ACCP Members Provide Leadership to USP Information Expert Committees

Opportunity Still Knocking for Service as Members on Expert Committees

Four ACCP members will serve as chairs of some of the newly established “Information Expert Committees” of the United States Pharmacopeia (USP) as part of the implementation of the new Medicare Part D prescription drug benefit. Based on a combination of recommendations and self-nominations, these clinical pharmacy practitioners will provide leadership and expertise in the ongoing evaluation of information and standards of care as they relate to Medicare prescription drug plan (PDF) formularies and programs. The members are:

• Karim A. Calis, Pharm.D., M.P.H. — Endocrinology Expert Committee
• Joseph T. Hanlon, Pharm.D., M.S., BCPS — Special Populations/Clinical Pharmacology Expert Committee
• Amy H. Schwartz, Pharm.D., BCPS — Psychiatry Expert Committee
• Sarah Spinler, Pharm.D., FCCP — Cardiovascular Expert Committee

Opportunities still exist for other ACCP members to serve as members of the expert committees. On November 1, the elected chairs of the Information Expert Committees will convene at USP headquarters to populate the expert committees. They will select members from a portfolio of candidates that have been nominated and/or have submitted their credentials for consideration. Applications will be accepted until October 20. The online application is found at: http://www.usp.org/EN/aboutUSP/governance/candidateApplication2005-2010.doc.

For additional information about USP visit www.usp.org.

Minisabbaticals Help Members Develop New Practice and Research Skills

Through their Minisabbatical programs, six of the College’s PRNs have opportunities for their members to gain new practice or research skills that will help them develop new clinical services or expand their research capabilities. The following Minisabbaticals were awarded in 2005:

Cardiology—The Cardiology PRN provided two minisabbaticals this year. Snehal Bhatt, Pharm.D., BCPS, Assistant Professor at the Massachusetts College of Pharmacy, will be working with William Dager, Pharm.D., at the University of California-Davis to gain firsthand knowledge and experience in the creation, justification, and clinical practice of a pharmacist-driven inpatient antithrombosis management service. In the second program, Kevin Garey, Pharm.D., Assistant Professor at the University of Houston, will participate in a training program offered by the Center for Biofilm Engineering at Montana State University. Dr. Garey will incorporate techniques to characterize biofilm structure learned during the minisabbatical into his research on the prevention and treatment of cardiovascular surgical site infections following coronary artery bypass graft or replacement surgery.

Central Nervous System—Two CNS Minisabbaticals were awarded to Kelly Lee, Pharm.D., BCPP, Assistant Professor at Loma Linda University School of Pharmacy, and Richard Silvia, Pharm.D., BCPP, Assistant Professor at the Massachusetts College of Pharmacy. During her program, Dr. Lee will work with Karen Hudmon, Dr.P.H., in the Department of Epidemiology and Public Health at Yale University to develop her skills in health survey research. Dr. Lee’s focus during the program will be to develop and implement a survey that assesses the attitudes of Latinos toward antidepressant medications and psychosocial treatment for depression. Dr. Silvia’s minisabbatical will be mentored by John Markowitz, Pharm.D., BCPP, at the Medical University of South Carolina. There, Dr. Silvia will learn how to perform the polymerase chain reaction (PCR) technique and genotype patients based on PCR results. His goal is to apply this technique in his own research to determine which patients are more susceptible to the metabolic adverse effects of antipsychotic medications.

Hematology/Oncology—Cindy O’Bryant, Pharm.D., BCOP, Assistant Professor with the University of Colorado and Clinical Oncology Pharmacy Specialist at the University of Colorado Cancer Center has been awarded the 2005 Hematology/Oncology Minisabbatical. Dr. O’Bryant’s minisabbatical will be mentored by S. Gail Eckhardt, M.D., in the University of Colorado Health Science Center Division of Oncology. She will develop skills in western analysis of molecular markers that predict response to chemotherapeutic agents.

(continued on page 2)
**Infectious Diseases**—The 2005 Infectious Diseases Minisabbatical was awarded to Joe Kishel, Pharm.D., BCPS, Infectious Diseases Clinical Pharmacy Specialist at Milton S. Hershey Medical Center and Penn State College of Medicine in Hershey, PA. He expects the minisabbatical experience to enhance his own clinical pharmacokinetic consult service by working in the services developed by Drs. Thomas Lodise and Ben Lomaestro at the Albany VA Medical Center and Albany Medical Center, respectively.

**Nephrology**—Michael Bentley, Pharm.D., an Assistant Professor at the Virginia Commonwealth University School of Pharmacy and Clinical Pharmacist at Carilion Roanoke Memorial Hospital, has been awarded the 2005 Nephrology Minisabbatical. During his program, Dr. Bentley will work with Bruce Mueller, Pharm.D., FCCP, BCPS, at the University of Michigan to develop and evaluate a protocol to minimize the acid-base and electrolyte disturbances commonly seen in patients during continuous renal replacement therapy.

**Pain Management**—As part of his Pain Management Minisabbatical, Rob Hutchison, Pharm.D., Pain Management Clinical Specialist at Presbyterian Hospital Dallas, will work in the laboratory of Mary Meagher, Ph.D., in the Department of Psychology at Texas A&M University. His goal is to enhance his understanding of how stress and emotion alter pain reactivity and perception, as well as the neural substrates of affective pain modulation.

Learn more about these PRN Minisabbaticals, administered through the ACCP Research Institute, at [http://www.accp.com/frontiers/research.php#indev](http://www.accp.com/frontiers/research.php#indev).

**ACCP to Introduce Education and Teaching Book this Month**

Now in press, ACCP’s book *Re-visioning Professional Education: An Orientation to Teaching* presents educational principles that describe how learning takes place and offers a vision for the type of education required to prepare practitioners for providing pharmaceutical care. Available to order now for shipment in mid-October, the book is designed for both new and experienced clinical faculty and preceptors. Author Thomas D. Zlatic, PhD, Professor of English and Director of the Writing Center at St. Louis College of Pharmacy, St. Louis, MO, invites readers to take instructional approaches beyond conveyance of information and to embrace a philosophy, style, and manner of teaching that leads students to master the general and professional abilities necessary for competent pharmacy practice.

Dr. Zlatic discusses the nature of teaching, addressing the premise that teaching, as a profession, is based on fiducial or covenantal relationships. He makes a strong case for clinical educators promoting an active learning that prepares practitioners to provide pharmaceutical care in all its dimensions, including knowledge, skills, attitudes, and values. He presents rationales for incorporating higher order thinking into the pharmacy curriculum and offers strategies for active learning to motivate students to attain educational goals related to the mission of pharmacy practice.

Chapter topics include defining and teaching critical thinking within professional contexts, devising active learning strategies that help students to practice professional abilities, using assessment to structure learning, and employing writing to learn methodologies within professional courses and practice experiences. Although he states in the book’s preface that *Re-visioning Professional Education* is more an orientation to pharmacy education than a “how-to” book, Dr. Zlatic nonetheless presents a wealth of practical teaching tips throughout the book, in addition to addressing the philosophical basis of teaching excellence.

Dr. Zlatic summarizes his proposal for pharmacy education in his preface: “The recommendation is to begin and end the educational process with ability outcomes: to identify what graduates must be able to do as a result of their education, to provide opportunities to practice those abilities, to establish criteria by which it can be determined how well students are performing the abilities, and to provide criteria-based assessment feedback so that students can improve.”

To order *Re-visioning Professional Education: An Orientation to Teaching*, contact ACCP at (816) 531-2177, or order through the online bookstore at ACCP’s Web site: [www.accp.com](http://www.accp.com). The ACCP member price is $29.95; the nonmember price is $34.95. Please use promotional code BR1005A when placing your order.

**BPS Approves Professional Development Program for BCOP Recertification**

**Program Phase-in Set for 2005–2006**

The Board of Pharmaceutical Specialties (BPS) has approved a professional development program that can be used by Board Certified Oncology Pharmacists (BCOPs) as an alternative to the written recertification examination. The program will be offered by the American College of Clinical Pharmacy (ACCP) in conjunction with the American Society of Health-System Pharmacists (ASHP) and the Hematology/Oncology Pharmacy Association (HOPA). ACCP, as the official provider approved by BPS, will take the lead in providing program information as it becomes available, and will record and report recertification credit earned in this program directly to BPS.

The professional development program consists of three components, which will be phased in during 2005 and 2006 to provide those BCOPs who are due to recertify by December 31, 2006, the opportunity to earn the required number of hours. The three components of the program are the Oncology Pharmacy Preparatory Review Course, the BCOP Recertification Home Study Syllabus, and the Oncology Pharmacy Specialty Sessions. Each component includes a Web-based self-assessment test. Each component will be priced separately. BCOPs may select from among these components, each of which will be available annually, to earn the required number of hours during their recertification cycles.

(continued on page 3)
The Oncology Pharmacy Preparatory Review Course must be successfully completed at least once during the cycle, and no more than three times during the cycle. Each program component is described below.

The Oncology Pharmacy Preparatory Review Course

The Oncology Pharmacy Preparatory Review Course will be offered annually and will be available for recertification credit. The course content is based on the BPS domains and related tasks and knowledge statements. BCOPs who take the course and successfully complete the Web-based self-assessment examination by the established deadline will earn an estimated 20 hours of recertification credit. Actual hours available through the course may vary from year to year, based upon the course content and structure. For example, 29.0 hours of recertification credit are available for successful completion of the 2005 course (see description below). BCOPs will be required to successfully complete the review course at least once during their seven-year recertification period. BCOPs may take the course for recertification credit no more than three times during the recertification period.

The 2005 course will be available for recertification credit beginning October 10, 2005. The course was presented live in May 2005 and now is available both online and as a CD-ROM and workbook package.1 Both formats include a Web-based self-assessment test. BCOPs who take the course and successfully complete the self-assessment test will earn 29.0 hours of recertification credit. The Web-based self-assessment test must be submitted by January 31, 2006, to be eligible to receive recertification credit. Registration for the 2005 Oncology Pharmacy Preparatory Review Course for recertification opened on October 10, 2005. To order the online course or the CD-ROM and workbook package, visit the ACCP Web site at http://www.accp.com/op_05wr.php, or call ACCP at (816) 531-2177.

In 2006, the live Review Course is tentatively scheduled for May 4–6, 2006. The site has not yet been determined. Complete registration information for the course will be available in February 2006. Following the presentation of the live course, the course content will be made available in both an online version and a CD-ROM and workbook package. Both formats will include a Web-based self-assessment test, which must be submitted by November 30, 2006, to be eligible for recertification credit. The approximate availability date of these materials is July 1, 2006. Complete information on availability and pricing will be available in April 2006.

BCOP Recertification Home Study Syllabus

Available annually beginning July 2006, the BCOP Recertification Home Study Syllabus will consist of a collection of articles from the primary literature that focuses on advances across the four domains of oncology specialty practice. BCOPs who read each article included in the Home Study Syllabus and who successfully complete the Web-based self-assessment examination on the content of the articles will earn 15.0 hours of recertification credit.

The Home Study Syllabus will first become available in July 2006. The self-assessment examination must be submitted by November 30, 2006 to be eligible for recertification credit. Pricing and ordering information will be available in April 2006. Thereafter, the Home Study Syllabus will be updated annually and will be available in July of each year.

Oncology Pharmacy Specialty Sessions

The Oncology Pharmacy Specialty Sessions, live educational programming that focuses on new developments in oncology pharmacy, will be introduced in 2006. On an annual basis, BCOPs may earn an estimated 5.0 recertification hours for the live educational programming followed by a Web-based self-assessment examination. Actual hours available through live programming may vary from year to year, based on the content of the programming.

For example, in 2006 the Oncology Pharmacy Specialty Sessions are anticipated to offer 6.0 recertification hours. The live programming will first be presented during the 2006 HOPA Annual Meeting, and will be repeated at the 2006 ACCP Annual Meeting and the 2006 ASHP Midyear Clinical Meeting. BCOPs who attend the programming at any of these meetings will be eligible to earn an estimated 6.0 hours of recertification credit upon successful completion of the Web-based self-assessment examination. Because the content of the education programming will be the same at each of the three meetings, BCOPs who attend more than one meeting will be eligible to earn only an estimated 6.0 hours of recertification credit upon passing the Web-based self-assessment examination.

The Oncology Pharmacy Specialty Sessions will be updated annually. Information about the Oncology Pharmacy Specialty Sessions to be offered in 2006 will be available in spring 2006.

Program Implementation Schedule

The components of the professional development program will be introduced during the remainder of 2005 and throughout 2006, to provide BCOPs who are due to recertify by 12/31/06 the opportunity to earn sufficient recertification hours to satisfy the requirement established by the Board of (continued on page 4)
Pharmaceutical Specialties (BPS), the certifying agency. The program credit requirements for recertification as established by BPS will be phased in over the next several years. The following grid presents the phase-in schedule, as well as the recertification credit hours to be made available, by year, for each component of the program. BCOPs may select from among these components, each of which will be available annually, to earn the required number of hours during their recertification cycles. The Oncology Pharmacy Preparatory Review Course must be successfully completed at least one time during the cycle, and no more than three times during the cycle.

Additional Information to be Released as Available
ACCP is the official provider approved by BPS, and will provide more information about the program as it becomes available, in cooperation with ASHP and HOPA. As additional information becomes available about each component of the professional development program for recertification of Board Certified Oncology Pharmacists, it will be posted on the Web sites of ACCP, ASHP, and HOPA, and will be disseminated through other routine communications from the three organizations, such as newsletter articles and broadcast e-mails. ACCP’s contact person for the recertification program is Dawn Cook, Education and Meetings Coordinator, (816) 531-2177; dcook@accp.com.

Washington Report
C. Edwin Webb, Pharm.D., M.P.H.
Director, Government and Professional Affairs

Primary Health Care Policy Fellowship—A Unique Opportunity

[Editor’s Note: Nicole Culhane, Pharm.D., BCPS, is associate professor of pharmacy practice at Wilkes University—Nesbitt College of Pharmacy and Nursing. Dr. Culhane was nominated by ACCP for participation in the 2005 Department of Health and Human Services Primary Health Care Policy Fellowship Program (see program description at the conclusion of the column). She completed her fellowship experience earlier this year.] Reflections from my time as a DHHS Primary Health Care Policy Fellow
Nicole Culhane, Pharm.D., BCPS
The Department of Health and Human Services Primary Health Care Policy Fellowship is designed to provide a group of primary care professionals from across the United States a better understanding of the legislative process, health care policy development, and the inner-workings of DHHS and the 11 agencies within DHHS. The ultimate goal of this experience is to train and empower this group of primary care professionals to affect change in health care and health care policy within their discipline and across disciplines at the local, state and national level. The 2005 Primary Health Care Policy Fellowship class consisted of 35 primary care professionals from multiple disciplines including pharmacy, medicine, nursing, and dentistry.

As I reflect on the months from January through June, one word clearly stands out above all others and that is OPPORTUNITY. The opportunity to work with and learn from a diverse group of dedicated and motivated health care professionals is an opportunity unlike any other I have experienced in my career thus far. During the fellowship we shared our personal experiences and challenges within our various professions as it related to the inherent problems within our fragmented health care system. Each one of us brought a different level of experience, expertise, and knowledge to the table that further enhanced the experience. A highlight of the fellowship was the final small-group project. Within this larger group of professionals, seven smaller policy groups were formed. My policy group, consisting of a pharmacist, geriatrician, gerontologist, and family physician, focused its policy work on Medicare Part D legislation, namely exclusion of benzodiazepines. In addition to six months of examining federal legislation and policy development, our team reviewed pertinent literature regarding the implementation of Medicare Part D and the potential consequences of excluding benzodiazepines from coverage. Our policy paper underwent two peer review processes and was presented to an upper level administrator within DHHS. I will share the policy paper with the membership as a poster presentation at the upcoming ACCP meeting.

The opportunity to learn about our federal government and to gain a better understanding and appreciation for the legislative process was a tremendous learning experience. Until recently my knowledge and understanding of DHHS, its functions and complexities, were somewhat limited. Now I feel much more educated about the various agencies within DHHS and their individual roles within our health care system and the processes by which I can effect change.

The opportunity to meet, network, and form professional relationships with individuals in the fellowship group and federal government that will last well beyond the 6-month fellowship is an opportunity that cannot be quantified. Last but not least is the opportunity to reaffirm that together we can make a difference in health care policy and the lives of our patients, but it will take perseverance, dedication, commitment, and most importantly, time. I would like to thank ACCP for supporting me during this endeavor, and for this amazing opportunity.

Primary Health Care Policy Fellowship - Program Description
Begun in 1991 and sponsored by the Department of Health and Human Services (DHHS) and coordinated by the Bureau of Health Professions (BHPs) of the Health Resources and Services Administration (HRSA), the PHCPF provides a 6-month intensive curriculum, including 4 weeks of on-site training in Washington, DC, in the development and implementation of primary care policy, programs, and legislation. The goal of the fellowship is to provide specialized training and experience to a select group of individuals engaged

(continued on page 5)
What people do is
Since
Subordinate refers to
Only the
Since you cannot watch people
People need the help of
If people can count on you to
don't know how employees will accomplish tasks, which may
you might know how you would complete projects but you
didn't respond to everything someone does, your response
to any one task makes it more important. Are you sure that a

Leadership Development: Praise Good Work—Right?

(Ed. Note: This is the third in a series of columns that began in
the August ACCP Report and are adapted from management
and leadership articles written by LeaderPoint's Jon Hope.
LeaderPoint is the organization with which ACCP partners to
provide the Leadership Experience. August's column made the
point that “With great management [leadership], people know
where they're going, what's important, and how they can make
a difference. People have direction, focus, and commitment.”
The September installment emphasized that to be successful we
must focus on our development as a person, a specialist, and a
professional. You needn't have “manager” as part of your
formal title to benefit from this series or from the concepts
developed in the Leadership Experience. We hope you are
enjoying and benefiting from these columns.)

It's a good idea to tell people that they've done a good job—
right? No, it's not a good idea despite what you may have been
told. Why not? There are a number of reasons, but here are a few.

Doing it puts focus on means not ends. What people do is
always a means to some end. Celebrate success but don't tell
people they did a good job. Management needs to focus on the end.

It takes evaluation away from the individual. Only the
individual really knows if he or she has done everything
possible to help accomplish important ends. If you tell
employees they've done a good job, they don't have to
shoulder the burden of commitment.

It says the boss determines how work should be done. Sure,
you might know how you would complete projects but you
don't know how employees will accomplish tasks, which may
not be the way you would do them. Telling someone how to do
something is not as effective as allowing her to figure it out for herself.

It says one contribution is more important than others. Since
you can't respond to everything someone does, your response
to any one task makes it more important. Are you sure that a

single accomplishment is more important than the others that
you didn't praise?

The boss really doesn't know. Since you cannot watch people
all the time, do you know who helped and who made the
outcome possible? Probably not.

It diminishes power of the group. People need the help of peers to interact and get things done. If you step in, they lose
that synergy.

It makes the job smaller. If people can count on you to
evaluate the outcomes they accomplish, their jobs are less
likely to have the components of planning, decision, ownership,
problem-solving, and networking. Small jobs are doing things
that the boss likes. Big jobs are better.

It subordinates the human being. Subordinate refers to
authority but when you make jobs small, the motivation of a
person is subordinated to please the boss.

All of this can be applied to individual performance
evaluations. It has been said that performance evaluation and
developmental planning should not be conducted at the same
time. Unfortunately, they usually are.

No one ever accomplishes anything truly by themselves.
They always depend on others. Most bosses try to establish a
system in which people can work together to achieve what no
individual can accomplish alone. The problem is when the boss
chips away at the cooperative system, as in telling some team
members how good a job they did.

Some people want recognition, but individual praise is not
the job of the manager. Because recognition comes with
celebrations of success, bosses should find incidents of group
success and celebrate them.

Compare a time when you were part of a group celebrating
what they achieved together with a time in which you received
personal recognition. Which seemed more appropriate and
meant more to you?

Too few managers focus on celebrating team achievement.

Jon W. Hope
Director of Programs
LeaderPoint
www.leaderpoint.biz.

2The next ACCP Leadership Experience, a multi-day management and
leadership development experience, will take place February 27
- March 2, 2006. For information, visit http://www.leaderpoint.biz/acp.htm.
Call for Nominations

All nominations should be sent to the indicated committee chair in care of: ACCP, 3101 Broadway, Suite 650, Kansas City, MO 64111. Additional information on award criteria may be obtained from ACCP headquarters.

2006 ACCP Fellows: Fellowship is awarded in recognition of continued excellence in clinical pharmacy practice or research. Nominees must have been a full member of ACCP for at least five years; must have been in practice for at least ten years since receipt of their highest pharmacy degree; and must have made a sustained contribution to ACCP through activities such as attendance or presentation at College meetings; service to committees, PRNs, or chapters; or election as an officer. Candidates may be nominated to the Chair of the Credentials Committee by any two Full Members other than the nominee or by any Fellow. Current members of the Board of Regents are ineligible for consideration. Nomination deadline: February 15, 2006.

2007 Officers and Regents: President-Elect, Regents, Research Institute Trustees. Nominees must be a Full Member of ACCP and should have demonstrated excellence in clinical pharmacy practice, research, or education; demonstrated leadership capabilities; and should have made prior contributions to ACCP. Current members of the Nominations Committee are ineligible. Send nominations to Chair, Nominations Committee. Nomination deadline: November 30, 2005.

2006 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, financial, technological, information processing, service delivery, models of care, and advocacy. The award is not limited to pharmacists or ACCP members. Letters of nomination should be sent to the Chair of the Parker Medal Selection Committee. All nominations must be accompanied by the nominee’s curriculum vitae, resume, or biographical sketch as available, and at least three letters of support that describe the individual’s accomplishments relative to the award criteria, at least one of which is from an individual outside the nominee’s current practice locale. Current members of the Board of Regents, Selection Committee, or ACCP staff are ineligible. Nomination deadline: February 15, 2006.

Letters of nomination for the following ACCP awards should be sent to the Chair of the Awards Committee. All nominations must be accompanied by the nominee’s curriculum vitae and a letter of support that describes the individual’s accomplishments relative to the award criteria. Additional letters of support also may be included, particularly when the curriculum vitae may not have enough relevant information for a specific award. Current members of the Board of Regents, Awards Committee, or ACCP staff are ineligible. Nomination deadline: November 30, 2005.

2006 Education Award: Recognizes an ACCP member who has shown excellence in the classroom or clinical training site, conducted innovative research in clinical pharmacy education, demonstrated exceptional dedication to clinical pharmacy continuing education, or shown leadership in the development of clinical pharmacy education programs.

2006 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 the development of cost-effective clinical pharmacy services, or shown sustained excellence in providing clinical pharmacy services.

2006 Russell R. Miller Award: Recognizes an ACCP member who has made substantial contributions to the literature of clinical pharmacy, either in the form of a single especially noteworthy contribution or sustained contributions over time.

2007 Young Investigator Award: This award will be given at the College’s 2007 Spring Forum. Its purpose is to highlight the research program of an ACCP member who has made a major impact in an aspect of clinical pharmaceutical science. Nominees must have been a member of ACCP for more than three years; must be less than six years since completion of their terminal training or degree, whichever is most recent; and must have a research program with a significant publication record having a programmatic theme, or an especially noteworthy single publication. Fellows of ACCP (i.e., “FCCP”) are not eligible. The award recipient will present a lecture at the College’s 2007 Spring Forum based on his or her work.

2007 Therapeutic Frontiers Lecture: Honors an internationally recognized scientist whose research is actively advancing the frontiers of pharmacotherapy. Recipients need not be ACCP members.

Service Award: Given 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 the usual devotion of time, energy, or material goods.
Pharmacotherapy Pearls

Annual Call for Pharmacotherapy Reviewers

Wendy R. Cramer, B.S., FASCUP
Richard T. Scheife, Pharm.D., FCCP

The value of the academic reviewer in all quality bioscience publications cannot be overstated. Only someone who is actively involved in and has a passion for clinical practice or research can accurately assess the scientific rigor and impact of a given manuscript submitted for publication. So, how does one make the leap from an impassioned pharmacy clinician or researcher to that of an academic reviewer?

As luck would have it, we will be conducting a seminar titled “How to Be a 5-Star Reviewer” at the ACCP Annual Meeting in San Francisco. The seminar will be held on Tuesday, October 25, 2005, from 1:15 to 3:15 p.m. in Imperial Ballroom A of the San Francisco Hilton (0.2 CEUs will be provided). You will learn the answers to age-old questions that should concern every great reviewer: what is the purpose of peer review and what it will never catch; what is the function of reviewers; what are the journal’s responsibilities to reviewers; and what are reviewers’ responsibilities to the journal? Ample time will be available to answer all of your specific questions.

If you would like to become a reviewer, there are two easy ways to accomplish this. One is to attend our seminar, bring a business card (or equivalent) with your name, mailing address, phone and fax numbers, e-mail address, and your areas of expertise (be as specific as possible). The other is to contact us (editor@ppijournal.org) and state “new reviewer” in the subject line. We welcome reviewers in every area of expertise; however, currently the practice areas of particular need are ambulatory care topics (e.g., anticoagulation, diabetes, lipids), psychiatry, drug information, and acute conditions.

The newest book in ACCP’s Pharmacotherapy Self-Assessment Program, Chronic Illnesses, is the first of two PSAP-V books to focus solely on disease states affecting ambulatory populations. The care of a patient with diabetes is divided between a chapter on contemporary diabetic care and a chapter on the management of diabetic complications. Various common neurologic illnesses are addressed, including headache, chronic pain control, seizure disorders, and sleep disorders. Thromboembolic diseases and rheumatologic diseases are addressed through the eyes of experienced practitioners. The first-ever PSAP chapter on Dermatology also makes its debut.

Chronic Illnesses, which includes three modules, will be released October 17 and is the eighth book in the 11-book PSAP series. The book is available in both print and online formats. 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 20.5 hours of continuing pharmacy education credit. For more information, visit http://www.accp.com/strpsap5.php.

Other recently released books in the PSAP-V series include Cardiology, Health Care Stakeholders, Psychiatry, Geriatrics and Special Populations, the Science and Practice of Pharmacotherapy, Infectious Diseases, and Gastroenterology and Nutrition. Future releases will include Pediatrics; Hematology and Oncology; and Critical Care and Transplantation. Each of the three 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 covered. PSAP is priced as follows. Shipping charges will apply.

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<tr>
<th>PSAP-V Single Books</th>
<th>Member Price</th>
<th>Nonmember Price</th>
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<tr>
<td>Hardcopy</td>
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For specific information pertaining to release dates of future books, projected continuing education credits, and Accreditation Council for Pharmacy Education (ACPE) program numbers for each book, visit http://www.accp.com/strpsap5.php, where you can quickly and conveniently place your order through the online bookstore. Use code BR1005 when ordering PSAP-V.

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

For more book titles available from ACCP, go to http://www.accp.com/bookstore.php
Plan now to participate in the eleventh ACCP Leadership Experience. This is an intense, 3 ½ day course that uses both didactic and experiential learning methods. Participants are provided the opportunity to integrate a comprehensive, systematic management and leadership model into their daily personal and professional work.

- Recognize the difference between management and leadership and how they should be applied.
- Develop an understanding of the economic environment in which healthcare operates and the necessary focus of management in that environment.
- Apply the initial elements of strategic planning to a real world situation.
- Understand the concept of mind-sets in a professional capacity.
- Discuss the different mind-sets required for pharmacy and leadership.
- Develop a plan for improving your professional leadership and management skills.
- Identify and correct dysfunctional group dynamics.
- Identify and remove barriers that prevent people from focusing on the work.

Look at what some past ACCP participants have said about The Leadership Experience:

- “This experience provides a different perspective ... from what I have been taught before. This has been a wonderful experience.”
- “This is by far the most valuable experience of my career.”
- “I really feel that I will be much more effective than I was before.”
- “The combination of the simulation with the clear concise discussions of the issues being experienced ... made this session a once-in-a-lifetime experience.”
- “This has also made me think critically about the management issues and methods that occur within institutions.”

Session enrollment is limited to 24 participants. For more information, visit http://www.leaderpoint.biz/accp.htm.
(continued from page 8)

Aimee L. Solo
Delphina St. Hill
Elizabeth A. Stone
Scott A. Sumners
Henry Y. Tang
Meredith B. Toma
Joanna L. Tracy
Joanne B. Trainer
Ashley N. Webb
Russell Wells
William R. Wilkins
Erin R. Williams-Edwards
Heidemarie Windham
Rebecca J. Wolf

Jane Wong
Lovelle M. Yano
Nagham G. Yousif
Kathy Zaiken
Jennifer K. Zellers

The following individuals recently advanced from Associate to Full Member:

Nancy C. Brahm
Amy Chiu
Jennifer Hardman
Dorie W. Hoody

Lori Kuhmann
Dan V. Manning
Lea Anne O’Brien
Bonnie K. Portley
Nancy G. Thompson

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

Rita R. Alloway
Melissa M. Blair
Timothy Bosinski
Jennifer D. Calhoun

James J. Garnick
Michael P. Gulseth
Kenneth C. Jackson
Sean M. Jeffery
Kenneth Kenyon
Krista A. King
Elizabeth Michalets
Doug Parr
Emilio Perez
Charles F. Seifert
Suzanne M. Tschida
Julie D. Wright
Drug Information Clinical Pharmacy Specialist

Kaiser Permanente is one of the nation’s largest privately sponsored health care delivery systems. The Colorado region has an exciting opportunity for a pharmacy clinician in drug information. The successful candidate will participate in the planning and implementation of region-wide programs to optimize drug therapy outcomes in this progressive managed care setting. Opportunities are available for educating pharmacy students/residents. Research participation is encouraged.

The pharmacy department in the Colorado Region of Kaiser Permanente employs more than 600 individuals, including more than 100 clinical pharmacy specialists and clinical pharmacists in clinical practice areas such as primary care, infectious diseases, mental health, anticoagulation, cardiac risk, nephrology, endocrinology, cardiology, asthma, palliative care, oncology, drug information, home care, pharmacy call center, and international travel.

Qualified applicants must possess a doctor of pharmacy degree with a residency in drug information. Eligibility for pharmacy licensure in Colorado is necessary.

Kaiser Permanente offers an excellent salary and benefits package. Support for continuing education, board certification, and professional memberships are included. Qualified applicants should send a letter of interest, curriculum vitae, and names of three individuals who may be contacted for reference to:

Caroline Kicklighter, Pharm.D., BCPS, CDE  
Clinical Pharmacy Manager  
Kaiser Permanente Colorado Region  
16601 East Centretech Parkway  
Aurora CO 80011  
Telephone: (303) 739-3687  
E-mail: caroline.e.kicklighters@kp.org

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KAISER PERMANENTE

http://kaiserpermanentejobs.org
Clinical Pharmacists

Children’s Medical Center Dallas

Children’s Medical Center Dallas is the Southwest’s leading health care facility specializing in diseases and disorders in children from birth to age 18. A private, not-for-profit hospital, Children’s is licensed for 406 beds. It is the only pediatric hospital in Texas (and one of only 14 in the nation) to be designated a Level 1 Trauma Center. A comprehensive benefits package is available. We are seeking three clinical pharmacists in the following areas:

Emergency Room
• Responsible for providing clinical pharmacy services in a pediatric emergency room including trauma and code response, medication history documentation, medication teaching for patients and families, and review of appropriateness of medications. Previous pediatric hospital experience preferred. Pediatric Advanced Life Support (PALS) training and Texas licensure required. Hours: 9:00 p.m. – 7:00 a.m.; 7 consecutive days on duty followed by 7 days off.

Psychiatry
• Responsible for providing clinical pharmacy services for both inpatients and outpatients. Requires experience with pediatric or adult psychotropic medications and advanced training in psychiatric pharmacy. Candidates with advanced training will be eligible for a Senior Clinical Pharmacist position. Previous experience and Texas licensure required.

Central Pharmacy
• Responsible for filling prescribed medications and other pharmacy services as appropriate; monitoring and supervising technicians; maintaining drug inventory and supplies; and ensuring security of narcotics. Previous hospital experience preferred and Texas licensure required. Hours: night position involving 7 consecutive days on duty followed by 7 days off.

To apply for this position or to learn more about career opportunities at Children’s Dallas, visit www.childrens.com, or contact:

Phyllis Levy-Mitchell
1935 Motor St.
Dallas TX  75235
Telephone: (214) 456-8933
E-mail: Phyllis.mitchell@childrens.com

EOE
Assistant Dean for Experiential Education

Skaggs School of Pharmacy and Pharmaceutical Sciences
University of California, San Diego

The University of California, San Diego, Skaggs School of Pharmacy and Pharmaceutical Sciences (SSPPS) (http://pharmacy.ucsd.edu) is recruiting for an Assistant Dean for Experiential Education. This individual will be responsible for ongoing development, management, and coordination of the experiential education program. She or he will also be expected to teach and precept students in a practice area that reflects the individual’s previous pharmacy practice experiences and training.

Qualified candidates must have a California pharmacist license (or be eligible for licensure), a doctorate or other appropriate professional degree, demonstrated excellence in interpersonal communications skills, experience and demonstrated competence in teaching, a record of creativity, and promise for academic advancement.

Review of applications will begin November 1, 2005, and will continue until the position is filled. Candidates are invited to submit a detailed curriculum vitae; a summary of teaching experience, clinical practice and creative activity; and the names and contact information for at least three references to:

Chair, Search Committee for Assistant Dean
c/o Cynthia Barlow
Skaggs School of Pharmacy and Pharmaceutical Sciences
MC 0657
University of California, San Diego
9500 Gilman Drive,
La Jolla CA 92093-0657,
E-mail: cbarlow@ucsd.edu

Please reference advertisement #ACCPSPPS

UCSD is an Equal Opportunity Affirmative Action Employer committed to excellence through diversity.
Faculty Leadership Team

East Tennessee State University College of Pharmacy

East Tennessee State University, an education- and research-intensive academic health center, invites applications and nominations for the leadership team to guide its newly approved College of Pharmacy. The College, which will enroll its first students in Fall 2006, will develop from a strong tradition of community-based, interprofessional programs across the Health Sciences Division. Additional information can be found at www.etsu.edu/pharmacy.

Associate Dean for Academic Affairs. Responsibilities include oversight of academic program development and administration, academic standards and curriculum, faculty development, and coordination of assessment and accreditation activities. Minimum qualifications include an earned doctorate (Ph.D., Pharm.D., or equivalent degree), experience in pharmacy education, and qualifications sufficient to merit a tenured appointment at the rank of associate or full professor.

Assistant/Associate Dean for Student Affairs. Responsibilities include student recruitment, admissions, records, registration, progression, activities, counseling, and advising, as well as program planning. Teaching responsibilities and academic rank will be commensurate with the successful candidate’s qualifications and academic area of expertise. Minimum qualifications include an earned doctorate (Ph.D., Pharm.D., Ed.D., or equivalent degree) or a significant history of pharmacy practice and professional accomplishments.

Chair of the Department of Pharmacy Practice. This individual will have demonstrated creativity and the ability to develop a collegial environment that fosters collaboration. Responsibilities include providing vision and leadership for the department; recruitment, retention, evaluation and development of faculty; and the development of collaborative efforts with external partners and health care institutions to enhance education, research and pharmacy practice. Minimum qualifications include an earned doctorate (Ph.D., Pharm.D. or equivalent degree) or an M.S. degree (with at least 18 hours in pharmacy) with a superlative history of practice accomplishments; eligibility for Tennessee pharmacist licensure; and a record sufficient to merit a tenured appointment at the rank of associate or full professor.

Chair of the Department of Pharmaceutical Sciences. This individual will have an ability to foster collaborative and interdisciplinary initiatives with the surrounding pharmaceutical, biotechnology, and medical communities. Responsibilities include providing vision and leadership for the department; recruitment, retention, evaluation and development of faculty; and development of collaborative efforts to enhance research and practice. Minimum qualifications include an earned doctorate (Ph.D., Pharm.D., or equivalent degree) in a pharmacy-related discipline and a record sufficient to merit a tenured appointment at the rank of associate or full professor.

Positions are available immediately. Review of applications will begin October 30, 2005, and will continue until the positions are filled. Faculty hired for these positions should be available immediately for consultation and must be on-site no later than June 1, 2006.

Applicants are requested to submit electronically a letter of application, curriculum vitae, and the names and contact information of three references to the Search Committee at pharmacy@etsu.edu.

East Tennessee State University is an EEO/AA employer.
Assistant Professor of Pharmacy Practice (various specialties considered)

Ferris State University

Candidates are sought for pharmacy practice faculty positions with a specialty focus in ambulatory medicine, inpatient medicine, or community practice. These positions are added in response to the expansion of the college’s doctor of pharmacy program. Responsibilities include establishment of a clinical practice site with focus in adult ambulatory medicine, inpatient medicine, or community pharmacy practice. Clerkship preceptorship and didactic teaching of doctor of pharmacy students will be required. Additionally, support of college activities and initiatives is expected, including advising of students, representing the department on college and university committees, and acting as a liaison between the college and professional organizations. The college philosophy places excellence in teaching as its first priority while encouraging involvement in scholarly activity.

Required qualifications. Candidates must possess an advanced pharmacy degree (Pharm.D. or M.S.) with postgraduate residency and/or fellowship training, or equivalent experience. All candidates must be licensed or eligible for licensure in Michigan.

Salary is commensurate with qualifications and experience. Review of applications will begin immediately and continue until the position is filled. Interested individuals should submit a cover letter, curriculum vitae, and the names and phone numbers of three current references to:

Stephen W. Durst, Pharm.D.
Associate Dean/Department Head
College of Pharmacy
220 Ferris Drive
Big Rapids MI 49307

For more information about Ferris State University, please visit our web site at http://www.ferris.edu.

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Assistant Professor, Pharmacotherapy

Southern School of Pharmacy
Mercer University
Atlanta, GA

The Department of Clinical and Administrative Sciences invites applications for a tenure-track Assistant Professor of Pharmacotherapy to begin Fall 2006.

The Southern School of Pharmacy is located on Mercer University’s Cecil B. Day Campus in Atlanta. The campus’ 335 wooded acres create a serene and secluded atmosphere despite its close proximity to downtown Atlanta. The Department of Clinical and Administrative Sciences consists of 24 full-time faculty and 5 postdoctoral residents. Atlanta provides an ideal environment for cultural and intellectual development. The school of pharmacy is dedicated to fostering personal and professional growth for each faculty member.

The applicant must possess a Pharm.D. degree from an accredited school of pharmacy and be eligible for Georgia pharmacist licensure. Fellowship training is preferred and/or specialty residency in cardiology is required. Laboratory experience in pharmacogenomics is desirable and an appropriate start-up package will be available.

Applicants should access www.mercerjobs.com to complete a brief online application. In addition, a letter of intent, curriculum vitae, and contact information for three references should be attached to the online application.

AA/EOE/ADA.