generally with a minimum of 5 years’ practice/research experience. Mentors will generally be members of the PRN cosponsoring the experience.

Experience Format/Duration: Training experiences may vary in length from a minimum of 5 days to a maximum of 4 weeks in person (not virtual/remote) with or without supplemental virtual/remote learning components. Estimated program length and design should be described in the experience/mentor application. The final experience plan will be determined by the mentor and participant trainee after the selection process is completed. All traineeship experiences must be completed by September 30, 2025.

Funding: Each IMMERSE experience offered during the pilot is eligible to receive up to $8000 in support from the Foundation. The mentor’s institution is eligible for up to $4000, and the participant trainee is eligible for up to $4000 to help defray costs of participation.

For complete details, please visit www.accpfoundation.org/immerse/.

Preceptor Application – Deadline to apply is July 1, 2024
The following information is required and will be reviewed by the designated PRN:

1. Brief description of advanced/unique clinical practice or research experience to be offered, including where the experience will take place, the estimated duration of the experience, and the mentor’s background/experience in the area of training (500 words or less)
2. Approval letter from department head/chair or equivalent unit administrator
3. Curriculum vitae

Link to application: https://redcap.accpfoundation.org/surveys/?s=KR94HMCPRNRP44DA

ACCP National Student Network Advisory Committee Applications Due June 15

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

The committee is composed of student members appointed each year by the ACCP president. Members generally serve a 1-year term, and the committee typically has 8–12 members. The leadership of the committee is also appointed by the ACCP president.

Leadership positions include the chair (1-year term), the vice chair (2-year term; serves first year as the vice chair and then assumes the chair position during the second year), and the secretary (1-year term). Please click here for more information about the committee or to apply. The deadline for applications is June 15.
ACCP National Resident Advisory Committee Applications Due June 15

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

This is a standing committee composed of resident and fellow members appointed each year by the ACCP president-elect. Members serve a 1-year term, and the committee typically has 8–12 members. Appointed leadership positions include the chair (1-year term) and the vice chair (1-year term).

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

The committee will meet in person at the 2024 ACCP Annual Meeting in October and communicates through videoconferences and email to complete its assigned charges. Appointees to the National Resident Advisory Committee will receive a complimentary meeting registration to attend the Annual Meeting in October. Click here for additional information on the application process or to enter your application. The deadline for applications is June 15.

Bring Emerge from the Crowd to Your Campus!

ACCP has been encouraging students to seek an individualized career path through self-reflection, work experience, networking, and mentoring for more than 10 years using its Emerge from the Crowd live programming and The ACCP Field Guide to Becoming a Standout Pharmacy Residency Candidate. The Field Guide applies to students at all levels and is designed to strengthen their candidacy for postgraduate positions by addressing 12 important steps. The hope is that all students will learn how to optimize their strengths and interests, communicate their unique qualities and experiences, and pursue their individualized career path.

ACCP would like to partner with your campus to bring virtual live programming and the Field Guide to your students by offering a deep discount on your bulk Field Guide purchase.

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<tr>
<th>Packages</th>
<th>Cost</th>
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<tr>
<td><strong>Package A</strong></td>
<td>$1500</td>
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<tr>
<td>■ 100 print copies of The ACCP Field Guide to Becoming a Standout Pharmacy Residency Candidate (a $2200 value if purchased at the member rate)</td>
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<td>■ One virtual resident panel discussion and two virtual topic presentations determined by the designated faculty liaison to the Emerge staff (provided over the course of one academic year)</td>
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<tr>
<td><strong>Package B</strong></td>
<td>$1000</td>
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<tr>
<td>■ 50 print copies of The ACCP Field Guide to Becoming a Standout Pharmacy Residency Candidate (an $1100 value if purchased at the member rate)</td>
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<td>■ One virtual resident panel discussion and two virtual topic presentations determined by the designated faculty liaison to the Emerge staff (provided over the course of one academic year)</td>
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If you are interested in pursuing one of the offerings, please contact Keri Sims (ksims@accp.com).
Washington Report
Senator Cory Booker (D-NJ) Introduces the SUPPORT Rx Act

John McGlew
Director of Government Affairs

ACCP’s Government Affairs team in Washington, D.C., has been working with the office of Senator Cory Booker (D-NJ) to develop legislation to fund a 3-year pilot project that would award grants to establish, maintain, or improve a pharmacy-based addiction care program. The legislation’s official title is Substance Use Prevention and Pharmacy Oriented Recovery Treatment Prescription Act (SUPPORT Rx Act). A bill number will be made available upon introduction.

Specifically, the legislation requires the Secretary of the Department of Health and Human Services (HHS) to initiate a 3-year demonstration program that awards grants to eligible entities to establish, maintain, or improve a pharmacy-based addiction care program.

Eligible Entities
Eligible entities might include:
- A state, tribal, or local health department
- A partnership between such a health department and one or more other entities whose state laws allow pharmacists to prescribe or enter into collaborative practice agreements with physicians authorized to prescribe
- A specialty addiction treatment practitioner in a primary care setting or a specialty substance use disorder treatment facility

Funding
The legislation identifies a funding mechanism through an established Harm Reduction Grant Program of the Substance Abuse and Mental Health Services Administration (SAMHSA).

Program Guidelines
The legislation sets out that the SAMHSA funding can be used to:
- Establish, maintain, or improve a comprehensive, pharmacy-based addiction care program to support withdrawal, induction, ongoing care, and rescue for individuals with opioid or other substance use disorders, provided by and at community pharmacies
- Offer a range of evidence-based medication treatments for opioid and other substance use disorders, including management of withdrawal from opioids and other substances, when appropriate; induction; and maintenance care
- Render same-day care services of low-barrier treatment, with no or reduced requirements, including no or reduced requirements for payment, insurance, age limits, and identification
- Provide harm reduction supplies to promote safety, such as opioid reversal medications approved by the FDA, naloxone training materials for staff, adulterant detection devices (including test strips), and other materials
- Provide training for pharmacists on treating patients with opioid and other substance use disorders
- Provide compensation to staff for pharmacy program and other program operations for which the staff would not otherwise receive compensation
- Provide payment for an individual to obtain not more than a 30-day supply of medication prescribed at any one time under the pharmacy-based addiction care program supported by the grant
- Provide care continuity fee payments to providers or clinics whose patients transfer their maintenance care to the pharmacy-based addiction care program supported by the grant to support
good recordkeeping, safe transfer, and transition in care
■ Provide telebehavioral health services
■ Provide construction to permit private or semi-private spaces for counseling and administration of medication
■ Provide secure technology that is in compliance with HIPAA privacy regulations
■ Establish a collaborative practice agreement
■ Pay for the costs of training staff in administration of opioid reversal medications
■ Pay for other necessary staff training
■ Pay for registration fees in each applicable state

Outcomes: Report to Congress
The legislation requires HHS to submit a report to Congress no later than 120 days after the end of the 3-year pilot. To comply with this requirement, participating entities are required to submit the following to HHS:
■ An annual evaluation of the progress of the pharmacy-based addiction care program supported by the grant, including information on:
  ■ Number of patients receiving treatment
  ■ Any changes in local rates of overdose over the course of the grant
  ■ Cost data
  ■ Patient-reported outcomes
  ■ Overdose data
  ■ Hospitalization data
  ■ Quality and safety measures
  ■ Program retention data
  ■ Data on opioid prescription fill rates
  ■ Demographic characteristics of patients who were treated by the program
  ■ Any other information the Secretary deems necessary

Background
A study from researchers at Brown University, Rhode Island Hospital, and the University of Rhode Island, published in the New England Journal of Medicine, documented the experiences of 100 patients who started taking buprenorphine after visiting a specially trained pharmacist for their care. Once stabilized on the medication, 58 patients were randomly assigned to receive either continued care in the pharmacy or usual care in a clinic or physician’s office.

After 1 month, the patients in the pharmacy care group had dramatically higher rates of retention: 25 (89%) continued to receive treatment in the pharmacy compared with 5 (17%) in the usual care group. Those who were prescribed treatment faced barriers such as long-distance travel to clinics, inconvenient clinic hours, time-consuming paperwork and bureaucracy, and stigma. Sen. Booker’s legislation is aimed at addressing hurdles that are perceived as barriers to the widespread use of buprenorphine.

Next Steps
ACCP has endorsed the SUPPORT Rx Act and is committed to working with Sen. Booker to help advance the bill through Congress. The bill is expected to be formally introduced by the end of May 2024. ACCP staff in Washington, D.C., will continue to keep members updated on new developments.

ACCP Strategic Planning Update
ACCP uses a continuous strategic planning process that includes member input, committee and task force charges focused on strategic initiatives, ongoing monitoring of progress, and ongoing revisions to the College’s strategic plan when needed. A comprehensive update occurs every 3–5 years. This ongoing, structured approach allows the College to be responsive to

UPCOMING EVENTS & DEADLINES:

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<td>ACCP Virtual Poster Symposium</td>
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<td>ACCP Professional Leadership Development Program Application Deadline</td>
<td>June 1, 2024</td>
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<tr>
<td>2024 FIT/MeRIT Training Program</td>
<td>June 3-7, 2024</td>
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<tr>
<td>Summer Member Town Hall</td>
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member needs and changing dynamics in the environment while also maintaining focus on long-term goals. The ACCP Board of Regents (BOR) began work on a comprehensive update to the College’s 2020 Strategic Plan almost a year ago.

Member input is critical to a successful strategic planning endeavor. To inform the 2024 Strategic Plan, member input was sought through several mechanisms over the past year, including routine annual surveys, an environmental scan, and focused surveys on initiatives that emerged in the environmental scan.

The mission and core values of the organization remain constant and serve as the guiding principles for all strategic and operational initiatives. Critical issues, strategic directions, and objectives are reviewed, revised, and newly developed with each plan update. Critical issues are current concerns vital to the College’s mission, and strategic directions are statements of intent, expressing the organizational approach to addressing a critical issue. Objectives are specific, achievable, time-specific actions intended to contribute to accomplishing a strategic direction.

Through a review of the environmental scan and member input, the BOR determined that the three critical issues identified in the 2020 plan remain relevant and applicable. ACCP will therefore continue to focus on developing, advancing, and positioning clinical pharmacists to fully contribute their unique expertise to patient care. In addition, informed by member survey responses and comments, several new strategic directions emerged, including efforts to provide innovative opportunities for professional development; promotion of knowledge and skills to leverage AI in clinical pharmacy practice, education, and research; support for growth, diversity, and sustainability of the clinical pharmacy workforce; and promotion of an inclusive leadership culture within the College. Moreover, many ongoing strategic directions were retained, including continuing the focus on leading the implementation of comprehensive clinical pharmacy services, communicating the impact and unique expertise of clinical pharmacists, and increasing the opportunities for clinical pharmacists to influence clinical practice, payment policy, and research. Objectives to support each strategic direction were developed in January and refined in April. The board is anticipating review of a final version of the 2024 Strategic Plan in July. A finalized plan will be provided to membership this fall on the ACCP website and in the ACCP Report.

Voting Members Are Invited to Participate in a Special Vote

The 2024 Task Force on Diversity, Equity, Inclusion, and Accessibility (DEIA) is charged to provide input to the Board of Regents (BOR) on implementation of the ACCP DEIA plan and on all issues relevant to DEIA. The 2024 Task Force is proposing a revision to the ACCP bylaws to include the addition of a new DEIA standing committee to Article V, Section 1. If approved, this standing committee will replace the DEIA Task Force going forward. This change to the bylaws was approved by the 2024 Organizational Affairs Committee in March and endorsed by the BOR in April 2024. Pursuant to Article II, Section 1 of the ACCP bylaws, after recommendation by the Organizational Affairs Committee and endorsement of the BOR, amendments to the bylaws are placed before the voting membership for approval. Amendments must be approved by two-thirds of the votes cast.

Rationale for This Change

To solidify ACCP’s commitment to DEIA efforts within the profession and organization, a formal conversion of the DEIA Task Force to a standing committee (i.e., DEIA committee) is requested. Although task forces are typically in place for finite periods to address short-term needs, the role of the DEIA Task Force is enduring. In addition to the overarching charge to “provide input and feedback to the ACCP Board of Regents on implementation of the DEIA plan and on all issues relevant to DEIA,” a growing number of leadership activities and routine processes are carried out by this volunteer group. The DEIA Task Force (1) reviews and scores
applicants for DEIA travel awards; (2) evaluates, indexes, and maintains resources for the DEIA toolkit; (3) recommends relevant DEIA communications to ACCP; and (4) proposes DEIA programming for ACCP members, among others. To ensure that these essential ongoing activities are fulfilled, a standing DEIA committee is proposed.

All full members of ACCP are invited to vote. Voting will remain open through June 1, 2024, 11:59 p.m. (CDT). To cast your vote, click here.

**Member Recruiters**

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

- Adelanke Adebusoye
- Taha Alhayani
- Shahbaz Anwar
- Alyssa Booth
- Nataly Guirguis
- Alex Isaacs
- Cynthia King
- Daniel Majerczyk
- Vanessa Markle
- Victoria Miles
- Daniel Pacini
- Christina Rose
- Mario Sanchez
- Marie Tuft

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**Save the Date**

2024 ACCP ANNUAL MEETING
OCTOBER 12-15, 2024 • PHOENIX, AZ • #ACCPAM24
SHERATON PHOENIX DOWNTOWN • PHOENIX CONVENTION CENTER
### Featured Positions

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<th>Title</th>
<th>Employer</th>
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<tbody>
<tr>
<td>Advanced Practice Pharmacists</td>
<td>Sutter Health</td>
<td>Multiple Locations in Northern California</td>
<td><a href="#">Learn More</a></td>
</tr>
<tr>
<td>Clinical Pharmacy Specialist - Acute Care Internal Medicine and Transitions of Care</td>
<td>Wellstar MCG Health</td>
<td>Augusta, Georgia</td>
<td><a href="#">Learn More</a></td>
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<tr>
<td>Neonatal/Pediatric Clinical Pharmacist</td>
<td>Ballad Health/Niswonger Children’s Hospital</td>
<td>Johnson City, Tennessee</td>
<td><a href="#">Learn More</a></td>
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<tr>
<td>Clinical Pharmacist - Adult Medical/Surgical ICU</td>
<td>WakeMed Health &amp; Hospitals</td>
<td>Raleigh, North Carolina</td>
<td><a href="#">Learn More</a></td>
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<tr>
<td>Pharmacist, Clinical Specialist - Solid Organ Transplant (Kidney) $25K Sign-On</td>
<td>Carilion Clinic - Roanoke Memorial Hospital</td>
<td>Roanoke, Virginia</td>
<td><a href="#">Learn More</a></td>
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<tr>
<td>Pharmacist, Clinical Staff II - Internal Medicine</td>
<td>Carilion Clinic - Roanoke Memorial Hospital</td>
<td>Roanoke, Virginia</td>
<td><a href="#">Learn More</a></td>
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Featured Positions

Title: Pharmacist, Clinical Staff I - Day/Evening Shift  
Employer: Carilion Clinic - Roanoke Memorial Hospital  
Location: Roanoke, Virginia

Title: Clinical Pharmacists  
Employer: McLeod Health  
Location: Florence, South Carolina

Title: Internal Medicine Clinical Pharmacy Specialist/Int Med Clinical Pharmacy Supervisor  
Employer: Orlando Health Orlando Regional Medical Center  
Location: Orlando, Florida

Title: Program Manager - Pharmacy Specialist, Clinical Pharmacogenetics Implementation Consortium  
Employer: Appcast  
Location: Memphis, Tennessee

Title: Clinical Assistant/Associate Professor  
Employer: University of Florida College of Pharmacy  
Location: Gainesville, Florida