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American College of Clinical Pharmacy

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

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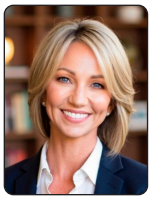
Brooks Selected as ACCP Executive Director



Concluding a 6-month search process, Amie D. Brooks, Pharm.D., FCCP, BCACP, CAE, has been selected from a group of highly qualified candidates to serve as ACCP's next Executive Director. The Executive Director search was initiated after Michael Maddux, Pharm.D., FCCP, announced his plans last December to retire at the end of 2026. Dr Maddux has served as the College's chief staff officer since January 1, 2004. Dr Brooks, currently ACCP Senior Director of Strategic Initiatives, will assume the role of Executive Director-Designate on December 1. After a 1-month transition period, she will assume the Executive Director position on January 1, 2027.

In her current role, Brooks is responsible for developing, communicating, and executing ACCP strategic plan initiatives focused on advancing and positioning clinical pharmacists to contribute to patient care. She received her Pharm.D. degree from the St. Louis College of Pharmacy (STLCOP) and completed pharmacy residency training at the Jefferson Barracks VA Medical Center in St. Louis, Missouri. Brooks previously served as Vice Chair of Pharmacy Practice, Director of the Division of Ambulatory Care, and Professor at STLCOP. She implemented new clinical services and practiced as a clinical pharmacy specialist in ambulatory care, served as a PGY1 and PGY2 ambulatory care residency program director, and taught in multiple required and elective courses. Brooks is a Certified Association Executive, board certified in ambulatory care, and a Fellow of ACCP. She has written numerous review articles, original research publications, and book chapters as well as 10 editions of a NAPLEX review book. Her scholarship has focused on clinical pharmacy services, diabetes, resistant hypertension, collaborative practice, and academic leadership.

Brooks has been a member of ACCP since 2000. Before joining the ACCP staff, she served in numerous member volunteer roles for the College. In her message to members announcing Brooks' selection, ACCP President Denise Rhoney wrote:

> This appointment follows a comprehensive multistage search conducted in partnership with Sterling Martin Associates, a ZRG company. The firm screened 113 applicants and conducted proactive outreach to an additional 40 potential candidates. Screening conversations were held with 30 candidates, and 22 candidate profiles were presented to the Search Committee for consideration. From that group, 6 candidates were selected for interviews with the Search Committee, and 4 finalists advanced to in-person interviews with the ACCP Board of Regents.
>
> Amie brings to the Executive Director role both a deep understanding of ACCP and extensive experience in clinical practice, pharmacy education, academic leadership, strategic planning, organizational leadership, and association management. She is a Certified Association Executive and previously held faculty and leadership roles at the Midwestern University Chicago College of Pharmacy and St. Louis College of Pharmacy.

Asked to comment on her appointment, Brooks remarked:

> When I reflect on my career, ACCP stands at the center of so many of the experiences, relationships, and opportunities that have shaped me both professionally and personally. For more than 25 years, the College has been my professional home, helping me grow as a clinician, educator, researcher, leader, and association executive. The relationships, mentorship, and opportunities I have found through ACCP have profoundly influenced my career and sense of purpose.
>
> I am deeply honored and grateful for the trust placed in me to serve as ACCP's next Executive Director. I extend my sincere thanks to the Board of Regents,

the Executive Director Search Committee, and ACCP members for this extraordinary opportunity.

I am especially thankful to Mike Maddux, whose visionary leadership and commitment have strengthened ACCP and advanced clinical pharmacy. His mentorship and encouragement have had a tremendous impact on my own professional journey.

As I step into this role, I am energized by the opportunities ahead and inspired by the passion and expertise of our members. I look forward to partnering with members, elected leaders, and staff to build on our strong foundation, advance our mission, strengthen our professional community, and help lead ACCP into its next chapter.

At the October 18 Town Hall Meeting during the 2026 ACCP Annual Meeting in Salt Lake City, Brooks will share more about herself, her perspectives as she prepares to assume the Executive Director role, and future prospects for ACCP. In addition, there will be time for members to ask questions and engage with her directly. For members unable to attend the Annual Meeting, ACCP will schedule a virtual "Member Conversation and Q&A" with Brooks.

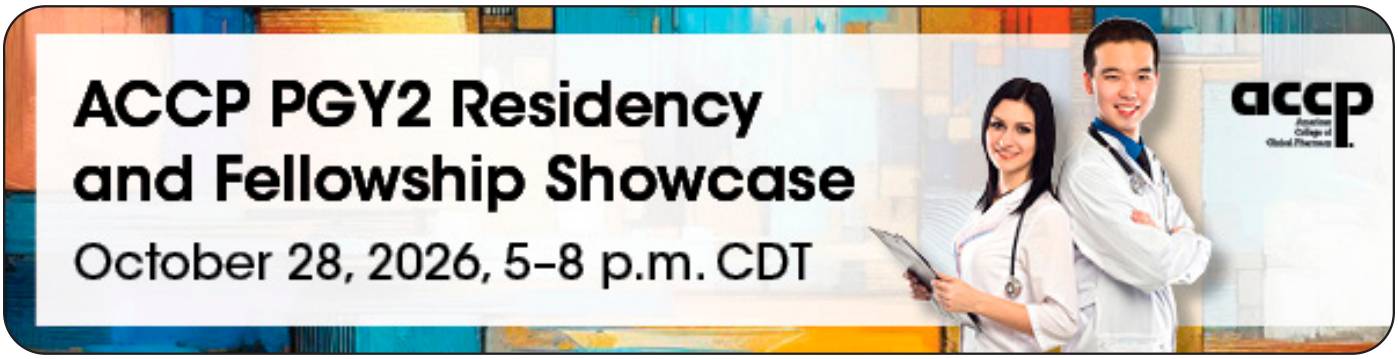
The Board of Regents expresses its thanks to the exceptional work of the Executive Director Search Committee under the leadership of chair Suzanne A. Nesbit, Pharm.D., FCCP, BCPMP. Nesbit was joined on the committee by Curtis Haas, Pharm.D., FCCP; Sandra Kane-Gill, Pharm.D., FCCP, representing the ACCP Board of Regents; Jo Ellen Rodgers, Pharm.D., FCCP, BCPS, BCCP, representing the ACCP Board of Regents; James Tisdale, Pharm.D., FCCP, BCPS, representing the ACCP Foundation Board; and Sheldon Holstad, Pharm.D., FCCP, serving as the ACCP staff representative.

Arif, Cavallari, Devlin, Farrington, McDermott, Shapiro, and Stollings to Receive ACCP Honors

Seven individuals have been selected by the College's Awards Committee to receive ACCP's prestigious 2026 awards, recognizing excellence in clinical pharmacy. Sally A. Arif, Larisa H. Cavallari, John W. Devlin, Elizabeth Anne Farrington, Jennifer K. McDermott, Nancy L. Shapiro, and Joanna Stollings will be honored with the Excellence in Advancement of Diversity, Health Equity, Inclusion, and Accessibility (DEIA) Award; the Russell R. Miller Award; the Therapeutic Frontiers Lecture Award; the Robert M. Elenbaas Service Award; the C. Edwin Webb Professional Advocacy Award; the Education Award; and the Clinical Practice Award, respectively. Farrington and McDermott will be recognized during the Welcome & Keynote Address on Saturday morning, October 17, and the remaining recipients will be honored during the Awards Ceremony on Sunday morning, October 18, at the 2026 ACCP Annual Meeting in Salt Lake City.

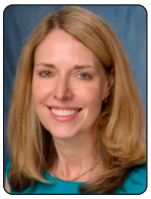
The Excellence in Advancement of DEIA Award recognizes outstanding leadership in advancing diversity, equity, inclusion, and accessibility in pharmacy education, practice, research, or advocacy. Sally A. Arif, Pharm.D., BCCP, is a tenured professor of pharmacy at Midwestern University College of Pharmacy and a clinical cardiology pharmacist and health equity advocate at Rush University Medical Center. Arif is also the founder and CEO of The Equity-Minded Collective, a consultancy established to address systemic inequities and support communities that are marginalized within health care and higher education.

In recommending Arif for the 2026 Excellence in Advancement of DEIA Award to the ACCP Board of Regents, the Awards Committee wrote:



Drawing on nearly 2 decades of health care experience, she integrates equity-minded strategies through her pedagogy in the classroom and in clinical and experiential settings. Within ACCP, Dr Arif has been a highly active member of the DEIA Committee, serving as vice chair from 2024-2025. She contributed directly to the development of the ACCP DEIA Toolkit, proposed the creation of affinity groups, and spearheaded the development of guidance documents to integrate DEIA principles into ACCP mentoring programs.

Arif's expertise is recognized globally through more than 80 platform presentations, media interviews, and peer-reviewed posters focused on DEIA. She has received numerous awards, including Teacher of the Year, Preceptor of the Year, and Outstanding Advisor.



The Russell R. Miller Award, named for the founding editor of Pharmacotherapy, honors significant contributions to the clinical pharmacy literature that advance practice and rational pharmacotherapy. Larisa H. Cavallari, Pharm.D., FCCP, FAHA, is a tenured professor and chair of the Department of Pharmacotherapy and Translational Research and holds the Debbie DeSantis Excellence Professorship at the University of Florida College of Pharmacy in Gainesville, Florida. At the time of her nomination, Cavallari had written 167 original research articles and 287 original publications, including review articles, book chapters, and commentaries, resulting in an h-index of 60, i-10 index of 174, and over 12,000 citations.

In recommending Cavallari for the 2026 Russell R. Miller Award to the ACCP Board of Regents, the Awards Committee wrote:

> Dr Cavallari has made exceptional and sustained contributions to the clinical pharmacy literature, particularly in the field of pharmacogenomics and precision medicine. Her work has directly informed CPIC pharmacogenomic guidelines and major cardiovascular pharmacotherapy recommendations, including genotype-guided antiplatelet therapy and warfarin pharmacogenetics. In addition to an extensive body of original research published in high-impact journals such as *The Lancet, JACC*, and *Nature Reviews Cardiology*, she has contributed extensively to textbooks and invited editorials. Collectively, her work demonstrates sustained and highly influential contributions to the professional literature of clinical pharmacy.

Cavallari is an active ACCP member and Fellow who previously served on the ACCP Board of Regents and ACCP Research Institute Board of Trustees. She has also held leadership roles on several ACCP committees, including chair of the Educational Affairs Committee and secretary of the Research Affairs, Education, and Nominations committees. Her contributions to ACCP journals include 45 publications in *Pharmacotherapy* and 16 in the *Journal of the American College of Clinical Pharmacy*, and she previously served on the *Pharmacotherapy* editorial board.

The ACCP Therapeutic Frontiers Lecture Award is presented to an individual at the forefront of pharmacotherapeutics whose groundbreaking work has advanced therapeutic research. John W. Devlin, Pharm.D., FCCP, MCCP, BCCCP, is a tenured professor at Northeastern University School of Pharmacy. He also practices at Brigham and Women's Hospital, where he serves as an associate scientist in the division of Pulmonary and Critical Care Medicine, a critical care pharmacist in the Department of Pharmacy, and an instructor in medicine at Harvard Medical School. Devlin is an internationally recognized researcher whose substantial contributions to critical care medicine have made a lasting impact on outcomes for critically ill patients.

In its report to the Board of Regents, the Awards Committee shared:

> Dr Devlin has secured approximately $5 million in grant funding, with support from industry, federal, international and professional societies funding agencies for over 20 straight years. He is renowned for his sustained record of accomplishment of innovative, cutting-edge research investigating strategies focused on recognizing and reducing agitation, delirium, and disrupted sleep to lessen post-intensive care unit syndrome and improve ICU survivorship.

In 2020, Devlin was elected a Master of Critical Care Medicine (MCCM) by the Society of Critical Care Medicine, the society's highest level of recognition. This prestigious honor recognizes individuals who have achieved international professional prominence and made significant contributions to the field of critical care, with Devlin among the first pharmacists to receive the distinction. He received ACCP Fellow recognition in 2005. He will deliver his Therapeutic Frontiers Lecture, "Purpose and Passion: Reducing Delirium in Critically Ill Adults," during the Awards Ceremony in Salt Lake City on October 18.

Robert M. Elenbaas served as ACCP's founding executive director from 1986 through 2003. During his 17-year tenure, he exemplified the characteristics of a servant-leader committed to the advancement of clinical pharmacy and ACCP. The Elenbaas Service Award is

given only when a particularly noteworthy candidate is identified in recognition of outstanding contributions to the vitality of ACCP or the advancement of its goals that go well above the usual devotion of time, energy, or material goods. Elizabeth Anne Farrington, Pharm.D., FCCP, FCCM, FPPA, BCPS, BCNSP, BCPPS, is a clinical pharmacist at New Hanover Regional Medical Center.

In her letter of support, Dr Allison Beck Blackmer, adjunct associate professor at Skaggs School of Pharmacy and Pharmaceutical Sciences at the University of Colorado Anschutz Medical Campus, shared:

> It is difficult to enumerate all of the ways that Elizabeth has contributed to the vitality of ACCP due to the fact that her contributions are so vast. She has been an active member of ACCP since the mid-1980s and was instrumental in the development of and service to local chapters (ie, Indiana College of Clinical Pharmacy and Triangle College of Clinical Pharmacy). Elizabeth has served on nearly all of the ACCP committees throughout her career and served as the first chair of the Pediatrics Practice and Research Network (PRN). Of greatest note related to her high-level service within the College has been her membership on the Board of Regents and her service as president-elect, president, and past-president of ACCP. Certainly, whether you know Elizabeth personally or not, all ACCP members view Elizabeth as a leader at ACCP and as a recognizable face, force, and role model.

Dr Lucas Orth, assistant professor at Skaggs School of Pharmacy and Pharmaceutical Sciences at the University of Colorado Anschutz Medical Campus, shared in his letter of nomination how Farrington has remained committed to ACCP's goal of advancing clinical pharmacists:

> Her external contributions to various areas of ACCP's goals, strategic plan, and the general advancement of clinical pharmacy are extremely deserving of further discussion. Dr Farrington participated in committee work related to public and professional relations and pharmacist board certification throughout the 1990s, when only 4 certifications existed. Throughout her career, Dr Farrington has been an outspoken advocate for recognition of additional specialties, as evidenced by her service on the Board of Pharmacy Specialties pediatric pharmacy practice analysis task force in 2011 and her leadership to the Pediatric Specialty Council as vice chair and chair from 2013 to 2017. Her advocacy was vital to the creation of the BCPPS certification in 2014, which is now held by over 1800 pediatric pharmacists.

In recognition of her commitment to and excellence in the profession, Farrington has received many prestigious awards, including multiple Presidential Citations from the Society of Critical Care Medicine, the BPS Weaver/Penna Award from the Board of Pharmacy Specialties, and the Nelms-Berg Department Editor Award from the *Journal of Pediatric Health Care.* She was recognized as an ACCP Fellow in 1997.

The C. Edwin Webb Professional Advocacy Award is given only when a particularly noteworthy candidate is identified who has made outstanding contributions to the visibility and value of clinical pharmacy in national policy, intraprofessional, and interprofessional arenas; has assembled a record of mentoring others who have gone on to assume a health professions and health policy leadership role; and is recognized as an ambassador for clinical pharmacy both within and outside the profession. Jennifer K. McDermott, Pharm.D., FCCP, FAST, BCTXP, BCPS, is a pharmacist with the Centers for Medicare & Medicaid Services within the US Department of Health and Human Services, where she works in the Division of Formulary and Benefit Operations of the Medicare Drug Benefit and C&D Data Group.

Dr Karen A. Khalil, senior project manager at NYU Langone Transplant Institute, shared in her letter of nomination that McDermott's record is "exemplary." She wrote:

> Her work has directly improved access to essential therapies, elevated the role of clinical pharmacists in policy conversations, and inspired others to engage in advocacy on behalf of their patients and the profession. One of her most important contributions to the field has been leading the effort to expand immunosuppressive drug coverage under Medicare Part B, which was incorporated into the CY2025 Medicare Physician Fee Schedule Final Rule. This work has improved access to life-saving therapies for transplant recipients and clearly demonstrated the value of clinical pharmacists in shaping, implementing, and evaluating national policy.

Dr Maya Campara, coordinator of transplant clinical pharmacy services at UI Health, spoke to McDermott's mentorship and leadership in her letter of support:

> Dr McDermott's mentorship record is long, sustained, and deeply impactful. She has served as a primary preceptor for dozens of pharmacy residents and students across several major academic medical centers and has mentored early-career clinicians through national programs within the AST Trainee and Young Faculty Community of Practice. Many of her mentees have since assumed leadership roles in transplant pharmacy, academia, and clinical practice.

Her influence is also evident through her scholarship. As series editor for SOTSAP, she shapes the professional development of practitioners nationwide. Her authorship of consensus guidelines—endorsed jointly by ACCP, AST, and ISHLT—further reflects her leadership in guiding the profession's direction.

An ambassador for clinical pharmacy, McDermott is a frequently invited speaker at the American Transplant Congress, ACCP, ASHP, and CMS, where she addresses topics such as immunosuppression, transplant medication access, Medicare policy, and best practices in clinical care. She has received many awards, including Most Valuable Pharmacist for the AST Transplant Pharmacy Community of Practice Medication Access Workgroup, Wiley Top Cited Article Co-Author, and ACCP Fellow recognition in 2025.

The ACCP Education Award recognizes excellence and lasting impact in clinical pharmacy education at the professional or postgraduate level. Nancy L. Shapiro, Pharm.D., FCCP, BCACP, CACP, is an associate head for education and clinical professor in the Department of Pharmacy Practice at the University of Illinois Chicago Retzky College of Pharmacy. She also serves as an ambulatory care clinical pharmacist and operations coordinator for the Antithrombosis Clinic at the University of Illinois Hospital and Health Sciences System.

In recommending Shapiro for the 2026 ACCP Education Award, the Awards Committee wrote:

> With more than 30 years of impactful service in pharmacy education, Dr Shapiro has made significant contributions to the training of pharmacy students, residents, and practicing pharmacists. Her educational impact spans local to international audiences through her extensive interprofessional continuing education. She has led major initiatives as program chair, planner, moderator, and faculty for national certificate programs, specialty conferences, and preceptor development programs. She also founded and led international pharmacy education programs, including a summer program that has trained more than 500 learners from over 25 universities across Asia and Europe.

A lifelong educator, Shapiro continues to innovate in the classroom and advance pharmacy education. She is actively involved in several professional organizations, including ACCP, where she has served on the Awards Committee and Board of Regents and as a member of the Public and Professional Relations Committee and Education and Training PRN. She was recognized as an ACCP Fellow in 2010. Through her dedication to pharmacy education and professional service, Shapiro exemplifies the mission of the ACCP Education Award and has made a lasting impact on the training and development of future clinical pharmacists.

The ACCP Clinical Practice Award honors substantial and sustained contributions to innovative clinical pharmacy practice and patient care. Joanna Stollings, Pharm.D., FCCP, FCCM, BCPS, BCCP, is an MICU clinical pharmacy specialist at Vanderbilt University Medical Center. With more than 20 years of experience in critical care, Stollings has played a pivotal role in expanding clinical pharmacy services and strengthening the role of pharmacists in critical care practice.

In its report to the ACCP Board of Regents, the Awards Committee commented:

> Stollings expanded clinical pharmacy services to include the development of and research conducted with the Critical Illness Brain Dysfunction Survivorship Center (CIBS) and ICU-Recovery Center at Vanderbilt. She has contributed extensively to research and scholarly endeavors and has been an investigator for several landmark trials that have contributed to changes in critical care practice, including MIND-USA, SMART, and PILOT, each published in *The New England Journal of Medicine*.

Stollings' scholarly contributions include more than 100 peer-reviewed publications, an h-index of 38, and more than 200 external presentations. She has been

recognized nationally for her patient- and family-centered approach to critical care management, including through the incorporation of her work into national guidelines such as the SCCM Guidelines on Family-Centered Care for Adult ICUs. She was recognized as an ACCP Fellow in 2016.

Members of the 2026 Awards Committee were Melanie Claborn (chair), Paul Gubbins (vice chair), Scott Bolesta, Allison Chung, Lawrence Cohen, Brandon Dionne, Amy Fabian, Stormi Gale, Carrie Griffiths, Christine Groth, Payal Gurnani, Zhe Han, Erin Hennessey, Miranda Howland, Kazuhiko Kido, Eric Kinney, Wesley Kufel, Dustin Linn, Tanvi Patil, Marissa Salvo, Angela Shogbon Nwaesei, Harminder Sikand, and Yi Zhou.

President's Column

Unwritten: The Questions That Change Care

Denise H. Rhoney, Pharm.D., FCCP, FNCS, MCCM

The future of clinical pharmacy is unwritten.

Its next chapters are shaped by people who notice what others may overlook, question what has become routine, and remain willing to follow the evidence even when it leads somewhere unexpected.

This is the spirit of the Therapeutic Frontiers Lecture Award. This year, ACCP will recognize 2026 Therapeutic Frontiers Lecturer John W. Devlin, Pharm.D., FCCP, MCCM, BCCCP, whose sustained and collaborative scholarship has helped transform how clinicians understand delirium in critically ill adults.

Delirium can be frightening for patients and families and challenging for ICU clinicians to recognize amid fluctuating critical illness, particularly in patients who are nonverbal or sedated or who have underlying neurologic conditions. For many years, patients with delirium were assumed to have "ICU psychosis" and often treated with high-dose haloperidol despite a lack of evidence supporting its routine use.

John's research program helped change that story.

I have had the pleasure of working with John since early in his career, when our paths crossed in Detroit. I watched with great admiration as he carried those early clinical questions with him to Boston and built a research program that has flourished through collaboration, persistence, and an unwavering focus on improving the experience and outcomes of critically ill patients. To see the questions that began at the bedside grow into work that has helped reshape critical care practice has been especially meaningful to me.

Making the Invisible Visible

A meaningful frontier often begins not with a treatment, but with learning to see the problem clearly.

Early in his work, John and his collaborators, who have almost always included pharmacy fellows and graduate students, identified barriers to ICU delirium recognition and examined how education and validated assessment tools could improve bedside detection. Their work demonstrated that rigorous delirium recognition could be taught, strengthened, and incorporated into the routine bedside care delivered by the ICU interprofessional team.[1]

The impact was larger than any single screening instrument. Delirium became something ICU teams could name, discuss, measure, and study. Once it was visible, new questions became possible: What places a patient at risk? How do medications and patterns of sedation influence brain function? What are the ICU and post-ICU sequelae of delirium? Which interventions prevent delirium? Which treatments improve outcomes that matter to patients and families?

John remembers the clinical environment that made these questions increasingly difficult to ignore:

> In the early 2000s, I shared the concerns of other clinicians that patients were often deeply sedated, frequently administered continuous benzodiazepines and rarely left their bed until extubated. Family expressed concern about their inability to interact with their loved ones.

At the time, he notes, "the concept of ICU survivorship was still novel." Instead, "daily ICU decision-making focused largely on surviving the ICU rather than on post-ICU psychological health or cognitive and physical function, and few of the pharmacologic agents used to manage pain, agitation, and delirium had been rigorously evaluated in controlled trials."

These observations helped define a much larger question: not simply whether critically ill patients survived, but also what happened to their brains, functionality, and recovery along the way.

Following the Evidence, Not Preferred Answers

What I find most inspiring about John's work is not that it offers one simple solution. It is that his research reflects the discipline to keep asking better questions. His team tested promising pharmacologic approaches to treat and prevent delirium, including quetiapine and dexmedetomidine. In an early double-blind, randomized controlled trial (RCT) evaluating an antipsychotic to treat ICU delirium, quetiapine reduced the duration of delirium.[2] In another RCT, nocturnal dexmedetomidine reduced incident ICU delirium by 44%,[3] although when

dexmedetomidine was compared with propofol for ICU sedation, it did not reduce delirium or improve post-ICU cognition.[4]

John also collaborated on studies examining medication-associated risk factors for delirium and the relationships among sedation, sleep, pain, and delirium.[5,6] Across this body of work, the question steadily expanded from "Which drug should we use to prevent and treat delirium?" to "How does the entire ICU experience affect the patient's brain, functionality, and recovery?"

One of the clearest expressions of this shift came through the multicomponent ICU Liberation, or ABCDEF, bundle. John describes this work as a career high point:

> A highlight of my career was working with an interprofessional group of ICU researchers to refine the multicomponent ICU Liberation (ABCDEF) bundle and rigorously implement it in 68 diverse US ICUs having a pharmacist rounding with the team. The evaluation included more than 15,000 patients. Greater use of the bundle was associated with a 68% reduction in ICU mortality, a 40% reduction in ICU delirium, and a 64% reduction in discharge to another institution rather than home.[7]

This work reinforced something increasingly important in delirium care—that the answer was unlikely to reside in a single drug. It required thinking about the entire environment of critical illness and the many modifiable factors that shape a patient's experience.

Just as importantly, John's scholarship illustrates the humility required of good science. Promising findings invite larger and better studies; familiar practices still require evidence; and a negative trial can advance care by showing clinicians what an intervention does not accomplish. In 2 randomized trials, for example, he found that haloperidol neither prevents nor effectively treats ICU delirium.[8,9] The EuRIDICE trial similarly did not support scheduled haloperidol as a treatment that reduces the burden of delirium itself.[9]

This result is not an absence of progress. It is progress through greater clarity.

This is a lesson for all of us in clinical pharmacy. Our responsibility is not to defend what is customary. It is to examine what the evidence supports, recognize what remains uncertain, and keep the patient's experience at the center of the question.

Turning Research into a Framework for Care

John's influence extends well beyond individual studies.

As chair of the Society of Critical Care Medicine panel that developed the 2018 PADIS guidelines, he helped bring pain, agitation and sedation, delirium, immobility, and sleep disruption into 1 integrated framework for adult ICU care.[10]

This organization mattered. It encouraged clinicians to move beyond viewing delirium as an isolated symptom or searching for a single medication to solve it. Instead, it placed cognition within the entire patient experience: comfort, wakefulness, medication exposure, mobility, sleep, communication, and recovery.

It also reflects the distinctive contribution of clinical pharmacists. We practice at the intersection of pharmacology, physiology, evidence, and implementation. We are positioned to notice when a medication intended to help may also introduce risk, when a routine practice deserves a closer look, and when an evidence-based recommendation must be translated into the realities of individualized bedside care.

The deepest impact of a research program is not captured solely by publications, citations, or grants. It can also be seen in the questions that clinicians now consider essential, the practices that have changed, the language that teams share, and the investigators who are prepared to carry the work forward.

Writing the Questions That Come Next

John continues to help shape this future through his mentorship of early-stage investigators and his leadership with the NIA-funded Network for Investigation of Delirium: Unifying Scientists, or NIDUS.

A recent NIDUS-led roadmap for delirium treatment trials emphasizes that future progress will depend not only on testing new interventions, but also on asking more precise and patient-centered questions: Who should be enrolled? Which manifestation of delirium is the intervention intended to change? Which short- and long-term outcomes matter most? How should trials account for the complexity and rapid change that define critical illness?[11]

Sometimes the next breakthrough begins with a new therapy. Sometimes it begins with a better measure, a more meaningful outcome, or a study designed around what patients and families most need to recover.

John sees an expansive research frontier ahead. "The heterogeneity of delirium demands precision approaches to target effective treatments":

> Pragmatic and adaptive trial designs; the use of artificial intelligence and biomarkers, including digital, imaging, EEG, and -omics approaches, to predict and recognize delirium; a better understanding of how social determinants of health, comorbidities, and medications influence delirium and long-term cognition; and stronger dissemination and implementation science focused on delirium reduction.

Moreover, he sees a particular opportunity for our profession in writing this next chapter: "Pharmacist-clinician scientists are well-suited to lead these important investigative efforts."

An Invitation to the Frontier

This is why John's story belongs within our Unwritten theme.

His career demonstrates that a frontier is advanced by curiosity disciplined by evidence, persistence balanced by humility, and collaboration that makes room for others to continue the work.

It begins by noticing what is being missed.

It moves forward by learning how to measure it.

It requires testing ideas without becoming attached to the result.

And it endures by mentoring others to ask questions we have not yet imagined.

I hope you will join us Sunday, October 18, at the Salt Palace Convention Center in Room 151 D-G at 8:15 a.m. (MDT) for the ACCP Awards Ceremony and Dr Devlin's Therapeutic Frontiers Lecture.

Come not only to celebrate an extraordinary contribution to critical care pharmacotherapy but also to consider your own unwritten question. The next frontier in clinical pharmacy may begin with something one of us notices, challenges, or understands differently because we were there to hear John's story.

The future is unwritten. And sometimes, the first line of the next chapter is simply a question someone is willing to follow.

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Get Ready to Strike a Chord at the ACCP Opening Reception

It's time to start getting excited for the 2026 ACCP Annual Meeting in Salt Lake City, October 17-20! This year, the Opening Reception will kick off the Annual Meeting with an evening of connection, celebration, and entertainment. After the New Fellows Induction Ceremony, attendees will have the perfect opportunity to reconnect with colleagues, meet new friends, and celebrate the ACCP community in a lively and welcoming atmosphere.

Mobile Dueling Pianos

Get ready for an evening of music and fun with Mobile Dueling Pianos, bringing their interactive dueling pianos experience to the ACCP Opening Reception. With 2 pianists taking the stage and engaging the crowd, the performance promises to be an entertaining way to unwind, connect with fellow attendees, and start the Annual Meeting on a high note.

Don't miss out—register early and save!

Secure your spot at the 2026 ACCP Annual Meeting and enjoy all the exciting events, including the Opening Reception. Register by the early registration deadline of September 21, 2026, to take advantage of discounted rates. Join us in Salt Lake City for an unforgettable Annual Meeting experience—register today!

ACCP Annual Fellows Dinner—Registration Deadline Is October 2

Date: Friday, October 16, 2026
Time: 7:00-10:00 p.m.
Location: Hyatt Regency Salt Lake City, Regency Ballroom

We are delighted to invite all of the College's Fellows to this year's Fellows Dinner on Friday, October 16, the eve of the 2026 ACCP Annual Meeting. Our guests of honor will be the incoming 2026 class of ACCP Fellows.

This event offers a wonderful opportunity to network with colleagues and celebrate this year's newly elected Fellows. The 2026 Fellows Address, "From Whence We've Come," will be delivered by Michael S. Maddux, Pharm.D., FCCP, ACCP Executive Director, in recognition of his upcoming retirement after many years of dedicated service to ACCP. The evening will commence with a cocktail reception at 7:00 p.m., followed by a plated dinner.

The registration deadline is October 2, so be sure to register today at www.accp.com/am as part of your online Annual Meeting registration process.

If you prefer to register for the Fellows Dinner separately from your Annual Meeting registration, please visit ACCP Fellows Dinner Registration.

We look forward to seeing you in Salt Lake City!

Have a Billing or Contracting Challenge? Bring It to the ACCP Annual Meeting Consultancy Session

Do you have a pharmacy billing, reimbursement, contracting, or implementation challenge you'd like help working through? We invite ACCP Annual Meeting attendees to submit a case for discussion during the Billing & Contracting Consultancy Session on Saturday, October 17, 2026, from 3:30 to 5:00 p.m. (MDT) in Salt Lake City.

Submitting a case is easy and does not require a formal presentation. Selected participants will briefly describe their challenge and spend about 15 minutes engaging in a facilitated discussion with colleagues who can offer ideas, insights, and practical strategies. If you've ever wished you could bring together a room full of experienced pharmacy leaders, practitioners, and innovators to help think through a problem, this is your opportunity.

Submit your case here.

Simply provide a brief description (≤ 50 words) of your challenge. Cases will be selected on a first-come, first-served basis, and submissions are due before **September 21, 2026**.

Examples of cases received in the past included challenges related to:

- Expanding clinical pharmacist billing opportunities and demonstrating value to payers
- Negotiating or managing payer contracts for pharmacy services
- Implementing reimbursement models for comprehensive medication management or other clinical services
- Measuring and communicating pharmacist impact within value-based care arrangements
- Integrating billing and documentation workflows into electronic health records
- Addressing operational, financial, or regulatory barriers to service reimbursement

The consultancy follows an "all teach, all learn" approach, bringing together attendees to share experiences, discuss real-world challenges, and learn from one another. Whether you submit a case or participate in the discussion, we hope you'll join this engaging and collaborative session, which always receives rave reviews from attendees.

ACCP and the Primary Care Collaborative Partner to Promote Medication Optimization in Primary Care

The Primary Care Collaborative (PCC) and the American College of Clinical Pharmacy (ACCP) have collaborated to develop a new resource guide supporting the integration of comprehensive medication management (CMM) into advanced primary care models, including the Patient-Centered Medical Home. The guide highlights the critical role of clinical pharmacists in optimizing medication use, improving patient outcomes, and strengthening team-based care.

Comprehensive medication management is a patient-centered, team-based approach that ensures medications are used appropriately, effectively, and safely. With the medications involved in around 80% of all treatments and medication-related problems costing the US health care system more than $200 billion annually, the resource underscores the importance of

achieving medication optimization through CMM as a core component of advanced primary care.

The fact sheet provides several resources for implementing and advancing CMM, including foundational resources that make the case for CMM and standardize its core components. These resources have come from ACCP-supported initiatives like the CMM in Primary Care study and the Get the Medications Right (GTMRx) Institute, in addition to ACCP's continued collaboration with PCC as a longtime executive member.

Broader adoption of CMM can deliver value across the health care ecosystem by improving outcomes and experiences for patients, reducing clinician burden, lowering costs for payers and employers, and decreasing the total cost of care for health systems. PCC and ACCP emphasize that sustainable payment and policy support will be essential to expanding access to CMM and realizing the full potential of advanced primary care.

Check out the full fact sheet here.

Washington Report

ACCP Urges Congress to Focus on Improving the Value of Prescription Drug Therapy: Nonoptimized Medication Therapy Costs $500 Billion Annually

John McGlew
Director of Government Affairs

As part of its ongoing advocacy campaign to establish Medicare coverage for comprehensive clinical pharmacy services, ACCP issued a press release urging lawmakers to prioritize critical health care issues during the remainder of the current 119th Congress, including policies that improve the value of prescription drug therapy for patients and taxpayers.

Costs associated with nonoptimized medication therapy exceed $528 billion annually. Although efforts to reduce prescription drug prices remain an important policy discussion in the run-up to the November midterm elections, ACCP calls on Congress to enact legislation to authorize Medicare Part B coverage and payment for comprehensive clinical pharmacy services when provided by clinical pharmacists.

"Optimizing medication use is one of our greatest opportunities to improve patient outcomes, prevent avoidable medication-related harm, and reduce unnecessary health care spending," said ACCP President Denise H. Rhoney, Pharm.D., FCCP, FNCS, MCCM.
Click here to read ACCP's press release.

Capitol Hill Strategy

This media outreach is just part of ACCP's efforts to advance legislative language that would establish coverage for comprehensive clinical pharmacy services in Medicare to integrate clinical pharmacists working as formal members of the patient's primary health care team, demonstrated through empirical, peer-reviewed studies and everyday practice to significantly improve clinical outcomes and enhance the safety of patients' medication use.

Throughout 2026, working independently and as part of multiorganizational coalitions, ACCP has been holding meetings with leading offices on Capitol Hill that serve on the legislative committees with jurisdiction over Medicare:

- Senate Finance Committee
- House Energy and Commerce Committee
- House Ways and Means Committee

As part of this legislative strategy, ACCP has specifically targeted the GOP Doctors Caucus, an informal congressional body of Republican members of Congress with medical and health care provider backgrounds dedicated to patient-centered health care policy. These medical professionals in Congress work to develop patient-centered, patient-driven health care reforms focused on quality, access, affordability, portability, and choice. Targeting these offices provides ACCP with a forum to respond to questions regarding the American Medical Association's "scope creep" advocacy campaign.

ACCP and ECAPS/Main Street Pharmacy Access Act

Recent congressional action related to H.R. 3164, the Main Street Pharmacy Access Act—formerly referred to as the Ensuring Community Access to Pharmacist Services Act (ECAPS)—provides encouraging evidence that Congress increasingly understands and recognizes the importance of integrating pharmacists into collaborative care structures to ensure optimal patient outcomes.

The College strongly believes that its advocacy success depends on helping policymakers understand the unique value that clinical pharmacists bring to patient care teams. As the ECAPS/Main Street Pharmacy Access Act now moves through the House of Representatives from the Ways and Means Committee to the Energy and Commerce Committee, ACCP will also work with its pharmacy colleague organizations in support of Medicare coverage for these collaborative, team-based services delivered in community pharmacies.

ACCP-PAC Supports the College's Advocacy Communications

ACCP-PAC is the only federal political action committee dedicated specifically to advancing the practice of clinical pharmacists and the care of their patients. ACCP-PAC supports candidates on the basis of their alignment with ACCP's mission to advance the profession and improve human health and their demonstrated leadership on issues important to ACCP members, such as protecting Medicare funding for pharmacy residencies. Click here to learn more about ACCP-PAC.

ACCP-PAC is the only means by which ACCP can provide financial support to help candidates for Congress who understand and support its issues and share its vision of a team-based, patient-centered, quality-driven approach to health care delivery.

ACCP-PAC is a nonpartisan, member-driven initiative, and all decisions regarding financial contributions to candidates are made by the PAC Governing Council according to certain established criteria:

- Position on key health care committees in Congress
- Proven support for pharmacy and health care–related issues
- Previous health care experience

ACCP members who contribute to the PAC may recommend candidates to receive contributions. All PAC contributor recommendations will be considered; however, we may not accommodate all requests. The ACCP-PAC Governing Council must approve all candidate contributions.

For more information, visit the ACCP-PAC website at www.accpaction.org or contact John McGlew (jmcglew@accp.com).

2026 Awards for Contributions to ACCP's Official Journals

The ACCP Foundation Ltd Board of Directors will recognize outstanding peer reviewers and authors with awards at the 2026 ACCP Annual Meeting.

ACCP's 2 official journals engage many peer reviewers who help determine which high-quality articles will be published. These reviewers provide an integral service to the journals by critically evaluating the submitted manuscripts. The best reviewers provide the highest-quality reviews consistently and in a timely manner. The *Journal of the American College of Clinical Pharmacy (JACCP)* and *Pharmacotherapy* are pleased to recognize 10 such reviewers:

***JACCP* Outstanding Reviewers:**

Aleda M.H. Chen, Pharm.D., MS, PhD, FAPhA
University of Arkansas for Medical Sciences College of Pharmacy

Mike Dorsch, Pharm.D., MS, FCCP, FAHA, FACC
University of Michigan College of Pharmacy

Brianna Hudak, Pharm.D., MHPE, BCACP
University of Illinois Retzky College of Pharmacy

Khoa A. Nguyen, Pharm.D.
University of Florida, College of Pharmacy

Wesley Nuffer, Pharm.D., BCPS
University of Colorado Anschutz Skaggs School of Pharmacy and Pharmaceutical Sciences

***Pharmacotherapy* Outstanding Reviewers:**

Leslie Hamilton, Pharm.D., FCCP, FCCM, FNCS, BCPS, BCCCP
University of Tennessee Health Sciences College of Pharmacy

Katherine S. O'Neal, Pharm.D., MBA, FADCES, FAPhA, BCACP
The University of Oklahoma Health Campus College of Pharmacy

Zachary R. Smith, Pharm.D., FCCP, FCCM, BCPS, BCCCP
Henry Ford Hospital

Benjamin Van Tassell, Pharm.D.
Brigham Young University School of Medicine

Sarah E. Wheeler, Pharm.D., BCACP
Virginia Commonwealth University School of Pharmacy

The editors-in-chief and associate and scientific editors of ACCP's official journals and members of the Foundation's Board of Directors extend their gratitude to all *JACCP* and *Pharmacotherapy* reviewers. Individuals desiring to enroll in the Peer Review Training Program or provide peer review for the ACCP journals can contact Keri Sims (ksims@accp.com).

In addition to the reviewer awards, the Foundation will recognize outstanding authors. The editors-in-chief and associate and scientific editors of ACCP's official journals and members of the Foundation's Board of Directors have established the criteria for the Editor's Choice Awards to recognize outstanding manuscripts published in *JACCP* and *Pharmacotherapy*.

Papers are selected by the respective editor-in-chief in collaboration with the supporting editors and board members. Papers selected must have been published in *JACCP* or *Pharmacotherapy* within the previous 2 volumes and must be exemplary. Drs C. Lindsay DeVane

and Stuart T. Haines are pleased to recognize the following papers.

Editor's Choice Awards for JACCP

- Sikora A, Murray B, Henry K, et al. Consensus recommendations for the integration of critical care pharmacists on intensive care unit teams: Endorsed by the American Association of Critical-Care Nurses, American College of Clinical Pharmacy, American Society of Health-System Pharmacists, Institute for Safe Medication Practices, and Society of Critical Care Medicine. *J Am Coll Clin Pharm*. 2025;8(9):914-930. https://doi.org/10.1002/jac5.70084
- Cochran GL, Cochran HC, Ernst ME. Research and scholarly methods: mitigating information bias. *J Am Coll Clin Pharm*. 2025;8(9):906-913. https://doi.org/10.1002/jac5.70054

Editor's Choice Awards for Pharmacotherapy

- Acero-González A, Guzman Y, Proaños NJ, et al. Lithium augmentation in treatment-resistant depression: a qualitative review of the literature. *Pharmacotherapy*. 2025;45(10):688-701. https://doi.org/10.1002/phar.70063
- Hellenbart EL, Ipema HJ, Rodriguez-Ziccardi, Krishna H, DiDomenico RJ. Disease-modifying therapies for amyloid transthyretin cardiomyopathy: current and emerging medications. *Pharmacotherapy*. 2025;45(2):124-144. https://doi.org/10.1002/phar.4639
- Nguyen J, Madonia V, Bland CM, et al. A review of antibiotic safety in pregnancy—2025 update. *Pharmacotherapy*. 2025;45(4):227-237. https://doi.org/10.1002/phar.70010

This year, 4 of the 5 papers recognized for Editor's Choice Awards will also be featured as platform presentations at the Annual Meeting. We hope you will plan to join us to learn more about these exceptional papers.

Last Call: Showcase Postgraduate and Practitioner/Faculty Positions at the ACCP Annual Meeting

Recruiting top clinical pharmacy talent? Don't miss your opportunity to participate in the 2026 ACCP Annual Meeting Recruitment Poster Showcase on Saturday, October 17.

This is your last chance to secure a spot and connect directly with highly qualified students, residents, fellows, practitioners, and faculty candidates attending the Annual Meeting—the registration deadline is September 21. Designed as an efficient and cost-effective recruitment opportunity, the showcase allows residency, fellowship, graduate, practitioner, and faculty recruiters to engage in meaningful conversations with candidates in an intimate networking environment.

Annual Meeting attendees representing residency, fellowship, and graduate programs as well as practitioner and faculty positions are invited to participate. Whether you're recruiting for current openings or building your future talent pipeline, the Recruitment Poster Showcase offers access to motivated clinical pharmacy professionals from across the country.

Candidate participation is available at no additional charge for students, residents, and practitioner/faculty attendees registered for the Annual Meeting, ensuring strong visibility for participating programs and employers.

Can't attend the Annual Meeting? Additional recruitment opportunities are available later this fall. Showcase your PGY1 programs during the SNPhA x ACCP Residency Showcase on November 10 and 12, or promote your PGY2 and fellowship programs during the virtual PGY2/Fellowship Showcase on October 28. Recruiters seeking practitioner or faculty candidates can also advertise openings year-round through the ACCP Career Center.

Don't wait. Reserve your place in the Annual Meeting Recruitment Poster Showcase today and put your opportunities in front of the next generation of clinical pharmacy leaders.

SCCP at Long Island University Arnold & Marie Schwartz College of Pharmacy and Health Sciences Wins 2026 ACCP Outstanding Student Chapter Award

Left to Right: Sean Zhou, Angela Sunil, Georgette Afriyie, Mashtura Tashnuva, and Maejie Grace Lorzano Balansag.

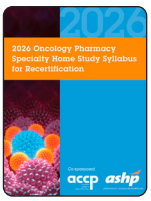
The Outstanding Student Chapter Award recognizes the ACCP student chapter that has best exemplified strength in leadership, dedication in patient care, and passion for professional development through its activities and membership. The winning chapter's activities should address ACCP's core values of extending the frontiers of clinical pharmacy and promoting dedication to excellence in patient care, research, and education. A key component of ACCP's core values is the clinical pharmacist's ability to work collaboratively within the health care environment. Each chapter must demonstrate its ability to work with other health disciplines.

Please join ACCP in congratulating this year's Outstanding Student Chapter Award–winning institution, the Student College of Clinical Pharmacy at Long Island University Arnold & Marie Schwartz College of Pharmacy and Health Sciences. The Outstanding Student Chapter Award winner will be recognized at the 2026 ACCP Annual Meeting during the ACCP Student Chapter Forum. In addition to this recognition, the chapter will receive a $1000 cash award and a commemorative plaque.

ACCP/ASHP September Program Releases

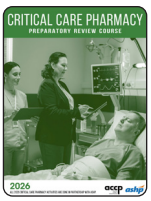
In collaboration with ASHP, ACCP will release the following programs in September.

2026 Oncology Pharmacy Specialty Home Study Syllabus for Recertification: Modules A-D



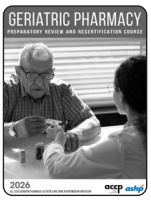
Release date: September 9, 2026
Total hours: 16.0 hours of BCOP/CPE credit

2026 ACCP/ASHP Critical Care Pharmacy Preparatory Review Course



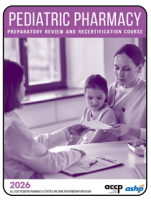
Release date: September 16, 2026
Total hours: 21.0 hours of CPE credit*

2026 ACCP/ASHP Geriatric Pharmacy Preparatory Review and Recertification Course



Release date: September 16, 2026
Total hours: 22.5 hours of BCGP/CPE credit

2026 ACCP/ASHP Pediatric Pharmacy Preparatory Review and Recertification Course



Release date: September 16, 2026
Total hours: 25.0 hours of BCPPS/CPE credit

**The ACCP/ASHP Critical Care Pharmacy Preparatory Review Course does not offer BCCCP recertification credit in 2026.*

2027 National Student and Resident Committee Members Appointed

Earlier this year, ACCP issued a call for applications to student and trainee members interested in serving on the National Student Network Advisory Committee and National Resident Advisory Committee. The College received applications from individuals across the country, and after reviewing their applications, ACCP President-Elect Toby Trujillo selected student and trainee members for appointment. ACCP is pleased to announce the appointment of the following members to the 2027 committees.

2027 National Student Network Advisory Committee

Chair: Hannah McMurrin, University of Iowa College of Pharmacy

Vice Chair: Julien Trujillo, The Ohio State University College of Pharmacy

Secretary: Addison Duet, Auburn University Harrison College of Pharmacy

Members-at-Large:

Dexler Benjamin, University of North Carolina Eshelman School of Pharmacy
Emily Charen, Virginia Commonwealth University School of Pharmacy
Nathan Colasanti, The Ohio State University College of Pharmacy
Qamar Dhafer, University of Houston College of Pharmacy
Lessye Gray, Auburn University Harrison College of Pharmacy
Chloe Hietpas, University of Minnesota College of Pharmacy
Rebecca McElroy, Auburn University Harrison College of Pharmacy
Devin Moore, Texas A&M University Irma Lerma Rangel College of Pharmacy
Paola Olvera-Muñoz, University of Hawaii at Hilo Daniel K. Inouye College of Pharmacy
Sean Zhou, Long Island University Arnold and Marie Schwartz College of Pharmacy and Health Sciences

2027 National Resident Advisory Committee

Chair: Shannon Dicken, Pharm.D., University of Colorado Anschutz Medical Campus

Vice Chair: Kylie Michot, Pharm.D., University of Mississippi Medical Center

Members-at-Large:

Arran Amick, Pharm.D., Prisma Health Richland
Anthony Bedrin, Pharm.D., United Health Services
Kiri Carmody, Pharm.D., University of Minnesota Medical Center
Ashley Dahlquist, Pharm.D., Rush University Medical Center
Akrum Elshazali, Pharm.D., Rush University Medical Center
Ashley Fronk, Pharm.D., Cedars-Sinai Medical Network
Heeral Naik, Pharm.D., Yale New Haven Hospital
Kevin Nguyen, Pharm.D., University Health
Obioma Opara, Pharm.D., Detroit Medical Center, Harper-Hutzel Hospital
Gabriela Rajic, Pharm.D., VCU Health System
Rose Yang, Pharm.D., University of Minnesota

ACCP Resources to Help You Advance Clinical Pharmacy Practice

Whether you're expanding collaborative practice, launching a new clinical service, or planning your next career move, ACCP offers resources designed to help you turn ideas into action. From a customizable Collaborative Practice Agreement (CPA) Template, which supports team-based care, to the Clinical Service Implementation Certificate Program, which equips pharmacists to successfully develop or expand services, to the Career Advancement Resource Center, which supports professional growth at every career stage, ACCP provides the tools and expertise that clinicians need to advance practice and enhance patient care.

To support pharmacists and health care organizations in advancing team-based care, ACCP has developed a CPA Template that provides a practical framework for establishing pharmacist-physician CPAs. Although collaborative practice is authorized in all 50 states, regulatory requirements vary significantly. The ACCP template helps organizations navigate these differences through structured section headers and customizable language that can be tailored to state law, institutional policies, and practice needs. The template reflects ACCP policy supporting clinical pharmacists as medication use experts on physician-led health care teams and emphasizes the qualifications of residency-trained, board-certified pharmacists. It also incorporates provisions that promote communication, coordination, and shared accountability among health care professionals.

For pharmacists looking to move from planning to implementation, ACCP's Clinical Service Implementation Certificate Program provides application-based professional development in designing, launching, and evaluating clinical pharmacy services. Through self-paced learning, portfolio-based assignments, and live consultancy sessions, participants gain practical skills in developing business cases, implementation planning, outcomes measurement, and communicating value to organizational leadership. Participants complete the program with a practice implementation portfolio and performance story that can support future service expansion efforts.

ACCP also offers comprehensive support through the Career Advancement Resource Center, which features professional development resources in leadership, practice, research, and career transitions.

Together, these resources provide pharmacists with the tools and support needed to advance their careers, expand clinical services, and drive meaningful improvements in patient care.

ACCP Members Contribute to Pharmacy HIT Initiatives

As a strategic member of the Pharmacy Health Information Technology (PHIT) Collaborative, the American College of Clinical Pharmacy (ACCP) plays an active role in shaping the future of interoperable health information technology, digital innovation, and pharmacist-provided patient care. ACCP members contribute their expertise across several PHIT workgroups, helping to advance national efforts that support technology-enabled, patient-centered care and optimize the pharmacist's role within the health care team.

The PHIT Collaborative brings together pharmacy organizations and health care stakeholders to promote health information technology solutions that enhance care coordination, improve data exchange, and support the integration of pharmacists' services within evolving health care delivery models. Through its participation, ACCP ensures that the perspectives and expertise of clinical pharmacists are represented in key discussions and resource development affecting digital health and health care interoperability.

In the Pharmacist Services Coding and Documentation (CoDo) Work Group, ACCP representatives help develop guidance to support the adoption and implementation of standardized billing and documentation codes for pharmacist-provided patient care services. The workgroup's efforts focus on ensuring that pharmacists' clinical contributions can be consistently documented and exchanged across health care systems in an interoperable manner. ACCP representatives serving on this workgroup include Ryan Wargo, Pharm.D., BCACP, of Legacy Health, and Christie Schumacher, Pharm.D., FCCP, BCPS, BCACP, of Midwestern University College of Pharmacy.

ACCP members also contribute to the Clinical Workflow, Artificial Intelligence, and Digital Innovation (CAD) Work Group, which seeks to improve patient care across the continuum by leveraging emerging technologies and artificial intelligence within clinical workflows. The workgroup provides guidance on topics such as clinical decision support, machine learning, digital health, e-prescribing, and innovations that support the pharmacists' patient care process. Representing ACCP on this workgroup are Alan J. Zillich, Pharm.D., FCCP, of Purdue University College of Pharmacy; Khoa Anh Nguyen, Pharm.D., of the University of Florida College of Pharmacy; and Mike Dorsch, Pharm.D., MS, FCCP, FAHA, FACC, of the University of Michigan College of Pharmacy.

Through participation in the Pharmacy Systems Interoperability Work Group, ACCP helps advance efforts related to health information exchange, qualified health information networks, interoperability, and clinical data exchange. These initiatives are critical to ensuring that pharmacists have access to the timely, comprehensive patient information needed to deliver optimal care. ACCP is represented in this workgroup by Richard H. Parrish II, RPh, PhD, FCCP, who leads as the workgroup chair.

The expertise and leadership of ACCP members within PHIT workgroups demonstrate the College's ongoing commitment to advancing health information technology that supports high-quality, team-based patient care. As ACCP members continue to contribute to these important initiatives, members and other stakeholders are encouraged to explore the Pharmacy HIT Collaborative's extensive collection of resources, tools, and guidance documents available at https://pharmacyhit.org/resources/.

By contributing to the development of standards, policies, and innovative approaches to health information technology, ACCP continues to help shape the future of pharmacy practice and ensure that clinical pharmacists remain integral partners in delivering high-quality patient care.

Affinity Groups and Health Equity Programming at 2026 Annual Meeting

Join us at the Annual Meeting in Salt Lake City on Monday, October 19, from 11:00 a.m. to noon (MDT) when the DEIA Committee will host a community-building session for existing and prospective affinity groups. Affinity groups are intended to represent social identity frameworks, creating additional opportunities for interaction with ACCP members with similar self-identified personal/social traits. This session will include brief remarks by ACCP and DEIA committee leadership followed by open discussion among attendees.

The Black Diaspora and Middle Eastern and North African affinity groups will each meet during this session, and prospective groups representing other identities are invited to attend as well. Examples of groups that met at the 2025 Annual Meeting include Asian/Pacific Islander individuals; individuals with chronic illness or disability; Latino, Latina, or Latinx individuals; and LGBTQIA+ individuals. No matter how you identify, we hope you will join us to connect with others and learn about affinity groups within ACCP. Interested groups will have the opportunity to convene at roundtables to discuss formalizing their group as well as other topics of interest such as workplace challenges, desired support and resources, expectations, and shared experiences.

We hope you will also consider attending educational sessions focused on health equity for diverse populations:

One Size Does Not Fit All: Individualizing Medication and Patient Access Through Inclusive Care: Monday, October 19, 9:15-10:45 a.m. (MDT)

Health Equity PRN Focus Session—Equity in Practice: Pharmacotherapy Across Diverse Patient Populations: Monday, October 19, 3:30-5:00 p.m. (MDT)

We hope you'll join us to build new connections, help foster a more inclusive community, and learn about diverse patient populations.

National Organizations Release 2026-2027 Respiratory Virus Vaccine Recommendations

To inform evidence-based decision-making, the Vaccine Integrity Project recently released its independent 2026-2027 respiratory virus vaccine evidence review, evaluating the safety and effectiveness of vaccines for influenza, COVID-19, and respiratory syncytial virus (RSV). Drawing on hundreds of peer-reviewed studies published since its 2025 review, the assessment found that these vaccines continue to provide meaningful protection against severe illness, hospitalization, and death. The review also examined available safety data for any emerging concerns and found no new safety signals associated with currently recommended respiratory virus immunizations, further supporting their use during the upcoming respiratory virus season.

Several national medical organizations have released updated immunization recommendations for the 2026-2027 respiratory virus season, including guidance addressing influenza, COVID-19, and RSV.

The recommendations include:

- American Academy of Family Physicians (AAFP): Adult respiratory virus vaccine recommendations
- Infectious Diseases Society of America (IDSA): Recommendations for immunocompromised patients
- American College of Obstetricians and Gynecologists (ACOG): Maternal immunization recommendations
- American Academy of Pediatrics (AAP): Pediatric recommendations for COVID-19, influenza, and RSV

In addition, the CDC has released its Interim Clinical Considerations for the Use of Seasonal Influenza Vaccines in the United States for the 2026-2027 season.

Clinical pharmacists play a key role in vaccine delivery, patient education, and implementation of evidence-based immunization practices. ACCP members are encouraged to review the updated recommendations and consider their implications for patient care in their respective practice settings.

Resources

- CDC Interim Clinical Considerations for Seasonal Influenza Vaccines
- AAFP Adult Respiratory Virus Vaccine Recommendations
- IDSA Immunocompromised Patient Recommendations
- ACOG Maternal Vaccine Recommendations
- AAP Pediatric COVID-19, Influenza, and RSV Recommendations
- Vaccine Integrity Project Evidence Reviews and Interactive Evidence Database

2026 ACCP Clinical Pharmacy Challenge Competition Now Underway

The online rounds of the 2026 Clinical Pharmacy Challenge (CPC), ACCP's novel, national team competition, began September 10. Now in its second decade of competition, the CPC continues to draw widespread participation from 100 institutions representing 43 states, 1 international university, the Commonwealth of Puerto Rico, and the District of Columbia.

Click here to view the complete 2026 CPC schedule. The teams will answer items in each of the competition's 3 distinct segments:

- Trivia/Lightning
- Clinical Case
- Jeopardy-style

The item content used in each segment was developed and reviewed by an expert panel of clinical pharmacy practitioners and educators. The 2026 ACCP Clinical Pharmacy Challenge Item-Author Panel was led by its chair, Thaddeus Hellwig, Pharm.D., FASHP, FSDSHP, BCPS.

Each team member advancing to the quarterfinal round will receive a complimentary student full-meeting registration for the 2026 ACCP Annual Meeting in Salt Lake City, an ACCP gift certificate for $125, and a certificate of recognition. Quarterfinal teams will vie for a spot in the final round for a chance to win up to $1500 and the title of Clinical Pharmacy Challenge Champion.

Past winners of the Clinical Pharmacy Challenge are as follows:

- 2010 – University of Minnesota College of Pharmacy

- 2011 – Campbell University College of Pharmacy and Health Sciences
- 2012 – Northeastern University Bouvé College of Health Sciences School of Pharmacy
- 2013 – East Tennessee State University Bill Gatton College of Pharmacy
- 2014 – Purdue University College of Pharmacy
- 2015 – University of Minnesota College of Pharmacy
- 2016 – East Tennessee State University Bill Gatton College of Pharmacy
- 2017 – University of Kentucky College of Pharmacy
- 2018 – University of Rhode Island College of Pharmacy
- 2019 – University of Colorado Anschutz Medical Campus Skaggs School of Pharmacy and Pharmaceutical Sciences
- 2020 – University of Missouri Kansas City School of Pharmacy
- 2021 – University of Wisconsin - Madison School of Pharmacy
- 2022 – University of Toledo College of Pharmacy and Pharmaceutical Sciences
- 2023 – University of Missouri Kansas City School of Pharmacy
- 2024 – University of Kentucky College of Pharmacy
- 2025 – University of North Carolina Eshelman School of Pharmacy

To obtain more information on the challenge and view a listing of the teams that participated and progressed through each of the 2026 online rounds, please visit www.accp.com/stunet/index.aspx.

UPCOMING EVENTS & DEADLINES:

2026 ACCP Annual Meeting
October 17-20, 2026
Hyatt Regency Salt Lake City
Salt Palace Convention Center
Salt Lake City, Utah

ACCP PGY2 Residency and Fellowship Showcase
October 28, 2026
Virtual

SNPhA x ACCP Residency Showcase
November 10 & 12, 2026
Virtual

2026-2027 ACCP Committee Selection in Progress

Other Volunteer Opportunities Available

After reviewing more than 530 member responses to this summer's committee charge/volunteer services survey, President-Elect Toby Trujillo is impaneling ACCP's committees for the coming year. Each committee/task force will meet at the 2026 ACCP Annual Meeting. At press time, ACCP had confirmed most committee appointments. Please note that the College offers additional opportunities to get involved in other ACCP-related activities on an ongoing basis—visit ACCP - Volunteer Opportunities to view the many options available.

Call for Nominations

All nomination materials, including letters, curricula vitae or resumes, and other supporting documents, can be submitted online to ACCP. For all awards, honors, and officer/board positions, the College strongly urges the nomination of qualified individuals who identify as members of underrepresented groups in ACCP. The online nominations portal specifies the nominating materials required for each award, honor, and elective office. This portal is available at www.accp.com/membership/nominations.aspx.

DEADLINES:

Due November 30, 2026 – Nominations for the fall 2027 awards (Robert M. Elenbaas Service, C. Edwin Webb Professional Advocacy, Russell R. Miller, Clinical Practice, Education, and Excellence in DEIA awards) and the 2028 elected offices

Due February 1, 2027 – Nominees' supporting documents must be uploaded in the nominations portal for the fall 2027 awards (Robert M. Elenbaas Service, C. Edwin Webb Professional Advocacy, Russell R. Miller, Clinical Practice, Education, and Excellence in DEIA awards) and the 2028 elected offices.

Due February 15, 2027 – Nominations and supporting documents for the 2027 Parker Medal; nominations for the 2028 Therapeutic Frontiers Lecture, the 2027 "new" awards (New Investigator, New Clinical Practitioner, and New Educator), and the 2027 ACCP Fellows (FCCPs)

Due April 1, 2027 – Nominees' supporting documents must be uploaded in the nominations portal for the 2027 "new" awards (New Investigator, New Clinical Practitioner, and New Educator) and the 2028 Therapeutic Frontiers Lecture.

DESCRIPTIONS:

2028 Elected Offices: President-Elect, Regents, and ACCP Foundation Director. Nominees must be Full Members of ACCP and should have (1) achieved excellence in clinical pharmacy practice, research, or education; (2) demonstrated leadership capabilities; and (3) made prior contributions to ACCP. Current members of the Nominations Committee are ineligible. Please note that any qualifying Full Member may nominate themselves for office. **Nomination deadline: November 30, 2026**.

2027 ACCP Fellows: Fellowship is awarded in recognition of continued excellence in clinical pharmacy practice or research. Nominees must have been Full Members of ACCP for at least 5 years, must have been in practice for at least 10 years since receipt of their highest professional pharmacy degree, and must have made a sustained contribution to ACCP through activities such as presentation at College meetings; service to ACCP committees, PRNs, chapters, or publications; or election as an officer. Candidates must be nominated by any 2 Full Members other than the nominee, by any Fellow, or by any member of the Board of Regents. Current members of the Board of Regents, Foundation Board of Directors, Credentials: Fellowship Committee, or ACCP staff are ineligible for consideration. **Nomination deadline: February 15, 2027.**

2027 Paul F. Parker Medal for Distinguished Service to the Profession of Pharmacy: Recognizes an individual who has made outstanding and sustained contributions to improving or expanding the profession of pharmacy in an area of professional service—including, but not limited to, patient care, leadership, administration, finance, technology, information processing, service delivery, models of care, and advocacy. The award is not limited to pharmacists or ACCP members. Nominations must consist of a letter detailing the nominee's qualifications for this award and contributions to the profession of pharmacy; the nominee's curriculum vitae, resume, or biographical sketch as available; and a minimum of 3 letters of recommendation. At least 1 of these letters must be from an individual outside the nominee's current practice locale. Current members of the Board of Regents, Foundation Board of Directors, Parker Medal Selection Committee, or ACCP staff are ineligible. **Nomination deadline: February 15, 2027, including supporting documents**.

2027 Robert M. Elenbaas Service Award: Considered to be a lifetime achievement award, this honor is conferred only when a particularly noteworthy candidate is identified in recognition of outstanding contributions to the vitality of ACCP or to the advancement of its goals that are well above and beyond the usual devotion of resources, be it time, energy, material goods, or a combination thereof. It is expected that nominees for this award will have been serving the mission of ACCP/clinical pharmacy for at least 20 years at the time of nomination. Nominations must consist of a letter from an ACCP member detailing the nominee's qualifications for the award and contributions to the College, the nominee's curriculum vitae, and a minimum of 2 letters of recommendation from other ACCP members. At least 1 of these letters must be from an individual outside the nominee's current institute of practice. Self-nominations are not permitted. Current members of the Board of Regents, Foundation Board

of Directors, or ACCP staff are ineligible. Nomination deadline: **November 30, 2026. Supporting documents are due February 1, 2027, as noted above**.

2027 C. Edwin Webb Professional Advocacy Award: Like the Elenbaas Award, this is a lifetime achievement award. The Webb Award is given only when a particularly noteworthy candidate is identified who has made outstanding contributions to the visibility and value of clinical pharmacy in national policy, intraprofessional, and interprofessional arenas; has assembled a record of mentoring others who have gone on to assume a health professions and health policy leadership role; and is recognized as an ambassador for clinical pharmacy both within and outside the profession. It is expected that nominees for this award will have advocated for the mission of ACCP/clinical pharmacy for at least 20 years at the time of nomination. Nominations must consist of a letter from an ACCP member detailing the nominee's qualifications for this award and contributions to the College, the nominee's curriculum vitae, and a minimum of 2 letters of recommendation from either ACCP members or non-ACCP members. At least 1 of these letters must be from an individual outside the nominee's current institute of practice/place of employment. Self-nominations are not permitted. Current members of the Board of Regents, Foundation Board of Directors, or ACCP staff are ineligible. **Nomination deadline: November 30, 2026. Supporting documents are due February 1, 2027, as noted above**.

2028 Therapeutic Frontiers Lecture Award: Honors an internationally recognized scientist whose research is actively advancing the frontiers of pharmacotherapy. The recipient of this award is not required to be an ACCP member. Nominations must consist of a letter from an ACCP member to the chair of the Awards Committee detailing the nominee's qualifications for this award and their contributions to pharmacotherapy, along with the nominee's curriculum vitae. In addition to the nomination letter, a minimum of 2 and maximum of 3 letters of recommendation from other ACCP members must be submitted, for a total of no more than 4 letters overall. At least 1 of these letters must be from an ACCP member outside the nominee's current institute of practice. Self-nominations are not permitted. The chair of the Awards Committee sends a letter of acknowledgment to each member submitting a nomination. Current members of the Board of Regents, Foundation Board of Directors, Awards Committee, or ACCP staff are ineligible. **Nomination deadline: February 15, 2027. Supporting documents are due April 1, 2027, as noted above**.

2027 Russell R. Miller Award: Recognizes an ACCP member who has made outstanding contributions to the professional literature of clinical pharmacy, either as a single, landmark contribution or by sustained excellence over time. Nominations must consist of a letter from an ACCP member to the chair of the Awards Committee detailing the nominee's qualifications for this award and their contributions to the professional literature, along with the nominee's curriculum vitae. In addition to the nomination letter, a minimum of 2 and maximum of 3 letters of recommendation from other ACCP members must be submitted, for a total of no more than 4 letters overall. At least 1 of these letters must be from an ACCP member outside the nominee's current institute of practice. Self-nominations are not permitted. The chair of the Awards Committee sends a letter of acknowledgment to each member submitting a nomination. Current members of the Board of Regents, Foundation Board of Directors, Awards Committee, or ACCP staff are ineligible. **Nomination deadline: November 30, 2026. Supporting documents are due February 1, 2027, as noted above**.

2027 Clinical Practice Award: Recognizes an ACCP member who has developed an innovative clinical pharmacy service, provided innovative documentation of the impact of clinical pharmacy services, provided leadership in developing cost-effective clinical pharmacy services, or shown sustained excellence in providing clinical pharmacy services. Nominations must consist of a letter from an ACCP member to the chair of the Awards Committee detailing the nominee's qualifications for this award and their contributions to clinical pharmacy practice, along with the nominee's curriculum vitae. In addition to the nomination letter, a minimum of 2 and maximum of 3 letters of recommendation from other ACCP members must be submitted, for a total of no more than 4 letters overall. At least 1 of these letters must be from an ACCP member outside the nominee's current institute of practice. Self-nominations are not permitted. The chair of the Awards Committee sends a letter of acknowledgment to each member submitting a nomination. Current members of the Board of Regents, Foundation Board of Directors, Awards Committee, or ACCP staff are ineligible. **Nomination deadline: November 30, 2026. Supporting documents are due February 1, 2027, as noted above**.

2027 Education Award: Recognizes an ACCP member who has demonstrated excellence in the classroom or clinical training site, conducted innovative research in clinical pharmacy education, demonstrated exceptional dedication to continuing education programs, or demonstrated leadership in the development of education programs. Nominations must consist of a letter from an ACCP member to the chair of the Awards Committee detailing the nominee's qualifications for this award and their contributions to health professional education, along with the nominee's curriculum

vitae. In addition to the nomination letter, a minimum of 2 and maximum of 3 letters of recommendation from other ACCP members must be submitted, for a total of no more than 4 letters overall. At least 1 of these letters must be from an ACCP member outside the nominee's current institute of practice. Self-nominations are not permitted. The chair of the Awards Committee sends a letter of acknowledgment to each member submitting a nomination. Current members of the Board of Regents, Foundation Board of Directors, Awards Committee, or ACCP staff are ineligible. **Nomination deadline: November 30, 2026. Supporting documents are due February 1, 2027, as noted above**.

2027 Excellence in Advancement of Diversity, Health Equity, Inclusion, and Accessibility Award: Recognizes an ACCP member who has shown exceptional dedication and impact in their efforts to promote or advance diversity, health equity, inclusion, and accessibility initiatives or programs via advocacy, education, clinical practice, research, or leadership within the pharmacy profession, health care institutions, or local communities. Nominations must consist of a letter from an ACCP member to the chair of the Awards Committee detailing the nominee's qualifications for this award and their contributions to the field, along with the nominee's curriculum vitae. In addition to the nomination letter, a minimum of 2 and maximum of 3 letters of recommendation from other ACCP members must be submitted, for a total of no more than 4 letters overall. At least 1 of these letters must be from an ACCP member outside the nominee's current institute of practice. Self-nominations are not permitted. The chair of the Awards Committee sends a letter of acknowledgment to each member submitting a nomination. Current members of the Board of Regents, Foundation Board of Directors, Awards Committee, or ACCP staff are ineligible. **Nomination deadline: November 30, 2026. Supporting documents are due February 1, 2027, as noted above**.

2027 New Investigator Award: This award highlights the research program of an ACCP member who has made a major impact on an aspect of clinical pharmaceutical science. Nominees must have been a Full Member of ACCP at the time of nomination and a member at any level for at least 3 years; they must have a research program with a significant publication record having a programmatic theme or an especially noteworthy single publication; and it must have been within 6 years since completion of their terminal professional pharmacy training or degree, whichever is most recent. If an individual pursues an additional degree beyond a professional pharmacy degree or training (ie, PhD), this additional degree will not be considered a terminal degree, and the 6-year time interval will extend from completion of the terminal pharmacy training or degree. Nominations must consist of a letter from an ACCP member to the chair of the Awards Committee detailing the nominee's qualifications for this award and the significance/impact of their research program, along with the nominee's curriculum vitae. In addition to the nomination letter, a minimum of 2 and maximum of 3 letters of recommendation from other ACCP members must be submitted, for a total of no more than 4 letters overall. At least 1 of these letters must be from an ACCP member outside the nominee's current institute of practice. Self-nominations are not permitted. The chair of the Awards Committee sends a letter of acknowledgment to each member submitting a nomination. Current members of the Board of Regents, Foundation Board of Directors, Awards Committee, or ACCP staff are ineligible. **Nomination deadline: February 15, 2027. Supporting documents are due April 1, 2027, as noted above**.

2027 New Clinical Practitioner Award: This award recognizes a new clinical practitioner who has made outstanding contributions to the health of patients and/or the practice of clinical pharmacy. Nominees must have been Full Members of ACCP at the time of nomination and members at any level for at least 3 years. In addition, nominees must have completed their terminal professional pharmacy training or degree (whichever is most recent) within 6 years from the time of selection by the Board of Regents. If an individual pursues an additional degree beyond a professional pharmacy degree or training (ie, PhD), this additional degree will not be considered a terminal degree, and the 6-year time interval will extend from completion of the terminal pharmacy training or degree. Fellows of ACCP (ie, "FCCPs") are ineligible. Nominations must consist of a letter from an ACCP member to the chair of the Awards Committee detailing the nominee's qualifications for this award and the significance/impact of their clinical contributions, along with the nominee's curriculum vitae. In addition to the nomination letter, a minimum of 2 and maximum of 3 letters of recommendation from other ACCP members must be submitted, for a total of no more than 4 letters overall. At least 1 of these letters must be from an ACCP member outside the nominee's current institute of practice. Self-nominations are not permitted. The chair of the Awards Committee sends a letter of acknowledgment to each member submitting a nomination. Current members of the Board of Regents, Foundation Board of Directors, Awards Committee, or ACCP staff are ineligible. **Nomination deadline: February 15, 2027. Supporting documents are due April 1, 2027, as noted above**.

2027 New Educator Award: This award recognizes and honors a new educator for outstanding contributions to the discipline of teaching and to the education

of health care practitioners. Nominees must have been Full Members of ACCP at the time of nomination and members at any level for at least 3 years. In addition, nominees must have completed their terminal professional pharmacy training or degree (whichever is most recent) within 6 years from the time of selection by the Board of Regents. If an individual pursues an additional degree beyond a professional pharmacy degree or training (ie, PhD), this additional degree will not be considered a terminal degree, and the 6-year time interval will extend from completion of the terminal pharmacy training or degree. Fellows of ACCP (ie, "FCCPs") are ineligible. Nominations must consist of a letter from an ACCP member to the chair of the Awards Committee detailing the nominee's qualifications for this award and the significance/impact of their clinical contributions, along with the nominee's curriculum vitae. In addition to the nomination letter, a minimum of 2 and maximum of 3 letters of recommendation from other ACCP members must be submitted, for a total of no more than 4 letters overall. At least 1 of these letters must be from an ACCP member outside the nominee's current institute of practice. Self-nominations are not permitted. The chair of the Awards Committee sends a letter of acknowledgment to each member submitting a nomination. Current members of the Board of Regents, Foundation Board of Directors, Awards Committee, or ACCP staff are ineligible. **Nomination deadline: February 15, 2027. Supporting documents are due April 1, 2027, as noted above**.

Member Recruiters

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

Alexander Aubin
Jacquelyn Bainbridge
Yamir Chaaban Maldonado
Larry Danziger
Karly Erickson
Sara Gaines
Leslie Hamilton
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Kristin Lutek
Aimon Miranda
Pragya Narahari
Lavinia Salama
Anna Sholties
Genevieve Smith
Muller Terblanche
Kimberly Terry
Roxanne Thacker

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Title: Clinical Pharmacist - Specialty Pharmacy
Employer: Penn State Health
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Title: Clinical Pharmacist Specialist – PICU
Employer: Akron Children's Hospital
Location: Akron, Ohio
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Title: Clinical Pharmacist (Full time/Locum) BERMUDA
Employer: Bermuda Hospitals Board
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Employer: Mount Sinai Health System
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Employer: WellSpan Health
Location: York, Pennsylvania

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