

AR·RX

The Arkansas Pharmacist

Spring 2011

Quarterly Publication of the Arkansas Pharmacists Association



PHARMACIST,
FARMER
& FORMER
CONGRESSMAN

Marion Berry

Reflects on His Career
and Serving Arkansas

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Contents

- 2 Inside APA
- 3 From the APA President
- 5 COVER: Marion Berry Reflects On Career and Serving Arkansas
- 10 Member Spotlight: David Chu - Argenta Drug
- 11 Rx and the Law
- 12 Safety Nets
- 13 The Changing Face of Pharmacy: Women On The Rise
- 19 Medicaid Report
- 20 Colleges of Pharmacy: UAMS and Harding
- 22 APA In Pictures - April-May 2011
- 25 Notes from the Hill Retrospective
- 26 APA Academy Reports: Arkansas Academy of Health-System Pharmacists; Compounding Academy
- 29 Member Classifieds
- 30 2011 UAMS Graduates
- 31 INSERT: 2011 APA Annual Convention
- 37 2010 Bowl of Hygeia Recipients
- 38 2011 Calendar of Events
- 39 2011 District Meeting Schedule
- 40 New Board of Pharmacy Executive; New APA Staff Introductions
- 41 In Memorium
- 41 Board of Pharmacy and AAHP Board

Directory of Advertisers

- II Pace Alliance
- 4 EPIC Pharmacies, Inc.
- 9 The Law Offices of Darren O'Quinn, PLLC
- 19 Arkansas Pharmacy Support Group
- 24 Pharmacists Life Insurance Company
- 27 UAMS CE
- 28 Rx Master
- 36 Pharmacy Quality Commitment
- IV Cardinal Health

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Inside APA

IN POLITICS, YOU'RE EITHER "AT THE TABLE" OR "ON THE PLATE."

In regards to the recently concluded 88th General Assembly, pharmacy fared very well. Legislative sponsors filed, ran and passed six bills on behalf of pharmacy. I have covered those pieces of legislation and the legislators who championed them for us in a recent issues of *InteRxActions*, APA's new weekly email. We also were able to be instrumental in defeating three pieces of legislation that we believed were ill-conceived.

A key piece in these successes is your grassroots involvement in the legislative process both through your existing relationships with your elected officials and your willingness to actively get involved in the "lobbying process" with your Representative and/or Senator. Most legislators greatly respect their hometown pharmacist. And, no matter what your professional setting, you can have more influence than you probably realize if you have a personal relationship with them or develop that relationship over time.

Our staff does a wonderful job of building trust through education of legislators about our profession, but the synergy of local grassroots involvement with the work of our staff makes success much more probable.

With 47 new House members (out of 100) as well as more than a dozen new Senate members, we continue to have a lot of work to do in getting to know this legislature as well as

the future new members that come along.

Grassroots involvement includes not only getting to know your member but also making monetary contributions to his/her race as well as to the AP-PAC (Arkansas Pharmacists - Political Action Committee) fund so that we, at APA, can support candidates who support pharmacists. Many of you contribute regularly to the PAC and we appreciate your generosity.

We are planning our second AP-PAC Phone-a-thon this summer. Our board members and PAC committee members will be asking you to give generously to the PAC. You will hear more about this at a later date but please begin thinking about giving liberally when you are contacted either by letter or by phone. I believe we are only starting to tap our potential in the political arena.

The importance of this message is related to the changing landscape in healthcare. A combination of more patients and fewer healthcare dollars will challenge everyone to figure out ways of providing quality healthcare at a price we can afford. I think this debate offers great opportunity for expanding the role of pharmacists. But make no mistake, this will play out, in a large part, in the political arena.

Please help us to be "at the table" and not "on the plate" as we strive to enhance pharmacists' position in taking care of our patients. §

From the President

NEW LAWS AFFECT THE PHARMACY PROFESSION



Mike Smets, P.D.

Arkansas pharmacists should be proud that the Arkansas Pharmacists Association (APA) has concluded one of its most successful legislative sessions in many years. This July, new laws will become effective that will have positive impacts on the way pharmacists practice the profession of pharmacy. One of APA's legislative victories this session was the passage of SB437, the pseudoephedrine bill.

SB437 creates a pharmacist-only third class of drugs. The bill codifies the importance of the pharmacist's professional judgment when dealing with over-the-counter medications that require special care. In short, the new law requires a pharmacist to use his or her professional judgment to make a decision as to whether a patient has a medical need for pseudoephedrine-containing products. In crafting this legislative language, APA and the Arkansas State Board of Pharmacy used the existing language pertaining to the codeine-containing cough syrups as a model.

I recognize that some pharmacists did not like this bill, primarily because it deals with the pseudoephedrine products. Pseudoephedrine products have the potential to create difficult situations in pharmacies, but I truly believe that this bill will help curb sales for illegitimate purposes in Arkansas. Additionally, this issue gives the profession an opportunity to define what a pharmacist-only third class of drugs could look like and how our professional training can be used to make medical decisions about when legitimate patients should have access to useful medications. This is a big deal professionally, and opportunities to address these types of issues do not come along frequently. When they do, we have to seize them.

As it pertains to pseudoephedrine, the new law gives the professional pharmacist the flexibility to determine exactly how to handle pseudoephedrine products. Here are a few examples of how you might choose to handle them: 1) Only sell them with a valid prescription; 2) Do not sell them at all; 3) Sell the products only to patients whom you fill prescriptions for; 4) Sell the products to patients after you have assessed their conditions and have determined there is a medical need; 5) Come up with any

other method that works for you and your patients.

APA also included language in the bill to protect pharmacists from liability for refusing to sell the products and language that allows the pharmacy permit holder (i.e. corporations) to be held liable for forcing a pharmacist to make a sale. Lastly, the new law limits sales only to patients who have a valid Arkansas-issued I.D. or a U.S. Military I.D. Please give the APA staff a call if you are unsure of what you can or cannot do. They are ready to help.

“This July, new laws will become effective that will have positive impacts on the way pharmacists practice the profession of pharmacy.”

Remember, the purpose of this new law is to enhance pharmacists as healthcare professionals, not to make you policemen. So plan well ahead for how you will handle these products in your practice. You can even begin implementing your new policy in advance of the law going into effect.

As we look back on this law five years from now, I truly believe that this will be a turning point that helps demonstrate the value that pharmacists bring to the healthcare system every day. I am hopeful that it will help us advance our professional role in the future in addressing such major healthcare problems.

I want to close by thanking each of you for the wonderful year that I have had as APA President. I have relished the opportunity to visit with so many of you and to learn of the terrific ways you are serving your patients. I am proud to be a pharmacist and I am proud to have so many terrific colleagues. §



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Marion Berry

Reflects on Pharmacy, Farming and Service to Arkansas



“Retail pharmacists at retail drug stores have such an unbelievable grassroots political capability...”

Former Congressman Marion Berry is the only pharmacist to have served as a member of Congress in recent memory. He announced that he would not be running again for office in January 2010 and moved back to his home in Gillett at the end of last year.

“Although Marion was not actively practicing at a pharmacy, he understood our issues and concerns and really was our champion during his 14-year tenure as a member of Congress,” said Mark Riley, executive vice president of the Arkansas Pharmacists Association (APA). “We could count on him to support the legislation that supported us. We lost our best friend in Washington when Marion left town.”

Pharmacist and Senator Percy Malone (D-Arkadelphia) added, “Congressman Berry was a great statesman and advocate for Arkansas values. He will be sorely missed by pharmacy.”

In early April, Mark Riley and APA Communications Director Eileen Denne visited Berry at his home in Gillett, where he was kind enough to answer questions about his career.

Arkansas Beginnings

A lifelong Arkansas County resident, Berry was born in Stuttgart and raised in nearby Bayou Meto in the Arkansas

Delta. The son of a rice farmer, he was encouraged by his parents to get an education outside farming. After spending a few years at the University of Arkansas in Fayetteville where he earned a pharmacy degree, he then moved to Little Rock and worked for Dr. Don Roger at Don’s Pharmacy.

In 1967, he returned to the family business and became a farmer in his own right, harvesting soybeans, wheat and rice, establishing a business that he carries on today.

Berry ran and was elected to a position as a city alderman in Stuttgart, Arkansas, in 1976. He was appointed as a member of the Arkansas Soil and Water Conservation Commission by then Governor Bill Clinton in 1986, and continued in that role until 1994. In 1993, President Clinton went on to appoint Berry as a member of the White House Domestic Policy Council (1993–1996) and special assistant to the President for Agricultural Trade and Food Assistance (1993–1996).

Congressional Career

Berry was elected in November 1996 to serve Arkansas’s 1st District. He went on to serve seven terms, from Jan. 3, 1997 to Jan. 3, 2011. Berry was a self-described Blue Dog Democrat. He served on the House Budget and Appropriations Committees and on the Military

Construction and Veterans Affairs, Energy and Water, and Transportation subcommittees. He was also chosen by Democratic Leadership to serve as Vice-Chair of the Steering and Policy Committee and as a member of the Leader's Senior Whip Team. He also served as Co-Chair of several caucuses including: House Democratic Health Care Task Force; House Affordable Medicine Task Force; Congressional Soybean Caucus; and New Madrid Working Group.

Accomplishments On Behalf Of Pharmacists

Berry co-founded the Democrats' Prescription Drug Task Force and pursued his interests in health care policy while in the Congress. As one of the three House Democrats that sat on the House-Senate conference committee on the Medicare prescription drug bill in 2003, he voiced many complaints about the Bush Administration's healthcare policies and about the House Republican's efforts to shut Democrats out of the legislative process. In the more recent health care reform debate, Berry voted for the Democratic health care reform bill, HR 3962, during its first House Floor vote, but ultimately voted against final passage of the bill.



"If you're going to be taken seriously in politics, you have to play it seriously."

Q & A with Marion Berry

Years ago, why did you decide to leave the pharmacy profession and go back to farming?

In my family, we were brought up to believe that farming was the only way to make a living. It was just the way we were taught.

My father didn't think he had enough land for me and my two brothers all to farm and he was right. He encouraged me to go to college, and when I came home at Christmas the first year, he found out I was studying agriculture. Before I went back to college, he said if you come back and farm, I'll teach you what you need to know. You should learn to do something else [at college], just in case.

I had no idea what something else was going to be; my whole focus up until then was agriculture. I had a roommate that just decided he was going to pharmacy school and then he never did; he never applied. So I took my pre-pharmacy courses and applied and went to pharmacy school and had a really nice experience.

We had some family friends that were in the pharmacy business and I worked for Don Rogers (Don's Pharmacy in Little Rock) after I got out of school; he was a wonderful person; and a wonderful guy to work for. I had a really nice experience but I still had that farming business in my craw.

About that time, my wife Carolyn's dad decided he didn't want to run the farm anymore and asked us if we wanted to come back to do that. And that's how I got back in the farming business.

The first several years (December 1968) were tough and at one point I considered working in a drug store somewhere; at that time a pharmacist made about \$150 a week and that was a pretty good job. But then my wife got a job as a school teacher right in the middle of the year to help with the bills and we were able to make another crop. Late in 1969, my brother and I earned enough money to buy a 500-acre farm. We didn't have a lick of sense.

It's just dirt to anybody else but I've been over every square foot. My younger brother and I have been in farming all of our lives and own about 3,000 acres altogether. We rotate crops; mostly rice, soybeans, soft red winter wheat and corn.

How did you get involved in politics?

My brother and I spent years building an irrigation system. In 1983, Governor Clinton appointed a water board; in 1985, he wanted to change the water law. He held hearings to introduce a bill and every time, my brother and I would go to the Capitol and testify to get the bill killed. Clinton finally asked if we could work together. In 1991, we wrote a good water law. This stood well for me when Clinton was in the White House. He asked me to come to Washington to advise him on agriculture issues.

Let's talk about political leaders: what are your thoughts on former House Speaker Nancy Pelosi and President Obama?

You know I absolutely adored the Speaker [Nancy Pelosi]. We didn't hardly agree on anything. She got mad at me

at the end about health care. But I am really fond of her as a person.

[On healthcare reform] I think the President was poorly prepared for the task that he took on, because Obama had just gotten elected and he was smartest guy around – 9-foot tall and bullet-proof. It's not that he was too dumb to learn, but he was not prepared for health care and was in over his head.

If Hillary had been elected, I'd like to think we'd be a whole lot better off. She knew healthcare. She would have never gone for the \$12 billion deal Obama made with the drug companies. And they're still not paying for anything. Hillary would have been much better prepared. But, [healthcare opponents] would have been after her just as bad as they are after Obama.

Arkansas has had some really great leaders in Senators Bumpers, Pryor, McClellan and Robinson. I think Beebe has been a good governor, as good a governor as I ever seen. He's not going to over promise you.

What do you miss about serving in Congress?

At lunch at the Rice Motel, a local Vietnam veteran approached Berry to tell him about a visit to the Veterans Affairs hospital that Berry had recommended. The Vet talked about his Post Traumatic Stress Disorder diagnosis and follow-up.

The thing that probably I miss the most is when a guy comes up like that Vet. Now I can call one of my old staff people and they'll get him in touch [with the right people]. I used to enjoy doing that and did a lot of it myself. It's rewarding to know that I was able to help someone.

Who do you think are pharmacy's current advocates in Congress?

Senator Jerry Moran (R-Kansas). We served seven terms in the House together then he was elected to the Senate. He understands pharmacy and knows his local retail guys in Kansas, which is in a lot of ways like rural AR. And Jo Ann Emerson (R-Missouri) is like that too. She and I were in the same class.

How important was it for you to get a call or email from a constituent about issues?

It was very important. The thing that has changed is communications capabilities today. We got so we might get 10,000 emails or letters [on one issue]. Most were from out-of-state or from Tea Party people telling me how bad things were.

With health care, we just got blasted. Our phones all locked up; we had to operate off our cell phones. You quickly

come to disregard those calls and form letters. During health care, we couldn't walk down the hall.

"It's just dirt to anybody else but I've been over every square foot," Berry says of his farmland.

If I heard from a constituent, whether I knew him or not, from Mountain View, Arkansas, and if he really did hand-write his letter, I would read that myself and most of the time I'd pick up the phone and call him and try to find out more. Those letters, even if it was a letter just expressing an opinion, really meant something.

What are your views on PAC contributions?

I don't know who first described it this way, but money is the mother's milk of politics, and we all like to think of a world where that doesn't exist, but the people with the most money are the ones that get heard the most.

My advice for pharmacists is play it to the max. You need to hold [elected officials] accountable. If you supported someone and they just disregard that and throw you under the bus, then they should be called on the carpet for that.



APA Executive VP Mark Riley responds to a comment by former Congressman Berry.

Retail pharmacists at independent drug stores have such an unbelievable grassroots political capability that they never even touch. And the classic example of that was the way that George Wimberly shaped politics in Little Rock and Pulaski County for 60-70 years. He was a political influence for all of my days in that little old drug store. But he ran his store just like politics – he took care of his folks. That was the fun part about the drug business for me – is taking care of people.

You know Don's store – the prescription counter was built out into the store. When people came in you saw and you

touched them. You knew their name and how their mother was doing. It was fun to do that. [Customers] know when you're born and they care when you die.

I pull up to the drug store window in DeWitt now and old Dean [APA Member Dean Watts] comes over there and shakes my hand. Who in the world would want to live in a world where you didn't have the slightest idea of who you were dealing with? I've got no interest in being part of that world.

Who were your pharmacy mentors?

Besides George Wimberly, Don Rogers was huge mentor for me. I worked one summer for John Cook at the Argenta Drug Company in North Little Rock when I was a student.

What advice would you give to pharmacists today from a political standpoint?

What should pharmacy do differently in D.C.? I think we don't play hard enough. I've been part of two professions, both in a poll of people you admire the most or think highly of— pharmacists and farmers ranks really high. Mainly because they take care of business and just leave people alone. I think it's their nature not to play to hardball. But just like Mark [APA EVP Mark Riley] was saying, you're either at the table or on the plate.

If you are going to be taken seriously in politics you have to play it seriously. When people disagree with you, you have to let them know that there may be a price to pay, especially if they're doing it for no good reason.

“I consider myself one of the luckiest people in the world. I got to be associated with really great people. I got to be in a drug store for four years, which was really good training for politics and life.”

I've never felt that professional pharmacies or neighborhood pharmacists have asked me for anything but an even break. Pharmacists still aren't considered health care professionals (by the Centers for Medicare and Medicaid Services). That's a ridiculous thing. It's not unfair to ask be treated like others. Therapists are considered healthcare professionals but pharmacists are not. That's the kind of stuff you deal with in third world countries.

We talked about the Tea Party [and its impact on healthcare reform] – if pharmacists got that fuzzed up and started telling everyone that came in there how unfair it was, I don't know if it would affect business, but I think it would affect politics.



I know what Mark Riley's done - he's committed more to trying to get a fair deal than anyone I know but he's got to be backed up with lots of grassroots support. You win a couple of elections either with lots of money or grassroots support, I guarantee that people will pay attention to you next time.

What was your greatest disappointment during your time in Congress?

If I had one vote that I could take back it would be the Iraq war resolution under Bush. I regretted that vote ever since I cast it and I will go to my grave regretting it. It didn't declare war on Iraq but authorized the President to use necessary force. It was my vote and I can't blame it on anybody else. I had worked in the White House and seen a president work and I didn't believe anyone could casually enter into something like that. I didn't think the President could be a president and be naïve enough to consider something that important. I'd take it back in a minute if I could.

What do you consider your greatest successes in Washington – both in the Clinton White House and as a member of Congress representing the 1st District of Arkansas?

The only redline copy of a bill I have is an Energy and Water Appropriations bill passed in 2008. I had several

things in there but we finished the minimum flow effort on the White River that had been going on for decades and got it moving.

The thing I really look back on now and just enjoy thinking about are the people like that Vet who are comfortable coming up to you and telling you about things. I have constituents that I used to see fairly often and they call me now just to see how I'm doing and I think that's awful nice.

As far as my greatest legislative achievement, I am real proud of the 2002 farm bill – Chad Causey spearheaded that effort. [Other than that], I don't have much to hang my hat on. But I served with some really great people. A lot of them you never hear about and never will. There are really good people who are in [Washington, D.C.] for the right reasons. And they really do care.

I served in the White House with Bob Nash from Texarkana who worked for Clinton when he was governor. Bob was

undersecretary for rural agriculture and then in personnel under the Clinton White House. We were fighting with other members of the Clinton administration – it was an inner White House battle and he and I had come out on top. I looked at Bob and he was just smiling. When I asked him why, he said "I always wanted to play the big game but I didn't know if I could or not. I didn't know if I was good enough. Us Arkies, we've done alright."

In my time in public office, it wasn't a legislative achievement. I am extremely proud of the Clinton presidency and what it did and the way it did it. He balanced the budget the way you are supposed the balance the budget. You cut everything that you don't absolutely have to have.

I consider myself one of the luckiest people in the world. I got to be associated with really great people. I got to be in a drug store for four years, which was really good training for politics and life. §

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MEMBER SPOTLIGHT

David Chu

ARGENTA DRUG -
North Little Rock

Pharmacy practice:

Independent store owner

Graduate pharmacy school and year:

UAMS College of Pharmacy in 1982

Years in business: 25

Favorite part of the job:

Working with the customers; they're like family.

Least favorite part of the job:

Dealing with the insurance companies and PBMs.

Oddest request from a patient/customer:

A woman said her son was masturbating all the time and she wanted something to help him stop. Before I could answer, she asked me about saltpeter.

Recent reads:

All of Dan Brown's novels. Just finished "The Lost Symbol"

Fun activities:

Attending my son's sports and music activities; golf

Ideal dinner guests:

Arnold Palmer, Jack Nicklaus, Fred Couples

If not a pharmacist then...

A math teacher or caddy for a professional golfer.



AND THE LAW

By Don R. McGuire Jr., R.Ph., J.D.

YOU'VE BEEN SERVED!

This series, Pharmacy and the Law, is presented by Pharmacists Mutual Insurance Company and your State Pharmacy Association through Pharmacy Marketing Group, Inc., a company dedicated to providing quality products and services to the pharmacy community.

The day that you had hoped would never come has come. The sheriff makes his way through the store, with papers in his hand, heading towards the prescription counter. The sheriff says, "Chris, I've got something for you." The sheriff hands you the summons and complaint and walks out of the store. A summons is the notice that a suit has been filed against you. A complaint is the actual lawsuit. Now what do you do?

The most important thing is to not ignore it. This event, service of process, is the start of a procedure that is very time-sensitive. Unfortunately, some defendants read through the complaint and conclude that it is either a bogus case or just a ploy to extract money from them. The worst thing you can do is to toss it aside or throw it in a drawer and forget about it. This is not something that is going to go away. Ignoring it is only going to cause you more problems. In fact, the clock started when the sheriff handed Chris the summons.

Court rules prescribe the time frame within which some sort of response to the summons must be made. Depending on the jurisdiction, this is typically 20 or 30 days, although there are some other limitations out there. If nothing is filed with the court before this time expires, the plaintiff may be able to file for a default judgment. A default judgment essentially says,

"You failed to respond, you lose." If the plaintiff gains a default judgment, they can then begin to try to collect the money from you. The worst thing about a default judgment is that there is no deliberation on the facts or the issues of the case. You might end up paying on that bogus case that you tossed into the desk drawer.

The most typical response to a summons and complaint is to file an answer. The answer addresses all of the allegations made by the plaintiff. The responses are usually one of three possibilities; admission, denial, or not enough information. With an admission, you admit that the allegation is true. With a denial, you deny that the allegation is true. The third response is used when you don't know enough about the allegation to admit or deny it. For litigation purposes, this is treated as a denial. A response needs to be made for each and every allegation in the complaint. The answer is also the place where affirmative defenses are raised. These are legal defenses that counteract the allegations against you. For example, raising truth as a defense to slander or libel.

However, there are circumstances when other filings are made instead of an answer. These are generally motions that raise a particular issue to the court. The purpose of these motions is to contest certain issues prior to actually working on the

substance of the case via the answer. If you are successful on these issues, many times the case is thrown out and there is no need to work on the substance of the case. The issues contested here can include the lack of jurisdiction by the court, the case is filed in the incorrect venue, the summons and complaint was improperly served, the case failed to name the proper parties, or the case is a duplicate of a previously filed case in another court.

It takes time to evaluate the allegations, decide whether to file an answer and/or a motion and to decide what allegations need to be admitted or denied. Timeliness is your most valuable asset. Don't be an ostrich when you are served. Sticking your head in the sand won't make it go away and ignoring it could result in some serious negative ramifications for you. Call your attorney and/or insurance company as soon as possible. The more time they have to work on your response, the better it will be.

© Don R. McGuire Jr., R.Ph., J.D., is General Counsel at Pharmacists Mutual Insurance Company.

This article discusses general principles of law and risk management. It is not intended as legal advice. Pharmacists should consult their own attorneys and insurance companies for specific advice. Pharmacists should be familiar with policies and procedures of their employers and insurance companies, and act accordingly.

Safety Nets

Eddie Dunn, Pharm.D.
Jon Wolfe, Ph.D.



UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES COLLEGE OF PHARMACY

Pharmacists from Eastern and Central Arkansas submitted the following successful interventions. Thank you for your continued support of the column.

A pharmacy technician received the original prescription illustrated in [Figure One](#) from a patient. The technician entered the prescription information into the computer as “Ambien® (zolpidem) 5 mg Tablets, quantity 30, with directions to the patient of “take one tablet by mouth daily”. The same technician filled the prescription and placed it in line for pharmacist verification and patient counseling. As the pharmacist was providing information about Ambien®, the patient suddenly remarked “this medicine is supposed to be for my blood pressure”. Upon re-examining the prescription, the pharmacist once again interpreted the handwritten order as Ambien®. At this point, the pharmacist decided to contact the prescriber for clarification. The prescriber stated the order for written for amlodipine 5 mg tablets, not Ambien®. After this, the pharmacist filled the prescription for amlodipine and provided the appropriate patient counseling.

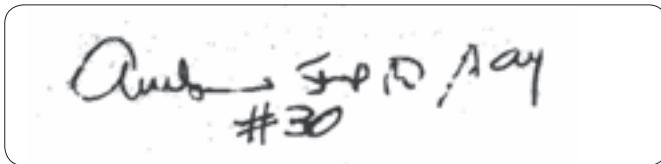


Figure 1

Medication names that look alike and/or sound alike have resulted in numerous errors reaching patients. While faxed and electronic prescriptions have reduced this type of error, they have not entirely eliminated the problem. The medication names Ambien® and amlodipine do not appear similar when typed on a keyboard, however, when illegibly handwritten the names can be confused. Other factors contributing to error are the similar strengths (5 mg, 10 mg) and dosing interval (daily) between these two medications. One could raise the question about why Ambien® is being prescribed “daily”, which could be any time, rather than “daily at bedtime” which is more appropriate language for a sleep aid. The sig in this case actually provides a subtle clue that the order may not be for Ambien®. Fortunately for the patient in this case, the pharmacist provided State Board of Pharmacy required patient counseling. If counseling had not been provided –

and the patient had taken Ambien® and operated a motor vehicle - the results could have been catastrophic.

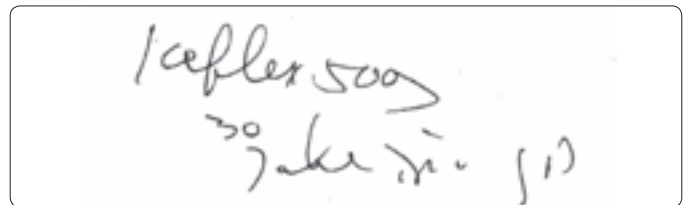


Figure 2

The prescription illustrated in [Figure Two](#) was received by a pharmacy technician who entered the order information into the computer as “Keflex (cephalexin) 500 mg Capsules, quantity 30, with directions of “take one capsule by mouth daily”. The prescription was filled by the technician and placed in line for verification and counseling. While verifying the prescription for accuracy, the pharmacist questioned the once-daily dosing interval for the antibiotic Keflex®. Upon examining the original prescription, the pharmacist realized the prescription abbreviation could be interpreted as either “QD” or “QID”. A call to the prescriber confirmed the Keflex® dosing interval as “four times daily”, not once daily. After this, a corrected prescription label was generated and the patient appropriately counseled.

Numerous Safety Nets columns have focused on the problem on prescription abbreviations. While their use by health care professionals in some instances may seem to be a time-saving convenience, their consistent use does not promote patient safety. Some studies have reported that nearly 5% of all medication errors were caused by prescription abbreviations. This case clearly illustrates two of the most dangerous - “QD” and “QID”. The technician misinterpreted the illegibly handwritten abbreviation “QID” as “once daily”. If this error had not been detected by the pharmacist, the patient would have received a subtherapeutic dose of Keflex®. In the interest of patient safety, all health care professionals should spell out medication orders and avoid the use of prescription abbreviations. §



The Changing Face of Pharmacy In Arkansas

Women On The Rise

Why are women drawn to the pharmacy profession? *AR•Rx The Arkansas Pharmacist* interviews six women with different years of experience, educational backgrounds and practices to find out.

Dr. Christy Campbell

The pharmacy profession in Arkansas has seen many changes in the past five decades, including updated technology, new privacy and healthcare laws, greater regulation and a more challenging business environment.

Another shift has been one that the medical profession in general has experienced – a gradual move towards becoming a pink profession, or one with a majority of female practitioners.

Although the Arkansas State Board of Pharmacy reports that of the 3,065 active pharmacists licensed and with a physical address in Arkansas, 1,587 are male and 1,478 are female, future pharmacists have tipped the gender balance.

Sixty five percent of UAMS College of Pharmacy graduates in 2011 will be women, as opposed to 10 percent of the class of 1961. Even 25 years ago, the College of Pharmacy graduated 32 women and 20 men.

Why are women drawn to the profession and what has kept them engaged in the variety of practices available

in Arkansas? *AR•Rx The Arkansas Pharmacist* interviewed six women with different years of experience, educational backgrounds and practices to find out.

Dr. Lanita Shaverd, Xavier University pharmacy class of 2006 in New Orleans, has a lengthy title: Diabetes and Endocrinology Firm Pharmacist, PGY2 Ambulatory Care Residency Director, Clinical Assistant Professor, UAMS College of Pharmacy, Central Arkansas Veterans Healthcare System. She attributes her current position in part to Hurricane Katrina.

“After Hurricane Katrina, our [class] rotation schedule changed,” Shaverd says. “I ended up in an oncology clinical rotation. I liked getting into the history of patients, helping to figure out what was wrong and, as a pharmacist, helping to fix the problem.”

She continues to consider that pharmacist-patient relationship a big advantage of her job. “A couple of advantages of practicing pharmacy for me are working with a multi-disciplinary team and having my recommendations listened to and sought out.” On the other hand, Shaverd says, having her heart-strings pulled dealing with the

65 PERCENT OF UAMS COLLEGE OF PHARMACY GRADUATES IN 2011 WILL BE WOMEN, AS OPPOSED TO 10 PERCENT OF THE CLASS OF 1961.



Dr. Lanita Shaverd counsels a patient on insulin injections.

personal and medical issues of veterans can be tough in a job that occasionally takes her away from family on weekends and holidays.

In response to a question about how the practice is different now than in the past, Shaverd said [pharmacy] is starting to move more towards performance-based outcomes, and pharmacists are forced to measure the impact they are making.

Now that the profession is more female-dominated, pharmacists are stepping out of their old roles and becoming more a part of patients' care rather than just being seen behind the pharmacy counter. Patients who come in have different questions now, Shaverd says. They want to know more about their disease and how to manage it.

She sees women as more accepted now as leaders of the profession. Shaverd herself has taken a leadership role in the Arkansas Association of Health System Pharmacists (AAHP), planning the annual fall seminar for the past several years. This year it will be held Oct. 6-7 at the Holiday Inn Airport Conference Center, Little Rock.

Shaverd is a strong advocate for getting involved and investing in the profession. "Use your talents and your abilities to continue to invest in the profession," she would tell students. "Get involved in your local and national pharmacy associations — organizations like APA. Become

a member, and then volunteer to be active, to run for a position so you have some ability to contribute more."

"We need to continue moving forward. Arkansas is very progressive when it comes to pharmacy, both clinically and politically. We need students to get involved so pharmacy in Arkansas keeps to be progressive and ensures that what we have to offer remains relevant."

Dr. Peggy Mott, University of Mississippi pharmacy class of 1965, says that her father thought pharmacy would be a good profession. She always liked science and biology but didn't want to be a nurse. Her dad told her she would be more in demand and could work as long as she was healthy as a pharmacist.

And work she has, for the past 46 years as a hospital pharmacist, clinical pharmacist, as an independent pharmacy owner and currently as a relief pharmacist. Mott is licensed to practice in Texas and Arkansas and continues to work 30 hours a week.

"Everything [about practicing pharmacy] has been great," Mott says. "I have been able to get a job wherever I have lived. It has been relatively easy but expensive to reciprocate. I can still work 40 hours a week if I want to."

When Mott owned her own pharmacy in Prairie Grove from 1982 to 2001, she was always trying to connect people with Medicaid benefits and food stamps. She



Dr. Peggy Mott confers with a physician's office about a prescription.

wore lots of hats and felt she helped lots of people. “Back then communities didn’t have access to home health. If someone needed home healthcare, they would call me. I was always on call and worked in hospice care. I would go in anytime people needed something; I only turned a customer down once during Easter dinner.”

Regarding pharmacy ownership, Mott said “I enjoyed it, every bit of it, so much. But 2001 was a good time to sell to Collier’s because we had just started going to Health Insurance Portability and Accountability Act (HIPAA) classes. Before HIPAA laws, I got my ledger out and told customers what they owed. Now you can’t tell anyone anything without having permission. When Medicare Part D came out, I was so glad I had sold [the pharmacy]. The insurance companies determine how much you make.”

Despite having sold her pharmacy, Mott continues to meet the challenges of changing technology and healthcare information as a relief pharmacist for Sam’s Club and Wal-Mart in Fayetteville, Westville and Stillwell, Oklahoma. She enjoys attending live Continuing Education classes and seeing people from other places.

“When I sold my pharmacy, I wondered if I was too old to learn the new computer systems. When I do relief, I always want to be able to work on the computer. It is a challenge. But I think people like having me for relief; I have a reputation for being quick and trying to save customers money. At Sam’s and Wal-Mart, the pharmacists check the pharmacy techs work on computers as well as checking pills. I do enjoy working for both.

Asked about how the practice has changed during the past 50 years, Mott said the biggest change is using computers and having pharmacy techs. They typed labels on typewriters when she started practicing.

“I have always been treated the same as men,” Mott says, “but I did lose a job 41 years ago because I was pregnant. I was working 30 hours a week at a pharmacy in Monroe, Louisiana. My manager filled my position a month after I told him I was expecting.”

Dr. Brittany Sanders, UAMS College of Pharmacy Class of 2005, finds that pharmacy offers lots of flexibility to combine work and family. It gives her the opportunity to interact with people and help them every day with healthcare decisions.

“I always knew I wanted to go into healthcare and I was also interested in chemistry. I started out [in college] in physical therapy but decided not to do that. I went to the

University of Arkansas for two years then applied to the UAMS College of Pharmacy,” Sanders says.

She describes her pharmacy school experience as very good. Sanders’ first pharmacy school exam was Dr. Born’s exam on September 11, 2001, which made for a memorable start. During pharmacy school she tutored other pharmacy students in physiology; worked for the Poison Control Center and did research with Dr. Donna West in pharmacy administration.



Dr. Brittany Sanders talks to a patient about drug therapy.

Sanders’ summer retail internship with Walgreen’s resulted in her working in Walgreen’s store management program for a number of years. Just two years ago, she returned to pharmacy. “At that point I had two kids and working in pharmacy better fit my family’s lifestyle. As a store manager, I put in a lot of hours. As a pharmacist, I could work a more controlled number of hours.”

One of the disadvantages of pharmacy for Sanders is the struggle to get respect from other healthcare professionals. She recently had a heated discussion with a physician about an opinion. “When you start pharmacy school, you learn that patients will be very open with a pharmacist. They are willing to show you anything in the middle of a drug store. Pharmacists are healthcare professionals who won’t charge for an opinion.”

In Sanders’ view, the practice is different today in that margins are a lot tighter than they were, especially with Medicare Part D. Things like staffing have been adjusted in response. “There are things we are trying to do to increase revenue such as immunizations, Medication Therapy Management (MTM), basic health screening for



Dr. Stephanie O'Neal manages Wynne Medical Pharmacy.

diabetes and cholesterol testing. We are looking at getting third parties to pay for counseling and charging a fee for the services I described."

Sanders has not felt limited in any way as a female pharmacist. She observes that is if definitely becoming a more female-dominated profession. At her Walgreen's in Little Rock, there are two male and four women pharmacists.

Sanders advice to students: "Pharmacy is a great profession. We just have to continue to fight for it so it remains a profession. We need to stay on top of the legislative process and the issues that are important to pharmacy and take advantage of the opportunities we are given. If we don't do MTM, for example, someone else will."

Dr. Stephanie Goodart O'Neal, UAMS College of Pharmacy Class of 1974, remembers a time when she was working at a store and an old country man came in and said he wanted to see a pharmacist. When the clerk pointed out Stephanie, the man said "I need a man pharmacist, not that lady."

O'Neal applied for a job at a pharmacy in Wynne upon graduation from pharmacy school, was hired and stayed on for eight years. She became a manager and opened up a clinic setting. At age 29, she had a son and reduced her hours to working one day a week then working relief for several years. After that, she worked for Safeway in Forrest City, and finally ended up at Wynne Medical Pharmacy.

Of the three kinds of work, O'Neal prefers independent stores. In her view, "independents are more service-oriented and provide better service to customers; you

have to work harder because nobody gives you a cookie cutter kind of job."

O'Neal's pharmacy school experience was definitely not cookie cutter either. She applied after two years of college and in the fall of 1972, began the first year of a two-year program that UAMS tried for students that included six semesters in two years with no summer break. She got married just before starting pharmacy school and was almost immediately ill with Crohn's disease, missing the first six weeks of classes. Following graduation, as she went to take the state board exams, her father had a stroke. In between tests, she drove back and forth to Memphis to be with him.

Despite the challenging career start, O'Neal says she has appreciated pharmacy as a flexible career. "I've never applied for a job except for that first one. The job always found me."

A major disadvantage of the independent pharmacy practice for O'Neal has been retirement. "It is all self-funded. It doesn't matter how long you work, you have to be over age 59 to draw on retirement. I have always been cognizant of saving money." She also considers being an independent pharmacist a restrictive job because, "You can't just call in sick; you have to find someone to work for you. I have always worked long hours and worked through lunch."

On the other hand, O'Neal says, "It has been wonderful combining pharmacy with family. I think being a mom has made me a better pharmacist. It helped me be better tuned into problems with patients' children because we had shared experiences. I learned how to treat little things and it made me better able to relate to customers who were mothers and children."

As for changes in the practice of pharmacy, O'Neal says 37 years ago, everything was name brand. "There were few generics, very few classes of drugs and no PBMs. Everything was paid in cash. There were a few pharmacy cards. We mailed claims in once a month after typing on an IBM Selectric typewriter. Regulation has increased exponentially. The law made counseling on prescriptions mandatory. We weren't even required to put the drug name on a bottle when I got out of school."

When asked how the practice of pharmacy is different for women than men, O'Neal says she always felt totally accepted and respected for what she did. However, O'Neal thinks that many women don't want to be business owners because of the demands of raising a family and the challenge of running a household and a business.

“Women work 24 hours a day and work harder to do what they do. Because of that, they are not inclined to become business owners.”

If she were advising women pharmacy students, O’Neal would tell them to go into pharmacy with the idea that they want to give back. “Think about getting into ownership even if it is just a partnership; take advantage of all the retirement opportunities you can so you don’t have to work until you are 80; get politically active; get involved in the politics of pharmacy.”

O’Neal says her involvement on the Board of Directors and ultimately as president of APA over the last 12 years had led her to realize that she should have gotten involved sooner. “If someone had said, look, if you want this profession to be what you want it to be, you’re going to have to drive that train. The more women who can do it, the better I’d like it. We can’t sit back and let 65 percent of the profession not be involved.”

Dr. Christy Campbell, UAMS College of Pharmacy Class of 1989, agrees with O’Neal that students today should become involved in at least one professional organization to enhance their knowledge and help mold the director of pharmacy in the future. She encourages them to “take the wheel and take on the leadership of guiding pharmacy.”

For practicing pharmacists, Campbell stresses the need to be involved in one or more areas, run for board positions and give back to the profession that has given [you] so much already. “Go to town meetings and let them know who you are – a respected piece of the overall healthcare puzzle. Make it your purpose to contribute to the community.”

Campbell had a good experience in pharmacy school with good friends and good relationships with professors, although she doesn’t remember any female professors between 1986 and 1989. When she started as a pharmacy owner 16 years ago and attended conventions and meetings, she felt like a lone wolf. She was a young owner with few female colleagues and says it was hard to feel comfortable in the midst of a bunch of older male pharmacists.

Campbell decided to become an independent pharmacist because she is a people person and an extrovert. She loves to be on the floor with patients and in contact with everything going on. She started working for Chambers Drug in Jacksonville as a student but later on, ended up working for Tom Lowery in Searcy. Campbell’s timing was such that when Tom was ready to retire, she was ready to

purchase his stores in January 1995. She enjoys the fact that policies are her own; she can establish pricing and can train employees on how to treat patients.

Following the purchase of the two Lowery stores in Searcy, Campbell opened County Drug in 1997 and bought Ken’s Save-On Drug and Medic Save-On Drug in 2005. During the last year she closed one location so now has four stores in Searcy, all in different parts of town with different patient demographics.

The gift of working in pharmacy, she says, is that “I get to leave the store and feel like I’ve touched one person and improved their health and quality of life in a way that might not have happened if I hadn’t intervened. Whether they lost a family member or if I just greet them in a friendly way, I’ve made a difference to them. For me, it is patient contact, whether medicinal or the spoken word. The service component is an advantage. What could be a better profession for a Christian?”

Campbell enjoys being a preceptor and training future pharmacy leaders about the technical aspects of the



Dr. Christy Campbell talks to a patient about cholesterol.

profession and about being service oriented, showing empathy and compassion.

The disadvantages are those of being a small business owner. She says that early in her practice, there were long hours but now she has an easier schedule. However, the stores are her life. As an owner, she has lots of people depending on the decisions she makes. If she doesn’t make good decisions they don’t have a job. “If you don’t like having the responsibility for other people’s lives on your shoulders, you don’t need to be an owner.”

(continued)

At her stores in the future, she hopes to continue to develop the practice to go from products to service orientation. They have administered immunizations, tested blood pressure, screened for diabetes, conducted bone density screenings and performed cholesterol screenings. “We want to prevent disease as opposed to just treating it. I want our stores to be a place to be seen as a place of health and wellness. We can enhance the quality of life through services that are a value to our patients.”

Ms. Diana Park, Harding University College of Pharmacy Pharm.D. Candidate, Class of 2012, decided in high school that she wanted to go into healthcare. She thought that pharmacy, as opposed to medicine, offered the best opportunity to be on the front lines of both patient and clinical care.

Park grew up in Los Angeles and spent several summers as a clerk and then a pharmacy technician at a retail drugstore in San Diego. She got her undergraduate degree in pharmacological chemistry at the University of California at San Diego.

When it came time to select a graduate school, Park wanted a location outside of California. She was sold on Harding because of its small size, beautiful campus and nice people. Although somewhat wary of being in Harding's first College of Pharmacy class, after her interview there, she decided to attend rather than applying to other schools.

Park says that her most frequently asked question is about moving to Searcy from southern California. She says it was pretty easy to adapt to the Southern lifestyle, with no traffic or people yelling at you.

She describes her pharmacy school experience as an amazing time. “Harding has given me so many opportunities for leadership and professional development that I didn't have during my undergraduate years. There is much more accountability when all the professors know who you are. This is such an intimate community and the close mentoring relationships with faculty have been the best part of Harding. This is the best personal development experience I have had during my education.”

She has already made a decision about her practice setting. Park hopes to do a residency following graduation and would like to get experience as a clinician at a hospital. Her ultimate goal is to become a professor at a college

of pharmacy, with work at a clinic site as well as having teaching responsibilities.

Regarding the advantages and disadvantages of practicing pharmacy, Park says “We are still proving ourselves and our importance to the healthcare community. With active, innovative working pharmacists, we have the opportunity to move the profession in new roles and further develop as clinicians.

“We're currently unable to bill for certain services that we provide and we are not recognized as providers with Medicare. With continued leadership, we can turn that around,” according to Park.

She has taken a leadership role with the American Society of Health-System Pharmacists (ASHP) as a member of the Pharmacy Student Forum Leadership Development Advisory Group and was recently asked to serve on the ASHP Pharmacy Student Forum Executive Committee. She will be officially appointed during the Denver ASHP Summer Meeting in June. Park is among five students chosen nationwide for this position.



Ms. Diana Park participated in the March Legislative Health Fair at the Capitol.

Her response to a question about how the pharmacy practice is changing reflects her progressive thinking.

“Several areas are changing – pharmacy education has expanded to include leadership and management which I think are very important. They have not been integral to education in the past. And with the need for better healthcare, we can push pharmacy to play a greater role within multi-disciplinary health teams.”

Traditionally, Park says, women chose pharmacy because it meant a smaller time commitment than becoming a physician. It was better for having a family. “Now, there is a big push for post-graduate residency training. The expectation is that you get more than four years of graduate school education. Women may find that it will be just as challenging to be in the pharmacy profession and raise a family as it would be if they were going to be physician.”

Pharmacy is a great profession to get into, Park says. She appreciates the opportunities and availability of mentorships. “In Arkansas, pharmacy is a small community and everyone wants you to become a great contributing member; they want you to do well.” §

Medicaid Report

Arkansas Medicaid Pharmacy Program wants to remind providers that reference pages are available on the Arkansas Medicaid website at <https://www.medicaid.state.ar.us> in order to look up any current or upcoming edits on medications. Click on the "Provider" box from the main page, then scroll down the list on the left side of the page and click on "Prescription Drug Information". The most commonly viewed items are the Evidence-based prescription drug program (PDL), Prescription drug claim edits (qty limits, age, or

gender restrictions) and Prescription drug clinical edits. Information can also be researched about statements of medical necessity for various drugs, the covered cough and cold list, and provider memos that have been mailed. All of the links available from this page are listed below.

If you have pharmacy claim or prescription drug prior authorization concerns, please call the **Prescription Drug PA Help Desk**: In-state toll free: (800) 707-3854; Local and out-of-state: (501) 374-6609 x 500.



- e-Prescribing project overview
- Antipsychotics for beneficiaries less than 18 years of age
- Capped upper limits
- Cough and cold list
- Covered labelers
- DESI NDCs (non-payable) associated with HCPCS procedure codes
- Emergency override
- Evidence-based prescription drug program
- Exclusions from coverage
- Generic upper limits
- Hepatitis C Virus Medication Therapy Request Form
- Medicare Part D excluded—allowed by Arkansas Medicaid
- MedWatch forms and information
- NDCs for reference in initiating PAs through the VRS
- Over-the-counter list
- Prescription drug claim edits
- Prescription drug clinical edits
- Prescription drug PA forms
- Provider memorandums for drug edits
- Tobacco cessation programs
- Voice response system brochure

Fighting Addiction?

You're not alone. We're here to help.

The ARPSG helps pharmacy professionals who are fighting addiction.

It's confidential. You don't have to identify yourself.

It's just for you, the pharmacy professional. The Help Line and support group are set up to help pharmacists, pharmacy technicians and other pharmacy professionals.

It's your decision. We'll answer your questions. You decide if you want our help.

Confidential HELP LINE: (870) 636-0923

(leave a message)

E-mail: Arkansas.PSG@gmail.com

www.arpsg.org



**ARKANSAS PHARMACY
SUPPORT GROUP**

We're Here to Help



Dean
Stephanie Gardner,
Pharm.D., Ed.D.

UAMS

APhA-ASP Chapter Wins National Chapter of the Year and Other Honors

A vital cornerstone of the educational experience we provide students at the University of Arkansas for Medical Sciences (UAMS) College of Pharmacy is our commitment to professional service and leadership.

Through the hard work and vigorous dedication of our faculty, we've managed to create a culture of volunteerism among students in our 11 student organizations. More than 90 percent of students belong to at least one organization, which provide our future pharmacists the opportunity to learn the history of the profession and offer a compass to better navigate the issues and ethics that shape pharmacy as a whole.

The flagship student organization at the UAMS College of Pharmacy, and our biggest, is our chapter of the American Pharmacists Association-Academy of Student Pharmacists (APhA-ASP) with more than 425 members. Our chapter has created a legacy among colleges of pharmacy across the country, and is one of the most talked about topics when I attend meetings and conventions with peers annually.

I'm extremely proud to report that we recently added another notch to that legacy on March 28 at the APhA annual convention in Seattle. For the third time in six years, our chapter received the national Chapter of the Year Award. With our 47 students in attendance, UAMS had one of the largest student contingents at the convention.

This was the third time the College has received the award since it was started in 2002. The UAMS students won the award the first time in 2006 and then again in 2009. Eddie Dunn, B.S., Pharm.D, associate professor of pharmacy practice, and Charles Born, B.S., M.S., Ph.D., professor of pharmaceutical sciences, are the APhA-ASP advisors and are to be congratulated for their dedication to our students.

The Chapter was judged on work done during the 2009-2010 academic year under the leadership of Collin Ward, a fourth-year student from Ashdown. The students won the award competing against more than 100 colleges of pharmacy across the nation.

Chapters compete for awards that actively promote the mission of APhA-ASP. Evaluation of chapter activities is based on criteria such as originality of programs, number of chapter members involved, impact on the community,

benefit to student pharmacists and collaboration with other health care organizations. Chapters also are evaluated on their year-to-year progress, particularly in relation to chapter activities and membership retention.

In addition to winning the Chapter of the Year Award, the UAMS College of Pharmacy's name was called several more times throughout the ceremony, including:

- The national winner of the Operation Heart Competition, which is a new project emphasizing screening, education and improving public awareness of cardiovascular disease. A large component of the UAMS ASP chapter's project was a five-month education and screening project for special needs adults at Easter Seals Arkansas.
- The regional winner of the Heartburn Awareness Challenge Competition. Our student chapter raised heartburn awareness through direct patient education, literature distribution, public presentations and a live television interview.
- The Regional winner of the Operation Diabetes Competition. Our student chapter screened more than 2,000 patients throughout Arkansas for diabetes.
- The Regional winner of the Operation Immunization Competition. Our student chapter immunized more than 4,000 patients for influenza and assisted with more than 8,000 immunizations.

In addition to these patient care projects, the UAMS student chapter also was the National winner in the APhA "Winter is Cold, but Advocacy is Hot" competition. This competition recognized the student body that best promoted APhA advocacy efforts.

Individual efforts were also recognized, as P3 student Jordan Brazeal was one of four nationwide to win the APhA-ASP Student Leadership Award. Thanh Nguyen, a P2 student, was the local winner of the Patient Counseling Competition and represented the chapter in the national competition at the APhA-ASP Annual Meeting.

As you can see, the future pharmacists we're educating at the UAMS College of Pharmacy are representing us well on a national scale. We will continue to place an emphasis on student professional development and leadership. And as a result, our College will continue to foster the development of pharmacy leaders engaged in advancing the profession of pharmacy upon graduation.

Read a more detailed story and get the video about the awards ceremony at: <http://www.uams.edu/cop/>. §

HARDING

Harding Creates International Footprint with Advanced Pharmacy Practice Experiences

In June 2011, the first group of Harding University College of Pharmacy (HUCOP) fourth professional year (P4) students will begin their advanced pharmacy practice experiences (APPEs)! This is a great milestone in their professional careers and in the history of the college. Each student will complete nine, one-month APPEs, following the same calendar as that followed by the UAMS College of Pharmacy. The nine APPEs include seven required APPEs (inpatient and acute care general medicine, ambulatory care, advanced community – patient care, advanced community – pharmacy practice management, advanced hospital/health system – pharmacy practice management, health and wellness, and a patient care elective) and two elective APPEs which can be chosen from any patient care elective, pharmacy practice management elective, or general pharmacy elective.

The majority of students will be completing their APPEs within Arkansas, but several students are completing APPEs at sites across the country and the world. While the Harding College of Pharmacy does not yet have alumni, Harding University certainly does. Many have gone on to become pharmacists who are engaged in unique and challenging pharmacy practices in locations across the country. We have been able to work with these alumni to provide APPEs for some of our students. In other cases, students are going back to their home state while still others are pursuing specialty experiences in areas such as the Indian Health Service, NCPA national association management, national military installations, and international mission sites.

While Harding values its Arkansas footprint, our mission of improving the spiritual and physical wellness of the world spurs us on to have a wider national and international footprint as well. It is for this reason that the health and wellness APPE is specifically required of all HUCOP students. It is a capstone of the service-centric mission, vision, and core values of HUCOP, designed to help address the needs of the world by providing population-based pharmaceutical care that ensures optimal health and wellness outcomes delivered through the highest standards of service. Students will participate in experiential community health and wellness activities that address a documented need within a given community through student-driven, faculty-supervised projects.

Harding University has for many years had a presence in Zambia, South Africa, at the Namwianga Mission

site. Pharmacy faculty member Dr. Tim Howard visited the mission in September 2010 on a fact-finding mission with the goal of establishing APPEs there. The mission is just outside of the town of Kolomo and was started around 1920 in what was then Northern Rhodesia (now Zambia). The mission owns about 7,000 acres and is home to nine basic schools, two high schools, the George Benson Christian College, a vocational center, radio station, two medical clinics and a hospital.

In addition to all of the above, some of the most important work of the mission occurs in three “havens” that are home to several orphans. Some of the orphans have HIV/AIDS, TB, or other serious medical conditions and are cared for around the clock by onsite nurses and care givers. Finally, there is Eric’s House that takes in homeless young boys off the streets of Kolomo, Livingstone, and other Zambian towns as well as from the bush.

Three pharmacy students along with a pharmacy faculty member will be leaving for Zambia in mid-May to complete a one-month APPE. In addition to serving in the clinics and hospital at Namwianga mission, the students will have the opportunity to work in the retail pharmacy in Kolomo as well as spend some time at a research hospital directed by Johns Hopkins-trained physician, Phillip Thuma, who heads the Malaria Institute that has reduced the incidence of malaria in that area by 80%. The hospital also serves as a research center for HIV/AIDS, TB, and other life threatening diseases.

To say the least, it is an exciting time to be at HUCOP and we appreciate all the cooperation and effort from Arkansas pharmacists to make this happen! §



Dean
Julie Hixson-Wallace,
Pharm.D., BCPS



Dr. Tim Howard with pharmacist owner of Star Pharmacy in Kolomo.



Feb. 18: Pharmacists to the winners circle during CE at the Races. (L to R) Lisa Jones Matthews, Reesa Novak, Ashley Young, Billy Newton, Jon Wolfe, Mike Alread, Kevin Caldwell



March 1: UAMS Pharmacy students participate in Legislative Health Fair at the Capitol.



March 1: Harding University Pharmacy students participate in Legislative Health Fair at the Capitol.



March 1: UAMS' Scott Warmack, Linda Warmack, Joan and Rep. Bobby Pierce, Tom Warmack and Sparky Hedden at Legislative Reception, Trapnall Hall.



March 6: Pharmacists participate in LR Marathon. L to R: Sara Danchenko, Rebecca Rittenhouse, Lindsey Dodd, Mara Grimsley, Mike Smets, Doug Cutsinger, Helen Chang, Dustin Ezell, and Josh Brown.



March 15: Senator Percy Malone testifies at hearing on SB437 as pharmacists look on.



April 14: Golf Hogs team at Arkansas Pharmacy Foundation Golf Tournament with Peyton Harvey, Reed Peevey and Trent Hollingsworth, watching Eli Vinson.



April 14: Park West Pharmacy team with (L to R) Charles and Becky West, Connie and Bill Bloodworth.

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Notes From the Hill: A Retrospective

By Debra Wolfe, APA Director of Government Affairs

Some people think that lobbying is a four-letter word. However, lobbyists perform a critical role in shaping policies and laws that get enacted by the state. As one of the lobbyists for the Arkansas Pharmacists Association, I spend my days building relationships with the great men and women who serve the citizens of Arkansas in the Arkansas General Assembly.

I am happy to report that the relationships that the pharmacists of the state have with their legislators and the relationships that the APA has built and maintained with Arkansas legislators have made pharmacy a strong political force at the Arkansas State Capitol. This legislative session, pharmacy scored a number of key political victories in Little Rock. Here is a summary of our legislative successes and how they will impact the practice of pharmacy:

The Pharmacy Audit Bill of Rights

Senator Johnny Key (R - Mountain Home) and Representative Linda Tyler (D - Conway) co-sponsored a bill that protects community pharmacies from the unfair and predatory auditing practices of the Pharmacy Benefit Managers (PBMs). The new law includes provisions that require a PBM to allow a pharmacist to correct a claim before any money is recouped and any recoupment can only be for the amount in excess of the corrected claim. This provision will prevent PBMs from finding an insignificant error in a prescription and recouping the entire prescription amount from the pharmacy. In addition, random audits will be limited to two per year, and each random audit may only include 25 prescriptions. These provisions will limit the number of times each year that a PBM may conduct a random desk audit, and it places an important limit on the number of claims that they may audit. Many provisions of the bill become effective on July 1, 2011, with the full implementation occurring on January 1, 2012.

Senator Key also ran a separate bill for pharmacy that protects the pharmacist-patient relationship and prevents a PBM from interfering with this relationship.

Expansion of Pharmacists Ability to Immunize

Senator Percy Malone (D - Arkadelphia) authored a bill that permits Arkansas pharmacists to administer medications down to age seven. The previous age limit for pharmacists was 18. In addition, pharmacists may provide flu shots down to age seven under a general protocol. All other immunizations and medications will require a patient-specific prescription for ages seven to 17. This expansion of pharmacy practice opens up a new opportunity for pharmacists to provide immunizations to many children who currently go unvaccinated.

Pharmacist-Only Third Class of Drugs

Senator Malone and Representative Mark Perry (D - Jacksonville) co-sponsored a bill that creates the framework for a pharmacist-only third class of drugs. The new law maintains patients' ability to access pseudoephedrine products from a pharmacist without a prescription, and it requires a pharmacist-patient relationship and the determination of a medical need by the pharmacist before a sale can be made.

In short, it prevents non-pharmacist store managers from forcing a professional pharmacist to sell these products and it allows the State Board of Pharmacy to discipline the pharmacy permit holder if someone attempts to force a pharmacist to make a sale. More importantly, the new law permits the State Board of Pharmacy to add new over-the-counter (OTC) products in the future that should require the specialized knowledge of the pharmacist before a patient may purchase them.

This bill drew many opponents, including the OTC manufacturers, the National Association of Chain Drug Stores, Walgreens, and Wal-Mart. However, pharmacists from all practice

settings overcame this opposition by rallying at the State Capitol on March 15 to help ensure the bill's passage. President Mike Smets devoted his column in this issue of *AR•Rx The Arkansas Pharmacist* to this issue; please take a moment to read his comments.

Prescription Drug Monitoring Bill

Senator Malone also led the effort to create a statewide prescription drug tracking system. This electronic database will capture all Schedule II, III, IV, and V prescriptions that are filled in the state of Arkansas. The data will be housed at the Arkansas Department of Health and will be available as a tool for healthcare providers to use when making determinations about patient treatment. Pharmacists will have access to the system and the legislature hopes that the system will help reduce doctor and pharmacy shopping for controlled substances.

State Board of Pharmacy Appointment Bill

Representative Tommy Wren (D - Melbourne) and Senator Bill Sample (R - Hot Springs) co-sponsored a bill that codifies the long-standing tradition of the Governor receiving input from the Arkansas Pharmacists Association before making a pharmacist appointment to the Arkansas State Board of Pharmacy. Arkansas governors will now be required by law to appoint pharmacist members to the Board of Pharmacy upon the advice and consent of the APA.

The 88th General Assembly was the most successful session for pharmacy in a long time, and I am particularly proud because it was productive for all of the different sectors of the profession. The APA is grateful to all of the legislators that helped us advance the profession of pharmacy and we are, most importantly, thankful to you the members for interacting with your legislators and letting them know the important role pharmacists play in today's healthcare team. §

AAHP REPORT



Arkansas Students Doing Great Things for Pharmacy

By Rayanne Storey, Pharm.D., Searcy, President

Pharmacy students are the future of our profession. I always tell the students, "Pharmacy is a great profession and you'd better keep it that way!" It is our duty as pharmacists to train the next generation of pharmacists. I was privileged to learn from many great pharmacists, including Rex Hickox, Matt Griffin, Ken Day, Carroll Barham, Rick DeFreece and many others. They molded me into the pharmacist that I am today. I am grateful to these and other pharmacy leaders in our state.

Our students in the state of Arkansas are doing many great things that I would like to share with you.

pharmacy intern. Besides SSHP, Kacey is also involved in APhA-ASP, Rho Chi, Phi Lambda Sigma, and Phi Delta Chi at UAMS. After graduation, Kacey plans to work in hospital pharmacy and is considering doing a residency program. Kacey will be an asset to the pharmacy profession. Congratulations!



Harding student Diana Park.

Diana Park is a third year pharmacy student at Harding University College of Pharmacy. She was recently chosen for the ASHP Pharmacy Student Forum Executive Committee. She will be responsible for serving as chair of one of five PSF advisory groups. Diana will act as an ASHP Student Liaison to a number of colleges of pharmacy and help schools in the development and maintenance of SSHPs.

This committee is comprised of five students that represent the 12,900 SSHP pharmacy student members. They are responsible for advising the ASHP Board of Directors and staff on the overall direction of the Forum, including member benefits and services.

Diana has served as the Harding University Student Society of Health System Pharmacy Vice-President for the past two years. Diana is from La Canada, California and did her undergraduate study at the University of California, at San Diego majoring in Pharmacological Chemistry. Diana's work experience includes Longs Drugs in La Jolla, California, and Medic Savon Drug in Searcy. Diana was one of two students chosen to be an ASHP Pharmacy Student Forum Associations Management Summer Intern in 2010. Diana enjoys being a part of a clinical health profession that focuses on the medication use process in a patients care. She feels she can play an integral role in ensuring that the patient gets the best medication possible. §



UAMS College of Pharmacy Dean Stephanie Gardner congratulates Kacey Bright

Kacey Bright is a third-year pharmacy student at UAMS and the president of the UAMS Student Society of Health-System Pharmacy organization. She is the recipient of our AAHP scholarship this year. Kacey wrote a very nice essay on how students could help implement changes after the Pharmacy Practice Model Initiative (PPMI) summit. After growing up in Hot Springs, Kacey completed her undergraduate studies at the University of Arkansas. While completing her pre-pharmacy requisites, Kacey also earned two bachelor's degrees in Spanish and Latin-American studies. Kacey is married and works at Arkansas Children's Hospital as a

Save the Date for AAHP Fall Seminar: October 6 - 7 in Little Rock at the Airport Holiday Inn

COMPOUNDING ACADEMY REPORT

Controversy Surrounding Makena®

By Mark Shinabery, P.D., President, APA Compounding Academy



Greetings to all; I hope the spring weather has been kind to you. As this edition goes to print, the annual APA meeting on June 9-11 will be at the Peabody in Little Rock. Jim Paoleletti from ZRT Labs will speak about BHRT on June 9 from 2:30 to 4:00 p.m. It will be worth 1.5 hours of C.E. Please plan to attend. Compounders on Capitol Hill will be June 11-14 in Washington, D.C.

Many of you are aware of the controversy surrounding the brand name drug Makena® (hydroxprogesterone caproate) by KV Pharmaceuticals. This drug is used to prevent pre-term births in women who have had at least one prior pre-term birth. KV Pharmaceuticals priced the drug at \$1,500 per injection. A normal round of treatment would be 1 shot

per week for consecutive weeks until close to term. This is outrageous! Compounders can prepare this drug for \$10 to \$20 per shot.

In order to support access to this drug, at this time and under this unique situation, the Food and Drug Administration (FDA) does not intend to take enforcement action against pharmacies that compound hydroxprogesterone caproate based on a valid prescription for an individually identified patient. Compounders applaud this common-sense approach from the FDA. As of April 1, KV Pharmaceuticals has cut the price to \$690.00 per shot, which is still pretty steep in my opinion. This is just one of many examples where compounders can help. §

Destination Sandestin

August 5-7, 2011



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Full-time staff pharmacist position open at AMMC in Paragould. Please go to www.myammc.org or email Stan.Carmack@arkansasmethodist.org.

LITTLE ROCK PHARMACY FOR SALE

Little Rock retail pharmacy for sale by owner. For interested buyers: leave a message at (805) 973-7237.

STAFF PHARMACIST NEEDED AT SAINT MARY'S

Job opening at Saint Mary's Regional Medical Center. We have an immediate opening for a Staff Pharmacist. Rotating 10's; full-time with benefits. Contact Susan Newton at 479.964.9164, Susan.newton@saintmarysregional.com.

PHARMACY TECH WANTED

Full-time pharmacy tech needed at compounding pharmacy. Experience in compounding preferred. Please call 501-223-2224 and ask for Kenny or Stacy for information.

LOOKING FOR WORK

Looking for work, full-time preferred, willing to travel. Contact Don Farris, PD, Ozark, AR. Home phone: 479-667-5949, Cell phone: 479-667-7989.

RELIEF PHARMACIST NEEDED

Looking for pharmacist in the central Arkansas area to provide relief for days off and vacation. Would like to put together a relief pool to help cover multiple days. Closed door pharmacy with no controlled substances, cash registers or insurance hassles. Hours are Monday - Friday 8 to 4:30. Competitive salary and paid as contract labor. If interested email Benji Post at bpost@att.net or call 870-692-5520.

BUSINESS OPPORTUNITIES IN PHARMACY

Are you tired of working hard and seeing little reward? Well, if so, I have an opportunity for you. If you're outgoing, motivated and willing to work hard, I'd love to speak to you about numerous business opportunities in pharmacy. To learn more about exciting opportunities

in pharmacy, please contact me via phone or e-mail. Must be a licensed pharmacist in Arkansas. Contact Jeff Turnbow; Phone: (479) 747-1778; email: TRNBO@aol.com.

POSITION AVAILABLE

Full or part-time position for residency trained pharmacist with BCPS or comparable experience. Contact Ramona McLean, Washington Regional Medical Center, 479-463-1102.

VOLUNTEER PHARMACISTS NEEDED AT HOT SPRINGS CHARITABLE CLINIC

Wanted: VOLUNTEER pharmacists to assist in dispensing prescriptions, checking prescriptions, and counseling for low income and uninsured patients at a charitable clinic in Hot Springs. Volunteers are needed for bi-weekly evening clinics from 6:00 P.M. to 9:00 P.M. and daily clinics, Tuesday and Wednesdays from 9:00 AM to 3:00 PM. Interested pharmacists should call or write Dian Masingill at the Charitable Christian Medical Clinic, 133 Arbor Street, Hot Springs, AR 71901, 501-623-8850.

LOOKING FOR WORK

Looking for work, full-time preferred, in North Central Arkansas. Contact: Paul Scott, P.D., 870-449-6692, Yellville.

ARKANSAS PHARMACISTS, CPTS NEEDED

The Arkansas-1 Disaster Medical Assistance Team (DMAT) is actively recruiting pharmacists and certified pharmacy technicians to join the National Disaster Medical System. By doing so, you could be able to deploy and help during the next national disaster. AR-1 is one of more than 60 nationwide federal teams of medical professionals. AR-1 has deployed to multiple hurricanes including the superdome during Katrina, and the Twin Towers after 9-11. Recently two AR-1 members deployed as part of the federal response to the Haiti earthquake. Members of AR-1 enjoy job protection under USERRA as a uniformed reservist and only deploy voluntarily for up to two weeks as a time. Pharmacists and CPTs who are interested are invited to visit <http://ar-1dmat.com/> for more information. Interested parties should also contact the

AR-1 planning section chief Rick Pavick at rick.pavick@vzw.blackberry.net

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PHARMACIST-IN-CHARGE WANTED

Competitive salary with up to 3 weeks paid vacation and major medical coverage plus 401K plan. Great schedule - Monday thru Friday, hours 9:00 a.m. to 6:00 p.m. Contact Alan Tweddell at 870-931-2881 or send resume to: Country Mart Pharmacy; 208 Lincoln Dr., Fredericktown, MO 63645. Positions to be filled in S.E. Missouri.

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OUT-OF-THE-PARK
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**Pharmacists
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129TH ANNUAL CONVENTION

June 9-11, 2011

Peabody Hotel • Little Rock

**When they start the game,
they don't yell, "Work ball."
They say, "Play ball."**

**— former Pittsburgh Pirates
left fielder Willie Stargell**



networking opportunities planned at the convention. This annual conference will welcome up to 400 pharmacists, pharmacy technicians, exhibitors, students and others.

Continuing Education

APA is pleased to offer 20 hours of Continuing Education with highly-regarded instructors on topics ranging from pain management to pharmacy law. The keynote speaker on Friday morning will be Joel Weintraub, physiologist and healthcare humorist.

Comprehensive Exhibition

More than 30 exhibitors including pharmacy wholesalers, manufacturers, insurers, Colleges of Pharmacy, hospitals and software vendors will be on hand to discuss their newest products and services that will benefit the practice of pharmacy in Arkansas. Be sure to plan time to visit with these professionals to learn about their innovative products.

Why Attend

Social and Networking Events

Connect with old friends and meet new colleagues at the annual convention. On Thursday evening, following the Exhibitor Reception, APA heads to Dickey-Stephens Ballpark for a night with the Arkansas Travelers, Double A Affiliate of the Los Angeles Angels of Anaheim, as they play the Northwest Arkansas Naturals.

On Friday, during the "Evening with the Presidents," members are in for a special treat as Alyse Eady, Miss Arkansas 2010 and Miss America 2011 First Runner-Up performs her ventriloquist act with Rosie and Justin.

On Saturday, the annual Arkansas Pharmacists Political Action Committee (AP-PAC) Luncheon will provide an opportunity for an update on the 2011 Arkansas General Assembly and will feature one of Arkansas's elected leaders.



*Miss Arkansas 2010, Alyse Eady,
will perform at Friday night's
"Evening with the Presidents."*

Program of Events*

(*Schedule is subject to change)

Wednesday, June 8, 2011

9:00 a.m. – 12:00 p.m. APA Board of Directors Meeting

APA Annual Golf Tournament

1:30 p.m.

Country Club of Arkansas

#3 Country Club Drive
Maumelle, AR 72113
501-851-0095

Thursday, June 9, 2011

7:00 – 11:30 a.m. Registration
7:00 – 8:00 a.m. Buffet Breakfast
10:00 a.m. – 3:00 p.m. Exhibitors Set-Up
12:00 – 2:30 p.m. AAHP Board Meeting
1:30 – 3:00 p.m. Registration

FIRST GENERAL SESSION AND CONTINUING EDUCATION

Presiding: Mike Smets, APA President

8:00 – 9:30 a.m. **A Pharmacist's Roadmap
to Pain Management:
New Directions to
Improved Patient Care**

1.5hrs (0.15 CEU) ACPE # 022-999-11-024-L04-P

*This CE activity will be Knowledge Based.

Sponsors: This activity is jointly sponsored by Vemco MedEd and University of Kentucky College of Pharmacy and is supported by an educational grant from PriCara, Division of Ortho-McNeil-Janssen Pharmaceuticals, Inc., administered by Ortho-McNeil Janssen Scientific Affairs, LLC

Speakers: Robert L. Barkin, MBA, Pharm.D., Professor, Rush Medical College, Rush University Medical Center, Chicago.

Gregory Holmquist, Pharm.D., CPE, Pain and Palliative Care Specialist, Everett, Washington.

Charles E. Argoff, M.D., Professor of Neurology, Albany Medical College, Albany, New York.

Learning Objectives:

- Optimize pain management decisions based on pain pathophysiology.
- Select an appropriate analgesic and dosing regimen to effectively treat moderate to severe pain.

- Incorporate evidence-based strategies to minimize adverse events and toxicity associated with analgesics.
- Utilize pain assessment tools and communication techniques to accurately evaluate pain.

10:00 – 11:30 a.m. **New Drugs 2011 –
Spring Update**

1.5hrs (0.15 CEU) ACPE # 0004-9999-11-2014-01-P

*This CE activity will be Knowledge Based.

Speaker: Tom Frank, Pharm.D., BCPS, Director of Research and Education, AHEC Northeast – UAMS

Learning Objectives:

- Assess new trends in drug development.
- Understand indications, pharmacology, adverse effects and dosing of the products discussed.
- Determine the role these products will play in the participant's practice.
- Evaluate the economic implications of these choices.
- Examine products in the short-term pipeline that will be important to the practice of the participants.

11:30 a.m. – 1:00 p.m. **Lunch on your own**

Thursday, June 9, 2011

CONTINUING EDUCATION SESSION

Presiding: Larry McGinnis, Consultant Academy President and Mark Shinabery, Compounding Academy President

1:00 – 2:30 p.m.

**From Anemia to Zaps:
Escalating our
Knowledge of the SSRIs
to a Higher Level**

1.5hrs (0.15 CEU) ACPE # 0004-9999-11-202401-P

*This CE activity will be Application Based.

Speaker: Lisa Hutchison, Pharm.D., MPH, BCPS,
Associate Professor, UAMS College of Pharmacy
Supported by APA Academy of Consultant Pharmacists

Learning Objectives:

- Summarize labeled and off-label uses of SSRIs in the elderly.
- Apply current guidelines and evidence for SSRI use in the elderly.
- Identify adverse effects from SSRIs common in older adults.
- Assess a geriatric patient for therapeutic and adverse effects from SSRIs.
- Design a therapeutic plan to minimize risk of serotonin syndrome and serotonin discontinuation syndrome.

2:30 – 4:00 p.m.

**Clinical Application of
BHRT for Pharmacists**

1.5hrs (0.15 CEU) ACPE # 0004-9999-11-203401-P

*This CE activity will be Knowledge Based.

Speaker: Jim Paoletti, RPh, FAARM
Supported by APA Academy of Compounding Pharmacists

Learning Objectives:

- Discuss methods and clinical considerations in obtaining physiologic hormone restoration and balance.
- Discuss basic dosing principles and guidelines for hormone replacement.
- Discuss patient symptom assessment.
- Explain testing of patient hormone levels.
- Discuss switching approaches in hormone therapy to achieve improved outcomes.
- Discuss considerations for topical hormone administration.

3:00 – 4:00 p.m.

**Past Presidents'
Council/ Arkansas
Pharmacy Foundation
Board Meeting**

4:00 – 4:30 p.m.

Past Presidents' Reception



Exhibitors' Opening Reception

3:30 – 5:30 p.m.

Popcorn, Peanuts, Cracker Jacks and Hors D'Oeuvres

Play Ball!

6:10 – 10:00 p.m.

Arkansas Travelers vs. Northwest Arkansas Naturals at Dickey-Stephens Park
(Transportation to be provided)

Honoring APA's Wholesale Business Partners:
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Co-Sponsor: UAMS College of Pharmacy Alumni Association

About the Travelers: The name "Arkansas Travelers" is derived from the famous minstrel known as the Arkansas Traveler, who roamed the Ozark Mountains selling his wares and singing songs. The team was originally known as the Little Rock Travelers, and was renamed for the entire state in 1957, becoming the first professional sports franchise named for a state. The "Travelers" nickname is one of the oldest in professional sports. In fact, the Travelers have never taken a different nickname, making it the second-longest running continuous nickname in Minor League Baseball. The Travelers moved to beautiful Dickey-Stephens Park in 2007.



Friday, June 10, 2011

- 7:30 – 11:00 a.m. Registration
- 7:30 – 8:00 a.m. Continental Breakfast
- 8:45 a.m. – 1:00 p.m. Spouse Event: Tour of Marlsgate Plantation in Scott, Arkansas
(Details on page 7.)

CONTINUING EDUCATION SESSION

Presiding: Mike Smets, APA President

- 8:00 – 9:30 a.m. Clinical Case Scenarios:
Practical Approaches to Patient Care

1.5hrs (0.15 CEU) ACPE # 0004-9999-11-204-L01-P
*This CE activity will be Application Based.

Speakers: Victoria Seaton, Pharm.D.; Bhavika Patel, Pharm.D.; Sarah Griffin, Pharm.D.; Nicholas Tinsley, M.S., Pharm.D.; Micha Lands, Pharm.D.; Dennis Dubovetsky, Pharm.D.; Central Arkansas VA Healthcare System, PGY1 Residents

Learning Objectives:

- Describe medication management strategies in difficult or controversial patient care situations.
- Discuss clinical scenarios that pharmacists may encounter in the provision of direct patient care.
- Provide clinical information that can be applied to your work setting.
- Identify clinical practice options for patient care in various health-system settings.

KEYNOTE

Joel Weintraub, Physiologist and Humorist

- 9:30 – 11:00 a.m. Preventing Medical Errors and Improving Patient Safety

1.5hr (0.15 CEU) ACPE # 0004-9999-11-211-L05-P
*This CE activity will be Knowledge Based.

Speaker: Joel Weintraub, B.S., M.Ed., physiologist and humorist

Learning Objectives:

- Identify methods to errors and increasing patient safety.
- Describe methods of decreasing your stress and increasing your focus.
- Identify the physiology of decision making in the brain.
- Discuss the advantages of using humor to communicate with patients.

Every day is a new opportunity. You can build on yesterday's success or put its failures behind and start over again. That's the way life is, with a new game every day, and that's the way baseball is.

—former Cleveland Indians pitcher Bob Feller

- 11:00 a.m. – 12:00 p.m. Arkansas Pharmacy Law Update

1.0hr (0.10 CEU) ACPE # 0004-9999-11-205-L03-P
*This CE activity will be Knowledge Based.

Speaker: John Kirtley, Pharm.D., Assistant Director, Arkansas State Board of Pharmacy

Learning Objectives:

- Analyze recent changes in Pharmacy regulations in Arkansas.
- Discuss the reasoning behind changes to pharmacy regulations.
- Demonstrate understanding of recent pharmacy regulatory changes and challenges.

- 12:00 – 2:00 p.m. Exhibitors' Luncheon

CONTINUING EDUCATION SESSION

Presiding: Rayanne Story, AAHP President

- 2:00 – 3:30 p.m. Alternate Insulin Delivery Systems and their Insulins

1.5 hrs (0.15 CEU) ACPE # 0004-9999-11-206-L01-P
*This CE activity will be Knowledge Based.

Speaker: Peggy Schultz, RN, MSN, CDE, BC-ADM

Learning Objectives:

- Identify types of alternate insulin delivery devices and systems.
- Associate alternate delivery devices and systems with the available insulins.

- Describe the most commonly used types of insulins and their physiologic action.
- Demonstrate correct dispensing calculations for the alternate insulin delivery devices and systems.

- 3:30 – 5:00 p.m. Chronic Obstructive Pulmonary Disease: Guideline Based Management

1.5 hrs (0.15 CEU) ACPE # 0004-9999-11-207-L01-P
*This CE activity will be Knowledge Based.

Speaker: Angela Gordon, Pharm.D., BCPS, Clinical Pharmacist, Central Arkansas Veterans Healthcare System

Learning Objectives:

- Explain the natural history and pathophysiology of COPD, including its differentiation from other common respiratory disorders.
- Identify the place in therapy for each of the medications indicated for COPD according to the global guidelines for COPD management and be able to apply these guidelines to both stable COPD and COPD exacerbation cases.
- Recommend COPD risk factor reduction strategies to patients.
- Describe the role that oxygen therapy plays in the management of COPD.

- 5:30 – 6:00 p.m. Presidents' Reception

Evening With the Presidents

6:00 p.m.

Special Entertainment by Alyse Eady

Miss Arkansas and Miss America First Runner-Up

Dinner, Dessert Extravaganza and President's Farewell Reception

Alyse Eady is the 22-year-old daughter of Lewis and Lady Eady of Fort Smith. Alyse is a 2010 cum laude graduate of Ouachita Baptist University with degrees in Mass Communications and Speech Communication. Her platform is Developing Leaders through the Boys and Girls Clubs of America.

Saturday, June 11, 2011

7:30 a.m. – 1:30 p.m. Registration

7:30 – 8:00 a.m. Continental Breakfast

**SECOND GENERAL AND
CONTINUING EDUCATION SESSION**

Presiding: Gary Bass, APA President

8:00 – 9:30 a.m. **So I Bought A
Pharmacy...**

1.5 hrs (0.15 CEU) ACPE # 0004-9999-11-208-104-P

*This CE activity will be Knowledge Based.

Speaker: Justin Boyd, Pharm.D., MBA, Owner,
Coleman Pharmacy

Learning Objectives:

- Discuss the decision process to employ or be employed.
- Weigh pros and cons to different approaches to purchasing a pharmacy.
- Describe the negotiation experiences for pharmacy purchase.
- Detail lessons learned in transition from employee to employer.

AWARDS

9:30 – 10:00 a.m. **Awards Ceremony**

- Pharmacist of the Year
- Young Pharmacist of the Year
- Bowl of Hygieia Award
- Innovative Pharmacy Practice Award

10:00 – 11:30 a.m. **OTC Self Care
Championship:
Harding vs. UAMS**

1.5hrs (0.15 CEU) ACPE # 0004-9999-11-209-101-P

*This CE activity will be Application Based.

Speaker: Jan Hastings, Pharm.D., Associate
Professor, UAMS College of Pharmacy

Learning Objectives:

- Identify and explain aspects of the effective and safe practice of pharmacy self-care treatments by means of an interactive learning experience.
- Analyze the usage and effectiveness of over the counter medications.
- Classify different groups of over the counter medications based on drug treatment class.
- Apply effective counseling techniques for use with self-care patients.

AP-PAC Luncheon

Speakers: Senator Percy Malone (D - Arkadelphia), Representative Linda Tyler (D - Conway)

12:30 – 2:00 p.m.

Supported by: AP-PAC (Tickets @ \$60 each.)

AP-PAC Board of Directors meeting directly following the luncheon.

11:30 a.m. – 12:30 p.m. **Pharmacist Collaborative
Practice Credentialing CE**
and 2:00 – 4:00 p.m. **Retooling for the Future:
Pharmacist Credentialing
for Disease State
Management**

3hrs (0.3 CEU) ACPE # 0004-0000-11-210-104-P

*This CE activity will be Application Based.

Presented by: Jeremy Thomas, Pharm.D. – Assistant
Professor, UAMS College of Pharmacy

Upon completion of this lecture, the participant
should be able to:

- List the essential components of a "written protocol" as described in the ASBP Disease State Management Regulation 9.
- Describe appropriate documentation procedures for Disease State Management as outlined by the ASBP.
- Develop a written protocol for a specific Disease State Management scenario.
- Create a documentation record of a patient encounter.
- Assess a given set of patient data and choose an appropriate course of action according to a written protocol.

4:00 – 5:00 p.m. **Advanced Pharmacy
Practice Experience
(APPE) Preceptor
Update and Training**

1hr (0.1 CEU) ACPE # 0004-9999-11-212-104-P

Presented by: Schwanda Flowers, Pharm.D. –
Assistant Dean of Experiential Education, UAMS Col-
lege of Pharmacy

Learning Objectives:

- Describe new procedures for evaluation of APPE students.
- Demonstrate how to assess individual students using APPE grading rubric.
- Compare and contrast student performances for various requirements of APPEs.

5:00 p.m. **129th Annual
Convention Adjourns**

Spouse Event

Friday, June 10

Tour of Marlsgate Plantation: Join pharmacist spouses as we take a trip back in time to historic Marlsgate Plantation, a Greek Revival Mansion built in the 1800s overlooking Bearskin Lake that reflects the gracious way of life enjoyed and maintained on the old plantations of the Arkansas Delta. Home to the David Garner family, Marlsgate Plantation is listed on the National Register of Historic Places. The mansion was constructed with 32 rooms and includes 11,000 square feet of living space. It is currently used for luncheons, formal dinners, receptions and weddings. The bus leaves from the Peabody at 9:00 a.m.; tour is at 10 a.m. and lunch will be served at 11:30 a.m. The bus will return following lunch.



*It ain't over
until it's over.*

*— former New York Yankee
catcher Yogi Berra*

Hotel Information

Peabody Hotel

Three Statehouse Plaza, Little Rock, AR 72201

Phone: 1-501-906-4000 or 1-800-741-5072

Website: www.peabodylittlerock.com

To receive convention group rate, please mention APA.

Cut off date is May 9, 2011



The University of Kentucky is accredited by the Accreditation Council for Pharmacy Education as a provider of Continuing Pharmacy Education for the following program: ACPE # 022-999-11-024-L04-P

The University of Arkansas for Medical Sciences (UAMS) College of Pharmacy is accredited by the Accreditation Council for Pharmacy Education as a provider of Continuing Pharmacy Education for the following programs: ACPE #s:

0004-9999-11-201-L01-P	0004-9999-11-211-L05-P	0004-9999-11-208-L04-P
0004-9999-11-202-L01-P	0004-9999-11-205-L03-P	0004-9999-11-209-L01-P
0004-9999-11-203-L01-P	0004-9999-11-206-L01-P	0004-0000-11-210-L04-P
0004-9999-11-204-L01-P	0004-9999-11-207-L01-P	0004-9999-11-212-L04-P

Continuing Education Credit:

These programs are open to all pharmacists. The program provides pharmacist participant up to 20 contact hour(s) (2.0 CEUs). To receive credit, the pharmacist must follow the attendance procedure of the program and complete all program evaluation forms. If the attendance documentation is illegible then no statement of credit can be issued. Credit will be given based on percent of attendance — down to the 1.0 contact hour(s). Statements of credit will be mailed by the UAMS COP CE office within 60 days of completion of the program.

Grievance Procedure:

This procedure represents a formal mechanism whereby any pharmacist may obtain a review of a complaint of unfair treatment. A pharmacist must file the grievance in writing within 30 days of the incident/activity generating the complaint. The complaint will be reviewed by the Director of Continuing Education and every effort will be made to resolve the problem of the complainant. If the complaint is not satisfactorily resolved, the complaint will be forwarded to the UAMS COP Dean for disposition.



Do you have a
safety net?

Pharmacy Quality[™] COMMITMENT

All quality assurance (QA) and safe medication practices programs are NOT the same!
Make sure your safety net comes with the strength and protection of a Patient Safety Organization!

Protect your patients **AND** your pharmacy!

Pharmacies that license the Pharmacy Quality Improvement[™] and report patient safety events are now provided federal legal protection to information that is reported through the Alliance for Patient Medication Safety (APMS) – A Patient Safety Organization. To learn about PSOs visit www.pso.ahrq.gov/psos/fastfacts.htm.

Pharmacy Quality Commitment[™] (PQC)

- Helps you improve efficiency and increase patient safety
- Easy-to-use tools to collect and analyze medication near miss and error data
- Meets demands for safe medication practices and QA programs
- Protects reported data through APMS, a federally listed PSO

Call toll free (866) 365-7472 or visit
www.pqc.net for more information.

PQC is brought to you by your state pharmacy association.

2010 Recipients of the "Bowl of Hygeia" Award

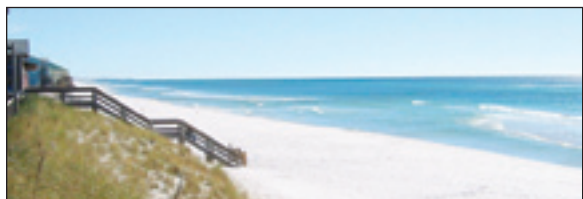


The Bowl of Hygeia award program was originally developed by the A. H. Robins Company to recognize pharmacists across the nation for outstanding service to their communities. Selected through their respective professional pharmacy associations, each of these dedicated individuals has made uniquely personal contributions to a strong, healthy community which richly deserves both congratulations and our thanks for their high example. Over the years a number of companies have

supported the continuation of this worthwhile program, including Wyeth and Pfizer. The American Pharmacists Association Foundation, the National Alliance of State Pharmacy Associations and the state pharmacy associations have assumed responsibility from Pfizer for continuing this prestigious recognition program. The Bowl of Hygeia is on display in the APhA Awards Gallery located in Washington, DC.



2011 Calendar of Events



JUNE

June 8-11

APA 129th Annual Convention

Peabody Hotel
Little Rock, AR

June 25 & 26

Harding University College of Pharmacy CE

Immunization and CPR Training
Farrar Center for Health Sciences, Room 217-218
Searcy, AR

AUGUST

August 5-7

UAMS Continuing Pharmacy Education Program

Destin, FL

OCTOBER

October 6-7

Arkansas Association of Health-System Pharmacists

Fall Seminar
Holiday Inn
Little Rock, AR

October 8-12

National Community Pharmacists Association

Annual Convention
Opryland Resort
Nashville, TN

DECEMBER

December 4-8

American Society of Health-System Pharmacists

Midyear Clinical Meeting
New Orleans, LA

APA District Meetings Schedule

District 5 - Tuesday, September 6, 7:00 pm

Pine Bluff Country Club
Pine Bluff, AR
President: Dean Watts
870-946-1334

District 5 - Wednesday, September 7, 7:00 pm

Monticello Country Club
Monticello, AR
President: Dean Watts
870-946-1334

District 8 - Thursday, September 8, 7:00 pm

Cone Chapel Harding College
Searcy, AR
President: Christy Campbell
501-268-1900

District 3 - Monday, September 12, 7:00 pm

Sodies at Flippin Pharmacy
Flippin, AR
President: Danny Ponder
870-425-5145

District 3 - Tuesday, September 13, 7:00 pm

DoubleTree Hotel
Bentonville, AR
President: Danny Ponder
870-425-5145

District 7 - Wednesday, September 14, 7:00 pm

Hardscrabble Country Club
For Smith, AR
President: John Vinson
479-424-3175

District 6 - Thursday, September 15, 7:00 pm

Arkansas Tech University
(East Banquet Room)
Russellville, AR
President: Stephen Carroll
870-403-9400

District 4 - Tuesday, September 20, 7:00 pm

Park Place Restaurant
Texarkana, AR
President: Lisa Liles
870-216-2611

District 6 - Wednesday, September 21, 7:00 pm

Clarion Resort on the Lake
Hot Springs, AR
President: Stephen Carroll
870-403-9400

District 4 - Thursday, September 22, 7:00 pm

Camden Country Club
Camden, AR
President: Lisa Liles
870-216-2611

District 2 - Tuesday, September 27, 7:00 pm

St. Bernard's Auditorium
Jonesboro, AR
President: Brent Panneck
870-237-8215

District 2 - Wednesday, September 28, 7:00 pm

Forrest City Country Club
Forrest City, AR
President: Brent Panneck
870-237-8215

District 1 - Thursday, September 29, 7:00 pm

Chenal Country Club
Little Rock, AR
President: Eddie Glover
501-327-1222

Introducing...

John Kirtley Named Next Executive Director of AR State Board of Pharmacy



John Kirtley, Pharm.D.
AR State Board of Pharmacy

John Kirtley, Pharm.D., was named by the Arkansas State Board of Pharmacy as the new Executive Director, replacing Charles Campbell, who is retiring this summer. Currently, John is the Assistant Director of the Arkansas State Board of Pharmacy where he is the media and legislative contact for the Board of Pharmacy and represents the Board on issues related to the profession of pharmacy. John serves as the President of MALTAGON,

a Professional Association of Boards of Pharmacy across the Southeast U.S. He is the chair of the APA Policy Committee on Professional Affairs & Ethical Practices and is a member

of the Accreditation Council on Pharmaceutical Education's Continuing Pharmacy Education Commission.

Kirtley completed his pre-pharmacy coursework at Ouachita Baptist University in Arkadelphia and graduated from the University of Arkansas for Medical Sciences College of Pharmacy with his Doctor of Pharmacy. He has taken an active role in the mentoring of future pharmacists through his work as a community pharmacist, Community Clinical Clerkship preceptor for senior students, and as an Assistant Professor at UAMS College of Pharmacy. John and his wife Melanie, who is also a pharmacist, live in Little Rock with their daughter Allison Grace, their son Jack Henderson and their Labradors Daisy and Shiloh.



APA Adds New Staff Members Denne and Young



Eileen Denne
APA Director of Communications

The Arkansas Pharmacists Association added two new staff members in January and March.

Eileen Denne became Director of Communications on Jan. 18. She previously worked for Connect Arkansas, a non-profit whose mission is to encourage internet adoption throughout the state. Before that she managed communications and marketing for a variety of trade associations in the Washington,

D.C.-area, including the Airports Council International-North America; the American Society of Travel Agents; and the American Association of Port Authorities. Denne holds a B.S. degree from Miami University of Ohio.



Kala Young
Administrative Assistant

Kala Young joined APA March 15 as Administrative Assistant. Previously, she worked as a material handler at Dassault Falcon Jet in Little Rock. She is studying science at Pulaski Tech and pursuing a nursing degree. Young graduated from Carlisle High School.



In Memorium

Vail Paschal - age 76, died April 23. Paschal was a graduate of Little Rock public schools, the University of Arkansas at Little Rock and the University of Arkansas School of Pharmacy and a recipient of the Merck award. He owned and operated Vail's Pharmacy in southwest Little Rock and later managed stores for Osco Drug Company. He attended UCLA where he received training in nuclear pharmacy. For several years he worked as a nuclear pharmacist at Syncor International in Little Rock.

Roger Williams - age 83, passed away April 17. Williams was a graduate of Kensett High School and the College of the Ozarks Pharmacy School. He owned and operated Stotts Drug Store in Searcy for more than 50 years. He served as president of the Arkansas Pharmacists Association in 1968 and was serving on the Political Action Committee. He was named Pharmacist of the Year in 1997.

Thomas Willingham - age 70, passed away April 19. Willingham earned his Ph.D. at the University of Mississippi and worked as a pharmacist, owning and operating Thrifty Drug in Mariana prior to selling to Fred's.

Duane Wyatt - age 81, passed away April 17. He was born in Rosie, AR. He served in the U.S. Navy from 1951-1954. He was a pharmacist in Paragould for 50 years, and was former owner of Walden Drug and Gibson Pharmacy. Mr. Wyatt was instrumental in establishing the Mission Outreach Charitable Health Clinic where he worked as a pharmacist.



Arkansas Association of Health System Pharmacists Board



- President. Rayanne Story, Pharm.D., Searcy
- President-Elect. Jody Smotherman, Pharm.D., Batesville
- Past President. Jason Derden, Pharm.D., Benton
- Executive Director. Susan Newton, Pharm.D., Russellville
- Treasurer. Sharon Vire, Pharm.D., Jacksonville
- Secretary. Marsha Crader, Pharm.D., Jonesboro
- Member-at-Large. Maggie Miller, Pharm.D., Batesville
- Member-at-Large. Jennifer Priest, Pharm.D., Little Rock
- Member at Large. Andrea Donaldson, Pharm.D., Little Rock

Arkansas State Board of Pharmacy



- President. Benji Post, P.D., Pine Bluff
- Vice President. Marilyn Sitzes, P.D., Hope
- Secretary. Ronnie Norris, P.D., McGehee
- Member. Steve Bryant, P.D., Batesville
- Member. Justin Boyd, Pharm.D., Fort Smith
- Member. Lenora Newsome, P.D., Smackover
- Sr. Citizen Public Member. Ross Holiman, Little Rock
- Public Member. Larry Ross, Sherwood

It's your business. Only better.

Cardinal Health's services and offerings help retail independent pharmacies:

- Improve reimbursements
- Streamline operations
- Create alternate revenue streams
- Increase market share



Understanding your business, and how every inch of your pharmacy makes money is essential during this critical time in our industry.

Cardinal Health partners with retail independents to help them be more successful now and into the future.

Become a partner today.

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