

Newsbriefs

New York State Council of Health-system Pharmacists



sponsored by the
American Society of
Health-System Pharmacists

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Announcements

Welcome Beth Israel & St. Luke's-Roosevelt Hospitals as a Platinum Corporate Member & Welcome Back Boehringer-Ingelheim as a Corporate Member!!!!

We truly appreciate your support for NYSCHP and Pharmacy. We would like to personally thank you for becoming Corporate Sponsor Members of NYSCHP. Together we can improve pharmacy and the lives of many people throughout the world - for today and tomorrow! We are looking forward to this great year ahead!!

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NYSCHP News

NYSCHP 2009 Midyear Clinical Meeting

August 2009



New York State Council of Health-system Pharmacists

Pine West Plaza, Bldg #2
Washington Ave Extension
Albany, NY 12205
(518) 456-8819

- [e-mail link](#)
- [web link](#)

About ASHP

ASHP is a 35,000-member national professional association that represents pharmacists who practice in hospitals, health maintenance organizations, long-term care facilities, home care, and other components of health care systems. ASHP is the only national organization of hospital and health-system pharmacists and has a long history of improving medication use and enhancing patient safety.

American Society of Health-System Pharmacists

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NYSCHP Calendar of Events

The 2009 Midyear Clinical Meeting will be held Downstate at LaGuardia Crowne Plaza Hotel (East Elmhurst) on September 25th, 2009 and Upstate at Turning Stone Casino Hotel (Verona) on October 20th, 2009. The topics will focus on Critical Care Pharmacotherapy. Speakers include Alla Kotlyanskaya PharmD, Bishoy Luka PharmD, Henry Cohen PharmD, Greg Kerr MD (Downstate only), Amy Dzierba PharmD, David Berlin MD (Downstate only), Michael Kraft PharmD (Downstate only), Phil Barie MD (Upstate only) and William Darko (Upstate only). Topics from each speaker are available at the NYSCHP website. Attention Students: There will be a leadership development program at both locations! Please check www.nyschp.org for more information and to register.

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Pharmacy-Based Immunization Programs

NYSCHP is offering several Pharmacy-Based Immunization Delivery Programs in conjunction with St. John's University in 2009. June 20 in Oakdale, Long Island; July 14/Aug 31/Sep 12 at St. Johns University, Queens Campus; August 8 at St. Johns University, Manhattan Campus. Applications are available on www.nyschp.org.

NYSCHP 2010 Winter Jan Keltz Memorial CE Program

The 2010 Winter Jan Keltz Memorial CE Program will be held at the High Peaks Resort in Lake Placid, New York on January 15th – 18th, 2010. Speakers and topics include: Debra B. Feinberg, RPh, JD, "Pharmacy Law Update 2010: Change & Challenges," Jeffrey Kennicutt, PharmD, "C. difficile Infectious Colitis Treatment," Liz Shlom, PharmD, "New Drugs Update 2010," Danielle Longo, PhD., "The Health Care Practitioner's Guide to Herbal Preparations and Dietary Supplements," Henry Cohen, PharmD, "PGY-2 residentsiests PhamD, "PGY2 residents," and Karina Muzykovsky, PharmD, "Pharmacotherapy for Stress Ulcer Prophylaxis and NSAID-Induced Gastropathy Prevention." Please check www.nyschp.org for more information and to register.

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2009 Antimicrobial Stewardship Program

The 2009 Antimicrobial Stewardship program will be held at the Millennium Broadway in New York, NY on November 6th – 7th, 2009. Speakers will include: Robert C. Owen, Jr., PharmD, Thomas Lodise, PharmD, Ben Lomaestro, BS, PharmD, Belinda Ostrowsky, MD, Jeffery D. Kennicutt, BS, PharmD, John Papadopoulos, BS, PharmD, FCCM, BCNSP. Please check www.nyschp.org for more information and to register.

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ASHP News

How You Can Help Ensure Health Care Reform Success for Pharmacy

ASHP is pressing Congress to expand loan forgiveness programs to pharmacists and restore funding for postgraduate year two residency programs in health care reform legislation. The two issues, along with recognition of pharmacists as non-physician providers, are the Society's top priorities in the health care debate.

Now it is time for legislators to hear how these proposals affect you. ASHP members are urged to contact their congressional representatives to ask for

Membership Reminder

8/01/09 - 9/30/09

It is that time again to RENEW YOUR MEMBERSHIP IF YOUR MEMBERSHIP EXPIRES September 30! Don't forget to renew your membership with NYSCHP. Logon to www.nyschp.org to renew, rejoin or to become a first time member! Log in the membership login section: FirstnameLastname, no space and 1st letter of first name in upper case and 1st letter of last name in upper case. Password: NYSCHP (case sensitive). Please review and update your information and change your password. Thank you for helping us to maintain the accuracy of our records.

[web link](#)

NYSCHP Midyear Clinicals

9/25/09 - 10/20/09

Critical Care Pharmacotherapy: 9/25/09 (LaGuardia Crowne Plaza, East Elmhurst, NY) and 10/20/09 (Turning Stone, Verona, NY)

2009 Annual Leaders Conference [ASHP]

10/19/09 - 10/20/09

The Westin O'Hare Chicago, Illinois

2009 Antimicrobial Stewardship Program

11/06/09 - 11/07/09

The 2009 Antimicrobial Stewardship program will be held at the Millennium Broadway in New York, New York on November 6th – 7th, 2009. Please check www.nyschp.org for more information and to register.

[web link](#)

ASHP Midyear Clinical Meeting [ASHP]

12/06/09 - 12/10/09

Venetian Resort and Sands Expo Center Las Vegas, Nevada

[web link](#)

NYSCHP 2010 Winter Jan Keltz Memorial CE

support of the Society's health care reform priorities. Sample versions of e-mails to legislators in the House and the Senate are available at the [ASHP Online Advocacy Center](#).

ASHP House of Delegates Moves Forward on Pressing Practice Issues

Health IT, Residency Training Among Issues Considered

The House of Delegates of the American Society of Health-System Pharmacists (ASHP) considered a number of vital professional issues during its 61st annual session, including the development of standards for the disposal of pharmaceutical waste, involving pharmacists in key decision-making roles in health care information systems, encouraging pharmacists to report potential medication errors, and advocating the expansion of collaborative drug therapy management (CDTM) practices. The session was held June 14 and 16 in Rosemont, Ill. in conjunction with Society's Summer Meeting.

The House of Delegates, ASHP's chief policy-making body, consists of 163 voting state delegates (a minimum of two from each state, the District of Columbia, and Puerto Rico), members of the Board of Directors, past presidents of ASHP, chairs of the Society's sections and forums, and five delegates representing the federal services.

[Read the Policy Actions.](#)

Online Resource Highlights Pharmacists' Contributions to Improve Health Care Quality

Innovative Pharmacy Services Demonstrate Opportunities to Enhance Safety, Efficiency

A new Web resource from the American Society of Health-System Pharmacists (ASHP) sheds light on the critical role that pharmacists are playing in efforts to transform the health care system and improve the quality of care for patients in hospitals and health systems.

ASHP's Web resource, www.ashp.org/qii/npp, is one of the outcomes of the Society's involvement in the National Priorities Partnership (NPP), an initiative convened by the National Quality Forum. The NPP has identified six national priorities aimed at eliminating waste, harm, and disparities in the health care system. The six national priorities are overuse, safety, care coordination, patient and family engagement, end-of-life care, and population health.

[Read more](#)

[Visit the Web resource](#)

Pharmacy News

Pharmacists Can Help Meet Joint Commission Standards

Modern Medicine (08/10/09) Scott, Aliana

The involvement of health-systems pharmacists is an essential part of healthcare facilities' efforts to ensure they meet compliance directives such as Joint Commission standards and National Patient Safety Goals. There are a number of ways pharmacists can get involved in accreditation, and choosing the role that is best for them is an important choice for pharmacists to make.

Program

1/15/10 - 1/18/10

NYSCHP 2010 Winter Jan Keltz Memorial CE Program Will be held at the High Peaks Resort in Lake Placid, New York on January 15th – 18th, 2010.

[web link](#)

Some pharmacists have found that participation on steering committees, particularly those that focus on medication management, has helped them improve hospital pharmacy programs and systems to meet and exceed regulatory compliance. However, committee work can be time consuming, so pharmacists who may have less time to offer should consider other ways to get involved, such as suggesting ways to improve medication storage or dispensing. Whichever of these efforts pharmacists choose, they need not go it alone, says ASHP director of medication use and quality improvement, Bona Benjamin, BS Pharm. According to Benjamin, both risk management and hospital quality departments are great resources for pharmacists hoping to learn how to become more involved with committees or boards responsible for implementing programs designed to meet Joint Commission standards. "Bringing any concerns, questions, or suggestions to staff meetings is another way to get involved and have your voice heard," Benjamin continues. She also recommends finding out what other members of the hospital team-- including physicians, dieticians, and members of other departments-- are doing to meet Joint Commission goals. When pharmacists collaborate with other departments programs are more successful and well-rounded, Benjamin stresses. In addition to becoming involved in implementation, pharmacists may also influence how the Joint Commission phases in a requirement or standard. The commission can provide a communications opening for pharmacists who want to have a voice throughout the accreditation process, says Rita Shane, PharmD, FASHP, director of pharmacy services Cedars-Sinai Medical Center, and assistant dean, University of California, San Francisco School of Pharmacy. In order to keep pharmacists abreast of Joint Commission activities, Shane said that Cedars-Sinai recently created a position for a compliance pharmacist, who will use tracer methodology to ensure that all compliance procedures are followed. This individual will also educate staff about standards and patients safety goals and conduct periodic audits of paperwork processes and medication management protocols. Whether or not a hospital has such a compliance pharmacist position, all pharmacists must strive to remain up-to-date with the Joint Commission. One way to achieve this goal is to attend meetings such as those of ASHP or of state groups offering update sessions. Another is to join a list serve designed to help pharmacists involve themselves in accreditation issues and become familiar with common best practices.

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Food and Drug Magnate Helps U. Build World-Class Pharmacy Facility

Salt Lake Tribune (08/10/09) Maffly, Brian

The University of Utah has broken ground on a new 150,000-square-foot pharmacy building, funded by a major donation from pharmacist and philanthropist L.S. Skaggs and family. The new building will be erected south of the College of Pharmacy's current location, which was built in 1965. Before that time, the college, which was founded in 1946, operated out of the university's women's gymnasium. Since that time, faculty and researchers associated with the pharmacy program have spread out into six buildings and four academic departments including pharmaceutical development, delivery, testing, and economics. The college currently takes on 60 new candidates for a Doctorate of Pharmacy each year. Every year, the college receives \$23 million in National Institutes of Health grants, making it one of the country's most active recipients of federal money for pharmaceutical research, second only to the University of California, San Francisco. The new structure will have enough room to house all of the college's instructional and research activities in in one place. It will be connected to the old college of pharmacy building by a four-story atrium. Collectively, the complex, which is set to be completed by December 2011, will be known as the Skaggs Pharmacy Institute.

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Acetaminophen Is Drug Most Often Associated With Liver-Failure

Deaths

FDA News Drug Daily Bulletin (07/01/09)

According to rough data from the FDA's Adverse Event Reporting System (AERS), acetaminophen is associated with more cases of liver failure in the United States than any other drug. In fact, acetaminophen-associated deaths represent almost 20 percent of all fatalities reported to the National Poison Data System. Of those deaths, approximately one out of five has been found to be unintentional, while approximately 5 percent of all unintentional acetaminophen-associated deaths occurred when the patient took more than one product containing the drug.

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H1N1 and the Cost to Hospitals

Information, Inc. (08/10/09)

With concerns about pandemic flu and the spread of H1N1 on the rise, hospitals are putting risk management strategies into action to ensure patients are seen and treated quickly to reduce the risk of spreading the virus. As a result, hospitals are designating hallways and conference rooms as locations to house suspected flu cases, and others are establishing hotlines and Web pages to keep the public and staff members informed about H1N1. Some facilities even have established periodic meetings with infection control specialists and other staff to ensure they use proper protective equipment. Additionally, hospitals have to make sure they have enough supplies, including vaccines and hand sanitizer (Nurse.com). According to a recent Modern Healthcare article, there are 105,000 ventilators in the United States, but a flu pandemic of the same proportion as the 1918 pandemic would require hospitals to have 700,000 ventilators available. To help with these additional financial burdens, the U.S. Department of Health and Human Services (HHS) issued \$350 million in federal grants, with \$260 million allocated for state, regional, and local health agencies and \$90 million for state and local hospitals. Pennsylvania received about \$14.3 million for prevention, testing, and treatment needs (Post Gazette, July 2009). HHS also is holding a contest for the most creative public service announcement for H1N1 prevention produced on YouTube through Aug. 17, with a prize of \$2,500. With costs already reaching an additional \$50 million for Manitoba's treasury, hospitals can expect their expenses to rise as they become the first line of defense against the spread of H1N1 (Winnipeg Free Press 2009).

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Pharmacy Research Shows Prescribers Miss Potentially Dangerous Drug Pairs

ScienceDaily (07/16/09)

Medication prescribers correctly identified 42.7 percent of drug combinations that have the potential to cause adverse events, according to a recent study led by University of Arizona Prof. Daniel Malone. The study included 950 prescribers who were asked to classify 14 drug combinations as "contraindicated," "may be used together with monitoring," or "no interaction." Prescribers were primarily physicians, physician's assistants, and nurse practitioners. Of the drug pairs used in the study, four were considered "contraindicated." Use of several of the contraindicated pairs, such as sildenafil (Viagra) and nitrates, could cause severe adverse events. Malone maintains that the study indicates that healthcare professional programs are not providing sufficient educational tools to ensure prescribers are aware of the potential for adverse events resulting from the use of certain drug combinations. For this reason, he recommends patients notify pharmacists of all medications they are taking in order to mitigate the risk of such adverse events.

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Hospitals Don't Make Best Use of 'Smart Pumps'

Hospitals & Health Networks (07/09) Vol. 83, No. 7, P. 17; Aston, Geri

Up to 67 percent of all hospitals use "smart" infusion pumps that retain important patient data, surveys indicate. However, most hospitals do not take full advantage of this information and are not capitalizing on the potential to improve center safety and patient outcomes. Of the centers using these pumps, nearly half examine the data stored in pump records for care improvement, according to a 2007 study by the American Society of Health-System Pharmacists (ASHP). Since the use of smart pumps became ubiquitous five years ago, the data has become much easier to view and access, particularly on pumps with wireless connectivity. But just three in 10 hospitals in the ASHP survey have pumps that instantly download data onto a wireless server. That figure is expected to rise gradually as pumps without wireless capabilities become outdated and are replaced with newer pumps, says Eric Melanson, B. Braun Medical Inc.'s director of marketing for infusion devices.

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Over 25,000 Pharmacists and Technicians Access PTCB Funded Web-Based Continuing Education Programs

Reuters (07/17/09)

The Pharmacy Technician Certification Board (PTCB) has announced that over 25,000 pharmacists and technicians have accessed two Web-based continuing education podcasts developed with the American Society of Health-System Pharmacists (ASHP). These podcasts are entitled "Pharmacy Technician Roles in Sterile IV Compounding: Challenges, Opportunities, and Competencies" and "Pharmacy Technician Certification: Trained, Tested, Trusted." The first podcast, launched in March 2009, discusses the importance of pharmacy technicians to ensure sterile IV compounding. Specifically, the podcast highlights opportunities for pharmacy technicians in sterile IV compounding as well as the impact they may have on patient safety, regulatory compliance, and efficiency. The second podcast, launched in 2008, discusses the changing role of pharmacy technicians in healthcare and an overview of pharmacy technician training, certification, and regulation.

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Pharmacotherapy of Diabetes in the Elderly

U.S. Pharmacist (07/09) Vol. 34, No. 7, P. 44

About 23 percent of U.S. patients over 60 years of age have diabetes, putting them at greater risk of accelerated aging, premature death, and disability, but the variety of available treatments allow for individualized care and optimal results. The use of sulfonylureas has been successful in lowering glucose levels, but pharmacists should ensure they are administered with a conservative initial dose and are not recommended for patients with a creatinine clearance less than 50 mL/min. Metformin is currently recommended as the initial therapy for type 2 diabetes management, particularly in overweight patients, though it carries a risk of lactic acidosis for patients with renal dysfunction. Thiazolidinediones are expensive and may be associated with cardiovascular risk, and therefore should be reserved for second- or third-line therapy for elderly diabetes patients. Insulin therapy, like many diabetes therapies, carries a risk of hypoglycemia, so pharmacists should educate patients on the warning signs and management of hypoglycemia. Other treatments include alpha-glucosidase inhibitors, DPP-4 inhibitors, incretin mimetics, pramlintide, and colesevalam. For elderly patients with diabetes, pharmacists should also attempt to manage their cardiovascular risk factors, such as hypertension and hyperlipidemia. Because falls, incontinence, depression, and other common geriatric syndromes may lead to the dangerous

use of multiple medications, pharmacists should review patients' medication profiles and educate them and their caregivers on the drugs' risks and benefits.

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