

ACCP Report

Timothy J. Ives, Pharm.D., M.P.H., FCCP, BCPS; Editor
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DiPiro Chosen ACCP President-Elect

Joseph T. DiPiro, Pharm.D., FCCP, was chosen ACCP President-Elect in annual elections held this spring. Dr. DiPiro is *Panoz* Professor of Pharmacy at the University of Georgia College of Pharmacy and Clinical Professor of Surgery at the Medical College of Georgia. He is also Assistant Dean for the College of Pharmacy and the School of Medicine, and Head, Department of Clinical and Administrative Pharmacy. Dr. DiPiro has previously served ACCP on numerous committees, as a member of the Board of Regents, as a Trustee of the ACCP Research Institute, and as a member of the *Pharmacotherapy* Board of Directors. He is a past recipient of ACCP's Russell R. Miller Award.



Dr. DiPiro is currently editor of the *American Journal of Pharmaceutical Education* and a co-editor for *Pharmacotherapy: A Pathophysiologic Approach*. Also, he is the author of *Concepts in Clinical Pharmacokinetics* and editor of the *Encyclopedia of Clinical Pharmacy*. He has received the Robert K. Chalmers Distinguished Educator Award from the American Association of Colleges of Pharmacy and the Award for Sustained Contributions to the Literature from the American Society of Health-Systems Pharmacists.

In other election results, **Sarah A. Spinler**, Pharm.D., FCCP, and **Kathleen A. Stringer**, Pharm.D., BCPS, FCCP, FAHA, were selected as Regents. They will be installed at the 2004 Annual Meeting for 3-year terms. Dr. Spinler is Associate Professor of Clinical Pharmacy at the Philadelphia College of Pharmacy, University of the Sciences in Philadelphia. Dr. Stringer is Associate Professor in the Department of Clinical Pharmacy at the University of Colorado School of Pharmacy.

Michael D. Reed, Pharm.D., FCCP, FCP, was elected to a 3-year term as Research Institute Trustee. Dr. Reed is

Director of Pediatric Clinical Pharmacology and Toxicology, Division of Pediatric Pharmacology and Critical Care, Rainbow Babies and Children's Hospital in Cleveland. He also holds appointments as Professor of Pediatrics at Case Western Reserve University and Professor of Pharmacy Practice at Ohio Northern University College of Pharmacy. Dr. Reed's research program is focused on the ontogeny of pediatric drug disposition, from the premature infant into adulthood.

Dr. DiPiro will be installed as President-Elect at the 2004 ACCP Annual Meeting in Dallas, TX, and will assume the presidency the following year. As President, he will serve as Chair of the Board of Regents and guide College programs and activities.

"When I first joined ACCP there were less than 800 members—now we are up to more than 8,500," commented Dr. DiPiro. "The growth of the organization is a strong statement demonstrating that the profession is changing through the efforts of many individual pharmacists. For ACCP to continue this progress, we need to build on the strengths of new members. The College has active programs in professional development, research, education and training, political advocacy, and many other areas. While new members have the opportunity to become actively involved in ACCP, the College has the responsibility to make new members aware of what is going on and how they can become involved.

"We need to remind ourselves of what is the most important reason for the College's existence—to enhance the pharmacist's role in improving human health. We have identified many of the stepping stones to that objective, particularly professional development and formal training through residencies and fellowships. Already the College has promoted a bold vision for the future—that all pharmacists who provide direct patient care will have residency training. Over the next few years we should take the first steps toward achieving that vision," Dr. DiPiro concluded.

Other candidates for office in the 2004 elections were Michael E. Klepser, John E. Murphy, Tom E. Peddicord, and William P. Petros.

Formation of Endocrine PRN in Progress

Efforts are under way to form an Endocrine Practice and Research Network (PRN) within ACCP. Leading this effort is Kent Porter, who is planning an organizational meeting of the PRN to take place in Dallas at the 2004 Annual Meeting. At this meeting, which will take place Tuesday evening, October 26, at 6 p.m., potential PRN members must first determine whether to form this PRN. If they decide to form the PRN, the group will elect its first officers and determine the early goals of the PRN.

Potential goals and objectives of the Endocrine PRN are to:

- Provide an opportunity for pharmacists with an interest in endocrine disorders to promote practice, research, and education in these areas.
- Provide a mechanism for members having similar interests to meet during ACCP meetings, to network, problem solve, and discuss professional issues and possibilities.
- Promote practice involvement; educational needs of health care professionals, students, and patients; and research activities.

The Endocrine PRN would focus on many current therapeutic and research issues, including, but not limited to:

- Diabetes mellitus (DM)—prevention, detection, and management for types 1 and 2 DM and other conditions (i.e., polycystic ovarian syndrome, cystic fibrosis, thyroid disorders) in adult and pediatric populations; and pre-DM interventions in the progression of this disease's natural history.
- Pituitary, thyroid, parathyroid, adrenal, and pineal disorders as deemed appropriate by the Endocrine PRN.

Anyone interested in participating or helping form an Endocrine PRN can contact Porter at kent.porter@aventis.com.

Interested in Forming a New PRN?

Think there is a need for a new PRN? All it takes is 50 ACCP members who have expressed interest in belonging to the new PRN. Each PRN must serve a group of ACCP members in a defined area that is distinct from current PRNs. The Board of Regents must approve the designation of each new PRN. To find out more about forming a new PRN, contact Peggy Kuehl, ACCP Director of Education and Member Services, at (816) 531-2177 or at pkuehl@accp.com.



President's Column

John A. Bosso, Pharm.D., FCCP,
BCPS

The Future of Pharmacy

One of the more daunting tasks of the ACCP presidency is to prepare a "presidential column" for every other ACCP Report.

However, this is actually something I look forward to, as I view it as a chance to share my perspectives with the world (let's assume for the sake of my ego that most members read the *ACCP Report*) and I certainly have an opinion (usually a strong one) on just about any topic related to pharmacy. However, I have found that my favorite topics and opinions were consumed early in the column-writing process and finding other issues that I really want to write about has become more of a challenge. How did other past presidents write all those columns? Ghost writers ... that was probably it. It occurred to me that writing a presidential column might be a good residency project—the residents seem to have strong opinions about pharmacy matters and we always encourage them to write and publish. Unfortunately, the director of our residency program didn't quite see it that way. So, I went back to some of my early musings about writing presidential columns. One of the things I had considered was which of my favorite social commentators to model my style and tone after—the tongue-in-cheek humor of Dave Barry or the wit and sarcasm of Andy Rooney? I quickly admitted to myself that I didn't have the knack to match either of those role models but settled on one easier to emulate: Nostradamus ("the pharmacy world as we know it will end by 2015; I see changes of biblical proportions; cats and dogs, living together ..." oops wrong predictions).

Is mainstream pharmacy really going to change in a major way in the near future? Are the majority of practitioners going to shift their attention and preoccupation to something other than filling prescriptions? Are pharmacists finally going to start using their education to its fullest? I believe so, and I believe it because the planets are aligning in a way that represent likely change in how the majority of pharmacists will practice in the future.

Consider the following facts cited in the recent paper (Bond, et al. *Pharmacotherapy* 2004;24:441-52): 1) although there is presently a shortage of pharmacists, with the increasing numbers of schools and their increased enrollments, coupled with an influx of foreign-educated pharmacists, the end of the shortage may be in sight (also realize that the shortage is predicated on the idea that it is pharmacists who fill most prescriptions); 2) the number of pharmacy technicians has increased substantially in the past 8 years; and 3) the number of independent pharmacies continues to decline while the percentage of prescriptions processed by mail-order pharmacies has increased to 18%. Add other obvious observations regarding the state of the practice of pharmacy, including: 1) pharmacist salaries have risen dramatically in the past few years in concert with the pharmacist shortage; 2) most pharmacists spend the majority of their

working hours performing order fulfillment; 3) the average pharmacy student entering professional school wants a career limited to order fulfillment; 4) pharmacy technicians can fill prescriptions as accurately as pharmacists and, with proper supervision, as safely; and 5) pharmacy technician salaries are about 20% of pharmacist salaries.

Given these observations (I admit they may not be evidenced-based), what does the future hold? I predict the following.

A. With regard to order fulfillment:

1. The vast majority of prescriptions will be filled by technicians, and/or via mail-order or the Internet.
2. A small percentage of pharmacists will be directly involved in order fulfillment.
3. Pharmacists will maintain their responsibility for, and control over, drug distribution systems.
4. Third-party payers and others that finance the American health care system will refuse to continue to pay \$100,000.00 (or more) per year to pharmacists who only fill prescriptions. These pharmacists will start providing cognitive services or have their salaries reduced to the level of technicians.
5. Prescription outlets, in an effort to show that they do more than just supply product, will start to routinely counsel patients about their medications; but it will be too little, too late.
6. The pharmacist shortage will come to an abrupt end.

B. With regard to education and training:

1. Academic pharmacy, the Accreditation Council for Pharmacy Education, the major professional associations, and state boards of pharmacy will face up to the fact that not only do contemporary curricula fail to prepare new graduates to design and manage drug therapy, but that this is an unrealistic goal for a 4-year professional curriculum. These same groups will advocate for postdoctoral residencies as minimum postgraduate training for those who provide medication therapy management and other direct patient care services.
2. Schools of pharmacy will reduce enrollment dramatically and some will close. This will include both old and new schools, and probably numerous private schools; some schools will merge.

C. In regard to the practice of pharmacy:

1. Most pharmacists will earn their living by taking care of patients (providing medication therapy management and other direct patient care) and be paid handsomely for such services by both the government and private sector third-party payers
2. These same payers will decide what qualifications (education, training, and/or certification) are required to provide medication therapy management, rather than entities within the profession that will either claim that all pharmacists are qualified or that only those with their brand of "special" certification are qualified. Such services will be delivered to patients in all current pharmacy practice settings.

3. The highest salaries in pharmacy will be paid to managers of drug distribution systems (whether in hospitals or community settings) and those with advanced compounding skills.
4. Pharmacy organizations will embrace a new staff position: the witchdoctor (there will be no nontraditional or entry level witchdoctor programs), whose main responsibility, quite obviously, will be to predict the future ...

In closing, let me announce that I will be setting up a booth at this year's Silent Auction during our Annual Meeting in Dallas. Be sure to stop by—I'll be happy to predict your future for a modest fee.

2004 ACCP Annual Meeting – Dallas, TX October 24 – 27, 2004

Join your colleagues at the HYATT REGENCY DALLAS AT REUNION for a program that has been tailored to meet your professional needs. From the educational sessions to networking with your peers ... you will learn from the top experts and leaders in the field of clinical pharmacy. This meeting will begin ACCP's yearlong celebration of the 25th anniversary of its founding. The format will include:



Courtesy of the Dallas Convention & Visitors Bureau

- Five curricular tracks
- Scientific Paper Platform Presentations
- 19 ACCP Practice and Research Network (PRN) Focus Sessions
- PRN Networking and Business Forums
- Pharmacy Industry Exhibits
- ACCP Recruitment Forum, featuring the Career Fair, followed by One-on-One Appointments
- Research Institute/PRN Reception and Silent Auction

For more information about the 2004 Annual Meeting and to register, go to (<http://www.accp.com/04am.pdf>).

Saturday Symposia to Kick Off the 2004 ACCP Annual Meeting in Dallas, TX

Attend special preconference symposia on Saturday October 23, 2004, to enhance your learning experience. Choose symposia of interest from the following (separate registration is required):

The Essentials of Critical Care Pharmacy Practice: A Case-Based Symposium

Developed by the ACCP Critical Care Practice and Research Network (PRN)

9:00 a.m. to 4:00 p.m.

<http://www.accp.com/04satcrit.pdf>

Combating Bacterial Resistance in Pediatric Community-Acquired Infections

Developed by the ACCP Pediatrics PRN. Supported by an educational grant from Bristol-Myers Squibb.

1:00 p.m. to 4:00 p.m.

<http://www.accp.com/04satpeds.pdf>

Career Development for Clinical Investigators and Practitioners: Guiding Your Life and Career

Hal Wood, M.P.H., M.B.A, CMC

1:00 p.m. to 4:30 p.m.

<http://www.accp.com/04satcareer.pdf>

How to Maximize Your Meeting Experience: Newcomer Orientation to the Annual Meeting

4:45 p.m. to 5:45 p.m., followed by a reception for all participants

There is no charge for this session for newcomers.

Preregistration is required.

<http://www.accp.com/04satnewcomer.pdf>

ACCP Recruitment Forum 2004 Annual Meeting – Dallas, TX Sunday, October 24, 2004 12:30 p.m. to 6:00 p.m.

Is it time to move forward with your career? Or are you hiring for a position in your organization? If so, the ACCP Recruitment Forum is where the deals will be made. Last year, nearly 100 employers were on site seeking to fill more than 200 high-level clinical positions. This is the **ONLY** employment venue that provides the quality and focus of advanced practice clinical positions.

The Recruitment Forum is designed for those who are just starting in their careers and looking for advanced practice clinical positions in:

- Specialty Residents
- Research Fellows
- Clinical Pharmacy Practitioners
- Non-tenure-track Clinical Faculty
- Tenure-track Clinical Faculty
- Positions within the Pharmaceutical Industry

Go ONLINE ... Meet ON SITE

Let the Recruitment Forum work for you before the Annual Meeting! Go ONLINE and search for positions or applicants. Then make plans to meet ON SITE at the Recruitment Forum in Dallas. This year's forum features:

- An online searchable database of position and applicant listings. Take advantage of ACCP's listing service and "virtually" get to know each other before coming to the Annual Meeting. Position and applicant listings can be accessed through the ACCP Recruitment Forum Web site (www.accp.com/forum.htm).

- The Career Fair at the ACCP Annual Meeting, 12:30 p.m. to 3:00 p.m. This is your chance to get a good look at the job market. Visit with representatives from participating organizations. If you want more information, schedule a One-on-One appointment for later in the afternoon.
- One-on-One appointments at the ACCP Annual Meeting, 3:00 p.m. to 6:00 p.m. The best feature of the Recruitment Forum: One-on-One sessions provide participants and employers an opportunity to meet each other in a relaxed setting.
- Position and applicant listing books. Position and applicant listings posted on the Recruitment Forum Web site by October 13, 2004, will be published in the listing books available to employers and meeting attendees.

Visit the Recruitment Forum Web site for more information

... www.accp.com/recruitm.php.

Getting Started with Health Services Research

Mark your calendars for this timely, informative, practical program included within the 2004 ACCP Annual Meeting in Dallas, TX—Monday, October 25, 1:30 p.m. to 5:45 p.m.:

- **What is Health Services Research and Why Is It Important to Pharmacy Practice**
Morris Weinberger, Ph.D.
School of Public Health
University of North Carolina at Chapel Hill
- **Designing a Health Services Research Study: Example Hypertension**
Barry L. Carter, Pharm.D., FCCP, BCPS
College of Pharmacy
University of Iowa
- **Applying Health Services Research to Pharmacy Practice**
Marsha A. Raebel, Pharm.D., FCCP, BCPS
Kaiser Permanente
Denver, Colorado

Hopefully, this is not the first time you have heard that the ACCP Research Institute launched the Frontiers Fund Campaign in 2003. Supported by donations from ACCP members and others, the Frontiers Fund is allowing the College to significantly expand its support to both clinical and pharmacy-based health services research. **In fact, the 2004 Frontiers Research Award recipients will be announced in next month's ACCP Report.**

An important goal of the Frontiers Fund is to help ACCP ensure the conduct of needed practice-based (health services) research that assesses the value of clinical pharmacy services.



Full success depends on at least two factors: 1) having monies available to support such research, and 2) having qualified investigators who prepare and submit rigorously designed practice-based proposals for consideration.

Although ACCP members value the need for research to assess the impact of clinical pharmacy services on patient outcomes, health care costs, etc., most have not been trained specifically in this area. To help address that need, the ACCP Research Institute has developed an educational program as part of the College's 2004 Annual Meeting in Dallas, TX, that will introduce clinical pharmacy practitioners, researchers, and educators to key concepts of health services research and the opportunities that exist for such research within pharmacy.

Learn about common health services study designs, the types of outcomes measured, and key concepts of data collection and analysis. As a real-life example, walk through the design of a study to assess the impact of pharmacy services on patients with hypertension. See how to apply the results of these studies to your clinical practice.

You'll benefit from this program whether you're already engaged in health services research, planning to do so, or need to apply its results to your own practice.

Psychiatry is Focus of New Book in PSAP-V Series

Psychiatry, the newest book in ACCP's Pharmacotherapy Self-Assessment Program (PSAP), offers the most up-to-date information in the pharmacotherapy of common psychiatric conditions. Through a series of three modules, the book covers schizophrenia and mood disorders as well as two less commonly reviewed diseases, post-traumatic stress disorder (PTSD) and borderline personality disorder. Special topics, geriatric psychiatry, and the adverse events associated with psychotropic drugs, also are included.

Each module within the book, Psychiatry I, Psychiatry II, and Psychiatry III, is designed to help pharmacists:

- Understand the advances in the etiology and diagnosis of psychiatric conditions.
- Incorporate advances in psychopharmacology into their knowledge base and pharmacotherapy recommendations.
- Recognize, monitor, and manage the risks for metabolic and neurologic adverse events caused by psychotropic drugs.
- Gain insight into the signs and symptoms of the lesser recognized disorders, PTSD and borderline personality disorder as well as the role of the pharmacist in managing these disorders.
- Provide recommendations to improve drug safety and management of psychiatric conditions in geriatric patients.

For release on July 15, Psychiatry is the third book in the 11-book PSAP-V series. The book is available in both print and online formats. ACCP members receive the discounted member price listed below. Continuing pharmacy education

credit is available for successful completion of the self-assessment examinations provided with each module. The three modules combined offer a total of 14 hours of continuing pharmacy education credit. For more information, visit www.psap.org.

Other recently released books in the PSAP-V series include Cardiology (January 2004) and Health Care Stakeholders (April 2004). Future releases will include Geriatrics, Special Populations, the Science and Practice of Pharmacotherapy, Infectious Diseases, Chronic Illnesses, Gastroenterology, Nutrition, Pediatrics, Oncology, Critical Care, and Transplantation. Each of the eight remaining books in the series will be released quarterly through July 2006.

PSAP is dedicated to offering the most up-to-date and comprehensive information available on recent drug therapy advances. Each book will further your knowledge in the therapeutic area it covers. PSAP is available in both print and online versions and priced as follows.

PSAP-V Single Books	Member Price	Nonmember Price
Hardcopy	\$55.00	\$75.00
Online	\$45.00	\$65.00
Hardcopy & Online	\$80.00	\$100.00

PSAP-V Series

Hardcopy	\$335.00	\$495.00
Online	\$295.00	\$445.00
Hardcopy & Online	\$485.00	\$645.00

For more information on the series, release dates of future books, projected continuing education credits, and ACPE program numbers for each book, visit www.accp.com, where you can quickly and conveniently place your order through the online bookstore. You can also order by phone at (816) 531-2177. Mention code R0704 when ordering the PSAP-V Psychiatry book.

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



Leadership Skills You Can Use

"A pharmacist is a leader," says Pam Miller, Pharm.D., when asked why she believes the ACCP Leadership Experience is so important to clinical pharmacists. "We have to learn to stand up for what we believe is right, to know the professional way to get the work done, and to be a positive influence."

Pam believes that the skills she learned during the course and the ability to apply those skills are components that

make the Leadership Experience a “must” for those in her profession.

The Leadership Experience, conducted by the staff at LeaderPoint, is sponsored by ACCP. The 3½-day program incorporates a concentrated curriculum that includes didactic and experiential learning methodologies. In particular, it is the highly interactive, hands-on approach to the curriculum that Pam found so helpful. “To be with other people from all over the U.S., and to know that I have similar situations where I work” proved to be a real caveat for her. The real-world, case-based situations presented during the course provided Pam with unique opportunities to problem solve with other participants. The group interactions made it possible for Pam to return to the University of Nebraska Medical Center Clinic Pharmacy where she is the Pharmacist-in-Charge, and put her new skills into action.

The immediate applicability of the course material is a vital goal for the LeaderPoint staff. Michael Laddin, president of LeaderPoint, says, “The real test of any course is whether or not participants are able to apply what they have learned. Our goals in the course are very clear—we want to provide participants with practical tools that they can use every day to improve how they lead others. Most work is now done cross-functionally, so the success of leadership is not judged by the work of those that report to you but often by your ability to influence others. We want to increase any person’s ability to lead in any situation.”

This is precisely the effect that Pam realized. She and her colleagues felt energized. “All three of us came home with an attitude that we can make a difference in what we do—as leaders—with our colleagues, technicians, students, and other health care professionals.”

Leading a meeting is an area Pam quickly addressed—she now focuses on and follows an agenda more succinctly, leading the meeting and guiding her staff through the issues at hand. “It’s easy for meetings to be somewhat unfocused and unproductive because peripheral issues are introduced and the original purpose of the meeting is sidelined. My meetings are now much more focused and effective.”

In addition to the change in the focus of meetings, Pam leads her staff in a different way in their day-to-day work roles. Before the course, Pam said that her staff looked to her to solve most of the issues, big or small. “I turn these issues back to them and we work together—I coach them through the discussion and the steps in resolving the issue.”

Overall, Pam found the Leadership Experience to be an extremely motivating course that effects positive changes in her approach to her career with measurable outcomes that positively impact her work—and those of others. “It has been a rewarding experience,” she said.

The special ACCP fee for taking this course is \$2300, a large reduction from the usual course fee. Participants in the Leadership Experience may receive up to 30 contact hours of continuing education credit.

Complete information about the course is available online at www.leaderpoint.biz/accp.htm. For other questions regarding the course, please contact Sarah Plummer, ACCP project manager, education at (816) 531-2177 or

splummer@accp.com; or Michael Laddin, LeaderPoint, at (913) 384-3212 or mladdin@leaderpoint.biz.

Read comments from other participants and discover how they have benefited from the Leadership Experience at www.accp.com/leadtest.pdf.

**THE ACCP LEADERSHIP EXPERIENCE
A Comprehensive Approach to Developing
Management and Leadership Skills
September 20-23, 2004
Kansas City, Missouri**

Learn how to:

- Build cooperation
- Communicate concisely
- Effect high performance
- Develop individual skills
- Impact group dynamics
- Achieve a positive work environment
- And much more!!

**For more details contact
LeaderPoint
Michael Laddin
6045 Martway, Suite 108
Mission, KS 66202
Telephone: (913) 384-3212
www.leaderpoint.biz
mladdin@leaderpoint.biz**

**ACCP/ASHP Launch Online 2004 Oncology
Pharmacy Preparatory Review Course**

The 2004 Oncology Pharmacy Preparatory Review Course, cosponsored by ACCP and the American Society of Health-System Pharmacists (ASHP), is now available as an online educational program through ACCP’s Online Education Center at www.accp.com/strbcop04.php.

Course content is based on the domains and knowledge areas that define the oncology pharmacy specialty and aids practitioners in preparing for the examination. It duplicates the live program, featuring the same lectures and slide presentations, as well as handouts. This program will be available for online access through October 2005. It is also available in CD-ROM and audiocassette tape formats; both formats include the companion workbook.

This course is partially supported by an educational grant from Amgen Oncology Institute (www.amgenoncologyinstitute.com/). All program content was developed and coordinated by ACCP and ASHP members and staff.

New Members

Chanel Agness
Cesar Alaniz
Ouida Antle
Anay Arshad
Gina T. Avery
Lillian D. Baier
Robert F. Baier
Christine S. Beason
Arti Bhavsar
Judeth J. Bianco
Laura R. Bobolts
Eileen A. Boland
Rebecca J. Borgert
Sam J. Borgert
Francine Breckler
Colleen Brennan
Sandra L. Brugman
Amanda M. Bushman
Stephanie K. Butler
Joseph A. Cameron
Vicky Chan
Todd W. Chapman
Clement T. Chung
Gregory T. Clark
Brad Clay
Heather R. Cleland
Shauna L. Collier
Lori A. Crudi
Geoffrey W. Custer
Lynda S. Deans
George S. Decelle
Lisa M. DeVries
Megan M. DiDomenico
John R. Dobbs
Mark Donaldson
Yvonne Elias-Moussa
Beth A. Ezepek
James W. Fanning
Helen Feinstein
Tasha M. Fillingane
Theron N. Fourakre
Enrique Gaete
Emebet T. Gebremeskel
Amy Gelhorn
Catherine A. Gilligan
Roger Gilmore
Christine M. Grabow
Joanna Groff
Jeffrey A. Gross
Shalu M. Gupta
Ginger Guzman
Kathryn L. Hahn
LaDonna S. Hale
Angela E. Han
Robert J. Hayashi
Allison M. Hein
June Helms

Kent Henry
Anna Heuer
Gabrielle Hokanson
Barry L. Horne
Dorothy M. Houston
Lisa Houston
Sally Htoy
Yao-Hui Huang
Franklin Huggins
Jeff D. Januska
Adam D. Jaskiewicz
Kimberly Jones
Lalit Joshi
Ellen B. Keith
Andrea Kent
Jacqueline Kill
Lauren M. Kissner
Lisa G. Kluttz
John Lamarque
Karen J. Landa
Lise Langston
S. Cecilia Lau
Michael A. LeBer
Anna M. Legreid
Timothy A. Lesch
Vicky B. Lewis
Denise B. Li
Linda R. Linderbeck
Mitsi H. Lizer
Thomas Looney
Hana LoPiccolo
Neha Madhani
Oscar D. Martin
Scott C. Martin
M. Scot Maxon
Daniel Maysilles
Brian M. Miller
Ray Molina
Jean Morin
Robert K. Morris
Joni C. Murray-Petersen
Bogdan Musial
Christine Nejfelt
John Newman
Juki Ng
Nam P. Nguyen
Kristie L. Noble
Farra K. Noel
Rebecca R. Parrow
Hetal Kumari Patel
Julie Pellerin
Neelima Pentapy
Natalie C. Perry
Judy A. Peterson
Walter T. Pettus
Syphorn Phan
Theresa T. Phung
Matthew J. Pike
Deborah Pope

Youngsuk (Susie) Porter
Earnestine Pringley
Diana D. Puffenbarger
Georgeta Puscalau
Coleen T. Quinn
Israel Ramos
Valerie Ristvey
Kevin Robertson
Polly G. Robinson
Luz M. Rosendo
Christine E. Rosier
Yves Rousseau
Linda J. Rowe-Varone
Stephen Russell
Joy K. Saiki
Kathi Salmon Lucas
Gurbir Sandhu
Karen S. Schaudt
John Schriener
Summer L. Schwab
Dawn Y. Scott
Zahra Shaghaghi
May A. Sharifi
Joan Sharpe
Scott B. Silverstein
Ronald F. Smetana
Kathleen M. Solino
Ileana P. Sotto
Connie A. Street
Traci W. Suber
Lucie Surprenant
Deborah Tanch
Maya A. Thompson
Margaret R. Thomson
Kathryn B. Threadgill
Elaine Y. Tse
Christy Walker
Allison Walls
Adrian M. Washington
Thomas P. Weber
Ronald C. Wenzell
Celine M. Withers
Leah Wolfe
Constance Wolkin
Eileen L. Wynne
Christina H. Yoon
Philip Zia

The following individuals recently advanced from Associate to Full Member:

Alexander Cao
T. Aaron Jones
Dominick P. Trombetta

New Member Recruiters

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

Oralia Bazaldua
Marla J. Campbell
John M. Dopp
Joan S. Kramer
Mark D. Mills
Sheel M. Patel
Bradley G. Phillips
Jennifer A. Stone
Janice L. Stumpf

Are you moving? Did you forget something?

This is the time of year when many ACCP members have relocated to begin residencies or fellowships, or to start new jobs. So that we can continue to provide excellent service to

you, please remember to send your change of address information to ACCP.

To do so, go to the ACCP Web site at <http://www.accp.com>, select "My ACCP", then "Contact Information". Or, complete the form below and return it to ACCP by mail or fax.

* * * * *

Name: _____

Current Address: _____

Current Telephone: _____ Fax: _____

Current E-Mail Address: _____

New Address: _____

New Telephone: _____ Fax: _____

New E-Mail Address: _____

Mail or fax to:
ACCP • 3101 Broadway, Suite 650 • Kansas City MO 64111
Fax: (816) 531-4990