

Newsbriefs

New York State Council of Health-system Pharmacists



sponsored by the
American Society of
Health-System Pharmacists

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Announcements

In Loving Memory of Sid Schneps

In Loving Memory of Sid Schneps: NYSCHP is greatly saddened by the passing of Sid Schneps. Sid was very involved with NYSCHP. He served as both a representative of a number of different pharmaceutical companies, the last being Pfizer, and as a member of the NYSCHP REF. He received the NYSCHP Corporate Achievement Award at the 50th anniversary of the NYSCHP. Sid was a long time friend of pharmacy and NYSCHP. He will truly be missed. Donations in honor of Sid can be made to: The American Cancer Society or The American Heart Association Pfizer will be setting up a foundation in Sid's memory and that we will provide additional information as we receive it.

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NYSCHP News

The Annual National Hospital and Health-System Pharmacy Week

Ashley David This year, the annual National Hospital and Health-System

September 2009



New York State Council of Health-system Pharmacists

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Washington Ave Extension
Albany, NY 12205
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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

7272 Wisconsin Avenue
Bethesda, MD 20814
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NYSCHP Calendar of Events

Pharmacy Week will be October 18th-24th, 2009. During this week, pharmacists who work in hospital and health-system settings can be acknowledged for the invaluable contributions they make to the lives of patients and their families everyday. Pharmacists are a vital part of the healthcare team, ensuring that every patient receives the best treatment possible. Pharmacy Week can be used as a time to encourage rapport between pharmacists and other healthcare professionals. During this week, there are many activities that can be coordinated at your workplace to increase the exposure of your pharmacists and give others a broader idea of what the pharmacist's role is. For example, you can hold a "Meet and Greet" in a public area, where the pharmacists can have a presentation explaining what they do on a daily basis. At the end of this program, a question and answer session can be provided so that people can ask the pharmacist questions they may have. For more information on these activities or on Pharmacy Week in general, you can visit the ASHP website at www.ashp.org.

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Pharmacy Association Career Network

Previously, pharmacists never had to worry about competitive job searching. If one had a pharmacy degree, he or she basically had the job of their choice. However, due to the economic recession, the demand for pharmacists has been decreasing over the past few years. In an effort to make job searching easier and more convenient, NYSCHP has a direct connection with the Pharmacy Association Career Network. There are over 3,000 companies in the U.S. registered on this network, offering over 550 jobs not only to pharmacists, but also pharmacy technicians, pharmacy industry professionals, and students. The NYSCHP homepage (www.nyschp.org) features a link to the NYSCHP Career Center where employers can upload a company profile and employees can search for various job opportunities anywhere in the U.S. Uploading of resumes, receiving job alerts and posting job announcements are also available through this program. This is a great resource that NYSCHP has made available to all of its pharmacy members and by being a member of NYSCHP, you can receive **20% off all packages listed on the career center for online job advertising and recruitment needs**. For membership discount, click on: <http://www.nyschp.org/displaycommon.cfm?an=1&subarticlenbr=70>.

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NYSCHP 2009 Midyear Clinical Meeting

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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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

Membership Reminder

9/01/09 - 10/30/09

It is that time again to RENEW YOUR MEMBERSHIP IF YOUR MEMBERSHIP EXPIRES October 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.

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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 Leadership 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

Colitis Treatment," Liz Shlom, PharmD, "New Drugs Update 2010," Danielle Longo, PhD., "The Health Care Practitioner's Guide to Herbal Preparations and Dietary Supplements," Leah Crow, PharmD(PGY-2), and Karina Muzykovsky, PharmD(PGY-2), "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

Member Advocacy Still Needed during Health Care Reform Debate

In his speech to Congress and the nation, President Obama reiterated his commitment to achieving meaningful health care reform this year. He also outlined key principles and clarified some controversial elements of his vision for health care reform.

This public debate is well timed for pharmacists to weigh in. On Thursday, September 24, nearly a hundred hospital and health-system pharmacists will converge on Capitol Hill as part of ASHP's Legislative Day. During this annual event, ASHP members from across the country meet with their Senators and Congressional representatives to educate them on the vital role of pharmacists in patient care. ASHP's Principles for Health Care Reform and policy advocating for full health coverage is supportive of the approaches under consideration by Congress. This year, participants will be urging Congress to recognize pharmacists as non-physician providers, restore funding for second-year specialty residency programs, and authorize eligibility for the National Health Service Corps.

All ASHP members are urged to [contact](#) their House and Senate members to seek their support on these three issues. Nearly one thousand members contacted their Members of Congress during the August recess. However, we have reached the critical stage of the process and lawmakers still need to hear from hospital and health system pharmacists. President Obama compared this effort to the passage of Social Security in 1935 and Medicare in 1965. This opportunity does not come very often and the time for pharmacy to act is now.

New Online Tool Focuses On Improving Influenza Immunization Rates For Health Professionals

Grants Available to Study Pharmacists' Roles in Bolstering Use of Flu Vaccine

Recognizing that influenza infection in health care workers can lead to outbreaks with serious consequences for patients, the American Society of Health-System Pharmacists (ASHP) has launched an initiative for pharmacists to improve influenza immunization rates among healthcare workers. Health care workers can acquire influenza and unwittingly transmit the virus to

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](#)

patients, other health care workers, and members of their household and the community a day or two before symptoms appear.

ASHP's new online resource, www.YouCanStopTheFlu.com, was developed by a panel of pharmacist immunization experts to engage pharmacists as advocates to improve seasonal influenza immunization rates of health care workers in their health systems. The initiative is supported by a grant from CSL Biotherapies.

[Read more](#)

Pharmacy News

Cardiometabolic Disorders: The Pharmacist's Role

Modern Medicine (09/04/09) Edlin, Mari; Campbell, Maude L.

Pharmacists are integral to the proper management of cardiometabolic disorders and weight (CMD&W), through education, counseling, and dispensing. They are particularly essential to ensure patient adherence to CD&W treatment regimens. Pharmacists should therefore work with physicians to identify patients who are non-adherent. They may then be able to improve treatment compliance by minimizing daily medication doses, dose frequency, and medication costs. When working with patients to improve treatment compliance, Pennsylvania-based consultant pharmacists Alan Vogenberg RPh recommends that pharmacists "don't use jargon ... use open-ended questions, and ask patients to repeat back information to ensure they understand what has been said." For example, in the case of hypertension, pharmacists can teach patients that, despite a lack of symptoms, the disease damages blood vessels, making regular blood pressure checks extremely important. Pharmacists should also ensure patients are aware of other strategies that can be used in addition to medication to reduce hypertension and other CMD&W problems. These strategies include not smoking, maintaining an appropriate weight, regular exercise, healthy diet, limited sodium and caffeine intake, and stress reduction.

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KCKCC To Offer Medical, Dental, and Pharmacy Programs

Kansas City Kansan (09/09/09) Hoskins, Alan

Kansas City Kansas Community College (KCKCC) is scheduled to begin offering pharmacy technician courses on October 31, 2009. The pharmacy technician program at KCKCC is a comprehensive 50-hour course designed to prepare students for work as a pharmacy technician in hospitals, home infusion pharmacies, and other healthcare settings under the supervision of a registered pharmacist. Students will learn dosage calculations, I.V. flow rates, dose conversions, dispensing of prescriptions, inventory control, and billing and reimbursement. The course will also prepare students to take the national certification exam administered by the Pharmacy Technician Certification Board.

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Effect of Procalcitonin-Based Guidelines vs. Standard Guidelines on Antibiotic Use in Lower Respiratory Tract Infections

Journal of the American Medical Association (09/09/09) Vol. 302, No. 10, P. 1059; Schuetz, Philipp; Christ-Crain, Mirjam; Thomann, Robert

Researchers have found that in the management of lower respiratory tract infections, procalcitonin-based guidelines may lead to lower rates of antibiotic exposure and associated adverse events without increasing other adverse

outcomes. A total of 1,359 patients were assigned to receive antibiotics with either a procalcitonin algorithm or to standard guidelines for stopping and starting antibiotics. Compared to the standard guidelines, researchers found that patients who were assigned to the procalcitonin algorithm had an average of 5.7 days of exposure to antibiotics, compared to 8.7 days in those who were assigned the standard algorithm. They also found that 18.9 percent of patients assigned to procalcitonin-based guidelines experienced overall adverse outcomes compared to 15.4 percent of controls. In addition, the procalcitonin-based treatment group reported less frequent antibiotic-related adverse effects than the control group, 19.8 percent compared to 28.1 percent.

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Masks Key Flu Protection for Health Workers: Report

Reuters (09/03/09) Fox, Maggie

The Institute of Medicine (IOM) released on Sept. 3 a report calling for the use of N95 respirators by doctors, nurses, pharmacists, and other healthcare workers caring for patients infected with the new pandemic H1N1 (nH1N1) swine flu virus. Because scientists still do not know much about how this virus is transmitted, healthcare workers should combine the use of these respirators with hand washing, flu vaccines, and other infection-prevention measures. In its report, the IOM stated, "Healthcare organizations and workers need consistent and clear nH1N1 guidelines that can be implemented across all healthcare facilities." The U.S. Centers for Disease Control and Prevention (CDC) also recommends the use of N95 flu masks for healthcare workers treating patients with suspected H1N1. However, the IOM called on the CDC, the National Institutes of Health, and other agencies to conduct more research on flu virus transmission. In addition, the IOM report noted that healthcare workers do not wear masks, respirators, or wash their hands as much as they should, although they know they should, and only about 40 percent are vaccinated against seasonal flu each year.

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A Safer Environment

Advance for Health Information Executives (09/09) Vol. 13, No. 9, P. 33; Ligon, Kim J.

For many hospitals, medication administration is still a hands-on, time-consuming process, and the lack of interaction between nurses and pharmacists persists to the detriment of patients. Before the implementation of its automated barcode medication administration platform, DCH Regional Medical Center, based in Tuscaloosa, Ala., was attempting to transition away from its paper-based medication administration processes. Every night, the nursing staff printed and checked the medication administration record (MAR) for errors, which were communicated via phone or fax. The procedure used to correct errors was not only inefficient, but it provided many more opportunities for errors or breakdowns of communication. With its automated medication administration technology and new workflow processes firmly in place, DCH now has the statistics to prove the platform works. The hospital recorded medication accuracy rates among nursing units pre- and post-implementation. After six months, DCH found rates of accuracy comparable to what they were prior to the barcode medication administration implementation, which was pinned on major cultural changes and adjustment to new processes. After 12 months, however, the medication accuracy rates had improved tremendously, particularly in the ICU and medical/surgical units.

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Lacher To Lead Webinar Sept. 3

US Fed News (08/31/09)

On September 3, Barbara Lacher, assistant program director and associate professor of the pharmacy technician program at the North Dakota State College of Science, co-presented a webinar about the American Society of Health Systems Pharmacists (ASHP) Technician Initiative. The webinar described the initiative as a partnership between ASHP and individual state affiliates to advocate for state laws that require completion of an ASHP-accredited pharmacy technician training as well as Pharmacy Technician Certification Board certification in order to obtain state pharmacy board registration. The program is designed to ensure patient safety and improve quality of care, and ASHP is hopeful that it will also increase access to patient care services provided by pharmacists.

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Study Urges Action to Get Patients to Follow Prescriptions

Boston Globe (08/14/09) Cooney, Elizabeth

Patients who do not take their medications as prescribed may incur up to \$290 billion annually in increased medical costs, according to a report by the New England Healthcare Institute. People with chronic illnesses, such as diabetes, are less likely to take their intended medications than people who are being treated for an urgent problem. The report cited one study that found that the death rate among patients with diabetes or heart problems was around 7 percent for those who took their medication as prescribed. Among patients who did not follow their prescriptions, however, the death rate was 12 percent, and similar gaps were found among hospitalization rates. Little research has been conducted as to how this should be improved, but some studies have made several suggestions. Simplifying drug regimens may help increase compliance among patients who take multiple medications. Increased patient education regarding their diseases and medications, especially when they leave the hospital, may also help people follow their prescriptions. Lower costs and greater involvement of case managers and pharmacists may also help.

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ISMP Warns That IV Solutions Administered Post-Op Can Cause Low Sodium Levels And Death In Healthy Children

Medical News Today (08/20/09)

The Institute for Safe Medication Practices is urging healthcare workers to learn more about the signs and symptoms of low sodium levels after surgery, after two young children died from the condition. Children are at especially high risk of developing the condition, called severe postoperative hyponatremia, which can be caused by IV fluids which do not contain enough sodium and can result in severe brain swelling and death. One child had a tonsillectomy and was given an IV infusion of plain dextrose in water at too high a rate, and the resulting vomiting and seizures were thought incorrectly to be a reaction to an anti-nausea drug. Lab tests showed extremely low sodium levels and the child developed cerebral edema and died despite treatment. ISMP is recommending that hospitals establish specific procedures for postoperative IV solutions for children which stress the importance of proper saline levels to prevent hyponatremia. There should be protocols for identifying, treating, and monitoring patients with hyponatremia as well as water intoxication and inappropriate antidiuretic hormone. Doctors, nurses, and pharmacists must fully understand the nature of these conditions and of fluid and electrolyte balance in order to be able to catch any problems early enough to treat them, and consider creating a rapid response team that can be summoned by any healthcare worker to the patient's bedside.

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New Health Care Delivery Model Improves Outcomes, Saves Money

MedIndia (08/14/09)

A home-based preventive healthcare program for seniors created by the Indiana University School of Medicine, the Indiana University Center for Aging Research and the Regenstrief Institute helped reduce emergency department visits and hospital admission rates, achieve cost savings and improve the quality of life for patients with chronic conditions, according to a study published in the August issue of the Journal of the American Geriatrics Society. The Geriatric Resources for Assessment and Care of Elders' team approach to preventive care engages a nurse practitioner and social worker to perform initial assessments of a patient's entire home, including medicine and kitchen cabinets. An interdisciplinary team comprised of geriatricians, pharmacists, physical therapists, mental health social workers and community-based services liaisons develops an individualized care plan. Finally, the nurse practitioner and social worker collaborate with the primary care physician to ensure the healthcare plan meets the patient's goals and help the patient institute the plan.

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